

# WHAT IS THE RESTORATIVE WELLNESS PROJECT?

Restorative Counselling, Restorative Justice and a large disciplinary team of committed health care providers have come together to offer low-barrier mental health services through this present time of increased need.

To date, this expanding initiative has been run without funding through the good work and intentions of committed helpers like you.

Our services are funded for all Indigenous clients in BC and for NIHB folks in Ontario. We serve clients throughout all of Turtle Island with an emphasis on supporting remote locations so that clients can be in frequent contact with cultural and spiritual teachings related to wellness. These services ARE FOR ALL RESIDENTS OF TURTLE ISLAND that wish to reconnect with their inner-resources and resiliencies to begin a new healing chapter.

Our services are covered by most extended benefit programs and can also be accessed by donation for lower-income folks or individuals without benefits. Our promise is that no one who is referred will be turned away from group services due to financial need.

Please utilize us as a resource and join us in connecting isolated clients to a healthy social support opportunity. All our services are informed by traditional teachings and all groups invite traditional wisdom holders to sit in as guests, witnesses and teachers.

Our services are **Culturally-Informed, Compassion-Based and Strength-Based.**

Learn more here: [www.restorativecounselling.com](http://www.restorativecounselling.com)

We are inviting you to utilize us as a resource for providing high-quality mental health support services to BOTH your clients and your committed staff members to reduce likelihood of burnout. Please see the attached write-ups of some of our current groups. All service inquiries can be sent to [intake@restwp.com](mailto:intake@restwp.com)

**An operational definition of Restorative Counselling:**  
*Low-Barrier, Community-driven, Culturally-informed, Spiritual,  
Biopsychosocial, Model of Wellness*



To request services, please email **INTAKE@RESTWP.COM**

- **Restorative Counselling** was named to honor the example of our relatives involved in the **Restorative Justice** (RJ) Movement. We are working with RJ Board Members that have been part of the organization since it was founded to bring cultural and spiritual / holistic and land-based wellness back as a foundation for mental health stabilization.
- Restorative Counselling is (in essence) a sweetgrass little-sister organization to the sage Restorative Justice program. This approach to helping stems from the foundation of Indigenous-led social justice with an emphasis on healing and recovery. The path to wellness taken at Restorative Counselling is similarly driven by cultural and spiritual teachings.
- **Restorative Counselling is a therapeutic approach that combines relational, cultural and spiritual teachings with trauma counselling, science, medicine and research-based practices to support well-being.** *Please read that again, as we strive to represent each of these practices in all we do.*
- Restorative Counselling extends beyond the highly valued “biopsychosocial-spiritual model” of mental health with additional layers:
  - *Integration* of scientific and culturally-based wisdom and medicines.
  - *Collaboration* with inclusive programming that is accessible to all other organizations and communities as an additional resource. We serve all social classes and cultures. Clients witness the collaborative efforts of helpers and wisdom keepers from many faiths and Nations as we discuss common foundational teachings on wellness in group services. We FLOURISH working alongside other care providers!
  - *Specialization* through our dynamic team of contracted professionals who are highly skilled and experienced working with the most complex and vulnerable populations. Our program includes access to clinical counsellors (RCC), social workers (MSW, RSW), high school counsellors (MEd) and case managers/outreach workers. We offer psychiatric consultation, case consultation for co-occurring disorders, substance abuse, EMDR Therapy, PTSD support and group treatment for “Borderline personality disorder”/Complex Trauma, Burnout, Anxiety, Depression, Post-Partum, Mood Disorders and Relapse Prevention.
  - We also support family members in need of deeper understanding of how to support their LGBTQ2S+ relatives, particularly through transition periods, and are connected with two-spirited and non-binary wisdom keepers.
  - Access to ceremony (sweat, pipe, coming of age) led by Elders in our extended circles.



