

Nisga'a Nation

Community Asset Mapping Catalogue

Gingolx

Gitlaxt'aamiks

Gitwinksihlkw

Laxgalts'ap

Manon Joice
SKEENA COACH KITIMAT, BC
December 2022

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PROJECT BACKGROUND

The Northern First Nations Alliance

The Nation of Gitxaala is a member of the Northern First Nations Alliance. "The Northern First Nations Alliance (NFNA) is an alliance of Indigenous Nations that have come together to focus on the unique challenges and opportunities faced by Indigenous peoples in Northwest British Columbia...The intent of the NFNA is to work collaboratively to address the social determinants of health, engage the communities (youth and Elders); systematically investigate the impacts of development; and prepare for future opportunities by sharing information and resources." 1

As part of these efforts it was determined, an Asset Mapping Exercise of each represented community take place. Community asset mapping is a strength-based approach to community development. Asset mapping aims to document and inventory a community's existing resources, skills and talents and incorporate these strengths into community development efforts. This overall effort will be used as part of a study to build a culturally appropriate detox and wellness centre in Northwest BC.

ASSET MAPPING OVERVIEW

Definition

Community asset mapping is a strength-based approach to community development. Asset mapping aims to document and create an inventory of a community's existing resources, skills and talents and incorporate these strengths into community development efforts. Approaching individuals and communities from an asset-based perspective allows them to recognize and identify their current strengths, capacities, and capabilities.

The process of asset mapping can:

- Illuminate the connections between people and places
- Foster a greater sense of community pride and ownership.
- Build the bridge for turning desires and ideas into positive actions.
- Reflect the spirit of the community.
- Identify the culture, values, and beliefs of a community

¹ Retrieved form the Statement of Readiness submitted to the First Nations Health Authority on July 5, 2021.

Values of Asset Mapping

- Recognizing everyone has skills and talents that are relevant to the community wellbeing.
- Embracing the belief that each time individuals exercise their abilities, the community in which they live is strengthened.
- Envisioning communities, as places where capacities of individuals are identified, valued, and moved into action.
- Being respectful and mindful of cultural sensitivities in your approach
- Striving for inclusivity.

Essential Traits for Asset Mapping

- A genuine interest in learning about people and environments
- Ability to communicate respectfully with people from diverse backgrounds
- Perseverance
- Desire for discovery, uncovering resources within a community
- Capacity to capture and process information
- Commitment to share what is learned with the community that is mapped

Key Elements of the Mapping Process

- Identify and involve partners
- Define the community boundaries
- Define the purpose
- Determine what types of assets to include
- Identify the methods
- Report back

The Use Community Navigators

One Community Navigator was employed for each community to assist in carrying out the required community asset mapping activities.

Position Overview:

The Community Navigator will cooperate with the Community Asset Mapping Coordinator in developing and fostering meaningful and respectful interactions with community members. These interactions may include workshops, presentations, surveys, and setting up meetings. The efforts are conducted as part of a community asset mapping exercise.

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used as part of a study to build a culturally appropriate detox and wellness centre in Northwest BC.

Understanding Community Assets

A community asset or resource is anything that improves the quality of a community. Asset mapping seeks to identify and capture the following assets:

- 1. People
- 2. Organizations
- 3. Environment
- 4. Local Economy
- 5. Culture and Spirituality
- 6. Information, Knowledge, and Communication
- 7. Political Capitol
- 8. Community as a Whole

1. People

People are the central source of wealth for the community. Learn about each person through one-to-one interviews or Community Conversations. Make sure interview questions, whether conducted in person or in writing, are relevant and appropriate, based on your identified goal. Determine how you will document what you discover.

While learning about the individuals, begin to see how people are interconnected and discover the informal groups that exist within a community and discover the stories of their shared lives.

Questions to be explored:

- What is important to you?
- What does "community" mean to you?
- What are your hobbies or interests?
- In what ways have you been involved in the community?
- In what ways do you want to be involved in the community?
- What would you like to see in your community that doesn't exist now?
- What hopes and dreams to you have for your community?
- Who do you consider to be community historians?
- Who has lived in the community the longest?
- What skills, talents, resources, materials, or supplies do you have that you would be willing to share with neighbors or put towards a community effort?
- What, if any, associations or networks are you a part of?

- What, if any, associations or networks would you like to be a part of or help to form?
- Is there anything in particular that you need?
- What positive activities already happening in your community would you like to see more of?
- What is the best way to contact you?

2. Organizations

Learn about the organizations that exist within the community. With each one, consider what possibilities exist within the organization, and beyond their intended purpose(s). For example, think beyond a community recreational centre being solely a place for sporting events. Consider it also as a meeting space, a resource for parking, kitchen use, storage, copy machine, tables and chairs and more.

On your exploration of organizations, seek to discover:

- What organizations exist within the community?
- What are the purpose, intent, mission, and goal(s) of the organizations?
- Who works with those organizations?
- What role would you like the organizations within your community to play?
- What goals, services, or projects do you hope for within these organizations?

3. Environment

Learn about the natural and built environment you live in. Explore air quality, water safety, trees, landscaping, agriculture, plant and animal life, energy resources, forests, lakes, ponds, streams, rivers, minerals, natural landmarks, parks, recreation areas, vacant land, recycling, compost, and waste resources.

A built environment includes buildings, bridges, sidewalks, streetlights, roads, gardens, playgrounds, sculptures, historical landmarks and more.

- What natural elements exist within the community?
- Where are the open spaces?
- How is land currently used?
- How would you like to see the land used?
- What buildings or structures exist within the community?
- How are those buildings or structures being used?

4. Local Economy

Learn about how money is earned, spent, and invested within the community. Explore sources of income, occupations, methods for exchange and bartering, major industries and services, community wealth, untapped economic resources, access to goods and services, and circulation of money.

- How is money spent on a regular basis in the community?
- In what ways does money remain local and in what ways does it leave the community?
- What forces outside the community influence its economic health?
- What ideas do you have to enhance the economic vitality of the community?

5. Culture and Spirituality

Culture is the socially transmitted knowledge and behavior shared by a group of people. A community's culture binds people together and affirms their identity. Learn about the culture, customs, traditions, and way of life of the community.

Examples of questions you might explore:

- Who lives in the community or community?
- What is the history of the community?
- How is history preserved, celebrated, and honored?
- What forms of art and music exist?
- How are community customs, traditions and identity preserved?
- How is culture transmitted to younger or newer community members?
- What forms of culture exist beyond the surface of casual observation?
- What languages are spoken? How is language used to affirm culture?
- What different forms of spirituality are present and expressed in the community?
- How are community members' spiritual beliefs and practice connected to community life?

6. Information, Knowledge & Communication

Equal access to information and communication among its members, are vital to a healthy, vibrant community.

- What schools and training programs exist for the community?
- How are new skills and knowledge developed and shared?
- How do people learn about what is going on in the community?
- How is information technology used and by whom?
- To what extent and for what purposes are community members interested in communicating with one another?

7. Political Capital

Community life requires a continuous series of decisions on matters that affect its members. Learn about structured processes that establish and enforce policies within in the community.

- How is the community linked to political power?
- What is the formal process for community-based decision-making?
- Who represents leadership within local government?
- How does the community influence political decisions?

8. Community as a Whole

See and gather the big picture. Observe how people, places, and systems fit together, how linked together, their skills, talents, and resources can strengthen their community? How are talents and skills recognized and developed?

- How are the people given opportunities to contribute their gifts and talents?
- How do people learn about what is going on in the community?
- How do people with shared interests exchange ideas and information?
- How is new knowledge introduced, taught, or shared?
- What forms of art and music exist?
- How do people within the community define culture? What does it mean to them?
- What cultural values are practiced in everyday life?
- How are cultural differences valued?
- In what ways does the community have the desire and ability to work together?
- What is the level of trust, sense of safety and security within the community?
- What are sources of pride and joy within the community?
- What do people do for fun?
- What natural elements are defining features of the community?
- How do environmental conditions affect human interaction?
- How consistent is access to food, shelter, and clothing?
- What symbolizes the community's history?

Community Asset Mapping the Five Key Components

INDIVIDUAL SKILLS OF LOCAL RESIDENTS

THE POWER OF LOCAL SOCIAL NETWORKS

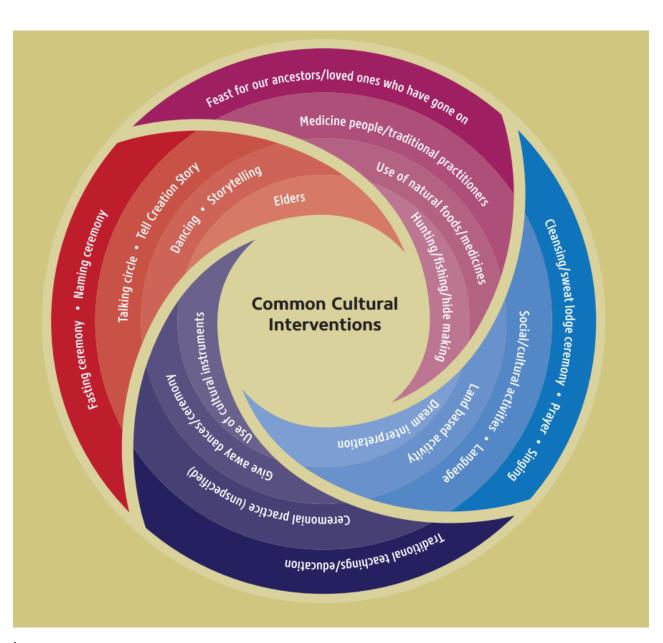
THE RESOURCES OF PUBLIC, PRIVATE AND NON-PROFIT INSTITUTIONS

THE PHYSICAL AND ECONOMIC RESOURCES OF LOCAL PLACES

THE STORIES OF OUR SHARED LIVES

Common Cultural Interventions

The common cultural interventions below represent a list of traditions, activities, and systems indicative of Indigenous cultural practices and supports. Further, these interventions underlie the scope of resources and assets acquired, assumed, honoured and celebrated in Indigenous commnities. This includes those asset noted previously: People, Organizations, Environment, Local Economy, Culture and Spirituality, Information, Knowledge, and Communication, Political Capitol, and Community as a Whole.



¹Thunderbird Partnership Foundation, Retrieved October 25, 2022, https://thunderbirdpf.org/nnapf-document-library/

In Northwest BC the Community Asset Mapping Exercise uncovered these additional Indigenous Cultural Interventions: The use of Cedar, Devil's Club and Licorice Root for medicinal, spiritual, and cultural purposes. Stone Moving as a cultural activity and coming of age practices and ceremonies. Further there is the preserving of foods, regalia making, beading, and crafting. Please note: Not all interventions listed are truly common amongst the four nations and nine communities studied, there remains variances between each.

As for faith practices, among others is a combination of belief in a Great Creator, Reincarnation and Christianity.

Asset Mapping Results

The asset mapping results for each community and the nation were compiled via in person interviews, surveys, workshops, and internet searches. The results provided a list of resources those resources are categorized as internal and external. Internal resources refer to those offered and accessed within community and external are those offered outside of community including nearby city centres, provincially and federally.

These resources are compiled in an effort ascertain the community assets as they pertain to the social determinants of health outlined below.

Social Determinants of Health

The social determinants of health (SDH) are the factors that influence health outcomes and impact health equity. They include the conditions or individual circumstances that determine individual and population health and well-being. Forces related to these conditions or circumstances may include political, socioeconomical and cultural. Each of these factors listed below are important on their own but at the same time are interrelated.

These key determinants of health are:

- 1. Income and Social Status
- 2. Social Support Networks
- 3. Education and Literacy
- 4. Employment/Working Conditions
- 5. Social Environments
- 6. Physical Environments
- 7. Personal Health Practices and Coping Skills
- 8. Healthy Child Development
- 9. Biology and Genetic Endowment
- 10. Health Services
- 11. Gender
- 12. Culture

Social Determinants of Health Described

1. Income and Social Status

Health status improves with prosperity and social standing. High income determines living conditions such as safe housing and ability to buy sufficient good food.

Several studies show that limited options and poor coping skills for dealing with stress increase vulnerability to a range of diseases through pathways that involve the immune and hormonal systems.

2. Social Support Networks

Support from families, friends and communities is associated with better health. The caring and respect that occurs in social relationships, and the resulting sense of satisfaction and well-being, seem to act as a buffer against health problems.

3. Education and Literacy

Education contributes to health and prosperity by equipping people with knowledge and skills for problem solving and helps provide a sense of control and mastery over life circumstances. It increases opportunities for job and income security, and job satisfaction. And it improves people's ability to access and understand information to help keep them healthy.

4. Employment & Working Conditions

Unemployment, underemployment, stressful or unsafe work are associated with poorer health. People who have more control over their work circumstances and fewer stress related demands of the job are healthier and often live longer than those in more stressful or riskier work and activities.

5. Social Environments

The array of values and norms of a society influence in varying ways the health and wellbeing of individuals and populations. Social stability, recognition of diversity, safety, good working relationships, and cohesive communities provide a supportive society that reduces or avoids many potential risks to good health.

6. Physical Environments

Factors in our natural environment (e.g., air, water quality) and human-built environment (e.g., housing, workplace safety and road design) play a role in individual and public health.

7. Personal Health Practices and Coping Skills

Learning how and what individuals can do to prevent diseases and promote self-care, cope with challenges, develop self-reliance, and solve problems will help people make choices that enhance health.

8. Healthy Child Development

Prenatal and early childhood experiences have a positive impact on brain development, school readiness and health in later life. At the same time, all of the other determinants of health affect the physical, social, mental, emotional and spiritual development of children and youth.

9. Biology and Genetic Endowment

In some circumstances inherited predispositions appears to predispose certain individuals to particular diseases or health problems.

10. Health Services

High quality, accessible health services and health promotion contribute to public health.

11. Gender

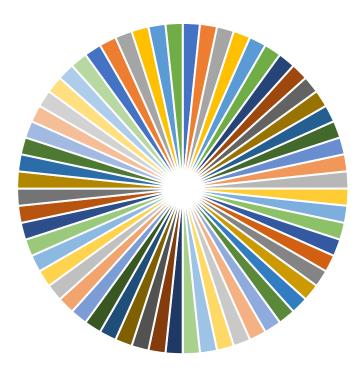
Boys and girls and men and women get different kinds of disease and conditions at different ages. They also tend to have different income levels and different kinds of jobs, often a result of the way a society views and treats males and females.

12. Culture

People's customs, traditions and the beliefs and values of their family and community all affect their health. These factors influence what people think, feel, do, and believe in.



NISGA'A COMMUNITY ASSETS



- Basketball
- Boxing
- Carving
- Choir
- Community Gardens
- Cultural Feasts
- Devil's Club
- Drumming
- Fitness
- Gathering
- Hospitality
- Language
- Matrilineal Society
- Movie Night
- Pool
- Preserving
- Running
- Self Governed
- Singing
- smudging
- Spiritual Practices
- Stone Moving
- Technology
- Traditional Working Groups
- Wilps
- Youth Groups

- Bingo
- Brass Band
- Cedar
- Cleansing
- Cribbage
- Dancing
- Dream Interpretation
- Faith
- Games
- Gathering
- Hunting
- Long houses
- Mens Group
- Painting
- Fishing
- Regalia Making
- Sage
- Sharing
- Smoke Houses
- Songs
- Sports
- Story Telling
- Traditional Medicines
- Water
- womens Groups
- Weaving



ABOUT NISGA'A

Located on British Columbia's rugged northwest coast, Nisga'a Lands are blessed with soaring mountains, dramatic lava beds, picturesque fjords, and thriving rivers and streams. The natural beauty of Nisga'a Lands is complemented by the Nisga'a Nation's rich cultural traditions. ² Their four communities included in this report are: Gingolx, Gitlaxt'aamiks, Gitwinksihlkw and Laxgalts'ap.

All Nisga'a are members of one of four pdeek, a very large "family" whose common ancestors lived in the time before memory. Membership in a pdeek is matrilineal, (passed on through the maternal parent, our Mothers). Each pdeek has two major crests:

Ganada: Raven/Frog Laxgibuu: Wolf/Bear

Gisk'aast: Killer Whale/Owl Laxsgiik: Eagle/Beaver

Each pdeek owns a distinct crest because each has different adaawak (traditional histories). An adaawak of a specific Ganada family, for example, tells how some ancestors of this pdeek met a supernatural Raven, where as another Ganada family met a supernatural Frog. Because of these events, members of each of the different Ganada pdeek have the right to bare the crest that represents the adaawak of their family.³

Nisga'a Lisims Government is determined to govern by the principles of the Ayuu<u>k</u>, the time-honored Nisga'a code. All decisions proceed in the manner of Sayt-K'ilim-<u>G</u>oot, the Nisga'a common bowl philosophy. We believe we are bound together as one people in all that we do, thus our official branded identity is anchored by the positioning line, Nisga'a Nation - One heart, one path, one nation.

²Retrieved, December 22, 2022, Maps | Nisga'a Lisims Government (nisgaanation.ca)

³ Retrieved December 22, 2022, About | Nisga'a Lisims Government (nisgaanation.ca)

Much like the Canadian federal and provincial government systems, the Nisga'a Nation has both a national and local governments. Nisga'a Lisims Government (NLG) is responsible for governance of the Nisga'a Nation as a whole and represents the Nisga'a Nation in intergovernmental relations. Each of the four Nisga'a Villages acts through its Nisga'a Village Government in exercising its rights, powers and privileges, and in carrying out its duties, functions, and obligations relating to that village and its residents.⁴

An important distinction of Nisga'a is their Nisga'a Treaty Among all t ether accomplishments listed below is they have their own health authority.

The Nisga'a Final Agreement is British Columbia's first modern treaty. A landmark in the relationship between Canada and its Aboriginal peoples, the Treaty came into effect on May 11, 2000, marking the end of a 113-year journey — and the first steps in a new direction. On that date, the Indian Act ceased to apply to Nisga'a people.

The Nisga'a Final Agreement is the first treaty in British Columbia to provide constitutional certainty in respect of an Aboriginal people's Section 35 right to self-government. It recognizes Nisga'a Lands and opens the door for joint economic initiatives in the development of the Nisga'a Nation's natural resources.

An example of hope, trust, and cooperation, the Nisga'a Final Agreement is being studied by governments and Aboriginal peoples the world over. Nisga'a Lisims Government is already seeing the benefits of being free from the confines of the Indian Act.

In the period since we assumed control over the governance of ourselves and our own lands, we have numerous accomplishments as a Nation to improve the Quality of Life of our people. A small list of these milestones includes the following:

- Village roads improved.
- Highway connection to Gingolx.
- Fishery Bay we've been given direction not to provide easy access into Fishery Bay. Nisga'a Fisheries Committee is the Committee to look at possible improvement.
- Economic development this was developed early into the Treaty which eventually led to the Business Development Fund Act to provide the Nation with opportunities in economic development.
- Economic development funding to the Village Governments and Urban Locals. Training dollars to the Village Governments and Urban Locals.
- Tax rebate which is shared amongst the Village Governments. Nisga'a Youth Councils have been developed and funded by NLG.

⁴ Retrieved December 22, 2022, <u>About | Nisga'a Lisims Government (nisgaanation.ca)</u>

- Community Preventative Program fund was created on savings from Nisga'a Child & Family Services. This money can fade away as NCFS moves forward.
- Management Information System funding is provided to each Village Government.
- enTel bringing high-speed Internet connectivity to the Nass and beyond. Urban home program renovation grant and new home purchase grant.
- Sports & Recreation \$100,000 in our budget for Sports and Recreation. We will most likely revisit this in our final budget exercise.
- Nisga'a Elections, whether it be general or by-elections, we no longer need to go to Canada/BC to have our elections. Citizens can go to the NADRB if there are complaints about our elections. During one election one whole Village Government was removed, the Executive had to address this and a joint decision was made to appoint individuals to oversee the operations of the Village.
- Code of conduct for elected people. Since 2000 we have had to remove 2 individuals.
- Nisga'a Commercial Group (NCG) is owned 100% by the Nisga'a Nation. One of most difficult things to do was sever the ties of economic development from government this needed to be done to avoid conflict.
- Nisga'a Foundation The Nisga'a Foundation was established by NLG.We will move forward to establish a Board of Directors to oversee the Foundation and to secure funding.
- Establishment of the Nisga'a Commercial Opportunity Fund Contributions to this Fund include Canada \$5.5 million, BC \$5.5 million, for a total of \$11 million.
- Shortly after effective date, the Nisga'a Nation authorized an allocation of \$3 million to assist with the fishery fund. That fund is now well over \$13 million.⁵

For a comprehensive summary of the Nisga'a Final Agreement itself, visit the link <u>Understanding the Nisga'a Treaty</u>

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⁵ Retrieved December 22, 2022, <u>About - Accomplishments and Benefits of Nisga'a Treaty | Nisga'a Lisims</u> <u>Government (nisgaanation.ca)</u>

About Gingolx

Gingolx: Seafood Capital of the Nass Formerly: Kincolith

One of four Nisga'a communities, the seaside village of Gingolx is located on the northwest coast of British Columbia on Portland Inlet, approximately 170 kilometers northwest of Terrace. Home to approximately 500 residents, Gingolx offers rich cultural history, natural beauty, and some of North America's finest seafood.

