

# Mind and Spirit: Promoting Mental Health and Addictions Recovery in the Northwest Territories

## Tête et esprit : Encourager le rétablissement en santé mentale et en lutte contre les dépendances aux Territoires du Nord-Ouest

### MENTAL WELLNESS AND ADDICTIONS RECOVERY ACTION PLAN

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### PLAN D'ACTION SUR LE MIEUX-ÊTRE PSYCHOLOGIQUE ET LE TRAITEMENT DES DÉPENDANCES





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# MINISTER'S MESSAGE

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The development of the *Mental Wellness and Addictions Recovery Action Plan* is the final commitment under the Strategic Framework, *Mind and Spirit: Promoting Mental Health and Addictions Recovery in the Northwest Territories* and follows the release of the *Child and Youth Mental Wellness Action Plan* in September 2017. This work supports the current mandate of the Government of the Northwest Territories (GNWT) to focus on mental wellness and addictions recovery and healing through person- and family-centered and culturally safe approaches.

This Action Plan combines mental health and addictions as both have roots in a variety of complex socio-economic factors including biology, genetics and life experience. To have them combined in the same action plan supports the interconnectedness of the two and the collaborative nature

that should be present throughout an individual's recovery journey. We know that mental health and addictions do not exist in isolation and joint action is the only way to impact real change. As such, this action plan includes input, partnerships and commitments from a variety of government departments and community partners to ensure coordinated, wrap-around support and a holistic approach to care.

Many Northerners have been engaged in the development of this Action Plan, and their insights inform the direction of this Action Plan and the delivery of mental wellness and addictions recovery services and supports throughout the NWT. Our aim is to continually bring the voices and lived experiences of residents to the centre of our work as we create a mental wellness and addictions recovery system that meets the unique and changing needs of individuals, families and communities.

The completion of this work represents the beginning of a system-wide transformation that truly places people and families at the center of care, values the unique needs of each person's journey, integrates culture and community, promotes collective action, and strengthens our approach with best evidence of what works. As we move forward with implementing this Action Plan and carrying out the work ahead of us, we do so with the passion and drive to create safer spaces, increase accessibility and enhance approaches to care across the spectrum of mental health and addictions recovery in the NWT.

Glen Abernethy  
Minister of Health and Social Services

# EXECUTIVE SUMMARY

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Through the *Mind and Spirit Mental Health and Addictions Strategic Framework* (Strategic Framework), *Child and Youth Mental Wellness Action Plan* and this *Mental Wellness and Addictions Recovery Action Plan*, the Government of the Northwest Territories is pursuing transformative system change in mental wellness and addictions recovery with the aim to ensure services reflect a person- and family-centered, recovery-oriented, trauma-informed and culturally safe approach to care. With these changes, people will experience positive support at any point of entry into the system, and continually be engaged as

partners in their own, individualized care as they move toward healing and recovery.

The goal of this Action Plan is for individuals and families to be offered services and supports that foster hope, promote self-determination and build partnerships that support mental wellness and addictions recovery, and respect the uniqueness of each person's journey.

To achieve this goal and the transformative system change we seek, four main objectives are being pursued over the course of the next two years:

## 01 REDUCE STIGMA AND INCREASE AWARENESS AND PREVENTION

We are all affected by mental health and addictions, whether personally or through family and friends. Mental health concerns affect more people in Canada than some of the major physical disorders, yet 60% of individuals will not seek help due to the fear of being judged or labelled (Mental Health Commission of Canada, 2019). Having a clear understanding of mental health and addictions, as well as when a person might need to seek help, is important for the wellness of individuals, families, communities and our territory as a whole. Equally important is knowing what services and supports are available and how to access them.

Reducing stigma and increasing awareness can have far-reaching effects and contribute to the overall prevention of or reduction in severity of mental health or addictions concerns, allowing for people to recognize signs or symptoms in themselves or others and/or reach out for support when they need to.

Over the next two years these actions aim to create a territorial community where people are more likely to reach out for help and know where to go for support for themselves or others. These actions also ensure that services and service providers are welcoming, non-judgmental, and provide care that is responsive to the individual and family and their unique needs.

# EXECUTIVE SUMMARY

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## 02 INCREASE SUPPORTS AND TRANSFORM THE CULTURE OF PRACTICE WITHIN THE MENTAL WELLNESS AND ADDICTIONS RECOVERY SYSTEM TO MORE FULLY REFLECT A SEAMLESS CARE PATHWAY MODEL IN THE NWT

As a part of the Seamless Care Pathway model, the delivery of services and supports must be grounded in a person- and family-centred, recovery-oriented approach where relationships are valued, differences are celebrated and the right level of support is available when needed. This model is about transforming entire systems of care by embedding an understanding that a person's safety, choice, and control is a priority. In this way, professionals work together with individuals and families using a practice framework that embodies and promotes continuous learning, curiosity, collaboration and inclusion. Services are informed by the people who access them and are responsive to a spectrum of needs ranging from informal to formal supports, including family and friends, peer support, e-based options, community and land-based options, inpatient care, and more.

Over the next two years, targeted actions will focus on enhancing the spectrum of supports available to NWT residents as well as improving connections between the Health and Social Services system and Indigenous and non-Government partners delivering community based services and supports. Actions will also be taken to improve the cultural competency of practitioners and enhance approaches to care that reflect a Seamless Care Pathway model.

## 03 IMPROVE QUALITY, COORDINATION, AND INTEGRATION OF SERVICES

In line with a person- and family-centered and recovery-oriented approach, it is important that people experience the best possible care and outcomes when accessing and receiving supports for mental wellness and addictions recovery. This includes a holistic approach to care where services are coordinated and collaborative and meet the unique and changing needs of specific individuals and families.

Adopting a continuous quality improvement approach is a key part of maintaining a responsive and effective system that centres around those who access it. Quality service happens when the voices of individuals with lived/living experience are heard, when we track and utilize key performance indicators, and when care providers are supported to improve their skills and competencies.

# EXECUTIVE SUMMARY

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## 04 STRENGTHEN PEER SUPPORT, AFTERCARE, AND COMMUNITY-BASED OPTIONS FOR PEOPLE LIVING WITH ADDICTIONS

Support for addictions recovery looks different for every individual and involves an approach that recognizes the biological, psychological (e.g., thoughts, feelings, behaviours), social, and spiritual aspects of wellness. This approach is referred to as the biopsychosocial model and combines the mind and the body as equally important focal points in a person's recovery. It recognizes that there is no single road to recovery and highlights the need for individualized care that responds to a person's full range of needs. This can include basic needs (e.g., housing, food), interpersonal relationships, culture, spirituality, counselling/aftercare support, medications for addictions treatment, and more. Recovery can be pursued through an abstinence-based approach, a harm reduction approach, or a combination of both over time.

Over the next two years, actions will focus on the implementation of peer-based, community-based and e-based aftercare support options for NWT residents while also pursuing solutions for basic needs such as safe housing for individuals returning from addictions treatment programs.

