

APPENDIX Q

SOCIOECONOMIC TECHNICAL SUPPORT DOCUMENTS

- Q-1 Baseline Socioeconomic Report Addendum
- Q-2 Economic Modeling Report
- Q-3 Draft Employee Health & Wellness Strategy**

SPRINGPOLE PROJECT

Draft Employee Health & Wellness Strategy



Storm Angeconeb

A PEOPLE AND COMMUNITY-INFORMED APPROACH TO WORKPLACE WELLNESS

Table of Contents

Acknowledgements	3
Glossary of Terms	4
1.0 Introduction	6
1.1 Our Corporate Values	6
2.0 About the Employee Health & Wellness Strategy	7
2.1 Strategy Goals	7
2.2 Where We Are Now - Seeking Feedback	8
2.3 Looking Ahead	8
3.0 The Northwestern Ontario Landscape	9
3.1 Population	9
3.2 Indigenous Peoples & Communities	10
3.3 Canadian Indigenous Context	11
4.0 Mining in Canada: Health & Wellness Best Practices	13
5.0 Building a Culture of Health & Wellness	14
6.0 Our Approach - Six Core Pillars	15
7.0 Mental Health and Addiction Resources.....	22
7.1 Specialized First Nation Mental Health & Wellness Services	23
7.2 Federal/Provincial Resources	24
7.3 Northwestern Ontario Regional Resources.....	25
7.4 Northwestern Ontario Urban Resources	26
7.5 Northwestern Ontario Treatment Centres.....	29
8.0 Funding Opportunities for Employment Readiness & Training	30
Conclusion	32
Sources	33
Appendix A:	
Mining in Canada - Health & Wellness Example Programs and Policies...	34



Acknowledgements

LAND ACKNOWLEDGEMENT:

First Mining Gold is privileged to work in both Treaty #3 & Treaty #9 lands and the traditional territories of the Indigenous communities that have inhabited these lands since time immemorial. We pay respects to the Elders, past and present, knowledge keepers, leadership, and community members.

COMMUNITY PROTOCOLS:

First Mining Gold acknowledges that communities have distinct protocols that are unique to their own histories, cultures, and governance models. We understand that these community protocols are important and will be better understood through dialogue and collaboration.

First Mining Gold believes that through open consultation and mutual collaboration, delivered in the spirit of reconciliation, our projects can be developed and implemented to support the respective visions and goals of Indigenous communities.

WORDS OF APPRECIATION:

First Mining Gold has circulated this Draft Employee Health & Wellness Strategy so that it can be informed by input from northern and Indigenous communities involved in the Project.

We would like to thank the many individuals who have shared their lived experiences with us and enabled our team to better understand the health, mental health, and wellness challenges facing people, workplaces, and communities in northwestern Ontario. We look forward to continuing to learn and advancing innovative approaches and solutions.

Glossary of Terms

ADDICTIONS:

Addiction refers to the problematic use of substances such as tobacco products, drugs and alcohol, or any behaviour that is uncontrolled and/or compulsive in some way such as gambling. Addiction can include cravings, loss of control of the amount or frequency of using a substance or indulging in a behaviour, or compulsion.

COMMUNITY:

Community refers to a social unit that has a shared characteristic or interest, such as geographic location, culture, religion, values, traditions, or identity. In this report, community may refer to a group of people who live in or belong to a municipality, township (*organized and unorganized*), First Nation or Métis community.

ELDER:

In Indigenous culture, an **Elder** is someone recognized by their community as having attained a high level of understanding of Indigenous history, spirituality, traditional language, cultural teachings, ceremonies and/or healing practices through training and lived and living experiences. Elders are highly respected and may have a range of different roles including mentorship, guidance, governance, decision-making, caretaking, and/or teaching within both Indigenous and non-Indigenous communities.

FIRST NATION:

A **First Nation** is one of 634 individual communities of people who have inhabited the lands of Canada for thousands of years.

HEALTH:

Health is a state of complete physical, mental, and social well-being and not just the absence of disease or sickness.

MENTAL HEALTH:

Mental health is the state of well-being of the mind that enables people to cope with the realities of life and determines how individuals relate to others and make decisions. Good mental health is critical to overall health, and includes emotional, social, and psychological well-being.

MENTAL HEALTH CONDITION/CONCERN:

A **mental health condition** or **concern** is a symptom/challenge, such as a change in mood or behaviour, that causes an individual emotional or psychological distress, but may not be diagnosable as a mental health disorder or illness.

MENTAL ILLNESS:

Mental illness refers to a wide range of clinically recognizable mental health conditions that affect a person's mood, behaviour, and overall health, such as anxiety disorders, depression, schizophrenia, eating disorders, and substance use.

MENTAL HEALTH CONSCIOUS WORKPLACE:

A **mental health conscious workplace** is one that prioritizes and supports the mental health of all employees. It aims to create an environment that is psychologically safe, encourages respect, fosters positivity, and reduces stress when possible. A mentally healthy workplace can build resilience and confidence in workers, reduce mental health risks, and support staff with mental health conditions.

NORTHWESTERN ONTARIO MÉTIS COMMUNITY:

A regional collective that holds Aboriginal and Treaty rights and interests and is part of the Métis Nation of Ontario (MNO), as represented by the Chair of the Treaty #3, Lake of the Woods/Lac Seul, Rainy Lake/Rainy River Consultation Committee, and the Presidents of the Kenora Métis Council, Sunset Country Métis Council, Northwest Métis Council, and Atikokan Métis Council.

RECONCILIATION:

Reconciliation is the process of finding pathways to truth, acknowledging the wrongs of the past, building respectful relationships, and recognizing the unique connections First Nation peoples have to the lands and their resources.

SOCIAL DETERMINANTS OF HEALTH:

These are the social and economic conditions that influence health outcomes for individuals, groups, and communities. **Social determinants of health** may include income and social protection, access to healthcare, education, and employment, as well as food security, environment, housing, and social inclusion.

1.0 Introduction

First Mining Gold is a Canadian mine developer focused on the development of the Springpole Project (the Project). The Project is an open pit mine located in northwestern Ontario, approximately 110 kilometres (km) northeast of the Municipality of Red Lake and 145 km north of the Municipality of Sioux Lookout. First Mining Gold is committed to establishing a work environment supportive of people, families, communities, and businesses to promote their growth potential where we operate. Our corporate values are grounded in the principles of building reciprocal relationships and partnerships to ensure the sustainability and success of our people and operations over the long-term.

The development of this Employee Health & Wellness Strategy (Strategy) is a key component in following up on the feedback we have heard during engagement with local people and communities. The commitments contained in this report are and will continue to be informed by people and communities who are proximate to the proposed Springpole Project. It supports what we have heard, including that northern-focused health & wellness supports are crucial to improving employment participation, creating a mental health conscious workplace, and enabling the Project, local people, and communities to thrive. The approach necessitates more than standard corporate occupational health and wellness policies and programs. It requires tailored health and wellness approaches, services and programs, in coordination with health service providers, that address the holistic needs of northern and Indigenous people and communities participating in the mining industry.

