





Otipemisiwak Métis Government

Life Promotion Strategy





Vision

Our vision is for all Métis people living in Alberta to have strong connections to life so each person and community can thrive.

Mission

Our mission is to promote positive experiences, strong kinship relationships, and connections to Métis culture, and ensure that Métis individuals and communities experience the social conditions that support them to flourish in the Métis Homeland.

Acknowledgement

As we stand excited to share the Otipemisiwak Métis Government: the Government of the Métis Nation within Alberta (MNA) *Life Promotion Strategy*, we pause to acknowledge and share our gratitude to the Métis Knowledge Holders, practitioners, Elders, leaders, and Citizens who contributed to this strategy. Contributors include members/practitioners of the 2018 Provisional Youth Council, 2018 Health Committee, 2018 Elder's Committee, MNA Children and Family Services Department and Youth Department, Mental Health Envisioning Project, and Métis community members who added their distinct voices to the initiatives that informed the development of this strategy. We aim to bring these perspectives forward and lead MNA's efforts to promote life with Métis people in Alberta.

Message from the President



Greetings,

When Métis Albertans determine what they need to be healthy and have the resources and support to pursue their well-being, they are in the best possible position to thrive within the Métis Homeland. As the President of the Otipemisiwak Métis Government of the Métis Nation within Alberta (MNA), I am excited to share our *Otipemisiwak Métis Government Life Promotion Strategy*. This strategy will direct our efforts to ensure that all Métis Albertans have what they need to live a good life in our homeland.

This strategy highlights the actions and recommendations for promoting life in the Métis Nation within Alberta. It is grounded in knowledge shared by Métis Citizens, Knowledge Holders, practitioners, and leaders. I thank everyone who has come to our tables to collaborate on this initiative and advance Métis health and well-being.

I wish you well as we work together to usher in a bright future for the Métis Nation.

Sincerely, Andrea Sandmaier President, Otipemisiwak Métis Government

Table of Contents

Introduction		
The Métis Nation	.8	
MNA Health Department	.8	
Background	.9	
Life Promotion Strategy	11	
Priorities and Actions	11	
Strategy At-A-Glance	12	
Priority 1. Supporting Community-Based Programming	14	
Action 1.1	15	
Action 1.2	16	
Action 1.3	18	
Action 1.4	18	
Action 1.5	19	
Priority 2. Engaging Métis Albertans on Health and Well-being	20	
Action 2.1	21	
Action 2.2	22	
Action 2.3	23	
Action 2.4	23	
Action 2.5	24	
Action 2.6	24	

Priority 3. Advancing Culturally Safe Care 2		26
	Action 3.1	
	Action 3.2	
	Action 3.3	
	Action 3.4	30
	Action 3.5	32
The	e Path Ahead	33
Ref	ferences	34



Introduction

The Métis Nation

As an Indigenous people, the Métis Nation emerged in the historic Northwest, the Métis Nation Homeland, in the late 1700s and early 1800s with its own collective consciousness and identity, territory, language, culture, music, art, dance, institutions, self-government, laws, and legal orders, including relationships, confederacies, and alliances with other Indigenous peoples.¹

The Métis Nation Homeland includes an area that is now known as the Canadian provinces of Alberta, Saskatchewan, and Manitoba, as well as contiguous parts of Ontario, British Columbia, the Northwest Territories, and portions of the northern United States in Montana, North Dakota, and Minnesota.¹

Since its emergence, the Métis Nation, including the inter-related and inter-dependent Métis families and communities located in territories throughout the Métis Nation Homeland, has functioned and been recognized as a nation by using, occupying, managing, and protecting the land and resources within the Métis Nation Homeland.¹

Today, the Métis Nation is comprised of all Métis descendants throughout the Métis Nation Homeland that share the history, language, identity, culture, customs, and traditions of the Métis Nation.¹

MNA Health Department

The MNA Health Department works to advance the health and well-being priorities of Métis Albertans and their communities.² In the following document, we share our efforts to foster the strength and resilience of Citizens of the Otipemisiwak Métis Government through advocacy, engagement, policies, programs, and services.

Background

The roots of this strategy began in 2017 when province-wide engagement sessions identified suicide prevention as an area of high importance for Métis youth.³ This priority was reiterated at the 2018 MNA Annual Health Forum, where Métis Albertans shared that existing suicide prevention initiatives are not Métis-specific, and this gap needs to be addressed. Métis Knowledge Holders identified Métis identity and culture as sources of resilience and the importance of fostering strength through connection to land and community in suicide prevention initiatives. The MNA Health Department identified life promotion as the approach that best aligns with Métis perspectives on addressing suicide. We share these findings in the community report: *What We Heard, Developing a Life Promotion Plan for the Métis Nation of Alberta.*³

With an appropriate approach identified, our department created a Métis-specific resource to support MNA staff, departments, and Métis Albertans in promoting life through programming. We consulted Métis program practitioners in the Youth Department and Children and Family Services Department to understand how their programs promote life and what challenges impede this work. Through this collaboration, we created the *Métis Nation of Alberta Life Promotion Guide*. This guide introduces Métis life promotion practices, including connection to identity, culture, community, and kinship, and shares programming design, implementation, and evaluation advice.⁴

We responded to Métis Albertans' health and well-being priorities by creating a strategy to further our life promotion efforts. To inform strategy development, we employed multiple forms of knowledge gathering, including a literature review, community engagement activities, and expert interviews. The literature review examined provincial, territorial, federal, pan-Indigenous, First Nations, Métis, and Inuit mental health strategies. We used keyword searches in search engines, open-source databases, and institutional repositories.

