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Elders Summit showcases symbols of cultural unity among Aboriginal nations

By Michael Fisher

It's a long way from southern Ontario to the Métis hamlet of Isle-a-La Crosse in northern Saskatchewan, but Métis Elder Tom McCallum discovered a profound symbol of cultural unity at this year's International Elders Summit, hosted by Six Nations, Aug. 27 to Sept. 1, 2004.

When Elders from Six Nations recited their powerful Great Law of Peace, the stories were very similar to those McCallum's grandmother passed on to him as a young man.

McCallum said there are incredible similarities of stories shared by indigenous people that transcend the differences in language, culture, and geography. These shared ways of knowing unite indigenous people, and highlight the importance of working together toward spiritual renewal and self-determination.

The Elders Summit was an opportunity "to explore the richness of our cultures and languages, find a common way to relate to one another, put politics aside, and work together, looking from a spiritual perspective," said McCallum.

Elders from across the Americas descended on Six Nations to share their



Métis Elder Tom McCallum believes that language is the key to providing healthy communities. He shared his thoughts at the Elders Summit at Six Nations, Ont., in August.

teachings and knowledge, and to foster healing, nation building, and unity among indigenous people.

Along with sharing circles, the summit featured information sessions on topics such as youth and family wellness, relationships between indigenous nations, preservation of language and traditional knowledge, as well as sessions devoted to indigenous women's issues. There were also Aboriginal craftspeople exhibiting their wares and special youth activities.

Currently living in British Columbia, McCallum is an active member of the Métis Centre's Elders group. This group brings together Elders from various regions to formally discuss the protection and promotion of traditional knowledge. McCallum attended the Elders Summit with Ken Drury, Community Liaison Officer for the Métis Centre at the National Aboriginal Health Organization.

"There was a strong belief among the Elders present that language is key to

healthy communities," said Drury, who has made relearning Michif a priority. "Cultural knowledge is transmitted through indigenous languages. Knowledge of how to relate to the land, how to live with one another, and how to be at one with the Creator is imbedded into the language."

Drury said this is especially important for Métis to consider, as Métis are the least likely of the three recognized Aboriginal groups in Canada to speak an Aboriginal language. According to Statistics Canada, five per cent of all Métis were able to speak an Aboriginal language in 2001, down from eight per cent five years earlier.

"Language is the foundation of indigenous knowledge and spirituality," said McCallum. "You can talk about those concepts in English, but you don't see it. Everything changes, relationships change, when you speak an indigenous language."

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Aboriginal health funding commitments reflect NAHO's goals and objectives

By Paul Michna

The recent announcement of \$700 million for a series of commitments to improve Aboriginal health is an important step, one that is in line with the mandate and work of the National Aboriginal Health Organization (NAHO), said Bernice Downey, NAHO's Executive Director.

"This is a positive announcement and an important step towards addressing the specific health needs of Aboriginal Peoples," said Downey. "NAHO is pleased with the recent recognition of the unique health challenges facing First Nations,

Inuit, and Métis people and the steps being taken to begin dealing with these challenges.

"NAHO has promoted the need for a specialized focus on areas such as maternity care, and the recruitment and retention of Aboriginal Peoples in the health care profession. The attention paid to these and other critical areas indicates an acceptance of Aboriginal health challenges," she said. "Of course, NAHO and the Centres are continuing to study the announcement and what it means for Aboriginal Peoples across Canada."

At a special session with Aboriginal leaders at the First Ministers Meeting on Health Care in Ottawa on Sept. 13, \$200 million was announced for an Aboriginal health transition fund. This will enable governments and communities to devise new ways to integrate and adapt existing health services to better meet the needs of First Nations, Inuit, and Métis people.

A further \$100 million will establish an Aboriginal health human resources initiative to increase the number of Aboriginal Peoples entering the health care profession. The initiative will also incorporate a more culturally-sensitive focus in current health professional education and improve the retention of health workers serving Aboriginal Peoples.

"This initiative is complementary to NAHO's interest in fostering participation of Aboriginal Peoples in the delivery of health care," said Downey.

Finally, \$400 million will be used for health promotion and disease prevention programs focusing on diabetes, suicide prevention, maternal and child care, and early childhood development.

The First Nations, Ajunnginiq, and Métis Centres at NAHO have been researching areas that could be impacted by the recent funding announcement, said Downey.

For example, the First Nations and Ajunnginiq Centres have been working on a maternity care needs assessment. This study is designed to present experiential findings gathered directly from Inuit and on-reserve First Nations women

about to give birth in northern and remote communities.

