



THUNDERBIRD PARTNERSHIP FOUNDATION  
**TAKING FLIGHT**  
2016/17 ANNUAL REPORT

## VISION

**Cultivating and empowering** relationships that connect us to our **cultural strengths** and identity within **holistic and healthy communities**.

## MISSION

The Thunderbird Partnership Foundation, a division of National Native Addictions Partnership Foundation Inc., is the **leading culturally centred voice** advocating for collaborative, integrated and holistic approaches to healing and wellness.

## MANDATE

Thunderbird Partnership is the **national voice** advocating for Inuit and First Nations **culturally-based** addiction services.

The Thunderbird Partnership Foundation has a centralized office located on the Delaware Nation Territory in southwestern Ontario.

**Main Office**  
22361 Austin Line  
Bothwell, ON  
N0P 1C0

**Phone:** (519) 692-9922  
**Toll Free:** 1-866-763-4714  
**Fax:** (519) 692-9977  
**E-Mail:** [info@thunderbird.org](mailto:info@thunderbird.org)

Office hours are 8:30 to 16:30 ET.

Our website is [www.thunderbirdpf.org](http://www.thunderbirdpf.org)

# TABLE OF CONTENTS

Page 1	Message from our Executive Director and Board President
Page 3	Infographic: Taking Flight
Page 5	Strategic Objectives

## 1 Create Strategic Partnerships

Let's Talk Cannabis	p.7
Legalization of Cannabis	p.8
Opioid survey ready for use	p.9
Epigenetics	p.10
FNMWC Implementation Guide available soon	p.11

## 2 Support Evidence Based Culture Approaches

Life promotion to address Indigenous suicide	p.12
Increased training role continues	p.14

## 3 Communications

Connecting with Culture for Life	p.15
Thunderbird presents to Standing Committee on Indigenous suicide	p.16
Webinars	p.17
Engaging through social media	p.17
2016/17 Conferences & Events Listing	p.18
Making connections at UNGASS	p.19
Our Committee Work & Advisory Roles in 2016/2017	p.20

## 4 Improve Information Management

AMIS use provides quality data	p.22
Measuring wellness with the NWA™	p.23
Infographic: NNADAP	p.24
Infographic: NYSAP	p.25

## 5 Supporting Regional Strategies

NNADAP/NYSAP Wage Parity update	p.25
Methadone Treatment Services Advisory Committee	p.27
Ministry of Health & Long-Term Care Leadership Council	p.28
Focusing on Land-Based Programs	p.29

Page 29	A word about translation
Page 30	Finance Report
Page 31	Our Board of Directors
Page 31	New Staff
Page 32	Celebrating our 11% advantage
Page 33	Our Staff

# MESSAGE FROM OUR EXECUTIVE DIRECTOR AND BOARD PRESIDENT

## Dear Friends,

Our capacity to respond to requests from First Nations communities, treatment centres and other organizations has been supported through new partnerships and we want to begin by thanking the various experts in mental wellness for aligning with purpose. Through these relationships, Thunderbird continues to support efforts to address suicide crisis and opioid crisis among First Nations communities. These experiences tell us we still have a long journey towards health equity to ensure mental wellness among First Nations people.

A systems approach to equity in mental wellness among First Nations is championed in the Assembly of First Nations Health Transformation Agenda and Thunderbird appreciates the opportunity to collaborate in this initiative. Data on substance misuse and mental wellness are critical for informing our direction and for Honouring the Strengths of the national network of treatment centres. The Addictions Management Information System (AMIS) provides us with such data; for example, opioid misuse among youth entering one of the national youth residential treatment centres has grown by 25% over the past year and there is a 44% increase in opioid misuse among adults entering treatment since 2012. While the issue of opioid misuse is growing, our national system of treatment centres are responding.

We know the solutions...culture is the foundation for our vision of wellness and we are steadily seeing progress in mental wellness through the Native Wellness Assessment™. Across the 85 First Nations communities who are monitoring their mental wellness outcomes through the NWA™ and the national network of youth and adult residential treatment centres, we see a 17% increase in Hope, Belonging, Meaning and Purpose; with the greatest gains for adults in Meaning and Purpose and for youth Hope and Belonging.

As we continue to support the implementation opportunities of the *Honouring Our Strengths: A Renewed Framework to Address Substance Use Issues Among First Nations in Canada* (HOS) and the *First Nations Mental Wellness Continuum Framework* (FNMWC), the Thunderbird Partnership Foundation is focused on supporting community directed needs for building capacity towards mental wellness. For example, we continue supporting conversations between First Nations communities and various partners to establish community-based treatment for opioid misuse, prepare for the legalization of cannabis, and respond to intergenerational trauma using culture as the foundation.



“WE KNOW THE SOLUTIONS...**CULTURE IS THE FOUNDATION FOR OUR VISION OF WELLNESS AND WE ARE STEADILY SEEING PROGRESS...**”



Thunderbird has also responded to national priorities through increased attention to the critical relationship of First Nations to the land and their use of culture to facilitate mental wellness. We look forward to sharing with you two service delivery models this year, one on Crisis Prevention, Response and Recovery and another on Land-Based Services, as well as an Implementation Guide for the First Nations Mental Wellness Continuum Framework.

We will continue to focus on partnering to build capacity and engaging in initiatives that are focused on systems level change toward Hope, Belonging, Meaning and Purpose.

These are the stories you can expect to see in our 2016/2017 Annual Report.

Thank you for your good work and for your friendship,

**Carol Hopkins**  
**Executive Director**

**Austin Bear**  
**President**

# THUNDERBIRD PARTNERSHIP FOUNDATION

## TAKING FLIGHT

The theme for this year's annual report is Taking Flight, as this best symbolizes our organization's second year since our rebirth as the Thunderbird Partnership Foundation in 2015, and year two of our Strategic Plan. Fiscal 2016/2017 saw continual expansion into training and development, additional partnerships, webinars, publications, communications, and connection with our stakeholders at conferences and events across Canada, all of which are firmly rooted in culture, Indigenous Knowledge sharing and in support of the HOS and FNMWC Frameworks.

**Here's what happened in 2016/2017!**

**669** TRAINING PARTICIPANTS  
UP FROM 623 LAST YEAR,  
REPRESENTING AN INCREASE OF 7%

### 2016/2017 TRAINING ROSTER

### SESSIONS

**NEW!** Using Trauma Informed Approaches in Our Work: From Understanding to Practice



**NEW!** Pharmacology: Understanding Opioid Addiction & Treatment



Strength-Based Addiction Care



Buffalo Riders Early Intervention Train-the-Trainer/ Support for French Facilitator Training



Culture as Foundation



Native Wellness Assessment™



Buffalo Riders Early Intervention Training



Care Facilitation



Emotional Intelligence (EQ)



Cultural Service Delivery



**TOTAL SESSIONS 27**

*Coming soon! First Nations Mental Wellness Continuum Framework Implementation*

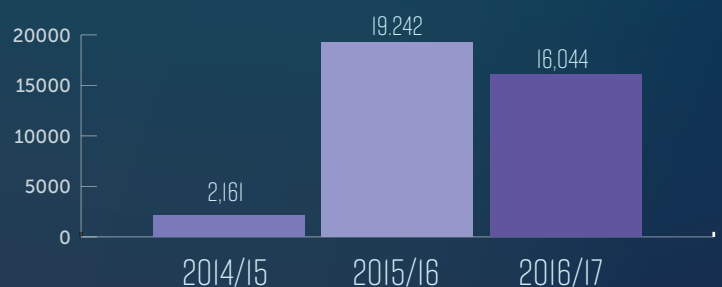


**16,044**

**DOCUMENTS DISTRIBUTED IN 2016/2017**

Thunderbird is holding its momentum in relation to the number of resources printed and distributed this year, which confirms our resources remain a much sought-after commodity at conferences, events, and training sessions.

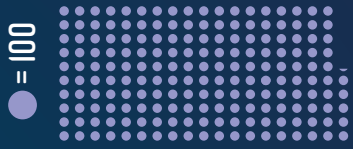
### DOCUMENTS DISTRIBUTED (OVER LAST THREE FISCAL YEARS)



# THUNDERBIRDPF.ORG VISITOR STATISTICS

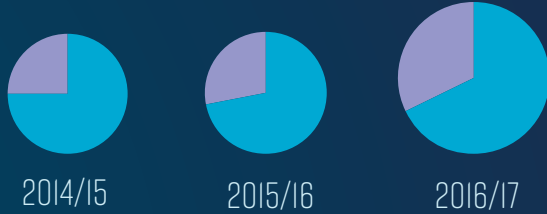
**18,534** VISITOR SESSIONS

2014/15 - 13,487 VISITOR SESSIONS



## NEW VISITORS | RETURNING VISITORS

(more people are coming back)



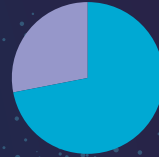
**42,949** TOTAL PAGEVIEWS



# CULTUREFORLIFE.CA VISITOR STATISTICS

(LAUNCHED SEPTEMBER 2016)

## NEW VISITORS | RETURNING VISITORS



**814** TOTAL PAGEVIEWS

**660** VISITOR SESSIONS

## FACEBOOK ENGAGEMENT

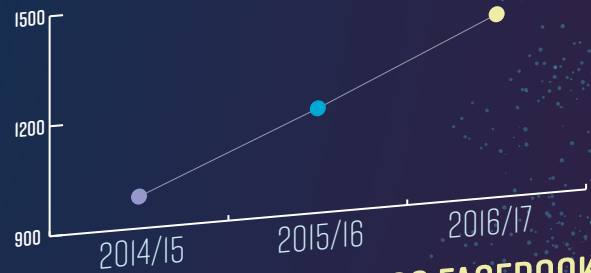
### TOP POSTS

- **6.4K** – AFN Special Chiefs Assembly, Thunderbird Assembly presentation
- **6.2K** – Trauma Informed Training in Charlottetown
- **5.3K** – Strength Based Training in Nipissing First Nation
- **5k** – Launch of new Culture for Life webpage \*\*
- **3.1K** – Pharmacology Training, Dartmouth

\*\*Note: Through the use of Thunderclap, a social media tool developed to increase engagement, we successfully reached a combined total of more than 62K people, on both Facebook and Twitter platforms in September 2016, to launch cultureforlife.

**1,399** PAGE LIKES

16% increase over 2015/2016, and 30% more than 2014/2015 – the year before our re-brand as Thunderbird Partnership Foundation!



AVERAGE MONTHLY REACH - **13,000** FACEBOOK USERS

## TWITTER ENGAGEMENT

### TOP TWEETS

**1K impressions** - Definition of Indigenous Wellness tweets at Atlantic Summer Institute's conference on children's mental health in August 2016 in Charlottetown. This event also earned us **18 new followers**.

