

Mind + Spirit

NWT Mental
Health Magazine
May 2014



A Program of the
Northwest
Territories

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FREE



If you would like this information in another official language, call us.

English

Si vous voulez ces informations en français, contactez-nous.

French

Kīspin ki nitawihtīn ē nīhīyawihk ōma ācimōwin, tipwāsinān.

Cree

TŁİCHQ YATI K'ĒĒ. DI WEGODI NEWQ DĒ, GOTS'O GONEDE.

Tłıchq

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Chipewyan

EDI GONDI DEHGÁH GOT'İE ZHATİE K'ĒĒ EDATŁ'ÉH
ENAHDDHĒ NIDE NAXETS'Ē EDAHLÍ

South Slavey

K'ÁHSHÓ GOT'İNE XƏDÓ K'É HEDERI
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North Slavey

Jii gwandak izhii ginjik vat'atr'ijahch'uu zhit
yinothan jì', diits'àt ginohkhìi.

Gwich'in

UVANITTUAQ ILITCHURISUKUPKU INUVIALUKTUN, QUQUAQLUTA.

Inuvialuktun

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Inuktitut

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarlutit.

Inuinnaqtun

1-867-920-3367

Mind + Spirit

NWT Mental
Health Magazine

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Silence is harmful.

Talking openly and honestly about suicide can help.

Applied Suicide Intervention Skills Training (ASIST) can help you help those in need, and possibly save lives.

To learn how you can help members of your community who may be at risk, contact your local Community Counselor or visit:

livingworks.net/programs/asist

Marking Mental Health Week in the Northwest Territories

In the North, we're strong, independent people. Maybe that's why so many of us find it hard to admit we're having a hard time dealing with serious issues. The fact is, it's not just ok, it's really important to take care of your mental health and talk openly to others about any challenges you're facing. For too long, people have been afraid to share their problems with someone else. This contributes to personal tragedies, suicide and addiction issues, which can often be linked back to mental health challenges that have not been addressed.

May 5-11 is National Mental Health Awareness Week and it's a chance for us to get the conversation going about what programs and services are out there to support mental well-being in the NWT. As the Director of Territorial Social Programs, I can say with confidence that we have some great people working hard to help us stay well in mind, body, and spirit. With excellent staff and programs in place, it's time to let people know about what we're doing.

This magazine is part of that process. In it, you'll find lots of good information on everything from new programs to a great territory-wide youth radio program that profiles inspiring young people who have overcome challenges and are role models for healthier lifestyles. We also have an article which explains more about what mental health is and some of the common ways to recognize if you or someone you know might have a problem. There's also a Question and Answer session with Glen Abernethy, the Minister of Health and Social Services.

We hope you enjoy the first-ever issue of the Mind + Spirit magazine. Whether you're looking for tips on taking care of your mental health, wanting the straight facts on mental illness, or more information on where to find help for yourself or others, we think this magazine has something for everyone.

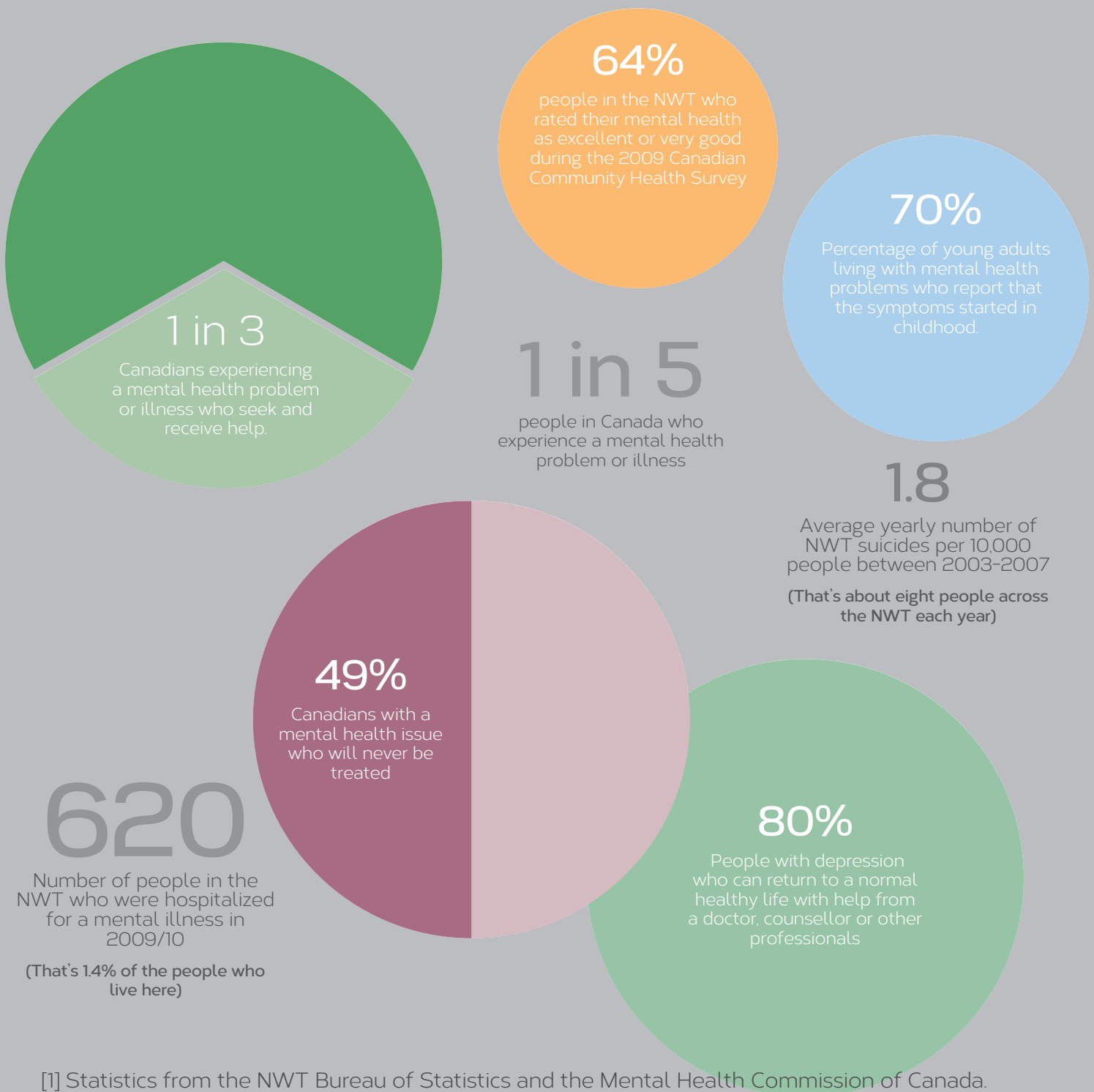
Sincerely,

Andy Langford
Director, Territorial Social Programs

Mental Health: By the numbers

Sometimes numbers are much better than words at telling a story.

Here are some numbers and stats about mental health in the Northwest Territories and across Canada. [1]



News

Training available to help prevent suicide

If you've ever wanted to know what to do when someone is thinking about suicide, there's training available across the NWT.

It's called Applied Suicide Intervention Skills Training (ASIST), and it's a two-day workshop for people who want to lower the risk of someone committing suicide. The training helps you to know what questions to ask if you think someone is at risk of harming themselves. The workshop uses small group discussions, videos and role plays that help you learn how to know if someone you know is thinking about suicide and if so, how to take the first steps toward helping them.

In the NWT, ASIST training sessions happen several times a year. In the past, non-governmental organizations and government workers have been trained. The GNWT Department of Health and Social Services is now offering the training to other community groups and the public. Anyone interested in attending an ASIST training session in their community can call their local Community Counselling Program for more information (see page 20).

