

Standing Committee on
Government Operations



Report on the Review of the 2022 Audit of Addictions Prevention and Recovery Services

19th Northwest Territories Legislative Assembly

Chair: Mr. Rylund Johnson

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November 1, 2022

SPEAKER OF THE LEGISLATIVE ASSEMBLY

Mr. Speaker:

Your Standing Committee on Government Operations is pleased to provide its *Report on the Review of the 2022 Audit of Addictions Prevention and Recovery Services* and commends it to the House.



Mr. Rylund Johnson
Chair, Standing Committee on Government Operations

STANDING COMMITTEE ON GOVERNMENT OPERATIONS
REPORT ON THE REVIEW OF 2022 AUDIT OF ADDICTIONS PREVENTION AND RECOVERY SERVICES

INTRODUCTION

Reviewing the Addictions Audit to improve the GNWT's Workplan Response

On May 31, 2022, the Speaker tabled an audit report entitled *Addictions Prevention and Recovery Services in the Northwest Territories*.¹ This performance audit was conducted by the Auditor General of Canada, who is also the Auditor for the Government of the Northwest Territories (GNWT).²

The performance audit looked at whether the Department of Health and Social Services, the Northwest Territories Health and Social Services Authority (NTHSSA), the Hay River Health and Social Services Authority (HRHSSA), and the Tłıchq Community Services Agency (TCSA) provided addictions services to meet the needs of Northerners.³ This audit matters because the NWT has a high rate of substance use and addictions have widespread impacts on the lives of individuals, families, and community members.

The audit found that the department and the three health authorities:

- Had not figured out how to achieve equitable access to addictions services;
- Did not do enough to ensure addictions services were culturally safe for Indigenous residents;
- Provided only limited aftercare services;
- Had gaps in coordinating addictions services; and
- Did not do enough to collect and analyze data to know whether their addictions services were effective in helping residents achieve their desired outcomes.

The audit made seven (7) recommendations to improve addictions services.⁴ The department and health authorities accepted all seven recommendations. In response, they developed the *Addictions Prevention and Recovery Services Workplan (2022-24)*. The *Workplan* highlights new actions the department and health authorities are taking to address the audit recommendations.

Committee is responsible for reviewing the audit and the department's response. The review ensures that government is accountable to correct deficiencies, implement recommendations, and execute policies and programs in line with the Legislative Assembly's intentions.⁵

On October 6, 2022, Committee held a public hearing on the report.⁶ Officials at the Office of the Auditor General (OAG) and the department briefed Committee. They explained key audit findings and the department's *Workplan*.

In response, Committee developed thirteen (13) recommendations. Our recommendations reinforce accountability and request additional actions to improve programs and services that help Northerners avoid and heal from addictions. If implemented, these recommendations will:

1. Provide immediate supports to young men;
2. Ensure healthcare services are culturally safe;
3. Secure federal support to set up Healing Centres in the NWT; and
4. Strengthen the follow-up process.

Committee is pleased to submit these recommendations and looks forward to their implementation.

CONTEXT

Responding to suicide deaths

On October 3, 2022, the Chief Coroner took the unprecedented step of releasing data earlier than usual on suicide deaths.⁷ The data point to a health crisis: In the first nine months of 2022, 18 Northerners died of suicide, more than in any full year in the last two decades.

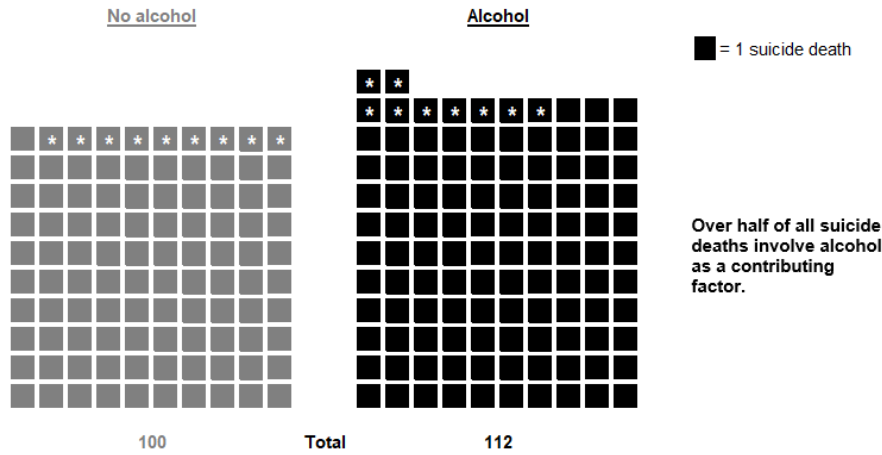
In releasing these statistics early, the Chief Coroner hoped to spur the government to respond.⁸ Indeed, the Minister of Health and Social Services has indicated that "*a whole-of-government response is needed.*"⁹

Committee also sought to respond to the Chief Coroner's report in the context of this audit review. The Chief Coroner's report includes a statistic that potentially connects suicide deaths to addictions services – that is, the number of suicide deaths with alcohol as a contributing factor.

