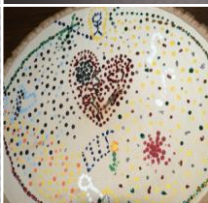
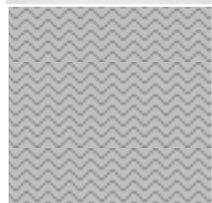
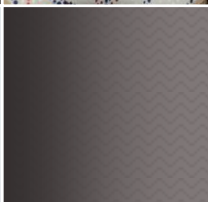
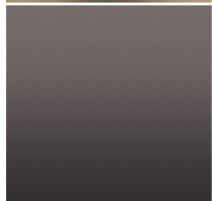


2006-
2007

Youth Solvent Addiction Committee Annual Report

For year ending March 31, 2007

ysac@shaw.ca



Cover Story

The art work displayed on the cover was contributed by staff members of the various YSAC centres who were participating in a week long training in Emotional Intelligence in March 2007.

The art is the result of a learning culmination exercise where participants are free to express their own creativity in the medium of Australian aboriginal dot painting.

Table of Contents

Cover Story.....	2
Table of Contents	3
Centres at a Glance.....	4
Chairpersons Message	5
Vision and Mission	6
History.....	7
2006-2007 Strategic Goals.....	8
Leadership and Partnership.....	8
Human Resources.....	9
Information Management	10
Client Services.....	11
Environment	12
Pictures.....	13
Accountability	14
Finance.....	14
Networking and Partnerships.....	15
Centre Descriptions.....	17
The Charles J. Andrew Youth Treatment Centre.....	17
Ka- Na -Chi- Hih Treatment Centre.....	19
Leading Thunderbird Lodge	22
Nenqayni Wellness Centre	23
Nimkee Nupigawagan Healing Centre.....	25
White Buffalo Treatment Centre.....	27
Whiskyjack Treatment Centre	29
The White Swan Treatment Centres.....	30
National Occupancy	32
Region of Origin by Centre.....	34
National Client Profile	38
Historical Analysis National Summary	42
YSAC Centres in Canada.....	43

Centres at a Glance

<i>Treatment Centre and Location</i>	<i># of beds</i>	<i>Age Range</i>	<i>Gender</i>	<i>Intake Dates</i>	<i>Special Services</i>	<i>Total Admissions 2006-2007</i>
Charles J Andrew Centre Sheshatshiu, Labrador Established– May 2000	10	11-17	Gender Blocks	4 month block July April August	Outreach Day Program Family Treatment Wilderness Program	31
Ka Na Chi Hih Solvent Treatment Centre Thunder Bay, Ontario Established–November 1996	12	16-25	Males	Continuous	Adult Services 2-year Program	37
Nenqayni Wellness Center, Williams Lake, B.C. Established– September 1996	10	13-18	Female	January/July	Family Treatment	36
Nimkee NupiGawagan Healing Center Muncey Ontario Established– January 1997	9	12-17	Gender blocks	January May September (alternating genders)	Family Treatment Outpatient Community based interventions Training	27
Whiskyjack Treatment Center, Norway House, Manitoba Established– October 1996	22	12-17	Co-Ed	Rotating gender Block intake	Aftercare Community Development	
White Buffalo Youth Inhalant Treatment Center, Sturgeon Lake, Saskatchewan Established—January, 1997	10	12-17	Females	January/May/September	Aftercare Outreach Mobile Tx camps	48
White Swan Treatment Center Inc. Kinuso, Alberta Established– September, 2000	12	10-17	Co-Ed 2 centres	Continuous	Aftercare Family Counselling	19
Young Spirit Winds Centre Hobbema, Alberta Established	12	12-17	Co Ed	Day Treatment Spaces	Out Patient Only	38
Kainaiwa Adolescent Centre	7	12-17	Co Ed	Block Intake: 4 intakes per year	Residential	41
Leading Thunderbird Lodge Fort San, Saskatchewan Established January 2007	15	12-17	Co Ed	Continuous Intake	Outreach Aftercare Family Counseling Residential Treatment	11 (Jan 07- March 07)



Chairpersons Message

I am pleased to present the Annual Report for the Youth Solvent Addiction Committee for the fiscal year ending March 31, 2007. You will see some pictures of our various training events which exemplify once again the Canadian Youth Solvent Addiction Committee's involvement in many meaningful national and International Events. Besides the ongoing training and support given to the ten members of the Youth Solvent Addiction

Committee, we continue to consult with aboriginal groups in Australia as they embark on developing a comprehensive solvent abuse intervention program. In August and September of 2005, many YSAC Treatment Centres hosted a 7 person delegation from Australia, including Aboriginal people and researchers interested in best practices and culturally based programs. That visit resulted in a third party report being written about the YSAC program which highlighted YSAC Treatment Centres strengths and many accolades for the leadership demonstrated by First Nations & Inuit peoples in addressing solvent abuse. It is very humbling to be able to share with other Indigenous peoples a "belief" in our cultural ways as the answer to addictions.

I was very honored to be asked to deliver a keynote address at this years "Healing Our Spirit World Wide" Gathering in Edmonton, Alberta. This event has always been a meaningful gathering to the staff of the YSAC centres, and I was pleased to bring the philosophy of the centres, a strength based perspective on healing, to the opening of the gathering. In fact YSAC made a total of 4 presentations at the gathering and all workshops were well attended...including many organizations from Australia who were developing solvent abuse treatment programs, provincially based services within Canada other First Nations Leaders and community workers all looking for information on how to work with youth addictions generally and solvent abuse specifically.

This year we are pleased to welcome a new centre into the YSAC family. Leading Thunderbird Lodge opened in January 2007, adding more much needed residential healing spaces in the province of Saskatchewan. We welcome their new Director Karen Main to the network.

YSAC shares this annual report in the spirit of accountability and with a commitment to improving the lives of the youth and young adults with whom we work. Young people are absolutely amazing and we continue to marvel at their never ending resiliency. We want to take this opportunity to thank our partners at First Nations Inuit Health Branch, Nechi Institute, Canadian Centre on Substance Abuse and the National Native Addictions Partnership Foundation for collaborating with us and for sharing a vision of hope and courage. The staff of the YSAC Treatment Centres and our National Coordinator, Debra Dell, are integral to the success that YSAC has experienced through its challenges and achievements, and for this we are grateful. We believe that the information contained within this report will provide a glimpse of our accomplishments and as such, we invite you to celebrate the strengths of First Nations and Inuit youth as you read this report.

In the spirit of caring, courage, compassion and commitment,

A handwritten signature in cursive script that reads "Carol Hopkins".

Carol Hopkins

Chairperson, Youth Solvent Addiction Committee

Vision and Mission

Our Vision

“Developing partnerships to provide Solvent Addiction Treatment service for First Nations and Inuit young people and their families

Our Mission

To Create a First Nations and Inuit Health Recovery Network of Solvent Treatment Centres for Native young people, their families and communities.

This national continuum of quality support services will be based on First Nations and Inuit principles and values, Committed to developing partnerships.

To recognize and respect the natural value of First Nations and Inuit youth and to assist them in recapturing their self worth and sense of belonging in balance with their families’ and communities’.

History

1995, Health Canada, through the Brighter Futures/ Solvent Abuse Initiative, began the development phase for several First Nations Treatment Centres geared toward adolescent Solvent Abuse. Six centres were initially awarded, (with one already in existence) in various regions of Canada. In July 1996, First Nations and Inuit Health Branch began the establishment and implementation phase for the permanent sites. In 1998, there were additional fiscal resources set aside, adding an additional three treatment centres to this network.

