

BAND NAME

MENTAL HEALTH AND WELLNESS AND TRADITIONAL WELLNESS EMERGENCY MANAGEMENT PLAN

Revised: DATE

BAND LOGO

BAND NAME

ADDRESS

Please note:

This is a “living” document and may change

TABLE OF CONTENTS

- EXECUTIVE SUMMARY/ LETTER OF INTRODUCTION4
- 1. OVERVIEW OF THE PLAN5
 - 1.1. DEFINITIONS5
 - 1.2. ACRONYMS5
 - 1.3. PURPOSE AND OBJECTIVES.....6
 - 1.4. SCOPE.....6
 - 1.5. ACTIVATION OF THE MHW AND TW EMERGENCY MANAGEMENT PLAN7
- 2. PLAN ADMINISTRATION 7
 - 2.1. PLAN MAINTENANCE7
 - 2.2. RECORD OF REVIEWS.....8
 - 2.3. RECORD OF AMENDMENTS.....8
 - 2.4. DISTRIBUTION LIST.....8
- 3. CRISIS EMERGENCY NUMBERS8
- 4. COMMUNITY PROFILE.....9
- 5. ROLES AND RESPONSIBILITIES / SUPPORTS.....10
 - 5.1. MHW AND TW TEAM / COMMUNITY CAPACITY10
 - 5.2. MHW AND TW / CULTURAL SUPPORTS IN COMMUNITY.....10
 - 5.3. MHW AND TW / CULTURAL SUPPORTS OUTSIDE OF COMMUNITY11
 - 5.4. MENTAL HEALTH AND WELLNESS PRACTITIONERS SUPPORTS.....11
 - 5.5. MENTAL HEALTH AND WELLNESS AGENCY SUPPORTS IN ... *closest city hub*12
 - 5.6. MENTAL HEALTH AND WELLNESS AGENCY SUPPORTS - PROVINCIAL12
- 6. MWH AND TW EMERGENCY PROTOCOLS / RESPONSE13
 - 6.1. NATURAL AND/OR ACCIDENTAL DEATH.....13
 - 6.2. HOMICIDE14
 - 6.3. NEAR MISS / ATTEMPTED SUICIDE14
 - 6.4. SUICIDE14
 - 6.5. SUBSTANCE MISUSE AND OVERDOSE14
 - 6.6. SEXUAL ASSAULT.....15
 - 6.7. KIDNAPPING.....15
 - 6.8. COMMUNITY SHOOTING15

6.9.	COMMUNITY HOUSE FIRE/FLOOD.....	15
6.10.	DURING EVACUATION ALERTS.....	16
6.11.	DURING EVACUATION ORDERS	16
6.12.	AT RECEPTION CENTRES / ESS CENTRES.....	16
6.13.	RETURNING TO COMMUNITY AFTER AN EMERGENCY/CRISIS.....	16
6.14.	DURING RECOVERY.....	17
6.15.	STAFF/EMERGENCY RESPONDER DURING/AFTER EVENT	17
7.	COMMUNITY WELLNESS CENTRES.....	17
8.	COMMUNICATION STRATEGY.....	17
9.	MENTAL HEALTH AND WELLNESS AND TRADITIONAL WELLNESS GAPS	17
10.	STRATEGIES TO ADDRESS GAPS.....	18
11.	ADDITIONAL RESOURCES.....	18
11.1.	FIRST NATIONS EMERGENCY SERVICES SOCIETY	18
11.2.	DISASTER PSYCHOSOCIAL SERVICES	18
11.3.	ALCOHOL & DRUG INFORMATION REFERAL SERVICE	19
11.4.	ANXIETY CANADA.....	19
11.5.	BC MENTAL HEALTH & SUBSTANCE MISUSE SERVICES	19
11.6.	CANADIAN INSTITUTE FOR SUBSTANCE MISUSE RESEARCH.....	20
11.7.	CANADIAN MENTAL HEALTH ASSOCIATION - BRITISH COLUMBIA	20
11.8.	MINISTRY OF CHILD AND FAMILY DEVELOPMENT	21
11.9.	CRISIS INTERVENTION AND SUICIDE PREVENTION CENTRE OF BC	21
11.10.	CRISIS LINE ASSOCIATION OF BC	21
11.11.	FAMILYSMART™.....	22
11.12.	FIRST NATIONS HEALTH AUTHORITY – MENTAL WELLNESS AND SUBSTANCE MISUSE	22
11.13.	FOUNDRYBC.CA	23
11.14.	HERETOHELP	23
11.15.	INTERIOR HEALTH AUTHORITY – MENTAL HEALTH AND SUBSTANCE MISUSE.....	23
11.16.	JESSIE’S LEGACY	24
11.17.	KUU-US CRISIS LINE SOCIETY	24
11.18.	KELTY MENTAL HEALTH RESOURCE CENTRE	24
11.19.	KIDS HELP PHONE	25
11.20.	TOWARD THE HEART	25

11.21.	VICTIMLINKBC.....	25
11.22.	INDIAN RESIDENTIAL SCHOOL RESOLUTION HEALTH SUPPORT PROGRAM	26
11.23.	RED CROSS DISASTER ASSISTANCE	26
11.24.	TREATMENT ACCESS BC PORTAL	26
11.25.	OVERDOSE PREVENTION INFORMATION FOR FIRST NATIONS	27
11.23.	FIRST NATIONS TREATMENT CENTRES IN BC	25
12.	TREATMENT CENTRES IN BC.....	27
12.1.	FIRST NATIONS TREATMENT CENTRES IN BC	27
12.1.1.	LIST OF FIRST NATIONS TREATMENT CENTRES IN BC	27
12.1.2.	MAP OF FIRST NATIONS TREATMENT CENTRES IN BC.....	33
12.2.	FIRST NATIONS RECOVERY CENTRES IN BC.....	33
12.3.	NON-NNADAP TREATMENT CENTRES IN BC	34
12.3.1.	FREQUENTLY ASKED QUESTIONS	34
12.3.2.	NON-NNADAP FUNDED TREATMENT CENTRES WHO ACCEPT FNHA SUBSIDY	36
13.	ADDITIONAL TRAINING RESOURCES.....	41
13.1.	JUSTICE INSTITUTE BC	41
13.2.	MENTAL HEALTH FIRST AID – FIRST NATIONS	41

EXECUTIVE SUMMARY

Emergencies create a wide range of problems experienced at the individual, family, community and societal levels. At every level, emergencies erode normally protective supports, increase the risks of diverse problems and tend to amplify pre-existing problems of social injustice and inequality. Most people who experience a disaster, whether as a victim or responder, will have some type of psychological, physical, cognitive, and/or emotional response to the event. These responses may be acute in the short-term, but they can also undermine the long-term mental health and wellbeing of the affected population.

Mental health and psychosocial problems in emergencies are highly interconnected, yet may be predominantly social or psychological in nature. Significant problems of a predominantly social nature include:

- Pre-existing (pre-emergency) social problems (e.g. extreme poverty; belonging to a group that is discriminated against or marginalized; political oppression);
- Emergency-induced social problems (e.g. family separation; disruption of social networks; destruction of community structures, resources and trust; increased gender-based violence);
- Humanitarian aid-induced social problems (e.g. undermining of community structures or traditional support mechanisms).

Similarly, problems of a predominantly psychological nature include:

- Pre-existing problems (e.g. severe mental disorder; alcohol abuse);
- Emergency-induced problems (e.g. grief, non-pathological distress; depression and anxiety disorders, including post-traumatic stress disorder);
- Humanitarian aid-related problems (e.g. anxiety due to a lack of information about food distribution or about how to obtain basic services)

In emergencies, not everyone has or develops significant psychological problems. Many people show resilience, that is the ability to cope relatively well in situations of adversity. Depending on the emergency context, particular groups of people are at increased risk of experiencing social and/or psychological problems. The following are groups of people who frequently have been shown to be at increased risk of various problems in diverse emergencies:

- Women and children
- Elderly people (especially when they have lost family members who were care-givers);
- Low income individuals/families
- People who have been exposed to extremely stressful events/trauma (e.g. people who have lost close family members or their entire livelihoods, survivors of Indian Residential School);
- People in the community with pre-existing, severe physical, neurological or mental disabilities or disorders and substance abuse problems;
- People at specific risk of human rights violations (e.g. visible minority groups such as Indigenous peoples)

(Note: See Disaster Planning Handbook for Behavioral Health Treatment Programs 2013 & IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings 2007 for more information)

By creating a mental health and wellness and traditional wellness emergency management plan, specifically through an indigenous lens, we will be better equipped to handle emergencies and crises in our community and for our people. First Nations embrace the achievement of whole health - physical, mental, emotional, spiritual, social, and economic well-being - through a coordinated, comprehensive approach that respects, values, and utilizes First Nations cultural knowledge, traditions, approaches, practices, languages, and ways of knowing. By creating a plan that is dedicated to mental health and wellness and traditional wellness through this lens, it will ensure that the plan is culturally safe and relevant to our community and is created in a way that encompasses the unique challenges and strengths of our community.

