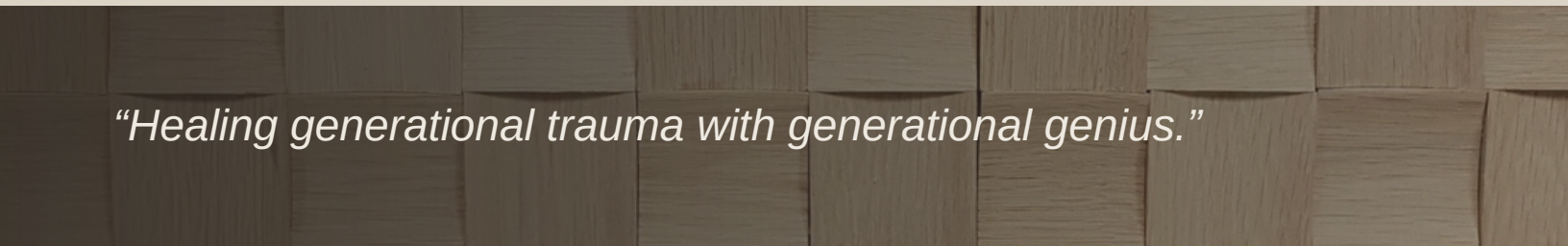
You spoke. We listened.

What We Heard

Membertou Addictions Recovery Center & Sober Living Home

What the community told us about a Membertou-led path to recovery



“Healing generational trauma with generational genius.”

YOU SPOKE, WE LISTENED

The voice of the community was resoundingly clear

Addictions recovery in Membertou must be *culturally rooted, family centered, and long term.* Treatment is the start, but what makes recovery stick is a continuum of care that supports people for life — with Mi'kmaq identity, connection to the land, and lived experience woven through every step.

HOW WE LISTENED

A community-wide conversation

7
public engagement sessions

215
online survey responses from across the community

15+
internal Membertou group sessions

15+
external partner agencies engaged including Mi'kmaw Family & Children's Services, Tajikeimik, and the Nova Scotia Health Authority.

1:1
confidential conversations with individuals walking the road to recovery

EVERYONE IS AFFECTED

Addiction touches a significant share of families in Membertou

22% have been **personally affected** by addiction

26% live with addiction **in their household**

34% have a **close friend or relative** affected

Many people experience all three at once. Addiction is not an individual problem — it is a family and community story, initiated by colonialism and carried across generations.

THE FOUNDATION

Culture is not a feature. It is the operating system.

Healing must be grounded in Mi’kmaq culture — not as an add-on, but as the system the whole program runs on.

- **Elder presence**
  Paid, supported, and present every day.
- **Seven Sacred Teachings**
  The backbone of the curriculum.
- **Daily ceremony**
  Embedded in the rhythm of each day.
- **Land-based programming**
  Hunting, fishing, gathering, fasting, sweats.

TWO-EYED SEEING IN PRACTICE

Western and Indigenous approaches are not opposite — both are needed.

Brain science explains the disease. Ceremony provides meaning. Medication manages symptoms. Culture heals spirit.

> *“Addiction is misunderstood — it’s rooted in trauma and spiritual disconnection. We need an approach that addresses both.”*

AUTHENTICALLY MI’KMAQ AT FIRST SIGHT

First impressions shape trust

From the moment of arrival, the center itself must communicate Mi’kmaq identity — not an “Indigenized” institutional building, but a truly Mi’kmaq one.

