

An Ethnographic Model of Stress and Stress Management in two Canadian Inuit Communities

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Abstract: As part of the first stage of a Community-Based Participatory Research Project with two communities in the Canadian Arctic—Kangiqsujuaq, Nunavik, and Ulukhaktok, Northwest Territories—we conducted 57 interviews eliciting residents’ perceptions of pressing issues facing their communities, problems affecting health and well-being, and how researchers or other organized groups could help alleviate those problems. A recurrent theme that emerged during these interviews was having “no one to talk to.” Here, we focus on understanding why communication was a central theme, using a grounded-theory approach to develop a model of Inuit stress management. Inuit in both Kangiqsujuaq and Ulukhaktok codify stress as *isumaaluttuq*, or excess worry, which often manifests physically and leads to social withdrawal. Because stress is believed to accumulate in the body, managing it involves decisions about whether to “Get It Out” or “Keep It In.” Keep It In is a potentially dangerous strategy because, if the problem does not resolve itself, accumulated stress may have harmful consequences. Inuit viewed talking to others as the most effective means to Get It Out, but respondents also identified numerous barriers to doing so. One important reason for this is that stress is transferable: talking to others about a problem potentially increases the burden of stress on them. Consequently, Inuit may choose to Keep It In to avoid the potential negative consequences (for others or for oneself) of sharing bad thoughts. Based on this preliminary model, we consider questions for further inquiry and implications for community-based mental health programming in Inuit communities.

Introduction

During a Sunday morning service in the spring of 2018, the Inuk pastor at the Full Gospel evangelical church in Kangiqsujuaq (Nunavik) took a moment in her sermon to express her frustration about how *qallunaat*—white people—so frequently bring the issue of suicide to the forefront of discussions about Inuit youth. Although suicide rates among Inuit are indeed extremely high (Kral, 2019), she felt strongly that this discourse portrayed the situation of Inuit youth negatively, exacerbating the problem.

The pastor's fear of focusing on suicide undoubtedly relates to the fact that Inuit perceive suicides to be contagious, occurring in clusters, often involving the same methods, and often among those who have had previous experience of suicide (Kral, 2019). But, perhaps even more importantly, as Flora (2019) notes, for Inuit, words have power. Talking, or even thinking, about suicide is therefore potentially dangerous and may cause harm to others. Instead of focusing on suicide, the pastor encouraged people instead to embrace life, to highlight the positive things, so that young Inuit would not view their existence through this powerful—and widespread—narrative of insurmountable social problems and cultural loss.

At the time, we were conducting pilot interviews in Kangiqsujuaq (where ER has worked since 2011) and Ulukhaktok (on Victoria Island, where PC has worked since 1992) focused on identifying questions and Inuit priorities for community-based participatory research. We incorporated exploratory questions about problems relating to health and wellbeing into our interviews because previously, community members in Ulukhaktok suggested that health was an important but overlooked research topic and in Kangiqsujuaq, past interviews identified substance use, and underlying issues relating to well-being, as the major concerns of community members (Ready & Collings, 2018, 2021).

Here, we draw on the 57 semi-structured interviews we conducted in 2018 to develop a cultural model of Inuit stress management. Although suicide and substance issues are important problems in Inuit settlements—and recognized as such by our speakers—our interest in this paper is in more broadly understanding the cultural construction and experience of stress. Episodes such as the one described sparked our interest in the cultural logics that inform how Inuit think about and cope with stress, in both positive and negative ways.

Our starting point for this paper is the observation that communication played a prominent role in conversations about health and mental health in the interviews we described above. Here, we ask: why is communication so important in Inuit narratives about stress, as both a problem and a solution? Our exploration of this question through Key Word in Context Analysis led us to develop a cultural model of stress management. As we detail below, there has been substantial prior work on how Inuit conceptualize and express emotional distress, but little attention to the institutions and practices that support effective stress management.

Our exploration of Inuit ideas and norms surrounding effective stress management is informed by Nichter (1981), who argues that psychosocial distress manifests in different ways, both across and within cultures. Psychological and social problems have culturally-distinct somatic expressions (idioms), but equally important are the shared understandings of the meaning of particular signs and symptoms—at least between patients and care providers (professional or otherwise)—that allow the latter to respond appropriately to reported ailments. Our approach highlights why communication is important in Inuit stress management, but also why it needs to be approached cautiously and is sometimes avoided.

Inuit understandings of stress

Considerable recent research has focused on understandings of well-being among Arctic Indigenous peoples (Kral & Idlout, 2009, 2012; Kral et al., 2011; Wexler, 2009; Rasmus, 2014; Rasmus et al., 2019). Kirmayer, Fletcher, and Watt (2009), for instance, argue that Inuit concepts of health and wellbeing are “ecocentric,” incorporating relationships with both other people and the physical environment. These approaches draw on a much longer history of research on Inuit emotion and concepts of cognition, personhood, and identity.

Briggs (1970) reminds us that Inuit “words for various feelings cannot in every case be tidily subsumed under our words” (p. 311). The word *isumaaluttuq*, which appears frequently in both Inuit narratives and everyday discourse, is no different. While the term literally means “thinking too much,” *isumaaluttuq* is, for Inuit, a psychological state with well-understood symptoms that imperfectly overlap with the concepts of anxiety and depression in Western psychology. The experience of *isumaaluttuq*

varies in duration and severity (Kirmayer et al., 2009). It might afflict, for example, a hunter worried about where to find caribou, a young student experiencing anxiety about what she should do post-graduation, a young man reliving a traumatic experience in his head, a victim of a crime anxiously awaiting a court date, or an elder afraid for her personal safety when her children are drinking. The well-being of friends and relatives who are potentially at risk, including people admitted to hospital, those using substances, or travelers out on the land, for example, are also a frequent source of concern.

The wordbase *isuma* is often translated as “thinking” or “mind.” The most common metaphor used by speakers is of the brain or head as a container for thoughts: Qumaq (1991) uses *isumaqauti* or “thought container” to define the head (see also Ootoova et al., 2000; Dorais, 2020). Thoughts, then, can accumulate in the head, leading to a variety of symptoms. Kirmayer, Fletcher, Corin and Boothroyd (1994) reported that *isumaaluttuq* can be recognized “ ‘just by looking at the person’ or, most commonly, from the content of the person’s speech and the fact that they keep returning to certain concerns” (p. 32). Difficulty sleeping might also be a sign of excessive worry, since the person’s mind literally cannot rest. Kirmayer et al. (1994) also identify heaviness or “heavy thoughts” with *isumaaluttuq*. Briggs (1970) describes how the father of the Utku family she lived with would sometimes enter a state of torpor, lying on the bed for days, hardly speaking a word. She considered lethargy, fatigue, and withdrawal as symptoms sometimes associated with feeling *hujuujaq*, which she defined as primarily as “unhappiness due to the absence of other people” (Briggs, 1970, p. 352), although it also encompassed a variety of sources, including disappointment and awkward social situations.

Others have also discussed loneliness (Kirmayer et al., 1994; Flora, 2019) as both a cause and a symptom of social withdrawal among Inuit. Vallee (1966), who worked in the Hudson Bay region, found that people used the terms *qissaatuq* or *quvarpuq* to refer to persons in a melancholy state, which he described as “compulsive passivity, withdrawal, and depression.” He found that this state was often associated with low self-esteem and feelings of unworthiness, “often associated with real happenings in the community, such as epidemics, deaths of relatives, and other misfortunes for which the person perhaps blames himself” (Vallee, 1966, p. 66).