The original group of seven centres formed what has become a supportive network of communication and idea sharing, including the development of visionary planning for creating a cohesive and fully integrated system of national cooperation.

Throughout 1998 this network, named The Youth Solvent Abuse Committee or YSAC, came together to begin the development of a formal accreditation model. In conjunction with the accreditation process, several methods of effective treatment delivery were shared within the group. From this sharing, the group began to develop a vision of best practice guidelines for adolescent solvent treatment.

The National YSAC group is now comprised of a network of 10 First Nation Youth Treatment Centres spread throughout Canada. Eight of the centres are solvent abuse specific services while 2 are targeting multi addictions. YSAC is composed of one representative from each of the National Treatment Centres, usually the Executive Director, with regional and national representation from First Nations and Inuit Health Branch. Since 2000 the group has welcomed associated members from the USA, provincial facilities and drug and alcohol centres for youth.

2006-2007 Committee Representation

Carol Hopkins, Nimkee NupiGawagan Healing Centre, Muncey, Ontario (Chairperson for YSAC)

Antoine Archie, Nenqayni Wellness Centre, Williams Lake, B.C.

Bertha Paddy , White Swan Treatment Centres, Kinuso, Alberta

Wanda Smith , White Buffalo Youth Inhalant Treatment Centre, Prince Albert, Saskatchewan

Walter Arthurson, Whiskyjack Treatment Centre, Norway House, Manitoba

Vincent Simon, Ka Na Chi Hih Solvent Abuse Treatment Centre, Thunder Bay Ontario

Kristin Sellon , Charles J. Andrew Youth Restoration Centre, Sheshatshiu, Labrador

Theresa Bull, Hobbema Youth Centre

Denise Shade, Kanaiwa Adolescent Centre

Karen Main, Leading Thunderbird Lodge

Kathleen Laskoski has represented Health Canada, National Addictions Team as partner to YSAC

2006-2007 Strategic Goals

The Strategic Goals for YSAC are formulated each year at a YSAC meeting and then submitted to First Nations and Inuit Health Branch in the form of an annual work plan. The identified priorities have been organized in alignment with the substance abuse services accreditation program to ensure that national initiatives are reflective of the entire spectrum of requirements to run a residential treatment facility.

These areas are: Leadership and Partnership, Human Resources, Environment, Information Management and Client Specific Services.

Leadership and Partnership

2005-2006 Workplan Goals

- Development of a standardized board reporting kit.
- Conduct a board survey related to board governance activities.
- templates for key leadership areas including Human Resource planning.

2005- 2006 Leadership Goals Acheived

- YSAC centres contributed to a national collation effort and the end result was a standard board reporting template to be used when reporting centre activities to boards of directors.
- A board suurvey was developed and disseminated and results were collated into one document that gives a picture of board make up across the country.
- Templates were developed in the areas of human resource planning, hazard analysis

Additional Leadership Partnership Activities

- Developed a template for pandemic flu considerations related to accreditation standards
- We resigned our MOA with the Canadian Centre on Substance Abuse November 15, 2006
- We resigned our MOA with Nechi Institute March 8, 2007

Human Resources

Having competent and dedicated personnel is a priority for all YSAC centres. Human Resource activities are affected by such things as industry competition, geographic barriers and a workforce that is susceptible to high burn out rates. The Human Resource Activities of the YSAC group are focused around both improving Human Resource administration systems and increasing the quality of work life for the employees of the YSAC centres. There has been a lot of success as evidenced by the large contingent of YSAC employees entering between five and ten years of employment. Through our shared work plan and the accreditation of the centres we envision a Human Resource system that considers:

- Maximum competency
 - Nationally or provincially certified workers
 - High employee satisfaction
 - Systems for streamlined recruiting, retention and reporting
- The goals of the YSAC work plan are aligned around meeting these framework objectives.

2006-2007 Workplan Goals

- Develop a training module on mental health and addictions
- certify YSAC staff in resiliency theory
- deliver a 5 day emotional intelligence level one training
- deliver a 5 day Emotional Intelligence level two training
- Develop a template for staff exchanges within the YSAC network
- deliver a 3 day training in clinical supervision
- Deliver a three day Research Methods and data base training.

2006-2007 Human Resource Goals Acheived

- A preliminary mental health module has been developed and YSAC will partner with an professional mental health organization to develop a full level course.
- Resiliency Training was held January 16-18, 2007
- Emotional Intelligence level one was held December 4-8, 2006
- Emotional Intelligence level two was held March 26-31, 2007
- A template for staff exchange was completed, and ratified at the November YSAC meeting.
- Clinical Supervision was held September 19-21, 2006
- Research Methods was held February 21-23, 2007

Additional Human Resource Activities

- YSAC assisted with the development and delivery of two separate staff retreats one at Nimkee Nupigawagan and at Charles J Andrew, both centred around developing employee engagement and team building.

Information Management

Information Management activities are activities related to gathering, reporting, recording and data collection systems. This area has been one that has historically received little attention and little funding, yet it is the area that most directly affects the committee and the individual centres attempts to be transparent, accountable and prove effectiveness of treatment services. We are elated to report the development of a national data base that YSAC centres can use to record client and centre data. The data base has been utilized since April 1, 2006 and centres are diligent about submitting suggestions for additions and improvements. While we do not yet have full centre usage, we are able to draw out a significant array of statistical information.

2006-2007 Workplan Goals

- Continue development of the National YSAC data base
- Develop a plan for regular communication with centre boards, regions and interested partners.

2006-2007 Information Management Goals Acheived

- The YSAC data base was online ready for use April 1, 2006 the year was spent receiving feedback and making changes as centres entered data and began to try to roll out reports.
- YSAC developed a newsletter format and a plan to have newsletters circulated to referral communities, regional offices and partners.

Client Services

Client Services goals are goals that are specific to improving the direct service delivery. YSAC centres consider historical problems, a view to streamlined services and client centred approaches when developing our National Client Services Goals. In addition to the collective work we do as a team, each centre has undertaken a thorough review of its client services programs through the three year accreditation cycle. Having a focus on client services both as a national committee and as accredited centres allows us to ensure:

- Commitment to excellence in client treatment experience
- Guaranteed client centered focus and participation in our clients care
- Consistency in approach regardless of location
- Responsiveness, accessibility, reliability and security for our clients in the treatment centres.

2006-2007 Workplan Goals

- Development and Ratification of an Elders Protocol
- Continued attention to improving centre based addiction programming curriculum.
- Reprint and distribute the 2005 Inhalant Prevention Poster.

2006-2007 Client Services Goals Acheived

- An Elders protocol was drafted then edited at a YSAC meeting and is available for adoption by boards of each centre.
- Support services were provided to centre staff working on curriculum revisions.
- 500 copies of the YSAC prevention manual were reprinted and distribution continues

Environment

One of our major considerations as a national committee is to ensure that the buildings and grounds we use to deliver services are not only safe, but comfortable, inviting and conducive to the type of service the YSAC centres are delivering. As a national committee when we set environmental goals and work plan items, we are focusing on safety as a first priority and then dealing with issues such as risk management, healthy living, promotion of physical health, and having enough and the right type of space. Over the years each centre has had to deal with varying and specific environmental challenges. We are always supportive of any centres individual efforts to improve the physical environment and ultimately the client services contained within. Centres receive no capital funding for facility improvements and maintenance, thus in the ten years of existence all upgrades have required planning within the existing treatment centre budget.