In moving forward, all efforts will be monitored in order to ensure quality and to inform future areas for action. In a field that is always changing, the Department of Health and Social Services will also continue to make efforts to stay current, chase innovation, and continue to listen to and integrate the voices of Northerners into service planning and implementation as we work toward meaningful change.



# SOMMAIRE

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Au moyen du *Cadre stratégique sur la santé mentale et la lutte contre les dépendances Tête et esprit*, du *Plan d'action sur le mieux-être mental des enfants et des jeunes* et du présent *Plan d'action sur le mieux-être psychologique et le traitement des dépendances*, le gouvernement des Territoires du Nord-Ouest procède à un changement transformateur du système de guérison en santé mentale et en dépendances afin de veiller à ce que les services reflètent une approche soignante axée sur la personne, la famille et la guérison, adaptée à la réalité culturelle et qui tient compte des traumatismes. Grâce à ces changements, la population bénéficiera d'un soutien positif à n'importe quel point d'entrée dans le système et sera

constamment mobilisée à titre de partenaires à leurs propres soins personnalisés, à mesure qu'ils progresseront vers la guérison et le rétablissement.

Les individus et les familles reçoivent des services et du soutien qui cultivent l'espoir et l'autodétermination, en plus de créer des partenariats qui favorisent le mieux-être psychologique et le traitement des dépendances, tout en reconnaissant que le parcours de chacun est unique.

Pour atteindre ce but et réaliser le changement transformateur du système que nous souhaitons, nous poursuivrons quatre grands objectifs au cours des deux prochaines années :

## 01 RÉDUIRE LA STIGMATISATION ET AUGMENTER LA SENSIBILISATION ET LA PRÉVENTION

Nous sommes tous touchés par la santé mentale et par les dépendances, que ce soit personnellement ou par l'intermédiaire de notre famille ou de nos amis. Les problèmes de santé mentale concernent plus de personnes au Canada que certains des troubles corporels les plus courants, mais 60 % des personnes affectées ne demanderont pas d'aide par crainte d'être jugées ou étiquetées (Commission de la santé mentale du Canada, 2019). Il est important d'avoir une compréhension claire de la santé mentale et des dépendances et de savoir à quel moment une personne peut avoir besoin d'aide, pour le mieux-être des personnes, des familles, des collectivités et de l'ensemble du territoire. Il est tout aussi important que l'on connaisse les services et les mesures de soutien disponibles, ainsi que la façon d'y accéder.

Le fait de réduire la stigmatisation et d'améliorer la sensibilisation peut avoir des effets profonds et contribuer, en général, à prévenir les problèmes de santé mentale ou de dépendance (ou à réduire leur gravité); cela permet aux gens de reconnaître les signes ou les symptômes, tant chez les autres que chez eux-mêmes, et de demander de l'aide lorsqu'ils en ont besoin.

Ces mesures visent à créer, au cours des deux prochaines années, une communauté au sein de laquelle les Téoïso sont plus susceptibles de demander de l'aide et de savoir où aller pour obtenir du soutien, tant pour les autres que pour eux-mêmes. Ces mesures permettent également de s'assurer que les services et les fournisseurs de services sont accueillants, ne portent pas de jugement et offrent des soins adaptés aux besoins uniques de la personne et de la famille.

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## **02** MULTIPLIER LES MESURES DE SOUTIEN ET TRANSFORMER LA CULTURE DANS LA PRATIQUE DES SOINS EN SANTÉ MENTALE ET EN GUÉRISON DES DÉPENDANCES, AFIN QU'ELLE REFLÈTE DAVANTAGE UN MODÈLE DE CHEMINEMENT CLINIQUE INTÉGRÉ AUX TNO

Dans le cadre du modèle de cheminement clinique intégré, la prestation des services et l'application des mesures de soutien doivent reposer sur une approche axée sur la personne, la famille et la guérison, dans laquelle les relations sont valorisées, les différences sont célébrées et un soutien adéquat est offert, au besoin. Ce modèle consiste à transformer des systèmes de soins complets en intégrant la notion selon laquelle la sécurité, le choix et le contrôle d'une personne représentent une priorité. Ainsi, les professionnels collaborent avec les personnes et les familles à l'aide d'un cadre de pratique qui incarne et favorise l'apprentissage continu, la curiosité, la collaboration et l'inclusion. Les services, qui sont adaptés aux personnes qui les reçoivent, peuvent répondre à un vaste éventail de besoins, allant de soutiens sans formalités à des soins encadrés; ces derniers incluent la famille et les amis, les pairs, des outils électroniques, des options dans la communauté ou dans la nature, l'hospitalisation, etc.

Au cours des deux prochaines années, les mesures ciblées seront principalement axées sur l'amélioration de la gamme des mesures de soutien offertes aux Ténois et sur l'amélioration des liens entre le système de santé et de services sociaux et les partenaires autochtones et non gouvernementaux qui offrent des services et des mesures de soutien communautaires. Des mesures seront également prises pour améliorer la compétence culturelle des praticiens et les approches en matière de soins, afin qu'elles reflètent un modèle de cheminement clinique intégré.

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## 03 AMÉLIORER LA QUALITÉ, LA COORDINATION ET L'INTÉGRATION DES SERVICES

En tenant compte d'une approche axée sur la personne, la famille et la guérison, il est important que les personnes reçoivent les meilleurs soins et les meilleurs résultats possible lorsqu'elles ont accès à des mesures de soutien pour leur mieux-être mental et la guérison des dépendances. Cela comprend une approche générale où les soins sont coordonnés et collaboratifs et répondent aux besoins uniques et changeants de personnes et de familles précises.

L'adoption d'une approche d'amélioration continue de la qualité est un des éléments clés du maintien d'un système adapté et efficace axé sur les personnes qui y ont accès.

Un service de qualité devient une réalité lorsque les voix des personnes (qui sont aux prises avec des problèmes ou qui ont des antécédents de problèmes mentaux ou de dépendance) sont entendues, lorsque nous suivons et utilisons des indicateurs de rendement clés, et lorsque les fournisseurs de soins reçoivent le soutien nécessaire pour améliorer leurs aptitudes et leurs compétences.



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## 04 RENFORCER LE SOUTIEN PAR LES PAIRS, LE SUIVI ET LES OPTIONS COMMUNAUTAIRES POUR LES PERSONNES AUX PRISES AVEC DES DÉPENDANCES

Le soutien de la guérison des dépendances est différent pour chaque personne et nécessite une approche qui reconnaît les aspects biologiques, psychologiques (p. ex. pensées, sentiments, comportements), sociaux et spirituels du mieux-être. Cette approche est appelée le modèle biopsychosocial et combine l'esprit et le corps, qui sont des points de convergence tout aussi importants dans la guérison d'une personne. Le modèle tient compte du fait qu'il n'existe pas de voie unique vers la guérison et met en évidence la nécessité de soins personnalisés qui répondent à tous les besoins d'une personne. Cela peut comprendre les besoins de base (p. ex. logement, nourriture), les relations interpersonnelles, la culture, la spiritualité, le counseling, le suivi, les médicaments pour le traitement des dépendances, etc. La guérison peut être réalisée au moyen d'une méthode axée sur l'abstinence ou miser sur des méthodes axées sur la réduction des préjudices, ou adopter une combinaison des deux, au fil du temps.

