"A dismantled society": meta-synthesis of the phenomenon of violence in indigenous populations



"Una sociedad desmantelada": metasíntesis del fenómeno de violencia en poblaciones indígenas

"Uma sociedade desmantelada": metassíntese do fenômeno da violência nas populações indígenas

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ABSTRACT

Objective: To analyze publications of qualitative studies that addressed the phenomenon of violence in indigenous population. **Method:** Meta-synthesis of studies published in the period of 2006 to 2016, with search in the Ebsco Host, Cuiden Plus, Science Direct, Springer, and Web of Science databases.

Results: A new reinterpretation of the findings was generated from the codes and categories of the primary articles. Five categories emerged: living violence, factors associated with patterns of violence, consequences of violence, interaction dynamics in situations of violence, and how to deal with violence.

Conclusions: Indigenous people experience different types of violence at an early age; experienced in the family. This makes it an emerging social problem that must be taken care of urgently and represents an area of opportunity for the nursing professionals whose central focus is human care.

Keywords: Violence. Indigenous population. Qualitative research.

RESUMEN

Objetivo: Analizar las publicaciones de estudios cualitativos que abordaron el fenómeno de violencia en población indígena.

Método: Metasíntesis de estudios publicados en el periodo de 2006 a 2016, con búsqueda en la base de datos Ebsco Host, Cuiden Plus, Science Direct, Springer, y Web of Science.

Resultados: Se generó una nueva reinterpretación a partir de los códigos y categorías de los artículos primarios. Emergieron cinco categorías: vivir la violencia, factores asociados a los patrones de violencia, consecuencias de la violencia, dinámicas de interacción en situaciones de violencia y cómo enfrentar la violencia.

Conclusiones: Las personas indígenas experimentan diferentes tipos de violencia a edad temprana, vividas en el seno familiar. Esto la convierte en un problema social emergente que debe ser atendido con urgencia y representa un área de oportunidad para el profesional de enfermería, cuyo foco central es el cuidado humano.

Palabras clave: Violencia. Población indígena. Investigación cualitativa.

RESUMO

Objetivo: Analisar as publicações de estudos qualitativos que abordaram o fenômeno da violência na população indígena.

Método: Trata-se de uma metassíntese de estudos publicados entre os anos de 2006 a 2016, indexados nas bases de dados eletrônicos Ebsco Host, Cuiden Plus, Science Direct, Springer, e Web of Science.

Resultado: Uma nova reinterpretação dos códigos e das categorias de artigos primários foi gerada. Emergiram cinco categorias: viver a violência, fatores associados aos padrões de violência, consequências da violência, interação dinâmica nas situações de violência, e como a violência é enfrentada.

Conclusões: Os povos indígenas experimentam diferentes tipos de violência desde a infância, vividos no seio familiar. Isto se converte em um problema social emergente, que deve ser abordado com urgência, e representa uma área que precisa de atenção dos profissionais de enfermagem, cujo foco principal é o cuidado humano.

Palavras-chave: Violência. População indígena. Pesquisa qualitativa.

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■ INTRODUCTION

Violence is a complex phenomenon, which has become a problem of global concern, since it poses a risk to human health by generating negative effects on mental health and social development⁽¹⁾. Scientific evidence has shown that the indigenous populations are more likely to be victims of any type of violence because of cultural and ethnic factors⁽¹⁻²⁾, with women and children mostly experiencing violence^(1,3-4).

In the Americas, there are approximately 42 million indigenous people, who constitute about 10% of the population of Latin America, distributed mainly in Mexico, Guatemala, Peru, Bolivia and Ecuador; however, research focused on the phenomenon of violence in indigenous populations is still invisible⁽⁵⁾.

On the contrary, in countries such as Canada, the United States and Australia, this phenomenon has been of major interest in this population in the last decade⁽⁶⁾. Thus, in Canada it has been reported that Aboriginal people are three times more likely to experience any type of violence than the non-Aboriginal population. At the same time, it has been found that Native Americans are twice as likely to suffer violence than the general population; as well as in Australia, it has been reported that a quarter of the indigenous population over the age of 15 have been victims of physical violence⁽⁶⁾. Structural violence resulting from discrimination based on ethnic origin and economic status has also been reported⁽²⁾.

Violence in indigenous communities has roots in the socio-cultural historical oppression to which indigenous peoples have been subjected by the most powerful groups. This oppression has been documented in most of the indigenous cultures, which were colonized by Euro-Western cultures, changing their social structure of beliefs in divinity and respect for nature by a dominant patriar-chal structure^(2,7-8).