The people of Gingolx have an elemental relationship with the sea. For countless generations, we have relied on the harvest of salmon, crab, halibut, snapper, and shellfish. Isolated from the outside world until 2002, Gingolx is now connected to the North American road network with the completion of the Nisga'a Highway 113 extension. Gingolx means "place of skulls," a historic warning to would-be conquerors that we are determined to protect and preserve our land, resources, and traditional way of life. Today, Gingolx is famous for its hospitality and welcomes visitors from around the world.

With panoramic view of Portland Inlet, residents of Gingolx live in tune with the seasons and the tide. Forming the mouth of the Nass River, Portland Inlet sees the annual migration of five species of wild Pacific salmon and oolichan, a fingers-sized member of the smelt family. Gingolx offers a public boat launch that leads to some of the best kayaking, boating, and sport fishing in North America. Each summer, thousands of visitors arrive for Crabfest, an annual celebration of music, seafood, and Nisga'a hospitality.

Nisga'a Highway 113 paves the way for ease of access to Gingolx and offers breathtaking views of the Nass River estuary and wildlife. Once in Gingolx, visit our tribal smoke houses and watch the preparation of traditional foods. Stop by our cultural longhouse and carving shed to watch Nisga'a carvers at work. Explore surrounding bays and inlets aboard the Spirit of Gingolx or take part in a cultural event featuring traditional Nisga'a singing, dancing, and a seafood feast. Gingolx is serviced by local stores. Bed & Breakfast accommodation is available in Gingolx and other Nisga'a villages and campsites are located near the village.⁶

⁶ Retrieved, December 22, 2022, Gingolx.pdf (nisgaanation.ca)

Gingolx Survey Results

29 Participants

| What community do you | Age Category | Are you considered an Elder |
|-----------------------|--------------|-----------------------------|
| currently live in? | | by your community? |
| Gingolx | 50 to 64 | No |
| Gingolx | 50 to 64 | No |
| Gingolx | 50 to 64 | No |
| Gingolx | 35 to 49 | No |
| Gingolx | 65 plus | Yes |
| Gingolx | 65 plus | Yes |
| Gingolx | 35 to 49 | No |
| Gingolx | 65 plus | Yes |
| Gingolx | 50 to 64 | No |
| Gingolx | 35 to 49 | No |
| Gingolx | 50 to 64 | No |
| Gingolx | 50 to 64 | No |
| Gingolx | 65 plus | Yes |
| Gingolx | 50 to 64 | No |
| Gingolx | 65 plus | Yes |
| Gingolx | 50 to 64 | No |
| Gingolx | 50 to 64 | No |
| Gingolx | 50 to 64 | Yes |
| Gingolx | 50 to 64 | Yes |
| Gingolx | 65 plus | Yes |
| Gingolx | 50 to 64 | No |
| Gingolx | 65 plus | Yes |
| Gingolx | 65 plus | Yes |
| Gingolx | 65 plus | Yes |
| Gingolx | 50 to 64 | No |
| Gingolx | 65 plus | Yes |
| Gingolx | 50 to 64 | Yes |
| Gingolx | 50 to 64 | No |
| Gingolx | 65 plus | Yes |

| What is | How do | What skills, talents, resources, materials, or supplies do you have | |
|---------|-----------|--|--|
| your | you | that you can share with your community? For example you may | |
| gender? | identify? | teach beading or you maybe a health care provider. | |
| Male | Man | Senior Management skills, project management, leadership skills, fisherman and hunter, play guitar, play trumpet, play tuba. | |
| Female | Woman | | |
| Female | Woman | Mother | |
| Male | Man | Healthcare Provider (Nurse) | |
| Female | Woman | Nisga'a Language, speaking, writing | |
| Male | Man | Painter, drum maker | |
| Female | Woman | Teacher, I've done paint nights and willing to teach the stuff I preserve | |
| Male | Man | Minister, psychology1, counseling non- professional | |
| Female | Woman | i can teach beading | |
| Female | Woman | Traditional medicine & ceremony, beading, fitness, walk/run | |
| Female | Woman | I am a caterer | |
| Female | Woman | Crocheting, Bread making | |
| Female | Woman | Anything you want | |
| Female | Woman | Chef Seamstress | |
| Male | Man | Maintenance worker | |
| Male | Man | Business, economic development | |
| Female | Woman | Listening | |
| Female | Woman | Baking crocheting | |
| Female | Woman | Crafts, crocheting, sewing | |
| Female | Woman | Just being me and listening when someone is sharing. Not ignore anyone. Be respectful. Don't talk or make fun of people who need the help. | |
| Male | Man | An ear to lend, a shoulder to cry on. A perspective that shines light on where it is not. | |
| Male | Man | Basketball. Soccer. Physical conditioning. Fishermen | |
| Female | Woman | Nisgaa language, knitting, crocheting, cedar bark weaving, harvesting. | |
| Male | Man | Newsletter writer, know the nisgaa alphabet, can write and speak nisgaa. Gingolx rep for the nisgaa council of elders. Story teller | |
| Male | Man | | |
| Male | Man | I would like to see the younger ones in attendance, i am a firefighter of 30 years | |
| Female | Woman | I look after elders, also home maker, hand sewing amd macrame | |
| Female | Woman | Can preserve, baking, cooking, elders watch | |
| Female | Woman | I am knowledgeable in assisted arts and crafts | |

| What activities are already | What would you like to see in | Is there anything else |
|---|---|------------------------|
| happening in your community | your community that doesn't | you would like to |
| would you like to see more of? | exist now? | share? |
| With respect to treatment, I see | A wellness center for aftercare | A detox and wellness |
| people going for treatment, but | services for people returning | center is very much |
| the wait times for people to be | from detox or a treatment | needed for the |
| enrolled is too long. When a | center. Currently, there is no | Northwest. |
| person finally decides they need | system set up to ensure that the | |
| help, they should immediately | individual who is returning has | |
| at that very moment be brought | the best atmosphere around | |
| to detox or a treatment center. | them to continue their sobriety. | |
| The wait times are sometimes | A wellness aftercare service | |
| one to two weeks, and the | would aid in the individual | |
| individual changes their mind | staying on the path of healing. | |
| about going. That moment | This wellness center can offer | |
| when a person decides they | traditional programming like | |
| need help is a critical moment. | beading, painting, carving, drum | |
| | making, canoe trips, berry | |
| | picking, preserving, hunting, | |
| Croft pichts point pichts | fishing. | |
| Craft nights paint nights Ladies arts and crafts | Drop in centre Salad bars | No |
| | | |
| Counselling services a few days a month | AA meetings, Circle sharing, Community gatherings for teaching/sharing knowledge. | |
| Wellness, physically & mentally | Elders Homes, local care | Use of local herbs as |
| | | remedies |
| Teaching our language(Nisga'a) | A centre for all people who | A place to help our |
| | don't play sports | people who have |
| | | addictions,recovery |
| | | place |
| | Paint nights, baking and cooking | |
| one on one counsel with | Active Residential school survivor | group |
| on reconciliation | | |
| couples craft nights, beading, | | |
| painting, weaving. | | |
| Fitness groups | Traditional medicine & ceremony, language nest, cooking classes | |
| Weaving, beading | Cooking classes | Nil |
| Fitness Room, one day a | Swimming pool, Evacuation | Community of more |
| swimming pool | building | involvement |
| Sewing! Regalia making! Baking | Cedar weaving! Cedar Roses! | Regarding traditional |
| and decorating! Crocheting! | | medicines |
| Beading! Cedar weaving! | | |

| Sewing Harvests Cooking Culture | All of the above mentioned | |
|--|--|--|
| Floor hockey, soft ball, basket ball | More public meetings | Would love to see more workshops, more gatherings |
| Unity | Unity | Being united can benefit everyone just like the old days |
| Cultural class- to educate on feasts or wilps | Healing Center for nass | A healing Center for everyone not just addictions |
| Language | Language Nest | |
| Craft night for elders/beading, crocheting. More activities, elders Christmas tree Childrens Christmas tree. Include the kids in fundraisers. House decorating contest. All houses contribute to prize mooney for each contest for Christmas and halloween . They have AA meetings. Need things for people who have issues. A place for elders to sit | Have a small bus to tRansport elders, anyone in general. Bus service around the community8:30 am for school children. 12 noon for children 12:45 return to work 3 pm children return to home 5:15 people returning home from work Help for people who come from detox and treatment centres | It would be nice to see the children and students doing small skits like they use to. Kids made their own costumes with the help of there parents. Use the Gmrc for one night each class does a skit from K to grade 7, 20 minutes high school students do a skit too. A place for people who have illness to share with other people, so |
| with each other's. Centre for people who come from treatment centres. | | they wont be alone. |
| Referrals to rehab, no follow up though. Need that follow up to support. | Seeing clients instead of people seeking help | Rehab shouldn't be a business plan. It shouldn't be a plan that walks though life with those walking a solar road. |
| Cultural song and dance | Teaching hunting and fishing and food preserving | No |
| Youth, children programs. Close the gap | Heath and wetness centre, detox centre. | Get corporate sponsorship for projects coming into |

| | I | ı |
|-----------------------------------|-------------------------------------|--------------------------|
| | | our valley. There are |
| | | many who may be |
| | | willing to contribute as |
| | | part of projects in |
| | | valley tax purposes. |
| Sports. Recreation, cultural | | |
| dancing. Boys and girls club. | | |
| Story telling. Movie night. | | |
| | Safe house for people to go to in a | a tsunami alerts. |
| The younger ones playing in the | | When i was taken from |
| band | | my house in 1962 and |
| | | returned in 1979 |
| Bingo | Regular bingo | Elders need more help |
| | | in there homes, my |
| | | mothers house is |
| | | moulding and no |
| | | response from the |
| | | housing department. |
| Mens group, pool, coffee, tea | More activities. | Mens separate |
| time, workshops, anger | | preserving times a |
| management, community | | month, separate |
| services, helping others in need, | | women |
| wood, wood chopping, cut | | |
| grass, support groups, women | | |
| gatherings, story's from elders, | | |
| sharing tips on raising a child, | | |
| teens cooking, shopping tips. | | |
| Just because community dinner, | Hot Dog fand like outside | We need activities for |
| covid has left a huge void in our | Canadian tire. | the evening. Turn off |
| community. | | internet, mostly |
| Food/bingo/perishables/bake | | children attend |
| sales/basketball games all ages. | | everything |
| | | |

| What are your community customs and traditions? | What are your ceremonies? | What languages are spoken? |
|--|---|---|
| Singing, dancing, hunting and gathering. | A lot of our ceremonies center around our Ayuuk (Nisga'a Law). Certain protocols must be followed when ceremonies occur, such as feasts, marriage, rights of passage, births, deaths. Each of these have different ceremonies attached that must be followed. | Sim Algax (Nisga'a) |
| | | Nisga'a |
| Feasts, presserving | Buddha, praying 🙏 🤲 | English |
| | | Nisga'a, English |
| Most follow the Nisga'a culture, but losing it to not being taught enough, public meetings are falling behind, Public Education needs work | Spirituality, prayer, there are many Nisga'a ceremonies that are not being used, have gotten lost to the European justice system. | Nisga'a, English |
| Sharing,,,caring,,,togetherness,,h elping,, | Naming,,accomplishment,,,,,recognition's | English,,,so me Nisga'a,,,, |
| Nisga'a cultural feasts | Feasts | Nisga'a |
| Cultural practices that parallel scriptural stories | | Englis |
| Nisgaa ayuuk | feasts, dances | English and Nisgaa |
| It is our tradition that we follow the nisgaa law and continue to teach our younger children the way of preserving our traditional foods | None that I am aware of | Nisga'a |
| Funeral, Feast (Wilps) | None I'm aware of | English and understand Nisga'a Nisga'a |
| Culture | Non existent | |
| Crab fest | Stone movings. Hobiyee | English English, nisgaa |

| Our cultural duty | Cultural ceremonies getting a Nisga'a name (chief's name) putting away the stone or stone moving. | English and Nisga'a |
|---|---|----------------------------|
| Nisga'a and colonial | Traditional and non | English Nisgaa |
| Matrilineal society | | English Nisga'a |
| Feasts, stone moving, festivities, cultural dancing | Not sure | I don't know nisgaa |
| Culture, language and dance groups. | Culturecelebrates Hobiyee. Support families who experience death in families. Support weddings | Nisgaa, English |
| Respect your elder. Feast halls and protocols. | | English. Nisgaa |
| I know my cultural responsibilities | Feasts, deaths, marriages | Nisgaa |
| Nisgaa culture and language. Anglican Church | Many are not being practiced. Children ceremonies, becoming a young man and young lady | English. Some nisgaa |
| | | English. Nisgaa |
| | Cultural | Nisgaa |
| | | English |
| Pray to god, Jesus and Buddha | Thanking creator daily awake. | English |
| Nisgaa dancing, drumming, singing, pot luck sharing, different traditional harvested foods. Helping with money for each other on deaths, weddings, illnesses. | Funeral services, wedding services, baptism services, Nisgaa chief and individual name calling. Some smudging, moving head stones to final resting place. | English. Nisgaa |

| What forms of art and music exist? | What different forms of spirituality are present and expressed in the community? | Is there anything else you would like to share? |
|--|---|---|
| Concert Band, Church music, painting, beading, carving. | The Nisga'a people knew of a higher being long before contact with the missionaries. We already observed their God, but called him by a different name. We knew our God today as K'amligiihahlhaat before contact. We have since been indoctrined into Christianity. However, some Nisga'a people still use K'amligiihahlhaat when praying to our higher being. | A Traditional Wellness and Detox center would have a profound and lasting effect on our young people. Shoot for the stars, make this center a world class place, that people will be proud of. |
| Cultural dances | | |
| I don't know | I just do my budha | No |
| Variety of art, local artisans, music is mainly local cultural dance songs, concert bands exist but the organizations are falling to way side, no mentoring happening to encourage the survival of concert bands, or dance bands locally do not exist. Cultural,, religious | Cultural very limited, churches have taken a hit due to Residential schools historical events, there is prayers being practiced at public events, protocols are recognized in events of death, | Mental Health Awareness needs to be prioritized, alcohol & drugs are taking a toll on our young people, we are losing far to many to hard drugs. How do we educate our youth, children about effects of substance abuse. We need to break this vicious cycle we are in, we need healthy families, people, leaders at every level. |
| Concert band, individual musicians, cultural dance grp, story tellers, cultural art Nisgaa | Nisga'a spirituality, christianity | |
| None that I'm aware of | None that I am aware of | No |
| Concert Band, Nisga'a art | None I'm aware of | Nil |
| Cultural dancers songs | Anglican church! Church army | |

| None | Christianity | Gingolx needs things to do that's why ppl turn to alcohol and drugs Absolutely nothing happening after the 9-5 workers go home And they are 9-5 workers |
|--|--|---|
| Concert band | I don't know | Need AA meetings. Wellness camp. Bingo hall |
| West coast Nisga'a art and songs handed down from the chief's. | Christianity | Working together today can make for a better tomorrow |
| Nisga'a dance songs - church songs | Traditional Christian spiritual | No |
| None | Anglican | |
| None that I know of | It would be nice to have story telling from elders. Coffee and treats to share. Include children and students. | Have festivities for children more often to engage with peopleno phones plus interactions with one another, not just on festivities |
| Culturesinging and dancing. | Culture. Churches. They come into our community. | Just to be open, share the health by being respectful, talk to one on one with individual. Not with anyone, confidential is very important. |
| Concert band. Brass band | Anglican Church | FNH's approach is initially short, sighted to have one facility serve 9 communities-4 nations, as that is a very colonial approach. It does provide a solid base to build on to meet the needs of 9 individual communities tho. |
| Cultural dance groups | Church | I keep expressing the need of a support person accompanying a person going to detox or treatment |
| Local artisans, concert bandvery limited. | Anglican. Some Jahova witness | To operate a successful detox wellness centre, there would be a need to integrate not only existing process (healing) but also use the nisgaa culture and traditions. Use of the nisgaa |

| | | language. Local trained employees who are well. |
|---|--|---|
| Many individual artisans. No group. Kincolith concert band. Marching band Christ church choir. Mens amihl saxwhl Lisims choir group. Rock and roll. | Anglican Church. Church army. Nisgaa culture, village and nisgaa leagues for all sports with ability to broadcast. | The gingolx village government just installed a huge screen: opportunity for workshop presentation, movie night, pro sports, hobiyee, village sports. |
| Nisgaa dancing, singing | | |
| Played in the band | | |
| None except the Kincolith band orchestra. I can play the saxophone and tenor sax | | Elders are our back bone, they need to be acknowledged |
| | Anglican, jahova, Buddha, creator, first natives | |
| | Church services. Hobiyee | Too much lateral violence. People have changed since covid |



Gingolx Workshop Results

Notes taken by the facilitator

- How do we measure success?
- Aftercare services
- On Nisga'a land continued support
- No local help
- only help sought on own
- own work
- difficult
- Have a person who supports treatment and goes to the detox center with them.
- Round Lake Centre afraid
- No lodge, no camp bought yet
- Vetter lodge available- older, high end log cabin
- At Round Lake there were 3 residential school survivors and 24 from MCFP (ministry of children and family protective services re: 60's scoop)
- Set times per year may not work for most
- Having immediate support
- Someone to help immediately even in a "drunken" state to avoid hurting themselves.
 - Time 24 hours/day
- Traditional foods, not hospital foods.
- Not on Nisga'a land
- Another on Nisga'a land
- Not fair that one needs to be sober before care
- Many have asked for help unsuccessfully
- When will it start?
- Funding LNG- goldmines
- Nisga'a is under treaty, not sovereign can make their own decisions.
 - Under own governance and does not require government approval
 - Still under FNHA
- Long House Artwork on walls represents a number of nations R/T marriage
- Definite immediate need for detox.
- Retaining mind and strengthening the body.
- Almost impossible to satisfy the needs of nine communities. short sighted feels colonial.
- Likes the idea of satellite stations in each community providing detox and aftercare.
- To be successful we have to own it ourselves we have geographic differences.

- Respite and palliative care was worked on but didn't happen.
- Medical and mental care is needed.
- Aftercare is seriously lacking.
- Vetter Falls a potential location.
- Healing and Wellness services from birth to death
- Oral history- sit with Elders and learn history not available now to hear it.
- Nurturing needed grandmother program
- Trauma residential and Indian day school.
- Kids apprehended by the ministry when they were little.
- Identify suffered traumas.
- The first step is huge for success
- Round Lake Centre went for treatment for alcohol the first time and the second time went for residential school trauma the second time worked.
- Self-government is the antidote to anxiety and is trust.

