

BEHAVIOURAL HEALTH FOUNDATION



ANNUAL REPORT

APRIL 1, 2025—MARCH 31, 2026

BHF acknowledges the traumatic, generational impact the Indian Residential Schools system has had on many Indigenous persons served by BHF and Indigenous staff persons of BHF. Our work takes place on Treaty One land and the homeland of the Red River Métis nation. It is our responsibility to reflect on the history of Manitoba, and to work and concentrate today with a vision of tomorrow.



Our Purpose



The Behavioural Health Foundation is a therapeutic community with the purpose of providing long-term programming to adults experiencing addiction and co-occurring mental health concerns from a wholistic perspective that integrates socio-economic wellness.

Dependents of those attending BHF are also accommodated both in residence and in programs.

This long-term approach is designed to offer graduated opportunities for equipping a person with the vocational, interpersonal and communication skills necessary to successfully return to the community.

Board of Directors 2025-2026

Brian Chrupal, President

Tammy Hansen, Vice President

Hilda de Souza

Michelle Ducharme

Cheryl Osborne

Dr. Lesia Shepel

Dr. Kent Somers



Behavioural Health Foundation Inc.

www.bhf.ca

Addictions and Co-occurring Mental Health Treatment

Box 250, 35 ave de la Digue
St. Norbert, MB R3V 1L6
Telephone (204) 269-3430

info@bhf.ca

Addiction Treatment Services

Box 250, 35 ave de la Digue
St. Norbert, MB R3V 1L6
Intake Inquiries: ATSintake@bhf.ca
Telephone: (204) 269-3430

Breezy Point (Women's Program)

Box 250, 35b ave de la Digue
St. Norbert, MB R3V 1L6
Intake Inquiries: BPintake@bhf.ca
Telephone: (204) 261-6111

Program accreditation provided by
www.carf.org



***The Behavioural Health Foundation is located on
Treaty One territory and the homeland of the Red River Métis Nation.***

Thank You For Your Support

*Our programs could not exist without the support of government departments,
private businesses, agencies and members of the public. We are grateful for the
Ongoing support and pledge to continue our work to assist people in
becoming healthier members of society who can and will pay it forward.
The Board of Directors, staff and program members thank you.*

Table of Contents

President's Remarks	1
New & Noteworthy	2
Mission & Core Values	3
Finances & Acknowledgements	4
Outcomes & Effectiveness	5
Organizational Chart	6
Management Team	7
Staffing	8
Programs and Services	9
Program Applicants & Wait List	10
Intake and Days Care	11
Addiction Treatment Services	13
Breezy Point	15
Traditional Grounds & Indigenous Services	18
Clinical Services	19
Support Services	20
Summarized Financial Statements	23

Photography in this report is donated by @jeremyrand101

BHF Philosophy

The philosophy is based on the belief that no person is an island unto themselves and that self-help comes from helping others. The positive power that resides in everyone can overcome the negative aspects of life.

And, if we are to learn and to teach, we must attach ourselves to an environment that is created and dedicated to the betterment of humanity. We cannot cross a desert until we have prepared ourselves. We cannot travel the road of life blaming those about us, but rather we must accept responsibility for ourselves and each other and conquer each situation that we meet. Our pasts have been written and cannot be erased. Therefore, we must work and concentrate for today with a vision of tomorrow.



President's Remarks

This Annual Report represents a remarkable moment in BHF history – our 55th anniversary as a Therapeutic Community. In truth, however, it is hard to imagine that there has ever been a year here that wasn't remarkable in some way, because every year since 1971, apparently ordinary people have been coming here to take on the remarkable challenge of facing addiction, trauma, and difficult circumstances. Though each person's story is unique, they were all taking on the hard work of making a better life for themselves. We know the road to recovery is rarely easy and often not a single straight line, so it is awe-inspiring in this anniversary year, to think back on all those men, women and families coming together here to help one another over the years – all they strived for, all they achieved.



We are very proud of our BHF history – proud of having been pioneers, leaders in addictions treatment in Manitoba. But a proud history has never meant being content to stay static, to continue doing things a certain way just because that's how we did them before. Among noteworthy efforts in the past, this organization committed itself to international accreditation – the first treatment centre in Canada to achieve that distinction - committed itself to deepening its understanding of Indigenous culture and history, and committed itself to ongoing reflection and growth. That forward-thinking attitude informed BHF's comprehensive process of program reviews and strategic planning undertaken over the course of the last fiscal year. Notably, leadership sought feedback and input from many voices – program residents, staff, networking agencies and other stakeholders. A consulting firm experience in working with non-profits was selected to help bring ideas together, and worked with Board members and the management team to consolidate a five year plan focused on upholding BHF's strengths and values, while ensuring the organization remains impactful in a changing environment. I would like to thank everyone who contributed their thoughts and time to this project. And I would like to acknowledge the entire staff team for their commitment and hard work as move ahead to implement the goals laid in the plan.

Each year's Annual Report offers our members, their families, our referral sources and the wider public, a quantifiable look at the work done here over the course of a year. The statistics in the report tell us a lot. When you read that 80% of the children who are in care of a CFS agency when they come to BHF are returned to parental care before the family's exit, you can understand why BHF has always been committed to supporting whole families in treatment. When you learn that six individuals earned a "one year pin" in 2025 – 2026 and that a further 8 individuals remained in treatment beyond a year, you can appreciate why we offer an open-ended length of stay. The percentage of Indigenous participants choosing BHF remained high this year, underscoring the importance of culturally relevant programming. Continuing, renewing, and strengthening the role of Indigenous teachings and ceremony as an integral part of treatment is a high priority for our Board and staff as we move forward with program development. Finally, you may take note of the stat that shows 34% of adults entering BHF over the course of the fiscal year, had been in treatment here at least once before. This may be reflective of the increasingly complex patterns of substance use in our communities and possible of the many challenges facing people exiting treatment and looking for an environment that supports sobriety. It is important that BHF remains a safe and healthy place, and that people know they will be welcomed back to continue their journey in a supportive and healthy environment.

Brian Chrupalo

President, BHF Board of Directors



55 Years in Manitoba

New & Noteworthy

Strategic Planning

BHF's Board of Directors, in partnership with the management team at BHF initiated a new Strategic Planning process to establish strategic priorities for the next 3-5 years. All staff were engaged in a Strategic Planning Survey, which asked a range of questions about the organization. Bison Research and Development, who provide strategic consulting for nonprofits, were contracted. They engaged in a series of consultation with the Board and management. BHF would like to thank Jared Star & team from Bison Research & Development for this valuable experience that helped to develop these strategic directions.

1

Strengthen Core Operations and Workplace Culture

This strategic direction focuses on strengthening the systems, structures, and supports that enable staff to deliver high-quality care consistently and safely. It emphasizes workforce sustainability, leadership development, internal alignment, and modernization of operational support systems (i.e. virtual and computer-based management reporting tools).

2

Strengthen and Evolve Programming

Throughout this period we will focus on strengthening BHF's programs to ensure they remain effective, responsive, and aligned with the evolving needs of residents and families. It emphasizes program clarity, continuity, cultural relevance, and clinical integration, while preserving the core elements of structure, routine, community, and family inclusion that define BHF's model.

3

Strengthen Long-Term Sustainability

BHF will also focus on strengthening long-term sustainability by improving financial resilience, planning for infrastructure needs, enhancing external relationships, and supporting leadership continuity. It emphasizes proactive planning to reduce vulnerability and position BHF for long-term impact.



