



INPUT REQUEST

Understanding the Path Forward: First Nations/Aboriginal Mental Wellness and Substance Use

Tri-partite Strategy Council on Mental Wellness and Substance Use

January 27, 2012

INPUT REQUEST

The Transformative Change Accord: First Nations Health Plan (TCA: FNHP) and Tripartite First Nations Health Plan (TFNHP) has three actions related to mental health, addictions and suicide prevention. Of these three Action Items # 8 states: “Adult mental health, substance abuse as well as young adult suicide will be addressed through an Aboriginal Mental Health and Addictions Plan.”

A British Columbia (BC) First Nations/Aboriginal Mental Wellness & Substance Use Strategy Council was established in 2011 to oversee a strategic direction for Mental Wellness & Substance Use.

The tripartite partners as represented by the First Nations Health Society, the Provincial Government of BC and Health Canada are committed to working together and recognize the on-going work by First Nations/Aboriginal communities in mental wellness and substance use planning. Important to the Strategy Council is that a strategic plan also recognizes and include Métis people, off-reserve and non-status First Nations. The BC Association of Aboriginal Friendship Centres (BCA AFC) and the Métis Nation British Columbia (MNBC) have done significant work with their communities; and thus their visions and contributions for future planning compliments the work and vision by BC First Nations communities.

Mental, Physical, Emotional and Spiritual balance is at the core of First Nations/Aboriginal¹ world-view and way of life. In most indigenous cultures there are teachings that give expression to these concepts and approaches to achieving this balance.

Many factors have contributed to the current mental wellness and substance use concerns for First Nations/Aboriginal people; some of these factors include: colonization, assimilation, systemic-discrimination, loss of tradition, loss of language and culture, residential schooling, and child apprehension. Despite these challenges our communities remain resilient and continue to move forward, seeking solutions for restored balance.

While there exist some mental wellness services and practical measures in place for First Nations/Aboriginal people, there still exist significant gaps in services and inequitable access for communities when it comes to mental wellness and substance use.

A process of collecting wisdom, advice and guidance began through previous forums, meetings and regional caucus sessions hosted by the First Nations Health Society (FNHS) between 2007 – 2011. We would like ask for your assistance further in providing focused input through our

¹ First Nations/Aboriginal will be used throughout this document, indicating that the topic is inclusive to all Aboriginal people (including non-status, off-reserve, Metis and Inuit) and not focussed primarily on First Nations people on-reserve.

online questionnaire which will help us identify collective solutions by focusing our energies, individually, at community, and for service providers.

What will my input be used for?

Your input will help inform the development of a document that will summarize themed key concepts, strategies and solutions to improve First Nations/Aboriginal mental wellness and address substance use challenges in BC. The summary document will then help shape the development of a draft First Nations/Aboriginal Mental Wellness and Substance Use Plan.

Why is my input important?

We need to build on the wealth of knowledge, experience and expertise of a broad range of individuals, communities and service providers in order to effectively focus our collective insight. Your help in this regard will help the tripartite partners understand how to support what best needs to occur over the coming years to ensure efforts around mental wellness and substance use are effective and successful.

What will become of my input?

Your individual results will not be shared, but collective anonymous results will be summarized for all of BC and by Health Authority region. To assist with keeping your responses confidential, please do not add any information that could identify you. The online tool for the questionnaire maintains anonymity, and we will be auditing input to ensure that respondents do not inadvertently provide identifying information.

We encourage you to self-identify as First Nations (either on *or* off-reserve and status *or* non-status), Metis, Inuit or Non-Aboriginal.

How can I provide input?

All interested and willing persons wanting to provide input are welcome to participate. Input will be collected through an online questionnaire that can be found at: <http://www.surveymonkey.com/s/MWSU> If you you have any questions on providing input please email Hertha Holland hholland@fnhc.ca. If you are unable to access the questionnaire online, a copy of the questions are provided in the appendix, and can be emailed or faxed in (604) 913-2081

Submissions must be received no later than:

Monday, February 27, 2012 (4:00 PM, PST)

Appendix – Questionnaire

{Note: it is preferred if you can complete the questionnaire online at the following link: <http://www.surveymonkey.com/s/MWSU> . This will make it easier to compile all the feedback, and also ensure anonymity}.

Input Request: First Nations/Aboriginal Mental Wellness

The following set of brief questions relate to the Input Request notice you recently received from the Tripartite Strategy Council for First Nations / Aboriginal Mental Wellness and Substance Use regarding the specifics of the input request.

