

FROM VISIONS TO ACTIONS :

THE SECOND FORUM ON SOCIAL DETERMINANTS
OF ABORIGINAL HEALTH



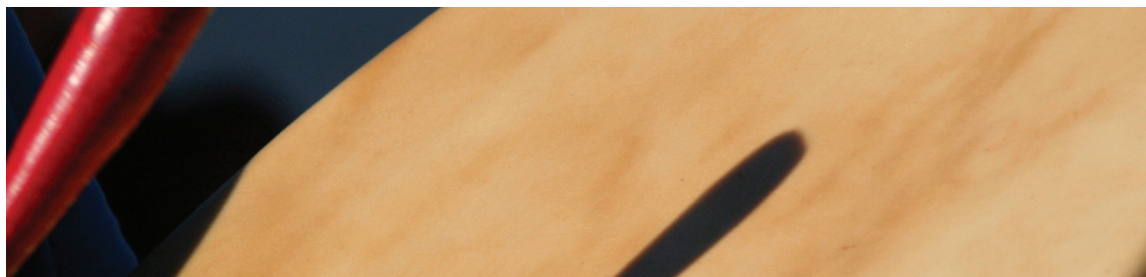
NATIONAL COLLABORATING CENTRE
FOR ABORIGINAL HEALTH



CENTRE DE COLLABORATION NATIONALE
DE LA SANTÉ AUTOCHTONE

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1.0 Gathering the Energies

In February 2009, more than 130 people assembled at the University of British Columbia's First Nations Longhouse in Vancouver. They were an impressive group – health practitioners, political leaders, educators, youth representatives, housing and community activists, researchers – meeting with a common purpose: to craft further ways to improve the health and well-being of First Nations, Inuit and Métis communities in Canada.

Many had been present in Ottawa the year before at the first forum on social determinants of Aboriginal health which had been hosted by the National Collaborating Centre for Aboriginal Health. There, under the reddish glow of a lunar eclipse, the seeds of a vision were planted as participants explored how their diverse goals in different fields could contribute to better health outcomes for their peoples. The second forum's objective was to highlight and support ways to move that agenda forward. Gathering energies together by finding common ground and discovering opportunities for collaboration was an integral step in the crucial process of

moving from visions to actions. The voices of participants in this national dialogue have been captured in two documentary films, available on the NCCAH website. This report complements the NCCAH documentary of the second event: 'Reclaiming Wholeness: Visions to Actions.'

The Vancouver forum had several other goals as well. First was to identify existing and potential connections between sectors. One striking example was the way in which escalating numbers of tuberculosis cases are clearly linked to inadequate housing, poverty, poor nutrition and unequal access to health services. A second objective was to provide concrete examples of cross-sectoral projects and programs aimed at improving the overall health of individuals and communities. Highlighting useful tools and mechanisms, such as health impact assessment models and appropriate indicators, was also important. The final aim was to articulate principles, processes and strategies to address health inequities.

The first forum took place under the light of a red moon that bathed a city clutched in winter's icy fist. By contrast, Vancouver's



mid-February hint of spring propelled the trees around the Longhouse to bravely unfold the year's first buds. It was tempting to see this early promise of future flowering as a hopeful sign for the outcome of this second gathering.

2.0 A Global Perspective: The International Context of Indigenous Health

Why would a forum focusing on First Nations, Inuit and Métis health and well-being in Canada begin with a look at Ecuador? In words and images, Dawn Walker of the First Nations and Inuit Health Branch of Health Canada sketched out the answer. Spearheaded by the World Health Organization's Commission on Social Determinants of Health, a global initiative is now underway to acknowledge and find solutions for health inequities. Within that undertaking, Canada has played a leadership role in supporting the inclusion of indigenous voices and perspectives in the WHO report, *Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health*. The report's overarching recommendations have identified the global need to improve daily living conditions and tackle the inequitable distribution of power, money and resources.

Together with colleagues gathered in Australia, England and Ecuador, members of the Canadian Reference Group hammered out the unique nature of indigenous social determinants of health.

