

# **Developing a Strategy to Re-Open during Wave 2 of COVID-19**

July 14, 2020



Indigenous Services  
Canada

Services aux  
Autochtones Canada

Canada

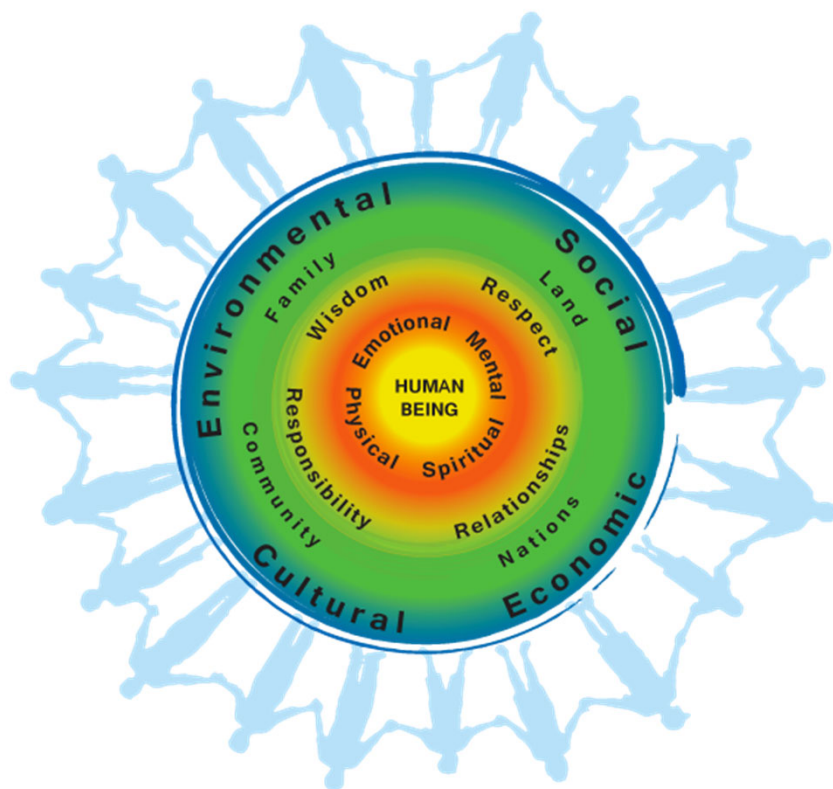
## Health & Wellness Interrupted

- Our vision of health & wellness comes from the ancestors & is relational.
- Colonization is “health interrupted”.
- We have arrived here due to systemic & historical forces, not just due to personal, proximal social determinants.



