



Wi Che Win


Come walk with me

Ma Mawi Wi Chi Itata Centre Inc. - background

- The Ma Mawi Wi Chi Itata Centre Inc. was established in 1984 to reclaim Aboriginal people's inherent role and responsibility as the caregivers for Aboriginal children and families in Winnipeg.
- Community mandated, Aboriginal directed and supported human service organization
- fifty (50) programs, eleven (11) sites, and 200+ staff and volunteers
- Programs and services are developed and operate within a philosophy that is embodied in the name of the center which translates from Ojibway into the phrase “we all work together to help one another”
- Neighbourhood based practice model aimed at identifying innovative policy and practice initiatives
- Approach is based on principles that emphasize the return of capacity of the community to care for its members

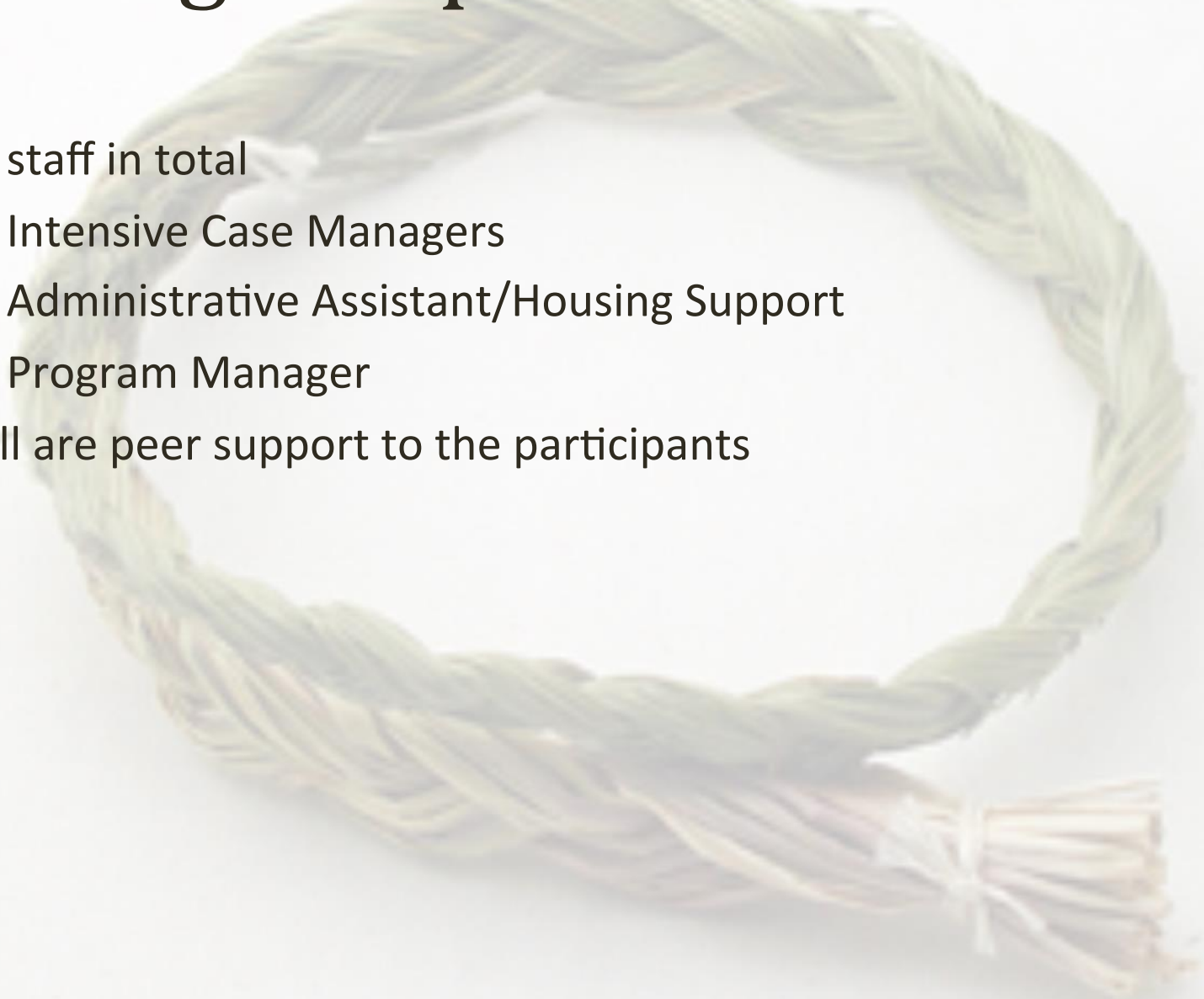
Hours of Operation



- Monday – Friday
 - 9:00- 5:00pm
 - Drop in- 12 – 4pm every Thursday (people start showing up at 9:30am)
 - People come to our office to watch TV/use the computer and talk to a staff member
 - All staff are expected to assist anyone that walks in.
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Staffing Complement