"This is a critical study because birthing is much more than simply the involvement of a doctor, nurse, and mother. It involves the whole community and the whole culture," said Downey. "Projects like this, which focus not strictly on personnel or funding dollars, but on community needs over and above those areas, are important to consider."

Downey also said she is looking forward to NAHO's involvement with future discussions on Aboriginal health care, in light of the First Ministers' announcement, and April's Aboriginal Peoples Roundtable on health care.

"We're looking ahead to a focus on First Nations, Inuit, and Métis public health, and we are watching the current environment for further announcements and initiatives," said Downey.

Meanwhile, NAHO is busy putting the finishing touches on plans for its Second National Conference and Health Information Fair in Winnipeg, Man., from Nov. 8 to Nov. 10, 2004. The theme of this year's conference is Sharing Knowledge: Aboriginal Paths to Health.

"Events at the conference will be designed to promote positive advances aimed at improving the health and well-being of Aboriginal people," said Downey. "The conference includes First Nation, Inuit, and Métis people. It will include plenary sessions, workshops, and social events geared to Aboriginal Peoples from remote, rural, and urban areas."

Panel discussions will range from achieving a holistic approach to diabetes treatment at an Aboriginal health access centre, to exploring the differences in indigenous and western views of knowledge of youth suicide.

As well, some of the National Aboriginal Role Models will be in attendance, visiting workshops and sharing their stories of success.

"NAHO is a collaborative organization and we expect this conference will do much to strengthen our community links," said Downey.



NAHO Bulletin

The National Aboriginal Health Organization, an Aboriginal-designed and controlled body, will influence and advance the health and well-being of Aboriginal Peoples through carrying out knowledge-based strategies.

The NAHO Bulletin is an electronic publication produced monthly to provide readers with an update of the activities of NAHO and its First Nations, Ajunnginiq (Inuit), and Métis Centres.

If you have any questions or comments about NAHO or its publications, including being notified via e-mail when the issue is available for download, please contact us at:

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Second health survey adds to discussion on the state of First Nations health

By FNC Staff

The latest First Nations Regional Longitudinal Health Survey (RHS) paints a bleak picture of the state of First Nations health. In mid-September, the RHS released some preliminary figures reflecting the health of adults.

"The figures show that instead of improving, the vast majority of on-reserve First Nations people continue to live in conditions other Canadians would not tolerate," said RHS National Co-ordinator Jane Gray.

The numbers speak for themselves. Since the last RHS was released four years ago, diabetes rates rose to five times the comparable rate in the Canadian population. Housing, a problem identified by many First Nations as their priority, remained dismal. There were too few new homes built, too many existing homes are old and badly in need of repair, and too many homes are unsafe due to mould and mildew.

"The RHS confirmed again what most First Nations already knew," said Gray. "Too many families live in sub-standard, overcrowded homes in need of repairs. Too many homes have mould. Too many First Nations people do not have safe drinking water. Too many people don't have the basic level of health and living conditions that most Canadians take for granted. The RHS paints a picture that should disturb every Canadian."

The release of some preliminary RHS results took place only days before the Prime Minister and provincial and territorial premiers met to discuss the future of health care in Canada. For the first time since the First Ministers Conference on the Aboriginal Rights in the Canadian Constitution in the early 1980s, the heads of five major Aboriginal groups sat at the table as

well.

Phil Fontaine, the National Chief of the Assembly of First Nations, set the tone during the three-and-a-half hours provided for Aboriginal health issues. Fontaine welcomed the \$700-million infusion of federal money to improve Aboriginal health, but stressed that much more needs to be done. The Prime Minister's announcement showed the federal government recognized the poor health conditions of First Nations people.

One bright spot is that the RHS has become one of the most trusted and reliable sources of information on the health of First Nations people and communities. Unlike health surveys conducted by federal or provincial governments, the RHS is not considered outside research. It has been created by, about, and for First Nations.

The RHS is housed at the FNC, though it is not a NAHO-First Nations Centre (FNC) survey, said Gray. "It really is an independent entity. We collect and analyze the data. The FNC is the caretaker of that data."

"We call ourselves Data Warriors," explained Gray. "We believe very strongly that collecting, keeping, and using information about our people is very much about self-determination. How can you talk about self-determination if you allow someone else to collect and control information such as, for example, your own health information. How can we let others decide when and how you can use it? You will be lucky if you ever get to see it."

The RHS is different, Gray said.