1. OVERVIEW OF THE PLAN

1.1 DEFINITIONS

Accidental Death	An unnatural death that is caused by an accident such as a slip and fall, traffic collision, or accidental poisoning.
Emergency	An unforeseen combination of circumstances or the resulting state that calls for immediate action; An urgent need for assistance or relief.
Evacuation Alert	Be ready to leave on short notice. If you leave before or during this alert, it's called a voluntary evacuation.
Evacuation Order	You are at risk. Leave the area immediately.
Evacuation Rescind	All is currently safe and you can return home. Stay tuned for other possible Evacuation Alerts or Orders.
Emergency Reception Centre	A safe place where people can go to receive information about the emergency; assistance meeting their basic needs; help planning their recovery from the disaster; and other primary and specialized services.
Crisis	A time of intense difficulty, trouble, or danger.
Substance Misuse	The use of drugs or alcohol, and includes substances such as cigarettes, illegal drugs, prescription drugs, inhalants and solvents. A substance misuse problem occurs when using alcohol or other drugs causes harm to you or to others.
Mental Health	A person's condition with regard to their psychological and emotional well-being.
Mental Health Practitioner	A licensed health care practitioner or social and human services provider who offers services for the purpose of improving an individual's mental health or to treat mental disorders.
Wellness	The state of being in good health, especially as an actively pursued goal.
Psychosocial	Involving both psychological and social aspects.

1.2 ACRONYMS

CMHA	Canadian Mental Health Association
DFA	Disaster Financial Assistance
DPS	Disaster Psychosocial Services
EMBC	Emergency Management British Columbia
EPA	Emergency Program Act
ESS	Emergency Social Services
FNESS	First Nations Emergency Services Society
FNHA	First Nations Health Authority
HRVA	Hazard, Risk, and Vulnerability Assessment
MCFD	Ministry of Children and Family Development
MHW	Mental Health and Wellness
RCMP	Royal Canadian Mounted Police
TW	Traditional Wellness

1.3 PURPOSE AND OBJECTIVES

Provide a community-driven and community-based Mental Health and Wellness and Traditional Wellness Emergency Management Plan to address what supports are available during various emergencies that occur within the community. A very important and significant part of this document is outlining the strengths and resiliencies within our own community and drawing on these resources in times of need. This plan includes multiple levels of MHW and TW supports including: community, traditional/cultural, clinical and agency support. This plan provides the opportunity to utilize various types of support in times of an emergency or crisis if desired. By having this plan in community, it will help to ensure that mental health and wellness and traditional wellness needs are not overlooked and will also ensure that during an emergency or crisis event, psychological distress, depression, posttraumatic stress disorder, substance misuse, stress, anxiety, etc. are minimized while resiliency and positive coping skills are maximized. This plan will also highlight cultural safety and humility by creating the plan through an indigenous lens and recognizing our people’s customs, values, beliefs, worldviews, histories and unique strengths and needs. Further, this plan will be community lead and implemented, with the design and actions of utilizing this plan coming from within the community and utilizing outside expertise for support purposes.

1.4 SCOPE

This plan is specific to the ... First Nation and members of this community.

This plan addresses various types of emergency and crisis events and what community protocols, response and supports may be needed during each incident. This plan includes the following emergencies/crises: ***update list to include all types of emergencies/crisis covered within this specific plan***

- Example: Natural or Accidental Death
- Example: Homicide
- Example: Near Miss / Attempted Suicide
- Example: Suicide
- Example: Substance Misuse and Overdose
- Example: Sexual Assault
- Example: Kidnapping
- Example: Community Shooting
- Example: Community House Fire/Flood
- Example: During Evacuation Alerts
- Example: At reception/ESS centres
- Example: During Evacuation Orders
- Example: Returning to community after being evacuated
- Example: During community recovery

This plan may also be utilized as other emergencies/crises arise in community that are not included in the list. This is up to the discretion of the individuals who have the authority to activate the plan.

1.5 ACTIVATION OF THE MHW AND TW EMERGENCY MANAGEMENT PLAN

This plan may be activated in part if an emergency/crisis has occurred or appears imminent which may require action and coordination related to a specific emergency/crisis outlined within the plan.

This plan may be activated by:

- Example: Community Health Director
- Example: Chief or Council
- Etc.

Note: when completing this section, clearly articulate who has the authority and how they have that authority

2. PLAN ADMINISTRATION

2.1 PLAN MAINTENANCE

Identify when revisions will be made and how amendments will be documented.

The Mental Health and Wellness and Traditional Wellness Emergency Management Plan will undergo revision whenever:

- Community hazards or vulnerabilities change
- The community governance structure and/or policy changes
- Exercises or mental health and wellness emergencies/crisis identify gaps or improvement in policy and procedures
- An annual review takes place

Annual reviews will be documented in section 2.2 of this plan and Amendments will be documented in section 2.3. An updated plan will be distributed to the distribution list when amendments have occurred.

BLANK... is responsible to ensure that an annual review of the plan is conducted and the plan is amended and annexes are updated when required.

2.2 RECORD OF REVIEWS

DATE	NAME	SIGNATURE

2.3 RECORD OF AMENDMENTS

DATE	CHANGES	PAGE #

2.4 DISTRIBUTION LIST

Insert a list of which organizations are included in the internal and external agency distribution lists, if any. Key individuals from these organizations should receive a copy of the plan every time it is amended.

3. CRISIS EMERGENCY NUMBERS

If you or someone you know needs help, phone or provide the individual with one of the following numbers:

9-1-1	If you are in an emergency
-------	----------------------------

Local RCMP ###	Responsible for enforcing laws throughout Canada and enforcement of the criminal code and applicable provincial legislation
1-800-SUICIDE (1-800-784-2433)	If you are considering suicide or are concerned about someone who may be
310 Mental Health Support at 310-6789 (no area code needed)	For emotional support, information and resources specific to mental health
Kid's Help Phone 1-800-668-6868	To speak to a professional counsellor, 24 hours a day
Crisis Centre BC Distress Line: 1-800-784-2433 Seniors' Distress Line: 1-604-872-1234	All ages crisis intervention. Suicide prevention. 24/7. Confidential, non-judgmental, free emotional support for people experiencing feelings of distress or despair
Youth Crisis Line 1-888-564-8339 (250-564-8336 text)	A confidential, anonymous peer support service operated by trained youth answering calls from other youth
Alcohol & Drug Information and Referral Service at 1-800-663-1441 (toll-free in B.C.) or 604-660-9382 (in the Lower Mainland)	To find resources and support
KUU-US Crisis Line Society BC Wide: 1-800-588-8717 Youth: 1-250-723-2040 Adult: 1-250-723-4050	Provides a First Nations and Indigenous specific crisis line available 24 hours a day, 7 days a week
Northern BC Crisis Line 1-888-562-1214 OR 1-250-563-1214	A safe, confidential and non-judgmental crisis line to discuss anything troubling you
First Nations and Inuit Hope for Wellness Help Line 1-855-242-3310 or online https://chat.fn-i-hopeforwellness.ca	Online chat counselling by Indigenous Services Canada
First Nations Health Authority Health Benefits Line 1-800-317-7878	Be connected with a counsellor, or if you require help or information such as verifying if you have lost your identification

4. COMMUNITY PROFILE

Total # On-Reserve Population:	
Total # Elders On-Reserve:	
Total # Children & Youth (19 years of age or younger) On-Reserve:	

Total number of vulnerable individuals needing a continuum of care:	*Could create an appendix with plans for this in the event of an evacuation – prescription medications, chronic disease, MH(psychiatric or psychological support), primary care, disability (physical & mental), individuals with language barriers, etc.
Total community members that require transportation during an emergency:	*Could create an appendix with plans for this in the event of an evacuation – might be part of the overall emergency plan??

5. ROLES AND RESPONSIBILITIES / SUPPORTS

Depending on the type of mental health and wellness emergency/crisis that is imminent or occurring, you may need support either internally, externally, or both. Below is a list of internal department roles and responsibilities, as well as external clinical and agency support that is available.

For this section, please specify whether the support is for crisis and emergency RESPONSE or a long-term support. Some individuals may only be able to provide one or the other for support, whereas some may provide during both. *Suggest including this in the “supports available” section*

5.1 MENTAL HEALTH AND WELLNESS AND TRADITIONAL WELLNESS TEAM/ COMMUNITY CAPACITY: **Please indicate who will be available after hours and during the weekend**

Position	Name & Contact Info	Relevant Training	Roles & Responsibilities
Example: Health Director		Examples: ASIST, Crisis response, First Aid, Aboriginal Focused Orient Training, Mental Health First Aid, Natural Disaster Training, etc.	

5.2 MENTAL HEALTH AND WELLNESS AND TRADITIONALWELLNESS / CULTURAL SUPPORTS IN COMMUNITY:

Name	Contact Info	Supports Available
------	--------------	--------------------

Example: Community Healer		Ceremony, Smudging, etc.
Example: Community knowledge keeper		Talking circles, on the land healing, etc.
Youth Council/Elders groups/Women's groups?		

5.3 MENTAL HEALTH AND WELLNESS AND TRADITIONAL WELLNESS / CULTURAL SUPPORTS OUTSIDE OF COMMUNITY:

Name	Contact Info	Supports Available
Nation CEC?		
Nenqayni Mobile Treatment Program (for 15 bands that govern the wellness centre)		

5.4 MENTAL HEALTH AND WELLNESS PRACTITIONERS SUPPORTS

Agency	Contact Info	Supports Available
--------	--------------	--------------------

Example: Counsellor		Is this crisis support/immediate/hands on or long-term support?
Child and Youth Clinician		
Addictions Specialist		
Nenqayni Mobile Treatment Program (for 15 bands that govern the wellness centre)		

5.5 MENTAL HEALTH AND WELLNESS AGENCY SUPPORTS IN ... *closest city hub*

Agency	Contact Info	Supports Available
Elizabeth Fry?		
Friendship Centre?		

5.6 MENTAL HEALTH AND WELLNESS AGENCY SUPPORTS - PROVINCIAL

Agency	Contact Info	Supports Available
--------	--------------	--------------------

First Nations Health Authority		
United Way?		
Canadian Red Cross?		
Interior Community Services?		

