



OntarioNNADAP.org

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Building Capacity in Ontario NNADAP



Ontario Regional Addictions Partnership Committee (ORAPC) Logo symbolizes the partnership that exists across the Ontario Region.

After considerable advocacy efforts Resolution 13/07 was passed in June 2013 by the Chiefs in Assembly at the All Ontario Chiefs Conference. The resolution was moved by Chief Towegeshig of Long Lake #58 stating the Chiefs in Assembly “Endorse the devel-

opment and implementation of the annual workplan and the pay equity strategy that is being championed by the NNADAP Treatment Centre Directors of Ontario and the Ontario Regional Addictions Partnership Committee” and “Direct that the outcomes of this initiative shall be presented at the AOCC 2014.”

The ORAPC booth was present at the February 2014 Health Forum to disseminate information about NNADAP, funding issues and to garner support for the capacity building efforts. A workshop was facilitated by Chief Day of Serpent River First Nation, members of the Ontario Regional Addictions Partnership

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Become a Certified Addictions Worker to be Eligible for Monetary Incentive

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Did you know that the First Nation Wellness/Addictions Counsellor Certification Board has an entry level certification called the Certified Indigenous Wellness/Addictions Worker (CIWAW)?

Do you know you can meet this level of certification with a grade 12 education, 1 year of work experience in addictions, 70 hours of training in addiction-specific topics and 10

hours of training in addiction-related topics? More information regarding this level is available on page 3.

Other levels include:

- Certified Indigenous Prevention Worker/Specialist Level I/Specialist Level II
- Indigenous Certified Addictions Specialist Levels I—III
- Indigenous Addictions Clinical Supervisor

An Ontario NNADAP Worker who becomes certified at any of these levels will be eligible to receive the monetary Certification Incentive from Health Canada. This annual incentive was made available to encourage NNADAP Workers to become certified and maintain their certification while working in Ontario NNADAP.

More information is available at OntarioNNADAP.org

Building Capacity in Ontario NNADAP

Committee and the Treatment Directors' Group. The purpose of this workshop was to gain support for and ideas to inform the strategy to achieve pay equity and adequate programming dollars for the NNADAP programs. A ton of great ideas and information was collected from the leadership, Health Directors and front line workers present. The next step included having a First Nation caucus to discuss the strategy going forward. Those present included the National Native Addictions Partnership Foundation, ORAPC, COO Health Coordination Unit, and various leadership. A workplan was developed and is available at the OntarioNNADAP.org website.

The ORAPC booth was present at the All Ontario Chiefs Conference in June 2014. This again provided the ORAPC with the opportunity to share information with leadership regarding the funding issues in NNADAP. A presentation was given by Chief Day during the health portion of the All Ontario Chiefs Conference. A Resolution, moved by Chief Tom Bressette of Kettle and Stony Point First Nation, and seconded by Chief Allen Towegeshig of Long Lake #58 First Nation was passed by the Chiefs in Assembly. That resolution read:

"THEREFORE BE IT RESOLVED that we the Chiefs in Assembly:

- Unite in our efforts to support more investments in NNADAP at the community-based and treatment centre programs,

as per recommendations and information provided by the Ontario Regional Addictions Partnership Committee.

- Define and advocate all government levels for an increase in annualized funding to all NNADAP budgets.
- Recognize NNADAP workers' qualification and skill levels by providing pay equity to the NNADAP workforce when additional funds are received.
- Mandate COO to investigate the feasibility of a complaint under the federal Human Rights Act challenging the lack of pay equity for NNADAP workers and other discriminatory aspects of the program.
- Mandate that a Regional Chiefs Committee be established to advocate for support on this initiative, and to regularly report to the Political Confederacy, and the Chiefs in Assembly at the next AOCC.
- Update the Addictions And Mental Health Continuum of Care for immediate opportunities."

At the Assembly of First Nations Annual General Assembly held in Halifax, Nova Scotia July 15—17, 2014 the Chiefs-in-Assembly passed Resolution 23/2014 which read:

"THEREFORE BE IT RESOLVED that the Chiefs-in-Assembly:

- Unite in our efforts to support more investments in NNADAP community-based and treatment centre programs, as per

recommendations and information provided by the Ontario Regional Addictions Partnership Committee.

