

RESILIENCY WITHIN

An action plan for suicide prevention in Nunavut 2016/2017



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2016-2017

A partnership between

The Government of Nunavut

1 (877) 212-6438

www.gov.nu.ca

Nunavut Tunngavik Incorporated

1 (888) 646-0006

www.tunngavik.com

Royal Canadian Mounted Police, V-Division

(867) 979-0123

www.rcmp-grc.gc.ca

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ACKNOWLEDGEMENTS

The partners respectfully acknowledge the individuals, families, communities and organizations who work to prevent suicide and improve well-being in Nunavut. Your continued dedication to helping those in need is highly valued as we move forward together to reduce the incidence of suicide in our Territory.

WHERE TO TURN

There is help. Here are a few resources and supports available to individuals and organizations.

There are several options for anyone feeling suicidal. Call your community health centre and ask for the mental health worker or psychiatric nurse to talk about your feelings, addictions or treatment. Ilisaqsivik Society in Clyde River offers face-to-face and telephone counselling in Inuktitut and English. You can call the Kamatsiaqtut Help Line all day, every day. Visit your library for books and resources. There are people all around who love you. Tell a family member, elder, school counsellor or faith member what you are going through.

For caregivers, respite care is available. Call your community health centre and speak with the mental health worker. If someone you care about is in danger of hurting themselves or another, call the RCMP.

For community organizations, there are resources and training programs to develop local capacity, reduce risk factors and increase protective factors. The Isaksimagit Inuusirmi Katujjigaaigiit Embrace Life Council provides resources and training for teachers and community members. Ilisaqsivik Society offers a training program for counsellors and facilitators. Qaujigiartiit Health Research Centre offers a parenting program and youth mental wellness camp. Get involved in your community's Wellness Committee which receives funding to support local initiatives.

There are many more resources available through national and regional Inuit organizations, community groups, faith organizations and individuals. We all care.

Ilisaqsivik Society
1-888-331-4433
English & Inuktitut,
Monday - Friday,
8:30 a.m. - 5:00 p.m.

Isaksimagit Inuusirmi Katujjigaaigiit
Embrace Life Council
www.inuusiq.com
1 (866) 804-2782

Kamatsiaqtut Help Line (24/7)
1-800-265-3333
1-867- 979-3333

BACKGROUND

In 2004, through a partnership of the Government of Nunavut, Nunavut Tunngavik Incorporated, the Royal Canadian Mounted Police V-Division and many caring stakeholders, the Embrace Life Council was established to coordinate initiatives in suicide prevention.

In 2008, the Government of Nunavut (GN), Nunavut Tunngavik Incorporated (NTI), the Royal Canadian Mounted Police V-Division (RCMP) and the Embrace Life Council (IIKELC) formed a partnership to create a strategy to prevent suicide. A review of evidence-based research sought to identify suicide reduction methods from other jurisdictions. The partners sought input from Nunavummiut through a discussion paper¹, community consultation and targeted discussions with key stakeholders involved in suicide prevention. In October 2010, the Partners released the Nunavut Suicide Prevention Strategy² (NSPS).

In September 2011, an Action Plan³ outlining steps, to March 2014, to reach the vision of the NSPS was released. The Partners addressed knowledge and service gaps in mental health and suicide prevention as the eight commitments were addressed. In March 2014, this Action Plan was extended to allow for an evaluation.

Nunavut's Chief Coroner called an inquest into suicide, in January 2014, after the high level of suicide in 2013. The inquest, held in September 2015, heard testimony from family members, clinicians, researchers and partners of the NSPS. The jury produced eighty-nine recommendations in their verdict.

At the conclusion of the inquest, the Partners committed to reviewing the jury recommendations and continuing their partnership in suicide prevention. Nunavut Premier Peter Taptuna declared a crisis on October 25, 2015.

On January 8, 2016, Partners of the NSPS re-adopted the strategy's vision, goals and approaches to suicide prevention and agreed to jointly developing Action Plans, consistent with the jury's verdict.