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## **More information....**

- Our mission is to provide rapid access to wrap-around support for even the most traumatized and vulnerable community members. All team members are trauma-informed, highly specialized, and very good at the role they play in providing mental health services.
- All therapeutic groups provide the rich overlap of generational experience by including teachings from Indigenous Wisdom Keepers, Aunties and Uncles from MANY NATIONS.
- We were founded in Snuneymuxw Nation by (big sister) Kristen Berube (MA, RCC) in 2012 as a part-time counselling practice utilizing culturally informed practice.
- Upon request by psychiatry, doctors and clinicians serving vulnerable populations, Restorative Counselling agreed to fill an unmet clinical need in the community by offering clinical groups outside of traditional business hours. Little sister Danielle Berube (MSW, RSW) joined the initiative and with the inclusion of Elder's teachings and cultural content the business model became further steeped in protocol, such as the inclusion of traditional gifts for Elders and clients throughout programming.
- A connection was made with hereditary chief Calvin Craigan (Sechelt) and former Snuneymuxw chief Geraldine Manson by their direct participation in the group programs.
- The culturally enriched online offerings of these groups began to be recorded in order to preserve the facilitators teachings and begin a digital collection of Elder's teachings, stories, songs and prayers.
- With the Covid-19 crisis starting in March, the Restorative Wellness Project met community need and expanded to offer multiple weekly therapy groups.
- The exponential growth of the program required mentorship from Elders, Hereditary Chiefs and the participation of a multi-disciplinary team. As our team grew, our ability to support a number of high priority populations also grew.
- With the addition of community partners and the potential for research a relationship was formed with both Restorative Justice and UVIC (who graciously offered practicum students); the project was then named: **THE RESTORATIVE WELLNESS PROJECT (RWP; Berube & Berube, 2020).**
- We are now connected with the Métis Society to access National Funding opportunities and to serve more isolated citizens across Canada.



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## 1:1 Services

- 1:1 therapy including Responsive Trauma Counselling and EMDR Trauma Therapy for citizens, residential school survivors and health care providers.
- Coaching services and specialized clinical care from a multi-disciplinary team of providers familiar with co-occurring disorders, addictions and the provision of support for LGBTQ2S+ clients and their families.
- Advocacy, Social Work and Case Management to assist clients with navigating complex organizational systems or delays.
- Referrals to other community supports and helping organizations to meet the unique needs of each client with an open invitation and spirit of friendship in working together.
- Clinical Supervision or support for counsellors or social workers who are feeling reactive to work or clients.
- Collaboration with GP's and Psychiatrists (eg: weekly medication monitoring) to relay important information or updates on behalf of the client.

## Group Therapy

- ***Dialectical Behaviour Therapy Skills (DBT Skills: 16-20 weeks)***  
DBT was initially created to support clients that were diagnosed with borderline personality disorder. These folks struggle with emotion regulation and their intimate relationships are often strained. Through direct experience with this population, it becomes evident that DBT is actually treating complex trauma and attachment wounds. The 4 branches of DBT each last 1 month: Core Mindfulness Skills, Emotion Regulation Skills, Interpersonal Effectiveness Skills and Distress Tolerance Skills.
- **16 Steps to Recovery and Empowerment (14-16 weeks)**  
Brought forward to our community is Dr. Charlotte Kasl's model to recovery from addictive behaviours. This model has deconstructed the 12 steps of AA and reframed recovery from a strength-based perspective. This group is an alternative meeting to 12-Step meetings for individuals that struggle with the Christian / Colonial roots of AA that can be triggering to residential school survivors, relatives of survivors or people with complex trauma.



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- **Mindfulness-Based Relapse Prevention (MBRP: 8-10 weeks)**  
Based on MBSR by Jon-Kabat Zinn, the intention of the program is to offer practices cultivating mindful awareness to individuals suffering from the addictive trappings and tendencies of the mind. MBRP teachings are intended to foster increased awareness of triggers, destructive habitual patterns, and “automatic” reactions that seem to control many of our lives training to prevent relapse into destructive behaviours.
- **Mindful Self-Compassion (MSC: 8-10 weeks)**  
An advanced group for clients with the capacity for self-reflection, for folks that have completed 1:1 counselling and DBT group or for fellow helpers, teachers, doctors, nurses, and healthcare providers.

We aim to address the need for support in order to protect against mental health and addictions-related deaths in vulnerable populations throughout and beyond the Covid-19 pandemic.

We can proudly say that to date we have never turned anyone away from service due to lack of benefits or income.

We wish to extend the opportunity to participate in our programming for credit to grade 11 and 12 high school students across Canada and are wide open to collaborate with all school districts and traditional school programs.

### What makes Restorative Wellness Project groups different?

The RWP team focuses on adding *Cultural and Spiritual Content* to groups by including Elders and other Traditional Wisdom Teachers as guests. This helps us realize that Ancient Teachings from MANY cultures on wellness and balance are similar. Our team is multi-disciplinary and made up of a host of different healthcare professionals who are committed to holistic wellness.

***All groups are currently online and will switch to hybrid when appropriate.***

**An operational definition of Restorative Counselling is that we are a**  
***Low-Barrier, Community-driven, Culturally-informed, Spiritual, Biopsychosocial***  
***Model of Wellness***



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# WHAT IS DIALECTICAL BEHAVIOR THERAPY (DBT) SKILLS?

