IMPLEMENTATION OF THE FIRST
NATIONS MENTAL WELLNESS
CONTINUUM FRAMEWORK

FNMHA CONFERENCE
NOVEMBER 2015
Overview

• Launched on January 28, 2015 by the AFN the First Nations Mental Wellness Continuum Framework is a shared vision for First Nations Mental Wellness.
• It outlines a coordinated, holistic approach to MW programming that takes into account the important role of FN culture, traditions, and language, but can be applied broadly:
Overview contd.

• Links mental and physical health and wellness
• Is a component of the broader continuum of health programs and services, and social determinants of health
• Represents a new way of doing business
• Builds on innovation in communities
• Outlines continuum of programs and services aligned with the population health model, linking with public health and primary care
• As such, achieving vision will involve action by First Nations but also FNIHB, AANDC, Provinces/RHAs
FNMWC Model
<table>
<thead>
<tr>
<th>Four Directions (outcomes)—Hope, Belonging, Meaning, and Purpose.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community—Kinship, Clan, Elders, and Community.</td>
</tr>
<tr>
<td>Populations—Infants and Children, Youth, Adults, Gender-Men, Fathers and Grandfathers, Gender-Women, Mothers and Grandmothers, Health Care Providers, Community Workers, Seniors, Two-Spirit People and LGBTQ, Families and Communities, Remote and Isolated Communities, Northern Communities, and Individuals in Transition and Away from Reserve.</td>
</tr>
<tr>
<td>Specific Population Needs—Intergenerational Impacts of Colonization and Assimilation, People Involved with Care Systems and Institutional Systems, Individuals with Process Addictions, Individuals with Communicable and Chronic Diseases, Individuals with Co-occurring Mental Health and Addictions Issues, Individuals with Acute Mental Health Concerns, Crisis, and People with Unique Needs.</td>
</tr>
<tr>
<td>Continuum of Essential Services—Health Promotion, Prevention, Community Development and Education; Early Identification and Intervention; Crisis Response; Coordination of Care and Care Planning; Detox; Trauma-informed Treatment; and Support and Aftercare.</td>
</tr>
<tr>
<td>Indigenous Social Determinants of Health—Environmental Stewardship; Social Services; Justice, Education and Lifelong Learning; Language Heritage and Culture; Urban and Rural; Land and Resources; Economic Development; Employment; Health Care; and Housing.</td>
</tr>
<tr>
<td>Key Themes for Mental Wellness—Community Development, Ownership and Capacity Building, Quality Care System and Competent Service Delivery, Collaboration with Partners, and Enhanced Flexible Funding.</td>
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First Nations Mental Wellness Continuum

What?

- Access to the full basket of mental wellness services:
  - Health Promotion, Prevention, Community Development, and Education
  - Early Identification and Intervention
  - Crisis Response
  - Coordination of Care and Care Planning
  - Detox
  - Trauma-informed Treatment
  - Support and Aftercare
First Nations Mental Wellness Continuum

How?

• Partnerships, collaboration, aggregation, alternative service delivery models, flexible funding, elimination of program silos, quality improvement

• Team-based approaches, link with primary care and public health approaches, including with communicable and chronic disease

• Focus on individuals, families, and communities, across the lifespan
## Conceptual Shift

<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
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<tbody>
<tr>
<td>Program focus on deficits</td>
<td>Discovery of strengths</td>
</tr>
<tr>
<td>Evidence that excludes</td>
<td>Indigenous worldview, values, and culture that are the</td>
</tr>
<tr>
<td>Indigenous worldview,</td>
<td>foundation to determine the relevance and acceptability of</td>
</tr>
<tr>
<td>values, culture</td>
<td>various sources of evidence in a community</td>
</tr>
<tr>
<td>Focus on inputs for</td>
<td>Focus on outcomes for individuals, families and communities;</td>
</tr>
<tr>
<td>individuals</td>
<td>holistic collaborative approaches</td>
</tr>
<tr>
<td>Uncoordinated, fragmented</td>
<td>Comprehensive planning and integrated</td>
</tr>
<tr>
<td>programs and services</td>
<td>federal/provincial/territorial/sub-regional/First Nations models for</td>
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<tr>
<td></td>
<td>funding and service delivery</td>
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<tr>
<td>Communities working within</td>
<td>Communities optimize and realign their mental wellness</td>
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<tr>
<td>program silo restrictions</td>
<td>programs and services based on their priorities</td>
</tr>
<tr>
<td>Program focus on health and</td>
<td>Approaches that strengthen multi-sectoral links, connecting health</td>
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<tr>
<td>illness</td>
<td>programs and social services, across</td>
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</tbody>
</table>
Mental wellness is a sense of balance of spiritual, emotional, mental, and physical. This balance is enriched as individuals have:

- **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, with Creation and to culture.
- A sense of **MEANING** that nurtures understanding from the physical world around us and spiritual knowledge.
- **PURPOSE** in daily living is expressed through education, employment, care-giving activities, or cultural ways of being and doing that are grounded in identity.
When culture is considered the foundation, all First Nations health services can be delivered in a culturally relevant and safe way. The result of this conceptual shift will be policies, strategies, and frameworks that: are relevant to local community contexts; recognize the importance of identity and community ownership; and promote community development.