¹ Qaujjausimajuni Tunngaviqarniq, the discussion paper is available on-line at <http://tunngavik.com/2009/04/14/using-knowledge-and-experience-as-a-foundation-for-action/>

² The Nunavut Suicide Prevention Strategy is available online at [http://gov.nu.ca/sites/default/files/files/NSPS_final_English_Oct%202010\(1\).pdf](http://gov.nu.ca/sites/default/files/files/NSPS_final_English_Oct%202010(1).pdf)

³ The NSPS Action Plan is available online at <http://www.gov.nu.ca/sites/default/files/files/nsps-eng.pdf>

RESILIENCY WITHIN

The NSPS and 2011-2014 Action Plan both called for ongoing input from stakeholders and communities. The Plan was envisioned as a living document with room to support community initiatives throughout its three-year delivery schedule. The Partners acknowledge that more progress could have been made.

Since the strategy's release in 2010, there have been culturally relevant, evidence-based programs developed in Inuit parenting and youth mental health. Inuit counsellor training programs have been developed by wellness organizations to meet the need for community counsellors and as a result of residential school treatment programs. Wellness committees and community organizations have increased capacity and seek additional support. These programs develop and foster resiliency within individuals and communities.

The jury's verdict specifically called for better engagement of stakeholder organizations in the development of a second action plan. The NSPS Partners recognize the need for meaningful stakeholder engagement and community development. A Summit for suicide prevention will be held in the spring of 2016 to meet this need and develop networks amongst communities and service providers. A longer-term plan will be produced from the Summit.

As a result, Resiliency Within, an Action Plan for Suicide Prevention in Nunavut, is a one-year plan for the 2016-2017 fiscal year. It is organized along the original eight commitments of the NSPS. It allows NSPS Partners to undertake important work to implement the jury's verdict, build on successes of the previous Action Plan and engage stakeholders for a longer-term plan to foster and support resiliency within Nunavummiut and our communities.

PARTNERS

The Government of Nunavut, Nunavut Tunngavik Incorporated, the Royal Canadian Mounted Police and the Embrace Life Council, partners in the creation of the Nunavut Suicide Prevention Strategy, have worked in close collaboration for twelve years to prevent suicide. The Partners have experienced ongoing benefits and successes of working together and acknowledge the contribution of each other.

COMMITMENT 1: FOCUSED AND ACTIVE APPROACH

Transforming the way suicide prevention happens in Nunavut requires focused and active participation by the Partners, stakeholders and individuals. The GN recommits to improving its overarching approach to suicide prevention, and ensuring that each department's activities respond to the suicide crisis. In line with the jury's verdict, the Partners recognize that transforming the way suicide prevention happens requires focused and active approach by other levels of government, other levels of Inuit organizations and community organizations.

OBJECTIVE

- Mobilize organizations and individuals to participate in suicide prevention

Priorities	Lead
<p>Quality of Life Secretariat The Quality of Life Secretariat is the GN lead on development of suicide prevention, intervention and postvention strategies and action plans, interdepartmental coordination for implementation and reporting. The Quality of Life Secretariat is headed by an Associate Deputy Minister and reports directly to the Minister responsible for Suicide Prevention. <i>Jury recommendation 1.a.36 and 2.a.i.3</i></p>	<p>GN Health</p>
<p>Nunavut Suicide Prevention Summit A Summit will be held in early 2016 to engage stakeholder organizations at all levels (national, territorial, Inuit, regional and community) in the development of a long-term Action Plan and fulfilling the commitments of the Strategy. Partners will incorporate Inuit Qaujimagatuqangit and develop a research agenda. <i>Jury recommendation 1.a.3, 1.a.6, 1.a.30, 2.f and 1.a.22</i></p>	<p>GN Health</p>
<p>Human Resources A dedicated NTI staff person to focus on suicide prevention and mental health from an Inuit organization. <i>Jury recommendation 1.a.33</i></p> <p>NTI in-kind contributions include advocacy, research, compiling of data and briefing notes for Board of Directors, ISCDAC and Article 32 working group, acting on resolutions and incorporating into action items related to suicide prevention.</p>	<p>NTI</p>
<p>Protocols Create, update, implement and monitor cross-departmental and cross-sector protocols related to suicide prevention, response and follow-up. <i>Jury recommendation 1.a.9 and 2.a.iii.4</i></p>	<p>GN Health</p>

