



# SYNOPSIS OF THE ANNA REPORT

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January 2010

#### **CULTURAL PRACTICES**

Currently there is a huge gap in the Mainstream approach to addictions, First Nations approaches work best for first nations.

> Insufficient funding for the development of traditional activities as a necessary diversion for successful prevention and aftercare programming. Hire more workers.

No funding to support cultural healing practices, elders and cultural knowledge holders to share time and teachings. Blending of traditional and western approaches to healing shared among communities.

## FIRST NATION AND INUIT ADDICTIONS CONTEXT

> Mandatory training of all addictions workers on the methods of the colonial process and the consequences and impacts on first nations.

> Commitment of resources to deal with the lack of basic needs which impact addictions and suicidal behaviours. Community conditions are interrelated with addictions.

> An aboriginal-specific community based service be developed and delivered regarding sexual assault, including the training of all addictions workers and its links between colonization, sexual assault and substance abuse.

Funding to improve socio-economic and cultural conditions and more resources to address the specific programming needs of youth. Youth are underserved and seemingly unreachable by Mental Health and Addiction Workers.

> Funding to Train workers on **violence** i.e spousal, family & lateral.

### SPECIFIC PROGRAMMING > FAMILY

> GENDER SPECIFIC

>TWO SPIRITED

>YOUTH TREATMENT

> RESIDENTIAL SCHOOL SURVIVORS

>MENTAL HEALTH ISSUES



> Aboriginal-specific Community based services. DETOX

> Funds to develop Prevention material regarding the link between substance use, binge drinking, historical factors and the role of culture as a recovery tool to be explored.

> Enhanced community services for FASD, including services for FASD young adults of drinking and child bearing age.

Prohibition efforts need to be incorporated into boarder community prevention strategies.

> Training workers, Detox staff, community members and youth on the effects and potential behaviours from the effect of mixing alcohol and various other prescription and illegal drugs.

## PRESCRIPTION DRUGS

> Need an immediate strategy for the prevention and treatment of clients with mental health and prescription drug dependence.

> Share innovative strategies between first nations i.e. prescription drug work done by Rising Sun and Eagle's Nest.

> Need for a collaborative infrastructure between FNIH, doctors, pharmacist, RCMP and Band Councils to lessen double doctoring. Public info on the dangers and warning signs of misusing drugs.

> Advocates/translators be provided to ensure clarity and safety of prescription drug use, along with a re-examination of policies and practices regarding refilling lost or stolen prescriptions.

## METHADONE

> Need more training, services and supports regarding the reduction of dependence on Methadone.

> Explore culturally based forms of harm reduction along with collaboration between Health and addictions programs to provide support to methadone clients without diluting abstinence based healing programs.

> Funds for Training about detoxification and prescription medication including methadone.

> Hire more workers

> Training and development of specific policies, procedures and staff with respect to clients with mental health issues across the Atlantic Region to provide more integrated services to people showing more visible signs of trauma.

## WAGE PARITY

> A decent wage for present and potential employees.

> Achieve wage parity with the public sector to ensure the retention of staff and the delivery of effective programs and services.