First Nations Health Authority
Health through wellness

10-Year Strategy on the Social Determinants of Health

Mapping a Path Forward: 2024-2026 Implementation Plan

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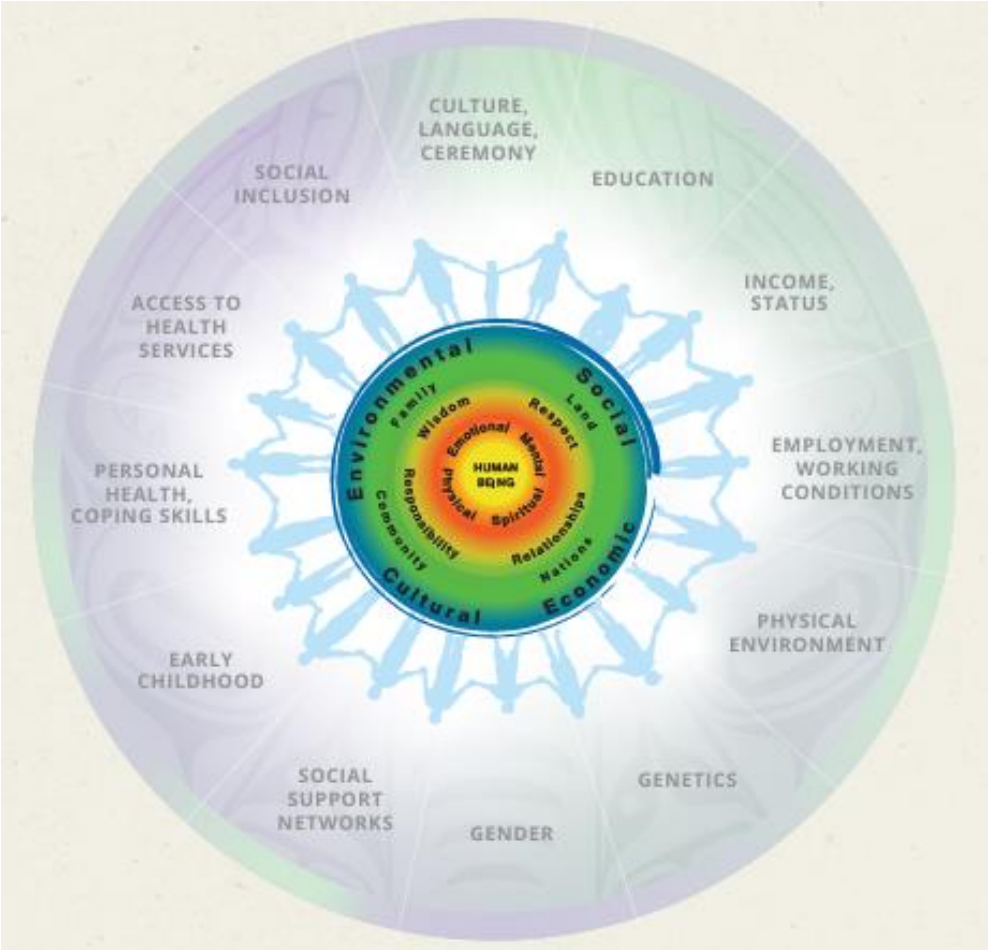
Background and Context

First Nations people have long held a wholistic understanding of wellness and the diverse factors that impact the health of individuals, families and communities. These factors, commonly referred to as the social determinants of health, are the "conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life".[1] They include culture, education, income, language, housing and access to health services, and impact the health of individuals, families and communities.

> *"The social determinants of health, in terms of living well, means that our grandmothers and our aunties are making the most important decisions about their family."* – Voices from members of the FNHC, 2019[1]



In July 2018, the First Nations Health Council (FNHC), the Government of Canada and the Province of British Columbia (BC) signed the *Memorandum of Understanding: Tripartite Partnership to Improve Mental Health and Wellness Services and Achieve Progress on the Determinants of Health and Wellness* (MOU). The MOU built on the existing Tripartite health partnership and commitment to supporting shared decision-making, standards for good governance, reciprocal accountability, cross-government collaboration and joint investment in mental health and

