

4 th Annual

YOUTH SOLVENT ADDICTION COMMITTEE



Annual Report

2003-2004



Inside of me...

*My mind is set on running from home
Cause here on earth I feel alone
Killing time- living in a cage
Angry at myself, my heart filled with rage
As days go by I ask myself
Why don't I want to change?
Maybe I'm afraid to open my eyes
All my life is full of lies
I had hopes and dreams for me
I feel like I am getting no where
I once had visions of who I could be
Sometimes my life is so much to bear
I have to help myself move along
Life doesn't have to be this way I know
There is a part of me I have to prove wrong
My time has come to set those feelings free
Life can be better that I have to see*

By Betty (YSAC Centre client)

Cover Story

Each year several hundred youth and young adults participate in treatment at the various inhalant treatment centres in Canada. Through out their time with us they leave us many gifts of beautiful artwork, poetry and stories. This year we decided it is time to share these wonderful gifts with the audience for this annual report. Their names remain confidential but their offerings to us are shared. Much gratitude to all the youth of all the centres who take the time to share their artistic gifts with us.



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Youth Solvent Addiction Committee

CENTRES AT A GLANCE

Treatment Centre and Location	# of beds	Age Range	Gender	Intake Dates	Special Services	Total Admissions 2003-2004
Charles J Andrew Centre Sheshatshiu, Labrador Established– May 2000	12	11-17	Co-Ed	Continuous	Outreach Day Program Family Treatment Wilderness Program	68
Ka Na Chi Hih Solvent Treatment Centre Thunder Bay, Ontario Established-November 1996	12	16-25	Males	Continuous	Adult Services 2-year Program	14
Nenqayni Treatment Center, Williams Lake, B.C. Established– September 1996	10	13-18	Female	January/July	Family Treatment	40
Nimkee NupiGawagan Healing Center Muncey Ontario Established– January 1997	12	12-17	Gender blocks	January (female) July (male)	Family Treatment Aftercare Outreach Outpatient	36
Walqwan First Nations Youth Rehabilitation Center, Gesgapegiag, Quebec Established– June 6, 1997	12	12-17	Co-Ed	Continuous	Outreach Bilingual Services	NR
Whiskyjack Treatment Center, Thompson, Manitoba Established– October 1996	22	11-17	Co-Ed	Continuous	Aftercare Community Development	101
White Buffalo Youth Inhalant Treatment Center, Sturgeon Lake, Saskatchewan Established—January, 1997	10	12-17	Females	January/July	Aftercare Outreach Mobile Tx camps	42
White Swan Treatment Center Inc. Kinuso, Alberta Established– September, 2000	12	11-17	Co-Ed	Continuous	Aftercare Outreach Community Development	39



Chairpersons Message

I am pleased to present to you the Youth Solvent Addiction Committee Annual Report for 2003-2004. This year marks the first year we have had a YSAC Coordinator to assist centres with improvement planning as well as coordinate the activities, meetings and conference presentations throughout the fiscal year.

We are thankful to First Nations and Inuit Health Branch for recognizing our work to improve services across the youth addictions services continuum. The funding of this project speaks loudly to the dedicated partnership both organizations have worked to cultivate.

Welcome of several new directors to the YSAC network Jim Myklebust at White Swan Centres. Kristin Sellon at Charles J Andrew Centre, Alex Blacksmith at Whiskyjack Center and Geraldine Atimoyoo at White Buffalo.

I am especially pleased to announce two significant partnerships we have embarked on this year. We have begun to work closely with the Nechi Training and Health Promotions Institute to develop training modules for youth specific services, you will see the highlights of this work under the human resource services section of this report.

We were able to complete a research project on client length of stay with the Canadian Centre on Substance Abuse, while simultaneously pilot testing a reduced length of stay for clients. Three centres tested the use of a 4 month model (White Buffalo, Nimkee Nupigawagan and Charles J Andrew) a reduced length of stay is proving to have some very promising client and centre based outcomes, while also affording centres the ability to treat more clients per year which results in reduced waiting times. Formal decisions about the permanence of this project will be announced next year.

We have also begun working with the National Native Addictions Partnership Foundation on an addictions workforce study. The study aims to determine the exact qualifications and training needs of the front line service providers in NNADAP prevention programs and treatment centres across Canada.

I hope you enjoy this annual report, and as always we welcome question, comments or suggestions. We are committed to continually improving our service delivery and feedback is one of the ways we strive to do so.



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.

Youth Solvent Addiction Centre's Working Group (YSAC)

The National YSAC group is now comprised of a network of 8 First Nation Youth Treatment Centres spread throughout Canada. YSAC is composed of one representative from each of the National Solvent 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.

Each member is responsible for attending quarterly meetings and carrying out work plans as decided by the committee.

2003-2004 Committee Representation

Carol Hopkins, Nimkee NupiGawagan Healing Centre, Muncey, Ontario (Chairperson for YSAC)
Bruce Mack, Nenqayni Treatment Centre, Williams Lake, B.C.
Jim Myklebust, White Swan Treatment Centres, Kinuso, Alberta
Deborah Dell/Geraldine Atimoyoo, White Buffalo Youth Inhalant Treatment Centre, Prince Albert, Saskatchewan
Alex Blacksmith Whiskyjack Treatment Centre, Thompson, Manitoba
Vincent Simon, Ka Na Chi Hih Solvent Abuse Treatment Centre, Thunder Bay Ontario
Krisitn Sellon, Charles J. Andrew Youth Restoration Centre, Sheshatshiu, Labrador
Jacqueline Kistabish, Board Member for Walgwan Treatment Centre, Gesgapegaig, Quebec
Vicky Laforce has represented Health Canada, National Addictions Team as partner to YSAC
Connie Forbister, Youth Solvent Addiction Coordinator



2003-2004 Strategic Goals

Overview

The Directors of the National Solvent Addiction Program have identified common interests that will improve the quality of the national solvent addiction program. The identified priorities have been organized in alignment with the substance abuse services accreditation program to ensure that national initiatives are reflective of the standards of excellence. A formal work plan has been developed based on these initiatives and involves the following components.

2003-2004 Leadership and Partnership Strategic Goals

1. Complete a Research Report of variables related to client length of stay (4 or 6 months)
2. Assist with the Deployment and adoption of the Addictions information System (NNAIMS)
3. To develop assessment guidelines for program redevelopment (peer review)
4. In partnership with other organizations adopt the addictions renewal framework

Strategic Goals Achieved

- ✓ YSAC and Canadian Center on substance abuse collaborated to complete a program length research study, available through CCSA website.
- ✓ YSAC member continues to sit on the NNAIMS development committee
- ✓ Program Peer review forms and reporting template completed, as well one peer review completed this fiscal year.
- ✓ YSAC is committed to improving the continuum of care for youth and sits on a variety of committees that impact First Nations Youth service delivery

Additional Leadership Achievements

- An accreditation Coordinators training was delivered to all YSAC centres in March 2004
- All YSAC directors took media training through McLoughlin media specialists in January 2004.
- Carol Hopkins Chairperson of YSAC was the honored recipient of a **2004 NADAP Footsoldier** Award in March 2004

2003-2004 Strategic Goals

Best Practice Manual / Client Services

The committee has been in the process over the past 3 years of developing a YSAC Best Practice Manual which includes: Partnership Protocols with FNIHB, National Goal statements and Best Practices Guidelines. The manual is not meant to be a static document and is designed as a framework to embark on as the field of YSAC grows.

