

7/29/2008

NATIONAL
ADDICTIONS
ADVISORY
PANEL

COMMUNICATIONS STRATEGY

Building a Comprehensive Evidence Base

National Native Alcohol and Drug Abuse Program

First Nations Addictions Advisory Panel

Communication Strategy

Introduction

The National Native Alcohol and Drug Abuse Program (NNADAP) was established in 1982 by the First Nations and Inuit Health Branch (FNIHB) of Health Canada. Together with the YSAP established in 1996, there is a combined budget of \$70M annually. There are 60 treatment programs (in-patient & outpatient), over 550 community-based prevention programs, nearly 1,100 treatment counselors and community-based prevention workers, and 8 Prescription Drug Abuse Prevention pilot projects.

There is much strength and many challenges confronting NNADAP. Many First Nations and Inuit People have found their sobriety or some level of a healthy lifestyle through this national program. However, from an overall systems perspective, challenges appear to be throughout. The Addictions Evidence-Base process, of which the Addictions Advisory Panel is a key component, represents a timely and important opportunity for First Nations and their partners to consider how best to renew NNADAP over the next five to ten years. The First Nations Addictions Advisory Panel is not planning for Inuit Peoples who are engaged in a separate process.

This is a time of change which is focused on strengthening and revitalizing the addictions system so as to improve the overall quality and ensure better outcomes for First Nations people seeking help for addictions. There are a number of stakeholders who have various roles and responsibilities in relation to providing addictions services for First Nations Peoples. Positive stakeholder relations through change will evolve from a well-planned and properly implemented communications strategy. A successful communications strategy will enhance stakeholder relations by increasing awareness, understanding, support and building consensus towards recommendations aimed at strengthening and revitalizing NNADAP and YSAP. The primary role of the communications strategy is to work in conjunction with the Addictions Advisory Panel who has a primary role in coordination of the Evidence Base process.

This communications strategy outlines a number of ways in which the First Nations Addictions Advisory Panel will endeavor to connect with the NNADAP / YSAP field, and their networks and partnerships so as to ensure engagement in a meaningful dialogue on how best to strengthen and renew NNADAP / YSAP.

Context of the Communication Strategy

The Evidence Base process will provide a collaborative and therefore comprehensive foundation for managing future investments that will support the strengthening and renewal of NNADAP / YSAP . Under Canada's National Anti-Drug Strategy, the Government of Canada will invest an additional \$30.5 million over five years in addiction services for First Nations and Inuit, and \$9.1 million on-going afterwards, to:

- **Increase service effectiveness** - by aligning services with emerging needs and the best evidence available;
- **Serve more people** - through new investments in outreach, outpatient and innovative approaches such as mental wellness teams; and
- **Improve service quality** – by achieving national and international standards through accredited centres, certified counsellors, and modern facilities.

The National Native Addictions Partnership Foundation, the Assembly of First Nations and First Nations Inuit Health of Health Canada are working together to effectively plan to manage this investment. The Addictions Advisory Panel has been established to aid in this process. As such the panel has engaged in a process to determine the Addictions Evidence-Base by which current programming is delivered and to plan for ways to integrate emerging evidence in order to strengthen and revitalize addictions services. The Regional Needs Assessments is fundamental source for exploring the current evidence base within the addictions programs and services for First Nations.

This communication strategy is developed with care to ensure that there is engagement from the field of NNADAP/YSAP throughout the process to build collaboration and ensure that researchers or practitioners do not substitute themselves for the competent local technical services.

Scope

This communication strategy outlines the key stakeholders who will be engaged in ongoing dialogue through various mediums, such as, Regional Needs Assessments, print material, electronic mediums such as web postings, blog discussions, electronic questionnaires focused on feedback on communication processes, and face to face dialogue whenever possible such as key informant interviews or focus group discussions. The communication strategy is designed to parallel the timeline of the activities of the Addictions Advisory Panel, from August 2008 to September 2009.

The vision and values of the Addictions Advisory Panel will also serve to guide this communications strategy.

Vision

Guided by the Addictions Advisory Panel, NNADAP will be renewed to meet the current and future needs of First Nations and Inuit communities to effectively serve clients, and reduce and prevent addictions.

Values

Integrity: the outcomes of the First Nations Addictions Advisory Panel will be morally sound within the context of an Indigenous World View

Respect: value for traditional Indigenous knowledge and western knowledge shall be respected as relevant and appropriate evidence for the renewal of NNADAP

Collaboration: consultation and communication with the NNADAP field must be consistent and balanced with the work of the First Nations Addictions Advisory Panel so as to facilitate collaborative implementation of the renewed NNADAP system.