Through both provincial licensing and the accreditation process each centre is inspected and held accountable in such environmental areas as:

- Respect and Care for the environment
- Infection Control
- Disaster Planning
- Work life health
- Fire and medical Emergency preparedness
- Kitchen and Food services health

2006-2007 Workplan Goals

- Development of a shared response for pandemic flu crisis
- Continued development of a meaningful capital reserve protocol, including ratification by regions

2006- 2007 Environment Goals Acheived

- YSAC in conjunction with YSAC directors developed some guidelines and a template for pandemic response, each centre can finalize and ratify with boards and communities.
- FNIHB headquarters has committed to reviewing the historical capital situation and work to come up with a plan that is best for centres, clients and sound financial management.

Additional Environment Activities

- leading Thunderbird Lodge completed major renovations to a former adult treatment centre in order to reopen as a youth facility.

Pictures



Emotional Intelligence Level 1 December, 2006



Level 2 Emotional Intelligence
March 2007



Charles J Andrew Staff Retreat October, 2006

Accountability

YSAC as a committee and the individual centres have several mechanisms in place to promote accountability to clients, parents and funders. YSAC centres employ a routine procedure of published satisfaction surveys, annual general meetings and publication of individual centre annual reports.

As a routine portion of the accreditation process surveyors speak directly to client and community focus groups, centre staff, and referral sources about their experiences with the centre.

YSAC committee minutes are circulated through each treatment centre and its board of directors and included with regional FNIHB reports and NNAPF Board meetings. In addition, YSAC demonstrates accountability through the standard processes of each centre: an annual audit, Substance Abuse Information System Reports, Client Data-Base Profiles, Occupancy rates (minimum of 80%), Operational Days (minimum of 351 days), and Accreditation and/or Provincial licensing status.

Perhaps the most significant indicator of YSAC accountability has been in the achievement of the majority of our goals over the year. The summary of goal achievement presented earlier in this report provides some perspective of the scope of work the YSAC group has taken on and achieved as a team with sincere commitment to advancing the field of solvent / inhalant addiction services.

Finance

All YSAC centres are federally funded projects through the Federal Brighter Futures Initiative. Each centre is managed through some form of First Nations Governance structure which may include provincial Incorporation or Tribal Administration. As a result of their various governance structures, all centres undergo an annual audit performed by an independent provincial auditor. Audits as well as individual centre annual reports are submitted to First Nations and Inuit Health Branch both regionally and nationally.

Each centre is funded at 103,000.00 per bed annually. The youth solvent addiction committee is funded for coordination services, meeting expenses and projects as submitted in advance by way of an annual work plan. Itemized financial statements are reviewed in the presence of First Nations and Inuit Health Branch at each quarterly YSAC meeting, and an annual financial summary is provided by the incorporated organization hired to administer the YSAC contribution agreement. This fiscal year Nimkee Nupigawagan acted as host and administrator for the YSAC contribution agreement.

Networking and Partnerships



Nov 15, 2006 Second Signing Ceremony, initial signing Dec 6, 2004

For the past three years YSAC has enjoyed a fruitful partnership with the Canadian Centre on Substance Abuse (CCSA) This partnership has resulted in many worthwhile shared projects including research reports, prevention aids and mutual information sharing. This year we recognized the value of this partnership by signing the **Memorandum of Understanding** for an additional three years.





The Charles J. Andrew Youth Treatment Centre

Charles J Andrew is located in the community of Sheshatshiu, Labrador. The Centre offers solvent addiction treatment services for First Nation youth, between the ages of 11 and 17. Charles J Andrew is a twelve-bed facility that operates a four month intake cycle with a 6 week family component all year round.

Mission: The Charles J. Andrew Youth Treatment Centre is committed to empowering aboriginal youth throughout Canada through the provision of a holistic healing program. The program is strongly influenced by traditional aboriginal values, beliefs and practices. Spirituality and reconnecting to the land will be key components in nurturing and building self-confidence and developing skills amongst youth to help them reach their full potential as community members.

Services Offered:

Treatment Program

Individual Therapy
Group Therapy
Traditional Native Therapy
Family Counseling
Academic studies
Recreation
Wilderness Program
Virtues Program

Pre & Post Treatment

Help referral agencies complete individual assessments
Help referral agencies develop treatment plan for clients
Develop individual aftercare plan with clients and community agencies
Contact former clients on a regular basis
Provide communities with workshops on solvent abuse

Charles J Andrew Treatment Centre Program Highlights

A flower garden was planted by the youth to add appeal to the Centre, the Greenhouse continued to flourish vegetables.

A new cabin was built in a more accessible location. The youth has been spending more time at the cabin to experience the cultural aspect of the program.

Youth attended the regional Multi-Cultural youth gathering.

Youth were trained in Suicide Intervention in the means to help their peers with suicide issues.

Youth were involved in the local Drum Dancer Presentation, which was covered by the Labradorian (local news paper) and the local radio station.

Youth participated in the community suicide walk, in memory of loved ones lost through suicide.

An art program was implemented in the program for the youth.

Youth participated in tours with the Life Skills program: tour of military aircraft at 5 Wing Goose Bay, Churchill Mine Tour, Museums, Canadian Helicopter tour.

Grief Recovery was implemented into the daily program for the youth.

Youth continued to participate in cultural activities such as; sweats, fishing, canoeing, healing circles, Nutshimuit, etc.

The Centre has achieved accreditation in January 2005 with only four major recommendations. Since this time the Centre has been continuing with the cycle to keep our accreditation. The Accreditation Coordinator has been attending the Accreditation Forums with CCHSA on an annual basis in means to stay on par with any changes with the software and networking with other organizations.

Staff message board was introduced; staff would leave a positive message to another staff person. This boosted staff moral and created a positive atmosphere.

Staff was trained in the Youth Justice Forum. In regards to having the youth deal with an issue and to develop consequences for their actions.

The Centre was on Board with other organizations in bringing Motivational Speaker-George Shavilo, into Labrador. Mr. Shavilo gave a presentation at the Labrador Interpretation Centre discussion the struggles of suicide; the youth attended this presentation and also had visit at the Centre with him.

The Centre was provided with a teacher through the Labrador School Board, who had experience in working with youth in the justice system. A lot of great changes have been implemented in the education department with the youth.

The Centre has trained staff to be Crystal Meth Specialist. Staff has been invited to do presentation in the local schools, and with the RCMP.

Youth Case Manager has been busy traveling to Nunavut, Labrador Coastal communities, Nova Scotia, New Brunswick, and Quebec to presentations and outreach work



Ka- Na –Chi- Hih Treatment Centre

Our Mission:

In keeping with the sacred teachings of the Creator, Ka-Na –Chi-Hih will provide a nurturing and supportive environment for First nations youth who are embarking on their healing journey to wellness of body, heart , mind and spirit.

Ka-Na-Chi-Hih Specialized Solvent Abuse Treatment Centre was initiated by Nishnawbe Aski Nation in 1996; the first client was admitted January 1997. Ka-Na-Chi-Hih had a vision to find a location that would be best suitable and accessible to resources for the care and safety of the clients. The vision became reality when the doors re-opened for clients May 2005 at its beautiful newly renovated building inside the city on a three-acre lot near the river.