The concept *isumaaluttuq* exists alongside a spectrum of related and interconnected concepts. The closely related concept *isumajaartuq*, for example, refers to wild, angry, or agitated patterns of thought, which can sometimes be translated as stress. The problem of having “too much mind” is quite different from other kinds of mental or emotional disorders, such as being harsh with others, irrational, or (childishly) angry, which reflect having too little *isuma* (Briggs, 1970; Kirmayer et al., 1994; Kirmayer et al., 2009). Briggs (1970) describes the Utku conception of *ihumaquqtuq*, which seems to reflect some combination of *isumaaluttuq* and *isumajaartuq* from the Ungava dialect, as follows:

If a person is angry (*ningaq*) for long periods of time, if he nurses *ningaq* thoughts “every day, every day,” as Allaq said, this is owing to his having too much *ihuma*. My impression is that this latter type of *ningaq* is more frightening, and that it is primarily [this form of anger] that is thought to cause death [of others, due to the power of the thoughts]. (p. 333)

In summary, a half-century of ethnographic work documents how Inuit conceptualize emotions, including those concepts relating to anxiety and depression. However, despite the historical attention to concepts and expressions of psychological distress among Inuit, little attention has been paid to Inuit practices and norms about how to manage problems like *isumaaluttuq* (for an exception see Flora, 2019). To quote Waldram (2004) on trauma among North American Indigenous peoples more generally:

Only a few studies have considered the possibility that cultural factors, and perhaps cultural history, may explain a different type of reaction to such [traumatic] events, that some aboriginal individuals may think of apparently traumatic events in entirely different terms, or that these cultures may contain healthy, positive mechanisms for dealing with trauma. (p. 220–221)

Part of the problem is that substantial research has fixated on acculturation as the reason for health and other social problems in Inuit communities, obviating the possibility of local cultural understandings of how to deal with these issues (e.g., Vallee, 1962; Chance, 1965; Taylor & Osborne, 2010; Rasing, 2017). However, a lack of attention to cultural ideas and practices for managing psychosocial distress persists despite a recent turn towards culturally-grounded approaches in Arctic social science and health research. Much of this research seeks to understand how Inuit define well-being (e.g., Waddell, Robinson & Crawford, 2017; Gagnon Dion, Fraser & Cookie-Brown, 2021), but communities are generally taken as the unit of analysis, with an emphasis on documenting “traditional” values and practices. Less attention

has been directed toward the more specific social contexts of persons experiencing distress or how these understandings of well-being operate in practice. Other lines of research suggest that adherence to cultural values and behaviors promotes resilience to stress (e.g., Wexler, 2006; Wexler & Goodwin, 2006, Wexler et al., 2014; Kral et al., 2014; MacDonald et al., 2015), helps promote and maintain sobriety (e.g., Mohatt et al., 2004), and protects against suicidal ideation (e.g., DeCou et al., 2013) in Arctic Indigenous communities. However, despite the observed effectiveness of culturally-grounded interventions, there is limited attention to, or understanding of, why certain cultural practices (e.g., “going on the land”) are beneficial. With these issues in mind, we now turn to a model of how Inuit manage stress, demonstrating the importance of subtle but shared norms of behavior in both the expression and resolution of psychosocial distress.

Research Methods

Study participants

All adult Inuit residents of the study communities were eligible to participate in the study. We employed a purposive sampling strategy to balance the representation of men and women and young, middle-aged, and older adults in our sample. Most participants were recruited by going door-to-door. We conducted a total of 57 interviews (41 in Kangiqsujuaq and 16 in Ulukhaktok), with a total of 63 Inuit, 27 men and 36 women, ranging in age from 19 to 77. Six interviews were conducted with two participants. For example, the interviews in Ulukhaktok included one with two sisters and another with a married couple. These interviews of pairs took place when we approached someone in their home for an interview, and adults in the home expressed a desire to participate together. As this was a pilot study and we were not collecting any personal information, we accepted these requests. We also felt that observing interactions and discussions among respondents could potentially provide additional insights.

Data Collection

The narrative data are from semi-structured interviews conducted in Kangiqsujuaq and Ulukhaktok between June and August 2018 to elicit community research priorities, both generally and specifically pertaining to health and wellbeing. ER conducted interviews in Kangiqsujuaq in English or Inuktitut with

the aid of an interpreter. PC conducted all interviews in Ulukhaktok in English. Interviews generally lasted approximately 30 minutes, though several went well over an hour. Each participant received C\$50 in compensation for participating. Most interviews took place in the home of the participant, with some interviews conducted in our own residence or in a private office. Interviews were audio-recorded and subsequently transcribed by the authors. Research was supported by an EAGER grant from the National Science Foundation (#ARC1813496) and approved by the University of Florida IRB (#IRB201800564), the Aurora Research Institute, and the Kangiqsujuaq Northern Village council. All respondents provided verbal or written consent.

As noted earlier, we posed a series of questions about stress and wellbeing in response to multiple community members expressing their concerns about stress and health as significant problems. Because we lacked familiarity with these domains, our interviews were loosely organized around three questions. Our opening question was a variant of “What do you think are the biggest problems people have, or people experience, in the community?” We followed with questions about the ways people manage those problems and with questions about health. Concluding questions inquired about potential contributions research and researchers could make to solving the problems identified by the speaker. Because of the exploratory nature of this stage of the research, respondents largely directed the conversation. We were also aware (see Kral et al., 2011; Ready & Collings, 2021) that Inuit tend to see the kinds of topics we were addressing holistically, which likewise encouraged a less-structured approach. Asking a question like “what do you think the biggest problems are for people in town” encouraged a free-list like recitation and an invitation to assess statements about the problems, which range from housing, cost of living, and other issues of settlement infrastructure, to health and substance use, to concerns about youth and intergenerational relationships. It was common for speakers to nest problems within other problems, for example, or for discussions of problems to emerge in the context of other problems. While conducting the interviews, it soon became clear that the experience of stress itself, rather than the specific problems they identified, was a point of focus for many of our speakers. Our follow-up questions and probing strategies,

particularly in later interviews, therefore encouraged speakers to elaborate on what stress meant to them—some examples appear in the excerpts below.

Data Analysis

This paper addresses meanings that emerged through employment of the grounded theory toolkit (Charmaz, 2006), which encourages attention to the subtleties and underlying meanings conveyed by speakers to generate theory about cultural processes. We used MAXQDA 2020 (VERBI Software, 2019) for data analysis. Our initial analysis of the interview data consisted of an iterative process of constructing a list of analytically significant words from the entire set of narratives and examining their appearance in the interviews using a word dictionary in MAXQDA. Our initial goal in exploring the word dictionary, by tallying word frequencies and examining how words in the narratives were connected to each other, was to identify the problems Inuit identified in their responses. Many of the problems identified were somewhat predictable and included clusters of terms that we coded as Substance Use, Health Care, Cost of Living, themes that we will explore elsewhere. What stood out to us was that words we initially categorized as representing the theme “communication” occupied a prominent role in the narratives: communication as a problem for community members appeared in 30% of our interviews. It appeared that our respondents identified communication in three ways. First, communication, or a lack of it, was sometimes perceived as a community-wide problem in its own right, as in the statement: “lack of communication. We’re not communicating to one another to see what we can solve around town.” It was also directly connected to other problems, sometimes causally, as in “I can’t talk about what’s deep within my heart and it ruins my way of thinking because I keep all of this to myself where I bottle it up. I used to drink it out, because, uh, that’s all I did, to express my feelings.” Communication was also identified as a solution to those problems, and an important way for managing stress, as in “when she had problems, she would go talk to an elder, and the elder had the wisdom and the knowledge and they would know what to say to her.”

