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Indigenous Mental Health Wellness Program

Feasibility Study



Light the Fire Project

Mashkiwizii Manido Foundation Indigenous Roundtable Event

First Nations, Inuit & Metis

Catch the Wave

Light the Fire Project has been made possible through the generosity of



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Light the Fire Project

Introduction

Indigenous peoples in Canada face barriers to healthcare, mental health services and urban outreach programs. Disparities in mental health between Indigenous peoples and non-Indigenous people in Canada stem from systemic colonial practices.

With funding from Indigenous Services Canada (ISC), this project supports the outcomes of creating economic growth and capacity and promoting greater access to wellness and mental health services for Indigenous rural and urban populations.

Light the Fire Project is about:

- building relationships with communities,
- understanding the need for an increase in front line mental health workers, and
- Working together to build capacity and co-develop a curriculum informed by experts - including Indigenous Elders and Healers - in mental wellness and substance use treatment services for Indigenous communities.

For more information, refer to Introduction/Invitation Document: [Intro/Invitation to Light the Fire Project](#)

Community Needs Analysis - Mashkiwizii Manido Project¹

In late 2021, as part of a commitment to supporting healthy people and strong communities, [United Way East Ontario](#) partnered with the [Robbie Dean Family Counselling Centre](#) and the [Circle of Turtle Lodge](#) to fund a community needs analysis regarding culturally specific mental health and substance use supports for the urban-Indigenous community in Renfrew County.

The analysis found that 97% of the 144 urban-Indigenous participants reported a serious lack of culturally sensitive, Indigenous-based supports or services in Renfrew County, which as of 2016 holds an Indigenous population of approximately 8,000 people. It noted a vital need for services developed and delivered by Indigenous peoples.

Joanne Haskin is a mental health, addictions and trauma therapist and member of the Indigenous community in Renfrew County. In her work with the Robbie Dean Family Counselling Centre, Joanne noticed a gap where there could be culturally sensitive counselling for urban-Indigenous clients. The *Community Needs Analysis* confirmed this.

The Mashkiwizii Manido Project is the only program of its kind in Renfrew County that provides a holistic approach to care. It's offered in partnership with the Circle of Turtle Lodge with Joanne serving as the program's Director and lead therapist. She provides culturally-specific individual and group counselling support which leverages Indigenous beliefs and healing techniques—combined with current clinical models—focusing on culture, language and land.

¹ Source: United Way of Eastern Ontario (2021) The Mashkiwizii Manido Project: bringing culturally sensitive support to Renfrew County. Retrieved from <https://www.unitedwayeo.ca/news-and-stories/the-mashkiwizii-manido-project-bringing-culturally-sensitive-support-to-renfrew-county/>

The program was tailored for Renfrew County's Urban-Indigenous population using responses to the analysis supported by United Way through the Emergency Community Support Fund and conducted by the Robbie Dean Family Counselling Centre and The Circle of Turtle Lodge.



Mashkiwizii Manido Foundation (MMF)

Mashkiwizii Manido is a Federally recognized Not for Profit Corporation that focuses on the overall health and wellbeing of the Urban Indigenous Population of Renfrew County and surrounding area.

MMF focuses on providing culturally specific services and programs developed by, implemented and delivered **by** Indigenous Peoples **for** Indigenous Peoples and their families. These programs include support for the following:

- mental health
- addictions
- trauma
- 60's scoop
- residential schools
- truth and reconciliation
- intergenerational trauma
- impacts of colonization
- walking a journey of healing

Participant Demographics / Identity Markers

There were a total of 11 participants who attended, ranging between 30 to 65 years of age. Of the 12 participants, 7 identified as female, and 4 identified as male. Ten participants identified as Indigenous (1 Cree, 1 Mi'kmaq First Nation, 1 Métis, 7 First Nations) and one participant identified as a non-Indigenous ally. All participants identified their language as English, while one identified as English / French / German / Anishinaabemowin, and another participant said they spoke limited Mi'kmaw.

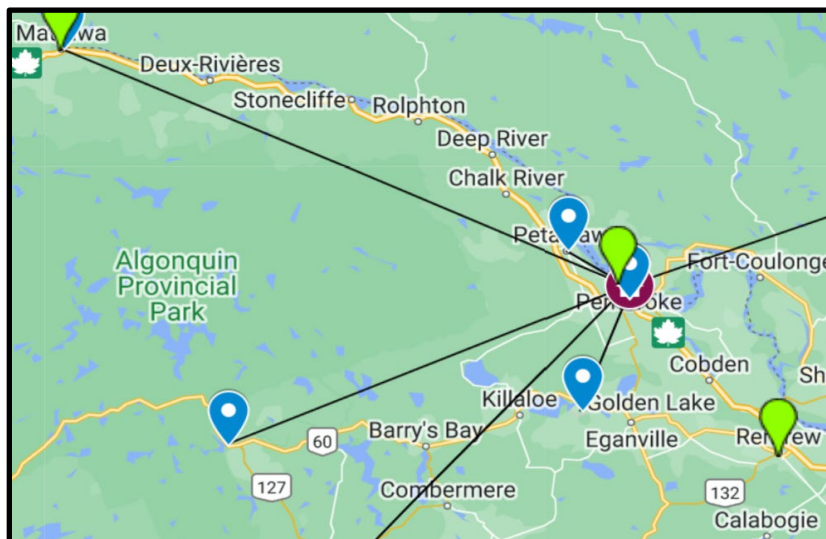
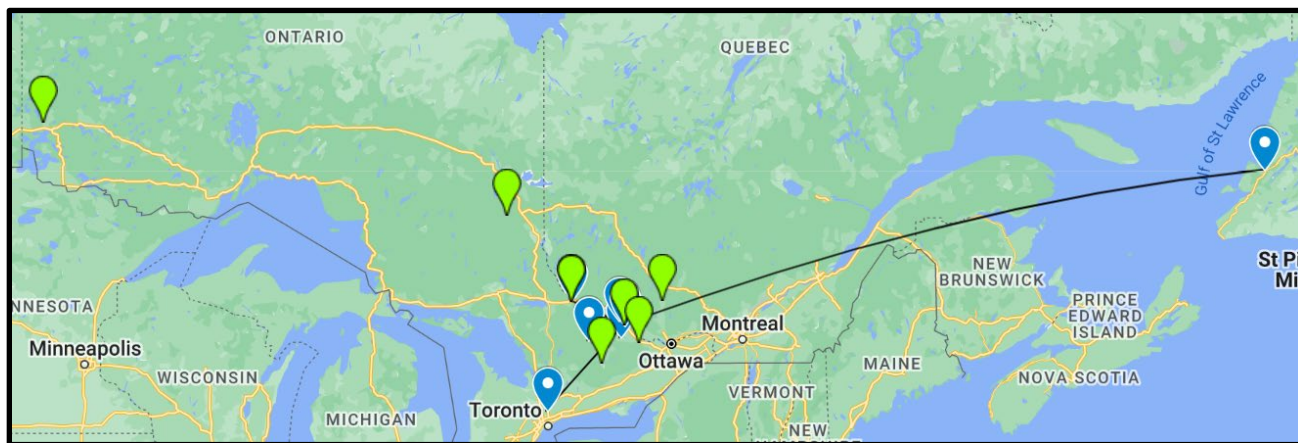
One participant included the following physical, emotional, development (dis)ability markers: obese, depression, stoic, pain.

One participant identified as the Executive Director of Mashkiwizii Manido Foundation and a Mental Health Addiction Trauma Therapist.

Mashkiwizii Manido Foundation - [Home/Connected Communities](#)

All 11 participants are linked to Mashkiwizii Manido Foundation, which is located on Algonquin territory, known as the city of Pembroke - at 84 Isabella St.

- 9 have home/connected communities that are between 15.4km (Petawawa) and 1482 km away (Mi'kmaq First Nation - Newfoundland)
 - o 3 identify Whitney and area as their home/connected community (94.5km away)
 - o 2 identify Golden Lake/Pikwakanagan as their home/connected community (28.1km away).
 - o 1 identified Antoine First Nation as their home/connected community, which populated multiple Algonquin territory locations on the map (designated green location points)



The map on the left shows a larger image of the home/connected communities - with the red home icon (Mashkiwizii Manido Foundation) as the central Renfrew County Indigenous community hub.

Family/ Roles

The word cloud generated below are the family/roles shared by participants -the larger size indicates the most frequently used identity markers.



Conceptualizing Needs

Distinguishing Western vs. Indigenous Ontology

During the roundtable discussion, participants discussed the importance of distinguishing Indigenous knowledge/ontology from Western conceptualizations.