This Strategy provides a summary of First Mining Gold's proposed approach to addressing the shared concerns and priorities regarding future workforce health and wellness at the Springpole Project.

1.1 OUR CORPORATE VALUES

The commitments outlined in this Employee Health & Wellness Strategy will be sustained through the corporate values of First Mining Gold, which are:

- We Continue to Build Relationships and Partnerships for Future Success
- We Work Responsibly to Achieve Safe and Sustainable Operations at Our Projects
- We Embrace Challenges and Continuously Strive for Optimal Solutions
- We Value the Strength and Wellbeing of Our Talented and Diverse Team
- We Respect Our Shareholders' Investment – In Our Projects, In Our People and In Our Communities.

2.0 About the Employee Health & Wellness Strategy

First Mining Gold understands the complexities facing workers of all demographics, backgrounds, and cultures in the mining industry. Workers are often employed in remote locations, in positions that can be physically, mentally, and emotionally strenuous, and they may be isolated from friends, family and community for long periods of time. This Strategy aims to be flexible and adaptive towards supporting a culture of holistic health and well-being at the Springpole Project operations so that First Mining Gold employees can thrive at work and at home.

For the Springpole Project, we are committed to providing employees with access to the health and wellness supports and services they need to achieve their potential and be successful in the workplace and beyond. Health and wellness support from employers has traditionally been focused on reducing employee sickness and absenteeism. This Strategy takes a progressive approach to account for the broader geographic, economic, social, and community factors that underpin an individual's ability to bring their best self to work and home after work. It considers the major factors that affect and could improve holistic health and wellness for a diverse workforce including physical, mental, cultural, family, and emotional issues. Additional considerations are also factored to address barriers to employment in remote work environments for women and young workers.

Furthermore, this Strategy looks at employee health and well-being through a proactive lens by embracing education, prevention, and early intervention measures. From design to implementation, First Mining Gold proposes a collaborative framework that provides opportunities for continued input and guidance from northern and Indigenous employees and communities to ensure the relevancy of the services and supports offered.

2.1 STRATEGY GOALS

The goals of the Employee Health & Wellness Strategy are to:

Support physical and emotional wellbeing and culturally safe workplaces for diverse northern and Indigenous people at the Springpole Mine.

Maximize the recruitment, employment, and retention of northern and Indigenous people at the Springpole Mine.

Successfully integrate northern and Indigenous people into the Springpole Project workforce for the long-term.

2.2 WHERE WE ARE NOW - SEEKING FEEDBACK

First Mining Gold has taken feedback given during engagements with northern and Indigenous communities, as well as inputs from industry professionals to create this draft Strategy document. The draft document is being shared with key representatives and advisors from northern and Indigenous communities for their further review and comment.

In this initial Draft, we have placed emphasis on:

- a sustainable workplace health and well-being culture
- preventative health and well-being interventions
- embedding equality, diversity, and inclusion into everything we do.

Once additional engagement on this draft Strategy is complete, the document will be updated accordingly.

2.3 LOOKING AHEAD

First Mining Gold recognizes that the Employee Health & Wellness Strategy will be a living document that requires regular review and potential updates based on new and emerging health & wellness needs in the Project area.

Looking ahead, First Mining Gold firmly believes that the Springpole Project will be successful through the delivery of culturally sensitive health, mental health & wellness initiatives, by providing relevant supports for northern and Indigenous employees, and by implementing measures to ensure the safety and well-being of women, young workers, and other vulnerable groups in work camps. Equally, we know that by working collaboratively with employees, communities, health service providers, and northern and Indigenous leaders, we will be able to better identify and address the changing health & wellness needs in our workforce for the long-term.

3.0 The Northwestern Ontario Landscape

This draft Strategy identifies that there is not a “one size fits all” solution when it comes to employee health and wellness. Every employee will have unique health and wellness needs and goals, and will be in a different place on their personal health and wellness journey. An employee’s health and wellness needs and goals will also be influenced by factors that are external to the workplace including ethnicity, culture, community, family circumstance, social determinants of health, and socio-economic status. As such, this draft Strategy and its commitments are designed to give a progressive yet standardized view of what a healthy mining workplace could look like in this specific northwestern Ontario context. It contemplates a culturally diverse workforce, with a particular emphasis on the recruitment and retention of local people from northern and Indigenous communities, who work and will be working in remote northwestern Ontario environments.

Below is a snapshot of the demographics and communities in northwestern Ontario to provide context to the Strategy.

3.1 POPULATION

Northwestern Ontario is home to approximately 225,000 people - a relatively small population compared to other areas of Canada. More than 50 per cent of the entire population lives in the Thunder Bay area.

NORTHWESTERN ONTARIO POPULATION DISTRIBUTION (2021):

District	Population
Kenora District	57,607
Rainy River District	20,370
Thunder Bay District	146,057
Northwestern Ontario	224,034

Source: Census Profile, 2021 Census of Population

The region is home to a diverse and multicultural population. The major ethnic groups are traditionally of Indigenous, English, Scottish, French, Italian, Portuguese, and Scandinavian origins. However, in more recent years, people from India, Pakistan, Asia, Africa and Central and South America are also increasingly represented across the region due to new immigration to Canada.

Northwestern Ontario is particularly unique in terms of its prominent Indigenous communities. Indigenous people have strong cultural identities and continue to practice their local languages, customs, and traditional ways of life in communities throughout northwestern Ontario. Notably, Thunder Bay is the Census Metropolitan Area with the highest proportion of Indigenous people in Canada, making up 12.7 per cent of the population. Other northwestern Ontario municipalities that are in proximity to the Springpole Project such as Red Lake, Sioux Lookout, Dryden and Kenora also have significant Indigenous populations.

3.2 INDIGENOUS PEOPLES & COMMUNITIES

According to Statistics Canada, Ontario is home to 23% of all Indigenous peoples in Canada, primarily First Nation and Métis peoples. In northwestern Ontario, about 55,000 individuals self-identified as Indigenous in the 2021 Census, although researchers and regional leaders believe that the actual numbers could be up to two to four times higher due to lack of self-reporting by Indigenous peoples.

FIRST NATIONS

There are 133 First Nation communities located across Ontario, representing at least 7 major cultural and linguistic groups. Over 30 First Nations in Ontario are considered remote. This means they are geographically located in the north of the province and accessible only by air year-round or by ice road during winter months, weather permitting. There are more remote First Nations in northwestern Ontario than any other region.

Northwestern Ontario spans the traditional territories of 88 of the 133 First Nations in Ontario and is home to the Ojibway, Cree and OjiCree peoples. The 88 Nations are connected by nine Tribal Councils who provide political support as well as advisory services to their member Nations in areas such as economic development, environment, health, social, education, and housing.

The rural and remote locations of First Nations in northwestern Ontario often means limited local access to the basic necessities and services that non-First Nation communities take for granted. In the Sioux Lookout district, where the Springpole Project is proximate, First Nations face high unemployment, limited access to healthcare, education, and growing food insecurity. The lack of healthcare resources in remote communities means that patients needing clinical services must often be flown to the nearest town or city to reach a hospital, which is costly and logistically difficult.