To better understand the role of communication in the speaker’s narratives, we used a variant of a Key Word in Context analysis (see Bernard & Ryan, 2010 for an overview; for examples see Nolan &

Ryan, 2000, Ryan & Weisner, 1996; Wright, 1997), focused on a set of words related to “Communication.” We performed a lexical search in MAXQDA of the verbs “Talk,” “Communicate,” “Speak,” “Say,” “Ask,” “Tell,” and “Listen,” including variants (e.g., talked, talks, talking). The search yielded 323 segments of text from 50 interviews (i.e., 88% of all the interviews we conducted contained at least one segment containing one of these variants). The segment was the sentence in which the word appeared plus any additional text necessary to provide the context of the utterance. For example, if the sentence in question was “Men don’t like to talk,” we expanded the captured text to include the previous sentence of the speaker or the question that prompted the response, in order to provide sufficient context to interpret the statement. We then printed each segment onto individual slips of paper and sorted the slips into piles, working iteratively to uncover themes expressed in the utterance.

Identification of themes within segments of text occurred at several levels. We began by examining the segments and coding for key terms that appeared in conjunction with our search terms. Segments that included *children*, *youth*, or *kids* were coded as segments about “children,” for example. As the analysis continued, it became clear that some of the segments were examples of specific concepts. A passage discussing the importance of speaking calmly and positively toward “children,” for example, was also coded as an example of a “Good Way To Talk.” We were, however, left with segments that were not (only) key terms nor (only) an example of a concept, but rather idioms, recurring turns of phrase or metaphors for discussing a problem that hinted at deeper meanings requiring further exploration. As an example, consider the statement (lightly edited for readability with speakers’ initials altered to maintain participant anonymity):

PE: It’s keeping it bottled inside and not having anyone to turn to, to talk to, and we’re afraid to talk to someone, because if we try to talk to people we’re afraid they might judge us or talk us down.

This segment, highlighted because of the search term “talk” was coded at all three levels. For example, the word *afraid* was coded as an instance of key terms related to shyness and fear. This segment is also an example of the code “Bad ways to Talk,” specifically, that judgment or talking down has negative effects.

Finally, this segment represents two idioms our speakers employed. One of these is the idiom “Bottling Up,” a reference to a strategy of managing stress. A second idiom, “having no one to talk to,” seemingly suggests that an appropriate conversation partner is unavailable, but, as we discuss below, analysis of the text segments suggests that it equally references the transferability of stress and an active process by which a person might choose to “Bottle Up.” A full table of the themes coded from the text segments is provided in Supplementary Table 1.

During this process of coding, we also conducted an iterative pile sort of the segments, sorting and resorting segments of text by hand as we tried to make sense of how words like “talk” were used by our speakers in conjunction with these key terms, examples, and (especially) idioms. Through this sorting, we realized that, collectively, the speakers were providing us with a theory of stress, and that “talking” was an important component of managing it. Emergent from the pile sorting process were broader categories about communication, including appropriate ways to communicate with others in distress, barriers to communication, and strategies people use to manage their stress. These broader themes appear in Supplemental Table 2. In the presentation of results below, we focus on how these broader themes fit together into a cultural model of stress. In illustrating the model, we draw on quotes from the full corpus of the interviews.

Finally, after the analysis and additional drafting of the paper, we returned to Kangiqsujuaq in summer 2022, to present our findings. We made a formal presentation to the community council and also consulted with some community members in one-on-one conversations. Overall, the response to the model was positive, and the council expressed interest in additional investigation of gender and age differences in the use of different strategies for dealing with stress and an assessment of the effectiveness of these different strategies. Conversations with community members overall confirmed our initial model, but their observations provided further insights into the strategy “Keep It In.”

All three authors participated in the analysis of the entire corpus of interviews. PC and OM-R conducted the initial thematic analysis, while ER and PC coded and sorted the text relating to

communication. All three authors worked together to refine the ethnographic model. ER and PC presented and discussed the findings with community members in Kangiqsujuq.

Results

In the following, we first connect our speaker's narratives to the existing literature by reviewing the concepts the speakers used to describe their responses to stressful events and the signs and symptoms of someone experiencing too much stress. We then propose a model of Inuit stress management on the basis of the interview narratives. The model includes both strategies for managing stress and guidance for appropriately seeking and providing pastoral care. We present the model in four steps: (1) we discuss preferred strategies to deal with stress by "getting it out"; (2) we present the information that our participants shared with us about the appropriate ways to Get It Out; (3) we discuss the alternative strategy to Get It Out (Keep It In); and (4) finally, we consider how this model helps make sense of how Inuit discuss substance use in their community, both as part of stress-management strategies and as a source of stress in itself.

Inuit concepts of stress and its symptoms

Speakers described stress as something that builds up and creates pressure that must be regulated, akin to steam, as the following examples indicate:

GI: Yeah. If I go without it [drum dancing] I'd be too stressed. My brain would be like steam coming out of my ears.

TU: I see some other people stressed out and like to take it out on other people, like, you know, someone to let it out on, vent out on, steam, steam out on. I've seen that happen a few times in public places.

TN (through the interpreter): She thinks about her children, that's what makes her feel so much better, and not keep it bottled up, even the smallest words, they start getting huge and huge and huge, to the point where we explode. When we keep stuff inside, we tend to stay pissed off, or depressed and angry at the same time, so it's best when you talk about it.

EM: They don't have a safe space to let the steam off them, you know, they kind of carry it day by day and one day it explodes.

Stress, therefore, must be managed so as not to "explode out" in an uncontrolled way.

Echoing the published literature, when Inuit in both Ulukhaktok and Kangiqsujuuaq use the English word “stress,” they are usually referring to *ihumaaluq* (Inuinnaqtun) or *isumaaluttuq* (Inuktitut—hereafter we employ Inuktitut terms following Schneider’s [1985] orthography), which literally means “thinking too much.” In addition to “stress,” speakers provided translations including “overthinking” and “worrying.” It is the primary way that Inuit describe their experiences of anxiety and references a process of running through the same thoughts over and over again.

We want to be clear here that Inuit in both communities were in agreement that the English word “stress” references “overthinking,” or *isumaaluttuq*, despite profound linguistic differences. In Ulukhaktok, Inuinnaqtun is severely endangered. It is not spoken to children in the home, and only a handful of residents under age 60 are conversationally proficient. In Kangiqsujuuaq, Inuktitut is the dominant language and the first language of nearly all residents. The shared understandings between these communities reflect a cognitive model that is shared despite linguistic change, especially in the Western Arctic (for other examples see Collings, Pearce & Kann, 2018; Nagy, 2006).

Participants indicated that persons suffering from *isumaaluttuq* are revealed by a physical demeanor characterized by slowness, heaviness, and lack of responsiveness to events or people around them. Our participants likewise identified stress as burdensome, which frequently appeared in the narratives with references to lightness/heaviness. An Inuktitut term associated with this demeanor often used in Kangiqsujuuaq, *uqumaittuq*, is translated by Schneider (1985) as “heavy (and sluggish).” Stress manifesting as heaviness is perhaps summed up best by the following excerpt, from an interview with a 47-year old man:

PC: Ihumaaluq? Is that how you would say that? Thinking too much?