Inuit Social Cultural Development Advisory Council

The ISCDAC and Article 32 working group shall meet biannually with suicide prevention as a standing agenda item. This will provide an opportunity for stronger engagement of RIAs and community stakeholders in guiding and strengthening collaborative efforts in suicide prevention.

NTI

COMMITMENT 2: CONTINUUM OF MENTAL HEALTH SERVICES

Providing a comprehensive continuum of care- from diagnosis to clinical counselling to community-based Inuit healing- will improve well-being and reduce the level of risk. The Partners commit to working together to address the current gaps in service, to build a larger cadre of mental health professionals and to improve the cultural appropriateness of mental health services.

Objectives

- Nunavummiut have access to a continuum of mental health services

Priorities	Lead
<p>Mobile Trauma Response Team Ilisaqsivik’s mobile trauma response team provides care, counselling and healing to Inuit communities and Inuit language clients across the territory with four counsellors. <i>Jury recommendation 1.b.i.2</i></p>	Ilisaqsivik (GN Health)
<p>Family Oriented Safety Plans Train mental health staff to increase the knowledge and skills to effectively develop safety plans with family members and provide culturally appropriate counselling. <i>Jury recommendation 2.a.iii.5</i></p>	GN Health
<p>Mental Health in Corrections The department of Health will base a registered mental health nurse in Makigiarvik, available by TeleHealth for the other correctional facilities, to assess and treat inmates. <i>Jury recommendation 1.b.i.2</i></p>	GN Health
<p>Youth and Addictions Positions Fill the Youth Mental Health Specialist and Addictions Specialist positions within the Department of Health. <i>Jury recommendation 2.a.iii.3</i></p>	GN Health
<p>Facility Standards Review the operations of the mental health facilities in Iqaluit and Cambridge Bay. Develop facility standards. Develop operational plans for the facility in Rankin Inlet that can be implemented once building renovations are complete. <i>Jury recommendation 1.a.10</i></p>	GN Health

<p>Inuktitut Toll-free Telephone Counselling Iisaaqsivik provides toll-free telephone counselling to clients across the territory in Inuktitut and English, using their base counsellors. <i>Jury recommendation 1.b.i.2</i></p>	<p>Iisaaqsivik (GN Health)</p>
<p>Psychiatric Nursing Standards Ensure consistent delivery of quality mental health services through the development of standards for Community Psychiatric Nurses practicing in Nunavut. <i>Jury recommendation 1.b.i.2</i></p>	<p>GN Health</p>
<p>Mental Health Act Finalize the review of the Mental Health Act, including provisions that allow for information sharing and greater family involvement in responding to suicide risk and attempts. <i>Jury recommendation 2.a.iii.5</i></p>	<p>GN Health</p>

COMMITMENT 3: EQUIP YOUTH TO COPE WITH ADVERSITY

Much more can be done to ensure that exposure to adverse life events or negative emotions does not lead to negative behaviour. The Partners commit to provide a stronger protective foundation for youth to realize their true potential, including but not limited to public campaigns against physical and sexual assault and parenting classes. In addition, the Partners commit to provide training opportunities for youth to cope with negative emotions, such as providing anger management courses, mental health related school supports, and greater access to healthy activities such as sports or on the land camps.