The 4 Modules of DBT (Marsha Linehan)

## Core Mindfulness Skills Module

**Why?** *Focusing on the present (“living in the moment”) without add-ons of other memories or future concerns reduces anxiety.*

### Goals of Core Mindfulness:

- Reduce suffering and increase happiness
- Increase control over the mind
- Experience reality as it is
- Introduces the concept of “Wise Mind”
- Prepares participants for more advanced Mindfulness Groups (MSC, MBRP)

## Emotion Regulation Skills Module

**Why?** *Part of being human means that we experience intense emotion at times. This group was initially made for people who have trouble managing the intensity of their emotions, who act out in reactive ways and wish to change that destructive habit.*

### Goals of Emotion Regulation:

- Understand and name your emotions
- Decrease frequency of unwanted emotions (stop unwanted emotions from happening in the first place, or change unwanted emotions once they start)
- Decrease emotional vulnerability and reacting, increase resilience and healthy coping
- Decrease emotional suffering, and manage extreme emotion to not make things worse

## Interpersonal Effectiveness Skills Module

**Why?** *Some people have great difficulty navigating relationships because of earlier experiences or wounds that occurred in primary relationships, so they panic and become reactive if they think the relationship is threatened.*

### Goals of Interpersonal Effectiveness:

- Be skillful in getting what you want and need from others
- Build healthy relationships and end destructive ones
- Resolve conflicts before they get overwhelming
- Having the ability to repair relationships is more important than never having disagreements
- Don't let hurts and problems build up

## Distress Tolerance Skills Module

**Why?** *Most approaches to mental health have not paid enough attention to accepting, finding meaning for or tolerating distress.*

### Goals of Distress Tolerance

- Survive crisis situations without making them worse



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# MBRP: MINDFULNESS-BASED RELAPSE PREVENTION GROUP

8-10 weeks

MBRP (Bowen, Chawla and Marlatt, 2010) is a novel treatment approach developed at the Addictive Behaviors Research Center at the University of Washington, for individuals in recovery from addictive behaviours.

The intention of the program is to offer practices cultivating mindful awareness to individuals suffering from the addictive trappings and tendencies of the mind. MBRP practices are intended to foster increased awareness of triggers, destructive habitual patterns, and “automatic” reactions that seem to control many of our lives.

The mindfulness practices in MBRP are designed to help us pause, observe present experience, and bring awareness to the range of choices before each of us in every moment. We learn to respond in ways that serve us, rather than react in ways that are detrimental to our health and happiness. Ultimately, we are working towards freedom from deeply ingrained and often catastrophic habits.

This program was initially created for clients in recovery from substance use disorders and is designed to prevent relapse for those who have undergone inpatient or intensive outpatient treatment. However, the program has been extended to support ongoing recovery from any reactive or destructive behaviours once clients have already created a new pattern of behaviour that they wish to sustain.

## The primary goals of MBRP are:

1. Develop awareness of personal triggers and habitual reactions and learn ways to create pause in this seemingly automatic process.
2. Change our relationship to discomfort; learning to recognize unchallenging emotional and physical experiences and responding to them in skillful ways.
3. Foster a nonjudgmental, compassionate approach toward ourselves and our experiences.
4. Build a lifestyle that supports both mindfulness practice and recovery.

**RWP Integrity:** In our team, we practice what we promote. It is widely acknowledged within the field that the teaching practices of mindfulness, culture, spirituality and compassion arise out of the personal practice of them. Therefore, in the field of mindfulness and compassion, the teacher must have a well-developed and substantial experiential grounding in these practices. The MBRP program and its principles of treatment require an experiential understanding of mindfulness meditation practices. As such, it is essential for clinicians who facilitate MBRP groups to have their own daily mindfulness meditation practice and to endeavor to embody the principles they teach.