Sixteen documents were selected for inclusion and were analyzed using life promotion themes identified from MNA reports and research. We used these themes to identify relevant strategic actions. This process formed the first draft of the strategy. We then conducted seven expert interviews with Métis mental health content experts. Experts

reviewed the strategy in these interviews, refining, clarifying, and expanding on the drafted priorities and actions. In the final validation stage, we conducted an in-person community engagement activity at the 2023 Annual General Assembly, employing participatory editing and dotmocracy methods. We further refined the strategy based on that feedback and validation. With this completed, we are proud to share the *Otipemisiwak Métis Government Life Promotion Strategy*.

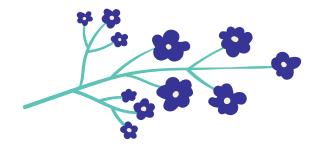
LEARN MORE



What We Heard Developing a Life Promotion Plan for the Métis Nation of Alberta



Métis Nation of Alberta Life Promotion Guide



Otipemisiwak Métis Government Life Promotion Strategy

Life Promotion Strategy

It is with passion and a shared sense of purpose that we present the *Otipemisiwak Métis Government Life Promotion Strategy*. This strategy weaves Métis perspectives, experiences, and priorities into a strategic roadmap that embodies our collective goal of strengthening Métis Albertans' connections to life.

Throughout this document, you will find reflections on the health and well-being priorities shared in our community engagement initiatives since 2018. This strategy applies a life promotion lens to these priorities and highlights the actions the MNA can undertake to enact them. As we begin this journey, we look forward to celebrating Métis identity and culture, empowering our community, and establishing a good path for future generations of all Métis people living in Alberta.

Priorities and Actions

In pursuing our vision, this section outlines our plan to bring our Life Promotion Strategy forward. We transition from the principles that have helped us envision a brighter future to embracing the concrete steps and initiatives that will empower Métis Albertans. Our priorities are:

Priority 1.	Supporting community-based programming
Priority 2.	Engaging Métis Albertans on health and well-being
Priority 3.	Advancing culturally safe care

As we implement this strategy, we are committed to remaining open to learning and making improvements. Continuous evaluation of our actions and their impact will help us adjust and ensure we serve Métis Albertans best. We commit to keeping our Citizens and partners informed about the progress of our actions and understand that successful implementation relies on the trust and support of Métis Albertans.

Strategy At-A-Glance



Priority 1. Supporting Community-Based Programming

- 1.1 Strengthen connection to Métis culture, community, and land.
- 1.2 Evaluate and expand MNA Health Department programs.
- 1.3 Develop and promote programs that support diversity, equity, and inclusion.
- 1.4 Build MNA staff capacity to deliver and evaluate programs.
- 1.5 Advocate for program funding at all levels of government.



Priority 2. Engaging Métis Albertans on Health and Well-Being

- 2.1 Highlight Métis experiences with mental health.
- 2.2 Create meaningful health indicators and collect health data.
- 2.3 Develop and improve Métis-specific mental health and awareness resources.
- 2.4 Develop a navigation platform to facilitate access to mental health resources and support.
- 2.5 Advocate for self-determined community engagement funding.
- 2.6 Collect Métis-specific data related to opioid use and drug poisoning



Priority 3. Advancing Culturally Safe Care

- 3.1 Improve retention and recruitment of Métis practitioners in the health and helping fields.
- 3.2 Advocate for the recruitment of Métis cultural navigators and helpers in the health system.
- 3.3 Develop and promote cultural safety and humility training for academic and health system actors.
- 3.4 Advocate for and enact person-centred, trauma-informed, and recoveryoriented approaches.
- 3.5 Advocate for health benefits at the federal level.



Priority 1. Supporting Community-Based Programming

Where community gathers and culture is shared, Métis Albertans re-connect with what makes life good.⁴ One of our primary approaches for promoting life is working to ensure that Métis Albertans can come together, share in positive experiences, and strengthen their relationships.⁴ This strategy recommits our efforts to support community-based programs through the following actions:

PRIORITY 1. Supporting Community-Based Programming

- 1.1 Provide and promote opportunities to foster connection to Métis culture, community, and land
- **1.2** Evaluate and expand MNA Health Department programs
- **1.3** Develop and promote programs that support diversity, equity, and inclusion
- 1.4 Build MNA staff capacity to deliver and evaluate programs
- **1.5** Advocate for program funding at all levels of government

As we delve into our next steps of supporting community-based programming, our goal is to support all Métis Albertans and respect the diversity of voices within our community. We aim to bring forward programs born from Métis knowledge and experiences, ensuring they reflect the perspectives and priorities of those we serve.