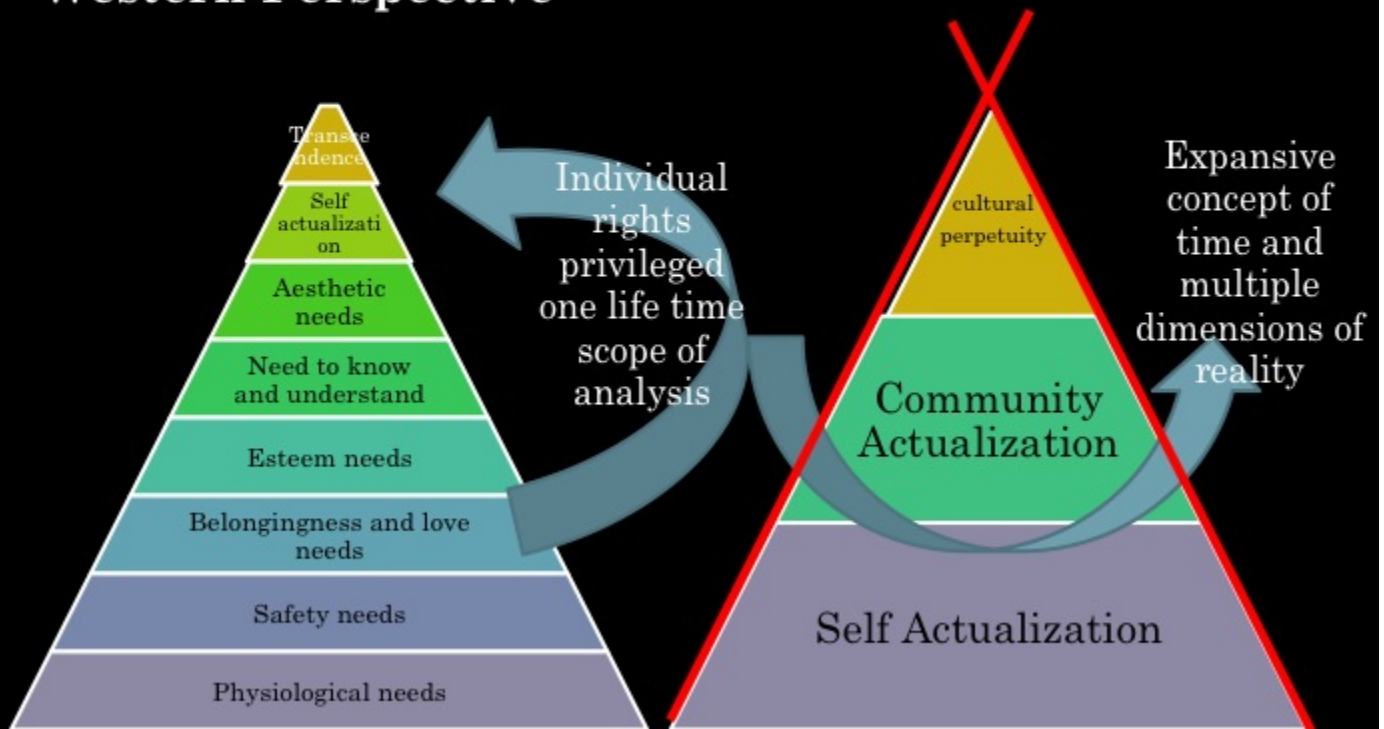
One participant referenced Cindy Blackstock's work, mentioning that Maslow's Hierarchy of Needs is colonial and hierarchical, and has historically been applied across systems and services "*to legitimize checking boxes.*"

The First Nations perspective is non-hierarchical, it is circular, and interconnected.

MASLOW'S HIERARCHY OF NEEDS (INFORMED BY BLACKFOOT NATION (ALTA))

Western Perspective

First Nations Perspective



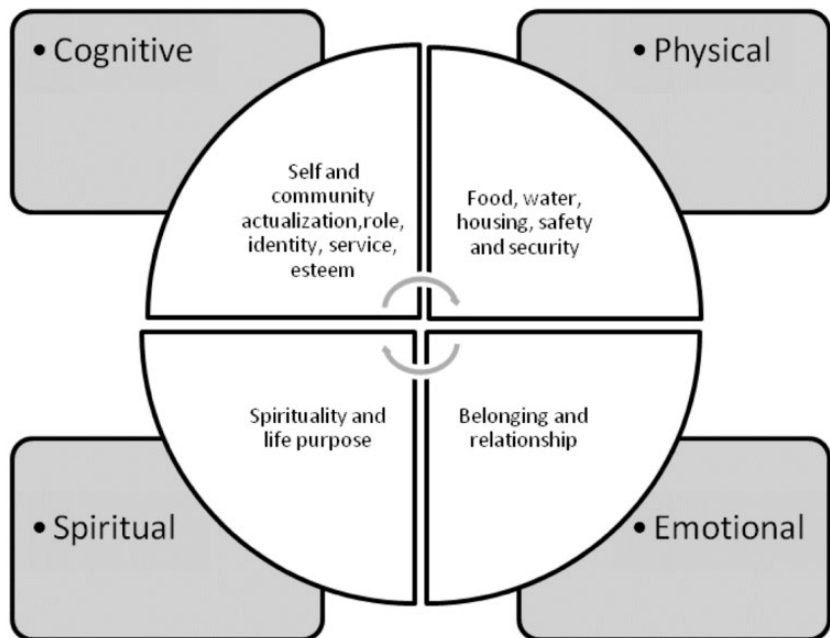
Huitt, 2004; Blackstock, 2008; Wadsworth,

This slide shows basic differences between Western and First Nations perspectives, as presented by University of Alberta professor Cathy Blackstock at the 2014 conference of the National Indian Child Welfare Association. Retrieved from [https://ccs.ukzn.ac.za/files/South%20Africa%20\[Compatibility%20Mode\].pdf](https://ccs.ukzn.ac.za/files/South%20Africa%20[Compatibility%20Mode].pdf)

Dr. Cindy Blackstock proposed the Breath of Life (BOL) theory which encompasses First Nations ontology and physics Theory of Everything (TOE). According to Blackstock (2009), Terry Cross (MSW), from the Seneca Nation, altered Maslow's hierarchy of needs to fit within an Indigenous medicine wheel framework and this framework is a component of Blackstocks' BOL theory. Indigenous people across Turtle Island hold variations of medicine wheels deep within their culture (2009) and Blackstock's BOL theory has four dimensions to it that

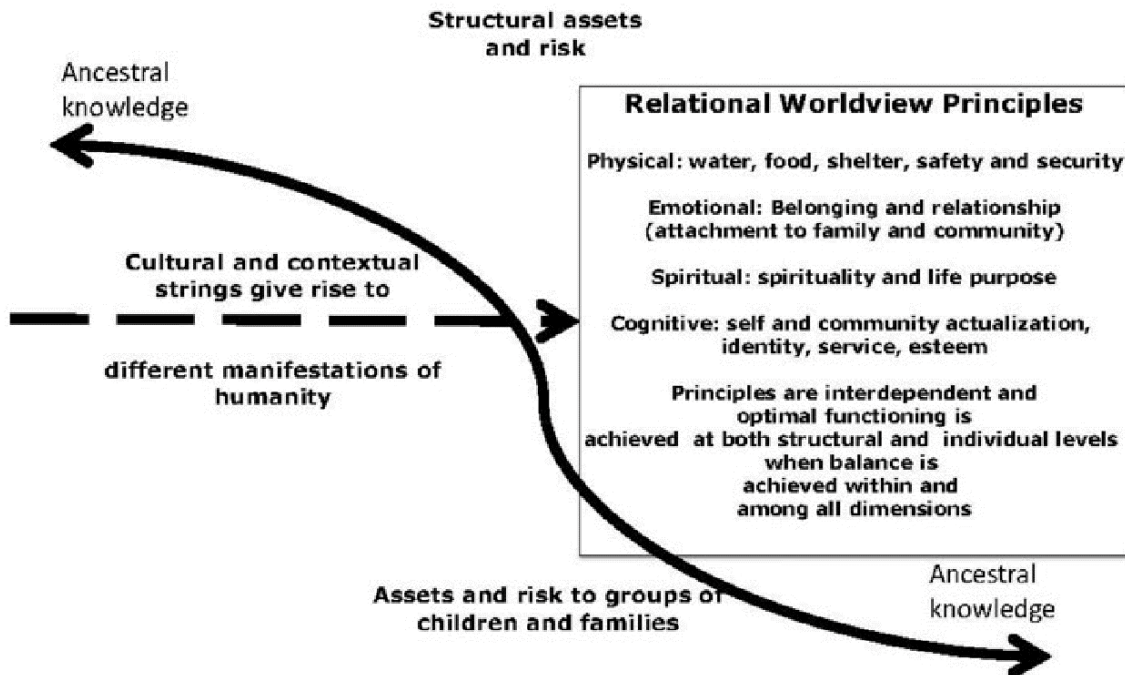
are built on it: cognitive, physical, spiritual, and emotional (Blackstock, 2011). The BOL theory is designed to look seven generations behind and seven generations forward.