"We believe in what we call the Principles of OCAP. The ownership, control, access and possession of our own health information is vital to allow First Nations

to report on their own determinants of health, based on their own cultural values. It is time for First Nation people to come up with solutions to improve health in their own communities based on their own data."

Gray added that the Data Warriors are on the front lines working to improve the health of First Nations peoples across Canada. They are regular community members or summer students, hired and trained to interview the thousands of people in their own communities as part of the latest RHS. "There are Data Warriors in every First Nation across Canada," Gray added.

The first RHS took place in 1997 and involved First Nations from all provinces. The RHS survey provided, for the first time, a detailed picture of the health of

First Nations people across Canada. The RHS 2002-03 is designed as a longitudinal survey with cycles every four years. As such, the RHS was established as an invaluable resource for First Nations health care workers; non-Aboriginal health care providers; and federal, provincial and territorial policy makers, and others. The second wave of the RHS began in 2002, adding the Yukon and Northwest Territories.

The RHS was conducted in 246 First Nations communities, including on-reserve and others, between August 2002 and November 2003. More than 22,000 participants across the country took part in the survey. The RHS included three questionnaires designed for adults (18 years and over), adolescents (12 to 17 years) and children (0 to 11 years).

The RHS is considered the most comprehensive holistic study of health and living conditions of First Nations communities in Canada.



Jane Gray is the National Coordinator of the RHS.

Key to being resourceful is only one click away: ICAH's resources database

Site will assist NAHO's policy centres and other Aboriginal health researchers

By Melanie Evtushenko

The Information Centre on Aboriginal Health (ICAH) features four databases of health-related sources: Resources; Health Careers; Education and Training; Scholarships, Bursaries and Awards; and Programs and Services.

The Resources database is an important tool for researchers, students, health care professionals, and the general public.

The database provides links to more than 1,300 resources that address a variety of topics, such as water safety, traditional foods, education, history, and policy. The collection contains articles,

fact sheets, guidelines, reports, websites and much more.

ICAH's staff uses the Web and other resources to find information that complements NAHO's research goals, and satisfies the research needs of individuals with an interest in, or participating in, the Aboriginal health field.

The staff selects resources based on content and accessibility. Although priority is given to materials that address Aboriginal health issues, the database also includes general information sources.

Visitors to the website can explore a range of sources by browsing through

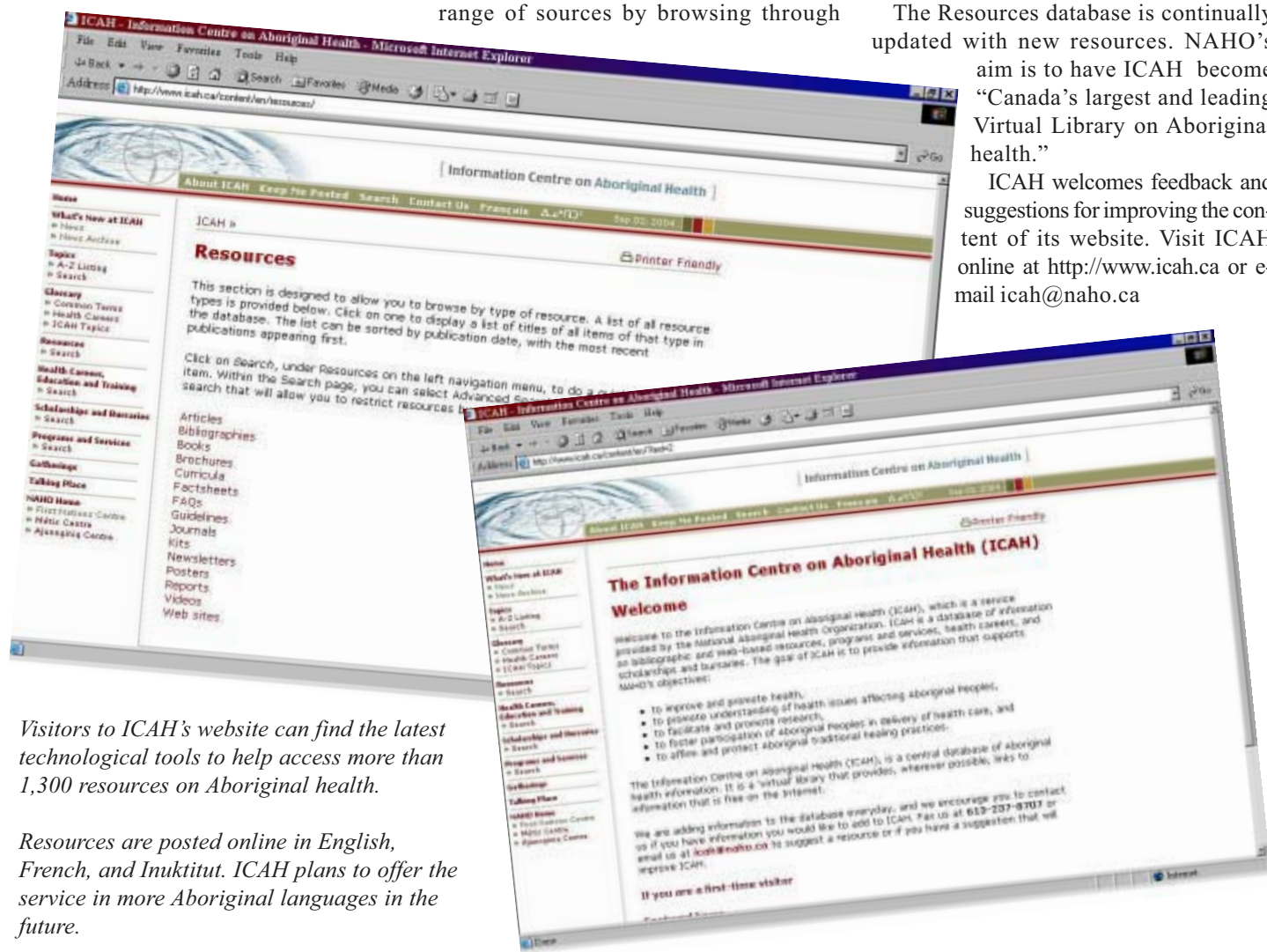
subtopics, or by conducting a basic or advanced search. ICAH's database returns a list of potential sources in response to search inquiries.

