THE INNU HEALING STRATEGY

An Innu plan - jointly developed by the Innu of Sheshatshiu and Natuashish. April 2014
## CONTENTS OUTLINE

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>A Background to Innu Healing</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Why do We Need a Healing Strategy?</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Health and healing data</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Where Are We Going?</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Innu Healing Mission Statement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Innu Values Statement</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>How Will We Know When Our Strategy Is Working?</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Selected Determinants of Health as a Measurement Framework</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>What Resources Can We Draw On To Make Changes?</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>What services, organizations, partners, and funding are available to help us?</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>How Will Our Communities Look After Healing Is Complete?</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>An Innu Vision for the Future</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Healing Priorities And Specific Visions For Change</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>The needs and visions for change in fourteen urgent topic areas</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>What Action Will We Take?</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>The plans for action to make priority changes</td>
<td></td>
</tr>
</tbody>
</table>

### REFERENCES

<table>
<thead>
<tr>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>51</td>
</tr>
</tbody>
</table>

### APPENDICES

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>A:</td>
<td>The Healing Strategy Measurement Framework</td>
<td>52</td>
</tr>
</tbody>
</table>
1. Introduction

From the time Innu territory and the Innu people became part of Canada, there has been a range of healing initiatives imposed by the Government of Newfoundland and Labrador and the Government of Canada. While the intent of most of these initiatives may have been to assist the Innu, there have been very few positive outcomes from them. Towards the end of the twentieth century, the Government of Canada undertook its own Labrador Innu Comprehensive Healing Strategy [LICHS]. Subsequent to creation of the LICHS, an impact evaluation of the LICHS (Indian and Northern Affairs Canada [INAC], 2009) and a health needs assessment (First Nations and Inuit Health Branch [FNIHB], 2012) was completed with the conclusion that, while some progress had been made, the federal government’s efforts to address the healing needs of the Innu have failed.

The Innu recognize that healing efforts have been imposed upon them. If true healing of social and health problems (and other ills) is to occur, individuals, families, and communities must be engaged as ready and willing participants. For healing efforts to be successful, they must come from within—not from outside. The Innu people have to
lead any healing strategy that is developed and tailor healing efforts to the unique needs of the Innu people. The role of all governments in any healing strategy is to support the healing initiatives developed by the Innu.

Recently, the Innu communities of Sheshatshiu and Natuashish have reviewed the many reports and proposals they have developed over the years that examine Innu healing (Innu Round Table [IRT], 2013), and found that they have consistently proposed a community-based approach. In 2010, the Innu proposed that a community-based approach should be adopted for Innu healing that would be coordinated through an Innu Round Table [IRT]. The community-based approach for Innu healing is described in the Innu Healing Roundtable Proposal (Sheshatshiu Innu First Nation [SIFN] & Mushuau Innu First Nation [MIFN], 2011) that was submitted to the Government of Canada in 2011.

In early 2012, Canada (Health Canada [HC] and Aboriginal Affairs and Northern Development Canada [AANDC]) approved funding for the IRT approach, accepting Innu leadership for the healing strategy. The Minister for Health Canada [HC] committed to a three-year timeline for funding for the community-based approach to Innu healing. As part of the agreement to support the IRT approach, both Ministers requested that the Innu communities of Sheshatshiu and Natuashish develop and submit a healing strategy and corresponding work plans that would guide the IRT process. It was suggested that submission of The Innu Healing Strategy and work plans might result in additional funding and a lengthened timeline for federal support of the healing strategy.

The comprehensive healing strategy outlined within this document frames the Innu peoples’ view of the healing efforts needed to address Innu healing priorities. Recommendations for changes to address Innu healing priorities are identified, as well as essential services, programs, and investments to achieve these goals. This document identifies how progress in the Innu healing strategy will be measured. In addition, by providing this document, Innu leadership will meet the Ministers’ request for a healing plan that can guide its support of the IRT and of Innu healing efforts.
The Innu Healing Strategy reflects the long-held view that healing must be built from the ground up, with Innu families as the focus. Treatment and other services in Innu communities have to address not only the symptoms, but the causes of social, health, and other problems that challenge wellbeing. Responses to health and healing concerns must be integrated by way of case plans and services that are tailored to the unique needs of each person and family. Essential to the effectiveness of efforts to address healing in Innu communities are follow up services—including after-care, personal training, and development—in order to ensure a brighter future for every Innu that embarks on their own healing journey. To allow for a changed future and an effective healing strategy for the Innu communities of Sheshatshiu and Natuashish, critical changes are needed to external non-Innu services as well as to Innu institutions and procedures.

Photos left to right: Sheshatshiu families, by Navarana Igloliorte and Jenny Mccarthy.

2. Why Do We Need A Healing Strategy?

There is consensus that the forced transformation of the Innu from nomadic hunters into sedentary residents of communities within one generation is the starting point for most of the social and health ills of the Innu (Backhouse, C. & McRae, D., 2002; McRae, D.M., 1993). This sudden shift in how Innu lived brought profound change whereby Innu self-sufficiency was replaced with dependency on government services, country food by the grocery store, and activity by lethargy. The social and health ills of the Innu are reflected in the issues that now impact individuals and their families in Sheshatshiu Innu First Nation (SIFN) and Mushuau Innu First Nation (MIFN) as illustrated by a range of data. Two recent documents, the health needs assessment (FNIHB, 2012) and the impact evaluation of the Labrador Innu Comprehensive Healing Strategy (INAC, 2009), illustrate the depth and breadth of the challenges facing the Innu. The following paragraphs in this section outline data from these reports that demonstrate the social and health issues that affect Innu in the communities of Sheshatshiu and Natuashish.
Data from the health needs assessment report (FNIHB, 2012):

<table>
<thead>
<tr>
<th>4 to 6 times greater</th>
<th>5 to 6 times greater</th>
<th>significantly lower</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-natal drug/alcohol/solvent use was 4 to 6 times greater than what was reported in the general Canadian population (2008-2009 data);</td>
<td>Pre-natal smoking rates in Innu communities are 5 to 6 times greater than that of the general Canadian population;</td>
<td>Oral health scores are significantly lower (SIFN 3 times and MIFN 5 times) than the general Canadian population;</td>
</tr>
</tbody>
</table>
Data from the impact evaluation of the LICHs (INAC, 2009):

The rates of adults without a high school certificate or equivalent has remained consistently higher for Labrador Innu communities than the provincial average, the national average, or than other Aboriginals living on- or off-reserve throughout Canada (prior to devolution of Education)

- Labour data shows Sheshatshiu with a much lower employment rate and a higher unemployment rate than other First Nations communities. For 1996 and 2001, Natuashish had an employment rate notably higher than Sheshatshiu since these were the years of the relocation project from Davis Inlet. Since 2006, the unemployment rate in Natuashish has been roughly the same as in Sheshatshiu.

- Housing data shows noticeable discrepancies between Innu communities and other First Nations. The average number of dwellings in need of major repairs

<table>
<thead>
<tr>
<th>suicide rate</th>
<th>average age at death</th>
<th>violent crime rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>The suicide rate in SIFN is 75.7 per 100,000 population and in MIFN is 164.1 per 100,000 population—contrasting with the Canadian general population data of 11.0 per 100,000;</td>
<td>The average age at death is 48 years in SIFN and 47 years in MIFN, while the NL average is 74 years;</td>
<td>The violent crime rate in 2010 in SIFN was 31.31 per 100 people, in MIFN was 23.69 per 100 people, and in the general Canadian population was 1.28 per 100.</td>
</tr>
</tbody>
</table>
for First Nations communities in Canada has increased slightly over time, however, the average number of houses needing major repairs in Sheshatshiu has remained consistently high. The rate of houses needing major repairs in Natuashish dropped dramatically after relocation to be similar to the average rates for the province of Newfoundland and Labrador and for Canada.

- The average infant mortality rate for First Nations in Canada is 6.4 per 1,000 live births; while the average rate in SIFN is 17.8 per 1,000 live births and in MIFN is 18.7 per 1,000 live births.

- SIFN and MIFN community members identified the following needs not being adequately addressed through existing healing programs:
  - Addictions
  - Lack of infrastructure
  - Limited training/mentorship
  - Recreation programs for children and youth
  - Education and post-secondary education initiatives
  - Teen pregnancy
  - Lack of access to healthy food
  - Abuse
  - Justice issues

The brief overview of recently published data described in the above sections clearly demonstrates significant quantitative gaps in norms between the Innu and other First Nations in Canada, residents of the province of Newfoundland and Labrador, and the general Canadian population. These gaps clearly illustrate the need for action to address current issues in several areas for Innu communities in Labrador. The comprehensive Innu healing strategy outlined within this document has been jointly developed by the communities of Sheshatshiu and Natuashish as the Innu plan for that change.

3. Where Are We Going?

The Innu of Labrador have identified similar themes of their vision, goals, and objectives for healing in multiple documents throughout the past 20 years. These themes were summarized in a review of these documents and tabled at two major forums held in 2013—the Innu Leadership Forum and the Innu Practitioners’ Forum. The consensus, based on previous work completed (IRT, 2013), is that all Innu in Labrador share a common view of what healing is needed in their communities and what a healing strategy must accomplish. From this work, the Innu of Labrador have adopted a common Mission Statement for The Innu Healing Strategy:
To Rebuild Healthy, Sustainable, and Resilient Innu Communities
4. What Innu Values Will Guide Healing Work?

