

**INSIDE:**

- Former addict helps others address issues
- Tackling the stigma of FASD
- Inuvik "damp" shelter enters second year
- Looking back on the closure of the NWT's last treatment centre

Michael LaRousse/WG, photo illustration

# Mobile addictions treatment could be launched this year

*Program to be offered alongside on-the-land and southern treatment options*

by **Kassina Ryder**  
Northern News Services  
NWT

A mobile addictions treatment program could be piloted in the Northwest Territories before the end of the fiscal year, says the territory's director of mental health and addictions.

Kimberly Fairman said it's not yet clear which community will host the pilot program, but the Department of Health and Social Services is currently working toward establishing a location and program model.

"The fiscal year is our end point for having the pilot completed," she said.

"We've been moving fairly quickly to try and establish where we're going to go and what the program is going to look like."

Mobile programs won't eliminate other addictions programming, said Health and Social Services Minister Glen Abernethy. Instead, mobile treatment will be established in addition to on-the-land treatment programs.

Those in need of medical detox programs will still have the option to travel south to attend any of the four treatment facilities in Alberta and British Columbia that accept patients from the NWT.

Abernethy said the Minister's Forum on Addictions and Community Wellness, which travelled throughout the territory in 2013 gathering input from residents on ways to fight addiction, helped guide the decision to establish more community-based treatment programs.

"I talked about doing multiple things and providing people with options because not all treatment opportunities or programs are the right one for individuals at certain times," Abernethy said. "People want choice, people want to have a little bit of flexibility to look for the program that is going to meet their needs."

Wilfred Simon, a community wellness worker in Fort Resolution and a member of the minister's forum, agrees.

"On the land programs, that might work for some people, but not all people. Some people want a facilitated program," he said. "Whether it's on the land, mobile or even treatment down south, they all can work together."

Simon believes establishing mobile treatment programs is "right on target" — as long as front line workers in the communities, such as wellness workers, are given the opportunity to provide input.

"I think it's a great idea myself," he said. "But you have to use all the resources in town."

Collaborating resources means partnering with local nursing staff, RCMP and teachers to create a community-based support system, Simon added.

Ideally, he would like to see addictions information provided as part of the NWT curriculum in schools, starting in Grade 4.

"The kids know that it's happening around town," he

said. "We should start teaching kids about addictions at a young age, have the teachers maybe go to take a course in addictions or have somebody that already understands addictions to teach each class some kind of course in addictions all year long, meaning by the time they're in high school, they can make the right choices."

More than 60 per cent of NWT residents between 15 and 24 years old reported drinking heavily at least once a month, according to the NWT Health Status Report published in 2011.

Drinking is considered "heavy" if five or more drinks are consumed in one sitting.

#### **On-the-land and mobile treatment to be funded separately**

Abernethy said \$1.2 million has been earmarked for on-the-land addictions treatment programs this year.

It's not yet clear how much will be set aside for mobile treatment, but Abernethy said

a separate pocket of funding will be used to fund those programs.

The government is still working on developing partnerships, such as with Pound-makers Lodge Treatment Centre in Alberta, to create and implement a program model for mobile treatment.

"Our department is still in conversation with Pound-makers trying to see if we can expand on the opportunity and work with them, but we're open to other partners if other partners make themselves available," Abernethy said.

The programs would take place in existing community buildings, which would determine how many clients could participate at any one time.

Clients would be required to stay at the facility for the duration of the program, but program length has not yet been determined and could vary from community to community, Abernethy said.

"It depends on what the research says, what our part-

ners say is most appropriate based on their experiences, what the communities are looking for, what the people are telling us is appropriate for their needs as well," he said.

"So, we're still in the design phase."

While the majority of the programming will be based on a specific model, Abernethy said cultural relevance would also play a large role.

"There would have to be an opportunity to tailor a cultural component in, which would be different from region to region," he said.

"Much of the program could be the same. It needs to be flexible enough to work with the community, wherever location we're going to, to make sure we're incorporating the local culture as well."

Simon said while he knows there are still details to work out, the first step toward a solution is to try.

"It will be trial and error," he said. "But we have to do it in order to know."