People

- Preserves
- Making bread including fried bread
- o Cultural dancing
- Nisga'a dancing, singing and drumming
- Hunting
- Nisga'a Valley Health (NVA) offers programs like drumming and services all four communities.
- Men's choir
- Youth group
- Anglican Church Women (ACW) sisters' group
- o Church Army (CA) sisters' group
- Kincolith Concert and Marching band
- Oldest community members are 93 years and 96 years young.
- o The youngest community member is 1 month old
- There is a sports organization that overseas all sports
- Another group is the sons of Kincolith Gingolx
- Gathering seafood, shellfish and salmon
- Feasting
- Two churches one is the church army and Christ Church they offer morning and nighttime services
- One would like to see confirmation back in the first church

- Smudging and cold water cleansing the use of sage cedar and devils club even the youngest of children participate there is also cedar brushing both indoors and outdoors.
- A cleansing feast is offered once in your lifetime and it varies between the different lands.
- Language nest it is grassroots led teaches how to speak and learn how to communicate. It is oral there is no paper there are no pens they share stories and their history. Currently language is for sale and that cost has become a barrier.
- Smoke houses are found in communities including New Aiyansh it is good to bring the elders out there.
- They are working to build a community garden
- o They have a Health Center
- They have a longhouse
- There is an elementary school
- There is a daycare for zero- to six-year-olds.
- The daycare the daycare is in the same building as the head start program and parents are not required to be there
- o Family takes care of other people's children after 5:00 PM
- They have a fire department
- o There is an ambulance stationed in Greenville
- There is not enough bingo
- Historically they used to have a working together group this group would renovate a church hall they would work on building structures it happened decades ago and the ladies brought food or vice versa
- o They have a public works they have really good water
- o They now have a new treatment plant for their wastewater
- They stated there are not enough local jobs
- There is now opportunity for camp work which is fairly new
- However, camp work takes the workers away from their families for extended periods of time for example one man has been working in camp for five years and states that means he's only had 2 1/2 years with his family.
- most community members own their own homes, but some rent and homeowners pay taxes
- There is a new home makers or home care program it's a 14th month course to offer training for interested persons currently there are not enough homes for people and they ran out of land to build any new homes
- The lack of housing is a barrier for someone who may want to return to community
- There is a need for housing for special needs

- There is a need for support for those with developmental disabilities and mental health needs such as anxiety depression and substance use
- There is no counselor in the community
- They do have resident nurses and doctors that visit those doctors and nurses come from the lower mainland they come one month in and one month out they also have visiting specialists that come including but not limited to orthopedic surgeons
- There is a sort of tripartite agreement between Nisga'a Valley Health the First Nations Health Authority and the federal government it appears the First Nations health authority acts as a conduit for the funding from the federal government to go to NVH.
- Before the visiting nurses and doctors and because of COVID they only had access to live care which is similar to zoom or Tele health
- They currently have no dental services
- One gentleman shared he stayed home for nine years to take care of his aging parents he stated he needed somebody he could trust but he did also experience some burnout.
- o There is Nisga'a language for the elderly
- Things changed on May 24th. Historically, the four villages would compete in sports including soccer and there are fleets would train all year round. it was like the Olympic Games they would race to see who was the fastest and they had both gatekeepers and scorekeepers at these events.
- Sports are viewed as a good to deterrent for drugs and alcohol and it is an activity they would like to bring back.
- The highway to Gingolx only opened in 2003. before the highway travel was done by ferry boat and plane.
- The community was known as the place of golden hospitality. they welcome
 people who arrive by boat or canoe asking if they were OK needed food or were
 cold as the weather could be challenging for any travelers.
- They sense last a lot since the highway opened
- There is a need for more storytellers many stories are recorded but these may not be precise and still some stories are not recorded
- The church first opened in the 1900s there is far less Christian influence today as related to colonization. the youth are now practicing Nisga'a spiritual ceremonies and they believe in creation.
- Still one person would like to see a little Chapel at the recovery center for people to pray and practice their spirituality a sort of sanctuary
- There is a desire to trade foods among nations, but food trade today includes the exchange of money still some would barter for example trading seafood for moose meat and everyone is different.

- Today shellfish and crab are harvested for selling. the people eat sea lion halibut
 Sakai dear moose bear meat and porcupine, but they mostly eat seafood.
- There are two churches available and open for use you can rent these spaces.
 the longhouse can be rented for \$200 a day and the Community Center is greater than \$600 a day.
- Their modes of communication include Roger's cell phone service, VHF, Twitter, Facebook, and Internet. their Internet has recently switched to a fiber optic service.

Work Sheets Retrieved from the Tables

- Treatment & Wellness
- Gingolx owns:
 - Arrandale, no road access, an old cannery
- Nisga'a Lands own:
 - Millbay-an old cannery
 - Nass Harbour- an old cannery and logging camp
 - o Kitsault
- Nisga'a TV
- Gingolx statistics- bootleggers & drug dealers
- Fishing
- Hunting
- Story Telling
- Tour Guiding
- Carving
- Painting
- Childhood Dreams
- Technology Facebook devices
- Future
 - 300 lot subdivision West Ridge
 - Increased population
 - Increased bootlegging, drug pushers
 - Sports Leagues
 - o Communications
 - Award Achievement

- Why
 - I've been taken from here in 1962 to residential school; what did I do, to be taken from here, only 2 years old. Never got to see my mom. I did not want to come back.
 - I was taken from here in 1962. Back home in 1979. So why I asked mom never got to see her only 2 years old. Hope my life will be ok. They did not call us by name my #129.
- What is important
 - A- to see my kids are safe
- What does the community mean to you
 - A-?-Idon't know
- What are your hobbies
 - Playing pool, bingo, was a firefighter in 1980.
- What do you see in your community
 - To see the band back
 - More games
 - o Pool
 - o Game Nights
 - Get out run
 - Basketball
 - Boxing
- Port Authority Legacy Fund
- Detox Wellness Centre Where?
- Where to get some funding LNG, Gold Mines, working around area of the nations that are being involved!
- Addictions Counsellor
- Spiritual Person
- Medications (Traditional)
- Land Based Healing Centres
 - Have this in place for people coming home from treatment centres
 - To continue what was being taught to them in these centres
 - To use our own cultures
 - Our own people, train them for these courses
 - People who understand our people
- Cultures
 - Have people with understanding the culture
 - Teaching traditions that we have

- o Harvesting, cedar weaving, drum making
- Taking pictures to showcase their work
- What year was taken. How many and how old they are
- We know our own cultures, we follow
- o For our own children we have issues and addictions
- o Family support with children with addictions and any form of illness
- Understanding the individuals
 - Show love
 - Be patient
 - o Take their health inconsideration
 - We need a centre in own Nisga'a land
 - We need to listen to them
 - o They would feel more safe, comfortable on our own land.
- Work Force
 - Set the "plans"
 - o Talk about the "plans" with committee
 - Show them the "plans" ask if they are in agreement.
 - Bring to the community, of your "plans"
 - Share ideas with community
 - When I was a young mother, we worked with the public works by cooking for all the workers; young and old.
- Funding LNG ***, all gold mines in our area, and diamond mines, granite mines
- United Native Nation
- Workout Room
 - After done do upgrading and education
- Need many counsellors confidential
- How to help shattered souls due to big time abuse- all forms
- Call back our lost souls
- Have separate places for male- women
- Smudge cedar branches google benefits
- Devil Club
- Cigarettes
- Sweet grass- smudge
- Ginger Root healed by own liver
- Cleansing our bodies
- Prayers to God for forgiveness
- Housing after done treatment
- Dance group traditional dancing

- Good generator
- Fun games daily cool down times
- Properly clean each room after client is done
- We need our own treatment centres.
 - Healing won't really begin until "all drug dealers and boot leggers are dealt with".
 - Someone to teach our own preserving's.
 - o Continued support when we are finished with the program.
 - Someone trustworthy for 1 on 1 counselling, "confidentiality".
 - o AA and NA meeting available in each reserve.
 - Healing counsellors available on the reserves.
 - Need our own transportation to the rehab and out.
 - Be considerate to dismissing anyone that the program isn't working for.
 - Everyone is to contribute to the cooking program.
- Need community gaming ex. Scrabble, "Bingo", cribbage tournaments
- Need a hobby: for people who like to do arts and crafts, native art and carvings.
- Older kids
 - Can chop wood
 - Dishes-chores-laundry
 - o Before ball time.
- Game room: Bingo, Scrabble, dices, cards
- Need little homes.
- Tribal picnic and games
- Gogo berry contest
- Bannock making
- Little chapel to pray for God/Jesus to help
- A Chinese garden, buddha place for self-prayers
- Seven years into substance abuse (nothing) to help people
- Let parents know that their child is using (get help) ASAP
- Is there a form to be filled out in Gingolx village? To go to treatment with a clinic vehicle
- Have someone that knows what kind of trauma a person goes through how to handle each individual one-on-one gain the person's trust
- Return to facility to ensure they don't step back into drug use (six months)
- Have facility on Nisga'a territory (other places?) to cover everyone.
- Reality have a facility outside of any city limits, so a patient can't leave at any time
- Where is the facility? Is it outside city limits? It should be outside city limits, so a patient doesn't leave.

Includes:

- One on one patient/doctor.
- Stay in detox long term- include programs/anger management/life skills/counselling.
- Go right to treatment long term (at least a year)
- Have a facility to bring their family and work together on a sober life; what the options are out there.

Indigenous Staff

- There is a barrier in trust within some people; would it be a good choice to have Elders as motivation speakers?
- o I've worked in the shelter in Terrace, BC for a year; I've seen how some of them were treated. They do not trust non-indigenous employees. (It's because the employee picks and chooses who they want to help). Example: 1 person comes in for sandwich/drink. The employee gives this person 2. The next person comes in -and he/she got 1 sandwich. She asked why, the employee said they were going to ban them for asking why, the other person got 2 sandwiches.
- Sponsor available 24/7?
 - o AA
 - o Drugs/alcohol
 - o Mentor (24/7) Stick to one mentor
 - One on one (up to 1-2 years to stay on track; to stay sober)
- Past users that speak at meetings.
 - Mentor patients
 - Tell their story
 - What do you have in common with mentor
 - Earning the trust of someone (that needs to hear their story).

Trauma

- All kids of trauma; sexually, emotionally, racism, residential school, children that were exposed even though they didn't go to residential school, physical abuse
- Hard to reach out if the person is afraid to speak up. (How do we reach out to the people that stay away from the people that want to help them?).
- Success stories to re-enter the facility to speak to the people that stayed off track in their life
- "There is hope in anyone's life; young/teens/older people" don't give up
- Judgmental
 - Not to judge any person with an addiction; everyone has a story to tell.
 - Don't make someone feel like they can't ask for help.
 - Reach out to them (they can be shy, scared).
- Family

 Let the family know who is addicted to alcohol/drugs. Reach out to them, help them, listen to them.

Community

- More involvement and interaction with Elders.
- Meetings-Talking stick (weekly 3xs) men: women: teens
- Hand out reading material steps to take, when the person is ready to make a change in their lives.
- Take a day trip (go for a ride, hike, a walk, go swimming)
- Make it a point to visit Elders, (some can't get out of the house).
- More life skills for teenagers/ 6 & 7 grade children to be involved with how to be a – cashier, custodian, how to handle money.
- Classes to how to do light chores, such as doing your own laundry, sweep/mop your room (keep a list to mark off that it was completed)
- Reward yourself buy something needed for your room.

Communication

 Keep the communication going. No matter who it is with, interaction is the key to get something done.

Reporting to the Community

- Have each person to report of what they are doing with their lives? Their accomplishments, their goals.
- Still help a person who needs help.
- o Treat them for what they are doing in their lives. (Dinner, gift, movie).



About Gitlaxt'aamiks

About: Gitlaxt'aamiks: Capital of the Nisga'a Nation formerly: New Aiyansh

One of four Nisga'a communities, Gitlaxt'aamiks is located 97 kilometres northwest of Terrace, British Columbia. Home to approximately 1,800 residents, Gitlaxt'aamiks offers rich cultural history, natural beauty, and central location for exploring Nisga'a Lands.

Gitlaxt'aamiks was a large and ancient village on the north bank of the Nass River on the edge of the historic Grease Trail. In 1883, a missionary established a Christian village about six kilometers downriver. There, Nisga'a craftsmen built a large village complete with Victorian style houses, a church, community hall, school, sawmill, and its own printing press. They called this new village Aiyansh (Fertile Valley). After a series of floods, the people of Aiyansh finally moved to higher ground on the other side of the river and established New Aiyansh. It was here-after seeking a settlement for 113 years-Nisga'a negotiators signed British Columbia's first modern treaty, the Nisga'a Final Agreement.

In the spring of 2010, the village government voted to rename the village of New Aiyansh Gitlaxt'aamiks.

Gitlaxt'aamiks offers an ideal launching point for discovery of Nisga'a Lands and culture. In 1977, the "Unity Pole" was raised here-the first new pts'aan (totem pole) in the Nass Valley in a century. It signaled a rebirth of Nisga'a art, culture, and language, as well as a renewed commitment to securing a fair and equitable treaty. Today, the Nisga'a Final Agreement is secure and signs of renewal reverberate throughout the Nisga'a Lands.

Gitlaxt'aamiks is situated on the edge of Anhluut'ukwsim Laxmihl Angwinga'asanskwhl (Nisga'a Memorial Lava Bed Park), the site of Canada's last volcanic eruption. Sport fishing, back country recreation, and cultural tours are available (in season). Visitors from around the world come to experience Wilp Si'ayuukhl Nisga'a, the legislative assembly of Nisga'a Lisims Government.

Local stores serve the community and Bed & Breakfast accommodation is available in Gitlaxt'aamiks and other Nisga'a villages. Nisga'a Highway 113 paves the way for ease of access to Gitlaxt'aamiks and the rest of the Nass Valley.⁷

⁷ Retrieved December 22, 2022, <u>Gitlaxtaamiks.pdf (nisgaanation.ca)</u>

Please Note: No Community Navigator was Hired for Gitlaxt'aamiks and No Workshop Took Place for this Community

Gitlaxt'aamiks Survey Results

2 Participants

| What community do you currently live in? | Age Category | Are you considered an Elder by your community? |
|--|--------------|--|
| Gitlaxt'aamiks | 35 to 49 | No |
| Gitlaxt'aamiks | 50 to 64 | No |

| What is your gender? | How do you identify? | What skills, talents, resources, materials, or supplies do you have that you can share with your community? For example, you may teach beading or you maybe a health care provider. |
|----------------------|----------------------|---|
| Female | Woman | Emergency Medical Responder |
| Female | Woman | |

| What activities are already happening in your community would you like to see more of? | What would you like to see in your community that doesn't exist now? | Is there anything else you would like to share? |
|--|--|--|
| Girls group, boys group, evening activities for parents. Training in trades. | Housing. | Nass valley communities need housing! |
| Fitness classes. Alcohol and Drug support especially after hours (struggles aren't 9-5 and Monday-Friday). Children and Teen Prevention classes - speak of the reality of drugs, alcohol, creating safe spaces, and the importance of Social media. Sad, in our Community we have 12-13 year old girls hanging out where there is drinking at 3am. Need a Drug and alcohol Treatment Centre -fully staffed with Psychologist's and doctors. | Children and Teen Prevention classes - speak of the reality of drugs, alcohol, creating safe spaces, and the importance of Social media. Sad, in our Community we have 12-13 year old girls hanging out where there is drinking at 3am. Need a Drug and alcohol Treatment Centre -fully staffed with Psychologist's and doctors. | Mental Health services be provided to our Citizens no matter where they live. Real mental health services in the Valley. Regular Chronic illness clinics, podiatrist clinics, chiropractic clinics |

| What are your community customs and traditions? | What are your ceremonies ? | What languages are spoken? |
|---|----------------------------|----------------------------|
| I don't know | I don't know | Nisgaa english |
| | | Nisga'a |

| What forms of art and music exist? | What different forms of spirituality are present and expressed in the community? | Is there anything else you would like to share? |
|------------------------------------|--|---|
| Cultural singing a | nd dancing. | |
| | | |



About Gitwinkshilkw

About Gitwinksihlkw: At Home on the Nass River Formerly: Canyon City

One of four Nisga'a communities, Gitwinksihlkw is located on the north bank of the Nass River 100 kilometres northwest of Terrace, British Columbia. Home to 250 residents, Gitwinksihlkw offers cultural rich history, natural beauty, and access to Canada's newest lava bed.

Canada's last volcanic eruption occurred in Nisga'a territory approximately 250 years ago. The lava destroyed everything in its path, sparked fires in the surrounding forests, and covered two Nisga'a villages. More than 2,000 people perished. Survivors eventually resettled at Gitwinksihlkw (Place of the Lizards). According to oral tradition, large lizards lived here before the eruption. Today, the large lizards are gone but the vast lava beds still dominate the valley. They serve as a memorial to those who lost their lives and as a reminder of the importance of respect-for both the natural world and the wisdom of the elders.

Situated at the edge of the Nass River and Anhluut'ukwsim Laxmihl Angwinga'asanskwhl (Nisga'a Memorial Lava Bed Park), Gitwinksihlkw enjoys one of British Columbia's most dramatic natural settings. Nisga'a Highway 113 paves the way for ease of access to our village and each year, the number of visitors continues to grow.

Nisga'a Memorial Lava Bed Park is a popular destination with a 16-site campground and a Visitors Centre displaying Nisga'a artifacts (open July and August). Join us for guided tours of the lava beds, sport fishing, backcountry excursions, a stroll across the Nass River on a 400-footlong extension bridge, or simply stop and admire our majestic pts'aan (totem poles) that tell of Nisga'a history, culture, and clan relationships. Local stores serve the community and Bed & Breakfast accommodation is available in Gitwinksihlkw and other villages. ⁸



⁸ Retrieved December 22, 2022, Gitwinksihlkw.pdf (nisgaanation.ca)

Gitwinkshilkw Survey Results

| What community do you | Age Category | Are you considered an Elder |
|-----------------------|--------------|-----------------------------|
| currently live in? | | by your community? |
| Gitwinksihlkw | 50 to 64 | No |
| Gitwinksihlkw | 50 to 64 | No |
| Gitwinksihlkw | 50 to 64 | No |
| Gitwinksihlkw | 65 plus | No |
| Gitwinksihlkw | 50 to 64 | No |
| Gitwinksihlkw | 65 plus | Yes |
| Gitwinksihlkw | 35 to 49 | No |
| Gitwinksihlkw | 65 plus | Yes |
| Gitwinksihlkw | 35 to 49 | No |
| Gitwinksihlkw | 35 to 49 | No |
| Gitwinksihlkw | 15 to 18 | No |
| Gitwinksihlkw | 50 to 64 | Yes |
| Gitwinksihlkw | 65 plus | Yes |

| What is | How do | What skills, talents, resources, materials, or supplies do you | |
|---------|-----------|--|--|
| your | you | have that you can share with your community? For example you | |
| gender? | identify? | may teach beading or you maybe a health care provider. | |
| Female | Woman | Nisga"a translation- | |
| Female | Woman | Nisga'a Teacher | |
| Female | Woman | Employment and Training. Helping with any barriers in | |
| | | employment, for example driver training. | |
| Female | Woman | Ts'aling salmon, catering, fundraising for societies. | |
| Female | Woman | Post Secondary education registrar and student advisor. | |
| Male | Man | I can play piano and guitar. I love to sing and praise & worship | |
| | | songs. I enjoy reading the Bible & Christian books. | |
| Female | Woman | I help people with employment, education and I do food sales. | |
| Female | Woman | I love to sing, color and bead. | |
| Male | Man | Train the Trainer, Fire, EMR, wildland fire, Response BC, EOC, | |
| | | SARS | |
| Female | Woman | Beading. | |
| Female | Woman | | |
| Female | Woman | love to bake, preserve food, crochet, sew, read genealogy. | |
| Female | Woman | Getting traditional foods, medicine, collecting cedar, sewing, | |
| | | berry picking, baking. | |

| What activities are already happening in your community would you like to see more of? | What would you like to see in your community that doesn't exist now? | Is there anything else you would like to share? |
|---|--|---|
| Homeleaque | Ages 25 to 40 group activity. | No |
| more community communicating our or teaching of Nisga'a language for all ages. | Longhouse for everyone to gather for events of storytelling and eating together. | no. |
| NVHB programs need to be expanded out, more programs regarding drugs and alcohol. Support through out begining of journey, middle and end follow up, 24 hour support. | A safe place for women and children in violence, respite care for parent's working on themselves, 24 hour services. Support service for parent's and children living with alcohol addiction and drugs. Food share for elder's, home care, to preserve our traditional foods, healing groups. | |
| | Grocery store and gas station. | no. |
| Mostly basketball because we don't have a field to watch other sports outdoors. | More outdoor sport activities. | |
| Events for youth. More youth engagement. | Youth group. | More youth and parent involvement. |
| | A community garden & smokehouse for those of us who don't have one. | |
| Face to face functions or just a community lunch or dinner with no agenda. | More community togetherness functions, warrior training, cooking classes for everyone. | |
| Elder's stories. | Homes for the homeless, more support systems. | More guidance need for our people. |
| I've seen the driver license course, I think it'd be nice to see more of that, especially for people who don't have cars to start with. Physical exercise for older people, elder's group, | More community get togethers, have events at our village can attend to such as stat holidays, play days, movies. Just something the community together. Get togethers, learning new things, facilitators. | Maybe do some fundraisers to save up for new buildings such as a pool, museum, another youth center, gym. More communication, more sharing, less |
| Homeleaque, youth activities, reaching the one who are not involved. | | judgements. |