Our Mission

To provide a person-centered culturally aware substance use and co-occurring mental health treatment program based on a behavioural health approach that focuses on holistic healing for adults and families seeking to live healthy and rewarding lives.

BHF Core Values

- 1. The Behavioural Health Foundation welcomes and promotes diversity in societal and cultural values.**
- 2. Members have the right to be treated with dignity and respect. They have the right to access services respectful of their race, ethnic origin, age, religion, gender, family status, political belief, and sexual orientation.**
- 3. BHF recognizes that the best interests of the person are sometimes best served by referring them to another agency or professional.**



Finances & Acknowledgements

BHF is thankful for the financial support from many private donors as well as the following during the fiscal year 2025 - 2026:

Assiniboine Credit Union

Early Learning and Child Care

Manitoba Education and Early Learning

Manitoba Families

Manitoba Mental Health and Community Wellness

Manitoba Department of Housing, Addictions and Homelessness

St. Norbert Foundation

Seed Winnipeg

Sysco

The Winnipeg Foundation

Outcomes & Effectiveness

BHF uses a variety of performance indicators to measure program efficiency, access, and outcomes. BHF strives to increase lengths of stay to help members achieve their long-term treatment goals, employment and education goals, reunite families, and reduce homelessness.

Addiction Treatment Services

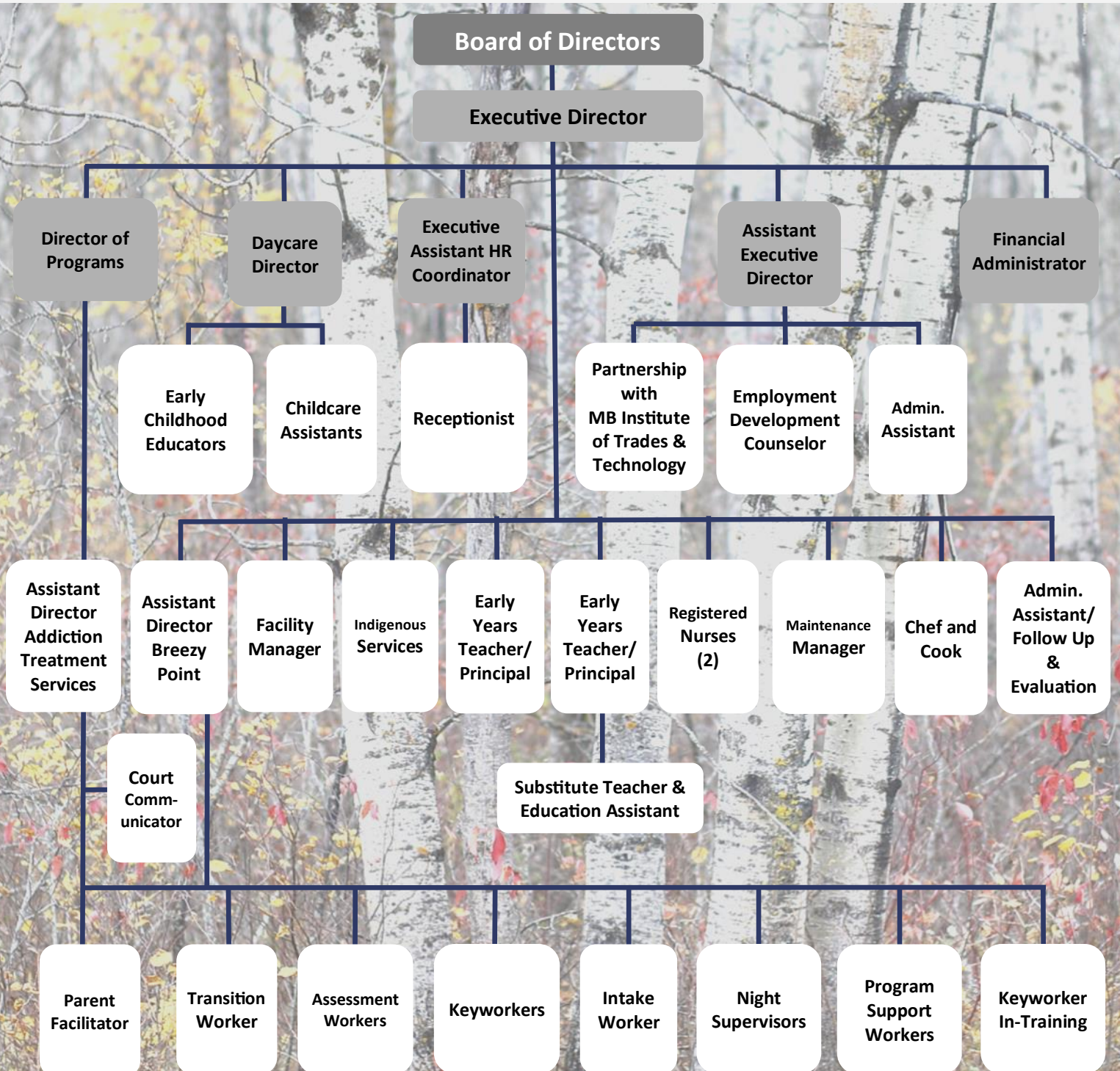
- *The average length of stay of adults who exited in the fiscal year was 112 days.*
- *65% of adults who exited completed primary treatment.*
- *88% of adults were free from substance use and 99% reduced their substance use at exit from the program.*
- *25% of adults were employed or in another productive role upon exit.*
- *100% of adults had no new criminal charges during their treatment stay.*
- *11% of adults attended education during their treatment stay.*
- *51% of adults exited into stable or transitional housing.*

Breezy Point

- *The average length of stay of women who exited in the fiscal year was 107 days.*
- *64% of women who exited completed primary treatment.*
- *86% of women were free from substance use and 100% reduced their substance use at exit from the program.*
- *26% of women were employed or in another productive role upon exit.*
- *98% of women had no new criminal charges during their treatment stay.*
- *50% of women exited the program into stable or transitional housing.*

BHF performs Consumer-Based Program Evaluations twice yearly in all of its programs and asks members to complete an Exit Questionnaire upon leaving the program. The summary of results for this reporting period showed positive results overall.

Organizational Chart 2025-2026



 Represents Senior Management

Management 2025-2026

**Paula Hendrickson,
Executive Director**

**Kuljeet Kaur,
Executive Assistant
HR Coordinator**

**Sheila Bogoch,
Assistant
Executive Director**



**Crystal Brown,
Financial
Administrator**

**Leslie Nielsen,
Director of
Programs**

**Lillian Keenan,
Daycare
Director**

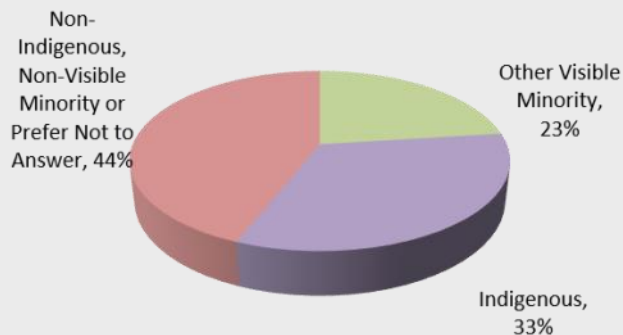


The Team at BHF work together across BHF's buildings and departments to deliver the best possible treatment experience for adults and children of members. Among the employees at BHF are front-line treatment staff including Keyworkers Program Support Workers, and Night Supervisors. Staff providing continuum of care support include Indigenous Services staff, a Counsellor, Court Communicator, Intake Worker, Parent Facilitator, and Employment Development Counsellor. Complementing the treatment team are a Psychiatric Nurse, a Teacher/Principal, Early Childhood Educators and Child Care Assistants, a Chef and Cook, a Maintenance Manager, and a variety of office, administrative staff and management.