ADDICTION DISORDER & DEPENDENCE & SYMPTOMS OF USE  
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# Understanding addictions

Wellness worker draws on experience to help others battle alcohol and drugs



Wilfred Simon, a wellness worker in Fort Resolution, has had his own struggles with addictions in the past. Today he works to help others escape the prison of substance abuse.

by Paul Bickford  
 Northern News Services  
 Deninu Ku'e/Fort Resolution

Wilfred Simon, a wellness worker in Fort Resolution, is eminently suited to help people struggling with addictions.

Not only does he have the training and the certificates, he has had his own experience of struggling with – and conquering – his own addictions.

"A lot of the negative stuff that I went through really helps me today with my clients because a lot of them come from the same place, and I can understand what they're going through," he said.

Simon shares his own story – alcohol abuse for over three decades before he became sober – with the people he is trying to help.

"They can feel more relaxed," he said. "They can feel, 'Hey, I'm not alone.' Because most time when you're in an addiction, you think you're alone."

**Back to childhood**

The 59-year-old said he, as well as most of his clients, can trace their addictions back to his childhood.

His own addictions began when he was growing up in a violent household where family members suffered from alcohol abuse.

Those problems were compounded by his time in residential school, although he was not abused there.

"My family life taught me to be alcoholic, taught me to

be mean, taught me to be self-centred," he explained.

"Residential school put shame in me and guilt, took my language away, took who I was away.

"It made me an apple, that's what I call it. I was white on the inside and red on the outside."

Simon said he started drinking at age nine.

"I used to sneak a beer," he said. "My dad and them used to drink on weekends, and I'd steal a beer and I'd start drinking it."

Even as a child, he would get drunk.

"I was probably a regular weekend drunk when I was 12 years old," he said. "I never really experienced a normal childhood or even a normal adulthood."

Simon was born in Rocher River, but grew up in Fort Smith until 1967 when his family moved to Fort Resolution.

**Weekend drunk**

Even as a self-described weekend drunk, he worked in a number of places in the NWT and Alberta, and was an even heavier drinker between jobs.

Then in 1997, Simon – who was 42 years old at the time and living in Alberta – was contemplating suicide after a night of consuming alcohol, marijuana and cocaine.

That night, he had an intense religious experience that he says turned his life around – he stopped drinking, using drugs and smoking, and married a few months later.

In September 1999, he became an alcohol and drug counsellor in Fort Resolution.

"For me, again it was another spiritual thing," he said, noting he played on applying for the job and was inspired by his volunteer work to help inmates in Alberta penitentiaries.

"Then I thought there are prisoners out here," he said, referring to

Fort Resolution. "There are a lot of people living in prisons to their addictions."

Drug and alcohol counsellors are now called wellness workers in the NWT.

Simon works with the Fort Resolution Community Wellness Program, which is run by Deninu Ku'e First Nation.

Over the years, he believes the program has made a positive impact on the community.

"We're here for people who want to sober up," he said.

Simon said he finds the work very satisfying in helping the people of Fort Resolution.

"I love people from Fort Res," he said.

"I'm here for everybody and anybody that has an addiction problem or just wants to talk."

**"I'm here for anybody and everybody."**

Wilfred Simon

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# NATIONAL ADDICTIONS AWARENESS WEEK

## Battling FASD means fighting against stigma and silence

Two outreach workers say the disorder has reached 'epidemic' proportions

by **Randi Beers**  
Northern News Services  
Somba K'e/Yellowknife

Rachel Tambour believes FASD has become an "epidemic" in the Northwest Territories and that the only way to successfully combat it is to take away the taboo of talking about it.

FASD, or fetal alcohol spectrum disorder, is the name given to a variety of birth defects caused by prenatal exposure to alcohol. There are no statistics on how many people in the Northwest Territories have FASD, but it is commonly believed the territorial rate is higher than the national average of nine out of every 1,000 infants.

Tambour provides outreach services for people with FASD in Yellowknife with the Yellowknife Association for

Community Living. She and Vera Nesbitt, co-ordinator for family and children services, travel to communities to host information workshops about the disorder as well.

"It's so hush hush right now, not too many people like to talk about FASD," said Tambour, who decided to pursue a career in social work because of her family's own experiences with the disorder.