Mental health starts early

The beginning of good mental health starts before birth and continues to develop throughout early childhood. To help make sure NWT children and families get the best start, the Government of the Northwest Territories is expanding the Healthy Family Program to reach more communities. The Healthy Family Program is a voluntary home visitation program for young mothers

and new parents. This early intervention program aims to help parents raise children with strong mental development. The program is based on the Growing Great Kids Inc. curriculum and adapted to fit the NWT cultural context. The program was piloted successfully in 4 communities and has now expanded to 15 communities, including Yellowknife, N'dilo, Dettah, Hay River, Fort Smith, Behchoko, Fort Simpson, Fort Liard, Fort Providence, Inuvik, Fort McPherson, Deline, Tulita, Colville Lake and Norman Wells.

NWT Help Line now 24/7

Now people across the NWT can talk to a trained counsellor confidentially, free of charge, at any hour of the day. This past winter, the NWT Help Line officially expanded its hours to 24 hours a day, seven days a week. The counsellors can help with any number of issues big or small including stress management, suicidal thoughts, abuse, sexual assault, and depression. Whether you're worried about having had unsafe sex or in some sort of disagreement or conflict with a family member, the NWT Help Line counsellors are there to listen. If it's the right thing to do, they can do follow up calls with you about whatever issue you might be having. **The number to call is 1-800-661-0844.**



1 in 3 people will experience a mental health problem in their lifetime.
This means someone you know probably needs you.
Be there to help.

Mental Health First Aid training gives you the skills you need to make a difference.

Recognize symptoms. Provide initial help. Guide the person to a professional.



If you are interested in scheduling an Instructor Training session for your area,
please contact your local Community Counselor on page 20 or email
mhfa@mentalhealthcommission.ca

mentalhealthfirstaid.ca



Andrew Noah being interviewed.

Being real on the radio

Youth talk openly, honestly about mental health issues on Feel Real Radio

Jacey Firth-Hagen comes into the CKLB radio station each week with a list of questions and a few notes about her interview subjects. As for what happens after the microphones are turned on, and she finds herself sitting across from a real live person, well that's something she doesn't control. Most interviews go as you'd expect, not unlike questions we might ask each other in line at the grocery store. "How are you doing tonight?" "I'm great, how about you?" But what

happens when the answer to "How are you?" is "Well, today's okay, but yesterday I could barely get out of bed."?

Partly because of the subject matter of Feel Real Radio, which talks about real life experiences and challenges of Northwest Territories youth, Jacey sometimes gets these flashes of reality. When this happens, she drops her usual joyfulness and tries to show her understanding of the hard times experienced



Host Jacey Firth-Hagan listens to Quentin Bodnar-McLeod.

by some of her guests. Youth like Quentin Bodnar-McLeod and Andrew Noah have both shared on air that depression among youth in the North is real and that they've experienced their fair share.

When thinking about possible subjects for an episode called Boredom Busters, Quentin Bodnar-McLeod seemed ideal. He taught himself to play guitar, sing and write songs. Perhaps more importantly, he shares his opinions in a way that many 20-year-olds either can't or don't. On the day of his interview, like a seasoned celebrity, Quentin arrived early, his hair freshly cut, his guitar tuned, his hand outstretched, ready to provide a firm handshake to all members of the crew. After wowing the team with a couple of poignant songs about love and self-discovery, the questions began. First, Jacey learned her guest is an auto body

mechanic who picked up the guitar at age 15 when he was introduced to Metallica by his step-father. Then she launched into slightly more serious questions. "When you look back, what kind of stuff did you do when you were growing up in Inuvik that helped you pass the time in a positive way?" His answer hinted at a tumultuous past which involved drugs, alcohol and partying. This makes Quentin a typical NWT youth; according to the most recent NWT Addictions Survey, one in four report heavy drinking at least once. What sets Quentin apart from his peers is his ability to talk about what he's been through and point out the challenges for youth today.

When asked for his thoughts on the importance of positive role models for youth in the North, Quentin right away started talking about a general lack of understanding of the effects of depression and alcoholism on our young population.



"No one really looks at it in the same way that I do now. And there are even adults that are 30 and 40 that don't even look at it the same way. They think it's just something that they'll just brush aside. They just watch their kids go through it and they think it's just a normal thing and I think everyone should have more of a realization about how serious it is. That's honestly what I think."

Jacey, maybe not expecting such a loaded answer, responds with a positive spin. "No kidding! But I think as we move forward there are more things being offered, and more people are realizing. It's not being swept under the rug that much anymore."

Though there are many programs to help treat mental health issues in the NWT. At Feel Real Radio—which airs on CKLB radio and is available anytime as a podcast online—we're hearing more

stories of youth who aren't ashamed of the challenges they face with mental health and who want to talk openly about it with other youth.

Later in the season, on an episode called The Real Me, Jacey interviewed Andrew Noah. He's a transgender teenager originally from Vietnam who moved to Yellowknife at the age of four. Andrew was born into a girl's body, but always felt he was a boy. His decision to come out was met with disapproval by his birth mother, so Andrew moved in with a different family.

In studio, Andrew spoke calmly about one very hard time. "The woman who I consider to be my real mother, I had brunch with her recently and while she was making me waffles, she asked how I was doing. I was honest with her. I told her I was depressed, that I wasn't going to school. I had trouble getting out of bed and that every day was a struggle. She was supportive when I came out and she supports my gender identity. She said she'd wake me up every day and sing 'Here Comes the Sun' by the Beatles if it meant I'd go to class. She loves me unconditionally and that's all I need. I can believe in myself because she believes in me."

Thinking back about this interview, Jacey said "it was yet another surprisingly powerful moment on the show and a reminder that the solution might be easier than we think."

Feel Real Radio is one of the ways the Government of the Northwest Territories wants to help youth talk about and deal with issues of mental health and prevent addiction. But as the stories of Quentin Bodnar-McLeod and Andrew Noah serve to show, change needs to begin within our families. Young people like Quentin and Andrew are telling us that addictions and depression are as relevant to youth as adults and it's time we bring up these issues around the breakfast table. The bottom line is, many NWT youth have a solid understanding of their very real problems and it's up to us to stop treating their issues as just symptoms of adolescence.

Parents can find resources about how to talk to their children about addictions at feelrealradio.ca/parents. The same information can be applied when talking to youth about mental health issues. To hear the full interviews discussed above, visit the Feel Real Radio website www.feelrealradio.ca. Feel Real Radio airs Thursday nights at 7:00 PM on CKLB radio at 101.9 FM.



Mental Health Tips from Around the Table

Yellowknife psychiatric
team shares advice

Psychiatry – The study and treatment of mental illness

Every Friday morning, a group of psychiatric professionals meet for coffee to exchange ideas. The team is based in Yellowknife, but serves all of the communities across the NWT. This meeting also helps them as professionals in different parts of the healthcare system work better together to meet a patient's needs because they know the challenges each other face.

There are other more formal ways that professionals work together to help patients as well. "In the NWT, we are really one of the few places where we have outpatient psychiatry in primary care," says Barbara Lacey, Manager and Clinical Supervisor of Community Mental Health

and Adult Services in Yellowknife. This means psychiatrists, who specialize in mental illness, are able to provide information to family doctors more easily.

In the NWT, similar to the rest of Canada, mental health is now grouped with other chronic diseases, such as diabetes and heart disease. This makes it easier for professionals to provide long-term care and focus on prevention.

We asked the professionals for a few ideas on improving and keeping a strong mind. Here are a few tips from the team:



Make time for things you enjoy

If sports aren't your thing, be sure to make time for a hobby or craft that makes you happy. Again, it will keep your stress level down and often help you socialize, both of which help take care of your mind.

Watch what you eat

The healthy foods that keep your bones and muscles strong are the same ones that will keep your brain working well and thinking clearly. It is tempting to just settle for fast food, but a balanced diet provides the fuel your brain needs to problem solve and stay focused.

Good Physical Health = Good Mental Health


Getting regular exercise helps people maintain a good state of mind. "The evidence links good mental health to good physical health," says Tom Ripley, a psychiatrist who's worked in Yellowknife for ten years. When you're stressed, you might want to withdraw from your friends, stop exercising, but that's actually the opposite of what you need to do. It can be as simple as going for a walk on a daily basis, he adds, to something more intense, such as playing sports.