Au cours des deux prochaines années, les mesures seront axées sur l'application d'options de soutien par les pairs, de soutien communautaire et de soutien par suivi électronique pour les Ténos. On cherchera également des solutions pour répondre aux besoins de base, comme un logement sûr pour les personnes qui reviennent chez elles après avoir suivi un programme de traitement des dépendances.

À l'avenir, tous les efforts seront surveillés afin d'assurer la qualité et d'éclairer les domaines d'action futurs. Dans un domaine en constante évolution, le ministère de la Santé et des Services sociaux s'efforcera également de rester à jour, de faire preuve d'innovation et de continuer d'écouter les Ténos afin d'intégrer leurs points de vue à la planification et à la mise en œuvre des services afin d'apporter un changement significatif.

# INTRODUCTION

In November 2016, the Department of Health and Social Services released the *Mind and Spirit: Promoting Mental Health and Addictions Recovery in the Northwest Territories Strategic Framework (2016-2021)*. The Framework focuses on four strategic directions which together represent a **holistic** circle of care:

**A Focus on Prevention and Early Intervention**

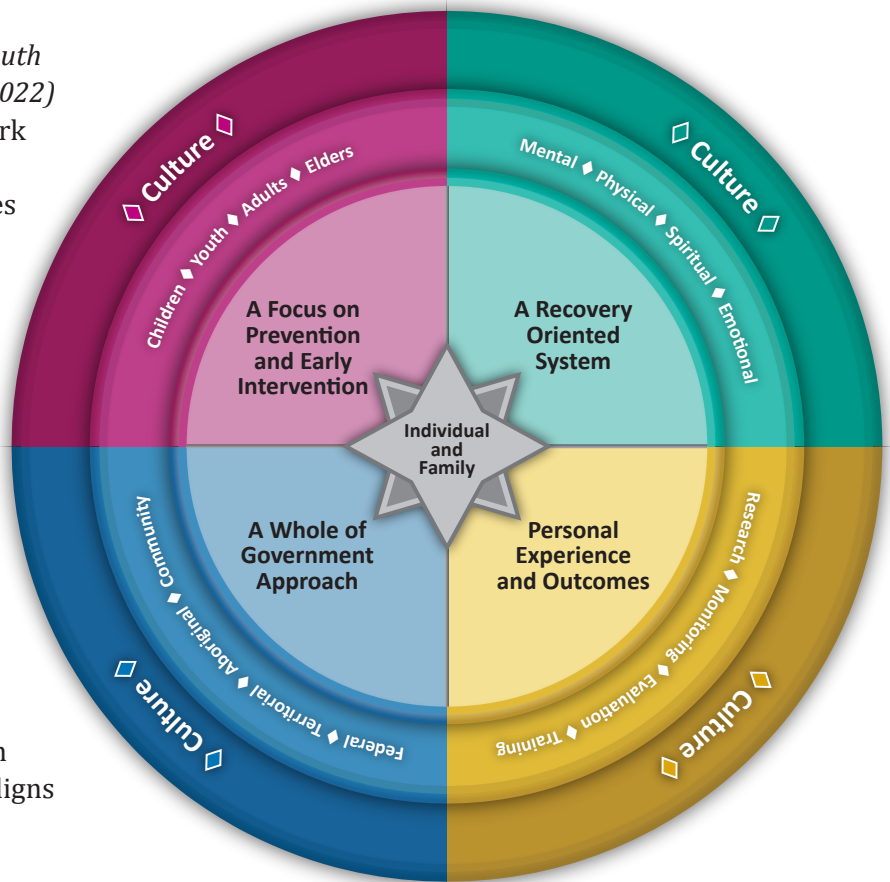
**A Recovery-Oriented System**

**Personal Experience and Outcomes**

**A Whole of Government Approach**

In September 2017, the *Child and Youth Mental Wellness Action Plan (2017-2022)* was released as the first piece of work to be completed under the *Strategic Framework*. The Action Plan captures the voices and experiences of youth across the Northwest Territories and guides the work currently being done in this area.

This *Mental Wellness and Addictions Recovery Action Plan* is the final deliverable under the *Strategic Framework*. While it was originally envisioned as two separate action plans (a *Mental Health Action Plan* and an *Addictions Recovery Action Plan*), this newly combined Action Plan recognizes that these areas are often linked and a joint approach better aligns with best practices.



# INTRODUCTION

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As we work toward meaningful change, the history of colonization, the impact of residential schools, and the social determinants of health must be acknowledged as root causes for many of the challenges facing this territory. Within this context, there is a commitment to support community developed and designed work that connects people to their culture, and supports traditional and land-based healing.

It is also recognized that mental wellness and addictions recovery look different for every individual and can include a spectrum of supports to facilitate healing and connection in various areas of a person's life. These supports can include formal programs and services such as counseling, facility-based treatment, on-the-land healing and peer- or community-based options (e.g., MATRIX program, Alcoholics Anonymous). While not always recognized, informal supports such as family and friends are vital to individual and community wellbeing and recovery. We are not

designed to live in isolation and as such, we rely on each other for connection and strength throughout our lives. Ensuring that we have access to the right combination of supports at the right time will be an important step in creating meaningful change for individuals, communities and the territory as a whole.

This Action Plan represents the immediate steps we need to take over the next two years to align the mental wellness and addictions recovery system in the NWT with the *Strategic Framework* in order to provide a culturally-safe, recovery-oriented and **person- and family-centered** direction for residents of all cultures and backgrounds, including Indigenous and newcomer populations. The actions included in this document are based on the feedback and experiences of individuals and families across the NWT. Going forward, we will continue to engage with residents to help inform future directions beyond the life of this Action Plan.



# STRATEGIC DIRECTIONS

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**Prevention and Early Intervention** focusses on the **risk factors** that can make people vulnerable to **mental health** and addictions issues as well as the **protective factors** that support wellness. Under this key direction, there are a variety of approaches that aim to prevent mental health and addictions issues from developing in the first place, while also making sure that supports are readily available for individuals and families to access as needed.

**A Recovery-Oriented System** recognizes the importance of a holistic approach where the mental, physical, emotional, spiritual and cultural parts of a person are valued and engaged. Recovery is about being able to live a meaningful and satisfying life, from the perspective of the individual, whether or not there are ongoing symptoms or difficulties caused by mental health or addictions challenges. People can and do recover, but it is a deeply personal process that is unique to each individual. What works for one person, may not work for another, and every individual has the right to determine what recovery looks like for them. Creating a system that values respect, dignity and personal choice is a priority.