2003-2004 Client Services

1. Develop a standardized client Outcome Survey and data analysis guide.

The document is periodically reviewed to ensure continued relevance and adherence to the collective vision of YSAC. As the centres experiment with different treatment options, it is acknowledged that some of these practices will lead to better client outcomes which can then be further verified through indicator development and monitoring.

Strategic Goals Achieved

✓ In March 2004 YSAC Facility staff attended a 2 days training in research methods, data collection and Follow Up survey design. The result is a standardized Outcome Measurement tool that will be collected at entry and 3, 6 and 12 months post discharge.

Additional Client Services Achievements

- This year YSAC accepted its first out of country placement funded through a reciprocal inter governmental agreement with USA and Canada. The youth is currently in treatment at Ka Na Chi Hih.
- Staff members who participated in the Resiliency Training in December assisted with development of a new tool to gather client "perceived resiliency" at entry and discharge. Results will be collated nationally and used for client services planning.
- YSAC in conjunction with the Canadian Center on substance Abuse (CCSA) undertook a research project to determine best practices with regard to optimum client length of stay.

2003-2004 Strategic Goals

Information Management

Another fundamental activity the YSAC group has been their involvement as “experts” and providing consultation to various programs and / or groups. These activities include a number of activities: involvement in focus groups for the National Native Addictions Information System to provide feedback on client services, standardizing both the Quality Monitoring Process and Client Outcome Measurements and providing ongoing communication and networking activities at quarterly YSAC meetings.

2003-2004 Information Management Strategic Goals

- To develop a standardized data collection tool for client Follow Up.
- Continue to add to and strengthen the reported information in Annual Report.
- Develop Memorandum of Understanding with Nechi Institute for sharing resources to develop curriculum for Youth addiction workers.

Information Management Goals Achieved

- ✓ In March final edits of the tool were taking place the final tool
- ✓ Each year the information in the annual report has continued to grow as standardized documents are developed.
- ✓ First Memorandum of Understanding was signed with Nechi Institute in October 2003

Additional Information Management Achievements

- Processes for collection of centres annual report were improved by implementing a standard program update form at each YSAC meeting.

2003-2004 Strategic Goals

Human Services

All Directors have identified human services as a critical component to providing quality service to clients. The Directors have devoted considerable time addressing issues such as staff certification, staff retention and recruitment of qualified staff. Specific objectives have been identified for Standardized Employee Training, making all components and curriculum uniform throughout all treatment centres. The Best Practice and specialized services research on common human resource issues has been initiated: i.e., compensation for on-call responsibilities, recruitment and hiring strategies.

2003-2004 Human Services Strategic Goals

1. Deliver a national staff training on critical success indicators, data gathering and reporting.
2. Delivery of a national staff training on client outcomes data gathering and reporting.
3. Develop guidelines and sample forms for clinical supervision
4. Develop Core competency Modules in conjunction with Nechi Institute

Additional Human Services Achievements

- A 2 day module on “Resiliency and adolescent treatment was developed and delivered to all YSAC centres in Dec 2003.
- Several Counsellors at Whiteswan Treatment Center completed requirements for CAC certification through Canadian Council for Professional Certification.

Human Services Goals Achieved

- ✓ A 2 day Research methods and Follow Up training was held for all YSAC centres in March 2004. From this a standardized follow up collection mechanism was drafted. The course was certified by CCPC
- ✓ A two day clinical supervision training session completed with sample data gathering forms and procedures was developed. This course is under consideration for pre credit through CCPC
- ✓ Core Modules were developed with Nechi in two additional areas: Adolescent sexuality and survival skills for youth workers.

2003-2004 Strategic Goals

Environment

Each centre is responsible for environmental maintenance and for developing a capital reserve plan. Any facility upgrades require planning within the annual budget.

2003-2004 Environment Strategic Goals

1. Complete a partnership protocol for Capital Planning as it related to YSAC centres

Environmental Goals Achieved

- ✓ A Best practice document for capital planning was created, ready for regional ratification in 2004.

Additional Environmental Achievements

- White Buffalo completed construction on a building addition to allow more staff office space.
- Nimkee Nupigawagan was successful at obtaining a 12,300.00 capital grant from the Ontario Trillium Foundation in order to complete upgrades to the vestibule area of the facility

Accreditation

CCHSA (Canadian Council on Health Services Accreditation) plays a unique role in health service delivery by assisting health service organizations, across Canada and internationally, to examine and improve the quality of care and service they provide to their clients. They provide an accreditation program that is based on national standards, peer review, and knowledge exchange. Through self-assessment and external evaluation, this accreditation program helps drive improvements in health care and in the case of YSAC in all areas related to service delivery.

YSAC centres chose CCHSA as their accreditation body after years of evaluating available accreditation systems. The decision to choose CCHSA was basically twofold. 1) a willingness on their part to look at standards revisions from the perspective of First Nations community based delivery and 2) because one of the foundations of the program was to promote continuous quality improvement and value that fit squarely with the values and vision of YSAC.

A recent survey by CCHSA showed in general YSAC centres were having higher rankings in many standards areas than many similar mainstream services. While the full report was not available at time of printing this report, copies may be available through CCHSA. The following is an outline of YSAC's move towards having 100% fully accredited centres.

Nimkee Nupigawagan Healing Centre – Accredited since 1999- 3rd cycle survey will take place- November 2005

Charles J Andrew– Had first accreditation survey in October 2003–While Accreditation was not awarded, plans are underway to work closely with the centre to improve specific areas.

White Buffalo Accredited since 1999 - 3rd cycle survey will take place- Nov 2005

Whiskyjack– Currently working on completing recommendations from a 2001 survey. Accreditation status pending.

Whiteswan- Is registered for First survey in July 2004, currently working on self assessment.

Nenqayni- Accredited since 2001- will have second survey November, 2004

Ka Na Chi Hih- Accredited since 2002



Accountability

YSAC 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 or Provincial licensing status where applicable .

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.

Each year in the annual work plan YSAC commits to strengthening the accountability process within the YSAC centres through standardized counsellor training initiatives, standardized data collection tools and peer accountability processes and information sharing.

Finance

All eight 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 from time to time special projects as approved by First Nations and Inuit Health Branch.

Additionally this year the YSAC network was awarded some base operating funding to allow for YSAC coordination services, printing and publication of the annual report and other projects as proposed in the annual work plan. Annualized amounts depend of successful acceptance of the work plan by First Nations and Inuit Health Branch.



Networking and Promotions

This year has been one that has been filled with many requests for speaking engagement from the YSAC group.

The ability to share the story of YSAC and some of the centres successes is one that helps raise the profile of solvent abuse and effective treatment modalities across the country, the continent and in some cases the world.