- Mandate the AFN to work with NNAPF to define and seek equitable funding to implement the continuum of care to address substance use issues in our communities as defined in the Honouring Our Strengths renewal framework and advocate for these funds across all levels of government.
- Mandate the AFN to work with the NNAPF to investigate the feasibility of a complaint under the federal Human Rights Act challenging the lack of pay equity, pension and employee assistance programming for NNADAP workers as compared to the rest of Canada.
- Mandate that a National Chiefs Committee be established to work with Ontario Regional Chiefs Committee to advocate for support on this initiative, and/or to work as part of the Chiefs Committee on Health.
- Direct the AFN to investigate and continue to advocate for opportunities for funding for implementation of the Honouring Our Strengths Framework.
- Direct the AFN to define the fiduciary responsibilities for this funding and seek support for lobbying efforts with the federal government."

Please stay tuned for further updates on how these advocacy efforts move forward.



Certified Indigenous Wellness/Addictions Worker

Requirements:

- Completion of secondary school (high school) **or** other studies at higher level
- One (1) year (2000 Hours) of experience or practice in substance use disorders through the following:
 - ⇒ Paid work experience
 - ⇒ Supervised practicum/internship, undertaken as part of a program of studies (200 hours minimum)
 - ⇒ Proven experience as a volunteer in a Wellness/Addiction organization (to a maximum of 100 hours)
- 70 Hours Training in Addiction-specific topics of:
 - ⇒ 10 Hours of Introduction to Addictions (overview of addiction-related topics, theories on addictions)
 - ⇒ 10 Hours of Dynamics of Addictions (how they work, their effects on individuals, family, and community)
 - ⇒ 10 Hours of Pharmacology (basic principles, definitions, physical and psychological effects of drugs)
 - ⇒ 10 Hours of Human development (dynamics of human development - birth to adulthood, consequences of maladaptive behavior on this process)
 - ⇒ 10 Hours of Addiction Interventions (theories, treatment approaches and models of recovery, relapse prevention)
 - ⇒ 10 Hours of Self, Health and Wellness (personal care and individual responsibility for the practice of basic stress management as it relates to service delivery)
 - ⇒ 10 Hours of Ethics/cultural values
- 10 Hours Training in Addiction-related topics
- 70 Hours On-The-Job or Formal/Informal Training in the 12 Core Functions of:
 - ⇒ 10 Hours of Screening, Intake, Assessment & Evaluation
 - ⇒ 7.5 Hours of Treatment Planning
 - ⇒ 20 Hours of Counselling (Individual, Group and Significant Others)
 - ⇒ 5 Hours of Case Management
 - ⇒ 5 Hours of Client Education
 - ⇒ 7.5 Hours of Referral
 - ⇒ 5 Hours of Reports & Record Keeping
 - ⇒ 10 Hours of Crisis Intervention, Orientation, and Consultation with other Professionals
- 20 Hours General Skills/Knowledge in the following:
 - ⇒ 10 hours in Communications, and
 - ⇒ 10 hours of group facilitation, interviewing techniques and/or conflict resolution/management

CULTURAL COMPETENCIES

Cultural competencies are required for all FNWACCB certifications. Ability to respect, implement and incorporate First Nations culture, beliefs, values and traditions in treatment, including separate and combined Sweat Ceremonies, Coming of Age Ceremonies and all other cultural/spiritual ceremonies.

Ability to support and assist client participation in traditional and cultural aspects of spiritual recovery.

NOTE: EDUCATION/TRAINING

The required addictions-specific and addictions related hours may be acquired through formal education programs at university or college level or through workshops, seminars, single courses delivered either in-house or by independent trainers or training organizations.

What's Happening in our Community-Based NNADAP Programs?

You asked for some community profiles to share the experiences of your fellow NNADAP Workers in action in their communities. So here they are! Two community-based NNADAP Workers were kind enough to share their programming experiences with us. If you are interested in sharing a profile of your NNADAP community-based or treatment centre programming with Ontario NNADAP please feel free to email Autumn at ajohnson581@cogeco.ca

NNADAP at Sheshegwaning First Nation

We Are Better Together

I've often heard from other First Nation communities that if you want a sense of the health of the community, visit the Health Centre first. Typically, the relationships and environment within that organization reflect the health of the larger community. I believe there's some truth to this, and welcome anyone to drop in for a visit. I'm not sure if this was always the case, but it was evident the first week I began working as the NNADAP worker three years ago.

Sheshegwaning First Nation is a small, tight knit community with 120 members; although small, the community is not small-minded and is open to all programs or services that might help someone make positive changes on their healing journey. Harm reduction is an integral part of our Addiction and Mental Health Programming, and has allowed people to look more closely at why they may be self-medicating, leaving a door open if



they're ready to make changes. We accept people "where they're at" and understand that it is their journey....not ours.