To get a better understanding, Committee examined more than twenty years of data on suicide deaths.¹⁰ Committee found that:

- Since 2001, 212 Northerners have died by suicide.
 - o Alcohol was a contributing factor in over one in every two deaths, 112 in total.
 - o Males under age 40 made up over one in every two deaths, 114 in total.

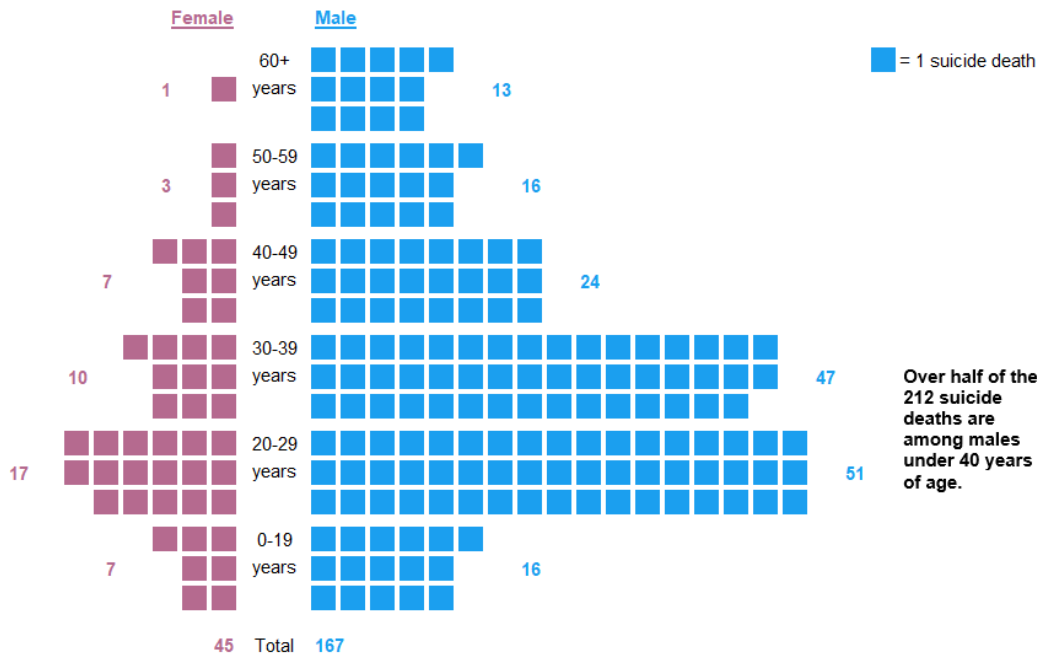
Figure 1: Number of suicide deaths in the NWT, with and without alcohol as a contributing factor, 2001 to 2022*



* Deaths between January and September 2022

Source: Office of the Clerk calculations of data from the Chief Coroner

Figure 2: Number of suicide deaths in the NWT, by gender and age group, 2001 to 2022*



* Data covers January 2001 to September 2022.

Source: Office of the Clerk calculations of data from the Chief Coroner

The age profile of the NWT's suicide deaths is younger than Canada's. Here, men in their twenties and thirties are most likely to die of suicide. Across Canada, men in their forties and fifties are most at-risk.¹¹

These statistics, and the loss of life that they quantify, are deeply upsetting. Each life lost is a tragedy that extends to families, friends, and communities.

The link between many suicide deaths and alcohol points to the urgency of the audit's focus: to provide addictions prevention and recovery services that meet the needs of Northerners.

The department's *Workplan* commits to promising plans to improve addictions services. But many planned activities, even if implemented successfully and to the full, have timelines of a year or more. Process-driven activities, such as revising hiring practices by the end of 2023-24, will take longer still to influence service quality.

