



CONNECTING TO CULTURE: SUSTAINING OUR WELLNESS

THE CREATIVITY AND PERSEVERANCE OF FIRST NATIONS
IN BC DURING THE COVID-19 PANDEMIC

*Howe Sound,
Musqueam, Squamish and Tsleil-Waututh Territories*

VANCOUVER COASTAL REGION

May 2023



First Nations Health Authority
Health through wellness



ACKNOWLEDGEMENTS

The First Nations Health Authority (FNHA) recognizes the profound and numerous ways the COVID-19 pandemic has affected First Nations in British Columbia (BC), collectively and individually. The well-being and safety of First Nations during the pandemic was made possible by the valuable contributions, innovations and leadership of community leaders, health professionals and staff whose unfaltering work provided support and care to ensure the protection and preservation of their communities.

This report was prepared by the FNHA Evaluation Team and Qatalyst Research Group, with input from First Nations in BC. The learnings, perspectives and experiences shared in this summary report came from engagements with 17 dedicated Chiefs, Leaders, Health Directors and community health professionals in the Vancouver Coastal region. Eleven community representatives were engaged during a virtual focus group held on January 25, 2023. One-on-one engagements were undertaken with six representatives at the Vancouver Coastal Region Fall Caucus in November 2022. The report also draws on stories shared by community leads in selected online news articles.

The FNHA wishes to honour the time and expertise of these community representatives who contributed.

EXECUTIVE SUMMARY

FINDINGS

Communities in the Vancouver Coastal Region came together to protect community safety and well-being during the COVID-19 pandemic. First Nations governments worked collaboratively with one another and partners to plan, mobilize resources, and undertake successful response efforts. These positive working relationships enabled a proactive approach to the pandemic response. Community leadership and health staff worked extensive hours, demonstrating agility and resilience. The Nations' accomplishments and increased self-sufficiency are a source of pride for leaders, health staff, and community members.

Communities implemented diverse measures to reduce viral transmission. They established checkpoints to promote physical distancing and restricted traffic flow in and out of communities to reduce exposure. Members who needed to self-isolate were able to do so by using community amenities, hotels, and other venues where they received food and other essential goods. Some communities recruited new staff to support response efforts and, in all communities, existing staff were redeployed for the cause.

Once vaccines were available, communities stood up vaccine clinics and coordinated the vaccination of all members, including those in community and away-from-home. Communities set up vaccine clinics in culturally safe and appropriate environments so that members would feel comfortable when receiving their vaccine. Health nurses administered doses at the health centre or in community members' homes.

Communities used innovative approaches to disseminate information among their members and address uncertainty and misinformation. Leadership and health staff condensed critical information into one-pagers and infographics, while Chiefs used social media to speak directly with community members. Community members were reassured by the direct communication from leadership.

Early in the pandemic, communities experienced significant delays with COVID-19 test results, which hindered prompt community health responses to prevent further spread. The implementation of community-based testing equipment, and the eventual increased availability of self-administered rapid tests, helped to overcome these challenges. Communities worked in partnership with the FNHA and the Province of BC to address privacy legislation barriers that prevented communities from receiving positive case notifications.

Communities developed innovative approaches to support service continuity, such as offering services online or by telephone, conducting limited in-person services with new safety protocols, and expanding and adjusting the roles of health team members. Some health centres chose to go fully virtual while others remained open at reduced capacity. The transition to virtual services has enabled members living away-from-home to access community health and wellness services both during the pandemic and after restrictions were lifted.

Communities mobilized efforts to provide food, medication, and basic supplies to as many members as possible and ensure that the needs of the most vulnerable were met. Using strategies such as grocery delivery services, gift cards, and a communal pantry, communities overcame food shortages and also encouraged food sovereignty through traditional hunting, fishing and gathering.

Nations sustained vital community connections and social ties by supporting the inclusion of members, particularly Elders, in online activities through the provision of iPads and training. Targeted outreach programming for Elders was also stood up to reduce social isolation. Community gardening programs helped build connections between members while encouraging food sovereignty and exchange of traditional knowledge.

Communities experienced a lack of closure and unresolved grief due to the inability to hold wakes and funerals amidst COVID-19 restrictions on large gatherings. Since then, some communities have held Potlaches to honour those who passed during the pandemic. Others look forward to organizing events to bring members together and support collective healing.

Cultural practices and traditions played an important part in sustaining the well-being of individuals, families and communities during the pandemic. Determined not to have ceremony and culture go dormant during lockdown, communities came together to participate in drumming, singing, language classes, and arts and crafts workshops. The events and activities were organized virtually or in-person using safe physical distancing practices. When pandemic restrictions lifted, communities gathered in-person for ceremonies, games, and cultural workshops.