Innu documents written in previous years (IRT, 2013) illustrate a range of values that form the foundation for additional healing projects and proposals. Similar to the approach used to build the *Mission Statement*, these documents were reviewed and presented in the Innu Leadership Forum and the Innu Practitioners’ Forum. The result was a short list of *Innu Values* that should guide healing efforts. The list of *Innu Values* was further explored and refined in consultation with Innu elders, resulting in a final list of *Innu Healing Values*. These values are shared between the two Innu communities of Sheshatshiu and Natuashish, and the IRT Health and Healing Subcommittee has adopted these values to guide its work.
The **Innu Healing Values** are:

**Respect**
Innu value each other and all our surroundings and treat everything with respect as we recognize that we need each other, the land, and the animals to survive.

**Trust & Honesty**
Trust has always been a key value for the Innu as our very survival as a People, has always been dependent upon our need to rely upon one another and trust that we would all fulfill our role and make decisions that are best for the collective. For trust to exist, honesty must also exist.

**Cooperation**
Innu work with each other to support the advancement of the People.

**Family**
Togetherness and connection to family is important to Innu.

**Nature**
Nature has been integral to the existence of the Innu as it has provided for both our physical and spiritual needs since our creation, and will do so into the future.

Photo by Navarana Igloliorte: 2010 Elders Gathering; Photo by Mary Anne Nui; Natuashish family; Photo by Jenny McCarthy; Sheshatshiu family members; Photo by Katie Rich (Natuashish).
5. How Will We Know When Our Strategy Is Working?

In the IRT proposal, the Innu committed to establishing a measurement framework for their healing efforts. One criticism of previous Innu healing efforts was that there was no consistent, identifiable target or outcome. Although there have been some positive results from past healing efforts, there has been no previously established approach to measure progress, to identify how much work remains, to evaluate which efforts need to be amended, and to develop a plan for making any needed changes.

Previous Innu healing documents (IRT, 2013) reveal an interesting mix of measurements that could be used to establish a framework for measuring Innu healing efforts. The Human Rights Commission report of 1993 suggested that the Government of Canada has a responsibility to help Innu communities achieve a standard that is on par with other First Nations communities in Canada (McRae, 1993). Later in the 1990s, the Mushauau Innu proposed that the determinants of health should be used as a measure for their proposals. Several project proposals since the 1990s have adopted quantitative measures of success that, while aimed at a specific project, have also fed into the determinants framework. The recently completed LICHS evaluation report (INAC, 2009) gathered data—much of it census-based—that describes gaps in a variety of areas between Innu and other Canadians. The health needs assessment (FNIHB, 2012) adopted a quantitative approach that examined health factors by comparing Innu health data with that from other First Nations, the province of...
Newfoundland and Labrador, and the general Canadian population.

The Innu Leadership Forum and the Innu Practitioners’ Forum held in 2013 considered indicators of healing success; however, most of the indicators that were considered were specific to the priority items that had been identified as needing change. Using these indicators would measure progress on individual healing projects, but not on the overall healing strategy.

Our conclusion regarding what the measurement framework for the Innu Healing Strategy should be comprised of is that two levels of measurement are needed. One level will show the overall impact of the healing strategy by examining whether our efforts are helping to achieve healthy, sustainable, and resilient Innu communities. The other level of measurement will evaluate each major initiative and project within the healing strategy to examine progress made in achieving objectives for change.

The first level of measurement—to evaluate the overall impact of the healing strategy on achieving healthy, sustainable, and resilient communities—will be best evaluated by using the determinants of health as a framework. While some information is still needed in order to set baseline data, most recent data collected in the health needs assessment report (FNIHB, 2012) and in the LICHS impact evaluation (INAC, 2009) show low scores in the determinants of health for both communities. By measuring the determinants of health for the communities of Sheshatshiu and Natuashish, it will be possible to identify any progress towards developing healthier, more sustainable, and resilient Innu communities. Accordingly, the Innu will adopt the description of the social determinants of health provided by the Public Health Agency of Canada [PHAC] (2011) as the overall measurement framework for the strategy.
The specific indicators adopted for measuring *The Innu Healing Strategy* are:

1. Income and Social Status
2. Social Support Networks
3. Education and Literacy
4. Employment/Working Conditions
5. Social Environments
6. Physical Environments
7. Personal Health Practices and Coping Skills
8. Healthy Child Development
9. Health Services
10. Gender
11. Culture

One of the first steps in the healing process will be to gather existing data under each determinant in order to establish a baseline for future measurements. After establishing baseline data, data protocols and data systems will be created to ensure that any information gaps can be filled. The data measurement process will help to ensure that similar data will be gathered over the next few years. The result of these efforts should be twofold: (1) a sound framework that quantifies changes in the selected determinants of health; and, (2) a data management system that can be seamlessly moved into Innu self-government arrangements. Application of this component of the evaluation framework should help to ensure that both change and healing are sustained over time (see Appendix A for a summary of the PHAC determinants of health).
The second level of measurement is project-based. Each activity or project that Innu invest in will have required targets or outcomes; the work plan for each project or activity will need to outline how anticipated targets or outcomes will be measured.

Analysis of data from both the first and the second levels of measurement will be used to inform future decision-making for *The Innu Healing Strategy*.

6. **What Resources Can We Draw On To Make Changes?**

The Innu can draw on a variety of resources to facilitate change in our communities. First Nation programs and services in the communities of Sheshatshiu and Natuashish, Innu organizations such as the Innu Education Board and the IRT Secretariat, and own-source revenue investments can all contribute. Services from other governments such as the provincial government, assistance from private, institutional and non-profit sectors, and special Health Canada healing funding may also be accessed.

While the list appears impressive, there are considerable limits to many of these potential resources. For example, each Band delivers a wide range of regular programs and services that are based on funding agreements with the Government of Canada. These are formula-based funds—not needs-based; as a result, funding is
rarely sufficient to adequately address identified needs in each community. In addition, funds in these programs must be spent only on eligible items and minimum standards must be met in each service area. The parameters of the funding agreements often limit what basic Band services can do in each community; however, an integrated approach to managing Band services may yield greater benefits than if each are managed separately. One potential benefit of an integrated approach to Band management is that programs and services may be more healing-oriented and, thus, better address needs in the communities. Work on integrated management is already underway.

Innu control of the education system has already produced enormous change. Since the Innu Education Board was established there have been more high school graduates than there were in the previous fifty years when the Government of Newfoundland and Labrador provided education services to the Innu. Successful devolution of government services to the Innu has long been a part of the Innu vision for healing. Currently, efforts are underway to transfer control of the Income Support Program from the Government of Newfoundland and Labrador (Advanced Education and Skills) to the Innu; this would include Innu management of training for jobs, and additional funding that would better address risks to Innu children. Effective Innu management of these two services will have a profound impact on several of the health indicators in the evaluation framework for The Innu Healing Strategy, such as healthy child development and family income.

The Innu Round Table (IRT) has created a forum by which senior federal, provincial, and Innu officials may collaborate on issues that cross jurisdictions. The Government of Canada has also appointed a Federal Special Representative (FSR) to observe the IRT process and report directly to the Minister of Aboriginal Affairs and Northern Development Canada (AANDC).
In addition to devolution of the Income Support Program, the IRT has been responsible for building the system and professional capacity needed for Innu management of this service. Once the Income Support Program has been transferred into Innu management, the technical and professional capacity of the IRT Secretariat will continue to provide support to the Innu.

Establishment of the IRT has brought additional special funding for healing. While AANDC’s funding primarily addresses the cost of the IRT process, Health Canada (HC) has doubled its funding by providing special IRT funding. HC funds regular health programs for Innu at approximately $3 million in total per year. For a three year period, HC is supplying an additional $3.1 million for enhanced health services. In addition, HC has set aside an additional $600,000 for “capacity building.” HC has been gradually lowering its internal costs for dealing with Innu files; this internal cost was initially valued at $1.15 million. As HC’s costs decline, the savings are transferred into the capacity building funding. Once this funding is fully transferred, all of it could be accessed by the Innu for health capacity initiatives.

The special healing funds are, however, time-limited, and could run out as early as the next fiscal year. The Government of Canada has indicated it would consider renewing the funding, but only with an Innu healing plan, documentation of continuing needs, and evidence of healing progress. A successful start to The Innu Healing Strategy could do much to ensure that funding for healing initiatives continues to flow.

As previously noted, another resource for healing efforts is Innu own-source revenues. Unlike funding agreements with other governments, which come with extensive terms and conditions, the Innu are in control of how they spend their own money. The Innu Trust and Innu Limited Partnership profits are Innu own-source funds. For many years, Innu have been making decisions regarding how to spend these funds. The Innu people may decide to continue spending these funds as they have done previously, or invest some of these funds in healing priorities and initiatives.

There are a wide range of services from other governments that could assist Innu healing. For example, both Innu Band Councils have entered Memoranda of Understanding (MOUs) to improve provincial delivery of Child, Youth and Family
Services (CYFS). Under these MOUs, Band and provincial staff are working on integrating and enhancing CYFS services and prevention efforts. There is an ongoing need to improve justice and policing services. Funding to support reform initiatives will require partnership with other levels of government.