While Committee supports all the department's planned activities, and understands this work takes time, Committee wants to see actions with immediate impacts. Incorporating these immediate actions into the *Workplan* would enhance its relevance, effectiveness, and credibility. Committee's recommendations for immediate actions focus on the demographic group most at-risk of living with suicidal thoughts or behaviour: young men.

RECOMMENDATIONS

Provide immediate supports to young men

Ease access to the On the Land Healing Fund

The On the Land Healing Fund helps Indigenous Governments and organizations provide land-based addictions treatment, including aftercare programming.¹²

However, the Auditor heard from some Indigenous groups that administrative requirements made accessing the fund difficult.¹³ In both 2019-20 and 2020-21, the department failed to distribute \$500,000 to \$600,000, almost one third of the Fund's \$1.8 million budget.¹⁴ Committee therefore recommends:

Recommendation 1: That the Department of Health and Social Services review and relax administrative requirements to access the On the Land Healing Fund, with a view to ensuring full uptake of budgeted funds in 2022-23, and report on whether the funds were dispersed.

Increase support for men's wellness programs

More generally, the GNWT should ensure that all budgeted dollars that support men's wellness are spent each year. Effective programs should receive increased support. Committee therefore recommends:

Recommendation 2: That the Government of the Northwest Territories increase funding for grants and contribution programs that target men's wellness.

Sponsor a Men's Wellness Conference

In October 2022, the Meadow Lake Tribal Council in Saskatchewan hosted a men's wellness conference. The conference discussed the root causes of issues facing some Indigenous men and solutions for change. Over 200 men participated.

Media reporting of the conference include testimonies that highlight numerous positive outcomes.¹⁵ Participants opened up, shared painful experiences, gained emotional understanding, used humour to balance heavy talks, and recognized they are not alone. Organizers hoped the men would bring lessons and renewed hope back home, launching their own groups to support healing and change.

Committee wants to see a similar conference in the NWT and believes it could be organized within six months. Committee therefore recommends:

Recommendation 3: That the Department of Health and Social Services, in consultation with Indigenous Governments and by Spring 2023, sponsor a Men's Wellness Conference. The conference should focus on hearing, learning, and sharing about the root causes of issues facing some men, such as racism, trauma, isolation, violence, and addictions.

Add a youth priority area to the Workplan

The department's *Workplan* is broken down into seven (7) priority areas, corresponding to the Auditor's seven (7) recommendations. Considering that suicide deaths occur disproportionately among young men, Committee wants to see an eighth priority focused on people aged 29 years and under.

This new priority area should bring together relevant activities focused on young people from the rest of the *Workplan* into one spot. Potential examples include:

- Equitable access to addictions services for youth in Child and Family Services;
- Disaggregating data on young people; and
- Reviewing job descriptions to hire more Indigenous graduates as youth counsellors.

This youth priority area should also add two (2) new commitments. The second commitment, on sports and recreation, requires the collaboration of the Department of Municipal and Community Affairs (MACA). The Minister of MACA has said that sport and recreation programming is important, especially to youth, for its health and social benefits, including mental wellness.¹⁶ Committee agrees, but is unclear whether MACA sees its role in mental health promotion in collaboration with other GNWT departments and agencies. Committee therefore recommends:

Recommendation 4: That the Department of Health and Social Services, in collaboration with the Department of Municipal and Community Affairs, add an eighth priority area to the Addictions Prevention and Recovery Workplan focusing on people aged 29 and under. This priority area should include clear commitments and performance measures to:

- Increase access to and uptake in counselling and healing supports; and
- Increase youth participation in sports and recreation, including measures to improve access to facilities and programming.

Ensure healthcare services are culturally safe

Measure cultural safety effectively

The Auditor's definition of cultural safety was "*an outcome where Indigenous people feel safe, respected, and free from racism and discrimination when accessing health and social services programs.*"¹⁷ Cultural safety is important to remove barriers to accessing services and making it more likely these services will meet Indigenous clients' needs.

A key challenge to ensuring cultural safety is effective measurement. Measurement is important because programs intended to boost diversity, equity, and inclusion can have varying levels of effectiveness and must be assessed with evidence.¹⁸ But since cultural safety is an outcome inherent to an Indigenous client, departmental reviews of standards and policies is not enough to ensure cultural safety. Insight from Indigenous clients is required.

Committee encourages the department to set a goal toward defining how culturally safe outcomes are measured. This work should be done in collaboration with the NTHSSA Leadership Council. Committee therefore recommends:

Recommendation 5: That the Department of Health and Social Services implement an approach to measure whether users and non-users of GNWT addictions services find those services to be culturally safe and provide a timeline for implementation.