**633 impressions** - AFN Youth Summit tweets, Niagara Falls, July 2017

**2,363** FOLLOWERS  **8%** OVER LAST YEAR

AVERAGE MONTHLY IMPRESSIONS - **11,000**

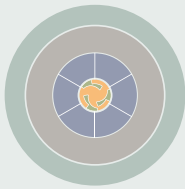
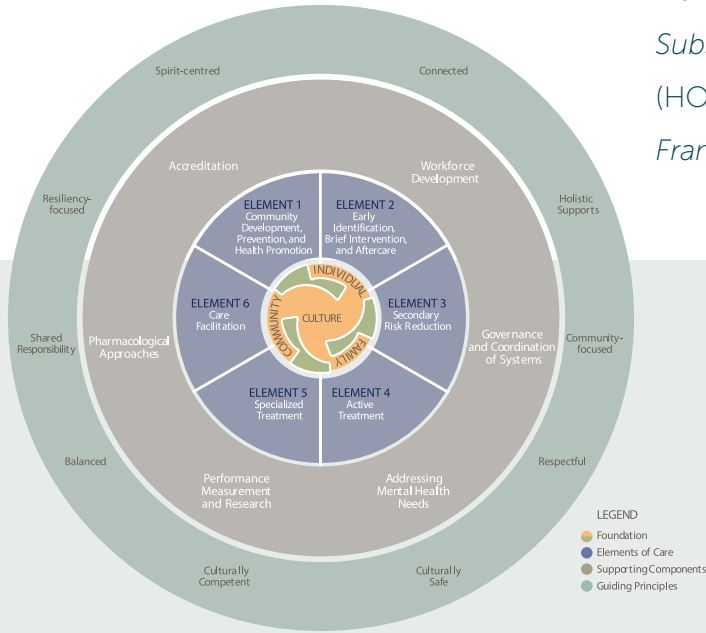
(impressions are actual engagement after the tweet has been delivered to various Twitter streams)



# STRATEGIC OBJECTIVES

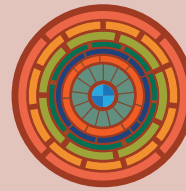


Fiscal 2016/2017 marks year two of our three year Strategic Plan, which outlines how we promote and implement both the *Honouring Our Strengths: A Renewed Framework to Address Substance Use Issues Among First Nations People in Canada* (HOS) and the *First Nations Mental Wellness Continuum Framework* (FNMWC).

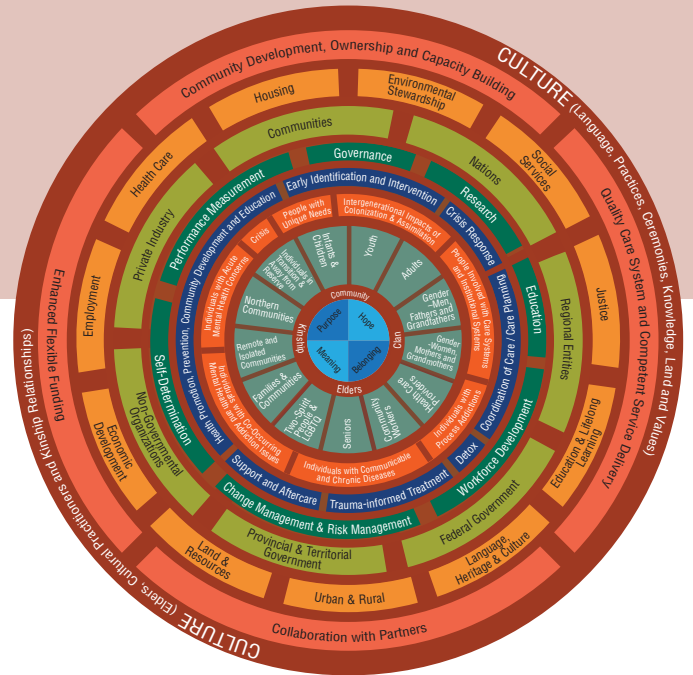


The HOS outlines a **continuum of care supporting strengthened community, regional and national responses** to substance use issues.

1 - Mental Wellness is a strength-based term that includes both substance use and mental health issues.



The FNMWC's primary focus is **supporting mental wellness<sup>1</sup> through establishing collaboration and coordination of services and supports**. Both frameworks promote First Nations culture as central and foundational to a systems approach.



Our five Strategic Objectives are outlined on the next page. As you read this year's Annual Report, look for the **corresponding framework icon and objectives icon** to see how these activities inform our annual operating workplan and re-connect to our organization's mandate.







**CREATE STRATEGIC PARTNERSHIPS** to promote the *HOS Renewal Framework* and *FNMWC* framework implementation, within corporate/industry sectors, as well as mental health, prescription drugs, population health: women & youth, and looking for national & international networking and merger opportunities.



**SUPPORT EVIDENCE BASED CULTURE APPROACHES**  
to promoting mental wellness



**COMMUNICATIONS**, which includes rebranding THUNDERBIRD PARTNERSHIP FOUNDATION, position papers on substance use, mental wellness, corporate engagement, media packages, *AMIS*, and tradeshow booths.

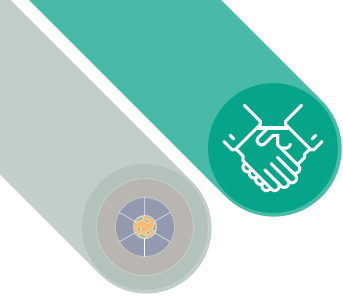


**IMPROVE INFORMATION MANAGEMENT** through implementation of the Addictions Management Information System (*AMIS*) and culture based evidence, which includes establishing governance of *AMIS* and leveraging culture based data to promote strengths of NNADAP/NYSAP for increased funding.



**SUPPORTING REGIONAL STRATEGIES**, which includes supporting regional reviews/redesign of Thunderbird Partnership Foundation and linking Regional/Provincial Addictions/Mental Health Strategies with *HOS & FNMWC* frameworks.





# LET'S TALK CANNABIS

With legalization of cannabis on the horizon, the Thunderbird Partnership Foundation continues to work with its partners to develop information and tools for communities to support meaningful dialogue. The research project, *Let's Talk Cannabis*, is a partnership with the University of Victoria's Centre for Addictions Research of British Columbia (CARBC). It is supported by a grant from the Canadian Institute for Health Research (CIHR).

The Thunderbird Partnership Foundation has the lead in developing and implementing tools that will be tested in a First Nations school, First Nations community (rural and remote) and in a tribal council for relevancy from various perspectives.

Our focus in this national project is to help Indigenous communities in Canada better understand differing points of view on cannabis and focus on the needs and interest of the community, such as building the resilience of young people or addressing cannabis use in

public spaces. This more communal and functional focus to the dialogue will promote a more meaningful approach to supporting First Nations communities in preparation for the legalization of cannabis.

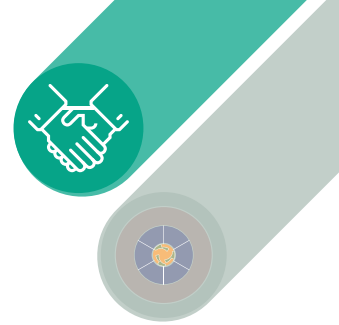


OUR FOCUS IN THIS NATIONAL PROJECT IS TO  
HELP INDIGENOUS COMMUNITIES IN CANADA  
**BETTER UNDERSTAND DIFFERING POINTS OF  
VIEW ON CANNABIS**



The two-phase project will be completed in August 2018.





# LEGALIZATION OF CANNABIS

In light of Canada's move to legalize the recreational use of cannabis, the Thunderbird Partnership Foundation has been sharing unbiased information with First Nations communities to inform local discussions. Culturally relevant presentations were given at the Union of Ontario Indian's Anishinabek Health Conference in January, and the Chiefs of Ontario Health Forum in February 2017. March saw Thunderbird Partnership Foundation share information with Alberta Health via webinar.

The information will help First Nations communities and their service providers prepare for the potential opportunities and challenges that legalization may bring. The federal budget announcements in March 2017 surrounding investments for harm reduction highlights the need for First Nations to coordinate cannabis education efforts and create ways to minimize harms.

The Thunderbird Partnership Foundation has gathered cannabis information from academic journal articles, webinars, conferences, as well as

conversations with Elders and Indigenous Knowledge keepers. Included in the material is everything from basic information on what cannabis and cannabinoids are, to why it's viewed as a harm reduction approach replacing opioids for people with chronic pain. People also learn marijuana's role in traditional medicine and how First Nations communities can further assess the risks of cannabis using the FNMWC framework, which considers the harms and therapeutic benefits for families and the community as a whole.



PEOPLE ALSO LEARN MARIJUANA'S ROLE IN  
TRADITIONAL MEDICINE AND... THE **HARMS**  
**AND THERAPEUTIC BENEFITS** FOR FAMILIES  
AND THE COMMUNITY AS A WHOLE.



As we move closer to legalization in 2018, the Thunderbird Partnership Foundation welcomes more research to further provide the evidence needed to fully assess the risks and benefits of cannabis.



# OPIOID SURVEY READY FOR USE

The new national First Nations Opioid Survey, is now ready for use. The survey was developed by a working group of addictions medicine specialists, First Nations community practitioners, and representatives from the Assembly of First Nations, Health Canada and the Centre for Addictions and Mental Health.

The Opioid survey was created to better understand and address opioid use and its impacts within First Nation communities. It's a survey that will be developed with various modules that enable First Nations communities to choose what data they want to monitor over time, related to opioid misuse. The first module focuses on an adult population. The next module will focus on

youth. According to the 2013 *First Do No Harm: Responding to Canada's Prescription Drug Crisis*, a strategy released by the Canadian Centre on Substance Abuse, there is limited information on the severity, source of supply, or reasons for use of prescription drug abuse in Canada, especially among First Nations. With the new Opioid Survey developed in modules, First Nations communities will have a choice about the data it needs and chooses to collect. The survey modules will also support a community in monitoring opioid misuse over time. Ultimately, this data can help inform and evaluate policy, prevention, and treatment interventions.

**OPIOID SURVEY**  
(BASE MODULE)

**This is a survey to better understand opioid use within your community.**  
It will help identify how to address prescription drug abuse.  
Your answers and identity will be kept private.  
Please do NOT write your name on the questionnaire.  
You can choose to withdraw at any time.