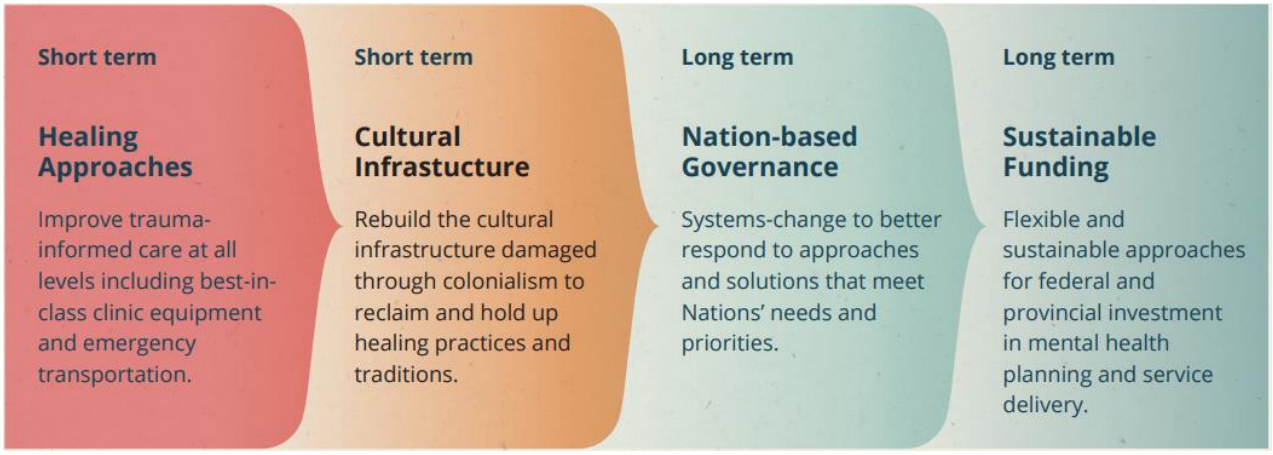
[1] World Health Organization, Social Determinants of Health. https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1 Retrieved 4/24/2024

wellness. The First Nations Health Authority (FNHA), the Government of Canada and the Province of BC each committed to investing $10 million, for a total of $30 million, to support First Nations in BC to plan, design, and deliver a full continuum of culturally safe and relevant mental health and wellness services to address the social determinants of health. The commitments in the MOU also included an additional $95 million (an initial $60 million investment, with a $35 million top up) to build treatment centres across BC, with $20M from each partner, plus an additional $35M from BC to support unexpected cost pressures. While out of the scope of this implementation plan, supporting the revitalization of First Nations Treatment Centres continues to be an integral part of addressing the social determinants of health.

Substantial progress has been made since signing the MOU. Its flexible approach has enabled First Nations to plan, design and deliver initiatives that align with community driven, Nation-based priorities. Through funding provided under the MOU, Nations have been able to support the healing journeys of individuals and families, their connection to the land and the revitalization of language, culture, and traditional practices which are central to wellness.

Significant engagement was undertaken by the FNHC in 2022-2023 on a consensus paper on the social determinants of health, consistent with the *Engagement and Approvals Pathway* which outlines an 18-month process of engagement and dialogue when making significant, province-wide decisions. Building on this good work, at Gathering Wisdom XII Chiefs and leaders approved by a historic margin the *10-Year Strategy on the Social Determinants of Health* (10-Year Strategy). The 10-Year Strategy provides a self-determined, First Nations wholistic approach to health and wellness and offers clear direction on working with a wide range of partners to facilitate a whole-of-government approach to addressing the social determinants of health.

The 10-Year Strategy sets out four strategies for systemic change:



In addition, the 10-Year Strategy sets out partnership objectives under each strategy which outline the work ahead for improving the systems that address health and wellness of First Nations children, families and communities in BC. This is work that requires collaboration between the FNHA, FNHC, First Nations Health Directors Association (FNHDA), First Nations Chiefs and leaders and government partners to advance key priorities and locally driven solutions.

In alignment with their respective mandates, the FNHC's role is focused on leadership and advocacy; the FNHDA's on advice and technical expertise in community; and the FNHA's on operations and service delivery. Guided by the 7 Directives, the work of all three will focus on supporting Nations with funding and capacity building to develop

and deliver local services, projects and programs, and working with government partners to improve systems and better integrate and streamline funding, reporting and services.