ICAH's Resource database, however, is unique from other web-based databases. "It is trilingual and it is geared towards First Nations, Métis, and Inuit populations," explained Debbie Prescott, ICAH's Acting Manager.

Resources are currently posted in English, French and Inuktitut. ICAH plans to include sources in more Aboriginal languages, such as Cree, Dene, and Ojibway, in the future.

The Resources database is continually updated with new resources. NAHO's aim is to have ICAH become "Canada's largest and leading Virtual Library on Aboriginal health."

ICAH welcomes feedback and suggestions for improving the content of its website. Visit ICAH online at <http://www.ich.ca> or e-mail ichah@naho.ca



Visitors to ICAH's website can find the latest technological tools to help access more than 1,300 resources on Aboriginal health.

Resources are posted online in English, French, and Inuktitut. ICAH plans to offer the service in more Aboriginal languages in the future.

Role model and aspiring actor wants to give Aboriginal youth a stronger voice

By Melanie Ferris

"I just want Aboriginal youth to have a voice. I don't do any of this stuff for recognition," said 22-year-old Thomas Edwards. "I just want to make changes in this ever changing world of ours, especially in our society when there's so many things going on that are not great."

Thomas, from Lake Manitoba First Nation, was announced as a National Aboriginal Role Model on June 21. His younger brother Sidney nominated him. When Thomas found out he was chosen as a role model, he said he was "a little scared that someone would think of me so highly."

It is no wonder his brother and other young people admire him. Thomas contributes to his community through extensive volunteer work. He is a member of the Aboriginal Youth Advisory Council of Winnipeg and also sits on the University of Winnipeg's Board of Directors and Aboriginal Student Council. The university recently announced a new \$550,000 service centre for its Aboriginal students, something Thomas had been fighting for over the last couple of years.

Thomas is the chairperson of the Manitoba Aboriginal Youth Achievement Awards Selection Committee. He is a humble person, saying that the youth nominated for the Manitoba awards are achieving far greater things than himself.

A good role model is "someone who knows what their priorities are, someone who goes for what they want, and believes in themselves and sticks up for Aboriginal youth, sticks up for all youth."

For Thomas, his mother has always been a role model. "We weren't rich," he said. His mother had to work hard to raise four children and pay the bills. "Mom would have all four of us up in the morning and by 6 o'clock we were at daycare, by 7 a.m. she'd be on the bus to go across the city to school." His mother went to bed late and would wake up at 3 a.m. to do homework.

"No matter how busy things got, there was always time for us. She doesn't give

up. She's worked hard to get where she is today. She's an amazing person. I feel like I shouldn't be getting those awards, like she should be getting them."