Choice: the work of the First Nations Addictions Advisory Panel shall nurture choice towards a renewed NNADAP system that honors inherent strengths while identifying the best available evidence and informed practices.

Goals of the Communication Strategy

1. Create Awareness and Engagement in the Evidence Base initiatives
2. A Comprehensive Evidence Base for strengthening and revitalizing the quality of addictions programs and services for First Nations peoples.
3. Build a foundation for establishing support / consensus for recommendations to strengthen and revitalize NNADAP/YSAP.

Communication Strategy Objectives

1. **Participation and collaboration** through formal and informal processes such as: focus groups, key informant interviews, blogs, surveys which are both planned and based on need.
2. **Transparency and Accountability** through sharing information, background papers, presentations and other information of the Addictions Advisory Panel through web posting and ensuring linkages from key web sites (AFN, regional working groups, CCSA)
3. **To ensure engagement** from the field of NNADAP /YSAP and their networks in formulating evidence based recommendations for the renewal of NNADAP.

4. **To facilitate clear expectations** for change within NNADAP / YSAP and while managing potential challenges of a consensus building process.

A discussion of these objectives is presented later within this strategy and takes into consideration likely responses from the field regarding a “strengthening and revitalization of NNADAP / YSAP” and provides a rationale for undertaking certain strategies. The emphasis is on being “proactive” and creating consistent engagement to ensure that the recommendations are based upon good evidence, and most importantly, the voice of the field.

Targeted Audience

Since the stakeholder group of NNADAP / YSAP program is nationally representative it is important to produce a communication strategy that ensures information that is disseminated efficiently and comprehensively to everyone and it will be important to ensure that communication messages are disseminated to tell everyone at the same time. However, following this up with individual interviews with key stakeholders to attend to region specific needs will be just as important. This process helps to recognize and appropriately address regional/stakeholder group perceptions and understanding, especially for individuals who hold key leadership positions.

Key Stakeholders of this process are: (communication environment: target audience, current perceptions, perception of the current state of the field, communication to date – stakeholder needs)

1. Recipients of and participants in the NNADAP / YSAP program
2. NNADAP / YSAP workers – community based prevention & intervention as well as treatment centre based
3. NNADAP / YSAP Boards of Directors of Treatment Centres / Chief and Councils or Health Directors , Community Health Committee’s
4. NNADAP / YSAP Regional Working Groups / Committee’s, including Treatment Director Committee’s
5. Regional Health Technicians / Health Committee’s of the regional Chiefs/Political Structure
6. AFN’s Health Technicians Committee
7. First Nations Inuit Health – Regional Addictions Consultants, HQ Addictions & Mental Health Team
8. Mental Wellness Advisory Committee – to provide ongoing updates on the progress and to support efforts of MWAC through the renewal process whenever possible.

Key Themes & Messages

1. A primary source of evidence is the Regional Needs Assessment
2. Recommendations to strengthen and renew NNADAP / YSAP must be grounded in the voice of the field of addictions and their significant partners
3. The “Addictions Advisory Panel” is a **contributor** to the development of a renewed

- national NNADAP framework
4. Participants of this process are collaboratively building a comprehensive evidence base so that we can collectively ensure the provision of culturally-appropriate and effective addictions services to First Nations in the coming years.
 5. The “renewal of NNADAP” intends to honour the past while using courage to change for the future.

Communication Principles

The following communication principles are outlined here to provide further guidance to managing the communication strategy. The principles outlined provide further expression of values and objectives.

Principle	Reason
Credibility	Without a credible communication approach, stakeholders will simply not believe in the proposed recommendations. This means applying the principles of OCAP through the use and sharing of information that comes from the field.
To involve, not just inform	Promotes ownership of the process and a feeling of being a necessary part of the process
Visible management support	Active management commitment gives credibility to communication; the task of managing the strategy must be perceived as supportive. Information needs to be regularly updated, blog discussions have to be visibly managed, and most importantly where ever stakeholders share information we must ensure that they receive the collective voice back by whatever medium or means is most effective. (print, email, web posting, news release, etc.)
Face-to-face communication	This is the one of the most concrete ways of demonstrating participation and involvement; communication is two-way and provides a feedback mechanism. This principle can only be employed on a very small scale given the scope of the stakeholder groups. This principle will be applied key informant interviews and focus group discussions whenever necessary.
To avoid information overload	Too much information leads to confusion and irritation. Accurate and timely information is key.
Consistent messages	Inconsistency loses credibility in the program. Without consistency, audiences are confused and frustrated about what