"Parents are just going to have to come out of their shell. If they know they drank in their pregnancy, chances are their child is going to be affected with FASD ... once the parents admit to it and at least they know and the child knows what is wrong."

"A majority of children are wandering around not knowing what is wrong with them but they don't know what it is.

They get frustrated and I feel that's why they turn to drugs and alcohol just to escape from those feelings they don't understand."

Nesbitt added the stigma surrounding the disorder has resulted in many people in the NWT not understanding what FASD is and how babies can get it. She says the two most common questions people ask her is whether it is a hereditary disorder and whether it can be passed on through the ejaculate of a man who has been drinking.

"Lots of people have questions, especially the youth," she said.

"But if we can change one person's misconceptions about FASD, that person can educate another one and then you have a domino effect."

Tambour says she'd like

to see FASD programming brought into the NWT school system and more workshops in communities, so people get more comfortable talking about FASD.

Until then, she says she's waiting for people to come through her door so she can help them.

**Rachel Tambour, left, and Vera Nesbitt provide FASD education and programming through the Yellowknife Association of Community Living. They say one of the biggest obstacles to educating people about the disorder is getting past the taboo of talking about it.**

Randi Beers/NWS, photo



## Alcohol, drug addiction numbers coming

Report from GNWT expected by February

by **Paul Bickford**  
Northern News Services  
Somba K'e/Yellowknife

The latest batch of statistics has been collected on addictions in the NWT, and is expected to be released soon.

The most recent survey data will be released in the next few months, said Damien Healy, manager of communications with the Department of Health and Social Services.

"Typically, a report is produced every three years to publicly release the results of the survey."

The last NWT Addictions Report was released in December of 2010. The information is collected through an addictions survey conducted by the NWT Bureau of Statistics.

For the most recent collection of data, telephone surveys were conducted in October and November of 2012 in Yellowknife, Fort Smith, Hay River and Inuvik, and face-to-face interviews were conducted in smaller communities. Dwellings in 22 different commu-

unities in the NWT were randomly sampled.

Based on the 2012/2013 survey results, alcohol continues to be the most widely used substance in the NWT, according to information from the Department of Health and Social Services.

The most commonly used illicit drugs that people have tried at least once in their life are cannabis, hallucinogens and cocaine/crack cocaine.

"The report provides a snapshot of the current alcohol, illicit drug and tobacco use, as well as the prevalence of gambling in the NWT," Healy said.

Population-scale behavioural changes occur over a long period of time, so the overall picture of the data reported in 2010 is still relevant. For example, the findings on heavy or binge drinking – defined by the survey as a person consuming five or more drinks in one sitting – changed little between 2002 and 2012/2013. Twelve years ago, 35 per cent of residents

reported binge drinking, while 36 per cent reported binge drinking in 2012/2013.

Uses for the survey's data include helping create policy and legislation, and to guide decision-making related to pre-

vention and treatment programs, such as awareness campaigns.

"The primary audience for the data is decision-makers and program and services managers in the NWT Health and Social Services system,"

noted Healy. "The data from the addictions survey is one piece of the broader picture that informs policy and programs development."

The GNWT budgeted \$200,000 to the NWT Bur-

eau of Statistics to conduct the 2012/2013 survey and approximately \$6,000 is budgeted for the lay-out and design of the report.

Since 2002, there have been four NWT Addictions Reports published.

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# NATIONAL ADDICTIONS AWARENESS WEEK

ADDICTION DISORDER OF DEPENDENCE OF SYMPTOMS OF USE  
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## Inuvik warming centre provides relief

*New shelter heading into second winter of operation with more funding, more staff*

by **Cody Punter**  
 Northern News Services  
 Inuvik

A warming centre in Inuvik that admits people who are intoxicated has been making a huge difference for homeless people who struggle with addictions since it opened last winter.

"I think it's achieved safety for a very vulnerable population of adults in our community who struggle with chronic addiction who are not otherwise served," said Arlene Jorgensen, CEO of the Beaufort Delta Health and Social Services Authority.

The idea to open the warming centre was first proposed last fall when a group of local business owners urged town council to do something to help deal with the increasing number of homeless people in the community. At the time, the only shelter in the community had a zero tolerance policy for alcohol, leaving homeless people who were intoxicated with nowhere to go.