May 2003-Nimkee Nupigawagan Healing Center presented:

***Race & Ethnicity in Social Work Practice, to the Social Work Program,
King's College, UWO***

Kings College, University of Western Ontario

July 2003-Nimkee Nupigawagan Healing Center and Naugun Associates presented:

Vicarious Trauma Training

Parry Sound Mental Health

January 28, 29, 2004 Ka Na Chi Hih Centre presented:

Harmful Effects of Solvent Abuse

Police Foundations, Confederation College Thunder bay, Ontario

March 2004 YSAC presented:

National Addictions Training Strategy

NNAPF Annual Gathering, Saskatoon, Saskatchewan

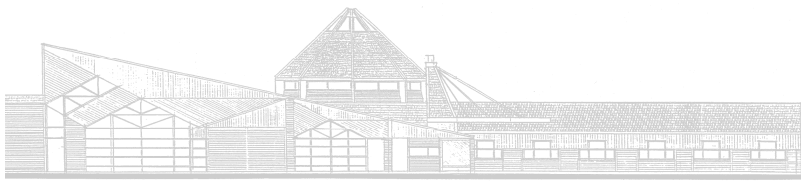


Employee Dedication

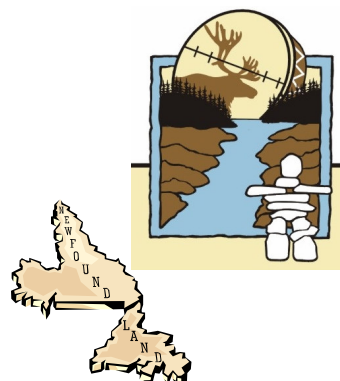
There is a piece of research often quoted in the solvent abuse realm that talks about the fact residential centres for solvent abuse often don't last more than 9 months. YSAC centres have far surpassed proving this comment wrong, in part due to the dedication and commitment of some very long time staff members. In a field that is often characterized as having a high turn over rate we would like to honor those employees who have been with YSAC centres for longer than five years.

Employee	Centre	Position	Started
Debra Dell	WBTC/YSAC Coordinator	YSAC Coordinator	February, 1996
Robert McMahon	White Buffalo Treatment Centre	Outreach Coordinator	April 1996
Carol Hopkins	Nimkee Nupigawagan Healing Centre	Executive Director	May 1996
Leonard Budd	Whiskyjack Treatment Centre	Facility Manager	July 1996
Paul McKay	Whiskyjack Treatment Centre	Traditional Counsellor	July 1996
Betsy Oniske	Whiskyjack Treatment Centre	Head Cook	July 1996
John Henry	Whiskyjack Treatment Centre	Weekend Supervisor	July 1996
Agnes Bonnefoy	White Buffalo Treatment Centre	Program Coordinator	August 1996
Cheryl White	Nimkee Nupigawagan Healing Centre	Admin and Finance	Sept 1996
Peggy Martin	Nimkee Nupigawagan Healing Centre	Treatment Coordinator	Sept, 1996
Dave Trudell	Nimkee Nupigawagan Healing Centre	Senior Counsellor	Oct 1996
Nora Fournier	Nimkee Nupigawagan Healing Centre	Teacher	April, 1997
Ken Oliver	Nimkee Nupigawagan Healing Centre	Team Leader	December, 1997
Karl Ballantyne	White Buffalo Treatment Centre	Maintenance	May 1998
Jim Rankin	Nimkee Nupigawagan Healing Centre	Child and Youth Worker (nights)	August, 1998
Barb Garvin	White Buffalo Treatment Centre	Child Care Worker	September 1999





Program Description



Charles J Andrew Youth Centre

The Charles J. Andrew Youth Treatment Centre is located in the community of Sheshatshiu, Labrador. The Centre offers solvent addiction treatment services for First Nation youth, between the ages of 12 and 18. Charles J Andrew is a twelve-bed facility that operates a continuous intake cycle 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:

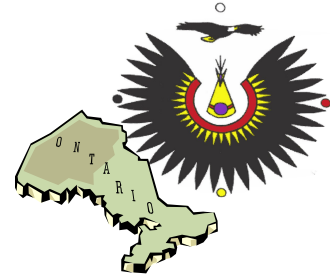
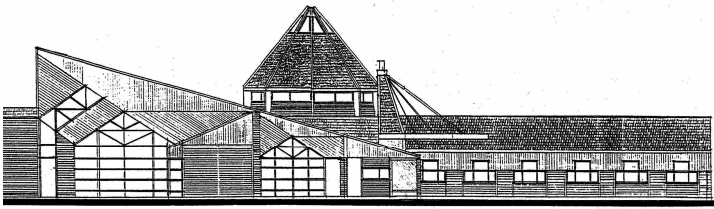
Treatment Program

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

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





Ka Na Chi Hih Centre

Our Mission:

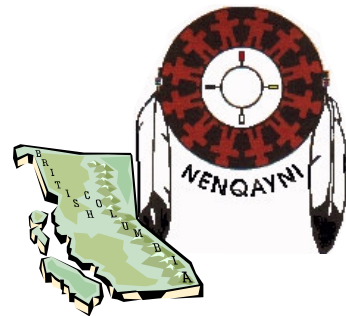
In keeping with the sacred teachings of the Creator, Ka-Na –Chi-Hih Specialized Solvent Abuse Treatment Centre will provide a nurturing and supportive environment for youth who are embarking on their healing journey to wellness of body, heart , mind and spirit.

Ka– Na –Chi– Hih is a 12 bed residential centre for males 16-25. We are currently located in the Lakehead Psychiatric Hospital in Thunder Bay , Ontario, and are now in the process of constructing a separate facility for long term use. The treatment program is based on the medicine wheel concept, and combines traditional and contemporary approaches to holistic treatment. A residential program, the centre operates 7 days per week 24 hours per day. A typical day consists of breakfast, morning circle, educational sessions, one on one counselling, drumming, arts and crafts, life-skills training and recreation, with a weekly healing lodge. Clients are afforded the opportunity to attend educational upgrading through an offsite centre (Youth Employment Services) in Thunder bay.

The clients attend local pow wows and are engaged in a culturally focused recreation program which includes annual field trips for fasting and medicine gathering.

There is generally a waiting list of 10-15 clients who are referred from across Canada by community workers. The referral process involves a unified process of information gathering between the treatment manager and treatment team to ensure client needs are met.





Nenqayni Youth Centre

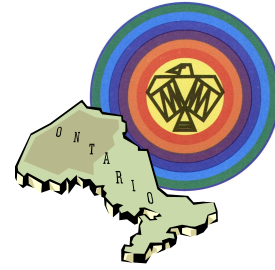
Nenqayni is located in the heart of the Cariboo Region of British Columbia in the territory of the Chilcotin Shushwap and Carrier First Nations. Nenqayni's Youth Program has been running for over 5 years. We serve First Nations Youth and their families from communities across Canada. The Youth & Family 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.





