



**FIRST PEOPLES
WELLNESS CIRCLE**

Recommendations for the 2025 Federal Budget

**Strengthening the First Nations
Mental Wellness Workforce and
the Communities They Serve**

Submitted by: First Peoples Wellness Circle

First Peoples Wellness Circle (FPWC) calls upon the federal government to implement the following recommendations, which have been developed in conversations with sister organizations¹:



1. In alignment with the Assembly of First Nations (AFN)'s pre-budget submission (PBS), FPWC calls on Indigenous Services Canada (ISC) to invest \$645.6 million (M) over 5 years to expand and strengthen the Mental Wellness Teams (MWTs).
2. In alignment with the AFN's PBS, FPWC calls on ISC to invest \$645.6M over 5 years to expand and strengthen the Indian Residential Schools Resolution Health Support Program (IRS RHSP).
3. FPWC calls on the federal government to remove the current funding formula, determine fair and equitable salaries, and enhance coordination between federal, provincial, and territorial governments. This includes establishing government accountability and transparency in funding structures and advancing health transformation work to ensure investments meet the needs of the First Nations Mental Wellness Workforce (FNMWW) and communities.
4. In alignment with the AFN's PBS, FPWC calls on ISC to invest \$100M over 5 years in the Aboriginal Health Human Resources Initiative.
5. In alignment with the AFN's PBS, FPWC calls on ISC to invest \$626M over 5 years in the First Nations Emergency Management Assistance Program (EMAP).
6. In alignment with the AFN's PBS, FPWC calls on ISC to invest \$322.5M over 5 years to advance implementation of the First Nations Mental Wellness Continuum Framework (FNMWCF), and \$838M to establish a National Indigenous Healing Organization to support mental wellness programming and implementation of the FNMWCF.
7. FPWC calls on ISC to provide dedicated and enhanced investments for the Youth Hope Fund to support Indigenous youth organizations with their operations and initiatives.
8. FPWC calls on the federal government to prioritize providing Indigenous-led organizations with equitable and long-term funding and resources to lead and advance anti-Indigenous racism work.
9. In alignment with the AFN's PBS, FPWC calls on ISC to invest \$64.35M over 5 years to establish regional ombudsmen offices modeled on the Saskatchewan First Nations Health Ombudsmen's Office.

¹ *AFN, Indigenous Youth Roots, First Nations Health Managers Association (FNHMA), First Nations Information Governance Centre, Thunderbird Partnership Foundation (Thunderbird), We Matter*

Who We Are

FPWC is an Indigenous-led national not-for-profit dedicated to enhancing the lives of First Peoples in Canada by addressing healing, wellness, and mental wellness barriers. FPWC advocates for collaborative and transformative change and promotes pathways to holistic health and wellness for First Peoples.

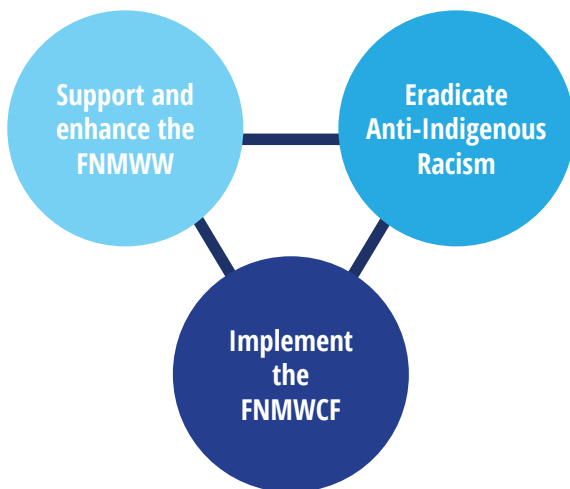


Our Work

FPWC focuses on implementing the FNMWCF and supporting the FNMWW. Using a two-eyed seeing approach, FPWC aims to foster well-being, and mental wellness within First Nation communities through advocacy work, and by creating resources, tools, and training tailored to the needs and perspectives of First Peoples. We also work closely with sister organizations and Indigenous and non-Indigenous partners.