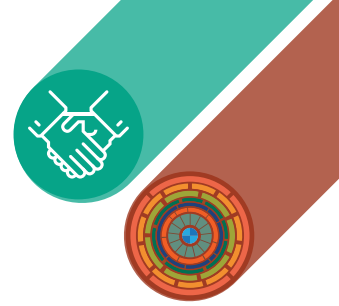
**Please indicate your consent to participate below:**  
 Yes - I consent.       No - I do not consent.

**!** OPIOID is a type of drug used to treat pain, treat opioid dependence, and are used recreationally or to get high.

Examples of OPIOIDS include:

OPIOID	Other Names
oxycodone	Percocet <sup>®</sup> , percis, OxyContin <sup>®</sup> , OxyNEO <sup>®</sup> , oxyt, OC, hillbilly heroin, 80s
codaine	Tylenol#3 <sup>®</sup> , Tylenol#1 <sup>®</sup> , T3s, T1s, Codeine Contin <sup>®</sup> , cody
buprenorphine	Duragesic <sup>®</sup> patches, china white, TNT
morphine	MS Contin <sup>®</sup> , Stages <sup>®</sup> , morph, M, red
hydromorphone	Dilaudid <sup>®</sup> , dilin, hydros, dilias
tramadol	Ultram <sup>®</sup> , Tramacet <sup>®</sup>
hydrocodone	Hycodan <sup>®</sup> , Tussionex <sup>®</sup>
methadone	Methodone <sup>™</sup> , meth, wefer, juice
buprenorphine	Suboxone <sup>®</sup> , bupe, sub
heroin	smack, china white, junk, skag, horse

We are NOT interested in REGULAR, over the counter pain relievers such as Aspirin, Advil or plain Tylenol that can be bought in stores.



# EPIGENETICS

First Nations communities interested in taking a cultural approach to the relationship between our environment and our mental wellness will soon have a new training program to better understand the biological processes that can influence health and wellness. The majority of health inequities that exist between Indigenous and non-Indigenous populations in Canada have not decreased over the past twenty years, including in relation to chronic physical and mental conditions. It is widely acknowledged that the elimination of health inequities requires a better understanding of the complex causes that can be acted upon in strategies to close the gaps. The new training will take a “two-eyed seeing” approach to align Indigenous and Western science.

The Thunderbird Partnership Foundation and its partners, the First Peoples Wellness Circle and the First Peoples First Person Hub of the Canadian Depression and Intervention Network continue to develop the training curriculum with Elder Jim Dumont and Dr. Amy Bombay leading the process. Thunderbird supported Elder Jim Dumont as lead of an environmental scan of Indigenous Knowledge on epigenetics with a focus on First Nations Peoples stories of origin

across the linguistic groups of Canada. Parallel to this process, Dr. Amy Bombay and Aaron Prosper lead a literature review. Both set the foundation for the new training program.

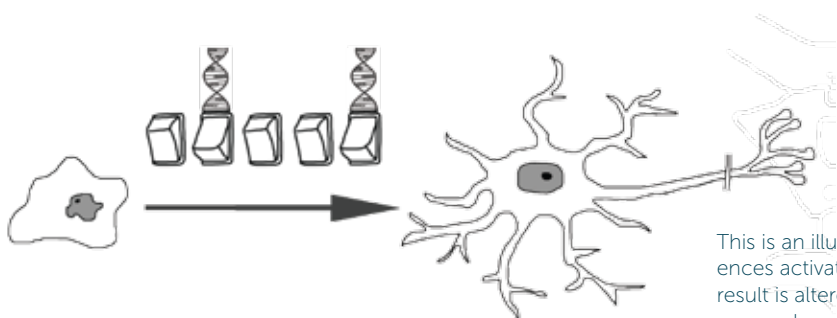
Indigenous science has long understood our connection between ancestry, land and environ-



INDIGENOUS SCIENCE HAS LONG UNDERSTOOD OUR CONNECTION **BETWEEN ANCESTRY, LAND AND ENVIRONMENT** AND TO THE SACRED SEEDS OF LIFE..



ment and to the sacred seeds of life, which is the DNA. Science is now confirming this connection through the study of epigenetics. Thunderbird Partnership Foundation is interested in this story because it also known in Indigenous science and western science that once epigenetic changes occur they can be reversed by chemical means or by enriched environments. In essence, in the case of the effects of trauma, at least some of the effects can be undone, in which the expression and functioning of genes can be suppressed by external events and a variety of environmental exposures...most significantly through Indigenous culture.



This is an illustration of how epigenetics works. Our environment/experiences activate switches, which can turn different genes on or off. The end result is altered DNA, the sacred seeds of life. These changes can be reversed.



# FNMWC IMPLEMENTATION GUIDE AVAILABLE SOON

The First Nations Mental Wellness Continuum (FNMWC) Implementation Guide is being finalized, along with the development of two service delivery models to help guide First Nations communities to see what's possible in community health planning. This work is guided by the FNMWC Implementation Team, consisting of Thunderbird Partnership Foundation, Assembly of First Nations Mental Wellness Committee, Health Canada - FNIHB Regions, as well as representation from Indigenous and Northern Affairs Canada, Public Health Agency of Canada, and Public Safety.

The guide itself will provide people with a road map to use the FNMWC framework. It also provides guidance in scaling up promising practices, drawing upon the demonstration projects in delivering culturally based services in priority areas, and in using Indigenous Knowledge to inform standards of service delivery across the life span.

The service delivery models (SDM) being developed are: Community Crisis Planning, Prevention, Response and Recovery and Land for Healing: Developing a First Nations Land-Based Service Delivery Model. Each SDM will include advice, guidance and practical support tools such as sample templates, case scenarios and links to additional resources.

A First Nations specific service delivery model conveys principles and standards from an Indigenous lens while ensuring cultural protocols and integrity are valued with the same integrity as standards of practice and applies the five themes

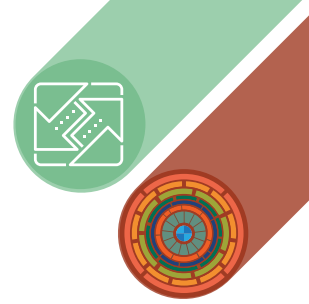


EACH SDM WILL INCLUDE **ADVICE, GUIDANCE AND PRACTICAL SUPPORT TOOLS** SUCH AS SAMPLE TEMPLATES, CASE SCENARIOS AND LINKS TO ADDITIONAL RESOURCES.



of the First Nations Mental Wellness Continuum Framework. In effect, SDMs will show how the FNMWC can be used to develop programs and services using an Indigenous, strength-based lens, how to engage local protocols, i.e. ensuring inclusion of local culture and Indigenous Knowledge. First Nations specific SDMs also ensure the local community has ownership over the program or service, that there is the needed flexibility in service delivery and collaboration with partners, as well as care given to address the gap to create a comprehensive continuum of services.

The next service delivery model identified for development is Community Healing Models to address sexual abuse.



# LIFE PROMOTION TO ADDRESS INDIGENOUS SUICIDE

Over the course of 2016/2017, the Thunderbird Partnership Foundation commissioned the discussion paper: *Life Promotion to Address Indigenous Suicide*, by Dr. Jennifer White, School of Child and Youth Care, University of Victoria and Dr. Chris Mushquash, Department of Psychology, Lakehead University. This is a strengths-based discussion on Indigenous suicide. Literature related to suicide prevention is focused on death rather than living life. Life promotion is a term that comes from the voice of Indigenous youth who are looking for hope, a place of belonging, meaning for their life and how to live life with purpose.

Suicide prevention and life promotion strategies are centred within social determinants of health where colonization and oppression are the root cause of suicide among Indigenous youth, rather than a single focus on suicide as a mental health issue that requires a mental health expert response. Instead, life promotion is aimed at reducing collective suffering, by addressing structural injustice and strengthening the environmental conditions that facilitate the wellbeing of Indigenous Peoples and communities. In effect, an approach that seeks to lift up all children, youth, families and communities through spiritual, cultural, social, and political forms of revitalization and engagement. The paper highlighted the equity needed to ensure communities are ethically resourced to support youth and community well-being at all times, not just during crises.

## Guiding principles:

1. Indigenous Ways of Knowing
2. Land, Language and Stories
3. Focus on Strengths
4. Decolonization and Community Self-Determination
5. Collective Responsibility and Reconciliation

## Next Steps:

1. *Focus on the Social Conditions and Practices That Reduce Risks for Suicide and Promote Life in Indigenous Communities.*

Suicide in Indigenous communities is not simply an individual-level problem that can be solved by mental health services alone. Instead, the focus must shift toward improving social conditions and strengthening communities to support life in all its forms.

2. *Generate Culturally Relevant Knowledge in Support of Practical Action and Positive Social Change.*

This is achieved by privileging Indigenous Knowledge systems and worldviews, involving more Elders and Knowledge Keepers in the generation of new approaches, and recognizing the need for flexibility, suicide prevention and life promotion strategies will better reflect the specific needs and interests of local communities.



# INCREASED TRAINING ROLE CONTINUES

In a word, intense is how Thunderbird Partnership Foundation's Curriculum Coordinator describes the past year's training agenda, as demand continues to grow across the country. Thunderbird delivered a total of 27 training sessions in 2016/2017, more than twice as many sessions as our previous year.

Our continued focus on training lead to the development of two new courses. *Using Trauma Informed Approaches in Our Work: From Understanding to Practice* was developed in conjunction with our First Peoples Wellness Circle partners. *Pharmacology: Understanding Opioid Addiction & Treatment*, was a collaboration between Thunderbird Partnership Foundation, the National Youth Solvent Abuse Program (NYSAP) and our new training partners who are addictions medical specialists and champions in supporting First Nations communities in addressing the opioid crisis.

## Using Trauma Informed Approaches in Our Work

Tara Brach is famously quoted as saying, "*Trauma is when we have encountered an out of control, frightening experience that has disconnected us from all sense of resourcefulness, or safety, or coping, or love.*" (2011). Although this is a commonly accepted definition, what is missing is culture, the key component for Indigenous wellness.

Seeing this gap, Thunderbird Partnership Foundation created a culturally relevant training course and workbook to help specialists in Indigenous addictions and mental health recognize and approach situations where someone may have been traumatized. Such trauma can include being part of or witnessing an accident (vehicle collision, forest fire, flood) or an act of violence (Indian Residential School, relocation, loss of land, racism/racist systems, foster care, incarceration, sexual abuse etc.).