Ka-Na-Chi-Hih is a 12-bed long-term treatment program, for First Nations males between 16 & 25 yrs old throughout Canada, who are chronic solvent abusers; which is affecting their life socially, physically, emotionally and spiritually. The programming is holistic and uses traditional as well as contemporary models of treatment. Ka-na-chi-hih Specialized Solvent Abuse Treatment Centre program currently consists of two treatment phases. Phase I: The “Core Group Program” of programming designed to educate the clients for healthier skills in Addition to one on one counselling sessions. Phase II: The “Individualized Treatment Plan” is geared towards meeting the client’s specific needs. Goals for self-development include utilization of the skills obtained, to execute confidence & take responsibility in positive decision-making, to develop motivation and empowerment of self, to continue and maintain education for higher living, and to increase in awareness of community resources available.

Ka Na Chi Hih Program Highlights

Program Highlights:

Ka-Na-Chi-Hih held our annual SAAFE walk on September 14, 2006.

Program Stats:

66% of the total 37 clients had graduated into the second phase of treatment,

67% of the graduates went on to enter into a educational program to further their education.

30% of the client regularly participated in volunteering,

41% presented acceptable peer mentoring within the facility,

84% enhanced their life skills, and 3

5% activity utilized community resources.

Staff Training Highlights:

Emotional Intelligence I – 2 staff (certification)

Emotional Intelligence II – 2 staff (certification)

Suicide Prevention and Intervention Training – 3 staff (certification)

Resiliency Training – 1 staff (certification)

Non-Violent Crisis Intervention Training – 12 staff (certification)

Con-current Disorders Training – 3 staff

Addictions Counsellor II – 1 staff (certification)

Clinical Supervision – 1 staff (certification)

Accreditation Educational Workshop – 15 staff (certification)

Admission, Discharge and Assessment Tools – 1 staff (certification)

WHIMIS – 17 staff (certification)

First Aid & CPR – 14 staff (renewals) (certification)

Infection Control – 26 staff

Smoking Cessation – 6 staff

Pandemic – 15 staff

Sexual Diversity – 2 staff

Fire Safety – 26 staff

Penelope Database Training – 26 staff

Traditional & Cultural Teaching – 9 staff

Medication Administration – All frontline staff

Counselling Male Victims of Sexual Abuse – 3 staff

Outreach Activities:

- Attended the Con-current Disorder Forum, gaining further knowledge to better serve our clients
- Participated in the gathering for the development of the Pikangikum Land Base Treatment
- Fostered linkages with Community Psychologist and B.I.S.N.O.
- Attended the Ontario Works Homeless Initiative to aid in servicing our clients
- Participated in the study “A Community-Based Approach to Exploring Brain Injury from an Aboriginal Perspective” with the Faculty of Medicine from the University of Toronto
- Forwarded news letters on Ka-Na-Chi-Hih to several communities across Canada, will be an on-going process to identify the services Ka-Na-Chi-Hih provides
- Followed-up on Land Bade Treatment Centre in Pikangikum
- Networked and Publicized Ka-Na-Chi-Hih with individuals and organizations from around the world at the Healing Our Spirits Worldwide Conference in Edmonton, AB
- Association with Kelly Hicks from the Indian Friendship Centre regarding FAS assessments for clients
- Participated in the Con-current Disorder Training Needs Assessment
- Provided information regarding Ka-Na-Chi-Hih to 2 individuals visiting from Australia
- Awareness booth set-up at the Festival of Services 2006
- Partnered with Dr. Barbara Coomes to assist with any necessary initial assessments for clients at risk of experiencing a significant mental health issues
- Community Needs Assessment forwarded to several communities in Northern Ontario will continue to take part in obtaining community needs assessments from the remaining on Ontario, followed by other provinces.
- Board member of the Aboriginal Interagency Council, and affiliated with the Urban Aboriginal Strategy.
- Member of the Addictions Advisory Committee, representing Ka-Na-Chi-Hih and the Indigenous North
- Proposed synchronizing outreach services with Smith Centre Youth Program
- Provided information on Solvent Abuse and the Effects to several secondary students in Ontario.
 - 5 Confederation College Students – Social Service Program
 - 2 Lakehead University Students – Native Access Program
 - 1 Fanshawe College Student Woodstock – Child & Youth Care Worker Program
- Supplied Sister Margaret Smith Centre Youth Program with information on the effect of Solvent Abuse
- Attended the Con-current Disorder Conference, Dr. Kenneth Minkoff
- Advocated on behalf of past and present clients in a variety of personal events
- Participated in the study “From Health Care to Home Community: An Aboriginal Community-Based ABI Transition Strategy in Ontario” with the Faculty of Medicine from the University of Toronto
- Aided past clients who require further guidance during their re-integration into the community



Leading Thunderbird Lodge

The File Hills Qu'Appelle Tribal Council and Touchwood Agency Tribal Council envisioned a new facility that would address a growing need – the treatment of youth who were experiencing addictions with drugs, alcohol and solvents. They envisioned a facility that would assist in building strong individuals based on a holistic treatment program that addressed the realms of: spiritual, physical, psychological and social well-being. Their vision became a reality when the doors to **Leading Thunderbird Lodge** opened in January 2007.

Leading Thunderbird Lodge is a new residential youth treatment facility located in the beautiful Qu'Appelle Valley in the Village of Fort San, approximately five minutes from the Town of Fort Qu'Appelle, Saskatchewan.

Residential programming is geared towards male and female youth who are between the ages of 12 – 17. The Lodge has a capacity of 15 residential beds and is also building an Outreach component that will not only assist in the pre and post admission process for residential treatment, but is also creating a menu of educational presentations on topics such as: alcoholism, marijuana, solvents and other drugs. Families and referral agencies will have another resource through **Leading Thunderbird Lodge** in establishing preventative measures for youth addictions within their communities.



Nenqayni Wellness Centre

Nenqayni is located in the heart of the Cariboo Region of British Columbia in the territory of the Chilcotin Shushwap and Carrier First Nations. Nenqayni's Youth Program has been running for over 10 years. We serve First Nations Youth and their families from communities across Canada. The Youth & Family Inhalant Program is a six month program for the treatment of female solvent abusers ages 13-18. The program also addresses other issues through individual and group sessions such as: drug alcohol and cross addictions, grief and loss, anger management, family violence, self-esteem, sexual abuse, co-dependency, self-awareness, communication skills, life-skills, spirituality, health education and personal wellness. The balanced program is enhanced by cultural teaching, academic assistance, hand crafts, recreation and a variety of physical activities.

Our statement of purpose is;

"To provide holistic healing to First Nations and Inuit youth and families, and communities in a safe and secure environment."

We believe that the family and community is an important part of youth treatment. We provide a family component near the end of the youth's treatment cycle. The families are given an opportunity to join the program for a period of four weeks to participate in family counseling sessions designed to strengthen family unity prior to their return to the home community. Aftercare is also provided for the youth, a 24-hour telephone counselling is available and community visits are made by staff whenever possible.

Nenqayni Wellness Centre Program Highlights

2006 – 2007 has been a year of progress and positive change in the Clinical Department. A primary focus has been personal wellness of both clients and staff. A wellness committee was formed and has been instrumental in raising the overall wellness of the Centre. An education program aimed at smoking reduction among clients and staff has been put in place and is meeting with good results. We continue to form partnerships with community agencies to broaden our resource base.

Our focus on educational support for our clients continues to produce excellent outcomes. 2006 – 2007 saw our first high school student graduate while attending classes at Nenqayni. As well, we have received news that a past client who returned to school after completing YFIP received the most improved student award at her schools award ceremonies this spring.