(If you have not reviewed the input notice yet, please do so before completing the input questions. If you do not have one you can email: Hertha Holland at the First Nations Health Society, hholland@fnhc.ca and request one)

Your input will help inform the development of a document that will summarize themed key concepts, strategies and solutions to improve First Nations/Aboriginal mental wellness and address substance use challenges in BC. The summary document will then help shape the development of a draft First Nations/Aboriginal Mental Wellness and Substance Use Plan.

Your individual results will not be shared, but collective anonymous results will be summarized for all of BC and by Health Authority region. To assist with keeping your response confidential, please do not add any information that could identify you.

It is preferable that you complete the questions online at the link provided, but if you are not able to access the internet please send a completed paper copy to Hertha Holland at the First Nations Health Society at fax: 604-913-2081.

Input Request: First Nations/Aboriginal Mental Wellness

General Respondent Information

1. Please self-identify the group below that best describes you:

- First Nations
- Metis
- Inuit
- Non-Aboriginal
- Other (please specify)

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2. If you identified as Metis please specify the following:

- Metis citizen
- Metis self-identified
- Other (please specify)

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3. If you identified as First Nations please specify the following:

- Live primarily on-reserve
- Live primarily off-reserve
- Other (please specify)

4. If you identified as First Nations please specify the following:

- Status First Nation
- Non-Status First Nation
- Other (please specify)

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5. I am:

- Female
- Male
- Other (please specify)

6. Please indicate which age category you are in:

- 10 - 18 years of age
- 19 - 24 years of age
- 25 - 34 years of age
- 35 - 44 years of age
- 45 - 54 years of age
- 55 - 64 years of age
- 65 - 74 years of age
- 75+ years of age

7. Please indicate which Health Authority Region(s) you live in:

- Vancouver Coastal Health Authority (VCHA)
- Vancouver Island Health Authority (VIHA)
- Fraser Health Authority (FHA)
- Interior Health Authority (IHA)
- Northern Health Authority (NHA)
- Nisga'a Health Authority
- Don't Know
- Other (please specify)

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8. Please indicate any of the descriptors and affiliations listed below that apply to you (Multiple responses accepted):

- | | |
|---|--|
| <input type="checkbox"/> Elder | <input type="checkbox"/> Other Non-Government-Organization (NGO) |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Public Servant (federal) |
| <input type="checkbox"/> Health Director | <input type="checkbox"/> Public Servant (provincial) |
| <input type="checkbox"/> Band Manager | <input type="checkbox"/> Metis Nation British Columbia |
| <input type="checkbox"/> Chief and/or Elected Leader | <input type="checkbox"/> Academic and/or Researcher |
| <input type="checkbox"/> Health Portfolio Holder/Lead (political) | <input type="checkbox"/> Direct Health Service Provider |
| <input type="checkbox"/> Friendship Centre | <input type="checkbox"/> I don't work in First Nations/Aboriginal Health |
| <input type="checkbox"/> Metis Non-Profit Organization | <input type="checkbox"/> I work in First Nations/Aboriginal Health |
| <input type="checkbox"/> Other (please specify) | |