These include self-determination, cultural continuity, a holistic worldview, land and the environment, language preservation and the implementation of traditional knowledge and practices.

Dawn Walker, as a member of the Canadian Reference Group, and youth ambassador Marisa Nahanee from the Squamish and Nisga'a Nations, shared the highlights of what they learned during their time in Ecuador. They were particularly impressed by ways in which traditional healing practices there were combined with more conventional Western medicine. One health centre had a shaman as well as a doctor, nutritionist, psychiatrist and naturopath on staff. A birthing centre encouraged traditional methods and birthing rituals with a consequent drop in mortality rates and domestic violence.

The impact of good governance was also evident as they met with a mayor who had brought 130 different regions together to develop efficient models to meet community needs. These efforts led

to more literacy programs, more midwives and more self-sustaining clinics.

The links between here and there became even more evident with the story of one Inuit youth who was also along on the trip. As she stood in the middle of the lush and steamy Ecuadorean rainforest, she took a deep breath and said “Now I feel at home.” She could point to

several reasons: the similarities between traditional shamanic ceremonies and Canadian Aboriginal practices, a holistic world view and above all, the anchoring and healing connection to the land. This theme of the inescapable importance of the land for the well-being of First Nations, Inuit and Métis peoples was to come up repeatedly during the Vancouver forum.

3.0 The Canadian Focus: Linking Actions



One of the most striking aspects of the second forum was that virtually all the people present were themselves embodiments of committed action. From the grassroots to public policy levels, they and their organizations were already involved in improving conditions for First Nations, Inuit and Métis peoples.

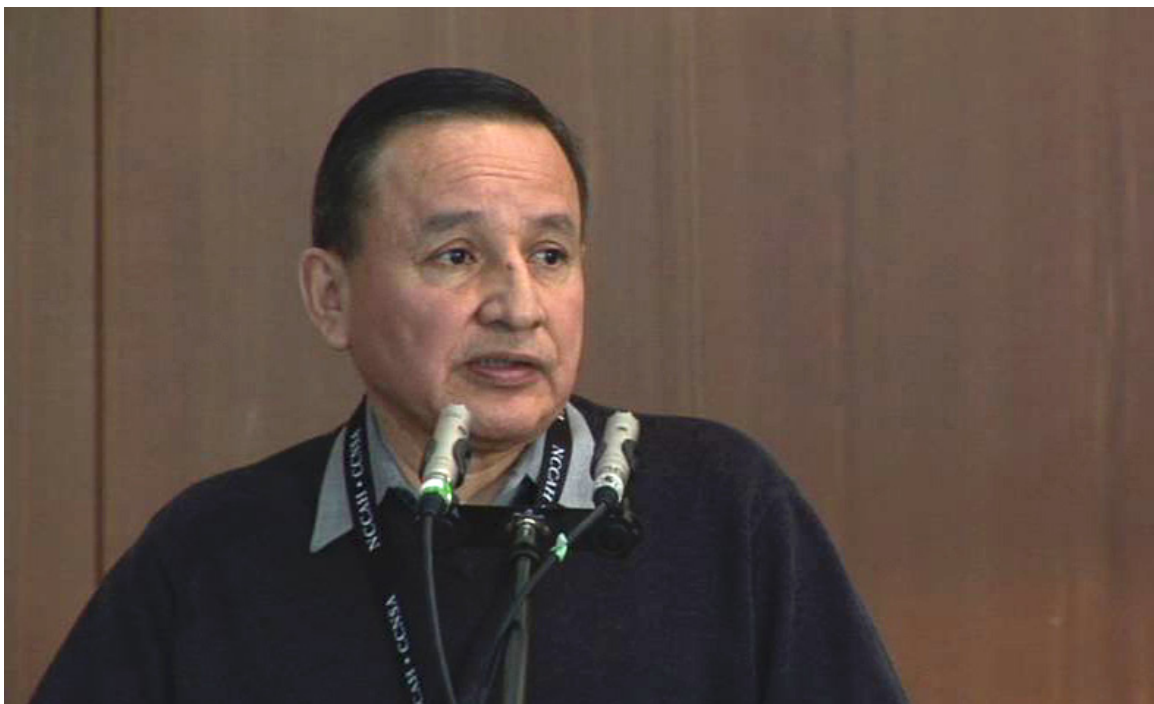
The Aboriginal Healing Foundation had funded 1500 projects for residential school survivors over the past ten years. Carrier Sekani Family Services, based in Prince George, B.C., began with three people. Now mandated to take over child welfare research and development for 12 nations and 14 villages, they currently employ