Cross's worldview principles (2007) balanced within a holistic model. Image retrieved from:



<https://pressbooks.bccampus.ca/psychologicalroots/chapter/summary-of-the-breath-of-life/>

Cindy Blackstock's (2009) Breath of Life theory. Image retrieved from



<https://pressbooks.bccampus.ca/psychologicalroots/chapter/summary-of-the-breath-of-life/>

Home/Connected Community Needs

Indigenous Knowledge Recognition

Participants mentioned the need for a proactive approach to healing and wellness that is not the standardized Western/mainstream approach that is lacking and always seems to be that Indigenous organizations are *“just trying to catch up.”* The mainstream approach has created a pattern of intergenerational trauma. Indigenous people hold knowledge and wisdom to heal - which needs to be recognized and funded.

Structural/Systems Accountability to Decolonization

Participants referenced the following key documents:

- [United Nations Declaration on the Rights of Indigenous Peoples](#),
- [Truth and Reconciliation Committee Calls to action](#), and
- [Missing and Murdered Indigenous Women and Girls Calls to Justice](#)

For Truth and Reconciliation to advance, all systems (employment, education, healthcare, government, for-profit/non-profit organizations), should be mandated to understand their relationship to all the above documents and their accountability to protocol and practice. Participants provided examples:

- Instituting cultural responsive trauma-informed practice across organizations,
- Improving human resources (HR) for organizations to facilitate accountability strategies to healing and growth amongst Indigenous and non-Indigenous frontline workers (in education, healthcare, social services, housing) that could mitigate the experience of lateral violence.

Indigenous Land Sovereignty/ Shared Spaces

Several participants wrote about needing more access and community exposure to Indigenous spaces that teach, share and provide access to elders/knowledge keepers.

One participant wrote of the need to have an Indigenous-specific art gallery & museum: *“we need to share our history while continuing to have a positive presence within the community.”*

Sustainable funding for Structural Changes

Half of the participants identified the need for Increased access to sustainable funding to build capacity of existing Indigenous services to meet service demand. The Executive Director of MMF noted that competing for funding along Western mainstream organizations is colonial; writing applications to prove service/system gaps is re-traumatizing and another form of structural discrimination.

A number of participants said that funding should be mandated across systems (government, education, healthcare, workplaces) for Indigenous trainers/educators:

- The non-Indigenous ally noted the need for more funding allocated to Indigenous cultural educators in order to support Indigenous youth and adults in Pembroke and Petawawa: *“We need more cultural training and teachings to help our youth connect and learn traditions,”*
- The non-Indigenous ally working within RCDSB also wrote the need for: *“cultural sensitivity training and culturally responsive pedagogy in various employment areas to create safe spaces for Indigenous people and spaces that are de-colonized and culturally inclusive.”*
- Another participant wrote the requirement for: *“cultural awareness within public service spaces to connect to more abled professionals.”*

Increased Awareness and Advocacy

One participant noted the need to have access to more knowledge/ information of Indigenous-specific services and supports.

During the roundtable discussion, several participants noted the need to increase awareness that Indigenous sovereignty does not take away from any person or limits other people's access.

Additionally, participants recommended public education on the root causes of addiction, as an opportunity for those that judge to gain awareness and increase compassion/empathy. One participant emphasized that: *"Addictions are a choice of survival and coping with pain - it is a band aid solution; People do not choose to live this lifestyle."*

Indigenous-specific service workers across service areas

All participants (100%) identified the need to have more Indigenous frontline service workers in the following service areas:

- Counseling - *"fully Indigenous based and trained"*
- Wholistic wellness
 - Includes addressing food security, housing security
 - Wrap around supports
- Job, job placement and self employment training
- Addictions counseling - Wellbriety
- Human trafficking counselors
- Victim's services
- Youth services
- Indigenous healing lodges
- Indigenous walk-in/drop-in centres
- Detox, treatment centres and recovery services
 - for someone coming out of recovery, have Indigenous community wrap around/support systems, like a "welcome back home committee"
- Culture camps

Increased service needs for different groups (for youth, men, women, 2SLGBTQQIA)

All participants (100%) agreed that there are different service needs for different groups. Two participants noted that base services may be the same, but a different approach is important:

- One participant wrote: *"A different approach would need to be geared to each demographic, ie., a male who was a victim of sexual violence may not be comfortable with a member of the 2SLGBTQ community,"*
- Another participant noted: *"There is a need for both group counseling/talk workshops as well as private one-to-one safe spaces. 2 Spirit LGBTQIA may feel this need for independent spaces in order to express their concerns. Youth would benefit from elder teachings. For men and women, we can learn from each other when appropriate but still need individual spaces".*

Several participants identified the need to build capacity for designated spaces to come together and feel safe, particularly for Two-Spirit and Indigiqueer folk. One participant explained: *"social and spiritual aren't the same, there should be designated spaces available to mitigate forced erasure which means the needs are different generationally."*

During the roundtable discussion, participants noted that there is no Indigenous-led programming/supports for male survivors of sexual abuse in Renfrew County, one participant stated: *“us men have feelings - us men hurt just like everyone else.”*

Participants spoke of Indigenous youth (this generation on TikTok) isolating themselves, and requiring the following supports for youth and parents/caretakers:

- Access to nutrition, food security
- More access to digital platforms to support healing/wellness
- Increased access and awareness of [Jordan's Principle](#) funding
- More workshops that are relevant to issues
 - Note one participant provided a workshop but was told not to talk about suicidality, addictions or eating disorders
- More daycares and drop-ins

One participant described that all groups are at different stages of the medicine wheel: *“We must learn to meet each individual where they are - emotionally-mentally-physically- and spiritually. Include talking circles, drumming, counseling, etc.”*

Participants described various types of spaces and services, such as:

- Women's lodges
- Youth rites of passage
- End of life support
- Fire keeper teachings
- Land-based learning
- 12 Steps of Wellbriety ([White Bison](#))
- Men's drumming circle/ talking circle / teachings
- Women's drumming circle / talking circle/ teachings
- Cultural workshops / ceremonies
 - One participant wrote *“cultural camps to get youth out on the land learning from elders and knowledge keepers”*
- Men's sexual assault/trauma support
- Women's sexual assault/trauma support

Present Services

Present Services Meeting Community Needs

Indigenous participants ranked present mental health and addiction services reaching the needs of their home/connected communities as low as 0 - not at all, and as high as 5 -moderately reaching the needs. The average ranking is 2.1, with 4 participants (36%) providing a rating of 1, and 3 participants (27%) providing a rating of 2.

The two participants that provided a rating of 5 qualified their answers by noting their knowledge and awareness is a requirement of their current professional positions/responsibilities - one is the Executive Director of Mashkiwizii Manido Foundation, and the other identifies as a non-Indigenous ally with a position on the Indigenous education team for Renfrew County District School Board (RCDSB).

Present services and their limitations

Every participant identified Mashkiwizii Manido Foundation (MMF) as the primary and only Indigenous-specific mental health program in Renfrew County. The Executive Director of MMF noted that “*Robbie Dean Center refers their Indigenous clients to us.*” Participants listed the following services provided by MMF:

- Men’s group
- Drum circle
- Women’s circle

While MMF is a present Indigenous service provider, there is only one Indigenous counselor for mental health and addictions services. As noted in the community needs analysis (p.2-3), this is a major limitation for present service needs for the Indigenous population in Renfrew County, which as of 2016 holds an Indigenous population of approximately 8,000 people. Participants are aware of the benefits of MMF and the community need to increase its capacity:

- one participant wrote: “*MMF organizes teachings and offers a safe space. Counseling is available, however more space is needed to serve the community - perhaps more counselors or a larger space.*”
- Another participant wrote: “*Mashkiwizii Manido Foundation is available in Pembroke and some Indigenous students can access the services through an MOU with the RCDSB, but this is limited due to lack of funding to hire multiple mental health facilitators.*”

Some participants noted other present services, such as:

- [Ontario Native Women’s Association](#) (ONWA)
- [Non-Insured Health Benefits](#) (NIHB)
- [Métis Nation of Ontario](#)
- [Lavallee Health Centre](#) - Dr. Ali John Chaundry
- [Noojimo Health](#) (virtual) - the non-Indigenous ally working as part of RCDSB’s Indigenous Education team explains: “*For Indigenous students in the Renfrew County, they have access to Noojimo which is a virtual mental health service. I believe only First Nations can access the service.*”
- Nature programs through conservation
- Indigenous designate at [Southlake hospital](#)

The service limitations to local service providers are that they are non-Indigenous specific.