Action 1.1

Provide and Promote Opportunities to Foster Connection to Métis Culture, Community, and Land

Connections to culture increase feelings of security, belonging, and hope for the future and create strong personal resources that will benefit people throughout their lives and in times of crisis.⁵ When communities preserve their culture and control their destinies, they are more successful in insulating their members against the risks of suicide.⁶

Through program design and delivery, MNA programs can support connection to culture, community, and land. This includes holding cultural events, revitalizing Michif by supporting language classes, resources, and presence, providing opportunities to participate in traditional arts and crafts at community gatherings and events, incorporating storytelling practices into programs and events, gathering on traditional

Métis lands, and supporting intergenerational participation to strengthen kinship connections.

This strategy commits the MNA to further incorporate life promotion approaches in current programs and to support the development of programs that celebrate culture, community, and connection. In addition, this strategy also calls on the MNA to increasingly identify collaboration opportunities. Through inter-departmental and community collaboration, we can use each other's strengths and resources to expand the opportunities for Métis Albertans to celebrate their connections to culture, community, land, and life.

Action 1.2

Evaluate and Expand MNA Health Department Programs

Our community-based health programs are a core foundation of how we ensure Métis Albertans have their needs and well-being supported. They provide culturally appropriate community-based care addressing the health and wellness of Métis people in Alberta.⁷ Current programs that enact life promoting approaches and improve life-thriving conditions include the following:⁸

- Community Wellness Advocate Program
 Provides information and referral to mental health supports.
- Psychology Benefit Program
 Provides funding to access psychologists or social workers.
- Métis Mental Wellness Envisioning Program
 Hosts a series of small gatherings to co-create a Métis Mental Wellness
 Framework.

o Community Wellness Gatherings

Supports kinship, culture, community, and connection through in-person gatherings.

opioid Wrap-Around Support Program

Provides 12 months of wrap-around care for individuals who have completed a residential care treatment program.

MNA Dental Program

Provides free basic dental services for Métis youth between the ages of 3–16 and access to affordable emergency dental care for adults.

• Tobacco Reduction Program

Involves a six-week QuitCore group program, continuous peer support through the ChangeCore Peer Support Group, and the QuitRetreat which provides graduates from QuitCore and their families with an opportunity to gather at Métis Crossing for a weekend filled with cultural activities, Métis-inspired cuisine, and connecting to the land, people, and animals.

As Métis citizenship expands, it is critical that our programs improve, expand, and diversify to meet growing priorities and needs. Program evaluation will help our programs monitor the progress toward our goals, measure effectiveness, justify further funding and support, and promote continuous quality improvement.⁹ Goals for evaluations will include ensuring health and wellness supports are grounded in Métis definitions and needs, enhancing access, and improving outcomes while respecting the needs of Métis Albertans, and justifying funding support to ensure program sustainability. This strategy calls on the MNA to plan and implement evaluations throughout the life cycle of projects and programs to support sustainability and ensure maximum benefits for Métis Albertans.



LEARN MORE Health Department programs and supports

Action 1.3

Develop and Promote Programs that Support Diversity, Equity, and Inclusion (DEI)

The MNA commits to pursuing equity, diversity, and inclusion. Equity promotes fairness and justice for each individual, considering the historical, social, systemic, and structural issues that impact their experiences and needs.¹¹ Diversity speaks to the representation within a community or population and includes identity, background, lived experiences, physical ability, intellectual ability, culture, and more.¹¹ Inclusion creates environments where everyone feels a sense of belonging, feels they are treated with respect, and can participate fully.¹¹

This strategy calls on the MNA to support and pursue the principles of DEI throughout the nation. We commit to ongoing engagement with diverse groups of Métis Albertans and external partnerships to:

- Identify opportunities to create tailored programming.
- Improve the inclusivity and equity within current programs.
- ∞ Assess our progress towards DEI.

We commit to applying these priorities in a clear DEI strategy and provide ongoing DEI training for our staff. This strategy commits the MNA to enact these initiatives, policies, and partnerships to better pursue DEI for all Métis Albertans.

Action 1.4

Build MNA Staff Capacity to Deliver and Evaluate Programs

Indigenous evaluations can be acts of resistance and resurgence in response to inequitable relationships between First Nations, Inuit, and Métis peoples and the Canadian colonial system.⁶ The MNA recognizes the gap in Métis knowledge representation in evaluation and commits to incorporating Métis ways of knowing, being, feeling, and doing into evaluations. Through training of MNA staff and collaboration with Métis experts, training in evaluations will seek to place Métis

Albertans at the center of setting the knowledge-seeking agenda. This will result in Métis Albertans being the voice that leads the process, deciding what knowledge will be sought and valued, deciding the methods used to gather the knowledge, and deciding the ultimate use and distribution of the results of the knowledge-gathering. Training will help MNA staff ensure that Métis culture drives the execution of programs that are of high quality, delivered with competence, and effectively build partnerships and collaboration. To that end, the strategy calls on the MNA to provide ongoing staff training opportunities to support capacity building in program delivery, monitoring and evaluation.