CONCLUSION

First Nations communities in the Vancouver Coastal Region demonstrated remarkable collaboration, coordination, and proactive approaches in response to the pandemic. Their achievement of self-sufficiency during this difficult time stands as an important accomplishment deserving of recognition. Community response efforts effectively

minimized exposure, curbed viral transmission, and provided support to affected members, while sustaining community and individual well-being. Through creative solutions, communities ensured food security, essential supplies, and service continuity through the use of virtual health services. Leadership, health teams and community members recognized the importance of maintaining culture and tradition, making concerted efforts to continue these practices with appropriate safety measures. The collective strength, resilience, and self-sufficiency demonstrated by the communities are likely to have a lasting, positive impact on their ability to overcome future challenges.

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INTRODUCTION

Between November 2022 and April 2023, the FNHA undertook a strengths-based review of the experiences of First Nations community leadership, health leads and staff during the COVID-19 pandemic response. The review sought to complement other COVID-related after action reviews and research studies and ensure the perspectives and voices of First Nations communities are highlighted in the pandemic learnings.

This review aims to uplift the voices of First Nations communities to acknowledge achievements in adaptation, innovation and wisdom gained, and support ongoing learning, planning, community wellness, and healing.

This review draws from provincial focus groups, optional regional and sub-regional focus groups, an online survey, and a media scan. Unless referenced with a media link, the findings stem from discussions with community representatives.

Trigger Warning

Some content in this review may be sensitive content and could be triggering. For crisis support please contact the KUU-US Crisis Line at 1-800-588-8717 or visit the FNHA's website for [additional support services](#).

FINDINGS

The following sections offer learnings and experiences shared by community contributors, organized into themes.

SUPPORTING ONE ANOTHER

Communities in the Vancouver Coastal Region came together to protect community safety and well-being during the COVID-19 pandemic. First Nations governments worked collaboratively with one another and partners to plan, mobilize resources, and undertake successful response efforts. These positive working relationships enabled a proactive approach to the pandemic response. Community leadership and health staff worked extensive hours, demonstrating agility and resilience. The Nations' accomplishments and increased self-sufficiency are a source of pride for leaders, health staff, and community members.

Community representatives described how First Nations communities in the Vancouver Coastal Region came together to ensure the safety and well-being of their members during the pandemic. Leaders rose to the occasion by coordinating planning and response activities and mobilizing resources across different branches of First Nations governments. Teamwork and collaborative problem-solving contributed to proactive leadership. Community leaders and staff demonstrated resiliency and adaptability, working around the clock to support an effective pandemic response.



Lorenzo Ruiz-Dixon, #Vaxchamps,
Heiltsuk First Nation

“Our people weren’t ready but they worked together and stood the challenge. First of all, I must state I lived through the pandemic, and that’s going to be part of my history now. Secondly, if there was ever a time [that] our tribes needed to work together, especially here in the urban area, that time was during the pandemic.”

One staff member praised the work of Squamish Nation leadership for mobilizing the pandemic response immediately and adapting based on the situation as it unfolded.

“All the departments were involved, planning with the Health Director and working with Vancouver Coastal Health. How we are going to get food to people, isolation packages to people? How we are going to manage fear, closing down the different villages, and getting signs up right away?”

Community health staff took pride in their leadership’s dedication and commitment, which, in turn, inspired them to work harder to serve their members. Overall, the pandemic response demonstrated the collective strength and resilience of the First Nations in the region. Representatives described feeling empowered and self-reliant as a result of their collective efforts. The Nations’ self-sufficiency was highlighted as a source of pride and an important achievement that would support them in future emergencies and hardships.

“Our Chief and the team that came together were really good at accessing the support for [the] community by working together. They worked around the clock. I really hold my hands up to them.”

“I am not a Health Director. I am not a director of any department but I worked the frontline of it, and I feel like they just did a fantastic job. I was proud to be a part of it.”

One representative said that the pandemic reinforced the idea that First Nations communities need to be self-reliant.

“We have to rely on each other... to fend for ourselves. We have to grow our own fruits and vegetables, be able to live off our land, and be able to manage our resources.”

Community members also demonstrated resilience, initiative and collective strength. They worked together to address the impacts of the pandemic and prevent further viral spread. Members volunteered time to support others' well-being and safety. For example, Squamish Nation implemented a ninja program. Volunteers dressed as ninjas (i.e., all in black and masked) and stealthily visited community members to drop off care packages containing drinks, snacks, gadgets and other items. The program encouraged good deeds while maintaining physical distancing requirements.¹

PREVENTING VIRAL SPREAD

Communities implemented diverse measures to reduce viral transmission. They established checkpoints to promote physical distancing and restricted traffic flow in and out of communities to reduce exposure. Members who needed to self-isolate were able to do so by using community amenities, hotels, and other venues where they received food and other essential goods. Some communities recruited new staff to support response efforts and, in all communities, existing staff were redeployed for the cause.

Early in the pandemic, community leadership's collaborative and proactive approach to communication, masking, remote work, and closing down communities was key to curbing viral spread. These efforts were put into place before public health orders.