Thomas also admires Saulteaux actor Adam Beach, who lost his parents at a young age. "His losses aren't keeping him back," Thomas said, noting that he also sees Beach as someone who is always growing and learning new things.

Beach is a role model to Thomas because he is a successful actor, something Thomas hopes to become. He also hopes to work with children. He already works as a child care assistant, and is halfway through his Bachelor of Arts and Education degree at the University of Winnipeg.

Working with children is a favourite activity for Thomas because they teach him about himself.

"One of the biggest things I learn is who I am."

When problems arise, Thomas consults with children. "My nephews have the simplest solutions to every problem. If I come home and have a problem, Tyrone will just come up with a solution," Thomas said, noting that children think about things in much simpler terms. "Kids are basically the reason I'm still going."

Thomas also writes for *Say Magazine*, a publication for Aboriginal youth distributed across Canada. "I just hope that maybe I can give them a voice. Aboriginal youth are not always heard, so hopefully (I will) inspire them to go for what they want."

Thomas expects to finish his degree in 2006. When asked what he hopes to do



Role model Thomas Edwards finds inspiration from a generation even younger than himself, such as his nephew, Tyrone Chippeway.

for a career, Thomas admitted that he doesn't know yet. His passions include working with children, performing, writing, and public speaking.

"I've got two years to figure it out," he laughed.

Monthly Reflection

"As I see it, every day you do one of two things: build health or produce disease in yourself."

Adelle Davis
Success Every Day



Building the capacity of Inuit in the health field

Few Inuit are attending post-secondary school programs and fewer are entering health-related programs, AC reveals

By Mark Buell

Many health providers who work in Inuit communities are hired from southern Canada. Because of cultural and language differences, this can sometimes lead to a lack of understanding and trust between health care providers and patients, and high staff turnover. One way to change this is to ensure that Inuit have the opportunities and knowledge to become health care providers.

However, few Inuit are going to post-secondary programs, even fewer are entering health-related programs, and too many are dropping out. These are some of the findings of a discussion paper developed by the Ajungginic Centre (AC) at the National Aboriginal Health Organization (NAHO). What Sculpture is to Soapstone, Education is to the Soul: Building the Capacity of Inuit in the Health Field focuses specifically on the health-related education needs of Inuit in Nunavut, Nunavik, Inuvialuit, and Nunatsiavut (Labrador) regions.

In 2003, the AC identified the need to develop an online and CD-ROM database of health-related education and training opportunities for Inuit. In the development of this database, questions arose whether Inuit students were getting the courses and content they needed to enter and be successful in health programs at the post-secondary level. To answer this and other questions, a discussion paper, Building the Capacity of Inuit in the Health Field, has been developed.

AC Junior Policy Analyst Karin Kettler collected statistics on how many Inuit students were enrolled in and completed high school and post-secondary education. Through a questionnaire, Kettler

also gathered experiences and opinions on a variety of topics from high school students, post-secondary students, those who left a post-secondary program, and people with an interest in Inuit education. This included their views of why students drop out of their programs, recommendations for high schools and post-secondary schools to improve chances of success for Inuit, gaps and barriers Inuit face in accessing post-secondary education, and ways to make post-secondary education more accessible for Inuit.

More Inuit students are attending northern colleges than southern-based post-secondary schools, noted Kettler, but health programs in northern colleges are limited.

The dropout rate among Inuit students is high. Kettler was able to find the most common reasons students dropped out of secondary and post-secondary schools. Not surprisingly, the reasons for dropping out of secondary or post-secondary school are similar. The top reasons noted by students were lack of motivation and personal issues.

"Every respondent to our questionnaire stated that Inuit students need adequate support and information so they can successfully complete their studies," Kettler said.

AC Director Tracy O'Hearn said highlighting some of the major reasons many Inuit are not succeeding in health-related post-secondary education programs may encourage those institutions to take a serious look at how they can make positive

changes to ensure Inuit have the opportunity to succeed in the health field.

One recommendation from Inuit post-secondary students is to provide high school courses and work that will help students succeed if they choose to further their studies. High school programs



Karin Kettler, a Junior Policy Analyst at the AC, gathered information for the discussion paper.

should meet southern standards. Presently, Inuit enrolled in post-secondary studies find they need to spend time catching up to their non-Inuit classmates. As well, not all northern high schools are able to offer higher-level academic courses in programs like science.

