

# Health and Social Services Regional Dialogues 2010-11

## **Introduction – A Shared Vision of Wellness**

The 2010-11 Health and Social Services Regional Dialogues were intended to bring community representatives and our Health and Social Services system together to talk about working together to move towards wellness in the Northwest Territories. The discussions, held across all NWT regions in the late fall and winter of 2010-11, allowed us to develop a shared vision of health and wellness.

Our Health and Social Services system has statistical information on our health status, and how our resources are used, and research and knowledge from experts that can help to guide us. All of this is great information, but health and wellness, like so many other issues, has to start at an individual and community level. We needed to reconnect with NWT residents about their priorities.

The direction that we get from the Legislative Assembly and community leaders is essential, but the dialogues allow more depth of discussion. By focussing on the long-term, and a broader conversation with residents about individual, community and regional needs, the Dialogue has allowed us to better understand the bigger picture.

We have learned a great deal during this process – and one key thing we heard was that we have to do a better job communicating both our struggles and our successes. The 2010 Regional Dialogues are our first step in better sharing of information with residents and communities.

### **About the Dialogues**

A Dialogue session was hosted in each region by the local Health and Social Services Authority. Representatives were invited from each community in the region, and representation was inclusive of youth, elders, Aboriginal Governments and other community leadership.

#### **Schedule for HSS Regional Dialogues 2010-11**

<b>Region</b>	<b>Date</b>
<b>Sahtu (split over 2 days)</b>	<b>November 4-5, 2010</b>
<b>Fort Smith</b>	<b>November 8, 2010</b>
<b>Dehcho</b>	<b>November 17, 2010</b>
<b>Hay River</b>	<b>November 19, 2010</b>
<b>Tlcho</b>	<b>November 25, 2010</b>
<b>Yellowknife</b>	<b>December 4, 2010</b>
<b>Beaufort-Delta</b>	<b>January 17, 2011</b>

Each session was a day long. Using the key themes of sustainability, accessibility and wellness, Health and Social Services staff and participants worked through a summary of the current situation in the NWT. Break-out groups then brainstormed priorities and

issues for the region for each of the key theme areas. Following the break-outs, the ideas were shared with the larger group, and a commitment was made to share what was gathered back to the group in the form of this document.

## **What we shared**

Up-to-date statistics on each region were shared to support participant's community knowledge and experience. The profiles for each region can be found at the end of this report as Appendix A.

## **What we heard**

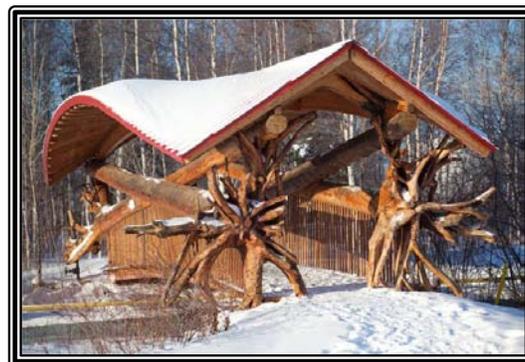
While the issues and priorities in wellness are different across our NWT regions, there were a number of threads of that were universal:

- 1. Communication.** Northerners are confused about how to access our services, and they don't feel they have up-to-date information on what programs and services exist
- 2. Flexibility.** Northerners need to be able to access our services when they need them, and where they need them. If we really want to engage people, we may have to go to them, whether it is through home visits or delivering services in schools or other community spaces and at times that are convenient to them.
- 3. Cultural tradition.** Aboriginal culture should be blended into all our work, particularly around healthy choices.
- 4. Partnership.** Nobody can MAKE people well. We need to continue to build partnerships with Aboriginal Governments, Municipalities, Non-Government Organizations and individuals to help support and encourage people.
- 5. Simplify.** There are funding and supports available, but applying is complicated. It would be easier if there were fewer larger pots of money available to community groups with more flexibility in how money can be used, instead of many small rigid pots.
- 6. Families.** Wellness starts with healthy families. If we want to make change, we need to focus efforts at supporting families, through education and communication with parents.
- 7. Address Addictions.** We all understand the toll that addictions continue to take on our families and communities. We can't make people get well – but we can be united in our efforts to encourage them, and we can make sure they have the supports in the community to help them get well.