More activities for children to teach social skills, teaching children that it's ok to ask for help, teaching children traditional stories, Lava Flow, people, families lost during Lava Flow. Elders care centre, Treatment center, night watchmen, housing, culture center, policing of drugs and alcohol, daycare.

| What are your community customs and | What are your | What languages are |
|--|---|--|
| traditions? | ceremonies? | spoken? |
| Ayuukw (laws) | Feasts | Nisga"a |
| Nisga'a culture and laws we abide by in | teaching medicines for | Nisga'a and English. |
| our daily lives. | health and sicknesses. | |
| | | Nisga'a and English. |
| Church, Homeleaque, feed family when bringing loved ones home. | Feasting system. | Nisga'a and English. |
| Feasts. | Nisga'a Culture. | Nisga'a and English. |
| We have Nisga'a dancer's and singer's . | Stone moving feasts, wedding feasts and many other cultural feasts. | Mainly Nisga'a. |
| We follow Nisga'a culture and protocols. | We have a feast system. | Mostly Engilsh and Nisga'a. |
| Our community is family oriented and we | Food harvesting, share, | Nisga'a and English. |
| pretty much follow traditional protocols. | share stories (oral). | |
| Our community has lots of customs and traditions, each different from wilp to wilp (houses). | Stone movings, death, coming of age, cleansing. | Nisga'a |
| | | English, some Nisga'a. |
| | | English, most of what I speak, I know some phrases in Nisga'a. |
| Being involved in our Wilp (house), | Praying by myself. | Only English by me, |
| respecting everyone no matter what, | | know some phrases in |
| sharing what I have learned with others. | | Nisga'a. |
| Follow our Nisga'a culture. | | Engilsh and Nisga'a. |

| What forms of art and music exist? | What different forms of spirituality are present and expressed in the community? | Is there anything else you would like to share? |
|---|--|--|
| Mass Band, totem pole carving | Our own beliefs in our creator and Salvation | No |
| Nisga'a art, carving, music. | Church service online and in the church on Sunday. | no. |
| Tons. | Cultural,Salvation Army | |
| Brass Band , Four Crest Dancing, Songsters. | WWNI teaching Nisga'a language and writing. Salvation Army programs for all community members. | Loss of connection with Elder's, losing spirituality, night watch. |
| Community bands, Four Crest Dancing, Nisga'a jewlery and clothing. | Nisga'a culture and beliefs | / norms/ laws. |
| Brass band, cultural and spiritual singer's. | Sunday school and church services. | |
| Cultural dancing and songs. | Salvation Army. | |
| Traditional, spiritual, inspirational, secular. Cultural dance and song. | Traditional and christianity. God, Jesus all of the time. | Would like to be more with our people. Be nice to have visitor's again. |
| None | Feasts. | No. |
| 110710 | . 54565. | |
| There is a dance group but it is not as active as it should be or could be. We have lots of talented people right in our community. | Our church is very active, Salvation Army. | Would love to see more art and music sharing, doesn't have to be sharing, doesn't have to be structured, just positive encouragement, small groups gathering to learn from each other, especially culture and songs. |
| In community from GES, Brass band. | | |

Gitwinksihlkw Workshop Results

Notes Taken by the Facilitator

- Family Education re: a recovering alcoholic had family with alcohol in the home
- Cleansing Feast for the person who quit substances—traditional Nisga'a stew, moose meat
 - o Included the person stripping down to their underwear
 - Cleansed with devil's club water
 - Members talked to him
 - Sober going on 35 years
- Persons feel isolated from friends and when they go sober
- No services
- Don't want to be the "dry drunk" re: still angry and difficult
- Release negative energy in a positive way
- No sponsors here (e.g., AA)
- 24-hour helpline needed
- Build trust with people
- Need for privacy and confidentiality
- One, as a family member called the Women's Resource Society in Terrace & found help
- Some went to the detox centre in Nanaimo
- Late Patty Adams was the area counsellor
- Not fault of loved ones, emotional abuse (re: not good enough)
- Set boundaries re: only taken back if he changed his ways
- Talked to Elders
- Others went out fishing to talk and that was effective
- Grand mother program a good idea
- Yet and Getz = grandmother & grandfather
- Buffet & combination of options to be made available to those in recovery
- Barriers to opening up around and with community members
- Feels it would be positive to be going through struggles with members from other communities
- Hollow Bar? -Jix -in a little pouch (medicine bag) was used to protect her son. It can be burned with devil's club along with pure water and an opened bible to help with nightmares.

- The peeling of devil's club can be boiled for drinking was used by an elder to help with his COVID symptoms
- Can never sell medicine and the user needs to believe it will work
- The jix can be paralyzing even a very scant amount and should not be swallowed. Is placed under the tongue but never swallowed.
- Jix is also known as Hartley Bay poison root
- Workers need to know the varying names for these traditional medicines
- There are cross-cultural names and cross-cultural uses that need to be learned
- Rumors of strawberry and rainbow candy now in the community this is fentanyl
- Curious to learn % of homeless in other communities that are Nisga'a. Believe 46 persons from Nisga'a are now homeless in other areas such as Terrace.
- Ambulance service is available in community
- Medical/prescription errors happen in community. This has led to one very severe seizure n one case.
- Attendees felt they were not well informed as to the medications they were prescribed and sometimes did not take them
- Complaints of too many medications/prescriptions e.g., 5 or more
- Reasons for homelessness include grief, physical pain, and injury incl. opioid prescriptions
- Friend trying to get help but placed on 5 medications which she has a low tolerance for.
- Nisga'a health centre does not share the same database as the NHA hence causing more medical errors
- Member reports boiling bay leaves for constipation
- Statement Mother passed away r/t bowel impaction. Was prescribed laxatives but they became toxic releasing gas. Now concerned for elderly father who too is constipated and gives him boiled bay leaves to drink in lieu of prescribed laxatives.
- Service centre for welfare
- One member claimed he was happy homeless as he was able to drink in Terrace without criticism
- One member remarked "Healing Life" in Terrace was a good service to obtain medical records.
- Elders may have literacy issues, need advocates in healthcare, healthcare providers re: physicians should speak in plain language. One physician from Terrace does speak Nisga'a.
- Feel frustrating needing to beg for money for treatment and resources given the trauma caused by the church and residential school.
- Community Garden

- Elders counsel young couples and act as mentors more in the past and not as much now
- Songsters would practice songs on Tuesdays at the church. Church services are gone now since COVID, spirituality is dying along with the Elders.
- Women do not pick berries and preserve like once before
- Not teaching traditions to kids. Traditions are becoming obsolete
- Cannot offend others in the community, traditions are being broken.
- Mothers would groom their daughters regarding behaviour for example at the feast hall. This includes being respectful.
- Children did not attend funerals or memorials in the past but now they do and tend to run around.
- It takes a community to raise a child. Aunties and uncles used to be able to correct and talk to the children.
- Discussion about the intake process for clients re: prefers to self-admit and forego the long 15-page document as that is a barrier
- Marketing Discussion of how communities and members would learn about the facilities.
- Supports for families needed Need to learn how to ask questions to loved ones recovering, support their loved ones, provide tools and resources, including correct language to use re: healing language and support for the children of parents in treatment
- Nisga'a purchased 2 fishing lodges, one is very nice that could be used for a facility and has the Nass camp that already has gas, power, water and is cleared. Some concern about older copper piping.
- One member shared they went on a canoe trip with 4 Elders who counselled the youth
- No story sharing taking place, and nothing is being recorded there is a concern of lost stories from Elders.
- Tribal feast, when someone dies, their belongings are given away and this is a process
- Loss of mentorship and coaches Elders are passing away with stories and history still inside them.
- Mushroom picking
- Berry picking
- Addiction services for gambling re: one person stopped drinking but turned to gambling to cope with depression
- Hard choices to be made

•

People

- Salvation Army Church
 - Youth tea afterschool kids club
 - Mens group
 - kids group
 - Couples group
 - Camp retreat
 - Basketball camp
 - Camp Mountainview near Houston open now 52 years
 - Food share program
 - Home week nourishment for family in bereavement
 - Snacks for memorial
 - Brass band
 - Fundraise for kids camp they go for one week paid for therefore no cost to parents
 - o Skating, skiing, swimming, canoe, kayaking, bowling, movie nights and basketball
 - Christmas homemade bizarre for fundraising
 - YTC- Yule Tide Community fundraise for kids Santa Christmas Party/Gifts & basketball
 - o Soccer
 - Parades

Healthcare centre

- CHR cedar weaving
- Nutritional meals with traditional foods (seal, crab, halibut, sea lion, porcupine, some bear, some duck, moose, occasional goat, clams, conchos, any seafoods
- o Knitting
- o Some members maybe out of the loop things changing
- Most if not all attend holiday celebrations Easter egg hunt, Santa Christmas event, parade, best decorated house, Halloween4 tribes = 4 snow queens
- Head Start makes regalia

Wishes

- A long house
- Spirituality back Sunday morning services, church revivals where all the community would come and was rejuvenating for the heart sets the soul free
- Cultural and Elders centre
- Swimming pool money is already put aside for this
- Money for housing is no longer available
- Oldest community member is 93 years young

- Organizations
 - o Council of 5 plus one Chief
 - Head Start
 - o Youth Centre
 - o Recreation Director/Athletic Club
 - Elementary School
 - Highschool is in New Aiyansh
 - Elders Society
 - College
 - 4 Crest Dancers re: 4 tribes
 - Brass band
 - No Daycare and daycare is needed
 - Not enough ECE training
 - o Elder care homecare Travis helps cancer patients and dementia patients
 - Hiring more home support
 - Not enough housing only about 50 homes in community maybe 60
 - Community garden
- 2 lodges purchased
- 1 camp purchased
- Pay taxes
- Medical clinic big and open maybe appropriate for a satellite office for treatment centre
- Children's hub at the medical clinic
- Necklace beading
- Local Economy
 - New Aiyansh gas bar, canteen, café
 - Local café and catering
 - Tourism bike trails, hot springs,
 - Teresa- future coffee shop
 - T-shirt business to promote Nisga'a language
- Should organize recovery clients to have a job with community
- Do a village check before hiring for the facility re: not just a criminal check as the community is more aware of who is who in the community

Worksheets Retrieved from the Tables

- Marketing out information
- Mobile detox provides supports to family who cannot go to detox
- Build healing centre in old Aiyansh
- Medicine bay leaves for laxatives
- Halibore ts'ix
- Intake wha tis the process? 15 page intake a huge barrier!
- Healthy life
- Max (rainbow) mak'ay
- Connecting together (image of hands touching
- Siblings supporting siblings to heal
- Advocate for Elders can't read and wrote.
- What are the pills for?



About Laxgalts'ap

One of four Nisga'a communities, the village of Laxgalts'ap is located on the Nass River estuary, approximately 150 kilometers north of Terrace. Home to approximately 520 residents, Laxgalts'ap offers rich cultural history, natural beauty, and world-class fishing.

Laxgalts'ap means "village on village," an acknowledgement that the current village is built on a series of Nisga'a communities that have occupied this site for millennia.

Laxgalts'ap is located in the Nass River estuary, the spawning grounds of five species of wild Pacific salmon and oolichan, a finger-sized member of the smelt family. Each year, tons of oolichan are harvested in Fishery Bay and rendered into precious oil-a historic staple of Nisga'a trade and a valuable commodity that supplied the Northwest Coast's famous "Grease Trail." For countless generations, we have relied on the harvest of fish and seafood and most of our homes have a traditional smoke house and/or drying racks to preserve and the bounty of the river and sea.

Laxgalts'ap is located in a temperate coastal rainforest in the scenic Nass Valley. The region abounds with wildlife, including: bald eagles, moose, grizzly and black bears, and even the elusive Kermode or "spirit" bear (white color subspecies of black bear). Nisga'a Highway 113 paves the way for ease of access to Laxgalts'ap and each year, the number of visitors continues to grow.⁹



⁹ Retrieved December 22, 2022, The Four Villages | Nisga'a Lisims Government (nisgaanation.ca)

Laxgalts'ap Survey Results

Participants

| What community do you | Age Category | Are you considered an Elder by |
|-----------------------|--------------|--------------------------------|
| currently live in? | 25 1 - 40 | your community? |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | Yes |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 50 to 64 | Yes |
| Laxgalts'ap | 25 to 34 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 65 plus | Yes |
| Laxgalts'ap | 65 plus | Yes |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 15 to 18 | No |
| Laxgalts'ap | 65 plus | Yes |
| Laxgalts'ap | 35 to 49 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | Yes |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 50 to 64 | Yes |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 65 plus | Yes |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | | |

| Laxgalts'ap | 50 to 64 | |
|-------------|----------|----|
| Laxgalts'ap | 25 to 34 | No |
| Laxgalts'ap | 50 to 64 | No |
| Laxgalts'ap | 35 to 49 | No |

| What is | How do | What skills, talents, resources, materials, or supplies do you have that |
|---------|-----------|--|
| your | you | you can share with your community? For example you may teach |
| gender? | identify? | beading or you maybe a health care provider. |
| Female | Woman | cedar weaver |
| Female | Woman | I have a wealth of general office skills. |
| Female | Woman | Strategic planner; facilitator; can write/mentor business plans; |
| Male | Man | I can coach soccer & play, I can offer advice based on life experiences, I |
| | | would like to speak and connect with our youth at some point |
| Female | Woman | no |
| Female | Woman | I have been employment counselling for over 12 years, work great with |
| | | First Nations Communities |
| Female | Woman | I bake sweet treats |
| Female | Woman | Mental Health circles |
| Female | Woman | early learning, trauma links to social, cognitive and emotional |
| | | development |
| Female | Woman | Valerie is a Professional counsellor, a wellness counsellor, a life skills |
| | | coach, with a certificate in Aboriginal leadership, grant writing and |
| | | special events planner. |
| Female | Woman | I'm a very talented artist. I create my own patterns for crochet pieces, |
| | | eg our native designs. |
| Famala | 14/2:222 | I'm open to passing on my vast knowledge |
| Female | Woman | Nurse |
| Female | Woman | support worker |
| Female | Woman | Stay at home mom and love to draw |
| Female | Woman | Cooking |
| Female | Woman | Retired health care provider |
| Female | Woman | Crochet, weaving, etc. |
| Female | Woman | |
| Female | Woman | Harvesting fish |
| Female | Woman | Language teacher |
| Female | Woman | |
| Female | Woman | I love working in public settings meeting everyone and try helping out. |
| Female | Woman | Social Worker |

| Female | Woman | 1. author of a book of collected poems, inspired by life experiences "Dreamer" |
|--------|-------|--|
| | | 2. I've done book reading, young to elders hoping to help them in anyway I can |
| Male | Man | Teach young people how to gather food and prepare for winter supply |
| Female | Woman | Retired qualified teacher, love working with kids n youth, |
| Female | Woman | Caterer |
| Male | Man | I am a traditionally trained nisgaa harvester |
| Female | Woman | I have been taught by an RN herbalist a variety of our own wild medicine which I use along with family and friends |
| Female | Woman | ECE Educator |
| Female | Woman | none |
| Female | Woman | Knitting, crochet, embroidery. Teach Language. |
| Female | Woman | Home care/retirie |
| Female | Woman | First Nations language and culture/health care knowledge |
| Female | Woman | Highly educated |
| | | Legal advocate |
| | | Not any public |
| | | creative |
| Male | Man | Worked all over B.C. |
| | Man | care provider |
| Female | Woman | We make food fish for our family near and far, work for LVG. Grow our |
| | | own veggys |
| | | Nisga'a dancing |
| Male | Man | cook for lots of people, food fish, help lvg on work crew |
| Male | Man | Addictions training |
| | | Satellite installations |
| | | basic electrical |
| Male | Man | Not sure. I can teach people about anything. |

| What activities are already happening in your community would you like to see more of? | What would you like to see in your community that doesn't exist now? | Is there anything else you would like to share? |
|---|--|---|
| community gatherings, our elders teaching all younger than them everything we need to know. | toast masters | we need to strengthen the unity as a community and as a nation. not community against community. we are a nation. |
| More fitness programs for all skill levels | Youth group, ladies group, mens group, not associated with sports | Nii |
| Mini workshops (beading, cedar bark harvesting, traditional food harvesting and preparation, etc) I would like to see more interaction with our youths & adults. In an effort to show that we can still have a good time without alcohol & drugs. Show our young how to have good clean fun. | Housing such as SRO; wellness cer houses for families fleeing abuse; programs; counsellor; clinical ther specifically targeted as physical ac Hospice care facilities, a place for detox, a treatment center | unity; lack of silos; elders day apists; youth programs not |
| cedar hat and regalia making, traditional medicine gathering, spiritual baths - ya'askw | Lifeskills, self esteem, positive par we need more activities for our elders and children - yoga, meditation, chair exercises, cooking classes for young couples, and for children - book clubs, some type of martial art to teach self discipline, cultural duties workshops for our young adults | not at this time |
| Interactive groups | Home wellness checks from healthcare providers | Treatment programs desperately needed, detox, how to live after treatment and progress check ins afterwards |
| Regalia making wellbriety, peer to peer support | Regalia making inclusiveness | |

| th cc ce cc fri | ong term shelters, programs for hose with concurrent and comorbid disorders, warming centres, safe injection sites, connection to services, pet riendly everything, bridging to employment | |
|--|--|---|
| and children cr he he A | Youth center for kids to go reate whatever is in their nearts with guidance. A place to near our stories from our elders. A safe place that welcomes all nees to grow as one. | I would like to see our local government support our up and coming entrepreneurs. I would also like to see more of the businesses initiated by our local government succeed. It seems that they try to profit right away when everyone knows the first year is for setting up a business. Profit comes after about a year of service. |
| programs for all age groups ho | ilders home, MH nome/shelters, detox/wellness entre | NA |
| children/youth education pr specializing in individual learning styles | nental health wellness programs More family activities | I've been working in this field for 20 years and now semi retired with the hopes of passing my knowledge to others just staring their careers |

| Activities for Our Elders | Restaurant | No | |
|--|---|--|--|
| | Liguer store | | |
| Needing more programs and or activities that involve elementary, high school, youth, young adults to age 30 in age. All age factors would be awesome. | Liquor store Recreational activities besides basketball. All ages: elementary, high school, youth, young adults, elders programs. Due to no recreational venues available in the valley opportunity to travel for swimming, skating, skiing, attending programs as gymnastics, ballet, Taikwan do, etc, etc. | Travelling for grocerying/ shopping, costs for travel can cost an individual \$40- \$50 one way return to the cmty on a private ride can cost an individual on a low income or fixed income can cost \$80-\$100 . This cost takes away alot of the income Difficult to maintain a healthy well being for an individual or | |
| Workshops on trauma, reguarding suicide. | Drop in centres regarding workshops on what each individual knows, pertaining to one of the above mentioned. | family. Suicidal tendencies, drop in centres, all around crafts, workshops. | |
| More activities that aren't sports related for our youth. Helps keep all children and youth off the streets and away fr drugs and alcohol. | Youth groups | Our community needs to be more open to positive activities that are not sports (basketball or soccer) as a lot of our children are not sports inclined so they get left out as a lot of activities are geared for those children/youth that participate in sports activities. | |
| Kids being involved in activities | More of Nisga'a culture | It would be great if there were Nisga'a activities for kids of all ages. | |
| more programs for young people | involve all young parents | no more bootleggers, dope pushers | |
| I liked learning to beading, smoke house projects, learning to weave, | | | |
| Need after care for traumatic experiences, no one to turn to to speak to or trust | Counselor that are not judging and pick and choose who they will see | Need activities done for the ones that have a hard time going in public, with transportation | |
| -need to have healthy community gatherings | -face to face AA -community agencies to work | Community and agencies need to work together. | |