- One participant noted: “*Pikwakanagan services are provided by non-Indigenous service providers. Pembroke/Petawawa area have non-Indigenous service providers.*”
- Another participant stated: “*Mostly non-Indigenous Mental Health and Addictions mainstream western approaches.*”

As noted in the community needs analysis, 50% of Indigenous people prolong access to services due to lived experience of systemic racism/discrimination by non-Indigenous service providers. With Indigenous-specific service providers, the community needs analysis found that 97% of Indigenous community members seeking services would access Indigenous specific programming (services offered by Indigenous front-line service providers).

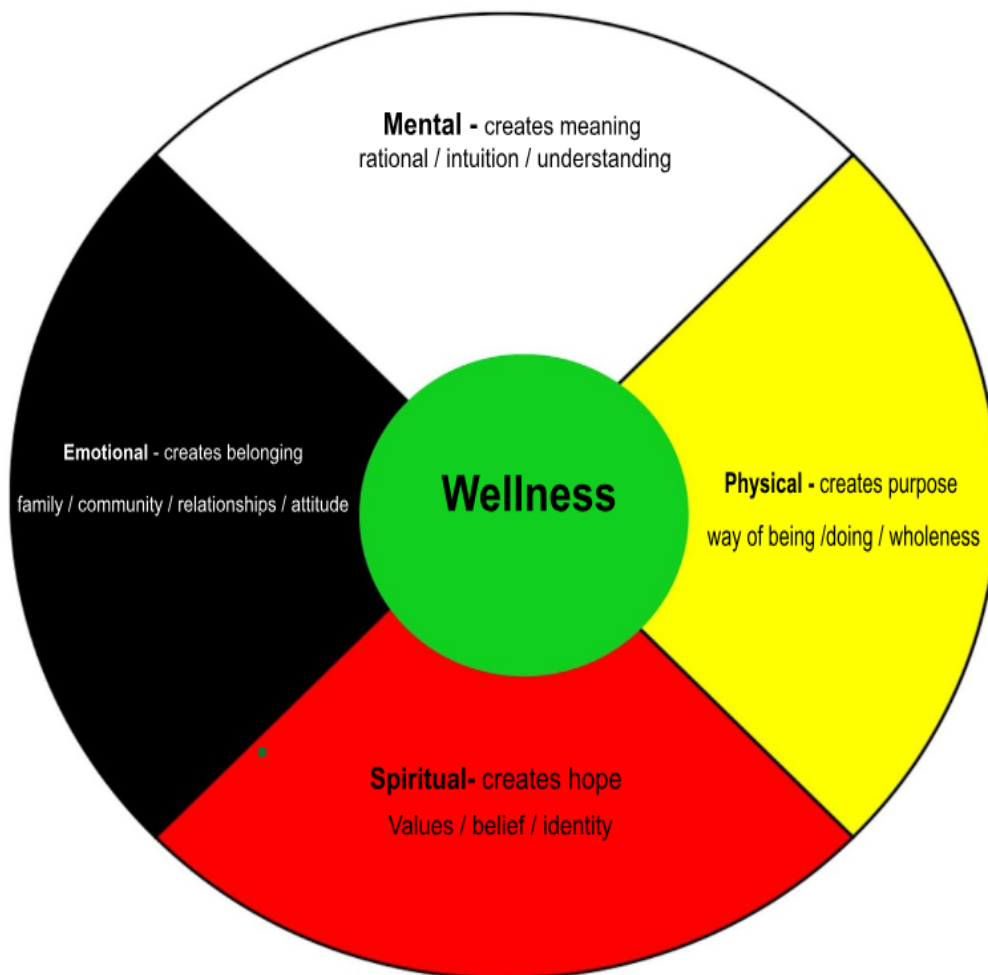
See Appendix for a **beginning list of organizations and services**

Indigenous Wellness Framework

During the Roundtable discussion, TeKnoWave facilitators used the Indigenous Wellness Framework by Thunderbird Partnership Foundation to frame the discussion on Indigenous Wellness (Refer to Appendix B for Indigenous Wellness Framework question prompts).

Participants reflected on wellness, and highlighted the following:

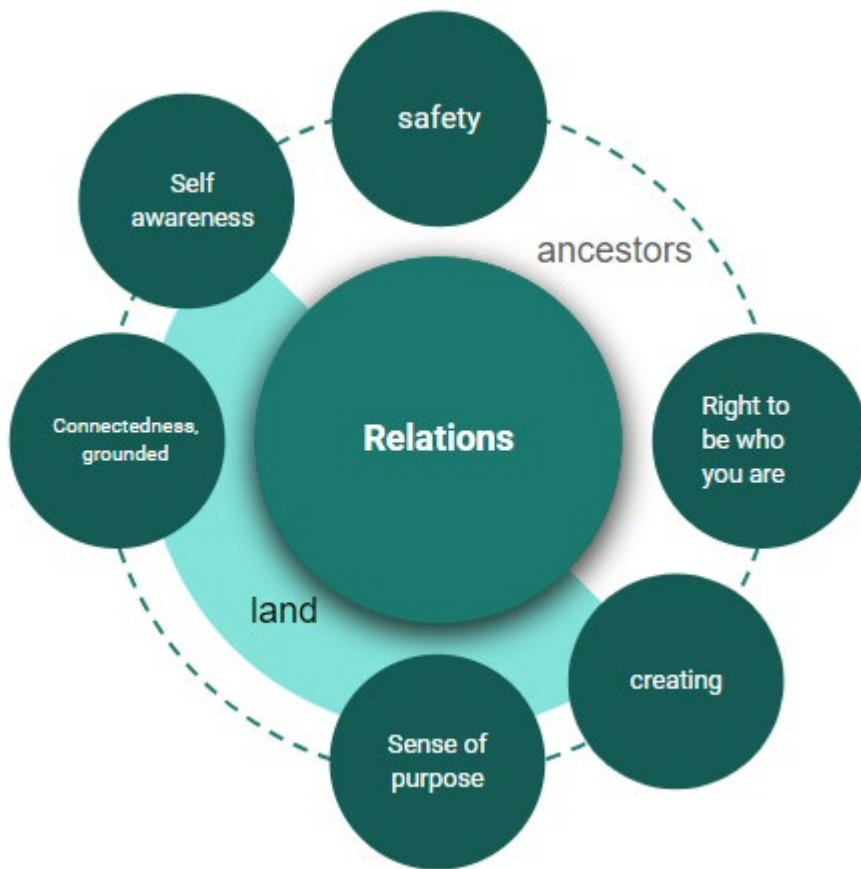
- Wellness is inclusive of Indigenous and non-Indigenous people,
- You cannot have one aspect of wellness without others,
- Aim for balance in all areas of wellness,
- The colonial system often imposes linearity and hierarchy - this is not the Indigenous way of being, and it is crucial for wellness not to buy into set limits that continues to cause harm to Indigenous peoples.



Thunderbird Partnership Foundation Wellness Framework

Indigenous Wellness

Based on the roundtable discussion, the following key themes framed Indigenous wellness:



Relations

- Importance of relationship to spirit, to self, to land, to people
- Everyone has unique gifts, and it often takes other people to see and recognize gifts for others to see gifts in themselves. This requires people to spend time together in community and in ceremony to build up and use gifts and start to recognize gifts -feeling with and being ok (linking to safety of space) developing **sense of purpose** and belonging.

Ancestors

- Connection to culture
- Reminder of strengths, and **sense of purpose**. Reminder of Blood Memory and wisdom of Ancestors to healing and wellness.

Land

- Connection to culture, ceremony
- Physical environment is connected to mental wellness; if you're not in the right physical space (like your home and employment space), then you won't be in the right mental space.