135 staff. Grassroots activists Carole LeClair of the Canadian Métis Council and her mother, elder Elize Hartley work with Aboriginal high school students in Hamilton, Ontario finding innovative ways to keep them from dropping out. And the First Nations Child and Family Caring Society has mounted international campaigns to ensure that First Nations children have equal access to needed health and education services.

However, like many other participants, Peter Dinsdale, Executive Director of the National Association of Friendship Centres, wanted to take things to another level. “What’s missing is national leadership on a broader policy collaboration and engaging in partnerships to make sure that we’re all paddling our canoes in the same direction so that, at the end of the day, [we] have better outcomes.”

The benefits arising from collaboration were underlined during the first morning’s session when participants heard from the Honourable Mary Polak, Minister for Healthy Living and Sport, Grand Chief Edward John from the First Nations Summit, Grand Chief Stewart Philip, President of the Union of B.C. Indian Chiefs, and B.C. Regional Chief Shawn Atleo from the Assembly of First Nations. The actions they outlined were B.C.-based but provided powerful examples for moving forward in a unified way.

Grand Chief Stewart Phillip described how the First Nations Leadership Council held a province-wide meeting on children and families in which the political leaders set aside their differences and agreed to pursue a formal relationship to work together for the benefit of their communities. They pledged their



commitment to find linkages across sectors to create improved health outcomes for all their peoples. The result of the groundbreaking collaboration between Federal, Provincial and First Nations leaders is the British Columbia Tripartite Agreement First Nations Health Plan. As part of the plan, “First Nations and regional health authorities will work collaboratively to develop and implement programs that will address adult mental health, substance abuse, youth suicide, maternal health and programs to help manage chronic health

conditions that First Nations face, such as diabetes and hepatitis.”

To further highlight the value gained from looking for interconnections, facilitator Dan George hosted a lively café-style dialogue between forum participants and representatives from various fields who were seated on stage together at tables representing researchers, health practitioners, sectors, community members and stakeholders.

4.0 Sharing Promising Health Initiatives

The forum also provided an opportunity to learn about some projects and tools already in existence that are designed to address the social determinants of health, with an emphasis on community and cross-sectoral involvement.

- » Because Aboriginal people rely on land for food and medicine, it is crucial to include health in impacts when assessing developments in mines, hydro-electricity and pipelines. Josie Auger, CEO of



Nechi Training, Research and Health Promotions Institute, presented their integrated Health Impact Assessment tool. The tool was developed to collect baseline environmental, social and health data to monitor any impacts arising from a heavy oil project on Bigstone Cree Nation's traditional territory in Alberta. Since Nechi was focusing on an indigenous model of health to provide programs and services that went beyond the biomedical model, they were also creating new health indicators. Community focus groups and a literature review, which included the medicine wheel approach, living the good life and land and language, were an essential part of the process.

- » Tara Marsden from the First Nations Environmental Innovation Network, which is hosted by the NCCAH, outlined a First Nations framework for a community environmental health impact assessment project designed for northern B.C. communities. Two community partnerships have been set up and the model will be constructed from lessons learned in interviews and workshops. Health indicators and determinants, currently being developed with First Nations involvement, will blend traditional knowledge and Western science. The resulting model will be validated with the communities involved and then shared with other communities in the province.