6. MENTAL HEALTH AND WELLNESS AND TRADITIONAL WELLNESS EMERGENCY PROTOCOLS / RESPONSE

Depending on the type of emergency/crisis that is imminent or occurring, the type of support that may be required will vary. Further, depending on the incident, the individual(s) who are affected may vary, and the types of specific support they may want may differ. Please see [Appendix #1](#) for a simple checklist that may be utilized if you need to speak with the affected individual(s) about what type of supports to deploy. Also, see below for common practices and protocols in the community regarding specific emergency/crisis events and what types of mental health and wellness and traditional wellness supports may be required.

6.1 NATURAL AND/OR ACCIDENTAL DEATH

- **Community protocols regarding death (ceremonies, etc.):**
- **Mental Health and Wellness Supports Required for family or community as a whole:**
- **When to deploy supports:**
- **How does community access supports:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**

- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.2 HOMICIDE

- **Community protocols regarding death (ceremonies, etc.):**
- **Mental Health and Wellness Supports Required family or community as a whole:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.3 NEAR MISS / ATTEMPTED SUICIDE

- **Mental Health and Wellness Supports Required for survivor and for family/community:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.4 SUICIDE

- **Community protocols regarding death (ceremonies, etc.):**
- **Mental Health and Wellness Supports Required for family and/or community as a whole:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.5 SUBSTANCE MISUSE AND OVERDOSE

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**

- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.6 SEXUAL ASSAULT

- **Note: May want to include sexual assault centre #s and addresses in area**
- **Mental Health and Wellness Supports Required for Survivor and potentially the family unit as a whole:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.7 KIDNAPPING

- **Note: May want to include Missing and Murdered Indigenous Women’s info here, possibly phone #s for support, Indian Residential School Survivor info, other hotlines for kidnapping?**
- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.8 COMMUNITY SHOOTING

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.9 COMMUNITY HOUSE FIRE/FLOOD

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**

- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.10 DURING EVACUATION ALERTS

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.11 DURING EVECUTION ORDERS

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How will supports be provided when community relocates?**
- **How long to keep supports in place / when to rescind supports:**

6.12 AT RECEPTION CENTRES / ESS CENTRES

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.13 RETURNING TO COMMUNITY AFTER AN EMERGENCY/CRISIS

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**

- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.14 DURING RECOVERY

- **Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

6.15 STAFF / EMERGENCY RESPONDER DURING / AFTER EVENT

- **Mental Health and Wellness Supports Required: Mental Health and Wellness Supports Required:**
- **Traditional Wellness Supports Required: (example: Traditional healer, counsellor, specific type of ceremony, traditional foods, etc.)**
- **When to deploy supports:**
- **How does community access supports:**
- **Barriers to accessing these supports (funding, transportation, confidentiality, access, etc.):**
- **What to do if community supports are part of the effected population:**
- **How long to keep supports in place / when to rescind supports:**

7. COMMUNITY WELLNESS CENTRES

Does your community have a treatment centre, wellness centre or back to the land centre? Where is the nearest treatment centre? What types of supports do they offer, what is the process to get an individual into the centre, etc.? What do their evacuations look like? Etc.

Note: See Section 12 for a full list of First Nations Treatment Centres in BC & Application Package Information, as well as Non-NNADAP funded Treatment Centres and Application Information.

8. COMMUNICATION STRATEGY

How will the availability of this resource be communicated to community members?

9. MENTAL HEALTH AND WELLNESS AND TRADITIONAL WELLNESS GAPS

Identify gaps in the community surrounding Mental Health and Wellness and Traditional Wellness Supports. Gaps could include things such as: no contact for a traditional healer, knowledge keeper, and no plan for who/when to bring in either internal or external help, etc. Could also identify gaps in training for staff.

10. STRATEGIES TO ADDRESS GAPS

Identify strategies in how to address the Mental Health and Wellness and Traditional Wellness Gaps that were in the previous section. This may include more training for staff members in MHW (ex. ASIST, Trauma, etc.), could also include connecting with traditional healers from outside of the community that could assist with MHW supports if the entire community is impacted and the impacted community healer/elder is also in need of supports, or is not in a position to offer supports.

11. ADDITIONAL RESOURCES

Additional resources that may or may not be part of your direct Mental Health and Emergency Management Plan.

11.1 FIRST NATIONS EMERGENCY SERVICES SOCIETY

First Nations Emergency Services Society (FNESS) provides Critical Incident Stress Management (CISM) support and educational services to First Nations communities, and their members, during critical incidents and their aftermath. The FNESS CISM Team is made up of dedicated Responders, trained in the specific needs of First Nations Communities, who work in collaboration with First Nations Bands and their Health Authority, to provide First Nations Communities, and their individual members, culturally focused CISM.

Immediate Crisis Intervention

- Crisis Intervention is NOT psychotherapy: it is a specialized and acute emergency mental health intervention that requires specialized training. Often CISM is referred to as “emotional First Aid”.
- First Nations Band Councils or Band Health Authority request FNESS CISM Responders to enter communities for CISM Intervention on behalf of individual Band Members, Band Fire services, Band Emergency Management Teams, Band Health Care Workers and more as needed by the Band.

Ongoing Support

- FNESS CISM Teams continue to follow up with initial Crisis Intervention with FN Bands, and FN Band Health Authorities, in collaboration with multi-agencies, to facilitate community healing from Crisis Incidents.
- The Need for appropriate follow up services and referrals, when necessary, will be supported.
- Spiritual Care and Self Care.

11.2 DISASTER PSYCHOSOCIAL SERVICES (DPS)

Part of the Provincial Health Services Authority, the DPS program responds to crisis situation. DPS is able to help with community assessment of needs and collaborative planning. Direct services available include:

- Psychological first aid – provided by volunteer network of professional mental health workers from within the local region where the crisis occurs
- Assessment includes: 1-1 support, crisis counselling, outreach and advocacy
- Stress management: Individual, group or community sessions

Website: <http://www.phsa.ca/our-services/programs-services/health-emergency-management-bc/disaster-psychosocial-program>

Provincial Lead: Julie Kaplan, T: 604.375.3487, Email: dpsprogram@phsa.ca

11.3 ALCOHOL & DRUG INFORMATION REFERRAL SERVICE

Alcohol & Drug Information Referral Service (ADIRS) provides free, confidential information and referral services to British Columbians in need of support with any kind of substance misuse issue (alcohol or other drugs). Referral to community substance misuse treatment services is available for all ages. Information available from ADIRS includes prevention resources, support groups, and addiction related topics such as fetal alcohol syndrome. Contact ADIRS toll-free at 1 800 663-1441, or in the lower mainland at 604- 660-9382. Free, multilingual telephone assistance is available 24 hours a day, 7 days a week.

11.4 ANXIETY CANADA

A non-profit organization which provides self-help, peer reviewed and trusted resources on anxiety. Online resources include educational videos on YouTube, information exchange on Facebook, downloadable articles and resources, and the free and widely popular Mindshift App. Anxiety Canada self-help resources are written specifically for children, youth, adults, parents, and individuals to support anxiety management. Anxiety Canada also offers information on anxiety in youth, and an Anxiety Canada Blog.

11.5 BC MENTAL HEALTH & SUBSTANCE USE SERVICES

An agency of the Provincial Health Services Authority (PHSA), provides a diverse range of specialized and one-of-a-kind tertiary mental health and substance use services for adults across the province. The goal of BCMHSUS is to work with the regional health authorities and other key stakeholders to ensure that everyone in British Columbia has access to the specialized mental health and substance use services they need, when they need them, regardless of where they live.

In addition to delivering these clinical services, BCMHSUS provides provincial leadership for system-wide improvement through its work in tertiary mental health and substance misuse planning; health promotion and illness prevention; knowledge exchange; and research and academic teaching. Recognizing that people with mental health challenges may also have co-occurring substance use concerns, the assessment and treatment of substance use issues is an integral part of BCMHSUS programs.

BCMHSUS is responsible for the following provincial specialized mental health and substance use programs:

[Ashnola at the Crossing](#)

[Burnaby Centre for Mental Health & Addiction](#)

[Forensic Psychiatric Hospital](#)

[Heartwood Centre for Women](#)

[Kelty Mental Health Resource Centre](#)

11.6 CANADIAN INSTITUTE FOR SUBSTANCE USE RESEARCH

The Canadian Institute for Substance Use Research (CISUR), formerly the Centre for Addictions Research of BC, at the University of Victoria, is a network of individuals and groups dedicated to the study of substance use and addiction. CISUR seeks to support community-wide efforts to promote health and reduce harm.

CISUR publishes research bulletins and educational resources. These are designed to help health professionals support individuals and communities deal with issues related to substance use and addiction.

CISUR also publishes a range of information and self-help materials. These publications help people better understand, prevent and manage substance use and related issues. The goal is happier, healthier lives, whether using substances or not.

11.7 CANADIAN MENTAL HEALTH ASSOCIATION - BRITISH COLUMBIA

The Canadian Mental Health Association (CMHA) is a national charity that helps maintain and improve mental health for all Canadians. CMHA British Columbia, together with a network of local CMHA branches, provides services and resources related to mental health, substance use and addictive behaviour in locations across the Province. Resources are available on numerous topic areas such as child, youth, parenting, workplace, alcohol and other drugs, finding help, and improving mental wellness.

[Bounce Back for Adults and Youth](#): teaches effective skills to help individuals aged 15+ overcome early symptoms of depression, and improve their mental health. Participants can learn skills to help combat unhelpful thinking, manage worry and anxiety, and become more active and assertive.