WATER



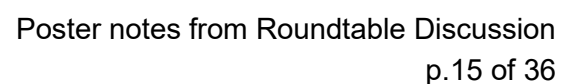
EARTH



- Waterfront, marina
- Sacred fire
- On the land, in the bush, garden, go to trail
- Getting away from city to see stars
- see vastness of universe that we are part of
- Smudging - smell the medicines, cleansing air

Safety

- Permission you give yourself to feel safe
- Spaces of safety are where you can cry and be supported
- Safety from discrimination





Roundtable Participants at Mashkiwizii Manido Foundation



Indigenous Wellness barriers

During the roundtable discussion, three foundational barriers were identified:

Systemic/Colonial Governance

Participants identified the following barriers:

- Lack of Indigenous land sovereignty
- Lack of designated funding for Indigenous service providers
- Funding / Grant application process is hierarchical
- Indian Act
 - Indigenous people being denied Indigenous status
 - One participant shared their 'expired' status card and said that their application to renew their status was denied. Furthermore, they noted that some family members were also denied status, while other family members maintained their Indigenous status. This experience has caused significant harm to this Indigenous person, they wrote: *"the government should not be allowed to say who is and isn't Indigenous. It should be the Indigenous people in that community."*
 - Indigenous people displaced from home/connected communities with no proof of status, experience limits/restrictions to services. For example, services such as Non-Insured Health Benefits (NIHB) are not accessible to non-status First Nation, Inuit, or Métis people.
- Systemic discrimination across systems (education, employment, healthcare, housing)
 - One participant noted her experience of being discriminated against while job-searching

Shame / Stigma

A barrier to accessing services for mental health and addictions is stigma and feelings of shame. Multiple participants agreed that they hesitate to talk and share their feelings because they don't want to be a burden. The Executive Director and Indigenous Counsellor at Mashkiwizii Manido Foundation noted that people often do not want to come to her for counsel and support because they are aware that she is so busy *"wearing too many hats."*

Lack of Access

Participants identified the following barriers:

- Lack of access to land and spaces for ceremony and to come together
- Lack of access to Indigenous-specific service providers
- Lack of access to wholistic services and supports
- Lack of physical proximity to programming/services
 - One participant, who ranked present services in her home/connected community (Whitney and area) as 0 (zero) explains: *"There are NO services unless you DRIVE 126 KM one way then the only Indigenous based mental health team [MMF] are understaffed and no funding,"* and
 - Another participant, who ranked present services in her home/connected community as 1 (one) explains: *"The area is serviced by outside organizations and provincial services (call-in or virtual), drop-in programs are open to everyone not Indigenous only (ceremonial space)".*

Indigenous Frontline Worker Training

Standard Training/Certifications

90% of participants selected the following standard training/certifications:

- Mental Health First Aid
- Trauma-Informed care - with an emphasis on culturally responsive care
- Crisis intervention
- First Aid/CPR
- Suicide Intervention Training

64% of Indigenous participants believe that Indigenous trauma and addictions workers should have the following standard training/certifications:

- Concurrent Disorders Training (CMHA)
- Land-based training
- Cultural Sensitivity Training

Other training for Indigenous trauma and addictions workers suggested by participants include:

- Fire keeper, ceremony, pipe carrier
- 12 steps of Wellbriety - White Bison
- [Feather Carriers](#); cognitive coaching; restorative justice

One participant emphasized that lived experience/equivalent should be respected and acknowledged as equivalent training and that “*checkboxes shouldn’t prevent people from bringing their gifts into the role.*”

Another participant wrote that all training/certifications are a major asset, “*I don’t think I could pick one as being more important than the other.*”

Existing Mental Health and Addictions Training

More than half of participants did not identify any existing mental health and addictions training. One participant wrote they are not aware of existing training “*which is heartbreaking considering the need.*” Another participant noted they are not aware and responded to the need for better access: “*we need the knowledge to be easier to find.*”

Two participants referenced Mashkiwizii Manido Foundation (MMF):

- Offering counseling groups and land-based healing
- Having partnerships “*with some health services (e.g. Deep River hospital). I’m not aware of any other specific training.*”

Online Training

55% of participants have engaged in online training, which includes:

- Men’s circle, drum circle
- Intimate partner balance/trauma-based
- First Aid-CPR
- Oxygen therapy
- cultural sensitivity training

- Mental Health First Aid (1 day training)
- Wellbriety (White Bison)
- [Indigenous Wellness Addictions Prevention](#) 2-year diploma (Canadore College)
- Indigenous Death Doula

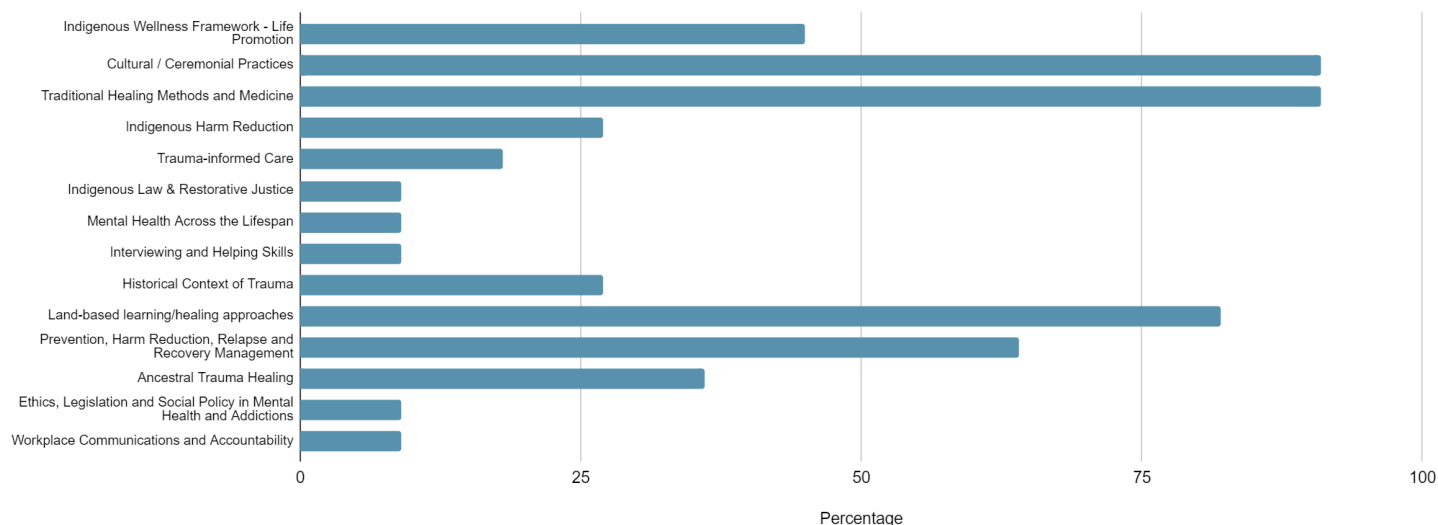
Critical Topics for Indigenous Frontline Workers to Know About / Learn

Sixteen topics were shared with participants, 73% of participants selected all topics as being critical, these topics are:

- Indigenous Wellness Framework - Life Promotion
- Cultural / Ceremonial Practices
- Traditional Healing Methods and Medicine
- Indigenous Harm Reduction
- Trauma-informed Care
- Indigenous Law: *“Especially to protect and advocate for rights in UNDRIP as they connect to mental health and well-being”.*
- Mental Health Across the Lifespan
- Interviewing and Helping Skills
- Historical Context of Trauma (residential schools, 60’s scoop, Inuit tags...)
- Land-based learning/healing approaches
- Prevention, Harm Reduction, Relapse and Recovery Management
- Pharmacology for Mental Health and Addictions
- Kinship Custody and Guardianship
- Ancestral Trauma Healing
- Ethics, Legislation and Social Policy in Mental Health and Addictions
- Workplace Communications and Accountability

Participants were asked to select the top five critical topics; results are shown in the following bar graph:

Critical Topics



The five critical topics based on combining all participants' selections are:

- Cultural Ceremonial Practices (91% of participants selected)
- Traditional Healing Methods and Medicine (91% of participants selected)
- Land-based learning/healing approaches (82% of participants selected)
- Prevention, Harm Reduction, Relapse and Recovery Management (64% of participants selected)
- Indigenous Wellness Framework - Life Promotion (45% of participants selected)

One participant wrote that Indigenous frontline workers' *"experiences, relationships should always outweigh credentials."*

One participant identified degree/diploma programs/qualifications for Indigenous frontline service workers, which include:

- Child and Youth Worker
- Social Service Worker
- Counselor

Roundtable Feedback / Recommendations

Recommendations to improve the Roundtable experience:

Several participants recommended additional time for the roundtable discussion (there were three hours allotted).