“I think the communication piece for me was one of the biggest learnings, collaboration between different teams, and everybody pulling on one string and understanding [the] severity of the situation. We were very proactive actually in closing down the community, starting to wear masks before it became a health order.”

For example, the Nuxalk Emergency Operations Centre (EOC) worked together with the Fire Department and Guardian Watchmen to set up an information checkpoint that monitored and disseminated COVID-19 community protocols. The checkpoint also actively promoted

¹ <https://www.fnha.ca/wellness/community-wellness/good-medicine/community-stories>

awareness of self-isolation and social distancing measures. The Nation's Hereditary Chiefs expressed support for frontline workers and urged the community to take the pandemic seriously. The EOC focused on sharing information and providing support to self-isolating individuals that was in accordance with health professionals' guidance.²

To prevent viral spread and reduce the risk of exposure, communities quickly established checkpoints—some of which were met with resistance. Communities advocated for retaining the checkpoints, while also addressing racism and prejudice in the process. One contributor described having to escalate the concerns about the importance of keeping the checkpoints to the provincial government:

"We had managed to meet with [the] Premier and the Health Minister, Adrian Dix, and his team, and tell them our concern...[In the process] we opened up a Pandora's box of racism, which is always there...There were a lot of respectful people but there was actually an RCMP that just drove right through...[We were] Just trying to protect our elderly, our most vulnerable."

Contributors shared that protecting communities also required making sacrifices and tough decisions. Residents, businesses, and families were especially impacted by the restrictions around traffic flow into communities, which were aimed at curbing viral spread. For example, the adjusted medevac rules restricted families from travelling together for medical appointments. As one contributor described:

"[We implemented] two policy changes, one was about medevac patients, where if a child was medevacked, no parents would be able to attend with them or travel with them."

Some communities created safe isolation spaces for those exposed to the virus by leveraging community amenities, hotels, or other venues. They also provided food, care, and necessities for the isolating members. One contributor described their experience of the isolation support at a hotel:

"When I got COVID, I was sent to a place called the Travel Lodge on Capilano Road by our memberships' services department. They separated us and kept me there for 14 days. The Travel Lodge was being utilized as a safe haven for people who were [affected by] the virus, and there were other places being utilized as well [...] I'm grateful there was something like that our people had as an option."

² <https://www.coastmountainnews.com/news/covid-19-community-working-to-address-threat-road-closures-not-supported-by-province/>

Communities also hired community liaisons and other contracted health staff to support response efforts. Although their roles and responsibilities varied across communities to match local needs, contributors shared that having dedicated staff members helped significantly. One Nation reported using COVID-19 funding to hire a community health representative who was well-received by the community.

*"I think our community really needed a core contact person for any questions, queries, or concerns they had in general around the COVID-19 pandemic, [or] vaccinations."
"She was boots on the ground, working alongside our public health nurses here. She supported in coordinating our COVID clinic. She was the main contact for [the] vaccine drop-off for Coastal Health. She was our main contact for the FNHA for ordering medical supplies and PPE. She also supported [us] with grocery shopping and contactless drop-off."*

As part of the rural paramedicine program, the Nuxalk First Nation expanded the role of their community paramedic to support the local health team beyond local emergencies, such as offering house calls for COVID-19 testing.³

Once vaccines were available, communities stood up vaccine clinics and coordinated the vaccination of all members, including those in community and away-from-home. Communities set up vaccine clinics in culturally safe and appropriate environments so that members would feel comfortable when receiving their vaccine. Health nurses administered doses at the health centre or in community members' homes.

Health Directors and nurses were actively involved in the organization of COVID-19 vaccination campaigns. They were determined to reach all community members, including urban and away-from-home members. Council members and community health teams also used the Facebook Live platform to provide



³ <https://www.coastmountainnews.com/news/bella-cooolas-community-paramedic-can-now-test-people-for-covid-19/>

updates and information about masks, vaccination efforts, and contact tracing.

“There was a lot of Facebook Lives from Council with updates and trying to really put out sort of information on why we are wearing masks.”

Tsleil-Waututh Nation celebrated a step towards their goal of community immunity after all their members received their first COVID-19 vaccination. The Nation used a “whole community” approach to vaccinations, which contributed to having low cases. All total of 681 people, including Elders, essential workers, those living away-from-home and others, received their first dose over three vaccination clinics. The clinics not only supported successful vaccinations, but also fostered a sense of joy and relief among community members, especially Elders. The clinics were also a positive experience for the Vancouver Coastal Health staff who were honoured with traditional blankets as a gesture of gratitude for their hard work and dedication.⁴

“When we had the Elders clinic, it was the first time a lot of them have seen each other in a year, so to be able to be in a room together was really quite moving, and you could really feel it in the air and there was a lot of laughter and just joy in being in one another's company”⁵