[Confident Parents: Thriving Kids](#): a family-focused phone-based coaching service effective in reducing mild to moderate behavioural problems and promoting healthy child development in children ages 3-12 years old.

[Living Life to the Full](#): a fun, interactive course that will leave you with the inspiration and tools to get the most out of life! An 8-week community-based course provides simple, practical skills for coping with stress, problem solving, boosting your mood, and busting bad thoughts.

[Blue Wave for Youth](#): offers Living Life to the Full for Youth. A fun course shown to improve mood and well-being and reduce stress and anxiety. The program also offers a post-secondary bursary program open to B.C. youth under the age of 20 who have experienced a significant mental health or substance use program.

[Workplace](#): helps workplaces build awareness and skills for improving psychological health and safety at work through a variety of workshops and training opportunities

11.8 MINISTRY OF CHILD AND FAMILY DEVELOPMENT

The Ministry of Child and Family Development of British Columbia is the child protection service across the province and is provided through 429 ministry offices in 5 regions and a number of delegated Aboriginal agencies. The MCFD's primary focus is to support all children and youth in British Columbia to live in safe, healthy and nurturing families and be strongly connected to their communities and culture. The ministry's approach is to provide inclusive, culturally respectful, responsive and accessible services that support the well-being of children, youth and families in B.C.

11.9 CRISIS INTERVENTION AND SUICIDE PREVENTION CENTRE OF BC

The Crisis Intervention and Suicide Prevention Centre of BC (Crisis Centre) is a non-profit volunteer organization committed to helping people help themselves and deal with crisis. 24 hours a day, 7 days a week the Crisis Centre provides emotional support to youth, adults and seniors in distress.

The Crisis Centre also provides workshops about mental and emotional wellness. Workshops are available in formats focused towards seniors, youth, schools, suicide prevention training and mindfulness self-care.

[1-800-SUICIDE \(1-800-784-2433\)](#): for individuals who are or know someone who is having thoughts of suicide. The service is available 24 hours a day, 7 days a week and in up to 140 languages. Operated in partnership with Crisis Line Association of BC.

[Seniors Distress Line](#): seniors in British Columbia can call 604-872-1234 for telephone support from a trained volunteer at the Crisis Centre on topics specific to older adults. Topics may include suicide, retirement, stress, relocation, loss of a loved one, physical or mental health issues, emotional support, or help working through a problem. The Seniors Distress Line is available 24 hours a day, 7 days a week and in up to 140 languages.

[Youth in BC](#): online crisis service for youth (up to 25 years of age) to chat 1-on-1 with a trained volunteer from the Crisis Centre. A range of topics can be discussed such as suicide, sexuality, depression, stress, and relationships. Youth in BC online chat is available from noon to 1am daily.

[Crisis Centre Chat](#): online crisis service for adults (older than 25 years) to chat 1-on-1 with a trained volunteer from the Crisis Centre. A range of topics can be discussed such as suicide, mental illness, stress, physical health, work, relationship conflicts, parenting, caregiving, and other family issues. Crisis Centre Chat is available from noon to 1am daily.

11.10 CRISIS LINE ASSOCIATION OF BC

The Crisis Line Association of BC (CLABC) is the provincial association representing member crisis lines from across British Columbia. Members of CLABC provide emotional support, crisis and suicide assessment and intervention, and resource information.

Crisis line workers are trained in critical skills such as empathetic reflection, active listening, and collaborative problem solving. They use crisis and suicide assessment and intervention protocols that are based on recognized better practices. The following crisis line services are available:

[1-800-SUICIDE \(1-800-784-2433\)](#): for individuals who are or know someone who is having thoughts of suicide. The service is available 24 hours a day, 7 days a week and in up to 140 languages. Operated in partnership with Crisis Intervention and Suicide Prevention Centre of BC.

[310-Mental Health \(310-6789\)](#): for individuals who would like emotional support, information and resources specific to mental health in British Columbia. The service is available 24 hours a day, 7 days a week and is toll-free anywhere in British Columbia (no need to dial an area code).

[Map of Crisis Lines](#): provides an interactive map to search for the direct number to local crisis line services in British Columbia. While 1-800-SUICIDE is available across the province and is designed to transfer callers to the local crisis line service closest to the community of the caller, in some instances individuals may prefer to contact the crisis line in their community direct.

11.11 FAMILYSMART™

[FamilySmart™](#) is at the heart and foundation of all the work of the unified non-profit organizations: The F.O.R.C.E. Society for Kids' Mental Health (the FORCE) and National Institute of Families for Child & Youth Mental Health (Institute of Families).

FamilySmart™ means working well together as youth, young adults, families and service providers to achieve better mental health outcomes. Programs include:

[Parents in Residence \(PiR\) & Youth in Residence \(YiR\)](#) provides support, mentoring, education, system navigation and access to information, networks and resources to parents and families of youth and young adults with lived experienced of mental health and substance use challenges.

[‘In the Know’](#) is a monthly webinar series that explores topics related to child and youth mental health and/or substance use challenges. Facilitated discussions are available at community group viewing sites or you can watch online anytime.

To find out more, visit www.familysmart.ca.

11.12 FIRST NATIONS HEALTH AUTHORITY – MENTAL WELLNESS AND SUBSTANCE USE

The First Nations Health Authority is responsible for planning, management, service delivery and funding of health programs, in partnership with First Nations communities across British Columbia. Guided by the vision of embedding cultural safety and humility into health service delivery, the First Nations Health Authority works to reform the way health care is delivered to BC First Nations through direct services, provincial partnership collaboration, and health systems innovation.

The [First Nations Health Authority – Mental Wellness and Substance Use](#) provides information for First Nations communities on mental wellness, substance use prevention and treatment, residential treatment centres and overdose information.

[Overdose Information](#) provides information on naloxone, how to stop an overdose, harm reduction, and treatment.

[Residential Schools Program](#) provides information on the Indian Residential Resolution Health Support Program which includes mental health and emotional support to eligible former Indian Residential School students and their families.

[Substance Use Prevention and Treatment](#) provides information on culturally relevant community based services and supports available.

[Treatment Centres](#) provides a list of the 10 residential treatment centres funded through the National Native Alcohol and Drug Abuse Program (NNADAP). Treatment is available to males, females, youth and families.

11.13 FOUNDRYBC.CA

[foundrybc.ca](#) is an interactive website designed to support youth and young adults in British Columbia to better understand their mental health and learn about steps they can take to improve their well-being. The resource is made available through a partnership between Fraser Health Authority and the BC Mental Health & Substance Use Services of the Provincial Health Services Authority.

foundrybc.ca online resources are designed to help youth to be aware of the thoughts, feelings, behaviours, and physical symptoms that may indicate possible emerging mental health challenges. The online resources enable youth and young adults to identify mental health challenges early on, and develop the skills and strategies they need to manage these problems before they become more serious. Topics include: depression, anxiety, stress, alcohol, substance use, psychosis, and body image and eating.

11.14 HERETOHELP

HeretoHelp is a project of the BC Partners for Mental Health and Addictions Information, a collaboration of seven leading mental health and addictions non-profit agencies.

The HeretoHelp website features thousands of plain-language [Personal Stories](#) and [Self-Help Resources](#) for a number of audiences including people concerned for themselves or for a loved one. Topics covered include, but are not limited to: anxiety and anxiety disorders, bipolar disorder, depression, eating disorders, grief, personality disorders, psychosis, self-harm, stress, suicide, substances like alcohol and other drugs, and co-existing mental health and substance use.

The HeretoHelp team is also available to help any British Columbians with requests for help, support, information or referrals via email or Twitter.

11.15 INTERIOR HEALTH AUTHORITY – MENTAL HEALTH AND SUBSTANCE USE

The Interior Health Authority provides a range of integrated health care programs and services to residents across British Columbia's Southern Interior. This includes programs and services for areas of Thompson Cariboo, Shuswap, Okanagan, Kootenay Boundary and East Kootenay.

The Interior Health Authority provides a wide range of [mental health](#) and [substance use](#) services including short-term assessment and treatment, long-term programs for those with a serious and persistent mental illness, seniors' mental health services as well as substance use prevention and treatment services.

[Mental Health Services](#) provides information on child and youth mental health services, community-based mental health programs, hospital-based psychiatric services, and tertiary psychiatric services.

[Mental Health Resources](#) provides links to mental health survival kit resources and a list of telephone services available to support individuals with mental health concerns or questions.

[Substance Use](#) provides information on prevention, outpatient, withdrawal management, day treatment, residential treatment, supportive housing, services specific to Indigenous individuals, and other related programs.

[Substance Use Resources](#) provides links to substance use information sheets on alcohol, cocaine/crack, marijuana, methamphetamine/crystal meth, and tobacco. Also provides a list of telephone services available to support individual with substance use concerns or questions.

[Mental Health and Substance Use Centres](#) provides a list of the mental health and substance use centres across the Interior Health Authority. The list includes links to detailed information about each centre including the address, hours of service, and telephone number.

11.16 JESSIE'S LEGACY

[Jessie's Legacy](#) provides online eating disorder prevention education, resources and support for youth, families, educators and professionals across British Columbia. Online services include an [Eating Disorder Prevention Toolkit](#); numerous information resources; [Jessie's Legacy Blog](#); the [Love our Bodies, Love Ourselves](#) program; and a question/answer service.

Jessie's Legacy is a program created and operated by the Family Services of the North Shore, an accredited not-for-profit community-based agency that offers education, support and counselling services. Jessie's Legacy also provides services in the community of Metro Vancouver including an Early Childhood Development Program, Family FUNdamentals, Girl Talk for adolescents, and a Speakers Bureau.