**Personal Experience and Outcomes** refers to the ongoing research, monitoring, and evaluation that is needed in order to understand and learn from people’s unique needs and experiences, then using these lessons to create change. The idea is to not just capture the bare-bones information about a program or service, like how many people attended, but to hear from people about their experiences and their ideas of how to better meet the needs of individuals and families in the NWT. This key direction includes a commitment to provide high quality training opportunities for all staff involved in planning and delivering mental wellness and addictions recovery programs and services throughout the NWT.

**A Whole of Government Approach** recognizes that mental wellness and addictions recovery are largely impacted by the social determinants of health which include housing, income, trauma, social supports, education and more. Because so many things affect the wellbeing of individuals, families, and communities, it will take everyone involved in wellness efforts across the NWT to work together. Partnerships are important at all levels – Federal, Territorial, Aboriginal, and Community. The Department and the Authorities need to work together with Indigenous governments and communities to explore and implement programs and services that better meet the needs of NWT residents.

# CONTINUUM OF CARE

In line with the Strategic Framework, this Action Plan is meant to address the full continuum of care in mental wellness and addictions recovery. The continuum of care provides a range of supports and services that can meet people’s needs no matter where they are at. It can include many different types and combinations of supports and can address many different levels of need from prevention to ongoing support to crisis intervention.





# WORKING TOGETHER

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The *Strategic Framework* and corresponding Action Plans have been developed in the spirit of collaboration with extensive community engagement taking place across the territory. The actions laid out in this *Mental Wellness and Addictions Recovery Action Plan* were identified through direct feedback from NWT residents, including individuals, youth, and families with **lived experience**. This Action Plan is the product of a partnership between multiple Departments and Authorities within the Government of the Northwest Territories – Health and Social Services System; Department of Education, Culture and Employment (ECE); Department of Justice (DOJ); and Department of Municipal and Community Affairs (MACA). This work is informed by past reviews of mental health and addictions services in the NWT, recommendations from the 2016 Expert Panel Review, and supported by leading practices and research in promoting mental wellness. Non-government organizations (NGOs) including the Arctic Indigenous Wellness Foundation and the Tree of Peace Friendship Center also contributed to the development of this Action Plan.



# VISION

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NWT residents have access to a mental wellness and addictions recovery system that better supports community-based and **culturally safe** approaches to care, promotes **self-determination**, and addresses the factors that can lead to poor mental health and addictions.

# GOAL

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Individuals and families are offered services and supports that foster hope, promote self-determination and build partnerships that support mental wellness and addictions recovery, and respect the uniqueness of each person's journey.

# OBJECTIVES

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**Objective 1:** Reduce Stigma and Increase Awareness and Prevention

**Objective 2:** Increase Supports and Transform the Culture of Practice within the Mental Wellness and Addictions Recovery System to more fully reflect a Seamless Care Pathway Model in the NWT

**Objective 3:** Improve Quality, Coordination, and Integration of Services

**Objective 4:** Strengthen Peer Support, Aftercare, and Community-Based Options for People Living with Addictions

# OBJECTIVE #1

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## Reduce stigma and increase awareness and prevention

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We are all affected by mental health and addictions, whether personally or through family and friends. Mental health concerns affect more people in Canada than some of the major physical disorders, yet 60% of individuals will not seek help due to the fear of being judged or labelled (Mental Health Commission of Canada, 2019). Having a clear understanding of mental health and addictions, as well as when a person might need to seek help, is important for the wellness of individuals, families, communities and our territory as a whole. Equally important is knowing what services and supports are available and how to access them.

Reducing stigma and increasing awareness can have far-reaching effects and contribute to the overall prevention of or reduction in severity of mental health or addictions concerns, allowing for people to recognize signs or symptoms in themselves or others and/or reach out for support when they need to.

Over the next two years these actions aim to create a territorial community where people are more likely to reach out for help and know where to go for support for themselves or others. These actions also ensure that services and service providers are welcoming, non-judgmental, and provide care that is responsive to the individual and family and their unique needs.

### Examples of what we are already doing

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**Cannabis Awareness Campaign** – provides NWT residents with information on safer cannabis use so that they can feel confident in their ability to make informed health decisions.

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**Opioid Overdose Awareness Campaign** – aims to create awareness and highlight the dangers of illicit drug use.

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**My Voice, My Choice (MVMC)** – provides youth with information that aims to positively impact their personal choices and behaviours related to mental wellness.



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**Community Healthy Living Fairs** – are driven by local community champions and provide a space where people can learn and share ideas on health, wellness, fitness, nutrition, and traditional living.

# OBJECTIVE #1

## Reduce stigma and increase awareness and prevention

### ACTIONS OVER THE NEXT TWO YEARS:

-  Complete a review of best practices in stigma reduction and implement findings through the development of new approaches to territorial-wide programs, communications, and social marketing (HSS) (2019-2020).
  - » Review *Opening Minds* by the Mental Health Commission of Canada and determine opportunities for implementation in the NWT.
-  Develop and implement new approaches to providing NWT residents with information about mental wellness and addictions recovery, and the services and supports available to them. (HSS) (2019-2021)
  - » Engage with residents to identify how they want to receive information about mental wellness and addictions recovery and the available services and supports. Specific populations include but are not limited to:
    - Seniors
    - Individuals living with chronic mental health concerns
    - Individuals living with concurrent disorders
  - » Using feedback from engagement activities, launch new and creative approaches to effectively share and distribute information.

### Examples of what we are already doing

**Talking About Mental Illness (TAMI)** – a program designed for youth in schools that aims to reduce stigma around mental illness so that youth are more likely to seek help for mental health related issues.

**Mental Health First Aid (MHFA)** – creates awareness about mental illness and teaches participants how to support and safely intervene when an individual is experiencing a mental health crisis.

**Applied Suicide Intervention Skills Training (ASIST)** – trains individuals to recognize the signs of someone at risk for suicide and how to safely respond using the ASIST Model.

# OBJECTIVE #1

## Reduce stigma and increase awareness and prevention

- Improve specific prevention approaches and resources to better meet the needs of NWT residents. (HSS) (2019-2020)
  - » Examine ways to effectively identify, reduce, and prevent substance use in the NWT (e.g., Screening, Brief Intervention, and Referral to Treatment [SBIRT] tool).
  - » Strengthen prevention efforts for Fetal Alcohol Spectrum Disorder (FASD) by conducting ongoing research and establishing a working group to develop new strategies.
- Increase the knowledge and awareness of mental health and addictions as well as the available services and supports for post-secondary students. (ECE) (2020-2021)
  - » Enhance **Student Financial Assistance (SFA)** materials to include information about mental wellness, addictions recovery, and transition supports.
  - » Develop a social media campaign that provides SFA recipients with tips for healthy living, wellness, and coping strategies.

Education is a strong predictor of health and the transition to post-secondary can be a stressful experience, especially for those individuals from smaller, more isolated communities.

### WHAT WILL WE MEASURE?

We will collect information through engagement activities as well as the Community Counselling Program Satisfaction Survey to identify baseline data on awareness. We will also collect data on substance use prevention activities, and information on evidence-based strategies for the reduction of FASD.

