



## FIRST NATIONS AND INUIT COMPONENT OF VICTIMS OF FAMILY VIOLENCE (VoFV) INVESTMENTS

FAMILY VIOLENCE is an important issue that affects many communities across Canada, including First Nations and Inuit communities. That is why Health Canada is working with First Nations and Inuit partners to improve the public health response to victims of family violence and their children through investments of \$3 million annually, over 10 years (2015–2025) through two activity streams.

**STREAM 1** is investing \$1.5 million per year, through the Non-Insured Health Benefit (NIHB) Program, to provide short-term, crisis intervention mental health counselling to victims of violence.

*Eligibility:* Tribal and band councils, health service organizations such as health centres or other community services

### EXAMPLES OF PROJECTS THAT COULD BE FUNDED:

- > increasing the number of service providers that support the provision of NIHB Program eligible mental health counselling for victims of violence and their families
- > working with shelters to enhance counselling services/programming for children who are victims of violence

**STREAM 2** is \$1.5 million per year for community based programming to improve and strengthen access to trauma-informed and culturally relevant health care services for victims of violence.

*Eligibility:* Tribal and band councils, hamlet councils and offices, health service organizations such as health centres or other community services with expertise in mental health service delivery or experience supporting victims of violence and their families

### EXAMPLES OF PROJECTS THAT COULD BE FUNDED:

- > helping victims of family violence find a suitable mental health service provider
- > follow-up outreach programs that facilitate transition from shelters to supports in or out of the community
- > support groups for family violence victims
- > “roundtable” forums where health care professionals and paraprofessionals across disciplines can explore opportunities to link/leverage resources to better support victims of family violence in communities
- > enhancing “during and/or after hours” parenting supports services
- > supporting community awareness and family violence prevention activities such as workshops on healthy relationships
- > hiring of a family violence case manager
- > helping victims of family violence access alternate treatment approaches such as traditional supports/elders to continue their healing
- > providing Trauma Informed Care training/workshop programs to health care workers
- > working with shelters or mental health service providers to develop policies that support efforts in becoming culturally competent



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## **PROJECTS FUNDED THROUGH THESE TWO STREAMS SHOULD BE:**

- > a direct focus on service delivery;
- > reaching high priority communities where greater supports are required for victims of family violence;
- > building on existing infrastructure where there already is a readiness/capacity to implement services; and
- > complementary/interconnection between streams

## **PROCESS**

Investments will be allocated to Health Canada regions annually. Regions are working with their First Nations and Inuit partners on processes for selecting projects to receive funding. Processes vary across regions and may include targeted proposal requests.

**For more information** about the First Nations and Inuit Component of VoFV investments contact the Health Canada First Nations and Inuit Health Branch office in your region.

As part of the British Columbia Tripartite Framework Agreement on First Nation Health Governance, on October 1<sup>st</sup> 2013, Health Canada transferred its role in the design, management, and delivery of First Nations health programming in British Columbia to the new First Nations Health Authority (FNHA). For information about health services and programming for First Nations in British Columbia contact the FNHA [www.fnha.ca](http://www.fnha.ca).

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