

Culture, literacy and health

Issues for Innu people

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In August, Renee Bowers of the Sheshatshiu Innu Health Commission facilitated a discussion about health, literacy, culture and language with a group of educators and health care workers.

Sheshatshiu is one of only two Innu settlements in Labrador—the other is Utshimassit (Davis Inlet). Here are some notes from that discussion.

What does being healthy or being well mean to people in Sheshatshiu?

The definition of health varies among different generations in Sheshatshiu. The elders would consider being healthy as someone who is active and free and living in a traditional manner. This perception of *health* is not passed on to many in the younger generation and they cannot experience the elders' version of being healthy. This is in part due to changes in the community.

The rapid amount of change in the community has brought with it the effect of negative coping practices—in part because of the way the change has occurred. Many people feel, not as if their culture is changing with the times, but rather as if the changes are being made to their culture and way of life. In essence, the feeling of loss of control has resulted in the problems we see today from a mental health and physical health perspective.

What does being literate mean to people in Sheshatshiu?

As a group, we understand the definition of being literate as the ability to read and write. Innu Eimun is an oral language and has been passed on through speaking. It was only when the priests started to work with the Innu that the concept of writing the language began to develop. As the Innu strive for self-governance and autonomy over their services, the issue of literacy in English becomes quite evident as a barrier and is having more of an impact on the community.

What are the barriers to health/wellness as defined by the people of Sheshatshiu?

The experience of being healthy from an Innu perspective is not being passed on to the youth in the community. Today's generation is the first generation to be settled in one community and they have to figure out what it means to be healthy in this new environment. Is being sober enough to be healthy? Is a clean house a good sign of hygiene? There are questions about whether newer medicines and treatments are better and if they really improve the health of the community.

There are questions regarding mental health — whether the connection between the ill physical health the Innu are now experiencing is directly related to the emotional stress experienced by people in the community. For example, we need to examine the relationship between wellness and the importance of close relationships in the community. Before settlement, social relationships were very important and were maintained, in part, by the living arrangements such as tents. When the community was settled in the 1950s, the social structure changed as people were separated into their respective houses and there are questions about the effect of this move on the social health of people living in the community.

Another barrier is the appearance of new diseases brought about by settlement and changes in the culture. Many traditional medicines are not able to cope with newer diseases such as diabetes and alcoholism. The tools were not in their kit as they didn't need these tools when they lived in the country. In essence, the Innu have had to develop a new tool kit to deal with these diseases.

There continues to be a struggle with non-Innu health providers not understanding Innu culture and health practices and this can act as a barrier to health for Innu people. The lack of understanding and lack of acceptance of the Innu has resulted in

the Innu feeling some shame about their culture. A cycle has developed in which the value judgments among the non-Innu produce a sense of shame that perpetuates a lack of confidence. Traditional knowledge is seen not to be respected and, as a result, is not passed on to the younger generation. This in turn affects the ability of the Innu to pass on the feeling of being healthy.

The health care delivery system does not always reflect what is important to the Innu because of the lack of understanding of Innu values. For example, the health system and non-aboriginal culture places great importance on independence and self-efficacy. Yet, in Innu culture it is the interdependence and close relationships, not only with other Innu but also the environment, that is seen to maintain a sense of balance and create a healthy person.



What is the role of the health care system in eliminating these barriers?

The health care system is responsible for bridging the non-traditional with the traditional Innu culture. It is also responsible for trying to get health information to people in Sheshatshiu in a manner that is respectful and effective.

In Sheshatshiu, we also have to rethink what is included in the health system. The health system is not only comprised of professionals working in the community. It is also the Innu persons who may not have a great deal of professional knowledge but have a local knowledge that must be respected as well. Health care also has to be considered as more than

curing the sick. People sometimes perceive the health system as giving medicines which are supposed to cure; they are not seeing the whole picture of preventing illness or the need to take medicines on a regular basis to keep well instead of providing a cure.

The link between literacy and health care is vital on many levels and can lead to an improvement or deterioration in service. The first level is improving health literacy to ensure clients understand the information provided to them. The second is improving the literacy of staff to ensure that they can orally explain health to clients. And, of course, the third is linked to the education system—the more literate and educated people from the community become, the better able they are to become health practitioners and deliver health services in the community.

What is the role of the education system in eliminating these barriers?

While one would view the education system as a strong advocate for eliminating many of the barriers associated with literacy, the education system has been in part responsible for creating barriers. This is mostly due to the fact that there is very little recognition or valuing of the Innu language. There are classes taught in Innu Eimun until grade four, and then classes are in English only. Otherwise, Innu Eimun is predominantly learned at home through dialogue with other family

members, friends, etc. This produces a sense of disconnection between Innu culture and the education system. Also, some Innu children are taught in schools outside of Sheshatshiu as it is perceived that children attain a better education if they are taught in English only. The parents that are sending their children to school elsewhere are usually more affluent, and the children tend to lose their Innu language as they do not speak Innu Eimun with their friends at school. Therefore, the division among people who can speak Innu Eimun and those who cannot represents a social class division to some degree.

To read the entire discussion, go to www.literacyjournal.ca and click on Special Projects. ■