Nimkee Nupigawagan Healing Centre

Nimkee Nupigawagan offers residential treatment services for First Nation Youth, ages 12 to 17, who suffer from solvent abuse. The program runs three intakes per year, alternating genders. Families of the youth (3 people) are invited to stay in the residence with the youth midway through the four month program for 1 to 3 weeks.

When necessary and appropriate, Psychological and Psychiatric assessments are completed through referrals.

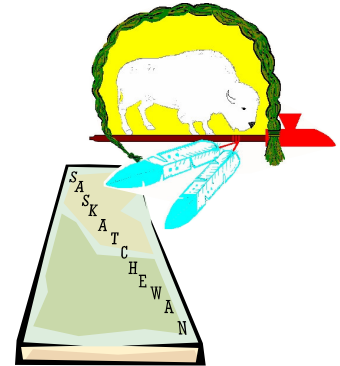
Treatment Program Includes:

- ❖ Individual Therapy: Expressive Arts Therapy, Traditional Native Therapy
- ❖ Individual & Group Counselling: 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 Counselling: 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





White Buffalo Youth 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.

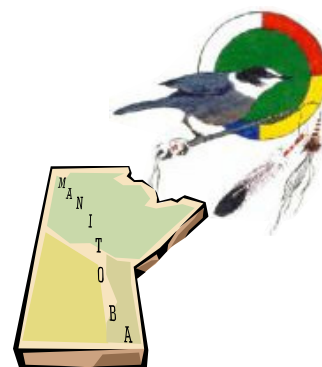
The Treatment Program is separated into four distinct six-week phases, with each phase designed to teach different skills useful in developing an inhalant free lifestyle.

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.





Whiskyjack 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 out.

Treatment Program Includes:

Individual Therapy: Expressive Arts Therapy, Traditional Native Therapy

Individual & Group Counselling: 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

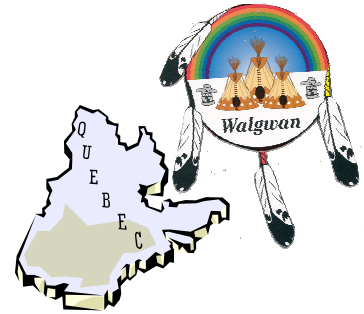
Education: On site classroom.

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.





Center Walgwan

The Walgwan center is a 12 bed centre for male and female youth ages 12-17, it is situated in Quebec on the Gaspé Coast in the Mi'kmaq community of Gesgapegiag. The services offered at Walgwan include pre and post treatment services. Walgwan's interveners are involved in evaluating clientele prior to their admission into our residential program. While in the community our interveners also perform follow up services to past clients.

The residential program is 6 months in duration, in the first stage our primary concern is detoxification; youth are closely monitored and a complete evaluation is conducted. Following completion of the first month a comprehensive intervention plan is developed, which will specify individual areas to focus on in treatment. This plan formulates the majority of their treatment stay. The youth move through the program into the final stage, which is preparation for returning home. This stage prepares them to reintegrate daily activities as they present themselves in the community. A plan of action is developed to guide and identify resources that may assist the youth once they are back home as they continue to work through the recovery process.

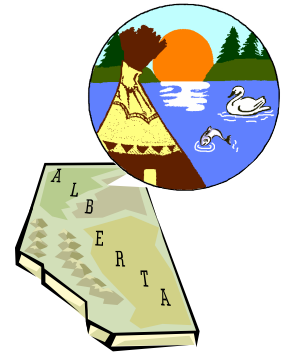
Our family program is an important process in the treatment at Walgwan. Family or significant supports are invited to join the youth and participate in portions of their recovery journey.

Our services are based on the principles of holistic healing. Interventions respect a young persons desire to change and move towards re-establishing a healthier lifestyle, and create a balance with the spiritual, emotional, physical and mental aspects in their lives.





Whiteswan Centres Inc.



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.



Statistical Information



2003-2004 Program Highlights

Ka Na Chi Hih

Program Highlights:

- Oct., Nov. Case Conferences with staff from BISNO, Lutheran Community Care Centre, Fetal Alcohol Spectrum Disorder. Purpose: Introduce potential service providers and to develop a plan for coordinating service provision to high needs clients in preparation for independent living.
- Nov. 20. SAAFE Walk in conjunction with Drug Awareness Week.
- January. 2004 Continuing Care for first out-of-province client to graduate from the program and live independently in Thunder Bay.
- In March 2004 we accepted our first ever out of country placement from Alaska, USA

Program Stats:

- 100% client participation in outdoor activities such as fall, summer and winter camping, ice fishing, snaring, canoeing, wilderness biking and hiking

Staff Development Highlights:

- August: Attend 4-day Men's Wellness Conference with clients at Eagle Lake FN, October 27-28 First Aid/CPR for new employees
- October 27-28 2003 A Train the Trainer on suicide prevention
- October 29-30 HIV/AIDS for staff
- November 3. Aboriginal Youth Cities Project Information Session on Youth Criminal Justice Act
- November 19 HIV/AIDS Seminar
- March 18-19, 2004 . SASSI Training for Intake and Outreach workers in Saskatoon, SK

Outreach Activities:

- Partner with Legal Services by accompanying the legal team to remote communities and provide support to communities and where appropriate, refer clients to Ka-Na-Chi-Hih.
- Full-time and part-time employees have direct contact with community members and workers through visits as escorts for clients on home visits. Such escort trips and visits serve to sensitize staff to the realities of what the clients experience socially, economically, physically and spiritually
- Ka-Na-Chi-Hih staff continue to provide grief counselling to communities who require external support in debriefing resulting from solvent related deaths. Staff provide on-site assessments for youth requiring treatment for solvent abuse.
- Ka-Na-Chi-Hih team responds quickly to requests from communities and other agencies for presentations on solvent abuse.
- Ka-Na-Chi-Hih accepts social work placement students from Confederation College and Lakehead University and provides a challenging and diverse learning experience.



2003-2004 Program Highlights

Charles J Andrew Centre

Program Highlights:

- In April of 2003, the Centre reopened after being closed due to restructuring. The new revised 14-week program started with a male intake.
- In October, The Charles J. Andrew Youth Treatment Centre hosted a 43-day Parenting/Virtues program with the Sheshatshiu Family Treatment Program. This program consisted of the youth and family joining together for a two-week period at Lobstick Lodge to promote family healing.
- The Life Skills program has been developed extensively, and the youth now participate in preparing desserts, making breads and muffins and were taught to bottle wild meats and jams.
- In November, CCHSA conducted an Accreditation Survey at the Center

Staff Development Highlights:

- In November 2003, the Centre provided a work term placement for a student from the College of the North Atlantic enrolled in Community Studies.
- The Treatment manager participated in Clinical Supervision and Resiliency & Youth Inhalant Abuse workshops. A Clinical Supervision Course with Addiction Technology Transfer Centre with Brown University was also completed.
- In January all staff participated in training and development. Workshops were held on Inhalant Abuse, Fetal Alcohol Syndrome, Anger Management and Addictions in the Family.
- One staff person participated in the Communicating with Youth Course offered by the Nechi Institute.
- We have a staff person trained in Educating Youth on Suicide Prevention. This person is now a Trainer for youth.
- Three staff participated in an Early Psychosis Intervention Workshop
- Two staff participated in FASD training which included aftercare, community living and best practices.
- March 2003, all staff started a participation challenge to promote healthy physical activity.
- A Staff Orientation Manual was developed for any new staff entering the Centre's employ.
- An Employee Teaching-Learning Contract was developed to ensure all new staff received the information and training required for working with youth at the Centre. Information, videos and reading materials have been organized in a library format. All materials can be accessed and signed out for staff development.