The Government of Canada has also introduced numerous project and proposal-based funds, which the Innu are fully eligible to apply for. New funding opportunities will continue to be monitored for compatibility with The Innu Healing Strategy and proposals will be developed as opportunities for funding are identified. The Innu are currently developing a self-government agreement, a process that allows funding of activities in order to bridge pre-self-government and post-self-government structures. This interim-to-self-government process is consistent and supportive of many planned healing initiatives and can be used to ensure healing progress is sustained well into the future.

Another potential source for additional healing funding is through donation programs of private sector companies. Many companies have preferred causes, and some have supported Innu initiatives such as our rinks and day cares. Companies that are active with the Innu can be canvassed for their interest in supporting various healing activities.

The non-profit sector includes an extraordinary range of organizations and mandates. There may be multiple sources of low cost expertise, services, and networks that can be drawn upon.

The institutional sector—universities, commissions, religious groups, advocacy organizations, and foundations—is another resource that can be accessed to provide research, knowledge, experience, and funding for their area of interest. When seeking assistance on healing, this resource could prove valuable.
7. How Will Our Communities Look After Healing Is Complete?

Throughout the years, there have been many visions for the future of Innu communities. Some have been idealistic depictions of peace, harmony, and wealth for all, while others have been more practical—foreseeing small, specific changes to priority areas. Throughout all of the shared visions for an Innu future, two common elements are noted. Regardless of the specific details of previous visions for Innu communities, the vision for a bright Innu future is a consistent thread that is woven throughout them all and continues to be present in the most recent expressions for a desired future for the Innu. The other consistent feature is that few, if any, visions for the future of the Innu have been able to be operationalized.

Last year, the Innu Leadership Forum focused on the changes and the direction needed to create healthy Innu communities once again. Little time was spent on refining the overall vision for healthy Innu communities; instead, the Innu leadership recognized that an action-based approach was needed. The products from that process are the subject of the next section.

Innu planning staff analyzed previous comprehensive vision statements from a compilation of various Innu documents that have been written over the past 20 years; common themes of community, family, children, culture, and spirituality were evident throughout them all. Since recent versions remained true to these themes, it was decided that they could serve as the basis for an overall healing vision. From these themes, a draft vision statement was produced, which was reviewed and refined at the second Innu Leadership Forum. The following Innu Healing Strategy Vision Statement was the result:
We feel pride in managing our own lives and our community again. We are running our own agencies and programs under a respected Innu Government that fosters unity and fairness for all Innu. Our children see leaders who make decisions for the good of the whole community. Opportunities for education and employment are available to everyone.

Elders are sharing traditional knowledge and skills. Parents are connecting with their culture and children are learning. All Innu children are proud of who they are and are able to find the opportunities of both the Innu and Akaneshau culture.

At the heart of this vision, Innu are healthy, loving, and caring individuals. Families and community come together to make healthy decisions. Innu work together as one to create our own destiny. All Innu support and help each other, yet we hold each other accountable for our actions.
8. Healing Priorities And Specific Visions For Change

The Innu vision for change has been consistent over many years and is clearly stated above. Although the specific topics the Innu have brought forth for healing action throughout the years have also remained consistent, the Innu Leadership Forum considered and confirmed a set of healing priorities over the past year in order to be as current as possible. Thirteen (13) priority areas for change were identified; for each of these, Innu leaders identified what the future in that priority area should look like, thus creating a vision for each priority.

The thirteen (13) priority areas or sectors identified by Innu leaders were reviewed in the Innu Practitioners’ Forum so that practitioners could provide advice on these areas and make amendments. The thirteen (13) priority areas were endorsed, and a fourteenth (14th) item was added. In addition, the practitioners clarified that any final action plan and investment in the priority areas would need to be community-based, allowing each community to adapt the vision for a priority area to their unique needs should they wish to do so.

This section lists the priority areas and describes the vision for each as laid out in the Innu Leadership Forum and the Innu Practitioners’ Forum. These are described below for each of the fourteen (14) healing priorities.
The Healing Priorities:

- Innu Governance
- Education
- Employment and Training
- Health and Health Services
- Economic Development
- Innu Trust
- Financial Systems
- Recreation
- Drugs and Alcohol
- Youth
- Justice and Policing
- Communications
- Outpost and Spirituality
- Money Management
8.1 Innu Governance

Innu leaders identified things that were not working well across a range of leadership functions: government, governance, management, transparency, politics, and administration. The Innu Leadership Forum considered working definitions for all of the terms being applied to Innu leadership and decided that, in order to address comprehensive change across all areas, the term “Innu Governance” should be used for this healing priority. The common vision for this larger view of Innu Governance is summarized as follows:

- A responsible Innu Government will:
  - Be Innu designed
  - Have external credibility
  - Have clear values and principles as its foundation
  - Be transparent with:
    - Strong access to information (policy)
    - Provide assurance that privacy is protected, and guidelines for privacy will be known
  - Have an Ombudsperson and an appeal process
  - Have a clear role for Elders
    - Elders Council (example)

- There will be a written Election Code that outlines the following requirements:
  - Recall/removal provisions
  - No alcohol or vote-buying allowed
  - Election funding guidelines
  - Debates
  - Eligibility criteria for candidates
  - Establishment of a more traditional method for voting, after examining alternative voting methods
  - A Swearing in Ceremony that includes:
    - An Oath of Office
    - Public commitment to follow policies
• A Constitution will be created in a two-step process:
  o The Innu Nation Constitution will be modernized to support development of self-government
  o A Long-Term Innu Constitution will be developed as a foundation for self-government:
    ▪ The process will be learned from other First Nations but will be made Innu-relevant
    ▪ Roles and responsibilities will be clarified in both Constitutions

• Innu Governance meeting procedures will be written, and may include:
  o Meetings that are open to the public (closed only for certain topics)
  o Rules of procedure during meetings
    ▪ Rules for the public participants at meetings
    ▪ Specific rules for member presentations
  o A regular and known schedule for Council meetings
  o Rules for calling any additional meetings

• Financial accountability will be evident, with:
  o Budgeting completed prior to each fiscal year
  o A budget that is open to the public

• Excellent communication will be demonstrated through:
  o Newsletters
  o Council/board meeting videos
  o Contact information that will be easily accessible
  o Website that will be regularly maintained
  o On-site IT Specialists who will maintain IT equipment
  o An Annual Report from each organization that includes:
    ▪ Financial information
    ▪ Programs, services and results

• Well-developed Council responsibilities will be demonstrated by:
  o Clear portfolio systems
  o Officials and staff who follow policies

• Staff-Council relationships will be respectful and clearly delineated with:
  o Council meetings and agenda items that will be announced well in advance.
  o Council orientation briefings that will be held for new officials.
  o Council who will be briefed and updated on programs and services by Senior Staff.
  o Directors and Council members who will meet regularly.
  o Issues that will be resolved at Council meetings and decisions that will be implemented by Staff following meetings.
The attendees at the Innu Practitioners’ Forum considered and endorsed the Innu Governance vision (described above) that was developed in the Innu Leadership Forum. In addition to the vision developed by the Innu leaders, the Innu Practitioners’ Forum added the following points, specific to their communities:

- In SIFN, Elders will be part of self-governance:
  - Their role will be defined in a forum.
  - Roles of Elders will be integrated into various levels such as political, program, priorities, and activities.
  - Until the role of Elders is established, elders will be consulted on major decisions

- The Election Code will:
  - Be needed very soon (within months)
  - Need to be adopted by the Innu communities
  - Build on other election codes and practices
  - Need to be legally enforceable with firm consequences for infractions
  - Need to clearly communicate its provisions
  - Prohibit drugs, alcohol, and money handouts during elections

- Band staff expressed uncertainty regarding development of a Constitution:
  - Innu practitioners suggested that the Innu self-government process may be the best route by which to establish a Constitution
  - The anticipated timeframe for Innu self-government needs to be considered in determining the best use of resources to move to a new Constitution

- The following guidelines will be followed for government meeting procedures:
  - Meeting procedures will be drafted.
  - Once drafted, meeting procedures will be reviewed and possibly made into law.
  - Chief and council meetings will be held on a regular basis and be open to the public.
  - Criteria will be established for meeting attendance with the requirement that any elected official who does not attend the required meetings will lose their seat.
  - As standard practice, all financial decisions will be made in public meetings.
  - Meeting minutes will be taken and officially adopted onto the record of Council activities.
  - The record of Council activities will be available to the public.
  - Staff roles will be respected in Council meetings:
    - A Clerk will be needed to:
      - record minutes
      - remind attendees of meeting rules
      - perform other duties as required
    - A CEO will be needed to:
• ensure that appropriate staff attend meetings
• brief Council on agenda items
• take decisions back to staff
• perform other duties as required

• Topics that need to be discussed in private meetings will be clarified in the meeting procedures—these will be listed and enforced
• Council will hold an AGM with clear rules
• Impact Benefit Agreement [IBA] meetings will also have clearly delineated procedures

An action plan for Innu Governance must involve both internal and external partners. Internal partners refers to those organizations directly accountable to the people of that First Nation alone. External partners include organizations that are mostly accountable to groups that include Innu in the group.