| | T . | |
|--------------------------------|-------------------------------------|-------------------------------|
| -more parchity programs | together more | Service providers all have to |
| that include all ages | -properly training individuals | be on the same page |
| -interactive workshops for | | |
| youth and teenagers | | |
| There was adult activities, | Drug & Alcohol outreach | Watching my own family |
| drum making, cooking, | program that is friendly | members suffer with |
| carving, exercise, field trips | oriented, to help ppl with | Alcohol addiction is so hard, |
| etc. I'd love to see any and | addiction and not feel pressured | watching & hearing them |
| all activities continue here | or afraid to go to a treatment | promise they'll quite, but as |
| in Laxgalts'ap for "all" ages. | center. Family oriented | soon as they get money, |
| Give ppl things to do, | programs on weekends. | their right back at binge |
| preoccupy their minds into | | drinking, I lost my dad last |
| doing healthy active things. | | yr 2021, had health issues |
| *Computer classes for | | but couldn't shake the |
| those who haven't tried | | monkey. |
| one yet, but are afraid. | | , |
| Food preparations, culture | Rights of passage | Need our elders to have |
| activities teaching our | | more authority in all |
| language | | communities |
| Wellness programs, we | Programs for youth especially | When programs start we |
| need more AA, drug | keeping safe from drinking n | need to see them through |
| programs in each | drugs. Safe place regarding | and not to be a time for |
| community as it's hard for | sexual abuse. Safe places n | facilitators to use the time |
| some people to travel,safe | programs for elders | to share how great there |
| places from abusive | programs for clucis • | families are, allowing n |
| partners,Safe places for AA | | creating a comfortable/safe |
| people to go to especially | | place for all |
| when triggers occur & | | piace for aim |
| weekends. | | |
| | Cultural teachers, language, | No |
| | feast preps, feast protocols | |
| Decolonial program | Evict Christian churches and turn t | the buildings into indigenous |
| development | wellness centres | |
| Teaching young men and | Swimming pool, community | We need a community |
| women how to culturally | gardens enough to feed the | healing circle |
| prep food as it was taught | community. Local classes on | _ |
| to us. Rights of passage | learning about the right soil for | |
| ceremonies for youth and | different veggies, fruits and trees | |
| adults | and how to mix that soil | |
| Basketball, volleyball | Softball, church | No |
| basketball | unsure | alcohol and drug free |
| | | |

| Ellders get together to tell | A Birth Center, for babies to be | Build a center to teach |
|--------------------------------------|--|---|
| stories to the young in | born at home. | Language and Culture, |
| school or school. | | |
| Exercise | A detox and rehabilitation | We need a clinic that's open |
| | center. | on weekends. A Shelter. |
| AA,womens Groups, | Procedure's on how to use our | This is much needed for |
| alanon, healing groups | own pharmacy, off the land. | utilization of every Nation. |
| using our First Nations | | We are losing to many of |
| culture, ie plants , | | our own because there has |
| medicines, | | never any guidance since |
| | | the start of our children |
| | | being taken by the |
| | | residential schools. |
| Gatherings for elders | General store with fast food like | Treatment centers needed |
| Cultural gatherings for | 711 | for aftercare once |
| elders | 2. established market hours with | treatment center and |
| More workshops Adult learning center | affordable prices 3. Fresh produce stands | trauma stems from many generations, residential |
| need elected leaders to be | 4. Respite center for those who | schools etc that leads to |
| accountable, 7000,000 | need relief | Get gardening |
| budget | Tieed Teller | started, young & old, make |
| need housing repairs | | people feel good about |
| get rid of bootleggers/drug | | themselves. Plant fruit trees |
| dealers | | & berry bushes, live off the |
| | | land |
| Community work | Renovations locals doing it | Looking after each other. |
| | learning the process | |
| | organization involvement with | water park for kids |
| | youth | |
| | more concerts | More help with councellor |
| | | for abuse |
| more nisga'a dancing, | more help with addictions | Awesome about the detox |
| community functions like | services | center in or near terrace |
| feasts, dances, sports | | |
| AA meetings | Halfway- transition house | |
| Zoom AA meetings | Safe house for youth | |
| Cultural dancing | | |
| Hikes to various sites on | Outdoor courts. Walking hiking tra | ails. Swimming pool. Exercise |
| ur land. places to keep healthy. | | |

| What are your community customs and traditions? | What are your ceremonies? | What languages are spoken? |
|---|--|--|
| it feels as it isn't what it used to be when i was younger. we need to get back to what/how it was before technology came. i understand that we must adapt but it changed our culture. i used to play out for hours, just go home to eat. now its, video games and devices. | weddings, death, becoming of age. it feels like co-vid detached us from carrying out ceremonies like death, at one point 10 family members were allowed to the memorial service for their loved ones, and the rest of the family stood outside the church to mourn and feel what they had to. there are a lot of people still hurting because of this. | english, nisga'a |
| all Nisga'a | varies according to the situation | Nisga'a & English |
| lateral violence and bullying and/o | not not be engaged due to high level of or abuse by traditional leaders or shaming | English |
| ofcourse we sing, drum, & dance. We used to have many organizations, each having it's own agenda of activities & events. Not anymore though, it's been on a steady decline for a couple decades now | We really don't have anywould be nice to start practicing Nisga'a Ceremonies | english and nisga'a |
| Tribes- Wilps - Feasts - | Lots of different ceremonies as one is growing, parternal family takes care of children throughout the changes in life right until death where they still take care of the process of the funeral. | Nisga'a and English |
| There are protocols when a person dies, our chiefs address the family in mourning, we have settlement feasts for the person that passed, we have stonemoving feasts a year later for the same person, there are wedding ceremonies, | pick up feast, cleansing ceremony, ya askw (spiritual bath), other ceremonies that have not been practiced for some time - coming of age, when a young lady becomes a woman - has her menstrual period, | Nisga'a and english |
| I only know of a few that have to do with feasting | Nisga'a new year, marriages, funerals, stone moving, introducing new babies, cleansing | Mostly English, few people can speak Nisga'a |
| Nisga'a | Hobiyee | Nisga'a |

| nisga'a specific to my wilp, | smudging, on the land blessing/prayer | english |
|--|---|--|
| Our culture and traditions are huge, too much to fit in this section for every aspect of life. | same as culture and traditions | Nisga'a, english |
| One heart. Our feasts. | | Nisga'a and English |
| NA | NA | English |
| customs-most locals have excellent Nisga'a knowledge of maintaining our wholistic well being lifestyles from birth to death. culturally-most locals are strong in what's been passed down by our ancestors who did their best to teach and role model priorities concerning our quality of life which remains challenging with ongoing addictions and first contact | ceremonies- feasting, cleansing & dancing | English, Nisga'a plus more language exposure because of intermarriag es from other nations and nationalities |
| Hobiyee | Cultural dancing | English and Nisga'a |
| None | None | English |
| Nisga'a | Feasts for deaths. | Nisga'a, english |
| Cultural duties towards death. Traditional ceremonies of passing on , names. Etc. | Several, meditation, prayers, etc. | Mostly English, nisga'a sometimes. |
| Sports, used to be band, cultural dancing | | Nisga'a & English |
| Preserving fish and berries | Feasts Meetings Cultural gatherings | Nisga'a |
| we need more workshops for children/respect/bullying/ | weddings, settlement feasts, stonemoving feasts | Nisga'a & English |
| . , , , , | I would like to learn. | Partial Nisga'a |
| Weddings , Feast, Funerals | Tribal feasts, Feasts, | Nisga'a |

| Wilksibakws should be more involved, some families are definitely more active than others but they all should be returning to that part of the | Nisga'a culture | Nisga'a english |
|--|---|--|
| culture One heart one path, Culturally to | Marriage, baptism, "used to be | Nisga'a = |
| take care of your family, your community, interventions help but need it weekly get togethers. | "Confirmation", tribal feast, settlement feasts, then stone moving feast. Thanks giving feast - someone was in accident, they had a feast | 99% elders that are left. English - 100% of population Gitsan - 5% community members |
| feasts, stone moving, funerals, thanksgiving feasts | | Nisga'a |
| Caring/sharing for families during good n sad times, Nisgaa dancing, teach Nisgaa language in all schools | Tribal feasts, stone moving, weddings, burials, 4 tribal groups | Nisgaa |
| Work together, help families out, feasts, weddings, deaths | Cultural dancing, weddings, burials | English |
| Sadly riddled with Christian influences | See above | Nisgaa and english |
| Feasts, banquets, public meetings, hobiyee | Praying to God | Nisga'a and English |
| ? | .? | Nisgaa |
| just be respectful to elders | unsure | English |
| Nisga'a culture and Traditions | Weddings, Stone moving, House warning. Launching of Boats and cars, communities gatherings, Work shope. other different feastings. | English, and Nisga'a |
| Nisga'a Culture | Smudge, prayer, meditation. | Nisga'a and English.Painti ng, |
| Very skimmed, watered down | Cleansing, mourning, wedding,bathing,blessings, growing up,hunting, | Nisga'a, English |
| I belong to the house of Duuk, I encourage everyone to stay connected to your roots, family and teach your children the | I am traditional, i follow our ayuuk I help others - legal advocate. notary public - 3 year term free service giving back to community | English |

| traditions of our ancestors. use | | |
|------------------------------------|--|----------------|
| vacant homes as activity centers | | |
| Everything we do | All things important | English |
| Nisga'a Ayuuk | Stone moving, Settlement feast | English bit of |
| | | Nisga'a |
| Nisga'a Dancing | | Nisga'a |
| Respect elders and listen to their | | english |
| teaching | | |
| Help your elders and community | | English |
| give back through sharing | | |
| Nisga'a culture | Don't have any | English |
| singing and dancine | | |
| There are far too many to list. | It could be as big as a feast. As small as a | Sim'algax |
| But one main one for me is | prayer said one on one. It could be giving | and English. |
| family values. Another would be | back to the land. It could be taking the | Some |
| feasting and Wilp structure. We | bounty of the land. | Spanish |
| learn from birth who our family | | because of |
| is. They raise us to be the best | | children's |
| that we can. | | television. |

| What forms of | What different forms of | Is there anything else you would like to |
|---|--------------------------------|--|
| art and music | spirituality are present and | share? |
| exist? | expressed in the | |
| | community? | |
| cultural singing | we have not had a | we need to bring back how things were pre |
| | functioning church in many | technology to strengthen the "it takes a |
| | years. although it is there | community to raise a child/person/elder". |
| | and is open, we do not have | our people are hurting and in survival |
| | a resident priest, we have | mode, we need to heal and move into |
| | one that visits from other | "living mode". |
| | communities, and the | |
| | bishop comes every once | |
| | and awhile. | |
| all forms | Anglican and Indigenous | Nii |
| | None the church is only used f | for funerals and weddings |
| none, oh we | non existent, there's no | no |
| got a Dj that | church, baptisms, | |
| does dances confirmations | | |
| There are artists who are carving totem poles | | There is a lot of the same people who |
| right now, also some who make paintings, | | attend the funeral and wedding |
| drawings. There i | is our Cultural Dancers, who | ceremonies, feasts etc. I am worried these |
| participate in the | annual Hobiyee along with | things will die out. Since COVID there is |

| the other commu | unties cultural dancers (and | even less people who attend the functions, |
|-------------------|----------------------------------|--|
| | community has there | afraid of the virus. Another barrier is |
| • | who participates in some | addiction, most won't attend functions. |
| | kd weddings, funerals (the | addiction, most won t attend functions. |
| | • | |
| | families). Not too many | |
| 1 | e band now as there is no | |
| band class in our | T . | |
| There is a | There is an Anglican church | not at this time |
| concert band | in our community but not a | |
| and Nisga'a | lot of our citizens go, some | |
| artists | practice spirituality within | |
| | our cultural dance group, I | |
| | pray and meditated | |
| Cultural | There's an Anglican Church | Helping people work through their trauma's |
| songs/dancing; | | will help the community as a whole in the |
| wood carving, | | long run |
| paintings, | | |
| jewelry making, | | |
| clothing | | |
| designer's | | |
| Dance practice | | |
| nisga'a | religion/christianity | we are too deep in the dia and church |
| | | mentality |
| Cultural art & | Anglican, Jehovah and | Yes, it takes a whole lot of time building |
| music, brass | spirituality | rapport, take the time to get to know |
| band | , | people individually, attend functions and |
| | | immerse in culture |
| Our museum, | I love the Spirituality of Billy | No |
| no music band | Morrison and his life | |
| anymore. | teachings. He's about | |
| Carving shed. | body,mind and soul. | |
| Carvings, fish | Dance | NA |
| prepping, | | |
| wreath making, | | |
| Nisgaa songs | | |
| etc | | |
| Mostly Nisga'a | Mostly Anglican, Church | Thank you for giving me the opportunity to |
| art and local | Army and Born Again | express my views in this survey \bigwedge Good |
| Nisga'a singing | Christianity practices | Luck! |
| choirs | Simistianity practices | LUCK: |
| Cultural | Cultural dancing, hobiyee | No |
| dancing | Cartarar darierig, nobryce | |
| None | None | No |
| INUTIE | INOTIC | INO |

| None | None | If these become available in order to entice all age categories have small prize draws available to entice participation |
|---|--|---|
| Nisga'a art and sometimes nisga'a songs. | Feasts , memorial's. And stone moving. | News letters handed out, not everyone has Facebook or vhf's. |
| Cultural dancing. Used to be band but not as much anymore. | Nisga'a, Anglican Nisga'a. | |
| Mask making Drum making Native painting Nisga'a songs sang at Hobiyee | I don't know | No |
| carving | nilwith the exception of our Bishop's visit , once a month. | miss those chior practices , church army services, more public meetings esp on the Bootleggers , get rid of them , nam,e all of them and dope puishers |
| None | None | No |
| LCD - Laxgalts'ap Cultural Dancers | Nisga'a Culture | There should be education for adult parents who enable their adult children Need second stage housing and good aftercare plan |
| Cultural Dancing - singing Carvers, totem poles, Masks, plaques Artists, paint, jewelry makers, gold and silver Designers, regalia, moccasin making Local radio DJ, own their own equipment | Time has taken away our Church Service, Church army services, no baptism Few members try to have services, but due to covid, everything put on hold. | I'd love to see the sports brought back to the community, in the late 1970's up to the late 1980's the whole community would support our teams, by travelling, they even made a song for G.A.C soccer team - "G.A.C advance" AKA the Green Machine, there was a cheer leader drill team, Hefties, Old timers - our mothers who played softball. I'm looking forward to this coming reality too many years passed, all talk, now is the time to take Action. We lost too many loved ones to addiction!! (referring to detox/wellness center) |

| podcasts, tic toc | | |
|---|---|---|
| | | |
| Carving Nisgaa dancing | Anglican Church,on line ceremonies | Need to bring back our church army, making our community more safe so we can keep our church own not just for special occasions, offer arts n crafts, programs for all ages |
| Carving at the shed, | Nisga'a prayers and dancing | No |
| Carving and nisgaa drumming and singing | Christianity | |
| None | Prayers mostly at deaths and weddings | We need Sunday School, Boy Scout and Girl Guides and a Priest so we can have church services |
| Concert band | No5 sure | |
| native art an gospel music unsure | unsure | No |
| Nisga'a painting and carving. Nisga'a songs spiritual songs and ceromonial songs | Nisga'a spiritual. | There should be monies made available when families loss someone in distance place. |
| Painting, carving, beading, sewing Nisga'a ceremonial dancing and singing. | Anglican church, | Would like church army services again. |
| Wood and jewelry carving, painting, beading, weaving, net making, | Anglican Church, | More activity in both cultures traditionally and modern day |
| In a few months, my | With past covid, not much need to see active activities | Miles Inn - turn into treatment center vettor falls - same |

| craft store will exist. building up inventory many creations in my inventory too many to mention | not just fund raising. Have yearly elections & make fund raising public info & expenditures - need to see a healthy community | Beed elders to be mentored, the disabled, Wellness check |
|--|---|---|
| N/a | ? | Listen to our people |
| singing | Salvation Army | LOVE |
| | | |
| Dancing, | not too sure pretty diverse | |
| drumming | | |
| Traditional | Western religion | |
| songs/Dance | cree- smudging | |
| All forms. | All forms. Christianity. Our own culture, our Ayuukhl gans adaawak! Our | |
| Carving, singing | ango'oskw. | |
| and dancing. | | |
| Rock and roll, | | |
| hip hop and | | |
| oldies. | | |
| Language and | | |
| culture. | | |
| Education and | | |
| academics. | | |



Laxgalts'ap Workshop Results

7 Participants

- Family oriented, allowing children to be involved in extracurricular activities
- Use of the facility to be used ASAP- will allow the "baby steps" to happen as to what works and what doesn't.
- Teaching of hunting skinning to use hides for drum making
- Carving
- Allow to preserve trade honest foods depending of the time of the season
- Families who have been separated from their children by MCF/NCF work with families while the couple/parent is in treatment.
- After Care Program
- Safe place set up to return home to.
- Program for extended family to attend (help understand especially for children).
- Elders/Uncles teach hunting and fishing, explain for every season (For the Nisga'a) there is a harvest
- Near end of time in facility, an education plan or job should be looked at to determine what
 they would like to do (this is main reason people give up and fall back) Point the person in
 direction they want to go.
- Elders need to speak to our young people about looking after themselves etc.!
- Childcare
- Travel to and from detox (bus for patients right to detox)
- After care whom we can trust
- Nice family room for visit times
- Is there going to be family outings
- Is there going to be option of staying longer if need be
- Are you going to have someone teaching about Indian medicine, tools to meditate
- More beds
- Aftercare housing
- Traditional practices (ceremony, arts/crafts, etc..)
- Aftercare-help with being reintroduced to community living
- Horses on the land
- Life skills
- Childcare for single parents

- Accountability of board members healthy environment with/for the workers
- Trauma counsellors
- After detox each client be canvassed medically for: schizophrenia, bipolar disorder, manic depression, PTSD and any other mental illness to ensure that the addictions aren't due to mental illnesses.
- People who are mentally ill will not voluntarily admit there's something wrong in their minds
- Did the province notice how many people ended up on the street in Vancouver after they closed Coquitlam Farm Colony (used to be a different name)
- Organizations in each community of the 4 nations should immediately start donation pots for the detox/wellness centre
 - Bingos- every feast that is held a donation for this.
 - Special assembly's- Hobiyee- All Native Tournament- River Boat Days- Carnivals-Weddings- Grads- political entities
- In each community
 - Build "tiny houses" for people who come from the wellness centres who have no where to go.
 - o ABE (Adult basic education) school for them to enroll as soon as they get home
 - Trade schools in each community
- It would be great to have horse therapy
- Life skills to reintegrate into society
- Nisga'a ceremonies
 - Yask -spiritual bath
 - o Paternal involvement at the end of youth program
 - Rights of passage
- Canoeing/Kyak
- Teach gardening, yoga, meditation
- We need our own aftercare program in each community
- 1- Detox
- 2-Treatment (7 weeks)
- 3-Recovery home for ones who require longer time 1 year ongoing support or second stage housing 1 year for ongoing support

Nisga'a Valley Health Authority

SERVICES

Nisga'a Valley Health Authority (NVHA) is committed to improving the health of our people, our communities, and our Nation. Effective health service delivery is key to improving Nisga'a health. The NVHA prides itself on the highest level of physicians and nurses it recruits to deliver health care services to all peoples resident in the Nass Valley. NVHA medical staff are experts in their respective fields, and they are dedicated to strengthening the health of people within Nisga'a communities.

Cultural and Community Health

CCHR's work very closely with nurses and others in healthcare teams to help improve and maintain the spiritual, physical, intellectual, social and emotional well-being of individuals, families and their communities.

