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Abstract Title
Mapping First Nations–Led Mental Health and Substance Use Services in Manitoba: An Environmental Scan of Strengths, Gaps, and Policy Alignment

Background
First Nations (FN) peoples in Manitoba experience disproportionately high mental health challenges. In 2024, 47% of off-reserve FN peoples reported needing care, yet only 28% had their needs met. FN peoples are also more likely than non-Indigenous peers to be hospitalized for suicide attempts or die by suicide. Despite these inequities, FN-led services provide culturally grounded responses often absent from mainstream systems.

Objective
The objectives of this study are to 1) document FN–led mental health and substance use services in Manitoba and 2) examine government priorities, identifying strengths, gaps, and opportunities for culturally safe care.

Methods
Between May and July 2025, a web-based scan identified FN-led programs using government directories, organizational websites, and targeted searches. Services were included if governed or delivered by FN organizations. In total, 18 services were coded into a structured database and analyzed using a Strengths, Weaknesses, Opportunities, Threats (SWOT) framework. A secondary search reviewed 17 provincial and federal policy documents published between 2022–2025.

Results
The scan identified services including 24/7 mobile crisis response teams, residential treatment centres, urban FN wellness hubs, and land-based healing programs. Strengths included integration of Elders, language supports, and cultural healing practices. Gaps were identified in programming for older adults (0 dedicated services), Two-Spirit/LGBTQIA+ members (fewer than 2 identified), and geographic access, with services concentrated in Winnipeg, Brandon, and Thompson. Over 70% of programs relied on short-term federal funding cycles (1–3 years), contributing to instability. Provincial policies demonstrated alignment with community priorities, including over $2M invested in Indigenous-led crisis teams (2022–23) and a forthcoming youth suicide prevention strategy, but implementation remains uneven.

Conclusion
Eighteen FN–led services in Manitoba demonstrate resilience and strength but face instability and access inequities. Sustained multi-year funding, FN workforce development, and alignment between provincial commitments and grassroots leadership are essential to expand culturally safe care and advance FN wellness.

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