Action 1.5

Advocate for Program Funding at all Levels of Government

MNA Health Department programs are funded by grants and are often subject to cancellation when colonial government priorities change.⁴ As such, our department must scan and advocate for funding opportunities on an ongoing basis and devote a significant portion of resources to the management of funding requirements.⁴ We highlight our need to continue advocating for multi-year unrestricted funding from all levels of government to ensure that our work is not interrupted or cancelled for reasons outside the self-determination of the MNA and our Citizens. Predictable, stable, and flexible funding will allow our programs to address health disparities among Métis Albertans, support community development, and strengthen the Métis Homeland for future generations.



Priority 2. Engaging Métis Albertans on Health and Well-being

Fundamental to this strategy is having Métis Albertans direct the health and wellbeing programs and services we provide.³ When communities are the knowledge drivers of change, programs and services have greater relevance, effectiveness, and flexibility.³ Community-driven programming and services ensure that the diversity among Métis Albertans is respected.⁴ This strategy will call on direct collaboration with Métis Albertans across all initiatives and actions, relying on community knowledge, expertise, and leadership. Our next steps in engaging Métis Albertans will aim to achieve the following:

PRIORITY 2. Engaging Métis Albertans on Health and Well-being

- 2.1 Highlight Métis experiences with mental health
- 2.2 Create meaningful health indicators and collect health data
- 2.3 Develop and improve Métis-specific mental health and awareness resources
- 2.4 Develop a navigation platform to facilitate access to mental health resources and support
- 2.5 Advocate for self-determined community engagement funding
- 2.6 Collect Métis-specific data on opioid use and drug poisoning

Action 2.1

Highlight Métis Experiences with Mental Health

Métis Albertans have shared their mental health perspectives in many initiatives. They have defined mental health as part of their holistic well-being, which is more than simply the absence of illness and includes physical, mental, spiritual, family, and community health.⁷ It was also found that connection to family, community, land, and culture supports their social, emotional, and cultural well-being.⁷ Métis Albertans have emphasized the importance of having access to Métis-specific programs, services, and healthcare to enhance their overall well-being. They expressed how having the knowledge, resources, and ability to make positive lifestyle choices improves their quality of life.⁷

The MNA seeks to honour these experiences and knowledge and affect positive changes by sharing them across the Métis Homeland, Canada, and the international community to increase awareness, gain support, and mobilize actions. Current efforts include academic research projects, conference presentations, summit presentations, publications, consultation, and health promotion. This strategy calls on the MNA to continue and expand these efforts in all systems that affect Métis health and well-being.

Action 2.2

Create Meaningful Health Indicators and Collect Health Data

Health indicators are meant to summarize trends¹² and offer an interpretation of wider phenomena, such as rates of disease.¹² However, this tends to focus on a narrow scope that views risks and impacts as objective measures of physiological morbidity or mortality outcomes but does not otherwise connect them to ecosystem health or social and cultural realities.¹²

Métis Albertans have already shared the importance of taking strength-based approaches^{3,4} and we commit to following this direction by incorporating strength-based health indicators into our work. Strength-based indicators empower communities, encourage resilience in overcoming health obstacles, take a holistic view of each person, and help to reduce health stigma.⁵

Métis Albertans have also shared the interconnected ways in which all aspects of the person and their environment interact and create health and wellbeing.^{3,4,7,10} Developing health indicators that reflect this perspective is critical to the process of creating health knowledge for Métis Albertans that reflects Métis culture and ways of life. Creating Métis-specific health indicators will empower the Métis community to establish research meeting their needs, which will then inform policy, planning, and programs. Constructing a more complex, narrative set of indicators will create a more accurate picture of Métis Albertans' health status, which allows better evaluation and management of public health.¹² Used positively, indicators can assist in creating better conditions that increase health and well-being.¹² By creating indicators guided by Métis perspectives, we can become our own storytellers about Métis health.

Action 2.3

Develop and Improve Métis-Specific Mental Health and Awareness Resources

Métis-specific health and wellness resources can change how Métis Albertans access, navigate, and experience care.⁷ They can express culturally grounded views of mental health, providing a link to community and culture.⁸ Métis Albertans have shared that their communities need to be the drivers of knowledge related to their own perspectives and experiences,⁴ and this strategy calls on the MNA to co-create and improve Métis-specific resources for mental health and awareness with Métis Albertans with lived mental health experiences. Self-determination in mental health can enhance ownership for community members, which is a key determinant of health for Métis individuals and communities.¹⁴ Community-driven processes also ensure that the diversity among Métis Albertans is respected and helps to address mental health stigma.³ We aim to support Métis Albertans with diverse needs, including developing resources tailored towards people of different ages, genders, neuro-diversity, physical diversity, sexual orientation, and more. This strategy calls on the MNA to collaborate with Métis Albertans to highlight community and individual mental health knowledge and experiences and to share and preserve this knowledge for future generations.

Action 2.4

Develop a Navigation Platform to Facilitate Access to Mental Health Resources and Support

As part of creating Métis-specific mental health and awareness resources, this strategy commits the MNA to create a navigation platform to improve access to these resources and supports. Métis Albertans have identified that mental health supports can be difficult to access, with barriers such as long wait lists, travel distances, and lack of financial resources to support travel costs. It was also indicated that there is a general lack of knowledge about what services are available or how to access these services.²³ An online navigation platform accessible 24/7 can serve to:

- ∞ Improve service knowledge and access.
- ∞ Reduce travel costs and barriers.
- Provide immediate guidance or interim support for those who have been waitlisted by other services.
- Include the benefit of anonymity to help alleviate the fears of stigmatization.
- Increase the variety of supports available, including self-help tools and peersupport resources which diversifies the options of support available.

