



# **NB FASD Dream Catcher Service Delivery Model**

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# Conflicts of Interest Declaration

I have no conflicts of interest to disclose



# Goals & Objectives



**During this presentation, the participant will:**

1. Reflect on the importance of cultural background as it ties in with the health of our aboriginal communities
2. Reflect on the process behind creating a culturally safe space to open dialogue with families around FASD
3. Be Introduced to the “NB FASD Dream Catcher Service Delivery Model” as it pertains to merging Western Medicine with First Nations Science



# New Brunswick's First Nations/Premières Nations du Nouveau-Brunswick



Indigenous population in NB: 23,815  
Indigenous population living in First Nations Communities:  
16,144  
Indigenous & Northern Affairs Canada, 2018



# Fetal Alcohol Spectrum Disorder

The Prevalence of Fetal Alcohol Spectrum Disorder (July 2018) Canada FASD Network

99 Days to 9/9 - Top 10  
#2 - Day 60  
oursacredbreath.com

**FASD**  
is recognized as  
one of the leading  
known causes  
of developmental disability  
in the western world.  
Compared with other  
common disabilities,  
at an estimated prevalence  
of 4%,  
**FASD is:**

2.5x  
more  
common  
than  
Autism  
(1.52%)

19x  
more  
common  
than  
Cerebral  
Palsy  
(0.21%)

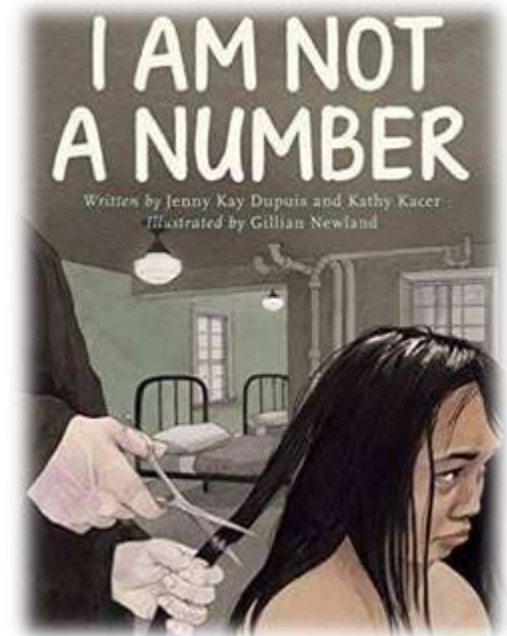
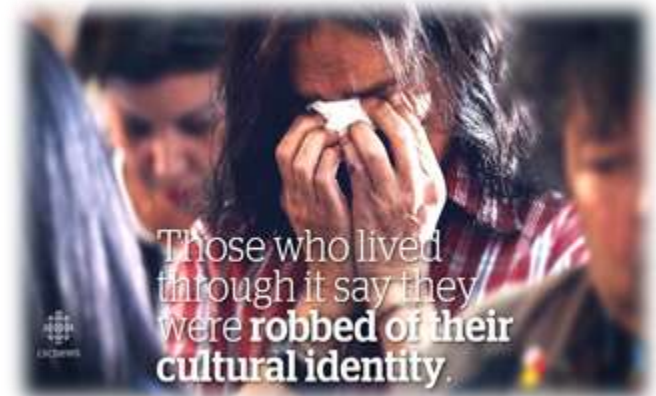
28x  
more  
common  
than  
Down's  
Syndrome  
(0.14%)

40x  
more  
common  
than  
Tourette's  
Syndrome  
(0.10%)

While this is for Canada, statistics are likely similar in other countries. In Canada, although FASD is most prevalent, it is least understood, least supported and grossly underfunded. This ne... [See More](#)

# Consequences of Trauma

- Residential Schools
- « The Sixties Scoop by child welfare »
- Missing and murdered women
- Stigmatisation
- Poverty, isolation, false hope
- Lack of trust with the Health Care System
- Intergenerational traumas
- Loss of language and culture



# Reconciliation ... First step towards building a new relationship



1. Began in the fall 2014;
2. True and respectful relationships;
- 3. Assessments and identification of community needs;**
4. Conflict resolution opportunities to break down existing silos;
5. Deliver a service that is culturally appropriate and safe.



# Building our Model....

- **Support and invest** in Indigenous people, families and communities;
- **Establish respectful relationships** by integrating FN communities, norms, cultural values and resources into our model of care.
- **Empower** the development and assist in the design of First Nations own healing and reconciliation models to address the TRC recommendations on FASD.





# Elders Guiding Principles

- **Self-determination:** Indigenous people are best to make decisions when it comes to their people and communities;
- **Intergenerational:** children learn through roles playing & modeling. **All members of the community** have a responsibility to help children learn to live in ways that promote their health;
- **Non-discriminatory:** Need to be involved in conversations regarding their health;



# Elders Guiding Principles

- **Holistic:** important to balance all 4 quadrants: physical, mental, emotional, spiritual;
- **Respect of culture and language:** integrating ceremonies, sacred medicines, First Nations ways of knowing, into their healing journey;
- **Shared responsibility for health:** Important to build relationships with health care providers and organizations – merging of the 2 worlds (Traditional western medicines & First Nations Science).