2003-2004 Program Highlights

Whiteswan Treatment Centres

Program Highlights:

It has been an extremely busy year for White Swan Treatment Centres (WSTC), in that we went through and completed our self assessment for accreditation through CCHSA and we were able to be successful in our search for a lender for a new facility for the male clients to be located on the Swan River First Nation. The steps that led up to finding a lender, were finding the funding to develop a complete and detailed Business Plan for WSTC and then circulating that plan with the various lenders that we had available to us in this region. The Business Plan and finding some additional funding to go towards a down payment made it possible to purchase a 7,200 square foot modularized facility for the male clients. These two major activities were in addition to the regular programming at both centres and several training opportunities for our staff.

We also completed a thorough review of all client programming and updates to client modules to ensure that staff in both centres are following the same treatment regimen for all clients. Handouts were reviewed and updated and an existing inventory of resource materials was completed. We will need to budget for replacement and renewal of some of the resource materials in the current fiscal year in that we did not end up with the funds to purchase these materials at the end of the 03-04 year.

The majority of our clients continue to come to us from the Alberta Region with some from neighboring provinces/regions. Our admissions have remained somewhat consistent with the usual dips during the summer months when the youth are not in school and the referral sources are taking holidays. This Christmas was the first time in WSTC history that we were able to find placements for all of the clients and the staff were able to take a well deserved break and spend the holidays with their families.

Program Stats:

It has been recognized for some time at WSTC that we need to be conducting our own follow-up studies for our past clients. There has not been sufficient resources to date however to address this effort. It came out in our self-assessment and we know that one way we can begin this process is to complete client satisfaction surveys. As we are able to fund the Outreach Worker position, we will be able to follow-up from there. Again, available staff and fiscal resources play a role in implementing these parts to our programming.



2003-2004 Program Highlights

Whiteswan Treatment Centres Continued

Staff Development Highlights:

The staff in both centres has been able to take part in several training opportunities over the year. The most extensive was a collaborative effort between WSTC, Alberta Human Resource and Employment and Nechi Training and Health Promotions Institute. This training took place from March of 2002 until November of 2003. It consisted of nine week long modules that were offered in both locations. The topics for the nine modules were Communications and Ethics; Child and Adolescent Development and FAS/E; Adolescent Solvent Drug and Alcohol Use; Communications and Report Writing; One to One Counseling; Group Dynamics; Suicide Prevention and Grieving; Personal Growth and Family Dynamics. Nineteen (19) staff from both centres attended the training as well as other workers from both communities from the Health Centres, Schools and the Youth Group Home at Swan River First Nation. There was a Graduation Ceremony held for all participants in early December and the trainees were able to celebrate their 9 months of hard work.

Other Staff Development and trainings during this reporting period are as follows:

- | | |
|---------------------------------------------------|----------|
| 1. Standard First Aid and CPR | 10 staff |
| 2. Addictions Treatment in Aboriginal Populations | 1 staff |
| 3. Food Safety Level II | 1 staff |
| 4. Problem Employee Behaviors | 1 staff |
| 5. Clinical Supervision | 2 staff |
| 6. Resiliency Training | 2 staff |
| 7. Program Management | 1 staff |
| 8. Use of Fire Extinguishers | 2 staff |

In addition to the above, eleven (11) staff participated in a week long Alberta NNADAP training in November '03. This training was specifically provided for NNADAP workers and treatment centre workers to become Certified Addictions Counselors with the Canadian Council on Professional Certification. Topics included:

Ethics, SASSI, Relapse Prevention and Different Counseling Modalities, Personal Safety with HIV/AIDS and Hep C, Case Management and Suicide Prevention

One of our staff was certified as a CAC II as a result of this training. At a subsequent training in April'04, other staff from WSTC were able to be certified as well. These numbers will be in the 04-05 report.

Outreach Activities:

Outreach Activities for this reporting period have been limited to participation in Community sponsored health related events. Information on our program was disseminated to community members. Staff took referral packages and program brochures to all of the trainings listed above for display and discussion with interested participants. In addition, the Alberta Region NNADAP provided funding for a poster to be used in the communities in the region. This poster includes all of the NNADAP funded addiction treatment centres with pictures and program descriptions included for each. White Swan is listed as the youth

2003-2004 Program Highlights

Whiskyjack Treatment Centre

During the 2003 – 2004 fiscal year, Whiskyjack Treatment Centre's programming consisted of personal life management, native healing, clinical services, counseling, solvent abuse program, education, and the family program.

The following are highlights of this programming which include recreation, education, life skills, cultural, individual or group accomplishments of our clients.

Personal Life Management awareness was provided to the clients in lesson plans prepared by the group facilitator. They involved such topics as family systems, learning helpful behaviors, decision making, values, boundaries, circle rules and many others. The clients were encouraged to share and participate in these group sessions. There were many outings with the clients, traditional teachings at camps, participation in events held in various communities and partnerships with other resources from other communities.

Native Healing is an important component of our traditional programming which provides treatment to the clients in the areas of physical, emotional, mental, spiritual, social needs. Many elders were utilized to participate within the centre to teach and demonstrate life skills with the clients. Sweat lodge ceremonies continue to take place every Mondays and Thursdays. The clients participate in the preparation of this event by rock picking, wood gathering, and maintenance of the lodge area.

The **Clinical Services** were provided on-site by a clinical consultant, Wray Pascoe until March 2004. His services were attained for consultation and assessment services with the clients three days a month. He advised and helped the staff in the area of case planning and case management, recording and file maintenance, etc. Any other emergency services are provided by Cross Lake Nursing Station and Norway House Hospital.

The **Family Program** under the auspices and responsibility of our treatment centre consisted of the following activities. Six families utilized the program to support their children and grandchildren, finding out the progress of clients, and encouraging ongoing after care when they return to their communities.

The community workers for the children and families have attended the program to provide support to the clients returning home.