Extend work on cultural safety throughout government

The importance of cultural safety extends beyond addictions services. Committee wants to see work to understand, enhance, and measure cultural safety applied to other areas at the health authorities and in the GNWT. The department should outline how it will build on its most recent cultural safety action plan, *Caring for Our People*,¹⁹ in the months and years ahead. Committee therefore recommends:

Recommendation 6: That the Government of the Northwest Territories conduct a whole-of-government review of cultural safety in all standards and policies associated with GNWT programs and services and provide a timeline for implementation. This review should identify barriers to cultural safety to inform efforts to remove or reduce identified barriers.

Prioritize revised hiring practices

The *Workplan* aims to revise hiring practices for addictions positions that formally recognize the value of Indigenous qualifications by 2023-24 Q4. Members believe this work should be completed sooner.

Work on job descriptions and hiring practices should have already been underway, before the *Workplan* was developed. The Department of Finance's *Indigenous Recruitment and Retention Action Plan* contains five (5) action items to increase Indigenous representation at all departments and agencies, including at the health authorities.²⁰ That *Plan* was launched almost one year ago, in November 2021.

The department and health authorities should collaborate with the Department of Finance to expedite this *Workplan* commitment. Committee therefore recommends:

Recommendation 7: That the Department of Health and Social Services and Health and Social Services Authorities, in collaboration with the Department of Finance, prioritize their commitment to revise hiring practices for addictions positions to recognize the value of Indigenous qualifications. Committee further recommends the timeline for this work to be moved up by six months, to 2023-24 Q2.

Incorporate Indigenous knowledge into standards of practice

While the *Workplan* commits to revising the hiring process to recognize the value of Indigenous qualifications, it does not explicitly extend that logic beyond the hiring phase and specifically to standards of practice.

Western medical standards create barriers to cultural safety for Indigenous residents. They make it harder for Indigenous people to gain accreditations to become healthcare providers within the system. They also distort the measurement of outcomes. Indigenous people lead different lives than non-Indigenous people. The desired healthcare outcomes

for Indigenous people do not always match those defined by Western standards.

Indigenous standards of practice are also a matter of rights. Article 24.1 of the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) declares that “*Indigenous peoples have the right to their traditional medicines and to maintain their health practices.*”²¹ Committee therefore recommends:

Recommendation 8: That the Department of Health and Social Services and Health and Social Services Authorities review and adjust standards of practice to recognize the value of Indigenous knowledge and provide a timeline for implementation.

Set up mechanism for staff-identified changes

To compliment the *Workplan’s* top-down, holistic approach, Committee proposes a bottom-up mechanism for healthcare staff to identify improvements. This will empower frontline staff to develop, implement, and communicate creative solutions in real time while the larger policy approach is in development.

Committee is not aware of any such mechanism, available system-wide, to drive bottom-up change. Frontline workers have an important perspective on the challenges in service delivery. They may be able to propose out-of-the-box solutions not conceived elsewhere. Committee therefore recommends:

Recommendation 9: That the Department of Health and Social Services and Health and Social Services Authorities set up a distinct method for frontline staff to identify barriers to care and cultural safety or propose better practices and policies on an ongoing basis and provide a timeline for implementation.

Reach those at risk who do not use addictions services

A key concern for Committee is overcoming barriers to reach at-risk individuals who do not access addictions services. The Auditor highlighted the need to gather data from individuals who are not service users. Committee believes the *Workplan* can go farther to reach at-risk individuals and therefore recommends:

Recommendation 10: That the Department of Health and Social Services (HSS) collect and analyze data from residents who do not use GNWT addictions prevention and recovery services, to identify creative ways to remove barriers and make services more culturally safe and provide a timeline for implementation.

Secure federal support to set up Healing Centres in the NWT

Members have heard repeated cries for one or more in-territory healing centres. Right

now, Northerners who want to access facility-based addictions treatments must leave the NWT to receive this service.

Neither the Audit nor the *Workplan* provide a determination on whether the NWT should set up in-territory healing centres. The Auditor noted that the lack of in-territory facilities could create barriers for some clients, including those concerned that Southern treatment may not reflect their culture. However, the Auditor stopped short of recommending a healing centre. The *Workplan* is silent on the matter.