Go to sleep and wake up on a schedule

Having a regular time you go to bed and get up can help lower your stress level and improve your mental health. The number of hours you should sleep depends on how tired you are during the day. Avoiding napping and caffeine in drinks like coffee can also help, as can getting outside and exercising during the day.

If you think you or someone you know needs to see a psychiatric professional, you can start the process by contacting your Community Counsellor (see phone listing on page 20).

Anyone who is having trouble completing their daily routine should get in touch. If things are more serious, and the person you know is a risk to themselves or somebody else, you can call your local RCMP.

A portrait of Minister Glen Abernethy, a middle-aged man with short, dark hair, smiling slightly. He is wearing a dark navy blue zip-up jacket with a small logo on the left chest. The background is a plain, light-colored wall.

Keeping a happy and healthy mind

Health and Social Services

Minister Glen Abernethy talks about
mental health and addictions

The Government of the Northwest Territories is trying some new things to help people who live here deal with mental health and addictions issues. The Minister of Health and Social Services is very passionate about living a healthy lifestyle and wants people to know more about what options are available to them. We asked him a few questions to see what the government is doing to address this important issue.

Q: When we talk about mental health issues, what do we mean?

A: It can be as simple as someone who's feeling poorly after a bad day or something much more serious, like someone who's really depressed and thinking about hurting themselves. It's not always easy to know if you or someone you care about has a problem. But if you aren't feeling well or are bothered by something, it's usually a good idea to talk with a counsellor before it becomes more serious. That's why we have things like the Community Counselling Program and the NWT Help Line that's now available 24 hours a day in every community across the NWT.

Q: It seems like there are a lot of new things happening in mental health and addictions programming.

A: You're right, there's a lot happening. People across the NWT have told us we needed to change our approach to getting people back on track and to make sure people heal themselves for the long-term, not just for the short-term.

That's why we have a series of new options for people who are looking for help with mental health or addictions problems, such as our on-the-land healing pilot programs. We're also continuing to offer the NWT-wide Community Counselling program, which I just mentioned, and a number of other things.

A lot of healing happens on the land.

We're doing our best to make sure a variety of ways to help are in place when people decide they'd like to start their healing process.

Q: Tell us more about the on-the-land healing pilot programs.

A: We know that a lot of healing happens on the land, and that's part of what we heard during the Minister's Forum on Addictions and Mental Health. A 12-member team travelled across the territory to hear people's thoughts on these issues and made 57 important recommendations.

As part of our response to those recommendations, we've started rolling out on-the-land treatment programs as pilot projects in the Beaufort-Delta, North Slave and Tlicho regions. We're even looking at an on-the-land pilot program for youth.

The best part is that each of the programs has been tailored to each region's needs. Some of the camps are more focused on stopping problems before they start, while others are there to support people who have recovered or looking at healing and the spiritual part of a person's journey to

wellness. The great thing is we'll eventually hear from the people in each region about what works and what doesn't and plan to make the camps even better. In some cases that may mean offering longer camps or changing the type of programming depending on what people think.

Q: What do people need to know about the government's approach to mental health?

A: There are a number of things we're doing, some which are new and some which we've always done. The first, and it's a big one, is helping make sure everyone understands how important good mental health is. But we also have to make sure people know that it's ok to talk about these things and that one in three people have problems with mental health. That means we all know someone who's struggling. When you think of it that way, usually people are more open to the idea of thinking of these issues as normal things that people have to deal with. We're also really focused on the people we're trying to help. This is important because if we don't think about their needs, we don't have a successful program.

Two other key things are making sure our services are available across the entire territory and that what we're doing is effective. I'm excited about the way we're doing things and think people will be happy to hear we have even more planned for the coming year.



How you can help

Mental Health First Aid teaches how to deal with the first stages of a problem

Mental illnesses are a group of health problems that affect our mind and make it hard to feel, think, and act in ways allow us to enjoy life and cope with the problems we face. Just like there are many different illnesses that affect our bodies, the effects of mental illness on our health can vary widely. The impacts might be minor, such as feeling down or in a bad mood, or it could lead to something more serious, such as considering suicide. One in three people will experience some form of mental illness in their lifetime.

Mental illnesses are still feared and misunderstood by many people, but the fear will disappear as people learn more about

them. If you, or someone you know, has experienced mental illness, there is good news: help is available! All forms of mental illness can be treated.

The Mental Health First Aid training course was developed to help provide initial support to someone who may be developing a mental health problem or is experiencing a mental health crisis. This course is available as a two-day training course free across the Northwest Territories. If you're an individual or organization interested in taking the training, please contact your community counselling program using the list of numbers on page 20.

The Mental Health First Aid training includes learning how to:

Assess the risk of suicide or otherwise hurt themselves – In the course, people learn how to reduce the harm for situations such as an overdose, suicidal behaviour, panic attacks, reaction to traumatic events and psychotic episodes.

Listen non-judgmentally – Simply by listening and not judging the person, you will make them more comfortable to talk about any problems they are having.

Give reassurance and information – This will help the person feel hope and see there are medical solutions for their problem.

Encourage the person to get the right professional help – You can do this by helping the person reach the right person for their problem.

Encourage other supports – This often means helping the person help themselves by reaching out to their family and friends.

You may have heard of more common problems such as depression and anxiety, but there are others, as well. Here are the main categories of problems you or someone you know might encounter with your mental health:

Substance-related Disorders

Description: Sometimes, a person can use a certain drug or drink alcohol so often that their body becomes used to it. They can begin feeling that they can only function if they have it in their system, even if it causes bad things to happen. Or a person may enjoy the feeling they get from something so much that they become emotionally dependent on it.

Risk Factors: People whose parents suffer from a substance use problem are more likely to develop dependence themselves. Stress, physical illness, social factors and how sensitive someone is to alcohol or drugs can also increase the risk.

Mood Disorders

Description: At some point, everyone experiences losses or tragedies that bring sadness or grief. People with mood disorders experience moods outside their normal range for a long time. Those with more severe symptoms may also feel their mood and emotions are not under control.

Depression is the most common mood disorder and although it may start to be a problem in a person's teens, it's not usually diagnosed until that person is in their 20s or 30s. It's also more than just feeling blue. A major depression could mean someone has no interest in doing any of the things that usually make them happy.



Signs and Symptoms: Someone with major depression will experience five more of the following:

- An unusually sad mood most of the day, nearly every day
- Loss of enjoyment and interest in usually enjoyable activities
- Significant weight loss or gain without a diet
- Sleeping too much or too little, nearly every day
- Moving more slowly or becoming agitated and unable to settle down
- Lack of energy, being tired all the time
- Feelings of guilt and being worthless, nearly every day
- Having a hard time concentrating, making decisions, nearly every day
- Regular thoughts of death or suicide

Risk Factors: Depression has no single cause and may happen due a number of factors. A person may become distressed without an explanation or after something bad or stressful happens, such as:

- Breaking up with a girlfriend/boyfriend
- Having a baby
- Loss of a job
- An accident causing long-term disability
- Being a victim of a crime
- Developing a long-term physical illness
- Caring full-time for someone with a long-term disability
- Unresolved grief, especially from when they were a child
- Death of a partner or family member

Anxiety Disorders

Description: Anxiety can range from being uneasy about a situation to having a panic attack and can last from a few moments to months, or even a lifetime. The trigger for anxiety does not have to be negative, it often happens before exciting times like a graduation or the birth of a baby. If someone has an anxiety disorder, their anxiety level is very



high and stops them from living a normal life. If a person's anxiety is severe or intense, long lasting, happens at random times for no good reason, and stops them from doing things like working, it could be an anxiety disorder. This condition affects how someone feels, thinks and behaves and, if untreated, could become chronic and lead to considerable suffering and disability, as well as substance abuse, depression and other problems.

Signs and Symptoms:

- Fear and a sense of coming doom or danger
- Large amounts of worry
- Fear of dying or "going mad"
- Lowered attention or concentration
- Feeling unattached to oneself
- Fast or slow thoughts
- Easily distracted, irritated, can't sleep or with very vivid dreams
- Fast heartbeat, chest pains
- Fast breathing or short of breath
- Dizziness, headache, tingling or numb skin
- Choking, nausea, vomiting
- Muscle aches and tension

Risk Factors: Some people are more likely than others to develop an anxiety disorder. Women are almost twice as likely as men to have anxiety. People who've had an anxious parent are also more likely as are those who have experienced physical or emotional abuse. Anxiety can also co-exist with other mental health problems, such as depression.