The Project is located closest to the communities of Cat Lake First Nation and Slate Falls Nation, both being approximately 45 km away. The Ontario Ministry of the Environment, Conservation and Parks (*MECP*) and IAAC identified a list of Indigenous communities that may have an interest in or may be potentially affected by the Project. The First Nation communities identified for engagement on the Project include:

- Cat Lake First Nation (*CLFN*);
- Lac Seul First Nation (*LSFN*);
- Mishkeegogamang Ojibway Nation (*MON*);
- Ojibway Nation of Saugeen (*ONS*);
- Pikangikum First Nation (*PFN*);
- Slate Falls Nation (*SFN*); and
- Wabauskang First Nation (*WFN*).

MÉTIS

Métis have a longstanding presence in the Project area and the region surrounding it. Prior to Canada becoming Canada, within what would ultimately become known as Northwestern Ontario, an inter-related group of Métis families evolved into a distinct regional rights-bearing Métis community – as part of the Métis Nation – which is now known as the Northwestern Ontario Métis Community (NWOMC) (Métis Nation of Ontario n.d.). Since the 1990s, the NWOMC has participated within the Métis Nation of Ontario's self-government as a distinct regional rights-bearing Métis community. In 2017, the NWOMC signed an agreement with Canada to address its distinct rights and claims through negotiations with the federal Crown (Métis Nation of Ontario n.d.).

Today, the NWOMC is comprised of over 3,000 Métis citizens who are the descendants of the Halfbreed Adhesion to Treaty No. 3 as well as other Métis who made up the Historic Métis Community or who make Northwestern Ontario their home. This regional Métis community is represented at the local and regional levels through four democratically elected Community Councils as well as a Regional Councilor. It also has offices located in Fort Frances, Atikokan, Dryden and Kenora that support and deliver programs and services to its citizens.

3.3 CANADIAN INDIGENOUS CONTEXT

It is widely acknowledged that Indigenous peoples in Canada have faced social, economic, political and health disadvantages for generations. Today, Indigenous peoples face disproportionate health and wellness challenges compared to the general Canadian population including chronic illness, mental health concerns and substance use. Health inequities among Indigenous peoples have been linked to the social determinants of health in their communities and to the systemic disadvantages they have experienced across multiple generations.

In 2015, the Canadian government affirmed their responsibility to address the inequalities impacting Indigenous peoples following a historic report by the Truth and Reconciliation Commission of Canada that included 94 calls to action on issues related to health, wellness, and education, among others. The report called upon all audiences, including Corporate Canada, to support the country's reconciliation efforts through specific actions.

First Mining Gold understands that significant economic drivers such as the Springpole Project can contribute to advancing reconciliation in Canada by narrowing socio-economic disparities which affect health and wellness for Indigenous peoples living in rural and remote northwestern Ontario communities.

Sustainable employment opportunities, including adequate preparation for such opportunities, and good working conditions are important determinants of achieving improved holistic health and wellness. Unemployment is directly related to low income, creating a higher risk of food and housing insecurity, mental health and addiction issues, and family instability. Combined with barriers to accessing healthcare services that in many cases may only be accessible by costly air travel for Indigenous peoples living in remote communities; this combination creates a challenging environment. At the same time, stressful or unsupportive work environments can discourage people from participating in employment opportunities capable of bringing positive uplift to individuals and their families.

Further to this, First Mining Gold recognizes that Indigenous peoples have a unique connection to their traditional lands. Indigenous peoples in northwestern Ontario live, work, hunt, fish, trap, collect water, and harvest throughout their traditional territories and rely on their natural resources for overall cultural, social, spiritual, physical, and economic well-being. As such, First Mining Gold is committed to working with Indigenous people and communities through all stages of the Springpole Project to ensure that our approaches mitigate environmental disturbance, are culturally relevant, respectful and promote individual and community traditional land uses and well-being for the long-term.





4.0 Mining in Canada: Health & Wellness Best Practices

In response to feedback from communities involved in the Springpole Project, First Mining Gold has conducted industry research to identify positive examples of Indigenous health and wellness programs in the mining sector, with a specific focus on mental health & addictions. Case studies offering examples of best practices in Canadian mining operations are summarized in Appendix A.

5.0 Building a Culture of Health & Wellness

First Mining Gold is committed to placing as much focus on employee mental health and wellness, and building a respectful and supportive workplace culture, as it does on the traditional physical health and safety of employees.

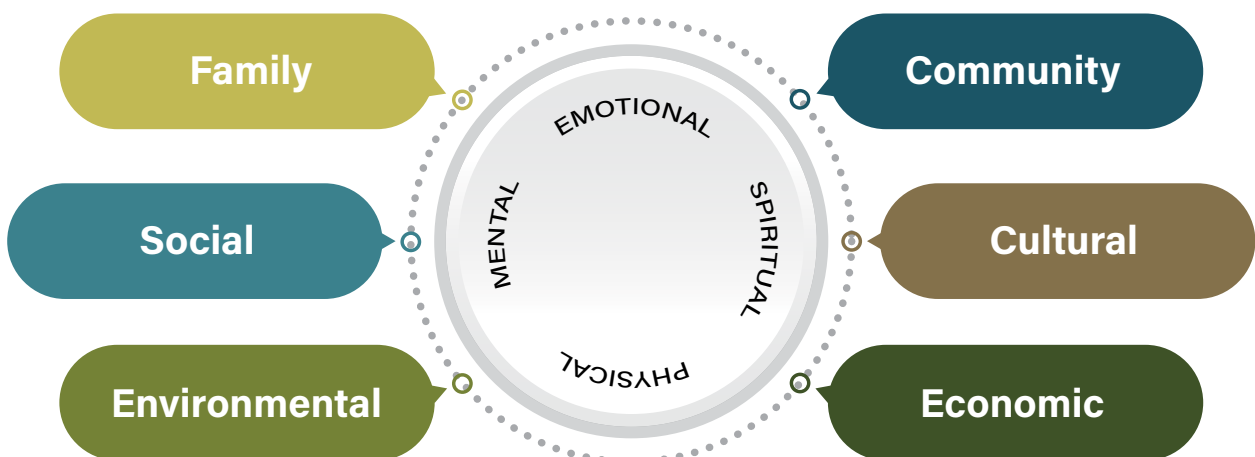
The key priorities of the Employee Health & Wellness Strategy are to:

- Establish and promote a workplace culture of positive employee health and well-being.
- Invest in meaningful and proactive employee health and wellness initiatives.
- Participate with health service providers towards addressing the major health & wellness challenges facing northern and Indigenous peoples.
- Encourage and support employees to develop and maintain healthy lifestyles and habits, including related to mental health and well-being.

To be successful, First Mining Gold is adopting a holistic and preventative approach to creating a healthy and safe workplace culture at the Springpole Project; an approach that will be continuously informed by our employees, as well as northern and Indigenous communities. In particular, we are seeking guidance from First Nation communities to ensure that the needs of proximate First Nation people are reflected in our Strategy.

Key to our efforts will be developing and delivering holistic and preventive programs, services and resources that support employee and workplace health and well-being, including physical, emotional, cultural, and social needs.