By contrast, the Truth and Reconciliation Commission's Call to Action #21 is quite clear. It states:

*"We call upon the federal government to provide sustainable funding for existing and new Aboriginal healing centres to address the physical, mental, emotional, and spiritual harms caused by residential schools, and to ensure that the funding of healing centres in Nunavut and the Northwest Territories is a priority."*²²

The federal government recently made good on this Call to Action for Nunavut. Canada is providing nearly \$50 million to support up to 75% of the construction costs for the Nunavut Recovery Centre.²³ Nunavut's Centre will be based on Inuit cultural practices and provide a range of treatment and healing interventions. Canada will also provide \$10 million in ongoing annual operating support.

Between Call to Action #21 and Nunavut's recent precedent, Committee believes it's time for the GNWT to secure federal support for one or more healing centres in the territory. This should include immediate access to detox centres in each region. Committee therefore recommends:

Recommendation 11: That the Government of the Northwest Territories, in collaboration with Indigenous Governments, pursue federal funding to help set up healing centres in the Northwest Territories.

Strengthen the follow-up process

Present performance measures and regular reporting

Committee wants to ensure that the department demonstrates its progress towards achieving the *Workplan's* expected results. One potential risk, in this regard, lies in the lack of disclosure on performance measures. The *Workplan* that the department presented at the October 6th public briefing contained activity measures to describe what work would be done. The *Workplan* also included high-level statements on expected results. But missing were specific performance results that are easily measurable.

Committee is aware that the Auditor required the department to comply with wordcount limits. More detailed aspects of the *Workplan*, like performance measures, may not have fit within the publishing constraints.

Committee wants to see performance measures and regular, public reporting on progress towards associated targets. Committee therefore recommends:

Recommendation 12: That the Department of Health and Social Services present performance measures for each activity in the Addictions Prevention and Recovery Workplan and provide a timeline for implementation. The Department should report on progress with:

- A web-based tracker, similar to ECE's *Action Plan to Improve Student Outcomes Progress Tracker*, on a quarterly basis; and
- A public briefing at Committee, in spring/summer 2023 before the 19th Assembly ends.

Incorporate recommendations into *Workplan*

Committee's recommendations aim to reinforce existing commitments in the *Workplan* and initiate additional actions to enhance addictions prevention and recovery services.

Committee wants to see the department respond more substantially than with a standard tabled response and sooner than in 120 days. Committee therefore recommends:

Recommendation 13: That the Department of Health and Social Services make changes to its *Addictions Prevention and Recovery Workplan* as soon as possible to reflect the recommendations contained in this Committee report (*Report on the Review of the 2022 Audit of Addictions Prevention and Recovery Services*).

CONCLUSION

This concludes the Standing Committee on Government Operations' *Report on the Review of the 2022 Audit of Addictions Prevention and Recovery Services*. Committee looks forward to the Government's response to these recommendations.

Recommendation 14: The Standing Committee on Government Operations recommends that the Government of the Northwest Territories provide a response to this report within 120 days.

APPENDIX: ENDNOTES

¹ Office of the Auditor General of Canada (2022). *Independent Auditor's Report on Addictions Prevention and Recovery Services in the Northwest Territories*. Available at:

https://www.ntassembly.ca/sites/assembly/files/nwt_addiction_prevention_and_recovery_services_en.pdf

² The federal *Northwest Territories Act* sets out that the Auditor General of Canada is also the Auditor for the Government of the Northwest Territories. The Auditor General of Canada is also a statutory officer of the Legislative Assembly. This means their responsibilities are set out in legislation and that they operate independently from the Government of the Northwest Territories.

³ Paragraph 9 of the audit report. Available at:

https://www.ntassembly.ca/sites/assembly/files/nwt_addiction_prevention_and_recovery_services_en.pdf#page=9.

⁴ The Auditor's recommendations and the Department of Health and Social Services' response is available at:

https://www.ntassembly.ca/sites/assembly/files/nwt_addiction_prevention_and_recovery_services_en.pdf#page=30.

⁵ For more information on Committee's role to ensure effective oversight, consult the Canadian Audit & Accountability Foundation's guidance document, *Accountability in Action*. Available at: <https://www.caaf-fcar.ca/images/pdfs/research-publications/AccountabilityInActionEN.pdf>.

⁶ Video proceedings are available at: <https://www.youtube.com/watch?v=qAJT19TE1f0>.

⁷ Northwest Territories Coroner's Service (2022). *2021-2022 Early Release of Suicide Data*. Available at: <https://www.justice.gov.nt.ca/en/files/coroner-service/Annual%20Reports/2021-2022%20Early%20Release%20of%20Suicide%20Data.pdf>.

