



Delivering health and social services to 33 communities, and improving the quality of life for seniors, is part of the challenge in the NWT.  
Photo: Tessa MacIntosh

## A Unique Challenge: Health and Social Policy in Canada's North

Glen Abernethy

*Governing in the North is as different from governing elsewhere as life in the North is different. The health and social challenges of the Northwest Territories range from addictions and mental health to poverty and homelessness issues that exist across Canada. But as Minister of Health and Social Services Glen Abernethy writes, life in the North demands different policy approaches. That need has spawned innovation and collaboration to produce unique solutions.*

The Legislative Assembly of the Northwest Territories has a vision of strong individuals, families and communities sharing the benefits and responsibilities of a unified, environmentally sustainable and prosperous Northwest Territories. With a wealth of natural resources and new powers and authorities recently transferred from Ottawa to the NWT for land and resource management, the NWT is well positioned to create jobs and economic opportunities that will contribute to territorial—and national—pros-

perity and well-being. Yet prosperity in the Northwest Territories will not be measured on economic terms alone; economic development must be accompanied by corresponding social development.

Supporting and sustaining long-term improvements in health and well-being for our residents is an integral part of creating a strong, prosperous NWT. Encouraging healthy, educated people who are able to participate meaningfully in the economic, social and political life of the territory and share in its benefits is a critical goal for government and a critical measure of success. To achieve that success, we are taking innovative steps to ensure our residents have the support they need to overcome personal and social challenges so they can realize their full potential and achieve their own aspirations.

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The Northwest Territories is uniquely positioned within Canada to contribute innovative perspectives and new approaches to confronting difficult social issues such as addictions and mental health. The NWT's small, relatively young, population presents great opportunity for positive shifts in social determinants within a generation. We will make those shifts through strategies that aim to address root causes in an integrated fashion, understanding the social inequities and systemic failings that often contribute to and exacerbate challenges such as mental health, addictions, poverty and homelessness, rather than addressing the symptoms alone. We will involve communities and individuals in identifying solutions that are culturally appropriate and integrate their own unique strengths and resources, thus avoiding the pitfalls of "one-size-fits-all" approaches that may not adapt well to our many diverse communities. And we will give our children a solid start on a good life, offering programs and services that will promote



A Dene First Nations child joins in a celebration of Addictions Week in N'Dilo. "The prevalence of addictions," writes Glen Abernethy, "has been a long-standing concern for NWT communities." Photo: Tessa MacIntosh

their early health and educational development to eliminate problems before they even arise.

When the 17th Legislative Assembly took office in the fall of 2011, all 19 members met as a caucus to hammer out a vision for their term. They set an ambitious goal of "Healthy, educated people free from poverty"; and identified five key priorities, including to, "Ensure a fair and sustainable health care system by investing in prevention, education and awareness and early childhood development, (and) enhancing addictions treatment programs..." These priorities mirrored recommendations from a

report on services for children and families done in 2010 by a standing committee of the Legislative Assembly. That report highlighted the need for broad social interventions, citing as "essential recommendations" a focus on prevention and early intervention in order to help families to heal; ensuring readily accessible alcohol and drug treatment in all communities; and developing a comprehensive anti-poverty strategy.

The government responded by establishing a Social Envelope Committee of Cabinet (SECOC) chaired by me and including ministers from departments charged with delivering social

programs in the NWT. Our mandate is to address “a range of actions designed to promote, preserve and help manage the long-term health and social well-being of NWT residents.” Our first steps included several foundational initiatives meant to promote overall health and wellness at a fundamental level: developing an anti-poverty strategy, updating and expanding the existing early childhood development framework, and enhancing the government’s response to mental health and addictions.

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Assigning these initiatives to a cabinet committee, as opposed to a single ministry, represented a new way of doing business for the government. Our committee recognized that the challenges facing northern communities are not new, and that previous efforts have not been as successful as needed. They wanted to find new and innovative ways to reach out to communities, and to build partnerships that could lead to lasting change. They also recognized that even with its small population of 43,000 people, the NWT is a vast and culturally diverse territory. With 11 official languages and eight aboriginal groups negotiating self-government agreements, there is no “one-size-fits-all” solution that is right for every one of the territory’s 33 communities.

Further complicating our work is the fact that approximately 50 per cent of the population of the NWT is aboriginal, either First Nations, Métis, or Inuvialuit; and aboriginal people in the NWT face a multitude of challenges stemming from rapid social

change, a history of colonization, and the legacy of residential schools. With educational achievement levels and population health trends that are generally worse than territorial averages, aboriginal communities suffer higher rates of unemployment and face daunting social problems.