Andrea Aleck, Health Director, Tsleil-Waututh Nation

“It was really important that we created a sense of safety and security and provided a culturally appropriate environment for our community members to receive the vaccination without any sort of discrimination or racism. When we create that space, that opportunity in their own environment, and they know that they're going to be cared for, and respected and treated with dignity, then we're going to have more positive outcomes.”⁶

Andrea Aleck, Health Director, Tsleil-Waututh Nation

ADDRESSING MISINFORMATION AND UNCERTAINTY

Communities used innovative approaches to disseminate information among their members and address uncertainty and misinformation. Leadership and health staff condensed critical information into one-pagers and infographics, while Chiefs used

⁴ <https://www.nsnews.com/coronavirus-covid-19-local-news/pure-joy-tsleil-waututh-nation-steps-toward-covid-19-community-immunity-north-vancouver-3587188>

⁵ <https://www.nsnews.com/coronavirus-covid-19-local-news/pure-joy-tsleil-waututh-nation-steps-toward-covid-19-community-immunity-north-vancouver-3587188>

⁶ <https://www.nsnews.com/coronavirus-covid-19-local-news/pure-joy-tsleil-waututh-nation-steps-toward-covid-19-community-immunity-north-vancouver-3587188>

social media to speak directly with community members. Community members were reassured by the direct communication from leadership.

Contributors described that there was a lot of conflicting information being shared at the beginning of the pandemic, which led to confusion, fear, and information overload. One contributor shared the frustrating experience of being in lockdown while awaiting information from authorities:

"[There was] lots of confusion about the news and fake news. During 'lock-down' [we] felt like prisoners. [We] felt betrayed, being in lockdown while waiting for information to come in. It was coming in, but not fast enough. We were overwhelmed and frustrated."

The First Nations communities in the Vancouver Coastal Region developed a range of innovative plans to address misinformation and fear. The Chiefs and health staff carefully strategized their messaging and communication to provide accurate and concise information without contributing to confusion and information overload.

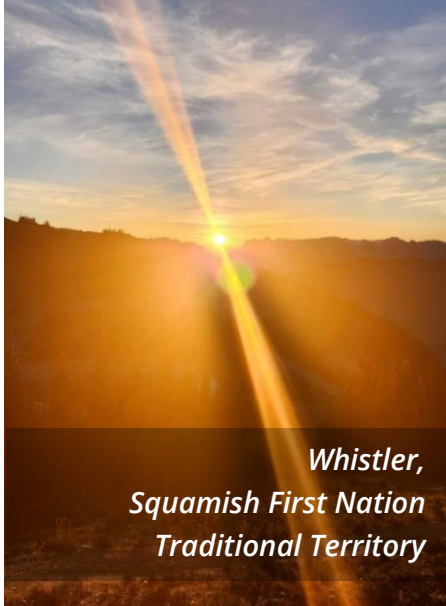
"It was really a fine balance of knowing what to share versus what not to share, what would be accused of fearmongering."

"I think it was amazing, given the fear, the lack of reporting and communication from different places, and the information about COVID itself, which was shifting rapidly like the Delta [variant] coming in. Then Omicron, and constant changing variants, and people not understanding why are you isolating for 14 days if you're a contact of a household member that has COVID."

In several communities, Chiefs regularly uploaded videos to social media where they would directly address their members. In addition to providing information, these videos helped address uncertainty and anxiety as community members found this method of communication from leadership reassuring.

"[The pandemic] and closing of the community caused fear. What I found really helped was sometimes, I would prepare a one-page of information, and then [our Chief] would actually make a video, so the information would come from them directly, which had a much better effect than if it would've come from in writing."





Whistler,
Squamish First Nation
Traditional Territory

"I provided video updates on social media. These updates calmed the community members down because they were really scared. I gave weekly updates about cases, [the] newest information to keep people informed. In the updates, I tried to promote safety. I just sat and either my wife or my executive filmed to record the updates. I talked about how it spreads and how to keep [us] safe. I thought that there would be backlash, but the feedback was very positive from our community, and also other communities."

Health staff created concise and visually-appealing infographics and one-pagers that were more inviting for community members to read.

"That type of communication was important. It would have graphics, one-pagers [and] very brief updates, not pages and pages of health orders because nobody would look at them, and they were scary."

Contributors expressed their appreciation for the FNHA's support throughout the response efforts. This support included coordination, information sharing, offering guidance upon request and connecting with the communities:

"I was grateful to see that. I was grateful to hear from other tribes that they were also interacting with the FNHA. I guess the FNHA was the kind of the relay in some aspects and regards, in terms of information being shared, where there was coordination that was occurring. That connected all three tribes, whether directly or indirectly."

IMPROVING TESTING AND NOTIFICATION

Early in the pandemic, communities experienced significant delays with COVID-19 test results, which hindered prompt community health responses to prevent further spread. The implementation of community-based testing equipment, and the eventual increased availability of self-administered rapid tests, helped to overcome these challenges. Communities worked in partnership with the FNHA and the Province of BC to address privacy legislation barriers that prevented communities from receiving positive case notifications.