### WHY IS THIS IMPORTANT?

Data will enable us to inform and improve prevention activities that aim to provide interventions and support early on. Knowing what services and supports are available and how to access them is crucial to receiving help at the right time. Awareness data will further help us to target and reduce stigma and develop evidenced-based strategies that improve resilience.

# SEAMLESS CARE PATHWAY

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The adoption of a Seamless Care Pathway (SCP) in the NWT represents a transformation of the current mental wellness and addictions recovery system. The SCP approach ensures that individuals and families have access to the right level of care quickly and receive timely and solution-focussed support based on their present needs. The model is grounded in a person- and family-centered and recovery-oriented approach to care that aims to empower, maximize choice, reduce wait times and gaps in services, and remain responsive to the unique and changing needs of those entering the system for support, no matter what door they walk through. The type of support received is based on the least intrusive/intensive intervention while still effectively meeting the needs of that specific individual or family. In the case that additional, more intense or specialized approaches to care are required, care providers “step up” the level of support being accessed, and can “step down” when the more intensive services are no longer needed. This is also recognized in best practice as a Stepped Care Approach.



# OBJECTIVE #2

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## Increase supports and transform the culture of practice within the mental wellness and addictions recovery system to more fully reflect a seamless care pathway model in the NWT

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As a part of the Seamless Care Pathway model, the delivery of services and supports must be grounded in a person- and family-centred, recovery-oriented approach where relationships are valued, differences are celebrated and the right level of support is available when needed. This model is about transforming entire systems of care by embedding an understanding that a person's safety, choice, and control is a priority. In this way, professionals work together with individuals and families using a practice framework that embodies and promotes continuous learning, curiosity, collaboration and inclusion. Services are informed by the people who access them and are responsive to a spectrum of needs ranging from informal to formal supports, including family and friends, peer support, e-based options, community and land-based options, inpatient care, and more.

Over the next two years, targeted actions will focus on enhancing the spectrum of supports available to NWT residents as well as improving connections between the Health and Social Services system and Indigenous and non-Government partners delivering community based services and supports. Actions will also be taken to improve the cultural competency of practitioners and enhance approaches to care that reflect a Seamless Care Pathway model.

### Examples of what we are already doing

#### **Research and Engagement –**

As a brand new initiative, we have been taking steps to make the Seamless Care Pathway Model a reality in the NWT. Through research, scanning, and engagement with public and helping professionals alike, we have embedded a Stepped Care Approach that has been shown to work in other locations similar to the NWT and matches what people in this Territory are calling for – more options, easier access, safe and effective care.

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**Psychological Services –** for individuals who are incarcerated and/or under supervision in the NWT

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**Income Security Programs –** support for individuals requiring support to meet basic needs such as housing, food, and clothing

# OBJECTIVE #2

Increase supports and transform the culture of practice within the mental wellness and addictions recovery system to more fully reflect a seamless care pathway model in the NWT

## ACTIONS OVER THE NEXT TWO YEARS:

- Enhance our Seamless Care Pathway Model by creating more service options to meet needs.
  - » Implement **e-mental health** options for individuals and families including: (HSS) (2019-2020)
    - Families – customizable programs online and via telephone for families experiencing mild to moderate mental health concerns such as anxiety and/or difficult childhood behaviours.
    - Adults – online programming that includes self-help and therapist assisted options to support individuals with challenges in their lives including anxiety, depression, substance use, resiliency, relationships, pain management, and more.
    - Youth – online programming to support youth in learning new ways to manage stress and symptoms of depression and anxiety, strengthen coping strategies, and more.
    - Peer – support the promotion of an online peer support option to support individuals with a variety of challenges in their lives including anxiety, depression, substance use, and more.

## Examples of what we are already doing

**Spectrum of Supports** – We have been working to establish a variety of support options for residents with the recognition that each individual’s experiences and needs are unique and specific. We know more is needed and work is underway to continue this important work and ensure that more supports are available along the spectrum and that they are accessible from multiple entry points into the health and social services system.

**Community Counselling Program (CCP)** – prevention, promotion, counselling and aftercare for mental wellness and addictions recovery.

**Psychological Services** – for individuals who are incarcerated and/or under supervision in the NWT



# OBJECTIVE #2

## Increase supports and transform the culture of practice within the mental wellness and addictions recovery system to more fully reflect a seamless care pathway model in the NWT

- » Implement a mental wellness monitoring tool for counsellors and individuals to use to track individual wellbeing and monitor progress for meeting individualized goals. (HSS) (2019-2020)
- » Develop clear protocols and tools (e.g. seamless care consent forms, screening and assessment tools) to ensure standardized care across the territory. (HSS) (2019-2020)
- » Develop a standardized approach to collecting wait-time information. (HSS) (2019-2020)
- » Explore and implement options for **medical detox** in the NWT. (HSS) (2019-2021)
- » Develop clear referral pathways between the different mental wellness and addictions recovery services, including Child and Youth Care Counsellors (CYCCs) working in the schools, so that helping professionals are better equipped to effectively connect individuals and families to a variety of support options. (HSS) (2019-2021)
- » Introduce flexible scheduling options (e.g. “single session” or “one-at-a-time” walk-in services) to ensure timely access to the Community Counselling Program (CCP). (HSS) (2020-2021)

### Examples of what we are already doing

**Voluntary Support Services – Child and Family Services** – preventative supports including counselling, respite and parenting supports.


**NWT Help Line** – toll free, confidential and anonymous help line available 24/7 to all NWT residents

**Integrated Case Management Program** – coordinated, collaborative and person centred approach to address barriers and support individuals with complex needs

**Sobering Centre and Day Shelter** – 24/7 safe shelter and recovery supports

# OBJECTIVE #2

## Increase supports and transform the culture of practice within the mental wellness and addictions recovery system to more fully reflect a seamless care pathway model in the NWT

-  Transform the culture of practice within the mental wellness and addictions recovery system to reflect the Seamless Care Pathway model and promote person- and family-centered, trauma-informed, culturally safe, and recovery-oriented approaches to care.
  - » Enhance the On-The-Land Healing Fund to support Indigenous Governments in the development and delivery of land-based mobile addictions treatment and family-based treatment. (HSS) (2019-2020)\*
  - » In line with the Cultural Safety Action Plan, embed cultural safety approaches and practices into the health and social services system to ensure individuals and families feel safe, respected, and free of racism and discrimination when accessing care.
    - Ensure staff are trained in cultural safety through professional development supports embedded in employee orientation and ongoing training initiatives. (HSS) (2019-2020)
      - o Partner with the Arctic Indigenous Wellness Foundation to deliver training at the 2019 Annual Community Counselling Program (CCP) Conference.
    - Incorporate traditional knowledge and healing approaches alongside existing services through relationship building and training opportunities for staff. (HSS) (2019-2020)

### Examples of what we are already doing

**Rapid Rehousing Program** – in market communities for individuals and families experiencing episodic or transitional homelessness - est: 2018.

