

Adaptations of a Community-Based NunatuKavut Inuit Mental Wellness Research Initiative during the COVID-19 Pandemic

Jennifer M. Shea, PhD¹, ORCID: 0000-0002-3791-6819

Aimee Battcock, PhD², ORCID: 0000-0003-2064-0382

Christie Stillwell, PhD³, ORCID: 0000-0001-8234-3522

Mandy Poole Ford²,

Melita Paul²,

Glenn Walsh, RP, CCC⁴,

Garreth Kippenhuck, PhD (c)¹,

Bryn Wood, MSc²

¹ Memorial University;

² NunatuKavut Community Council

³ Dalhousie University

⁴ Kullik Psychotherapy

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ABSTRACT

Background: Western and biomedically oriented mental health interventions are often influenced by colonial frameworks, emphasizing individual deficits and overlooking cultural and community dimensions of care.

Objective: The NunatuKavut Community Council (NCC) partnered with community-based researchers to strengthen culturally grounded wellness services and programs.

Method: The NunatuKavut Mental Wellness Initiative, a Community-Based Participatory Research (CBPR) project, explored and promoted mental wellness among NunatuKavut Inuit. Guided by Inuit storytelling, we conducted sharing circles and, during the COVID-19 pandemic, an electronic survey.

Lessons learned: A grassroots CBPR approach allowed adaptation during COVID-19 while maintaining storytelling as a central method. Three key lessons emerged: 1) flexibility is essential in response to unexpected events, 2) adapting methods ensures engagement without overburdening participants, and 3) meaningful community involvement is central to program relevance.

Conclusions: Despite challenges, Inuit-led, culturally grounded methods supported wellness promotion. These reflections may serve as a guide for others in adapting CBPR projects to changing contexts.

KEYWORDS: Canada, Inuit, Indigenous health, Community-based Participatory Research, mental wellness

Introduction

Mental wellness is a leading healthcare priority for the NunatuKavut Community Council (NCC), which represents approximately 6,000 Inuit across 23 communities in southern and central Labrador in northeastern Canada. Throughout NunatuKavut, community members and local leaders have consistently called for improved mental health services and a more holistic approach to promoting mental wellness. Our community-led project, *Understanding People, Place, & Culture: A Nunatukavut Inuit Mental Wellness Initiative*, responds to these needs by actively engaging community members in designing and implementing a culturally grounded mental wellness framework. Under the leadership of the NCC and a project Steering Committee, this initiative aimed to strengthen local resources, pilot programs, evaluate all aspects of the research (collection, outreach and development), and develop a culturally appropriate framework for program delivery. This article presents the development, adaptation, and implementation of a Community-Based Participatory Research (CBPR) project created by and for NunatuKavut Inuit. We particularly focus on how our collective work responded to the COVID-19 pandemic and the lessons learned from navigating unexpected challenges while maintaining community engagement and culturally meaningful methods.

Positionality Statement: The authorship team for this article includes both academic researchers (Shea, Stilwell & Kippenhuck) and NunatuKavut Inuit community members, including staff from the NCC and the Community Champions (Battcock, Poole, Paul, Walsh, Kippenhuck, & Wood). The 'we' used throughout this manuscript refers to this collective team. A Steering Committee governed the project, comprised primarily of NCC Inuit staff and community members. The academic partners' role was to provide methodological support and

facilitate processes, while all decision-making power resided with the NCC and the community collective. This structure was intentional to ensure the research was led by and for NunatuKavut Inuit

Background

NunatuKavut means "our ancient land" in Inuttitut. The NCC represents Inuit rights and interests across southern and central Labrador and is governed by an elected council, tasked with ensuring recognition and respect for Inuit land, ice, and water rights (Figure 1). To deliver its services, the NCC operates via a Leadership Secretariat model and five departments: Research, Education, and Culture; Environment and Natural Resources; Employment and Skills Development; Finance and Administration; and Health and Community Services.