FPWC is committed to combating racism, discrimination, and oppression. Our commitment to First Nations people is based on the foundational truths, including that anti-Indigenous racism exists at the systemic, institutional, and interpersonal levels within healthcare settings. We recognize that First Peoples hold unique constitutional, Treaty rights and government commitments. This includes the Truth and Reconciliation Commission (TRC)'s Calls to Action, the National Inquiry's Calls for Justice, and the United Nations (UN) Declaration which outlines the inherent right of Indigenous people to be free from discrimination and racism, the right to self-determination, access to culture and the right to the highest level of health and well-being.

To advance the well-being of First Nations people, we call on the government to act on three interdependent priorities:²



Hope



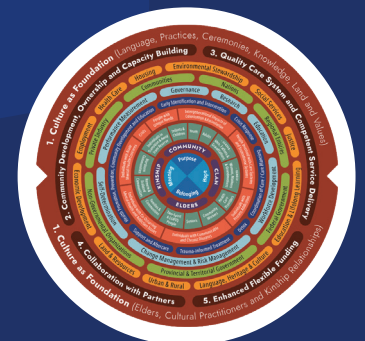
Belonging



Meaning



Purpose



² Priorities and recommendations align with [UN Declaration Act Action Plan](#) measures 12, 13, 81, 89; [TRC Calls to Action](#) #18 – 24, 66; [National Inquiry Calls to Justice](#) 1.6, 1.7, 2.6, 3.2, 3.4, 3.5, 3.6, 7.1, 7.2, 7.6, 7.8.

Support and Enhance the FNMWW

FPWC focuses on supporting two workforces, MWTs (including Crisis Support Teams) and the IRS RHSP. The holistic approach and cultural supports they provide are in very high demand ([AFN 2020](#)). In contrast to Western/mainstream healthcare services, they operate from community-focused, strength-based, and healing-centered approaches, using both traditional healing methods and Western/mainstream healing approaches. While the workforce continues to have a significant positive impact, they face unprecedented challenges in delivering services and maintaining their own wellness. Their work is compounded by historical and recent issues such as the long-term impacts of harmful colonial policies and events such as missing children and unmarked burials, COVID-19, and other events. FPWC calls on the federal government to implement the recommendations below.

MWTs

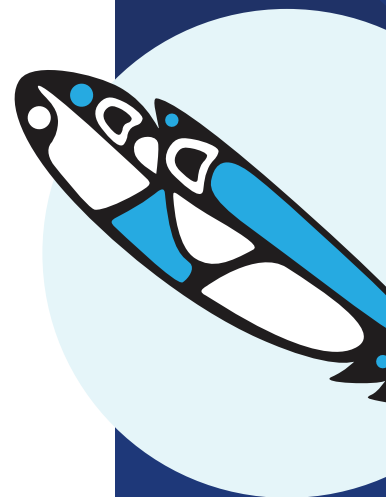
MWTs were established in 2007, and there are over 70 teams that provide culturally safe and high-quality mental wellness care to approximately 340 communities. A Health Canada evaluation of MWTs ([2014](#)) found that "...communities with MWTs have a much stronger capacity to deal with mental wellness issues, handle crises, and contribute to stronger resilience and mental wellness of community members." As with IRS RHSP workers, MWTs have an expanding scope of practice and are increasingly in high demand. The most pressing barrier MWTs face is the critical need for **adequate, flexible, stable, long-term and sustainable funding** ([Sutherland et al., 2019](#)). This would allow MWTs to engage in long-term program planning, provide wage parity, attract and retain additional staff, and advance service delivery.

Recommendation #1

In alignment with the AFN's PBS, FPWC calls on ISC to invest \$645.6M over 5 years to expand and strengthen the MWTs.

"[We need] More human resources to address the need as our complex cases require a lot of energy, time and resources..."

– MWT worker, FPWC 2022.