	to expect.
To repeat messages and vary mechanisms	The more ways a message can be communicated, the more likely it is to be internalized. Using different mechanisms ensures repetition without individuals disengaging.
To create demand: encourage stakeholders to pull for information, rather than the Addictions Advisory Panel pushing it at them	Receiving requests for presentations, attendance at Regional Addictions Committee`s, and through stakeholder participation in blog discussions (specifically in honouring people and program strengths) all will ensure some degree of buy-in or support for change.
Tailor communication to stakeholder needs: give information that they want, not just what we want to tell	Information has to be "real" to the stakeholder groups. They will be more likely to listen if the information is pertinent to their current frame of reference.
Central co-ordination	Ensures consistent approach.
Manage expectations	Encourages stakeholders to believe in what we communicate. Being prepared and anticipating challenges demonstrates an understanding of stakeholder needs.
Listen and act on feedback	Encourages support by being responsive to the needs of the stakeholders. Ensures that the communication approach meets the needs of the stakeholders and as they may change from time to time.

Strategic Communications Considerations

A. External factors:

1. Relations

- not all regions are participating in the regional needs assessment process but this does not mean that they will not be part of the evidence base process, including communications
- the relationship and organizational structures within regions differ between the Regional Addictions Committee`s and the PTO`s and or regional political committees on health and health technicians. This process does require, facilitate or monitor these relationships. This communication strategy promotes communication across all stakeholder groups.

2. Approach

- Proactive vs. reactive – a majority of communication will be sharing information from

the Addictions Advisory Committee to the field. However, where a need arises for a key informant interview or focus group meeting to address concerns face to face then this approach will be employed to ensure clarity and commitment to honoring the values and objectives of this strategy

- National vs. regional – while regional differences and uniqueness are acknowledged, this communication strategy seeks to speak nationally first and regionally secondarily. With the exception for French language translation.
- Standard message vs. tailored messages to specific stakeholders – each stakeholder group has different needs because they're role differ in this process. Standard messages will speak to national interests, on broad information items. Tailored messages to specific stakeholders will be developed upon request or identified need.
- Sequencing of communication – various means and mediums of communication will occur simultaneously. The Secretariat and Co-Chairs will review all information before it's released. In managing the communication strategy, every effort will be made to tie communication objectives with other possible events so as to enhance the opportunity for engagement.
- channels of communication are: hard copy, electronic, face to face and events such as: presentations, one on one discussions, group meetings – for example including the evidence base process on all regional working group agendas so that there is an ongoing discussion, NNAPF newsletter, electronic bulletin board on NNAPF website – to notify of new documents posted, feedback forms on website tied to draw for promotional items, email, website
- Horizontal communication will be coordinated through the partner organizations, AFN, NNAPF and FNIH through the secretariat through monthly conference calls amongst the partners and co-chairs and secretariat. This will allows time for planning for communication in any publications or events of the AFN, NNAPF and FNIH that are linked to or provide an opportunity to facilitate communication about the Evidence Base Process.

Discussion of Communication Objectives

1. Participation and Collaboration

It will be important to meet general needs common to all stakeholder groups and that is primarily that they are included in the process in a meaningful way. This will require that stakeholder groups have choice for participation and collaboration. It will also be important to track participation rates and to actively demonstrate how the process is collaborative, that is, to communicate how the input from the field is being used in the evidence based process and to acknowledge the contributions so that stake holders have some sense that their contribution is meaningful.

It will be important to monitor throughout the process the potential misperception that the communication strategy is an invitation to participate and collaborate in a process to make decisions about funding, etc. so that we can effectively clarify expectations. In this regard, clearly communicating that the process is not one of “making decisions” but rather that communication is a vehicle to facilitate transparency and to build recommendations that are grounded in the voice of the stakeholders. Another key message in the process is to reinforce that the “Regional Needs Assessments” are the core of the evidence based process. As such the regional needs assessment results will form a great degree of participation and collaboration from the stakeholders and will therefore be the foundation for establishing recommendations.

It will also be important to ensure that a key and consistent message is that the “Advisory Panel” is mandated to make recommendations which will go back to the field for their feedback. If the communication strategy is well deployed, that is open, consistent and collaborative, then, the final recommendations should not pose any fundamental surprise to the stakeholder groups.

The Regional Needs Assessments, findings through the Gap Papers, blog discussion, and where necessary key stakeholder interviews and/or focus groups will ensure that stakeholder opinion and knowledge is included in the formation of the final recommendations. Likewise, the stakeholder feedback in relation to the results of these strategies will necessarily go back to the stakeholder groups through identified communication channels to ensure that there is continuous cycle of 360 degree communication.