8.2 Education

The Innu vision for education reform is to build on successes achieved since devolution. The vision for post-devolution education programs and services includes the following:
• There will be a strong traditional education component, including:
  ○ Instruction in traditional practices and skills
  ○ Traditional education that will be integrated into the curriculum
  ○ Elder involvement that will be a respected and essential part of the education system
  ○ Innu place names to be used in Geography
• Innu curriculum will be developed, such as:
  ○ History of the Innu
  ○ Geography of Innu lands and their names
- Innu language and immersion
- Parenting courses
- Spirituality and traditions (taught to children)
  - A prerequisite for graduation will be cultural credit courses, such as:
    - Snowshoe Making
    - Innu Legends
    - Film Making of Innu Activities
    - Use of Community Resources
  - The Innu timeline will be taught
- Education success will be recognized through methods such as the Innu Graduation Hall of Fame.
- Innu learning methodologies will be used with lessons adapted to Innu learning styles.
- High standards for educational achievement levels will be established, with:
  - Innu standards being above provincial standards
  - Both Innu and provincial standards for education being met
- There will be strong representation of Innu teachers in schools with:
  - An Innu teacher education program
  - Off-campus and In-community certification methods for Innu teachers
- There will be strong support for education amongst Innu leadership.
- There will be a variety of tools and resources available to support students.
- There will be support for young mothers so that they are able to continue their education.

Practitioners in the Innu Practitioners’ Forum endorsed the Innu leaders’ vision for education reform, and identified additional issues for consideration in the healing process. Based on their observations, education reform will:
- Consider the Innu Education Board’s recent report on community views of education (Fouillard, C., & Mamu Tshishkutamashutau Innu Education School Board, 2013)
- Invest in developing the role of Elders in Innu education to meet the leaders’ vision
- Invest in curriculum development
• Address the student population’s characteristics so that needs will be better met
• Address gaps in specialized services for students
• Partner with other community services to better address students’ needs
• Improve physical facilities for all forms of education
• Make education a priority for Innu Trust funds
• Recognize and address challenges with student attendance by:
  ○ Involving Elders
  ○ Helping to improve parenting
• Celebrate academic success through:
  ○ Marketing
  ○ Communication of progress
  ○ Better use of the radio
  ○ Exploring types of recognition and reward programs in place in other communities
  ○ Developing recognition and reward programs for Innu Education
  ○ Having award presentations and celebration nights
• Establish better connections between early childhood learning programs, such as the daycare and Head Start, and the school

8.3 Employment and Training

The Innu Leadership Forum’s vision for future employment and training in Innu communities includes:

• Significant opportunities for training in the community
• An Innu community college:
  ○ That will be in Band-owned buildings
- That will be operated in a multi-purpose facility
- That will have a campus in each community
- Effective Innu Training Assistants
- Improved links with enhanced education in the community
- Cultural Coordinator(s) that are involved in training and employment matters
- An Innu Employment Centre that facilitates real jobs and careers
- Sound data on unemployment in our communities
- Follow-through on the Strategic Plan
- A screening process for applicants to all training and job openings that is respected by all parties
- Targets for improvements that are established by each area involved in training and employment
- Summer employment opportunities for youth that has proper supervision to ensure training takes place and that allows for learning experiences

The Innu Practitioners’ Forum added several elements to the vision:
- Individual career and development plans will be needed as the basis for progress.
- A longer timeline will be needed for service plans to respond to individual plans.
- The Employment and Training plan will take into account community plans and priorities as well as individual employment and training needs.
- Ensure that resources will be available to help carry out the plan(s).
- IBAs will be built into the plans to clarify what roles IBAs have, and should have, in training and employment.
- Opportunities for training and employment in IT will need to be considered by some as IT services are needed in Innu organizations.
- Joint ventures will offer training and employment opportunities that are linked to community plans and priorities.
- Opportunities will need to be available for existing staff to upgrade their skills as well.
- Training will need to be provided to help Innu fill other jobs in the region.
- Consideration will need to be given to the number and length of Band Office closures as these impact service quality and are a concern.
- Need to analyze what Innu organizations will be involved in training and employment (e.g., Sheshatshiu Innu First Nation/Mushuau Innu First Nation, the Innu Economic Development Limited Partnership Corporation, the Innu Economic Development Limited Partnership Business Centre, post-secondary education, Aboriginal Skills and Employment Training Strategy, Impact Benefit Agreements, and Innu Economic Development Corporation).
- Assess whether a career facilitation centre is needed to complement these efforts and build one as needed.
8.4 Health and Health Services

The Innu Leadership Forum’s vision of the future of Innu health and health services focused on Innu health, while the Innu Practitioners’ Forum included recommendations for changes to the structure of health services in their community. The Innu leaders’ vision for health is of communities where:

- People will be very active.
- The diabetes rate will be reduced and be approximately the same as rates throughout the rest of Canada.
- Walking trails will be developed and used in the community.
- Many activity and fitness facilities will be in operation, open regularly, and be used.
- The traditional diet will be common among residents.
- Young people will be going into the country.
- Health professionals will be living and working in the community.
- Innu will be employed as health professionals.
- The Innu language will be heard on the streets, in offices, and used in the delivery of health services.
- Innu medicine and health practices will be respected and in use.
- Life expectancy will be longer and near Canadian rates.
- Individuals will take responsibility for their own health and wellbeing.
Additional recommendations from the Innu Practitioners’ Forum include:

• People will be active because:
  ▪ The Innu will invest in developing sports, recreation, and facilities dedicated for adult use.
  ▪ Everyone will be able to access active living services.
  ▪ Trained staff will assist people in using facilities and services and in becoming more active.
  ▪ Opportunities will be available for people to go into the country to participate in a wide range of activities for active living.
  ▪ Staff activity will be endorsed in the human resources policy, with the cultural leave policy encouraging country activity for staff.
  ▪ There will be health programs and services available in the country since much of the population will be there for longer periods.

• Diabetes will be addressed because:
  ▪ People will engage in physical activity.
  ▪ Traditional diets will be used once again.
  ▪ The Band will invest in health promotion activities and education.
  ▪ Health and health services positions will be fully staffed.
  ▪ There will be improved communication regarding health and health services.
  ▪ Individuals will make informed choices.
  ▪ The community will provide healthier food to shut-ins.

• A plan for diabetes care will be developed through the following process:
  ▪ There will be a review of effective diabetes practices elsewhere.
  ▪ There will be a review of research and current recommendations.
  ▪ An action plan, based on the review, will be adopted to influence diabetes care and diet choices.
  ▪ Policies for diabetes health promotion and education will be developed.
  ▪ The review of the SIFN health system will be examined by both communities and changes may be introduced.
8.5 Economic Development

The vision of Innu Leadership Forum for economic development in Innu communities is for reform of the Innu Economic Development Corporation so that:

- All Innu-owned corporations:
  - Will be transparent with respect to finances and operations
  - Will be accountable to the Innu people
  - Will hold AGMs for each venture
  - Will demonstrate good governance practices

- Each joint venture will be accountable to the Innu Economic Development Corporation Board and to Innu communities.

- The Innu Economic Development Corporation Board will:
  - Have a clear structure
  - Have Directors
  - Be professionally managed with a President and a CEO
  - Have liability insurance
  - Have proper documentation of Board decisions
  - Have a process in place by which shareholders will be able to access documentation of Board decisions

- There will be professional capacity in the Innu Economic Development Limited Partnership (IEDLP) Corporation.
• Clarification of the relationship between established IEDLP companies will facilitate the smooth transition of these companies to Innu self-government.
• The Innu Business Registry will become much larger and be regularly maintained due to the recognized need for Innu business capacity development; this need will be addressed.
• Private businesses will contribute to Innu communities through:
  o Employment for community members—creating jobs and generating income
  o Investing in Innu communities (e.g., by contributing to community projects)
• There will be clear guidelines for how business opportunities between IEDLP and private businesses will be pursued; these guidelines will be respected by all parties.
• The Innu Practitioners’ Forum had no additional recommendations for the Innu leaders’ vision for Innu economic development

8.6 The Innu Trust

The Innu Leadership Forum identified several concerns with how the Innu Trust is currently working, including:
• Lack of transparency overall
• Apparent favoritism to some people or groups
• Trustees are appointed, rather than having an open process
• Lack of reporting on Innu Trust investments
• Lack of clarity on where monies are being spent
• Trust fund money may be going into areas where funding from other sources is available
• Large payouts are being made without any established policies—these seem to be linked to election promises

Based on these concerns, the Innu leaders developed the following succinct vision for changes to the Innu Trust:
• Innu Trust priorities will be clearly outlined and known to all (e.g., Education, training).
• Innu Trust priorities will guide decisions on where monies will be spent.
• Regulations for the operation of the Innu Trust will be revised and implemented based on these priorities.
• An Innu Trust AGM will be open to all, with clear and accessible information regarding Innu Trust activities.

Upon considering the Innu leaders’ vision for change to the Innu Trust, SIFN participants at the Innu Practitioners’ Forum added the following points:
• The Board for the Innu Trust will be more transparent and accountable to the Innu people.
• Innu Trust rules will be clarified.
• The Innu Trust will set new priorities each year, and widely distribute them through a variety of media in advance of receiving proposals for funding projects.
• The Innu Trust will communicate its mandate, decision-process, and results upon review of proposals or requests for funding.
• The Innu Trust rules will be reviewed and revised with possible implementation of a no-payout-policy.