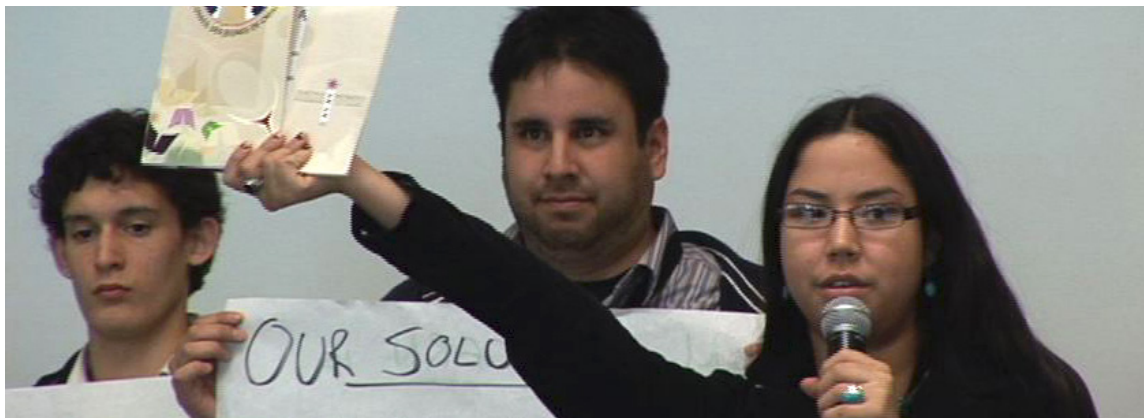
- » Patrick Stewart, President of the National Aboriginal Housing Association, emphasized housing as a key to health and well-being. He noted three urban Aboriginal housing providers in Vancouver have waitlists of 5,000 people, and that homelessness had greatly increased in the city in three years. Stewart said Aboriginal housing is currently a provincial matter, and urged support for national policy that links all levels of government and includes the private sector. He said projects like the Aboriginal Parents Lodge, the Aboriginal Children's Village, and the Sto:lo Nation's Elders Lodge are innovative models integrating culture and community needs, effectively linking housing to health and well-being. For instance, the Stó:lo Elders Lodge is a partnership between Stó:lo Nation, Fraser Health Authority, BC Housing and the federal government. It provides funded assisted living through the Independent Living BC program, was designed by Aboriginal Elders, and is operated within the traditions and philosophy of the Stó:lo Nation.

- » Deborah Schwartz, Executive Director of the Aboriginal Health Branch in the B.C. Ministry for Healthy Living and Sport, shared some background information on ActNow BC. This cross-government initiative of the Ministry of Health aims to reduce chronic disease and smoking, encourage more

physical activity and better nutrition, and support pregnant women. The corresponding Aboriginal ActNow BC strategy, hosted by the NCCAH, is based on a community development approach as well as several key elements considered essential for success. These include finding the right person within a community to do health promotion, making sure that person is properly trained and supported, providing clear goals and good funding, and taking the time to build strong relationships.

- » Several youth-led initiatives have been remarkably effective. The Youth Council of the Native Women's Association of Canada created a

tool kit on violence prevention for young women which not only provided examples of different kinds of violence but also offered strategies and solutions. As Kiera Kolson, one of the youth responsible for the resource, pointed out, they have also trained 300 young people to work with the kit and received a standing ovation in the House of Commons for their work. And in B.C., a youth-inspired and youth-driven initiative to increase access to sport and recreation brought together Métis urban and First Nations communities who set aside personal and political differences to collaborate on that common undertaking.



5.0 Guideposts on the Road to Change

The goal may be clear but what are the best ways to get there? As Margo Greenwood, Academic Leader for the NCCAH, stressed in her opening presentation, improving health and well-being in First Nations, Inuit and Métis communities is going to require

structural changes.

