

# First Nation and Inuit Youth in treatment

## Listen to our story.....



### LIFE

Life is harder than anyone thinks it is.  
That is why some of us choose sniffing,  
Because sniffing is an easy way out.  
They have been brainwashed or something

Life is not so hard,  
You just have to have faith in yourself  
And face everyday challenges honestly.  
I've thought that out over my twelve years of existence  
I've been in and through tough places  
And I seem to try and make them work out.  
That is why I wrote this letter.  
To let you know guys know that life is not so hard after all.  
That is why I am still here today,  
I got a whole lot of life ahead of me, so enjoy yours.

D. 12 years, White Buffalo Treatment Centre



# Acknowledgments

The art work in this presentation is drawn by a young girl who was a resident at a YSAC centre. A is 14 years old. She graduated December , 2009.

The data was analyzed by an independent data analysis firm, Carina Fiedeldey-Van Dijk of ePsy consultancy, using the current YSAC data base.

What follows is the story of Emily. She has a name to make her real, more than a statistic. She represents a combination of 267 youth who have at one time been residents of one of the national YSAC centres. Their information is captured in a national data base, that covers intake, treatment, and follow up.

# Meet Emily

Hi, my name is Emily. This is not my real name of course, but using this name helps me to tell the life story that I share with so many others here at YSAC. I am simply going to tell it as it is for me and the other youth who attend YSAC centres.

Many of us come from First Nations and Inuit communities with limited economic opportunities, where solvent abuse is also most prevalent. Most of us speak English, along with one of several Native languages. Some of us do not speak a Native language anymore, but can still understand it when Elders speak to us. This is the story of me and my friends in YSAC treatment.



# Our Families

Virtually all of us (95.87%) have siblings. Most of our siblings are in good health, but at the time they took us into YSAC, 16.10% of us admitted that one or more of them are also using solvents, alcohol or drugs, or that they have other issues. A quarter of us (25.31%) are not saying. Between the 121 (74.69%) of us who talked at intake, we share 317 siblings – roughly three brothers and/or sisters, apart from ourselves.

Family for three-quarters of us is fragmented or absent. Our Mom alone tries to keep siblings together more than six times more often than our Dad alone does. Compared to our siblings, more of us live with Dad alone. About a third of us live with extended family or foster care before our intake into the YSAC program.

# Living Arrangements

<b>Living Arrangement</b>	<b>Average Percentage of our Siblings (varying age)</b>	<b>Percentage of Us in the Program</b>
With Mom only	30.60 %	30.43 %
With Mom and Dad	25.24 %	22.46 %
With extended family	14.83 %	20.29 %
Alone	11.04 %	1.45 %
With foster care	7.57 %	13.77 %
With Dad	4.73 %	8.70 %
With siblings	1.58 %	2.90 %
With friends	1.26 %	0.00 %