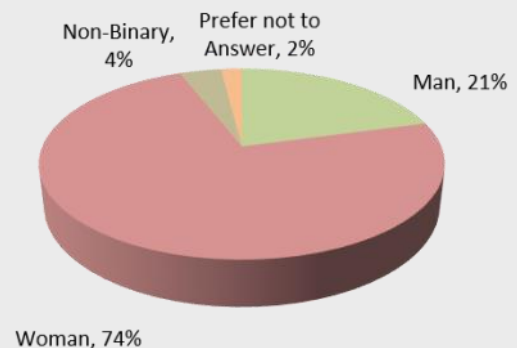
Staff Demographics

As of March 31, 2026, BHF had 59 staff; 44 were full time and 15 were part time.

Staff Ethnicity



Staff Gender



Staff Training

In addition to attending numerous community-based workshops and courses including Trauma Informed Care, BHF staff regularly participate in a number of internal training sessions including:

- Indigenous Awareness and Cultural Competency
- Blood Spill Clean-up & Medical Emergencies
- Co-occurring Disorders Education Curriculum
- Crisis Prevention Intervention
- Critical Incident Debriefing
- FASD Training
- Fire Extinguisher Training
- Fire Panel Training
- First Aid/CPR/Defibrillator Training
- Individual Treatment Plan Development
- Medication Management
- Motivational Interviewing
- Naloxone/Overdose Training
- New Hire Training/Orientation
- Power Outages
- Staff Code of Ethics, Professional Conduct
- Suicide/Self-Harm Prevention & Intervention
- Therapeutic Community Training
- WHMIS
- Workplace Threats

Program Description



The Behavioural Health Foundation Inc. is a therapeutic community (TC) providing long-term bed-based treatment for adults and family units experiencing issues related to substance use and co-occurring mental health concerns. The TC approach provides a highly structured environment with well-defined boundaries emphasizing moral and ethical accountability, community imposed sanctions, and contingencies such as privileges and attainment of status. Also emphasized is the idea of being a part of something greater than oneself to counter the pattern of isolation and narcissism often found amongst the substance abusing and co-occurring mental health population. (De Leon, 2000). A person is thought of as a resident member of the therapeutic

community, rather than as a client/patient, and the therapeutic community itself is defined as the physical and social environment within which the members live.

Therapeutic communities are deliberately designed to offer graduated opportunities to equip members with the vocational, intellectual, emotional and spiritual skills necessary for successful reintegration into society. The peer hierarchy of work and community status defines the roles, functions, and relationships that mediate socialization and therapeutic change, while the peer culture encourages the norms, values, and beliefs of right living which guides the change.

Member Profile

Although BHF members have varied backgrounds, they initially share problems such as self-defeating behaviours, thoughts and emotions, non-productive interactions with others, and distorted perceptions of themselves and the world. In the TC model, substance use and co-occurring mental health problems are seen as disorders of the whole person. The array of life problems, the number of substance use issues, and motivation to change are different for each person entering treatment. There are however, some common themes that reflect the BHF population:

- Many new members arrive with histories of family dysfunction – including sexual, emotional and physical abuse, familial substance abuse, generational poverty, parental neglect, multiple experiences in foster care, and generational trauma from residential schools and the sixties scoop and other impacts of colonization.
- Drug related arrests and hospitalizations prior to entry are common.
- Many members have histories of unemployment or under-employment. Many arrive from communities where skill development and employment opportunities are very limited.
- Membership in the Behavioural Health Foundation is sometimes an alternative to being remanded or sentenced to a period of incarceration.
- Finally, the desire to improve the quality of one's life is a prerequisite to living at BHF. To achieve this, members come to BHF voluntarily.



**BEHAVIOURAL
HEALTH
FOUNDATION**

Program Applicants & Wait List

There were 1891 referrals¹ involved in BHF's intake system over the 2025-2026 fiscal year. These were persons entering the intake system and individuals carrying over from the 2024-2025 fiscal year. Of them, 1090 (58%) identified as male, 796 (42%) as female, and five as non-binary. Of the applicants, 1324 were men and women interested in BHF's Addiction Treatment Services program, 129 were women interested in the Breezy Point women-only program, and 438 were women interested in either program, whichever had the first available bed. Referrals are from both the wider community as well in incarceration, 920 (49%) were persons who were incarcerated at the time of first contact with the intake team.

Most referrals are single individuals and/or persons hoping to reunite with children. Six hundred and thirty-three (33%) of adult referrals had children who were in agency care or in care of others, for example extended family members. There were 1808 children among these referrals. Of the 79 (4%) of referrals who did have children in their care, there were 185 children. There were 32 referrals who reported being pregnant, and were given Intake priority. Seventeen (1%) of referrals were persons wishing to enter as couples into BHF's family program, with or without children in their care.

Of the referrals, 1690 (89%) did not enter BHF's programs. Some were deemed unsuitable for BHF's programs for reasons including histories of violent and/or sexual offences, arson, offences involving children, other serious offences, active gang involvement, being deemed a flight risk, or a history of poor program performance. Others were assessed as unable to navigate the program due to serious and persistent health/mental health and/or mobility concerns.

Other referrals who were accepted to enter BHF's programs did not enter for various reasons, including:

- were no longer interested and/or did not communicate with BHF's intake team for a period of 3 months, for reasons unknown.
- decided to seek other treatment or had changed their mind about attending treatment when bed space became available.
- did not show up to their scheduled bed-date.
- had their bail denied or were sentenced to a period of incarceration while on the wait list.

For adult referrals entering programs from the wait list, the average wait time was 48 days. The median wait time was 19 days.

¹"Referrals" are either self-referred individuals or individuals referred by others.

"At ATS I felt supported, staff were easy to talk to and they took the time to hear you no matter how busy they were. I felt safe. ."

-Former Resident, Systems Evaluation Report



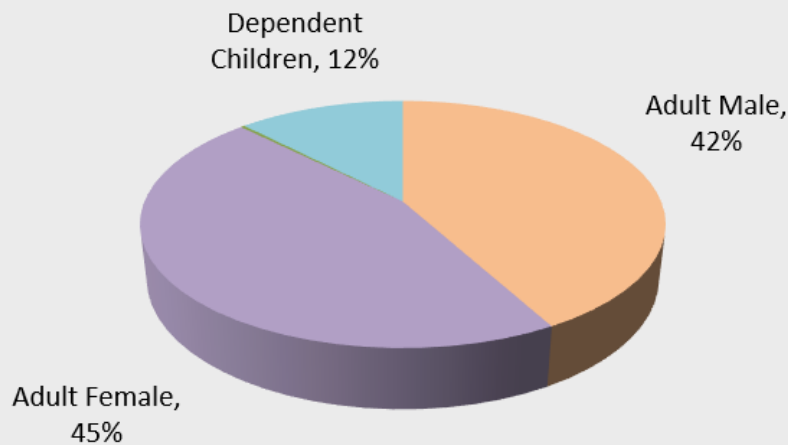
**BEHAVIOURAL
HEALTH
FOUNDATION**

Intake & Days Care

**Total Intakes
BHF Programs
2025-2026**

Adult Males ²	144
Adult Females ²	156
Non-Binary ²	1
Dependent Children	42
Total Intakes	343