Communication Strategy for Participation and Collaboration

- a. Regional Needs Assessment results will be analyzed for common themes and synthesized into a national picture. This national picture of overall needs will also be made available to each region.
- b. Introductory materials, such as “communication briefings” which introduce the project and communicate key messages in line with the values of the advisory committee are important first steps to initiate awareness, peak interest and facilitate engagement.
- c. Advisory Panel meeting minutes and background material such as reference documents, commissioned papers, and presentations and should be posted on the NNAPF web site with the aforementioned links from other stakeholder sites. This facilitates transparency in sharing information that is shaping the discussion and move towards renewal.
- d. Blog, Discussion can be set up to seek opinions and comments on the draft recommendations with comments organized specific to each recommendation – this can also be set up to be time limited and the commenter can have an option for self identifying or to be anonymous. This methodology would depend upon accurate data bases for each stakeholder group so that notification and invitation to participate through email and mail are received. Access to the blog could also occur from a web page.

- e. Focus Group Discussion with the Regional Working Groups would be a key strategy for communicating the development of the recommendations and for getting feedback on the draft recommendations.

2. Transparency and Accountability

- A. Sharing information in an open manner with honest facts will build accountability and ensure transparency. It will be important to ensure that the information does not communicate overoptimistic speculation. This means meeting the expectation and need for openness in the process, but in a way that does not set unrealistic expectations.

Overtime, there has been much effort put into strengthening NNADAP. However, there are varying perceptions of how much effort is enough and a certain level of skepticism has developed about what change will mean for NNADAP. Some of the wondering in the field about how NNADAP will change through renewal and strengthening have lead to some of the following comments. It's important to be aware of these perceptions and questions because they have the potential to become barriers to building engagement and consensus throughout the Evidence Base process.

1. There has been little change since the 1998 NNADAP Review, how will this be different.
2. This process will lead to the elimination of NNADAP workers who are being or will be replaced by mental health
3. There is no recognition of the accomplishments made thus far by NNADAP or how it has consistently grown
4. The evidence base or research is not our way of doing things, what about culture.

Communication Strategy for Accountability and Transparency

A. Gap Papers

The Gap Papers on key topics are a significant way to communicate with the key stakeholders that the Addictions Advisory Panel is aware of these perceptions and that they are being reviewed. This is not to say that the Gap papers are being commissioned to specifically address these perceptions but they will at the very least communicate awareness in the subject matter so as to create a good foundation for discussion in drafting recommendations. These papers will be posted on the web for stakeholder access. Specifically some of these papers will speak to the following subject areas:

- a. NNADAP History (prior to and Actions since the 1998 NNADAP Review)
- b. Integration of Mental Health and Addictions
- c. NNADAP Best Practices
- d. Culture and Addictions
- e. Prevention

B. Web Page Linkages & Blog Discussion

Posting these papers on the NNAPF web site which will have dedicated space designed to facilitate communication specific to the Evidence Base process. Links from key stakeholder web sites such as, AFN, Regional Working Groups, Regional First Nation Political Web Pages and the Canadian Centre on Substance Abuse will be important.

Blog Discussion with specific questions to solicit opinions and various perspectives on the papers will also elicit a broader perspective on the application of such subject matters within the field. The discussion from the blog may have to have data analysis capacity behind it in order to synthesize the blog discussion into meaningful themes and to make them useful for structuring recommendations. The data analysis capacity is dependent upon the volume of the blog discussion.

3. Ensuring Engagement

Engaging people in this process of renewal and strengthening requires understanding, ownership, and motivation which can be facilitated in two ways:

Clarifying Expectations about funding, limitations within the system, why people should participate in the process, short and long term outcomes of the process, and expected changes to the existing system and programs will be important messaging throughout communications strategies.

Honoring Strengths of Programs and People: through the blog discussion the field will have an opportunity to share their own stories of strengths of programs and people working within the NNADAP/YSAP system. The NNDAP story book captured the stories of individuals who were participants in treatment. This blog discussion would complement the Regional Needs Assessments by providing an opportunity that may not have had their perspective recorded in the assessment. This is also a way to capture perceptions on what practices the people in the field find to be meaningful in their work.

To honor the significance of the Evidence Base Process it is important to recognize that people need time to process information and express their opinion or perspective, ask questions and to have support for their own decision making processes. Support through discussions specific to key stakeholder groups as required and providing reports of their solicited feedback says that “we’re listening”. Listening and validating others are key requirements for engaging people in participating positively towards change.

Communication Strategy for Ensuring Engagement

- a. Use direct communications as much as possible, that is through the use of existing Data Bases at NNAPF and AFN send communication directly to stakeholders via email and mail.

