



The Nelson Project
Building a Relationship - Not a Program



SUPPORTING AT-RISK MEN IN THE NORTH

FAMILY & COMMUNITY **PERSPECTIVES**

THE NELSON PROJECT REPORT 2023

ACKNOWLEDGEMENTS

The Nelson Project and Duu Chuu Management Consulting acknowledge the families who so willingly shared their stories with us to influence and create lifestyle change through this project research. As well as those who chose not to participate in this research, we acknowledge your life's journeys.

To the many families who we did not reach and who have a 'story' to share, we acknowledge that your contributions will be welcome as we move forward with creating a 'space' for the men who need 'a hand up'.

Your contributions will help with the development of a pathway for healthier lifestyles for the men in your/our lives.

Company

Duu Chuu Management Consulting was contracted by The Nelson Project to carry out the next phase (which is research based) of building a relationship-based model to support at-risk-men. Duu Chuu Management is a Yukon based company, owned and operated by Mary Jane Jim and Timothy Cant. The company has worked for and with Yukon communities for well over 25 years. It is their values, knowledge, and respect for the people and places which is of value to the next stages in TNP research.



Bio

Mary Jane Jim has been a community and political advocate for aboriginal rights and recognition for over 40 years, both nationally and regionally. Mary Jane is currently a member of the council for the Champagne and Aishihik First Nations. She has served two terms on the Assembly of First Nations executive as the regional chief for the Yukon. During that time she was the only woman among the 10 regional chiefs. She has also served as Vice Chair to the Council of Yukon First Nations, as a director of a program at the Skookum Jim Friendship Center, and a facilitator with the Yukon Aboriginal Women's group. Using the combination of experiences and skills, Mary Jane helped to create a business in Yukon, Duu Chuu Management Consulting.

In the last few years Duu Chuu Management has facilitated various forums, from elder's councils, to First Nations governments, federal processes and a number of inter-governmental forums.

Mary Jane acknowledges her cultural background; she is a member of the 'Kajit' (crow)

clan, which is based on a matriarchal system. She also acknowledges her grandmother's grandmothers clan the Gan Ax taedi, which claims the frog moiety of the Tlingit society, in southern Yukon and southeast Alaska.

She also knows that her greatest teacher was her grandmother Annie Ned, who taught her the importance of traditional values and principles. Mary Jane completed her education in the Yukon public school system, with several years of colleges and training courses.

Disclaimer

Duu Chuu Management Consulting employees and/or associates acknowledge that we are not professional counsellors, nor do we purport to be able to assess issues related to Mental Wellness, Mental Health and matters related to Trauma, Vicarious Trauma and/or PTSD. The following words we choose carefully; therefore, the readers should know that the words we share are of Duu Chuu Management's.




EXECUTIVE SUMMARY

This research is based on the input of 26 interviewees. Interviewees were either family members of at-risk men or service providers. Interviews lasted from 1 to 2 hours. Interviewees willingly shared their experiences, knowledge, and suggestions to address the need for change in supporting at-risk men and their caregivers. As families shared their stories, it became clear that their primary focus was not on themselves, but on the lives of those they love and care for: the at-risk men. Some potential interviewees who were contacted were not able to share their experiences with us, and we respect their need for privacy.

Family members communicated that they have great love and respect for the at-risk men in their lives, but these men have been badly beaten down. They don't want them to change, rather, they want the men in their lives to have the support they need to thrive. Family members do not blame or judge the at-risk men in their lives. They acknowledge that the root causes of the distress in the lives of these men go back to early childhood engagement with Government programs and services. **For example:**

- apprehension and separation from their birth families and communities;
- various early childhood traumas and instability in the home;
- on-going engagement with Child and Family Services; and
- not functioning well in the education system, where they were labelled.

All of these sources of pain are compounded by the stigma of being 'trouble', 'not able to learn' or to have an

