

# GW XII – DRAFT RESOLUTION

## Resolution #2023-01

First Nations Health Council Chiefs in Assembly

Gathering Wisdom for a Shared Journey XII

March 2, 2023

Vancouver, BC

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### SUBJECT: APPROVAL OF A TEN-YEAR STRATEGY ON THE SOCIAL DETERMINANTS OF HEALTH

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#### WHEREAS:

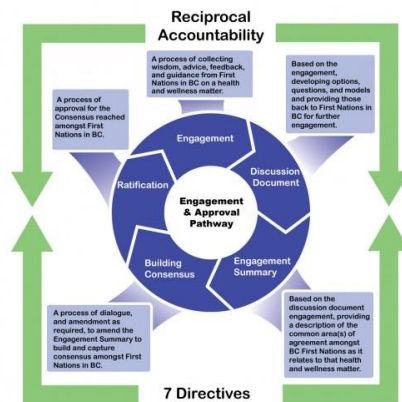
- A. In 2005, the First Nations Leadership Council (FNLC), Government of Canada, and Province of British Columbia (BC) signed the *Transformative Change Accord*, committing to establishing: a new relationship based on mutual respect and recognition; and, 10-year plans to bridge the differences in socio-economic outcomes between First Nations and other residents of BC, particularly in the areas of education, housing, economic opportunities, and health.
- B. In the area of health, further progress was realized through a series of political agreements between First Nations and federal and provincial governments including the *Transformative Change Accord: First Nations Health Plan* (2006), *First Nations Health Plan Memorandum of Understanding* (2006), the *Tripartite First Nations Health Plan* (2007), and the *British Columbia Tripartite First Nations Health Basis for a Framework Agreement on First Nation Health Governance* (2010).
- C. In 2010, by way of resolutions from their respective assemblies, the First Nations Summit, the Union of BC Indian Chiefs and the BC Assembly of First Nations agreed to change the membership of the FNHC to fifteen members – three each appointed by the five regional caucuses (Fraser Salish, Interior, Vancouver Coastal, North and Vancouver Island). The resolutions that set out this revised structure stated, "[The FNHC] will be responsible for reporting to Nations within their regions."
- D. On May 26, 2011, through a historic level of consensus, 72% of First Nations in BC cast a vote in support of Resolution 2011-01 approving the *British Columbia First Nations Perspectives on a New Health Governance Arrangement: Consensus Paper, 2011* at Gathering Wisdom for a Shared Journey IV. Through Resolution 2011-01, First Nations set out that the First Nations Health Council (FNHC)'s mandate included a provision to:

*"Develop relationships and alliances with other First Nations organizations, government Ministries and Departments, and others, to achieve progress in the Social Determinants of Health."*
- E. On October 13, 2011, the signing of the legal *British Columbia Tripartite Framework Agreement on First Nation Health Governance* with the Government of Canada and the Province of BC changed the course of First Nations health in BC. It created a new First Nations Health Governance Structure that enabled First Nations in BC to participate fully in the design and delivery of health services. Decision-making was brought closer to home through the

## GW XII – DRAFT RESOLUTION

recognition and involvement of First Nations decision-making and service delivery processes, structures and institutions at federal, provincial, regional and local levels.

- F. As per the direction of First Nations in Resolution 2011-01, the FNHC released a *Resolution 2011-01 Workplan* in the fall of 2011. This Workplan set out milestones, timeframes, key decision points and indicators for achieving the direction established by First Nations. This Workplan also established an Engagement & Approval Pathway, as illustrated below, a consistent process by which the FNHC gathers input, guide and build consensus on key decisions that concern governance, general direction, long-term goals, philosophies, and values.



- G. On May 16, 2012, First Nations in BC passed Resolution 2012-01 at Gathering Wisdom for a Shared Journey V. Through Resolution 2012-01, BC First Nations approved the *Consensus Paper 2012: Navigating the Currents of Change – Transitioning to a New First Nations Health Governance Structure*, including the following key elements:
- Setting the Standards: Affirming and implementing the 7 Directives, Corporate Governance Requirements, and Competencies for the Board of Directors of the interim and permanent First Nations Health Authority (FNHA);
  - Setting the Stages: Ensuring a deliberate and planned approach to the work, in accordance with the key stages of Transition and Transformation;
  - Setting the Structure: Confirming the establishment of a regionally-representative Board of Directors, a holistic First Nations health governance model, and Regional Offices; and,
  - Upholding our Commitments: Affirming that high standards of Reciprocal Accountability and Engagement are the foundation for our ongoing success.
- H. With the passage of the Consensus Papers, the BC First Nations Health Governance Structure reinforced its direct accountability to BC Chiefs through Regional Caucuses and provincial Gathering Wisdom forums.
- I. On December 17, 2012, the Government of Canada, the Province of BC and the FNHC – supported by the FNHA – signed a *Health Partnership Accord* as a statement of their shared vision of healthy and vibrant First Nations children, families, and communities in BC playing an active role in decision-making (i.e. self-determination) regarding their personal and collective wellness. Taking a Social Determinants of Health approach, the Parties committed to work