# Our Goal in Building the Model

- To **decolonize the practice of healthcare service delivery models** in a culturally appropriate manner that reflects FN peace making processes and addresses the deep-rooted systemic conflicts of FASD.
- To **empower and build respectful relationships** with the Mi'gmaq and Maliseet people of the province of NB.
- To **support and invest** in First Nations people, families and communities.
- To **empower the development and assist** in the design of FN own healing and reconciliation models to address the TRC recommendations on FASD.
- To **invest in change** that supports FN communities on FASD and communicate FASD knowledge in a safe culturally, and appropriate manner.
- To **enhance and assist in the development of strategies** to address the imbalances that currently exist within FN communities through the peace making document “Apigsigtoagen”.



# Sharing the Paradigms

**Merging of Traditional Western Medicines  
with First Nations Science.**

**Model of Reconciliation!**





**Treating and working towards a peacemaking process and implementation in our health care systems the Call to Action # 33 and # 34 recommendations from the Truth and Reconciliation Commission of Canada (2015) .**



# Dream Catcher's 7 step Process to a Healing Journey

- 1. Addressing unbalance and conflict** – identification of client and family needs;
- 2. Calming Down:** creating a safe space, listening, reassuring, cultural appropriate practices (healing circle, land based, smudging, sacred objects);
- 3. Exploration of emotions and rethinking** – Reframing challenges in a more positive way;



# Dream Catcher

## Healing Journey – 7 step process

4. **Identification stakeholders & Community Resources** – culturally appropriate and safe;
5. **Healing ceremony** (meeting) – led by client or family in traditional circle – Shared responsibility;
6. **Ongoing Follow-up and Support** – Circle keepers;
7. Client's Journey to **Healing of his Spirit** – Reconciliation.



# 8 - Humanity Feathers

**Respect**  
**Honesty**  
**Trust**  
**Love**  
**Courage**  
**Wisdom**  
**Humility**  
**Spirit**







**1<sup>st</sup> side**



**At the heart of the web is the individual with FASD, the family, the community and their culture. It's about creating a safe space to address immediate human basic needs and systemic trauma.**





## 2<sup>nd</sup> Side

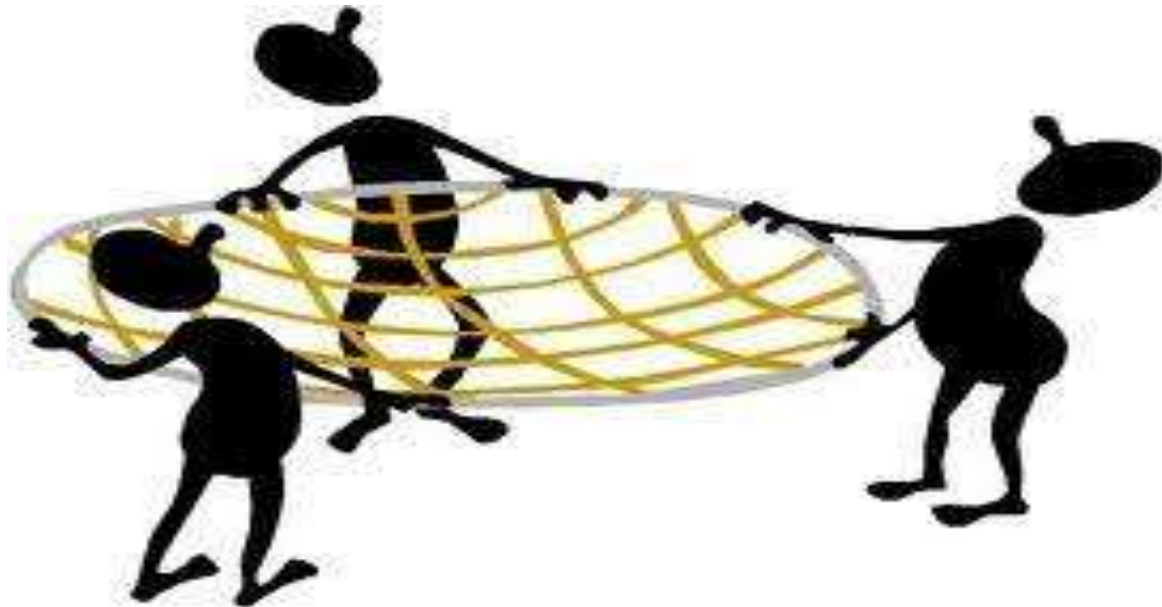


**Creation of the web  
webbing traditional western medicines with First  
Nations science. It's about addressing what we don't  
see and hear by intergrating proper services and  
support (community and health care), using a trauma-  
informed - women centered approach, and involving  
all governmental agencies.**