Staff Development Highlights

The following are highlights of activities that took place in the area of staff training and development:

- Training and Orientation for newly hired employees
- Staff and board members attending the Nechi Training program for seven days in Alberta
- Suicide prevention and intervention training
- First aid and CPR certification
- Attempted suicide debriefing sessions



2003-2004 Program Highlights

Nimkee Nupigawagan Healing Center

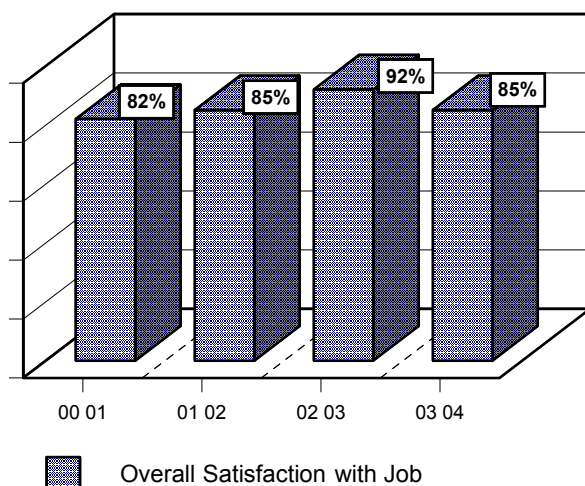
2003-2004 Program Highlights

- Camping for one week for each of the 4 month intakes.
- Bi-weekly Sweat Lodge Ceremonies
- 7% of Youth completed a 2 day Fast
- 2 intakes fund raised for a trip to Canada's Wonderland, and 1 intake fund raised to attend a NHL game. (Fund raising includes: quilt making, mother's day brunch, food booths at Pow Wow's)
- Youth attended the Canadian Aboriginal Festival at Toronto Sky Dome
- Youth went to Niagara Falls to see the Festival of Lights in December
- Youth attended socials at the Oneida Longhouse
- In addition to the regular program, youth received the following presentations:
 1. Abusive Relationships - Family Violence Program
 2. Criminal Charges - Ontario Provincial Police
 3. Date Rape - Women's Sexual Assault Crisis Centre
 4. Life in Custody, Ministry of Corrections
 5. FASD - Southwestern Ontario Health Access Centre
- Youth progressively achieve a level of more independence which allows them to exercise personal responsibility through unsupervised outings in the community.

Human Resource Highlights

Each year employees of Nimkee participant in an evaluation of Human Resource services. A total of 18 surveys were completed, representing 16 full time staff and 2 casual staff. Following is a summary of the survey outcome:

Overall:



2003-2004 Program Highlights

Nimkee Nupigawagan Healing Center Continued

Highest rates of Satisfaction for all Teams: 85% satisfaction with "Current Job"

- Highest item of satisfaction at 83% - "The quality of the relationship with your supervisor"
- Lowest rates of Satisfaction for all Teams: 66% "The amount & quality of communication between your team & other teams." consistent with previous years
- Area of most improvement from last year is "Support for Proactive Personal Plan of Care Activities"

Staff turnover rate is 11% The average length of employment is 3.7 years.

Staff Training & Professional Development Activities

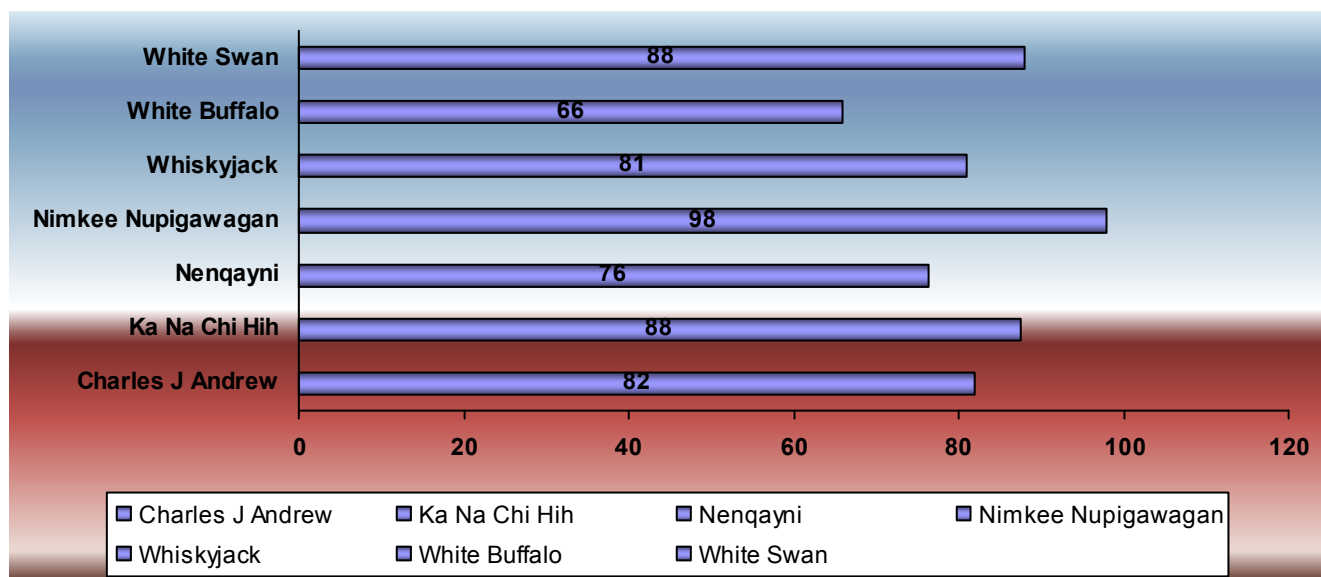
- Ontario Child & Youth Workers Association, Annual Conference (2 staff)
- Reality Therapy & Choice Theory (4 Staff Certified, 2 Staff Advanced)
- Prevention & Management of Aggressive Behavior - Annual Refresher (all staff)
- Infection Control (all staff)
- **Living Works:** Suicide prevention & Intervention Training: All staff
- Grief Recovery Certification for Counsellors (1 staff)
- Clinical Supervision - (5 staff)
- Resiliency Theory and Practice - All staff (2 staff trained as trainers)
- Basic Research Methods, Canadian Centre on Substance Abuse (1 staff)
- Accreditation Coordinators Workshop, Canadian Council for Health Services Accreditation
- Labour Code, Southern First Nations Secretariat (6 staff) & Labour Canada (1 staff)
- Mental Health Addictions, National Native Addictions Partnership Foundation (2 staff)
- Addictions & Mental Health Courses: 11 staff completed 1 course & 3 staff completed 3
- Anishinabe Language Conference - (1 staff)

NETWORKING AND PARTNERSHIPS

- Youth Solvent Addictions Committee, Treatment Directors quarterly meetings, NNHC Executive Director remained as the Chair of this National committee
- Native Social Work Journal, Laurentian University (Board Member)
- Committee Member for the Southwest Regional Advisory Group for the Ontario Ministry of Community and Social Services
- Board Member, Canadian Council For Health Services Accreditation, representing First Nations Clients
- 3 Accreditation Surveys, Canadian Council for Health Services Accreditation, for a Drug & Alcohol Treatment Centres
- Interim Board Member for the development of the Sagkeeng Family Treatment Centre - term completed in May, 2003
- Youth Addictions presentation to the Addictions Program at St. Clair College, Windsor
- Traditional Women's Teachings, O'Gitchidaw Women's Group, Chippewa of the Thames First Nation & Delaware First Nation
- Racing Against Drugs, Sept. 29 to Oct. 2, 2004, - solvent abuse education, 500 participants from area First Nation Schools
- Solvent Abuse Presentations - Oneida of the Thames First Nation, Drug & Alcohol Awareness Week
- Bully Prevention Workshop - Delaware First Nation