Our proposed workplace culture of health and wellness recognizes that health and wellness are physical, mental, emotional, and spiritual, and deeply interconnected with family, social, environmental, community, cultural and economic conditions. With these principals in mind, our proposed workplace health and wellness model will be guided by the following framework:





6.0 Our Approach - Six Core Pillars

Within our workplace health and wellness model, First Mining Gold proposes to build and implement its key initiatives under six core pillars. These pillars are the broad areas of focus that underpin the Employee Health & Wellness Strategy and the goal to create a mental health conscious workplace. The proposed pillars are:

1. POLICIES & PROCEDURES
2. EMPLOYEE READINESS & TRAINING
3. WORKPLACE HEALTH & WELLNESS INITIATIVES
4. REMOVING BARRIERS FOR WOMEN & YOUNG WORKERS
5. COMMUNITY COLLABORATION
6. WELCOMING & SAFE ENVIRONMENTS

1 PILLAR

POLICIES & PROCEDURES

Policies and procedures are the foundation for outlining expectations and plans for implementation. Our approach for this Strategy includes more than standard corporate occupational health and wellness policies and programs.

1. Develop a Springpole Workplace Wellness Committee with diverse cultural representation, including Indigenous, female and young employee representation.
2. Anti-discrimination policies that prevent employees from experiencing any form of racism, discrimination, harassment or bullying in the workplace. Policies will invoke prompt disciplinary action against any employee who behaves in a negative or discriminatory fashion.

3. Confidential and safe complaints reporting procedures in cases of workplace racism, discrimination, harassment, or bullying.
4. Drug and alcohol policies at site, including non-discriminatory reasonable cause drug and alcohol testing of employees.
5. The Springpole Project will be a drug and alcohol-free workplace with consideration for individuals in addiction treatment and their ongoing treatment needs. First Mining Gold is continuing to explore and seek guidance on accommodating employees in their individual treatment plans, including what types of support would be needed at site.
6. Policies that consider the specific needs of First Nation people, such as bereavement leave, that recognize extended family models of kinship.
7. Family-friendly policies including parental leave, elder care, and child-care assistance.
8. Policies to recognize cultural related holiday(s) and key traditional land use periods.
9. Mental health & wellness goals to be included in the annual performance metrics of human resource managers and supervisors.

2 PILLAR

EMPLOYEE READINESS & TRAINING

Having Managers and Supervisors trained in mental health awareness can enable them to be more engaged with the mental health needs of their employees and can lead them to put safeguards in place to protect employees' mental health. In addition, First Mining Gold is incorporating cultural awareness training, so all employees gain a deeper understanding of the history and experiences of Indigenous people in Canada and how these underlying factors continue to impact the current socio-economic reality of Indigenous people.

1. Work with proximate communities to secure funding for employment readiness programs to be delivered by health service providers and trainers, in order to prepare community members for Springpole Project opportunities with a focus on long-term operational phase employment.
2. Work with proximate communities to secure funding for skills development and training programs applicable to the various employment opportunities at the Springpole Project.
3. Mandatory diversity, cultural and gender sensitivity training for supervisors, managers, and contractors.
4. Mandatory Workplace Safety North (WSN) Mental Health Awareness Training for supervisors and managers.
5. Indigenous cultural awareness content included in site orientation.

6. Professional training for supervisors and managers to help them better identify employees who may be at risk of health, mental health or other wellness concerns (*e.g., stress, burnout, isolation*).
7. Specialty trauma-informed training programs for supervisors and management.
8. Drug and Alcohol Awareness training to educate supervisors and managers on the basics of a fit-for-duty program, as well as training to recognize the signs and symptoms of drug and alcohol use and abuse.
9. First Aid certification for employees.
10. Training in the use of Naloxone kits to on-site First Responders and other employees who are interested in being able to administer Naloxone if necessary.
11. Employee workshops and education sessions that promote preventative mental health and wellness, and self-care.
12. Financial wellness and literacy workshops.

3 PILLAR

WORKPLACE HEALTH & WELLNESS INITIATIVES

First Mining Gold is committed to developing and delivering holistic and preventive workplace health and wellness initiatives that support all areas of employee and workplace health and well-being, including physical, emotional, cultural, and social needs.

PHYSICAL:



Encourage employees to be physically active to help prevent health issues.

1. Availability of healthy food options at site.
2. Availability of country food options at site.
3. Access to physical fitness/recreational facilities and the establishment of physical fitness committee to guide on-site equipment and program needs.
4. Workshops and education materials on exercise, nutrition and diet, sleep, and healthy lifestyles.
5. Offer smoking cessation programs.
6. Optional preventative vaccinations and health screenings at work.
7. Team health & fitness challenges (*e.g. walking/step challenges*).
8. Availability of Nurse Practitioner on-site.

MENTAL:



Workplace programs that assist people through mental health issues such as isolation, stress, and depression.

1. Onsite Human Resources support to help employees connect with the mental health, addiction, and treatment resources available to them.
2. Employee assistance program (*EAP*) that provides employees with access to mental health and counselling programs.
3. Employee benefits program that supports detox and addictions treatment programs, including short-term leave and return to work programs.
4. Work-life balance initiatives.
5. Elder-in-Residence program.
6. Life coaching supports (*e.g. relationship, stress, coping, financial literacy*).
7. Transportation and logistics support to individuals accessing treatment programs.

SOCIAL:



Opportunities for employees to connect with others and develop a sense of belonging at work.

1. Social areas that promote inclusion within the team and reduce isolation (*e.g. pool table, darts, board/video games, books and reading material, televisions, access to the internet and streaming networks*).
2. Team-building events (*e.g. movie nights, sports teams*).
3. Common spaces for breaks, meals, cooking, and networking.
4. Employee recognition programs.
5. Peer support programs.
6. Sponsorship or employer support of social activities in First Nation communities that promote healthy lifestyles (*e.g. sporting events, fishing and hunting tournaments, Powwows, hockey programs*).

CULTURAL:



Enhancing the inclusion and celebration of various cultures in the workplace.

1. Include Land Acknowledgements where appropriate.
2. Seasonal land and water ceremonies at site (*e.g. spring*).
3. Cultural spaces at site for smudging, prayer, and other ceremonies.
4. Company and site recognition of National Indigenous Persons Day (*June 21*) and National Day for Truth and Reconciliation (*September 30*).
5. Elder-in-Residence Program. An Elder in Residence is an Indigenous person who adopts the role of surrogate grandmother or grandfather and is available as needed at site to counsel employees for mental, spiritual, emotional and physical health needs from a holistic Indigenous perspective.
6. Accommodate the exercise of traditional and contemporary cultural and ceremonial activities, and Aboriginal and Treaty rights in the course of employment.
7. A Workplace Wellness Committee with representation from First Nation communities to identify First Nation workforce needs and provide feedback on implementation of initiatives.