This action seeks to expand the access and diversity of support that Métis Albertans can use to improve their mental health and wellness.

Action 2.5

Advocate for Self-Determined Community Engagement Funding

As we continue to learn, this strategy calls on the MNA to advocate for funding at all levels of government to support self-determined engagement opportunities. Self-determined community engagement can have many benefits for Métis Albertans. These opportunities help preserve culture and identity,¹³ assert Métis autonomy and self-determination,¹⁵ provide opportunities to highlight connections to land,¹⁷ and address the health effects of structural violence.¹⁸ This strategy commits the MNA to ensure that all levels of government in Canada fund and support this work.

Action 2.6

Collect Métis-Specific Data on Opioid Use and Drug Poisoning

In 2018, the MNA Opioid Data and Action Plan identified that the rate of apparent accidental opioid toxicity deaths is higher among Métis people in Alberta.¹⁹ Emergency department visits and hospitalizations related to opioid use and other substances were consistently higher for Métis Albertans over this same period.¹⁹ Since 2018, in Alberta, the overall rate of opioid poisoning deaths has risen from 18.7 deaths per month to an average of 125.8 deaths per month in 2022.²² With our last Métis-specific

data identifying a disproportionate rate of opioid use affecting Métis Albertans,¹⁹ the MNA must understand and provide supports for Métis Albertans at risk of drug poisoning deaths.

To that end, the strategy calls on the MNA to collect quantitative data on the effect of opioid use and drug poisoning on Métis Citizens across Alberta and have Métis Albertans who use drugs provide guidance in co-creating effective support. We will seek to explore the lived experience of Métis Albertans who use drugs, their recommendations for support, the barriers they face to improving their health and well-being, and their policy recommendations to support people who use drugs. This project will aim to inform MNA support for people who use drugs, reduce stigma around drug use, and create knowledge for systems-level advocacy. The initiative will adhere to the principles of ethical Métis research. These principles require reciprocity between researchers and the community, respect for the community and individuals, recognition of diversity in the Métis community, an aim for positive outcomes and benefits for all involved, mindfulness of Métis contexts, and commitment to continually evolving these principles.²¹



Priority 3. Advancing Culturally Safe Care

Culturally safe care is a call to end the health inequities created by institutionalized racism in the health system.²³ Métis Albertans continued to voice the negative influences of racism on their health. This includes treatment avoidance due to past experiences of racism from care providers, social exclusion and withdrawal that perpetuates health issues, the effect of social inequities creating conditions of low income on their ability to access food, medication costs, care costs, and financial limitations to the access of health choices.²³

This strategy commits us to use culturally safe care as a critical framework to ensure that healthcare services align with Métis cultural values, traditions, and historical experiences. Through cultural safety, we aim to create patient outcomes and experiences where healthcare providers are respectful, inclusive, and empower the patient in decision-making.²⁴ Through the pursuit of the following actions, we seek to raise knowledge of Métis culture, foster self-determination, integrate Métis knowledge and practices into the health system and helping fields, and achieve equitable, effective, and culturally aligned health outcomes for all Métis Albertans. These actions are:

PRIORITY 3. Advancing Culturally Safe Care

- 3.1 Improve retention and recruitment of Métis practitioners in the health and helping fields
- 3.2 Advocate for the recruitment of Métis cultural navigators and helpers in the health system
- **3.3** Develop and promote cultural safety training opportunities for academic and health system actors
- 3.4 Advocate for and enact person-centred care, trauma-informed, and recovery-based practices in the health system
- 3.5 Advocate for health benefits and funding at the federal level

Action 3.1

Improve Retention and Recruitment of Métis Practitioners in the Health and Helping Fields

Métis health and helping field practitioners are indispensable to creating a culturally safe health system. Métis practitioners are critical in helping bridge Métis Albertans to the health system that supports them. Their perspectives, experiences, and

knowledge are crucial to understanding how we can improve their experiences working in the health and helping fields and reduce any barriers that may keep Métis Albertans from entering these fields. This strategy calls on the MNA to engage with Métis practitioners to understand how to support the recruitment, retention, and advancement of Métis Albertans in these fields. Current strategies include:

- Collaborating with Rupertsland Institute and other MNA affiliates to help Métis Citizens obtain their healthcare designation.²⁵
- Advocating within the health system for equitable and safe training and/or mentorship of Métis students in healthcare.²⁵
- Collaborating with health and academic institutions to link Métis students with available training opportunities such as internships and/or practicums to facilitate skill development and recruitment.²⁵

We also advocate for the system-wide adoption and enforcement of policies that provide a clear and safe mechanism for Métis practitioners to report acts of racism and discrimination they may witness or experience. This will support active approaches to address these issues in the healthcare system. Through these actions, we aim to support Métis practitioners to enter and remain in their fields of choice.