Under the direction of health care professionals, they may provide services in all or some of the following areas:

- health promotion and education
- client care
- health protection
- community advocacy
- •cultural liaison
- administration

Nisga'a Valley Health Authority Community Health Representatives

- Assist with organizing health education workshops
- Design or help create culturally appropriate education resources
- Conduct home visits to build relationships with community members and provide information and support

- Assist with providing health promotion and injury prevention services such as prenatal classes, Elders' luncheons or health conferences
- Assist in infant and adult immunization programs
- Monitor clients who have chronic diseases
- Conduct home visits, and coordinate the good food box program
- Deliver prescriptive medicines to elders with no other help available
- Assist with health screening programs such as scheduling regular mammogram appointments for women, pre-school screening, and tb screening
- Implement school-based programs such as head checks and project Charlie
- Refer clients and families to appropriate resources and services, and help them overcome any access barriers
- Recommend improvements regarding the delivery of health care
- Act as a liaison and collaborate with community leaders, agencies and service providers
- Assist with coordinating or facilitating community health initiatives such as healthy babies programs
- Monitor the safety of the community's water supply
- Provide information about personal hygiene, safe food handling, safe water quality and waste disposal
- Assist in the investigation of communicable disease outbreaks and provide information, screening, and follow-up
- Assist in housing inspections, emergency preparedness and disaster planning, and helping to plan and provide necessary support at special or planned events (for example, special assemblies, feasts, conferences, etc.)
- Translate or describe routine medical processes and procedures for clients or interpret cultural practices or beliefs for health care professionals

• Assist in developing partnerships with community-based agencies or external health care providers

For more information or to request assistance in any of the above areas, click here to contact the CCHR in your community.

Nisga'a Valley Health Authority Home Support and Resident Care

The Home Care department is designated as an essential service provided by NVHA to residents in the Nass Valley.

The program is based on Indigenous culture. Certified in-home care staff work directly with family members to give care to our elders and others in need of their services.

What they do

The first thing that is completed for a client is an assessment. The client, family, and the Home Care team agree on services to be provided, and a schedule is proposed. Services often begin immediately, and may include:

- •Help at home with bathing and bed making.
- •Therapeutic whirlpool bath.
- Rehabilitative exercises and activities.
- Measuring vital signs.
- Infection control.
- Medication monitoring.
- Family teaching for diabetes.

All information is kept strictly confidential. If a client declines home care services, NVHA Home Care Workers must abide by the client's instruction. Home Care workers are constantly on the go serving clients, and they have an excellent rapport with clients.

Inquiries to Home Care programs and services, please contact NVHA (250) 633 5000 ext. 5025

Nisga'a Valley Health Authority Mental Health and Wellness

Dim hooýim'hl aeýim gdoodim' ahl silgadim'. "We will use our compassionate heart for others."

Our health is indigenous, handed down through our oral code from Time Immemorial, guided by our traditional laws of Respect for our Minds, Bodies, and Spirit.

The Mental Health and Substance Use Program provides services that include traditional wellness, to assist persons and their families experiencing difficulties with mental health and/or substance use.

Mental Health is treatable.

Counselling Services

Psychologist (visiting)

Psychiatry (visiting)

Provide support services for individuals with mental illness and their families

Provide Case management

Works in collaboration with psychological services

Referrals to Residential Treatment

Referral to traditional Wellness activities and community functions

Referrals to Provincial Resources

Refer to "Exceptions" Committee

The first step in accessing the service is to fill out a Mental Health Referral Form.

2 Ways of Accessing a Referral Form:

NVHA Receptionist in your local health centre can help you fill out a referral form over the phone.

When answering questions, it is not necessary to go into detail. Just give the basic information (ex: addictions, family issues, trauma, or by email, scan or fax for screening.

The Team Lead will contact you for additional information in order to connect you with an available service provider who will best meet your needs.

Gingolx: 250-326-4219

Laxgalt'sap: 250-621-3274

Gitwinksihlkw: 250-633-2611

Gitlaxt'aamiks: 250-633-5000

Contact Mental Health Team Lead Laurie Murphy Directly

Work Cell: 250-975-1639 * This is the only number that Laurie can check regularly for messages

E-mail: lmurphy@nisgaahealth.bc.ca

Fax: 250-633-2641

Office: 250- 633-2611

Nisga'a Valley Health Authority Public Health Services

The primary goal of NVHA's public health program is to improve the health of Nisga'a citizens. Education and prevention are key values of the program.

For further information on public health in the Nass Valley, contact:

Public Health Nurse

Toll free 1-888-233-2212

What the program does:

- Promotes good health, thus helping to increase the quality of life of citizens
- Prevents and controls chronic diseases and injuries
- Prevents and controls infectious diseases
- Prepares for and responds to public health emergencies
- •Strengthens public health capacity within the community by educating people about healthy lifestyles and disease prevention, integrating traditional knowledge

Public health is a significant program that touches on a whole range of areas. It reaches out to the entire community from supporting mothers and babies before they are born to assisting community members with their health care issues.

Services include: immunization programs, TB screening, pre-natal programs, healthy baby programs, injury prevention and sexual health education.

Public health also supports other educational and preventative services in the community such as fitness programs, dental programs, nutritional programs and education, family and child development, Elders programs, women's & men's health, cultural events and local conferences.

Our community health reps in all four (4) communities work closely with the nurses-in-charge and the public health nurse and are busy providing many helpful services to community members. In addition, the public health nurse networks with public health programs in Terrace and attends regional conferences to enhance and support public health in the Nass Valley.

Nisga'a Valley Health Authority Physician Services

The physicians in the Nass Valley provide comprehensive primary care services to the 4 communities of Gitlaaxt'aamiks, Gitwinksihlkw, Laxgalts'ap, and Gingolx.

Primary care services include:

- prevention and treatment of diseases and injuries
- •referrals to/coordination with hospitals and specialists to ensure continuity and integration of care
- •primary mental health care and care of people with addictions, in close association with our mental wellness team
- palliative and end-of-life care
- health promotion and management of chronic diseases
- healthy child development and prenatal care

We work closely with nursing staff, public health, community health representatives, home care and mental wellness team to coordinate care for individual patients and to respond to community health needs.

Physicians also provide 24/7/365 urgent/emergency care in the valley.

Visiting specialist clinics include rheumatology, general surgery, orthopedic surgery, internal medicine, addictions medicine, chronic pain management, and the mobile diabetes clinic.

Nisga'a Valley Health Authority RESOURCES

Providers: Compass Program

Be able to answer the primary care provider's questions over the phone

Provide the primary care provider with information about resources in their local community and system navigation

Recommend PIT assessment done through telehealth with the patient, provider and Compass team members

Recommend a full direct assessment through telehealth with the patient, provider and Compass team members for evaluation

Contact Information:

Website: compassbc.ca/frequently-asked-questions

Phone number/email: 1(855) 702-7272/compass@cw.bc.ca

Compass Toolkit

The Compass Toolkits were developed to support care providers providing mental health and substance us care to children and youth. Within each Toolkit are sections on essential knowledge, assessment, and treatment.

The Toolkits also contain curated information care providers can share with families.

Contact Information:

Website: compassbc.ca/toolkits

Providers: Nisga'a Child and Family Services

Nisga'a Child and Family Services has achieved full child protection services for the four communities of Gitlaxt'aamiks, Gitwinksihlkw, Laxgalts'ap and Gingolx. In compliance with CFCSA, and guided by our Ayuuk, four delegated Child Protection workers and one Team Leader ensure that the safety and well-being of children are the utmost priority.

NCFS uses a community-based approach with a strength-based model addressing issues in a manner that is sensitive to the historical impacts on families without minimizing children's safety. With office located in New Aiyansh (Gitlaxt'aamiks), Terrace and Prince Rupert, NCFS provides both statutory services (an extension of the child welfare law) and non-statutory services (volunteer community services).

NCFS offers support services for families, which promote sound parenting practices and respite care. Voluntary care agreements allow parents to place their children in a safe, approved home during medical treatment or training. Special Needs agreements ensure the safe care of children with special needs.

NCFS also distributes support payments to families for providing foster care for Nisga'a children in Nisga'a family care homes.

Other services include:

Family Group Conference Program, which provides a venue for alternative family dispute resolution;

Infant Development Program, which benefits children from birth to three years of age by providing support and education for parents;

Supported Child Care Development Program, which supports and provides advocacy for children with special needs;

Clinical Therapist access for NCFS clients.

Contact Information:

Address: 5100 Skateen Ave, PO Box 231, New Aiyansh BC VOJ 1A0

Phone/Fax: (250) 633-2063/(250) 633-2609 Toll Free Number: 1(800) 633-2063

Providers: Pocketwell by Wellness Together Canada App

•This is a free mobile app that connects people to the Wellness Together Canada (WTC) online portal to access free and confidential counselling with social workers, psychologists and other mental health assessment tool and tracker that monitors mood and well-being.

More information:

•Phone: 1(800) 585-0445

Adults: Text WELLNESS to 741 741

•Youth: Text WELLNESS to 686 868

•Download the App from the App Store and Google Play

Virtual Mental Health Support During COVID-19

•Virtual services are available for British Columbians who are experiencing anxiety, depression or other mental health challenges.

More information:

Visit the Website: https://www2.gov.bc.ca/gov/content/health/managing-yourhealth/mental-health-substance-use/virtual-supports-covid-19#gethelp

Nisga'a Valley Health Authority Nursing

Our team of dedicated nurses care for the people of the Nass Valley, coordinating with our physician team, community health representatives, public health, mental health and home care team to ensure delivery of quality essential healthcare services.

The Goal of Nursing Services:

- Delivering consistent and high-quality nursing care through recruitment and retention of experienced nurses with remote nursing certification
- Providing family-centered care to improve the overall wellness of the
- Delivering consistent and high-quality nursing care through recruitment and retention of experienced nurses with remote nursing certification
- Providing family-centered care to improve the overall wellness of the community
- Integrating traditional wellness and culturally competent care to improve health status of clients living within each Nisga'a community
- Ensuring the highest standard of care through continuing medical education in the areas of primary care and emergency services

Nursing Service Types

There are 3 types of care given at the clinics within the valley:

1. Emergency Care

• For seriously injured or seriously ill individuals needing immediate care during and after clinic hours.

- •May involve treating the immediate concern and transferring the client to a higher level of care (sometimes with nurse escort).
- •Consulting on call physicians by phone or in person for decisions regarding client care.
- •Examples of emergency care include but are not limited to: anaphylactic allergic reaction, cardiac/respiratory distress, new or lasting seizure activity, acute trauma, infants in distress, elders with new complications, lacerations requiring suturing.

2. Urgent Care

- For illness or injury that needs attention but not immediate care (within 12-24 hours)
- •Often seen during and after clinic hours.
- •Involves treating the concern with less possibility of transfer to a higher care facility.
- •Still involves possible consultation of an on-call physician.
- •Examples of urgent care include but are not limited to: sprains, strains, minor cuts, low-grade fevers, and even flu/cold-like illness depending on associating symptoms.

3. Non-Urgent Care

- •Individuals seeking treatment for a health concern that if left for hours to days, does not increase the likelihood of a life-threatening outcome.
- •Takes place during clinic hours, often not even requiring an after hour's phone call.
- Care includes identification of an issue and assisting the client in a plan to manage the issue or concern.
- •Often does not need but may involve physician consultation depending on the plan for management
- •May involve other members of the healthcare team
- •Examples of non-urgent care include but are not limited to: Cough/cold, muscular discomfort, medication refill, and lab work.

Case Management

Linking individuals with allied health professionals (including home care, mental health team, physiotherapy or occupational therapy and more) as part of a treatment plan and liaising with the team to ensure the individual's health is optimized.

Other Benefits/Services

Access to medical equipment including but not limited to ECG, Holter monitoring, vital signs and medications.

Clinic supplies to help meet immediate care needs until a supply can be ordered from pharmacy for the individual.

Lab draw days in clinic on Tuesday and Thursday mornings (hours vary by clinic):

Gingolx 8:30 a.m.-10:00 a.m.

Laxgalts'ap 8:30 a.m.- 10:30 a.m.

Gitlaxt'aamiks 8:30 a.m.-11:00 a.m.

Nisga'a Valley Health Authority Health Benefits Non-Insured Health Benefits Program

The Non-Insured Health Benefits program is located in Gitlaxt'aamiks. Non-Insured Health Benefits staff include:

- •Helen Leeson, NIHB Reception 1-877-5030
- •Sandra Stephens, Patient Travel Clerk
- •Sheila Gosnell, Patient Travel Clerk
- •Susan Azak, Patient Travel Clerk
- Karen Leeson, MS&E Claims Assessor (Medical Supplies & Equipment and Vision claims)

Team Lead

• Maryann Adams nihbteamlead@nisgaahealth.bc.ca 1-877-733-5030

AFTER HOURS CONTACT: 250-975-0777

Non-Insured Health Benefits application are reviewed in accordance with the NVHA NIHB Policy, please

contact the NIHB office for general inquires to the NIHB program.

The Non-Insured Health Benefits Program (NIHB) is the Nisga'a Nation's needs-based health benefit program that provides supplementary benefits for eligible Nisga'a people.

The programs include:

- Medical Transportation (Patient Travel)
- Vision
- Medical Supplies & Equipment
- Short-term Crisis Intervention
- Mental Health Counselling
- Great-West Life Cards (card orders are completed on Fridays)
- Canada Life administers the following programs on behalf of the Nisga'a Nation:
- Pharmaceutical (prescription drugs) and Dental

If you need to speak to Great-West Life directly regarding dental or pharmaceutical benefits, please call 1-800-957-9777. Please have your Great-West Life number ready when you call.

Please forward all dental and pharmaceutical requests directly to Great-West Life at the following address:

Winnipeg Health & Dental Benefit Payment Office PO Box 3050 Winnipeg, MB R3C 0E6

Nisga'a Valley Health Authority Health Benefits: Baby's First Fill Program

Purpose

To assist new parents with the cost of prescription drugs while waiting for their child to be registered. The program can provide a purchase order to most BC Pharmacies. Parents can then pick up their child's prescription without having to worry about paying out of pocket for prescriptions.

What is Covered?

Drugs listed on the Nisga'a Formulary, drugs considered necessary, and drugs that are prescribed by the treating physician or specialist.

What is Not Covered?

Over the Counter Medications (OTC 's) are medications that can be purchased without a prescription.

What is the Criteria?

Baby's parents must hold citizenship with the Nisga'a Nation, and possess a Great West Life NonInsured Health Benefits Card. To confirm Nisga'a citizenship or to apply for citizenship, contact:

Nisga'a Lisims Government Eligibility and Enrollment at 1-888-311-9457.

How to Access the Program:

Step 1: Bring prescription to pharmacy.

Step 2: Inform pharmacy that you are a Nisga'a client, and that NVHA has a Baby's 1st Fill Program.

Step 3: Have pharmacy contact Karen Leeson, Medical Supplies, Equipment & Vision Clerk 1-888- 233-2212 for purchase order process.

Step 4: Upon acceptance of purchase order, your child's prescription will be ready for pick-up.

NOTE: The NIHB program can also reimburse clients.

What is your responsibility?

Register your baby with one of the four Village Governments:

•Gitlaxt'aamiks Village Government: 1-877-588-2388

• Gitwinksihlkw Village Government: 250-633-2294

•Laxgalts'ap Village Government: 1-877-447-0077

•Gingolx Village Government: 1-800-736-5511

Nisga'a Valley Health Authority Health Benefits: Medical Supplies and Equipment Program

Purpose

The purpose of these benefits is to assist clients to obtain medical supplies, and medical equipment through a medical prescription. Medical supplies are products for personal use and are listed separately. Medical equipment are items not consumed or depleted by the individual on a regular basis and are listed separately.

Product limitations:

- Multivitamins are a benefit for infants only, and up to 2 years of age.
- Single entity vitamins in therapeutic strength for specific pathology may be provided as deemed necessary by NVHA medical professionals.
- Prenatal vitamins are a benefit for females aged 12 to 50 years.

•Accutane requires prior approval for females between 12 to 50 no prior approval for other NIHB clients.

What is covered?

- Audiologist (hearing aids)
- Medical equipment (wheelchair, walker) Medical supplies (ostomy, bandage, dressing)
- Orthotics and custom footwear
- Pressure garments, prosthetics, oxygen therapy, Respiratory therapy

Criteria Used by NVHA's NIHB Program

- •The item is on the NIHB MS&E list. Items not on the MS&E list are products, fixtures, or equipment permanently installed in
- the home (ramps, bars screwed to the wall, etc.).
- •The item is intended for use in a home setting or other ambulatory care settings.
- Prior approval when required is granted by the NVHA-NIHB Program Team Lead/Designate.
- •The item is not available to the client through any other federal, provincial, territorial or third-party health care program.
- •The item is prescribed by a physician or medical specialist as indicated in each of the benefit areas.
- •The item is provided by a recognized provider as indicated in each of the benefit categories.
- •NVHA MS&E/Vision Assessor has access to the MS&E Benefit list.

The same criteria will apply to all items listed under "What is Covered".

How to Access MS&E Program Benefits

Step 1: All MS&E items require prior approval. Please bring your prescription to an appropriate provider and they will

contact our MS&E/Vision Assessor for the appropriate form(s) to be completed with required medical information from

your prescribing specialist.

Step 2: Request will be reviewed, and if prior approval is granted, a PA number will be provided for billing purposes.

Step 3: Only then should a provider proceed with the fabrication, fitting or dispensing of the item. In the case where a prior approval is not granted, the provider and client will be advised with the reason(s).

What are your responsibilities?

•Non-Insured Health Benefits is the payer of last resort, so please claim under any other health plan before accessing Nisga'a

NIHB.

•Tell the provider that you are eligible to receive benefits under the Nisga'a NIHB Program and provide your Great West Life benefits number, and your Nisga'a Citizenship number.

Nisga'a Valley Health Authority Health Benefits: Medical Transportation Program

Purpose

The program provides medical transportation to the nearest health clinic or hospital to receive health services not available in your home community or not covered by provincial or territorial travel assistance programs. This coverage is limited to medically required travel for services that are covered through NIHB.

Management Practices

- A standard transportation voucher is used for all carriers in all NVHA communities.
- Patient transportation is scheduled and coordinated to the nearest appropriate health facility.
- •Transportation, accommodation and meal costs are negotiated with providers whenever possible with providers of these services.
- •Assistance with meal costs is not provided to eligible clients or their escorts staying in boarding homes if meals are included in the per diem boarding home rate.
- •Meals are not provided for day appointments.

What is covered?

When eligible, benefits may include one or more of the following:

- •Transportation (limited to the most economical mode of transportation after factoring in meals and lodging costs).
- •Road and air ambulance (clients must be registered with their birth community and have a status number).

Meals and lodging.

•Escort and/or interpreter services (provided for minors where medically required and/or for

individuals that require Nisga'a/English interpretive services.

NVHA will provide the following:

• Return mileage to appointment or at the most economical rate if lower.

•Supplementary meals for appointments that are more than 1 day.

•Accommodations for appointments that are not considered day appointments.

What's not covered?

Patient travel will not provide assistance in the following circumstances, but are not limited to the following:

•Transportation within Village lands unless deemed necessary by the NVHA Chief Physician.

Compassionate travel.

•Transportation to home community if client discharges themselves from a medical facility

against medical advice.

How to Access Medical Transportation:

Step 1: Contact the NIHB Travel Clerk in your community.

Gitlaxt'aamiks: 1-888-233-2212

Gitwinksihlkw: 1-800-993-3513

Laxgalts'ap: 1-800-991-5667

Gingolx: 1-800-991-5671

Step 2: Provide via fax, email, mail or in person a copy of appointment information provided by

an approved health professional to the appropriate NIHB Clerk.

Step 3: Travel Clerk will arrange medical transportation to your approved appointment.

NIHB CLERKS ARE NOT RESPONSIBLE FOR FINDING RIDES TO LOCAL APPOINTMENTS TO

TERRACE, KITIMAT, PRINCE RUPERT OR HAZELTON FROM THE NASS VALLEY.

Step 4: You will be provided with an information package prior to departure for all long distance travel.

What are your responsibilities?

- •Coordinate appointment times to avoid repeat trips.
- Receive travel approval before you go.
- Obtain a confirmation of attendance slip or certificate stamp from your medical provider.
- Follow the transportation guidelines provided to you by the Patient Transportation Clerk for your birth community.
- •Clients will be held responsible for "NO SHOW" costs and may be required to apply for reimbursement for future appointments as a result.

Nisga'a Valley Health Authority Health Benefits: Payer of the Last Resort

The Non-Insured Health Benefits (NIHB) program is available for eligible Nisga'a citizens on an as needed basis. Coverage includes a specified range of prescriptive medicines, dental care, vision care, medical supplies and equipment, short-term crisis intervention, mental health counseling, and medical transportation (patient travel). In order to access benefits, Nisga'a citizens must be registered with one of the four Nisga'a villages, and processes must be adhered to before approval is granted. It's important to note that NIHB workers are not trying to be difficult when processing claims or requests.