4 PILLAR

REMOVING BARRIERS FOR WOMEN & YOUNG WORKERS

The mining industry offers tremendous opportunities, yet women have frequently been excluded and continue to face discrimination and barriers to decent work in the mining sector today. First Mining Gold is committed to promoting gender equality and removing barriers for young workers at site:

1. Awareness and education campaigns that promote inclusivity and gender equality within the Project workforce.
2. Training and employment incentives targeting women and young workers.
3. Young worker and women representation on Workplace Wellness Committee.
4. Measures to ensure the security and safety of women in mine accommodations.
5. Women peer support groups onsite.
6. Confidential reporting mechanisms for complaints of workplace harassment.
7. Working with local authorities and organizations to promote awareness of the vulnerability of Indigenous women and girls to sexual exploitation and trafficking.

From design to implementation, First Mining Gold proposes a collaborative framework that provides opportunities for continued input and guidance from northern and Indigenous employees, communities, and health service providers to ensure the relevancy of the services and supports offered.

1. Collaborate with northern and Indigenous communities regarding this Employee Health and Wellness Strategy.
2. A Workplace Wellness Committee consulting with women and young workers to identify workforce needs and provide feedback on implementation of initiatives.
3. Annual employee wellness surveys and focus groups.
4. Cultural wellness programs and initiatives that are community-led.
5. Non-Identifiable, baseline assessments/surveys for health-related issues, stress management, addictions, suicide ideology, grief management, and healthy coping mechanisms, to be conducted at the start of employment for mine workers and continue throughout all stages of the mine life.
6. Enhanced communication and collaboration with local health/social service providers, including knowledge and resource sharing.
7. Partnership opportunities with community service providers for joint training initiatives with a focus on mental health and well-being.
8. Work with communities to identify education and employment gaps to assist local community members in acquiring funding for the relevant training.
9. Conduct exit interviews when employees leave the workforce.
10. Annual reporting on health & wellness indicators (*e.g. stress leave, turnover in First Nation staffing, treatment for addiction, participation in employee assistance programs and workshops*).

WELCOMING & SAFE ENVIRONMENTS

Providing welcoming and safe spaces for employees to practice and celebrate their culture.

1. Mine sites and camps to comply with high standards of health & safety, and wellness.
2. Accommodation and sleeping quarters to be in good condition and ensure secure and safe living standards for all genders.
3. Onsite medical lead.
4. Cultural spaces at site for smudging, prayer, and other ceremonies.
5. Mine sites and camp areas to be well lit, including walkways.
6. Washroom facilities to be provided for all genders.
7. Access to clean water supply for drinking and bathing.
8. Reliable facilities management including power, wastewater, and solid waste.
9. Fire water and other emergency systems.
10. First aid kits and supplies.
11. Site security.



7.0 Mental Health and Addiction Resources

Partnerships and community collaborations are critical to the success of First Mining Gold's operations. Whether it's for materials, services, labour or knowledge supply, we know that when we don't collaborate, we duplicate, which can be detrimental to local businesses, organizations and communities where we operate.

For the Springpole Project, First Mining Gold is committed to developing strategic partnerships and leveraging the capacity and expertise of others in all corners of our operations, including in the area of workforce health and wellness. To support this strategy, First Mining Gold has identified the existence of the following health and wellness supports and services. Moving forward, we will seek to develop improved relationships and collaborations with regional service providers who can support our employees and operations.

First Mining is continuing dialogue with services providers and funding agencies to better define potential mental health and addictions programs for the Project. First Mining Gold is continuing to explore and seek guidance on accommodating employees in their individual treatment plans, including what types of support would be needed at site.

7.1 SPECIALIZED FIRST NATION MENTAL HEALTH & WELLNESS SERVICES

Name	Type	Location (Ontario)
Cat Lake Health Authority	National Native Alcohol and Drug Abuse program; family well-being program.	Cat Lake First Nation
Dryden Native Friendship Centre	Indigenous Mental Health and Addiction program cultural programming.	Dryden
Fort Frances Native Friendship Centre	Indigenous Mental Health and Addictions program; Indigenous Healing and Wellness program; Cultural Resource program; justice programs.	Fort Frances
Lac Seul First Nation/ Frenchman's Head	Alcohol and Drug Abuse Program.	Frenchman's Head (<i>Lac Seul First Nation</i>)
Meno Ya Win Health Centre	Community Counselling and Addictions Services.	Sioux Lookout
Mishkeegogaming Health and Social Building	National Native Alcohol and Drug Abuse program; Family well-being program; Brighter Futures program	Mishkeegogamang Ojibway Nation
Nee Chee Friendship Centre	Drug, education, and healthy living programs.	Kenora
Nishnawbe Gamik Friendship Centre	Indigenous Mental Health and Addictions program; Indigenous Healing and Wellness program; Cultural Resource program; justice programs.	Sioux Lookout
Ontario Addictions Treatment Centre (OOTC)	Support for opioid addictions.	Sioux Lookout, Kenora, Fort Frances, Dryden, Thunder Bay, Atikokan
Pikangikum First Nation Nursing Station	National Native Alcohol and Drug Abuse program.	Pikangikum First Nation
Red Lake Margaret Cochenour Memorial Hospital	Community Counselling and Addictions services.	Red Lake
Sioux Lookout Emergency Shelter	Rapid Access to Addictions medication.	Sioux Lookout
Sioux Lookout Health Authority	Nodin Mental Health Services; Approaches to Community Well-being; Primary Care Team.	Sioux Lookout
Sunset Women's Aboriginal Circle	Community Wellness program; cultural programming.	Sioux Lookout
Wabauskang First Nation Nursing Station	National Native Alcohol and Drug Abuse program.	Wabauskang First Nation

7.2 FEDERAL/PROVINCIAL RESOURCES

Name	Type	Contact Information
211 Ontario	Help Line, Referral Services.	Call/Text 211 • Chat: www.211ontario.ca
Al-Anon, Alateen	Help Line.	1-888-425-2666
Assaulted Women's Helpline	Help Line.	Call/Text: 1-866-863-7868 Crisis Line Number: 416-863-0511 Toll-Free Number: 1-866-863-0511
Centre for Addiction and Mental Health (CAMH)	Substance Use and Addictions Services.	1-800-463-2338
Canadian Hearing Services (<i>deaf and hard of hearing</i>)	Help Line.	1-866-518-0000 info@chs.ca • Skype: Ask CHS
Canadian Mental Health Association (CMHA)	Substance Use and Addictions Resources.	www.cmha.ca www.ontario.cmha.ca/documents/understanding-and-finding-help-for-substance-use-and-addictions
Connex Ontario	Referral Services (<i>Addictions, Mental Health, and Problem Gambling</i>).	1-866-531-2600 www.connexontario.ca
Drug and Alcohol Information Line	Substance Use & Addiction Services.	1-800-565-8603 https://www.canada.ca/en/health-canada/services/substance-use/get-help-with-substance-use.html
FIREFLY	Developmental & Community Services.	1-800-465-7203 www.fireflynw.ca
Good2Talk Post-Secondary Helpline (<i>age 16-30</i>)	Help Line.	1-866-925-5454
Hands – The Family Help Network	Help Line.	1-866-287-9072
Health811	Help Line, Health Services.	Call: 811 Chat: https://health811.ontario.ca/static/guest/home
Hope for Wellness	Help Line.	24/7 Phone & Chat: 1-855-242-3310 www.hopeforwellness.ca
Indian Residential School Survivors Society	Indigenous Resources.	1-866-925-4419 • Crisis Line: 1-800-721-0066 www.irsss.ca
Kids Help Phone (<i>Children and Youth</i>)	Help Line.	1-800-668-6868 • Text CONNECT to 686868
LGBT Youth Line	Help Line.	1-888-687-9688 • Text: 647-694-4275 www.youthline.ca
National Domestic Violence Hotline	Help Line.	1-800-799-7233 • Text LOVEIS to 22522
National Indian Residential School Crisis Line	Help Line.	1-800-721-0066
Ontario Addiction Treatment Centres	Addictions Support.	905-773-3884 • Info line: 1-877-937-2282 www.oatc.ca
Ontario Federation of Indigenous Friendship Centres	Support Services.	416-956-7575 www.ofifc.org/friendship-centres/find
Ontario/Canada Mental Health and Violence Support Services	Referral Services.	www.ontario.ca/page/get-help-if-you-are-experiencing-violence www.ontario.ca/page/find-mental-health-support
Public Health Agency of Canada Mental Health Support	Referral Services.	https://www.canada.ca/en/public-health/campaigns/get-help-here.html
Senior Safety Line (<i>Elder Abuse</i>)	Help Line.	1-866-299-1011 • www.eapon.ca
Suicide Crisis Helpline	Help Line.	Call/Text: 988 • www.988.ca
Support Services for Male Survivors of Sexual Abuse	Help Line.	1-866-887-0015
Talk4Healing for Indigenous Women	Help Line.	1-855-554-4325
Victim Services Directory	Referral Services.	https://ovss.findhelp.ca/