Objectives

- Equip our growing youth population with skills and knowledge

Priorities	Lead
<p>Youth Mentorship Program Pilot the replication of a successful afterschool youth program which is run by high school students. The program provides positive social interaction, builds life skills, and provides opportunities to interact with local Elders. <i>Jury recommendation 2.a.iv.2</i></p>	GN Health
<p>Train Staff to Integrate Be Safe! in Classrooms Once approved for use in a program of study, educators will require training on how to use this resource. This will be done through dedicating in-servicing time or other mechanisms for delivery of department-mandated training to schools. <i>Jury recommendation 2.a.ii.1</i></p>	GN Education
<p>Makimautiksatsat Youth Camp Facilitator Training Makimautiksatsat is an evidence-based youth camp which equips Nunavut youth with critical life skills and knowledge that foster positive mental health and wellness. This funding will allow delivery of seven facilitator training workshops. <i>Jury recommendation 2.a.iv.2, 1.b.ii and 2.f</i></p>	Qaujigiartiit Health Research Centre (GN Health)
<p>Hunter Education Program Develop a Hunter Education program to encourage knowledge about harvesting methods and protocols including Inuit Qaujimagatuqangit. <i>Jury recommendation 2.a.iv.2 and 1.b.ii</i></p>	GN Environment
<p>Review and Pilot Resources The Department of Education will formally review Be Safe!, Arctic Shield and, as resources permit, other third party programs to ensure they appropriately support Nunavut curricular outcomes and are placed in the appropriate level/range. Any necessary adaptations will be undertaken (such as translation, images, content modification) to ensure it is appropriate for Nunavut students. This results in pilot testing and seeking formal approval for use in schools. <i>Jury recommendation 2.a.ii.1, 2.a.ii.4</i></p>	GN Education

<p>Expand K-2 Guided Reading Books Development of classroom sets of levelled guided reading books is ongoing for Inuktitut. Identification of key themes and topics and linkages to curricular outcomes is to be followed by the production of either additional classroom books or supplementary books which can be shared with the public.</p>	<p>GN Education</p>
<p>Review Nunavut Health Curriculum Conduct a review of existing K-12 Health outcomes with an initial focus on K-9 in order to ensure that there are age and developmental stage appropriate expectations for learners in relation to social emotional resources. This is the precursor to piloting or implementing third-party learning resources. The results of the review will be shared with all NSPS partners, by September 2016, to obtain additional input. <i>Jury recommendation 2.a.9 and 2.a.ii.2</i></p>	<p>GN Education</p>
<p>Social Emotional Learning Programming Review evidence-based programming that is suitable for use by mental health staff in various settings for school-aged children/youth to facilitate social emotional learning. Select an appropriate program and develop a plan for it to be piloted and/or adapted for use in Nunavut. <i>Jury recommendation 1.a.28 and 2.a.7</i></p>	<p>GH Health</p>
<p>Youth Programming Communications Youth Center Environmental Scan to be shared and communicated to all communities through social media communications, with a focus on sharing best practices on youth-focussed health & wellness activities and youth engagement. <i>Jury recommendation 1.a.17</i></p>	<p>NTI</p>

COMMITMENT 4: TRAINING

Nunavummiut wish to be able to provide support to friends, neighbours or clients who may be at risk of suicide. Training such people to recognize the signs of suicidal ideation, and equipping them with the tools and techniques to talk to people at risk and link them to proper care, will help make Nunavut communities responsive to suicidal behaviour. Nunavut-specific suicide intervention training will be delivered across the territory to people who work with high-risk segments of the population, and to others who wish to be leaders in suicide intervention within their community. Furthermore, Partners recognize the importance of training frontline staff, particularly those new to their positions, on the history of Nunavut, Inuit culture, cultural sensitivity, risk and protective factors and prevention measures.

Objectives

- Individuals feel competent providing support, in their jobs and as community members

Priorities	Lead
ASIST Delivery, Train the Trainer, Evaluation Uqaqatigiiluk! Talk About It! Applied Suicide Intervention Skills Training (ASIST) requires updated materials, additional trainers, especially Inuit language trainers, expanded delivery and evaluation. <i>Jury recommendation 1.a.19, 1.a.19.b, 1.a.20, 2.a.3, 2.a.4, 2.a.vi.1</i>	GN Health
Cultural Sensitivity Training Partners will develop and pilot a training program, in-person and online delivery, for frontline staff on the history of Nunavut, Inuit culture, cultural sensitivity, cultural safety, risk and protective factors and prevention measures. <i>Jury recommendation 1.a.12, 2.a.v.1 and 2.b</i>	GN (Health, FS, C&H, Education) RCMP