- b. Asking stakeholders what they want to ensure is “kept” and what they could see “go” in NNADAP / YSAP will be good for understanding people’s expectations. Examples may include gender based services, community versus treatment specific services, substance / addiction specific services, treatment methodology, etc. Being aware of people’s expectations will help to ensure that the advisory committee is aware of and can plan to address potential challenges. This can be a component of the blog discussion or may include key stakeholder interviews wherever possible. A significant stakeholder group throughout the process will be the Regional Working Groups. While the needs assessment process will address these same topics, the communication strategies can be a complimentary source of information.
- c. It will be important to develop key messaging around what is “evidence base” as there is perception that this means something outside of that which already exists within prevention and treatment or something outside the culture – which could develop into a perception that the current program has to be completely replaced by something else. It will be important to communicate that this may be the case in certain instances while may not be in others. Essentially it will be important to communicate that programs, prevention and treatment must be clear about their methodology and theoretical approach whether this is western or native based and that clear ways of measuring the impact of these services will be a developmental process.
- d. It will be important to communicate how the evidence based process is considering linkages with the National Framework for Action or how we can benefit from linking with the strategies under the National Framework for Action. Specifically the National Treatment Strategy and the priority to support First Nations, Inuit and Metis peoples may benefit the renewal of NNADAP.
- e. Maintaining linkages with the Mental Wellness Advisory Committee on their processes and progress can be another avenue for communicating key and consistent messaging around the Evidence Base process.
- f. Promotional Products that can be won through participating in the blog discussions and entering a draw will help to motivate people to participate.

4. Clarifying and Managing Expectations

While there has already been some discussion of this objective, the emphasis here is focused on managing messaging that will communicate expected outcomes of the Evidence Base Process. A fundamental message will focus on the potential changes as an opportunity for better client outcomes. Making time for informal and formal discussion and feedback will be important for ensuring the recommendations put forth by the Addictions Advisory Panel are meaningful for the stakeholders, truly evidence based and comprehensive.

Key communication messages will also have to speak to the field from both a personal and professional perspective. The first meeting of the Advisory Panel celebrated and honoured the people who with courage began change towards sobriety in their communities and through NNADAP. These same types of messages must be replicated to ensure that the field understands

that the Advisory Panel is aware of the strengths of the past and that the “renewal of NNADAP” intends to honour the past while using courage to change for the future.

Additionally, expectations regarding funding will be high, specifically to improve salaries. It will be important to work closely with NNAPF to ensure that consistent messaging is delivered that coincides with their Workforce Development Strategy.

Communication Strategy for Clarifying and Managing Expectations

- a. The paper that speaks to the history of NNADAP will be important for communicating that the process honours the history of NNADAP
- b. The analysis of the history of NNADAP and the movement on the 37 recommendations from the NNADAP review will also be important for clarifying expectations
- c. Working closely with NNAPF to link where ever possible key messaging from the evidence base process with their Workforce Development Strategy will be beneficial.
- d. Communication needs to be clear regarding expectations for “additional funding” as well as opportunities to “re-profile” funding to address gaps in the system.

Summary of Communications Methodologies:

1. Public Relations:
 - a. Extend Message through:
 - i. Advisories, News Release / information kit development when needed for specific regional needs or for presentations
 - ii. Proactive pitching strategies of key messages to lead blog discussions or introduce communication material
 - iii. NNAPF Newsletter article which provides progressive updates about the overall process, notifies about the blog discussions and resources that can be accessed on their web site
 - iv. Image building initiatives – inviting people to post discussions on a blog that present their perceptions and evidence of NNADAP strengths – programs and people
 - v. Key Message development – finding various ways to communicate the same message, for example, written, through pictures & metaphors, in feedback and questionnaires
 - vi. Being aware of potential opportunities through other events and strategies such as NNAPFs Workforce Development Strategy, MWAC meetings & processes, and with the AFN through their Health Technicians network, Regional Working Group Web Sites, FNIH Regional Consultants/HQ Addictions & Mental Health Team, Regional Political Offices – Health Technicians, Treatment Centre Web Sites/ Boards of Directors, Community Health and Chiefs & Councils
 - b. Web Posting of the Addictions Advisory Panel documents / information resources
 - c. Blog (time limited, identifier optional, a number of topics / subjects) for discussion on key subject matters, opinions and for gaining feedback on draft recommendations of the Addictions Advisory Committee