Action 3.2

Advocate for Recruitment of Métis Cultural Navigators and Helpers in the Health System

Cultural navigators and helpers are key in providing culturally safe care in the health and helping fields.²⁶ Métis cultural navigators and helpers aim to provide wraparound support to Métis clients as they understand their options and make informed choices. They will help ensure smoother access to Métis-specific health and wellness services across the individual's lifespan, offer virtual or in-person connection, support important prevention and follow-up activities, and proactively work with Métis clients to advocate for their health and wellness needs.⁷

Through advocating for the inclusion of Métis cultural navigators in the health system and helping fields, we aim to bridge the gaps between Métis clients and their health providers, help enhance health providers' cultural competence through collaboration, build trust and rapport with Métis clients, and address the health disparities faced by Métis Albertans. In addition, we aim to support informed decision-making, promote prevention and early intervention, and increase Métis clients' treatment follow through. The MNA commits to advocating for Alberta Health Services to create these roles in the health and helping fields and commits to creating these positions in programs offered through the MNA.

Action 3.3

Develop and Promote Cultural Safety and Humility Training for for Academic and Health System Actors

Métis Albertans have a right to access healthcare that is safe and free from racism and discrimination. In pursuit of this goal, we propose the adoption of system-wide cultural safety and humility training for academics and health system actors. Cultural safety training will involve:

- Building healthcare providers' awareness of history and past traumatic experiences and their impacts in shaping health and healthcare experiences.²⁷
- ∞ Understanding the impacts of colonization.²⁶
- ∞ Gaining an understanding of Métis perspectives on health and wellness.²⁶
- Obtaining academic and health system actor reflections on their assumptions and position of power.²⁶
- Emphasizing people's safety when receiving care or interacting with health and helping field practitioners.²⁴

Cultural humility trains participants to acknowledge themselves as lifelong learners when it comes to other people's experiences.²⁷ This professional development includes participation in community events and practices,²⁷ teaches against making assumptions about cultural experiences,²⁶ and builds awareness of a person's own cultural experience and how it shapes their perspectives.²⁶ To advance this action, we commit to identifying partners and opportunities to develop cultural safety and humility training, and advocate for policies that support the adoption of this training across the entire health system. The MNA is engaged in the development of a National Cultural Safety and Humility Standard in partnership with the Health Standards Organization (HSO). We have also partnered with the Rupertsland Centre for Métis Research (RCMR) to develop Métis-specific health learning modules targeted towards healthcare providers, research partners, and service providers. We commit to identifying further opportunities to educate health system actors and service providers on Métis-specific health and collaborate with health system partners and other relevant authorities to promote and advocate for the adoption of this knowledge.

Action 3.4

Advocate for and Implement Person-Centred, Trauma-Informed, and Recovery-oriented Approaches

Trauma-informed care is another critical piece to improving Métis clients' experiences in the health system. It involves building healthcare provider awareness of how common trauma is, how it impacts development, the wide range of adaptations people make to cope and survive, and the relationship of trauma with substance use, physical health, and mental health concerns.²⁸ With this knowledge foundation, organizations and systems must emphasize safety and trustworthiness.²⁸ Physical and emotional safety for clients is vital to trauma-informed approaches and is established through welcoming intake procedures, exploring and adapting the physical space, providing clear information, and ensuring informed consent.²⁹ The needs of service providers are also considered within a trauma-informed service approach. Education and support related to vicarious trauma experienced by service providers is a crucial component.²⁸

Person-centred care means treating clients as individuals and equal partners in healing.²⁹ Like trauma-informed care, person-centred care emphasizes respect for the individual and collaboration between clients and providers.²⁹ This collaboration involves ensuring that clients have all the information available and are empowered to make their own decisions about their health.²⁹ It involves personalizing care planning

to ensure clients are listened to, treated respectfully, and empathized with.²⁹ It also involves expanding care providers' skills and attitudes, as person-centred care is a culture shift in how clients and providers work together.²⁹

Mental health recovery is described as living a satisfying, hopeful, and contributing life even within the limitations caused by illness.³⁰ Recovery-oriented practices focus on creating a culture and language of hope in the mental health system, recognize that recovery happens within the context of each person's life, seek to respond to the diverse needs of every person, and promote the need to transform systems and services with a primary focus on experiential knowledge.³¹

To advance these approaches, the MNA commits to advancing trauma-informed care, person-centred care, and mental health recovery at all levels of our work. Our staff will have access to ongoing training and support to incorporate these approaches into personal practice, program design, and program implementation. We also commit to promoting these approaches within our academic, government, and system partnerships and collaborations. We will use the principles from these approaches to improve the emotional and physical safety of MNA spaces, focusing on minimizing potential triggers, enhancing privacy, and creating calming atmospheres. We will also advocate for external partners to increase safety within their environments.

Additionally, we will support mental health recovery and trauma-informed practices by creating and advocating for peer support opportunities within the health system. This involves MNA-initiated peer support programs like ChangeCore for commercial tobacco reduction and advocating for peer support programs within Alberta Health Services. We commit to engaging existing peer support groups to understand how we can support and promote their initiatives and better implement our own.