Psychotic Disorders

Description: Psychotic disorders cause someone to lose some touch with reality. They can severely change a person's thinking, behaviour and emotions. Psychotic disorders are less common than other mental health problems. People in the early stages often go undiagnosed for a year or more before receiving treatment. Symptoms often begin during the teenage years or when someone is in early adulthood. Schizophrenia is the most common of these disorders. When it comes to psychotic disorders, any severe changes in mood should be taken seriously as the signs and symptoms vary by person and may come and go.

Signs and Symptoms: When a psychotic order is developing, a person may experience changes in emotions, thinking and behaviour, some of which include:

- Depression
- Mood swings
- Increased anxiety
- Thinking other people are watching them
- No emotion
- Angry or fearful of friends and family for no clear reason
- Change in appetite
- Reduced energy and motivation
- Hard time concentrating
- Feeling as though people have changed when they haven't
- Unable to turn off their imagination
- Strange sense of smell, either weaker or stronger
- Talking gibberish or using words that don't make sense
- Hard time controlling thoughts
- Hard time sleeping
- Not wanting to see people or socialize
- Not studying, working or taking care of personal hygiene

- Weakness, pain or strange feelings in their body
- Sudden extreme behaviour in activity, beliefs etc.

Risk Factors: Psychotic disorders are believed to be caused by a combination of biological, environmental and social. Psychotic symptoms may also develop during a very stressful time or appear in someone who is abusing drugs. While psychotic disorders are not always passed down to children, people with parents who have had these problems are statistically more likely to experience them, as well.

It is possible to have more than one mental health problem at a time. If you or someone you know is struggling with mental illnesses, it is important to remember that all of these conditions can be successfully treated with the right combination of therapies and supports. Learn more by contacting your local Community Counselling Program or Health Centre.

Source: Mental Health First Aid Canada, a program of The Mental Health Commission of Canada



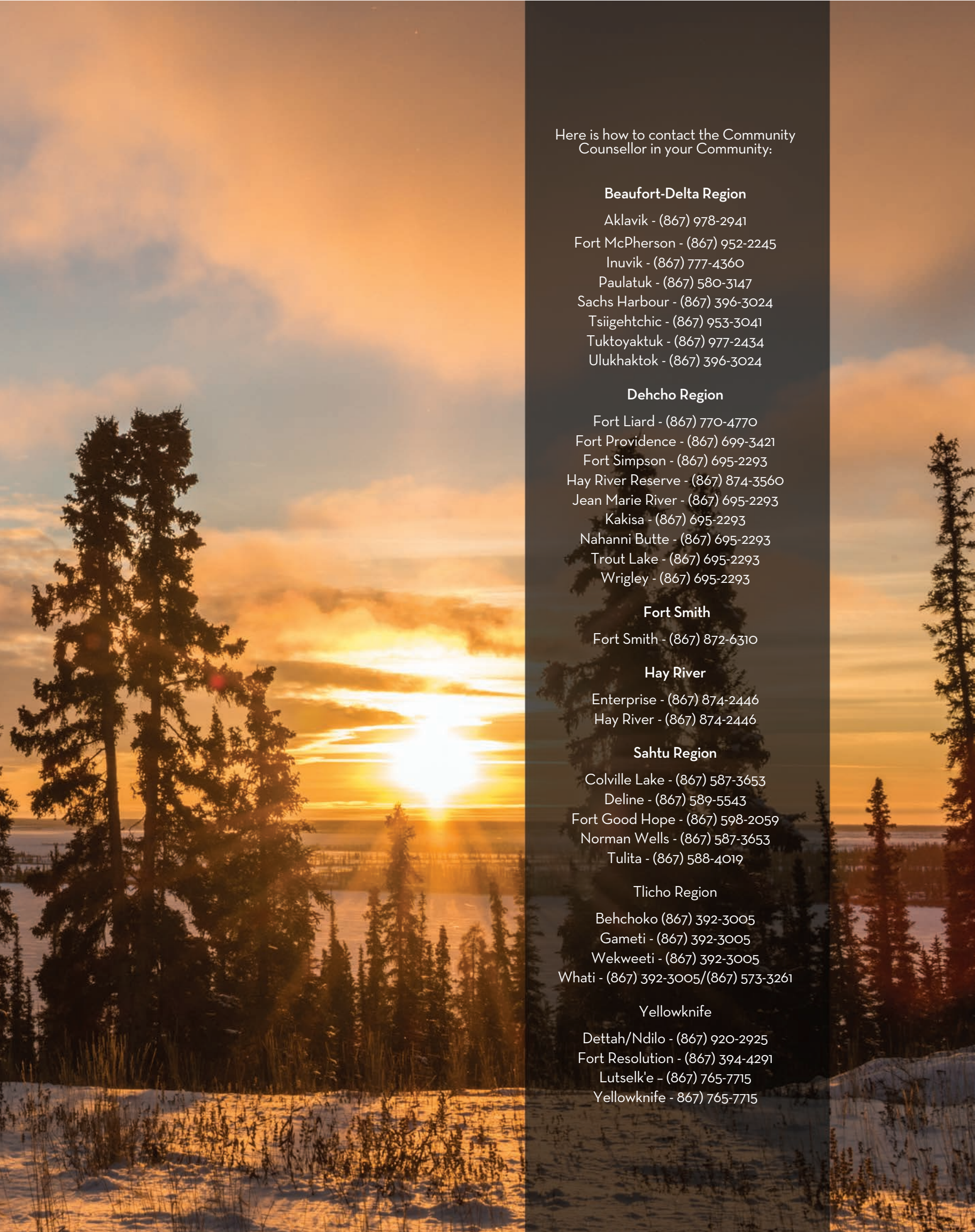
No matter where you live in the NWT, there are people who can help.
From anxiety, to depression, substance use, or problems at home, your community
Mental Health and Addictions Counsellor is always there to listen and direct you to help.

The assistance you need is only a phone call away.

Everyone has problems.
You don't need to deal with yours alone.



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Here is how to contact the Community
Counsellor in your Community:

Beaufort-Delta Region

Aklavik - (867) 978-2941
Fort McPherson - (867) 952-2245
Inuvik - (867) 777-4360
Paulatuk - (867) 580-3147
Sachs Harbour - (867) 396-3024
Tsiigehtchic - (867) 953-3041
Tuktoyaktuk - (867) 977-2434
Ulukhaktok - (867) 396-3024

Dehcho Region

Fort Liard - (867) 770-4770
Fort Providence - (867) 699-3421
Fort Simpson - (867) 695-2293
Hay River Reserve - (867) 874-3560
Jean Marie River - (867) 695-2293
Kakisa - (867) 695-2293
Nahanni Butte - (867) 695-2293
Trout Lake - (867) 695-2293
Wrigley - (867) 695-2293

Fort Smith

Fort Smith - (867) 872-6310

Hay River

Enterprise - (867) 874-2446
Hay River - (867) 874-2446

Sahtu Region

Colville Lake - (867) 587-3653
Deline - (867) 589-5543
Fort Good Hope - (867) 598-2059
Norman Wells - (867) 587-3653
Tulita - (867) 588-4019

Tlicho Region

Behchoko (867) 392-3005
Gameti - (867) 392-3005
Wekweeti - (867) 392-3005
Whati - (867) 392-3005/(867) 573-3261

Yellowknife

Dettah/Ndilo - (867) 920-2925
Fort Resolution - (867) 394-4291
Lutselk'e - (867) 765-7715
Yellowknife - 867) 765-7715

Someone to talk to, close to home

Say you've been having a rough time lately. Maybe there was a suicide in your family or your spouse is hitting you. Maybe you can't control your drinking, or you just do not feel like leaving the house and do not know why. Or maybe you're just sad all the time and you are not sure what to do about it. For NWT residents struggling with mental health problems big or small, help is available—in every community, regardless of size.