The following sections provide further summary of the discussion and priorities set out in each region at the Regional Dialogues:

## **SAHTU**

At the Sahtu Dialogue, there were a number of points where different break-out groups came up with near identical issues and priorities. This speaks to the challenges Sahtu communities deal with, such as accessing healthy foods, and facing addictions, but it also speaks to the strength of the region – the strong culture and community that exists, and the willingness to work together to make change.



### **Wellness Priority – Improve communication**

- We heard that we need to communicate more about what we are doing, including new programs and services and changes to how we deliver our services.
- In order to reduce missed appointments, it was suggested that better reminder systems could be used.
- Communities need to know what the health issues are locally, so they can talk about them and promote solutions.

### **Wellness Priority – Get out into the community and be available when needed**

- Participants in the dialogue talked about the need for ‘field workers’ that go into community spaces and talk to residents about programs and service expectations.
- Local resources should be maximized. As an example, Young Sahtu residents could also be trained to volunteer and support homecare and other community workers.
- There was also support for non-standard hours, so that people could access our services when they were needed, not necessarily on weekdays or between 9 AM and 5 PM.

### **Wellness Priority – Focus on educating and supporting young families**

- In the Sahtu there was a strong focus on the need to provide young families with education and other supports that are culturally appropriate. This education would focus on all the healthy choices.

- The goal would be to ensure young people grew up in homes where healthy choices such as healthy eating, physical activity and mental wellness were modelled and promoted.
- Ideally, this education should be delivered by people from the community, particularly elders.
- The focus should be on increasing supports, but not creating more dependency to government.

*“Your kids might not be listening to you, but they are always watching.”*

Participant

### **Challenges**

- Dialogue participants expressed frustration with the cost and quality of healthy food available in the region. While it was understood that Health and Social Services was not responsible for this issue alone, the Department and Authority were encouraged to advocate on behalf of Sahtu residents on this issue.
- The need for more treatment and support for addictions was raised often. Volunteer-supported programs such as Alcoholics Anonymous are needed – and there is a challenge in the lack of volunteers available to deliver these programs.
- While some Sahtu residents still feel there is a need for a Hospital in the region, the population and geography do not support this. Modern Hospitals must deliver a certain number of procedures in a year to ensure safety and quality standards are met – the population of the Sahtu would not support these numbers.

### **Community Directions**

Sahtu participants:

- expressed interest in developing their own community wellness plans
- suggested they needed to speak to Aboriginal leaders about focusing on wellness issues
- talked about the need to celebrate successes, and not always dwell on the troubles within the community
- need to find ways to use technology to link communities, share best practices and get support

## FORT SMITH

Fort Smith participants were proud of the services they currently receive at home, and the traditional knowledge and culture that exists to support the community. To move towards wellness there was a focus on the need to concentrate on partnerships and integration of services across the many partners in the community.



*“The community needs to be ready to support wellness and change.”*  
Participant

### **Wellness Priority – Building Capacity and Partnerships within the community**

- Fort Smith participants talked about the need to build capacity within community organizations and throughout the community without the Health and Social Services system ‘taking over’ programs
- Teams need to address issues within the community, across government departments, non-government and Aboriginal government organizations.
- Community organizations need to develop a common goal to work towards within these partnerships. There is also the need to set the roles of different organizations in moving towards this common goal.
- The idea of a centralized location for information about programs and services was brought up several times in different groups.

### **Wellness Priority – A focus on mental illness and addictions**

- A need to move beyond the fears and stigmas and talk about individual and family challenges was voiced.
- Individuals need to take responsibility for personal health, but they need to have the resources available in the community to help them on a path to wellness.
- Health and services professionals need to be trained to be able to better identify when people are ready for change.

### **Wellness Priority – Early childhood development as the cornerstone in building a healthy community**

- Families need to have the education to assist them in supporting each other, and understanding parenting roles.

- Programs and supports should focus on maternal health and early childhood to the age of 6 – so that Fort Smith kids are getting the best start in life possible.
- Prevention and health promotion activities need to start in early childhood and include the family unit.

