

**Executive Summary of the Nunavut Suicide Prevention
Strategy Evaluation Report**

Executive Summary

In October 2010, the Nunavut Suicide Prevention Strategy was formally released by the Partner organizations who had participated in its development over a two-year period. These partners included the Government of Nunavut, Nunavut Tunngavik Inc., the RCMP (V Division) and Ikitiahimalugu Inuuhiik Katimajit/the Embrace Life Council. The Strategy reflects the results of a collaborative effort by the Partners to identify appropriate approaches to suicide prevention in Nunavut based on evidence-based research, practices from other jurisdictions and the outcomes of community consultations in Nunavut, and discussions with key stakeholders involved in suicide prevention.

The Nunavut Suicide Prevention Strategy articulates a collective vision for suicide prevention in Nunavut that is shared and endorsed by the Partners:

“The Partners envision a Nunavut in which suicide is de-normalized, where the rate of suicide is the same as the rate for Canada as a whole – or lower. This will be a Nunavut in which children and youth grow up in a safer and more nurturing environment, and in which people are able to live healthy, productive lives because they have the skills needed to overcome challenges, make positive choices, and enter into constructive relationships.”¹

Subsequent to release of the Nunavut Suicide Prevention Strategy, the Partners developed an Action Plan in fulfilment of a key commitment made in the Strategy. The Action Plan, spanning a two and a half year time frame, from September 2011 to March 2014, encompasses a suite of measures aimed at suicide prevention, intervention and postvention (i.e. support following attempted suicide or death by suicide). It describes the specific actions that will be taken by the Partners in relation to eight broad areas of commitment, as well associated responsibilities, timeframes and expected outcomes².

The eight areas of commitment set out in the Action Plan are:

1. Focused and active approach to suicide prevention
2. Strengthened continuum of mental health services
3. Youth skills
4. Suicide prevention training
5. Research on suicide and suicide prevention
6. Communication and information sharing
7. Healthy development in early childhood
8. Community development activities

Partners in the Strategy have recognized that taking action in each of the eight areas of commitment will not produce immediate declines in suicides or suicidal behaviour in Nunavut, but that if implemented promptly and effectively, desired effects will be seen over time.

¹ *The Nunavut Suicide Prevention Strategy*, October 2010, p.2.

² *Nunavut Suicide Prevention Strategy Action Plan: September 1, 2011 to March 31, 2014.*

Evaluation of the Strategy and Action Plan

Through the Strategy and Action Plan, the Partners committed to ensuring accountability for their commitments by developing strong evaluation tools and processes. In 2014, the Implementation Committee, which oversees Strategy and Action Plan implementation and includes representatives from all Partners, initiated a formal evaluation of the Strategy. This report establishes detailed findings and conclusions from the evaluation. The evaluation, which took place between October 2014 and March 2015 adopts standard approaches to evaluation, including those which have been used in other, similar evaluations conducted in Nunavut³. The main goals of the evaluation are to:

1. Assess progress made towards the overall vision of the Strategy;
2. Assess progress made towards meeting the objectives and carrying out the actions and tasks identified in the Action Plan 2011-2014;
3. Assess Strategy and Action Plan implementation as a collaborative process (i.e. how the Partners are working together); and
4. To learn from the successes of the Strategy and Action Plan, and identify areas that can be improved (i.e. recommendations).

The NSPS as a Partnership-Based Initiative

The NSPS represents a unique, collaborative effort among the Partners to address one of the most pressing societal issues in Nunavut today. Although the partnership-based approach, which brings together government, Inuit organizations, communities and other key stakeholders did face challenges in the first year of implementation, some of the successes to date in Strategy and Action Plan implementation are attributed to the collaborative process, and the shared commitment of the Partners to achieving the Strategy's overall vision. The Partners recognize that, despite constraints in their respective organizational mandates, as well as a general lack of dedicated resources for suicide prevention in Nunavut, progress has been made in many areas of the Action Plan, and this has come about as a result of the partnership-based approach and perseverance in the face of many challenges and differences with respect to expectations regarding process and outcomes.

The evaluation concludes that the "right" organizations are involved in steering Strategy and Action Plan implementation, but recommends that the Partners find ways to enhance the engagement of other stakeholder organizations at territorial, regional and community levels in the future.

