Engaged in Mental Wellness Team fund transfer with Health Canada

Registered non-for-profit with the following mission:
- Develop and implement services and activities that promote wellness and improve the quality of life for Chisasibi’s population specifically, and support, more globally, regional Cree wellness by promoting Cree culture and language
- Initiate and participate in research, community development, and social innovation process and activities that respond to the needs and priorities of our community
- Support and reinforce knowledge mobilization and transfer of local Cree knowledge related to wellness by strengthening intergenerational knowledge transfer
- Receive and manage donations, funding, and other valuables (property, securities, etc.)
Board of Directors:
Lawrence House, President; Eddie Pashagumiskum, Vice President; Beverly Cox, Programs Manager; Emily Sam, Treasurer
How we got here
**Community Initiatives Fund (CHB)**

- Transfer of Traditional Knowledge project (various culture-based services)
- 3 Community Symposia on Wellness (identify service gaps & priorities)
- 2 Land-based healing intakes (documented experiences)

2009-2012

**Mental Wellness Team (Health Canada)**

- Initial submission in Sep. and funds secured in Jan.
- Land-based healing model developed in consultation with the Nishiyiuu Department (CHB)

2013-2014

2015-2016

**Mental Wellness Team (Health Canada)**

- Won best workshop at Honouring Our Strengths National Conference (2014)
- Land-based and other services in the community (ongoing)
- Chisasibi Wellness Plan (2015-2020)
- Training (Community Addictions Workers with Nechi Institute)

- Group & individual counselling: Gookoomnuch Gathering (CWEIA); Residential School Gathering
- Training (Culture as Foundation with Thunderbird Foundation)
- Attended MWT Gatherings (2014-2016)
Mental Wellness Team
(Health Canada)

- 1 Land-based healing intakes (family model)
- Cultural week
- Intensive week-long training – Nomadic University - in collaboration with DIALOG-Aboriginal peoples research and knowledge network/INRS
- Traditional Healing Gathering; Residential School Gathering; ongoing counselling

2017-2018

Funding Transition confirmed by Health Canada – awaiting signature of funding agreement

- Incorporation Inshiyuu Miyuupimatisiuun to access additional funding
- Multi-Year Work Plan for Transitional Funding Model with Health Canada (flexible 3 year guaranteed funding)
- Land-based program with Rehab Team (CHB); planning sessions with grandmothers; parenting workshop with elders

Mental Wellness Team
(Health Canada)
Core principles of
Inshiyuu
Miyuupimatisiunuun
Cultural safety uses a person-centered model of care that situates overall health within the cultural, historical, economic, and political (the social determinants of health) context of the service users.

Calls for a critical analysis of institutional discrimination and colonial relationships by challenging the power imbalances inherent in the relationship between the health care provider and the Indigenous health care recipient.

Aims to shift this imbalance by empowering the care recipient to actively participate in decisions regarding his or her health (including the type of treatment and care used) while also building the health care providers’ cultural competencies that foster a respectful bicultural encounter.

Most important the cultural safety approach stresses that the freedom of health care choice rests with the service users as they define their healing path.
The Continuum aims to support all individuals across the lifespan, including those with multiple complex needs. Physical and mental health conditions usually develop gradually, and depending on the ailment, people may go more or less rapidly through the stages from health, to having risk factors, to actually having symptoms.

Thus the continuum of care includes a repertoire of prevention, intervention and aftercare activities.

Broadly speaking the continuum includes:
- Education, Promotion, Prevention, and Community Development
- Early Identification and Intervention
- Crisis Response
- Coordination of Care/Care Planning
- Trauma-Informed Treatment
- Support and Aftercare
- Whole health refers to the interconnection between mental, physical, spiritual and emotional behaviour – purpose, hope, meaning, and belonging. A balance between all of these elements leads to optimal wellness.

- Culture therefore is viewed as an intervention model. We borrow the following concept from the First Nations Mental Wellness Continuum Framework (FNMWC).