Input Request: First Nations/Aboriginal Mental Wellness

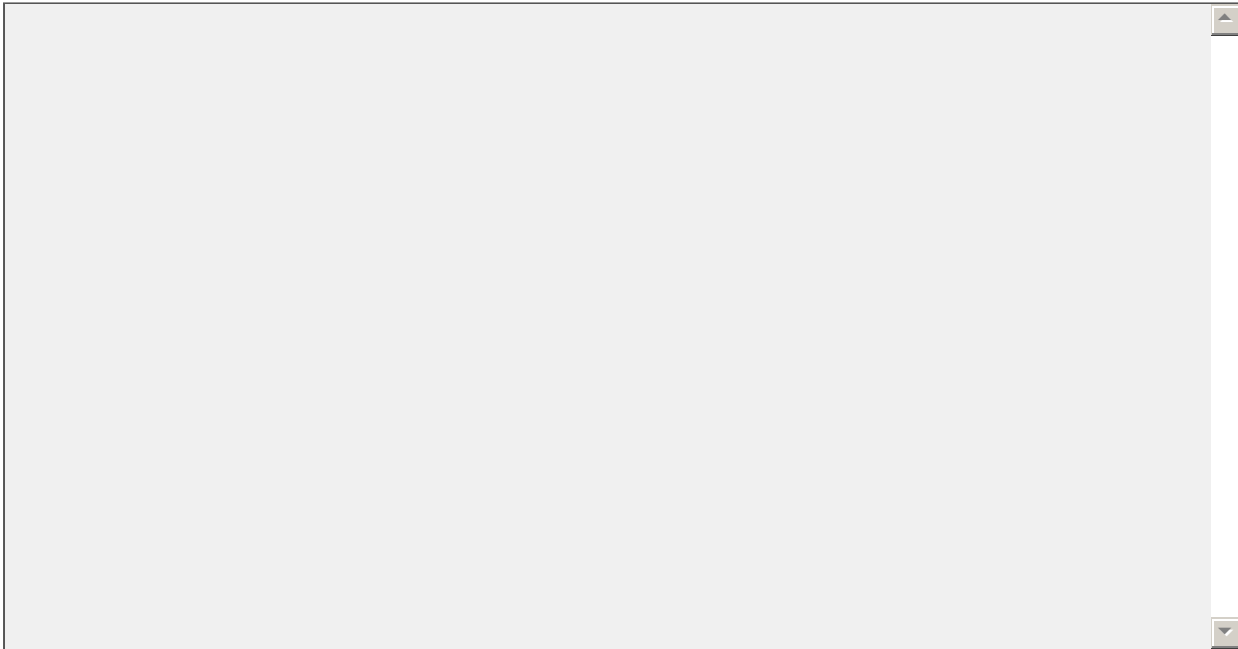
There are six input questions in this short survey.

9. What does it mean to be mentally well? Please provide some concrete examples of mental wellness from your perspective.

e.g. "A strong belonging and sense of connection to my family and extended family"

e.g. "An ability to access and be meaningfully involved in desired activities and programs"

e.g. "Access to use of traditional medicines and ceremonies"



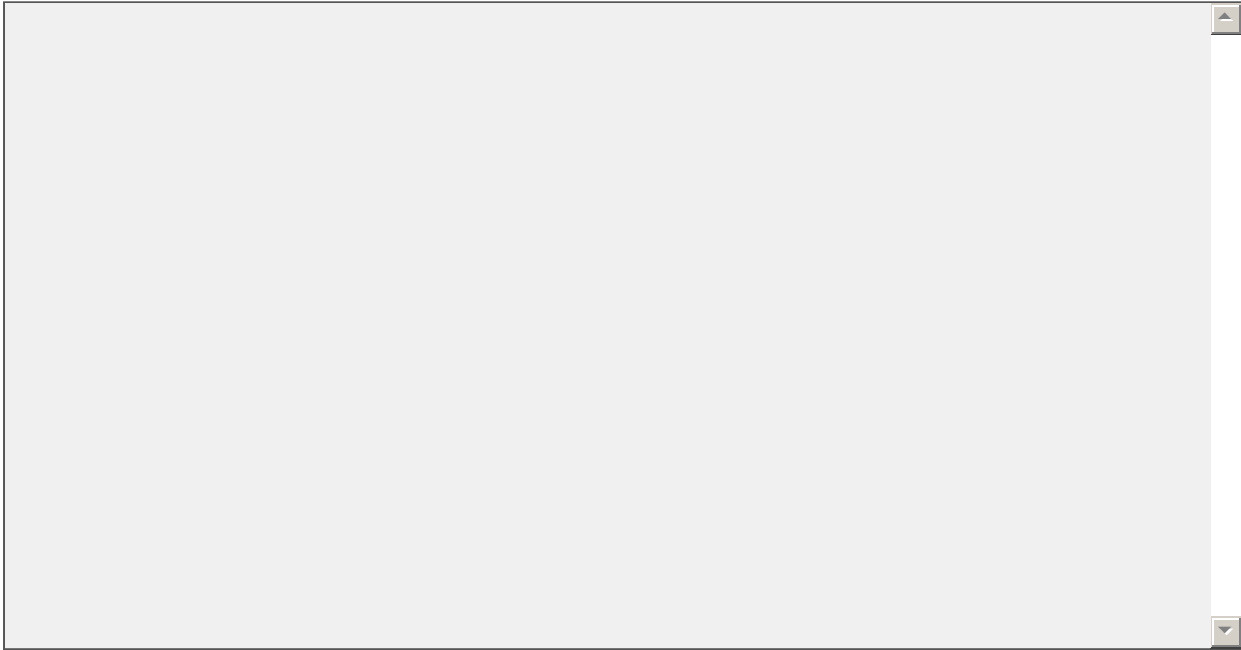
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10. What are some examples of activities, programs and policies that promote mental wellness? (in any setting)

e.g. "I feel happy when I get the opportunity to go fishing with my relatives"

e.g. "Our school policy is to teach the local traditional language"

e.g. "My friend went to an Aboriginal talking circle, which helped her learn about her identity"