"This roundtable gave us the opportunity to share and express our concerns and lack of support as Indigenous people."

"I love the sense of community that was built and how safe everyone felt to speak their truth."

"Everyone is equal; no one was above another person. Every voice was heard."

Additional Feedback:

"Knowledge can be a double-edged sword; it can be used for good or evil - also we can talk about all the programs but without proper funding we cannot run any programs in our communities."

"Offer support to help Indigenous people get their Indigenous status cards back, who rightfully deserve it!"

References

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Appendices

Appendix A: **Beginning* List of Organizations/ Programs / Services*

Note- while there is a list of services, many of them are not Indigenous-specific.

Navigating Services - Phone Support

Name	Contact Information	Description
211	Call 211 questions@211north.ca	211 is a helpline that connects people to the social services, programs and the community supports they need.
Pembroke Bylaw	By-law Enforcement 1 Pembroke St. E. Pembroke, ON K8A 3J5 Phone 613-735-6821 ext. 1360 Fax 613-735-3660 Contact By-Law Enforcement https://pembroke.ca/en/city-government/by-law-enforcement.aspx	Under the Planning, Building and By-law Department, By-law Enforcement Services is responsible for the administration and enforcement of by-laws within the City of Pembroke. Using these by-laws, staff work to enforce and resolve complaints from members of the public regarding a wide variety of issues. To learn more about common by-laws, visit the By-laws page . For inquiries or complaints regarding by-laws, contact by-law enforcement. For a complaint about a parking ticket, fill out our Parking Ticket Complaint Form .
411 https://411.ca/white-pages/on/ottawa		Phone directory - you can look up a business, a person, and also do a reverse

		number search
1-800- O Canada	1-800-622-6232 TTY 1-800-926-9105 https://www.geds-sage.gc.ca/en/GEDS/?pgid=006&	For information on Government of Canada Programs and Services
Renfrew County Crisis Line	1-866-996-0991 Can link to the mobile crisis team	

Renfrew County Indigenous Health, Social and Community Services

Name	Contact Information	Description
Mashkiwizii Manido Foundation (MMF) http://www.mashkiwiziimanido.foundation.com/	84 Isabella St. Unit #10 Pembroke ON K8A 5S5 info@mashkiwiziimanidofoundation.com Phone: (613) 281-7969	Mashkiwizii Manido is a Federally recognized Not for Profit Corporation that focuses on the overall health and well being of the Urban Indigenous Population of Renfrew County and surrounding Area. We focus on providing culturally specific services and programs developed by, implemented and delivered by Indigenous Peoples for Indigenous Peoples and their families. These programs include mental health, addictions, trauma supports, 60's scoop, residential schools, truth and reconciliation, intergenerational trauma, impacts of colonization, and walking a journey of healing. Facebook page has the most up to date programming information: https://www.facebook.com/mashkiwizii.mani.do
Non-Insured Health Benefits for First Nations and Inuit (NIHB) https://www.sac-isgc.ca/eng/1572537161086/1572537234517	Non-Insured Health Benefits 1455-10 Wellington Street Gatineau QC K1A 0H4 Client information line Telephone (toll free): 1-800-640-0642 Fax (toll free): 1-800-806-6662 Medical supplies and equipment, vision care	The Non-Insured Health Benefits (NIHB) program provides eligible First Nations and Inuit clients with coverage for a range of health benefits that are not covered through other: <ul style="list-style-type: none"> ● social programs ● private insurance plans ● provincial or territorial health insurance

	<p>(including eyewear), mental health counselling (vendors and providers only) Telephone (toll free): 1-800-881-3921 Medical transportation (Ottawa office) Telephone (toll free): 1-800-881-3921 Telephone (after hours – toll free): 1-833-675-3081</p>	<p>The program provides coverage for the following medically necessary goods and services:</p> <ul style="list-style-type: none"> ● vision care ● dental care ● mental health counselling ● medical supplies and equipment ● prescription drugs and select over-the-counter products ● medical transportation to access medically required health services not available: <ul style="list-style-type: none"> ○ on reserve ○ in the community of residence
<p>Metis Nation of Ontario https://www.metisnation.org/programs-and-services/healing-wellness/</p>	<p>Suite 1100 – 66 Slater Street Ottawa, ON K1P 5H1 Click Here to Email Us Tel.: 613-798-1488 Toll Free: 1-800-263-4889 Ext 7 Registry Tel.: 613-798-1006 Registry Toll Free.: 1-855-798-1006</p>	<p>The MNO's Healing and Wellness branch actively seeks to partner with Indigenous and non-Indigenous organizations and governments that recognize and respect the diverse lifestyles and traditions of Indigenous people regardless of residency and status.</p> <p>For more information about the Healing and Wellness Programs and Services in your area please contact a Regional MNO Office here. No matter where you live in Ontario we can help you access timely and specialized health care in your community. For more information please call 1-800-263-4889. Check out the MNO video program showcase to learn more about our programs and how they work!</p>
<p>Ontario Native Women's Association (ONWA) https://www.onwa.ca/</p>	<p>Phone: 1-800-667-0816</p>	<p>Centralized Intake Provides a single point of contact for referents and community members to access immediate supports and brief services across the province of Ontario.</p>
<p>Pauktuutit Inuit Women of Canada https://pauktuutit.ca/</p>	<p>350 Sparks St. Suite 805, T: 613-238-3977 Toll Free: 1-800-667-0749 info@pauktuutit.ca</p>	<p>Pauktuutit is the national non-profit organization representing all Inuit women in Canada. Its mandate is to foster a greater awareness of the needs of Inuit women, and</p>

		to encourage their participation in community, regional and national concerns in relation to social, cultural and economic development.
<p>Phoenix Centre https://phoenixctr.com/phoenix-centre-cultural-centre/ Indigenous cultural centre</p>	<p>1-800-465-1870 130 Pembroke St W, 2nd Floor, Pembroke ON K8A 5M8</p>	<p>The Indigenous cultural room is a welcoming place for all Indigenous peoples within community. The new Indigenous space will allow Indigenous People to receive supports, to be able to use sacred medicines while on their journey. The Phoenix Centre acknowledges the invaluable knowledge and journey that Indigenous Peoples continue to carry.</p> <p>Veronica Miller, a Family and Child therapist and citizen of the Métis Nation, is available to Indigenous clients who would like services from our Indigenous therapist.</p>

Health Services

Name	Contact Information	Description
<p>Jordan's Principle https://www.sac-isc.gc.ca/eng/1568396042341/1568396159824</p>	<p>Available 24 hours, 7 days a week Jordan's Principle Call Centre: 1-855-JP-CHILD (1-855-572-4453)</p>	<p>Jordan's Principle makes sure all First Nations children living in Canada can access the products, services and supports they need, when they need them. Funding can help with a wide range of health, social and educational needs, including the unique needs that First Nations Two-Spirit and LGBTQIA children and youth and those with disabilities may have.</p> <p>Jordan's Principle is named in memory of Jordan River Anderson. He was a young boy from Norway House Cree Nation in Manitoba.</p> <p>Requests for Inuit children can be made through the Inuit Child First Initiative.</p>
<p>Lavallee Health Services</p>	<p>1348 Pembroke St West Pembroke ON K8A 7A3 info@lavalleecentre.com 613-635-7206</p>	<p>Lavallee Health Centre is happy to serve as one of the largest multidisciplinary clinics in the Ottawa Valley. It is our vision to be an elite clinic for massage therapy, physiotherapy, and chiropractic in Renfrew County. We welcome clients from Pembroke, Petawawa, and beyond.</p>

<p>Pembroke Hospital Indigenous resources https://www.pemreghos.org/indigenousresources</p>	<p>705 Mackay Street Pembroke, Ontario K8A 1G8 Phone: (613) 732-2811 Email: pr@prh.email</p> <p>Mental Health Services: Phone: (613) 732-8770, extension 8005</p> <p>Toll Free: 1-800-991-7711</p> <p>Fax: (613) 735-8238</p> <p>If you or someone you know is experiencing a mental health crisis, please call our 24/7 Mental Health Crisis Line 1-866-996-0991</p>	<p>Support Services for Algonquins of Pikwakanagan during hospital stay and discharge Home and Community Care and Home Care Services are available to assist Indigenous community members to ensure the best health care for clients.</p> <p>For more information, please call: Marlene Sackaney Keely (613) 625-2259 or for Home Care call Peggy Dick (613) 625- 1230</p>
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Indigenous Peer Support, Doula Support, Grassroots Community Support