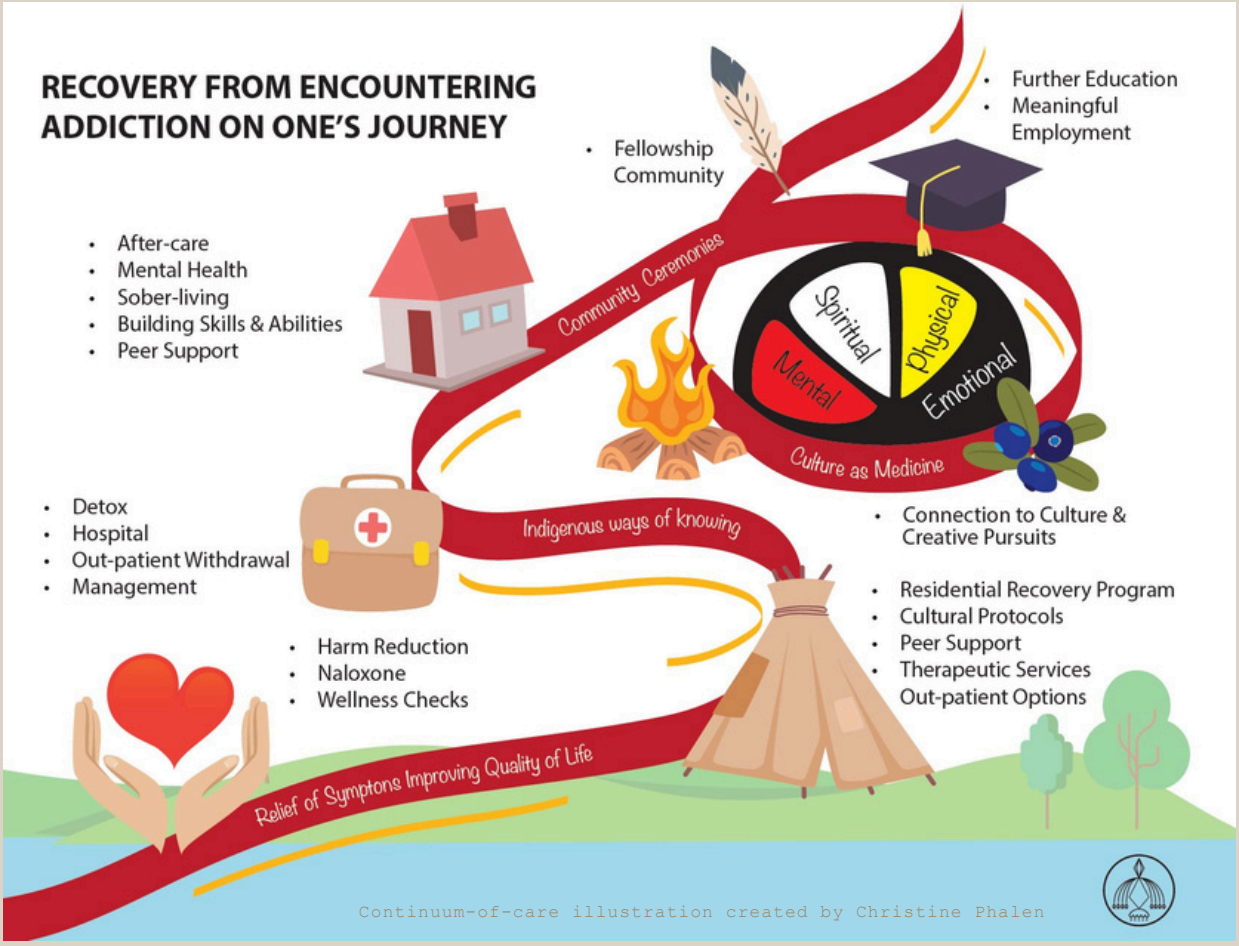
Draft exterior rendering — earth-toned cedar, east-facing entrance, and a Mi’kmaq mural at the door.

- **Indigenous architectural elements with the main entrance facing east.**
- **Natural materials, earth tones, a warm feel; not a hospital.**
- **Sweat lodge, sacred fire, teepee, walking trails, medicine garden, and access to water.**
- **Smudge-friendly spaces and dedicated ceremony areas.**
- **Mi’kmaq art, signage, and language wayfinding visible everywhere.**

SOBER LIVING & AFTERCARE

A continuum of care

Members who sought treatment out of community report a sharp drop-off in services when they return. With no aftercare, people are forced back into the same conditions that contributed to addiction. Recovery needs a path that carries people forward.



AFTERCARE IS THE GLUE. PEOPLE ASKED FOR:

- Longer treatment stays — the standard 28-day program is too short
- 6–24 months of sober living
- Regular check-ins & ongoing case management
- 12-step fellowship
- Peer support roles
- Sober social activities

LIVED EXPERIENCE, INDIGENOUS LEADERSHIP

The people providing care matter as much as the model of care

A blended team — with a majority of staff Indigenous and Mi’kmaq, and a meaningful share carrying their own lived recovery. Elders must be paid, not volunteer. And staff need their own “cup” filled, too — with training, therapy, and time off.

- Medical professionals
- Clinical counsellors
- Cultural leaders
- Peer support workers

TRAUMA-INFORMED & DIGNIFIED

Addiction is a symptom of deeper wounds — residential schools, cultural disconnection, personal trauma. People asked for healing in layers, at an individualized pace, in spaces that feel safe and respectful. Relapse should be met as part of the journey, not punished as failure.

CLEAR, TRANSPARENT POLICY

Created with community input: supportive relapse response, medication-assisted treatment where appropriate, naloxone training and access, and 24/7 crisis response. Harm reduction saves lives and keeps people engaged in care.

TRANSFORMING SYSTEMS, TRANSFORMING COMMUNITY

Families need their own care

Counselling, education, and safe reunification support.

Systems must coordinate

Health, housing, justice & child welfare — linked by paid navigators.

The workforce must grow

Trauma-informed training, Mi’kmaq language, peer support, placements.

> *“The opposite of addiction is connection.”*

WHAT'S NEXT

These findings will guide what comes next

- Space design
- Program development
- Staffing requirements
- Policies & partnerships

To all the community members, families, Elders, staff, and partners who shared their experiences and hopes for a Membertou-led path to recovery:

Wela'lioq.

Thank you.