### **Challenges**

- There are communication disconnects within the health and social services system, between health centres, hospitals and social workers and other wellness workers.
- The last community needs assessment in Fort Smith described a community with great services, but a lack of community knowledge about what services were available – again, communication and education is key.
- Participants were excited about the possibilities around technology, but cautioned that the bandwidth needs to exist to support it before it can be really useful.

### **Community Directions**

Fort Smith participants:

- think that health professionals could be used better and more effectively
- suggested virtual teams should link the staff in their community to the overall system
- want to see more celebration of the successes within the system

## DEHCHO

Continuing to shift the Health and Social Services System to integrate culture and tradition was a key thread of the discussion in the Dehcho. The session in Fort Simpson had a good balance of community members including elders, and front-line and executive staff. This resulted in a spirited but balanced conversation on where this region needs to go next.



*“People need to reconnect to the land and their culture to be well.”*  
Participant

### **Wellness Priority – Integrating culture**

- In the Dehcho, there was a strong emphasis on the need to go out on the land and the role that on-the-land traditional activities play in wellness
- An emphasis on working with Elders, as the core of community traditional knowledge, was a part of this – from elders teaching families about healthy eating and activities, to elders supporting on-the-land programs about personal and community respect

### **Wellness Priority – Supporting Dehcho residents to become more personally responsible and well**

- Dehcho participants talked about a system where people are empowered to make their own healthy choices, and programs and services were available to support them when needed.
- Families are the heart of the system. There is a need for education for youth and families about healthy relationships and respect. There are many positive examples in Dehcho communities – they need to be shared.
- Part of this again, is about education and communication, including success stories, information about healthy foods and activities, notice of changes to the health and social services programs

### **Wellness Priority – Addressing addictions through support for healing and prevention**

- Another component of personal responsibility and wellness was working to address addictions through prevention and healing.
- Prevention is about reaching the youth in Dehcho communities through education, through providing alternative and positive activities, and through teaching about what healthy relationships and living look like and de-normalizing addiction.

- It was important that healing was supported both through community activities that connected people with culture and the land, and through some outside counselling.

## **Challenges**

- Residential schooling and the structure of government programs over the last century have created a dependency on institutions. Health and Social Services has helped to create this belief that problems can be solved through more buildings and more professionals. As we move to a place where we better understand the need for communities to lead in healing and wellness, we have to acknowledge that we have helped create this dependency, and figure out how to move away from it.
- It is important to staff programs using community residents, but some situations that involve healing and recovery, or other sensitive topics, may be too close to the community and require more neutral, outside support.

## **Community Directions**

Dehcho participants:

- expressed interest in being served by other regional centres, such as through the Fort Smith midwifery program
- are moving to discuss health and social services issues more in Dehcho communities, through community radio and other community outlets
- want to use volunteers more within the community, to support and mentor youth, to help with recovery from addictions, and to build on the programs and services available to support wellness

## HAY RIVER

In Hay River we heard that there is a strong range of services and supports available, and that the Health and Social Services system needs to continue to work with the community to integrate and promote those services.



### **Wellness Priority – Building Partnerships to better integrate community services**

- Participants want to see different departments and agencies coming together to work more collaboratively on wellness.
- There is a need to find ways to increase use of volunteers across the system.
- Information about what the needs are within the community needs to be shared regularly.

### **Wellness Priority – Increased and improved communication around health and social services, including prevention and accessibility**

- Residents need to understand who to go to for what advice – it doesn't always have to be a doctor.
- There needs to be better communication about where and when services are available
- Patients also need to understand the costs of the services they are receiving, and the money that is lost through missed appointments

### **Wellness Priority – Focus on prevention, particularly through support and education of families**

- Policies and programs need to change to focus more on prevention of issues before they emerge.
- Parental supports and education should be community-based, but government has a role to play through funding and policy.
- Supports and education need to be positive, concentrating on healthy behaviours and not being afraid to address 'taboo' issues such as healthy sexuality

*" We need to become more proactive in our work and help families before there are problems."*

Participant

## **Challenges**

- Hay River participants talked about fear of technology, and the need to overcome this if HealthNet and telehealth are to become an essential part of the system
- Participants also talked about the lack of communication or the disconnect between local health care providers and specialists in Yellowknife or the South and the need to overcome this
- There was concern that some high risk families and individuals take up a large amount of the resources and attention, and that the system and communities struggle to find ways to help this population