Staff Development Highlights:

During 2006 – 2007 clinical staff received certification from the First Nations Wellness/Addictions Counsellor Certification Board. New clinical staff hired in the past year is required to apply for certification from FNWACCB upon the successful completion of their six month probationary period. All clinical staff is expected to implement a personal program of professional development to ensure continued competency in the field of addiction counseling.

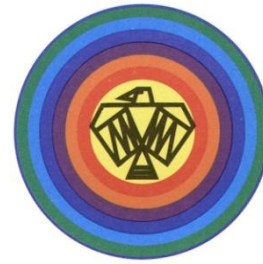
Contacts & Outreach Activities:

Contacts are recorded on a monthly basis, they are recorded in detail as to whether the contact is made by phone, email, fax or in person. Statistics are kept on the number of contacts with more detailed information for each such as who was calling, why they were calling and what action was taken. These contacts are compiled into quarterly figures as follows:

Quarter Contacts

1st 87
2nd 131
3rd 73
4th 97

Outreach is undertaken by the two Intake Coordinators (one from the Family Alcohol & Drug Program and one from the Youth & Family Inhalant Program). The workers may attend workshops, AGM's, conferences or activities where it would be appropriate to promote Nenqayni Wellness Centre's programs.



Nimkee Nupigawagan Healing Centre

Nimkee Nupigawagan offers residential treatment services for First Nation Youth, ages 12 to 17, who are challenged with solvent addiction. As a culturally based program, assessment & counseling begin from a place of respect that focuses upon the strengths of Native youth, their family and community. There are 3 intakes per year: January to April, May to August, and September to December. These intakes alternate between female and male gender-based program. Families of the youth (3 people) are invited to stay in the residence with the youth midway through the program for 1 to 3 weeks. When necessary and appropriate, psychological and psychiatric assessments are completed through referral. Treatment Program Includes:

Individual Therapy: Expressive Arts Therapy, Traditional Native Therapy

Individual & Group Counseling: Reality Therapy, Life/Social Skills, Personal Life Management, Violence Prevention, Sexuality, Addictions

Group Therapy: Art Therapy, Sexual Abuse, Family Violence, Grief & Loss

Traditional Native Therapy: Sweat Lodge, Pipe, Smudge, Fasting & Other Ceremonies; Clan, Male & Female Roles & Responsibilities and other Traditional Teachings; natural medicine for cleansing and liver detoxification

Family Counseling: Parenting Skills, Parent Support, support networks, family dynamics

Education: on site learning centre

Recreation: biking, swimming, skating, bowling, outdoor/indoor team sports, camping

Health Services: Physician, Dentist & Eye Doctor appointments, referrals for other health care needs

Work Placement: day care, summer day camp, library within NNHC

Adventure Based Recreation Program

Nimkee Nupigawagan Healing Centre Program Highlights

Program Highlights:

Cultural Program Activities:

- Youth continue to be assessed by Traditional Practitioners through the services of Southwest Ontario Health Access Centre. Through the assessment, the youth receive clarification on their Spirit Name, Clan and any special ceremonies or feasts that need to be conducted as part of their Treatment Plan of Care.
- 59% of the male & female youth participated in Fasting Ceremonies by Fasting for 2 days and 2 nights.
- Youth participate in Full Moon Ceremonies as well as their parents when they are at NNHC.
- A majority of the youth participate in bi-weekly Sweat Lodge Ceremonies
- Memorial Feasts are held before each of the Fasting Ceremonies which provides a meaningful process for youth to be able to address their unresolved grief.

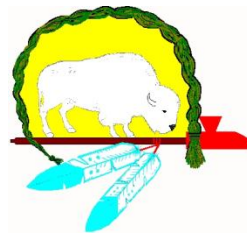
Program Stats: Performance Measurement

The treatment program provides programming that addresses the four parts of self: the spiritual, emotional, physical and mental well-being. There are many activities that facilitate a movement towards well-being in these four quadrants for the youth. The following outline is a list of the measurements that help NNHC to monitor the difference the program makes in the lives of the youth. Each instrument is administered at intake and at discharge.

Spiritual: Self

At discharge the average improvement is 5 points on the resiliency scale. The average increase for all youth in hand eye foot coordination is 25.5%.

1. Spiritual - there is no way to measure the difference the spirit makes in treatment. The self esteem scale which includes questions about the youth's perception of their identity is used as an indicator to monitor their growth in their identity development. At the core of their identity is their spirit.
2. Emotional - one of the foundations of the program is "resiliency theory", that is, there are core characteristics about each youth that has helped them overcome many obstacles, make good choices and be successful in their lives, despite the adversity they face. The resiliency scale is a 32 point scale that is administered at intake and again at discharge to determine how the youth have moved in strengthening their resiliency traits or characteristics.
3. Physical - the Valpar instrument is a maze like instrument that requires hand, foot and eye coordination in its operation. The difference in scores at intake and discharge are an indication of the improvement the youth has made in their hand, eye, and foot coordination as a result of their participation in the treatment program.
4. Mental - the Learning Centre is a facility based school program that provides language arts and math curriculum through a number of creative learning centres and activities. Again, youth are tested at intake to determine their learning level and then a youth specific program is created to help them continue their education while in treatment. The youth attend the learning centre for 1.5 hours per day and the



White Buffalo Treatment Centre

The White Buffalo Youth Inhalant Treatment and Intervention Program is a 10 bed residential facility located on the Sturgeon Lake First Nation, 40 minutes North West of Prince Albert, Saskatchewan. The Treatment Centre is designed to meet the needs of First Nations youth between the ages of 12 and 17, who are involved with inhalant abuse and who are experiencing related problem areas.

The program is based on a holistic treatment model. Using the four cornerstones of treatment, spiritual, emotional, physical and mental, as well as using the concept of "living therapy" where by treatment is integrated into all interactions in which the youth participate.

It is the belief of the White Buffalo Treatment Centre that while it is essential to have both intensive casework and group sessions to review individual problems, it is equally important to integrate relaxation, recreation, life-skills, formal education and cultural activities into a positive therapeutic, interdisciplinary treatment model.

The Treatment Program at White Buffalo Treatment Centre is designed to maximize youth potential through systematically improving self-esteem and equipping youth with "tools for life" The concepts of inner resiliency and strength based assessment are used extensively throughout the treatment process.

The Treatment Program is separated into four distinct six-week phases, with each phase designed to teach different skills useful in developing an inhalant free lifestyle.

One of the unique features of the White Buffalo program is the extensive prevention, early intervention and mobile treatment services that are available to communities of Saskatchewan through the outreach component of the program.

White Buffalo Treatment Centre Program Highlights

Three four month treatment cycles were delivered during the fiscal year. Again this year, White Buffalo faced a high incidence of staff turnover of key positions. This invariably impacted the program and the staff trying to ensure efficient and effective care of clients and delivery of quality programs. Numerous contacts were made by the Outreach team to schools, health fairs, career fairs, conferences and various agencies.

Staff Development Highlights 2006-2007

18 staff and 3 Board Members took part in 789 hours of various training and professional development during this fiscal year. Including such courses as Emotional Intelligence, Life Space Crisis Intervention, Research Methods and Resiliency.

Outreach Activities:

The Outreach program continued to make community presentations to schools, agencies, set up booths at health fairs and conferences, career fairs, etc.

White Buffalo participated in Ochapowace First Nation Cultural Camp with the NNADAP program with approximately 80 youth in attendance.