**Single Room Occupancy** units in the Overnight Emergency shelter building in Yellowknife - est: 2016.

**Housing First Program** – permanent housing and supports to sustain housing and support recovery est: 2016.

**Traditional Pre-Treatment Healing and Addictions program** at the South Mackenzie Correctional Centre (SMCC)

**Community-Based Housing Stability Worker** – for Public Housing Tenants pilot project position in Behchoko

\* To access this support, please contact [onthelandfund@gov.nt.ca](mailto:onthelandfund@gov.nt.ca)

# OBJECTIVE #2

## Increase supports and transform the culture of practice within the mental wellness and addictions recovery system to more fully reflect a seamless care pathway model in the NWT

- » Establish clear referral pathways and collaborative relationships between Health and Social Services (HSS) programs/services and Indigenous groups delivering traditional and land-based healing approaches to mental wellness and addictions recovery. (HSS) (2019-2021)
- » Strengthen relationships and collaboration between HSS programs/services and NGOs delivering supports and services as a part of the larger mental wellness and addictions recovery continuum. (HSS) (2019-2021)
- » Establish a **Therapeutic Community** at the Hay River South Mackenzie Correctional Centre (SMCC) to promote recovery through active participation in group living, social learning and mutual self-help. (Justice) (2020-2021)

**Therapeutic Community:**  
The South Mackenzie Correctional Centre Therapeutic Community Program provides a setting that combines traditional Indigenous values and principles, teachings, and activities with programming that targets characteristics, traits, or challenges that are directly related to an individual’s likelihood to re-offend.

**Examples of what we are already doing**

**Community Wellness Plans** – multi-year funding agreements for communities to access to develop their own wellness plans

**On-The-Land Healing Fund** – NWT Aboriginal governments and non-government organizations can access this fund to support addictions recovery, healing and promote mental wellness

**On-The-Land Collaborative** – provides centralized access to funding and other resources for on the land programs

# OBJECTIVE #2

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**Increase supports and transform the culture of practice within the mental wellness and addictions recovery system to more fully reflect a seamless care pathway model in the NWT**

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## WHAT WILL WE MEASURE?

We will track utilization rates for single session/walk-in sessions through the CCP, utilization rates for targeted e-mental health options (families, youth, and adults), number of seamless care referrals, and level of satisfaction reported by individuals seeking and accessing these services.

## WHY IS THIS IMPORTANT?

As we continue to roll out a Seamless Care Pathway model in the NWT, it is important to monitor how these services are being used, and whether providing individuals with a variety of options truly increases satisfaction with the supports they receive, and reduce barriers such as wait times.



# OBJECTIVE #3

## Improve quality, coordination, and integration of services

In line with a person- and family-centered and recovery-oriented approach, it is important that people experience the best possible care and outcomes when accessing and receiving supports for mental wellness and addictions recovery. This includes a holistic approach to care where services are coordinated and collaborative and meet the unique and changing needs of specific individuals and families.

Adopting a continuous quality improvement approach is a key part of maintaining a responsive and effective system that centres around those who access it. Quality service happens when the voices of individuals with lived/living experience are heard, when we track and utilize key performance indicators, and when care providers are supported to improve their skills and competencies.



### Examples of what we are already doing

#### Community Counselling Program (CCP) Audits –

Conducted every two years to track compliance with CCP standards and procedures across regional authorities and identify where improvements can be made.

#### CCP Satisfaction


**Questionnaire** – Administered every two years to track service-user satisfaction and the extent to which services and supports meet the needs of residents.

This is a key dimension of service quality and is a part of the Department's evaluation and reporting system.

# OBJECTIVE #3

## Improve quality, coordination, and integration of services

### ACTIONS OVER THE NEXT TWO YEARS:

-  Improve the integration and coordination of care to better meet the holistic needs of individuals and families.
  - » Create integrated, interdisciplinary care teams with the right mix of providers and with mental health support built-in, where each member works to their full scope of practice to provide flexible, responsive primary health care and physical and mental wellness. (HSS) (2019 and ongoing)
  - » Enhance the **Integrated Case Management (ICM) Program**. (Justice) (2019-2020 - Program Evaluation Report)
    - Continue to monitor and evaluate progress, program approach, and outcomes.
    - Continue to identify policy and service delivery barriers and work towards interdepartmental solutions.
    - Work with interdepartmental partners to determine best models for long term success of integrated service delivery efforts.

### Examples of what we are already doing

**Annual Community Counselling Program (CCP) Professional Development Conference** – to build skill in front line counsellors and wellness workers to meet the needs of residents.


**Child and Family Services Training** – to prepare new Community Social Service Workers to work in a culturally respectful and safe manner and in alignment with the *Child and Family Services Act*.

### Integrated Case Management (ICM) Program:

The ICM program aims to create, foster and deliver a coordinated, collaborative, multi-departmental and person-centered approach to care that removes system barriers and service gaps for individuals with complex needs. The program provides streamlined service provision for individuals with complex needs by helping them navigate the system; identifies barriers and gaps in policy and service delivery; and provides service delivery through Integrated Service planning, while ICM staff help develop Individualized Service Plans (ISP) that are participant-centered, strength-based, and holistic.

# OBJECTIVE #3

## Improve quality, coordination, and integration of services

 Improve the overall quality and experience of mental wellness and addictions recovery services.

- » Develop and implement policies for funding out-of-territory inpatient treatment programs for NWT residents living with **concurrent disorders**. (HSS) (2019-2020)
- » Monitor and evaluate the implementation of the Yellowknife Sobering Centre/Day Shelter with a focus on the enhancement of programs and services offered. (HSS) (2019 and ongoing)
  - Research best practices nationally and internationally in the provision of quality care to this sector.
  - Use research findings and engagement activities of the broader community, including the business sector, to reduce stigma and inform improved service provision.
- » Effectively use data from internal audits, satisfaction surveys, and other engagement activities, to improve policies, standards and service delivery modalities specific to the Community Counselling Program (CCP). (HSS) (2019 and ongoing)
- » Effectively use data from program evaluation and engagement activities to inform future direction of support options including eMental Health programs, the Facility-Based Addictions Treatment program, and other mental wellness and addictions recovery initiatives. (HSS) (2019 and ongoing)

### Examples of what we are already doing

**Mental Wellness and Addictions Recovery Quality Forum** – Weekly meetings between the Department and all authorities to ensure ongoing collaboration and review of programs, policies, initiatives, system changes, and more.

**Monthly Forum for Regional Managers** – Includes all regional managers of Mental Health and Addictions as well as Department and NTHSSA representation to ensure ongoing collaboration and communication relating to mental wellness and addictions recovery across the NWT.

**Mental Health Act Review** – The Department is conducting a review of the *Mental Health Act* implementation to promote and improve patient safety and to ensure accurate application of the legislation and quality standards for persons and patients subject to the *Mental Health Act*.