- 7 staff in total
- 5 Intensive Case Managers
- 1 Administrative Assistant/Housing Support
- 1 Program Manager
- All are peer support to the participants



Seven Teachings – Core of practise

- Humility – we all have something to teach and learn from each other
- Truth – open to hearing and working with people from their starting point
- Wisdom – taking the time to learn and use the lessons we have been granted in life
- Respect – for people`s lived experiences, truth, their journey
- Love – connect with people in an open, accepting, healing manner
- Honor – peoples journey – this contributed to their knowledge, wisdom and skills
- Courage – in walking beside someone on the healing journey

Values

- Building and maintaining truthful relationships with each other
- Harm reduction – a tool used to build a relationship
- Reciprocity – I.e. we all have something to offer and teach each other
- Complex trauma informed practise I.e. responsive to needs not behavior. Create understandings of the effects of systems, social policies, impact of residential schools and CFS
- Strength based – help people to acknowledge their wisdom, gifts, skills
- Mental health as a holistic concept – I.e. including reconnection of culture, family, community, and diagnosis if required.
- Respectful of peoples cultural identity
- Social inclusion I.e. Independence to interdependence
- Choice – People have the right to make up their own mind about what they choose to do – we don't have the right to punish them by pulling back on support

Programming

- Assist people to find and keep a home
- Help people identify the impact that systems have had on their lives i.e. the creation of dependence on systems
- Eviction prevention work – 1st 30 days daily visits, introduce worker to caretaker, Housing agreements negotiated with regard to issues leading to eviction
- An assessment is undertaken to formulate future contact ie continuing daily visits or modifying contact. The final goal is weekly contact
- Assist people to move from a crisis mode of living, to a thoughtful and manageable lifestyle
- Assist people to identify their goals and what steps they need to take to reach them i.e. motivational interviewing

Programming (cont'd)

- Assist people to identify what supports they may need in the short and long term to gain and maintain stability in their lives
- Daily morning tam meetings are held to share lessons learned when we are struggling to connect with participants.
- Create inclusive opportunities by providing social and recreational experiences
- Provide work and volunteer opportunities to assist with community reintegration
- Provide cultural learning opportunities I.e. Elders, sweats, smudging, healing circles, sharing circles, letting go ceremonies, et al
- All our programming operates around the Medicine Wheel – balance is restored when we help the person rejoin the community