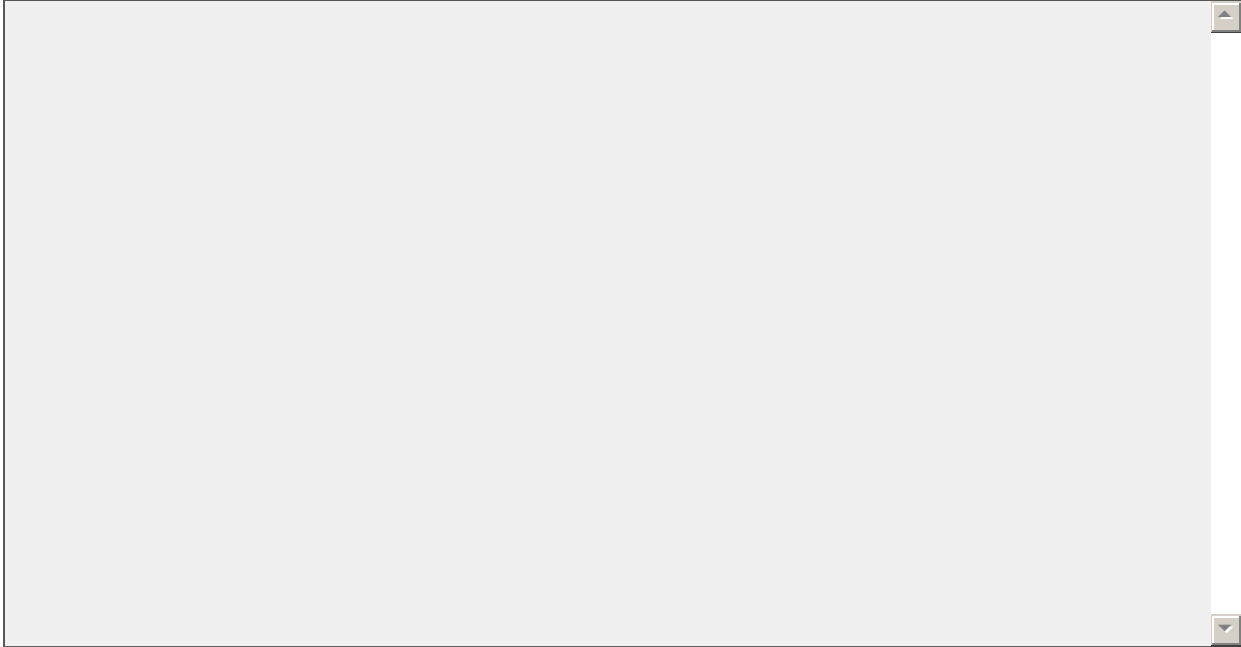
Input Request: First Nations/Aboriginal Mental Wellness

11. What do you think are some ways to address substance use challenges?

e.g. "There needs to be a needle exchange in the community"

e.g. "My parents live a healthy lifestyle, and because of this, I do also"

e.g. "We need more substance use support programs in our community"