National Occupancy

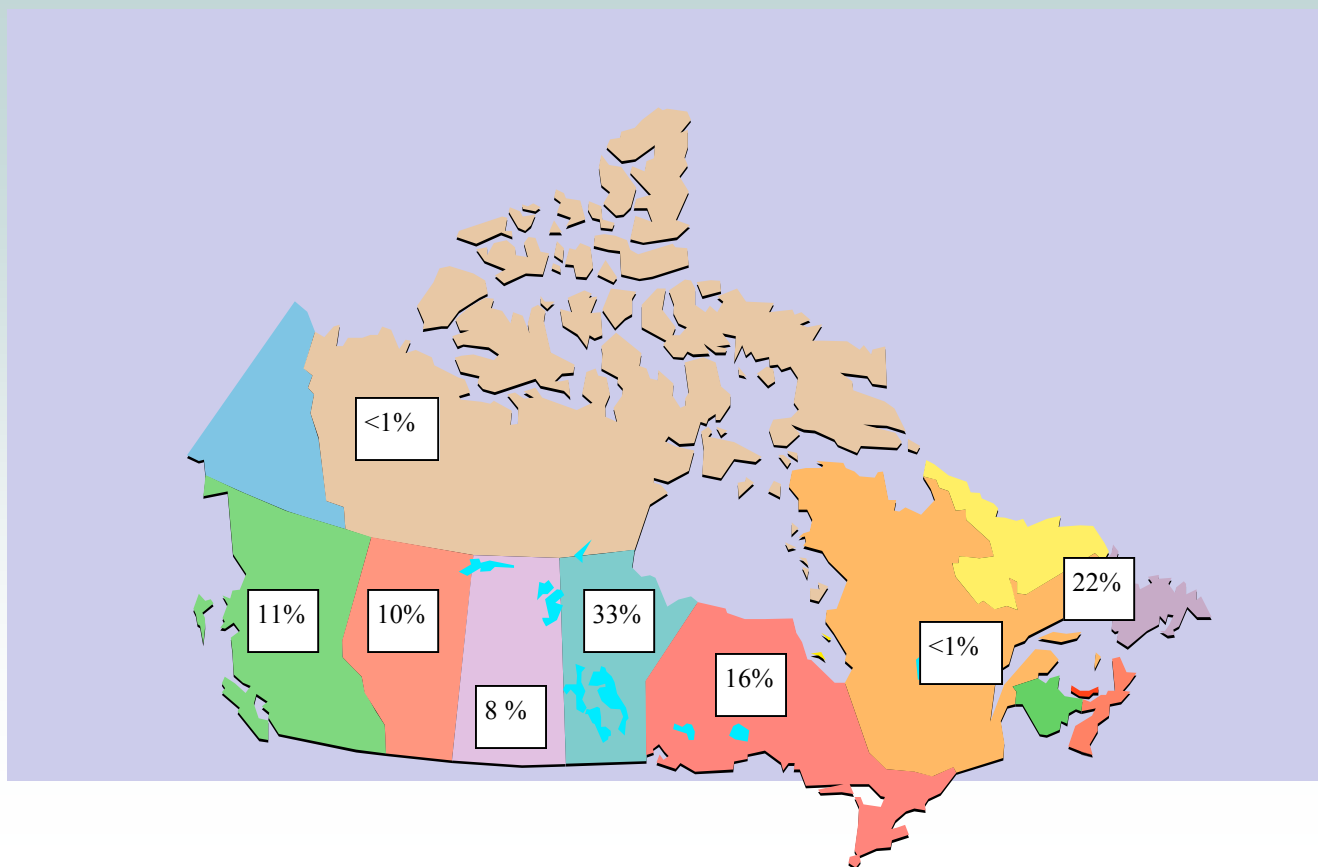
Treatment Centre	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Annual
Nenqayni Treatment Centre	88.2%	86%	51.3%	80%	76.4%
White Buffalo Youth Inhalant Centre	82.6%	65.3%	52.3%	65.3%	66.3%
Whiskyjack Treatment Centre	81%	80%	86%	75%	80.5%
Ka Na Chi Hih Solvent Abuse Treatment Centre	83%	92%	100%	NA	92%
Nimkee NupiGawagan Healing Centre	85%	106%	96%	107%	98%
Charles J. Andrew Youth Treatment Centre	72%	92%	112%	50.3	82%
White Swan Treatment Centre	83%	86%	97%	86%	88%
National Average	83%				



Region of Origin

Nationally

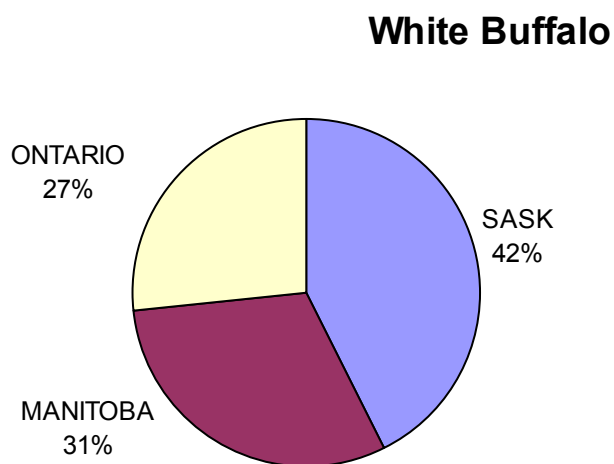
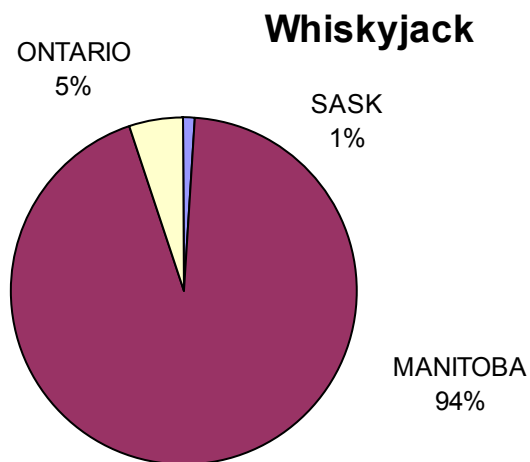
In 2003-004 **359** Clients were admitted for residential solvent abuse treatment as reported by seven of the eight centres in Canada. The gender split is defined as 155 (43%) male and 204 (57%) female. The chart below represents percentage of clients referred from each region of origin.