After a series of meetings organized by community members, the Beaufort Delta Health and Social Services Authority agreed to provide \$75,000 and the local housing authority agreed to chip in \$50,000 to fund a shelter that would be specifically admit people under the influence of alcohol.

"It's a win-win situation," said Staff Sgt. Chris Petersen, RCMP detachment com-

mander in Inuvik, whose predecessor advocated for the new warming centre to avoid unnecessarily filling up cells with people experiencing homelessness.

"It is taking people off the streets and giving them a better hospitable place to be with other people they know," he said. "Whereas when they're in cells, it's obviously a negative impact. It's not a place where people want to go to."

### Freshly cooked dinner

Unlike the Inuvik homeless shelter, the warming centre is intended to provide intoxicated people with somewhere where they won't freeze at night, and its doors are open from 7 p.m. to 8 a.m. During their stay, clients are provided with freshly cooked dinner and breakfast. As it is only intended as a warming centre, the shelter is closed during the summer months and it just recently opened for its second season on Oct. 15.

"It isn't a perfect situation but with dollars and cents it's what works," said Matthew Clark, chair of the Inuvik Emergency Warming Centre Society, which runs the shelter.

This year the shelter received an additional boost of \$72,000 contribution from the GNWT's anti-poverty fund. The operating budget for the shelter has increased to just under \$300,000.

The additional funding has allowed the centre to hire

more staff, including a full-time manager from Saskatoon, who has experience working with the homeless through the Salvation Army, as well as 20 years of service with the Canadian Armed Forces.

"He's doing a great job so far," said Clark.

In addition to the new manager, the centre can now afford to have to full-time staff on duty at all times. The shelter recently implemented stricter policies, including searching clients for contraband before entering the shelter and monitoring their cigarette breaks to ensure that they are not getting more intoxicated while on the premises.

"We're not pretending for a second that we have the solution but if we can make it safer for the clients and safer for the staff then that's where we want to be," said Clark.

Frankie Charlie is a regular visitor at the warming centre. He said he feels more comfortable at the shelter and that the overall atmosphere is better since the new regulations were implemented this fall.

"It's good," he said. "It's quiet, and there's less fighting and arguing than last year. People are getting along better."

Although the shelter's focus is to keep people out of the cold, Clark said staff have tried to encourage clients to seek help through programs offered by the health and social services authority. Clark

added that when the shelter reopened this fall, staff implemented a new initiative whereby clients can earn tokens for helping out with chores around the facility. The tokens can then be redeemed at the shelter in exchange for items such as toothpaste, snacks and blankets.

"We didn't want to have monetary rewards but we wanted to have a program where they could build toward something," he said.

"That's just one of the programs we're trying to run to show that when you work, when you help and you assist, then there's rewards for doing those things."

Inuvik's warming centre currently being studied by Michael Young, a researcher with Royal Roads University in Victoria, B.C.

### Sharing research

Clark said Young is sharing his research with the shelter and helping to come up with ideas on how to build a bigger network of services for Inuvik residents who struggle with addictions.

"We're talking to other agencies in the community in terms of long-term," he said.

"Is there a potential ... to have a three stage program all offered under the same building? Is there a potential that an emergency warming centre functioning in one part of an apartment building and maybe a homeless shelter, assisted



**Sylvia Firth, assistant manager Inuvik Emergency Warming Centre left, and client Frank Charlie.**

living, transitional housing went from there, then assisted living that allows people to transition through the stages

and get back into public housing. Those are the kind of things as a society we're talking about."

## To the jailhouse, hospital or morgue?

### A MOUNTAIN View

**Antoine Mountain** is a Dene artist and writer originally from Radlilh Koe/ Fort Good Hope. He can be reached at [www.amountainarts.com](http://www.amountainarts.com).



Northern News Services

One of the things I noticed right from the time I quit the use of drugs and alcohol is what people think they will be missing out on.

It is sure to be a big change in one's life, but one thing's for sure is that if you do choose to keep on with your wayward ways there are three options you can expect: the jailhouse, the hospital or the local morgue.

No doubt about it, these are the places you can expect to pay a visit to.

On the other hand, when I finally took the step to leave the bottle to the side over 20 years ago I also noticed right away that people were actually on my side.