11.17 KUU-US CRISIS LINE SOCIETY

The [KUU-US Crisis Line Society](#) provides a First Nations and Indigenous specific crisis line available 24 hours a day, 7 days a week, toll-free from anywhere in British Columbia.

KUU-US Crisis Line can be reached toll-free at 1-800-588-8717. Alternatively, individuals can call direct into the Youth Line at 250-723-2040 or the Adult Line at 250-723-4050.

KUU-US services are for First Nations, by First Nations, and all crisis response personnel are certified and trained in Indigenous cultural safety bringing an understanding of First Nations history and trauma from the residential school to their roles. Topics the KUU-US Crisis Line can support individuals with include, but are not limited to, mental health issues and crisis related to residential school, child welfare, addiction, health concerns, divorce and separation, suicide ideation and survivorship, grief and loss, crime, abuse, peer pressure and financial distress.

11.18 KELTY MENTAL HEALTH RESOURCE CENTRE

[Kelty Mental Health Resource Centre](#) is a provincial resource centre that provides mental health and substance use information and resources. The Centre supports people with navigating the mental health

system and provides peer support to children, youth and their families from across British Columbia (B.C.). The Centre also provides support, information and resources to people of all ages with eating disorders.

Online resources cover a variety of topics for children, youth and adults including: anxiety, attention-deficit/hyperactivity disorder, behavioural problems, substance use and eating disorders.

All services provided by the Kelty Mental Health Resource Centre are free, and include educational events for families, educators and health professionals such as the [Pinwheel Education Series](#). To learn more, see [Kelty Mental Health Resource Centre – Events](#).

Contact the Kelty Mental Health Resource Centre by phone at 1-800-665-1822, in person at [BC Children’s Hospital](#) (Mental Health Building, 4555 Heather Street, Vancouver, BC, Room P3-302 (3rd Floor)), or by email at kellycentre@cw.bc.ca.

11.19 KIDS HELP PHONE

The Kids Help Phone is a counselling, referral and support service for children and youth under the age of 20 years old. Professional counsellors provide immediate and caring support to young people who are dealing with a problem, making a hard decision, or concerned with feelings or mood. The service is free, confidential, anonymous and available 24 hours a day.

[Kids Help Phone at 1-800-668-6868](#) provides kids and teens access to a professional counsellor by phone to discuss their issue or concern 24 hours a day.

[Kids Help Phone](#) provides online information and services in a format (design and language) aimed at kids and teens. Topics covered include being me, bullying, dating, emotional health, family, feelings, friendship, the Internet, LGBTQ, money, my body, physical health, school, sexting, violence and abuse.

[Kids Help Phone – Live Chat Counselling](#) provides kids and teens the opportunity to chat online, one-on-one with a professional counsellor. Chat services can be accessed from computer, smartphone or tablet. In British Columbia, chat is available Wednesday to Sunday, from 3pm to 11pm Pacific Standard Time.

11.20 TOWARD THE HEART

Visit the Toward the Heart website for information on naloxone and fentanyl. The website features an Overdose Survival Guide, a Train the Trainer Guide for the naloxone administration, a video on How to Use Naloxone, and more. Their website also features a [Find a Harm Reduction Site](#) tool to search for where you can pick up a naloxone kit in your community.

Toward the Heart is a project of the Provincial Harm Reduction Program and one of many initiatives of the [Harm Reduction Program](#) of the BC Centre for Disease Control.

11.21 VICTIMLINKBC

[VictimLinkBC](#) provides information and referral services to all victims of crime and immediate crisis support to victims of family and sexual violence, including victims of human trafficking exploited for labour or sexual services. VictimLinkBC is available toll-free by calling 1-800-563-0808.

All staff are trained victim service workers and can connect people to a network of community, social, health, justice and government resources, including victim services, transition houses and counselling resources. They also provide information on the justice system, relevant federal and provincial legislation and programs, crime prevention, safety planning, protection order registry and other resources as needed.

Services are confidential and available across British Columbia and the Yukon 24 hours a day, 7 days a week in more than 100 languages, including a number of North American Indigenous languages.

VictimLinkBC is also TTY accessible at 604-875-0885 or collect at **7-1-1**; available by text at 604-836-6381; and by email at VictimLinkBC@bc211.ca.

11.22 INDIAN RESIDENTIAL SCHOOLS RESOLUTION HEALTH SUPPORT PROGRAM

Provides mental health and emotional supports to eligible former Indian Residential School students and their families. The support is offered before, during and after their participation in Settlement Agreement processes and includes:

- Common Experience Payments,
- The Independent Assessment Process,
- Truth and Reconciliation Commission events and Commemoration activities.

The program's aim is to ensure that eligible former students of residential schools, and their families, have access to appropriate and safe mental health, emotional and cultural support. Services offered include cultural support, emotional support, professional counselling and transportation through a holistic approach, by a Cultural Support Worker or a Residential School Health Support Worker. Please call toll free 1-877-477-0775.

Note: IRSS Support Line – immediate, confidential, non-judgmental support 24/7: 1-866-925-4419.

11.23 RED CROSS DISASTER ASSISTANCE

Outreach teams with safety and wellbeing personnel can visit community on invitation of leadership. Also able to offer workshops in community on psychological first aid.

Website: www.redcross.ca

Toll-Free: 1-888-800-6493 / Wecare@redcross.ca

Senior Manager, Safety and Wellbeing Disaster Management – Alison Paul; T: 250-995-3524; Alison.Paul@redcross.ca

11.24 TREATMENT ACCESS BC PORTAL

<https://treatmentaccess.ca/>

A quick resource of treatment options for people struggling with addiction (process addictions also), family members, and service providers (medical, community, lawyers, judges, etc.) to identify the treatment options available to them based on each person's situation, needs, and wants. It requires people to answer a few basic questions via selecting the appropriate boxes (no actual writing

required). Questions range from age, region, (dis)ability accommodations, substance/behaviour, service type, payment type, etc. It also allows people to identify a need for cultural healing, fitness, and suboxone/methadone, etc.

11.25 OVERDOSE PREVENTION INFORMATION FOR FIRST NATIONS

Lethal Drugs are circulating in BC. Drugs like cocaine, crack, ecstasy, meth, and heroin can be cut with lethal drugs like fentanyl, carfentanil or W-18. People need to be aware that drugs they get from anywhere other than a pharmacy or a hospital may not be what the dealer says or believes they are.

Overdoses and overdose deaths are a pressing concern for all of us. A Framework for Action: Responding to the Overdose/Opioid Public Health Emergency for First Nations captures a system-wide response to slow and stop overdose.

If you or someone you love needs help, there are resources to support you. Resources can be found by following this link: <https://www.fnha.ca/what-we-do/mental-wellness-and-substance-use/overdose-information>

Effective February 1st, 2019 private clinics can also directly bill First Nations Health Authority (FNHA) for opioid agonist therapy (OAT) clinic fee costs charged to people in BC with First Nations status. Opioid agonist therapy is an effective treatment for people dependent on different types of opioids such as heroin, oxycodone, and fentanyl. The therapy involves medications such as Methadone or Suboxone. These medications prevent the effects of withdrawal and reduce cravings for opioids. Additional information and resources can be found by following this link: <https://www.fnha.ca/what-we-do/mental-wellness-and-substance-use/opioid-agonist-therapy>

12. TREATMENT CENTRES IN BC

12.1 FIRST NATIONS TREATMENT CENTRES IN BC

In British Columbia there are currently 10 residential treatment centres, funded through the National Native Alcohol and Drug Abuse Program (NNADAP). FNHA-funded treatment centres will be considered the first and primary option for addiction treatment. All First Nations clients are eligible for treatment at all FNHA-funded treatment centres at no cost. Simply contact the treatment centres below to see if they are able to take in the client.

Services are offered to males, females, youth (in one centre) and families. Services offered at treatment facilities vary but overall include services to clients with: physical disabilities; concurrent disorders; clients on methadone; family treatment; couples counselling; clients on suboxone; pregnant women; and clients on psychoactive medications. Services offer a variety of cultural and clinical interventions and support for First Nations in BC.

Please visit <https://www.fnha.ca/what-we-do/mental-wellness-and-substance-use/treatment-centres> for Application Package and contact information.

