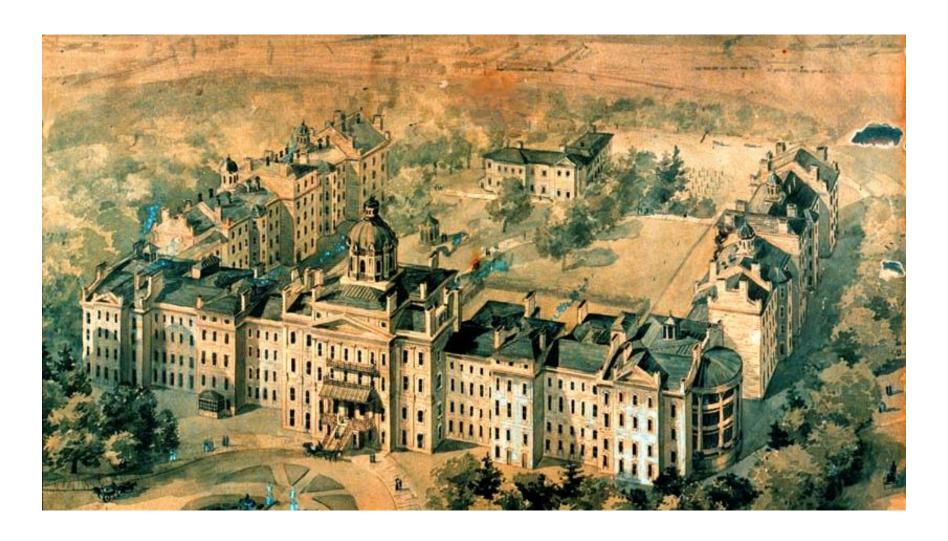


Implementing Culturally Relevant Care in Ontario's Healthcare System



Presenter: Renee Linklater, PhD
Director, Aboriginal Engagement and Outreach

Historic Location Since 1850's







CAMH is Canada's largest mental health and addiction teaching hospital, as well as one of the world's leading research centres in its field.

SIX STRATEGIC DIRECTIONS

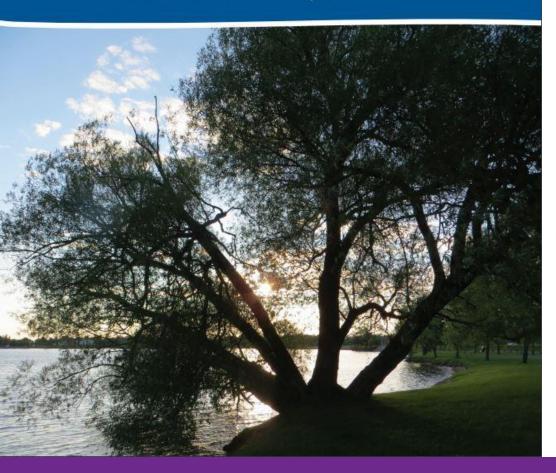
- Enhance recovery by improving access to integrated care and social support
- 2. Earn a reputation for outstanding service, accountability and professional leadership
- 3. Build an environment that supports recovery
- 4. Ignite discovery and innovation
- 5. Revolutionize education and knowledge exchange
- 6. Drive social change





GUIDING DIRECTIONS

A Plan to Strengthen Our Practices and Partnerships with First Nations, Inuit and Métis Peoples