# OBJECTIVE #3

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## Improve quality, coordination, and integration of services

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- » Ensure legal counsel is available to any individual who applies to the Mental Health Act Review Board for assistance, legal advice or representation at a Mental Health Act Review Board hearing. (HSS) (2019 and ongoing)
- » Increase the GNWT's understanding of the scope of homelessness across the Territory using the Summative Assessment and Scan of GNWT Homelessness Resources in order to provide recommendations to design a future state solution. (Housing) (2020-2021)



Improve engagement of staff and people with lived/living experience in the identification of system and program level improvements and initiatives.

- » Develop an Advisory/Recovery Council consisting of members with lived/living experience to inform the implementation of the Seamless Care Pathway model and other mental wellness and addictions recovery initiatives. (HSS) (2019-2020)
- » Establish an interdepartmental task force on substance use in the NWT to provide strategic oversight, leadership, and coordination. This will include a targeted focus on alcohol use. (HSS) (2019-2020)
- » Create an avenue for a **Community of Practice** for mental wellness and addictions recovery staff in order to increase professional peer support and leverage professional practice and experience across the system. (HSS) (2019-2020)
  - Facilitate a territory wide monthly forum for staff working in the mental wellness and addictions recovery system.
  - Provide Community of Practice opportunities at the 2019 annual Community Counselling Program (CCP) conference.



Improve Staff Capacity

- » Develop and implement an online portal for professionals working within the mental wellness and addictions recovery system to access professional development resources and online training opportunities in one easily accessible location. (HSS) (2019-2020)
- » Provide training in trauma informed, culturally respectful, and recovery-oriented practices for professionals within the Health and Social Services system, other relevant departments and organizations involved in mental wellness and addictions recovery service provision. (HSS) (2019-2021)
- » Develop a model of clinical supervision for supervisors and managers that oversee clinical mental wellness and addictions recovery services across the territory. (HSS) (2020-2021)



# OBJECTIVE #3

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## Improve quality, coordination, and integration of services

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### WHAT WILL WE MEASURE?

We will track Advisory Council feedback, utilization rates and satisfaction rates of individuals accessing services, Community Counselling Program (CCP) rates of compliance to standards, hospitalization rates for alcohol, and mental wellness and addictions recovery staff satisfaction.

### WHY IS THIS IMPORTANT?

Quality improvement is continuous and tracking these types of data will enable us to adapt programming to better meet the mental wellness and addictions recovery needs of individuals, families and communities.



# ADDICTIONS RECOVERY

There is no one road to addictions recovery. Every person's healing journey is unique and can include a variety of biological, psychological and social related supports along the way.



# OBJECTIVE #4

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## Strengthen peer support, aftercare, and community-based options for people living with addictions.

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Support for addictions recovery looks different for every individual and involves an approach that recognizes the biological, psychological (e.g., thoughts, feelings, behaviours), social, and spiritual aspects of wellness. This approach is referred to as the biopsychosocial model and combines the mind and the body as equally important focal points in a person's recovery. It recognizes that there is no single road to recovery and highlights the need for individualized care that responds to a person's full range of needs. This can include basic needs (e.g., housing, food), interpersonal relationships, culture, spirituality, counselling/aftercare support, medications for addictions treatment, and more. Recovery can be pursued through an abstinence-based approach, a harm reduction approach, or a combination of both over time.

Over the next two years, actions will focus on the implementation of peer-based, community-based and e-based aftercare support options for NWT residents while also pursuing solutions for basic needs such as safe housing for individuals returning from addictions treatment programs.

### Examples of what we are already doing

#### Facility-Based Addictions Treatment Program –

Specialized, out-of-territory programming for individuals and families including extended care, supported living, and aftercare recovery supports.

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#### Community Counselling Program (CCP) –

prevention, promotion, counselling and aftercare for mental wellness and addictions recovery.

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#### Managed Alcohol Programs (MAPs) –

the Department has completed research and is currently working to identify future implementation opportunities in the NWT.

# OBJECTIVE #4

## Strengthen peer support, aftercare, and community-based options for people living with addictions.

### ACTIONS OVER THE NEXT TWO YEARS:

- Engage with southern facility-based treatment centers to increase aftercare options and supports for residents returning from treatment (e.g., contract with the Edgewood Health Network to implement the WAGON aftercare **APP** for all NWT residents). (HSS) (2019-2020)
- Support the implementation of locally operated peer support programs (e.g., **Alcoholics Anonymous, Narcotics Anonymous**) as needed and at the request of the community (e.g., secure meeting spaces, Telehealth and/or other basic requirements aside from facilitation). (HSS) (2019-2021)\*
- Increase staff knowledge and skills in aftercare supports by developing partnerships with southern facility-based treatment centers and other subject matter experts to provide opportunities for learning and integration into practice. (HSS) (2019 and ongoing)
  - » Focus the 2019 Annual Community Counselling Program (CCP) Conference on addictions recovery and skills training and enhanced knowledge in addictions recovery. (HSS) (2019-2020)

### Examples of what we are already doing

**On-The-Land Healing Fund** – NWT Aboriginal governments and non-government organizations can access this fund to support addictions recovery, healing and promote mental wellness.

**Opioid Maintenance Therapy Program** – Yellowknife program to reduce the harms associated with opioid use.

**NWT Opioid Misuse and Overdose Task Group** – Developed in 2016, this group was tasked with responding to ongoing issues related to opioid drug misuse and overdose and to provide strategic oversight, leadership and coordination.

\* To access this support, please contact your local Community Counselling Program or email [mha@gov.nt.ca](mailto:mha@gov.nt.ca)

# OBJECTIVE #4

## Strengthen peer support, aftercare, and community-based options for people living with addictions.

- Enhance and expand the Opioid Maintenance Therapy Program to include a territorial scope and the provision of individualized case management (HSS) (2019 and ongoing)
- Implement and monitor territorial-wide **peer support** options (e.g., peer support/mentorship program for individuals completing facility-based addictions treatment programs, 7 Cups peer support APP). (HSS) (2019-2021)

There are different types of peer support that fall along a spectrum ranging from informal support to formal peer support within a structured organizational setting. “Informal peer support” occurs when people notice the similarity of their lived experience and listen to and support each other. Peer support within a structured clinical setting can involve programs where peer support workers offer the opportunity for a supportive, empowering relationship. The values, principles of practice, and skills of peer support workers apply to all types of peer support and all types of organizations that offer it. (MHCC)

### Examples of what we are already doing

**Take Home Injection Naloxone Kits** – distributed to NWT retail pharmacies, health centers, clinics, hospitals and health cabins for public to access free of charge.

**Substance Abuse Management (SAM) Program** – for individuals who are incarcerated and/or serving their sentence in the community.