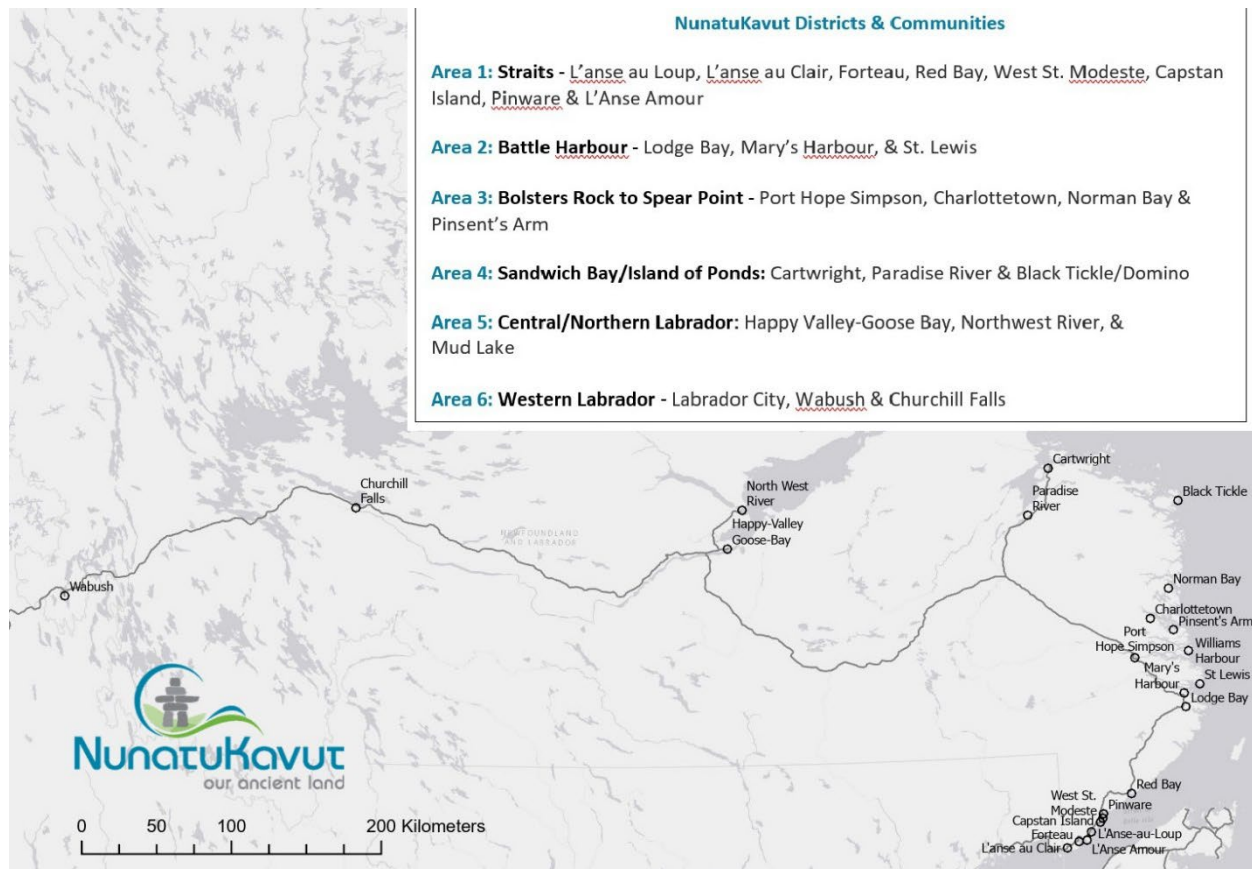


Figure 1: Map of NunatuKavut communities in Labrador, Canada. Areas outlining community names are in the insert.

Mental wellness is a critical concern for Canadians and Indigenous Peoples¹⁻². Indigenous peoples are constitutionally defined to include the First Nations (Indian), Inuit and Métis³. In the 2021 Census, 1,807,250 individuals self-identified as having an Indigenous identity, accounting for approximately 5% of the Canadian population. Indigenous communities in Canada continue to experience the adverse and painful effects of colonization, including an increased rate of mental health issues⁴⁻⁷. Despite these impacts being recognized as social determinants, mental wellness care often remains rooted in colonial frameworks⁸⁻¹¹. Programs developed for Indigenous communities benefit from a collective rather than individual approach¹²⁻¹⁵, aligning with NCC's Inuit values of caring, community, fairness, and respect. Inuit knowledge systems emphasize interconnectivity and relationships with principles such as "living a good life"^(16,p. 95), "being respectful to all people"^(17,p. 97), and "working together for the common good"^(17,p. 99).

Rationale and Significance of the Project in the NunatuKavut Context

In 2012, the NCC conducted a comprehensive Community Health Needs Assessment (CHNA), identifying strong connections to land and cultural activities such as berry picking, fishing, and snowmobiling as central to wellness¹⁸. The CHNA highlighted the importance of community strengths, including informal support (e.g., peer support) and education on mental wellness.