N= 267

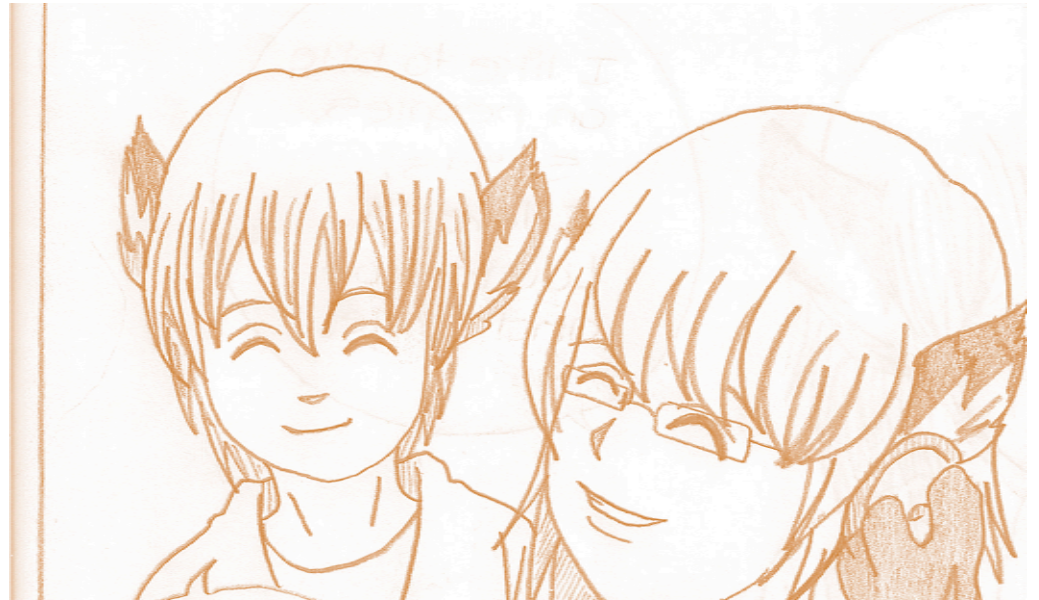
# What it means.. In the long run

Indications are that **those of us who get along with our family, also have about a 16% higher likelihood of completing the program.** Stated otherwise, those who complete the program, have about a 16% better chance to fall back onto family members with whom they get along fine. This is important, because having social supports is a very important resiliency building characteristic.

# Our other supports

The details listed above show that often **our closest relationship is with a single person within our family.** This reveals the scope and strength of our strongest support group. Our non-reliance on friends at our age level is conspicuous – 14.17% of us have no close friends. Furthermore, the availability of friends does not make a significant difference in us completing the YSAC program or not.

These facts give even more reason that whatever the cause or circumstance, the bond with (extended) family is extremely important to us, **especially at the sibling level.**





# Our Elders

Apart from our immediate family, other support people that are important in our lives are our extended family, especially our grandmother, and more so the NNADAP or similar workers for those of us who drop out. However, 36.75% of us do not talk to elders even though many of us (82.69%) have an elder who is willing to listen. (Again, 27.78% of us are not saying.)



# School

Our average age at intake lies around 15 years. (This is when most privileged teenagers in Canada are in grade 10, participating in extracurricular activities and beginning to think about tertiary education.) At least 36.51% of us did not go to school a while before the program . This percentage is regardless of whether we complete the program or not.

About half of us like school, the other half not. Between us we have a wide range of grades completed, from grade 3 to grade 12, with most of us having completed either grade 7, 8, or 9. Given our average age of 15 years and the expectation that we should be in grade 10 by now, many of us have fallen behind somewhat. In addition, 16.22% of us have no school grade completed. On average, **those who successfully complete the program tend to have higher grades also.**

During the first follow-up visit, 69.44% of us **attend school** every day or almost every day. This situation improves strongly from the second visit onwards: after three months 95.45% of the youth attend regularly.

# Our Spiritual beliefs

The YSAC program places considerable emphasis on Traditional and Spiritual beliefs. In reality, when we enter the program our religious beliefs are categorized between traditional (40.18%), Roman Catholic (25.89%) and what we group under 'other' (27.68%). (Only 6.25% of us are protestant.)

	<b>Traditional</b>	<b>Roman Catholic</b>	<b>Protestant</b>	<b>Other</b>
<b>Non Completers</b>	39.73 %	23.29%	1.37 %	35.62 %
<b>Completers</b>	41.03 %	30.77 %	15.38 %	12.82 %
<b>Overall</b>	40.18 %	25.89 %	6.25 %	27.68 %

# Medical Challenges

- At least 20% of us report on medical problems of some sort, with 17.74% of us taking medication. The types of medical problems we experience are wide-ranging and similar to what teenagers report in general, although ADHD (hyperactivity) and anxiety seem to stand out somewhat from the list. In addition, at least 22.58% of us suffer from allergies. However, these conditions do not affect our completion of the program.