COMMITMENT 5: RESEARCH FOR UNDERSTANDING

Partners recognize that research regarding suicide in Nunavut is critical to better understand the issue, inform policy and program decisions, and allow for accountability based on results rather than public or political perceptions. The Partners commit to undertake, support and share research that allows for suicidal behaviour to be better understood. The Partners also agree to monitor and evaluate activities related to the implementation of the Nunavut Suicide Prevention Strategy

Objectives

- To better understand the issues, inform policy and program decisions

Priorities	Lead
<p>Mental Health Data Develop capacity to collect and report comprehensive data regarding suicide attempts and completions in order to inform suicide prevention efforts. <i>Jury recommendation 2.a.10</i></p>	GN Health
<p>Evaluate Inuit Specific and Nunavut Healing Programs Evaluating Mamisarvik and Ilisaqsivik’s Inuit specific healing and treatment programs will provide better understanding of their results and value. <i>Jury recommendation 1.b.i.2</i></p>	GN Health
<p>Collect Data on Student Drop-outs An analysis of how best to identify and report drop-outs on a consistent basis will be done. Data will be compiled at the school level, regionally and territorially to better understand the problem of drop-outs and to develop an action plan to address the issue. <i>Jury recommendation 2.a.ii.3</i></p>	GN Education
<p>Suicide Prevention Research Partnerships Partners to support suicide prevention research through research agenda development and partnership establishment. <i>Jury Recommendation 1.a.23</i></p>	NTI

COMMITMENT 6: COMMUNICATE WITH NUNAVUMMIUT

General information about mental health, suicide and best practices in suicide prevention must be easily accessible to Nunavummiut. In addition, information about the ongoing implementation of this Strategy and Action Plan must be communicated to Nunavummiut in an inclusive and open manner. The Partners commit to continuing the public engagement process.

Objectives

- Public engagement through informed and meaningful dialogue

Priorities	Lead
<p>Mental Health Promotion/ Public Awareness Campaign Develop and design a framework for a mental health awareness and suicide prevention campaign in Nunavut. Begin production of campaign. <i>Jury recommendation 1.a.18 and 2.a.i.4</i></p>	GN Health
<p>Social Responsibility Campaign A public awareness campaign targeted at responsible use of beverage alcohol will be developed, with youth being one audience. <i>Jury recommendation 2.a.iii.2</i></p>	GN Finance
<p>CASP Conference The Kamatsiaqtut Helpline will host the Canadian Association for Suicide Prevention (CASP) Conference in Nunavut in October 2016. This conference will identify gaps, review best practices and allow for north-to-north learning. <i>Jury recommendation 2.h</i></p>	Kamatsiaqtut (GN EIA and NTI)
<p>Naniiliqpita: Suicide Prevention NTI to dedicate a section of Naniiliqpita or similar publications to communicate updates around ongoing suicide prevention efforts and resources available to Inuit. <i>Jury recommendation 1.a.27, 1.a.36</i></p>	NTI
<p>Meaningful Language and Terminology Inuit Uqausinginnik Taiguusiliuqtiit develops and standardizes the Inuit language and is researching meaningful terms for emotions, mental health and suicide. NSPS Partners are participating. <i>Jury recommendation 1.a.40 and 2.f</i></p>	IUT (GN C&H)

COMMITMENT 7: EARLY CHILDHOOD DEVELOPMENT

The Partners recognize the primary role that maternal, newborn and child health programs and parental involvement play in providing protective factors for Nunavummiut. Early childhood development opportunities, access to quality daycare, access to proper nutrition and measures to ensure that children are protected from abuse and neglect will provide protective factors to Nunavut children that will stay with them throughout their lives and break the cycle of historical trauma.