Labrador-Grenfell Health was the regional health authority that served all communities in NunatuKavut, Labrador. In recent years, Labrador-Grenfell Health has added new programs to address mental health needs in the area, including walk-in counselling and online and telephone-based therapies. On the south coast of Labrador, one counsellor covers Lodge Bay to Cartwright

(the position vacant at the time of writing), and nurses in the six community clinics provide ambulatory mental health care and referrals. It is essential to note that nurse availability in community clinics in this area has been strained, resulting in repeated clinic closures and redirects to nearby communities for service due to a shortage of available staff¹⁹. In 2023, Newfoundland and Labrador (NL) established NL Health Services, consolidating the previous four provincial Regional Health Authorities into a single central health authority²⁰. As of April 1, 2023, NCC communities are served by the Labrador-Grenfell zone of NL Health Services²⁰. The amalgamation of health authorities under the auspices of cost savings potentially exacerbates understaffing and compromises consideration for culturally sensitive care.

Despite ongoing pressures of cultural assimilation, Indigenous Peoples demonstrate resilience in the face of adversity²¹⁻²². Reconnection to land and culture is foundational for restoring community health and supporting wellness.

Project Foundations: Bridge Grant and Proposal Development

The proposal development for this work began with conversations with community members with lived mental health experience, who became Community Champions. These Community Champions, drawn from NunatuKavut communities, served as liaisons, shared information, and provided insight into community needs. A 2018 Canadian Institutes of Health Research (CIHR) Bridge Grant (\$100,000 for one year) supported the completion of preliminary sharing circles in three communities (Mary's Harbour, Labrador City-Wabush, and Port Hope Simpson) to refine the proposal. Through the preliminary analysis of these discussions, four crucial themes emerged:

1. Increase mental wellness awareness and education (participants reported suffering in silence and -barriers to care);
2. Recognize the importance of land and culture for wellness (connection to environment enhances wellbeing);
3. Address gaps in local resources (including community infrastructure);
4. Emphasize community-based approaches that engage all members.

Our participatory research project was developed by and for communities, applying trauma-informed principles to navigate colonial history and cultural identities. Before the main project, a culturally relevant logo was designed with community input via voting through NCC's Facebook Page (over 300 votes), which became the visual identity of the initiative (Figure 2).



Figure 2. Project logo chosen by NunatuKavut community members

Getting Started

Guided by the preliminary findings gathered during the Bridge Grant discussed above, Community Champions convened in December 2018 to refine our NunatuKavut Wellness

Initiative (NWI) proposal, which was successfully funded through CIHR in 2019 for a five-year project. The NWI project focused on community strengths and highlighted the resilience inherent within NunatuKavut Inuit communities¹⁸.

The project began with a meeting in September 2019 between Community Champions and the research team. The meeting was used to plan logistics for research activities and gather further input from community members regarding participation in and roles for the NWI project. From the outset of the initial development of this work in 2017, Community Champions have been instrumental in the feasibility and successful engagement of NunatuKavut Inuit. As NunatuKavut's geography is vast and its members are dispersed among the 23 communities, it was essential to have individuals bring the work forward in a meaningful way. Community Champions were engaged throughout the project, including proposal refinement, recruitment, facilitation of sharing circles, dissemination of findings (e.g., at community meetings), and knowledge translation activities. Champions communicated regularly via email, Facebook, and quarterly meetings, and participated in annual retreats with the academic research team.

Objectives

The overarching goal of the NWI project was to strengthen mental wellness resources and develop a culturally appropriate framework for program delivery. Specific objectives included:

1. Explore the lived experience of mental wellness of NunatuKavut Inuit (years 1-3)
2. Develop a conceptual framework for mental wellness rooted in community knowledge (years 2-4)
3. Build capacity and pilot community-led mental wellness programs (years 3-5)

Methods

Ethics Statement

This study received ethical approval from both the NunatuKavut Community Council Research Review Advisory Committee and the Newfoundland and Labrador Health Research Ethics Board (Reference # 2018.234) for all phases of the project, including the initial Bridge Grant and the subsequent main study.

Partnership Structure

The research partnership was built on a CBPR model centred on a group of 12 NunatuKavut Inuit Community Champions from across the territory. These Champions were not just participants but core partners involved in all stages of the research: initial design, grant writing, data collection, analysis, interpretation, and dissemination. The project was governed by a Steering Committee comprised of NCC Inuit staff from the Health and Research departments, Community Champions, and academic partners. This committee meets monthly and collectively makes all significant decisions regarding the project's direction. The research team itself was a mix of NCC Inuit staff and academic researchers, with the former leading community engagement and the latter providing methodological support.