Whiskyjack Treatment Centre

Whiskyjack Treatment Centre program offers 22 beds for residential treatment services of which 12 beds are dedicated to solvent abuse and 10 beds for other addictions. The program is designed to accommodate First Nation Youth, ages 11 to 17. The program is based on providing effective holistic healing for youth and their families within a safe environment of respect, trust and love. The program is offered continuously throughout the year for female and male clients with both programs operating simultaneously but separated by gender. Intake occurs continuously. When necessary and appropriate, Psychological and Psychiatric assessments are referred.

Treatment Program Includes:

Individual Therapy: Expressive Arts Therapy, Traditional Native Therapy
Individual & Group Counseling: Reality Therapy, Life/Social Skills, Personal Life Management, Violence Prevention, Sexuality, Addictions
Group Therapy: Sexual Abuse, Family Violence, Grief & Loss
Traditional Native Therapy: Sweat Lodge, Pipe, Smudge, Fasting & Naming Ceremonies; Clan, Male & Female Roles & Responsibilities and other Traditional Teachings.
Family Program: Parenting Skills, Parent Support, support networks, family dynamics
Education: On site classroom.
Recreation: swimming, skating, bowling, outdoor/indoor team sports, camping, field trips, Gym
Health Services: regular Doctor, Dentist & Eye Doctor appointments, referrals for other health care needs
Personal Life Management: Structured and systematic program, develop coping skills.



The White Swan Treatment Centres

The White Swan Treatment Centres are located in two separate facilities located in Swan River First Nation and Whitefish Lake First Nation, Alberta. The Swan River centre is 3 hours Northwest of Edmonton. The Whitefish Lake Centre is 4 1/2 hours Northwest of Edmonton.

White Swan was developed in 1999 to assist young people who have a history of inhalant addictions and trauma. The target populations for the White Swan Treatment Centres are male and female Aboriginal youth between the ages of 8 and 17 years. In addition to the use of substances, clients accepted into White Swan Treatment Centres usually exhibit, or are affected by underlying factors which contribute to their inhalant/chemical usage such as trouble with the law and family dysfunction.

The residential treatment care program is six months in duration. The program is made up of several required modules, which are deemed essential to learning prior to a client's discharge. However, it is anticipated that some clients may require extended lengths of stay in order to facilitate and achieve baseline rehabilitation. The program at White Swan Treatment Centres is directed and guided by principles of holistic treatment. These principles respect Aboriginal traditional practices and western practices of treatment, integrating the mental, physical, emotional and spiritual aspects of the individual. It is imperative to the foundation of programs and services, that one on one counselling be provided to the clients, on a regular and consistent basis. In addition, clinical services will be extended to clients on a case by case basis.

White Swan Treatment Centre Program Highlights

For the most part of this reporting period, White Swan Treatment Centres Inc. has focused its attention to infrastructure requirements. Although, there are two existing buildings that are owned by White Swan Treatment Centres Inc. only one of the buildings is suitable for occupation, which is the Faust Centre. The other building (10 ATCO modular trailers) requires additional work to ensure it meets all Inspections standards. The Fire and Environmental Health Inspection Reports did not meet the requirements for occupation in the (ATCO) building. Fire Inspection report recommended an installation of a fire pump and holding tanks to ensure that there is sufficient water pressure in the sprinkler system to meet the requirements in the event there is a fire. The current and existing water line is not sufficient and would not meet the needs in the event of a fire. The cost associated with the purchase of the required up grades to the sprinkler system is approximately \$150,000.00. Negotiations with First Nations and Inuit Health Branch are occurring in an attempt to secure additional funding to purchase the required fire pump and holding tanks.

The Environmental Assessment Report recommended the existing ATCO building be elevated another two feet. The building is situated on a flood plain, and would cause concern in the event of a flood. The cost for the building elevation is approximately \$200,000.00 which was completed by ATCO Structures.

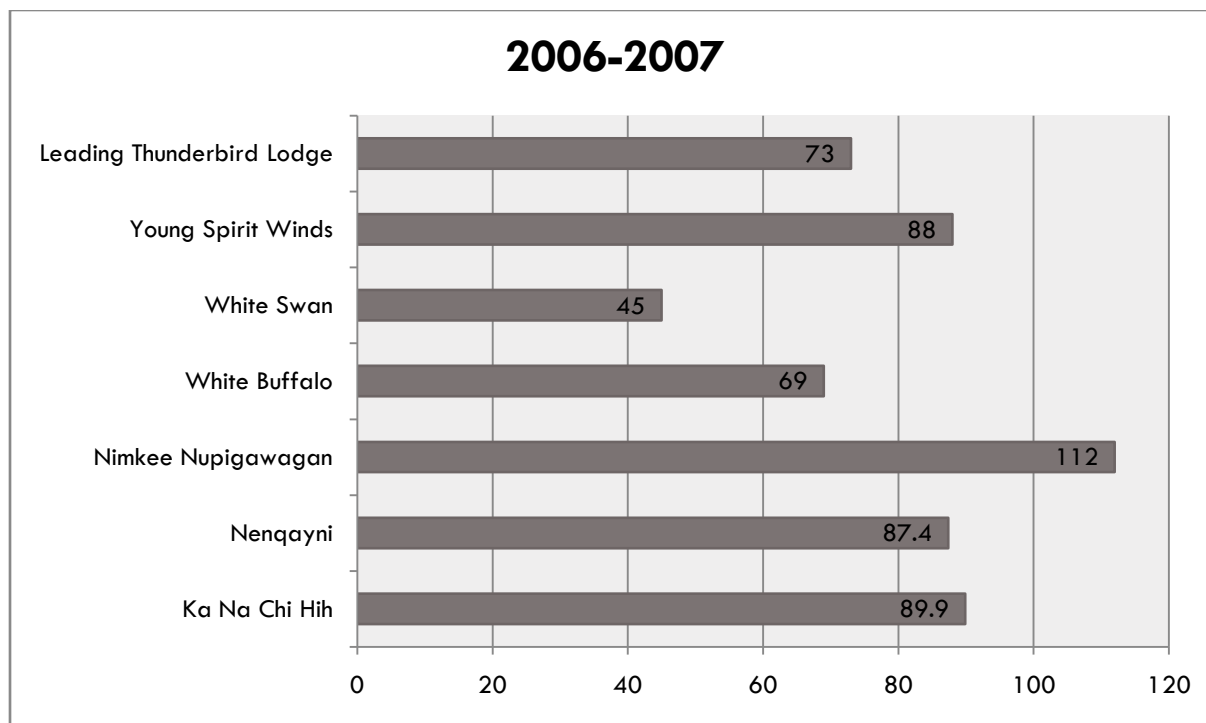
WSTC female clients were relocated from the White Fish Lake Nation community to the Swan River Group Home and subsequently to the WSTC male facility in Faust, Alberta. A major renovation to the White Fish Lake Centre is required to ensure the building is safe for client occupation. The facility is owned by the White Fish Lake First Nation, and therefore any renovations required would have to be completed by the First Nation.