Objectives

- Fostering healthy development in the next generation

Priorities	Lead
<p>Preventing Child Sexual Abuse The Department of Family Services will develop an evidence informed strategy to prevent, assess, identify and respond to child sexual abuse.</p>	<p>GN Family Services</p>
<p>Inunnguiniq Parenting Program Facilitator Training Inunnguiniq Parenting Program, based on needs identified by Nunavummiut, includes Inuit perspectives on child-rearing, roles of parents, stages of development, positive discipline methods, wellness counselling and healing from trauma, and exploration of ourselves through reflection. Elders participate in the delivery of the workshop. This funding will allow five facilitator training programs. <i>Jury recommendation 2.a.iv.2, 1.b.ii and 2.f</i></p>	<p>GN Family Services</p>
<p>Support Parents and Communities Create seven Family Resource Worker positions to provide additional support to families and communities in partnership with CSSW positions across Nunavut. The Family Resource Workers will provide support to families through parenting groups; work with schools to provide supports for children who are deemed at medium to high risk; develop and facilitate information sessions for families and children; provide support to foster families; and conduct regular visits with children in care. The outcome of this initiative will be stable, experienced and trusted teams with knowledge of Inuktitut, Inuit culture and the communities that will assist in further developing the health and wellness of communities from within. <i>Jury recommendation 2.a.iv.2</i></p>	<p>GN Family Services</p>
<p>Family Violence Shelter Additional financial resources to ensure that Family Violence facilities are adequately resourced and able to operate at the level required; provide training opportunities for Family Violence Shelter employees; and support the development and implementation of programs and services to reduce the incidence of family violence in Nunavut.</p>	<p>GN Family Services</p>

<p>Additional Community Social Service Workers Two additional CSSW staff to the Iqaluit Area Office for providing care for vulnerable Nunavummiut who are at high risk, increase the ability of the office to provide service on a timely basis and improve its ability to meet workload and compliance standards.</p>	<p>GN Family Services</p>
<p>Expansion of Guided Reading Books for Early Childhood The Department of Education has initiated a literacy framework that incorporates levelled literacy and guided reading and writing instruction for schools. In order to support childcare facilities and promote early literacy and school preparedness, it will explore the development of pre-K reading levels and the production of guided reading books and educator resources to support quality instruction for early childhood education, including social-emotional topics with NSPS partners. <i>Jury recommendation 1.a.15</i></p>	<p>GN Education</p>

COMMITMENT 8: SUPPORT COMMUNITY DEVELOPMENT

Partners agree that improving well-being is instrumental in preventing suicide. Communities must play a central role in all aspects of this Strategy, but a primary role will be to provide programs and services that encourage and build healthier individuals and families. To enable communities to identify and act on their own community-development priorities, the Partners will ensure that communities can access funding for their social and cultural priorities with an emphasis on increasing community-development capacity.

Objectives

- Support community members to engage in local solutions

Priorities	Lead
<p>Firearms Safety In partnership with Hunters & Trapper Organizations, Wildlife Offices and the RCMP, the department of Health will continue the firearms safety program, including the purchase and distribution of trigger locks, training trainers for the Canadian Firearms Safety Course and developing materials to promote gun safety. <i>Jury recommendation 1.a.30</i></p>	<p>Community Organizations (GN Health)</p>
<p>Lock Boxes Pilot Elders in Igloodik built boxes to store fuel and protect youth from impulsive behaviours and addictions. Funding will be available by contribution program to pilot test, the building of lockable boxes and distribute, with priority to programs that actively promote intergenerational experiences. <i>Jury recommendation 1.b.ii and 1.a.30</i></p>	<p>Community organizations (GN Health)</p>
<p>Pilot Grief Support Networks Community organizations will be supported to pilot intergenerational grief support networks. Funding will be available by a contribution program to allow for community members to obtain training, rent space, pay honorarium to elders and purchase supplies. <i>Jury recommendation 2.a.iii.1, 2.e, 1.b.ii, 2.f and 1.a.30</i></p>	<p>Community organizations (GN Health)</p>
<p>GREAT Program The GREAT program is a pilot collaboration between the Career Development Services and Income Assistance Divisions. The purpose of the program is to help income assistance clients transition into the labour force and successfully meet the obligation of employment and/or education or training productive choices.</p>	<p>GN Family Services</p>