Support capacity development, researc and knowledge exchange

Enhance culturally responsive clinical support to service providers

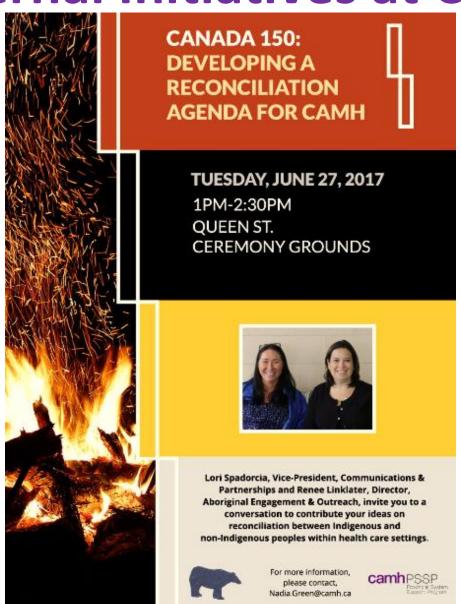
COURAGE RESPECT EXCELLENCE

Improve collaborative pertnerships with service providers Build
internal capacity
and structures
to better meet
the needs of
First Nations,
Inuit and Métis
peoples

CAMH in the Community



Internal Initiatives at CAMH



Clinical Program – Acute Care Aboriginal Services



Aboriginal Services Team

Aboriginal Services provides culturally safe clinical and traditional care using a wholistic approach that is based on Aboriginal values, beliefs and traditions

We value:

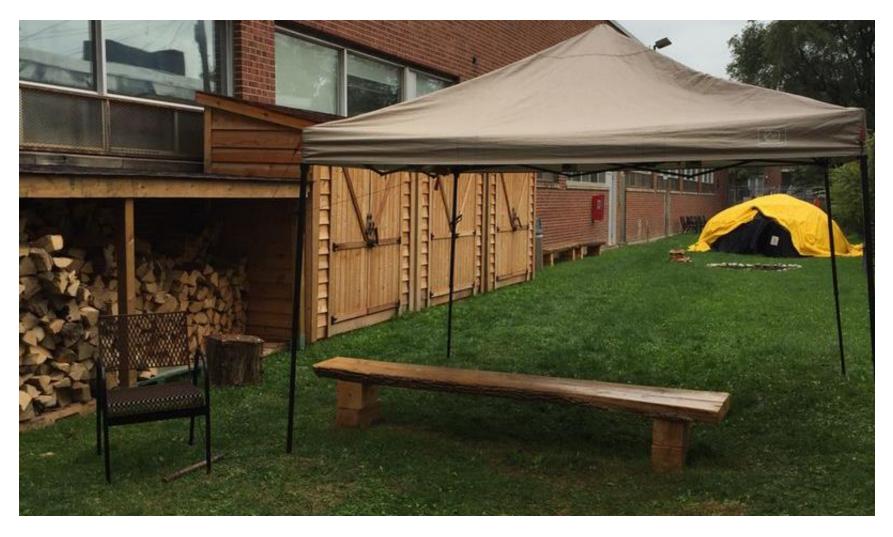
- Client-centered approach
- Culturally integrated therapies
- Trauma-informed care
- Gifts and strengths of clients and patients
- Integral role of families and communities





Aboriginal Services Room

Ceremony Grounds



Bringing Culture into Policy



3.4 In accordance with the Smoke-Free Ontario Act, this policy acknowledges the traditional use of tobacco that forms part of Aboriginal culture and spirituality; therefore, culturally related use, purchase or cultivation of tobacco will be permitted for clients/patients, staff, students, and visitors under the supervision of CAMH's Aboriginal Staff/ Aboriginal Services staff.

Clinical Program – Telepsychiatry and ECHO Ontario

Aboriginal Telemental Health





ECHO Ontario First Nations, Inuit and Métis Wellness

Project ECHO model uses telemedicine technology to bring the best practices in complex mental health care to communities where access to specialized care for clients with complex needs is limited or not available.