SM: Ihumaaluq? Worry. Yeah.

PC: Worry!

SM: Worry too much, yeah.

PC: Is a little bit of worry ok?

SM: Yeah, little bit of worry is good, it keeps you going. It’s when you got nothing to worry about, I guess everything is good, but sometimes there’s always something, something to worry about.

PC: How do you know when you’ve gone from a little bit of worry to too much?

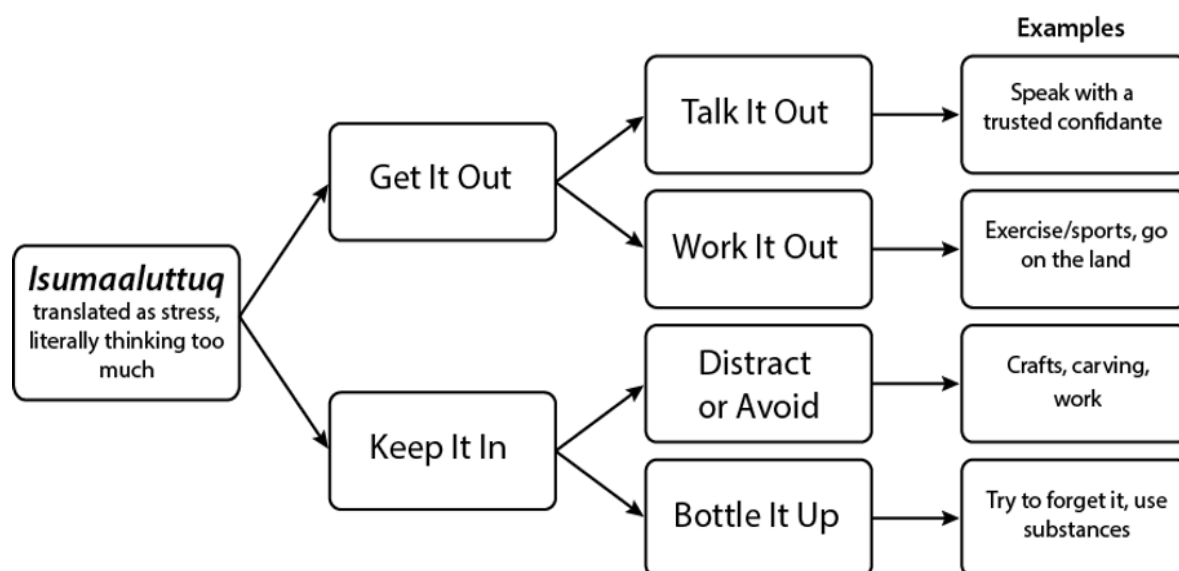
SM: When my heart feels really heavy, I could feel my body sometimes change. Or even when I get a flashback or something, you could feel it and I try to feel the feelings so I don't have to hang on to it, eh? I can try and get rid of it right away.

Descriptions of stress as a burden were common in the narratives, frequently with references to “carrying around,” akin to a physical weight. One respondent, for instance, noted that stress could be detected “by facial or body language, that’s [how] you see it, I see it a lot in people when they’re down, physically, or, expressions.” These physical signs could involve somber facial expressions, but also a general physical demeanor, illustrated in the following anecdote from an interview with two female elders in Kangiqsujaq:

MO (through the interpreter): So a few days ago, they, because they have windows here, you know, everything’s in a fast pace, but they notice who are slower and who take their time, and a few days ago there was a person sitting on the bridge with a very light jacket, and the person just sat there all day. So it’s, what they’re saying is the opposite of healthy. The person sat there all day, with everybody passing by, with all sorts of vehicles and he didn’t respond to any of them passing by.

In both Kangiqsujaq and Ulukhaktok, speakers also identified social withdrawal, described for instance as “people who never go out of their house,” or staying at home too much, as a symptom of someone being unwell.

Figure 1. Decision tree representing the proposed model of Inuit stress management strategies



Strategies for Managing Stress

As we noted previously, embedded within the narratives were clues about appropriate ways for managing stress and coping with problems, which was presented as a clear dichotomy, with one strategy that we call “Get It Out,” and the other “Keep It In” (Figure 1).

Get It Out. The prevailing opinion embedded in the narratives was that Get It Out was the preferred strategy for managing stress. Examples of Get It Out included references to “opening up” to others by talking, or to removing “bottled up” feelings. Many of our speakers provided examples of sharing problems and receive helpful advice, as illustrated in the following excerpts:

SM: In Hay River, yeah. And there was elders, too, that come from the north, from the east, there, that was a good summer for me, we had a long talk. One of the things the elders said to me was let it go and forgive, it’s the best thing you can do, you can’t, you got no control over what the other person’s gonna do, it’s just yourself you got control over it, and do what you could do with it, you can make yourself stronger if you go the right way. If you go the wrong way, it’s just gonna get worse and worse for you. So that talking from that elder sure stuck with me for a long time.

LP: (through the interpreter): So...back when she was growing up, when she had problems, she would go talk to an elder, and the elder had the wisdom and the knowledge and they would know what to say to her, so if she had any problems, or issues, or stress that was happening to her they would guide her along the way.

NE: The woman she was talking to me. [...] Like I didn’t really understand her, what, what she’s talking about. But this elder, she told me, let’s come talk together on the phone. I didn’t know she went through the trauma, I went through the trauma.

ER: So did that help, talking with her?

NE: Yes.

ER: And what kinds of things did she say that were helpful?

NE: To talk about the problem.

Talking seems to be the preferred way of dealing with stress, but it is not the only means to Get It Out. For example, in Ulukhaktok, several younger speakers identified drum dancing as an important activity for relieving stress. In both communities, being generally active was important for stress management:

RG: There’s other ways people can deal with stress. Go walk. Go punch a punching bag, or go play a ball, or go fishing, go out on the land, go do something. Sew, carve, whatever.

EN: Yeah, out on the land, being out for even just the day. Or you can do sewing together. Telling stories together. Couple of drum dancing. And you know how you can help each other and listen. All of us have listening ears for each person with what's happening. And maybe you can get ideas from me that this is what we can do.

For Inuit who are religious, going to church, reading the bible, or praying were effective ways to receive knowledge or advice that could help stop overthinking, perhaps similar to opening up and speaking with someone:

HA: When they are out, like the ones that are going in land, that's really helping the older people. When you are thinking too much in the home, you go out, so it will help you, and, to me, when I was doing a lot of thinking and sad, I read my Bible, because they have lots of answers, and they are very wise. "If you do this you will be happy, if you do that, you will be unhappy." Something like this. I don't know about the other people. I have this [touching the Bible], I have the answer all the time, when I get sad and lonely and thinking of my kids, my granddaughter, I open the Bible and I get more faith.

As suggested in the quotes above, hunting, fishing, or just going on the land is an important strategy, mentioned by 22 of our speakers, as important for being healthy and managing stress. However, the narratives far more often reference communication than land-based activities, a finding that may reflect both the perceived importance and effectiveness of different strategies for stress management. An additional complication is that going on the land may not be an option available to some (Collings, 2011; Collings, Marten, Pearce & Young, 2016; Ready, 2018). As an aside, we also wish to direct the reader's attention to the calque for *isumaaluttuq* and the reference to its expected symptoms in the English phrase "when you are thinking too much in the home."

