

Native Addictions Council of Manitoba  
Annual Report  
April 1, 2014 – March 31, 2015

July 31, 2015

As of February 21, 2015, the Native Addictions Council of Manitoba (NACM) has been in existence for 43 years. Ever since its humble beginnings in February of 1972, the organization has contributed much to the health, wellness and stability of thousands of individuals, families, communities and to the First People of this land.

The NACM is mandated through a provincial bill (Bill 74) which was enacted in July of 1972. Much has been accomplished through our mandate and beyond. Although we have been mandated to provide counseling, treatment for addictions services, dissemination and education on addiction information, we have provided services not only provincially, but both nationally and sometimes, across borders.

The agency is proud of the culturally-based treatment and therapy that it continues to provide. Given its more than 40 year history, the agency was involved in culturally based healing practices long before it was generally accepted as the tool most suitable for First People's wellness. NACM's holistic approach to treatment has been effective for many who were stripped of the rich knowledge and practices of their cultural heritage. Ceremonies during treatment happen daily, weekly and more frequently during summer and fall as land-based activities are vital to our programs. There is now documentation being gathered to prove that "culture is vital for client healing and wellness." (2014-2015 National Native Addictions Partnership Foundation.)

Our agency has had Triple-P Parenting deliver their programs on site for several years. Lately we have begun to develop our own Traditional Parenting Program which will add to the cultural aspect of our holistic-based programs.

#### Finances

Our audited statements presented today gives us a Clear Opinion. The auditor states that it is the highest opinion that can be given to such a non-profit agency as ours. NACM is using our funding in the most responsible and effective way to help individuals recover.

#### Accreditation

NACM is an accredited organization that is overseen by Accreditation Canada. Much work continues throughout the year to maintain our accreditation status, currently from 2014 through 2018. We are proud

to report that we have been accredited since the year 2000. Our counseling staff are also certified through 3 main national certification organizations.

Some examples of recent work that have been submitted to Accreditation Canada are: revisions to our Workplace Violence Prevention Policy, amendments to our Medication Policy, a segment of our Infectious Disease Policy and additions to Client Safety Policies. Client Safety is and always has been a priority at the NACM. One only has to see our organizational structure that attests to “Client First” practices. Valuable work by the staff on a daily basis is paramount to our Client-Centered programs. All staff are involved in one of 4 committees that report to management biweekly or monthly. These committees are: the Health & Safety Committee, the Critical Incident Team, the Self-Care Committee and the Planning Committee. The Planning Committee’s responsibility is planning all extra activities that take place at the agency. NACM has a security company that comes in nightly for the safety of clients and to secure the premises. The agency is committed to the health, wellness and protection of the People it serves.

### Statistics

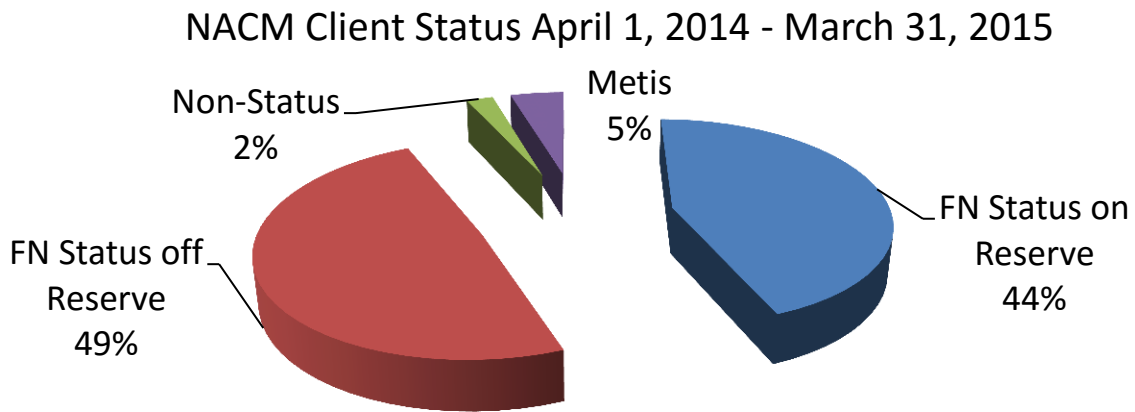
This past year we have had numerous issues with both reporting systems. We have the AMIS reporting system from FNIHB. We are still without concrete data since client data is not properly showing up on our quarterly reports. This is not for lack of training as several staff have taken training directly from an eCenter Research instructor who we hired. Staff from eCenter Research have tried to correct our client data on their end, but to no avail. We are in the process of manually changing client data in AMIS to make them appear on our quarterly reports. Currently, for the period April 1, 2014 to March 31, 2015, AMIS has 1411 applicants reported and 298 unreported. This does not include the 260 clients that HIFIS recorded during the same period. This number will later be revised as we correct the data.