The historical oppression⁽⁸⁾ has been defined as the "chronic experience of submission, acute and intergenerational, which over time has been imposed, normalized and internalized in the daily lives of indigenous people." These experiences can be interrupted cultural patterns, separation in traditional ways of life⁽⁹⁾, discrimination, daily injustices, poverty and marginalization⁽⁸⁾.

Some authors^(7-8,10) mention that after some time of being submerged in a context of oppression, people tend to normalize and internalize this type of situations. This internalization of violence leads to sub-oppression, a state in which people who have experienced oppression oppress their victims, repeating patterns of under-oppression⁽⁷⁻⁸⁾. In

the indigenous communities, this under-oppression, most of the times, manifests itself in the internalization of the norms of gender, where man plays the role dominant and women the role of submission, which increases the risk for domestic or family violence⁽⁷⁾.

Although it is true, the quantitative studies that have addressed the phenomenon of violence in this type of population have generated valuable information regarding causal factors and how to intervene in this type of phenomenon⁽¹⁰⁻¹²⁾; however, new studies are required from the comprehensive paradigm to understand how the traditional roles of indigenous culture intervene in these behaviors.

In this literature review, the objective was to analyze qualitative studies publications that addressed the phenomenon of violence in indigenous population; knowing that the nursing professional, as part of the health team and who is inserted in all levels of care, can have a better understanding of the phenomenon, from their own world-view of the individuals who experience the violence and carry out future strategies of prevention and evidence-based interventions.

Therefore, it was decided to perform a meta-synthesis of the existing qualitative studies to have a better understanding of the phenomenon of violence experienced by indigenous populations. A meta-synthesis⁽¹³⁾ is the "integration of qualitative research findings, which are themselves qualitative synthesis of data". This methodology is based on the "interpretations made by the primary investigators" for the new interpretations" lts aim is to "create large interpretive representations" based on the findings of primary studies⁽¹⁴⁻¹⁵⁾, to generate new theoretical conceptual models, and to identify gaps in the study phenomenon⁽¹⁶⁾.

METHODOLOGY

The methodology chosen for the following meta-synthesis allowed to integrate the different studies with a qualitative approach, such as ethnographic, phenomenological, theory and other descriptions consistent with the methodology. The phenomenon of study for this meta-synthesis was the violence in the indigenous population, in order to identify the gaps existing through the different contexts. A review of the literature was made starting with the following guiding question: What shows the existing scientific evidence on the phenomenon of violence in indigenous population?

The question was made with the structure of the Pl-COT format, which means: P- Population or subject of interest, I- intervention, C- Comparison O- Results, T-Time. The PICOT format for the study was as follows: P- indigenous

population, I- phenomenon of violence, C- no comparator, O- reinterpretation of the findings of the phenomenon of violence, T- Studies from 2006 to 2016. The present meta-synthesis was developed in the period from September 2016 to January 2017.

The selection criteria according to the chosen methodology⁽¹³⁾ were as follows: articles with a qualitative approach, articles with findings described in the primary sources and that have gone through a process of synthesis or analysis, articles that have described the ethical considerations in research with human beings. The inclusion criteria were: studies published in the last ten years, with full texts that address the phenomenon of violence in indigenous

population. Review articles or those that presented isolated data without interpretation or analysis were excluded.

The keywords used for the search were: "violence", "indigenous populations", "qualitative study". The search for articles was done in databases such as Ebsco Host, Cuiden Plus, ScienceDirect, Springer, Web of Science. Also, a manual search was performed on the references of the included articles to reduce the selectivity bias. The search resulted in 312 articles, of which, those that in the title and summaries described the phenomenon of violence in indigenous population were selected, resulting 38 relevant articles. After rigorous review of the methodology and ethical aspects, 14 articles were excluded.