Goal Setting

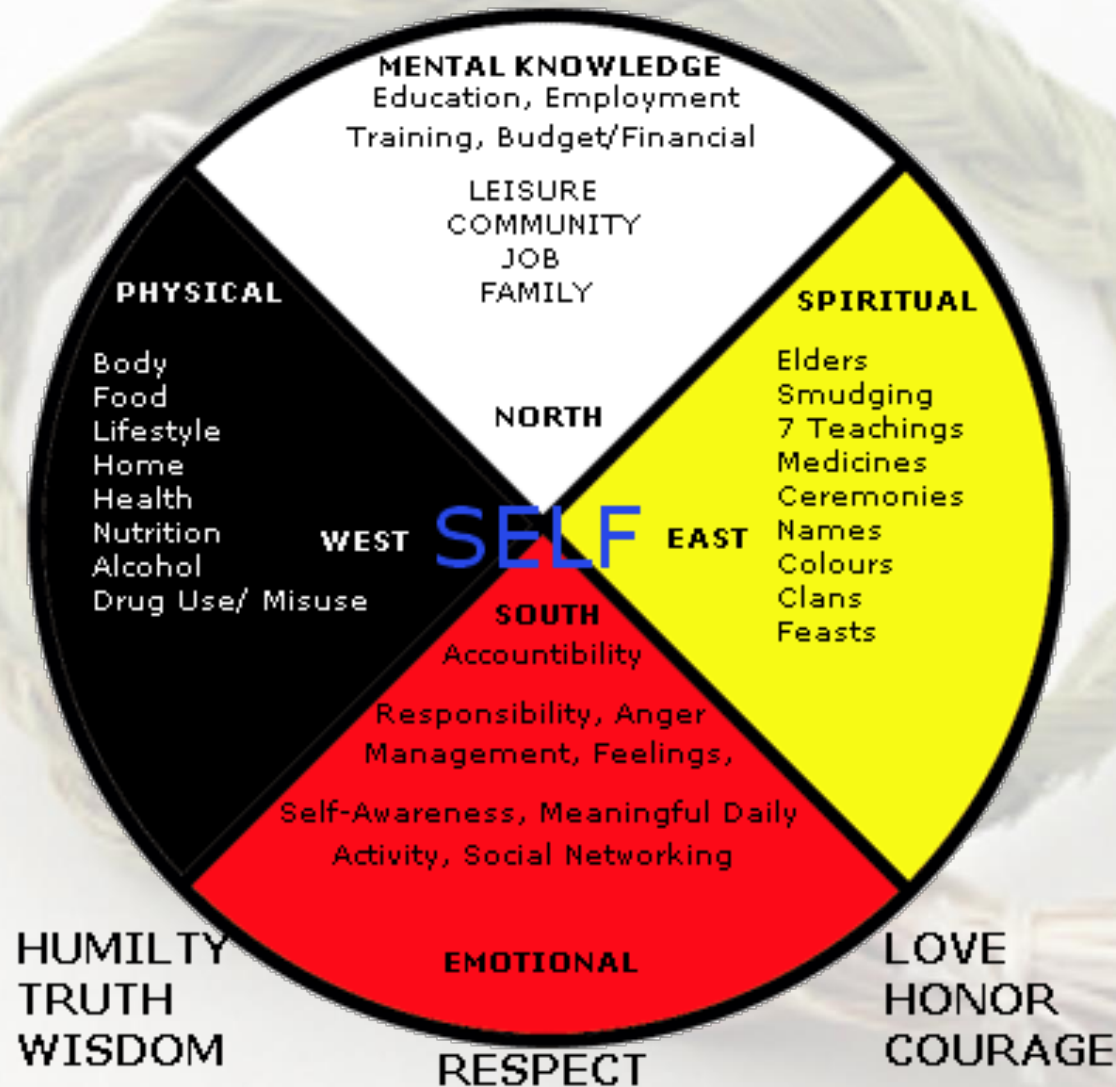


* Wi Che Win Goal Setting:

1. Goal
2. Services/Support Required
3. Actions Required
4. Person Responsible
5. Timeline
6. Completed (with dates)

Wi Che Win utilizes various tools but the work is always undertaken in a holistic manner.

Medicine Wheel



Record keeping



- We have 2 main systems for keeping track of contact and information
- Within 24 hours of contact with a participant we maintain electronic logs of all interactions
- Any emails we may get from another provider is transferred into the electronic data base
- The paper file is used for all paper documents we receive, it is divided into 5 sections: general/medical/housing/education/legal

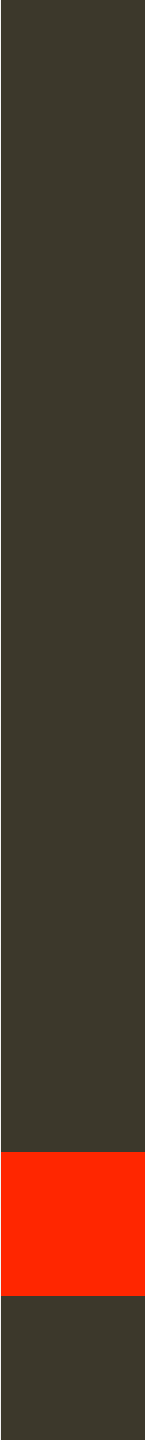
What's working good



- Keeping people housed
- Weekly home visits
- Helping connect to cultural resources
- Ensuring we have a welcoming and safe meeting space – drop in, computer, talk to staff
- Goal planning with our participants
- Morning case reviews
- Building relationships with landlords and rental agencies
- Building relationships with mainstream systems to provide support to participants

What's working good (cont'd)

- Working with people under a harm reduction philosophy
- Assisting people to reconnect with family/community that is supportive of the positive changes in their lives
- Walking with people as they embrace and work through the trauma they have experienced and continue to experience in their life



Lessons learned



- Housing First is not for everyone.
- We need to have various housing options for people – not just scattered housing
- We need to have access to assessments for people with mental health concerns
- Need to provide short term housing for those that are struggling with issues until they can get stabilized i.e eviction prevention tool
- Need to further develop partnerships with mainstream systems to better coordinate services that will enable people with mental health concerns too be fully engaged in the community