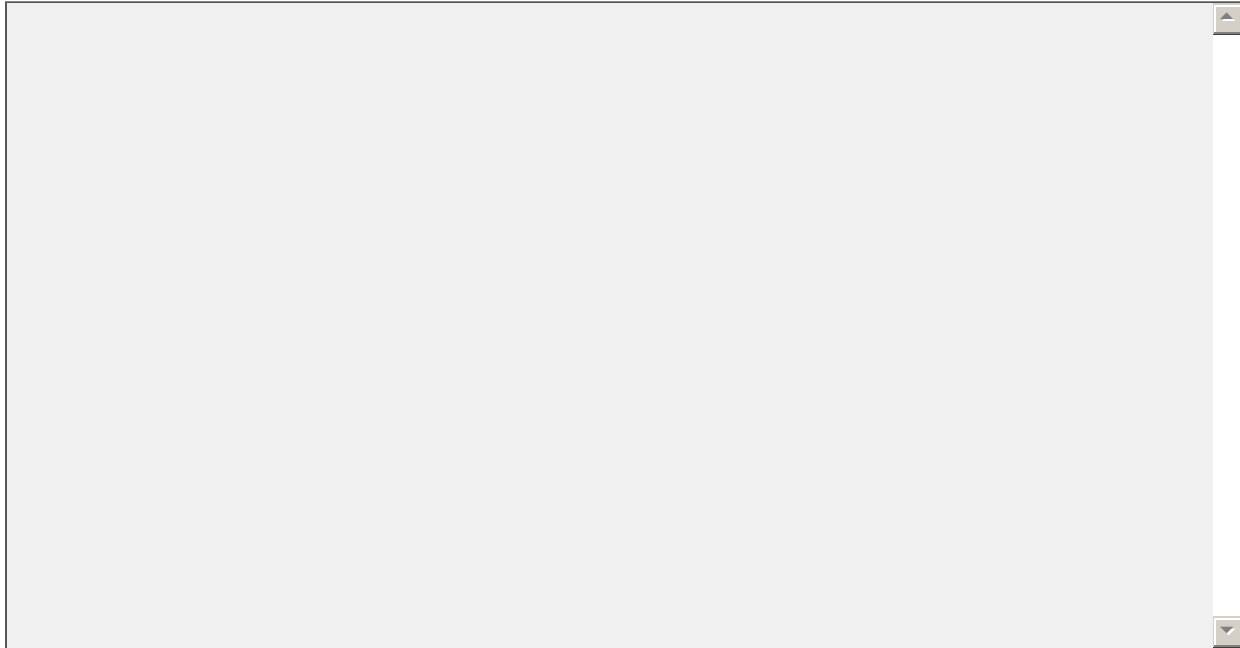
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12. What changes need to be made to improve mental wellness for you, your family and/or your community/nations?

e.g. "I need to know that the basic needs of my family are being met so I can access treatment"

e.g. "We need more services in my community"

e.g. "I want to see more employment and recreational options for youth"



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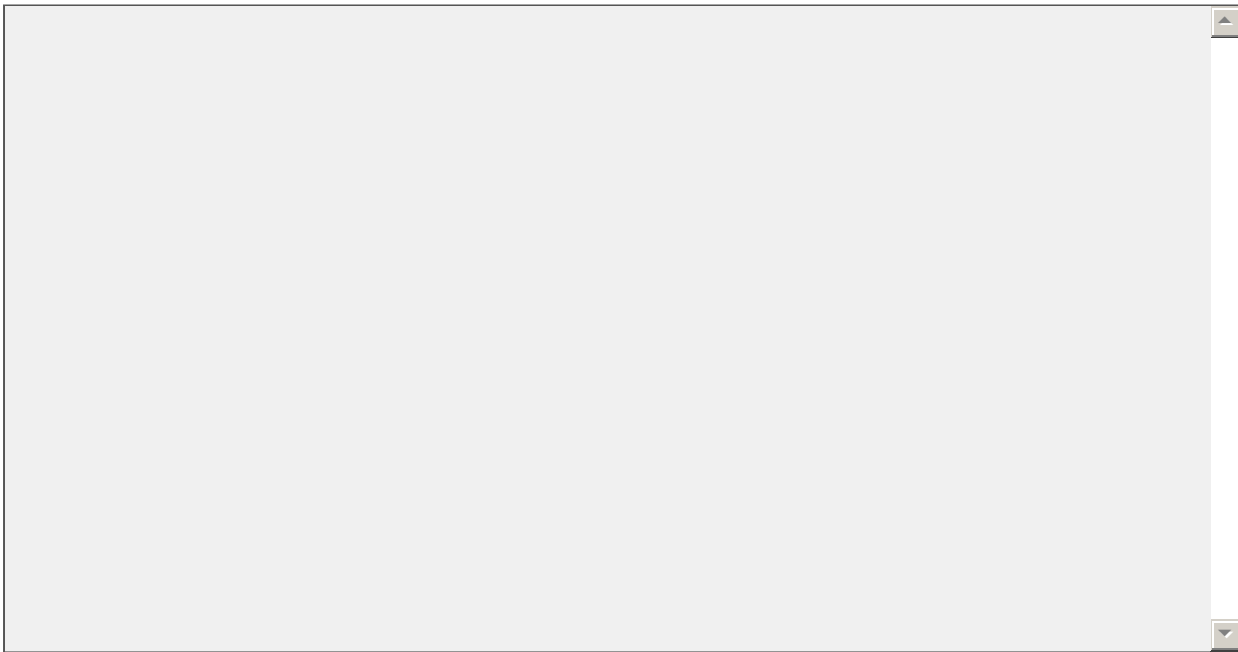
13. What are some solutions for improving mental wellness for First Nations/Aboriginal people?