<p>Wellness Committees Increase capacity of local Wellness Committees to plan and take action regarding suicide prevention and other issues of local concern or identified opportunity. (It should be noted that each community identifies local priorities and develops their own plan, thus, suicide prevention may or may not be included.) <i>Jury recommendation 1.a.30</i></p>	<p>GN Health</p>
<p>Trapper Training and Support Program Develop a Trapper Training and Support Program to encourage participation as a lifestyle and source of income. <i>Jury recommendation 2.a.7</i></p>	<p>GN Environment</p>
<p>Men and Boys Initiatives (MBI) Grant The MBI provides grants to individuals, community non-profit organizations and municipal corporations to provide ongoing services for men and boys of all ages or develop new initiatives to target the specific needs of boys and young men between the ages of 15 and 24.</p>	<p>GN Family Services</p>
<p>Land Program Assessment Assess the existence of community organizations in order to identify culturally-based suicide prevention and wellness land programs that could be replicated across the territory. <i>Jury recommendation 2.a.7</i></p>	<p>GN Environment</p>
<p>Support Local Alcohol Education Committees Increase supports to Alcohol Education Committees in communities through honoraria for members to ensure an adequate complement of members of the Committees. <i>Jury recommendation 2.a.8</i></p>	<p>GN Finance</p>
<p>Social Assistance Review The Department of Family Services is reviewing all programs under Income Assistance and will make changes to ensure they meet the needs of all Nunavummiut. In accordance with Sivumut Abluqta, the Department is working to ensure that those who truly need the support receive it, while also investing in economic development to secure a prosperous future for all.</p>	<p>GN Family Services</p>

REVIEWING PROGRESS

The Partners have been working together for twelve years and for the past five years have been guided by the Nunavut Suicide Prevention Strategy. A June 2015 evaluation of the strategy identified the need for baseline data to enable long-term monitoring and program reviews.

The Partners acknowledge important work initiated by the Chief Coroner and the RCMP to improve baseline data collected. This work will be expanded by the department of Health's mental health data collection and department of Education's student drop out data collection. This information is critical for long-term reviews.

Partners recognize that reviewing a one-year Action Plan, in isolation of the history of working together and with limited baseline data, is difficult. The review of this one-year Action Plan will focus on short-term indicators.

Commitment	Objective	Indicators
1. Focused and Active Approach	Organizations and individuals mobilize to participate in suicide prevention	<ul style="list-style-type: none"> Stakeholders reporting understanding of individual and organizational roles in suicide prevention Inter-departmental and interagency opportunities to collaborate Local, regional and territorial committees established and meeting regularly
2. Continuum of Mental Health Services	Nunavummiut have access to a continuum of mental health services	<ul style="list-style-type: none"> Stakeholders reporting awareness of programs, services and supports Mental Health employees reporting understanding of standards and procedures Stakeholders reporting participation in safety plans and counselling for at risk family members
3. Equip Youth to Cope with Adversity	Equip our growing youth population with skills and knowledge	<ul style="list-style-type: none"> Facilitators report capabilities in running youth programs Number of attendees in training programs Partners understand next steps in introducing social-emotional curriculum Resources reviewed, adapted and pilot tested
4. Training	Individuals feel competent providing support, in their jobs and as community members	<ul style="list-style-type: none"> Stakeholders reporting competence to provide support Front-line staff self-reporting understanding of Inuit culture, history, risk and protective factors Number of attendees in training programs

5. Research for Understanding	Better understanding of the issue, informed policy and program decisions	<ul style="list-style-type: none"> • Funders report using Inuit-specific program evaluations in their work. • Stakeholders report accessing relevant baseline data
6. Communicate with Nunavummiut	Public engagement through informed and meaningful dialogue	<ul style="list-style-type: none"> • Stakeholders reporting awareness of programs, services and supports • Stakeholders report Inuit language terms are meaningful • Number of attendees of conference
7. Early Childhood Development	Healthy development in the next generation	<ul style="list-style-type: none"> • Facilitators report capabilities in running parenting programs • Number of attendees in training programs • Clients report additional support available
8. Support Community Development	Support community members to engage in local solutions	<ul style="list-style-type: none"> • Stakeholders report access to supports • Number of local committee members engaged • Number of clients transitioned to labour force

GLOSSARY

At-risk - An individual who is more likely or at greater potential to engage in suicidal ideation or behaviour.