Relevance of the Strategy

Overall, the Nunavut Suicide Prevention Strategy and Action Plan are seen as a highly relevant and important initiative in Nunavut today. The goals and objectives of the Strategy are strongly associated with the eight commitments that are set out in the Action Plan and specific objectives, such as providing suicide prevention training to Nunavummiut and increasing youth skills. Partners are of the view that the Strategy aligns with their organizational mandates and priorities.

³ The Evaluation Framework includes an evaluation "logic model", performance indicators and an "evaluation matrix" with key evaluation questions, indicators and data sources. Evaluation methodologies utilized included review of primary and secondary documentation and data, key informant interviews, stakeholder interviews, a survey of Partners regarding their collaboration in the NSPS, and a survey of community based, front line workers and stakeholders.

The goals and objectives of the Strategy and Action Plan are less apparent to stakeholders and community based front-line workers. There is a sense of ambivalence regarding the efficacy of the Strategy and Action Plan to increase capacity within Nunavut communities to address the issue of suicide and to prevent suicidal behaviours. However, as a result of the Strategy, and specific initiatives such as public awareness campaigns on suicide and mental health issues and suicide prevention training, there is both increased openness to discuss suicide within Nunavut society, and increased capacity of individual Nunavummiut to provide assistance to those who are at risk.

Outcomes: Action Plan Commitments and Objectives

With respect to Action Plan commitments and objectives, findings from the evaluation lead to the conclusion that progress is being made towards achieving most identified objectives. This is especially so in relation to Commitment #1 (focused approach to suicide prevention), Commitment #2 (strengthened continuum of mental health services), Commitment #3 (better equipping youth with skills to cope with adverse life events and negative emotions), and Commitment #4 (delivering suicide intervention training on a consistent and comprehensive basis).

While the Partners were able to advance some research on suicide in Nunavut, including on risk factors such as sexual abuse, other research related objectives established under Commitment #5 (supporting research on suicide in Nunavut), including establishment of a Nunavut suicide research agenda and holding a research symposium are not being met.

Good progress is being made in relation to Commitment #6 (communication and information sharing) as a result of public awareness and communications campaigns that are aimed at explaining the risk factors for suicidal behaviour, destigmatizing mental health and providing information on public resources and supports that are available to Nunavummiut, including youth.

Findings from the evaluation in relation to Commitment #7 (healthy early childhood development) are twofold. First, the evaluation concluded that some objectives are not being met, in part because these were not set within realistic timeframes and with cognizance of policy processes in Nunavut (e.g. the time and resources it takes to develop Nunavut-specific curriculum). Second, the evaluation was unable to assess progress due in relation to some objectives because, in some cases, these are broadly stated within the Action Plan (e.g. foster healthy development of children) and baseline data is lacking.

Finally, in relation to Commitment #8 (support for communities to engage in community development activities) the evaluation concluded that some of the objectives in this area are being met, and progress is being made in relation to others. There are a wide range of initiatives being pursued at the community level that are directly or indirectly linked with suicide prevention and the Nunavut Suicide Prevention Strategy and Action Plan.

The tables below summarize the findings from the evaluation in relation to each of the eight Action Plan commitments and their associated objectives.

Commitment 1 - Focused and Active Approach to Suicide Prevention

#	Objective	Evaluation Findings
1.1	The Department of Health and Social Services (HSS) will identify and	Progress is being made

	mobilize initiatives across the GN.	
1.2	Strengthen interagency collaboration at the community level.	Progress is being made
1.3	Improve interdepartmental cooperation to identify and support children demonstrating indicators of behaviours that put them at risk, especially poor school attendance.	Progress is being made
1.4	Improve communications with HSS frontline workers to address the needs of children demonstrating indicators of behaviours that put them at risk.	Progress is being made

Commitment 2 - Strengthened Continuum of Mental Health Services

#	Objective	Evaluation Findings
2.1	Review Nunavut Addictions and Mental Health Framework and review Mental Health Act.	Progress is being made
2.2	Improve capital infrastructure to provide mental health services in Nunavut.	Progress is being made
2.3	Strengthen mental health professional capacity in Nunavut.	Progress is being made
2.4	Improve the ability to respond quickly and effectively to suicidal behaviour by children.	Progress is being made
2.5	Strengthen Mental Health and Wellness services available in Iqaluit which serves as a catchment area for other communities.	Progress is being made
2.6	Provide culturally appropriate and age appropriate grief counselling.	Objective is not being met
2.7	Provide greater support to community based counselling groups in the communities.	Evaluation unable to assess progress
2.8	Provide greater support to communities and front-line workers in the event of a 'cluster' of suicides (several suicides in a short period of time) in a community or region.	Objective is not being met
2.9	Increase support of the Nunavut Kamatsiaqtut Help Line.	Objective is being met
2.10	Increase support for Embrace Life Council.	Objective is being met

