
PHAC Dr. Peter Mental Health Project

Year 1 To-date & Moving Forward

Reporting period: January 1, 2023 – January 1, 2023 1st year

1. Context

Started in 2023 as a response to the compounding crisis's that the frontline workers are facing; toxic drug supply, COVID-19, lack of affordable housing, poverty, etc. To address post-traumatic stress and mental health among frontline service providers/peers by building capacity to resist burnout and provide trauma-and violence-informed care to themselves and their clients.

Result: In 2023, 3-day regional in-person capacity building trainings through a train the trainer model, with optional connecting time before or after:

- BC/Yukon regional training completed in September 2023 (18 attended)
- Atlantic region training completed in November 2023 (21 attended)
- Ontario region training completed in December 2023 (25 attended)
- Prairies & Quebec trainings will be May 2024 and fall 2024
- Virtual training development in progress and first session happening June 2024

All participants trained will train at least five others in their communities.

- Quarterly national community of practice calls to build on lessons learned from training, engaging more than 100 service providers from across the country
- Change packages of bundled resources, facilitation guides and cultural safety practices
- 90% of participants have said their ability to provide trauma informed care to their clients has increased as a result of taking this training
- 86% of participant have said their capacity to provide trauma informed training has increased as a result of taking of this training

2. Three Successes and Two Learning Experiences from the First Year

Successes:

- Anticipating needs: Variety of teaching/engagement methods to cater to all learning styles, offering harm reduction supplies/Naloxone, providing Indigenous cultural supports, on-site OPS (Vancouver training only), offering local connections to supports.
- Reconnection to hope for participants via relationship building, feeling validated in their work, and experiencing care.
- Integrating feedback from each session to improve the program.

Learning Experiences:



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- Learning #1: Many external factors requiring risk management – some participants from areas that had been evacuated due to fires, few staff available to attend training, backlash to harm reduction and COVID-19 still affecting organizational capacity.
 - Learning #2: Need to continue in-person opportunities safely as this was extremely meaningful and generative.

Lessons Learned

- **Indigenous harm reduction:** We have incorporated Indigenous ways of facilitation (non-hierarchical), culturally relevant supports, knowledge keepers and elders but we will need to keep building relationships across each region to ensure success.

On the Horizon:

- **Developing online learnings:** Recognizing that this can't be just prerecorded sessions, we must be engaging the participants along the way.