When they noticed that I wanted to be sober they simply started to lend a helping hand to make my life a bit easier.

Soon to follow came a change in the way I began to be seen in public life, too.

Right now, I am putting together a number of applications and proposals together to get some support for a book I have in mind.

One of the things these

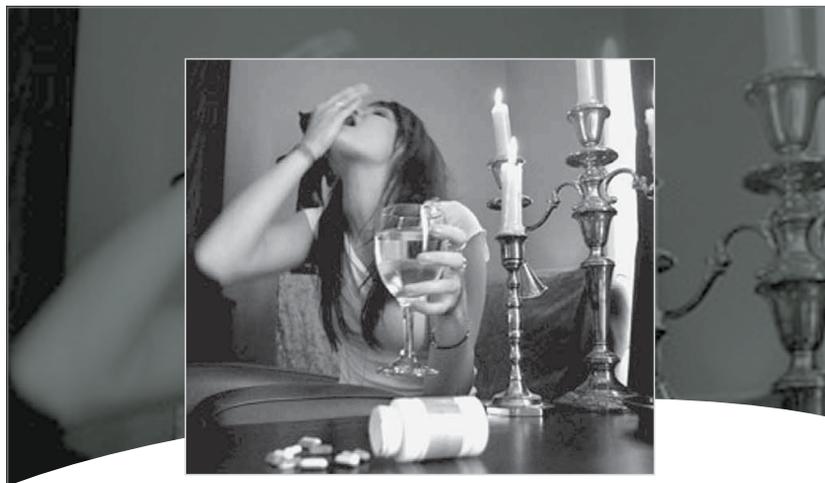
people and agencies with money always ask about is your resume, what you have done and what you are qualified to do.

Looking back, one of the first things which began for the better was being asked to make presentations at schools and different events on behalf of my Dene People. It wasn't long before I was chosen to meet the higher-ups, like the Queen of England and even to the point of being recognized and awarded by Her Highness herself for my artwork.

There were actually quite a number of trips to other countries as a cultural ambassador to follow, to the U.S.A., Germany, twice to Russia and even to faraway Japan.

Now that I am getting to the stage of being an elder, I have more time to do what I want, one of which is to write a book about my life and times in order to continue to encourage the Youth.

So, you can easily see from this that it all begins with you taking that first step on the Good Road to Sobriety, .. and to stay on it. Mahsi, thank you.



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# ADDICTION DISORDER & DEPENDENCE SYMPTOMS OF USE NATIONAL ADDICTIONS AWARENESS WEEK METAMPHETAMINE DETRIMENTAL MEDICATION HEALTH & ALCOHOL

## Addictions treatment facility shuts down

Northern News Services

**Sept. 30, 2013**

The last addictions treatment facility in the Northwest Territories shuts down.

The closure comes after the Department of Health and Social Services pulled its funding for the Nats'ejee K'eh Treatment Centre July 12, 2013, after almost 20 years of operation.

A reason for the pulled funding was revealed on Oct. 18, 2013.

"The bottom line was that there was one counsellor," said Health and Social Services Minister Tom Beaulieu. "To continue to have intake of people into Nats'ejee K'eh with only one counsellor was a problem and this created a safety issue not only for the counsellor, but for the people coming in for counselling."

"It was the executive director that approached the board and said 'I think it's time to shut down Nats'ejee K'eh.' At that point, we took action and cut the funding effective Sept. 30, 2013."

The shutdown meant any resident seeking treatment for drug and alcohol addictions would have to travel to treatment centres in the south.

Yellowknifers may also remember another treatment centre outside the city that has gone unused for years.

Hidden in the woods at kilometre six of the Dettah Road, overlooking a small lake, Somba K'e Lodge was built in 1991 by Northern Addictions Services (NAS) with the assistance of the Canadian Mortgage Housing Corporation.

The original cost to build the facility was \$2.95 million. The facility could house up to 28 patients at a time and

offered full time addictions treatment and counselling. The majority of the NAS funding came from the GNWT.

But in July 1999, the department pulled its funding of the facility, describing it as "underused" and "in need of reprogramming," according to an article that ran in *Yellowknifer* at the time. NAS began looking for other programming to run at the facility, such as an aboriginal offender treatment program. Its efforts were unsuccessful and NAS' mortgage on the facility fell into arrears.