Overview

In fulfillment of Gathering Wisdom XII Resolution #2023-01, this Implementation Plan provides a two-year roadmap for implementation of the 10-Year Strategy from 2024/2025-2025/2026. As required, the Plan sets out milestones, timeframes, and key decision points consistent with the 7 Directives and the principle of reciprocal accountability (refer to Appendix I for guiding principles), including evaluation and a high standard of transparency. The focus for these first two years is on transitioning wellness initiatives started with the MOU: building on the good work already done, incorporating lessons learned and carrying this work forward to accomplish the objectives of the 10-year strategy. This Implementation Plan also lays the foundation for fulfilling the partnership objectives outlined in the 10-Year Strategy, including identifying actions for the first two-year period aligned with the partnership objectives.

Progress against this plan will be reviewed annually and the Implementation Plan will be refreshed in 2026/27 to address any initial learnings, emerging needs and priorities.

Flexible Funding Approach

What We Heard and Learned

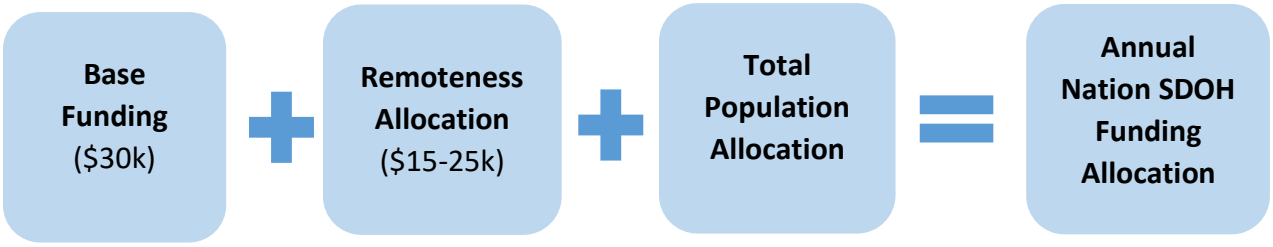
The MOU used a flexible funding approach which supported communities and Nations to direct funding towards planning and programs and services that best met their needs and stage of readiness. An evaluation of the MOU, including its funding approach, was completed in 2022. The findings indicate that the flexible funding approach was beneficial, with several recommendations about how it could be further improved. These recommendations are being woven into implementation of the 10-Year Strategy, including:

- Continuing to use a community-driven, Nation-based approach, with transparent and targeted funding provided directly to self-determined Nations.
- Moving away from solely per-capita-based funding allocations, with an updated funding approach that factors in capacity ("boots on the ground") and remoteness.
- Removing the 'quadrants' and statement of readiness process to simplify the funding method and increase flexibility.
- Allowing for longer term funding and implementation timelines, including flexibility to support permanent positions, mentoring, training and/or capital.
- Increasing support from the FNHA to help enable the depth of transformation envisioned and required.
- Nobody left behind: all communities receive funding, without an application process, through a self-determined Nation-based approach.

Feedback from the 2023 and 2024 Spring and Fall Caucuses along with quarterly meetings with the FNHC re-affirmed the desire to move away from per-capita funding allocations and develop a funding approach that better reflects the unique needs of First Nations across BC.

Updated Funding Approach

Based on feedback from the MOU and dialogue at caucuses, an updated funding approach has been used, including a base amount per community, total population (including off-reserve community members) and a BC-based measure of remoteness:



Responding to community feedback about the importance of having longer term timeframes for project planning and implementation, funding was flowed to Nations in the form of 2 or 3-year agreements. The full $15M in annual funding was flowed from the FNHA directly to Nations, with no administration costs taken.

FNHA and FNHC will continue to work across government to access and leverage additional funding opportunities, with the view to increasing available funding over the 10-year timeframe of the Strategy.

Use of Funds

Nations have flexibility to use funding to meet local priorities. The social determinants of health include a wide range of factors that can impact a person's health and wellness. The breadth of activities and programs that can be supported through this fund are broad and could include direct clinical support for mental health, strengthening food security or working with organizations related to sports and physical wellness. The funding can be used to continue existing programs or services, such as those previously funded under the MOU, or to start new programs or services. Funding can also be used to cover a variety of costs, including but not limited to planning, staffing, training, operations, capital or equipment.