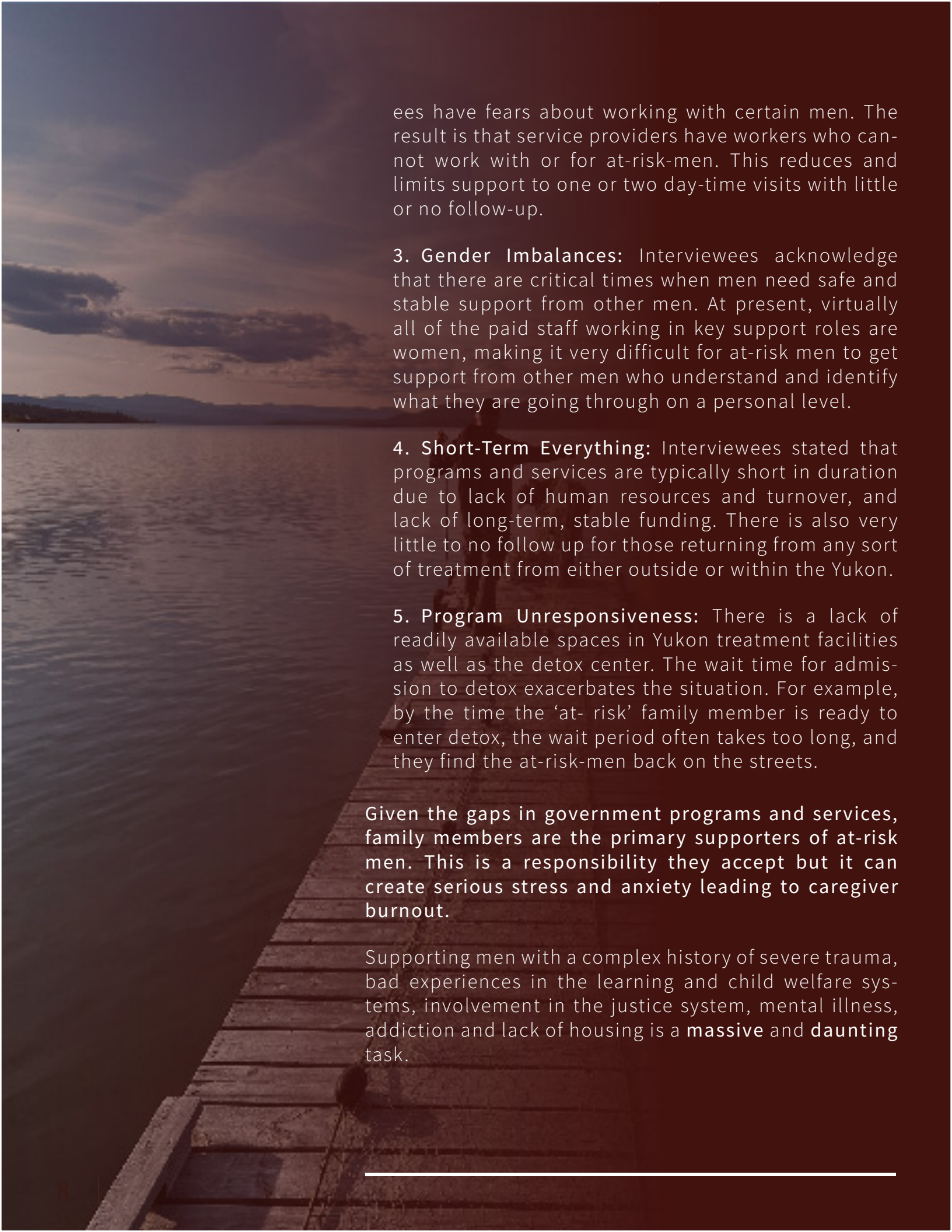
A man wearing a dark cap and a dark jacket with orange accents is working in a commercial kitchen. He is focused on a task, possibly preparing food. In the foreground, there is a large pile of bright orange salmon fillets. The background shows a stainless steel countertop and some kitchen equipment. The overall lighting is warm and slightly dim, creating a professional yet intimate atmosphere.

early learning disability undiagnosed. This stigma often follows at-risk men into the judicial system. At-risk men have had little to no experience with their birth families in their home communities, and some are ostracised by their family members and community of origin.

Families see and feel that the at-risk men they love have big hearts and are very caring. The main burden that is weighing them down is addiction. Addiction to alcohol, hard drugs, engagement in drug trafficking to sustain a drug addiction, and gaming. In addition to the addictions, families see that men have become disconnected from their core values. They need to learn healthy boundaries, better communication, the ability to deal with anger, and to feel that they are important as well.

Interviewees communicated that there is a deep and pressing unmet need for sustainable support for at-risk men in their communities. According to almost every interviewee, there is nothing in place that can meaningfully connect with at-risk men and work with them in a sustainable way. There are 5 key causes for this:

- 1. Confidentiality:** The main source of support in the communities is the First Nation Health and Wellness Department. At-risk men have serious concerns about revealing personal information to employees in those Departments for fear it will not stay confidential. This is not seen as the fault of individual employees, but an inevitable challenge in small, tight-knit communities.
 - 2. Fear Among Employees:** Some at-risk men have records of violence, including violence against women. Some of these women can be employees in Health and Wellness, or closely connected to them. Employ-
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ees have fears about working with certain men. The result is that service providers have workers who cannot work with or for at-risk-men. This reduces and limits support to one or two day-time visits with little or no follow-up.