We have a good balance between abstinence based programs "Red Road to Wellbriety", Alcoholics Anonymous and harm reduction pro-

grams like "Moderation Management" for those who aren't ready to quit entirely, but would like to cut down. Our hope is that no one will feel excluded or judged because of their challenges.

Culture, Community and Relationships



I work very closely with Lance Panamick, the Brighter Futures/Mental Health Worker within our community; Addictions and Mental Health are so closely

linked that it only makes sense for us to work together on most programming or prevention initiatives. Lance is not just a co-worker but a



close friend that I have learned to trust and respect. Our work performance and the quality of service that we provide is dependent

on maintaining healthy relationships with each team member; Respect and Humility play a major role. Events like FASD Awareness Day, Mental Health Week and National Native Addiction Awareness Week involve both of

our programs; the entire team is involved with NNAAW week, these events are a big deal for us, the community participates fully and looks forward to these events every year.

Culture is an integral part of all programming; we believe in the concept that "culture is healing", and understand that our loss of identity is at the root of our need to self-medicate. As Dr. Mate talks about in "In The Realm of Hungry Ghosts", this



What's Happening in our Community-Based NNADAP Programs? (continued)

deep rooted sense of “not belonging” often based on early childhood experiences leads us to numb that pain with addiction. It is my hope that I will continue to be a part of such a wonderful team of people who all play an important role in all that we do at Shesheganing Health Centre, we all bring our own unique gifts, we accept each other for who we are, and we do A LOT of laughing.

So drop by if you're in our neck of the woods. As NNADAP workers, it is easy to feel discouraged considering the challenges we're up against. Don't focus on the big picture, start where you are, keep yourself balanced and healthy, maintain healthy relationships at

work and it will automatically have a ripple effect on the whole community.

Miigwetch,

Terrie Pitfield

NNADAP Worker



Addictions always originate in unhappiness, even if hidden. They are emotional anesthetics; they numb pain. The first question - always is not “Why the addiction?” but “Why the pain?” The answer was summed up with crude eloquence, scrawled on the wall of my patient Anna’s room, “Any place I went to , I wasn’t wanted. And that bites large.”

NNADAP at Six Nations of the Grand River

Six Nations' population is over 24,000 in band membership. We have over 16,000 band members living on reserve with many band members living off reserve coming back to the community for service.

We provide the following services from our NNADAP Program:

Counselling Services

- Individual
- Couples
- Family
- Smoking Cessation
- Grief and Loss

Therapeutic Groups

- Grief Recovery

- Relapse Prevention
- Outpatient Day Treatment Program
- Little Miss EmPOWERment
- Teen EmPOWERment
- Boys 2b Boys EmPOWERment
- Understanding Your Purpose in Life – Traditional Teachings for Youth

Prevention Activities

- In-School Curriculum – delivered to students junior kindergarten to grade 8
- Community Presentations
- Training Presentations
- Lunch & Learn Series
- P.A.R.T.Y. Program – Prevent Alcohol and Risk-Related Trauma in Youth
- Community Awareness Events

- Newsletters
- Try Hugs Not Drugs Day Event
- Virtual Smoking Cessation Sessions through Local Radio
- National Addictions Awareness Week Activities
- Gambling Awareness Events/Activities
- Smoking Cessation Events/Activities

All counselling and program delivery is based on Choice Theory concepts and Cognitive Behavioural Theory.

Penny Hill
Program Manager

ORAPC

The Ontario Regional Addictions Partnership Committee (ORAPC) will facilitate communication and provide advice/guidance/recommendations to the Chiefs of Ontario office, First Nations & Inuit Health Branch (FNIHB), NNADAP Community-based and Treatment Centre workers and PTO's on issues of addictions and holistic approaches to healing through ongoing processes of review, evaluation, and monitoring. The ORAPC will provide input on regional and national initiatives in the area of addiction programs and services as the implementation of the NNADAP Renewal Framework moves forward.

New Union of Ontario Indians (North) and Grand Council Treaty #3 Representatives

Please join the ORAPC in welcoming two new representatives to the Committee. Rolanda Manitowabi will represent the NNADAP Workers in the North communities belonging to the Union of Ontario Indians and Joanne Cobiness will represent the NNADAP Workers who are from Grand Council Treaty #3 communities. Welcome Rolanda and Joanne!

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To view ORAPC meeting minutes, Final Reports, Briefing Notes, the Ontario NNADAP Directory, links to helpful resources and other information visit OntarioNNADAP.org