Historical Client Regions of Origin	2000-2001	2001-2002	2002-2003	2003-2004
Pacific	5%	6%	11%	11%
Alberta	4%	7%	9%	10%
Manitoba	24%	23%	27%	33%
Saskatchewan	18%	7%	6%	8%
Ontario	17%	22%	29%	16%
Quebec	7%	7%	1%	<1%
Atlantic	25%	28%	13%	22%
NWT/Nunavut	<1%	<1%	4%	<1%
USA	-	-	<1% (1 client)	<1% (1 client)

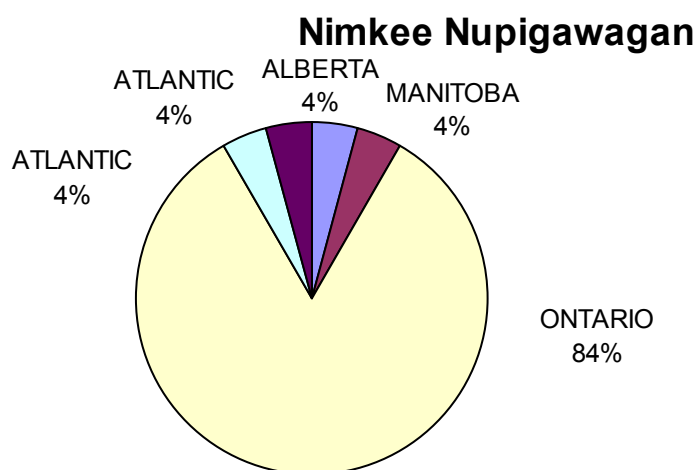
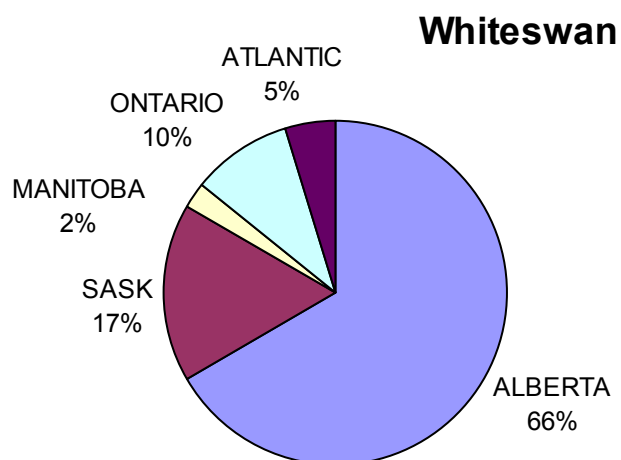
Region of Origin

Regions of Origin by Centre



Region of Origin

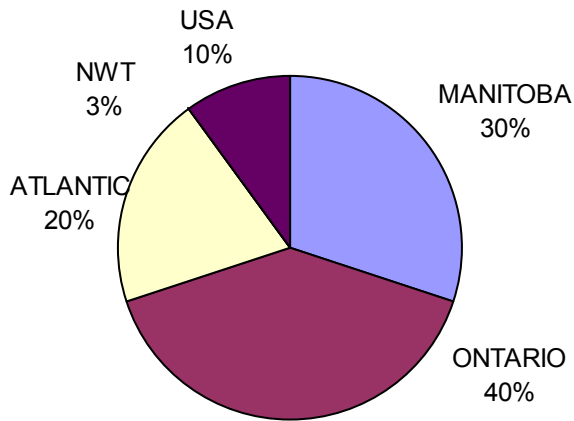
Regions of Origin by Centre



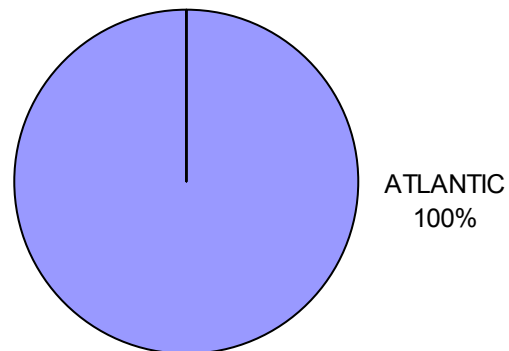
Region of Origin

Regions of Origin by Centre

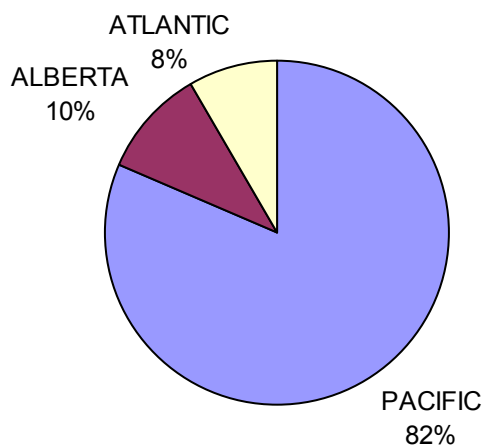
Ka Na Chi Hi



Charles J Andrew



Nenqayni



National Client Profile

Average Client Age (At Intake)	Males	Females	Combined
Nationally	15.11	14.4	14.9
Charles J Andrew	12.9	12.5	12.7
Ka Na Chi Hih	18	-	18
Nenqayni	15.07	15.52	15.3
Nimkee	15	15	15
Whiskyjack	14.7	14.3	14.5
White Buffalo	-	13.9	13.9
White Swan	15	15	15

Not attending school at entry	Males	Females	Combined
Nationally	46.1%	42.4%	44.2%
Charles J Andrew	40%	33%	37%
Ka Na Chi Hih	33%	-	33%
Nenqayni	54%	44%	49%
Nimkee	47%	61%	53%
Whiskyjack	74.1	61.7	67.9%
White Buffalo	-	55%	55%
White Swan	29%	0%	29%



National Client Profile

History of Suicide Ideation	Males	Females	Combined
Nationally	29%	55%	42.3%
Charles J Andrew	17%	48%	33%
Ka Na Chi Hih	33%	-	33%
Nenqayni	38%	39%	38.5%
Nimkee	29%	72%	51%
Whiskyjack	28%	70%	49%
White Buffalo	-	53%	53%
White Swan	29%	48%	39%

History of Family Addiction	Males	Females	Combined
Nationally	75%	86.5%	81%
Charles J Andrew	57%	55%	56%
Ka Na Chi Hih	25%	-	25%
Nenqayni	92%	81%	87%
Nimkee	100%	88%	94%
Whiskyjack	96%	100%	98%
White Buffalo	-	95%	95%
White Swan	81%	100%	91%



National Client Profile

History of Sexual Victimization	Males	Females	Combined
Nationally	23%	46%	35%
Charles J Andrew	11%	30%	21%
Ka Na Chi Hih	17%	—	17%
Nenqayni	8%	36%	22%
Nimkee	29%	55%	42%
Whiskyjack	55%	70%	63%
White Buffalo	—	64%	64%
White Swan	19%	19%	19%

Program Completion	Males	Females	Combined
Nationally	42%	48%	45%
Charles J Andrew	40%	67%	54%
Ka Na Chi Hih	17% *	—	17%
Nenqayni	23%	31%	27%
Nimkee	100%	83%	92%
Whiskyjack	22%	28%	25%
White Buffalo	NR	NR	NR
White Swan	48%	33%	41%

National Statistics	Males	Females	Combined
Family Violence	45%	67%	56%
Involvement in Justice System	53%	28%	41%
Attended treatment Previously	34%	23%	29%

* Ka Na Chi– Hih is a long term program completions may occur in a different fiscal year than entry



National Client Profile

National Client Profile