Telemental Heath Room

Institute for Mental Health Policy Research (IMHPR) Research in Indigenous communities

- Using a mobile research lab to understand and address mental health, substance use and violence challenges in diverse communities
- A strengths-based approach to understanding how
 First Nations people cope with trauma and stress

CAMH mobile research lab





Community based research

All research initiatives involve working closely with community representatives at all stages of the research, including the research plan, data collection, knowledge sharing and applying knowledge to the development of strengths based programming



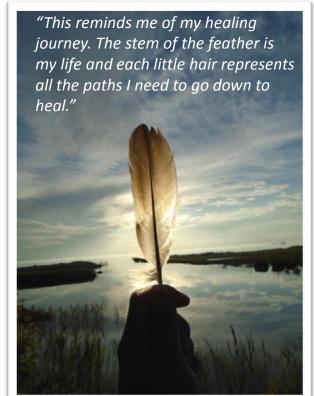
Institute for Mental Health Policy Research (IMHPR) A participatory action approach to addressing First Nations boys' and men's mental health

- This study uses Participatory Action Research (PAR) to address the mental health needs of First Nations boys and men
- Respects and prioritizes the experiences of First Nations boys and men
- Uses Photovoice to give traditionally silenced people the opportunity to capture, reflect on and critique personal and community issues in a creative way
- Establishes a comprehensive, well-integrated and culturally appropriate program of services

Funded by Movember Canada and led by Dr. Julie George, CAMH Scientist and Mental Health, Addiction and Violence Program Manager, Kettle & Stony Point First Nation



Indigenous males have a suicide rate of 126 per 100,000 compared to a rate of 24 per 100,000 for non-Indigenous males







Working together with partners across sectors, the **Provincial System Support Program** moves evidence to action to transform mental health and addictions systems in Ontario.

CAPACITY AND EXPERTISE

OUR TEAMS

We use a variety of skills and approaches to achieve our mandate.



Health equity and engagement



Knowledge exchange



Performance measurement and evaluation research



Implementation science



Information management

Provincial System Support Program Aboriginal Engagement and Outreach (AEO)





AEO has **18 staff** located in the provincial office (Toronto) and throughout seven of the nine regional offices in Ontario.

camh

Provincial System Support Program Aboriginal Engagement and Outreach (AEO)



- Building relationships and collaborative partnerships;
- Providing training to support workforce development;
- Advancing culturally relevant systems initiatives; and
- Improving practice through research and knowledge exchange.











What are Service Collaboratives?

 A group of local service providers who work together to improve access to and coordination of mental health and/or addiction services.

Statement of Purpose

Service Collaboratives will bring together service providers and other stakeholders from various sectors that interact with people who have mental health and/or addictions problems, in particular children and youth agencies, justice programs, health providers, and education organizations. By working together to identify and implement system level changes, the Collaboratives will improve individuals' ability to access services, their service experience, and their health outcomes.

(Government of Ontario, 2011)

Who is Participating?







Mobile Training Teams Initiative for Aboriginal Workers



Engagement Sessions: Focus Groups





Timmins Native Friendship Centre (Timmins)

Moore River Lodge (Moosonee)

Virtual Engagement Session

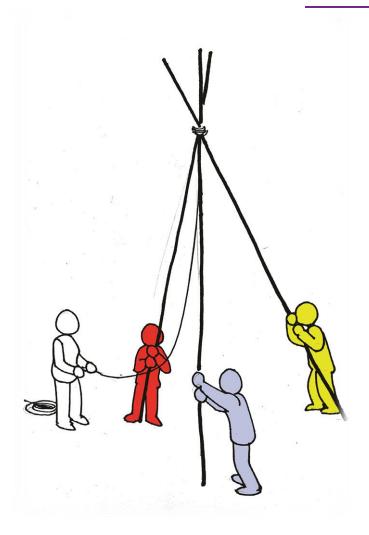


TRAINING MENU

- 1. Acceptance and Commitment Therapy
- 2. Child-Adult Relationship Enhancement
- Dancing with Spirit: Conversations about change
- 4. Foundation for Understanding Trauma and the Health of Aboriginal Peoples
- 5. Honoring Children, Mending the Circle
- 6. Quality Behavioural Competencies
- 7. Solution-Focused Brief Therapy
- 8. Structured Relapse Prevention
- 9. Trauma-Informed Care: Framework for Practice with Aboriginal Peoples
- 10. Understanding Opiate Addiction: The Continuum of Care