The Provincial program, HIFIS (Homeless Individuals and Families Information System), currently reports that 260 clients were admitted into the Pritchard House program from April 1, 2014 through March 31, 2015. Out of the admitted, 57% were female and 43% were males.

### NACM Client Gender April 1, 2014 - March 31, 2015

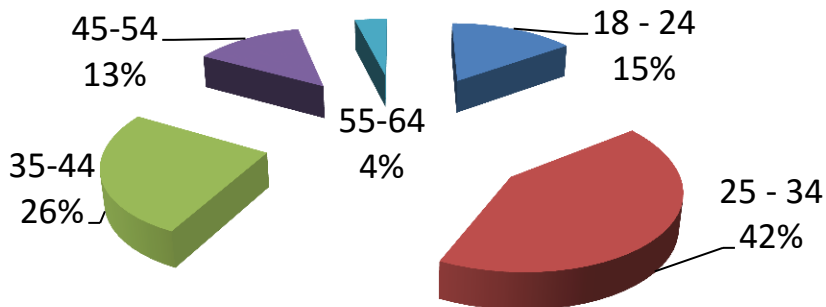


The stat profile is 49% First Nations Status living off reserve, 44% First Nations Status living on reserve 5% Metis and 2% non-status.



The age profile for residents of Pritchard House was as follows:

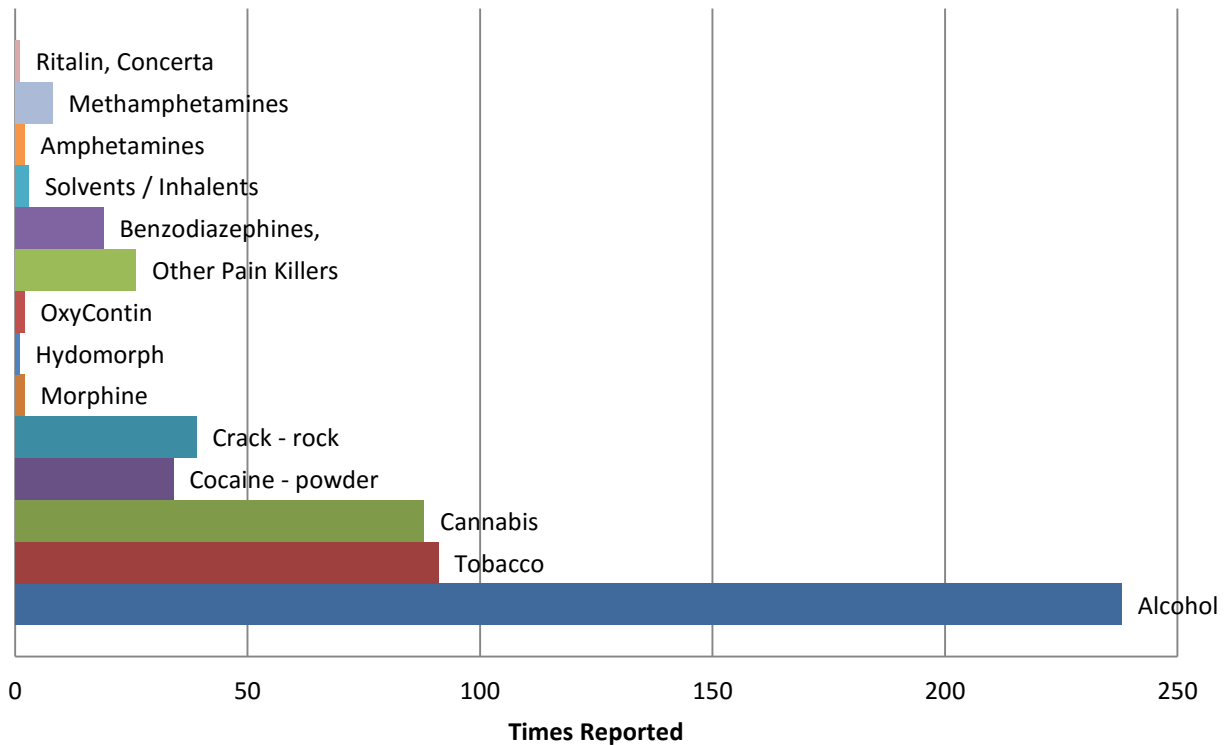
### NACM Client Age Profile April 1, 2014 - March 31, 2015