## GW XII – DRAFT RESOLUTION

together to eliminate disparities and inequalities in the health status between First Nations in BC and other residents of BC by creating a better, more responsive and integrated health system for First Nation in BC. Actions toward that vision included creating and supporting a new First Nations health governance structure, better coordination in service planning, design, management and delivery of health services for First Nations in BC, removing jurisdictional impediments and supporting collaboration, common sense approaches, and shared services.

- J. On October 1, 2015, the FNHC and the FNLC signed a *Protocol on the Social Determinants of Health Between the First Nations Leadership Council and First Nations Health Council* to confirm their shared commitment, within the scope of their respective mandates, to ongoing collaboration, information sharing and coordinated action in addressing the Social Determinants of Health.
- K. Between 2016 and 2018, the FNHC worked with federal and provincial partners to engage with First Nations leaders on the Social Determinants of Health to address priorities through a series of Memoranda of Understanding (MOUs):
- a. *MOU Between British Columbia and First Nations Health Council: A Regional Engagement Process and Partnership to Develop a Shared 10-Year Social Determinants Strategy for First Nations Peoples in BC* (FNHC-BC MOU 2016)
  - b. *Agreement Between Indigenous and Northern Affairs Canada and the First Nations Health Council in Relation to services for First Nations Children and Families in British Columbia* (FNHC-Canada MOU 2017)
  - c. *MOU: Tripartite Partnership to Improve Mental Health and Wellness Services and Achieve Progress on the Determinants of Health and Wellness* (Tripartite MOU 2018)
  - d. Collectively, the engagement done in relation to these MOUs shaped the FNHC's work towards a 10-Year Strategy on the Social Determinants of Health. These MOUs brought the federal and provincial governments into dialogue with First Nations about their priorities related to child and family wellbeing (including services to these populations), reducing poverty, and mental health and wellness, which was the number one health priority across all five regions in BC.
- L. The implementation of the Tripartite MOU 2018 resulted in the allocation of a flexible pooled \$30 million investment for BC First Nations to support mental health and wellness planning accessible to BC First Nations, as well as Community-Driven, Nation-Based models of service delivery that incorporate traditional values and a wholistic approach.
- M. The Tripartite MOU 2018 also provided the partners with an opportunity to commit an additional \$60 million joint investment to renovate and build First Nations treatment centres in BC.
- N. Since Gathering Wisdom X in 2020, four rounds of regional and sub-regional caucus meetings have taken place to inform the discussions and deliberations that BC First Nations have directed the FNHC to undertake on health care policy, governance, and social determinants of health priorities.

## GW XII – DRAFT RESOLUTION

- O. Consistent with the Engagement & Approvals Pathway endorsed by First Nations in BC in 2011, in response to the interest shown by First Nations Chiefs and leaders through ongoing engagement on the Social Determinants of Health, the FNHC prepared workbooks and facilitated discussions during a series of First Nations regional caucus sessions across the province. First Nations Chiefs, leaders and senior health professionals were asked to confirm the summary of feedback set out in the workbooks and share new thoughts and perspectives as the **discussion document stage** of the Engagement & Approval Pathway. Each region's specific feedback into the workbook, along with their regional caucus discussions with respect to the topics addressed, was captured in a regional summary document, signifying the **engagement summary** step of the Pathway. Each region held further meetings to review and confirm its summary document, then merged into a province-wide *Consensus Paper 2022 and Ten-Year Strategy on the Social Determinants of Health*. This Consensus Paper represents the **building consensus step** of the Pathway.
- P. The *Consensus Paper 2022 and Ten-Year Strategy on the Social Determinants of Health* is being put forward for review and consideration in accordance with the **ratification** step of the Pathway at the 12<sup>th</sup> Annual Gathering Wisdom for a Shared Journey Forum to be held from February 28 – March 2, 2023. Its purpose is to establish the First Nations Health Council's Ten Year Strategy on the Social Determinants of Health.