Alternatives like distance education are available in some schools, and other options,

like online courses, video conferencing, and summer school might prove useful to prepare Inuit students for post-secondary education in southern Canada.

The need for adequate support, both financial and personal, is also important in helping Inuit to succeed in their studies. Inuit studying at post-secondary schools often have families, resulting in unique needs such as child care.

"Many questions arise that indicate the need for further study," Kettler said. "For instance, what can be done to bring high-school work to a standard that would enable Inuit students to be successful without having to upgrade once they reach college or university? What can be done to help students deal with personal issues that sometimes make it difficult to succeed?"

Can intellectual property rights protect the traditional knowledge of indigenous people?

The Policy Research Unit (PRU) at the National Aboriginal Health Organization (NAHO) has been investigating how different countries protect the traditional knowledge and cultural heritage of indigenous people. Many countries protect traditional knowledge by putting in place a system of intellectual property rights. These systems are designed to protect the ideas and innovations of people so they can use their creations for financial gain. Below is a discussion of how intellectual property rights, in their current form, are not an appropriate way of protecting traditional knowledge.

By Dylan Upper

Traditional knowledge and cultural heritage are key parts of the physical, mental, and spiritual well-being of indigenous people.

However, traditional knowledge has specific meanings for different communities across the globe.

The link between various definitions of traditional knowledge is that it is communally-owned. That is, not everyone in the community possesses the same knowledge. It does, however, mean that a holder of the knowledge has it because the community wants them to have it.

Traditional knowledge is also passed down orally from one generation to the next. To be a traditional knowledge-holder, a good memory is needed. If the knowledge is forgotten, it is difficult to reclaim.

Another trait of traditional knowledge is that there is no one single human creator of the knowledge. In many cultures, traditional knowledge is seen as a gift of the Creator (Great Spirit, Manitou, Wakan Tanka, etc.) that has been given to the people. As traditional knowledge is passed from one generation to the next, it is slowly modified. No single person can lay claim to having discovered or invented it. No one ever really discovers or invents anything by themselves without building on the knowledge of those who have come before.

Unfortunately, the shared nature of traditional knowledge makes it vulnerable to exploitation in the western-based intellectual property system.

Perhaps the biggest difference between the western intellectual property rights system and traditional indigenous knowledge is the myth of the creator.

The western legal world view makes it possible for individuals to discover

or invent something by themselves.

However, arguments have been made that one person cannot come up with an idea alone. Western law denies protection to the traditional thoughts and ideas of indigenous people.

Western intellectual property law states that an idea must have an identifiable creator and must be new. Ideas that are not new are considered in the public domain and cannot receive intellectual property rights protection.

Canada does not have any laws in place to protect the traditional knowledge of Aboriginal people.

This poses a problem for indigenous people. The communal creation of knowledge makes attributing the knowledge to a single creator difficult. Many of these ideas have existed for generations and would be considered in the public domain. In this way, traditional knowledge is overlooked by the formal legal system.

Other issues prevent intellectual property rights from protecting traditional knowledge. One of the major hurdles for indigenous people is the paper-based nature of the intellectual property rights system. The first step for receiving intellectual property rights, such as patents, involves filling out an extensive application. (Patents are a specific type of intellectual property right granted for new physical inventions.)

However, many indigenous knowledge-holders do not possess the technical writing skills or the scientific

terminology needed to apply for patents.

Of course, not many people do, which is why many people hire patent agents to fill out applications for them.

It is expensive to maintain intellectual property rights. Not only do many forms of intellectual property rights involve paying fees, but the owner of intellectual property also must use their own resources towards searching for anyone who might be infringing upon them. They must also pay lawyers and court fees to fight the infringement.

While this cost may be manageable for a few applications, the burden would quickly grow for a community wanting to file hundreds of applications. Court costs could also be high, especially when communities take on corporations with large financial resources, such as pharmaceutical companies.

Except for trademarks and industrial secrets, intellectual property rights only offer protection for a few years. This limited protection does not allow indigenous people to maintain the integrity of their knowledge from generation to generation.

There is hope that the western legal system could accept the idea of providing fair protection for indigenous traditional knowledge. Intellectual property rights are legislated and enforced by national governments. So, the level of protection that traditional knowledge receives varies from country to country. For example, Canada does not have any laws in place to protect the traditional knowledge of Aboriginal people, while Panama has a law designed to protect the traditional knowledge of indigenous peoples.

For more information on traditional knowledge and intellectual property rights, please contact PRU Senior Policy Analyst James Lamouche at jlamouche@naho.ca.