Commitment 3 -Youth Skills

#	Objective	Evaluation Findings
3.1	Increase knowledge base, solutions, and strategies on the impact that adverse life events have on youth resilience and coping in relation to increased risk for suicide.	Progress is being made

3.2	Implement specific programming targeting the general youth population, including youth at risk of suicide, such as Mental Health First Aid (MHFA) for youth, provide strengths based programs for youth regularly in each community.	Progress is being made
3.3	Ongoing collaboration to address suicide prevention within school curriculum.	Objective is not being met
3.4	Ensure National Aboriginal Youth Suicide Prevention Program funds are spent to implement commitments of the NSPS Action Plan.	Objective is being met
3.5	Provide training opportunities for youth in areas of coping skills, anger management, healthy living, suicide prevention and general health and wellness.	Progress is being made
3.6	Increase and support access to healthy activities for youth at community level.	Progress is being made
3.7	Develop and support peer counselling initiatives in communities.	Objective is not being met
3.8	Support development of youth networks on community and territorial level.	Objective is not being met
3.9	Create public campaigns targeting youth on issues identified as risk factor behaviours that have an impact on suicide rate.	Objective is being met

Commitment 4 - Suicide Prevention Training

#	Objective	Evaluation Findings
4.1	Deliver Uqaqatigiiluk! Talk About it! a 'Nunavut specific' version of Applied Suicide Intervention Skills Training, to all interested Nunavummiut.	Progress is being made
4.2	Develop and support professional and community-based volunteer Uqaqatigiiluk!/Talk about it! Trainers.	Progress is being made
4.3	Increase high school support for youth at risk of suicide.	Progress is being made

Commitment 5 - Research on Suicide and Suicide Prevention

#	Objective	Evaluation Findings
5.1	Build a research partnership and develop ongoing research agenda on issues of relevance to suicide prevention, intervention and	Progress is being made

	postvention in Nunavut.	
5.2	Research and identify interventions aimed at breaking the transmission of physical and sexual abuse (child/adult) as abuse in these forms are significant risk factors for suicide in later life.	Objective is not being met
5.3	Researching risk factors specific to suicidal behaviour in Nunavut for which information is currently lacking such as the implications of high rates of early teen cannabis use or child sexual abuse.	Objective is not being met
5.4	Collecting and releasing data on suicide attempts.	Progress is being made
5.5	Developing a formal monitoring and evaluation framework for implementation of all aspects of the Nunavut Suicide Prevention Strategy.	Progress is being made

Commitment 6 - Communication and Information Sharing

#	Objective	Evaluation Findings
6.1	Develop and implement an overall communications plan for the Nunavut Suicide Prevention Strategy.	Objective is not being met
6.2	Prepare and disseminate resources which: <ul style="list-style-type: none"> • explain the risk factors for suicidal behaviour; • seek to destigmatize mental health and help-seeking for mental distress; and • provide information on how to obtain help for persons in mental distress 	Objective is being met

Commitment 7 - Healthy Development in Early Childhood

#	Objective	Evaluation Findings
7.1	Ongoing collaboration with other HSS initiatives including but not limited to the Public Health Strategy and Maternal and Newborn Health Strategy as well as initiatives in development such as the Family Violence Prevention Strategy.	Evaluation unable to assess progress
7.2	Foster healthy development of children in Nunavut.	Evaluation unable to assess progress
7.3	Pilot a social and emotional learning curriculum in elementary schools throughout Nunavut.	Progress is being made
7.4	Address the expertise and funding required to allow the operation and establishment of well-designed and implemented Early Childhood Development (ECD) programs in all interested Nunavut Communities.	Progress is being made
7.5	Develop curriculum for positive and protective foundations in daycares in Nunavut.	Objective is not being met

Commitment 8 - Community Development Activities

#	Objective	Evaluation Findings
8.1	Support communities to better access flexible funding opportunities.	Progress is being made
8.2	Present Nunavut Suicide Prevention Strategy implementation to community groups and organizations. Partnering where relevant to implement specific aspects of the strategy.	Progress is being made
8.3	Identify specific community stakeholder contacts to assist with implementation of the Nunavut Suicide Prevention Strategy.	Progress is being made

Efficiency and Resources

The evaluation assessed the extent to which resources are being allocated to Strategy and Action Plan implementation and whether they are being used efficiently. It is recognized that in Nunavut, funding for suicide prevention activities is both *direct* (e.g. funding for suicide prevention public awareness campaigns, Kamatsiaqtut Help Line) as well as *indirect* (e.g. funding for mental health services, early childhood development and community wellness initiatives).