TRAINING TEAM MODEL

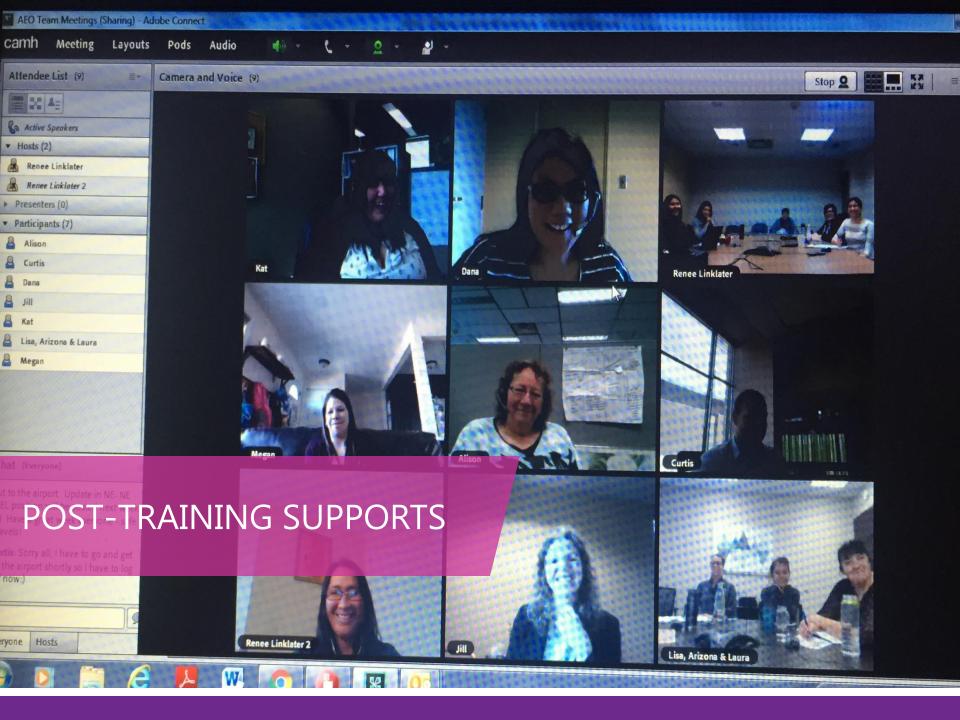


- MTTI Project Team
- AEO Provincial Team and PSSP Regional Teams
- Clinical programs at CAMH
 - Aboriginal Services
 - Addiction Medicine Clinic
 - Concurrent Addiction In-Patient Treatment Services
 - Forensics (Law and Mental Health)
 - Problem Gambling Institute of Ontario
- External resources
 - University of Toronto/University Health Network
 - University of Oklahoma Health Sciences
 Center
 - Aboriginal agencies and First Nations communities

