

**MEMORANDUM TO THE DEPUTY MINISTER AND  
THE ASSOCIATE DEPUTY MINISTER**

**SUBJECT:** Your meeting on November 23, 2000 with Debbie Fry, Deputy Minister, Health and Community Services, Newfoundland.

**PURPOSE:** To provide an update on solvent abuse and the apprehension/protection of children in Sheshatshui, Labrador.

**Background:**

The Innu community of Sheshatshui, Labrador, has been plagued by abnormally high suicide and solvent abuse rates for many years. Recently, the incidence of gas sniffing has increased to alarming proportions particularly among the younger children.

On November 15, 2000, Chief Paul Rich wrote to the District Manager of the Child, Youth and Family Services office requesting that they carry out their mandate for child welfare apprehension of children in critical need of protection by putting all children who are sniffing gas under the care of Social Services. It should be note that child and family services is a provincial responsibility.

*of the Province  
of Newfoundland*

On November 16, 2000, Chief Rich met with provincial officials to determine how to work out protective custody for approximately 39 children. A team of social workers is currently in the community doing assessments of the children and families. Security staff have also been hired to patrol the community. As well, an individual has been identified by Health Canada to work within the community to coordinate the current situation and to be the focal point to address this issue with federal and provincial counterparts.

The media are currently giving this story large coverage and it is anticipated that they may view this situation as being as critical as the one which occurred in Davis Inlet. They may also focus on the fact that in spite of the large amount of funding

spent on taking the children out of Davis, the treatment provided did not turn out to be successful over the long term.

**Considerations:**

( a Solvent Abuse Treatment Centre )  
Health Canada currently provides approximately \$1.8M of funding to the community for addictions services, mental health programs and the operation of the Charles J. Andrews Youth Treatment Centre in the community of Sheshatshui, with a capacity of 12 beds. In addition, the Region has recently agreed to provide \$100K towards the development of a family treatment program in Sheshatshui.

There are proposed options that have been put forward to date to address the current situation in Sheshatshui.

Health Canada:

- Health Canada has agreed to support the funding of: a community coordinator to work with the community immediately; a medical specialist with expertise who will meet with the community on Monday, November 20, 2000 to discuss treatment options and, the security service which is currently patrolling in Sheshatshui;
- Health Canada has been working closely with provincial and federal officials to collaborate on possible approaches and to access treatment services for the youth. The Regional office has maintained good mutual relationships with the community leadership and as a result have been able to work collaboratively with the community;
- The Regional office will continue to work with the Province and the Labrador Health Corporation, to provide assistance to the community;
- Health Canada is prepared to pay for the additional costs of treatment for solvent abuse (building on our current commitment).

The Community:

Chief Rich and Peter Penashue have outlined to the Health Canada Regional office their approach to the problem which includes:

- Child and Family Services identifying short term options for the placement of the children, preferably a secure detox facility;
- Working collaboratively with Health Canada the community would then coordinate the placement of these children within the National Solvent Treatment program, preferably in or near their community (ie bring trained staff into the community);

- In the long term, receiving financial support from DIAND and Health Canada to maintain ongoing counselling and community support programs and consideration for the funding of a family treatment facility.

The Province:

- Two working teams currently in place in the community to do the assessments and to look at placement options;
- The working teams will be meeting with the larger group of community members to present their recommendations;
- In addition, treatment programs will be offered to the parents;
- The question is how to provide detox services in the community and to do this they are looking at the possibility of utilizing the Treatment Centre, the Women's Shelter, Healing Services and the Group Home.

The cost for this option which includes 3 - 6 weeks of one on one care for approximately 35 youths, as well as associated costs, are estimated by the province to be up to one million dollars. The province is expecting Health Canada to pay the entire costs of this option. Health Canada views health and social services to be primarily a provincial responsibility, a view which is supported by the Canada-Newfoundland Agreement. Nonetheless, we do fund the existing solvent abuse centre.

**Speaking Points:**

In your meeting with Deputy Minister Fry it is suggested that you raise the following points:

- The Canada-Newfoundland Agreement makes health and social services a provincial responsibility.
- We recognize that the Province alone cannot take on the full costs for the treatment needs in the community. However, neither can Health Canada take on these costs alone.
- The department recognizes that we have a shared role in the issue of solvent abuse and we are prepared to work collaboratively with the Province to find a cost effective intervention for the community.
- Health Canada is prepared to pay for the additional treatment for solvent abuse among youth in the community.
- Health Canada, through its Regional office will work with the Province and the Labrador Health Corporation, to provide assistance to the community.