*Five Trauma Informed* training courses were delivered in the past year. Course evaluations showed an average of 83.5% of participants experienced a deeper understanding of how trauma approaches can assist their clients, while 86% of participants developed a more profound understanding of the historical impacts of colonization as contributing factors in hopelessness, depression, anxiety and addiction. Finally, 88.2% of course participants felt confident in their understanding of how culture is foundational to a trauma informed approach. When asked how they would describe this course to others, participant comments included: "recommend highly to other colleagues", "should be mandatory for every person in the community" and "I will describe it as an approach that goes from 'what is wrong with you to what happened to you'."



## Pharmacology: Understanding Opioid Addiction & Treatment

The Thunderbird Partnership Foundation's response to the current opioid crisis was the development of the new training course and workbook: *Pharmacology: Understanding Opioid Addiction*. The training provides participants with an understanding of opioids, their sources, nature, properties and how the body reacts across a spectrum of dependence, from tolerance to addiction. Participants also learned how to identify and treat a drug overdose by administering naloxone, a chemical compound which reverses the effects of an opioid overdose. The course also outlines the role trauma plays in drug use, helping participants better understand why people use drugs to cope with unresolved trauma in their life.

Feedback for the Pharmacology course was equally positive. There were two Pharmacology

sessions in 2016/2017. Course evaluations revealed participants developed a deeper understanding for the role of culture, community and land-based opioid treatment programs in contributing to wellness.

When asked how they would describe this training to others, comments included: "Refreshing", "Amazing! How to physically combat an overdose but more importantly some interventions that will help cut off addiction before it happens", "a must for mainstream medical professionals. This training gives me the tools to explain to clients and community members" and "Informative training about diff between opiates and opioids. How imp. land based treatment is to recovery".

Thunderbird Partnership Foundation is continuously developing new courses. Please visit our website for more information on training options: <http://www.thunderbirdpf.org>

Strength-based & Care Facilitation Training Session, in London, ON, September 2016

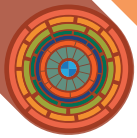


One of the exercises in the Strength-Based Addiction Care Training involves a historical timeline, to illustrate the strengths of people, despite colonial impacts



Participants of the Pharmacology training session in Dartmouth, NS, in November 2016. learn how to respond to an opioid crisis, with hands-on experience with the overdose antidote naloxone and CPR.





# CONNECTING WITH CULTURE FOR LIFE!

The Thunderbird Partnership Foundation's new culture-focused youth website is garnering positive feedback from both Indigenous communities and government. The new site, [www.cultureforlife.ca](http://www.cultureforlife.ca), is designed to act as a resource for Indigenous youth across Canada who want to connect with culture, but aren't sure how to do it.

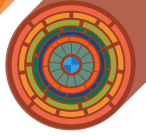
Inspiration for the site came from the Assembly of First Nations Youth Council, as they felt there was a need for more life promotion supports to help address Indigenous suicide and mental health issues.

## The site offers youth:

1. life-affirming messages from a cultural perspective
2. youth offer insight and tips for tangible ways to connect with culture, creating a sense of Hope, Belonging, Meaning and Purpose
3. through a series of video vignettes, youth can make a direct connection with young people who have a strong cultural connection
4. a reminder of the inherent strengths that exist within Indigenous people, families and communities. A powerful message that affirms help doesn't always have to 'come from away.'

The youth showcased in the website videos share how a cultural connection has strengthened their sense of identity, self-esteem, family and community, as well as helped them overcome fears, cope with puberty, and peer pressure to experiment with sex, alcohol and drugs. They are living proof that culture promotes their health and well-being, through creating a sense of Hope, Belonging, Meaning and Purpose.





# THUNDERBIRD PRESENTS TO STANDING COMMITTEE ON **INDIGENOUS SUICIDE**

Thunderbird Partnership Foundation was invited to present to a House of Commons Standing Committee on Indigenous and Northern Affairs in February 2017, to better inform the federal

Thunderbird recommended the inclusion of the Indigenous Wellness Framework to strategically guide policy, investments, program design, service delivery, and evaluation and that the FNMWC framework be used to support further understanding of a systems approach, relying on Indigenous Knowledge and culture.



THAT THE FNMWC FRAMEWORK BE USED TO SUPPORT FURTHER UNDERSTANDING OF A SYSTEMS APPROACH, **RELYING ON INDIGENOUS KNOWLEDGE AND CULTURE.**

2 - Dr. Jennifer White, School of Child and Youth Care, University of Victoria and Dr. Chris Mushquash, Department of Psychology, Lakehead University



government's current study of Indigenous Suicide. The presentation entitled, ***Suicide Among Indigenous Peoples and Communities***, drew upon the discussion paper, Life Promotion to Address Indigenous Suicide, by Dr. Jennifer White and Dr. Chris Mushquash<sup>2</sup>. The presentation also provided an opportunity to share an understanding of a strength-based approach to life promotion, using the Indigenous Wellness Framework, as well as the HOS and FNMWC frameworks.

Committee members were provided a comprehensive overview of suicide from an Indigenous lens, including the concept that suicide is not an individual experience resulting from mental illness, but rather a direct result of colonization and social inequities.





## WEBINARS:

Throughout 2016/2017, Thunderbird Partnership Foundation participated in the following webinars, to share knowledge with our stakeholders and partners.



1. 2 webinars, with an audience of 366: for Canadian Foundation for Healthcare Improvement (CFHI) – *Building an Indigenous Mental Health System of Care with the First Nations Mental Wellness Continuum Framework*



2. 1 webinar, with an audience of 6: School Mental Health - Mental Health Leaders Virtual Learning Series and Consultations on Indigenous Mental Health – *Culture as Foundation/Native Wellness Assessment™*



3. 1 webinar, with an audience of 80: Chiefs of Ontario – FNMWC Implementation



4. 1 webinar, with an audience of 100: New Brunswick Mental Health Forum – FNMWC Implementation



5. 1 webinar, with an audience of 55: Dilico Mental Health Forum



6. 1 webinar, with an audience of 50: Social Emergencies Summit, Thunder Bay, ON

7. 2 webinars, with a combined audience of 32: for First Nations and Inuit Health Branch – Alberta Region



a. Honouring Our Strengths: Relying on Indigenous Culture to Promote Wellness



b. First Nations Communities and Cannabis

## ENGAGING THROUGH SOCIAL MEDIA

Thunderbird Partnership Foundation continued to see increased community and stakeholder engagement through its social media platforms in fiscal 2016/2017. Engagement is highest when our social media platforms reflect our work, training courses, the HOS, Indigenous Wellness and FNMWC Frameworks, as well as providing context and information surrounding the opioid crisis.

The number of Facebook *Likes* has increased by 16 percent over our previous year, at 1,399. This also represents an increase of 30% over 2014/2015 – the year before our re-brand as Thunderbird Partnership Foundation!

Our number of followers on Twitter has grown by 8 percent, to 2,363, with average monthly impressions at 11K. Impressions are actual engagement after the tweet has been delivered to various Twitter streams.

Last year was also the first time we utilized a new social media tool, called *Thunderclap*, to help launch our new youth website, *Culture for Life*. It requires followers to sign-up to the campaign, then at a particular time and day, one single message is shared simultaneously across both Facebook and Twitter. The collective tweets and posts go out across the globe like a clap of thunder. Through *Thunderclap*, our Culture for Life webpage launch reached a combined Facebook/Twitter audience of 62,327.



Dr. Chris Mushquash presented the First Nations Action Plan on Opioid Misuse at the federal Opioid Summit on behalf of Thunderbird Partnership Foundation in Ottawa, in November.



Thunderbird was invited to present at the Canadian Association for Suicide Prevention's Hope, Help, Healing Conference in Iqaluit, last October. (L-R) Dr. Brenda Restoule, (First Peoples Wellness Circle), Carol Hopkins and Cambridge Bay's women & youth program coordinator, Sarah Jancke.



# 2016/2017 CONFERENCE & EVENTS LISTING

1. UNGASS on the World Drug Problem, New York, NY – April 2016
2. FNMWC Implementation, Hay River, NT – April 2016
3. Indigenous Health Conference, Mississauga, ON – May 2016
4. FNMWC IT Meeting, National Gathering, Ottawa, ON – May 2016
5. FNMWC & MOHLTC Engagement Session, Association of Iroquois and Allied Indians (AIAI), Oneida Nation of the Thames, ON – May 2016
6. Workplace Wellness, Council of Yukon First Nations, Whitehorse, YK – May 2016
7. Ontario Native Education Counselling Association, Sault Ste. Marie, ON – May 2016
8. Assembly of First Nations Chiefs Assembly & Youth Summit, Niagara Falls, ON – July 2016
9. Thunderbird Partnership Foundation/NNAPF Annual General Meeting, Calgary, AB – July 2016
10. Keynote on FNMWC at Atlantic Summer Institute on Children's Mental Health, Charlottetown, PEI – August 2016
11. Keynote on FNMWC at AIAI Elders Gathering, Delaware Nation, ON – September 2016
12. Culture in Addressing Addictions, Alberta Region NNADAP Conference, Edmonton, AB – September 2016
13. Joint Presentation on Opioid Crisis to House of Commons Standing Committee on Health, Ottawa, ON – October 2016
14. Keynote, Tradeshow & Workshop at Ontario NNADAP Conference, Sault Ste. Marie, ON – October, 2016
15. Indigenous Wellness Framework and the First Nations Mental Wellness Continuum Framework – Thunderbird Partnership Foundation and First Peoples Wellness Circle co-presentation at Canadian Association for Suicide Prevention Hope, Help, Healing Conference, Iqaluit, NT – October 2016
16. Keynote on FNMWC at Atlantic Policy Congress (APC) Health Conference, Dartmouth, NS – November 2016
17. Co-Chair We Belong International Forum on Life Promotion to Address Indigenous Suicide, with CFHI, Vancouver, BC – November 2016
18. Health Canada Opioid Summit, Ottawa, ON – November 18-19, 2016
19. Health Transformation Agenda Presentation to Assembly of First Nations Special Chief's Assembly, Tradeshow, Gatineau, QC – December 2016
20. Presentation to the House of Commons Standing Committee on Indigenous and Northern Affairs, Suicide Among Indigenous Peoples and Communities, via Teleconference – Feb 2017

21. Keynote on FNMWC informing Land Based Programming, On-the-Land Summit, Dettah, NT – March 2017

22. FNMWC Framework Presentation at First Nation Mental Health Conference participants, included New Brunswick Provincial Deputy Ministers, ADMs, senior officials and First Nations Chiefs and Health Directors, Miramichi, NB – March 2017

23. FNMWC Presentation, Social Emergencies Summit, Thunder Bay, ON – March 2017

24. Native Wellness Assessment™ Presentation and Opioid Survey Pilot Testing, Webequie First Nation – March 2017



Youth from across Canada participated in the We Belong International Forum on Life Promotion to Address Indigenous Suicide Vancouver, BC – November 2016

## MAKING CONNECTIONS AT UNGASS



Prayer flags line the ceiling at a special exhibit during UNGASS. Mostly in Spanish, the flags illustrate the dire personal cost of a punitive approach to the world drug crisis, with stories of children, women and men innocently killed in drug wars.