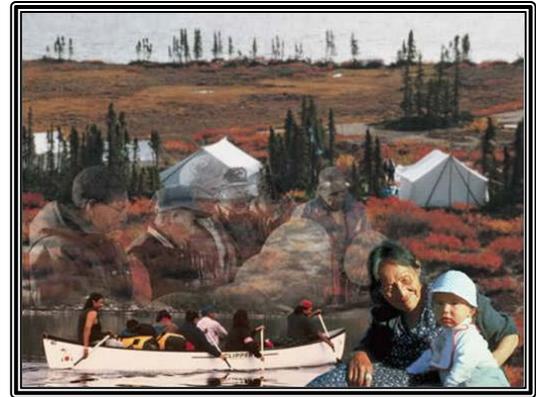
## **Community Directions**

Hay River Participants:

- feel that Government needs to set the policy, support and fund communities, and recognize the innovations that work
- want to expand the community-based partnerships such as interagencies to drive local change
- cautioned about moving back and forth between specialization and centralization in the Health and Social Services system. There is a need to pick one path as a system and stay on it
- want to see the system better screening of what the needs are within the community, and who needs help most

## TLICHO

The Tlicho session focussed a lot on personal choices. There was recognition that resources are running out, and that adding more of the same to the system isn't fixing any of the challenges around wellness. Instead, there is a need to try new approaches, and work together.



*“People choose what they do. They choose to go to bingo. They choose what they eat and how they treat each other. Change can't happen until your choices change.”*

Participant

### **Wellness Priority – Personal Responsibility**

- Participants spoke about how individuals need to change the choices they make so that they are healthier.
- They clarified that at the same time, the Health and Social Services system needs to support individuals by making services easier to access, where and when people are able to access them.
- Communities and individuals need to be empowered to manage their own lives
- Addictions remain a key issue – and drive many health and wellness problems

### **Wellness Priority – Using Health and Social Services as a limited but sustainable resource**

- There was acknowledgement that health and social services was like caribou or other renewable resources – only sustainable through careful management and avoiding overuse.
- Communities need to be enabled and educated to deliver their own services.
- Today's realities of staffing and technology need to balance with quality and safe care
- Funding doesn't always match a holistic approach to wellness, with funding in many small, specialized pots

### **Wellness Priority – Innovation and Sharing**

- Participants talked about ending programs that aren't helpful and starting new programs from scratch.

- They said that to do this well, the community needs to be involved and information about the situation needs to be available and shared.

### **Challenges**

- The Tlicho Community Services Agency takes an interconnected, holistic approach to education and health, but policies and small pots of funding can be barriers to this approach.
- Policies and processes also make it difficult to use Elders for advice and support.

### **Community Directions**

Tlicho participants:

- want to see barriers across government departments and programs (such as between Health and Social Services and Income Security) removed
- want to see culture and tradition integrated into new programs and services

## YELLOWKNIFE

Yellowknife Health and Social Services (YKHSSA) serves both the largest population centre in the NWT, which has Stanton Territorial Hospital and Health and Social Services Authority within its boundary, and the four communities of N'dilo, Dettah, Deninu Kue (Fort Resolution) and Lutselk'e. As a result, while many of the themes and discussion was common, the priorities ranged across the communities based on size and culture.



### **Wellness Priority – Address Addictions and Mental Health Issues**

- Family violence and other social services issues are a symptom of mental health issues and addictions.
- There is a need to make healthier options such as the Chekoa program (through YK Dene First Nations) available in all communities.
- Supports such as AA and treatment aftercare need to be available locally

### **Wellness Priority – Focus on Healthy Families and Parenting**

- Young families need to learn about healthy food choices and home economics.

### **Wellness Priority – Deal with high risk groups, including the homeless (Yellowknife)**

- Need to support wellness through education about healthy living and healthy foods (both traditional and modern choices)
- High risk groups like the homeless are harder to identify and serve, but their needs are important to community wellness
- Participants felt that part of the solution around homelessness is increasing shelter beds – homeless are coming from communities.
- They felt that the other part of the solution is increasing housing and education in communities – if there was work and education available locally, people wouldn't be moving into Yellowknife.