As can be noted, at 42% was the largest group was between the ages 25 to 34 years old. The second largest group is the 35 to 44 age group at 26%.

Substances most frequently reported are in the following graph:

## NACM Reported Substance Abused April 1, 2014 - March 31, 2015



Alcohol is still the highest on the scale with Tobacco and Cannabis being second. The third most reported drug used is Crack / Rock and Cocaine next is 4<sup>th</sup>. Prescription drugs on the graph are not readily reported since they are often prescribed to individuals who do not see them as problematic.

### Networking and Community Involvement

On the provincial level, NACM is involved with the Provincial Addictions Agency Network. For several years, we have been part of a committee that has worked on a centralized intake process for like-funded agencies. Through this endeavor, we have met with the Deputy Minister of Health on a number of occasions and recently the Minister of Healthy Living and Seniors.

Federally, NACM is part of a national network, the National Native Addictions Partnership Foundation, which involves all First Nations NNASAP treatment centres, workers and Youth Solvent Abuse Programs (YSAP).

Locally we partner with many local groups such as Mount Carmel Clinic, Triple-P Parenting, the Homelessness Initiative and previously Thunderbird House. Our involvement with other agencies has

opened the doors with opportunities for our program users to go back to school, enter a trade, start a business or find employment. Our annual Health Fair also allows us to start or renew partnerships with relevant agencies that assist in the well-being of clients, staff and others.

There are a number of Community events that are offered through NACM:

- Addictions Awareness Week in November
- Annual Health Fair in May
- Annual Walk for Sobriety in September

## Achievements and Initiatives

These are but a few of the accomplishments / work during the past year:

- Accreditation through Accreditation Canada from 2014 – 2018
- Medical Clinic (partnering with Mount Carmel Clinic)
- Addictions Awareness Week (sponsored by NACM)
- Culturally Relevant Parenting Programming
- Renewed 4 policies for Client Safety
- Certification for counselors as Addictions Specialists
- Improvements to existing program and new initiatives such as traditional parenting program
- Renewed Mission Statement
- Craft Classes for program users
- Language classes each day prior to group

## Concerns and Challenges

Our organization still experiences challenges involving our operations. There are not only unexpected expenses to our budget but we are sometimes also impeded in delivery of programs. Some of these to be mentioned are:

- Security concerns (24 hour security is required)
- More staff and wage parity
- Land base for cultural activities and therapy
- Need for a new(er) facility
- More family treatment
- Youth programs are needed
- More prevention work is necessary
- Mental Health Therapists are unavailable

## Conclusion

With all the challenges that may occur at an addictions treatment facility, it is still a pleasure to see the growth in people. Many individuals do recover and become models of success for others. We are forever grateful to be a small part of their recovery. Thank you to all who have taken part in our programs.

Thank you to the dedicated staff who have helped many of our people in recovery. And thanks to the Board of Directors who volunteer to promote the Vision and Mission of the Native Addictions Council of Manitoba. Finally, many thanks to both our funders for their support in our continued efforts in promoting wellness and sobriety among First Peoples.

Submitted by

Bertha Fontaine  
Executive Director

July 31, 2015