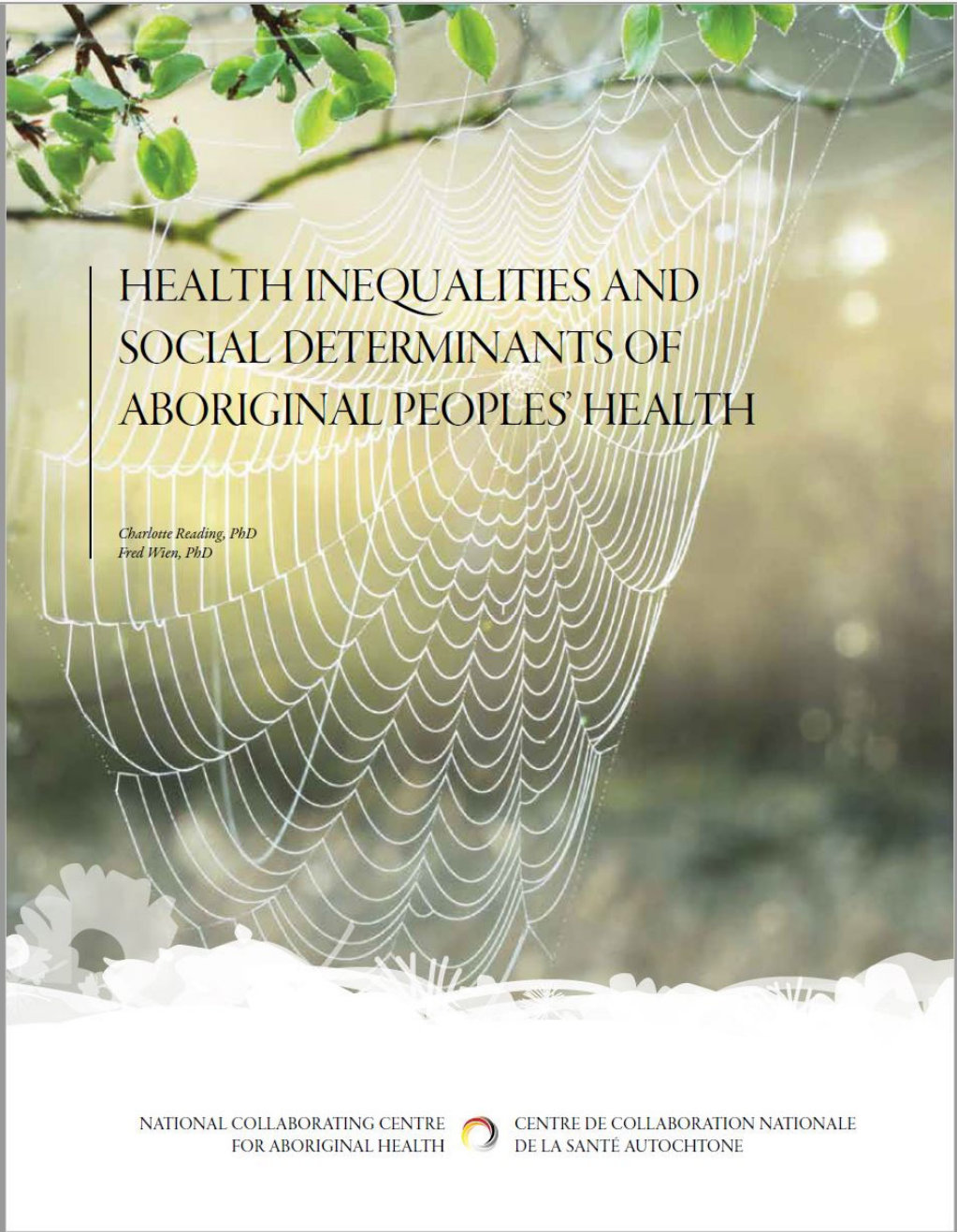


# FNHA – First Nations Perspective on Health & Wellness



**Health & wellness belongs to human beings & is an outcome of many interrelated factors**

**Our vision of health & wellness comes from the ancestors & is relational & interconnected**



# HEALTH INEQUALITIES AND SOCIAL DETERMINANTS OF ABORIGINAL PEOPLES' HEALTH

*Charlotte Reading, PhD  
Fred Wien, PhD*

NATIONAL COLLABORATING CENTRE  
FOR ABORIGINAL HEALTH



CENTRE DE COLLABORATION NATIONALE  
DE LA SANTÉ AUTOCHTONE

# First Nations Virtual Doctor of the Day

**WATCH: Dr. Kelsey Louie Explains How to Use Virtual Doctor of the Day**



Do you need to see a doctor and don't have one of your own? Join the growing number of First Nations people in BC who are using the First Nations Virtual Doctor of the Day service. Watch the video narrated by Dr. Kelsey Louie to learn how to connect with the service by phone, computer or tablet. Dr. Louie is a member of the Tla'amin Nation and is one of the Indigenous doctors serving in the program. He is also a Medical Officer with the FNHA.



# Navajo Times

DINE BI NAALTSOOS

Tuesday, July 14, 2020 ☀️ 89° Clear

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## COVID-19 Across the Navajo Nation

BY NAVAJO TIMES | MAR 22, 2020 | CORONAVIRUS UPDATES | ★★★★★

As of Monday night, 56 new coronavirus cases were added to the Navajo Nation in the last 24 hours. The total is now 8,243 cases. No new deaths were reported overnight. Total deaths remain at 401.

# Confirmed cases of COVID-19

**On First Nations reserves in provinces,  
as of July 13, ISC is aware of:**

- 348 confirmed positive COVID-19
- 30 hospitalizations
- 299 recovered cases
- 6 deaths

# Confirmed cases of COVID-19

## Cases per region:

- British Columbia: 42
- Alberta: 126
- Saskatchewan: 85
- Ontario: 60
- Quebec: 35



# Outcomes

- For First Nations living on reserve in Canada, thus far there have been less than 350 cases and 6 deaths.
- The reported incidence and case fatality rates in First Nations on reserve are one quarter that of the national Canadian rates.
- There are remarkably low reported COVID incidence and complications thus far in Indigenous communities in Canada (and in Australia) despite the social determinants of health challenges and high burden of underlying medical conditions.

# Outcomes

- Comparing to the general Canadian population, thus far nationally, First Nations living on reserve have a lower incidence rate, hospitalization rate and mortality rate.
- While over 80% of COVID deaths in the general Canadian population have been associated with long term care facilities (LTC), there has been no COVID cases in LTC on reserve except for a single positive test result in a First Nation nursing home after testing the entire nursing home and repeat negative tests.