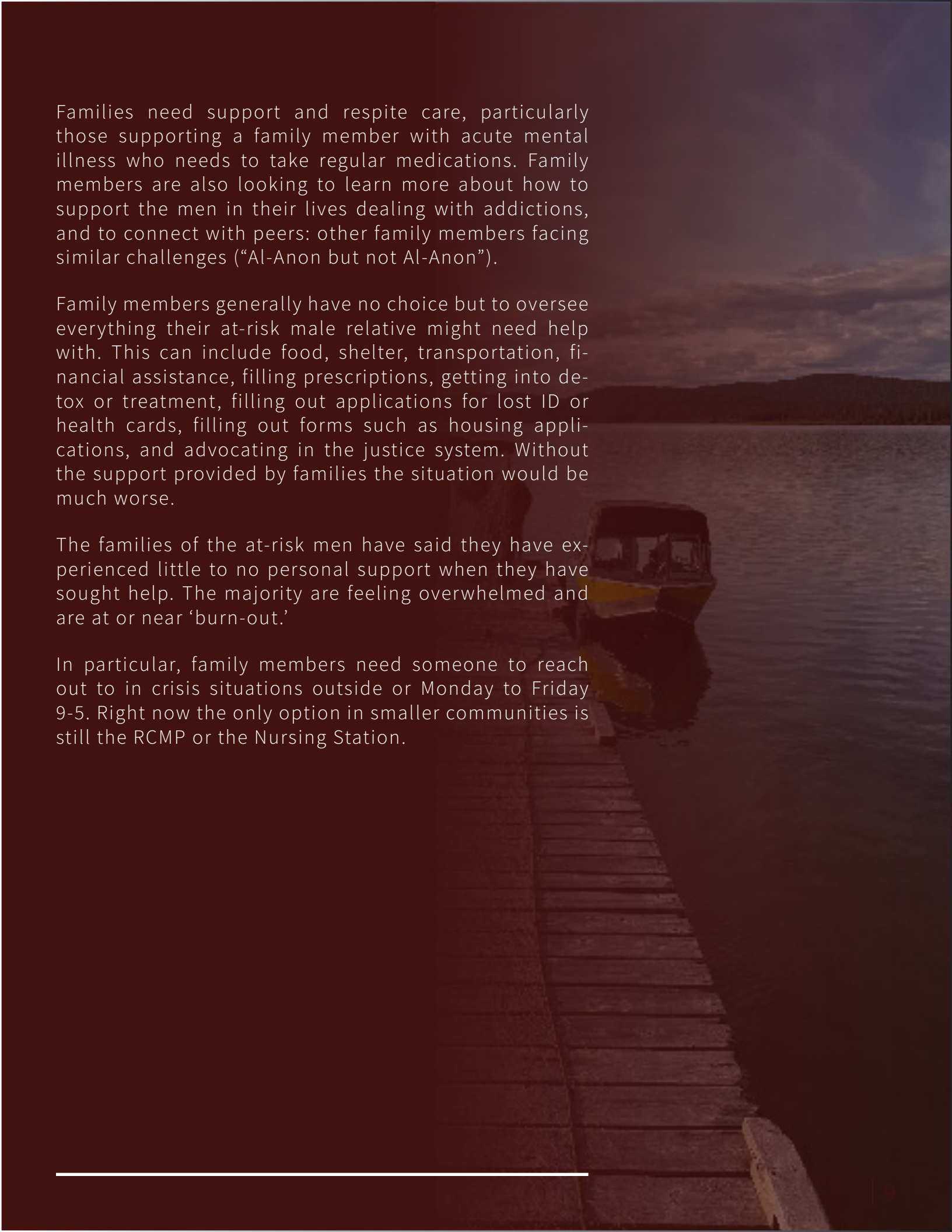
3. Gender Imbalances: Interviewees acknowledge that there are critical times when men need safe and stable support from other men. At present, virtually all of the paid staff working in key support roles are women, making it very difficult for at-risk men to get support from other men who understand and identify what they are going through on a personal level.

4. Short-Term Everything: Interviewees stated that programs and services are typically short in duration due to lack of human resources and turnover, and lack of long-term, stable funding. There is also very little to no follow up for those returning from any sort of treatment from either outside or within the Yukon.

5. Program Unresponsiveness: There is a lack of readily available spaces in Yukon treatment facilities as well as the detox center. The wait time for admission to detox exacerbates the situation. For example, by the time the ‘at-risk’ family member is ready to enter detox, the wait period often takes too long, and they find the at-risk-men back on the streets.

Given the gaps in government programs and services, family members are the primary supporters of at-risk men. This is a responsibility they accept but it can create serious stress and anxiety leading to caregiver burnout.

Supporting men with a complex history of severe trauma, bad experiences in the learning and child welfare systems, involvement in the justice system, mental illness, addiction and lack of housing is a **massive** and **daunting** task.



Families need support and respite care, particularly those supporting a family member with acute mental illness who needs to take regular medications. Family members are also looking to learn more about how to support the men in their lives dealing with addictions, and to connect with peers: other family members facing similar challenges (“Al-Anon but not Al-Anon”).

Family members generally have no choice but to oversee everything their at-risk male relative might need help with. This can include food, shelter, transportation, financial assistance, filling prescriptions, getting into detox or treatment, filling out applications for lost ID or health cards, filling out forms such as housing applications, and advocating in the justice system. Without the support provided by families the situation would be much worse.

The families of the at-risk men have said they have experienced little to no personal support when they have sought help. The majority are feeling overwhelmed and are at or near ‘burn-out.’

In particular, family members need someone to reach out to in crisis situations outside of Monday to Friday 9-5. Right now the only option in smaller communities is still the RCMP or the Nursing Station.



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