For Dr. Evan Adams, Aboriginal Health Physician Advisor in the BC Ministry of Health, taking a cultural, holistic approach to health is essential. He sketched in some of the historical factors which have profoundly affected the health

of First Nations, Inuit and Métis peoples, including the loss of traditional lands and food stocks, residential schools and the debilitating effects of ongoing racism. He then offered a host of solutions aimed at clinicians, cultural workers, community workers, researchers, academics, public health practitioners and Aboriginal leaders. These measures include opposing racism, creating culturally relevant education curricula, raising the minimum wage, supporting housing initiatives and investing in adult education, child care and affordable housing.

In the final keynote address, Professor Jeff Reading, co-Director of the Centre for Aboriginal Health Research at the University of Victoria, pointed out that the health risks faced by First Nations, Inuit and Métis peoples are a consequence of the social and economic exclusion which they have experienced from the time of contact. Eradicating poverty is a crucial first step in addressing current inequities

and gaps. “Social determinants require social remedies,” he insisted, “and those social remedies have to come in the form of policy.” He also challenged forum participants to move beyond existing divisions and create a strategic alliance so they can exert the kind of pressure needed to make long-overdue changes happen.





6.0 Joining Hands: Relationship, Connection and Inclusion

A series of clear messages emerged around relationship and inclusion. Unified action must begin from a place of common values and respect. There is a role for everyone, including youth, elders, urban Aboriginals, francophone Aboriginals, women, and non-Aboriginals, and inclusion is essential.

As funds become scarcer and the needs more pressing, it's even more

important to think strategically and search out both obvious and unexpected allies. For Métis scholar and educator Don Fiddler, health is everyone's business and so everyone has to become involved. "We need to go to the bankers, the union halls, to the schools and workplaces and talk about population health. When people start to understand that everyone is in the health profession, we will make progress."



7.0 Next Steps

In small group discussions, participants identified partnerships that crossed sectors and listed five bold steps for the coming year. Here are some of the nuggets that they shared with all of us.

EDUCATION: We need more parental and community support, more mentors and role models and more financial assistance. Establish partnerships with the community, high schools and post-secondary institutions. Create youth councils to tell us what barriers need to be overcome. Set up tutoring and academic advising programs. Encourage more youth to go into the trades.

EMPLOYMENT: Through a network or website, we need to share health

determinants information with employers who want to recruit a healthy work force. Research results need to be translated into business language.

POLICY: Commit stakeholders to implement a strategy that incorporates social determinants of Aboriginal health into policy. Identify the steps and key people. Support the United Nations Permanent Forum on Indigenous Issues.

TOOLS FOR ACTION: Develop health impact tools and integrate them into Treasury Board submissions to fund community-driven pilot projects to validate social determinants.

NETWORKING: To stimulate collaboration, create a networking site where different Aboriginal organizations can post their needs, their focus and their activities. This site can catalyze contacts and lead to letters of agreement between groups to undertake mutually beneficial projects. Those projects can then be evaluated and the results posted on the website.

LOOKING TO THE FUTURE:

To make these bold steps forward a reality will require the following actions:

- » Bringing together stakeholders to develop and implement a national social determinants of First Nations, Inuit and Métis health strategy
- » Implementing a whole-of-government approach to First Nations, Inuit and Métis health
- » Facilitating regional workshops to address key social determinants of health issues and
- » Hosting a third national forum to build on the momentum for a comprehensive, integrated and holistic approach to First Nations, Inuit and Métis health and well-being.



This year's forum is a result of the combined efforts of a number of co-hosts who gave generously of their time and talent.

They are Charlotte Loppie, Chair Aboriginal Health Research Networks; Marcia Anderson, President, Indigenous Physicians of Canada; Dawn Walker, Special Advisor, First Nations Inuit Health; Charlie Hill, Executive Director, National Aboriginal Housing Association; Ray Wanuch, Executive Director of the Council for the Advancement of Native Development Officers; and Margo Greenwood, Academic Leader, National Collaborating Centre for Aboriginal Health.

From Visions to Actions: The Second Forum on Aboriginal Health was co-hosted by the following organizations:

Aboriginal Health Research Networks Secretariat
Council for the Advancement of Native Development Officers
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National Aboriginal Housing Association

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