Since 2004, the territory's Community Counselling Program has provided on-the-ground access to mental health services in all communities, no matter how small or remote. "It's a one-stop shop where people can get help simply by walking through the door," says Kathleen

Mackey, Acting Manager of Mental Health and Addictions for the Department of Health and Social Services. It's a very important service in the NWT where addiction and suicide rates are high, where historical trauma has been widely felt, and where health care can be hard to deliver. It's also a unique and tailor-made program. The NWT is the only place in Canada to offer free counselling services across an entire territory.

In the years before community counselling, people had to be flown out for treatment, usually to Yellowknife or Edmonton. It wasn't a perfect system. Though it worked to deliver much-needed care in a crisis, it was reactive and less able to prevent or treat problems before

they became worse. When clients returned to their home community after treatment there was little to no follow-up care, which meant their problems often had a way of coming back.

Starting in 2002, the territorial Department of Health and Social Services launched a complete overhaul of its mental health services, with a move toward consistent, locally delivered care. Out of that came the Community Counselling Program, which now staffs 65 positions across the territory: a combination of Mental Health and Addictions Counsellors—who are certified clinical therapists—and Community Wellness Workers, local residents who do mental health outreach and promotion. This means anyone



Free Community Counselling Program
helps people in NWT communities
face any type of problem



Beatrice Lenzi, Wellness Worker, Fort McPherson

You can talk about anything with the counsellor in your community, like how you're feeling or things in your life that you find hard to deal with. Anything that causes problems for you, your friends or your family is fine. Your counsellor may also help you find other services to help you. You can find the number for every NWT community on page 20. Or, if you know where they are, you can just stop by and schedule a time to meet. They would be happy to see you.

from Ulukhaktok to Fort Smith can sit with a trained counsellor to access information on mental health, or simply take comfort in knowing help is close by. Counsellors live full-time in 17 communities while in the other 16 communities counsellors provide phone support, in-person counselling on a fly-in basis and telehealth. It's all part of the program's broader goal to make mental health services as easy and accessible as possible, because, as Mackey says, "the hardest part of getting help is simply asking for it. Once you get people through the door a lot of other doors open up."



Naomi Ballantyne is the registered counsellor in Fort Providence. The 26-year-old came north from Vancouver fresh out of grad school, eager to immerse herself in work in a way that's easy to do in small communities. Her office is in the Snowshoe Center, which she shares with the Community Wellness Worker and other social and health services staff. It's got a humming, warm atmosphere that's welcoming to walk-ins. More commonly, though, people will call to book an appointment with Ballantyne, or they might get referred



Naomi Ballantyne, Community Counsellor, Fort Providence

for counselling via social services or other community agencies. Ballantyne counsels a whole range of issues, but mainly addictions and trauma (residential school, abuse of all kinds, family violence), as well as depression and anxiety. The pattern is similar across most of the communities.

Ballantyne spends the bulk of her time counselling, but she also works out of the school to treat some of her young clients

using play and art therapy. She might do some classroom sex education and, if she has time, help the Community Wellness Worker with various outreach programs. "We work as a team," says Ballantyne. "[The Wellness Worker] will refer people to me, I will refer people to her."

Between the counsellors and wellness workers, the program as a whole offers complete care: prevention and health promotion, counselling,

intervention, referrals to other facilities (for complex addictions, suicide treatment or sheltering victims of violence), as well as important aftercare. Having this kind of committed, longstanding mental health care has resulted in a clearer, deeper picture of patient history. "Before 2004, people would go to Stanton and come back and not have after-care services, not have a paper-trail of who they are and their struggles," Ballantyne says. "In the short time I've been here, we've already built up a good record of what's taken place in that family or what that person has struggled with, and it really strengthens the service we can provide."

Since she started the job a year-and-a-half ago, Ballantyne figures she's seen about 100 different clients, which "is pretty significant for a population of 750 people," she says. She's counselled a six-year-old, an 80-year-old Elder and everyone in between. She typically runs 50-60 sessions a month—some patients come weekly, some biweekly, others drop in just once or need Ballantyne's counsel only briefly. As any community counsellor will tell you, certain seasons are busier than others. Hunting


and trapping months, for example, are typically quiet, as are summers, but heading into winter, it gets busier.

Though the counselling service is well-used in Providence, Ballantyne says promotion and outreach work is still critical to "normalize mental health services and encourage people to use them." In small, remote communities, the idea of therapy—a weekly sharing of problems and feelings—is relatively new and not necessarily appealing. But Ballantyne says people who have used the service seem to appreciate it. "It can be very expensive to see someone for mental health down south, \$120/hour typically." Seeing someone who's local can be much more effective, though there are times when referrals to southern programming are the best option.

Trained counsellors like Ballantyne are usually from the south, but the wellness workers are almost always local. And it's local knowledge that makes the program special. "It developed to have people from the communities serving the communities," says Kathleen Mackey. "But also recognizing that there's a need up here for a very high level of clinical skills, so the combination of counsellors and the wellness workers fulfills both."

In Fort Providence, for example, the dynamic is extremely effective, according to Ballantyne. "It's wonderful to offer that mix of non-local and locals in our offices, because it helps build trust," she says. "The Wellness Worker knows the families and the community, so she can really open the door for me when people don't know me well." Sometimes Ballantyne will hand off clients

"People can get help simply by walking through the door."

A professional headshot of Kathleen Mackey, a woman with shoulder-length, wavy blonde hair and bangs. She is wearing a black long-sleeved top under a black cardigan, a silver necklace with a circular pendant, and a silver watch on her left wrist. Her hands are clasped in her lap. The background is a plain, light-colored wall.

Kathleen Mackey, Acting
Manager of Mental
Health and Addictions

to the Wellness Worker to relay information about medication or other services, since they may respond better to someone local. "In some cases, I feel the

does it all. Along with the face-to-face therapy (roughly five appointments a day) she does the outreach/promotion of a wellness worker, and travels the

At the same time, as Mackey points out, "some people don't want to be counselled by someone from the community, because maybe they've known them all their life—it could be a cousin or an aunt." Lynne agrees that a bit of distance can be healthy for the counselling dynamic. "Being from the south, I'm never totally part of the community so it can be easier, because people perceive me as not hooked into the local social network—I'm not a family member, I'm not allied with anybody. I'm totally neutral."

The dynamic, however, can go both ways. Beatrice Lennie (who goes by Bea) was born and raised in Fort McPherson. She was a social worker there for 13 years, before moving into various counselling roles, most recently as a Community Wellness Worker. "It can be hard in a small community because we all know each other," she says. "But many people feel more comfortable with someone local, someone who knows the community and its issues, knows their family history. That's what makes this such a valuable service, because it's here in the community and it's run by community members."

Lennie and her fellow Wellness Worker Edna Alexie have

"Get out of the house, take a walk, go talk to a buddy."

client might take the information better coming from someone more familiar."

Not every community has both a counsellor and a wellness worker. Some communities, like Norman Wells, have only a counsellor, while others, like Fort McPherson, have Wellness Workers. "It really depends on the community," says Mackey. "Health authorities are looking at what's best for each community, and what each community wants or needs."

BeAnna Lynne is the sole counsellor in Norman Wells, but she also does fly-in counselling for Colville Lake once a month, while offering regular phone-in support when she's not there. As the only counsellor, Lynne

region giving suicide awareness training. There's also the more urgent services—suicide or risk assessments sometimes required by RCMP or social services.

For Lynne, who's been in Norman Wells for two years (with a previous stint in Tulita), being "an outsider" can be both a challenge and a blessing. "In the communities, people are used to knowing people, and so it takes a long time of seeing someone's face before they feel comfortable to talk to that person," she says. "Sometimes, I feel like part of my work is being at the Northern Store and buying groceries, because people get used to seeing me, and feel more and more like I'm part of the community."