**LOOKING  
Back**

with Candace A. McQuatt

editorial@nnsi.com

**June 24, 2013**

The GNWT releases its newest mental health and addictions strategy, A Shared Path Towards Wellness: The Mental Health and Addictions Action Plan 2012-2015, after a 13-member Minister's forum on Addictions and Community Wellness visited every region in the territory that spring.

Paul Andrew, the forum's chair, said visiting the communities allowed the forum to gather information from residents and groups about ways to fight addictions. Forum members then presented a report with their recommendations to Minister Beaulieu.

Paying elders for their work and establishing more on-the-land programs are vital to combating addictions in the Northwest Territories, residents told the forum.

"What we tried to do was make recommendations that were doable and achievable," Andrew said. "We wanted to do everything we possibly could to make sure the government does not put this on the shelf."

Andrew said on-the-land programming was at the top of



The Nats'ejee K'eh Treatment Centre closed in October 2013 after the Department of Health and Social Services pulled its funding in July of that year.

the list in every community.

People also spoke about how treatment centres, such as the Nats'ejee K'eh Treatment Centre in Hay River, need to be established throughout the territory, Andrew said. It was stressed that centres should also be made culturally relevant depending on the people they serve, he added.

"The Inuvialuit feel they should have something more culturally appropriate for them," Andrew said.

Fort McPherson Mayor Hazel Nerysoo, also a member of the forum, said residents emphasized that location and distance shouldn't be a barrier to accessing treatment.

"They talked about the treatment programs and how we need a treatment program closer to home," she said.

Community members also identified the need for after-care programming to support people who return to the community after treatment.

"A lot of the people who come back into the communities are left on their own and they're really concerned about those kinds of things," said Andrew.

**March 26, 2012**

Inuvik Boot Lake MLA Alfred Moses is fed up because he believes the government has been "coasting it" when it comes to addictions treatment.

In an effort to rectify the problem, he was pushing for a second addictions treatment centre for the NWT. His reasoning was that the Nats'ejee K'eh Treatment on the Hay River Reserve was not culturally relevant and too far away for people in the Beaufort Delta or Sahtu regions. It may also explain why, in a territory that suffers from addiction rates twice the national average, the Nats'ejee K'eh facility was rarely at capacity.

Moses's point was also highlighted by stats that indicated the territory was losing its battle against addictions.

In 2002, addictions services in the NWT were hit hard by a report titled A State of Emergency: A Report on the Delivery of Addictions Services in the NWT, a document produced by consultants hired by the territorial government. The 184-page document criticized nearly every aspect of

addictions services delivery in the territory. Unfortunately, 10 years later little had changed.

Minister Beaulieu pointed out that, at the time, the GNWT spent approximately \$2-million annually on the Nats'ejee K'eh Treatment Centre and the facility had been consistently operating under 50 per cent capacity.

There was no reason to believe that a similar facility in another region would see better use.

Beaulieu said other options such as on-the-land culturally appropriate treatment might be more effective.

**Sept. 4, 2012**

A year after a March 2011 coroner's inquest was held regarding the incident and Rayond Eagle's eventual passing on Jan. 5, 2010, that identified 16 recommendations aimed at providing more care for people with addictions and improving the flow of information between RCMP and staff at Stanton Hospital, no headway had been made in either area.

One of the inquest's main recommendations directed

the Department of Health and Social Services to put together a community consultative group to consider establishing a drug, alcohol and substance rehabilitation centre in Yellowknife, as well as a halfway house for people with substance abuse problems who are experiencing homelessness.

In September 2012, Minister Beaulieu said the inquest's suggestion for a halfway house and rehab facility had yet to be looked into.

However, he assured that the topic would be addressed when the government started to move on the recently tabled Mental Health Addictions Action Plan.

"The issue is we have many people with addictions in the downtown core of Yellowknife that affects a lot of people and incidents like this happen unfortunately and does that mean that our reaction should be to build a treatment centre in Yellowknife?" he asked.

"Maybe, but we're going to have to take a closer look before we make a decision."

One year later, Nats'ejee K'eh Treatment Centre closed its doors.

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