- d. Focus Group discussions with the Regional Working Groups to attend to Region specific needs as required
 - e. Key Informant Interviews on specific communication releases and at specific stages of the process or to address stakeholder specific needs
- 2. Promotions:
 - a. Web Based Survey / blog participation with “draw entry” for completion of the survey or participation in the blog. Suggested draws for “laptop computer”, digital camera, specific software.
- 3. Communication Vehicles:
 - a. NNAPF Web Site
 - i. Blog on NNAPF Web Site for commentary on key issues, to facilitate subject focused discussion
 - ii. Survey for opinions on specific subject matters, for example, the specific focus papers, to enquire about perceptions of change
 - iii. Posting of documents and resources
 - b. NNAPF Newsletter
 - 1. Progressive status report on the Evidence Base process
 - c. AFN Web Site – link to NNAPF Web Site with key messaging and advertisement of the Evidence Base process
 - d. Regional Working Group Web Sites – link to NNAPF Web Site with key messaging and advertisement of the Evidence Base process
 - e. CCSA Web Site - link to NNAPF Web Site with key messaging and advertisement of the Evidence Base process
 - f. PTO Web Sites - link to NNAPF Web Site with key messaging and advertisement of the Evidence Base process

Monitoring the Communication Strategy

- 1. Continuous process of monitoring through:
 - a. a web counter – recording how many people went to the blog web page and how many people participated in the blog or an on-line survey.
- 2. If and when key informant interviews / focus group process occur – particularly with the regional working groups, a form of monitoring will include questions that check their awareness and perceptions of the communication in terms of understanding of the communication
- 3. Effectiveness Rated on:
 - a. level of participation in communication strategies,
 - b. understanding of the information communicated,
 - c. timing of messages
 - d. the impact of communication, (did it address any misperception, level of engagement, acceptance)
 - e. The observable impact – impact on building consensus throughout the evidence base process.

4. Who participates: NNADAP community counsellors/Health Committee's, Treatment Centre Directors/Boards of Directors, Regional Working Groups, FNIH Regional Consultants, Regional Health Technicians, NNAPF, AFN, Addictions Advisory Committee, People who Participate in or received services through NNADAP / YSAP

Roles and Responsibilities

1. **The Addictions Advisory Panel / Chairs / Secretariat:**
 - a. identify key messages for communication related to each stage of the process and at developmental milestones
 - b. develop blog discussions, content and information
 - c. develop on –line survey questions as need arises
 - d. identify key informants, and interview questions as need arises
 - e. identify focus group participants and content as need arises
 - f. disseminate Advisory Panel information for web posting
 - g. monitoring communication process
 - h. fund promotional items
 - i. Commissioning the completion of specific background papers
 - j. Maintaining links with and collaborating with the Mental Wellness Advisory Committee's activities
 - k. Monitor the implementation and deployment of the communication strategy
2. **NNAPF:**
 - a. web posting,
 - b. blog management,
 - c. on line survey management,
 - d. writing 1 page information communiqué's,
 - e. provide database of key stakeholders
 - f. mail out and email communication to Regional Working Groups
 - g. data analysis and reports for Addictions Advisory Panel / Secretariat review prior to posting and dissemination
 - h. setting up links to regional working group web sites and with CCSA
 - i. Informing Addictions Advisory Panel on NNAPF's Workforce Development Strategy
3. **AFN:**
 - a. web posting,
 - b. setting up links to NNPAF web site and communication tools on this site,
 - c. facilitating participation of Regional PTO's Health Committees', Health Technicians and Chiefs Committee on Health through dissemination of communication

Initial announcements as News Releases on the following:

1. Evidence Base Process
2. Regional Needs Assessments
3. Addictions Advisory Panel

The outline for these news releases (and others throughout the communication strategy) is as follows:

Introduction: what and who

Results & Benefits: timing of, for whom

Engagement: how to get involved & who to contact, link to NNAPF web site

Sustaining Communications Over the Year

Communication Events					
Event	Target Audience	Communicator	Channel	Timing	Feedback Mechanism to and from Panel
Addictions Advisory Panel	Stakeholders	Secretariat and Co-Chairs	Written reports Meeting Notes Gap Papers Resource Documents Progressive Status on Activities All posted on NNAPF web site and NNAPF newsletters and opportunities arise with Partners through their process and	Beginning August 2008 to Sept. 2009 Primarily Based on meetings & Written products	NNAPF Web Site Blog Discussion Comments on Reports

Communication Events					
Event	Target Audience	Communicator	Channel	Timing	Feedback Mechanism to and from Panel
			networks		
			Status Updates(Oral)	as needed	Face to Face
Regional Needs Assessment	National Stakeholders	Secretariat for Addictions Advisory Panel	National Results of commonalities & potential themes for forming recommendations	Upon completion of Assessment	Written feedback on blog discussion
Q & A Status Report	National Stakeholders	NNAPF in collaboration with Secretariat	Written Q & A Monthly Report from a collection of common questions about the process & activities	Monthly	NNAPF Web Site
Blog Discussions	National Stakeholders	NNAPF in collaboration with Secretariat	1. To engage the field in identifying strengths in programs and people in the field i.e., best practices 2. To identify what needs to go within the current system 3. To elicit opinions & comments on Gap	Bi - Monthly	Participation counter Identifying participant or making anonymous comments Entering into a draw based on a number assigned for the entry & then posting the winning number