7.3 NORTHWESTERN ONTARIO REGIONAL RESOURCES

Name	Type	Location (if not virtual/phone)	Contact Information
Anishinaabe Abinoojii Family Services	Child Welfare.	Kenora	807-468-6224 Help Line: 1-866-420-9990 www.aafs.ca
Crisis Response Services	Help Line.	Thunder Bay	1-888-269-3100
Crisis Response Services Kenora Rainy River District	Crisis Services.	Atikokan First Nation Communities – Far North Fort Frances Kenora Red Lake Sioux Lookout	1-866-888-8988
Independent First Nations Alliance (IFNA)	Support Services.	Thunder Bay Sioux Lookout	Thunder Bay: 807-626-7730 Sioux Lookout: 807-737-1902 Toll Free: 1-888-253-4362 www.ifna.ca
Kenora-Rainy River Districts Child & Family Services	Child Welfare.	N/A	Toll Free: 1-800-465-1100 www.krrcfs.ca
NAN Hope	Help Line, Mental Health Services, Addiction Support, Referral Services.	N/A	Call/Text: 1-844-626-4673 www.nanhope.ca
Nishnawbe Aski Nation	Support Services.	Thunder Bay Various Locations	807-623-8228 www.nan.ca
NorWest Community Health Centres	Health Services.	Thunder Bay and District	807-622-8235 Toll Free: 1-866-357-5454 www.norwestchc.org
Tikinagan Child & Family Services	Child Welfare.	Sioux Lookout	807-737-3466 Toll Free: 1-800-465-3624 www.tikinagan.org



7.4 NORTHWESTERN ONTARIO URBAN RESOURCES

Name	Type	Location	Contact Information
North of Superior Counselling Programs	Mental Health Counselling.	Armstrong	807-583-2213 www.nosp.on.ca
NorWest Community Health Centres	Health and Mental Health Services.	Armstrong	807-583-1145
Atikokan Community Counselling Services	Counselling.	Atikokan	807-597-2724
Atikokan Family Health Team	Family Health Services.	Atikokan	807-597-8781 www.atikokanfht.com
Atikokan Native Friendship Centre	Support Services.	Atikokan	807-597-1213
FIREFLY	Developmental & Community Services.	Atikokan	807-597-4528
Kenora-Rainy River Districts Child and Family Services	Child Welfare.	Atikokan	807-597-2700
BMS Thunderbird Management & Lifestyle Consulting Ltd.	Support Services.	Dryden	807-633-6924 www.bmstbirdconsulting.com
Dryden Native Friendship Centre	Support Services.	Dryden	1-888-838-3632 www.dnfconline.org
Dryden Regional Mental Health and Addiction Services	Mental Health Services and Addictions Support.	Dryden	807-223-6678
FIREFLY	Developmental & Community Services.	Dryden	807-223-8550
Kenora-Rainy River Districts Child and Family Services	Child & Family Services.	Dryden	807-223-5325
Northern Youth Programs	Youth Services.	Dryden	807-937-4421
CMHA	Mental Health Services.	Fort Frances	807-274-2473 www.fortfrances.cmha.ca
FIREFLY	Developmental & Community Services.	Fort Frances	807-274-9251
Fort Frances Covenant Church	Christian Supports.	Fort Frances	807-274-1873
Gizhewaadiziwin Health Access Centre	Health Services.	Fort Frances	807-274-3131 www.gizhac.com
Kenora-Rainy River Districts Child and Family Services	Child & Family Services	Fort Frances	807-274-7787
Riverside Community Counselling Services	Counselling	Fort Frances	807-274-4807
Weechi-it-te-win Family Services	Family Services.	Fort Frances	807-274-3201 www.weechi.ca
Dilico Anishinabek Family Care	Child Welfare, Health Services, Mental Health Services, Addiction Support.	Fort William First Nation (Thunder Bay District)	807-623-8511 www.dilico.com
NorWest Community Health Centres	Health Services.	Kakabeka	807-473-5528
CMHA	Mental Health Services.	Kenora	807-468-1838 www.cmhak.on.ca
Deep Waters Consulting	Support Services.	Kenora	807-407-0395
FIREFLY	Developmental & Community Services.	Kenora	807-467-5437