12.1.1 LIST OF FIRST NATION TREATMENT CENTRES IN BC

Treatment Centres	Description
-------------------	-------------

<p>Gya' Wa' Tlaab Healing Centre P.O. Box 1018 Haisla, B.C. V0T 2B0 Phone: (250) 639-9817 Fax: (250) 639-9815</p>	<p>The Gya' Wa' Tlaab Healing Centre offers this Early Recovery/Stabilization Program to all First Nations, Inuit and other people of Canada. This program can be defined as an assessment, orientation, and readiness phase to treatment.</p> <p>The Program utilizes the following program resources to assist clients: Acu-Detox, Physical Fitness, Psycho-educational group facilitation, Mental Health Counselling, Methadone Maintenance Support, Attending Physician, Attending Pharmacist, and Culturally Appropriate Ceremonies.</p> <ul style="list-style-type: none"> • 7 and 8 week Early Recovery/ Stabilization Program • 5 Intakes per Year • All Male Programs • 16 Bed Facility • Day Patient Clients can be arranged (male or female)
<p>Round Lake Treatment Centre 200 Emery Louis Road Armstrong, B.C. V0E 1B5 Phone: (250) 546-3077 Fax: (250) 546-3227</p>	<p>Programs</p> <p>1. 35–bed Treatment Centre 6-week Treatment Program addresses the impact of historic and intergenerational trauma by guiding participants through activities and ceremonies that help to resolve trauma, grief, and shame. Emphasis in the healing circle is on safety, trust, and self-care and facilitates wellness for indigenous trauma survivors.</p> <p>2. 10-bed Recovery Home Post treatment home for clients who require more assistance to further strengthen their wellness and recovery. Pre-treatment home for clients who require stabilization before entering treatment.</p>
<p>Carrier Sekani Family Services Addictions Recovery Program P.O. Box 1219 Vanderhoof, B.C. V0G 3A0 Phone: (250) 567-2900 Toll-free: 1-866-567-2333 Fax: (250) 567-2975</p>	<p>The Addictions Recovery Program (ARP) has a mission statement, "To create a healing environment by utilizing a holistic approach that promotes a cultural lifestyle free from addictions and restores a sense of pride in the Carrier and Sekani Culture." We believe the Carrier Sekani culture and spiritual way of living, which honours and respects all of creation, will empower our communities and strengthen our First Nations. The integrated Health and Wellness Addiction Recovery Program, "Lhet'sut'en" is delivered by our multidisciplinary team consisting of clinical counsellors and cultural knowledge holders. We believe culture is healing and incorporate a blend of traditional healing practices along with evidence based best practices in addictions treatment reflective of our program's vision statement: "Culture is Healing."</p> <p>During the winter months (November to April), our team visits member communities by request. We offer educational and support services with a</p>

	<p>focus on addiction, and one or two week treatment programs during the winter. Community visits are open to any northern British Columbia First Nations, based on our availability.</p> <ul style="list-style-type: none"> • Grief and Loss • Addictions awareness • Identity • Self esteem • Relapse Prevention • Trauma • Anger • Communication • Spirituality • Gambling • Shame and guilt • Effects of colonization • Suicide intervention and prevention • Lateral Violence • Family violence • Anger management • Co-dependency • Relationships • Overcome with depression • Understanding Brain chemistry to addiction solution
<p>Kackaamin 7830 Beaver Creek Road Port Alberni, B.C. V9Y 8N3 Phone: (250) 723-7789 Fax : (250) 723-5067</p>	<p>Kackaamin employs Certified Addiction Counsellors that facilitate educational workshops that broaden the knowledge of our adult clientele on a variety of topics and issues. Weekly individual, couple, and family counselling along with community capacity building support sessions.</p> <p>The educational workshops cover a variety of topics such as:</p> <ul style="list-style-type: none"> • Alcohol, drugs, and their effects • Behavioral addiction • Grief and loss • Communication • Trust • Boundaries • Defense mechanisms • Anger management • Co-dependency • Residential schools • Trauma • Spirituality and Cultural development • Cultural and traditional teachings • Healing ceremonies and sweat lodges.

	<ul style="list-style-type: none"> • Recreation with your family • AA/NA meetings • "The Virtues Project" • A parenting program
<p>Namgis Treatment Centre P.O. Box 290 Alert Bay, B.C. V0N 1A0 Phone: (250) 974-5522 Fax: (250) 974-2257</p> <p>Contact Patrick Davis: Patd@namgis.bc.ca Mary Hunt (Intake Coordinator): MaryH@namgis.bc.ca</p>	<p>Age: 19 and up</p> <p>To meet the goals of the program, a variety of themes are introduced during the six-week program. The program is designed to ensure maximum flexibility to meet client needs within theme areas. These theme areas include:</p> <ol style="list-style-type: none"> 1. Physiological and psychological effects of mood altering substances. 2. Family dynamics 3. Historical influences on substance abuse. 4. Abstinence from alcohol and addiction as a way of life 5. Spirituality 6. Self-help programs for after treatment (e.g.: Alcoholics Anonymous, Narcotics Anonymous, Adult Children of Alcoholics) 7. Self-awareness in the cycle of change <p>Trauma – This session introduces clients to the concept of trauma and its long and short-term effects. During the six weeks, understanding trauma helps in context with the sessions on grieving, suicide in the family, residential school, and family violence. Clients are provided with an opportunity to examine how unresolved trauma contributes to present day negative behavior and coping strategies. Steps to healing from trauma are examined with client input. Deeper issues of trauma are explored during one to one time or referred to Mental Health Services.</p>
<p>Nenqayni Wellness Centre P.O. Box 2529 Williams Lake, B.C. V2G 4P2 Phone: (250) 989-0301 Fax: (250) 989-0307</p>	<p>Mission Statement "To provide holistic healing to First Nations and Inuit youth, families, and communities in a safe and secure environment."</p> <p>About Our Team To achieve a safe team environment where employees respect one another, communicate effectively, and are able to efficiently carry out their duties and responsibilities" (Staff Purpose - <i>Developed in 2011</i>).</p> <p>Staff are certified by the Canadian Council of Professional Certification and receive ongoing training relating to their positions and as required by accreditation and licensing.</p> <p>Programs</p> <ul style="list-style-type: none"> • Family Alcohol & Drug • Youth & Family Inhalant • Continuing Care • Drug & Alcohol Information • Cultural Activities

<p>North Wind Healing Centre Box 2480 Station A Dawson Creek, B.C. V1G 4T9 Phone: (250) 843-6977 Fax: (250) 843-6978 intake@northwindwc.ca</p>	<p>The effects of alcohol and drug addiction are often devastating to individuals, families and communities.</p> <p>The North Wind Healing Centre offers a 45-day, culturally based, residential treatment program for ages 19 and up and a two-week program for youth ages 13 to 18.</p> <p>The Centre is located just North of Dawson Creek in the beautiful Peace River country. The facility includes a main "common" building, session and craft room, sweat lodge, exercise equipment, computers, counsellor's office, and administration building. It is 150 acres of wilderness that participants may freely walk.</p> <p>Each day begins and ends with smudging and prayer. Sweat lodge, Blanket, and Pipe Ceremonies introduce and reinforce the concept of sacredness by means of traditional culture.</p>
<p>Tsow-Tun Le Lum Society 699 Capilano Rd Lantzville B.C. V0R 2H0 Phone: (250) 390-3123 Fax: (250)390-3119</p>	<p>Tsow-Tun Le Lum means "helping house." We provide programs that address the issues of addictions, and healing survivors of trauma and residential schools. Our mission is to strengthen the ability of First Nations people to live healthy, happy lives and to have pride in their native identity. Tsow-Tun Le Lum is a registered non-profit society operating a fully accredited treatment centre in Lantzville, on Vancouver Island, British Columbia.</p> <p>THUY NAMUT PROGAM (Substance Abuse) Grounded in native culture and tradition, this is a 40-day intensive residential program available to First Nations people. Holistic in nature, the program is for those who are ready to put substance abuse behind them. Through carefully developed therapy experiences that build on existing strengths and aspirations, each participant discovers their own unique pathway for continuing recovery.</p> <p>KWUNATSUSTUL (Trauma) "Holding Hands, Standing Together" Second Stage Recovery Program <i>Funded by First Nations Health Authority</i> Introduction: Kwunatsustul is a Second Stage Recovery program with a focus on trauma. This program is designed to address the multitude of Mental Health and Trauma issues being faced in community. The program is holistic including traditional and contemporary methodologies: the program addresses emotional, mental, physical, and spiritual health and well-being of First Nations Peoples.</p>
<p>Telmexw Awtexw Treatment Centre Salish Way Agassiz, B.C., V0M 1A1</p>	<p>Outpatient / Community based Accessible to clients with physical disabilities, Pregnant women, Court referral or Corrections clients, Clients taking other psychoactive medications</p>

Phone: (604) 796-9829 Fax: (604) 796-9839	Transportation provided to outlying community members to enable attendance at the Day program.
Wilp Si'Satxw House of Purification Box 429, Cedarvale-Kitwanga Road Kitwanga, B.C. V0J 2A0 Phone: (250) 849-5211 Fax: (250) 849-5374	<i>Program length:</i> <i>42 days</i> In-patient/Adult co-ed <ul style="list-style-type: none"> • Residential schools • Child counselling • On-the-land • Couples counselling • Gender-based • Clients with physical disabilities • Family treatment • Pregnant women

12.1.2 MAP OF FIRST NATION TREATMENT CENTRES IN BC:



12.2 FIRST NATIONS RECOVERY CENTRES IN BC

Recovery Centres	Description
Esk'etemc Recovery House Letwilc Ren Semec Centre 949 Cougar Trail Alkali Lake, BC	Vision Alkali Lake - known for addressing substance use disorder in the community using traditional cultural values, and sharing their success worldwide.

VOL 1B0

Telephone: (250) 440-5651,
extension #261

Mission

Letwilc Ren Semec Centre guides and assists clients on the path toward recovery while reintegrating a healthy lifestyle in a culturally safe recovery service.

About the program

The recovery centre includes five rooms for an adult substance use supported recovery housing service. The centre promotes recovery for individuals with substance use challenges by providing safe and secure housing, and promoting reintegration into the community by helping clients secure housing upon discharge.

Priority is given to Aboriginal clients from the Interior. Clients may stay up to six months. We accept individuals who have fully completed an alcohol and drug treatment program.

Fees for the services may apply. Contact us for more information.

12.3 NON-NNADAP TREATMENTS CENTRES IN BC

Non-National Native Alcohol and Drug Abuse Program (NNADAP) / provincially-funded treatment beds will be considered as the next option for addiction treatment if an FNHA-funded treatment centre bed is not available. The Province of BC (Ministry of Social Development and Poverty Reduction) is responsible for all per diem payments in licensed and/or registered treatment facilities off-reserve for individuals who are eligible for income assistance. First Nations are eligible to access provincially-funded addictions treatment facilities and programs on the same basis as other BC residents.