Communication Events					
Event	Target Audience	Communicator	Channel	Timing	Feedback Mechanism to and from Panel
			<p>Papers</p> <p>4. Input on Emerging themes from Needs Assessments</p> <p>5. Specific to the various lenses of the needs assessments</p>		for the person to claim the prize
<p>Regional Addictions Committee Meetings</p> <p>And Regional Treatment Directors meetings</p>	Regional Committees	Regional chairperson & FNIH Addictions Manager	Oral Briefing on Evidence Base Process with a briefing note which outline current activities and status of specific initiatives, including communications strategies	quarterly	<p>Face to Face</p> <p>FNIH reports back to FNIH HQ who reports to regional PTO's or health technicians and secretariat & panel</p> <p>Regional Chairperson informs NNAPF at Board meetings</p>
Electronic News Releases (print where necessary)	National Stakeholders	NNAPF, AFN and FNIH database	E-mail NNAPF Web posting	Immediately and Quarterly	Electronic Feedback Form on NNAPF web site
Key Informant Interviews	Leaders of Stakeholder groups	NNAPF, AFN, and FNIH	Interviews based on feedback received through various channels and aimed at:	In Collaboration with other events of the partners	Incorporated into secretariat updates and panel meetings, regional updates

Communication Events					
Event	Target Audience	Communicator	Channel	Timing	Feedback Mechanism to and from Panel
			<ul style="list-style-type: none"> • addressing concerns, • notifying of significant milestones in the process • monitoring quality of communications strategies 	As needed As appropriate Quarterly	Potentially developed in Questions and Answers briefings
Information Requests & Communication Opportunities	Specific to stakeholder groups	Secretariat	Presentations & Info Kits for national or regional conferences or events that are designed to both give information and seek opinion, feedback and develop ideas Attendance at regionally based meetings (Addictions committees, PTO's health committees, health technicians committees, treatment Directors committees, NNAPF Board meetings MWAC meetings National	As needed	Tracking number of requests and impact of responding to the request: for example, raised awareness, stimulated interest, added value to process through contribution to the dialogue on key messages or established further linkages

Communication Events					
Event	Target Audience	Communicator	Channel	Timing	Feedback Mechanism to and from Panel
			Framework – Aboriginal People priority discussion group		
Web page linkages	National stakeholders	NNAPF	Written introduction in the form of an advertisement accompanied with establishing a link to the NNAPF website for further information & to connect to blog discussion	Immediately	Confirming linkages on website of national stakeholder groups and partners such as CCSA
National Native Addictions Awareness Week	National Stakeholders	Secretariat and NNAPF in partnership with NAAW National program Coordinator	<p>Communication Briefing</p> <p>Invitation to participate in Blog Discussion focused on what a Renewal Framework looks like to people in the addictions workforce</p> <p>Advertising of a draw for blog participation</p> <p>All through NAAW communications channels & NNAPF web site</p>	November 2008	<p>Confirmation of Distribution</p> <p>Draw entries</p>

News Release

The Addictions Advisory Panel

August 2008

For immediate release

Introduction

The panel's role in the evidence base process

Who is the Addictions Advisory Panel

Results & Benefits

What are they and for who?

