Partnering with Aboriginal Communities

Indigenous Health is not a Separate Road



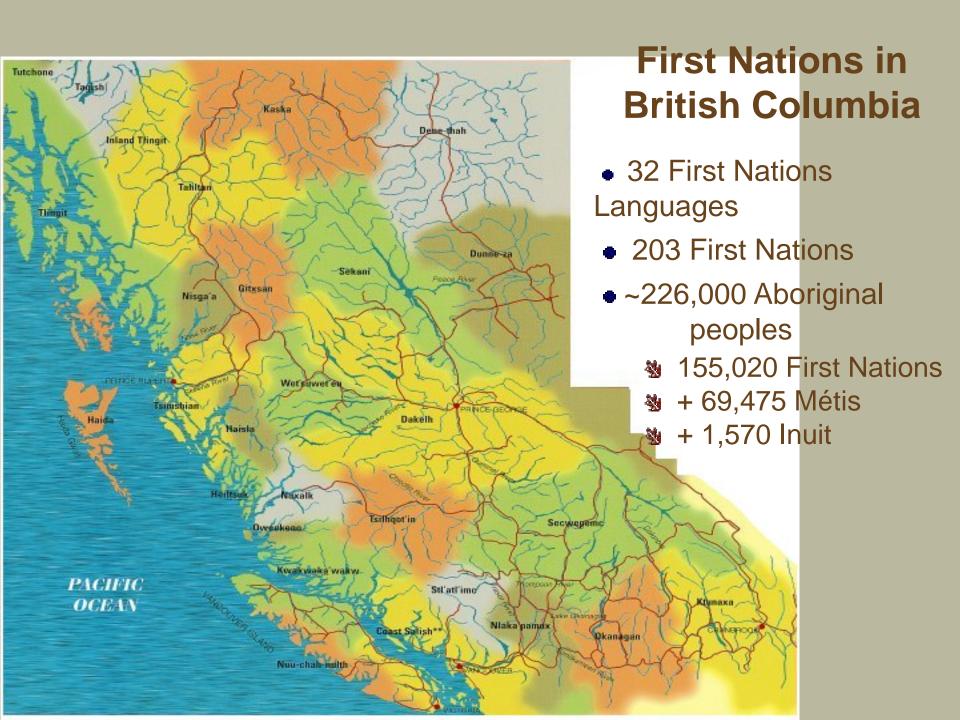
BC Kidney Days
October 16th, 2014

Evan Adams, MD, MPH
Deputy Provincial Health Officer
for Aboriginal health
BC Ministry of Health
Office of the Provincial Health Officer









An Historical Look at Aboriginal Health in British Columbia



First Contact – then sustained contact – with Europeans fundamentally altered Aboriginal people's health in Canada



Historical factors profoundly affecting health

- The Reservation system
- Lost traditional territory
- Lost fishing and hunting sites
- Loss of fishing and hunting stocks
- Lost water rights
- Dominance of Canadian foods
- Alcohol, cigarettes, drugs



Historical factors profoundly affecting health 2

- Overcrowding
- Poverty/decreased wealth
- Stress
- Decreased social & family structure
- Increased Church control
- Decreased economic power
- Decreased political power



A Shared Commitment

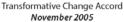
Health & wellness for First Nations encompasses the physical, spiritual, mental, economic, emotional, environmental, social & cultural wellness of the individual, family & community. Although the present Plan focuses on health programs & services, it is recognized that the way forward will require a joint commitment to deal with the root causes & structural issues causing socio-economic gaps.

- Tripartite First Nations Health Plan

















February 2007

First Nations

Health Council

Tripartite First Nations Health Plan June 2007

April 2009 First Nations Health Society



April 2010 First Nations Health Directors Association



Regionally

appointed

First Nations

Health Council 2010-2012



January 2012 First Nations Health Society becomes Interim First Nations Health Authority



December 2012 Health Partnership Accord







2005 2008 2010 2011 2012 2013 2006 2007 2009

TRIPARTITE FIRST NATIONS HEALTH PLAN

Health Governance







First Nations Leadership Accord March 2005



MOU on First Nations Health November 2006



February 2008 First Nations Interim Health Governance Committee

Develop New Administrative Arrangement





Basis for a Framework Agreement on First Nations Health Governance July 2010



Innovation and Change Agenda



Tripartite Framework Agreement on First Nation Health Governance October 2011







First Nations Health Authority Health through wellness





The Bilateral Plan

The four key areas in the Bilateral Plan frame the discussion of the Trilateral document:

- GOVERNANCE, RELATIONSHIPS & ACCOUNTABILITY
- HEALTH PROMOTION and DISEASE
 & INJURY PREVENTION
- HEALTH SERVICES; and
- PERFORMANCE TRACKING



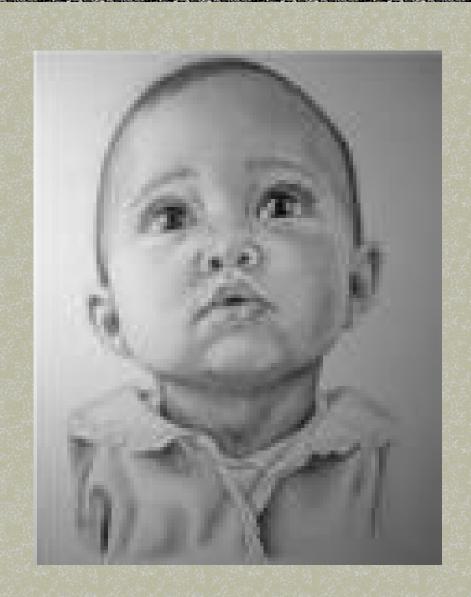
Governance is a Key Element

Outcomes of Governance Work:

- Effective & accountable
 First Nations, in full partnership
 with BC & Canada
- Culturally-responsive system
- Efficient & sustained delivery structure (no duplication)
- First Nations health care needs & priorities met
- Better First Nations health outcomes







25 4 1



CHALLENGES

- Data improvement and data sharing
- Partnerships
- Mental Health and Addictions plans
- Chronic disease management and self-care
- Metis and off-reserve involvement
- Cultural contexts (and cultural competency)
- HIV
- Children in care
- Environmental health
- Federal efforts at a band level and Provincial efforts at a health authority level are asynchronous

Whole government approach



Q&A

Contact info:

Evan Adams, MD, MPH
Deputy Provincial Health Officer for Aboriginal health
Office of the Provincial Health Officer
1515 Blanshard St., 4th Floor
Victoria, BC V8W-3C8
Ph: 250-952-1349
evan.adams@gov.bc.ca