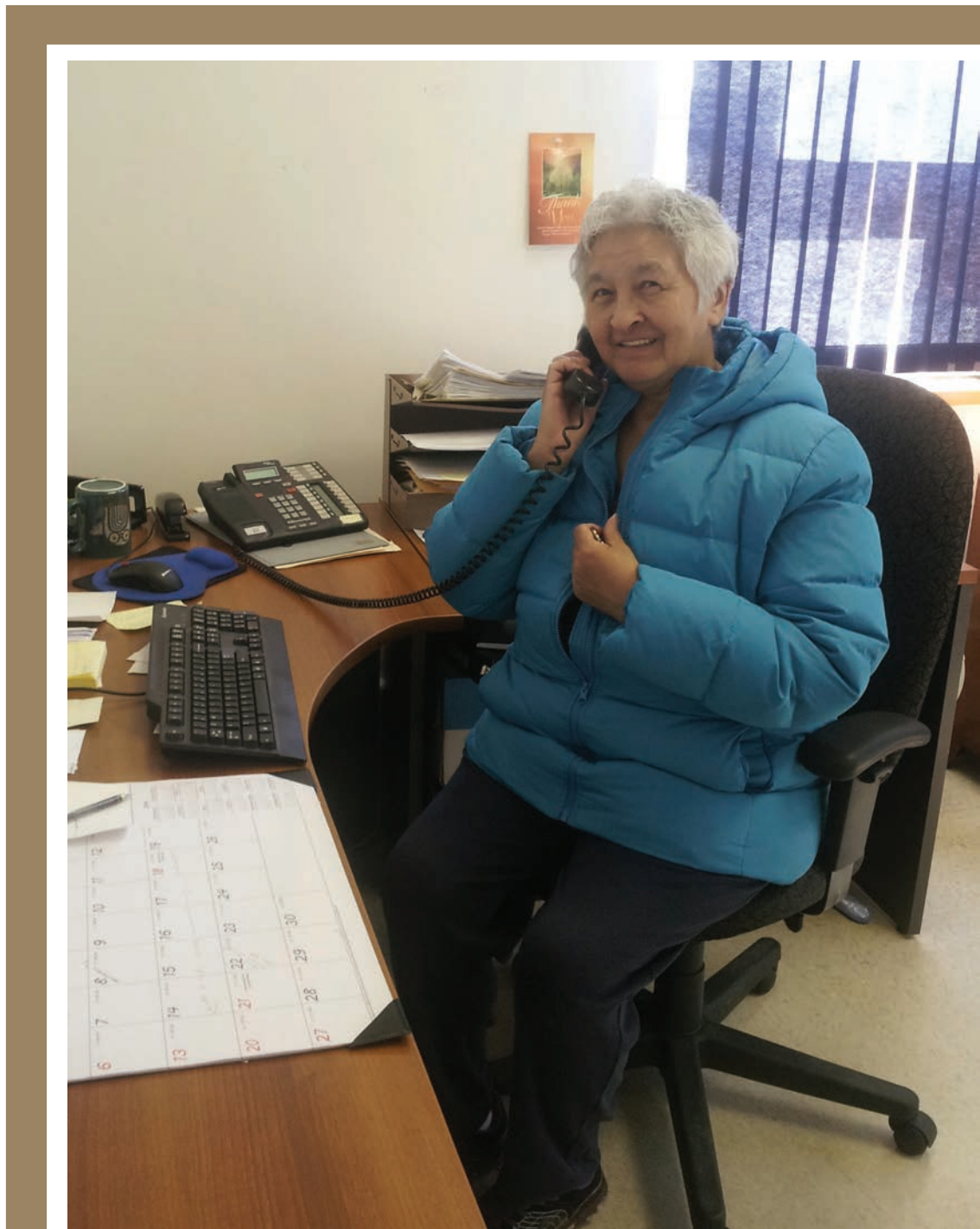
worked together for years.

Along with offering counselling services, they do a weekly spot on the local radio station with information about their services, upcoming events and even tips on anger management and how to stay positive. "Instead of yelling at your spouse, what else could you do?" she'd ask. "Get out of the house, take a walk, go talk to a buddy." These are the same sorts of tools Lennie might give her patients as homework, because, as she says, keeping good mental health, like anything, takes work. "It makes you feel good when you see people have stopped drinking, or they tell you their relationship with their spouse is better," says Lennie. "It's a very fulfilling job that way."

Regardless of who's delivering the counselling, whether it's a therapist or wellness worker, simply offering this level of care in the communities works to promote mental health and remove the stigma. "We have to show that mental health is not some big scary thing," says Kathleen Mackey. "Everybody has good days and bad days, everybody has issues and problems, and to reach out for help is nothing to be embarrassed about."

Now into its tenth year, the Community Counselling Program has become a pillar of territorial mental health services and has undoubtedly worked to normalize talk therapy and this idea of personal responsibility in a person's healing. Even if residents don't use the services in their community, they might know someone who's benefited from counselling or turned their life around. Or maybe just being

aware that there is someone to talk to is enough. "It's important to have people on the ground at all times," says Lynne in Norman Wells. "When you have a counsellor in the community, it gives people a certain level of safety and comfort—whether or not they go. At least people know it's an option, at least there's someone there to help if things get really bad."





The Path to Healing

A uniquely Northern, community-based wellness program takes shape

The view from the window of the Sah Naji Kwe Lodge is beautiful. It overlooks the North Arm of Great Slave Lake, which at this time of year, is covered in snow and a sunlit glow that lasts most of the day. "We like this spot," says Moise Rabesca, owner of

the lodge. "It's a lot of work to maintain it, but it's worth it."

His words hold a lot of truth, not just for the lodge but for the people staying here too.

For the past week, Moise has been host to a small group of men and women who've

signed up for one of three pilot On-The-Land Healing Camps offered across the territory this year. This particular camp is a partnership between the Tlicho Community Services Agency (TCSA), the Tlicho Government and the

Government of the Northwest Territories with the TCSA coordinating the project. The program encourages individuals to come together and share personal stories of addiction, and seek guidance in overcoming such hard struggles in their lives. Along with this particular camp, the TCSA offers a

variety of other counselling programs throughout the year, some of which deal with trauma from residential schools. Before a camp like the one at the North Arm, a TCSA staff person will meet with people interested in coming to help them look at their personal needs and goals and decide if the camp will help their healing.

As part of the one-on-one portion of the on-the-land program, the TCSA brings in counsellors like Terry Nasken from nearby Behchoko to discuss everything from the history of the Tlicho people to the impact of drugs and alcohol on the family. The key message of the camp: it is a lot of work to maintain your body and your spirit, but

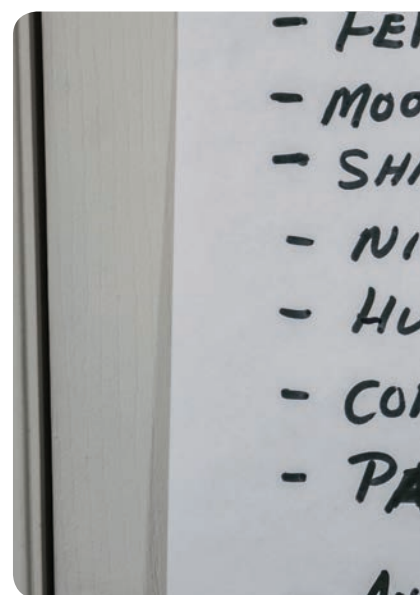


it is worth it. The group gathers around Nasken, who's surrounded by various charts and drawings that line the walls of the room, which are a reminder of the activities and exercises from the last seven

days. "And then we become adults – you become adults, The Providers," she says, pointing to a picture of a drum with four quadrants in it. "This is how we are taught about life and family. We make our

way around the drum, entering different stages as we go and filling a role in our community," she says.