### **Wellness Priority – Health Promotion, particularly around suicide prevention, early interventions to avoid addiction, with a focus on culture and tradition**

- It was emphasized that being on-the-land provides the opportunity to learn about many different subjects.

- Youth need to be prompted to make the connection between lifestyle and chronic diseases and injuries.
- Communities need to provide role models and community champions for healthy behaviours.

### **Wellness Priority – Increase supports for self-management of chronic disease (Deninu Kue)**

#### **Challenges**

- Increased addictions and unhealthy families are difficult to change.
- Adjusting government to fit the needs of Aboriginal culture, such as bringing kids out on the land to hunt and trap without missing school.
- The community and territorial income and tax base are not increasing, but the costs and needs continue to rise.
- Healthy foods are expensive outside of Yellowknife, and are sometimes difficult to find

#### **Community Directions**

Yellowknife, N'dilo, Dettah, Deninu Kue and Lutselk'e Participants:

- expressed interest in developing their own community wellness plans and moving toward sustainability of programs and services
- would like to see their communities develop stronger interagency partnerships and committees
- want to see more education around life skills
- promoted the idea of using elections as opportunities to raise and focus leaders on issues around wellness

## BEAUFORT-DELTA

In the Beaufort-Delta, participants focused on the need for communities to take the lead. It was felt that the Health and Social Services system and the Government of the Northwest Territories should be available for support and funding, but wellness should be driven locally.



### **Wellness Priority – Focus on seamless, integrated community actions to support wellness including prevention and health promotion activities**

- Local people need to be trained and used as resources, both in the short-term, through things like first aid training, and supporting elders through home care, and in the long-term through Community Health Nursing and other nursing and health professionals training. Volunteering can be a bridge to these careers.
- Funding for community-based health promotion and education programs needs to be less compartmentalized, easier to access, and available for longer-term activity.
- Participants suggested that partnerships with private sector could increase the breadth of resources available.
- Participants emphasized the importance of Government of the Northwest Territories Departments (Education, Culture and Employment, Housing, Justice and HSS) collaborating on initiatives that address the social determinants of health.

## **Wellness Priority – Improved Communication**

- It was suggested that there is a need for improved communication about the programs and services available, about the cost of delivering health and social services, and about the roles of individuals and organizations.
- Communication channels have to meet the different audience needs – young people need Facebook and social media, older populations need community radio and television messages.

## **Wellness Priority – Availability, cost and awareness of Healthy Foods**

- The idea of a junk food tax to offset the cost of fruits and vegetables and other healthier foods as well as community gardens and country foods was mentioned.
- Health and Social Services should advocate for lower food costs in remote communities, through food mail and other programs.
- Communities need to share their success stories around healthy foods and other healthy choices.

## **Challenges**

- Non-traditional healthy foods are expensive and sometimes challenging to find.
- Economic prosperity and job opportunities are an essential component of wellness, and need to be addressed for people to have success.

## **Community Directions**

### Beaufort-Delta Participants:

- Wanted to move back to an administrative system that allows communities to have more input into decisions made around Health and Social Services through a board that is knowledgeable of the needs of the communities of the BDHSSA region.
- Wanted to see services integrated at the community level – working collectively and collaboratively.
- Expressed a willingness to advocate for technology and the need for increased bandwidth in support of health and social services delivery
- Described the need for a treatment centre to address alcohol and drug issues with related mental health concerns

## **Conclusion**

While there were varying regional focuses, the Regional Health and Social Services Dialogues have reinforced the Health and Social Services systems appreciation and understanding of the need to work in partnerships with communities to promote healthy behaviours. Further, the dialogues have highlighted a need to work on ongoing communication and engagement with communities about the challenges within the system, and about change.

The information in this report will be used both by the Health and Social Services Authorities and the Government of the Northwest Territories in developing new strategic plans around Health and Social Services. Additionally, it will be shared with program staff to assist in developing planning and directions, particularly in areas that were emphasized over and over throughout the dialogues.

Health and Social Services would like to thank all of the participants for their commitment and their insight throughout the dialogue process. The thoughtful, honest and meaningful input provided will help us to build a better 'foundation' for the delivery of sustainable, quality health and social services care.