The evaluation concluded that overall, the resourcing of the Strategy and AP has not been effective. Some resources that were planned to be committed to the Strategy and Action Plan were not used effectively to further the overall goals and implementation of the Strategy, although these resources were able to contribute to specific suicide prevention initiatives.

A key theme that emerged through the evaluation process was that through the Action Plan the Partners committed to actions and anticipated outcomes that were not realistically achievable in light of available resources (including human, financial and organizational) and within the limited two and a half year timeframe of the AP.

The evaluation reports on funds that were allocated to the Embrace Life Council as a primary institutional mechanism for implementation of Action Plan tasks, and how these funds were utilized for specific suicide prevention initiatives. It also reports on the funding commitments of Partner organizations for Action Plan items.

The evaluation includes a recommendation that the Partners establish a clear, transparent and shared mechanism through which financial resources that are being directed to suicide prevention can be better tracked, monitored and reported on in the future.

Integration

The Nunavut Suicide Prevention Strategy and Action Plan is one of many broad strategic social development initiatives being pursued within the territory by the GN and through partnerships between the GN, Inuit and other organizations and stakeholders. The evaluation found little evidence of strategic or formally organized integration or coordination of the Nunavut Suicide Prevention Strategy with some of these other strategies and initiatives. However, because the number of people who are working on social policy initiatives in Nunavut is fairly limited, and in many cases officials representing Partner organizations “wear many hats” and participate in multiple initiatives, stakeholder committees and

collaborative forums, there is in fact a level of integration that occurs at an informal level. This is a positive outcome, but it should be recognized that there is no system-based or formally mandated process for integration of the NSPS with other strategies and initiatives of the GN, Inuit organizations or other stakeholders.

Sustainability

A common theme that emerged from the evaluation is that the Nunavut Suicide Prevention Strategy is very strongly supported in its current form. Partners and other stakeholders do not see a need to make modifications to the Strategy itself. They recognize that realizing the Strategy's vision, particularly with respect to reduced rates of suicides in Nunavut is a long term goal requiring sustained efforts of the Partners and others. The evaluation recommends continuation of the Strategy without amendment at this time. It also recommends that the vision, goals and approaches to suicide prevention set out in the Strategy, including partnership- and evidence-based approaches inform the development of a 2nd Action Plan.

The evaluation also recommends that the 2nd Action Plan build on the successes and accomplishments of the first Action Plan, and provide for the continuation of many initiatives that were successfully implemented or piloted between 2011 and 2014 (e.g. suicide prevention training for Nunavummiut, RespectEd, and the "Ten Steps" program). It concludes that in establishing a new Action Plan the Partners should set realistic and achievable objectives and actions to achieve these, and ensure that resources are available to support implementation.

The evaluation notes that there are some necessary conditions which need to be addressed to ensure the Strategy can be sustained in the near term, and in the medium to longer term. These conditions include continued commitment to a partnership-based and collaborative process, and finding better ways of communicating with communities and Nunavummiut around not just the Strategy but about suicide prevention and suicide in general.

Conclusion

Despite initial challenges faced in the implementation of the NSPS, the evaluation has concluded that, overall, there is progress being made towards the fulfilment of commitments made by the Partners through the Action Plan, and achieving specific objectives and some anticipated outcomes of the Strategy. There have been a number of positive achievements as well as opportunities for learning about what can be improved for the future both with respect to the Nunavut Suicide Prevention Strategy as a partnership-based initiative, as well as specific suicide prevention interventions in Nunavut.

Regrettably, and despite the fact progress is being made in specific areas of the Strategy and Action Plan, the overall vision for the Strategy is not being achieved at this time. There is no evidence that rates of suicide in Nunavut are decreasing, and for the most part, Partners and stakeholders do not believe that other components of the vision (i.e. de-normalizing suicide, providing safe and nurturing environments for children) are being met – though there is a sense that slowly, some progress is being made.

The evaluation report puts forward 42 recommendations pertaining to a wide range of issues. By working in a true collaboration, the Partners should review these recommendations together and

determine what priorities they will pursue in the next phase of Nunavut Suicide Prevention Strategy implementation, and through a subsequent Action Plan.