We also commit to ongoing measurement and evaluation of our progress in advancing these approaches. We commit to sharing our advances in the MNA Annual Report, updates in our online resources and webpages, and highlights within our reports, research, and documents. We commit to collecting feedback from Métis Albertans on their experiences in the colonial health system and MNA health programs. By advocating for the systemic adoption of these approaches, we aim to ensure that Métis Albertans have the opportunity for choice, collaboration, and connection in their care that supports their sense of efficacy, self-determination, dignity, and personal control. This strategy commits the MNA to advocate for increased trauma-informed training for healthcare providers.

Action 3.5

Advocate for Health Benefits at the Federal Level

Métis Albertans have continued to voice their need for health benefits coverage. The First Nations and Inuit Health Branch (FNIHB) of Indigenous Services Canada funds and delivers community-based health promotion and disease prevention programs, home and community care, programs to control communicable diseases, and programs addressing environmental health issues overall.¹⁸ This funding excludes Métis peoples, and those that qualify for First Nations Status must give up their Métis citizenship to access these benefits. In MNA health research, lack of access to health benefits has contributed to health barriers, gaps, and poor cancer outcomes for Métis Albertans on a cancer journey.¹⁰ Currently, the federal government of Canada is negotiating with Métis governing bodies to develop distinctions-based legislation, and this strategy calls on the MNA to continue advocating for health benefits in line with First Nations and Inuit health benefits. Once attained, these health benefits will help address ongoing health disparities and the specific cultural or geographical needs of Métis Albertans, including coverage for prescription medication costs, vision care, dental benefits, medical transportation, medical supplies and equipment, and mental health counselling.20

The Path Ahead

As we conclude this strategy, we recommit the MNA to the vision and mission of strengthening Métis Albertans' connections to life. Our purpose is to ensure that their lives are filled with positive experiences; strong kinship relationships; connections to Métis culture, identity, and land; and that Métis Albertans have the support to be well across their entire life journey. Through this strategy, we have reflected on the Métis knowledge that has guided our way and the priorities Citizens of the Otipemisiwak Métis Government have for the future of the Métis Homeland. In embracing this strategy, we commit to creating partnerships across all areas of life that impact health and wellness. We will work to leverage our resources and relationships to enact the vision of this strategy through program delivery, service provision, academic research, and advocacy across all government institutions. We deeply thank you for reviewing this document and ask you to join us in promoting life across the Métis Homeland.



References

- The Government of the Métis Nation within Alberta. Otipemisiwak Métis Government Constitution [Internet]. Métis Nation of Alberta; 2022 Nov. [cited 2023 Sept 27]. Available from: <u>https://www.mnaconstitution.com/theconstitution</u>
- 2. Métis Nation of Alberta. Health Department [Internet]. Métis Nation of Alberta: 2023. [cited 2023 Sept 27]. Available from: https://albertametis.com/programs-services/health/
- Métis Nation of Alberta. What We Heard Developing a Life Promotion Plan for the Métis Nation of Alberta. [Internet]. Métis Nation of Alberta: 2023. [cited 2023 Sept 27]. Available from: <u>https://albertametis.com/app/uploads/2022/03/Suicide-Prevention-Report_V4.pdf</u>
- Métis Nation of Alberta. MNA Life Promotion Guide. [Internet]. Métis Nation of Alberta: 2022. [cited 2023 Sept 27]. Available from: <u>https://albertametis.com/app/uploads/2022/03/Life-Promotion-Guide-V5.pdf</u>
- Social Care Institute for Excellence. What is a strengths-based approach? [Internet]. Social Institute for Excellence; 2023. [cited 2023 Mar 20]. Available from: <u>https://www.scie.org.uk/strengths-based-approaches/</u><u>videos/what-is-sba</u>
- Anderson J, Perry J, Blue C, Browne A, Henderson A, Khan KB, Kirkham SR, Lynam J, Semeniuk P, Smye V. "Rewriting" cultural safety within the postcolonial and postnational feminist project: Toward new epistemologies of healing. Advances in Nursing Science. 2003 Jul 1;26(3):196-214.
- 7. Métis Nation of Alberta. Comprehensive Health and Wellness Centre Business Case. [unpublished business case]. Métis Nation of Alberta; 2022.
- Métis Nation of Alberta. Annual Report 2022/23 [Internet]. Métis Nation of Alberta; 2023. [cited 2023 Mar 20]. Available from: <u>https://albertametis.com/app/uploads/2023/09/AGA-Report-2023.pdf</u>
- Centers for Disease Control and Prevention. Introduction to program evaluation for public health programs: A self-study guide. US Department of Health and Human Services. Centers for Disease Control and Prevention. Office of the Director, Office of Strategy and Innovation, Atlanta. 2011.
- 10. Métis Nation of Alberta. Métis Nation of Alberta Compassionate Care: Cancer Transportation Program Evaluation Report [unpublished program evaluation]. Métis Nation of Alberta; 2023.
- 11. University of Toronto. Diversity equity and inclusion [Internet]. University of Toronto; 2019. [cited 2023 Mar 20]. Available from: <u>https://research.utoronto.ca/equity-diversity-inclusion/equity-diversity-inclusion</u>
- 12. Fox P. Indigenous Health Indicators [Internet]. The Alberta First Nations Information Centre; 2018 Apr. [cited Mar 20, 2023]. Available from: https://toolkit.climate.gov/tool/indigenous-health-indicators-tool
- Auger M, Howell T, Gomes T. Moving toward holistic wellness, empowerment and self-determination for Indigenous peoples in Canada: Can traditional Indigenous healthcare practices increase ownership over health and healthcare decisions?. Canadian Journal of Public Health. 2016 Jul;107:e393-8.
- United Nations. Indigenous People's Traditional Knowledge Must Be Preserved, Valued Globally, Speakers Stress as Permanent Forum Opens Annual Session [Internet]. United Nations; 2019 Apr. [cited Mar 20, 2023]. Available from: <u>https://press.un.org/en/2019/hr5431.doc.htm</u>
- Bourassa C, Billan J, Starblanket D, Anderson S, Legare M, Hagel MC, Oakes N, Jardine M, Boehme G, Dubois E, Spencer O. Ethical research engagement with Indigenous communities. Journal of Rehabilitation and Assistive Technologies Engineering. 2020 Jun;7:2055668320922706.