How to Get It Out. Talk is clearly an important Get It Out strategy. The narratives also include subtle instructions about how to identify who may be a good partner for a conversation about one's problems, how to identify who may need to talk to someone, and how to talk to others in a helpful way. Importantly, not just any person or any social context is suitable for sharing one's problems through talk.

As suggested by the quotes about talking with others in the previous section, "elders" were often invoked as potential resources for problem solving. However, the Inuinnaqtun/Inuktitut term *inummarik*, which is sometimes translated as "elders," also has a more general meaning of being a "genuine person,"

criteria for which include having empathy towards others and being actively engaged in the life of the community (Collings, 2014). Indeed, some speakers indicated that anyone with similar experience, regardless of their age, may be an appropriate conversation partner:

SM: I, and I find it easier to talk to somebody that's been through the experience, like, um, if I know that person went through the same thing I did, I know it's easier to talk to that person because I know what they're gonna be feeling.

Comments such as the above, in addition to other examples people provided during interviews, lead us to suspect that “elders” in practice referenced a select group of people who are valued for their experience, their willingness to impart that experience to others, and certain kinds of behaviors towards others.

The signs of who might be an appropriate person to talk to, and who might be in need of help, were closely tied to how Inuit perceived and discussed health in our interviews. For instance, one respondent in Kangiqsujuaq described healthy persons as those who were “more available to family, being more outside, visiting each other more, [doing] more activities,” in contrast to unhealthy persons, who tended to be socially withdrawn. She explained that being engaged in socializing and activities in the community (like playing sports or engaging in handicrafts) demonstrated that “the person is more open, more happier, someone who you can trust, to talk to, who is available for any kind of fun event.”

Though being open and active in family and community was a sign that a person might be a good confidante, the narratives also clearly suggest that, rather than it being incumbent on those in need to seek out someone to talk to, it was preferred that others would recognize the physical signs of *isumaaluttuq*—such as facial expressions, moving slowly, or social withdrawal—in people around them, and actively seek them to draw them out:

SM: Just talk with them, try and take them away from other people or make them comfortable and try to get them to talk about ... most of the time I know what's going on with everybody in town, so if I see, if I know somebody is going through a hard time I know what's going on with them. And most of the time they don't want to talk to anybody.

MO (through the interpreter): So someone healthy is also someone who's very empathetic towards others, someone who's able to understand, like, she used herself as an example where, if

she were to have concerns, and she's not voicing them to anyone, but that person who's healthy, or someone who is, you know, just really fine, comes and asks her, "Do you need to talk, do you need to go to another place to talk?" or, someone who understands someone else that they're concerned.

Later in the interview, MO further clarified why it was important for a person who was hanging on to their problems to be approached with an offer to talk:

So, a person who is alone, who wants to speak but can't, the problem is that they've shut it down, they've shut down the problem internally, they've closed it up, even though they do want to speak it they've closed it up, and, they, it becomes normal for them to be alone, until someone actually approaches them and says, "Hey this is not normal," or "Hey, how are you doing?" Otherwise they think it's normal to just keep it shut and just be alone.

The excerpts above also indicate that the person in distress needs to cooperate with the offer for help: they could not be forced to "open up" if they were not ready or not certain they could trust the person who approached them.

MO (through the interpreter): So how she, so let's say she has a very big concern, or a big problem, she's more comfortable having a one-on-one conversation with one person, and only the person that she chooses, it's not someone who wants to talk, it's who she chooses to talk with.

Finally, several speakers provided clues for what to talk about and how to talk with a person who needed to talk. As suggested above, talking about shared experiences and providing advice are components of these discussions, and one-on-one private conversations also appear to be preferred.

However, the tone of the conversation is equally important. Some respondents in Kangiqsujuaq emphasized the need to speak positively, and to "soothe" a person in distress:

IE (through the interpreter): Mmm, ilai. And if we know that person is doing wrongful doings, such as misbehaving or breaking and entering or bullying people, we should go to that person and talk to them, and comfort them, soothe them, instead of criticizing and judging that person. So we should be the ones to see if they're misbehaving, go to them and talk to them.

HA: Um, most of the time I'm talking to the teenagers, how they are good, how they are so precious, and most of the time they don't know that, they think that they are bad because they never hear good things about them. When someone told you that you are good with that, good at doing something, when someone says that to us, our feelings get more high and we wanted to be more good, see? But when the kids, when we are saying to the kids, that "you always do that," doing something wrong, and "do this!" and "hey" angry, when we are saying that, they are getting bad. But tell them, they are so precious and they can do it and we trust them, we trust them that they are able to.

Criticism, anger, harsh talk, or telling someone to “toughen up” were flagged as ways of talking that would likely backfire, not only causing the person to continue to Keep It In but also adding to their burden of stress, as in the following:

TL: Yeah. Yeah. One stressor would be, for a long list, not making money and being told that if they want money they should go and find a job, because there aren't, there isn't much jobs up here. Like you got at least 60 other people trying to apply for this one position. And yet people are saying, to tell kids to go find a job, instead of sitting around.

A feeling of mutual understanding (*tukitsiaqatiginiq*) with the person giving advice, which requires a lack of judgment or arrogance/pride on the part of the person providing advice, was extremely important for helping people to feel safe in opening up about a problem.

Keep It In. As the alternative to Get It Out, Keep It In appeared on our first pass through the narratives to be a less-effective strategy for managing stress. However, Keep It In may be the preferred strategy for some kinds of stress, manifesting initially through distraction or avoidance—as one speaker put it, “keeping my mind away.” These practices can serve as delaying tactics, employed to see if the problem will simply go away without the need to take further action. One speaker described this strategy as being similar to waiting for the weather to change. This strategy may be particularly effective for acute stressors. Some strategies for distraction (such as physical activity) may in some cases *look* like Get It Out, but they serve a different purpose:

BL: And they do some sewing, or carving. Maybe they do some activities, maybe less things on their mind and concentrating on the sewing or concentrating on the carving, or making something. I know it helps to ease the mind, by doing something.

PC: If there's someone you know that's very stressed out what can you do to help them?

LO: I usually try to talk to them, you know, distract them by giving them a little bit of relief from what they're going through. Ask about how the rest of their day's going. You know, point out that you know there are other things in life that, you know, that are worth working towards and if you just put your mind to it you can get it done.

One strategy for distraction or avoidance was to change one's location, either briefly, as in going for a walk, or for longer periods of time, such as going on the land or to another village. Nevertheless, although

distraction/avoidance could be effective for some problems, Keep It In is also problematic. “Bottling it up”—that is, failing to get rid of one’s excess thoughts—could eventually result in violent explosions:

SM: But sometimes there’s lots of stress factors out there and people, some people, they don’t like to talk about their problems, they’re not used to it too. I’ve been like talking about myself, I didn’t like it at first, but as I started getting older I started feeling that it’s not good to hang on to stuff inside, it just creates more stuff, more stress, and anger toward other people. I find it better to deal with it and get it all out instead of hanging on to it, ‘cause when I was younger I know I hanged on to too much stress and it went, bite me in the ass a lot of times, and I hurt a lot of people without dealing with it.