As intended, the funding provides a foundation and support for Nations to build new partnerships and leverage new funding sources to further grow and build local capacity to advance self-determined social determinants of health. FNHA staff in each of the Regions are also available to support planning and information sharing among Nations as required.

Tracking and Reporting On Our Progress

What We Heard and Learned

The MOU was supported by a flexible narrative reporting approach that enabled communities and Nations to provide reports and updates on progress in a way that was most meaningful to them, whether that be an update letter, open-ended written summary, oral report to an FNHA regional staff member over the phone, a visual presentation with photos and stories, or a combination of the above. This approach was generally welcomed by communities and Nations, with a suggestion to review existing funding opportunities and envelopes to streamline and/or combine application and reporting processes where possible. This flexible approach will be carried forward into a streamlined reporting framework to support sharing the impact of the 10-Year Strategy.

The MOU committed partners to work collaboratively to create a reporting framework and identify health and wellness indicators that align with the population health outcomes identified by First Nations in BC. In 2019, FNHC retained the National Indian Child Welfare Association to engage First Nations communities to identify and define the health and wellness outcomes that are meaningful to them. Through this engagement four key outcomes were identified:

1) **1Connection to Culture:** Children, families and communities have an understanding of and pride in identity and actively grow, share and participate in ceremony and traditions and know and care for their spiritual health. Children have strong connections to Elders and draw on a blend of traditional and formal education.
2) **Connection to Community:** Children have positive social relationships, high self-esteem and confidence, and are part of proud, health-conscious families positively involved in community affairs and activities. Communities are able to meet their needs and have spaces to support recreational and cultural events.
3) **Connection to Land:** Children, families and communities have a strong sense of belonging to their traditional lands and territories, have access to traditional food and medicines and live in a healthy, safe, and sustainable environment.
4) **Felt Safety, Security, and Inclusion:** Children, families and communities have their base environmental, economic, and social needs met and feel both physically and emotionally safe at home, in their neighbourhoods, at school/work, and in other settings (e.g. when accessing healthcare).

Sharing the 10-Year Strategy's Impact

The reporting framework provides an opportunity to elevate and measure the impact of First Nations-led work on the social determinants of health. The framework has been built from the indicators and outcomes included in the 10-Year Strategy, the FNHA and BC's Office of the Provincial Health Officer's Population Health and Wellness Agenda (PHWA) and the Regional Health and Wellness Surveys, with the aim of lifting up strengths-based indicators and facilitating simple and streamlined reporting.

There are four components to the reporting framework: population level outcomes, Nation and community level impacts, process outputs, and partner progress.

Population Level Outcomes:

- Four outcome areas have been identified (mentioned above), with 15 core indicators selected from Regional Health and Wellness Surveys to reflect progress. The FNHA will track and regularly publish provincial and regional-level data aligned with these indicators through existing data collection pathways.

Outcomes (4)	Indicators (15)
Connection to Culture	Cultural Connectedness/Wellness
	Education Traditional Wellness
Connection to Community	Mental and Emotional Wellness
	Physical Activity and Wellness
	Food Security
Connection to Land	Traditional Wellness
	Ecological Health and Wellness Culture and Land
Safety and Security	Economic Stability
	Self-Determination Safe and Secure Housing
	Access to Health Care Access to Social Services
	Felt Safety Cultural Safety and Humility in the Health Care System

Nation and Community Level Impact Reporting:

- Nations will be expected to share an overview of how funds were spent and encouraged to share stories of impact and change. The FNHA will prepare an annual report of this information and its alignment with the four core outcomes.

Process Outputs:

- FNHA is responsible for monitoring the timely release of funding throughout the 10-Year Strategy. Funding will be released through a new Contribution Agreement (CA) or amendments to current agreements. FNHA will gather information to understand:
    - the number of funding agreements disbursed per quarter by FNHA to communities/Nations
    - the total amount of funding disbursed per quarter by FNHA to communities/Nations,
    - the total amount of additional funding obtained annually by communities/Nations,
    - the total number of additional funding applications submitted annually by communities/Nations
    - Percentage of Nation and Community Impact Reports (Measurement 2) received by FNHA annually

Partner Progress:

- The 10-Year Strategy contains a list of 43 high-level partnership objectives, all aligned to the 4 priorities outlined previously: Healing Approaches, Cultural Infrastructure, Nation-based Governance, and Sustainable Funding.
- To ensure wholistic implementation of each partnership objective, the FNHA has proposed a phased approach. Each health governance and government partner will be asked to identify an initial suite of partnership objectives for implementation over the first two years of the Strategy (2024/25-2025/26). The FNHA has identified an initial 14 partnership objectives, aligned with the Multi-Year Health Plan.
    - All 43 partnership objectives will be advanced, with each partner working on the objectives that most align with their respective mandates.