- **Priorities for Action:**
  - Responding to the Diversity of First Nations Communities
  - Defining Culture
  - Valuing Cultural Competency, Cultural Safety, and Indigenous Knowledge
  - Understanding the Role of Language in Mental Wellness
Culture as Foundation

Current Work:
• Development of a FNMWC Implementation Team
• Mental Wellness Team Projects
• FNMWC – Development of Model into Planning Tool
This Framework aims to support communities in shaping their own programs and services, ensuring that they own and develop the programs and services they provide. Community ownership ensures that the continuum of mental wellness programs and services for First Nations are relevant, effective, flexible, and based on community needs and priorities.

**Priorities for Action:**
- First Nations Control of Services
- Building on Community Priorities
- Developing Community Wellness Plans
- Working Together in Partnership
- Investing in Community Development and Capacity Building

**Current Work:**
- Mental Wellness Team Projects
Quality Health System & Competent Service Delivery

The Framework outlines an ideal continuum of essential mental wellness services to which all First Nations communities should have access. It is essential that this continuum of services be located within a quality care system and that the services and supports be of high quality and culturally competent.

Priorities for Action:
- Delivering Accessible Services
- Providing Quality Mental Wellness Programs and Services
- Responsiveness, Flexibility, and Reliability
- Proactive Planning and Crisis Supports and Services
- Delivering Trauma-Informed Care
- Promoting and Recognizing a Culturally Competent Workforce
- Providing Education, Training, and Professional Development
- Supporting Worker Wellness
Quality Health System & Competent Service Delivery (continued)

- **Current Work:**
  - Development of crisis response planning templates to support communities in accessing services in crisis situations
  - Mapping Existing Mental Wellness Services, Building the Evidence Base and Costing the Gaps
Collaboration with Partners

Enhancing First Nations mental wellness requires strategic action that goes beyond FNIHB’s mandate. It involves federal government departments, provincial and territorial governments, and First Nations communities and organizations. Currently, partner organizations do not share information regarding funding, policy, and decision-making in relation to First Nations communities. Although it is recognized that there are shared roles and responsibilities, these roles and responsibilities are unclear.

Priorities for Action:

- Defining Clear Roles and Responsibilities
- Establishing Leadership
- Creating Partnerships and Networking
- Developing System Navigators and Case Managers
- Providing Advocacy
- Raising Awareness – Reduction of Stigma and Protection of Privacy
Collaboration with Partners

- **Current Work:**
  - Development of a FNMWC Implementation Team
  - Mapping of Federal programs and services (HC, AANDC, and PS) and explore possibilities for collaboration
  - Mental Wellness Team Projects
  - Development of service level agreement templates to support communities
Enhanced flexible funding investments

- The impacts of not addressing mental wellness issues are significant at the community level. Child welfare, social assistance, education, and health systems are all affected. Mental health and addictions issues are linked to high rates of incarceration, child apprehensions, poverty, unemployment, preventable injury, disease burden, and lower levels of educational attainment.
Enhanced flexible funding investments

Priorities for Action:

• Providing Additional Funding
• Moving Away from Time-Limited and Siloed Funding
• Increasing Flexibility of Funding

Current Work:

- Nationally-funded Implementation Projects
FNMWC Implementation Projects

Project Goals:

- Learn from community adaptations and innovations and share promising practices; support mentorship between communities
- Increase the evidence base for the FNMWCF
- Facilitate a move away from siloed approaches towards more coordinated and effective approaches.
FNMWC Implementation Projects

**Project Areas:**

- **Culture as Foundation**
  - Demonstrating how culture-based programs, services and approaches are improving mental wellness at individual, family and community levels (e.g. Regional or national scope).

- **Access to the Essential Basket of MW Programs and Services**
  - Demonstrating how access can be improved by realigning existing MW programs and services and establishing linkages between mental health and social programs at the regional, sub-regional or community level.
• Funding Flexibility
  • Demonstrating how existing funding flexibilities can support alternative service delivery models (e.g., Supporting clusters of communities in a coordinated way, and/or combining different streams of funding for a particular community) that improve outcomes (e.g., at the sub-regional level, including isolated and remote communities).
  • Demonstrating the potential value of a comprehensive funding approach as an alternative to program-based funding
FNMWC IMPLEMENTATION PROJECTS

Current Status:

• Selection Process is being led by the FNMWC Implementation Team Secretariat, and being administered by NNAPF

• Targeted request for proposals has been distributed, recipients to be selected and notified by early July

• Projects to commence in July 2015 (and to be completed by March 31, 2016).
Indigenous Wellness Framework and Outcomes

Physical wellness creates PURPOSE

Physical Behaviour expressed through:
- Way of being
- Way of doing
- Wholeness

Mental wellness creates MEANING

Mental Behaviour expressed through:
- Rational
- Intuition
- Understanding

Emotional wellness creates BELONGING

Emotional Behaviour expressed through:
- Family
- Community
- Relationship
- Attitude

Spiritual wellness creates HOPE

Spiritual Behaviour expressed through:
- Values
- Belief
- Identity

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Ceremonial lodges are the structures that hold and facilitate cultural transmission of sacred knowledge and life teachings. The ceremonial lodge facilitates wellbeing and ‘a way to know how to live life to the fullest’
THANK YOU!

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