Any treatment centre funded through a subsidy application for in-patient addiction treatment must be licensed under the Community Care and Assisted Living Act or registered with the Assisted Living Registrar. A \$40 per day subsidy is available for a maximum of 90 days. FNHA accepts no responsibility for treatment that is not given prior approval.

12.3.1 FREQUENTLY ASKED QUESTIONS:

<p>I have a client seeking treatment. How can my client enter into a treatment program?</p>	<p>A client needs to have a referral partner complete the Subsidy Application for In-patient Addiction Treatment in full. FNHA will only review applications submitted by one of the following referral partners:</p> <ul style="list-style-type: none">• Community Addictions Worker• Addictions Counsellor, or• Social Worker <p>Outpatient Clinic Worker Referrals will not be accepted directly from treatment centre staff referring to their own centre. This is to ensure that the client is receiving the appropriate services they need prior to treatment and to ensure follow-up with after-care plans. <i>If a client needs assistance in finding a counsellor or addiction worker, please contact FNHA's Mental Health and Wellness team at: 1.855.693.3033 or email: nonfnhafundetdc@fnha.ca</i></p>
---	--

<p>How can my client become eligible for funding at a non-FNHA funded treatment centre?</p>	<p>Certain requirements must be met before funding can be approved for a non-FNHA funded treatment centre. Failure to complete the pre-requisites will result in a delay or possibly a denial of the client’s application. The following requirements must be met:</p> <ol style="list-style-type: none"> 1. The referral partner has checked with the FNHA-funded treatment centre network for the availability of a treatment bed and none are available. 2. The referral partner has tried to access provincially funded treatment beds. 3. The referral partner has contacted the Ministry of Social Development and Poverty Reduction to apply for provincial income assistance and the client has been officially deemed ineligible for funding. 4. The client is eligible and registered for FNHA Health Benefits. 5. The client must be free of commitments to the judicial system at the time of application. In order to ensure treatment has minimal interruption, all court appearances and hearings for probation must be completed prior to the commencement of treatment. This also applies to individuals ordered by the court to attend treatment as part of their release plan. <p>When those requirements are met, the client can be considered on an exception basis if:</p> <ul style="list-style-type: none"> • The client has a demonstrated need for specialized treatment services for concurrent disorders (mental health and substance use comorbidity) • The client has an identified need for longer term treatment • The client has been deemed ineligible for FNHA-funded treatment centre services due to complex health conditions • FNHA-funded treatment centre services are not available when a client is ready for treatment (e.g., wait-time is more than 7 days) <p>If all requirements are met, the referral partner can complete a Subsidy Application for In-patient Addictions Treatment</p>
<p>Why does my client need to contact the Ministry of Social Development and Poverty Reduction if they are First Nations? Why can’t they go directly to FNHA for funding?</p>	<p>The Ministry of Social Development and Poverty Reduction is responsible for funding per diem treatment costs for residents of BC who are eligible for income assistance. Per diems cover the costs of attending treatment homes registered through the Assisted Living Registry and facilities licensed under the Community Care and Assisted Living Act operated by regional health authorities. FNHA asks that referral partners support clients in applying for provincial income assistance. FNHA will only be able to fund clients who are ineligible for social assistance from the Ministry. Typically, clients are eligible for social assistance if they:</p> <ul style="list-style-type: none"> • Are already receiving social assistance or other types of assistance (e.g., they are a Person with Disability) • Have no fixed address (NFA). For more information on how to apply for social assistance, please visit the Ministry website. <p>Please note that: Individuals will not be required to apply for income assistance through the Ministry of Social Development and Poverty Reduction if they receive:</p> <ul style="list-style-type: none"> • Income assistance on-reserve and have housing that requires them to remain on Band Income Assistance • Employment Insurance benefits due to pay back requirements
<p>My client lives on-reserve. How can my client become eligible for funding from the Ministry?</p>	<p>If a client is living on-reserve and is deemed eligible for provincial income assistance, the Ministry will fund their treatment if it is off-reserve and treatment takes place at a home registered through the Assisted Living Registry or a facility licensed under the Community Care and Assisted Living Act by regional health authorities. Please contact nonfnhafundetdc@fnha.ca if you experience any challenges with the Ministry application process.</p>
<p>How do I know if a Non-FNHA-funded treatment program will be covered by FNHA?</p>	<p>FNHA will only fund clients seeking treatment at a licensed or registered treatment centre that accepts FNHA’s standard \$40 per diem rate for a maximum of 90 days, totaling \$3,600 per fiscal year.</p>

How can my client apply for treatment outside of BC?	If the client is from BC but is currently a resident of a different province, please contact the provincial health authority in the client's province of residence or Indigenous Services Canada (ISC) for funding assistance. More information about ISC can be found on their website.
The application I submitted was approved. How long is the approval good for?	Funding approvals are valid for three months after the approval date. A client may attend treatment any time before that
My application was put on hold. Why?	The most common reason applications are put on hold is due to pre-requisites not being met. Please refer back to your recommendation letter to see what steps are needed before the application can receive a second review. For a further explanation, please contact us at: nonfnhafundedtc@fnha.ca
Why was my application not approved?	The most common reasons for applications not being approved is that the client did not receive prior approval for funding before entering into treatment or the prerequisites were not met. FNHA cannot fund treatment that has not received prior approval.
How can I make an appeal if my application was denied?	To appeal the decision, you can request a copy of the appeals form from FNHA. Complete and submit the appeals form to FNHA within 10 days of receiving the denial letter. You will need to provide a detailed explanation as part of your appeal. The appeals form will be reviewed by an FNHA clinician, and the assessment will be sent to the Vice President of Programs and Services and the Chief Operating Officer for a final decision. You will be notified of the decision 10 days after submitting the appeals form to FNHA. Decisions made through the appeal process are final.
My client was previously approved for funding and they are now in need of an extension. Will I have to make a second application?	No, you won't need to make a second application. You can request an extension instead. Please email nonfnhafundedtc@fnha.ca for all extension requests. Extension requests must include a rationale from the treatment centre detailing why an extension is recommended.
How is treatment paid for once the application has been approved?	FNHA will pay the treatment centre directly and all invoices should be sent directly to FNHA. FNHA will only pay the amount agreed upon in the approval letters that were sent to both the referral partner and the treatment centres. FNHA does not pay treatment centre fees for referrals that did not receive prior approval.

12.3.2

NON-NNADAP FUNDED TREATMENT CENTRES WHO ACCEPT FNHA SUBSIDY:

Treatment Centres	Description
Peardonville House 825 Peardonville Rd Abbotsford, BC V4X 2L8 Phone: (604) 856-3966	<u><i>Intensive Treatment Program:</i></u> A 10 week treatment program designed for women who want to stop the cycle of substance misuse in their life. The program includes Life Management Skills, Art Therapy, Sewing, Meditation, Yoga, Exercise, Relapse Prevention, Treatment Planning, access to trauma counselling post-treatment, personality testing, pre-employment workshops and more. This program is appropriate for women who are seeking an intense program of recovery, which includes group facilitation, group therapy and individual counseling support.

	<p><u>Mom's & Tots:</u> Women with children are expected to participate fully in the Peardonville House Intensive Residential program. Clients have the opportunity to bring their under-school-age children to treatment with them to share the family recovery experience. Mothers and children have specialized living quarters which enables them to live together as a single family unit. Mothers have access to professional daycare while they are in programming. However, the Mother is respected as the primary caregiver and is responsible for the safety and care of her children at all times.</p>
<p>Mollies House Located on the same grounds as Peardonville House.</p>	<p>A specialized residential program designed for women who are seeking a safe haven from substance misuse but are not yet ready for an intense residential treatment program. Mollie's residents are encouraged to participate in a modified treatment program at their own pace until they are ready to move over to the intensive program or go back home. Clients meet regularly with the Mollie's House Coordinator and decide together when they feel ready to begin the intensive program. The goal of Mollie's Place is to empower women to overcome barriers, meet their basic needs and teach life skills that will enable them to transition successfully either to the intensive program or back to their homes in the community.</p>
<p>Pacifica Treatment Centre 1755 East 22th Avenue Vancouver, BC, V5N 1Y9 Contacts: Director - Alison (604) 872-5517 Ext. 228 Andrew Stone (604) 675-2455 Ext. 22564 (to discuss \$40/per day) \$225/per day</p>	<p>Intensive Residential Treatment provides individuals with alcohol and/or drug dependencies the opportunity to understand their pattern of use, accept the consequences and make personal changes that promote an alcohol and drug-free lifestyle. Pacifica uses a comprehensive, client-responsive approach that works with an individual's sense of self in terms of thoughts, feelings, physical health, family and community.</p>
<p>Campbell River & N.I. Transition Society & Ann Elmore House 1116 Dogwood St #101 Campbell River, BC V9W 3A2 Phone: (250) 287-7384</p>	<p>The Campbell River and North Island Transition Society operates the Ann Elmore Transition House, Rose Harbour Women's Transitional Housing, and safe homes in rural communities and provides outreach services to women and children in the Campbell River and North Island area.</p> <p>Ann Elmore House is a temporary shelter for women, and their dependent children, who are at risk of violence. Programs also include detox, supportive recovery and stabilization services. Our Transition House has 9 bedrooms and 20 beds.</p> <p>Rose Harbour offers a program for personal change which includes subsidized housing. They have 27 rooms ranging in size with 3 which are wheelchair accessible. They also oversee and provide support to safe homes located in Gold River and on Cortes Island.</p>
<p>Turning Point Vancouver, BC</p>	<p>Currently provides 63 beds for men and women and trans people in facilities in Vancouver, Richmond and North Vancouver. The program is typically 3-5</p>