Name	Type	Location	Contact Information
Kenora-Rainy River Districts Child and Family Services	Child & Family Services.	Kenora	807-467-5437
Lake of the Woods District Hospital	Health Services.	Kenora	807-468-9861 www.lwdh.on.ca
Nee-Chee Friendship Centre	Support Services.	Kenora	807-468-5440
Out of the Woods Counselling	Counselling.	Kenora	807-464-2235 www.outofthewoodscounselling.com
Waasegiizhig Nanaandawe'iyewigamig Health Access Centre	Health Services.	Kenora	1-888-699-6422 www.wnhac.org
Mishkeegogamang Band Council – Health Department	Health Services.	Mishkeegogamang	807-928-2082
Riverside Community Counselling Services	Counselling.	Rainy River	807-274-4807
Community Counselling and Addiction Services	Mental Health Services.	Red Lake	807-727-1100
FIREFLY	Developmental & Community Services.	Red Lake	807-727-9064
Kenora-Rainy River Districts Child and Family Services	Child & Family Services.	Red Lake	807-727-2165
Red Lake Indian Friendship Centre	Support Services.	Red Lake	807-727-2847 www.rlifc.ca
FIREFLY	Developmental & Community Services.	Sioux Lookout	807-737-2086
Kenora-Rainy River Districts Child and Family Services	Child & Family Services	Sioux Lookout	807-737-3250
Meno Ya Win Health Centre	Health Services, Mental Health and Addictions Counselling .	Sioux Lookout	807-737-3030 Mental Health & Addictions: 1-807-737-1275 www.slmhc.on.ca
Nishnawbe-Gamik Friendship Centre	Support Services.	Sioux Lookout	807-737-1903 www.ngfc.net
Nodin Mental Health Services	Mental Health Services.	Sioux Lookout	807-737-4011 www.slnfha.com/health-services/nodin-mental-health-services
Sioux Lookout First Nations Health Authority	Health Authority, Help Line.	Sioux Lookout	1-800-465-2600 Crisis Line: 807-737-9257 After Hours: 807-737-4011 www.slnfha.com
Windigo First Nations Council	Support Services.	Sioux Lookout	807-737-1585 Toll Free: 1-800-465-3621 www.windigo.on.ca
Shibogama First Nations Council	Support Services.	Sioux Lookout	807-737-2662 www.shibogama.on.ca
Balmoral Centre – St. Joseph's Care Group	Addiction and Mental Health Services.	Thunder Bay	807-623-6515
Behavioural Sciences Centre	Counselling and Health Assessment Services.	Thunder Bay	807-623-7677 Toll Free: 1-888-423-5862 www.bscnorth.ca
CMHA	Mental Health Services and Addiction Support.	Thunder Bay	807-345-5564 www.thunderbay.cmha.ca
Children's Centre Thunder Bay	Children and Youth Mental Health Services.	Thunder Bay	807-343-5000 www.childrenscentre.ca

Name	Type	Location	Contact Information
Crossroads Centre	Addictions Support.	Thunder Bay	807-622-2731 After Hours: 807-628-6652 or 807-633-6385 Toll Free: 1-833-861-2318 www.crossroadscentre.ca
Dr. Paul Johnston Psychological Services – Thunder Bay Psychology	Mental Health Services.	Thunder Bay	807-628-0752 Toll Free: 1-888-872-8551 www.thunderbaypsychology.com
FIREFLY	Developmental & Community Services.	Thunder Bay	807-627-0883
Jacquelyn Lovato Psychotherapy Services	Mental Health Services.	Thunder Bay	807-621-5398
Ka-Na-Chi-Hih Treatment Centre	Addiction Support.	Thunder Bay	Residence: 807-623-5577 Main: 807-627-3524 www.kanachihih.org
Kelly Mental Health	Mental Health and Addictions Support.	Thunder Bay	807-767-3888 www.kellymentalhealth.com
Matawa First Nations	Support Services.	Thunder Bay	807-344-4575 Toll Free: 1-800-463-2249
NorthWind Family Ministries	Christian Services.	Thunder Bay	807-622-5790 www.northwindfm.org
NorWest Community Health Centres	Health Services.	Thunder Bay	807-622-8235
People Advocating Change through Empowerment (P.A.C.E.)	Mental Health Services.	Thunder Bay	807-343-4760
Sister Margaret Smith Centre – St. Joseph's Care Group	Addiction and Mental Health Services.	Thunder Bay	807-684-5100 Toll Free: 1-866-346-0463
St. Joseph's Care Group	Rehabilitation Services.	Thunder Bay	807-343-2431 Toll Free: 1-800-209-9034 www.sjcg.net
Sullivan + Associates Clinical Psychology	Mental Health and Addictions Support.	Thunder Bay	807-768-0660 www.drsullivan.ca
Thunder Bay Counselling	Mental Health and Addictions Support.	Thunder Bay	807-684-1880 www.tbaycounselling.com
Thunder Bay Indigenous Friendship Centre	Support Services.	Thunder Bay	807-345-5840 www.tbifc.ca
Thunder Bay Regional Health Sciences Centre	Youth Mental Health Services, Health Services, Acute Care.	Thunder Bay	807-684-6000 www.tbrhsc.net
Thunder Bay and Area Victim Services	Help Line, Referral Services.	Thunder Bay	807-684-1051 www.tbayvictimservices.ca

7.5 NORTHWESTERN ONTARIO TREATMENT CENTRES

Name	Type	Location (if not virtual/phone)
Oshkeemekana Residential Treatment Centre	8 bed youth healing centre.	Cat Lake, Ontario
Michikan Lake Wellness Centre	Provides information, services related to addictions, depression, family violence, health promotion, stress management.	Bearskin Lake First Nation
Reverend Tommy Beardy Memorial Treatment Centre	Residential treatment facility.	Muskrat Dam
Changes Recovery Homes	Residential support services for women recovering from addictions.	Kenora
Waasegiizhig Nanaandawe'iyewigamig	Assessment and short-term residential treatment Centre.	Kenora
Mino Ayaa Ta Win Healing Centre	Withdrawal management services and residential treatment programs. Services are rooted in Anishinaabe culture.	Fort Frances
Morningstar Centre	Lake of the Woods withdrawal management Clinic.	Kenora
Migisi Alcohol and Drug Treatment Centre	14 bed, co-ed residential treatment facility for drug and alcohol treatment.	Kenora
Thunder Bay Addictions Centre	Methadone/Suboxone maintenance facility.	Thunder Bay
Dilico Anishinabek Family Care	20-bed, co-ed inpatient drug and alcohol recovery centre.	Thunder Bay



8.0 Funding Opportunities for Employment Readiness & Training

Employment and health and wellness are intimately linked. At First Mining Gold, we understand that employment and income have a direct impact on quality of life, food security, housing, and access to health care, among others. For these reasons, training, education, and employment are important factors in this Employee Health and Wellness Strategy.

As an employer, we add value to communities by providing local workers with well-paying jobs to support their families, their recreational and land use pursuits, and build prosperous local economies. Additionally, we seek opportunities to hire and source goods and services locally, wherever possible.

Significant funding can be available from government for mining-related training and education programs that can help prepare northern and Indigenous people to be workforce ready. First Mining Gold is committed to working with local communities and their representatives to identify training, education, and employment requirements, and promote pathways for candidates to prepare for and participate in the Springpole Project. To support this strategy, First Mining Gold has identified the following funding opportunities.

First Mining Gold is continuing dialogue with services providers and funding agencies to better define opportunities and timelines for training and employee readiness programs for the Project.

ATIKOKAN EMPLOYMENT CENTRE

Providing a central location for accessing federal government forms, and to assist individuals with employment Ontario funded programs.

EQUAY WUK

Offers a 10-week training readiness program to increase employment skills.

GOVERNMENT OF CANADA

Indigenous Skills and Employment Training program (ISETs), Skills Partnership Fund (SPF). SPF is a project-based fund that supports partnerships between Indigenous organizations and industry employers to provide skills training to Indigenous people linked to economic opportunities.

LAC SEUL TRAINING CENTRE OF EXCELLENCE

A training facility based in Hudson, Ontario that has the goal of providing quality, certified training programs and workshops to members of Lac Seul First Nation and the people of Northwestern Ontario, in a culturally adaptable learning environment.

**SHOONIYAA
WA-BIITONG
(GRAND
COUNCIL
TREATY # 3)**

Shooniyaa Wa-Biitong Training and Employment Centre is mandated by the Chiefs of Treaty #3 to promote employment development and deliver training initiatives to First Nations within the Treaty #3 area and their members.