Despite the potential danger of Keep It In, there were some indications that it could also be beneficial:

KE: They best way to go about, in solving something that you want to try and forget is to keep it in the head and remember that this is the reason why I hurt so much, I don’t want to go back to that, I want, I want to better, make my living situation better so I gotta make changes, and the changes have to be, you know, away from the alcohol, away from the weed, sort of thing, to create better memories. That’s all I can do in life, that’s all I learned anyways.

PC: So you can’t get rid of bad memories?

KE: No, you can’t. You have to put them on the back shelf and keep them there as, ah, inhibitor sort of thing, to prevent yourself from doing the same thing over and over again.

The quote above suggests that Keep It In could act as an incentive to make changes and to improve one’s situation. Keep It In is also a strategy for developing empathy—an awareness that others may have had similar experiences, and an ability to recognize others who may need someone to talk to, which then potentially becomes connected to positive strategies for Get It Out:

SM: Oh, I just tell them a story about what you went through, what I went through, like what I went through in life and how I dealt with it, it usually starts them to open up, especially some of them they didn’t know, they don’t know about my past, they don’t know what I did when I was younger, some of them weren’t even around, so I just tell them about that. They think they had it tough, but they got nothing nowadays (laughter).

PC: Does that make it harder?

SM: Yeah, it did. It makes it a little bit harder sometimes. But in a way it made it, made me feel better that I know that I could open up to a person and talk to them, just to let them know it’s okay to feel those stuff, and to go through that stuff, sure it’s shameful to go through it, but it’s more shameful to carry it around all that time because you start doing stupid stuff you shouldn’t be doing. And some of them realize it and they do talk about it after awhile. So once in a while, out of the blue, somebody always come over and talk. Especially when they’re really down.

Nevertheless, we are left with something of a puzzle, given that many of the engagements with Keep It In appeared to be driven by specific barriers to Get It Out through talking. Barriers to communication identified by our speakers include a lack of trust, fear that what one says may be broadcast through the settlement, or that they may be judged harshly by others:

LU: I don't trust nobody. It's all kept, you know, within me.

PC: So, what do you do to cope with that stress then?

LU: I keep myself busy, as tired as I am, I notice that when I keep my mind busy I'm not thinking so much and it's not, when I sleep too much I get more stressed out. I have more, um, issues thinking.

PE: Maybe uh, I noticed this, that people feed off negative drama, emotions more than the positive, because the negative gets people to talk faster, faster, [faster and faster taps on the table] and it ends up going to the person.

TL: Yeah. Like cause there's people out there, they'll, as soon as you leave them, they'll, they'll like talk about you. And I don't have friends like that anymore. Like I got about three or four close friends, and then my closest friend is my common-law.

IT (through the interpreter): It's when we talk to people, and we tell them what's going on, and how we're talking about it, but once they open up and tell someone else, they change what we say...twist their, twisting the words. And that's what she meant by twisting. That's why it's really difficult to try and open up to people.

The examples here highlight that an inability to talk to others and relieve stress is itself a problem for Inuit, with the implication that removing barriers to communication—helping people find someone to open up to, for instance—might be the solution. However, other considerations lead us to the conclusion that, despite the associated danger, Keep It In is not a strategy people choose merely because Get It Out is unavailable.

Rather, our speakers' narratives suggest that Keep It In is a strategy used to manage the potential risks of causing harm to others by allowing negative thoughts or words to spread. In contemporary settlements, the influence of thoughts and words appears in various settings and behaviors. One example is in the anecdote used in the introduction: the pastor's concern that negative narratives themselves caused harm to Inuit youth. An additional example includes one instance when a friend reported to Collings that he

avoided his brother's cooking because his brother's diabetes changed the taste of the food. Evidence of words having power also appears in our speakers' narratives, as in the following:

PC: Are there other kinds of problems in town that really need to be addressed that aren't being dealt with?

GI: Family violence.

PC: That's with ...

GI: Like, elder abuse, and toddlers, yeah. That's the most, too. I see that getting, most abused.

PC: So when you say elder abuse, are people actually hitting the elders?

GI: No, you see, it's when their pension comes in at the end of the month, and that's the only time they help out, it's when they want money. It's "Give me this from store, give me that." "Can I have this much money?" Or, it's they say some bad things. "Give me money or I'm not gonna help you any more." See, it's like, things like that that they say to our elders these days.

PC: So that's violence?

GI: Yes.

Words and thoughts directly influence and affect those around them. Worrying excessively about others, thinking bad thoughts about them, speaking harshly to others, or making demands of others, as in the example above, all have potentially negative consequences. Consider the following exchange:

PC: Yeah. OK. So if I was worried about TM [PC's Graduate Assistant] not being able to do his research then that could make him get sick?

KA: Yeah yeah. That would make his body and mind feel like something's not right. I think he has this feeling. You ever get that feeling that you don't feel like it's right? Somebody is worrying about you.

PC: So if you're thinking too much about your kids, they're going to get sick?

KA: Yeah. That's what my grandpa would always say. "Don't worry about your kids, you're going to make them get sick." Or they could worry. Their mind's not gonna be good and you're gonna make them feel sick.

In this light, what we at first identified as barriers to communication might be better viewed as guardrails: devices that protect against letting a problem get out in the wrong way and causing harm to others. Sharing a problem with others may itself be a stressful experience because the stress is potentially transferable:

PC: Are there others [problems in town as they relate to health and stress]?

GI: Other people's problems. Like, they ask you for advice, and they put you in their situation, and it makes you think about what you have to do to help your friend. It's like putting someone else's situation on your shoulders, and you have to carry it.

Because stress is transferable, talking about problems may quickly involve an expanding circle of relatives and relations, either by placing a burden on others or by implicating them due to their relations with those involved in an incident:

HN: I don't go home to bring all the stuff [work-related stress] on my back, talk to my wife about it. I don't do that. It's complicated and I don't want anything of that to come from here, I don't want it to reach to my home, where we relax most.

AN: I can't talk to my wife or children about my stressful situation because I don't want them to be stressed out any more than they have to.

These quotes suggest that "having no one to talk to" does not necessarily mean that there is literally no one potentially available or willing to talk. Rather, it reflects concerns that others might be negatively affected by sharing the problem.

Another concern voiced by many of our speakers was a reluctance to talk because the content of a conversation may be improperly broadcast around town. We initially identified this as a worry about embarrassment or other consequences for the speaker, but there is also concern about the infectious nature of "talking bad" in and of itself:

TU: Yeah. Pretty, like, when I'm stressed out what I hear is, not directly to me, but when I hear bad comments about anything or anybody I just talk back for anything, like.

ME: Like, uh, like people talk, for example, if I heard something bad about [the interpreter], ah, I'm going to think about that, you're that kind of person. Like they can't talk to that person, when the person was talking about that person. For example, like to [the interpreter] ohh, when somebody says, "Ohh [he]'s this, [he]'s that," I think, oh ok, I think about that. But like, to talk to them in person, so that's the problem too.

At the same time, talking about other people's problems was not necessarily always a bad thing:

ER: So, if you're feeling stressed, what kinds of things do you do to feel better?

GE: Well, if I feel like it, and if I decide to talk about it, I just start talking about it, in private, yeah. That's what I recently had to do, with one of my coworkers. Mhmm. And she may have, uh, spread the word, so some people are taking it easy on me now, [laughs] which felt good.

ER: So you don't mind, so you, you talked to her in private, but you don't mind that she...