N	First Author/ Year	Population	Language/ Country	Method
1	Yepes F. 2010 ⁽¹⁷⁾	women, men, youth, rulers and ancestral physicians	Spanish/Colombia	Participatory action research
2	Gamlin J. 2013 ⁽¹⁸⁾	33 Huichol migrant workers and 12 key community informants (shamans, teachers, community leader and health promoter)	English/México	Ethnography
3	Wendt S. 2013 ⁽¹⁹⁾	13 women over 18 years old	English/Australia	Thematic Analysis
4	Burnette C. 2014 ⁽²⁰⁾	29 indigenous women from a tribe in the Southeast region	English/United States of America	Critical ethnography
5	Becerra S. 2015 ⁽²¹⁾	60 adolescent students (30 males and 30 females between 13 and 16 years old)	English/Chile	The analysis was based on the grounded theory
6	Ellington L. 2015 ⁽²²⁾	39 Indigenous men between 26 and 58 years old with previous experience of domestic violence	English/Canada	Content Analysis
7	Gamlin J. 2015 ⁽²³⁾	30 Huichol migrant families, 6 farmers-chiefs, 3 doctors, 2 traditional doctors	English/Mexico	Ethnography
8	Matamonasa- Bennett.2015 ⁽²⁴⁾	9 men	English/United States of America	Analysis of ethnographic content and grounded theory
9	Burnette C. 2016 ⁽²⁵⁾	29 indigenous women who had experienced IPV and 20 professionals working with tribal members affected by violence	English/United States of America	Ethnography
10	Cerón A. 2016 ⁽²⁶⁾	121 women and 69 men from 14 municipalities in western Guatemala	English/Guatemala	Thematic Analysis

Chart 1 - Characteristics of the studies included in the Meta-synthesis. Celaya, Gto, Mexico, 2016 Source: Research data, 2016.

The final sample consisted of 10 articles⁽¹⁷⁻²⁶⁾ as described in chart 1, of which 9 were published in the English language and one in Spanish. The studies published in English were translated into Spanish by official translators. Regarding the approach, it was observed that the most similar method was the ethnographic approach, used in 4 of the studies. Regarding the central thematic axis, five studies dealt with domestic violence, two dealt with institutional violence, two focused on structural violence and one on violence in the school context.

In order to validate the quality of the studies, the articles were reviewed in an exhaustive and reflexive manner in relation to the theoretical framework, the objectives of the research, the theoretical and methodological orientation, the ethical aspects, the sampling, collection techniques, the analysis process, the validity criteria, the results and the

consistency of the data. For this process, a data matrix was constructed, according to the "Consolidated criteria for reporting qualitative studies" (COREQ) quidex⁽²⁷⁾.

For this stage of reinterpretation of the findings, the analysis was carried out in an artisanal way, carried out by two researchers beginning with reading and re-reading line by line of the primary studies to identify the codes and the formation of new categories with the reinterpretation of the findings.

■ RESULTS AND DISCUSSION

From the analysis of the selected articles, from the codes and categories presented in them, a new reinterpretation of the findings was carried out according to the chart 2, where the categories, subcategories and the codes are presented.

Category	Subcategory	Code	Study included
Experience the violence	Physical violence	"I attack her with a knife" Hit at the nape with a lever I remember that he knocked down and gave me a kick I hit her every night	(19-22,24-25)
	Psychological violence	They call me "swirl" or "hard hair" They think I'm lazy They make you feel bad Call them whores and prostitutes I made her feel ashamed of herself. "I will not let you go, you are mine"	(17,21-22,24)
	Sexual violence	I started to try I was only 6 years old. Experienced all kinds of abuse especially sexual abuse.	(22,25)
	Structural violence	They do not even look at your face. The doctor screams at me. They look down at us The doctor receives you angry I could not explain to the doctors because I do not speak Spanish very well	(18,21,23,26)
Factors associated with patterns of violence	Historical oppression	Our rights have been completely ignored. We live in a society dominated by men A whole society has been dismantled	(22,24-25)
	Loss of identity	Where are we going? We have lost the sense of belonging and identity Deny your own story The code has disappeared The structure is lost [The traditional man] had a great respect for the woman because she was the life giver	(17,24)

	Intergenerational patterns	Christ…! I'm getting like my father My brothers have done the same to their girlfriends She saw Mom when she was beaten by someone else and she had a knife [the son]	(20,24-25)
	Multifamily homes	Aborigines have always been large families She had too many brothers, uncles and relatives	(19,20,24)
	Socioeconomic context	When we faced poverty I think that's when I started to change	(18,23,24)
		Many people drink, because there is nothing to do in this community We do not have a good tool to educate our children	(17)
	Alcohol and drugs abuse by parents	Alcoholism Drugs My mom and dad both drank	(17,24-25)
	Absence of parents	He always left me with that aunt. I had no bond with my mother. I was abandoned by my family. They were too involved in alcohol, they left their children with relatives	(20,35)
	Personal history	Greed Infidelity I grew up like this, fed the rage inside me. I was abandoned when I went to residential schools. I needed to have control of something or someone in my life	(17,22)
Consequences of violence	In the women	He contemplated suicide Depression I could not sleep I had nightmares I have no desire to live My life was stressing I lived in fear Concerned about children and getting them to school	(19-20)
	In children	I started to cut until the age of 17 Our children grow up, they do not receive their love. They try to get [sexual intimacy] elsewhere, and they think it's love. School dropout	(19-20,25)
	In the family	We were split in half Fights, explosions The families were broken It is the father against the son	(20,24-25)
Interaction dynamics in situations of violence	Role of the Victims	My companions they push me between joke With her, I was the one who had to shut up Sometimes my wife beat me She was jealous of me I could not go out with friends without her consent She screamed and threatened. She kept attacking me verbally and physically.	(21–22)