Partnership Objectives

This is a journey that requires Nations and government partners to walk together. As a starting place, the FNHA has outlined the partnership objectives the organization will commit to delivering on in 2024-26, and over the course of the next year FNHA will work with the FNHC, FNHDA and government partners to identify their respective roles, responsibilities and actions to progress the partnership objectives. These actions will be added as an addendum to the Implementation Plan once agreed upon.

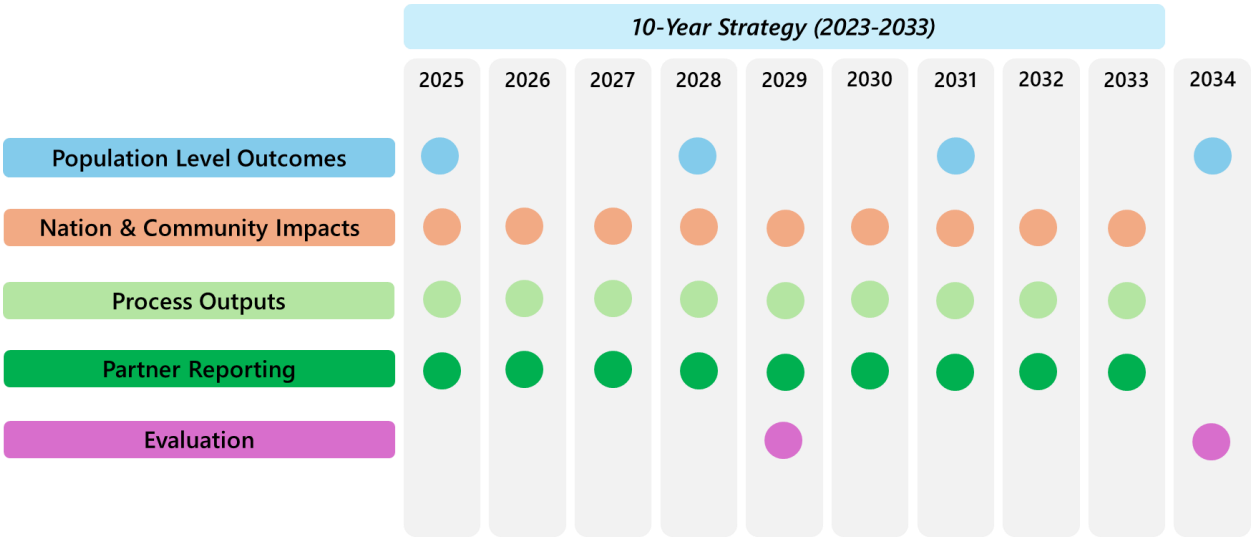
The actions below provide an overview of the partnership objectives FNHA has committed to advance over the next two years. For a full list of all 43 partnership objectives from the 10-Year Strategy, please refer to Appendix II.

	Partnership Objective	2024-26 Action
Healing	**Increase funding for community-driven, Nation-based demonstration projects** that support implementation of innovative,	Sign funding agreements with Nations and disperse funding annually in FY24/25, FY 25/26 and FY 26/27.

