Working Together to Improve
Aboriginal Access to Health Services
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Working Together to Improve Aboriginal Access to Health Services
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Travailler ensemble pour améliorer l'accès aux services de santé pour les Autochtones

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Health Canada is supporting collaborative work to address the unique challenges that Aboriginal people face in accessing quality health care. Through work on several initiatives over the past decade, federal, provincial and territorial governments have demonstrated a commitment to improving health care service delivery to Canadians.

Current Approach
The Health Services Integration Fund (HSIF) is a five-year $80 million Aboriginal health initiative that builds on past successes and lessons learned in the integration of federally funded services with those of the province and territory. It will support the collaborative efforts of the multiple partners in Aboriginal health to improve the integration of health services for Aboriginal Canadians.

Since 2006, HSIF’s predecessor, the Aboriginal Health Transition Fund (AHTF), funded a total of 311 projects across all the provinces and territories which piloted different approaches to better integrate and adapt existing health services in areas such as: mental health and addictions, chronic disease management, maternal and child health, public health, home and continuing care, health information management, human resource practices, and health governance. Outcomes and lessons learned from these projects have guided the development of HSIF.

Aboriginal Health Transition Fund projects have had the potential to reach approximately 78 per cent of First Nation communities and most Inuit communities. Approximately 480 of 615 First Nation communities were involved in AHTF projects. Inuit organizations participated in AHTF projects in all four Inuit regions—Inuvialuit (Northwest Territories), Nunavut, Nunavik (Northern Quebec) and Nunatsiavut (Labrador). In addition, there were Métis-led projects in British Columbia, Saskatchewan and Manitoba.

This brochure highlights some successes achieved under the Aboriginal Health Transition Fund.

Building on Aboriginal Health Transition Fund Successes
The Aboriginal Health Transition Fund demonstrated time and again that it is critical to create conditions that facilitate collaboration and an agreed upon plan by partners on how to improve Aboriginal health. Extensive discussions with partners that participated in AHTF projects and others shed some light on what works and what doesn’t when parties with sometimes different perspectives come together to discover new ways of working cooperatively.
Ingredients for Success

- Clear, shared understanding among participants of objectives, roles and direction
- Trust between parties
- Recognition of the values each party brings to the table
- Readiness for change
- Open minds, willingness to engage in dialogue and explore innovative options

- Commitment to on-going collaboration - adequate human resources, time, senior level support
- Political will at all levels
- Community involvement
- Flexibility in approach, given the different levels of readiness and priorities among parties
- Realistic timelines
- Achievable outcomes

Challenges on the Road Forward

- Health system complexities – multiple parties, specialties and structures
- Lack of understanding of partners in each system
- Multiple organizational cultures and processes
- Limited resources (human and financial)
- Pace of progress – it takes significant time to build relationships, plan and realize change.
Early Outcomes Reported under the Aboriginal Health Transition Fund

The Aboriginal Health Transition Fund has acted as a catalyst in supporting partnerships that seek new approaches to health care service planning and delivery, to improve access to care for Aboriginal Canadians. To date, partners have reported that AHTF has helped create:

- new ways of working together in Aboriginal health;
- new ways of thinking in planning and delivering health care services;
- new ways of doing business in Aboriginal health; and
- new ways to access health care services.

1) New Ways of Working Together in Aboriginal Health

Aboriginal Health Transition Fund projects have brought together representatives from government (provincial/territorial/federal) and Aboriginal groups that have either never worked together before; or have done so predominantly on an ad-hoc basis. This collaboration has:

- created new relationships and strengthened existing partnerships in Aboriginal health;
- generated a new appreciation and commitment to the value of collaborative work;
- improved trust in partnership approaches;
- facilitated the creation of formal partnership arrangements with specific goals;
- expanded Aboriginal representation in provincial and territorial health systems;
- generated explicit commitments among key groups involved in health service delivery to work collaboratively to address challenges impacting access to, and quality of, health services for Aboriginal people; and
- led to the emergence of champions committed to improving the integration and adaptation of health services for Aboriginal people.