⁸ Cabin Radio (2022). *Coroner releases data showing increase in NWT suicides this year*. Available at: <https://cabinradio.ca/106331/news/health/coroner-releases-data-showing-increase-in-nwt-suicides-this-year/>.

⁹ GNWT Newsroom (2022). *Julie Green: Response to the NWT Chief Coroner's Report on Suicide*. Available at: <https://www.gov.nt.ca/en/newsroom/julie-green-response-nwt-chief-coroners-report-suicide>.

¹⁰ Data on suicide deaths in the NWT going back to 2001 are available from three Chief Coroner annual reports:

Northwest Territories Coroner's Service (2011). *2010 Annual Report including 10-year review 2001-2010*. Available at: <https://www.justice.gov.nt.ca/en/files/coroner-service/Annual%20Reports/2010%20Annual%20Report.pdf#page=27>.

Northwest Territories Coroner's Service (2021). *2020 Annual Report including 10-year review 2011-2020*. Available at: <https://www.justice.gov.nt.ca/en/files/coroner-service/Annual%20Reports/2020%20Annual%20Report.pdf>.

Northwest Territories Coroner's Service (2022). *2021-2022 Early Release of Suicide Data*. Available at: <https://www.justice.gov.nt.ca/en/files/coroner-service/Annual%20Reports/2021-2022%20Early%20Release%20of%20Suicide%20Data.pdf>.

¹¹ Statistics Canada (2022). Table 13-10-0392-01. Available at: <https://www150.statcan.gc.ca/t1/tbl1/en/cv.action?pid=1310039201>.

¹² Department of Health and Social Services (2022). *On the Land Healing Fund*. Available at: <https://www.hss.gov.nt.ca/en/services/land-healing-fund>.

¹³ Available at:

https://www.ntassembly.ca/sites/assembly/files/nwt_addiction_prevention_and_recovery_services_en.pdf#page=16.

¹⁴ In 2019-20, the department distributed \$1,226,000 of an available \$1,825,000. Available at:

https://www.fin.gov.nt.ca/sites/fin/files/resources/2021-2022_main_estimates_for_website.pdf#page=200

In 2020-21, the department distributed \$1,266 of an available \$1,825,000. Available at:

<https://www.fin.gov.nt.ca/sites/fin/files/resources/2022->

[2023_main_estimates_supporting_schedules.pdf#page=203](#).

¹⁵ CBC News (2022). *Indigenous men come together in Sask. to work toward healing, change*. Available at: <https://www.cbc.ca/news/canada/saskatoon/meadow-lake-tribal-council-mens-healing-conference-1.6613771>.

¹⁶ Standing Committee on Government Operations (April 22, 2022). *Public briefing: Sport, recreation and youth*. Available at: <https://www.youtube.com/watch?v=9LyByHCYXpc>.

¹⁷ Available at:

https://www.ntassembly.ca/sites/assembly/files/nwt_addiction_prevention_and_recovery_services_en.pdf#page=17.

¹⁸ Dobbin, F. and Kaley, A. *Are Diversity Programs Merely Ceremonial? Evidence-Free Institutionalization*. Available at: https://scholar.harvard.edu/files/dobbin/files/greenwood-oliver-lawrence-meyer_2017.pdf.

¹⁹ Department of Health and Social Services (2019). *Caring for Our People – Cultural Safety Action Plan 2018-2020*. Available at: <https://www.hss.gov.nt.ca/sites/hss/files/resources/cultural-safety-action-plan.pdf>.

²⁰ Department of Finance (2021). *Indigenous Recruitment and Retention Action Plan*. Available at: https://www.fin.gov.nt.ca/sites/fin/files/resources/irr_action_plan_web.pdf#page=11.

²¹ UNDRIP Article 24.1. Available at: https://www.un.org/development/desa/indigenouspeoples/wp-content/uploads/sites/19/2018/11/UNDRIP_E_web.pdf#page=20.

²² Truth and Reconciliation Commission of Canada (2015). *Calls to Action*. Available at: https://ehprnh2mwo3.exactdn.com/wp-content/uploads/2021/01/Calls_to_Action_English2.pdf#page=7.

²³ Indigenous Services Canada (2021). *Recovery Centre Coming to Nunavut*. Available at: <https://www.canada.ca/en/indigenous-services-canada/news/2021/08/recovery-centre-coming-to-nunavut.html>.