Some communities faced significant delays in receiving test results, which hindered their community health response efforts to prevent further spread. With support from the FNHA and federal and provincial partners, several community health centres, such as Kitasoo Nursing Station, Nuxalk Health Centre, and Lil'wat Health & Healing Centre, received GeneXpert devices to conduct in-community PCR (polymerase chain reaction) testing for COVID-19, which supported quicker turnaround times and more culturally appropriate testing. The GeneXpert devices have the potential to provide long-term benefits for the communities. They can test for a range of infectious diseases with high sensitivity once they are properly set up and integrated.

When self-administered rapid tests became available, their distribution proved to be beneficial for all communities. To increase access to the tests, Tla'amin Nation operated a drive-thru rapid test pick-up service. Through this service, anyone in the Tla'amin Territory, with prioritization for Elders, could pick up one kit per household while remaining in their vehicle.⁷

Medical staff identified that finding a balance between timely action and patient confidentiality was critical. While it was necessary to respond to positive cases and conduct proper contact tracing, disclosing an individual's COVID-19 status violated provincial privacy laws. To address this issue, communities worked with the BC government to establish a system that provided information about positive cases without disclosing identifiable information. Additionally, the communities implemented holistic contact tracing approaches that ensured anonymity.

"When there was a small cluster of members [with COVID], I got pulled in because I knew a lot of the families. I ended up doing contact tracing and working with multiple bands across the VCH [Vancouver Coastal Health] Region and stayed there for about 8 months. I got to see other responses too. I think it was amazing, given that the information was changing by the hour, sometimes every 15 minutes, and seeing different community responses. It was all in."

SUPPORTING SERVICE CONTINUITY

Communities developed innovative approaches to support service continuity, such as offering services online or by telephone, conducting limited in-person services with new safety protocols, and expanding and adjusting the roles of health team members. Some health centres chose to go fully virtual while others remained open at reduced capacity. The transition to virtual services has enabled members living

⁷ <https://www.tlaaminnation.com/rapid-test-pick-up/>

away-from-home to access community health and wellness services both during the pandemic and after restrictions were lifted.

The pandemic increased the need for health services and mental health and wellness supports while reducing health staff's ability to deliver programs and services. Communities developed innovative approaches to support service continuity, including transferring many of their existing services to online or telephone delivery and conducting limited in-person services with new safety protocols. Some health centres chose to go fully virtual, while others remained open at reduced capacity. For example, the Musqueam Nation Health Department maintained its home care services for Elders and those discharged from the hospital.⁸

"The former Health Director for Musqueam worked hard to keep services moving during COVID closures. [The] Musqueam health department moved to virtual meetings via Zoom. Mental health [programming] moved to phone and virtual supports. Some health support groups met via group invitations using Facebook Messenger. We used an iPad loan-out service for those clients without computers or smartphones. Cultural knowledge sharing and songs were presented to community via Facebook Live."

"We stayed open. I know a lot of health centers did not. There were very strict guidelines but we still did baby visits, provided immunization clinics, and had the primary care clinic. Obviously, with big restrictions, and signing in and out, and only a certain amount of people in the building at the same time. Those that could work virtually, worked virtually, but our health center remained open and accessible for anyone who needed that support."



Contributors suggested that access to online health services helped to expand coverage to away-from-home members. Once the pandemic restrictions were lifted, health staff continued to deliver some programs virtually (e.g., prenatal) so that they could continue to support members living outside of the community:

"The other thing that went virtual was the prenatal group and it's actually stayed virtual. The nurse that does prenatal [...] she provides it virtually to those that are

⁸ <https://fnhda.ca/2020/05/26/musqueam-health-department-wise-practices/>

Squamish Nation on the North Shore but also up in the Squamish Valley. It's kind of cool because, that way, everybody is getting the same opportunity to attend. It's a way for folks to meet each other whether or not they live here or Squamish Valley. Lots of things went virtual, which was great."

Despite the advancements in virtual services, one community representative noted how restricted access to services has negatively impacted members' health.

"Moving now into catch-up, and seeing all the chronic conditions that didn't get seen at that time...We would even see doctors [that] weren't seeing people. Some doctors are still not seeing people. They are still [only] seeing them by Zoom. I feel like that's really impacting the health of members, and members of other bands as well."

SUPPORTING COMMUNITY MEMBERS

Communities mobilized efforts to provide food, medication, and basic supplies to as many members as possible and ensure that the needs of the most vulnerable were met. Using strategies such as grocery delivery services, gift cards, and a communal pantry, communities overcame food shortages and also encouraged food sovereignty through traditional hunting, fishing and gathering.