Total Intake in all Programs



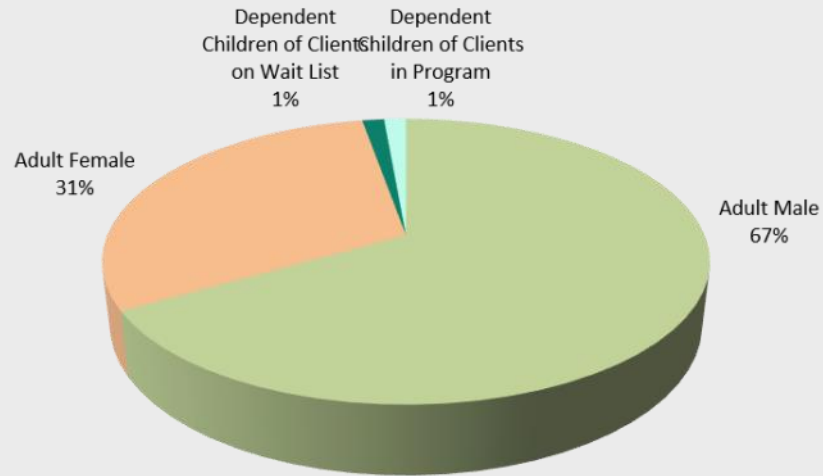
Days of Care

Adults	30,770
Dependent Children	7,257
Total Days of Care Provided	38,027

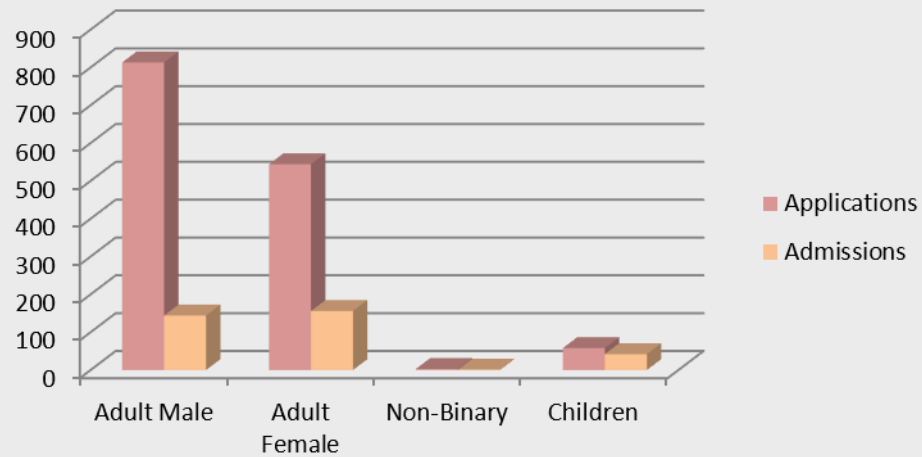
¹Members are categorized with the gender to which they identify. If members do not identify with traditional gender definitions, BHF reports information in a manner that best protects personal information.

At the end of the 2025-2026 fiscal year, there were 72 persons on the BHF wait list.

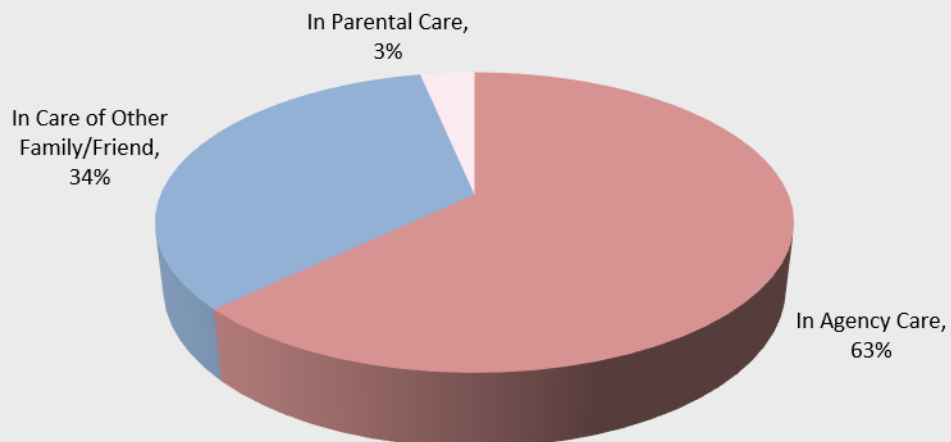
Clients on Wait List at Year-end



Applications in Fiscal Year vs. Admissions



Children of Adults on Wait List



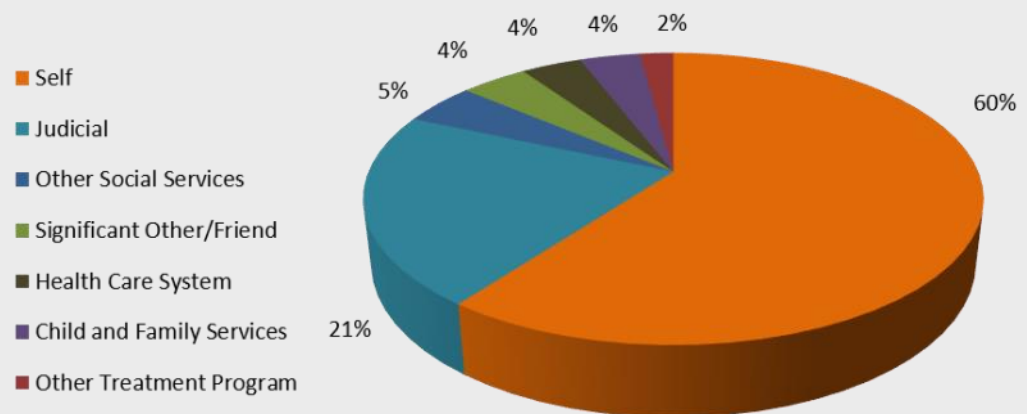
Addiction Treatment Services (ATS) Program for Adults & Families

The Behavioural Health Foundation Addiction Treatment Services is internationally accredited. The bed-based addictions and co-occurring mental health treatment facility accommodates adults and dependent children. Members are housed in the main building, located in the community of St. Norbert, as well as in 6 transition houses in the nearby community. The maximum occupancy is 100 adults and children.