Photo by Mark Nui (Natuashish).
8.7 Financial Systems

The “Financial Systems” priority focuses on the integrity and other technical aspects of the internal financial systems in Innu communities. Concerns that were raised in the Innu Leadership Forum with respect to the “Financial Systems” priority include:

- The scope and nature of donations made by Council
- Suspicions regarding politics behind financial decisions
- Leadership not following financial policies or being held accountable to them
- Unclear lines of authority for financial decision-making

In a future where these items have been addressed in the financial system:

- A fiscal policy, or bylaw, will be in place that outlines the responsibilities of all parties involved; this policy will be implemented and followed.
- Regular financial training for staff, officials, and members will be held on topics such as understanding audits, and setting and monitoring budgets.
- A tendering process will be established and followed.
- Budget projections will be made by each program.
- Financial reports will be completed for each expense area.
- Short-term, medium-term, and long-term financial planning will be demonstrated.
- Management will demonstrate financial responsibility and be held liable for their actions.
- Value for Money Audits will be undertaken and released by the Innu.
- Due diligence will be demonstrated with respect to all operations and contracts.
The Innu Practitioners Forum differentiated between the financial systems described above, and what they saw as a broader concern with how money is managed overall. As a result, practitioners did not add to the “Financial Systems” vision but, instead, limited this item to systematic issues—adding the fourteenth healing priority, “Money Management” (section 8.14). The fourteenth (14th) healing priority was added to ensure that broader community concerns and fears about past approaches to money management will be addressed.

8.8 Recreation

The Innu Leadership Forum concluded that recreation has been too low of a priority and that a successful recreation strategy would facilitate the success of many of the other healing issues. There is a need to develop an approach to finding volunteers for recreation programming—as few parents are involved in current recreation activities—and there is a need for more programs and facilities. The leaders suggested that there needs to be a long-term master plan for recreation, as the absence of one is a contributing factor to the underplayed role of recreation in Innu communities thus far.

The Innu Leadership Forum’s vision for the future for recreation includes:

• Innu communities and individuals who will invest in recreation
• Children who will socialize through sports and recreation
• Recreation facilities such as a pool, weight room, fitness gym, track, trails, and playgrounds that will be developed and maintained
• Innu traditional games that will be taught and actively played
• Parents who will be involved in their children’s activities
• Programs for parents and adults
• Establishment of an active volunteer base for a variety of activities
• Innu Games will be held by the Innu once again

Two first photo’s by Mark Nui (Natuashish); Photo by Navarana Igloliorte (Sheshatshiu).
• Mentoring for hunting and fishing skills
• Activities that will include all populations
• A Recreation program that will help with the success of recovery and treatment program

The Innu Practitioners’ Forum added the following considerations to the healing vision for recreation:
• A Recreation Master Plan for each community will be developed that will outline:
  o The investments needed for each facility
  o Priorities for identified facilities
  o Costs of identified facilities
  o Specific details concerning operation and maintenance
  o Benefits of operation and use of facilities
• The School will be a key partner in the Recreation Master Plan—creative strategies for partnering with the school will need to be considered
• broader benefits of recreation will be emphasized in Innu communities
8.9 Drug and Alcohol Issues

Due to the significant number of homes and individuals impacted by drug and alcohol issues in Innu communities, abuse of drugs and alcohol is becoming normalized and becoming ingrained in politics and in family life. Participants in the Innu Leaders Forum and in the Innu Practitioners’ Forum agreed that a specific vision and action plan are needed to address this priority. The Innu vision of communities where drug and alcohol abuse has been addressed includes:

• A variety of individualized programs that will integrate Innu culture and language to achieve the goal of addressing drug and alcohol abuse in Innu communities
• Introduction of addiction prevention methods at an early age
• Innu communities where drug and alcohol use and addiction rates will be lower than throughout the rest of Canada
• Alternative activities that are open to all ages
• Numerous Innu role models who people can look up to
• Consistent, regularly-scheduled workshops that will be well-attended
• Band staff who will receive ongoing education to remain current on emerging new drugs so that action can be taken before problems arise in Innu communities
• Reintroduction of an active DARE program
• Drug testing that will become part of eligibility for elections and jobs

The Innu Practitioners’ Forum made the following additional suggestions with regard to this vision:

• A process will be developed to obtain basic information on users so that a plan to address drug and alcohol use in Innu communities can be developed.
• A health information system will be developed and implemented.
• Based on baseline usage rates, targets will be set to address usage rates.
• Progress, opportunities, and possibilities will be widely communicated.
• Alternative activities for users will be promoted within Innu communities.
• Legal options will be examined to address more challenging issues such as trafficking and bootlegging:
  o A process will be developed to enforce strategies that address these issues.
  o Both Innu communities will consider whether there is capacity to create Innu police and enforcement in order to deal with these issues.
• A bylaw prohibiting drugs and alcohol will send a strong signal.
• Effectiveness of practices in other communities will be examined.
• Housing control will be explored as another method of removing unwanted activities in homes on each reserve.

8.10 Innu Youth

Innu youth are being impacted by the priority areas that need to be addressed in Innu communities. Although they are being considered throughout all of the healing priorities, a healing priority to specifically consider Innu Youth has been identified. In order to address the needs of Innu Youth, it is essential to involve them in decisions about their future and what is needed to get there. The Innu Leadership Forum envisioned a future where Innu Youth will:
• Be strong users of the Innu language
• Be very active in their communities in a variety of ways
• Be well-educated—including educational credits earned for traditional knowledge and knowledge of the country
• Pursue career opportunities and jobs in their communities and elsewhere
Be proud of their
culture, language, history, and of themselves

- Participate in hunting, as well as preparation and use of country foods

In addition to the above vision, the Innu Practitioners’ Forum recommended that:
- Innu youth should be asked about what they want for their future through a youth forum.
- The “Gathering Voices” report on the schools should be reviewed for additional youth perspectives regarding their needs and their future.

### 8.11 Justice and Policing

The Innu Leadership Forum described the following issues that currently exist with justice and policing:

- Getting to court is difficult for many.
- Access to lawyers or court workers can be challenging.
- A variety of support system are needed for different sectors of justice.
- There is an overall lack of responsiveness to Innu needs in the Justice system.
- Although some Innu may be trained to work in the Justice system, their availability is often a problem.
- There is little coordination of services and inconsistent use of alternatives.
- Police response time is slow.
- Police are reluctant to be involved in family matters.
- Assaults occur while in custody.
- There are no Innu police officers.
The Innu Leadership Forum’s vision for a future where these issues have been resolved includes the following:

- The Royal Newfoundland Constabulary (RNC) will work as the police force in Innu communities.
- Innu people will be police, lawyers, and judges in the communities.
- Non-Innu law enforcement officers will be accompanied by an Innu interpreter when visiting the scene of a disturbance.
- Court will be held in each community with a designated and appropriate space.
- Innu will develop their own legal system.
- Until an Innu legal system is developed, the current court system will take into account Innu laws and traditions.
- Innu language will be used in court.
- Sentencing circles will be more common and produce good results.
- Effective diversion programs at the policing level will be established, working, and supported.
- Coordinated Innu Justice Services will be established—from diversion through courts and sentencing to effective re-entry to the community.
- Transportation, and other costs and barriers to a fair and accessible legal system, will be overcome.
- Reconsidering the Healing Path Court Proposal will be the first step in the process to change the justice system.

The Innu Practitioners’ Forum made the following additional points about the vision:

**Justice**

- Court will, again, be held in Sheshatshiu.
- The Healing Path Court Proposal will be reviewed, revised, and submitted to leadership for endorsement, as it is a valid and current Innu approach to improving justice.
- Information and service gaps in justice will be clarified and addressed.
- Sentencing circles will be brought back for:
  - Dispute resolution
  - Victim services
  - Family justice
- It will be recognized that many clients in the justice system have FASD.
- Innu agencies will partner with key justice organizations to explore a common vision for the future.
- Interagency meetings will help address issues in the justice system.
- Issues related to confidentiality in the justice system will be examined and addressed by examining how similar issues have been addressed in other communities.

**Policing**

- A lead person to facilitate change will be identified.
• Facts surrounding policing control by Innu will be examined and presented.
• Consider what arrangements are being made for policing after self-government.
• A policing plan will be developed.
• The plan will address how ongoing training for Innu police will be achieved.
• Community members who are trained tribal police and private security will be recognized.

8.12 Communication

Communication was identified as a major influencing factor to nearly all of the other healing issues. Communication difficulties exist across all Innu governments and organizations, and impact elected officials and staff, senior managers in all departments, managers and front line staff, and all community members. Instead of communicating and collaborating toward common goals, there is often conflict or silence in Innu communities, governments, and organizations. When facts are not shared about decisions and actions, rumours prevail. Improved communication in Innu communities has been identified as a critical priority for healing strategies to be effective. Effective communication in Innu communities means:

• Innu governments and organizations will be transparent in their operation.
• Community members will have access to information about Innu governments and organizations.
• Innu governments and organizations will use a variety of media to communicate with Innu community members (e.g., a newsletter, AGM, government/organization website, social media, and other internet services).
• The primary language for communication will be Innu—this will help to support Innu language education efforts and build Innu language capacity in communities.
• The radio station will be upgraded and be capable of mobile broadcasts—which it will do often.
• Local cable TV will be used in both communities.
• Staff will meet regularly and consistently in an inter-agency environment where all departments and key agencies of provincial and federal governments also attend.
• Innu Chiefs and Band Councils will communicate decisions to staff in an effective, efficient, and timely manner.
• Band staff will implement decisions made by Innu Chiefs and Band Councils as directed.
• Community members will use a variety of methods to communicate with each other about events.
• There will be more non-government events in communities with more community members organizing and attending the events.