	Role of the Aggressor	I pushed her on the bed, because I felt so harassed. I was violent, jealous and possessive with my partners. I followed her wherever she went.	(22)
	Role of the aggressor-victim	One of us slapped the other. We shouted at each other.	(22)
How to deal with violence	Become more human beings	Share my story Speak at the heart Speak the truth Open up Circle of discussion Being an Indian again Back to being a Human Communication Be responsible Respect Change it again Re-learning Stop the clock System of values	(24)
	To be spiritual beings	Connection with the earth Connection with the great spirit Being true Balance Harmony Back to my elderly	(24)

Chart 2 - Reinterpretation of the findings from the primary articles Source: Research data, 2016.

In the analysis, 94 codes, 20 subcategories and 5 categories emerged: experience the violence, factors associated with violence patterns, consequences of violence, interaction dynamics in situations of violence and how to deal with violence, which supported experiences of violence lived by the indigenous population in the different contexts.

Live violence

It was observed through the speeches that the indigenous people, in their daily lives, experience different types of violence ranging from physical violence^(19-22,24-25), psychological^(17,21,22,24), sexual^(22,25) and structural violence^(18,21,23,26).

This phenomenon of experiencing violence does not respect ages, since there are children who undergo this traumatic experience. Thus, the contexts where this violence is experienced can be in the home, in the school settings and in the health institutions, being the most frequent

and serious experience the domestic violence^(20,22,24); that is to say, those experienced in the family, in which women and children were subjected to physical, psychological and sexual abuse.

It is evident in these cases that the homes represented an aggressive environment for family members and not a protective factor in which the family provides care to the members in the emotional, affective and financial aspects as would be expected according to suggested by the literature (12,20,28). According to this, the literature reports that indigenous women are emotionally involved with the aggressor, which causes them to feel unable to leave that abusive relationship, an event for which they do not denounce or keep it secret to prevent that the honor of the family is disclosed (12). In addition, the literature suggests that indigenous women feel committed to protecting the aggressor to prevent further abuse by them or to avoid them to going to prisons (12).

On the other hand, the structural violence was a revealing finding in the speeches of the indigenous populations, in which they were subjected to verbal and physical aggression by the ethnic issue in health institutions, where they suffered mistreatment by the providers because they did not know Spanish; as well as in the school environment. In this regard, the literature indicates that professionals working in public institutions have discriminated against and excluded the most disadvantaged groups, such as the indigenous population, as socially inferior^(18,21,26).

The health professionals act in a specific context, reason why it is necessary to bring to the light and to discuss the violence present in the life of these people. Recognizing that this violence based on prejudice causes social isolation and, in many situations, violence based on the deprivation of rights and difficulties in access to education, health, employment and public security, which do not allow them to break the cycle of violence.

Factors associated with patterns of violence

These experiences of violence experienced by the indigenous population are associated with multiple factors such as historical oppression as part of the colonization process, in which they were stripped of their lands, beliefs, and their freedom as a person, reducing them to objects^(6,24-25), by the dominant culture^(22,24), considered as superior beings^(20,22,24-25,29).

Likewise, they recognize that this oppression causes a loss of identity in the indigenous, leading them to forget their traditional codes and, especially, to respect women, considered as the "life giver"(17,24). What is consistent with some authors, who describe that such historical oppression generates in those who have been oppressed the internalization and normalization of the patriarchal oppression, which in turn creates perspectives of male superiority, violent behavior and control^(7,25).

Thus, as they were immersed in an environment of violence in the daily lives of the families characterized as extended families^(19-20,24), children since their childhood, were involved in the dynamics of violence exercised by parents, uncles and close relatives, repeating the patterns of violence they witnessed^(20,24-25). This reaffirms what some authors have described in relation to which oppression, and violence is repeated throughout the generations until the victim or the oppressed does not conceive conscience to face the oppressive domination and seek the social transformation of that reality⁽⁷⁻⁸⁾.