- United Nations. Indigenous peoples and the nature they protect [Internet]. United Nations: 2019 Sept. [cited Mar 20, 2023]. Available from: <u>https://www.unep.org/news-and-stories/story/indigenous-peoples-and-nature-they-protect</u>
- 17. Browne AJ, Varcoe C, Lavoie J, Smye V, Wong ST, Krause M, Tu D, Godwin O, Khan K, Fridkin A. Enhancing healthcare equity with Indigenous populations: evidence-based strategies from an ethnographic study. BMC health services research. 2016 Dec;16:1-7.
- 18. Métis Nation of Alberta. Virtual Care Business Case [unpublished business case]. Métis Nation of Alberta; 2022.
- 19. Métis Nation of Alberta. Opioid report [Internet]. Métis Nation of Alberta. [cited Mar 20, 2023]. Available from: https://albertametis.com/app/uploads/2022/05/Opiods-Inforgraphic.pdf
- 20. Government of Canada. Benefits and services under the non-insured health benefits program [Internet]. Government of Canada; 2022 Sept. [cited 2023 Sept 27]. Available from: <u>https://www.sac-isc.gc.ca/eng/15725</u> <u>45056418/1572545109296</u>
- 21. National Aboriginal Health Organization. Principles of Ethical Métis Research [Internet]. National Aboriginal Health Organization. [cited Sept 27, 2023]. Available from: <u>https://ruor.uottawa.ca/bitstream/10393/30555/1/2011_04_ethics.pdf</u>
- 22. Government of Alberta. Substance Use Surveillance Data [Internet]. Government of Alberta. [cited Mar 20, 2023]. Available from: https://www.alberta.ca/substance-use-surveillance-data Curtis E, Jones R, Tipene-Leach D, Walker C, Loring B, Paine SJ, Reid P. Why cultural safety rather than cultural competency is required to achieve health equity: a literature review and recommended definition. International journal for equity in health. 2019 Dec;18(1):1-7.
- 23. Métis Nation of Alberta. How do Métis Albertans Experience Health Engagement Report [unpublished community engagement report]. Métis Nation of Albert; 2022.
- Government of Canada; Indigenous Services Canada. First Nations Mental Wellness Continuum Framework -Summary Report [Internet]. Government of Canada; Indigenous Services Canada. 2015. [cited 2023 Sept 27]. Available from: <u>https://www.sac-isc.gc.ca/eng/1576093687903/1576093725971</u>
- 25. Métis Nation of Alberta. Alberta Métis Cancer Strategy [Internet]. Métis Nation of Alberta; 2023. [cited Mar 20, 2023]. Available from: <u>https://albertametis.com/app/uploads/2023/04/Alberta-Metis-Cancer-Strategy.pdf</u>
- 26. Rankin A, Baumann A, Downey B, Valaitis R, Montour A, Mandy P. The role of the indigenous patient Navigator: a scoping review. Canadian Journal of Nursing Research. 2022 Jun;54(2):199-210.
- 27. First Nations Health Authority. FNHA's Policy Statement on Cultural Safety and Humility. First Nations Health Authority. [cited Mar 20, 2023]. Available from: <u>https://www.fnha.ca/Documents/FNHA-Policy-Statement-Cultural-Safety-and-Humility.pdf</u>
- 28. Poole N. Essentials of trauma-informed care. Ottawa, ON: The Canadian Network of Substance Abuse and Allied Professionals. 2012.
- 29. Coulter A, Oldham J. Person-centred care: what is it and how do we get there?. Future hospital journal. 2016 Jun;3(2):114.
- Slade M, Amering M, Farkas M, Hamilton B, O'Hagan M, Panther G, Perkins R, Shepherd G, Tse S, Whitley R. Uses and abuses of recovery: implementing recovery-oriented practices in mental health systems. World psychiatry. 2014 Feb;13(1):12-20.
- 31. Chodos H, d'Auteuil S, Martin N, Raymond G. Guidelines for recovery-oriented practice: Hope. dignity. inclusion. Mental Health Commission of Canada. 2015.





Otipemisiwak Métis Government · Health Department Delia Gray Building · 11738 Kingsway Avenue · Edmonton 780-455-2200 · 1-877-454-0684 · albertametis.com

(† 🙆 🛞 in 🖸 🕑