The session, which lasts about 20 minutes, is like learning traditional

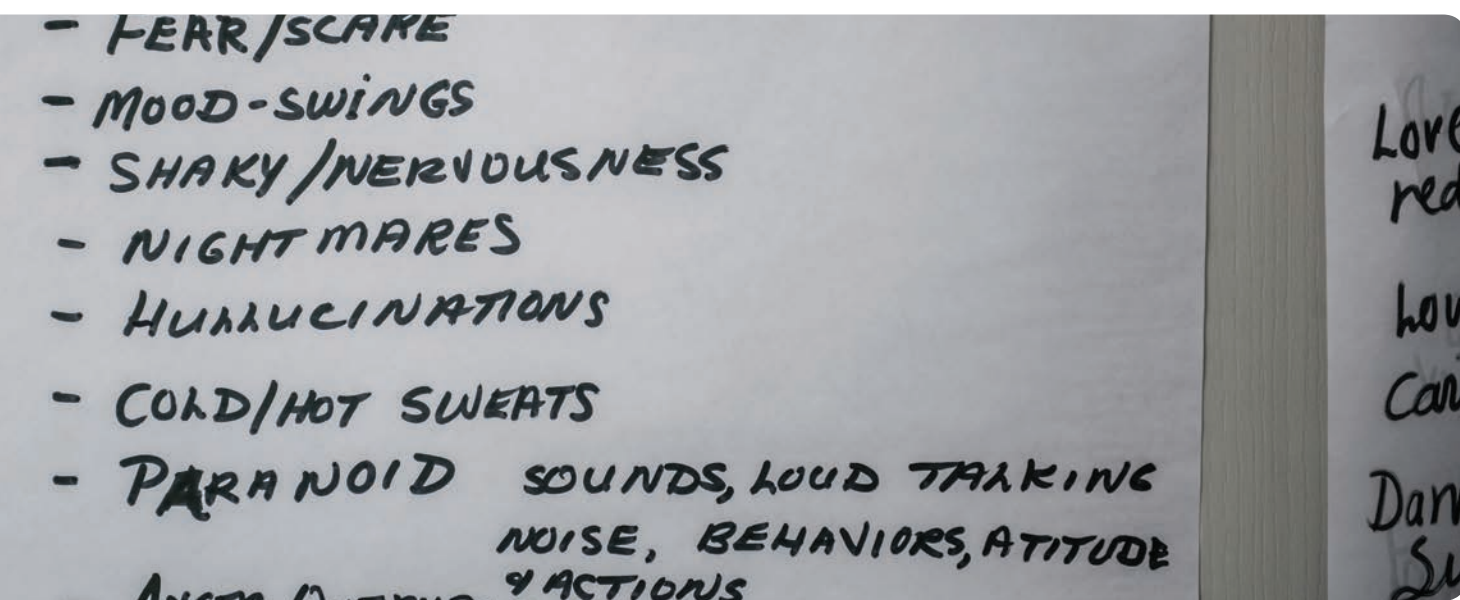


knowledge in a classroom.
"We are here to educate as well as share stories," Terry explains. "Bringing our clients out of chaos and into a controlled, structured environment to learn about

the traditions and teachings of our ancestors helps them a lot. But we have to be careful not to bore them or push them too hard either," she says.
To offset the classroom

exercises, participants are asked to help with duties around the lodge and to take part in on-the-land activities and ceremonies.

"We had a sweat, all of us



together,” says Participant A (none of the participants wished to be identified in this story). “It was tough and really emotional but I’m learning to trust people again and sharing in these kinds of things are good for the soul,” he says. Participant B, who checks the fishing nets and cuts firewood with Moise, agrees. “Trust is the

hardest thing here but it’s a great stress release to be able to open up with other people who are going through the same (challenges) as me.” Tony Rabesca, another counselor and the Director of Language, Culture and Communication with the Tlicho Government, explains the benefits of

having a program like this in the NWT. “The land is a place of healing. The Tlicho people strongly believe that. We are not sending our people away. We are not saying ‘go to Edmonton to get help.’ We are helping our own people who are part of our community. We work together towards healing and we do it here on our own





land, in our own language, using our own traditions," he says.

Though it is still much too early to measure the long-term success of the program, it is encouraging to see people coming forward, admitting they need help and asking for it. Previous pilot camps in N'Dilo and Inuvik filled up quickly, and this one near Behchoko is also full. The participants sit together, laugh, cry, meditate, listen to Elders and even learn about proper nutrition and basic biology.

"There are some very deep, multigenerational issues at play here and some days it is

mentally exhausting on the participants," Rabesca says. "Everyone chose to come here, everyone is in a different headspace but we've planted many seeds of hope. This is an ongoing process that cannot dismiss the need for an aftercare program to continue spiritual growth and avoid relapse," he says.

Participant B invites me outside as he helps Moise cut wood. He pulls a drag from his cigarette and pours oil into a chainsaw. "You know, one thing I'm proud of is that I came here on my own," he says. "I needed help and now, for the first time in a long time, I feel like I'm

learning new things and trusting people again," he says. Just like the lodge, Moise's words ring true for everyone in the program, "it is a lot of work to maintain it, but it's worth it."

Nobody knows if anyone here will relapse after the ten-day camp is over, but the TCSA provides follow-up treatment, which may include referring people to special programs in the south. In the future, TCSA plans to examine options for mobile treatment and more on-the-land programs to help those in need. The TCSA has also asked for feedback on the on-the-land camp and plans to hold another camp in June in Whati.



Getting help and coming home

One man's positive story of facing up to his addiction and healing himself

The summer of 2013 was a time of extremes for Keith Barnes, a recovering alcoholic who at the lowest point in his life, sought treatment for his disease and began a road to recovery. Only weeks earlier, Barnes found himself wandering the streets of White Rock, B.C. alone and ashamed of the person he saw in the mirror.

"I was lost," he says. "Mentally and emotionally I was a mess. I had just missed another day of work because I was drinking the night before. I

remember walking down what was supposed to be a busy street and it was very still, very quiet. Right then and there I called my folks and said I didn't want to do this anymore. Twenty-four hours later I was in a treatment center in Nanaimo," he says.

Barnes, who was raised in Hay River and now lives in Yellowknife, is well-spoken and matter-of-fact when he talks about his struggle with alcoholism. He confesses that his admission to a treatment center was not a whim but a result of years

of failed relationships and hiding his addiction.

"The years I was drinking heavily I would become very selfish and lie to my family about going to the bar," he says. "I'd say I was at work, when really, I left early and was at the bar with my buddies. It was all about me and what I could get away with."

Barnes' story is not uncommon, and in fact, his relationship with alcohol started as innocently as most people. At fifteen years old, he started experimenting with booze in high

school, mostly to hide his shyness, and gradually fell into a social circle where alcohol played a prominent role.

"Before I knew it I was in my mid-twenties, married, had a baby boy and I was still partying very hard. I would drink to blackout because that's just what we did," he says. "I worked at a mine for a while too and missed shifts here and there. One day I quit because I didn't really care – I thought I could go have fun and find something else," he says.

For the most part he did. Going from place to place, from job to job in Alberta, Saskatchewan and B.C. A physically fit, polite, young Aboriginal man with a background in the trades made him highly employable. As long as he hid his drinking, he was in the clear.

"But I couldn't hide it from everyone," he says. "My marriage and my relationship with my parents fell apart. I was more or less alone and I knew that my drinking had to stop. I couldn't imagine what my life would be like ten years down the road at this pace," he says.

At the Edgewood Addiction Treatment Centre in Nanaimo, Barnes says the other patients he met surprised him. Doctors and lawyers and miners and managers – everyday people who were hiding their addiction from family and coworkers, too.

"These weren't the stereotypical drunks you see on TV. I was surprised by that," he says. "You don't have to be homeless and living in the gutter to be an alcoholic."

During the two months at Edgewood, Barnes was given a schedule, which he says helped him fall back into a routine. "When your life is in chaos, the first thing (the treatment centre) does is put you on a schedule: breakfast is at 8 a.m., then we meet at 9 a.m., group activities at 10 a.m., then lunch at noon and so on," he explains. From there stems the real healing process of facing the addiction, talking about it with counsellors, finding out

where it comes from and why it is a part of everyday life.

"I can recognize my triggers, the social situations that could lead to drinking," he says. "Hockey is one of them. I love watching hockey and I've always thought of hockey and beer together. I still love hockey but I know I can't have a beer when I watch it. Not even one," he says.