	culturally based healing approaches addressing self-determined social determinants of health priorities, expanding work begun with the Tripartite Partnership to Improve Mental Health and Wellness Services and Achieve Progress on the Determinants of Health and Wellness in 2018.	Contribute $5M/year towards implementation of the 10-Year Strategy.
	Foster personal health and wellness behaviors that are informed and supported by Indigenous approaches to healing and wellness.	Build awareness of FNHA's key wellness work such as healing houses/modalities, wellness grants and campaigns.
	Enhance opportunities to gather and eat traditional foods using approaches that teach about the cultural foundation of these practices and culturally based services.	Support communities in adapting to a changing climate including preparedness for the health impacts of climate related emergencies, food security and protection of those most at risk of climate-related health outcomes.
	Support culturally based healing approaches involving reconnection with the land and water, traditional foods and plants, healing of industrial or climate-related damage and environmental preservation which contribute to healthy environments and well-being.	
	Support Nations to design, deliver and realign services and wellness approaches across a broad spectrum of urgent and long-term health and wellness concerns including chronic disease management, emergency management, mental health and addictions treatment, maternal and child health, treating injury or acute illnesses and public health practices.	Provide targeted regional-based planning to support Nations to develop, renew or redesign health and wellness plans that align with their cultural approach to healing and wellness.
Nation- Based Governance	**Support Nations to design wellness approaches and deliver services that address the needs of away from home members and other self-determined populations of interest**, such as children, youth, Elders, members living remotely, veterans, LGBTQ+ members, violence survivors, people with disabilities, and so forth.	
	Work together with its government partners and First Nations to support communities to develop, renew or redesign health and wellness plans that align with their cultural approach to healing and are responsive to the local vision of health and wellness as well as locally determined service gaps and priorities.	

	Support local planning with resources that complement existing community planning, budgeting, fiscal management and reporting processes.	
Cultural Infrastructure	**Enhance First Nations' capacity to create healthy environments for young children and youth that foster resilience through self-determined approaches, such as supporting healthy parenting, Elder engagement and mentorship and youth engagement.**	Focus on lifting up Elders, Knowledge Keepers and youth by including their voices in our work and continuing to advance programs such as the *Reclaiming Indigenous Children's Futures through Home-Visiting and Intergenerational Playspaces* and Aboriginal Head Start on Reserve.
	Work to ensure fair, respectful and sustainable support and compensation for Indigenous knowledge keepers for delivery of healing services.	Continue to promote the adoption of the CSH Standard and walk alongside our partners in taking action to address racism against First Nations peoples. Work to uplift and revitalize traditional health and wellness through completion of a Traditional Wellness Strategy
	Make space for Indigenous knowledge keepers to safely teach, practice and share Indigenous knowledge and skills.	
Sustainable Funding	**Enter into dialogue with partners to further articulate and design the protocols and process for reciprocal accountability** so that partners and funders as well as First Nations are clear on and capable to meet the obligations in the funding framework.	Develop a social determinants of health reporting framework in collaboration with First Nations and government partners, building off learnings from the MHW MOU.
		Confirm indicators, accountabilities and mechanisms to measure progress against the partnership objectives with partners.
	Collaboratively develop a new funding and accountability framework in BC that addresses existing inequities, provides increased investment and greater flexibility in the design, management and delivery of community-based services and adheres to established mechanisms for reciprocal accountability.	Continue to evolve funding models and mechanisms for the 10-Year Strategy based on Nation feedback, taking into consideration equity, the need for increased flexibility and reciprocal accountability.
	Work with partners in First Nations health data governance in alignment with sovereign data initiatives.	Provide closer to home health surveillance reporting, as requested, acknowledging minimum data threshold requirements. The development of First Nations indicators in health.

Over the next two years (2024/2025-2025/2026), the FNHA will work with Nations and government partners to refine the indicators, confirm data sources and establish accountabilities, with the aim of publishing an initial progress report in two years (2027), based on available data.



Key Considerations

Currently, the Regional Health and Wellness Surveys only include on-reserve or at-home populations. FNHA will explore options to expand the reporting framework to reflect urban and away from home populations, as well as other interim reporting options to supplement the Regional Health and Wellness Surveys.

Progress Reporting

As set out in the Strategy, Partners will be expected to "revisit the Strategy on an annual basis with the understanding that consensus will be renewed or replaced as the Strategy develops." There is an expectation that Partners will share back annually on their progress towards delivering on partnership objectives highlighted in the 10-Year Strategy and evolve as needed. Over the next two years Partners will work together to determine accountabilities, indicators and mechanisms to report on progress and partnership objectives both at the health systems level and within each of the Regions, taking into consideration the 7 Directives and the principle of reciprocal accountability.

Governance – Partnership Structures & Processes

What We Heard and Learned

The MOU's governance and partnerships structure operated at two levels, separating out political and governance matters from operations:

- Governance: FNHA, FHNC, federal government and provincial government.
- Implementation: Nations, FNHA, FNHC federal government and provincial government.