The key task for supporting wellness is to facilitate connections at each of these levels and across the four directions. This balance and interconnectedness is enriched as individuals have purpose in their daily lives whether it is through education, employment, care giving activities, or cultural ways of being and doing; hope for their future and those of their families that is grounded in a sense of identity, unique indigenous values, and having a belief in spirit; a sense of belonging and connectedness within their families, to community and culture; and finally a sense of meaning and an understanding of how their lives and those of their families and communities are part of creation and a rich history (FNMWC, 2014: 5).
At every stage of life, health is determined by complex interactions between social and economic factors, the physical environment, and individual behavior. These factors are referred to as 'determinants of health'.

They do not exist in isolation from each other; rather, their combined influence determines health status.

The Public Health Agency of Canada (PHAC) recognizes twelve determinants of health: culture, gender, health services, income and social status, social support networks, education and literacy, employment and working conditions, social environments, physical environments, personal health practices and coping skills, healthy child development, and biology and genetic endowment.

In Indigenous contexts social justice issues such as racism, discrimination and inequalities in peoples’ power and resources function as determinants of health due to the particular colonial history and contemporary discrimination.
Objectives & Structure of Mental Wellness Team

The role and priorities of Inshiyuu Miyuupimatisiuun
What is a Mental Wellness Team

- The Mental Wellness Teams (MWT) concept is a community-based and multi-disciplinary team approach to providing mental health and addictions services in First Nations and Inuit communities that blends or enhances traditional, cultural and mainstream approaches.

- The MWT approach is designed to complement and support efforts that are currently in place in First Nations on-reserve and Inuit communities.

- Each Mental Wellness Team comprises unique models which respond to their respective community strengths and needs but nonetheless share the goal of demonstrating the five pillars of the MWAC strategy.
What is a Mental Wellness Team

- Mental Wellness Teams are multi-disciplinary in nature and have flexible service delivery models spanning the whole spectrum of services from prevention to post-treatment follow up.

- Their goal is to enhance collaboration among clinical and community experts in order to increase and improve culturally safe mental health and addictions services.

- By design, they promote community engagement, community development and support self-determination with respect to mental wellness with the aim of improving health outcomes.
What is a Mental Wellness Team

- Mental Wellness Advisory Committee’s (MWAC) First Nations and Inuit Mental Wellness Strategic Action Plan identified five priority goals or pillars:

1. To support the development of a coordinated continuum of mental wellness services for and by First Nations and Inuit including traditional, cultural and mainstream approaches.

2. To disseminate and share knowledge about promising traditional, cultural and mainstream approaches to mental wellness.

3. To support and recognize the community as its own best resource by acknowledging diverse ways of knowing, and by developing community capacity to improve mental wellness.

4. To enhance the knowledge, skills, recruitment and retention of a mental wellness and allied services workforce able to provide effective and culturally safe services and supports for First Nations and Inuit.

5. To clarify and strengthen collaborative relationships between mental health, addictions and related human services and between federal, provincial, and First Nations programs and services.
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Wellness Priorities
Meet increasing needs and requests from community members and clients for traditional healing and medicine:

- Establish regular visit schedule for healers & counselors (monthly)
- Maintain Eeyou healing activities
- Diversify healing activities based on clients’ need and requests
- Co-host cultural events, seasonal ceremonies and celebrations and encourage CBHSSJB employee and physician attendance
- Reach out to local resource people, especially elders, for input and participation in Eeyou healing programming and delivery
- Increase the role of healers and elders in the programming
Community Health

- Enhance services for children and families, mostly focused on workshop-type activities that can include but are not limited to:
  - Pre-natal health
  - Traditional parenting
  - Conflict resolution training
  - Legal training (linking with the Justice Department)
  - Residential School Commemoration & Memorial
  - On-the-land programs and Weekend retreats
Strengthen individual self-esteem and build capacity for youth