**NWT Help Line** – toll free, confidential and anonymous help line available 24/7 to all NWT residents.

# OBJECTIVE #4

## Strengthen peer support, aftercare, and community-based options for people living with addictions.

- Develop and implement addictions treatment and aftercare standards and training to ensure that helping professionals are meeting the unique needs of the individuals they serve (HSS) (2020-2021)
- Pilot the **Northern Pathways to Housing Program (NPH)** to provide housing and support services for individuals living with mental health and addictions concerns and experiencing chronic homelessness in communities outside of Yellowknife. (Housing) (2020-2021)
- In partnership with key stakeholders, including the NGO sector, identify transitional housing options and aftercare programming options (including estimated costing) for individuals completing facility-based addictions treatment programs. (HSS) (2020-2021)

### Northern Pathways to Housing Program (NPH):

The NPH is a partnership with three NWT communities to operate transitional housing for residents with the understanding that homelessness in smaller NWT communities often takes a different form than what is seen in larger communities. There are residents that are unable to access social housing because of past arrears or other tenant issues, or residents in situations where the availability of housing has limited their options.

### WHAT WILL WE MEASURE?

We will track staff training and attendance at the Fall 2019 CCP Conference, hospitalization rates for opioid overdose, and utilization rates as well as user experience and feedback in peer support options.

### WHY IS THIS IMPORTANT?

Substance use rates in the NWT are among some of the highest in Canada. Individuals, families and communities need support and resources that are timely and effective. Data that we track will help improve the services we are providing and ensure alignment with evidence-based practice and improvements to community-based supports.

# MONITORING PROGRESS

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The Department of Health and Social Services will continue to engage with NWT residents to help shape programs and services and best respond to current needs. NWT data related to mental wellness and addictions recovery will be reviewed on an ongoing basis to track changes over time. This data and feedback from residents will inform program development and improve programs and services. Progress on specific Action Plan activities will be reported through the *NWT Health and Social Services System Annual Report*.

The Department will continue to report on service-user experience with the Community Counselling (CCP). The CCP Service-user Satisfaction Questionnaire is administered every two years and measures the service-user's experience with: wait times; program location; experiences with counsellors and program staff; safety; and quality of service.

## REPORTING ON OUR PROGRESS

By 2020, the Department will develop a dashboard using individual, system, and population indicators to provide information on mental wellness and addictions recovery data that is easily accessible, timely, and available to the public. Examples of these types of indicators include:

### 01 INDIVIDUAL LEVEL INDICATORS - self-reported from the CCP Satisfaction Report

- % of respondents that report being satisfied or very satisfied with the overall experience with counselling service
- % of respondents that report being satisfied or very satisfied with the skills and ability of counsellor to provide professional support
- % of respondents that report being satisfied or very satisfied with the overall changes in life since starting counselling services

# MONITORING PROGRESS

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## 02 POPULATION LEVEL INDICATORS

- Hospital stays for harm caused by substance use
- Alcohol hospitalizations
- Mental health hospitalizations
- Population hospitalized for self-injury

## 03 SYSTEM LEVEL INDICATORS

- Average wait times for access to the CCP
- Utilization rates for eMental Health options
- Compliance to standards based on CCP audit reports
- % of staff completing training initiatives
- Staff satisfaction survey results
- Vacancy rates in the CCP





# MOVING FORWARD

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When it comes to mental wellness and addictions recovery, things are always changing. New **best practices** are introduced, creative ideas are shared, needs change, and advances in technology take place. While we have ideas of where we want to go over the next few years, we also know that there will likely be new information and approaches to supporting wellness and recovery.

As we move forward with plans and opportunities, we will also make efforts to stay current, chase innovation and continue to listen to and integrate the voices of Northerners into service planning and implementation. In an ongoing effort to support evidence informed decision-making and accountability for performance we will continue to enhance our performance indicators, ensuring input, process, and outcome indicators are included to reflect performance at the system, program and individual levels.



# GLOSSARY OF TERMS

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**Addictions Recovery:** The process through which a person is able to live a satisfying, hopeful, and meaningful life (as defined by the individual), even when there are ongoing limitations caused by mental health and/or addictions issues. An addiction is a strong and harmful need to regularly have something (such as a drug) or do something (such as gamble).

**Alcoholics Anonymous:** an international fellowship of individuals who have had challenges with or addiction to alcohol. It is peer-based, self-supporting, and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to pursue recovery.

**APP:** An application that can be downloaded by a user to a mobile device (i.e.: cell phone).

**Best Practices:** Professional approaches that are accepted or considered as being most correct or most effective.

**Colonization:** Settling among and setting up political control over the indigenous people of an area.

**Community of Practice:** A group of people who share a profession and seek to gain knowledge through the sharing of information and experiences. This process allows group members the opportunity to learn from each other and develop personally and professionally.

**Concurrent Disorders:** A condition where a person is living with both a mental illness and a substance use problem.

**Culturally Safe:** When services recognize and address power imbalances between service providers and service users, and the role of systemic issues such as racism and poverty.

**Equitable:** Treating everyone equally and fairly.

**e-Mental Health:** The use of the internet and related technologies (e.g. phone apps) to provide individuals with care when and where they need it most, regardless of how close they live to their care provider.

**Holistic:** Taking into account the whole person, including the mental, physical, emotional and spiritual.

**Lived Experience:** Individuals with lived experience have faced mental health and addictions issues themselves or have supported others through these challenges.

**Medical Detox:** The process of removing harmful substances from your body under the supervision and safety of medical professionals.

**Mental Health/Mental Wellness:** A state of wellbeing in which you can realize your own potential, cope with the normal stresses of life, work productively, and make a contribution to your community.

# GLOSSARY OF TERMS

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**Narcotics Anonymous:** an international fellowship of individuals who have had challenges with or addiction to narcotics. It is peer-based, self-supporting, and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to pursue recovery.

**Peer Support:** A supportive relationship between people who have a common lived experience. Peer support relationships offer support, encouragement, and hope to each other when facing similar situations.

**Person- and Family-Centered:** Making sure that services meet the specific needs of an individual and/or family instead of using a “one-size-fits-all” model.

**Protective Factors:** Anything that helps a person keep their mental health. Examples include: positive coping style, good attachment to caregivers, supportive parenting, strong family connections, positive school or work environment, sense of belonging and connectedness, strong cultural identity and other.

**Risk Factors:** Anything that makes a person more likely to suffer from mental health issues. Examples include: low bonding with caregivers, low self-esteem, family disharmony, caregivers with mental illness or substance abuse, bullying, emotional trauma, physical or sexual abuse, death of a family member, discrimination, lack of access to services and other.

**Self-determination:** The act of individuals having full power over their own lives and the choices they make.

**Social Determinants of Health:** The conditions in which people are born, grow, live, work, and age. This includes income, employment, education, childhood experiences, environment, **trauma**, social supports, culture, genetic factors, gender, and access to health services.

**Stigma:** Negative attitudes, beliefs, and behaviors that make people feel judged and ashamed.

**Trauma:** A traumatic event involves a single experience, or enduring repeated or multiple experiences, that completely overwhelm an individual’s ability to cope or integrate the ideas and emotions involved in that experience. Trauma contains three main elements: 1) It was unexpected; 2) the person was unprepared; and 3) there was nothing the person could do to stop it from happening.