Aboriginal Health Transition Fund-inspired relationships and projects have enhanced awareness of the unique challenges Aboriginal people face when seeking health care. AHTF projects facilitated proactive changes between provinces/territories and Aboriginal communities to address these challenges.

Following the involvement in AHTF projects, the Government of New Brunswick now includes First Nations in their health planning and engagement processes. These engagement processes positively influenced the work the Department of Health and the Regional Health Authorities have undertaken with communities in a number of areas. For instance, government representatives note that the relationships established under AHTF positively influenced the roll out of the H1N1 vaccine in 2009.
2) New Ways of Thinking in Planning and Delivering Health Care Services

Changes in attitudes, beliefs and values facilitate successful integration and adaptation of health services. Formalized committees and working groups have enabled partners to openly discuss challenges and barriers to integrating and adapting health services and find solutions. These approaches have facilitated:

- Improved understanding of the roles, responsibilities and limitations of provincially and federally funded health care services;
- Improved understanding of health care access issues, health disparities and social and cultural considerations of First Nations, Inuit, and Métis; and
- Innovative approaches to integrate and adapt health care services to better meet Aboriginal patient needs.

British Columbia’s Provincial Health Services Authority is providing cultural competency training for health professionals to improve the suitability and quality of services. Increasing employee awareness of Aboriginal cultures and their concept of wellness—holistic, involving physical, mental spiritual and emotional elements—helps ensure Aboriginal client needs are understood and effectively addressed.

3) New Ways of Doing Business in Aboriginal Health

Several Aboriginal Health Transition Fund project proponents have reported innovative ways of planning and delivering health services to Aboriginal Canadians, resulting in:

- Enhanced Aboriginal participation in provincial and territorial health care planning and delivery processes;
- More culturally-relevant programs and services (adapted programs and models of care); and
- Improved coordination of care for Aboriginal patients accessing services funded by different agencies (protocols and frameworks governing patient referrals).

The Nunavik Regional Board of Health and Social Services worked with 14 communities and the local health committees on a mental health project focused on the design and implementation of a culturally appropriate mental health services model targeted towards Inuit youth.
4) New Ways to Access Health Care Services

Improving access to quality health care is the ultimate goal of the Aboriginal Health Transition Fund. Through partnerships, discussions and problem solving, improved access to health services has been achieved by:

- improved awareness of existing health services;
- offering existing provincial and territorial health services closer to Aboriginal communities;
- more suitable health services for Aboriginal clients; and
- improved coordination of health services and referrals.

The Alberta Health Services has extended its mobile cancer screening to communities in the Western Cree Tribal Council. This is the result of the establishment of an inter-jurisdictional process for deliberations regarding the health care needs of First Nations in Alberta.

The Manitoba Métis Federation worked to raise awareness of the range of challenges Métis encounter when seeking health care services. Manitoba will now be better positioned to identify priorities to improve Métis access to health programs and services.

On October 1, 2010, the federal Weeneebayko Health Ahtusraywin and the provincial James Bay General hospitals were fully amalgamated into a single hospital operating under the Ontario Public Hospitals Act, governed by a First Nations Regional Health Authority. The integration of the two hospitals into the Weeneebayko Area Health Authority (WAHA) is aimed at improving the quality, accessibility, delivery, effectiveness, efficiency and cultural appropriateness of health services in communities along the Hudson and James Bay Coast. Services that were previously fragmented are now integrated under the WAHA to better meet the needs and priorities of James Bay Coastal First Nations.

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The Pauktuutit Inuit Women of Canada adapted existing prenatal resources to be more culturally relevant and increase awareness of available prenatal programs, which increased participation in prenatal classes in Happy Valley Goose Bay.

The File Hills Qu’Appelle Tribal Council worked with First Nations partners and the Province of Saskatchewan to expand access to prenatal and women’s health services at the All Nations Healing Hospital. Expectant mothers can now access provincially funded midwifery, ultrasound and nurse practitioner services closer to home.
For more information on the AHTF, please visit
www.healthcanada.gc.ca/ahtf

Pour plus d'informations, veuillez visitez le site web du FTSA :
www.santecanada.gc.ca/ftsa