In order to be fully accountable, the checks and balances are necessary and extremely important. There are a total of six workers within the department who process benefits for approximately five thousand Nisga'a citizens, so the number of claims that are processed on a weekly basis can be staggering. The work is extremely stressful. Your continued patience and understanding for the tremendous work that NIHB workers do for you on a weekly basis is greatly appreciated!

Nisga'a citizens access the NIHB program to its fullest extent, so much so, that the program runs a deficit each year. The program is extremely successful, but very difficult to manage financially. Like any other program, the Non-Insured Health Benefits program operates on an annual budget. Even with the high cost of living, and the increasing cost of medical services that are provided, particularly prescriptive medicines, the budget essentially remains the same each year. As a result, it is a very expensive program. At the end of each fiscal, the total cost of benefits provided to Nisga'a citizens far exceeds the funding that is provided for the program.

Nevertheless, the Nisga'a Valley Health Authority (NVHA) is well aware of the significance of the program, and its significance to the health and wellbeing of Nisga'a citizens. As a result, the

NVHA fully supports the program regardless of the deficit it incurs each year but needs your assistance to help reduce costs.

There are a significant number of Nisga'a citizens who are employed, and work for various entities within the Nass Valley, and in the urban areas such as Terrace, Prince Rupert, and Vancouver. As employees of these entities, people are registered with their company's health and insurance plans.

These plans include health benefits such as vision care and dental care. These are just two examples of what your coverage includes. The Nisga'a Valley Health Authority is kindly requesting that you review your coverage with your employer and access your organization's benefits plan first before you contact the Non-Insured Health Benefits program for coverage. You can greatly assist your health organization by making the NIHB the payer of last resort!

Nisga'a Valley Health Authority Health Benefits: Pharmaceutical Program

Purpose:

The purpose of the pharmaceutical program is to assist clients to obtain prescriptive drugs through a medical prescription.

Product limitations:

Multivitamins are a benefit for infants only and up to 2 years of age. Single entity vitamins in therapeutic strength for specific pathology may be provided as deemed necessary by NVHA medical professionals.

Prenatal vitamins are a benefit for females aged 12 to 50 years.

Accutane requires prior approvals for females between 12 to 50 no prior approval for other NIHB clients.

Over the Counter (OTC) medications are not a benefit under the Nisga'a Formulary and may be purchased without a prescription.

What is covered?

- Drugs listed on the Nisga'a Formulary.
- •Drugs that are considered medically necessary and prescribed by the treating physician or dentist.
- Prescription drugs are those products with a drug identification number (DIN) for which a prescription is required by provincial or federal law.
- Proprietary Medicines are products bearing general products (GP) numbers which may be

purchased without a prescription. These products are not a benefit under the Nisga'a NIHB Program

•Extemporaneous (Compound medicines) products are covered only if there is no commercially available product.

Criteria Used by NVHA's NIHB Program

- •Client must hold Citizenship with the Nation.
- •Client must hold a Great West Life Benefit number applied for through the NVHA MS&E/Vision Assessor.
- Prescriptions must be prescribed by a licensed doctor or medical specialist.
- Drug must be on Nisga'a Formulary.

How to access Pharmaceutical Program Benefits:

- Step 1: Bring your prescription to a pharmacy.
- Step 2: Present your GWL Benefit card and the pharmacist will fill your prescription.
- Step 3: If your prescription is not on the Nisga'a Formulary, the pharmacy can contact our MS&E/Vision Assessor for information on the special authorization process.
- Step 4: Upon additional information requested from your treating physician, your request will be approved or rejected

What are your responsibilities?

The NIHB is the payer of last resort, so please claim under any other health plan before accessing Nisga'a NIHB.

Tell the provider that you are eligible to receive benefits under the Nisga'a NIHB Program and provide your Great West Life benefits number & your Nisga'a Citizenship Number.

The following products are not covered under this program:

- Anorexiants
- Evening primrose oil
- Megavitamins
- Minioxidil topical lotions

Pentozocan hydrochloride compounds

Special authorization is required for drugs that are not on the Nisga'a Formulary. Clients are encouraged to apply to Pharmacare when NVHA denies special authorization requests. This is especially encouraged for items that are expensive and/or for long term therapy.

PHARMACARE APPLICATION NUMBER

Call 1-800-387-4977, and ask to be registered with Pharmacare. Pharmacare will ask you for your PHN, and will send you an application in the mail which you must sign and return back to them for review as soon as possible.

Nisga'a Valley Health Authority Health Benefits: Vision Program

Glasses are available to registered Nisga'a citizens when the following conditions are met:

- •The item has been prescribed within the last 12 months by an optometrist or ophthalmologist.
- Prior approval has been provided by NVHA's MS&E/Vision Assessor.
- •The item is not available to Nisga'a clients under a provincial, third party agency or health plan.
- •The prescription meets the minimum eligibility criteria for initial or replacement eye wear or repairs.

What is covered (prior approval is required)?

- Eye examinations (the maximum payable for the vision exam is \$46.17)
- •Glasses (maximum payable for single vision is \$155.00; maximum payable for bifocal vision is \$222.00)
- Eyeglass repairs
- •Eye prosthesis (artificial eye)
- •Other vision benefits depending on your medical needs within your province or territory association

Criteria Used by NVHA's NIHB Program:

- When there is a refractive error of at least 0.50 diopters
- •High index lenses will be approved where there is a refractive error with a total power

in any meridian of at least plus or minus 7.00 diopters

- For clients 18 and over, the frequency limitation is 2 years or a diopter change of 0.50
- •For clients under 18, the frequency limitation is 1 year or substantial growth of child Vision Program (Cont'd)

Exclusions under the Vision Program:

- Progressive lenses
- Trifocals
- Prescription sunglasses
- Special cosmetic features
- Laser Eye Surgery
- Safety glasses for occupational purposes
- •Tint for cosmetic purposes
- Photogrey
- Foldable intraocular lenses

How to Access Vision Program Benefits:

- Step 1: Make an appointment with an optometrist or ophthalmologist.
- Step 2: Have provider submit for prior approval on your behalf to the MS&E/Vision Assessor.
- Step 3: Bring prescription to an optician or an optometrist.
- Step 4: The provider will contact our MS&E/Vision Assessor for approval.
- Step 5: Your glasses will be ordered and you can pick them up when they arrive.

What are your responsibilities?

The Non-Insured Health Benefits is the payer of last resort. Please claim under any other health plan before accessing Nisga'a NIHB. Tell the provider that you are eligible to receive benefits under the Nisga'a NIHB Program and provide your Great West Life Benefits number & your Nisga'a Citizenship Number.

Nisga'a Valley Health Authority Contacts

New Aiyansh

Address: PO Box 234, 4920 Tait Ave VOJ-1A0

Gitlaxt'aamiks BC

Reception

Phone: (250)633-5000 Toll-free: 1-888-233-2212

Fax: (250)633-288

Administration Fax: (250)633-2512

Doctors Office

Phone: (250)633-5026

(250)633-5000

Fax: (250)633-2457

Non-Insured Health Benefits

Phone: (250)633-5030 Toll-free: 877-733-5030 Fax: (250)633-2160

Afterhours: (250)-975-0777

Public Health Nurse Phone: (250)633-5048 Fax: (250)633-2887

Gitwinksihlkw

Address

PO Box 48, 4003 Tsoohl Ts'ap

Gitwinksihlkw BC

V0J 3T0

Reception

Phone: (250)633-2611 Toll-free: 800-993-3513 Fax: (250)633-2641

Laxgalts'ap

Address

PO Box 7-12, 412 North Road Laxgalts'ap BC VOJ 1X0

Reception

Phone: (250)621-3274 Toll-free: 800-991-5667 Fax: (250)621-3263

<u>Gingolx</u>

Address 1201 Fireman Street Gingolx BC VOV 1B0

Reception

Phone: (250)326-4258 Toll-free: 800-991-5671 Fax: (250)326-4276 Contacts (cont'd)

Lisims RCMP: (250) 633-2222

Crisis Response Coordinator: (250) 975-0991

Nisga'a Valley Health Authority After Hour Emergency

• Gitlaxt'aamiks: (250) 633-2298

• Gitwinksihlkw: (250) 633-2298

• Laxgalts'ap: (250) 621-3423

• Gingolx: (250) 326-2345

• Kuu-us Crisis Line: 1(800) 588-8717

Adults/Elders: (250) 723-4050

• Child/Youth: (250) 723-2040

• Kids Help Phone 24/7 1(800) 668-6868

• Text word "connect" to access text support

• Suicide Line – Canadian Mental Health Association

• 1(800) SUICIDE (1-800-784-2433)

• First Nations and Inuit Hope for Wellness 1(855) 242-3310

hopeforwellness.ca

- Victim Link BC victims of family or sexual violence 1(800) 563-0808
 victimlinkBC@bc211.ca
- National Indian Residential School Crisis Line 1(866) 925-4419
- Foundry Virtual Clinic 1(833) FOUNDRY (1-833-308-6379)
 online@foundrybc.ca
- https://foundrybc.ca/virtual
- Alcoholics Anonymous online meetings https://www.aaonlinemeeting.net/
- Mills Memorial Hospital (250) 635-2211

Nisga'a Lsims Government Social Services

One heart, many hands, is how Nisga'a people look at reaching out to help each other. Imbedded in the laws of our Ayuuk is that almighty force we call compassion. It is a gift each Nisga'a carries and directs us in the way we relate to each other.

SOCIAL SERVICES

Nisga'a Citizenship

Emergency Programs

Quality of Life

Child & Family Services

Social Development

Public Education

Post-Secondary Education

Health Services

Finance

Housing

Justice

1. Nisga'a Citizenship

- <u>Enrollment</u>
- Applying for Citizenship
- Forms
- Benefits
- Elders' Package
- Identification Cards
- Laws & Regulations
- Contact

- 2. Emergency Programs
 - Emergency Service Contacts
 - Emergency Management Plan Overviews
 - Preparing for Emergencies
 - What to Do in an Emergency
 - Provincial Emergency Program
 - Laws & Regulations
 - Search & Rescue Maps
 - COVID-19
- 3. Quality of Life
 - About
 - <u>History and Timeline</u>
 - Services
 - Reports and Graphics
- 4. Child & Family Services
 - About
 - Jurisdiction & Delegation Authority
 - Requesting Services
 - Respite Assistance
 - Reporting Abuse
 - <u>Complaints</u>
 - <u>Contact</u>
 - Foster Care
- 5. Social Development
 - <u>About</u>
 - Income Assistance
 - Social Development Policy
- 6. Public Education
 - Primary & Secondary Education
 - School District 92

7. Post-Secondary Education

- Funding, Scholarships & Bursaries
- Information for Aboriginal Applicants
- Education Policies
- Forms
- WWNI
- First Nations Education Steering Committee

8. Health Services

- Nisga'a Valley Health Authority (NVHA)
- NVHA Audited Financial Statements
- Medical Services Plan (MSP)

9. Finance

- <u>Taxation</u>
- <u>Capital Finance Commission</u>
- Audited Financial Statements
- Property Tax Assessment FAQs

10. Housing

- Nisga'a Urban Home Renovation Grant Program
- Nisga'a Urban Housing Grant Program
- On Village Lands
- Notice to Participate Housing Condition Assessment

11. Justice

- About
- Services
- Forms
- Contact Information

Nisga'a Education Resources

Nisga's School District 92

- Nisga's Elementary Secondary School
- Gitwinksihlkw Elementary School
- Alvin /a. McKay Elementary School
- Nathan Barton Elementary School
- Gitginsaa Childcare Centre
- Strong Start

Wilp Wilxo'oskwhl Nisga'a Institute

- Organization Description
- List of Services

Community driven, student-focused Indigenous university-college located in the Nass Valley. Offers academic, vocational, and technical training leading to undergraduate and graduate degrees, diplomas, and certificates. Also offers academic upgrading and continuing education. Provides accessibility services for students with disabilities and learning support for students, including tutoring services and writing support.

Offers programs in Nisga'a Studies. Serves the post-secondary needs of Nisga'a people in their communities and in urban areas, and non-Nisga'a people living in New Aiyansh, Gitwinksihlkw, Laxgalts'ap, and Gingolx. Welcomes students from other parts of Canada and the world. Affiliated with the University of Northern BC (UNBC), Northwest Community College, Royal Roads University, and Nisga'a Lisims Government. Nonprofit society.

Physical address: 3001 Ts'oohl Ts'ap Avenue, Gitwinksihlkw, BC

Mailing address: PO Box 70, Gitwinksihlkw, BC VOJ 3T0

250-633-3199 1-833-381-1266 250-633-2465 wwni.bc.ca

reception@wwni.bc.ca

Government, Legal, Complaints & Advocacy

BC First Nations Justice Counsel

The BC First Nations Justice Strategy (the Strategy) signed March 6, 2020, brings First Nations and British Columbia into partnership to address poor justice system outcomes for First Nations in BC.

Fully enacted, the Strategy will:

- Reduce the number of First Nations people who become involved with the criminal justice system
- Improve the experience of those who do
- Increase the number of First Nations people working within the justice system
- Support First Nations to restore their justice systems and structures

The Strategy includes 42 actions along two paths: 1) reform of the current justice system; and 2) restoration of First Nation legal traditions and structures.

The Strategy was jointly developed by the BC First Nations Justice Council, BC First Nations communities, and the Province of British Columbia. Read the Strategy here.

Services

The Indigenous Justice Centre (IJC) in Prince Rupert offers legal services to Indigenous people in the community who otherwise cannot access it. They may not be eligible for Legal Aid for a variety of reasons or need legal advice on matters not covered by Legal Aid.

The Prince Rupert IJC has a Community Outreach Coordinator working with Nations and local service providers to maintain accurate, up-to-date information on each program, eligibility criteria, waitlists and more for programming that may be of interest to our clients.

The Prince Rupert IJC can also assist with reintegration services for people coming back into community from correctional institutions.

Come in and meet with our Community Outreach Coordinator, who will help you decide what services are appropriate for you. It could be:

- An appointment with Legal Aid
- A meeting with our lawyer
- Advocacy and support for dealing with the Ministry of Children & Family Development
- A liaison to help you get support from your First Nations Band
- Creating a restorative justice program that works for you

Contact: Rudy Kelly

Outreach Coordinator, Prince Rupert IJC 778-622-3563 rupertoutreach@bcfnjc.com #200 – 515 3rd Avenue West, Prince Rupert, B.C. V8J 1L9

FNHA Resources & Programs Related to Substance Use & Addictions

Treatment Centres

Mental Health and Wellness

Mental Health and Wellness Fund

Harm Reduction

Opioid Agonist Therapy

Non-Medical Cannabis

Residential Schools

Northern Health Mental Health & Substance Abuse Services

Services include:

- Intake
- Crisis Response
- Short Term Counselling (individual, family, group)
- Longer Term Case Management
- Provides Life Skills support for activities of daily living
- Medication management
- Psycho-educational groups
- Education
- Naloxone training and Take-Home Naloxone Kit distribution
- Harm Reduction Supplies
- Psychiatric consultation
- The Horizon House Clubhouse PSR Centre

Opioid Agonist Treatment:

- 19+
- Northern Health in collaboration with Alliance Group
- Intake with a clinician
- Monthly intake with addiction specialist Physicians
- Telehealth appointments available for follow up
- Connections to other community services for immunizations and other health care needs
- Life Skills Support

Mental Health Substance Use & Addictions Programs & Resources

Parenting and Substance Use Health Link BC

Visit Mental Health and Substance Use Supports in B.C., an online resource of over 6,000+ mental health and substance use services. Or, call **8-1-1** any time of the day or night for help navigating the mental health system. For the deaf and hard of hearing call **7-1-1 (TTY)** or for VRS, visit Video Relay Services to sign up and give them the number 604-215-5101 to call us.

Gambling Support BC

The B.C. Government provides British Columbians with free information and resources to support informed choices and healthy behaviours with respect to gambling participation through Gambling Support BC.

Free prevention, treatment and support services are also available for anyone struggling with their own or a loved one's gambling. If you suspect that you or someone you love needs support or treatment for the negative impacts of gambling products, you can <u>request support</u> online or contact the multilingual **Gambling Support Line (24/7 toll free):** 1-888-795-6111.

QuitNow

QuitNow is a free program for British Columbians looking to quit or reduce tobacco and ecigarette use, delivered by the BC Lung Foundation on behalf of the Government of British Columbia. We are here to help you quit and understand what happens when you stop smoking. 1-877-455-2233

Rehabilitation & Recovery Facilities

Gya' Wa' Tlaab Healing Centre

Haisla, BC 250 639 9817
Men only program
12 bed NNADAP funded treatment beds
4 bed NHA funded stabilization beds

Sunshine Coast health Centre

Powell River, BC 1-866-487-9010 Men only program 30 treatment beds

St. Patrick's House Society

Prince George, BC 250 564-5530 10 Assisted Living Units Supportive Recovery

Wilp Si'Satxw Community Healing Centre

Kitwanga, BC P: 1-25-849-5211 Co-Ed adult recovery centre

Northern Health Centres

Adult rehabilitation and recovery services

Adult rehabilitation and recovery services are available at a number of locations and provide a varying level of care for adults with mental health and/or substance use issues.

Tertiary resources provide a 24/7 bedded psychosocial recovery and residential care service with both medium and long-term programing for clients with serious and persistent mental illness.

In collaboration with Mental Health & Substance Use team leads, the resources are managed through a Northern Health Mental Health & Substance Use Tertiary Resource Utilization Coordinator which provides a system of bed management across Northern Health.

Area Northern Health sites and resources include:

- Prince George Iris House Adult Tertiary 10 beds short term recovery / 10 beds long-term recovery
- Prince George Urquhart Residence Adult 5 beds residential
- **Prince George** Hazelton House Adult 6 beds residential
- Prince George Davis Drive 5 beds supported living
- Smithers Bulkley Valley Lodge Geriatric Tertiary 10 beds rehab / 4 beds residential
- Terrace Seven Sisters Adult Tertiary 14 beds rehab / 6 beds residential
- Terrace Birchwood Place 5 beds short stay / 3 beds residential

First Nations Health Authority (FNHA)

Overview

https://www.fnha.ca/about/fnha-overview

About the FNHA

The FNHA is the health and wellness partner to over 200 diverse First Nations communities and citizens across BC.

In 2013, the FNHA began a new era in BC First Nations health governance and health care delivery by taking responsibility for the programs and services formerly delivered by Health Canada. Since then, the FNHA has been working to address service gaps through new partnerships, closer collaboration, health systems innovation, reform and redesign of health programs and services for individuals, families, communities and Nations.

The FNHA is also a champion of culturally safe practices throughout the broader health care system. Taking a leadership role, the FNHA actively works with its health partners to embed cultural safety and humility into health service delivery and improve health outcomes for First Nations people.

Our Services

The FNHA's community-based services are largely focused on health promotion and disease prevention and include:

primary health care through more than 130 medical health centres and nursing stations

- children, youth and maternal health
- mental health and wellness
- communicable disease control
- environmental health and research
- health benefits
- e-health and telehealth
- health and wellness planning
- health infrastructure and human resources

First Nations Health Authority Programs & Services

Browse through our programs, services and initiatives on this page or open our <u>Programs and</u> Services Guide.