Thunderbird Partnership Foundation was invited to join Canada's delegation to the United Nations General Assembly Special Session (UNGASS) on the World Drug Problem, held from April 19-21, 2016 in New York City. The event provided an opportunity to contribute an Indigenous perspective on the global drug issue, a perspective informed by the *Honouring Our Strengths Renewal Framework* and the *First Nations Mental Wellness Continuum Framework*.

The UN Declaration is now focused on a human rights approach, a stark shift from the historical approach of "war on drugs". Although the UN Declaration on addressing the world drug problem does not speak to harm reduction, Canada, is championing the harm reduction conversation to support moving toward a less punitive approach to the world drug crisis, to a more compassionate and humane approach by improving prevention and treatment for people struggling with addiction and drug misuse.



Thunderbird Partnership Foundation's Carol Hopkins at UNGASS spending time discussing a global Indigenous approach to the world drug problem with New Zealand Drug Foundation Board Chair Tuari Potiki (Ngai Tahu), Chairperson of the Board of Trustees and Papa Nahi, General Manager of Hāpai Te Hauora Māori Public Health.

# OUR COMMITTEE WORK & ADVISORY ROLES IN 2016/2017



The following is a list of councils, committees and panels where Thunderbird Partnership Foundation served in an advisory role in 2016/2017.

- 1. Mental Health and Addictions Leadership Advisory Council**, Minister Hoskins, Ministry of Health and Long-Term Care, ON (Nov 2014 to current). With additional roles to support: *Aboriginal Engagement Strategy*
- 2. Methadone Treatment and Services Advisory Committee**, Ministry of Health and Long-Term Care, Ontario (2015-2016)
- 3. United Nations General Assembly Special Session World Drug Problem**, Canadian Delegation, April 2016
- 4. Ontario Premier's Statement of Reconciliation Event**, May 2016
- 5. International Roundtable on Indigenous Suicide Prevention**, June 2016
- 6. Canadian Drug Policy Coalition**, June 2016 to present
- 7. Health Accord Task Team**, Assembly of First Nations, Sept. 2016 to Jan 2017
- 8. Indigenous Certification Board of Canada (ICBOC) AGM/Board Meeting**, September 2016
- 9. Opioid Crisis in Canada**: Joint Presentation with the Assembly of First Nations to the House of Commons Standing Committee on Health, October 2016
- 10. AMIS Governance meeting, Quebec**, October 2016
- 11. Wise Practices: Suicide Prevention for First Nations**, committee member, 2016-present
- 12. Ministers of Health Indigenous engagement meeting**, October 2016
- 13. Health Canada Opioid Summit** – prepared a paper with the Chiefs of Ontario, presented by Dr. Chris Musquash (Nov. 2016)
- 14. FNMWC and Governance in Health Care**, FNQL-HSSC November 2016
- 15. Indigenous Health Issues**, FNIHB Senior Executive and Minister Philpott and Minister Bennett, January 26, 2017
- 16. Suicide Among Indigenous Peoples and Communities**: Presentation to the House of Commons Standing Committee on Indigenous and Northern Affairs, Feb 8, 2017
- 17. First Nations Community Healing Model to Address First Nations Sexual Abuse**, Presentation prepared for the Senior Management Committee, First Nations Inuit Health, Health Canada, March 2017
- 18. Reference Committee (Co-Chair)**, to Inform Mental Health and Addictions Initiatives Under the Journey Together: Ontario's Action Plan for Reconciliation March to May 2017
- 19. Prescription Drug Abuse Coordinating Committee (PDACC)**, to contribute to overall improvements in prevention and treatment of PDA for all First Nations, including development of a national First Nations Opioid Survey.



# AMIS USE PROVIDES QUALITY DATA

Thunderbird Partnership Foundation now manages the contract for the Addictions Management Information System. This case management system empowers the National Native Alcohol and Drug Abuse Program (NNADAP) and the National Youth Solvent Abuse Program (NYSAP) with data on First Nations addictions, mental health and Indigenous wellness. In addition to providing support to the treatment centres using the system, Thunderbird has also invested in supporting First Nations communities in accessing the Native Wellness Assessment™ which is also hosted in the same data base.

**There is a combined total of 55 NNADAP and NYSAP Treatment Centres who are registered to use AMIS:**

45 registered NNADAP Treatment Centres in Canada:

- 21 centres, or 47% of those actively used the system
- Most users are from the Atlantic, Ontario and Manitoba regions

**10 registered NYSAP Treatment Centres in Canada:**

- All 10 centres are registered, presenting 100% active engagement

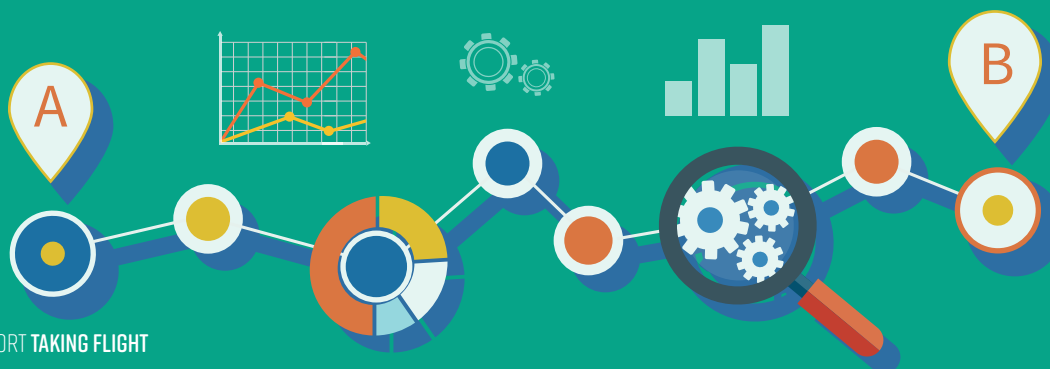
The past year also saw Thunderbird Partnership Foundation take over support and communications for AMIS as of April 1<sup>st</sup> 2016. The move facilitates enhanced supports for ensuring treatment centres have assessed their capacity and work-



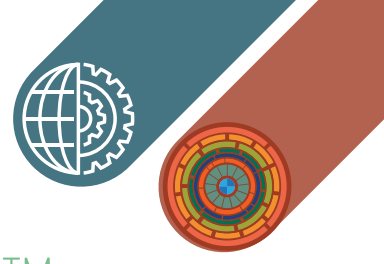
**AMIS WILL HELP US TELL A CONSISTENT STORY OF THE STRENGTH OF THE TREATMENT CENTER NETWORK.**



flow readiness to optimize benefits of using the information management system. By the end of fiscal 2016/2017, Thunderbird was preparing to host an AMIS training workshop to help centres generate Annual Reports from their aggregate data. The AMIS Annual Reports not only provide information needed to satisfy federal contribution agreements, but also help treatment centres enhance their programs and services, to better meet clients' needs. The national Addictions Management Information System will help us tell a consistent story of the strength of the treatment centre network.







# MEASURING WELLNESS WITH THE NWA™

In the past year, a total of 85 First Nations communities have registered to use the Native Wellness Assessment™, bringing the total number of registered users to 191. Registered users represent both community organizations and treatment centres. The aggregate data from their assessments shows an average increase of 17% change in wellness over time. The most significant gains were experienced in the areas of Purpose and Meaning, when results are combined from assessments completed by both the individual and the observer.

Purpose results from physical behaviour expressed through our Way of Being, a Way of Doing and Wholeness, which can result from:

- SELF-CARE THROUGH A BALANCED DIET AND EXERCISE, SHOWING **PRIDE IN OUR CONNECTION TO CULTURAL IDENTITY** THROUGH DRESSING OURSELVES IN SYMBOLS OR PATTERNS OF OUR CLAN.

Meaning results from mental behaviour expressed through our Intuition, Rationale and Understanding, which can result from:

- LEARNING ABOUT YOUR IDENTITY, CLAN, FAMILY, COMMUNITY, AS WELL AS LEARNING **CULTURAL TEACHINGS**

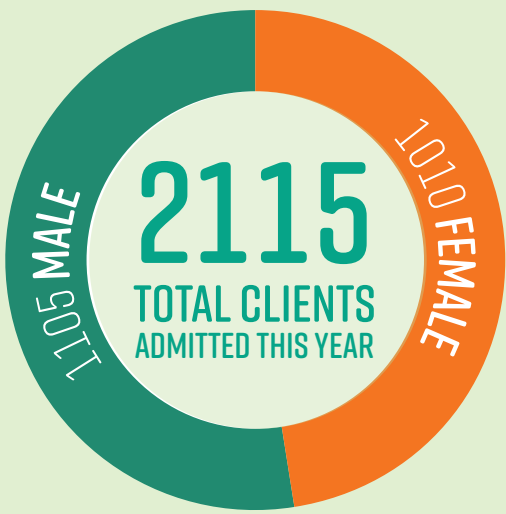
Further, the aggregate data shows individuals experienced the strongest connection to these cultural interventions:

- SHAKER/HAND DRUM MAKING
- NAMING CEREMONY
- WATER BATH
- BLANKETING/WELCOMING CEREMONY
- CULTURAL EVENTS/MARCHES
- DREAM INTERPRETATION
- LAND-BASED/CULTURAL CAMPS
- GHOST/MEMORIAL FEAST
- HIDE MAKING/TANNING
- FASTING
- HORSE PROGRAM

The NWA™ is the first such instrument of its kind, reliably measuring the effect of cultural interventions on a client's wellness over time, from a whole person and strengths based perspective. It has been statistically and psychometrically validated as a reliable measure of change in wellness over time.

Access to the NWA™ and more information on its validation can be found at [www.thunderbirdpf.org](http://www.thunderbirdpf.org).