Name	Contact Information	Description
<p>Blackbird Medicines http://www.blackbirdmedicines.ca/ https://linktr.ee/BlackbirdMedicines</p>	<p>https://www.instagram.com/blackbird_medicines/?hl=en blackbirdmedicines@gmail.com</p>	<p>Blackbird Medicines is a plant and land-based spiritual and cultural wellness practice. Chrystal Toop, Story Healing Thunderbird is an Indigenous storyteller, author, and community educator. She is founder of collectives, a public speaker, and grassroots organizer sought out for her lived expertise. Chrystal shares insights as a generational residential school survivor and registered social services worker.</p> <p>Indigenous Death Doula Collective - offers training certification</p>
<p>Aunties on the Road https://auntiesontheroad.ca/</p>	<p>c/o Minwaashin Lodge: Indigenous Women's Support Centre</p> <p>613-741-5590 ext. 102</p> <p>auntiesontheroad@minlodge.com https://www.facebook.com/au</p>	<p>Aunties on the Road Indigenous Full Spectrum Doula Care is an Indigenous Grassroots Organization which provides First Nations, Inuit and Métis youth between the ages of 12 and 30 with free reproductive and sexual health counselling and supports.</p> <p>Our service provision spans the traditional territory of Algonquin and Mohawk peoples, from Pembroke to Ottawa to Cornwall,</p>

	ntiesontheroad https://www.instagram.com/antiesontheroad/	<p>including local reserve communities.</p> <p>Our approach to care builds on the traditional roles of Aunties in Indigenous communities by providing culture based emotional, physical, mental and spiritual care within the full spectrum of sexual and reproductive health experiences including puberty (moontime ceremonies and other rites of passage), safer sex, fertility awareness and family planning, abortion and termination, conception, loss, adoption, post-partum care, perimenopause and menopause, etc.</p>
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Urban Community Hubs, Indigenous Landbases

Name	Contact Information	Description
Mashkiwizii Manido Foundation (MMF) http://www.mashkiwiziimanido.foundation.com/	84 Isabella St. Unit #10 Pembroke ON K8A 5S5 info@mashkiwiziimanidofoundation.com Phone: (613) 281-7969	<p>Mashkiwizii Manido is a Federally recognized Not for Profit Corporation that focuses on the overall health and well being of the Urban Indigenous Population of Renfrew County and surrounding Area. We focus on providing culturally specific services and programs developed by, implemented and delivered by Indigenous Peoples for Indigenous Peoples and their families. These programs include mental health, addictions, trauma supports, 60's scoop, residential schools, truth and reconciliation, intergenerational trauma, impacts of colonization, and walking a journey of healing.</p> <p>Facebook page has the most up to date programming information: https://www.facebook.com/mashkiwizii.manido</p>
Nenaawateg https://nenaawateg.ca/	https://nenaawateg.ca/contact/ Virtual & various physical locations By appointment only nenaawateg@outlook.com Facebook: https://www.facebook.com/cir	<p>Nenaawateg serves as an Indigenous Hub dedicated to fostering a sense of community among Indigenous individuals and groups. It provides a space where Indigenous people can connect, share their experiences, and collaborate on initiatives aimed at preserving and revitalizing their cultures.</p> <p>One of Nenaawateg's primary objectives is to educate both Indigenous community members and settlers (non-Indigenous</p>

	cleturtlelodge/	individuals) about Indigenous cultural awareness. This education encompasses a wide range of topics, including traditional customs, languages, art, spirituality, history, and contemporary issues faced by Indigenous communities.

Housing / “Home” Services

Name	Contact Information	Description
County of Renfrew Community Housing https://www.countyofrenfrew.on.ca/en/community-services/social-housing.aspx	<p>Contact Us</p> <p>RCHC - Pembroke 7 International Drive, Pembroke Ontario Canada K8A 6W5 T. 613-735-0782 Toll-Free: 1-888-256-0063 F. 613-735-2081 E-Mail this contact</p> <p>RCHC - Renfrew 450 O'Brien Road, Suite 104 Renfrew, Ontario Canada K7V 3Z2 T. 613-432-3679 Toll-Free: 1-855-432-6450 F. 613-432-9402 E-Mail this contact</p>	<p>Renfrew County Housing Corporation (RCHC) is a community housing provider in the County of Renfrew with over 1000 community housing units. The RCHC provides rent-geared-to-income (RGI) and affordable rental options to low-income households in the County of Renfrew. How to Apply for Housing</p> <p>If you have low to moderate income, we can help you find affordable housing in our community.</p>
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Food Security and Food Sovereignty

Name	Contact Information	Description
St. Joseph's Food Bank https://stjosephsfoodbank.ca/	<p>295 First Ave. N.</p> <p>E-mail address:</p>	We are a community based, volunteer driven, non-profit, non-denominational organization established in 1986 to provide

	stjosephsfoodbank3@gmail.com (also for e-transfers) Telephone : 613-732-3807	food to those in need in Pembroke and area. We work closely with other food banks across Renfrew county to satisfy this most basic human need.
The Grind https://the grindpembroke.ca/grind-market/	Mailing Address: 273 Victoria Street, Pembroke, ON K8A 4K5 Tel.: (613) 732-9423 Hours: Tuesday – Friday, 8:00 a.m. – 3:30 p.m. Email: the grindpembroke@gmail.com Facebook: www.facebook.com/the grindpembroke Instagram: the.grind.pembroke	<p>Food security is a huge issue in Pembroke and elsewhere as poverty rates and the price of food increase. With the closure in early 2019 of the Salvation Army's food bank, the remaining food bank in Pembroke, St. Joseph's, has been challenged to meet the growing need. While The Grind Pembroke does not see itself as a "food bank", we recognize our clients' need at times for emergency food supplies, especially fresh vegetables and fruit. We work closely with St. Joseph's food bank to ensure that no one goes hungry.</p> <p>Consequently, when St. Joseph's Food Bank is closed, clients in need of emergency help can rely on The Grind for food kits. We rely on generous donations of food items and funding from community sources to sustain this additional food demand beyond the supplies required to support our Community Kitchen operations.</p> <p>"Our food storage room is generally well-stocked with canned and dry food. As well, we enjoy the use of a large walk-in cooler for perishable items and banks of freezers for meat and frozen vegetables, etc."</p>

Mental Health, Addictions / Treatment Programs & Services

Name	Contact Information	Description
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<p>Noojimo Health https://noojimohealth.ca/</p>	<p>Call office Auntie: 1.833.277.5678</p> <p>Direct: Contact Form</p> <p>HOURS OF OPERATION: Monday - Friday: 9am to 5pm EST Please Note: Some of our care providers are also available in the evenings Monday to Friday from 5pm – 8pm EST and Saturdays.</p>	<p>Virtual counseling - RCDSB students can access, and NIHB can support up to 22 hrs of counseling</p>
<p>Robbie Dean Counseling Services https://robbiedeancentre.com/about/</p>	<p>Monday-Friday, 10AM-2PM Please leave a voicemail if you are calling after office hours 613-629-4243</p>	<p>Welcome to the Robbie Dean Counselling Centre. Please know that you are now in a safe and trusted place where you will be heard, not judged and cared for. Every program and service offered here was based on an identified need in the community that you live in. We work very closely with other organizations to close in service gaps to ensure no one struggles alone.</p>
<p>Renfrew County Addiction Treatment System</p>	<p>https://www.renfrewcountyaddictiontreatment.ca/</p>	<p>The Renfrew County Addiction Treatment System delivers comprehensive, integrated alcohol, drug and gambling addiction assessment, counselling and treatment programs.</p> <p>By contacting any one of the organizations within this system, you will be referred to someone that can help you assess your unique situation and develop appropriate solutions.</p> <p>This integrated system is comprised of these organizations:</p> <p>Addictions Treatment Service Mackay Manor Pathways Alcohol & Drug Treatment Services Renfrew County Community Withdrawal Management Services Renfrew County Addiction Supportive Housing Program</p> <p>While these three groups share a similar focus, they each deliver unique programs, services and solutions. Download, single page program overview</p>
<p>Alcoholics Anonymous (AA)</p>	<p>(877) 746-7360</p>	<p>A.A. is a fellowship of people who share</p>