IRS RHSP

As part of the 2006 IRS Settlement Agreement, the IRS RHSP provides former IRS students and their families with mental wellness, emotional, and cultural support and services. Additional investments are needed to support IRS RHSP workers and their expanding scope of practice. In a recent study by FPWC (2024) respondents reported that from 2020 to 2022, over 60% of IRS RHSP workers experienced a significant increase in their workload. IRS RHSP workers have been called on to support the work of missing children and unmarked burials among other activities, including providing administrative support, system navigation, and referrals. The IRS RHSP has also been called on to support cultural safety planning and [settlement agreements](#). The ongoing need for IRS RHSP is clear, additional funding and establishing program permanency will allow the program to better support workforce recruitment and retention, enhance service delivery, and complete long-term planning.³

Recommendation #2

In alignment with the AFN's PBS, FPWC calls on ISC to invest \$645.6M over 5 years to expand and strengthen the IRS RHSP.

“The program is about trying to break the cycle. It will take time and it needs to be comprehensive”

– IRS RHSP worker, FPWC 2024.

³ Aligns with AFN resolution [11/2021, Call for the Permanency of the IRS RHSP](#)



Sustainable and committed support for the FNMWW

Dedicated and sustainable funding is needed to support FNMWW health human resources (workforce wellness) and to advance [health transformation initiatives](#) for a more coordinated and effective healthcare system. The FNMWW faces increasing workload, burnout, and high staff turnover. Workforce infrastructure that focuses on recruitment and retention is urgently needed. This includes removing the current funding formula to ensure workers receive wage parity,⁴ structured pathways for mentorship/succession planning, and formalized self-care strategies. Additional funding is also needed for capacity building and supporting unmet training needs. In a survey of IRS RHSP workers ([FPWC 2024](#)), 80% of survey participants identified unmet training needs. The most common training needs were supporting 2SLGBTQIA+ people and families (81%); working with children and youth (75%); addressing sexual trauma (69%); and understanding brain injury (69%).

Recommendation #3

FPWC calls on the federal government to remove the current funding formula, determine fair and equitable salaries, and enhance coordination between federal, provincial, and territorial governments. This includes establishing government accountability and transparency in funding structures and advancing health transformation work to ensure investments meet the needs of the FNMWW and communities.

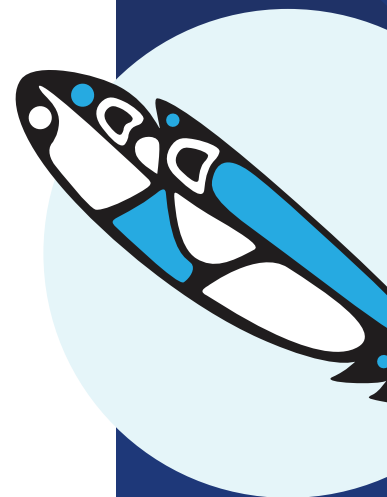
Recommendation #4

In alignment with the AFN's PBS, FPWC calls on ISC to invest \$100M over 5 years in the Aboriginal Health Human Resources Initiative.

“The work never ends. It is difficult to be a survivor plus a worker: I get triggered, I put things away for so long but then some days I get triggered.”

– IRS RHSP worker, FPWC 2024.

⁴ Aligns with AFN resolution [74/2023, Wage Parity for First Nations](#)

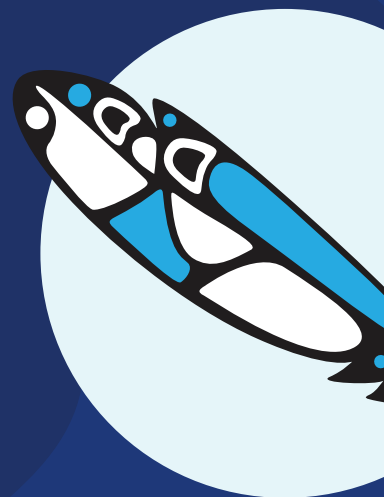


Additional funding is also needed to support the FNMWW in emergency management. Indigenous communities are disproportionately affected by climate and health emergencies (Public Safety Canada [PSC] [2019](#)). Studies show that without culturally safe emergency management, colonial relationships are reinforced. Emergencies and evacuations have long-term impacts on communities which span the social determinants of health, including significant health issues compounded by the destruction of traditional land, loss of critical infrastructure, and disconnection from community ([Thompson et al., 2014](#), [Do et al., 2023](#)). Additional funding for emergency management needs to be flexible and beyond what is currently available through EMAP. EMAP relies on short-term funding and does not allow communities to act quickly and implement long-term strategies. While other limited emergency management funds are available, they are not well-known or easily accessible.⁵