Ministers agreed that addressing these challenges meant focusing on the client, rather than departmental mandates and programs. It meant leveraging limited government resources to achieve maximum value and collaborating across silos to ensure efficiency and avoiding duplication of effort.

June 2012 saw the completion of *A Shared Path Towards Wellness*, a three-year plan to combat addictions and improve mental health services in the NWT. In June 2013, the government completed two additional major strategies. *Right from the Start: A Framework for Early Childhood Development in the NWT* outlines major new investments and new initiatives to promote early childhood programming. *Building on the Strengths of Northerners: A Strategic Framework toward the Elimination of Poverty in the NWT* identifies five priorities tackling the root causes of poverty in the territory. These initiatives will benefit many segments of the population at large, but a key focus is on increasing success rates for aboriginal children and families by addressing the basic social determinants of health in the NWT’s small, remote communities.

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Another important step has been the development of community wellness plans for all communities with funding provided by Health Canada. Local gov-

erning bodies—band councils, hamlet councils or community wellness committees—have established plans that outline clearly what each community’s priorities are. Not surprisingly, the same themes have emerged in most communities, including the need to promote healthy eating, early childhood intervention, programs for families, and on-the land programs that support and strengthen aboriginal culture, priorities that are being reflected in all our planning. Another demonstration of this commitment to meaningful regional and community input into identifying new solutions was the development of *Right from the Start: A Framework for Early Childhood Development in the NWT*, which began with the GNWT convening engagement tables in every region of the NWT. Elders from each community were then invited to an Elders Sharing Circle. Sixty elders, representing every region, gathered in December 2012 to share traditional knowledge about early childhood development and learning. This knowledge about traditional ways of raising children informed the development of the framework, and is reflected throughout the final document.

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The prevalence of addictions, and particularly alcohol abuse, has been a long-standing concern for NWT communities, and continues to be so in spite of numerous efforts over the years to tackle it. Yet there are many success stories, and inspiring leaders in all communities who have become important role models and helped others to deal with addictions issues. The Minister’s Forum on Addictions and Community Wellness was established in 2011 to draw on this wisdom. The forum travelled to all regions of the NWT and met with peo-



Kids drawing “healing hands” in N’Dilo, a Dene First Nations community of 200 on the outskirts of Yellowknife on the tip of Latham Island.  
Photo: Tessa MacIntosh

ple suffering from addictions, their families, government staff, teachers and RCMP officers, in an effort to find out what has worked at the community level.

Their report, *Healing Voices*, was delivered to the government in the spring of 2013 and identified key priorities based on community input. Among these priorities was the need for on-the-land healing programs that are rooted in aboriginal culture and combine the wisdom of elders and traditional knowledge with contemporary treatment modalities. Other primary recommendations included more programs for youth, improved access to a range of treatment programs to respond to individual needs, and more emphasis on celebrating successes.

These recommendations informed our updated Addictions and Mental Health Action Plan, and resulted in new funding to support on-the-land healing programs. As land-based healing pro-

grams become more prevalent in the NWT and elsewhere, the lessons we learn from our own programs will help identify best practices for integrating aboriginal values and culture into efforts for supporting Aboriginal health and well-being.

Collaboration and accessing the shared wisdom of community partners was critical in developing *Building on the Strengths of Northerners*, our Anti-Poverty Strategic Framework, drafted by a partnership involving the NWT government, aboriginal governments, the No Place for Poverty Coalition representing a broad base of NGOs and community governments, and business. There was no road map for this kind of collaborative effort in the NWT and many lessons were learned about how to work together. The government has developed its own anti-poverty Action Plan in response to the framework, including establishing a fund to support community-based projects designed to combat poverty. A stakeholders’ advisory committee has been set up to lead the development

of a broader action plan, supported in part with government funding but leveraging direct and in-kind contributions from other parties.

Creating the kind of society where our citizens can grow and thrive, support themselves and their families and realize their own dreams is a priority for our government. Successfully doing this means pioneering new ways of doing business, forging broad partnerships at all levels of society and seeking opportunities for innovation. With new programs and strategies aimed at building a strong foundation supporting social and individual health, the government is making progress on its goal of healthy, educated people free from poverty who will benefit fully from the territory’s bright future. **P**

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