Quarantine, self-isolation, and stay-at-home orders negatively impacted many community members' ability to meet their basic needs, particularly Elders and those with pre-existing medical conditions that increased their susceptibility to COVID-19. In response, communities purchased and supplied food, medication, and essentials to as many members as possible.

Squamish Nation, for example, developed an extensive COVID-19 support program. The program encompassed the physical, mental, spiritual, emotional, and economic well-being of its people with a focus on providing additional supports for those who were most vulnerable. These included regular grocery delivery services for members living in community, a communal pantry for those in need of extra groceries, and distribution of packages to members living in the Squamish Valley and North Vancouver area.⁹ The Musqueam Nation Health Department also



⁹ <https://www.squamish.net/wp-content/uploads/2022/07/SN-COVID-19-Report-to-March-2022.pdf>

provided regular food deliveries for in-community members and gift cards for members who lived away-from-home.¹⁰

In some barge-access communities, members hunted and fished to supplement food supplies and support food security amid shipment delays and cancellations. The Fire Chief of Tla'amin Nation described that the community spoke with conservation officers and Indigenous Services Canada (ISC) to obtain ammunition to support hunting and fishing outside of normal hunting seasons:

“Food security was another huge issue. We are barge-dependent, so we had only four days’ worth of food available in community. People in Richmond got sick, so there was no food coming to community. We emptied the freezers. Went elk hunting, prawn harvesting, and halibut fishing. Applied to ISC for boat gas and bullets to go hunting, fishing, and harvesting. That was a first. ISC had never paid for bullets before. Also told conservation officers that we will be hunting out of season, because we needed food for the community.”

MAINTAINING COMMUNITY CONNECTIONS

Nations sustained vital community connections and social ties by supporting the inclusion of members, particularly Elders, in online activities through the provision of iPads and training. Targeted outreach programming for Elders was also stood up to reduce social isolation. Community gardening programs helped build connections between members while encouraging food sovereignty and exchange of traditional knowledge.

For some Elders and community members, the pandemic necessitated their first experience using the Internet. Some Nations provided Elders with technology (e.g., iPads) and training to ensure they could participate in virtual cultural and other social activities to sustain connections with each other, their families, and their wider community.

“Lots of things went virtual, which was great. The person in charge at the Elder’s centre was helping those Elders that needed help with using the technology.”

“It was almost just by way of intuition, where the majority of us knew that we had to start implementing things like teaching Squamish language, singing songs, and whatever else related to Squamish language or Squamish culture virtually for people.”

The Squamish Nation hired three outreach workers who visited Elders and distributed

¹⁰ <https://fnhda.ca/2020/05/26/musqueam-health-department-wise-practices/>

activity bundles to help break their isolation.¹¹ One contributor described how they went door-to-door singing songs to Elders and how they persuaded them to join in community initiatives:

“Some of us went to houses and sang outside for our Elders. We went right to their front yard and sang. Just trying to get in where we were able to fit in and exercise any kind of measures that we could at the time.”



During the pandemic, over 68 families in the Heiltsuk First Nations communities started gardens to boost morale and strengthen spirits. The Nation’s Council organized the Granny Gardens program, which provided seedlings for families to reclaim food sovereignty by growing vegetables, fruits, beans, and herbs.¹²

“It’s very therapeutic to work in the garden. I also love the connection that Granny Gardens has made between community members. It’s amazing to see gardens being built, and people talking about what they’re going through on the Facebook page.”¹³

Kimberly Windsor, Community Member

“There’s still that knowledge embedded in the community, and I value the opportunity to boost that knowledge right now. Survival and surviving epidemics is in our genes. We’re all descendants of the [...] Heiltsuk people who survived smallpox and influenza. Many people are adopting this work, not because they want to grow carrots and peas,

¹¹ <https://www.squamish.net/wp-content/uploads/2022/07/SN-COVID-19-Report-to-March-2022.pdf>

¹² <https://www.nationalobserver.com/2020/05/16/heiltsuk-community-planting-hope-during-pandemic-granny-gardens-project>

¹³ <https://www.nationalobserver.com/2020/05/16/heiltsuk-community-planting-hope-during-pandemic-granny-gardens-project>

but because it makes them feel more connected to the ancestors and their plant knowledge — that's always helped us survive and thrive.”¹⁴
Jess Housty, Heiltsuk Nation Councilor

In 2020, travel restrictions provided the Kitsoo/Xai'Xais First Nation with a unique opportunity to collaborate with a research team and examine the impact of tourism on grizzly bears in their region. Through the use of 40 infrared cameras, the study analyzed behaviour patterns during the absence of tourists. The results of this research will help the Nation to formulate a sustainable management plan for a conservation-based economy. The scientific team commended the Nation's investment and interest in the research program, despite the uncertainties brought about by the pandemic.¹⁵



HONORING LOSSES AND ACKNOWLEDGING SACRIFICES

Communities experienced a lack of closure and unresolved grief due to the inability to hold wakes and funerals amidst COVID-19 restrictions on large gatherings. Since then, some communities have held Potlaches to honour those who passed during the

¹⁴ <https://www.nationalobserver.com/2020/05/16/heiltsuk-community-planting-hope-during-pandemic-granny-gardens-project>

¹⁵ <https://www.campbellrivermirror.com/news/a-b-c-first-nation-harnessed-its-covid-19-lockdown-to-research-tourisms-impact-on-bears-1498568>

pandemic. Others look forward to organizing events to bring members together and support collective healing.