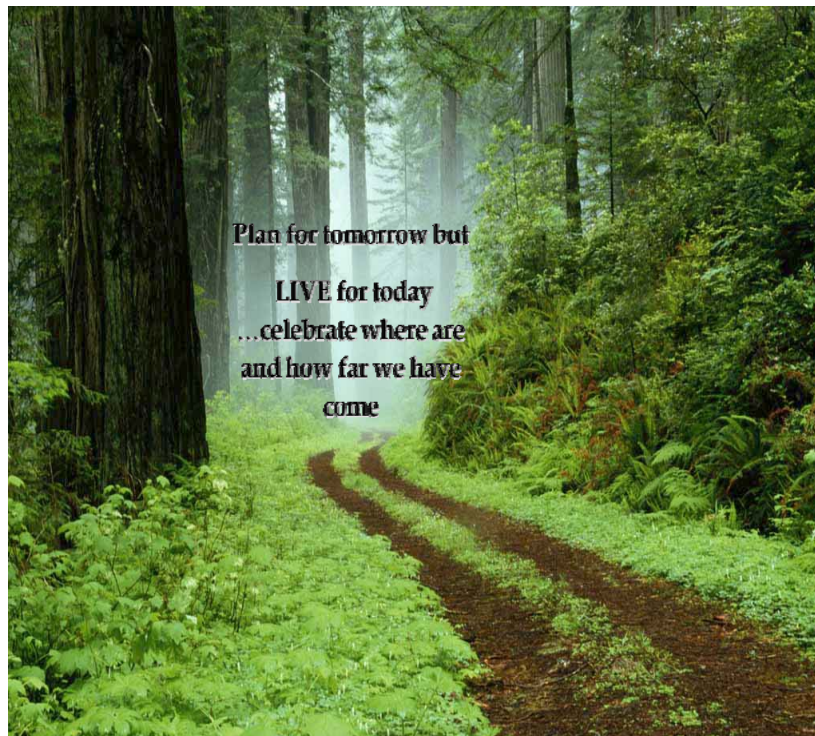
Engagement

How to stay connected to what the Advisory Panel is doing, who to contact

www.nnapf.com

Appendix 2: Pictures as Metaphors to introduce a blog discussion: Sample...

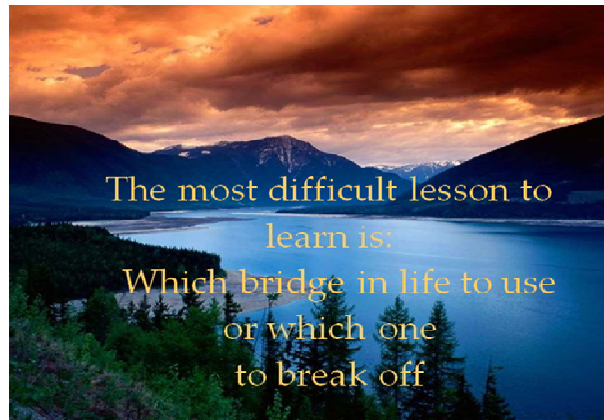
1. Invitation to Discuss Strengths of Programs and People with NNADAP/YSAP. (people refers to the staff of NNADAP/YSAP as the NNADAP story book identified the impact of these strengths through impact stories shared by clients.)



Please share your reflections on the strengths of NNADAP/YSAP programs and people.
Ideas to consider are:

1. What are the specific strengths of an addictions program that you have experienced as a best practice. Please explain how this specific practice made a difference to staff, clients or community.
2. What are the specific strengths of a person working in the addictions field that you believe made a significant difference for other staff, clients or the community.

2. Blog Discussion on “What we need to keep and what we need to let go of within NNADAP/YSAP:?”



Consider the following story as you think about what we need to keep and what we need to let go of within NNADAP/YSAP...

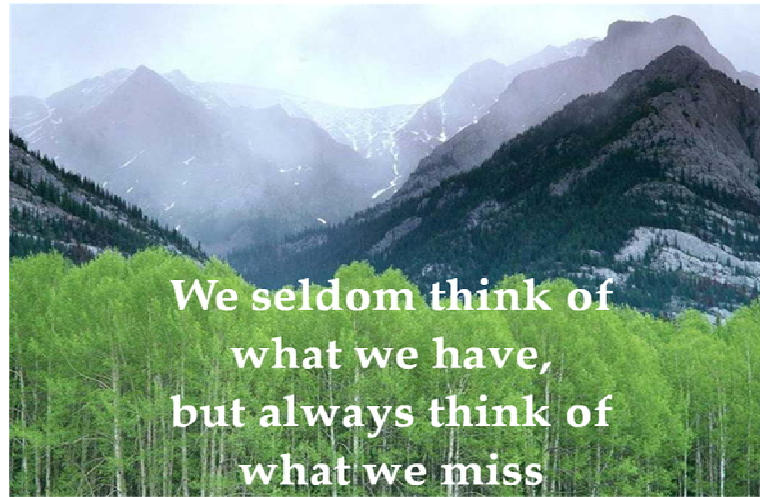
“The Real Self, or Are You a Boiling Frog?”¹¹



“If you drop a frog into boiling water, it will instinctively jump out. But if you place a frog in a pot of cool water and gradually increase the temperature, the frog won’t notice that the water’s getting hotter. It will sit there until the water boils – and will boil with it. The fate of that poached frog isn’t so unlike that of some of our [programs and people] who settle into routine or let small conveniences solidify into large habits – and allow inertia to set in.”

¹¹ Primal Leadership: Learning to Lead with Emotional Intelligence. Daniel Goleman, Richard Boyatzis, Annie McKee. HBS Press. 2002.

3. Gap Papers & Blog Reflections / Opinions / General Discussion:



So then... let's talk about the gaps. Have you read the "Gap Papers" on NNADAP History, Mental Health & Addictions, Culture in Treatment, and Prevention? If so let us know what you think about the conclusions and recommendations they pose for strengthening NNADAP/YSAP.....

If not... at least read the executive summary and come back to this discussion. Click here for a direct link to these papers www.nnapf.org