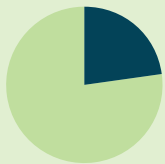
AVERAGE AGES  
MALE **35** FEMALE **32**



**38%**  
of clients have  
attended **previous**  
treatment



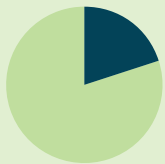
**76%**  
**completed**  
treatment



**23%**  
have a history of  
**suicide ideation**  
or attempts



**48%**  
of clients have not  
completed **high**  
school



**20%**  
have been  
involved with the  
**justice system**

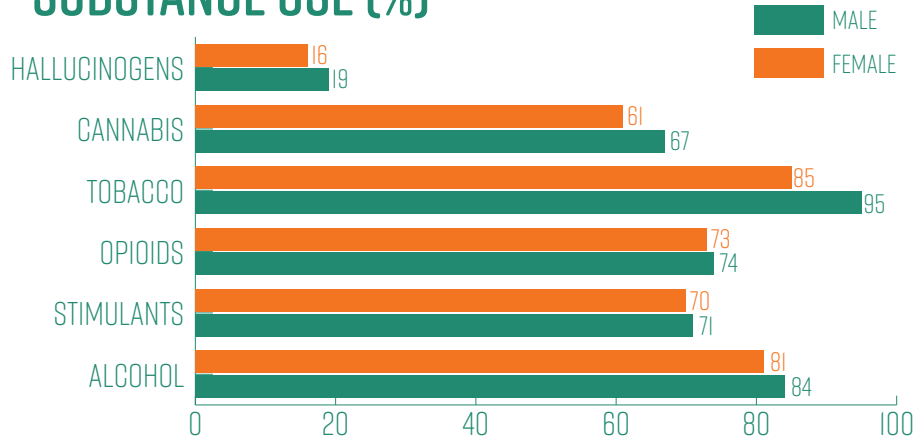


**11%**  
of those involved  
with the justice  
system are on  
**probation**

# NNADAP 2016-2017 ADDICTIONS MANAGEMENT INFORMATION SYSTEM (AMIS)

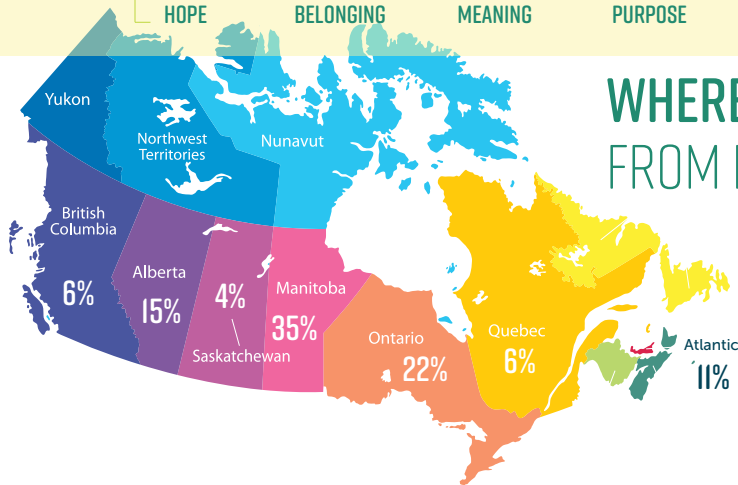
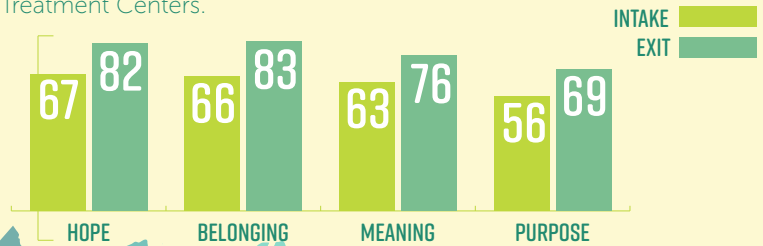
AMIS has been designed according to the needs of NNADAP and NYSAP Treatment Centres. 45 adult treatment centres have access to AMIS and this data represents 28 of those treatment centers. This infographic represents national aggregate data from the Addictions Management Information System of NNADAP Treatment Centres across Canada.

## SUBSTANCE USE (%)



## NATIVE WELLNESS OUTCOMES

The Native Wellness Assessment™(NWA™) instrument was launched on June 25, 2015 and is the first of its kind in the world. These results are exciting as we start to use this new tool for tracking client wellness for those who receive a cultural intervention at NNADAP Treatment Centers.



## WHERE WE CAME FROM IN CANADA

## PRE-TREATMENT SERVICES - 565

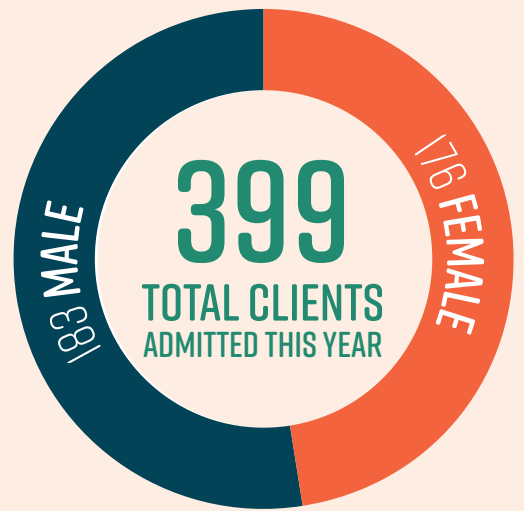
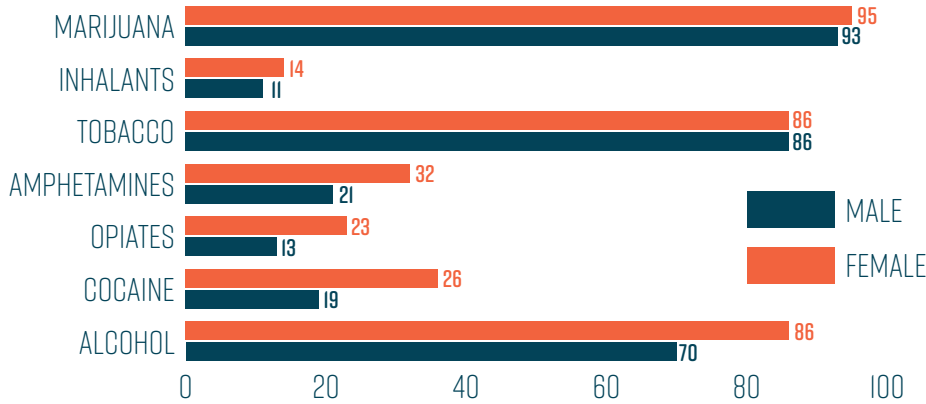
Pre-treatment - period of time when treatment services are being provided to applicants, including pre-admissions screening and assessments.

Pre-treatment services help to ensure client readiness to optimize likelihood of treatment completion.

# NYSAP 2016-2017 ANNUAL REPORT AT A GLANCE

NYSAP has a network of 10 First Nation and Inuit Treatment Centres. Data reflected in this report is captured individually at each centre. Results are collated across our network and reported annually. This infographic represents national aggregate data from the Addictions Management Information System of NYSAP Treatment Centres across Canada.

## SUBSTANCE USE (%)



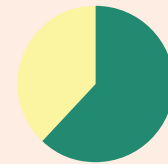
We know that addiction is a chronically relapsing condition



**58%**  
have history of  
suicide ideation or  
attempts



**29%**  
have attended  
previous  
treatment



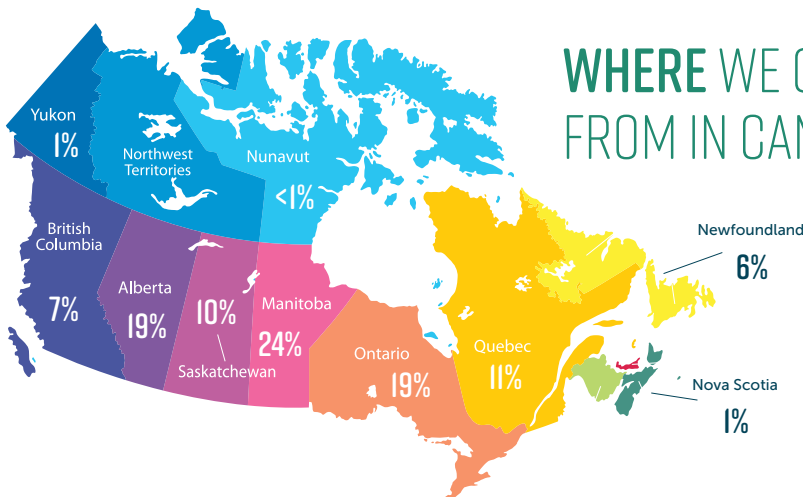
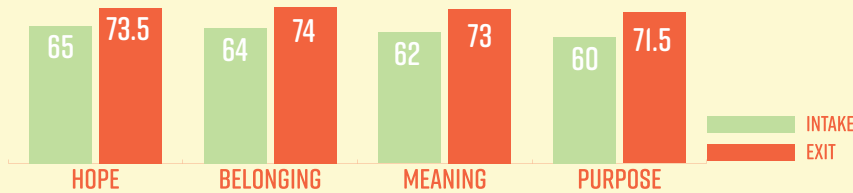
**62%**  
come from  
families where  
family violence  
has been present



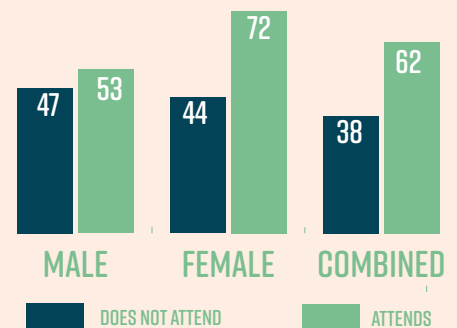
**29%**  
have a history of  
sexual  
victimization

## NATIVE WELLNESS OUTCOMES

The Native Wellness Assessment™ (NWA™) is an Indigenous knowledge based instrument that demonstrates the effectiveness of First Nations culture as a health intervention in addressing substance use and mental health issues. Culture is the key to restoring and maintaining wellness. Indicated below are our client outcomes for improvement in hope, belonging, meaning and purpose. Please note this is our first year using this assessment and we are working to ensure post treatment administration is consistent. This is considered a sample set. Overall our data shows clients are gaining 8-11% in wellness indicators throughout their program stay.



## EDUCATIONAL ATTENDANCE AT PROGRAM ENTRY (%)





# NNADAP/NYSAP WAGE PARITY UPDATE

Thunderbird Partnership Foundation is pleased to report the completion of the Ontario NNADAP/NYSAP Wage Parity Case Study<sup>3</sup> to support the on-going effort to identify current and future capacity and investment needs of both community based NNADAP programs and NNADAP/NYSAP Treatment Centres.

The study, guided by the Joint Technical Working Group, supports the advocacy efforts by the Thunderbird Partnership Foundation, Chiefs of Ontario, and the Assembly of First Nations to ensure adequate funding for this valuable and credible program.