But more than recognizing his limitations, the treatment program has helped Barnes be happy with what he already has and the potential for several great years ahead of him. At Edgewood, every Sunday was Family Day where patients' families could visit. Since Barnes' family lived in Hay River, they were not able to visit. "That was tough, but it was good too because I saw just how important family really is. For the first time in ages I missed having my family in my life," he says.

"Now, I have a great girlfriend who means the world to me. She's been truly supportive of me, and what's better is that I'm also truly supportive of her life and her dreams too," he says. "Like I was saying before, alcohol made me very selfish and now I'm thinking more and more about the people I care for. It's not just about me anymore. It's about her, it's about my son and it's about my parents too," he says.

Need help?

There are good options available

Whether it is mental health or addictions, people in the NWT have a number of

high-quality treatment facilities available at no charge. People from the NWT who have used these services have given very positive comments on the quality of care they were given. If you or someone you know needs help, they can visit their

Health Centre or meet with their Community Counsellor or Wellness Worker to start the process. Treatment facilities include:

Poundmaker's Lodge Treatment Centre:

This is a co-ed Aboriginal addiction treatment centre near Edmonton. Since 1973, Poundmaker's Lodge has been a leader in the addiction treatment community. Poundmaker's Lodge uses concepts based in the cultural and spiritual beliefs of traditional First Nations, Metis and Inuit peoples in combination with a 12-Step, no-substance-use recovery. Poundmaker's Lodge focuses on the root causes of addiction and helps people recover.

poundmakerlodge.com

Fresh Start Recovery:

Fresh Start is a 50-bed alcohol and drug addiction treatment centre for men in Calgary, Alberta. The facility provides a comfortable environment where men can escape addictions and learn to live rewarding and fulfilling lives in recovery.

freshstartrecovery.ca

Aventa Addiction Treatment for Women:

It has been shown that addictions in women are different than addictions in men, which can be because of a history of violence and trauma. Aventa specializes in trauma and addictions in a women-only environment. Women who come to Aventa in Calgary are given time to grieve their losses and slowly move past them.

aventa.org

Connecting elders and youth key to community wellness

When I was younger, an Elder told me "What others think of you is none of your business. Now go!" Another asked me what I was looking for, in response to a litany of complaints I had. I stopped, looked at him and said "Balance, balance in life." He looked at me and said "Well if you find it, let us know." Another told me "Spend time with yourself, to get a sense of what others are putting up with."

When I travelled to some of the communities with the Minister's Forum on Addictions and Community Wellness, I was often reminded of being a youngster when Elders played a big role in not just my life but in the whole community. So it was not by accident that the forum made a number of recommendations that required Elders to play a major role in implementing those ideas. The two overarching recommendations were related to on-the-land programs and youth, but two others that stood out for me were the celebration of healthy living and dialogue.

An on-the-land program uses the strength and skills of the community. It means involving Elders, if those seeking healthy living need or want to know the environment, astrology, pharmacology, zoology or the history of the people where they live. Elders are the wisdom and knowledge keepers, therefore it is almost impossible to do an on-the-land program without their guidance.

There was no doubt in anyone's mind that Elders need to be involved in programming with the youth. When I was a child I spent a lot of time with my grandparents. My parents were still considered "too young" to bring up children, so my brothers and sister spent a lot of time with our grandparents and other older people. They taught us respect for the land, love of others, spirituality, eating healthy, as well as humility and to learn to listen.

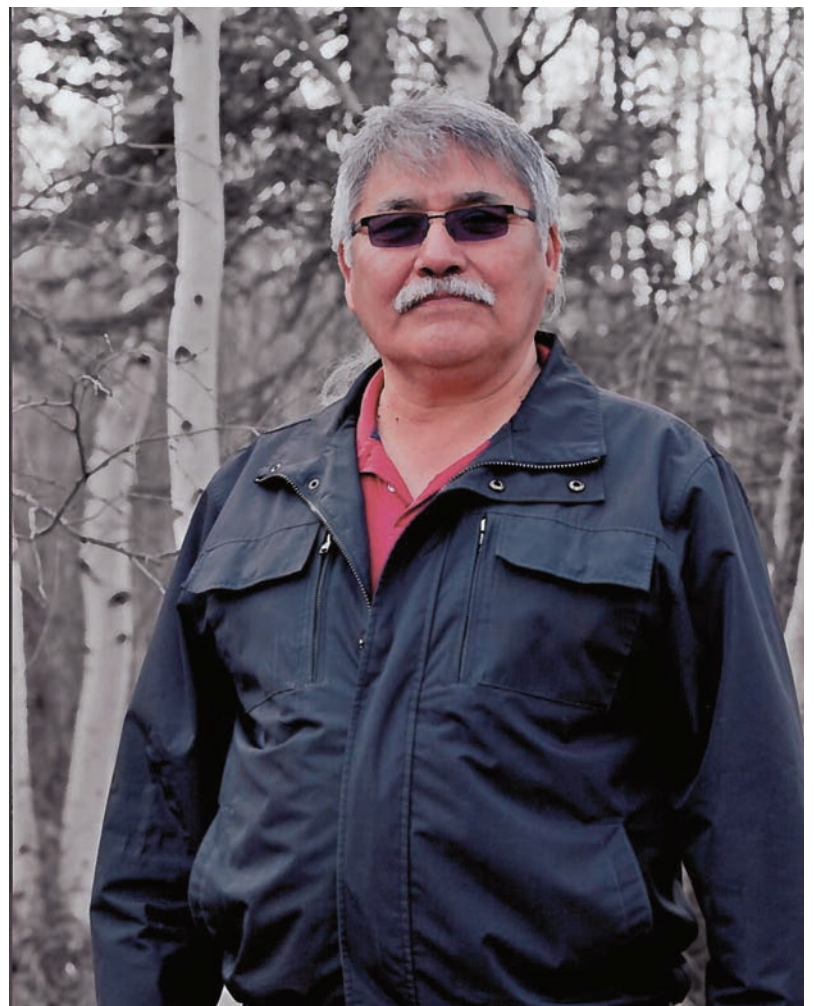
At an early age I learned what drum dances meant, how to pay the land, water and fire. I was taught a love of the land and respect for animals. Later on, when I heard Elders talk about the land being like their parents, I felt I understood what they were talking about. But I also heard the word "no" on many occasions. "No, you can't eat too much candy," or "no, you can't eat that piece of meat" or "no, you can't stay up too late." I heard many of those lessons in our community consultations, as well. The message was clear: if we are to return to healthy living, we need Elders.

An Elder in one of the communities said we spend far too much time and energy on negative things like alcohol, drugs or bingo. She said in all communities, despite all the social problems, there

are those who are living a traditional, good and positive life. She also said there are a lot of young people who are learning to hunt, trap and are doing well in school, but we never talk about or to them. She says it's time to make booze and drugs unacceptable!

Elders see solutions, not problems. For them it is not how cold or windy it is, but the lovely sun shining or the ability to see another day. They are grateful for having loved ones, food and health, and are naturally happy. They dance like it is their last dance and are not afraid to laugh the long, loud, belly laugh. They do not stand by and watch young people indulge in negative things. They talk with pride about the rich history we have and the great people we are descendants of. They rarely spoke about booze, drugs, and bingo or card games. They led by example. And if they needed something, they simply worked for it. If something did not work, they simply did it differently the next time. They were not perfect, they were spiritual. It is time for sober people and Elders to take our communities back!

Paul Andrew was the chair of the Minister's Forum on Addictions and Community Wellness which travelled to communities across the NWT in early 2013.



NWT Help Line

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nwthelpline.ca

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Overwhelmed with stress? Drinking getting out of control? Parents splitting?

Let's talk about it! Completely Confidential.
Completely Free of Charge.

1-800-661-0844



How do you know if you could use some help? Just ask!

Whether you live in Deline, Sachs Harbour, or Fort Simpson –
there are people waiting to help and listen.
Remember, there is never any shame in asking for help.
That is what they are there for!

**Contact your Community Counselor (see page 20 for a full directory)
or call the NWT Help Line at 1-800-661-0844.**

www.hss.gov.nt.ca