<p>Phone: (604) 875-1710 intaketpv@turningpointrecovery.com</p>	<p>months in duration. Their mission is to improve the health and well-being of individuals with addiction issues, their families, and the communities they serve through a continuum of residential and outpatient support services, education and leadership. They provide a safe, structured and supervised residential environment to facilitate the physical, mental, emotional, and spiritual recovery of the individual. Residents participate in individual and group counselling, including: life skills education, employment and education readiness skills and referrals, stress and coping techniques, conflict resolution and anger management, relapse prevention; and discharge, transition and aftercare planning.</p>
<p>Ellendale – Elizabeth Fry Society Lower Mainland Phone: (604) 520-1166</p>	<p>Offers a live-in, substance use program for opiate-using women for three months of treatment. Program provides addiction treatment, prevention counselling and help with developing long-term plans.</p>
<p>Together We Can 2831 Kingsway Vancouver, BC V5R 5H9 Phone: (604) 451-9854</p>	<p>Our mission is to educate and support men and families who desire a new life in recovery. Together We Can provides over 310 men with 60-90 days of recovery-focused addiction treatment followed by supported recovery housing opportunities in a therapeutic residential setting. Our continuum of care includes residential and outpatient addiction treatment, supported recovery living, continuing care, alumni initiatives and a support program for families which form an integrated approach to recovery.</p>
<p>Hope for Freedom 3237 Liverpool St Port Coquitlam, BC V3B 3V5 Phone: (604) 464-0475</p>	<p>A residential program for men seeking real life transformations and are serious about breaking the addictions that cripple their lives. Homes for early recovery through second stage and transitioning back into society are available.</p>
<p>Step by Step 12442 78A Ave Surrey, British Columbia V3W 7X2 Phone: (604) 591-3153</p>	<p>Provides men's, women's and co-ed recovery homes in Surrey for adults requiring alcohol and drug treatment. Office hours are 8:30 am to 5 pm. Monday to Friday.</p>
<p>Heartwood Centre for Women BC Women’s Hospital + Health Centre 4500 Oak Street Vancouver, BC V6H 3N1 Phone: (604)-875-2424 ext.2032 Toll free in B.C only: 1-888-300-3088 ext.2032 Heartwood@cw.bc.ca</p>	<p>A 30-bed residential facility that provides integrated treatment for women (19+), including trans women, across British Columbia who struggle with severe substance use and mental health challenges. They will develop a customized care plan for you based on your needs, challenges and history. Heartwood is a 90 day program.</p>
<p>Westminster House TC for Women 228 7th Street New Westminster, BC, V3M 3K3 Phone: (604) 524-5633 info@westminsterhouse.ca</p>	<p>Westminster House is a long term residential recovery center for women healing from addiction. Westminster House promotes and facilitates a desire for recovery, helping women help themselves overcome addiction. The recovery program provides the necessary tools to women, so they can</p>

	trust their own ability to reclaim a drug-free existence. The primary program is 90 days in length. Unable to commit to 90 days? Please ask about the condensed program and the 10-day into to recovery.
Comox Valley Recovery Centre 641 Menzies Ave Courtenay, B.C. V9N 3C3 Phone: (250) 338-7144	A residential recovery facility with a 30, 60 or 90-day program for men ages 19 and older experiencing problematic substance use. The program is based on 12 Steps and an evidenced based approach designed to address the needs of each individual person who enters treatment. Program delivery is group based with individual counselling sessions. The treatment length may be extended based on clinical needs and treatment plan. CVRC offers balanced meals, physical activity, facilitated educational group sessions and one on one counselling to provide an excellent context for personal growth.
Kinghaven 31250 King Rd Abbotsford, BC V2T 6C2 Phone: (604) 864-0039 Fax: (604) 864-9420	A 62 bed recovery house for men. Recovery includes a 70-day intensive residential treatment program dealing with problematic substance use issues that follows a Harm Reduction Model of addiction treatment. The program is comprised of four phases: Orientation, Program Development, Group Therapy, Transitional and Aftercare Planning. Throughout the program clients have the opportunity to participate in education sessions on: keys to recovery, emotional regulation, living your values, stress management, grief and loss, communication, models of recovery, spirituality, trauma and recovery, overcoming stigma, mental health, creativity, as well as family dynamics. Client must be 3-5 days clean and sober on arrival.
Bridgeway 2604 Enterprise Way #8 Kelowna, BC V1X 7Y5 Phone: (250) 763-0456 Ext. 402	A highly-structured, intensive 6-week program for an alternating group of 20 adult men or women, aged 19 or older, seeking substance use treatment. Treatment is offered in a safe, live-in environment at our facility on Gray Rd. It is best suited for individuals with more complex and/or chronic use for whom other community-based treatment approaches have not been effective.
Vision Quest Recovery Society 7185 Tunkwa Lake Rd Logan Lake, BC V0K 1W0 Phone: (604) 946-1841	The VisionQuest Recovery Society is committed to helping individuals heal from the disease of addiction by empowering them to make better lifestyle choices. We bring substance-addicted clients into a comprehensive healing journey, involving mind, body and spirit based on 12-step philosophy. We are especially attuned to the needs of individuals with a history with the courts, and actively cooperate with the relevant authorities to further the interests of both our clients and, by extension, the wider community.
Amethyst House 625 England Ave Courtenay, BC V9N 2N5 Phone: (250) 871-2570 recovery@amethysthouse.ca	This is a women's sheltered program with an emphasis on recovery from substance use that has negatively impacted residents' lives. Staff work with each woman to carry out her individual recovery plan that includes substance use education, safety planning, relapse prevention skills, harm reduction, developing healthy routines, building healthy supportive

	<p>relationships, self-care, problem solving, stress management, exercise, recreation and relaxation.</p> <p>This facility requires a referral from a Provincial Mental Health and Addictions office.</p>
<p>InnerVisions 1937 Prairie Ave Port Coquitlam, BC V3B 1V5 Phone: (604) 468-2032 (Oliver McNeil) Continuous Intake helpme@InnerVisionsrecovery.com</p>	<p>InnerVisions Recovery Society is a safe and structured alcohol and drug rehab center created and operated by people who have overcome their own struggle with alcohol and drug addictions.</p> <p>All employees and counsellors draw from their own experiences in recovery and now lead clean and sober lives. Our alcohol and drug rehab programs are highly structured. We apply a rigorous recovery program with a proven strategy.</p>
<p>Last Door Recovery Centre 327 8th St New Westminster, BC V3M 3R3 Phone: (604) 525-9771</p>	<p>Last Door offers Private Medical Detox, 10 day Intro to Recovery Program, Return To Work Treatment Program, and longer, open ended addiction treatment and Continuing Care Addiction Recovery Programs. Last Door's Addiction Treatment Centre provides licensed, accredited and evidence-based medically led addiction treatment services in a vibrant homelike setting. Specialized, effective and coordinated residential recovery programs are offered for youth, emerging adults and adult men. 14 to 18, 19 to 30, and 30 years of age and over. Last Door also offers family enhancement programs for partners, parents, grandparents and siblings. Last Door's treatment center provides services for alcohol rehab, drug addiction treatment, and gaming addiction.</p>
<p>Giving Back Society 3608 Knight Street Vancouver, BC V5N 3L5 Cell: (604) 306-8511 (Ray Jay Williams) or Office: (604-874-8555)</p>	<p>A non-profit organization that works with adult men (19+) who suffer from substance misuse and who desire & are committed to changing their lives to become productive members of society. Giving Back Society provides these men with community living shelter, healthy food, zero-tolerance program of relapse prevention, group and one-on-one counselling plus access to NA, AA and 12-Step programs. There is experienced live-in staff on a 24/7 basis. We provide workshops in how to rebuild relationships and learn to integrate back into society. Access is provided to services and resources needed to succeed in the rebuilding of their lives.</p>
<p>Seabird Island The contact number for referrals is 604 845 5034</p> <p>The website is www.ayelexw.seabirdisland.ca</p>	<p>A 'family' home for Indigenous adults 19 years and up. Building on traditional healing and practices, building culture, strength and community for success.</p> <p>Have opened the doors to the Fraser Health funded recovery home for men dealing with substance use issues – the women's home will open at the end of March.</p>

13. ADDITIONAL TRAINING RESOURCES

13.1 JUSTICE INSTITUTE OF BC

Offers online courses that include:

Introduction to Disaster Psychosocial Services: Either 30-minute modules narrated by mental health professionals to introduce the field of disaster mental health to mental health workers

Website: <http://www.jibc.ca>

Toll-Free: 1-888-865-7764/ T: 604-528-5590 / infodeck@jibc.ca

For Registration: Toll-Free: 1-877-528-5591/ T: 604-528-5590 / register@jibc.ca

13.2 MENTAL HEALTH FIRST AID – FIRST NATIONS TRAINING

Available through the Mental Health Commission of Canada

This 20-hour course is for everybody in a First Nations community setting. It results in increased confidence and skills to help those experiencing a crisis and/or developing a mental health problem. Just like physical first aid is provided until medical treatment can be obtained, mental health first aid is given to those experiencing crisis or distress until appropriate support is found. Crisis first aid skills learned address: overdose response; acute stress reaction; panic attack; suicidal behavior; self-harm; psychotic episode.

Website: <https://www.mentalhealthcommission.ca/English/resources/mental-health-first-aid>

Toll-Free: 1-866-989-3985 / Email: mhfirstnations@mentalhealthcommission.ca