**NISHNAWBE
GAMIK
FRIENDSHIP
CENTRE**

The Apatisiwin program offers access to resume development and can provide financial support to employers for the delivery of training supports, on-the-job training, wage subsidies, and purchase of training programs.

**NORTHERN
NISHNAWBE
EDUCATION
COUNCIL
(NNEC)**

Offering post-secondary programs to assist in the creation of a pool of professional, help create infrastructure, support initiatives in business, economic development, medical and social services.

**RED LAKE
CAREER AND
EMPLOYMENT
SERVICE**

Provides access to employment supports, placement incentives, apprenticeship, workshops, and career planning.

**RED LAKE
FRIENDSHIP
CENTRE**

Program offers access to resume development and can provide financial support to employers for the delivery of training supports, on-the-job training, wage subsidies, and purchase of training programs.

**SIOUX
HUDSON
EMPLOYMENT
SERVICES**

Offers employment subsidies to employers for work placements, wage subsidies, job creation partnership, and various youth employment programs.

**SIOUX
LOOKOUT AREA
ABORIGINAL
MANAGEMENT
BOARD
(SLAAMB)**

Supports the growth and development of First Nations, while continuing to prioritize education and training initiatives. Through various programs, SLAAMB provides community members with the skills and knowledge necessary to succeed in the modern workforce.

Conclusion

This Draft Health and Wellness Strategy is about preparing the Springpole Project for the future. It is forward-looking and aims to bring internal and external alignment to our proposed approach and priorities on health and wellness matters.

First Mining Gold leadership, managers and employees all have important roles to play in ensuring the successful adoption and implementation of the Strategy, and to creating a positive and healthy working environment for a diverse workforce. This includes the responsibilities of senior leaders to model what healthy behaviour looks like for employees and the importance of trained and supported managers and supervisors to help build and maintain a workplace culture of health and wellness.

Additionally, feedback received from northern and Indigenous communities about local health and wellness trends and challenges will continue to inform the approach and priorities. First Mining Gold is committed to updating the Employee Health and Wellness Strategy as the needs of people and communities' change. As such, we will continue to engage locally and regionally to help shape a culture of health and well-being at the Springpole Mine that is focused on prevention, ensures community, diversity, and respect is considered throughout, and is sustainable.



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- Workplace Safety North. 2022; Mining Health and safety manger champions new mental health program. Agnico Eagle, Detour Mines, ON.

Appendix A:

Mining in Canada - Health & Wellness Example Programs and Policies

In response to feedback from Indigenous communities whose traditional territories intersect the Springpole Project, First Mining Gold has conducted industry research to identify positive examples of Indigenous health and wellness programs in the mining sector, with a specific focus on mental health & addictions. The following case studies offer examples of best practices in Canadian mining operations.

ANGICO EAGLE (*Detour Lake Mine*) – DIG DEEP PROGRAM

In 2021, Agnico Eagle implemented the Dig-deep program; an employee-led outreach program that aims to combat and provide employees with a better understanding of mental health and addictions concerns. This program offers a multi-faceted approach to mental health and includes the following components:

- **An Employee-driven program** has members of the workforce provide a peer support group for people who are struggling. The group also supplies a weekly safe space meeting and consistent messages and interactions to promote mindfulness and to help ensure everyone knows they are not alone in their wellness challenges.
- **Workplace Safety North (WSN) Mental health awareness training** is used and added to the company's new worker orientation program. WSN also trained the company's health and safety trainer to be able to facilitate the awareness program across company sites. The WSN program consists of short toolbox talks from five to fifteen minutes on mental health and awareness topics, longer sessions for educational purposes – often done in safety meetings, interactions with workers to have quick chats either one-on-one or in groups. It also has specific sessions for supervisors and leaders where they learn about signs, approaches, how to interact, what to do and in general, how to identify and respond to a person in crisis before it becomes a situation.
- **Mental health first aid training** is offered from the Canadian Mental Health Association (CMHA), including facilitator training for their onsite consultant.
- **A mental health and addictions consultant** is employed as part of the team to focus on building mental health programs and training. The consultant often makes use of supports provided by the Employee and Family Assistance Program (EFAP). They are also available for one-on-one sessions with employees on site to ensure there is a safe place to have a conversation and develop a success plan. When the consultant meets with workers at the camps, the meeting location is not in the public domain and so individuals are comfortable to come and talk in confidence. The consultant also has a dedicated mental health email address that only they can access and respond to questions or concerns from employees.

- **Extensive training on suicide prevention** is provided for the site consultant as well as for the learning and development and human resources staff. The company recently introduced the Applied Suicide Intervention Skills Training (ASIST) program. Four staff attended the weeklong training. Currently, there are two qualified facilitators who work in tandem to deliver this training. This is a critical part of supervisory and leadership training, and the company plans to provide a two-day workshop to all leaders and supervisors as part of their performance growth plans.

NEWMONT (*Musselwhite Mine*)

Musselwhite Mine provides Employee Assistance Programs (EAP) and offers the services of a social worker on-site 4 days per week.

Periodically, Musselwhite has funded crisis intervention workshops in First Nation communities, which focus on need (*conflict resolution, crisis management, grief management, drug addiction, healthy parenting, stress management and addictions*).

Employees of Musselwhite have access to an on-site gym and the company manages a recreation program that offers volleyball, floor hockey, basketball, a weight room, sauna, and internet access. Boats, bicycles, and other equipment are accessible for employees while working at Musselwhite through the recreational centre.

TECK (*Quintette and Bullmoose Mines*)

Both of these mine operations developed and implemented a community health and mine workers health program that included on-site addiction counselling and a community transition house for women affected by domestic violence.

Family counselling was also made available at Tumbler Ridge during the operation of Quintette and Bullmoose mines.

DE BEERS (*Victor Mine*)

De Beers is committed to an Alcohol and Drug Free Policy and takes action to deliver on its commitments to northern and Indigenous communities in this regard. Security personnel enforce a zero-tolerance policy for these illicit substances. De Beers also supports program initiatives and service resources in the local northern communities for addressing alcohol and substance abuse problems.

A comprehensive study was completed that considered the health effects of social, cultural, and economic changes brought about by the project, including the effects of mine closure. Social and cultural changes include impacts on subsistence lifestyles, traditional activities, family relationships, and language.

GLENCORE CANADA (*Kidd Operations*)

Glencore implements a clear and concise Alcohol and Drug Policy and Procedures detailing company expectations. It covers Assistance, Assessment, Rehabilitation and Aftercare, Investigative Procedures, Social Situations, Consequences of a Policy Violation, Conditions for Continued Employment.

The company has also implemented a number of employee wellness programs including smoking cessation, fitness, and immunization initiatives.

NORCAT AND WORKPLACE SAFETY NORTH (*Sudbury*)

NORCAT and Workplace Safety North have partnered to deliver a new, five-week training program targeted at new miners. The mental health component of the training session is incorporated into the existing 5-week common core programs and Diamond Driller program and provides tips to workers on how to spot stress or burnout, and deal with it before it becomes a major issue.