# Gradual Adjustment of Measures: Overarching principles for planning & engagement

## *Principles* for Reopening

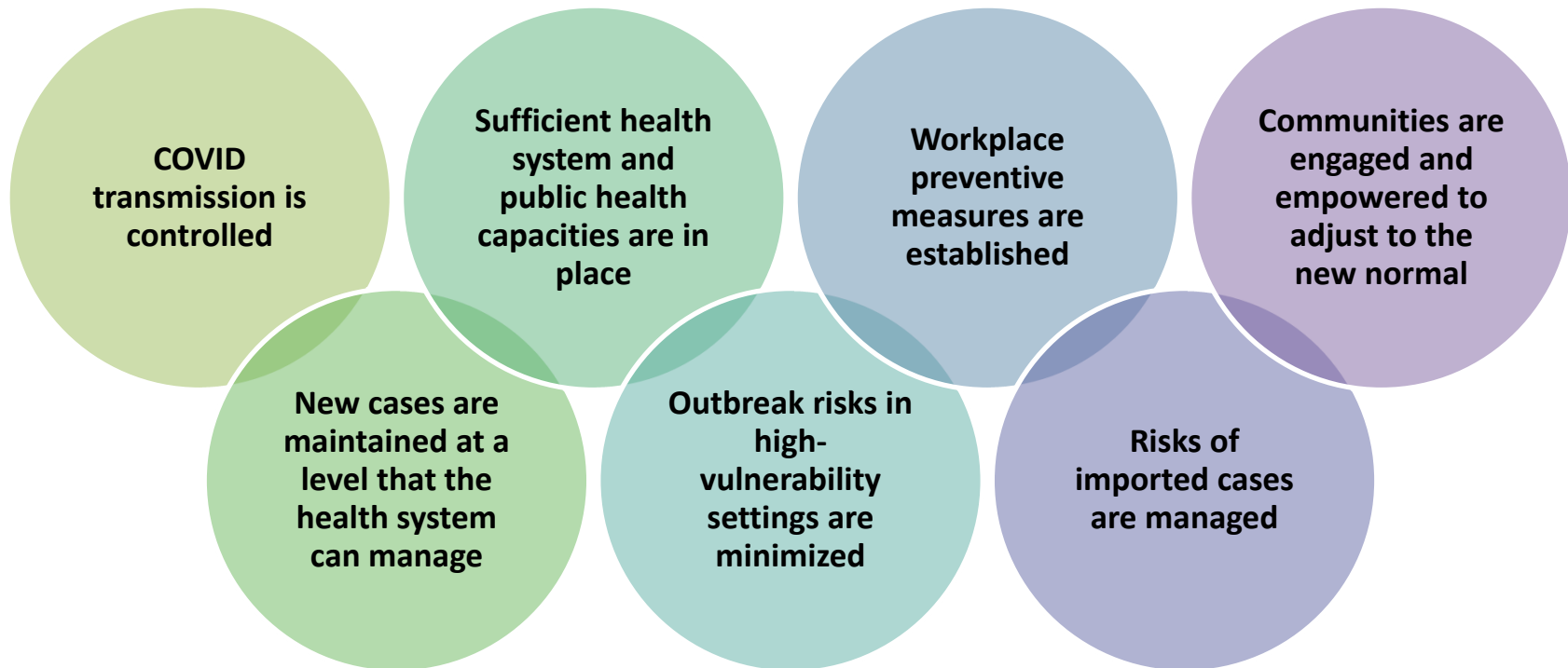
- **Community leadership** will make the decision on the basis of the community's needs.
- Decisions are **guided by science, and evidence-based**.
- **Coordination and collaboration** across all governments is critical for success.
- Public health measures are intended to be **flexible**, to meet community needs, and **proportional** to public health risk.

## **Gradual adjustments of measures should:**

- Be culturally grounded, strengths-based and include Indigenous ways of knowing and traditional practices beyond provincial/territorial public health models;
- Include consideration of risk associated with higher incidence of co-morbidities;
- Take account of provincial health system capacities (i.e. clinics, hospitals);
- Take a gradual and step-wise approach that is flexible, sensitive to triggers, and able to rapidly respond to epidemiological changes;
- Be mindful of any outbreaks in neighbouring communities/industry work sites; and
- Ensure leadership is informed of considerations relevant to their community when assessing criteria before and when planning for adjusting measures.

# Criteria for Assessing Readiness to Reopen

- The Public Health Agency of Canada has developed a set of seven criteria that can be used to assess when a community is ready to begin a phased reopening



# Re-Opening Strategy Discussion

Early plans in many provinces have suggested areas that may be the first to reopen.

If communities wish to do open some or all of these suggested areas, what resources, materials or guidance are necessary to support the reopening of:

**Some non-essential businesses**

**Day care and education settings/camps**

**Other outdoor activities/ recreation (i.e. sports, on the land activities)**

**Non-urgent health care services**

**Critical cultural ceremonies**

# QUESTIONS & DISCUSSION

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(Thank you in Ayajuthem)