GE: Yeah, I don't mind that she spreads the word, so it's very, it was very noticeable that people are encouraging me to do this and that with them, during the, uh, good days. Yeah, mhmm.

In other words, a problem shared with someone, *in the right way*, may provoke a collective response, with many people actively seeking to ease the sufferer's burden without the issue ever being openly discussed. Talking in the wrong way, however, may quickly expand to include the wider community, increasing stress for both the person and those around them. Most notably, embedded within the narratives associated with Keep It In are allusions to experiences that potentially threaten social relations within the community, among them sexual assault, violent assault, child abuse, and other adverse events and experiences. It is these experiences, which our speakers often referenced using the term "trauma," that may be particularly difficult to talk about with others to Get It Out.

Bottling it Up and Substance Use. We noted in the introduction that our interest here is in exploring the broad domain of stress and stress management. Nevertheless, we are compelled to make a few comments on substance use specifically as it relates to the model because it was a common theme in the narratives. Many speakers suggested that substance use was problematic when it was a recurrent means of bottling up stress:

ER: Um, so why do they choose drugs and alcohol to deal with those problems?

TK: I don't know, they probably just to hide it inside or not to talk about. That they are in pain.

ER: And why is it a problem for people, that people are smoking marijuana?

GE: Well, though it's, I mean, it's a problem and, uh, they smoke it to get some relaxation and how they want to feel in their mind. That's the main thing that they, uh, take drugs, to feel numb in the mind. Because they don't want to have, they don't want to get too much worrisome in their mind.

For some, substance use, cannabis especially, may be attractive because it provides a venue for socializing and managing stress without transferring that stress, allowing people to help others without acquiring the weight of their concerns:

PC: So is there a way to, if you saw somebody who was having trouble, and you were concerned about them...

GI: Mm-hmm.

PC: Is there a way to help them without having the burden transferred to you?

GI: Probably, I don't know, the easiest way is probably, say, smoke some weed without putting their problem to me. I'd say "smoke a little weed you'll feel better."

The social context of the drinking or smoking party is one where the expression of emotions (including positive ones) is under less social constraint, and the potential for transference may be subdued, as GI indicates. This is not to say that substance use is a particularly *effective* strategy for coping with stress, however:

PC: Let me ask you another question. People drink alcohol. Is that a problem or a solution?

KE: There's no solution, drinking alcohol.

PC: Does it solve other problems?

KE: Solve, what would it solve?

PC: Well people drink, so maybe...

KE: It's just a short-term thing to forget something, and then the memory of it comes back after the drinking stops. And they start drinking all over again to forget that thing. And then, the drinking stops and they remember again, and so they go back to drinking. It doesn't solve anything.

KE is very clear that such relief is of limited duration and potentially leads to a longer-term cycle of harm to the person and those around them, which accounts for speakers overwhelmingly (44 of 57 interviews) identifying substances as a significant problem for people in their settlement. We suspect that substance use was identified so strongly as a principal problem in the communities because substance use is an unsustainable Keep It In strategy. Not only is it ineffective, but it creates other problems. Substances are expensive to acquire, which may generate economic stresses for the user and their families. Additionally, behavior while intoxicated or stoned may harm others directly or indirectly.

Discussion

Attention to the everyday experience of stress, not just highly visible outcomes like alcoholism and suicide, reveals the processes through which Inuit experience and manage stress. Our speakers' narratives reveal a set of practices for responding to and managing stress that are grounded in Inuit ideas about cognition and personhood.

Fienup-Riordan's (1986) analysis of personhood among the Yup'ik, for example, highlights the fundamental differences between Western and Yup'ik conceptions of a person and their place in society. Individual persons are not separate beings, each with their own self-interested needs and desires. Personhood rather begins with the recognition that one is intimately connected to others and defined

within the totality of society. Persons are neither discretely bounded nor exclusively human, and social interaction with others occurs through physical, verbal, and mental modalities. Just as physical actions influence others, so, too, do words and thoughts. The importance of words and thoughts as powerful influences on others most clearly appears in the literature on Inuit cosmology (Merkur, 1991; Laugrand & Oosten, 2010), but the literature on Inuit identity also highlights the processes by which Inuit actively develop and assert themselves in relation to others, a process that depends on proper actions, proper words, and proper thoughts (Stairs, 1992; Stairs & Wenzel, 1992; Dybbroe, 1996; Dorais, 2005; Searles, 2011).

Keep It In begins to make more sense when understood in this broader context. Because stress is transferable, and because words and thoughts about others have consequences, Inuit must balance the relative costs and benefits of Get It Out and Keep It In. Get It Out through talk is only viable if it will not cause stress to accumulate in one's family members or the wider settlement. Keep It In is best understood not solely as an outcome of the barriers to communication that exist in the contemporary settlement: it is an altruistic strategy designed to protect others from harm and oneself from further harm.

The problem of a lack of communication, or "having no one to talk to," thus reflects concerns that others might be negatively affected by sharing the problem. This hearkens back to Briggs' (1970) recognition of a central tension for Inuit between self-sufficiency and independence, and for feeling protected and loved. Briggs records this feeling of protective love as *naklik* and interprets it as "nurturance." But the desire to be *naklik*-ed conflicts with the high value that Inuit place on autonomy and self-sufficiency, especially because, as she notes, nurturant feelings are for children. Opening up and talking about one's problems, however, may elicit feelings of nurturance, and concern, which may then lead to worry: "if my family found out I was unhappy, they might get sad, and pity me, and lots of [Inuit] don't want to be pitied. If I knew I made you sad, I was going to be sadder still and sorry for myself" (Briggs, 1970, p. 325).

While other research has also documented "an ongoing social ethos of caring, empathy, and concern for others" in Inuit communities (Kirmayer et al., 2009, p. 310–311), and identified communication as a

central theme in Inuit concepts of well-being (Kral et al., 2014; Rasmus, 2014), here we have proposed an explanation for *why* communication is so important and *how* this ethos of caring ideally works in practice. The analysis provides support for the often asserted but vague idea in the literature on Inuit health that “talking to elders” is helpful, by identifying the specific characteristics of persons who may be in distress, who may be good persons to talk to, and when and how to engage in good talk. As we have seen, distress is often signaled through physical demeanor and social withdrawal rather than through explicit requests for help. Those who can help are ideally expected to reach out to those in distress, and conversations are expected to happen privately. Finally, concerns about the transferability of stress, related to the permeability of persons, emerge in our model as a key reason why Inuit feel that it is difficult to talk about their problems despite talking being a preferred mechanism for dealing with stress.

Implications for policy and practice

The results of this analysis demonstrate the value of exploratory, undirected interviews and text analysis to distill local concerns and implicit understandings that may be widely shared in communities but not easily visible in comparison to other aspects of “culture” such as language or ceremony. Though considerable research in Inuit communities draws on narrative interviews, formal methods of text analysis—even as simple as Key Word in Context exploration—appear to be rarely employed or demonstrated. The value of these tools goes beyond answering a priori research questions. They are a means to generate questions and theoretical frameworks grounded in local concerns and understandings, and they can help generate research that is community-driven and serves community needs.