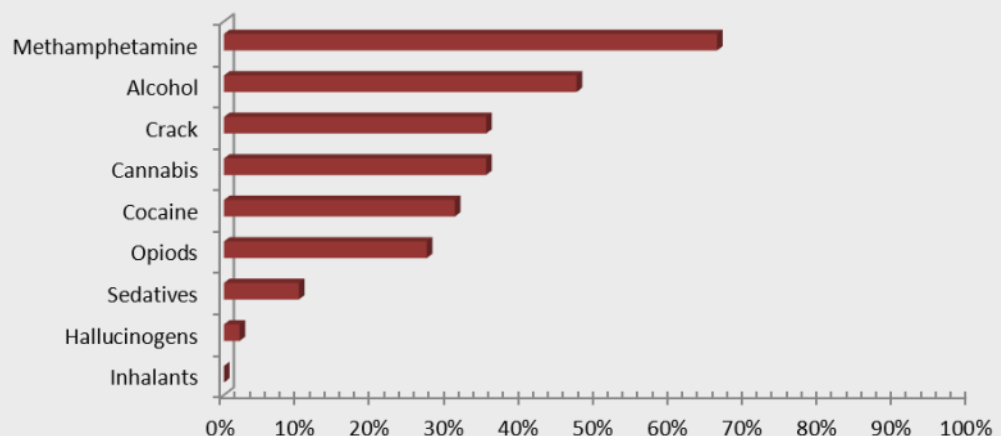
Total Intakes, ATS	
Adult Males	144
Adult Females	94
Adult Non-Binary	1
Total Adults Admitted to Program	239
Children of Members	34
Total Intakes	273

Average Age of Adults	35
Age Range of Adults	19-71
Average Length of Stay ³	85 days
Completed Primary Treatment (30 days)	152 (64%)
Stayed over 90 days	85 (36%)

Referral Sources of ATS Intakes



Most Frequently Used Substances



³Thirty-one adults who entered during the 2025-2026 fiscal year remain in the program at the time of this report. This figure will increase until all clients exit the program.

Children of Members (Addiction Treatment Services)

During the 2025-2026 fiscal year, 34 children came to live at BHF Addiction Treatment Services program while their parents participated in treatment. At entry, 25 (74%) children were in agency care. The average length of stay of children was 115 days. Fifteen (44%) children had regular visitation with their parents at BHF prior to moving in. Three babies were born to mothers in residence. Of the 25 children who entered BHF in the care of Child & Family Services, 20 (80%), to date had successful reunifications where the parent regained custody of their child(ren) while in the program.

Post-Treatment Follow-Up

The Behavioural Health Foundation conducts a continuous 6-month follow-up study of program participants. The information below is based on clients who attended treatment during the fiscal period of April 1, 2024 to March 31, 2025. The fiscal 2025-2026 follow-up year (at the time of this report) is in progress, and the results will be available in the Systems Evaluation Report in early 2027.

Participants are contacted 6 months after completion of primary treatment. They are asked a variety of questions such as whether or not they are using substances and to what extent, their employment status, educational pursuits, and if they have new criminal justice system involvement. Participants in BHF's programs are asked to participate in a Satisfaction Survey. The comprehensive results of the ongoing follow up study are available in the annual Systems Evaluation Report. The following is a brief summary of some results of the 2024-2025 study.

Substance Use Reduction

Of the 44 members located and interviewed 6 months after completion of primary treatment, 32 (74%) reduced their use of substances. The average reduction of substance use was 16.5 points on the World Health Organization's ASSIST Scale.

Criminal Justice System Involvement

Fifty-one percent of all members who entered in the 2024-2025 fiscal year had involvement with the criminal justice system. They were on bail, probation or serving a conditional sentence. At the time of follow-up, 89% of located clients reported having no new involvement with the law.

Employment

Upon entry, 96% of clients were unemployed. Only 4% had full or part time employment, were participating in full time vocational education programming, or were the homemaker of a household. At the time of follow-up, 50% of the clients located had become involved in these successful pursuits.

Education

In this reporting period, 24 members took advantage of the on-site Adult Education Centre. Fourteen members were attending education at exit, and three of the 44 (7%) members who were successfully contacted at 6 months were involved in educational pursuits, either at the St. Norbert Adult Education Centre, other centres, colleges, or universities. Some were pursuing their education in conjunction with full or part time jobs and/or while homemaking.



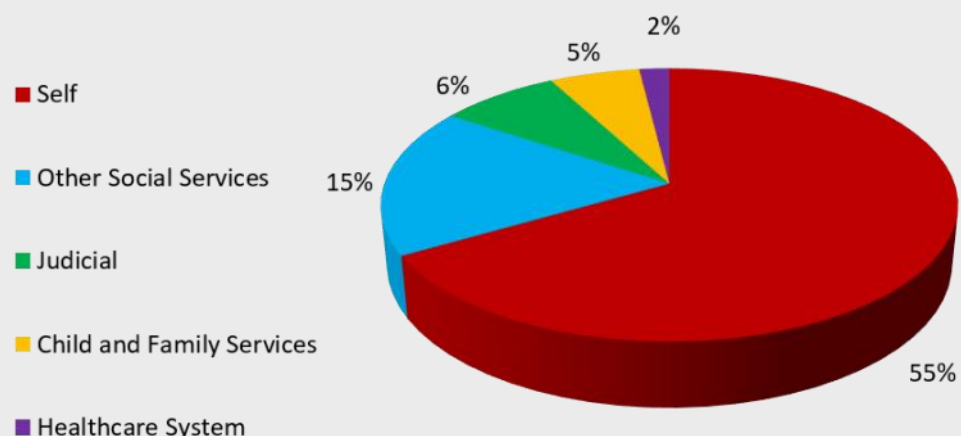
Breezy Point provides service for adults identifying as women. Members may have children up to the age of 4 living with them at Breezy Point. Members are accommodated in the environment of a female-identifying space while dealing with their substance use and lived experiences. The need for gender-specific spaces is an identified need in the sheltering and treatment community. BHF offers an important treatment environment by providing a program that is not time limited, where parents can feel safe and focus on treatment and past trauma as well as on their children, whether they enter as a family or reunify while in the program. Breezy Point is a 14-bed facility.

Total Intakes, Breezy Point	
Adult Females	62
Children of Members	10
Total Intakes	72

Average Age of Women	33
Age Range	19-57
Average Length of Stay in Treatment ⁴	68 days
Completed Primary Treatment	32 (52%)
Women who stayed over 90 days	19 (31%)

There were 62 intakes at Breezy Point during the 2025-2026 fiscal year. Referral sources included self, judicial, healthcare system/mental health services, other treatment programs including transfers from BHF's Addiction Treatment Services program, Child and Family Services and other social services. Forty-three (69%) of these women were from the City of Winnipeg, 18 (29%) were from elsewhere in Manitoba, and 1 (2%) was from out-of-province. Fifty-one women (82%) were Indigenous.

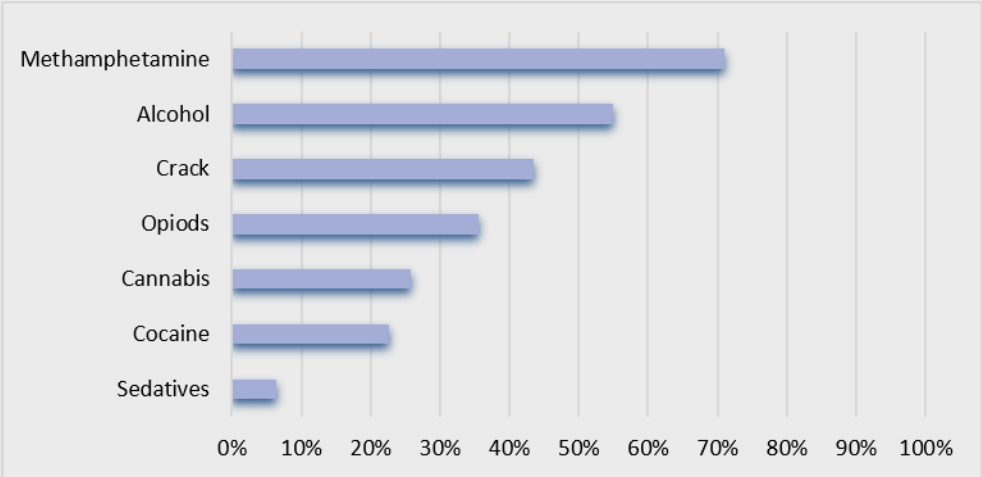
Referral Sources Of Breezy Point Intakes



⁴Ten members who entered in prior fiscal years remain in the program at the time of this report. This number will increase until they exit the program.