The Innu Practitioners Forum identified the following additional considerations to improve communication in Innu communities:
• A **Community Programs and Services Map** will be developed as this is urgently needed since few community members know:
  o what programs and services are available
  o who manages the programs and services
  o how to access programs and services
• The **Community Programs and Services Map** will be regularly maintained and geared to Innu audiences.
• The **Community Programs and Services Map** will be a key tool for effective communication.
• A detailed Communication Strategy will be developed that is focused around the Innu language.
• Innu communities will invest in equipment, tools, and individuals to enhance communication:
  o Radio
  o Cable
  o IT
• The Communication Strategy will identify a process for making Public Safety Announcements.
• There will be an analysis of current radio operations in Innu communities, how radio services are managed in other communities, and how radio services in Innu communities might be improved.
• The Communication Strategy will address how to communicate information effectively so that Innu community members can make informed decisions in both personal and community matters.
• The IEDLP and other Innu organizations will be required to maintain the same principles and standards for transparent government—good communication is necessary to achieve these goals.

8.13 Outpost and Spirituality

The country life is being lost and so, too, is the Innu connection to it. Innu have lost respect for animals, land, traditions, and each other and, as a result, we are losing our spirituality. While Mushuau Innu First Nation still has country Gatherings, Sheshatshiu Innu First Nation does not. There are less community members participating in the Outpost program, and even less long-term stays in the country. Many Innu who do go into the country have to leave after a short time due to demands back in the community. The Outpost program, as it is now being operated, is very costly. Emphasis on money is impacting traditional Innu values. For healing to occur, Innu must balance country life and settlement life, as well as modern and traditional values. Should this be achieved, the Innu Leadership Forum envisioned the following:

• The Outpost program will be coordinated early in each year to the Events Calendars for schools and other Innu organizations.
• Education credits will be provided for participating in country life and traditional activities.
• The Cree Hunters and Trappers Income Security Program will be studied, amended and adapted to support traditional Innu activities; these activities will have a respected place in Innu communities.
• Innu will regain a deep understanding of their spiritual history.
• Country stays will be used as part of treatment, justice, corrections, and other programming.
• Innu history, stories, skills, and culture will be preserved through a variety of media and activities so that less Innu traditions are lost.
• Innu archives will be developed so Innu traditional materials and history will be properly saved, stored, and shared.

The Innu Practitioners’ Forum added the following to the Innu Leadership Forum’s vision for Outpost and Spirituality:

• The Outpost policy will be revisited, stressing its purpose and Band Council support for that purpose.
• Distribution of resources for the Outpost program will be clearly outlined in the policy, and will be enforced.
• How staff can take advantage of Outpost will be clearly outlined in the human resources policy.
• The MIFN’s Annual Gathering will be explored to determine whether a similar Gathering could apply to SIFN as part of self-governance and as a complement to the Outpost program.
• Recognizing that the Innu connection to the country is a significant part of the Innu’s link to spirituality and culture, country life will be brought into Innu programming whenever possible.
• Since there will be increased participation in country life, there will need to be country-based delivery of other programs and services.

8.14 Money Management

“Money Management,” as a healing priority, addresses lack of understanding surrounding why and how money flows into and out of the community, as well as
associated roles and responsibilities in financial management. This section was developed because it was considered to be different from the “Financial Systems” priority in section 8.7, which focuses on the technical aspects of how financial management works. Organizations, departments, and individuals who manage public funds on behalf of Innu communities need to demonstrate accountability and accept obligations and expected standards surrounding money management.

The Innu Practitioners’ Forum added this section as a healing priority, with the following vision for a future where money management issues have been resolved:

- Transparency will be in place for all public funds.
- Information regarding community revenues and how they are allocated will be accessible to the public.
- Budgets will be clearly outlined, easy to understand, and followed by successive governments.
- Roles and responsibilities for money management will be clearly outlined in a document that provides details on delegated levels of authority.
- Money management will be an open public process where revenues, terms of transfers, budgets, work plans, expense reports, financial decisions, audits, and annual reports will be completed and/or presented in public sessions.
- Financial information will be easily accessible and easy for community members to understand.
- Elections and changes in leadership will not interrupt sound money management.
- General education regarding money management will be available to community members; this education will include roles and responsibilities of the Band Council, managers, front line staff, and community members—all will be accountable to follow proper procedures.
- The organizational structure for Innu money management will be described in bylaws and policies; these will be public documents.
- A conflict of interest policy will be followed by elected officials and staff.
- The Band Council will have a CEO who will oversee each Council meeting and provide briefings on financial matters.
- The CEO will ensure that interdepartmental meetings and ongoing budget-monitoring occurs to better meet community goals.
- Chief and council will sign funding agreements only after briefings from staff.
- There will be ongoing communication with community members regarding reasons for financial decisions.
- Community members will be able to attend Council meetings with respectful sharing of knowledge, confident that issues are being addressed based on the overall plan for communities—rather than preference for individuals or specific groups.
9. What Actions Will We Take?

Innu healing requires comprehensive, planned, sustained, and cumulative action. *The Innu Healing Strategy* provides a framework for specific actions needed to advance each community’s healing progress. Decisions on what priorities and actions to take remain the responsibility of each community. Each Innu community must use its own resources, expertise and capacity to consider the community’s unique circumstances and determine what actions are required. While *The Innu Healing Strategy* was being developed, it became clear that internal organizational matters were a priority for SIFN, whereas capacity building in people, systems, and documents were a more immediate priority for MIFN.

For sustained healing to be realized, there must be realistic goals and expectations for each community. Before sustained progress can occur, each community must lay a stable foundation by beginning with an action plan that is based on the needs of the community; this is the first level of the implementation process. It is important for each Band program to develop a practical and realistic work plan that delivers existing services while also addressing the community’s priority healing steps. Department heads for each Innu community are currently developing departmental work plans for next year alongside their colleagues under the guidance and mentorship of professional coaches.

The second level of the implementation process involves priorities that Sheshatshiu and Natuashish share in common; these priorities will be addressed by the Innu Round Table. Numerous projects are underway to address needed changes to services and programs that are of concern to both SIFN and MIFN; other IRT projects are building capacity, and enhancing information and tools needed to address healing priorities.
Additional information regarding the work of the IRT can be found in the IRT work plan, which is regularly tabled at IRT meetings.

The third level of the implementation process is the responsibility of the Chief and Council for each community, and the Innu Nation Board. Strong leadership within each community is essential to create an environment for success for Band staff and the IRT Secretariat. Some priorities—such as changes to IEDLP, Innu Trust reform, signing MOUs, linking to self-government, establishing new transparency and accountability measures for public funds, communicating with members, and overseeing organizational changes—can only be addressed by elected officials. SIFN, MIFN, and the Innu Nation have all committed to being responsible for the third part of The Innu Healing Strategy implementation process; as part of this process, all three bodies will adopt a healing work plan each year.

*The Innu Healing Strategy* will be implemented by having work plans at the three levels described above. While implementing *The Innu Healing Strategy* by these three levels of work plans offers great opportunities for change, doing so also increases the possibility that there will be a disconnection between efforts at these three levels. To maximize success, a strategy needs to be in place to keep short-term actions on track in order to achieve longer-term goals. With consistent and cumulative progress, short-term actions lead to the achievement of the Vision and Mission of *The Innu Healing Strategy*.

A framework for short-term objectives will contribute to achieving longer-term outcomes. As a result, a *Five Year Planning Guide* has been included with this healing strategy (see Appendix B). *The Five Year Planning Guide* provides objectives for each of the fourteen (14) Healing Priorities; this guide will help Innu to choose annual actions that can help in meeting the five year objectives. The *Five Year Planning Guide* will be reviewed and amended as needed each year; this will keep the guide relevant to both *The Innu Healing Strategy* and to the yearly work plan process.
REFERENCES


APPENDICES

APPENDIX A:
Healing Measurement Framework

1. How do we Measure Success of the Healing Strategy?

While there is a great deal of information on the determinants of health from sources around the world, the main source of information for the determinants of health framework that is being used to measure the effectiveness of *The Innu Healing Strategy* is the Public Health Agency of Canada (PHAC). PHAC uses the determinants of health to examine health through a lens that looks beyond direct health services to other factors (such as income, social support networks, and education and literacy) that impact the health status of Canadians. A list of key determinants that correlate with the health status of Canadians is provided on the PHAC website. While each determinant is important on its own, the determinants interact in a variety of ways to influence the health of individuals and communities. By addressing one or more of the determinants of health, there is great potential to improve health status for populations and individuals.

The PHAC website identifies and describes twelve (12) determinants of health; for the purposes of measuring the effectiveness of *The Innu Healing Strategy*, eleven (11) of the twelve (12) determinants of health are adopted. The twelve (12) determinants of
health described by PHAC can be found in the following list and are summarized below, however, further information on the determinants of health can be found on the PHAC website (http://www.phac-aspc.gc.ca/ph-sp/determinants/determinants-eng.php#status).