Contributors expressed their sorrow over the inability to gather for Potlatch or honour the dead in traditional ways. For many, the absence of these rituals meant they could not find the closure they needed to properly bid farewell to their loved ones.



During the pandemic, we lost a lot of membership [both] related and unrelated to the pandemic, and we weren't able to honour them in our traditional ways. It will be a really good time to celebrate [lives] that were lost in the form of Potlatch."

"Shortly after the pandemic, I went to our grave site. I was absolutely blown away because I saw names on there that I kept looking for because we didn't practice our ways we usually honour and deal with deaths."

"We need closure, and it will be really nice if we can support something like that. We practice Potlatch here in Nuxalk and many of the Coastal Nations do practice that. I think it'll be something cool if there is a way we can gather all our Nations, or even in my community, to celebrate and honour those who have passed."

While several communities are still hoping to organize gatherings and ceremonies to honour lost members and support their loved ones, some communities have already organized such events. In 2021, multiple departments within the Squamish Nation planned a large-scale post-pandemic event that provided healing, wellness, and grief and loss support. The event included physical healing services (e.g., acupuncture, massage, reflexology, reiki) and spiritual healing through traditional activities (e.g., drumming, cedar weaving, storytelling).¹⁶

MAINTAINING TRADITIONAL AND CULTURAL PRACTICES

Cultural practices and traditions played an important part in sustaining the well-being of individuals, families and communities during the pandemic. Determined not to have ceremony and culture go dormant during lockdown, communities came

¹⁶ <https://www.squamish.net/wp-content/uploads/2022/07/SN-COVID-19-Report-to-March-2022.pdf>

together to participate in drumming, singing, language classes, and arts and crafts workshops. The events and activities were organized virtually or in-person using safe physical distancing practices. When pandemic restrictions lifted, communities gathered in-person for ceremonies, games, and cultural workshops.

The pandemic restrictions on in-person events and activities impacted how Nations and communities engaged in cultural practices. Community representatives highlighted that the historical suppression of their cultural traditions during the Potlatch ban strongly motivated them to uphold their culture and traditions throughout the pandemic.

“We knew in our hearts, we can’t just let the culture just go disappearing underground again, like it once did during the Potlatch ban. It was natural for a lot of us to instinctively go virtual with our gifts. There wasn’t much planning or coordinating that had to occur. We just knew we had to do it.”

Communities adapted to the restrictions by hosting virtual cultural events and arranging some outdoor gatherings with proper safety precautions. These cultural events encompassed a range of activities, including language classes, storytelling sessions, drumming and singing circles, and arts and crafts workshops. These events attracted community members from all backgrounds and ages, including children, youth, and Elders.

“When COVID came around, instead of taking culture underground, it went virtual! There was a portion of people that were kind of going around and doing basement singing as well. Family members would sing for family members.”

“People reached out to me more than once during the time when we were on lockdown, asking for virtual guidance to share some good words of advice of our old people, share stories of our history, sharing mythical stories, legends of our Squamish people.”

“That was challenging for sure. We did a lot of outdoor events, really practicing social distancing, masked up, and gathered us with all those precautions that were imposed on us.”

“Our Wellness team was delivering cultural crafts to family households, so families can learn how to weave those little hearts or woven baskets, and beading projects. I think that was a great way to maintain the cultural well-being and healing at home.”

“There were family groups and babies and toddlers, and they could drum and sing with Elders, have somebody there that helps with language and teaching them words.”

They have snacks and sing and play. Now, that's not [only] youth but for also five-and-under. That was really amazing."

Contributors also highlighted a renewed interest in the teaching and learning of Indigenous languages amid the pandemic. One contributor shared their experience with organizing virtual language classes and using apps like the one developed by First Voices¹⁷ that translate English into Indigenous languages:

"When we had our virtual language class, we also had an app. If you want to look up a word, you can type it either in English or Shuswap, and it'll give you the meaning of it."

Once restrictions were lifted and gatherings of small groups were allowed, some communities hosted in-person community wellness workshops. For example, the Squamish Nation organized drum-making workshops as a way to teach traditional songs and provide holistic healing through immersion in Squamish culture.¹⁸



*Ta na wa Ns7éyxnitm ta Snewíyelh
Drum-making, Sxwimálawtxw*



*Ta na wa Ns7éyxnitm ta Snewíyelh
Drum-making Participants, Sxwimálawtxw*

In March 2022, the hereditary chiefs of the Nuxalk Nation organized a large feast for the first time since the pandemic began and 230 community member participated.