Forty-four (71%) of the 62 women were mothers whose children were either in CFS care or the care of extended family. The total number of children among this group was 127, an average of 2.9 children per mother. Five (8%) women entered Breezy Point with a child in their care at entry and 6 (10%) of women were pregnant. All of the women who entered Breezy Point were unemployed at entry. Ten children entered the program in the fiscal year to reside with their mothers.

**Most
Frequently
Used
Substances**



Breezy Point Follow-Up

The Behavioural Health Foundation conducts a continuous 6-month follow-up study of program participants. The information below is based on women who attended treatment at Breezy Point during the fiscal period April 1, 2024 to March 31, 2025. The fiscal 2025-2026 follow-up year (at the time of this report) is in progress, and the results will be available in the Systems Evaluation Report in early 2027.

Members are contacted 6 months after completion of primary treatment. They are asked a variety of questions such as whether or not they are using substances and to what extent, their employment status, educational pursuits, and if they have new criminal justice system involvement. Members who participated in BHF’s programs are also asked to participate in a Satisfaction Survey. The comprehensive results of the ongoing follow up study are available in the annual Systems Evaluation Report. The following is a brief summary of some results of the 2024-2025 study.

Substance Use Reduction

Of the 12 women located and interviewed 6 months after completion of primary treatment, 9 (75%) significantly reduced their use of substances. The average reduction of substance use was 12 points on the World Health Organization’s ASSIST Scale.

Criminal Justice System Involvement

Fifteen (42%) of all members who entered in the 2024-2025 fiscal year had involvement with the Criminal Justice System. They were on bail or probation. At the time of follow-up, 10 (83%) of located women had no new involvement with the law.

Employment & Education

Upon entry to the program, only 2 (6%) of the women had employment or were homemaking full time. Of the 12 women who were located 6 months after completion of primary treatment, 5 (42%) were involved in successful pursuits of working, homemaking, or attending education full time.



**Above: BHF Staff Development Day,
April 2025**

**Left: Peyton Swanson, Keyworker,
Leslie Nielsen, Director of Programs**

**Below: BHF Holiday Gathering,
December 2025**





**BEHAVIOURAL
HEALTH
FOUNDATION**

Traditional Grounds & Indigenous Services

Traditional Grounds and Indigenous Services remain an integral part of the Behavioural Health Foundation's approach to healing and recovery. Throughout the year, residents, alumni, children, families, and community members participated in a wide range of cultural ceremonies, teachings, and land-based activities that strengthened connections to culture, community, and wellness.

BHF serves individuals from diverse cultural and spiritual backgrounds. During this reporting period, 82% of adults entering BHF self-identified as Indigenous. Indigenous Services are available to all residents, providing opportunities to learn about and engage in traditional practices regardless of cultural background.

The program continued to offer regular sweat lodge ceremonies, full moon ceremonies, and cultural gatherings that provided meaningful opportunities for reflection, healing, spiritual growth, and cultural learning. In addition to participating in ceremonies, residents, children, and families attended seven sweat lodge teachings to deepen their understanding of the traditions, protocols, and significance of these sacred practices. The annual Northwinds Lodge Sundance once again brought residents and community members together in a shared celebration of culture, tradition, and community.

Residents from ATS, Breezy Point, and other BHF programs actively participated in a variety of traditional and land-based activities throughout the year, including drumming, smudging, beading, traditional skirt making, drum making workshops, harvesting and preparing sacred medicines, and making tobacco ties. Participants also took part in gathering, cleaning, and preparing sage, sweetgrass, and cedar while learning traditional teachings associated with these medicines. Residents, children, and families participated in drumming activities and attended community pow wows, providing opportunities to strengthen cultural identity, community connections, and a sense of belonging.

These activities continue to foster cultural identity, personal growth, community connection, and holistic healing, supporting BHF's commitment to culturally responsive care and Indigenous-led programming. In 2025-2026, Indigenous Services Facilitated:

- 30 sweat lodge ceremonies
- 10 Full Moon ceremonies
- 18 cultural teachings and workshops
- 7 sweat lodge teachings attended by residents, children, and families
- Traditional skirt making workshops
- Participation in drumming activities
- Attendance at community pow wows
- 929 participants in Indigenous programming
- 15 sacred medicine harvesting and preparation activities
- 8 community engagements, including the Soaring Eagle Drum Group



From left: Brian Chupalo, Board President, Kassia Woodhouse-Constant, Indigenous Services, Elder Mike Calder

The majority of adults entering BHF have been diagnosed or report mental health issues. In the 2025-2026 fiscal year, 243 of 301 (81%) of adult Intakes had indicated mental health concerns on their Applications for Admission to BHF. One hundred and ninety-four (64%) reported histories of trauma. Members are screened for past and present mental health concerns, including past diagnoses, mental-health-related hospitalization, and/or self-harm or self-harm ideation. This information helps to inform individual treatment plans as well as safety plans when needed.

Psychiatric Nurses

BHF nurses assist residents and treatment staff to build relationships with the broader health care system. They assist residents and staff in setting goals around presenting mental and physical health needs. Nurses also monitor medication and work closely with Public Health on communicable disease prevention and management, healthy parenting and early childhood development, healthy sexuality, tobacco use reduction, immunizations and other public health issues. Nurses work closely with ACCESS Fort Garry. In Manitoba, ACCESS Centres are “one-stop locations” for individuals and families living in the community area to help provide more coordinated, accessible health and social services especially for those with many needs. BHF’s relationship with ACCESS includes onsite weekly clinics and a referral system.

Counselling Supports

BHF Counsellors are members of the integrated Wraparound Supports Team and work alongside the program team to help residents successfully engage in their treatment and recovery journey. They provide brief individual counselling, crisis support, and referral support when specialized services are needed. Counsellors also facilitate psychoeducational and therapeutic groups, including grief and loss support and mindfulness, with family meetings available when appropriate. Counsellors collaborate with the interdisciplinary team to support treatment planning, provide consultation and co-occurring mental health and substance use concerns, and help staff respond to crises and complex presentations as they arise.



Kindness Rocks Group Therapy session

The Behavioural Health Foundation's Support Services are departments which support the daily functioning of the treatment program or enhance the experience and learning of program participants. Support Services include Education, Child Care, Employment Development, Maintenance, and Food Services.

St. Norbert Adult Education Centre

Just steps away from BHF's main buildings, the St. Norbert Adult Education Centre is BHF's on-site school for adult learners. In partnership with the Manitoba Institute of Trades and Technologies (MITT), SNAEC provides the opportunity for people 18 years of age and older to work toward a Mature Student High School Diploma or upgrade credits in preparation for post-secondary education. Students at SNAEC are not only members of BHF's programs, but adults from the greater community as well. Students come from diverse places and backgrounds, and benefit from a welcoming and supportive environment tailored for adult learners. Students may register full time or part time, and classes are scheduled mornings, afternoons and evenings to accommodate learners who are also working and/or parenting. In the 2025-2026 school year, 36 BHF members attended SNAEC.