In fact, these interviews were intended as a launching point for designing a research project addressing community concerns relating to health and well-being. Although our pilot interviews were conducted in 2018, these concerns have persisted through the pandemic. In Kangiqsujuaq in particular, there is broad consensus among residents that there are issues relating to unresolved traumas of colonialism that need to be dealt with (Ready & Collings, 2021), but there is also frustration among many residents and local leadership that existing services and programming like healing circles or counseling services are ineffective. These concerns about health and social services in Inuit communities also stem

from broader historical, geographic, and structural issues, which we have not investigated here. Still, we think that our analysis, focused at the scale of interaction among community members, provides some useful insights. By paying close attention to how Inuit themselves discuss problems in their communities, we have identified cultural mechanisms for managing stress and promoting healing.

Nevertheless, “communicate more and better” is not by itself the solution to the kinds of social problems that Inuit identified to us. Many of these problems—substance use, sexual assault and sexual abuse, and family violence—are well-documented in the literature, and well-known in the settlements. A significant barrier for some, and possibly a primary reason for Keep It In, may be *because* the stress a person is feeling is due to the actions of a close friend, family member, or respected person in the community. These kinds of cases may necessitate Keep It In because of the potential broad repercussions for social relations in families and the community more generally, and they may be the ones most difficult to resolve. We do, however, think that attention to the cultural model—a set of guidelines for how one *should ideally* manage stress—can be useful in designing culturally-relevant intervention and care programs, as well as in understanding the circumstances and processes that contribute to psychological resilience in different cultural settings.

Finally, although we have noted the shared Inuktitut/Inuinnaqtun roots of many of the concepts employed by our speakers (even when speaking English), we have not sought to identify how much of this model derives from precontact Inuit knowledge and practice, evangelical Christianity, or western psychology. Regardless of its origins, the coherence of the narratives in the two communities suggests a shared cultural model of stress, and attending to this model may provide strategies for developing more effective mental health interventions in these settlements, as cultural relevance is a continuing problem in mental health care in Indigenous communities across Canada (Boska, Joobar & Kirmayer, 2015).

Attention to well-being in First Nations and Inuit communities in Canada is increasingly common but largely remains fixated on documenting how Inuit might broadly define well-being rather than investigating the specific processes that contribute to it, and tends to treat “Inuit Culture” as a static and bounded entity (see Colby, 2010). In contrast, our emphasis, encapsulated by the quote from Waldram

earlier in this paper (see also Thin, 2010), is on how Inuit actively construct well-being within the context of their current economic, social, and political circumstances. It is partly for this reason that we have avoided the use of “traditional” in this paper. Attending to these active and constructive processes challenges the common view that acculturation and rapid change have led to cultural disarray in Inuit communities (e.g., Taylor & Usborne, 2010; Rasing, 2017).

Study limitations and future directions

Before concluding the paper, a cautionary note is in order. This is exploratory work, which requires further validation and leads us to additional questions. One possibility, for instance, is that Get It Out and Keep It In are used to manage different kinds of stresses. We suspect there may be a taxonomy of stress or a severity index, which may in turn generate different responses depending on the stressor. Strategies for coping with the kinds of experiences that Inuit refer to as trauma may be different than strategies for coping with stress induced by skyrocketing housing costs or putting food on the table. Better understanding what terms like “trauma” and “abuse” mean to Inuit—as both acute events and processes—could help disentangle why Inuit choose certain strategies for managing stress. The choice (or availability) of strategies for managing stress may also differ by age, gender, and other economic, social, or demographic factors. Due to the preliminary nature of our work, our sample was not large enough to explore these differences in detail, nor did we collect personal information about our respondents. Finally, it follows from our model that there may be measurable psychological and even physiological outcomes associated with different kinds of stressors or stress management strategies. We might predict, for instance, that people who “Keep It In” experience more chronic stress, which might be measurable via other instruments such as biomarkers.

Conclusion

It is well understood in the broader literature on well-being that culture matters, but the analysis here emphasizes ways in which culture goes beyond practices easily observable by outsiders. The model developed in this paper is deeply rooted in concepts fundamental to Inuit ethos and worldview, among them understandings of personhood and the body that are different from those of *qallunaat*, and which are

significant factors in how Inuit interact with each other and function as a society. Greater attention to these more nuanced understandings of culture has the potential to significantly contribute to strengths-based approaches to mental health and well-being in Indigenous communities across North America.

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Data availability statement

The narrative excerpts presented here have been de-identified according to the requirements of our IRB approval. Given the nature of the interview content (e.g., personal experiences), it is difficult to fully anonymize the narratives. Portions of the dataset may be made available upon request.

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Supplementary Table 1. Themes identified during initial coding of the sample of interview excerpts concerning “communication.” Search terms used to generate the sample are listed first, followed by our codes, which can be broadly classified into three types: appearances of key terms or concepts (e.g., children, youth, kids, are all classified under “children”); idioms, which were recurrent metaphors or ways of talking about a problem, and examples, in which respondents often discussed their experiences of dealing with stressful events.

Theme	N excerpts	Type of grouping
Talk	210	search term
Speak	33	search term
Communicate	40	search term
Say	25	search term
Tell	38	search term
Ask	6	search term
Listen	25	search term
Children	37	key terms
Elders	31	key terms
Trust	13	key terms
Gossip	14	key terms
Trauma	22	key terms
Shyness (incl. fear, afraid)	12	key terms
Alcohol	31	key terms
Friend	10	key terms
Family	25	key terms
Researchers	14	key terms
Truth	4	key terms
On the land	8	key terms
Shame	4	key terms
Counseling	22	key terms
Meetings	19	key terms
Pain or hurt	17	key terms
Loneliness	2	key terms
Religion	3	key terms
Community	10	key terms
Suicide	10	key terms
Language	25	key terms
No one to talk to	9	idioms
Stay home	2	idioms
Bottling Up	28	idioms
Opening up	15	idioms
Being stuck in one place	3	idioms
Moving on	1	idioms
Dealing with stress	29	examples
Good ways to talk	28	examples
Bad ways to talk	31	examples
Empathy	14	examples
Socializing	7	examples
Difficulty talking	45	examples
Belonging	4	examples
Understanding	5	examples
Anger	12	examples
Forgiving	2	examples
Ease to talk to	2	examples
Health and healing	13	examples
Stress as contagion	6	examples
Not listening	11	examples

Supplementary Table 2. Pile sort results, classified into general and subthemes. N = number of excerpts in that pile (total excerpts 323). The sample size should be considered a minimum number of times a problem was mentioned, because excerpts often could potentially belong to multiple piles, but we assigned them to the “best fit” pile and did not double count excerpts here.

Pile sort results	N
<i>General theme of communication</i>	70
Lack of communication as a problem	20
Role of alcohol (both facilitating and preventing)	11
Youth (rebellious, not listening, disrespecting elders)	19
Community talk and meetings (e.g., as a solution)	20
<i>Barriers to communication</i>	63
Trauma	2
Shy/afraid	7
Isolation	11
Contagion (of thoughts, ideas)	10
Lack of connection	12
Judgement	14
Don't know how	7
<i>How to communicate</i>	79
Role of elders/parents	11
Opening up (importance, examples, how to)	24
Demeanour/characteristics of confidante	13
Importance of positive talk	12
Importance of empathy/experience	5
Bad ways to talk (e.g., in front of children, untruthfully, gossip)	11
Get a second opinion/change of ideas	3
<i>Keeping it in</i>	22
Bottling it up	22
<i>Other piles</i>	89
Religion (role in stress relief)	3
Researchers (e.g., potential role in facilitating communication)	13
Problems with institutions (police, government, etc.)	5
Language (mainly language loss in Ulukhaktok)	24
Miscellaneous	44