# A close look at our addictions

The age we started sniffing differs significantly ( $p = 0.050$ ), depending on whether we completed. Non completers started at age 11.50, while on average those who stayed in the program started when they were one year older, at age 12.45. Age differences for using or abusing alcohol and other drugs were closely similar to that reported below:

# We are using more than solvents...

Method Type	Percentage <i>Not</i> Responded ##	Average Percentage Use	Average Age Started (in years)	Impact on Program Completion
Alcohol, sniffing, drugs	52.47 %	<b>51.95 %</b>	11.89 – sniffing 12.50 – alcohol 12.27 – other drugs	17 %, p = 0.155
<b>Solvents substances</b>	or 72.22 %	<b>95.56 %</b>		6 %

In summary, **almost all of us are chronic users of one or more solvents and addicted to it, and about half of us are involved in alcohol, sniffing and drugs as well.** (We shall call this relation of occurrence upon intake at YSAC a *1:2 temptation*.) On average, our habits resulting in abuse started around age 12, usually with sniffing.

# How and When we use

Use or abuse of solvents and substances is largely social – 79.55% of us do it with others as opposed to 20.45% who do it alone. (A large number of us (45.68%) of us do not provide details about where we would sniff or huff.) However, those of us who complete the program do it 13% more alone; the habit and joy to do it with others bring added pressure to leave the YSAC program before we are completed.

# Interesting...

Those of us who sniff in discreet places, actually have the best chance of success in treatment. Why might that be?



It may be a sign the family/community has not accepted sniffing as a given, and they are still doing everything possible to stop us!

These same families are a great source of support in treatment and when we return home!

# Death is all around us...

In our young lives 25.96% of us have already lost a friend due to sniffing and huffing. Some of us have lost more than one family member due to suicide. In addition, 49.59% of us have spoken or written – not just thought – about killing ourselves, and more serious, 45.00% of us have actually tried, on average, 3.02 times

# We are sad...

- In asking about specifics, 58.04% of us feel sad or unhappy at intake, while 64.60% of us admit to be frequently on our own whenever we are depressed or unhappy. (This may have increased our chances to possibly have attempted suicide, or perhaps do so in the future once (unsuccessfully) out of the program again). Some of us seriously question our own self-worth as well.
- Out of those of us who say we feel sad or unhappy at intake, 21.57% of us actually feel like this most, or all of the time. Adding to this, **those who feel sad or unhappy at intake has a notably higher chance – about 17% – of not completing the YSAC program than those who stay until the end** ( $p = 0.084$ ,  $LR = 1.47$ ), meaning that having signs of depression has an *inverse* impact on the success of the YSAC program.

# Abuse

At intake, 67.28% of us talked about our first-hand experiences with different forms of abuse. Some of us admit to sexual assault or abuse and in some cases rape by our Dad, or another male extended family member or even strangers. This may have started when we were as young as four years. The physical abuse comes mostly from Dad or an older brother, or bullying by peers. In short, members in many of our families, male and female, will abuse by the means they can: we are very familiar with emotional abuse, including threats, neglect and abandonment, too. Mostly we do not report the abuse, or talk about the details much.



# Our trouble with the law

- More than half of us (54.74%) have had trouble with the law before. These may include charges or tickets for underage drinking, possession of drugs, breaking-and-entering, stealing, vandalizing, assault, and playing with explosives.
- As for current troubles about current troubles – at least 25.23% of us are on probation or court order at the time of intake. Neither past, nor present legal issues make a noticeable difference to whether we will complete the YSAC program or not.



# What else we are dealing with..

- Something that may sometimes cause us to leave treatment early , is when we have acknowledged medical, physical, psychological and/or emotional problems as a direct result of our use – **43.27% of us admit to having (had) these at intake.** They include a wide range, including cravings, guilt, shame, anger, loss of motivation, emotionality, insomnia, fatigue, anxiety, hyperactivity, attention span issues, withdrawal, heart races, seizures, weight loss, Fetal Alcohol Syndrome (FAS), paranoia, schizophrenia, memory loss or possible brain damage, suicide ideation, etc.