Poverty, lack of education and social support were associated with drug abuse and alcohol consumption that

is very common in indigenous communities^(17,22-24). This pattern of consumption was a trigger for violence in families. At the same time, alcohol consumption caused the absence of parents; which, in turn, caused the deterioration of the family bonding and disturbing behaviors in children who grew up without parental attention^(17,24-25). Other authors⁽²⁹⁾ have also found that the domestic violence in indigenous populations was associated with alcohol consumption, affecting the family union.

On the other hand, the unhappiness that some experienced from children, being abandoned by their parents, studying in boarding schools, have also greatly affected the lives of these children^(17,22). They grew up with feelings of anger, and in adulthood when they had some affective relationship they wanted to have control of things so as not to feel the loss they experienced as children. With regard to this, some authors refer that having control over someone is a way to recover the norms of sexist roles when they feel threatened^(7,10).

Consequences of violence

Living in a hostile environment has serious consequences on the lives of indigenous women, such as depression, stress, insomnia, fear, and suicide⁽¹⁹⁻²⁰⁾. Most women endured violence on the part of their partners not to leave their children without a father figure or financial issue. However, this sacrifice brought more consequences to the children, since some of them tended to abandon school, to self-harm, as well as to manifest aggressive behavior^(19-20,25). Violence not only affected women, but was also extended to all the members of the family, breaking the communication and the fundamental affective bonds in human relations.

Violence, in addition to affecting the mental health, has documented other consequences, such as risky sexual practices, decreased ability to establish emotional bonds in the exercise of motherhood, alcohol and illicit drug use, which impacts women's health⁽¹⁾.

Dynamics of interaction in situations of violence

As violence is experienced, the roles played in this process are dynamic because they change over time. At first, people play the role of the aggressor⁽²²⁾ or the role of victim⁽²¹⁻²²⁾. Subsequently, with the normalization and internalization of violence, the role of victim becomes an aggressor and vice versa, or to be a victim and an aggressor at the same time⁽²²⁾.

The findings also revealed that some victims and aggressors broke with the cycle of violence based on the therapies used, hospitalizations in formal institutions and healing processes⁽²²⁾. In the struggle faced by the oppressed against the oppressor to recover his humanity that was stolen, it only makes sense if they do not become oppressors of the oppressors.

How to deal with violence

In the context of experiencing violence, the indigenous population has also identified how they can stop the violence that affects them: by recognizing that they have to take up their ancestral values of respect for life, re-learning their experiences, opening themselves and speaking the truth through discussion circles⁽²⁴⁻²⁵⁾. They have also recognized that the spiritual part is essential for the human being to be in harmony and in balance with life and that the connection of the spirit with the soul and body is necessary in the healing processes.

In this way, the study's findings allowed us to identify the richness of the spiritual connection that identifies indigenous people, and which has been stripped by the dominant culture in an attempt to transform the "Indian and rescue the man". A dominant culture with an individualistic, dehumanizing view, with the desire to control and be more than all⁽⁷⁾.

The evidence from this study reveals the urgent need for the intervention of the nursing professional in identifying the phenomenon of violence in their daily practice. It also requires the training of professionals in cultural competence, given to the cultural construction of gender roles; thus, provide culturally congruent care to the culture of each group of indigenous population that is addressed.

CONCLUSIONS

The violence identified through the five categories provides visibility for the phenomenon that manifests itself in a severe form in indigenous communities. This makes it an emerging social problem that must be addressed urgently, and the findings represent an area of opportunity for the nursing professional whose central focus is the human care. In order to do this, it is necessary to understand how violence in indigenous communities is experienced; the associated factors; the consequences of it; to recognize the socio-cultural contexts in which it occurs that allows health professionals to design interventions aimed at prevention of the violence, as well as breaking with the intergenerational patterns of violence, which must be culturally specific to each context.

Therefore, it was possible to identify that the indigenous communities have been dismantled of their beliefs, living in a world determined by the dominant culture. The recommendations that the Indians made of bringing back the connection with their traditional values and teachings that allowed them to have a more harmonious relationship between men and women should be reconsidered in future interventions, taking into account the active and reflexive social participation of indigenous communities that contribute to the construction of a more humanized society.

Finally, one of the limitations of the study is the number of included studies, being still invisible in the national context; nevertheless, the majority of the articles were focused on the domestic violence, highlighting the need to include more articles that address other types of violence, so it is recommended that more qualitative research be done because of the variability of contexts.

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