BHF K—6 School

Manitoba Education and Early Learning funds BHF's Kindergarten to Grade 6 Independent School. A certified Teacher/Principal and two Education Assistants staff the school that is exclusively for students whose parents are in BHF's Addiction Treatment Services program. There is close collaboration with the treatment team, BHF's Indigenous Services, and Daycare programs. Parents and students benefit from the wholistic approach to addressing students' strengths and needs, as well as exit-planning to ensure the continued success of students. In 2025-2026, the school transitioned successfully to full-day Kindergarten.



BHF Staff Development Day, April 2025

BHF Daycare

Licensed for 4 infants, 8 preschoolers and 12 school-age children, BHF's daycare is staffed by Early Childhood Educators who work closely with parents, classroom, and adult treatment staff. Children and parents at BHF benefit from the developmentally appropriate spaces, structured routine and early childhood learning. The daycare, having access to BHF's Indigenous Services, collaborates to provide cultural and educational opportunities for kids and families. Healthy snacks and educational field trips are part of daycare programming. When the number of children at BHF exceeds the number of daycare spaces, space-sharing schedules are implemented. The daycare's individual funding is provided through Manitoba Education and Early living.



Daycare Play Yard Renovation, 2025

Maintenance

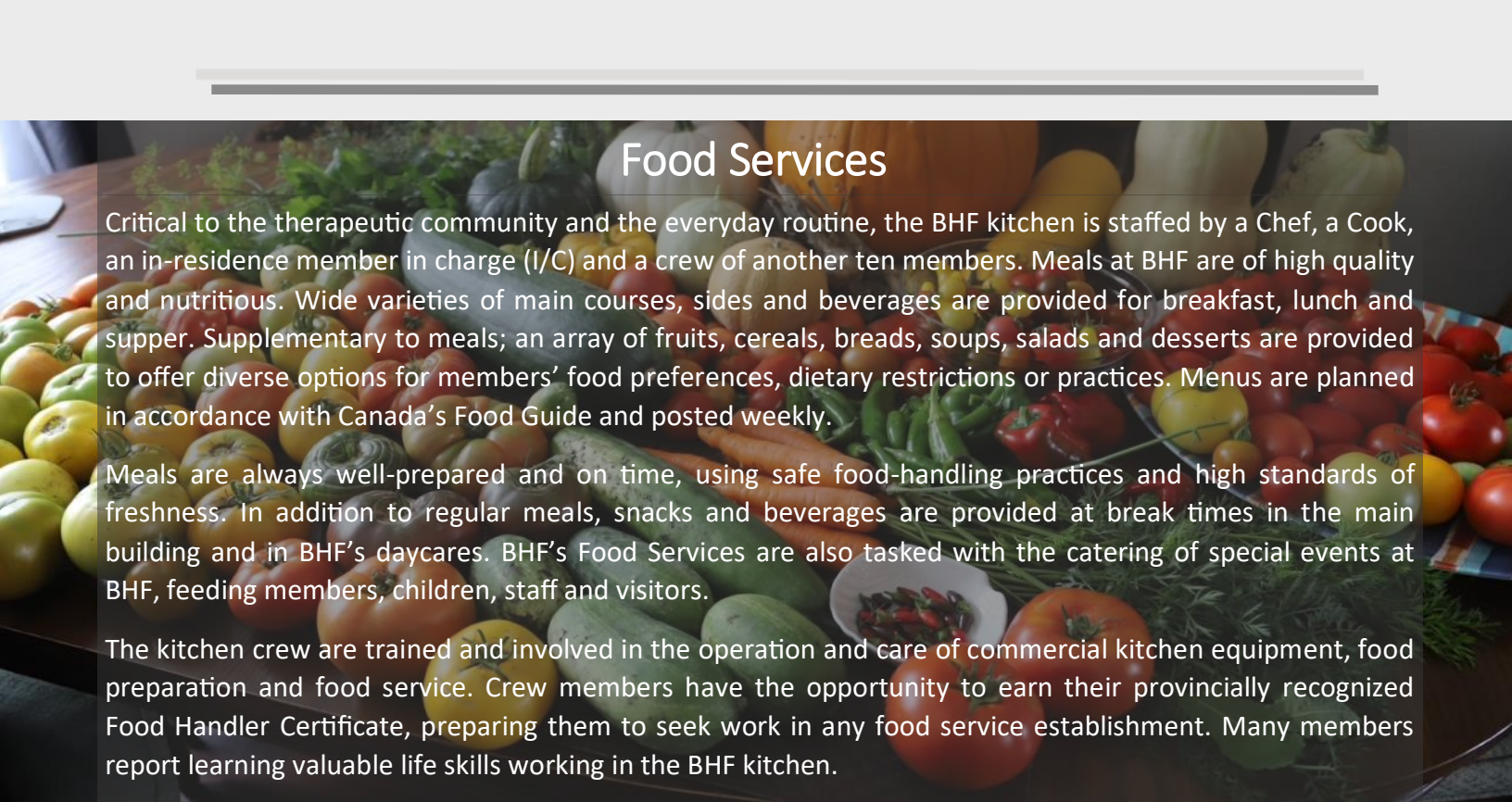
BHF's Maintenance Department, with the assistance of the member-led Service and Outdoor crews, ensures the numerous buildings, acres of grounds, machinery and vehicle fleet are kept safe, clean, attractive and in good repair. They collaborate with outside trade contractors when necessary. The Service Crew consists of approximately 25 rotating members who keep the buildings clean and take care of garbage and recycling. The Outdoor Crew, another 10 members, perform landscaping duties such as grass cutting and snow clearing. There were many notable projects in 2025-2026. Thanks to a grant from the Winnipeg Foundation, flooring was upgraded in the 3rd story resident rooms and the 2nd and 3rd stories of the Lemay wing. Carpet was removed and vinyl flooring installed. Roofing projects took place as well, with the Breezy Point building and one transition house receiving new roof shingles. In addition, the main basement washrooms were fully renovated with new toilets, vanities, and flooring.

"I've been sober for over a year and I'm working, my kids are with me."

"I'm living on my own with my two daughters. I'm sober and I got my kids back."

"I am able to cope with addictions and my trauma."

-Former residents, BHF Systems Evaluation Report



Food Services

Critical to the therapeutic community and the everyday routine, the BHF kitchen is staffed by a Chef, a Cook, an in-residence member in charge (I/C) and a crew of another ten members. Meals at BHF are of high quality and nutritious. Wide varieties of main courses, sides and beverages are provided for breakfast, lunch and supper. Supplementary to meals; an array of fruits, cereals, breads, soups, salads and desserts are provided to offer diverse options for members' food preferences, dietary restrictions or practices. Menus are planned in accordance with Canada's Food Guide and posted weekly.

Meals are always well-prepared and on time, using safe food-handling practices and high standards of freshness. In addition to regular meals, snacks and beverages are provided at break times in the main building and in BHF's daycares. BHF's Food Services are also tasked with the catering of special events at BHF, feeding members, children, staff and visitors.

The kitchen crew are trained and involved in the operation and care of commercial kitchen equipment, food preparation and food service. Crew members have the opportunity to earn their provincially recognized Food Handler Certificate, preparing them to seek work in any food service establishment. Many members report learning valuable life skills working in the BHF kitchen.