"You could see the eyes of our people and they were just quite amazed ... their spirits were up. Everybody's eyes were on the dancers and the singers, that's how powerful it was."¹⁹
Snuxyaltwa (Deric Snow) Nuxalk Hereditary Chief

¹⁷ <https://www.firstvoices.com/>

¹⁸ <https://www.squamish.net/wp-content/uploads/2022/07/SN-COVID-19-Report-to-March-2022.pdf>

¹⁹ <https://www.coastmountainnews.com/news/nuxalk-hereditary-chiefs-host-feast-in-bella-coola/>

During the feast, the Chiefs discussed a letter requesting the return of Nuxalk sacred treasures from the Royal BC Museum and paid tribute to a retiring BC Ambulance Service member, highlighting the Nation's commitment to cultural heritage preservation and community member recognition.²⁰ In February 2023, the Nation celebrated the return of a totem pole that had been taken away from them and held by the Royal BC Museum for over a century.²¹

In July 2022, the Tsleil-Waututh Nation's canoe races took place at Whey-ah-Wichen (Cates Park), after a two-year hiatus due to the pandemic. Canoe races hold cultural significance for Coast Salish peoples and are an integral part of their heritage. The event attracted around 400 spectators and racers per day, including canoe teams from different First Nations, and featured various races for different categories. Alongside the races, attendees enjoyed the traditional dugout racing canoes as well as arts and crafts vendors, entertainment, and family activities.²²

"We are so pleased that the Whey-ah-Whichen Canoe Festival is back this year after having to take a break due to the pandemic. We welcome back the canoe families and are overjoyed to be able to come together on these waters that the Tsleil-Waututh people work so carefully to protect, restore, and steward."²³

Tsleil-Waututh Chief Jen Thomas

CONCLUSION

First Nations communities in the Vancouver Coastal Region demonstrated remarkable collaboration, coordination, and proactive approaches in response to the pandemic. Their achievement of self-sufficiency during this difficult time stands as an important accomplishment deserving of recognition. Community response efforts effectively minimized exposure, curbed viral transmission, and provided support to affected members, while sustaining community and individual well-being. Through creative solutions, communities ensured food security, essential supplies, and service continuity through the use of virtual health services. Leadership, health teams and community members recognized the importance of maintaining culture and tradition, making concerted efforts to continue these practices with appropriate safety measures. The collective strength, resilience, and self-sufficiency demonstrated by the communities are likely to have a lasting, positive impact on their ability to overcome future challenges.

²⁰ <https://www.coastmountainnews.com/news/nuxalk-hereditary-chiefs-host-fest-in-bella-coola/>

²¹ <https://www.cbc.ca/news/canada/british-columbia/nuxalk-nation-totem-pole-returned-1.6751205>

²² <https://www.nsnews.com/local-news/tsleil-waututh-canoe-races-are-back-after-two-year-hiatus-5555027>

²³ <https://www.nsnews.com/local-news/tsleil-waututh-canoe-races-are-back-after-two-year-hiatus-5555027>

APPENDIX

METHODOLOGY

The FNHA Evaluation Team had a booth at the 2022 Fall Vancouver Coastal Caucus, where they provided information about the engagement and had one-on-one conversations with six contributors including community leadership and members.

The Team facilitated a virtual focus group discussion with First Nations communities' leadership and health leads/staff in the Vancouver Coastal Region on January 25, 2023. All communities were invited to participate in the Vancouver Coastal Region focus group or provincial focus groups held on December 6 and 8, 2022, or to provide written input through email, an online survey, or by phoning a member of the FNHA Evaluation Team.

The discussion groups were organized by sub-region and planned in consultation with the FNHA Vancouver Coastal Region engagement team staff to support appropriate timing and format. Discussions took place on Zoom, with calendar invites, materials and multiple reminders issued to invitees in advance. A volunteer from amongst the focus group attendees opened and closed the discussions with a prayer. The sessions were recorded and contributors were invited to be acknowledged as contributors in the report. The FNHA Evaluation Team members transcribed the recordings. Each session had a door prize.

Discussion questions were as follows:

1. In the spirit of recognizing the good work and honouring what has been learned, is there anything you wish to share about your community's experiences responding to the COVID-19 pandemic?
2. In what ways have community members practiced culture, and supported well-being and healing during the pandemic?
3. Is there anything else you would like to share?

A total of 17 community representatives attended the virtual focus group session and Caucus, including Health Directors, health staff (e.g., nurses, wellness directors, etc.), and Chiefs.

The FNHA Evaluation Team also conducted a media scan of stories and articles published online using names of the Families and Nations alongside "COVID-19" and "pandemic" as

search terms. Summaries and quotations from the selected articles were incorporated into the report with citations and links to original publications provided in the footnotes.