1. Income and Social Status
2. Social Support Networks
3. Education and Literacy
4. Employment/Working Conditions
5. Social Environments
6. Physical Environments
7. Personal Health Practices and Coping Skills
8. Healthy Child Development
9. Biology and Genetic Endowment
10. Health Services
11. Gender
12. Culture

**Income and Social Status**
Level of income and social status significantly impacts living conditions such as access to safe housing and healthy food choices. The healthiest populations are found in societies that are prosperous and have an equitable distribution of wealth. Research indicates that the degree of control that people have over life circumstances, especially stressful situations, and their discretion to act, significantly influence health and wellbeing. Higher income and social status has a positive impact on the level of control and discretion that individuals have to act on their circumstances. There is strong and growing evidence that higher social and economic status is associated with better health; in fact, this determinant seems to have the most significant impact on health and wellbeing.

**Social Support Networks**
The level of support that individuals have from families, friends, and communities is associated with better health status. Social support networks are significant in helping people to solve problems and deal with adversity, and in helping individuals attain and maintain a sense of mastery and control over life circumstances. The care and respect that individuals experience through social relationships, and the sense of satisfaction and well-being experienced from relationships, often acts as a buffer against health problems.
Education and Literacy
Health status often improves with increasing levels of education since this determinant is closely tied to socioeconomic status. Effective education for children, and lifelong learning for adults, are key contributors to health and prosperity for individuals. Education contributes to health and prosperity by equipping people with knowledge and skills for problem solving, and helps provide a sense of control and mastery over life circumstances. The level of education a person has enhances job opportunities, income security, and job satisfaction. In addition, an individual’s level of education influences their ability to access and understand information that will help them to maintain their health.

Employment and Working Conditions
Unemployment and stressful or unsafe work are associated with poorer health. People who have more control over their work circumstances and fewer stress-related demands at work are healthier and often live longer than those who are engaged in more stressful, or riskier, work and activities. Employment has a significant effect on a person’s physical, mental, and social health. Paid work provides not only money, but also a sense of identity and purpose, social contacts, and opportunities for personal growth. High levels of unemployment and economic instability, on the other hand, can cause significant mental health problems and produce adverse effects on the individuals, their families and their communities.

Social Environments
Civic vitality refers to the strength of social networks within a community, region, province or country. It is reflected in the institutions, organizations, and informal practices whereby people create and share resources, and build attachments with others. Social stability, recognition of diversity, safety, good working relationships, and cohesive communities provide a supportive society that reduces or negates many potential risks to good health. Efforts to improve health through lifestyle choices can be a shared social, or community, responsibility. Social or community responses can add resources to an individual's repertoire of strategies to cope with and overcome challenges to health and wellbeing.

Physical Environments
The physical environment in which individuals and communities live and work is a significant determinant of health. At certain levels of exposure, contaminants in our air, water, food, and soil can cause a variety of adverse health effects, including cancer, birth defects, respiratory illness and gastrointestinal ailments. In the built environment, factors related to housing, indoor air quality, and the design of communities and transportation systems can significantly influence our physical and psychological well-being. Safety of the physical environment of communities can be significantly impacted by factors such as the quality of sanitation and other community services, vandalism, and community structures such as street lights and access to recreation.
Personal Health Practices and Coping Skills
Actions, choices, and coping skills can positively or negatively impact health and wellbeing. Personal health practices and coping skills are profoundly influenced by social, economic, and environmental factors. There is growing evidence to support the position that personal life "choices" are greatly influenced by the socioeconomic environments in which people live, learn, work, and play. Creation of supportive environments will enhance the capacity that individuals have to make healthy lifestyle choices. For example, choices that negatively influence health may include a combination of alcohol consumption, drug use, unsafe sex practices, unhealthy diet, and smoking. Positive health choices may prevent disease, promote self-care, and help individuals to cope with challenges, develop self-reliance, and solve problems.

Healthy Child Development
Evidence that supports the effects of early experiences on brain development, school readiness, and health in later life has sparked a growing consensus that early child development is a powerful determinant of health. For example, a child’s development is greatly affected by his or her housing, their neighborhood, family income, parents’ education level, access to nutritious food, physical recreation, and access to dental and medical care. Secure attachment between parents/caregivers and babies in the first eighteen (18) months of life helps children to develop trust, self-esteem, emotional control and the ability to have positive relationships with others in later life. Infants and children who are neglected or abused are at higher risk for injuries, as well as a number of behavioral, social and cognitive problems later in life.

Biology and Genetic Endowment
Although other factors are important determinants of overall health, genetic endowment may predispose some individuals or populations to particular diseases or health problems. For these individuals or groups, basic biology and organic make-up is an important determinant of health.

Health Services
Access to a continuum of health care services, such as services designed to maintain and promote health, prevent disease, treat illnesses, and restore health, contribute to the overall health of the population.

Gender
Societies often assign roles, personality traits, attitudes, behaviors, values, power and influence to specific genders. These "Gendered" norms influence how people live and, in turn, can influence the health system's practices and priorities. Gender differences
can be particularly significant in rural, remote, and northern locations; thus, societal views in the community where one lives can significantly impact their health.

**Culture**
Some individuals or groups may face additional health risks due to the influence of a dominant cultural group that perpetuates marginalization, stigmatization, loss or devaluation of language and culture, and lack of access to culturally appropriate health care and services. For example, among the Canadian population, significantly higher rates of major chronic diseases such as diabetes, heart problems, cancer hypertension, and arthritis/rheumatism, have been noted in Aboriginal communities. Individual and community connection or separation from culture and cultural practices can have a profound impact on their health and wellbeing.

2. **How do we measure specific projects and actions?**

The main objective of *The Innu Healing Strategy* is to achieve significant changes to Innu communities over time. Using the determinants of health as a framework will help to quantify progress on the path to healing. *The Innu Healing Strategy* has adopted objectives or targets for change, and a plan for short-term actions that will move Innu communities closer to the desired change, for each of the fourteen (14) priority areas identified within the strategy. Annual departmental work plans that outline how each department plans to address healing efforts while continuing to deliver regular programs and services will support the implementation of *The Innu Healing Strategy*.

Use of the determinants of health as a framework for how well priorities in *The Innu Healing Strategy* are being addressed over time, and evaluation of targets or outcomes from smaller projects or activities, will help to measure the overall effectiveness of *The Innu Healing Strategy*. Doing so will help to ensure that short-term objectives or targets are being tracked and that progress is being made. With tangible data on the effectiveness of, and progress being made, with *The Innu Healing Strategy*, priorities and goals can be revised and adapted to changing needs. Positive changes in the Innu healing priorities that are brought about by successful action plans will lead to healing in Innu communities and will be reflected in the determinants of health experienced by each individual and community.
The Innu Healing Strategy Vision

At the heart of this vision, Innu are healthy, loving and caring individuals. Families and community come together to make healthy decisions. Innu work together as one to create our own destiny. All Innu support and help each other yet we hold each other accountable for our actions.

We feel pride in managing our own lives and our community again. We are running our own agencies and programs under a respected Innu Government that fosters unity and fairness for all Innu. Our children see leaders who make decisions for the good of the whole community. Opportunities for education and employment are available to everyone.

Elders are sharing traditional knowledge and skills. Parents are connecting with their culture and children are learning. All Innu children are proud of who they are and able to find the opportunities of both the Innu and Akaneshau culture.
There are Fourteen Priority Healing Areas in the Strategy

1. Innu Governance
2. Education
3. Employment and Training
4. Health and Health Services
5. Economic Development
6. Innu Trust
7. Financial systems
8. Recreation
9. Drugs and alcohol
10. Youth
11. Justice and Policing
12. Communications
13. Outpost and Spirituality
14. Money Management

Each priority has a specific vision for change which fits into the overall Innu healing strategy and its greater vision noted above. Implementing the strategy is a practical exercise that rests in three different areas—departmental work plans, the IRT work plan, and annual political level commitments that will address matters that require Innu government activity.

The purpose of the Five Year Planning Guide for The Innu Healing Strategy is twofold. First, this document will offer a set of targets to be achieved over the next five years; these targets will help The Innu Healing Strategy goals for change to be realized. Second, the Five Year Planning Guide will suggest practical activities that can be completed in the short-term, helping to set the stage for change by moving Innu communities toward targets.

The success of The Innu Healing Strategy depends heavily upon successful development, implementation, and completion of the work plans of Innu departments and the IRT. The five year objectives and sample activities are only a guide (not a prescription) for the departments of each Innu community and other related Innu agencies as they develop their work plans. Content of the work plan for each department or agency is developed by the individual designated to create the work plan. Each author has autonomy in developing their work plan as only they are in the position to know all pertinent information that is specific to the needs and capacity of their department, secretariat, and/or elected body.
Five Year Objectives, and Sample Year-One Supportive Activities, for each Healing Strategy Priority

1. Innu Governance

Five Year Objectives for Innu Governance

- An enforceable election code will be developed and implemented for the next election.
- Innu Government will demonstrate transparency, with regular meetings that follow established rules, meetings that are open to attendance by members, clear financial processes and procedures, and a communication strategy that is operational.
- Innu Government will demonstrate accountability to members by having budget meetings that are open to the public, an annual general meeting (AGM), an annual report, audits that are released to the public, and release of other major reports on Innu Governance.