**The Dream Catcher Service Delivery Model cannot be separated into 2 separate spaces, each sides needs to interconnect together to sustain, support and provide safety to the individual with FASD in order for them to achieve their full potential.**

**“The energy needs to keep flowing!”**



SHARING THE PARADIGMS

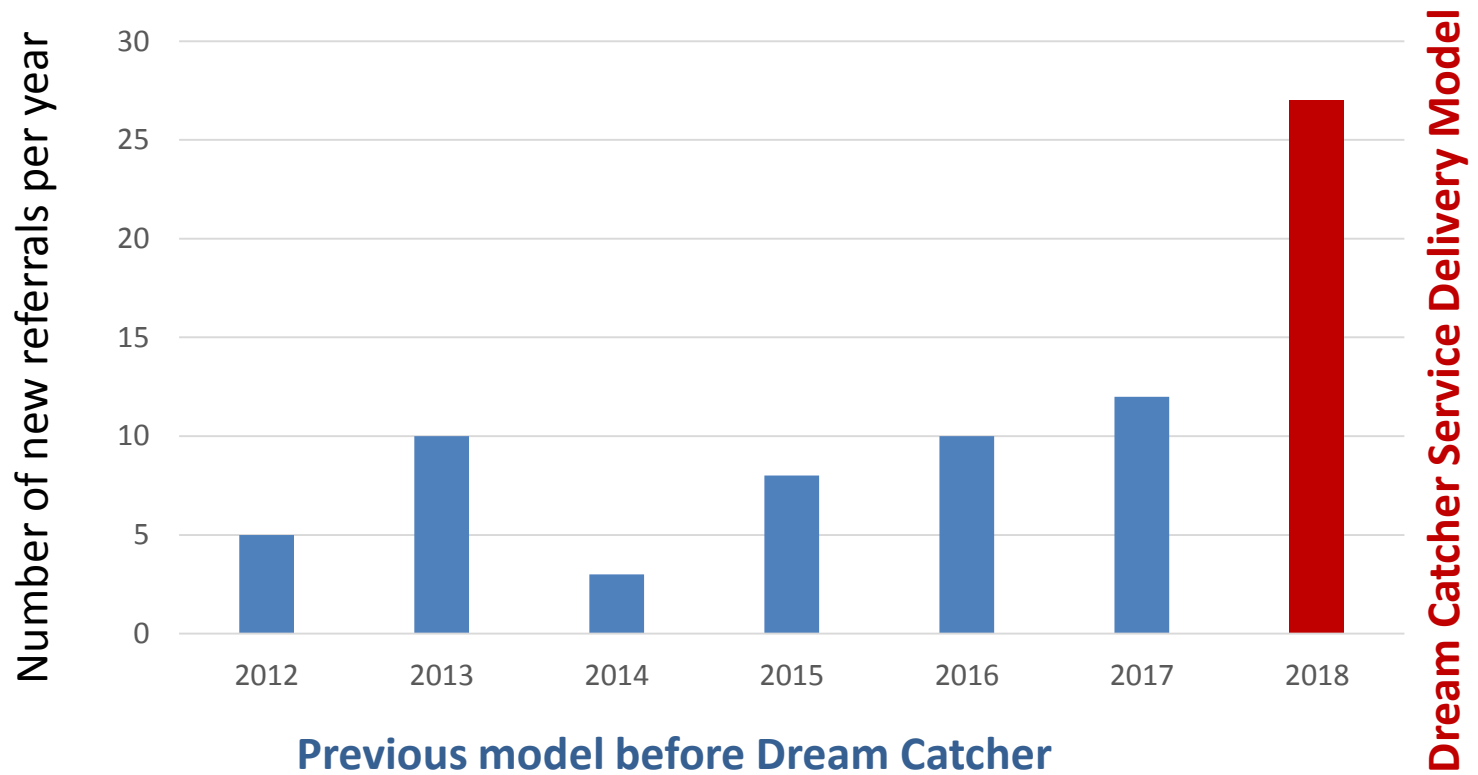


# Effects of the Dream Catcher

- Engagement of client and family in their healing journey
- Significant trauma disclosure
- Increase in health care services (Jordan's Principle)
- Decreased in duplication of services
- No more “no shows”
- Help clients return to school
- Prevented clients from going to jail, or even decreased the # of charges laid
- Keeping families intact and in their communities by providing proper services
- Gives families HOPE!



# Preliminary Results



FASD is not exclusively an indigenous issue – this stereotype was perpetuated in the late 20th century, but FASD occurs in all societies around the world that consume alcohol. No biomedical research indicates that alcohol teratogenesis differs between Aboriginal and non-Aboriginal Canadians

#FASDay2018









Every child  
deserves a  
life of hope.

[theindigenousinstitute.org](http://theindigenousinstitute.org) | [#hopewarrior](https://twitter.com/hopewarrior)



# The NB FASD Dream Catcher Service Delivery Model” - Video

Dreamcatcher - Video



# References

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