Child – Children from the age zero to 12 years.

Help seeking - When an individual asks for help or support in order to cope with adverse life events or other difficult circumstances.

Interagency collaboration – When people from different organizations join together for the purpose of achieving common goals; in this case, improved mental health and wellness.

Outcomes – Refers to what an action/initiative is expected to achieve through its implementation.

Postvention - A strategy or approach that is implemented after a death by suicide has occurred. It is aimed at supporting families, friends, colleagues and others grieving as a result of a suicide.

Protective factors - Refers to anything that helps prevent or reduce vulnerability to suicidal behaviors. It includes capacities, qualities, environmental and personal resources that drive individuals towards growth, stability and health.

Resilience - Capacities within a person that promote positive outcomes, such as mental health and wellbeing, and provide protection from factors that might otherwise place that person at risk of suicide.

Risk factors - Characteristics or conditions that increase the chance that a person may try to take their own life. The more risk factors, the greater the risk of suicide ideation or behaviour.

Social Determinants of Health - Refers to the range of factors that influence the health status of individuals or populations. Key social determinants of Inuit health include: quality of early childhood development; culture and language; livelihoods; income distribution; housing; personal safety and security; education; food security; availability of health services; mental wellness; and the environment.

Suicide - The act of purposely ending one's life.

Suicidal Ideation – Thoughts about attempting or completing suicide.

Suicide Risk – The risk of suicide in the near future.

Suicide Prevention - Actions or initiatives to reduce the risk of suicide among a population or specific target groups.

Support – Assistance with the burden or the weight of an issue, problem or adversity. Support can take many forms, including information provision, services and face-to-face counselling.

Trauma – Refers to an experience that overwhelms an individual's capacity to cope. Trauma can include events experienced early in life—for example, as a result of child abuse, neglect, disrupted attachment or witnessing violence—or later in life, such as violence, accidents, natural disasters, war, sudden unexpected loss and other life events that are out of one's control.

Youth - Young people from the age of 13 to 24 years

APPENDIX

Partners have been working together to reduce suicide for twelve years and have, in that time, seen additional mental health staff in communities, access to treatment, individuals trained in intervention and resources available. The partnership is ongoing and has implemented several jury recommendations.

Priorities	Lead
<p>Suicide Crisis In October 2015, Premier Peter Taptuna and Cabinet declared suicide a crisis in Nunavut. <i>Jury recommendation 2.a.1</i></p>	<p>Government of Nunavut</p>
<p>Inuusiq Committee The Government of Nunavut has established the Inuusiq Committee, an interdepartmental committee to coordinate its participation in the NSPS Implementation Committee to facilitate communication, exchange of information and implementation of the NSPS. <i>Jury recommendation 1.a.4</i></p>	<p>GN Health</p>
<p>Engagement in the Implementation Committee Decisions under the umbrella of the NSPS and Action Plan are made at the Deputy Minister level, through the Quality of Life Committee, where executive-level approval is necessary. Modifications to the Strategy or Action Plan and tabling of documents, will be approved by Cabinet. <i>Jury recommendation 1.a.2</i></p>	<p>GN</p>
<p>Recommitment to the NSPS NSPS leaders recommitted to the strategy, without amendment. Leaders committed to the development of this Action Plan by March 2016 and a process for engaging stakeholders in the development of a longer term Action Plan. <i>Jury recommendation 4.a, 1.a.37 and 5.b</i></p>	<p>NSPS Partners</p>