Recommendation #5

In alignment with the AFN's PBS, FPWC calls on ISC to invest \$626M over 5 years in the First Nations EMAP.

⁵ Aligns with AFN resolution 83/2019, [First Nations Control of Emergency Management](#)



Implement the FNMWCF

The FNMWCF was created by and for First Nations people to address colonial harms and to provide culturally-grounded approaches for the development and delivery of coordinated, comprehensive programs and services to advance First Nations mental wellness. The federal government (Health Canada) co-led the development of the FNMWCF and continues to engage in the role as co-lead (ISC) with First Nation partners in implementation along with other government partners (Public Health Agency of Canada, PSC). This ongoing relationship and engagement demonstrates an obligation and commitment to implementation for systems change.

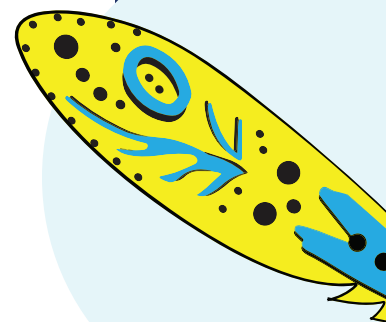
The FNMWCF identifies youth as a key population for the provision of mental wellness programs and services. Multiple outstanding youth-led organizations across Canada have achieved significant milestones for First Nations and Indigenous youth. FPWC calls on ISC, in alignment with the work of the FNMWCF, to provide ongoing and dedicated financial support to youth-led initiatives through the Youth Hope Fund.

Recommendation #6

In alignment with the AFN's PBS, FPWC calls on ISC to invest \$322.5M over 5 years to advance implementation of the FNMWCF, and \$838M to establish a National Indigenous Healing Organization to support mental wellness programming and implementation of the FNMWCF.

Recommendation #7

FPWC calls on ISC to provide dedicated and enhanced investments for the Youth Hope Fund to support Indigenous youth organizations with their operations and initiatives.



Eradicate Anti-Indigenous Racism

FPWC calls on the federal government to confront systemic racism in the healthcare system that has been perpetuated and maintained by colonialism and racism. Ongoing systemic racism results in mental wellness and other services being inaccessible and unavailable to First Nations peoples. In alignment with the UN Declaration, TRC Calls to Action, National Inquiry Calls for Justice, and Joyce's Principle, the federal government needs to provide continued funding for programs and establish systems of accountability and justice to dismantle anti-Indigenous racism within government structures and the healthcare system.

FPWC, Thunderbird, and FNHMA recently concluded the first phase of the incredibly successful anti-Indigenous racism campaign, [Rise Above Racism](#). The campaign secured over \$3M in pro bono advertising space resulting in over 200 million impressions through various outlets (television, digital advertising, print). Results show the significant impact and reach Indigenous organizations have when they partner together, and the need for ongoing funding to support these organizations in anti-Indigenous racism initiatives.

Other anti-Indigenous racism priorities were identified at [recent roundtables hosted by FPWC and Thunderbird](#). At these roundtables, it was recognized that there is a need for creating ombudsmen positions to help build systems to ensure justice and governmental accountability.

Recommendation #8

FPWC calls on the federal government to prioritize providing Indigenous-led organizations with equitable and long-term funding and resources to lead and advance anti-Indigenous racism work.

Recommendation #9

In alignment with the AFN's PBS, FPWC calls on ISC to invest \$64.35M over 5 years to establish regional ombudsmen offices modeled on the Saskatchewan First Nations Health Ombudsmen's Office.