https://www.pembrokeaa.org/	webmaster@pembrokeaa.org	<p>their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.</p> <p>The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.</p>
<p>Narcotics Anonymous (NA)</p> <p>https://infodrugrehab.com/na-meetings-in-canada/na-meetings-ontario/na-meetings-in-pembroke/</p>	<p>For confirmation of the time, place and location of a Narcotics Anonymous Meeting, contact your Area Service Committee : Ontario Region of Narcotics Anonymous www.orscna.org</p> <p>Call us 1 877-909-3636 or get ONLINE CONSULTATION</p>	<p>Narcotics Anonymous (NA) is a nonprofit, international, community - based organization for recovering addicts. Narcotics Anonymous members learn from one another how to live drug-free and recover from the effects of addiction in their lives.</p> <p>Is Narcotics Anonymous for me? Anyone who wants to stop using drugs may become a member of Narcotics Anonymous. Membership is not limited to addicts using any particular drug. Those who feel they may have a problem with drugs, legal or illegal, including alcohol, are welcome in NA. Recovery in Narcotics Anonymous focuses on the problem of addiction, not on any particular drug.</p>
<p>988</p> <p>https://988.ca/</p>	<p>You can call or text: 988</p>	<p>If you are feeling like you have lost hope and are struggling to cope, if you are dealing with thoughts of suicide, or if you are worried about someone else, 9-8-8 is here for you. When you reach out, a trained responder will listen without judgement, provide support and understanding, and can tell you about resources that will help.</p> <p>9-8-8 is here to provide moments of connection that create hope, support recovery and save lives. We help people connect to their strengths and find new ways to cope, live and thrive. Our vision is a Canada where suicide is prevented because everyone can access help when they need it the most.</p>

Hope for Wellness Helpline https://www.hopeforwellness.ca/	Chat online: https://www.hopeforwellness.ca/ 1-855-242-3310	Whether you prefer to talk to someone on the phone or online, we're here to support you anytime. Hope for Wellness Helpline is available 24/7 to all Indigenous people across Canada.
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Entrepreneurship, Education, Employment and Training Services

Name	Contact Information	Description
Renfrew County District School Board - Indigenous Education Team https://www.rcdsb.on.ca/en/programs-and-learning/indigenous-education.aspx	420 Bell St, Pembroke, Ontario, K8A 2K5. 613-735-6858 ext. 312 Each Team Member's name, title, and email address is located here: https://sites.google.com/rcdsb.on.ca/indigenous-education/indigenous-education-team?authuser=0	The Indigenous Education Department is located at Fellowes High School (Room 312), 420 Bell St, Pembroke, Ontario, K8A 2K5.
TeKnoWave https://teknowave.ca/	Community Service Hub - 370 Catherine St. 1 343 633 4550	TeKnoWave Inc. is an Indigenous non-profit corporation headquartered in Ottawa. Established in 2000, we serve First Nations, Inuit and Métis populations in Canada. We oversee capacity-building programs that enhance Indigenous self-reliance through economic and community development, heritage and cultural awareness, talent development, adult education, employment, and entrepreneurial opportunities. For over 20 years, TeKnoWave has been delivering projects to bridge the skills gap, enhance employment prospects, and provide innovative and sustainable solutions to Indigenous communities' needs. Our projects cover a wide range of fields, including IT, healthcare, clean energy, business career development, employment awareness and skills training, industry certifications, and certificates. TeKnoWave

		has developed Indigenous Cultural Sensitivity Handbooks in collaboration with community partners and offered seminars and workshops.
Kagita Mikam https://kagitamikam.com/	P.O. Box 235 Shannonville, ON, K0K 3A0 Phone: 613-962-3103 Toll-Free: 1-800-862-5962 Fax: 613-962-6733	Kagita Mikam is committed to ensuring that pro-active measures are taken to improve the recruitment, training and employment of Aboriginal people. We help registered clients seeking training to meet their career goals by matching their training needs with qualified training organizations. Serving: Curve Lake FN, Hiawatha FN, Pikwakanagan FN, Tyendinaga FN, Wahta FN, Ottawa, Peterborough, Pembroke, Killaloe, Kingston and the Inuit Population

Legal / Justice Services

Name	Contact Information	Description
Renfrew County Legal Clinic https://www.renfrewlegalclinic.org/	613-432-8146 / 1-800-267-5871 101-236 Stewart St., Renfrew ON, K7V 1X7	Welcome to the website of Renfrew County Legal Clinic. We provide free legal services to low-income residents of Renfrew County and surrounding area.
Legal Aid Ontario www.legalaid.on.ca	1-800-668-8258	Legal Aid Ontario (LAO) will provide you with the services best suited to your legal matter. All our services are available in both English and French. To receive assistance, you must qualify financially, and your legal matter must be one that LAO covers. The type of service that works best for you will depend on your case and your financial situation. Please select from one of our services below: <ul style="list-style-type: none"> ● Certificates ● Duty counsel services ● Call centre

		<ul style="list-style-type: none"> • Live chat • Client portal • More information
ONWA	To request a Bail Letter, please download our Gladue Request Form and send it to the Program Coordinator at gladue@onwa.ca	Gladue First ever Gladue Program for Indigenous women by Indigenous women. Provides supports and services to ensure Indigenous women's voice is heard in the justice process.
Human Rights Legal Support Centre https://hrlsc.on.ca/homepage/	<p>Indigenous Services staff members can be reached by calling the HRLSC and following the prompts. You will need to press 4 to reach the Indigenous Service intake staff.</p> <p>Tel: (416) 597-4900</p> <p>Toll Free: 1-866-625-5179</p> <p>TTY: (416) 597-4903</p> <p>TTY Toll Free: 1-866 612-8627</p>	<p>The HRLSC is committed to providing Indigenous people with an accessible legal service. Services are provided in 140 languages including Cree, Oji-Cree, Mohawk, and Ojibway. Have someone who speaks English call us, or let us know at the start of your call, and we will arrange to speak with you in the language of your choice at no cost to you. If requested by you, you can talk to one of the HRLSC's Indigenous legal staff at any level.</p> <p>https://hrlsc.on.ca/indigenous-services/</p>

Transportation Supports

Name	Contact Information	Description
CAREFOR HEALTH & COMMUNITY SERVICES	Toll Free 1-877-358-1387	Non-urgent transportation services local or out-of-town medical or therapy

	<p>Office 613-732-9993 Fax 613-732-7350 infopembroke@carefor.ca Mailing Address Pembroke Civic Complex; 425 Cecelia St Pembroke, ON, K8A 1S7</p> <p>Alice Grenon, Manager of Community Support Services Email: agrenon@carefor.ca Phone: 613-732-9993x1118 Contact Carefor Transportation Intake Department Phone: 613-732-993x3212</p>	<p>appointments escorted transportation for individuals who require accompaniment for safety reasons door through door service: client is picked up at their door, taken to their appointment and brought back to their door wheelchair-accessible vehicle available Eligibility Individuals of all ages who cannot access public transportation due to disability * public transportation not available * or client does not have access to a vehicle.</p> <p>Children must be accompanied by an adult and must provide age appropriate car seat Application Process Contact office by website * telephone * fax or email * clients requested to book 48 hours in advance of appointment</p>

Appendix B: Indigenous Wellness Framework Roundtable Questions

<p>Physical creates purpose way of being/doing/wholeness</p> <p>→ What does wellness look like to you?</p>	<p>Mental creates meaning rational/intuition/understanding</p> <p>→ How does mental</p>
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<p>(consider 5 senses: what does it feel like? Sound like? Smell like? Taste like?)</p> <ul style="list-style-type: none"> → Where do you feel safe, brave, well/whole? → What places/spaces in your home community do you go for wellness? → What places/spaces do you/ others go to for help? 	<p>health/addictions/healing/wellness define who you are?</p> <ul style="list-style-type: none"> → Do you/others rely on self or others in your/their healing journey? → What would help you/others? → What would you like to see as treatment/wellness/healing options?
<p>Collective Question:</p> <ul style="list-style-type: none"> → Can you describe the connection between emotional, physical, mental and spiritual wellness? 	
<p>Emotional creates belonging family/community/relationships/attitude</p> <ul style="list-style-type: none"> → What is the community's attitude to mental health and addictions? → Are there people in your community that you/others rely on for emotional support? → Are there organizations in your community that you/others rely on for emotional support? → What cyclical or seasonal /changes do you experience? 	<p>Spiritual creates hope Values / belief / identity</p> <ul style="list-style-type: none"> → Do the current mental health and addictions supports in your home community and local community include any spiritual programming? → Do you think it's important to include spirit/culture in healing/wellness programming? Why? Why not? → What mental health/addictions programs/supports would bring hope to your community? →