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# THE 16-STEPS TO RECOVERY AND EMPOWERMENT: STRENGTH-BASED HEALING

1. We affirm we have the power to take charge of our lives and stop being dependent on substances or other people for our self-esteem and security.  
Alternative: We admit/acknowledge we are out of control with/powerless over \_\_\_\_\_ yet have the power to take charge of our lives and stop being dependent on substances or other people for our self-esteem and security.
2. We come to believe that God/Goddess/Universe/Great Spirit/Higher Power/Creator awakens the healing wisdom within us when we open ourselves to the power.
3. We make a decision to become our authentic selves and trust in the healing power of the truth.
4. We examine our beliefs, addictions and dependent behavior in the context of living in a hierarchical, patriarchal culture.
5. We share with another person and the Universe all those things inside of us for which we feel shame and guilt.
6. We affirm and enjoy our intelligence, strengths and creativity, remembering not to hide these qualities from ourselves and others.
7. We become willing to let go of shame, guilt, and any behavior that keeps us from loving ourselves and others.
8. We make a list of people we have harmed and people who have harmed us and take steps to clear out negative energy by making amends and sharing our grievances in a respectful way.
9. We express love and gratitude to others and increasingly appreciate the wonder of life and the blessings we do have.
10. We learn to trust our reality and daily affirm that we see what we see, we know what we know and we feel what we feel.
11. We promptly admit to mistakes and make amends when appropriate, but we do not say we are sorry for things we have not done and we do not cover up, analyze, or take responsibility for the shortcomings of others.
12. We seek out situations, jobs, and people who affirm our intelligence, perceptions and self-worth and avoid situations or people who are hurtful, harmful, or demeaning to us.
13. We take steps to heal our physical bodies, organize our lives, reduce stress, and have fun.
14. We seek to find our inward calling and develop the will and wisdom to follow it.
15. We accept the ups and downs of life as natural events that can be used as lessons for our growth.
16. We grow in awareness that we are sacred beings, interrelated with all living things, and we contribute to restoring peace and balance on the planet.

The communities we serve, and the Elders in those communities have made a clear request for recovery support that is more trauma-informed in language than the standard AA/12 Step Model. In addition to our Mindfulness-Based Relapse Prevention (MBRP) group, we will be offering 16-Steps groups with Elders to discuss the theoretical difference in tending to clients in need of substance use support.

We wish to acknowledge that while the 12 Steps are not for everyone, the 16-Step Model would not exist without standing on the shoulders of the work done for recovery by abstinence-based/12-Step Programming and the work of Bill W and friends. This shift is only a natural evolution and modification that is more relatable to marginalized populations.



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# INDIVIDUAL COUNSELLING SERVICES

## We provide the following individual services:

- 1:1 therapy including Responsive Trauma Counselling and EMDR Trauma Therapy for citizens, residential school survivors and health care providers.
- Unlike other counselling programs, our counselling services are not focused on brief-therapy. Rather, we seek to embrace each client with acute mental health concerns and residual impact of historical trauma in order to guide the client out of survival behaviours. Addressing decades of trauma takes time, effort and a number of new tools.
- Coaching services and specialized clinical care from a multi-disciplinary team of providers familiar with co-occurring disorders, addictions and the provision of support for LGBTQ2S++ clients and their families.
- Advocacy, Social Work and Case Management to assist clients with navigating complex organizational systems or delays.
- Referrals to other community supports and helping organizations to meet the unique needs of each client with an open invitation and spirit of friendship in working together.
- Clinical Supervision or support for counsellors or social workers who are feeling reactive to work or clients.
- Collaboration with GP's and Psychiatrists (ex: weekly medication monitoring) to relay important information or updates on behalf of the client.
- Referrals to other specialized service providers who are better trained to support any additional needs a client may have (ex: sex therapy, couples counselling, eating disorders...)

**1:1 services are available to folks who are engaged in any of our groups**

Our services are funded for all Indigenous clients in BC and for NIHB folks in Ontario. We can be accessed by donation for lower-income folks or individuals without benefits. Certain Extended Benefit plans also cover our services. Our promise is that no one will be turned away from group services due to financial n



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Restorative Wellness Project  
 Culturally & Spiritually Enriched Groups  
**Feb-April 2024**  
**Online/Outdoor Hybrid**  
**CLINICAL GROUP SCHEDULE**  
**intake@restwp.com**

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>MORNING</b>		<b>DBT</b>  9:30-12pm BC 10:30am-1pm AB 12:30-3pm ON			<b>MSC</b> <b>Mindful Self-Compassion for Helpers</b>  9:30am-12:30pm BC 10:30am-1:30pm AB 12:30-3:30pm ON
<b>AFTERNOON</b>	<b>DBT</b>  2-4:30pm BC 3-5:30pm AB 5-7:30pm ON				
<b>EVENING</b>				<b>MSC</b> <b>Mindful Self-Compassion for Helpers</b>  4:30-7:30pm BC 5:30-8:30pm AB 7:30-10:30pm ON	

**DBT** = Dialectical Behaviour Therapy Skills (Linehan) Full fidelity offering (4x 1 month modules = 16 weeks total)



**MBRP** = Mindfulness-Based Relapse Prevention Training (8 -10 weeks)

**MSC** = Mindful Self-Compassion Training (8 -10 weeks)



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