



Anishnawbe Health Toronto

Rapid Access to
Addiction Medicine



* Sheryl Lindsay MSW

* No Relationships with the following:

* Financial sponsor

* Grants/research/support

* Speakers bureau/honoraria

* Consulting Fees

* Patents

* Anishnawbe Health Toronto-RAAM



- * AHT's RAAM program opened November 2018
- * First RAAM based in an Indigenous organization in Toronto
- * 110 referrals since opening

Anishnawbe Health Toronto- RAAM



- * Downtown Overdose Prevention and Supervised Consumption sites 40% of service users identify as Indigenous
- * Urgent need to respond in a culturally safe way
- * RAAM's in downtown core hospital based
- * Provide challenges to Indigenous clients that have experienced stigma, discrimination and racism within hospital settings
- * Racism in the health care system is so entrenched Indigenous people expect and plan for it; or avoid care altogether (Allan & Smilie 2015: Kurtz et al, 2008;Tang &Browne, 2008)

Toronto context



- * Cultural Safety-cultural sensitivity and competence focus on learning about culture of the service user
- * Cultural Safety pays explicit attention to the power relations between the service user and provider
- * Analyzes power imbalances in society
- * Combined with trauma informed care that understands the impact of historic, collective and intergenerational trauma

*** Cultural Safety as a response to systemic racism/discrimination**



- * Research paper: Mamakwa 2016
- * Six Indigenous Communities in northwestern Ontario
- * 526 participants in opioid dependence treatment program
- * After one year 78% remained in treatment compared to overall provincial average of 50%

* Northern Research



- * Community designed and implemented
- * Welcoming back to community, families and roles
- * Traditional teachings and events
- * Ceremony
- * Harmonized approach

*** What makes the difference?**



- * How to translate to the urban Indigenous experience
- * AHT mission: To improve the health and well being of Indigenous people through Traditional Healing within a multi-disciplinary health care team
- * Access to healers, elders and knowledge keepers
- * Access to traditional medicines
- * Access to ceremony: smudge, sweat lodge, shake tent

*** Urban based Indigenous led**
RAAM



- * Harmonized approach
- * Community based and welcoming space
- * Use of medicines, access to traditional healers, ceremony
- * Intensive outreach, community support and follow up
- * Access to day treatment program
- * Close collaboration with community/medical partners

* **Key elements**



- * Nurse Practitioner lead
- * Addiction medicine physician one half day a week
- * RN
- * Two community support workers
- * Coordinator

*** Anishnawbe Health Team**

*Miigwetch!