## Case Study results:

COST TO IMPLEMENT WAGE PARITY FOR EXISTING STAFF	<b>\$6.1M</b>
COSTS TO HIRE NEW REQUIRED STAFF AT WAGE PARITY LEVELS	<b>\$29.2M</b>
PROGRAM/OPERATING COSTS WITH EXISTING AND REQUIRED NEW STAFF AT WAGE PARITY	<b>\$13.6M</b>
SUB-TOTAL	<b>\$49.9M</b>
ADMINISTRATION COSTS AT 10%	<b>\$4.8M</b>
TOTAL ESTIMATED ANNUAL COST	<b>\$53.8M</b>

These cost estimates represent the Ontario region only. Essentially, the national budget must double to meet the needs of First Nations seeking residential treatment or community-based prevention services to address harms related to alcohol and drugs, (including those also in suboxone treatment) and intergenerational trauma. That is a 47% increase to address wages and human resource capacity needs and a 53% increase to support program and operational costs.

When Ontario's costs estimates are used as a

base-line, the national costs to achieve wage parity, additional human resources and operational costs is \$232.29 million annually.

The results of this case study have been shared within the First Nation Health Transformation Agenda submitted for the 2017 Federal Budget; Chiefs of Ontario: All Partners Meeting; Trilateral First Nations Senior Officials Health Committee, Ontario; Dr. Jane Philpott, Federal Minister of Health; Dr. Eric Hoskins, Ontario Minister of Health and the Ontario Regional Addictions Partnership Committee.

While the new federal budget in March 2017 did not identify specific funds to address the wage parity gap for NNADP/NYSAP community and residential treatment programs, political leadership continues to advocate for the additional funding supports.



ESSENTIALLY, THE **NATIONAL BUDGET MUST DOUBLE** TO MEET THE NEEDS OF FIRST NATIONS SEEKING RESIDENTIAL TREATMENT

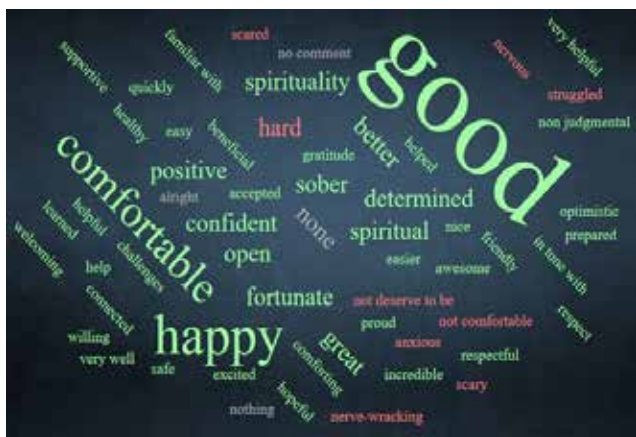


The caliber of NNADAP and NYSAP treatment programs has been demonstrated through their achievements in accreditation and in their rates of client completion of the treatment program.

3 - The Ontario NNADAP/NYSAP Wage Parity Case Study was guided by the principles of the *Honouring Our Strengths: A Renewed Framework to Address Substance Use Issues Among First Nations in Canada* and the *First Nations Mental Wellness Continuum Framework*

- 87% of NNADAP Treatment Centres are accredited
- 100% of NYSAP Treatment Centres are accredited
- Combined, 67% of NNADAP and NYSAP clients completed treatment in 2016/2017: NNADAP 76%, NYSAP 57%
- AMIS recorded the following post-treatment referrals: Cultural Activities and Supports = 13%, Elders = 12%, NNADAP Community Based Workers = 70%.

The following is an example of client feedback from the Native Horizons Treatment Centre, in Ontario:



The outcomes for NNADAP in 2016/2017 reflect the reality that treatment centres are in the initial stages of entering their data into AMIS. It is hoped that given the new support role being played by Thunderbird Partnership Foundation, we will achieve the same level of engagement already enjoyed by youth treatment centres, given their dedicated support in AMIS through the National Youth Substance Abuse Program.

These achievements are significant given that treatment centre programs have had to increase their resource allocations to meet the requirements of accreditation standards, update their programs to meet the ever-increasing acute needs of their clients and invest in their staff to ensure their competencies in culturally-based addictions treatment are current and relevant to client needs.

NNADAP/NYSAP are national programs that we should celebrate and take pride in for the difference they continue to make for First Nations people and communities. We need to demonstrate the value of these national programs through ethical compensation and funding.





# METHADONE TREATMENT AND SERVICES ADVISORY COMMITTEE

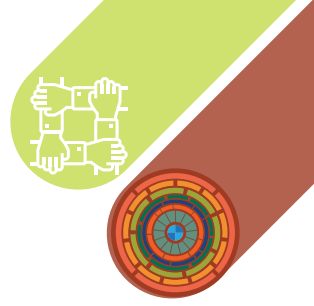
Thunderbird Partnership Foundation is pleased to report that the Methadone Treatment and Services Advisory Committee in Ontario has resulted in 30 recommendations for providers and the Ministry of Health and Long-Term Care. (MOHLTC). The recommendations are aimed at transforming the system of prescribing and treating opioid addiction. Thunderbird's participation supported the work of the committee in addressing the needs of Indigenous communities through the lens of the HOS and FNMWC frameworks.

The recommendations of particular interest to Indigenous communities include:

- Providers should recommend buprenorphine/naloxone as the first-line medication for most patients, given its better safety profile
  - Enable nurse practitioners, with appropriate training, to prescribe and administer buprenorphine/naloxone and methadone
  - The MOHLTC, in collaboration with Health Canada, First Nations leadership and Indigenous partners, should allocate sustainable funding for Prescription Drug Abuse programs that are based in community, land and culture. The programs should include treatment with buprenorphine/naloxone, as well as addictions recovery and relapse prevention counselling.
  - The MOHLTC, the College of Physicians and Surgeons of Ontario, and other regulatory and professional regulatory bodies, should encourage all opioid agonist therapy providers to support transition from methadone to buprenorphine/naloxone when clinically or geographically indicated for First Nations patients and other patients.
- The MOHLTC, in collaboration with Indigenous partners and Health Canada, should provide funding for training and programs that support recovery from intergenerational/historical trauma and Post Traumatic Stress Disorder. Funding should provide support for:
    - › wellness retreats for Chief and Council leadership;
    - › training of Prescription Drug Abuse program workers in Trauma Informed Care; and
    - › culturally appropriate aftercare programs that support individual, family and community healing from Post-Traumatic Stress Disorder and Historical Trauma Transmission.

The committee also recommended the Ministry of Health and Long-Term Care provides additional supports to pregnant and post-natal women with opioid use disorder through the removal of barriers to treatment access, support for breast feeding and nutritional supplements, child care, and improved training and education on substance use disorders for service providers, child protection services lawyers, as well as judges and jury members. Also recommended is the prescribing of buprenorphine to pregnant women who live in or travel to communities where methadone is not available, especially First Nations' women.

For more information, and to see the full list of recommendations from the final report of the Expert Advisory Group and Methadone Treatment and Services, visit [http://health.gov.on.ca/en/public/programs/drugs/ons/docs/methadone\\_advisory\\_committee\\_report.pdf](http://health.gov.on.ca/en/public/programs/drugs/ons/docs/methadone_advisory_committee_report.pdf).



# MINISTRY OF HEALTH AND LONG TERM CARE **LEADERSHIP COUNCIL**

Thunderbird Partnership Foundation is pleased to report progress on the Mental Health and Addictions Leadership Council who advise the Minister of Health and Long-Term Care on the implementation of the *Open Minds, Healthy Minds*, Ontario’s Comprehensive Mental Health and Addictions Strategy. Since the first annual report submitted in December 2015, First Nations have seen progress on its priorities based on the First Nations Mental Wellness Continuum Framework. MOHLTC committed to a parallel Indigenous Engagement Process with partners from the existing Indigenous Health Relationship Tables in order to identify community mental health and addictions priorities.

Results of the Indigenous Engagement Strategy are being addressed as follows:

- ▶ In partnership with Indigenous communities and the federal government, Ontario will establish up to six new or expanded Indigenous Mental Health & Addictions Treatment and Healing Centres, both on and off-reserve. The centres will provide care using a combination of traditional healing and clinical care. (Jointly led by MOHLTC and MCSS)

- ▶ Ontario will invest new funding into health and wellness programs and services to help stop the cycle of intergenerational trauma. These investments will be guided by collaborative partnerships and active engagement with Indigenous partners, and will include the dedicated Indigenous engagement process under Phase 2 of the Mental Health and Addictions Strategy. (MOHLTC only)



## THESE INVESTMENTS WILL BE GUIDED BY **COLLABORATIVE PARTNERSHIPS** AND ACTIVE ENGAGEMENT WITH INDIGENOUS PARTNERS



Work of the Leadership Council overall is also informed by the Indigenous Wellness Framework and the First Nations Mental Wellness Continuum Framework, moving towards greater equity and culturally safe services for Indigenous people in Ontario.

The council is now in the final year of its mandate.





# FOCUSING ON LAND-BASED PROGRAMS

Whether it's a land-based camp, or an On-The-Land-Summit, Thunderbird Partnership Foundation takes every opportunity it can to reconnect with the land. Here are some pictures from our work and travels.



The Indigenous Wellness Framework, common cultural interventions and the Native Wellness Assessment™ were featured in a presentation by Thunderbird's Carol Hopkins at the On-The-Land Summit, in Dettah, NWT in March. Here's Elder Bessa Blondin warming up inside one of the workshop tents.



Nora Bressette taking a tour of the land-based camp operated by the Kwanlin Kūn First Nation. Here she is with NNAPF Board Member and Jackson Lake Wellness Team Coordinator, Colleen Geddes, near Whitehorse, YK.



## TRANSLATION

Our commitment to providing our materials in both English and French continued in fiscal 2016/2017, with the full translation of the Strength-Based and Care Facilitation training workbooks completed. These resources will also be added to the resources needed for Thunderbird's on-line training courses, which are available through [www.thunderbirdpf.org](http://www.thunderbirdpf.org).

Our work this year also involved translating all of the materials Thunderbird Partnership Foundation uses to support awareness of the Addictions

Management Information System (AMIS) into French, along with all the organization's communications and announcements which are shared with communities and stakeholders.

Throughout the year, we continue to update the Thunderbird term bank as we continue to strive for quality and consistency in the terminology we use, ensuring proper understanding of our materials.