(Other healing priorities from the Innu Healing Strategy that these objectives are linked to are: #7—Financial Systems, and #14--Money Management)

Examples of Initial Steps in Year-One That Will Support Changes in Innu Governance

- Establish a healing work plan for the Chief and Council in each community that shows governance reform as a priority item
- Research and summarize election options for development of an election code
- Seek community, self-government, and legal input on the best elements for an election code based on completed research
- Gather examples of best practices in other open First Nations governments and meetings
- Summarize options
- Seek Staff, community, and other input regarding which best practices would be most appropriate for Innu communities
- Identify examples of best practices of accountable governments
- Summarize options and develop a framework for improving accountability in Innu Government
- Communicate options to membership

2. Education

Five Year Objectives for Education

- The Innu Education curriculum will include significant new Innu content.
• A recognition program will be developed and implemented to celebrate Innu academic successes.
• An Innu Teachers’ Development Program will be implemented.
• Improved supports will be introduced for special needs students.
• The graduation rate will increase, becoming closer to provincial averages.

Examples of Initial Steps in Year-One That Will Support Changes in Education
• Chief and Council in each community will approach the Innu Education Board and local principal to ask them to consider the results of The Innu Healing Strategy and recent community consultations, and work to develop a cooperative action plan with their community.
• Staff will begin working on a community-based communication strategy for education programming that includes celebration of education success.
• Collaborate with the Innu Education Board to identify additional specialized resources needed in Innu schools—including Innu curriculum development—and work with the Innu Education Board to address these needs.

3. Employment and Training

Five Year Objectives for Employment and Training
• An Innu oriented training program will be implemented.
• More training programs will be offered in the community.
• Internal employment and training services will be integrated.

Examples of Initial Steps in Year-One That Will Support Changes in Employment and Training
• Senior Directors will create and agree upon a description of future job demands in Innu communities and in the region.
• Senior staff will examine training systems currently in place and develop a plan for coordinating all relevant internal Band services.
• Employment and training staff will partner with school staff to assess high school students’ career interests and aspirations, develop a preparation path with the student, and outline a case plan for assisting each student.
• Other agencies involved in employment and training outside the communities will be contacted, and practical linkages will be developed between these agencies and employment and training services in Innu communities.

4. Health and Health Services

Five Year Objectives for Health and Health Services
• Community members will demonstrate increased levels of physical activity.
• Physical activity will be encouraged through investment in recreation facilities and policy development.
• A path will be created to assist Innu to become health professionals.
• Health services will be realigned and health data systems will be improved.
• More supports for health workers will be in place.
• A health communication plan oriented to Innu people will be created and implemented.

Examples of Initial Steps in Year-One That Will Support Changes in Health and Health Services
• Governance and management structures for health services, recommended by the Institute on Governance report, will be reviewed and considered.
• The preferred path forward for health governance and delivery will be determined and each community and Council will be consulted for their recommendations on changes.
• An interdepartmental working group will be created to develop a Recreation Master Plan that will help to address physical activity levels in each community (see Recreation healing priority in section 8.4 of The Innu Healing Strategy).
• Support needs for health workers will be identified.
• A healthier Innu communication/marketing campaign will be designed.
• Recommendations for the forthcoming Health Information Management report will be considered and responded to.

5. Economic Development

Five Year Objectives for Economic Development
• IEDLP will operate under the highest standards for corporate performance.
• Innu corporations will develop and implement a communication strategy.
• Innu corporations will employ professionally qualified staff.
• Innu people will be trained and prepared to assume business management positions.
• The number of privately owned Innu businesses will increase, and will contribute to community development in many ways.

Examples of Initial Steps in Year-One That Will Support Changes in Economic Development
• Council and senior staff will work with other Innu to examine reforms, offer alternatives, and consult membership on how IEDLP will be changed.
6. Innu Trust

Five Year Objectives for the Innu Trust
• Transparent policies, procedures, and criteria will be developed for all aspects of Trust operations.
• Priorities for funding will be clearly stated.
• The Innu Trust will report on its investments and will monitor achievement of objectives.

Examples of Initial Steps in Year-One That Will Support Changes in the Innu Trust
• Council will participate in any discussions on changes to Innu Trust governance or administration.
• Information will be gathered on Innu Trust fund use and will be presented to community members.
• Priority funding areas for future Innu Trust investments in the community will be identified.
• Proposed priorities will be submitted to the Innu Trust.

7. Financial Systems

Five Year Objectives for Financial Systems
• The community will follow best practices for financial management.
• A financial law, bylaw, or policy will clearly outline roles, responsibilities and financial procedures.
• All significant financial documents, such as plans, budgets, amendments, and year-end reports will be available to members.
• Information on the new financial systems and practices will be readily available to all members.

Examples of Initial Steps in Year-One That Will Support Changes in the Financial System
• Examples will be gathered of the best First Nation financial management practices.
• Council and the senior staff working groups will identify weak practices and associated issues and impacts.
• The new financial management approach will be drafted.
8. **Recreation**

**Five Year Objectives for Recreation**
- The recreation program will be more active.
- A Master Plan for recreation development will be developed.
- New and existing facilities will be used more by the community.
- Strong linkages between recreation and other services will be created.

**Examples of Initial Steps in Year-One That Will Support Changes in Recreation**
- Each Council will form a working group to develop a Recreation Master Plan.
- The draft of the Recreation Master Plan will be tabled with the community.
- Elders will be consulted to plan how to bring Innu Games back.
- The Recreation Department will be a part of case planning for the healing of individuals and families.

9. **Drugs and Alcohol**

**Five Year Objectives for Drug and Alcohol Reduction**
- There will be a reduction in the rates of drug and alcohol use.
- Community views (normalization) of drugs and alcohol will be changed.
- Treatment services will be provided with Innu culture and language content.
- Innu leaders will be role models for the community’s drug and alcohol policies and practices.

**Examples of Initial Steps in Year-One That Will Support Changes in Drug and Alcohol Use**
- An Innu-based family treatment and follow-up program will be designed.
- A staff training program will be in operation.
- Innu Leaders will publicly commit to be role models with respect to drug and alcohol use.
- Social marketing efforts on drug and alcohol usage will be researched and a communications strategy for the Innu will be developed.

10. **Youth**

**Five Year Objectives for Youth**
- Youth will choose positive opportunities over drugs, gas, and alcohol use.
- More youth will finish their education.
- Innu Youth will be more knowledgeable of their Innu Culture.
• Youth will be full participants in all aspects of Innu society including country life and skills.

Examples of Initial Steps in Year-One That Will Support Change in Youth
• The community will hold a youth forum to identify how to improve the future of Innu youth.
• The forum results will become the basis of a draft Innu youth strategy.
• Youth events will be planned and delivered throughout the year.

11. Justice and Policing

Five Year Objectives for Justice and Policing
• An intergovernmental committee will actively work on changing policing and justice practices.
• Innu communities will work cooperatively with other officials to implement community policing, diversion, restitution, and sentencing circles.
• Fewer Innu will end up in jail.

Examples of Initial Steps in Year-One That Will Support Changes in Justice and Policing
• An agreement will be secured with other governments to pursue improved justice and policing services.
• A strategy will be developed to better reintegrate Innu that return to the community after serving sentences.
• Existing justice services will be brought into the integrated case plan and service work.

12. Communications

Five Year Objectives for Communications
• Government operations will be transparent to all members.
• Staff and departments will communicate well and collaborate toward common goals.
• There will be improved communications amongst all members of the community.
• Various media will be used to keep people informed of facts, events, and decisions.

Examples of Initial Steps in Year-One That Will Support Changes in Communication
• A communications strategy will be developed.
• New government transparency measures will be implemented and documents will be made available (see Governance section—#1—above).
• Public information meetings will be held on funding, budgeting and expenditure processes, and terms and conditions (see Money Management section—#14—below).
• Discussions will be started on the nature and scope of an Access to First Nation Information Policy.

13. Outpost and Spirituality

Five Year Objectives for Outpost & Spirituality
• More Innu will be spending time in the country.
• A new Outpost policy will be adopted and Band agencies will be involved in the Outpost program.
• Country life will be included in many programs such as family treatment and education.
• The Gathering will have a formal place in the Innu revised governance system.

Examples of Initial Steps in Year-One That Will Support Changes in Outpost and Spirituality
• Council and senior staff will work on a modern Outpost policy.
• A review of the traditional role of Gatherings in Innu governance will be carried out.
• All departments will consider how country life can be better included in each program and service.
• Terms of a proposal to actively capture elder’s experiences, knowledge and skills will be prepared and a funding search begun.

14. Money Management

Five Year Objectives for Money Management
• The membership will have a good understanding of revenues, funding agreements, and financial processes of the First Nation.
• Management of all public funds will be under an open and transparent process.
• Major financial decisions will be made in meetings open to observers.
• Professional staff and elected officials will have clearly documented roles and responsibilities.
Examples of Initial Steps in Year-One That Will Support Changes in Money Management

• Explanations of key community revenues, funding arrangements, and expenditure rules will be developed in plain language.
• “Maps” and charts will be prepared of how various types of money flow through the community.
• Public information sessions will be developed and held on First Nation money management.
• Best practices for First Nation and other governments’ financial management practices will be examined.
• An assessment of the community’s existing practices will be compared and examined against best practices.