Chief Medical Office

Watchmon Role, Population and Public Health Reports, Physician Team

Sacred and Strong: Report on the Health of Women and Girls

Communicable Disease Control

Communicable Disease Emergency Response

COVID-19

Immunization Program

<u>Infection Prevention and Control</u>

<u>Influenza (Flu)</u>

Panorama Program

Sexually Transmitted and Blood-Borne Infections

<u>Tuberculosis Services</u>

eHealth and Virtual Health

Maternity and Babies Advice Line

Telehealth

Virtual Doctor of the Day

<u>Virtual Substance Use and Psychiatry Service</u>

Environmental and Emergencies

BC LEO Network

Drinking Water Advisories

Drinking Water Safety Program

Environmental Contaminants Program

Environmental Public Health

Indigenous Climate Health Action Program

Wildfire Response

Watch Project

Health Systems Support

Community Accreditation and Quality Improvement

Community Health and Wellness Planning

Funding Arrangements

Health Human Resources

Traditional Wellness and Healing

<u>Urban and Away from Home Health and Wellness</u>

Healthy Living

Advance Care Planning

Cancer Awareness

Chronic Disease Prevention and Management

Elder Abuse Awareness

Injury Prevention and Control

Maternal, Child and Family Health

Aboriginal Head Start On-Reserve

Children's Oral Health Initiative

Dental Therapy

Early Childhood Development

Fetal Alcohol Spectrum Disorder

Healthy Pregnancy and Early Infancy

Jordan's Principle

Maternal and Child Health

Prenatal Nutrition Program

Youth Solvent Abuse and Suicide Prevention

<u>Videos for New Moms</u>

Mental Health and Wellness

Non-Medical Cannabis

Opioid Agonist Therapy

Harm Reduction

Residential Schools

Treatment Centres

Mental Health and Wellness Fund

Nursing Services

Research and Knowledge Exchange

Data Governance

Health Surveys

Research Resources

FNHA BENEFITS

The FNHA Health Benefits Program provides status First Nations people living in BC with a comprehensive and community-driven health benefits plan. https://www.fnha.ca/benefits

Health Benefits Program Overview

Program goals, benefit areas, client satisfaction survey and contact information

Am I Eligible for Health Benefits?

Eligibility criteria and how to enroll

Detailed Plan Coverage

What's covered and how to check your own coverage details

Are You a Provider? Resources for <u>Mental Health Providers</u> and <u>Pharmacy</u> <u>Providers</u> and <u>Pacific Blue Cross Providernet contact information</u>

Health Benefits News: The latest news from Health Benefits

Provincial Health Services Authority (PHSA) Medical Programs and Services

PHSA has a unique role in BC's health authority system: to ensure that B.C. residents have access to a coordinated provincial network of high-quality specialized health-care services.

PHSA Mandate

PHSA is working collaboratively with the Ministry of Health and regional and First Nations health authority partners to move forward with the shared goal of better serving patients with a more integrated system of care.

PHSA's focus is described in two documents. The <u>Foundational Mandate</u> describes the multiyear, foundational elements and the <u>2021-22 Mandate Letter</u> outlines the Ministry of Health's specific directions to PHSA for the fiscal year.

Overall, these letters outline PHSA's province-wide responsibilities in four key areas:

- Provincial clinical policy
- Provincial clinical service delivery

- Provincial commercial services
- Provincial digital and information technology

PHSA Medical Programs and Services

- BC Autism Assessment Network
- BC Cancer
- BC Centre for Disease Control
- BC Children's Hospital and Sunny Hill Health Centre
- BC Early Hearing Program
- <u>BC Emergency Health Services</u>
- BC Mental Health & Substance Use Services
- BC Renal
- BC Surgical Patient Registry
- BC Transplant
- BC Women's Hospital + Health Centre
- Cardiac Services BC
- Cystic Fibrosis Care BC
- Ethics Service
- Health Emergency Management BC
- Indigenous Health
- Provincial Laboratory Medicine Services
- Mobile Medical Unit
- Perinatal Services BC
- Post-COVID-19 Recovery Clinics
- Provincial Infection Control Network of BC
- Provincial Language Service
- Provincial Retinal Disease Treatment
- Services Francophones
- Stroke Services BC
- Trans Care BC
- Trauma Services BC

The Northern Health Authority (NHA)

Description

The NHA is a regional health authority of the Province of BC providing health care and support services to residents of the Northeast, Northern Interior, and Northwest regions of BC. Services are provided through a network of hospitals, clinics, health units, and residential facilities.

Key service areas include hospital care, Indigenous health, home and community care, public health, mental health and substance use, and environmental health.

Northern Health Authority Information

Home Link

- COVID-19
- Health topics A-Z
- HIV and hepatitis C
- Medical tests | HealthLink BC
- Medications | HealthLink BC
- Pregnancy and baby
- Primary and community care
- Seniors' health
- Healthy eating at school

NHA Medical Services

- Digital health
- Hospital services
- Mental health and substance use
- Indigenous Health
- Environmental health
- End-of-life care / Palliative care
- Home and community care
- Community care licensing
- Healthy living in communities
- Programs
- NH Connections bus
- Tobacco and vapour enforcement
- Dental Health Program
- Aboriginal Patient Liason Terrace Mills Memorial Hospital

A Comprehensive List of ALL NHA Programs

Aboriginal Patient Liaison

Acquired Brain Injury Services

Adolescent Psychiatric Assessment Unit

Adult Abuse and Neglect

Adult Addictions Day Treatment Program

Adult Day Program

Adult Psychiatric Observation Unit

Adult Rehabilitation and Recovery Services

Adult Withdrawal Management Unit

Assertive Community Treatment

Assisted Living

Baby's Best Chance Handbook

Breast Milk Donation Drop-Off

Breastfeeding Support

Bulkley Valley District Hospital

Car 60

Chetwynd Hospital and Health Centre

Child Abuse and Neglect

Child Health Clinic

Child Health Passport

Choice in Supports for Independent Living

Community Care Facilities Licensing

Community Dialysis

Community Nutrition

Community Rehabilitation

Community Social Work

COVID-19 Vaccination and Immunization

Dawson Creek and District Hospital

Dental Health Program

<u>Developmental Disabilities Mental Health Services</u>

Diabetes Education

Early Psychosis Intervention

Eating Disorders Clinic

Elderly Services

Emergency Contraceptive Pill

Emergency Health Services

Environmental Health

Environmental Health - Drinking Water

Environmental Health - Food Safety

Family Mediation Program

Fort Nelson General Hospital

Fort St. John Hospital

G.R. Baker Hospital

Grace Young Wellness Centre

Harm Reduction

Health Connections

Health Connections - Haida Gwaii

<u>Health Connections - Tumbler Ridge</u>

Health Services for Community Living

HealtheLife

Healthy Heart Program

Healthy Start

Hearing Clinics

HIV and Hepatitis C Support

Home and Community Care Access

Home Care Nursing

Home Oxygen Program

Home Support

Hospice Palliative Care

Immunizations

Indigenous Health

Influenza Clinics

Injury Prevention Program

Intensive Care Unit

Intensive Case Management Team

Kidney Transplant Clinic

Kitimat General Hospital and Health Centre

Laboratory Services

Lakes District Hospital and Health Centre

Lifeline Medical Alert System

Long-Term Care

Mackenzie and District Hospital and Health Centre

McBride and District Hospital

Meals on Wheels - Prince Rupert

Meals on Wheels - Quesnel

Meals on Wheels - Terrace

Medical Imaging - Bone Densitometry

Medical Imaging - Computed Tomography

Medical Imaging - Echocardiography

Medical Imaging - Magnetic Resonance Imaging

Medical Imaging - Mammography

Medical Imaging - Nuclear Medicine

Medical Imaging - Ultrasound

Medical Imaging - X-Ray Services

Mental Health and Substance Use Services

Mills Memorial Hospital

Nechako Youth Treatment Program

NH Check In

NORTH Heart Function Clinic

Northern Haida Gwaii Hospital and Health Centre - Xaayda Gwaay Ngaaysdll Naay

Northern Health Assessment Network

Northern Health Birthing Centres

Northern Transgender Health Clinic

Opioid Agonist Treatment

Orthopaedic Services

Overdose Prevention and Response - Northern Health

Overdose Prevention Site

Pacemaker Clinic

Patient Care Quality Office

Pediatric Services

Primary Health Care

Prince George AIDS Outreach Program

Prince George Peritoneal Dialysis Clinic

Prince George Urgent and Primary Care Centre

Prince Rupert Regional Hospital

Psychiatric Inpatient Services

Public Health Services

Quesnel Unit Emergency Short Stay Treatment

Quesnel Urgent and Primary Care Centre

Regional Chronic Diseases Program

Regional NORTH Cardiac Rehabilitation Program

School Health

Speech and Language Therapy

St. John Hospital

Stuart Lake Hospital

Surgical Services

The University Hospital of Northern British Columbia

Tobacco Reduction

Toddler's First Steps Guide

Tuberculosis Prevention and Control

Virtual Primary and Community Care

Walk-in Clinic

Whitehorse General Hospital

Wrinch Memorial Hospital

Youth Community Outpatient Service

Youth OPT Clinic

Youth Withdrawal Management Unit

<u>Indigenous_Gender-Affirming_Health_Benefits.pdf</u> (phsa.ca)

Two-Spirit

"Two-Spirit" is a term used within some Indigenous communities, encompassing cultural, spiritual, sexual and gender identity.

The term reflects complex Indigenous understandings of gender roles, spirituality, and the long history of sexual and gender diversity in Indigenous cultures. Individual terms and roles for Two-Spirit people are specific to each nation. The word "Two-Spirit" was created in the early 1990s, by a group of Two-Spirit community members and leaders. Due to its cultural, spiritual, and historical context, the concept of "Two-Spirit" is to be used only by Indigenous people. However, not all Indigenous people who hold diverse sexual and gender identities consider themselves Two-Spirit, many identify themselves as LGBTQ+.

Before colonization, Two-Spirit people were included and respected as valued community members, often holding revered roles such as healers, matchmakers, and counsellors, among many others. As part of the colonization process, there has been an attempted erasure of Two-Spirit people. The western religious values and belief systems that were imposed on Indigenous people condemned any sort of sexual or gender diversity, and Two-Spirit people were killed or forced into assimilation and hiding. One of many lasting impacts of colonization on Two-Spirit people, is an increased level of homophobia and transphobia within many Indigenous communities, which can often cause Two-Spirit people to leave their home communities (and subsequently, their families, land, and culture).

The role of Two-Spirit people in Indigenous communities is now being reclaimed, and it is becoming increasingly recognized that homophobia and transphobia are in direct contradiction with most traditional Indigenous values. Reclaiming the traditional roles and value placed on Two-Spirit people's gifts, is part of a larger healing process taking place within Indigenous communities. As part of this reclamation, there has been a resurgence of Two-Spirit leadership, resources, community organizations and events, as well as recognition and representation within LGBTQ+ communities and Indigenous communities.

Source: <u>Two-Spirit (phsa.ca)</u>

Trans Care BC resources

Indigenous gender diversity: Creating culturally relevant and gender-affirming services - This three-hour online course is for people working in health and social service settings to increase their awareness, knowledge, and skills when improving service access for gender diverse Indigenous people across British Columbia. The course has been developed in collaboration with gender diverse Indigenous and Two-Spirit community members.

<u>Creating culturally relevant and gender-affirming services</u> – actionable strategies to provide more welcoming services and spaces. 10 strategies focus on what staff teams can do; 10 strategies focus on what you as an individual can do.

<u>Gender-affirming health benefits for Indigenous clients seeking care</u> - The 3-page support tool below may provide helpful information for people on eligible gender-affirming healthcare benefits through FNHA, NIHB, or their band.

<u>Making culturally relevant and gender-affirming referrals</u> - The 2-page support tool below provides helpful questions to consider before referring gender diverse Indigenous and Two-Spirit clients on to other services in order to do our best to make sure that these services are both culturally inclusive and gender-affirming.

<u>Indigenous gender diversity course: Resources for further learning</u> - Trans Care BC encourages everyone to continue learning about Indigenous gender diversity and the broader scope of Two-Spirit cultures, identities, and roles in various Indigenous Nations.

2SLGBTQ+ Resources

Support groups for LGBT2Q+ individuals in BC: Link

A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals: Link

Gender-affirming Care for Trans, Two-Spirit, and Gender Diverse Patients in BC: A Primary Care Toolkit: Link

Trans Specialty Care Program: Link

Transgender Health Information Program: Link

LGBTQ People, Drug Use & Harm Reduction (Rainbow Health Ontario): Link

Human Rights

BC Laws - Human Rights Code: Link

BC Human Rights Clinic: Link

BC Human Rights Tribunal: Link

Human Rights in BC: What you need to know: Link

Child Protection

Collaborative Practice Protocol: Link

Aboriginal Legal Aid in BC - Emily's Choice: Link

Legal Aid BC - Parents' Rights, Kids' Rights: Link

The BC Handbook for Action on Child Abuse and Neglect: Link

Child Welfare League of Canada - Duty to Report: Link

Relevant Laws

Child, Family and Community Services Act: Link

Good Samaritan Drug Overdose Act: Link

Infants Act: Link

Additional Support Services

24/7 Addiction Medicine Clinician Support Line: 778-945-7619. Link

Mental Health and Substance Use Supports in BC: Resources can be searched by type,

location, and population: Link

Respectful Language and Stigma: Regarding People who use Substances: Link

Canadian Centre on Substance Use and Addiction (CSSA) Guidelines

Canada's Low-Risk Alcohol Drinking Guidelines: Link

Canada's Low-Risk Alcohol Drinking Guidelines Communications Toolkit: Link

Helping Patients Who Drink Too Much: A clinician's guideline: Link

Infographics

Canadian Alcohol-related harms: PDF

Global Alcohol and Health Infographic: Link

Patient Resource: Alcohol Overdose Awareness: Link

Patient Resources: Help Lines

BC Nurseline – 1-866-215-4700 is staffed by RN's for triage, assessment self-care, and

referrals to withdrawal management services

Access Central – 1-866-658-1221 is Vancouver detox referral line staffed by trained

operators with provincial directories

D-Talks Youth Line - 1-866-889-4700 is staffed by social workers providing counselling,

coping skills and referrals for youth and their families

Patient Resources: Home Induction of Suboxone: Link

Provincial Opioid Addiction Treatment Support Program: Link

Patient Resource: Stimulant Overdose Awareness: Link

Patient Resource: Take Home Naloxone Training: Link

Patient Resource: Naloxone Training Videos

How to use Naloxone (Narcan): Link

Naloxone wakes you up: <u>Link</u> Naloxone saves lives: Link

SAVE ME Steps to Save a Life: Link

Patient Resource: Toward the Heart Website:

Harm Reduction Site Finder: <u>Link</u>
Overdose Survival Guide: <u>Link</u>
Opioid Overdose Awareness: <u>Link</u>
Quick-Learn Naloxone Training: <u>Link</u>

Safer Sex and Safer Drug Use: Link

Take Home Naloxone Kit Information: Link

Emergency Numbers & Hotlines

Nisga'a Valley Health Au after hour emergency:

Gitlaxt'aamiks: (250) 633-2298

Gitwinksihlkw: (250) 633-2298

Laxgalts'ap: (250) 621-3423

Gingolx: (250) 326-2345

Ambulance/Police/Fire 9-1-1

Poison Control 1-800-567-8911

Northern BC Crisis Line 1-888-562-1214

Teen Crisis Line 1-888-564-8336

Suicide Crisis Line 1-800-SUICIDE or 1-800-784-2433 (BC/Canada)

If you are in distress or are worried about someone in distress who may hurt themselves, call 1-800-SUICIDE (1-800-784-2433) 24 hours a day Connects you to a BC crisis line

Centre for Suicide Prevention 310-6789 (no area code needed)

Mental Health Information Line Answered 24/7/365

Provides empowering emotional support, information on appropriate referral options and a wide range of support relating to mental health concerns

Youth in BC 1-866-661-3311 (toll-free in BC) 24 hours a day

Trans Lifeline 1-877-330-6366

HealthLink BC (healthlinkbc.ca) 8-1-1

Options for Sexual Health 1-800-739-7367

Palliative Care Hotline 250-565-2000

Ask for palliative physician on call

Pregnancy Options BC Line 1-888-875-3163

<u>BC COVID</u> **1 888 COVID19**

EMERGENCY NUMBERS: Nisga'a Valley Health Authority

New Aiyansh & Gitwinksihlkw

Nurses Afterhours: (250)633-2298

Patient Travel Afterhours: (250)975-0777

Afterhours Mental Health Crisis Line: (250)975-0991 First Responders Gitwinksihlkw: (250)633-2900

Laxgalts'ap

Nurses Afterhours: (250)621-3423 Fire Department: (250)621-3331

<u>Gingolx</u>

Nurses Afterhours: (250)326-2345

RCMP

Phone: (250)633-2222

Other Services

Suicide Distress Line: 1-800-784-2433

Crisis Line: 1-888-562-1214

Teen Crisis Line: 1-888-564-8336 Victim Link Line: 1-800-563-0808

Nisga'a Crisis Response

After hour emergency number for emergency use only. 250-975-0991.

Your health and well-being is important to NVHA. Your emergency is important to NVHA, so if you are given another number to call when you call any of these numbers, it only means that there is a change in shift of the emergency on-call worker. NVHA nurses and doctors work emergency services on a rotational basis, so the emergency phone number to call may change depending on who is on shift.

Another option is to call the health centre number in your community. The voice mail message will include all emergency contact number(s) for that day. It is changed daily and provides the most up-to-date on-call emergency contact information.

Crisis Resources: Nisga'a Valley Health Authority

Additional Assistance

Crisis Lines

Victim Services 250-633-2575
Suicide Distress Line 1-800-784-2433
Crisis Line 1-888-562-1214
Teen Crisis Line 1-888-564-8336
Victim Link Line 1-800-563-0808
RCMP 250-633-2222

Additional Resources

BC Nurse Line 811
BC Mental Health Information Line 1-800-661-2121
BC Alcohol and Drug Information and Referral Service 1-800-889-1441
Problem Gambling Help Line 1-888-795-6111
Credit Counselling Society 1-888-527-8999
Mood Disorders Association of BC 604-873-0103
Early Psychosis Intervention Program 1-866-870-7847
Griefworks BC 1-877-234-3322
Legal Services Society 1-866-577-2525
SAFER (Suicide Attempt Follow-Up, Education and Research) 604-879-9251
Vancouver Crisis Centre 1-866-661-3311

Crisis Resources

Northwest Counselling: 250-638-8311

NIFCS (Northwest Inter-Nation Family & community):

250-638-0451 / 250-615-3583 (Cell)

National Indian Residential Schools Crisis Line (Canada): 24-hour access

1-866-925-4419

Provides mental health, emotional and cultural support services to eligible former Indian Residential School students and their families

Resolution Health Support Program Services are safe, confidential, respectful, and non-judgmental.

Professional counsellors are psychologists and social workers that are registered with Indigenous Services Canada

KUU-US Crisis Services (BC): 24-hour access

Adult / Elder Line: 250-723-4050

Child / Youth Line: 250-723-2040

BC Toll Free Line: 1-800-588-8717

Reasons for calling include but are not limited to:

Mental health

Grief/loss

Abuse

Peer pressure

Financial distress

Employment/ education

Residential school

Child welfare

Addiction

health concerns

Divorce/ separation

Suicide / survivorship

Dear Reader:

This Community Asset catalogue has been prepared by Manon Joice, Proprietor of Skeena Coach, in Kitimat, BC, for the Northern First Nations Alliance (NFNA) Health and Wellness Committee. The asset mapping exercise was commissioned by the First Nations Health Authority to ascertain the area community assets available to serve those living with addiction.

This effort also identifies potential partners and stakeholders to support an Indigenous detox and wellness centre in Northwest, BC. These initiatives have been planned to effectively address the public health emergency and epidemic in our region, substance abuse. The proposed centre promises to blend evidence-based medicine with land-based healing and is intended to fill several of the identified gaps concerning health & wellness, detox, and treatment services within the region and the province. The facility's primary focus groups will include Indigenous youth, women, men, and Elders, as well as the Indigenous 2SLGBTQ+ community and Indigenous families.

The achievement of this work was made possible only through collaborative efforts and activities, including personal testimonies, knowledge translation, information sharing, cooperation, transparency, and teamwork. It is with great appreciation that people, our communities, area organizations, and area agencies have come together in support of the NFNA and their effort; to successfully provide dignified lifesaving detox, rehabilitation, treatment, and wellness services to substance users as well as their families.

Much attention to detail has been attributed to this document, but as with all projects and plans, I trust you understand that not every happening can be foreseen. It remains my hope that the information gathered in this report meets the expectations of the Northern First Nations Alliance and their Health and Wellness Sub-Committee, as well as remaining true to their objectives, mandates, and values. This hope also extends to all our partners in health and wellness who aim to triumph over the many tragedies substance abuse has caused in our region. Any questions or comments regarding the contents of this document may be addressed to the author.

In gratitude for the opportunity to serve, and ever respectfully,

Manon Joice

Proprietor, Skeena Coach

1670 Kingfisher Avenue N Kitimat, BC V8C 1G1

C: 250 639 0527 E: manonjoice@hotmail.com W: www.skeenacoach.com

I respectfully acknowledge that I am privileged to reside on the unceded territory of the Haisla First Nation.