# What we want from treatment...

- Better management and outlets of our emotions, specifically anger and conflict, power and control
- Dealing with feelings of abandonment and rejection, with resulting low self-esteem and sadness
- Learning how to give and receive respect and trust
- Self-expression and communication skills
- Learning about commitment and motivation, and dealing with peer pressure
- Family therapy and family relationships
- Relapse prevention.



# Community workers should know..

**23.81% of us are not aware of the effects of solvent and substance abuse at intake,** as this makes a significant difference in that **25% more of us not finishing the program** ( $p = 0.047$ ,  $LR = 1.99$ ).

It is an encouraging sign that the awareness figure increases to 84.91% for our family members. However again, still 15.09% of our family is not aware of the negative effects of solvent and substance abuse either. This occurrence, which jumps to 25.00% among those of us who leave early, has a highly significant *inverse* impact on our success with the program ( $p = 0.001$ ). About **23% more of us complete the YSAC program and stay sober and clean if our support from extended family is backed by proper knowledge** on the effects of solvent and substance abuse ( $LR = 4.76$ ).

Doing the math, annual intake of 200-300 of us means that **reaching thousands of people from our direct community network each year can benefit from having access to the same facts we receive at YSAC on this topic of awareness.** It is interesting (and rather shocking) to hear that 4.12% of us say that our community worker also is not aware of the effect of solvent or substance use and abuse.



# Transition Home is hard...

- Only half 50.77 % feel we have a safe, caring home that meets our needs to return to.
- 22.56% of us still admit not to know at exit successfully how, or where to find someone to talk to when there is a problem.
- less than half (42.42%) of us feel very close to their live-ins, cared for and important.
- Half of us (49.62%) live a clean lifestyle in the 90 days upon exit from the YSAC program. (This percentage may be influenced by the length of the specific program we are enrolled in.) Correspondingly, half of us (51.13%) said we never have the urge to use solvents and/or substances during the same time period. Resisting the urge and/or using solvents or substances occur monthly on an average frequency, albeit this varies widely among us.

# What we look forward to after treatment...

By comparison, what we look forward to when completing the YSAC program in a nutshell is just **try being together as a family and going out, doing something**. Many of our families are broken and uninvolved on a personal level, yet that is what we want most. We want family nights with cookouts or barbeques. We want to take a holiday together, picnic and travel, and at home eat meals together, play cards or ball, listen to music, watch television, drum, dance and celebrate birthdays.

We like to go to Pow-Wows, church for some of us, or the movies. Outdoors we want to go for walks together, camp and fish. We also want to do some traditional things like cutting meat and wood together, smoking fish, hunting, searching for beaver hides, sewing and beading. We also like to help with community activities. We plan to return to school, try to find new friends, talk to workers and have a clean lifestyle. One day, we want to feel cared for.

# Translating these stats to the future..

The highest majority who reported a close family relationship, reported it was with a sibling, This means siblings have influence and may be an untapped resource for prevention and early intervention initiatives.

Delaying entry ( even by one year) has a significant impact on whether or not youth successfully complete the program or stay drug free. Earlier prevention programs and diversion ( sport, rec) are indicated. It takes an average of 2.10 years to progress from first use to chronic use/abuse or addiction.

# How does this data match the Regional needs assessments?

- Increase community awareness and education about the affects and social determinants of drugs, alcohol and services on youth. Involve community in developing solutions (Alberta)
- Provide youth with leadership training opportunities (Alberta, SK)
- Facilitate relationships between Elders and youth, to share knowledge and history and culture ( Alberta, SK)
- Services for addictions other than solvents ( Ontario).
- Dedicated transition home in every community to assist with transition from treatment to home (Ontario).