National Occupancy

Treatment Centre	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Annual
Nenqayni Wellness Centre	84%	99%	81%	85.4%	87.4%
White Buffalo Youth Inhalant Centre	73%	84%	68%	53%	69%
Ka Na Chi Hih Solvent Abuse Treatment Centre	91.3%	94%	88.1%	86.1%	89.9%
Nimkee NupiGawagan Healing Centre	105%	111%	123%	111%	112%
Leading Thunderbird Lodge	NA	NA	NA	73%	73%
Young Spirit Winds	95%	80%	100%	80%	88%
White Swan Treatment Centre	36%	41%	58%	48%	45%
National Average Occupancy	81%	85%	99%	77%	81%
Please Note: Occupancy levels are sometimes higher than 100% due to family utilization and community Outreach utilization of program resources. Leading Thunderbird opened in the last quarter					

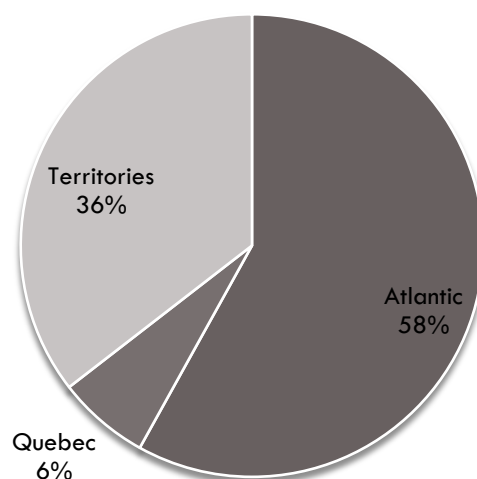
*Not all YSAC centres are reflected in this calculation

National Occupancy (%)

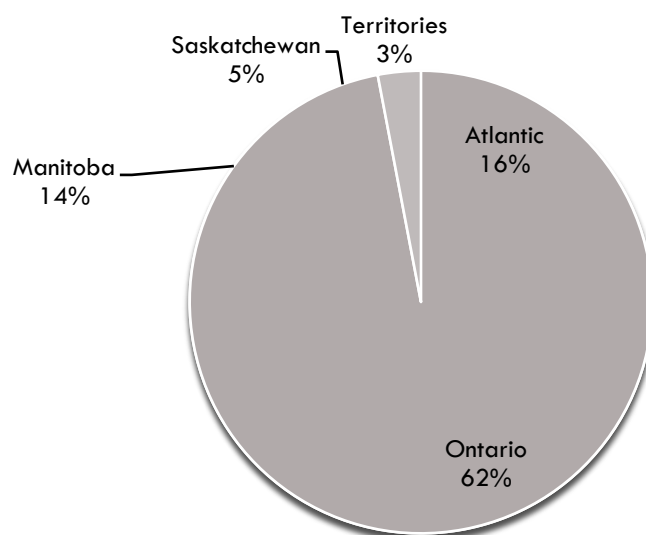


Region of Origin by Centre

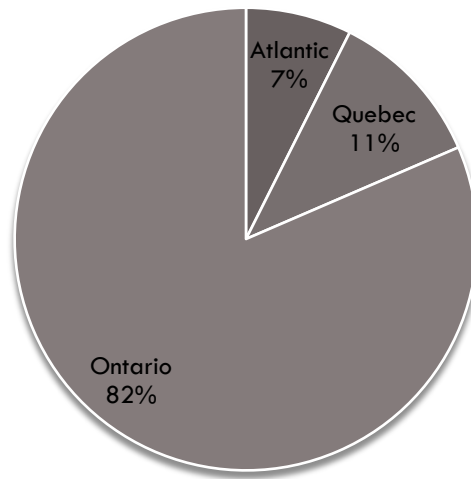
Charle J Andrew



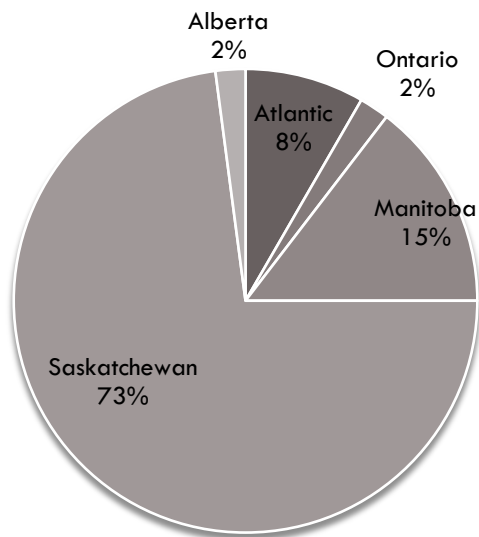
Ka Na Chi Hih



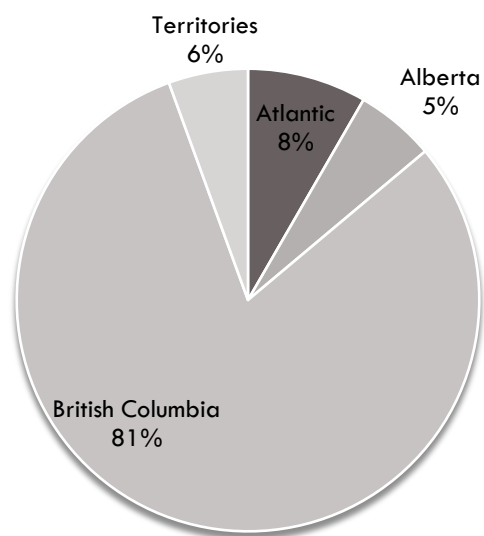
Nimkee Nupigawagan



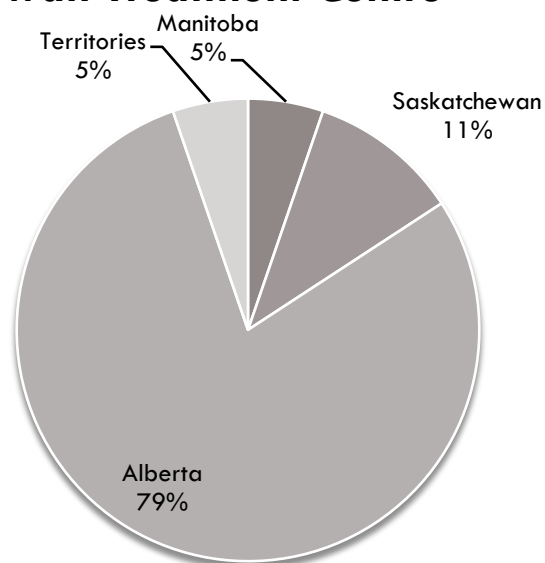
White Buffalo Treatment Centre



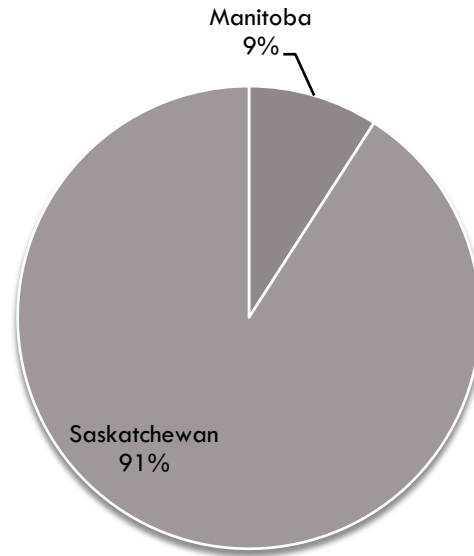
Nenqayni



White Swan Treatment Centre



Leading Thunderbird Lodge



National Client Profile

Average Client Age (At Intake)	Males	Females	Combined
Charles J Andrew	16	15	15.5
Ka Na Chi Hih	20	NA	20
Leading Thunderbird Lodge	14	NA	14
Nenqayni	NA	13.9	13.9
Nimkee	16	15	15.5
White Buffalo	NA	13.8	13.8
White Swan Centre	15	15	15
Young Spirit Winds	14.5	15	14.8
Nationally	15.9	14.9	15.31