TRAINING MODEL

Face-to-face
Virtual Learning Circles
Communities of Practice
Online learning





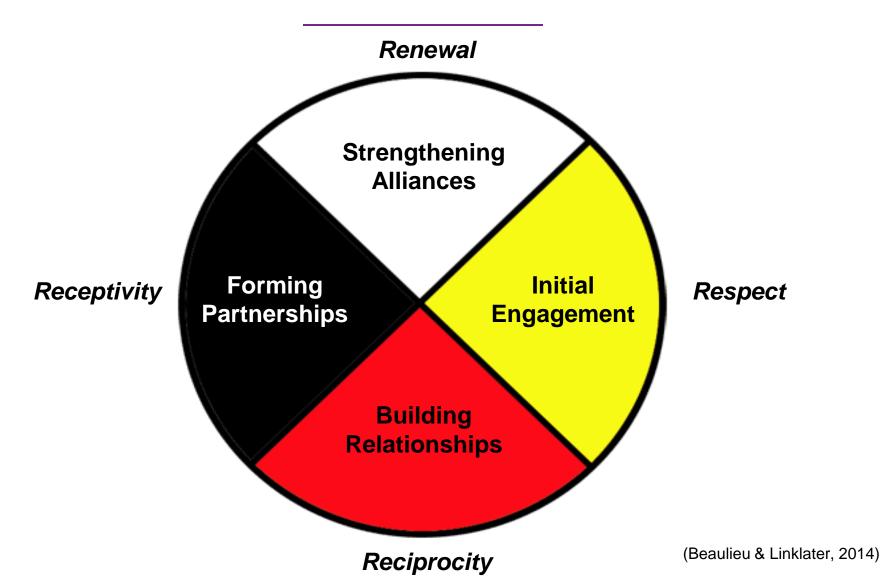
ACCREDITATION

Indigenous Certification Board of Canada: 126 hours (8 training sessions) 21 hours post-training implementation supports





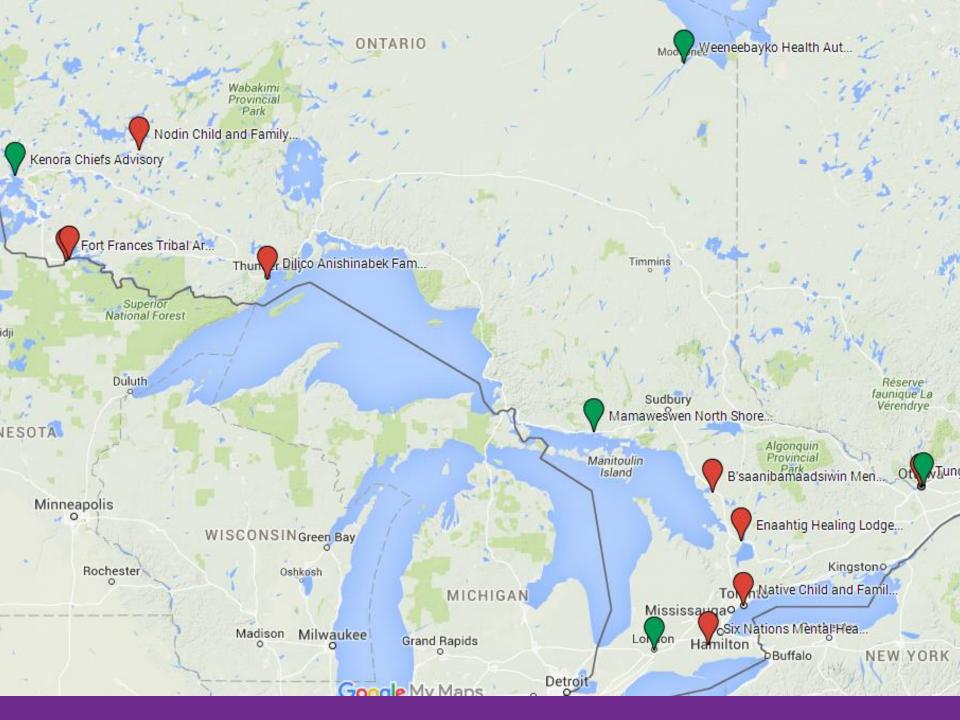
Engagement & Partnership Wheel



New Tools Project

- Trauma and Substance Use assessment tool for First Nations, Inuit and Métis
- Culturally appropriate tool that will gather essential information necessary for identifying healing pathways, compiling addiction referral information, planning for client care, and collecting relevant systems data
- Ten partners across Ontario: Dilico Anishinabek Family Care, Enaahtig Healing Lodge and Learning Centre, Fort Frances Tribal Area Health Services Behaviour Health Unit, Native Child and Family Services of Toronto, Nodin Child and Family Intervention Services (Sioux Lookout First Nations Health Authority), Six Nations Mental Health Team, Tungasuvvingat Inuit-Mamisarvik Healing Centre, Weechi-it-te-win Family Services, Métis Nation of Ontario







Mind Chatter



For more information:

Renee Linklater, PhD

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