- Collaborate with Youth Clinic in programming
- Youth outreach programs including
  - Rites of passage training & awareness
  - On-the-land programs
  - Food security & healthy lifestyles
  - Sexual abuse
  - Violence
  - Suicide prevention
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3-Year Work Plan
<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities</th>
<th>Schedule of Activities</th>
<th>Outcome Measures</th>
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</thead>
<tbody>
<tr>
<td>Improve access to culture-based wellness services</td>
<td>Land-based program delivery</td>
<td>Four times a year</td>
<td>Number of participants and Native Wellness Assessment (Thunderbird Partnership Foundation)</td>
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<td></td>
<td>Cultural week</td>
<td>Twice a year</td>
<td>Number of participants; number of participating elders; number of participating partners</td>
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<td></td>
<td>Traditional Healing Gathering</td>
<td>Once a year</td>
<td>Number of participants; number of traditional healers; number of interventions</td>
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<td>Community kitchen</td>
<td>Ongoing throughout the year</td>
<td>Number of participants; number of participating elders; number of participating partners</td>
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<td>Group &amp; individual interventions</td>
<td>Bi-monthly</td>
<td>Number of participants; number of traditional healers; number of interventions</td>
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<td></td>
<td>Family retreats/Mother &amp; child</td>
<td>Twice a year and punctual activities throughout the year (linked with community kitchen)</td>
<td>Number of participants; number of traditional healers; number of interventions; number of participating elders; number of participating partners</td>
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<tr>
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<tr>
<td>Improve the participation of community members in defining wellness priorities</td>
<td>Annual Community Wellness gathering</td>
<td>Once a year</td>
<td>Number of participants; number of participating partners; final report</td>
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<tr>
<td>Participation at local and regional gatherings</td>
<td>Presentations and membership in various local and regional working groups</td>
<td>Ongoing (as needed)</td>
<td>Number of gatherings attended</td>
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<tr>
<td>Participation at national and other events</td>
<td>Presentations at events</td>
<td>Ongoing (as needed)</td>
<td>Number of presentations</td>
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<tr>
<td>Knowledge mobilization tools</td>
<td>Develop various toolkits and other products connected to the work of the CMWT</td>
<td>Ongoing (as needed)</td>
<td>Number of products (eg. pamphlets, blogs, radio programs, etc.)</td>
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<td>Goal # 3</td>
<td>Support and recognize community as its own best resource</td>
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<td>Activities</td>
<td>Schedule of Activities</td>
<td>Outcome Measures</td>
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<tr>
<td><strong>Engage elders in the design, delivery and evaluation of wellness programs and services</strong></td>
<td>Meetings with Elders Advisory Circle</td>
<td>Four times a year</td>
<td>Number of participating elders</td>
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<td><strong>Increase local capacity</strong></td>
<td>Hire local resources (traditional healers, land-based camp helpers, cultural resources, elders, etc.)</td>
<td>Ongoing (as needed)</td>
<td>Number of hired help (seasonal, part-time)</td>
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<tr>
<th>Goal # 4</th>
<th>Enhance mental wellness and allied services workforce</th>
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<td><strong>Objectives</strong></td>
<td>Activities</td>
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<tr>
<td><strong>Deliver staff training</strong></td>
<td>Aboriginal-based training and skill development (eg. Thunderbird Partnership Foundation, ICBOC) Workshops</td>
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<td><strong>Deliver customized community capacity building and training</strong></td>
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<td>Objectives</td>
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<td>Build multi-party partnerships to advance the integration of Eeyou (Cree)</td>
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<td>culture in service provision</td>
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<td>**Develop Intake/Outtake procedures and structured aftercare though the</td>
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<td>development of a postvention treatment plan for each client</td>
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<td><strong>Develop a systematic and coordinated case management process/system</strong></td>
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<td><strong>Conclude partnership agreements between entities within the Cree territory</strong></td>
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<td>for referral/intake process, for intervention, and aftercare.</td>
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<td><strong>Symposium on health governance (with local and regional institutions</strong></td>
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<td>and service providers)</td>
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<td><strong>Access specialist services through CBHSSJB network</strong></td>
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<td><strong>Broader engagement of partners, regions and provinces that is likely to</strong></td>
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<td>lead to significant and lasting improvement in the integration of health systems</td>
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Governance Structure
We recognize that the long-term health and wellness of clients and community members at large rests on the availability of an array of services and programs in the community (from prevention to postvention). The Three-Year Health Plan will primarily focus on community designed and delivered programs based on traditional and cultural teachings that ensure holistic health and healing services. The goal is to develop an effective continuum of care, from prevention and promotion, to intervention and postvention.