This two-part partnership structure will be built upon as we collectively support implementation of the 10-Year Strategy, incorporating recommendations from the MOU evaluation:

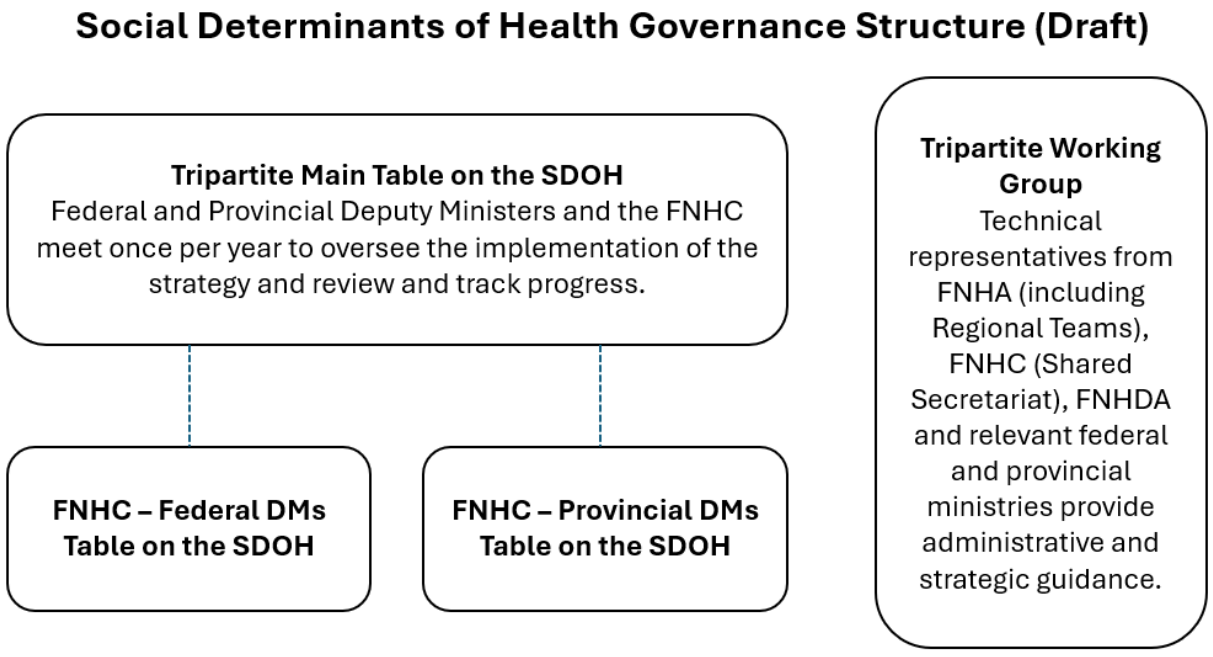
- Enhancing mechanisms to hold all partners accountable for addressing structural barriers and inequities, and including additional government partners in the governance structure as opportunities arise.
- Supporting Nations to interact directly with Tripartite partners, as directed and desired by Nations.

Governance

Purpose

At the governance level, Deputy Minister partnership tables will be established between FHNC, FNHA, the Province of BC and the Government of Canada to oversee the implementation of the 10-Year Strategy. This will include efforts to collaborate with a cross section of ministries to coordinate and align planning, programming and service delivery related to health and wellness, review and track progress, implement and advance the reporting framework and identify opportunities to pursue and leverage additional funding opportunities.

Structure



As implementation of the 10-Year Strategy evolves, additional government and/or First Nations organization partners may be included through a partnership table approach.

Timeline and Key Milestones

Fiscal Year 2024-2025

- Engage at regional caucuses and with the FNHC to develop the Implementation Plan.

- Gather community, Nation and Partner feedback to inform development of a Reporting Framework.
- Confirm initial Partnership Objectives for the FNHA to focus on and work with Partners to do the same..
- Design funding approach based on Nation feedback and flow funding for multiple years.
- Enhance regional capacity to support Nation-led social determinants of health planning

Fiscal Year 2025-2026

- Support communities and Nations in funding roll-out and implementation.
- Implement the governance structure.
    - Support partners to identify and begin advancing specific Partnership Objectives.
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- Begin data collection and publish an annual report reflecting progress during the first year of the 10-Year Strategy inclusive of baseline reporting indicators
- Collaborate with Partners to convene a cross-government Tripartite Deputy Minster meeting
- Confirm a minimum $5M commitment from the Province for this fiscal year and the balance of the 10-Year Strategy

Fiscal Year 2026-2027

- Gather feedback on first two year of implementation to inform development of subsequent multi-year implementation plan.