Participants

Participants included NunatuKavut Inuit community members who engaged in sharing circles and surveys. Community Champions—local Inuit with lived experience or strong community involvement—acted as liaisons and assisted the facilitator. A total of 108 individuals participated in sharing circles (n=17 circles), and 612 members completed the electronic survey. All participants were aged 18 and older and were primarily female. Recruitment was open and each session and the subsequent survey were advertised through social media, posters, coordinator and champions.

Data Collection

The research design centred on storytelling, a traditional Inuit method of knowledge transfer, allowing community members to share their experiences and expertise. The project aimed to collect four main types of data:

1) Storytelling – Storytelling is central to Inuit life and knowledge, persevering despite colonization^{17,23}. Stories were gathered through sharing circles and community-identified modes (e.g., song), often in land-based settings, such as a Labrador tentⁱ. These conversations informed culturally-specific, locally relevant and community-led programming and interventions.

Conversations were facilitated by an Inuit member of the research team (Paul), assisted by other team members or Community Champions, using open-ended questions (e.g., "How would you describe mental wellness?", "What would strengthen wellness in your community?").

2) Photovoice - Photovoice provides a deeper understanding of individuals' lived wellness experiences within a community context. Photovoice is a participatory research method that enables people to "identify, represent, and enhance their community" through photography²⁴. Using photography, participants can raise their own questions, direct discussions, and share their experiences and opinions on wellness both personally and in their community²⁵⁻²⁶. Photovoice has been observed to increase participation and collaboration and contribute to a decolonizing approach in research with Indigenous communities²⁷.

3) Theatre - The Labrador Creative Arts Festival Canada's longest-running children's creative arts festival²⁸, and was leveraged to highlight community experiences through performance.

NCC communities, especially Black Tickle and Cartwright, are recognized for innovative and

ⁱ A Labrador tent refers to a white canvas tent that has a hole in the top or side for a stove pipe. Inside is cozy with tree boughs placed on the floor of the tent. These tents are an important part of NunatuKavut Inuit culture.

often comedic performances, which illuminate both challenges and satisfactions of life locally.

Theatre offers a destigmatizing and engaging method for sharing ideas and lived experiences.

4) Community Survey - In response to pandemic restrictions, we developed an electronic survey distributed remotely to NCC members via email and social media channels in Spring 2022. The survey was designed based on initial themes from the sharing circles and asked questions on demographics, social determinants of health, mental health status, informal/formal supports, and ranking of potential supports.

Analysis

Sharing circle transcripts were audio-recorded, transcribed verbatim, and stored on secure NCC servers. Dedoose qualitative software was used for coding and thematic analysis, with joint coding sessions between the community (Battcock & Poole) and academic team members (Shea & Stilwell). The research team developed initial codes and then validated and refined them through member-checking with Community Champions and the Steering Committee during retreats. Survey questions focused on demographics, social determinants of health, self-reported mental health status, and preferred supports. The survey was conducted online via Qualtrics, accessible remotely, with paper copies available upon request. Descriptive statistics were used to analyze the quantitative data. Survey data were also presented and validated at retreats.

Lessons Learned: Pivoting Methods in Response to the Pandemic

In February 2020, sharing circles were held in five communities. In March 2020, a global pandemic was declared due to the COVID-19 outbreak. The NCC paused all in-person events, engagements, and travel to communities as provincial public health protections were

implemented. Face-to-face interactions and gatherings were not possible, and priorities shifted to supporting communities and members during this challenging time.

Throughout 2020 and 2021, attempts to implement photovoice projects were met with low uptake. Originally designed to span four seasons to illustrate Inuit wellness relationships, participation proved challenging due to time commitment and logistical barriers. A recruitment video led by a Community Champion and a photovoice project completed by our project coordinator (Paul) was presented to NunatuKavut members through social media, in a session at the NCC Annual General Assembly, and in two online information sessions to attract participants. To facilitate recruitment, we suggested that individuals sign up for any season instead of the entire year. We re-advertised with no interest in participation. Upon later reflection, proposing a photovoice project that captures the four seasons was an onerous task for individuals. Even if one season was taken on, the three-month commitment was too much.

Similarly, theatre-based data collection was untenable during pandemic restrictions. The substantial time required for writing, rehearsing, and performing a production was also tabled in favour of alternate approaches.

Results from Sharing Circles

We resumed sharing circles in 2022. The impact of COVID-19 on people's mental health was evident. Globally, there was an increase in discussions of mental health during this time, with an increase in speaking out regarding the impact of COVID-19, including isolation, job loss, financial impacts, and disruptions to ways of life (e.g., community, food sharing, and social engagement)²⁹⁻³¹. Locally, we have also noticed this shift in NunatuKavut communities. As a team, we decided to move beyond the photovoice and theatre projects and instead focus our efforts on the sharing circles. Given the changing landscape, we felt it was necessary to revisit

the communities where sharing circles were completed before the pandemic to better understand the effects of the COVID-19 pandemic on the wellness experiences of NunatuKavut Inuit.