### THEREFORE BE IT RESOLVED:

1. That the Chiefs in Assembly at Gathering Wisdom for a Shared Journey XII approve the enclosed *Consensus Paper 2022 and Ten-Year Strategy on the Social Determinants of Health*, including its following key elements:
  - a. Upholding the BC First Nations Health Governance Structure's shared vision, 7 Directives and the principle of Reciprocal Accountability;
  - b. Alignment with the principles of the *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP) and the implementation of the *Declaration on the Rights of Indigenous Peoples* (DRIPA);
  - c. Recognition of the need for Community-Driven, Nation-Based approaches and responses to the health related impacts of climate change on BC First Nations.
  - d. Alignment with the Calls for Justice arising from the Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls; in particular to improve both the quality of the health and wellness system and the health and wellness outcomes for Indigenous Woman and Girls, which overall will reduce the chances of going missing or being murdered.
  - e. Consistency with the review recommendations from *In Plain Sight* (2020) and the strategic objectives and priorities from the FNHC, FNHA, FNHDA's *Anti-Racism, Cultural Safety & Humility Framework* (2021); and,
  - f. Alignment with the health related calls to action made by the Truth and Reconciliation Commission of Canada.

## GW XII – DRAFT RESOLUTION

2. That the Chiefs in Assembly at Gathering Wisdom for a Shared Journey XII endorse the following four strategy areas from the *Consensus Paper 2022 and Ten-Year Strategy on the Social Determinants of Health* that describe a collective approach for the social determinants of health and set the foundation for future agreements that advance specific Community-Driven and Nation-Based priorities:
  - I. Healing Approaches:
    - a. By 2033, First Nations communities in B.C. will have access to improved trauma-informed care at all levels, including best-in-class clinic equipment and emergency transportation. This will include Indigenous knowledge and healing practices standing equally as legitimate and vital elements of First Nations Health in full partnership with culturally safe provision of Western medicine.
  - II. Cultural Infrastructure:
    - a. By 2033, First Nations communities will have the capacity and autonomy to rebuild the cultural infrastructure damaged through colonialism to reclaim and hold up healing practices and traditions. This includes designing their own health and wellness systems that protect their people using the vision, values and teaching of their Nation.
  - III. Nation-Based Governance:
    - a. By 2033, First Nations will deliver health and wellness services through self-defined structures and partnerships that make sense culturally, linguistically, and politically. These services will support systems-level changes to better respond to approaches and solutions that meet Nations’ needs and priorities.
  - IV. Sustainable Funding:
    - a. By 2033, there will be flexible and sustainable approaches for federal and provincial investment mental health and wellness planning and service delivery. This includes funding that is sufficient, sustainable and aligned with First Nation’s governance structures, cultural infrastructure, and healing approaches.
3. That the Chiefs in Assembly at Gathering Wisdom for a Shared Journey XII direct the FNHC to advocate and work with the Province of BC and the Government of Canada, to:
  - a. Fulfill the commitments in the Tripartite MOU and confirm the needed sufficient, flexible, predictable and sustainable funding required for BC First Nations to plan, design and deliver a full continuum of mental health and wellness services, in a manner consistent with the *Consensus Paper 2022 and Ten-Year Strategy on the Social Determinants of Health Consensus Paper 2023*.
4. That the Chiefs in Assembly at Gathering Wisdom for a Shared Journey XII direct the FNHC to support the implementation of the Ten-Year Strategy on the Social Determinants of Health, by fostering partnerships with First Nations and Indigenous organizations, the Province of BC, and the Government of Canada, and other regional, local, non-profit and international organizations on the social determinants of health. This work includes but is not limited to:
  - a. The FNHA’s operational development of a Workplan for the implementation of Resolution 2023-01, that sets out milestones, timeframes and key decision points.

## GW XII – DRAFT RESOLUTION

- b. The implementation of a mental health and wellness reporting framework and indicators that support Nations' use of strength-based indicators that have been identified to align with agreed upon population-level outcomes and that reflect the unique cultures, languages and capacities of their communities.
5. That the Chiefs in Assembly at Gathering Wisdom for a Shared Journey direct the FNHC to support the empowerment of First Nations data governance as well as advocating for supporting resources. The FNHC is committed to working in collaboration with First Nations Organizations leading this work by engaging First Nations Chiefs, leaders, providers and communities as needed along with government partners to mobilize their respective contributions, authorities, assets and innovations.
6. That the Chiefs in Assembly at Gathering Wisdom for a Shared Journey XII direct the FNHC to, consistent with the Consensus Paper 2011 and the Consensus Paper 2012, continue to engage and share information with, and be directly accountable to, First Nations through a variety of mechanisms, including but not limited to: Subregions, Regional Caucuses; Gathering Wisdom for a Shared Journey forums, reports; and, online and digital media.

Moved: Chief \_\_\_\_\_ First Nation

Seconded: Chief \_\_\_\_\_ First Nation

Abstentions:

Disposition:

Date: March 2, 2023

Endorsed:

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Wade Grant, First Nations Health Council Chair

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Wayne Christian (Wenecwtsin), First Nations Health Council Deputy Chair