e.g. "Actively engaging children and youth in conversations about mental wellness and/or substance use"

e.g. "Develop a 'single-point of access' model of delivery and follow-up for people going into detox or treatment programs"

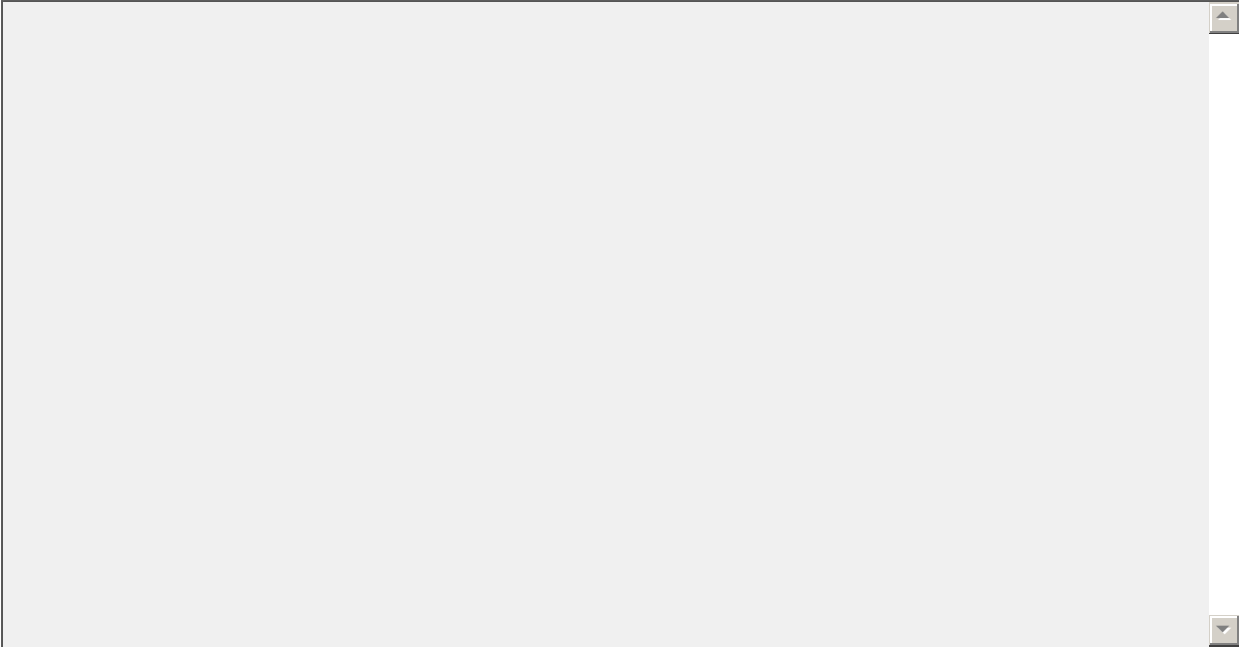
e.g. "Share information about community approaches to reducing the risk of suicide"

e.g. "Develop and integrate community based services and supports for people with HIV/AIDS who have substance use and/or mental wellness issues"



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14. PLEASE PROVIDE ANY ADDITIONAL FINAL COMMENTS YOU WISH TO MAKE REGARDING FIRST NATIONS / ABORIGINAL MENTAL WELLNESS AND SUBSTANCE USE.

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Input Request: First Nations/Aboriginal Mental Wellness

Thank you for taking the time to provide this input.

Your input will help shape the development of a summary document for First Nations/Aboriginal Mental Wellness to help guide discussion and focus our efforts and energies moving forward.

Your individual results will not be shared, but collective anonymous results will be summarized for all of BC and by Health Authority region.

If you have any follow-up questions please email Nicole Hetu at nhetu@fnhc.ca