# FINANCE REPORT

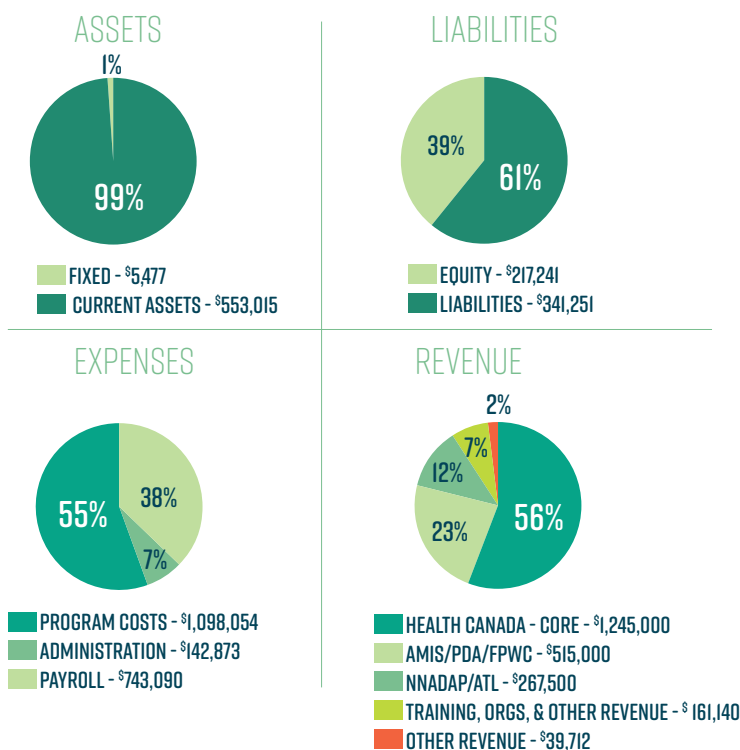
For fiscal year 2016/2017, the Thunderbird Partnership Foundation, a division of the National Native Addictions Partnership Foundation Inc., continued to invest in the implementation of the *Honouring our Strengths: A Renewed Framework to Address Substance Use Issues Among First Nations People in Canada* (HOS) and the *First Nations Mental Wellness Continuum Framework* (FNMWC) with continued emphasis on Indigenous Knowledge and Culture, together with community-based planning as key to 'moving towards wellness'.

Our organization continues to be called upon for strong leadership in influencing a systems change, through participation in an increasing number of committees, as well as nurturing opportunities for knowledge exchange, knowledge sharing, partnership development, training development, developing community-based approaches, research, communication, and linking with stakeholders.

Areas of concentration covered diverse components of the HOS and FNMWC Frameworks to facilitate an approach that prioritizes Indigenous Knowledge.

## Activity highlights include:

- development of two community-based service delivery models and the *FNMWC Implementation Guide*, with guidance from the FNMWC Implementation team
- developing and delivering the *Pharmacology: Understanding Opioid Addiction and Treatment* training program
- developing and delivering the *Using Trauma Informed Approaches in Our Work: From Understanding to Practice* training program
- supporting stakeholder engagement and facilitating community-based approaches through delivering *Strength-Based Approaches to Care; Care Facilitation, Buffalo Riders; Emotional Intelligence; Culture as Foundation and Native Wellness Assessment™* training in regions across Canada
- participating in cannabis research in partnership with the University of Victoria, Centre for Addictions Research of British Columbia (CARBC)
- development of a new national First Nations Opioid Survey in partnership with the Prescription Drug Abuse Coordinating Committee (PDACC). Thunderbird is still working on finalizing a database to host the Opioid Survey to ensure easy community access to data collection and reporting.
- creating universal access to the Native Wellness Assessment™ (NWA) for service providers who use Indigenous culture to facilitate wellness, through the Thunderbird Partnership Foundation website
- development of a business plan for the Addictions Management Information System (AMIS) to support the organization's move towards AMIS governance, increasing engagement of Treatment Centres, and establishing a foundation for optimizing the system overall for data extraction
- developing youth-focused life promotion resources, including the Culture for Life web page and a strengths-based approach to addressing suicide through a life promotion paper
- conducting an environmental scan of Indigenous Knowledge and a literature review to support the development of a training program in epigenetics for First Nations communities in partnership with the First Peoples Wellness Circle and First Peoples First Persons Indigenous Research Hub of the Canadian Depression Research and Intervention Network
- supporting the development and completion of the Ontario NNADAP/NYSAP Wage Parity Case Study to further illustrate the wage parity gap in the National Native Alcohol and Drug Abuse Program (NNADAP) and the National Youth Solvent Abuse Program (NYSAP)
- participation in 19 national, provincial & regional committees: representing an increase of more than 26% over fiscal 2015/2016
- distribution of 16,044 HOS/FNMWC focused print resources in year two of our strategic plan, confirming our resources remain a much sought-after commodity at conferences, events, and training sessions



Fiscal 2016/2017 saw Thunderbird increase its full-time staff to 10, with 8 on-site, requiring a reconfiguration of existing office space to accommodate the 2-additional staff. We are also reducing the demand on our space by digitizing historical paper files. Thunderbird increased its human resource capacity through 8 contracts to ensure we were well equipped to meet community interest in the delivery of our training programs. Our organization's small, but dedicated team continues to meet the ever-expanding demand for resources, ensuring our organization continues to satisfy its strategic priorities.

The financial report also includes the first full year of funding for the First People's Wellness Circle. They were able to renew their Terms of Reference and draft a new 5-year strategic plan with annual operational objectives. Plans to host an Indigenous Knowledge forum on Trauma was postponed to May 2017.



## OUR BOARD OF DIRECTORS

	BOARD MEMBER	REPRESENTING
NATIONAL ELDER	<b>Agnes Mills</b>	First Nations
BOARD PRESIDENT	<b>Chief Austin Bear</b> Muskoday First Nation, SK	First Nations
BOARD VICE-PRESIDENT	<b>Laurie Ann Nicholas</b> Health Coordinator Mawiw Council	Atlantic Policy Congress of First Nations Chiefs Secretariat
BOARD TREASURER	<b>Wanda Smilth</b> Executive Director Native Horizons Treatment Centre	Ontario – Ontario Regional Addictions Partnership Committee
BOARD SECRETARY	<b>Mari Stagg</b> Interlake Reserves Tribal Health Centre	Manitoba
NATIONAL ADVISOR	<b>Keith Leclaire</b> Director Quebec, CLSC (Local Committee Service Centre) Naskapi	Thunderbird Partnership Foundation

## NEW STAFF

Thunderbird Partnership Foundation continued to expand its human resource capacity in 2016/2017, with the addition of two full-time and one part time staff. Jasmine Fournier joins Thunderbird as the Indigenous Knowledge Exchange Coordinator; Amy Fournier is our new Clerical Administrative Assistant and Myles Lynch has been hired to digitize relevant NNAPF documents and eliminate the need to store paper documents.

Sylvia St. George accepted a lateral transfer, becoming the new AMIS Governance Coordinator. Her former position as Stakeholder Coordinator will not be filled. Instead, responsibilities have been assumed by other staff.

<b>Dr. Brenda Restoule</b>	Chairperson, First Peoples Wellness Circle
<b>Willie Alphonse</b> Nenqayni Wellness Centre Society, Williams Lake, BC	YSAC, Youth Solvent Addiction Committee
<b>Ellen Smith</b> Kyikavichik Consulting Services	Northwest Territories
<b>Patricia Shade</b> Director Kainai Wellness Centre	Alberta Mental Health and Addictions Committee
<b>Vacant</b>	Nunavut
<b>Vacant</b>	British Columbia
<b>Richard Gray</b>	Quebec - First Nations of Quebec and Labrador Health and Social Services Commission
<b>Janice Nicotine</b> Saskatoon Tribal Council	Saskatchewan
<b>Colleen Geddes</b> Coordinator, Jackson Lake Wellness Team Dept. of Justice Kwanlin Dun First Nation	Yukon – Council of Yukon First Nations
<b>Chief Isadore Day,</b> Ontario Regional Chief	Assembly of First Nations

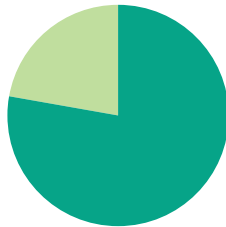
# CELEBRATING OUR 11% ADVANTAGE

The staff at Thunderbird Partnership Foundation completed an Organizational Vital Signs survey, or OVS in December and January to monitor staff satisfaction and engagement. The survey is meant to provide a snapshot of the organizational climate – an overview of the employee’s relationship with and within the organization. The climate represents the context in which employees work each day, which research shows strongly influences how people perform their jobs to ensure relevant outcomes for the organization’s stakeholders. As organizations optimize relationships, organizational climate improves. As climate improves, so does performance.

According to the global performance-management consulting company, Gallup, world class organizations which include companies such as Apple, achieve an average employee engagement rating of 67%. Engagement at Thunderbird comes out 11 percentage points higher, at 78%.

Thunderbird Partnership Foundation is proud of these numbers, and remains committed to keeping our organization, our healthy climate and our staff engagement rate ahead of the pack for years to come!

**78% ENGAGED**  
**0% DISENGAGED**  
**22% NEUTRAL**



Celebrating our 11% advantage at Thunderbird Partnership Foundation!!

This picture, taken at our Annual General Meeting, July 2016, in the foothills of Calgary, AB, shows both current and former Thunderbird Staff. They are (L-R): Eugehne Adangwa, Sherry Huff, Sylvia St. George, Valerie Peters, Mary Deleary, Jordan Davis, Carol Hopkins, Nora Bressette, Mona Belleau, and Dawn Estelle Miskokomon. Mona and Dawn Estelle have since left Thunderbird. Missing from this photo are our new full time staffers: Jasmine Fournier, Amy Fournier, and our part-timer Myles Lynch.



## OUR STAFF



**CAROL HOPKINS**  
EXECUTIVE DIRECTOR



**MARY DELEARY**  
OFFICE MANAGER/INDIGENOUS  
KNOWLEDGE TRANSLATOR



**NORA BRESSETTE**  
CURRICULUM COORDINATOR



**SYLVIA STE. GEORGE**  
AMIS GOVERNANCE COORDINATOR



**JASMINE FOURNIER**  
INDIGENOUS KNOWLEDGE  
EXCHANGE COORDINATOR



**SHERRY HUFF**  
WRITER-EDITOR/SOCIAL MEDIA  
COORDINATOR



**JORDAN DAVIS**  
WEB/GRAPHIC DESIGN AND IT



**EUEGHNE ADANGWA**  
BILINGUAL TRANSLATOR



**VAL PETERS**  
OFFICE ADMINISTRATION ASSISTANT



**AMY FOURNIER**  
CLERICAL ADMINISTRATIVE ASSISTANT



**MYLES LYNCH**  
CONTRACTED PART-TIME