Not attending school at entry	Males	Females	Combined
Charles J Andrew	45%	NA	45%
Ka Na Chi Hih	98%	NA	98%
Leading Thunderbird Lodge	18%	NA	18%
Nenqayni	NA	41%	41%
Nimkee	78%	61%	69.5%
White Buffalo	NA	37.5%	37.5%
Young Spirit Winds	30%	50%	40%
White Swan Centre	50%	89%	69.5%
Nationally	53.1%	43.20%	52.3%

Youth Solvent Addiction Committee Annual Report
2006-2007

History of Suicide Ideation	Males	Females	Combined
Charles J Andrew	38%	100%	69%
Ka Na Chi Hih	73%	NA	73%
Leading Thunderbird Lodge	18%	NA	18%
Nenqayni	NA	54%	54%
Nimkee	33%	44%	41%
White Buffalo	NA	62.5%	62.5%
Young Spirit Winds	14%	25%	20%
White Swan Centre	50%	33%	44%
Nationally	37.6%	53%	47.69%

Family Addiction	Males	Females	Combined
Charles J Andrew	45%	100%	73%
Ka Na Chi Hih	94%	NA	94%
Leading Thunderbird Lodge	54%	NA	54%
Nenqayni	NA	78%	78%
Nimkee	67%	100%	84%
White Buffalo	NA	89.6%	90%
Young Spirit Winds	50%	25%	38%
White Swan Centre	70%	66%	68%
Nationally	63.3%	76.4%	72.38%

Youth Solvent Addiction Committee Annual Report
2006-2007

History of Sexual Victimization	Males	Females	Combined
Charles J Andrew	38%	100%	69%
Ka Na Chi Hih	46%	NA	46%
Leading Thunderbird Lodge	9%	NA	9%
Nenqayni	NA	49%	49%
Nimkee	44%	55%	52%
White Buffalo	NA	14.6%	14.6%
Young Spirit Winds	18%	13%	15.5%
White Swan Centre	50%	44%	47%
Nationally	34.1%	45.9%	37.76%

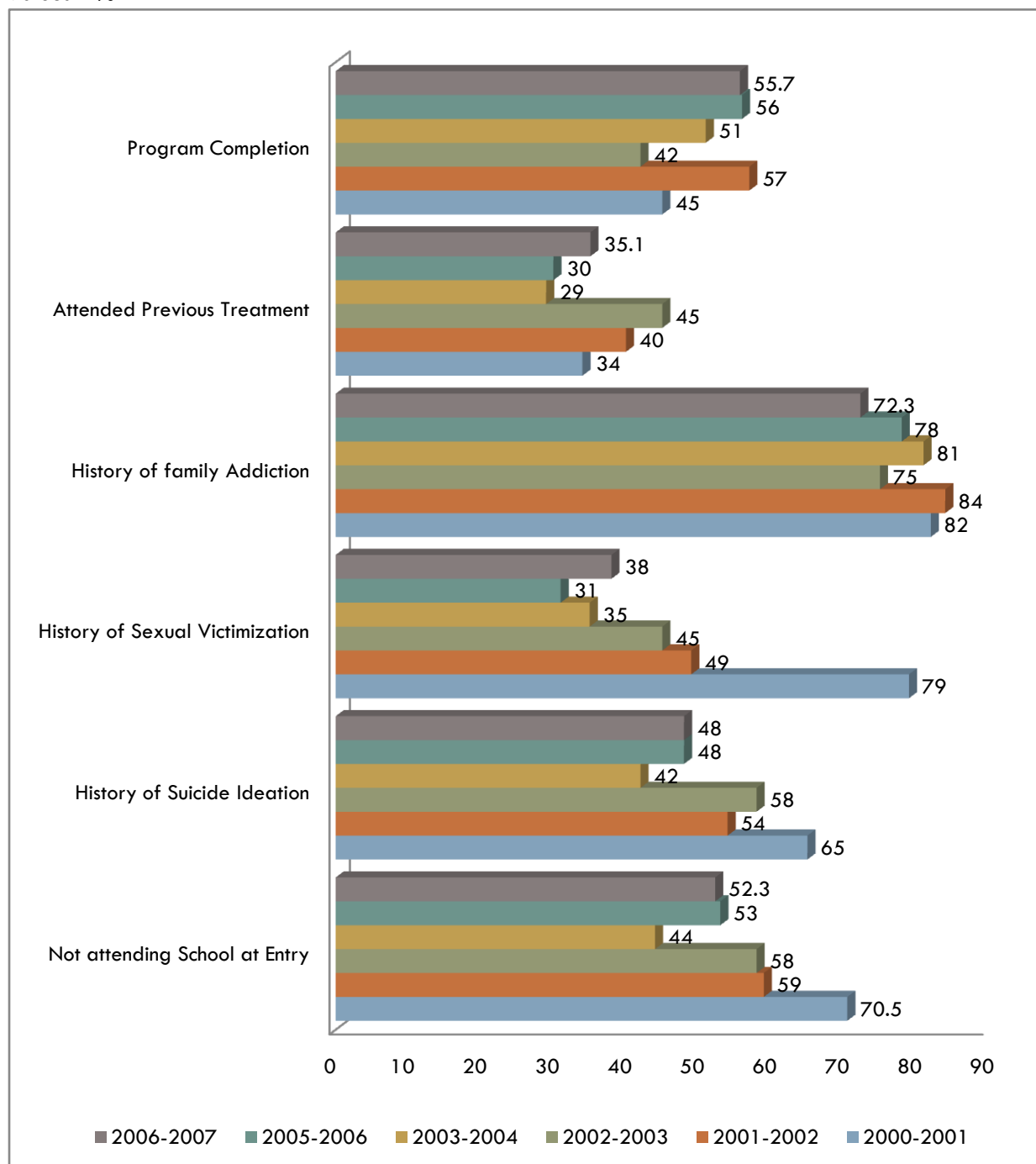
Program Completion	Males	Females	Combined
Charles J Andrew	62%	0%	62%
Ka Na Chi Hih	66%	NA	66%
Leading Thunderbird Lodge	27%	NA	27%
Nenqayni	NA	NR	NR
Nimkee	100%	94%	96%
White Buffalo	NA	37.5%	37.5%
Young Spirit Winds	60%	50%	55%
White Swan Centre	60%	33%	46.5%
Nationally	62.5%	42.9%	55.7%

Youth Solvent Addiction Committee Annual Report
2006-2007

Attended Previous Treatment	Males	Females	Combined
Charles J Andrew	34%	0%	34%
Ka Na Chi Hih	27%	NA	27%
Leading Thunderbird Lodge	9%	NA	9%
Nenqayni	NA	22%	22%
Nimkee	78%	44%	55%
White Buffalo	NA	43.8%	43.8%
Young Spirit Winds	20%	25%	22.5%
White Swan Centre	70%	66%	68%
Nationally	39.6%	33.5%	35.1%

Historical Analysis National Summary

Values= %





YSAC Centres in Canada

Charles J Andrew	709-497-8995
Ka Na Chi Hih	807-623-5577
Kanaiwa	403-653-3315
Leading Thunderbird Lodge	306-332-5659
Nenqayni	250-989-0301
Nimkee Nupigawagan	519-264-2277
Whiskyjack	204-359-8995
White Buffalo	306-764-5250
Young Spirit Winds	780-585-2219