Employment Development

Obtaining employment is one of the most common goals established by adults in their Individual Treatment Plans (ITPs) at BHF. The journey to becoming employable can be harder for adults who do not have employment histories, who did not graduate High School, and/or do not possess trade skills. Persons experiencing homelessness, not having identification or a bank account, and access to transportation or computers often have to overcome those primary challenges before a job can even become possible. The majority of adults entering BHF's programs are unemployed at the time they chose to seek treatment.

BHF's Employment Development Program is designed to help members enter or re-enter the workforce if that goal is in that person's life-plan. While residing in the therapeutic community, participants are given the opportunity to enroll. Of the residents who exited BHF over the fiscal year 2025-2026, 76 attended the Employment Development program. Twenty-nine (38%) of residents who participated were employed at the time of their exit from BHF. Some of the areas of support and learning provided through Employment Services are:

- Identifying transferable skills
- Learning job search strategies
- Resume preparation
- Birth certification acquisition
- Income tax filing
- Opening bank accounts
- Learning workplace rights
- Access to the internet
- Learning transportation
- Obtaining federal benefits
- Learning employer responsibilities
- Employment counselling

BEHAVIOURAL HEALTH FOUNDATION INC.
SUMMARY STATEMENT OF FINANCIAL POSITION
MARCH 31, 2026

The following is a summary of the financial position of the Foundation as at March 31, 2026. Audited financial statements are available upon request.

	2026	2025
ASSETS		
Current assets:		
Cash	\$ 257,141	\$ -
Accounts receivable	434,564	1,403,377
Prepaid expenses	<u>160,567</u>	<u>121,728</u>
	852,272	1,525,105
Capital assets	1,071,744	1,125,792
Restricted cash – replacement reserve funds	-	47,847
Marketable securities – general operations	993,621	405,636
Marketable securities – stabilization reserve fund	<u>2,029,531</u>	<u>1,999,569</u>
	<u>\$ 4,947,168</u>	<u>\$ 5,103,949</u>
LIABILITIES		
Current liabilities:		
Bank indebtedness	\$ -	\$ 20,010
Accounts payable and accrued liabilities	304,953	481,925
Current portion of long-term debt	<u>-</u>	<u>1,191</u>
	304,953	503,126
Deferred contributions	10,000	10,000
Deferred capital contributions	<u>14,712</u>	<u>16,168</u>
	329,665	529,294
NET ASSETS		
Invested in capital assets	1,057,032	1,108,433
Internally restricted – stabilization reserve	2,029,531	1,999,569
Internally restricted – repairs and maintenance reserve	67,847	20,000
Externally restricted	-	47,847
Unrestricted	<u>1,463,093</u>	<u>1,398,806</u>
	<u>4,617,503</u>	<u>4,575,655</u>
	<u>\$ 4,947,168</u>	<u>\$ 5,103,949</u>

(unaudited summary statement – audited financial statements are available upon request)

BEHAVIOURAL HEALTH FOUNDATION INC.
SUMMARY STATEMENT OF OPERATIONS
FOR THE YEAR ENDED MARCH 31, 2026

The following is a summary of the Foundation's operations for the year ended March 31, 2026. Audited financial statements are available upon request.

	2026	2025
Revenue		
Continuing service fees	\$ 3,832,500	\$ 4,197,001
Fees for services	797,539	798,548
Net investment income	60,092	343,980
Other	572,257	481,537
Donations	4,505	14,902
Recognition of deferred capital contributions	1,456	1,980
Fire insurance proceeds	<u>-</u>	<u>29,962</u>
Total revenue	5,268,349	5,867,890
Expenses		
Salaries and benefits	2,647,715	2,933,933
Care	1,702,006	1,579,492
Shelter	655,974	614,539
Administration	<u>219,806</u>	<u>414,588</u>
Total expenses	5,225,501	5,542,562
Excess of revenue over expenses for the year	<u>\$ 42,848</u>	<u>\$ 325,328</u>

(unaudited summary statement – audited financial statements are available upon request)



**BEHAVIOURAL
HEALTH
FOUNDATION**

Operating Authorities & Accreditation

- The Behavioural Health Foundation Inc. (BHF) is located on Treaty One land and the homeland of the Métis Nation, at 35 avenue de la Digue in St. Norbert, Manitoba.
- BHF is a federally registered charitable organization (Revenue Canada Charitable Organization Registration Number 12933 3027 RR0001).
- BHF is registered provincially under Section X of the Companies Act of the Province of Manitoba.
- BHF Day Care is licensed by Manitoba Education and Early Learning under the Community Child Care Standards Act.
- BHF's Addiction Treatment Services and Breezy Point program are CARF accredited under the category of Behavioural Health, Integrated Alcohol and other Drugs/Mental Health. Included in this program accreditation are the following Core Program Designations: Community Housing, Residential Treatment, and Therapeutic Communities. BHF's programs have been accredited since 1993.
- In 2024 BHF was again awarded three-year CARF Accreditation, the highest achievable accreditation period.

What is CARF?



CARF is a private, not-for-profit organization that promotes quality rehabilitation services. It does this by establishing standards of quality for organizations to use as guidelines in developing and offering their programs or services to consumers. CARF uses the standards to determine how well an organization is serving its consumers and how it can improve. The CARF standards are developed with input from consumers, rehabilitation professionals, state and national

organizations, and funders. Every year the standards are reviewed and new ones are developed to keep pace with changing conditions and current consumer needs.

What Does It Mean to be Accredited?

After an organization applies for accreditation of its services or programs, CARF sends professionals in the field to conduct an on-site survey to determine the degree to which the organization meets the standards. CARF surveyors also consult with staff members and offer suggestions for improving the quality of services. CARF-accredited programs and services have demonstrated that they substantially meet internationally recognized standards. CARF accreditation means that you can be confident that an organization has made a commitment to continually enhance the quality of its services and programs, and its focus is on consumer satisfaction.

The Benefits of Accreditation to You, the Consumer of Services

Choosing CARF-accredited programs and services gives you the assurance that:

- The programs or services actively involve consumers in selecting, planning and using services.
- The organization's programs and services have met consumer-focused, state-of-the-art international standards of performance.
- These standards were developed with the involvement and input of consumers.
- The organization is focused on assisting each consumer in achieving his or her chosen goals and outcomes.



***BHF is an inclusive
and welcoming
environment for all.***

"It's a great program and I highly recommend it to people struggling with addictions and mental health problems. I've been sober since I entered, its still a daily struggle but you take it day by day."

"I'm sober and I have my daughter with me."

"My keyworker was amazing, and the other house staff were so supportive and really helped me. ."

"The Sundance was a really big help and I'm glad for all of the Traditional activities. I was able to get a regular routine and a job."

"Before BHF I was stuck I had just gotten my son back and his worker suggested BHF. I had no ID's, I was basically homeless. Living at BHF with my son, I got ready for the world. The house rules, schedules and routines worked perfectly for me. I soaked up everything BHF had to offer, therapy, work experience."

"The first time I entered BHF I wasn't ready. There was part of me that still wanted to use. The second time, I knew I was done."

"I'm so much healthier now."

"I have a good routine and schedule. It was good for me to be around healthy people. I got proper sleep and proper food. Now, I have all of my children back and they are in school and daycare. Without BHF I couldn't have gotten back on my feet. "

Behavioural Health Foundation Inc.
Addictions and Co-occurring Mental Health Treatment
www.bhf.ca