Analysis of the circles confirmed and deepened the themes from our Bridge Grant work: 1) a strong desire to break the silence around mental health and increase community education, 2) the fundamental role of land and culture as a healing tool, 3) the critical lack of accessible and consistent mental health resources, and 4) the centrality of community as both a support and a source of strength. Participants specifically identified potential programming, including intergenerational activities, land-based skills workshops, mental health first aid training, and grief support groups.

Results from the Community Survey

The electronic survey, completed by 612 NCC members (73% female and 23% male), provided vital quantitative support for the qualitative findings. Participants were asked to self-rate their mental health results were: 5.7% excellent, 26.6 % very good, 34.3% good, 26.6% fair, and 6.8% poor. Participants identified barriers to accessing mental health supports including services not available in their community, financial and transportation, long wait lists, and stigma. It highlighted the prevalence of specific mental health concerns across the territory and allowed members to rank proposed programs. Land-based programming and peer support groups were consistently ranked as the highest priorities, providing a clear mandate for the next phase of our project, which focuses on program piloting.

Reflecting on Pivoting

With the expansion of sharing circles (n=17), the addition of the survey, and considering the grant timeline and pandemic-related barriers to implementation, we decided that the best approach for this project was to focus on the rich information already gathered. Although

photovoice and theatre components are effective tools for exploring individuals' lived experiences and knowledge, we were unable to utilize these methods due to project timing and uptake.

It was apparent that individuals were mentally exhausted following the pandemic. We have been cautious of this and have adapted data analysis and knowledge outputs to eliminate the burden on community members. Recently, one project team member took the lead in developing a book on black-out poetry, a form of poetry created by redacting words from an existing text to reveal a new poem. The compiled poems come from transcripts of completed sharing circles. Using already collected data innovatively allows us to share it with the community in an impactful way that leverages information already shared. We recently completed the first version of a black-out poetry book, *Finding the Words*. We intend to sell the book, and all profits will be put into a reserve housed in NCC's Health and Community Services Department to fund mental health counselling sessions for NCC members. We also intended to utilize the book in the school system under the NCC's Inuit Education Program. The NCC works closely with the schools within its territory to incorporate Inuit traditional knowledge and skills into the curriculum.

Conclusion

The research project aimed first to explore the lived experiences of NunatuKavut Inuit with mental wellness and, second, to develop pilot programming. Like many other research projects, ours was significantly impacted by the COVID-19 pandemic. Despite adaptations to our data collection plan, storytelling remained central through the expanded sharing circles. When restrictions were lifted, two face-to-face retreats (2021 and 2023) brought together the research team and Community Champions to collectively plan next steps. These retreats enabled us to gather and plan our way forward as a collective. From our perspective as a research team, the

community members are the experts on what is needed to improve mental wellness for NunatuKavut Inuit.

Community members, as experts in their lived experiences, guided the use of the sharing circle and survey data to inform program design, planning and implementation. Proposed programming included intergenerational activities, land-based programming, mental health workshops/training, and grief and coping support groups. While these initiatives represent early steps, we envision this work as a long-term commitment, as systemic change requires sustained effort.

Three key lessons emerged from our experience. First, flexibility is essential to respond to unexpected events, such as a global pandemic. Second, adaptation of methods—including shifting from planned photovoice and theatre components to surveys and sharing circles—ensures continued engagement without overburdening participants. Third, meaningful community involvement is central; recognizing community members as experts ensures programs reflect local needs, culture, and knowledge.

Community-based research demands flexibility, recognition of time and capacity, and adaptation to evolving contexts. As was noted by Tuhiwai Smith, "...in many projects the process is far more important than the outcome. Processes are expected to be respectful, to enable people, to heal and to educate"^{32p128}. Our experiences demonstrate that a community-led, adaptive approach can support Inuit mental wellness while honouring cultural knowledge, resilience, and collective engagement.

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The NunatuKavut Inuit Wellness Steering Committee includes co-authors: Jennifer Shea, Aimee Battcock, Christie Stillwell, Mandy Poole, Melita Paul, Glenn Walsh and Garreth Kippenhuck.

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Ethics Statement

The study was approved by the NunatuKavut Community Council Research Review Advisory Committee and the Newfoundland and Labrador Health Research Ethics Board (Reference # 2018.234).

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