

Closing the Gaps in Indigenous Health

Since October 2014 Population and Public Health has been deliberately seeking greater focus on Indigenous Health. Currently there is a Medical Officer of Health and a Clinical Nurse Specialist who have some time dedicated to Indigenous Health. The MOH and CNS developed a committee including members from the PPH Team as well as Aboriginal Health Programs to support their work. The following describes highlights of activities to date.

Conceptual Framework Recommendations

The previous PPH Conceptual Framework didn't recognize Indigenous Health in any way. With support from the PPH leadership, the following changes were made to highlight the importance of a specific focus on Indigenous Health:

1. Closing the Gaps in Indigenous Health was added as a Strategic Priority.
2. Reconciliation was added as a strategic approach as a cross-cutting responsibility everyone in PPH shares. Reconciliation is defined as establishing and maintaining a mutually respectful relationship between Indigenous and non-Indigenous peoples in this country; involves awareness of the past, acknowledgement of the harm that has been inflicted, atonement for the causes, and action to change behaviour.
3. The United Nations Declaration on the Rights of Indigenous Peoples was added as a Guiding Principle. The Truth and Reconciliation Commission said that the UNDRIP is the framework for reconciliation at all levels and across all sectors of Canadian society. UNDRIP includes the right of Indigenous peoples to be self-determining, be involved in health program planning and development, be involved in decision-making in matters that affect them, access western and traditional health practices, and to administer health programs through Indigenous institutions as much as possible.
4. Indigenous Health Promotion was added as a Service Area to highlight that it is an area with specific expertise and distinct roles in addition to the cross-cutting work in Indigenous health that all PPH staff contribute to.

Staff Development

In the Spring of 2015 a survey was circulated to PPH Staff to assess the professional development needs of the workforce in Indigenous Health. Based on the results two learning activities have been developed. The first took place in December 2015 and was a "webinar" that included Dakota, Anishinaabe, and Cree language speakers teaching about Indigenous concepts of health in their languages. The goal of this was to begin to develop the capacity of PPH staff to use what has been referred to as "Two-eyed Seeing." This is being able to understand health through both western and Indigenous worldviews, being able to critically reflect on the impacts of colonization and racism and how that affects not just Indigenous health but also the health services we provide to Indigenous peoples.

The second learning event is a half-day Staff Development session in June. This workshop will be more interactive and build on the first with a focus on anti-racism in health care. This is guided both by the survey results and the Calls to Action of the Truth and Reconciliation Commission of Canada.

Community Outreach and Partnership Building

Indigenous health is centered in communities and relationships, so being out in the communities is really important to inform public health work. Both the MOH and CNS have relationships with some of the Community Areas where there is a high proportion of Indigenous people, and help to support the frontline public health staff upon request.

One area of interest is supporting Indigenous women who are pregnant or mothering in culture-based ways. Both the MOH and CNS participate on a North End Breastfeeding Advisory Group. We attended the North End Pregnancy and Baby Fair in 2015, and will do so again in 2016. In 2015 we had a breastfeeding area at Manitoahbee, the largest pow wow in Manitoba. There was Indigenous-specific breastfeeding resources available, both private and open areas for moms to breastfeed comfortable, some toys for older children to play with while moms were busy with babies, and some light snacks and waters for moms. There was significant positive response from women there, not only the ones who used the space for breastfeeding, but also from aunties, mothers, and grandmas who were happy to see breastfeeding support offered openly and warmly for their younger relatives.

Aboriginal Youth Opportunities is a North End youth led group that is showing significant leadership in making the community a safer, healthier place through activities like Meet Me at the Bell Tower and Politix Brainstorming Sessions. PPH Staff have attended two Bell Towers, including one where we participated in a community led event discussing Indigenous health gaps. This is part of a formal partnership with AYO to do some youth-led, community exploration and reporting on understanding and closing Indigenous Health Gaps.

Truth and Reconciliation Response Planning

Initial considerations of ways that PPH could respond to the Calls to Action of the Truth and Reconciliation Commission of Canada were developed, circulated and discussed with the PPH Team. There was really good discussions that followed. This has led to our team working with Kandice Leonard, Regional Director of Aboriginal Health Programs, to develop a workshop to kick off the region-wide Reconciliation Response Action Plan. This workshop will take place on April 12 and will include many of the executive, program managers, and senior leaders of the WRHA. Members of the Indigenous Health Committee will help facilitate the day.