Closing

This implementation plan is meant to support and advance the important work begun under the MHW MOU and provide guidance to advance the 10-Year Strategy on the SDOH. This document will be evergreen and may be updated based on feedback provided by First Nations at regional caucuses, Gathering Wisdom and through reporting and evaluations. Over the next two years, the FNHA will monitor progress and work to develop the next implementation plan to continue to guide this work forward in a way that is responsive to First Nations needs and feedback.

Appendix I: Guiding Principles

The implementation plan and the 10-Year Strategy are grounded in the 7 Directives and the principle of reciprocal accountability: the teaching that we are all accountable for our decisions, actions and for our contributions to the community's wellness as a whole.

Directive	**Guiding principles for implementation of the 10-Year Strategy**
Community-Driven, Nation-Based	• Funding directed by Nations based on where they see the need, building on health and wellness plans • Flexible funding that acknowledges that each Nation is at a different stage of capacity and readiness and upholds the commitment to leave no one behind
Increase First Nations	• Respect the autonomy and authority of Nations to make decisions and allocate funding to achieve outcomes set by their communities

Decision-Making and Control	• Simplify the process for Nations to receive and report on funding • Nations to determine strength-based reporting indicators and methods that reflect their unique cultures, languages and capacities
Improve Services	• Foster coordinated and integrated approaches to service design, planning and delivery that account for and address the social determinants of health and wellness • Foster the creation of a continuum of care that brings together the best of traditional approaches with western approaches and encompasses a range of services and supports • Promote equity, sustainability and predictability in the allocation of funding • Improve access to services and supports that offer opportunities for cultural and traditional healing and ceremony at the individual, family, community and Nation level
Foster Meaningful Collaboration and Partnership	• Foster cross-agency collaboration at system, program and service levels to enhance integration and coordination of responses to addressing the social determinants of health • Enhance the ability of First Nations to access funding to address the social determinants of health by increasing and leveraging investments from all sectors whose mandates are directly or indirectly related to the social determinants of health
Develop Human and Economic Capacity	• Acknowledge that planning is a process of promoting the capacity of communities to develop, implement and sustain their own solutions in a way that shapes and supports control over physical, social, economic and cultural environments • Foster discussion on long-term strategies and solutions that support the development of a culturally safe and competent workforce
Be Without Prejudice to First Nations Interests	• Not impact Aboriginal Title and Rights or the Treaty Rights of First Nations • Be without prejudice to self-government agreements, court proceedings, or jurisdictional negotiations • Not impact on the fiduciary duty of the Crown • Not impact existing federal funding agreements with individual First Nations, unless First Nations want the agreements to change • Decisions to pursue Nation rebuilding and a Nation-to-Nation relationship with the Government of Canada and/or a Government-to-Government relationship with the Province of BC belong to each Nation when ready
Function at a High Operational Standard	• Be accountable through clear and regular reporting on progress, including clear communication on the allocation of funding • Promote collaboration and collective approaches to service design and delivery to make the most of available funding • Promote good governance in the design of new service models for addressing the social determinants of health • Maintain minimal administrative overhead and flow funding directly to Nations

Appendix II: Partnership Objectives

Healing Approaches
Objective
Increase funding for community-driven, Nation-based demonstration projects that support implementation of innovative, culturally based healing approaches addressing self-determined social determinants of health priorities, expanding work begun with the Tripartite Partnership to Improve Mental Health and Wellness Services and Achieve Progress on the Determinants of Health and Wellness in 2018.
Foster personal health and wellness behaviors that are informed and supported by Indigenous approaches to healing and wellness.
Enhance opportunities to gather and eat traditional foods using approaches that teach about the cultural foundation of these practices and culturally based services.
Support culturally based healing approaches involving reconnection with the land and water, traditional foods and plants, healing of industrial or climate-related damage and environmental preservation which contribute to healthy environments and well-being.
Support Nations to design, deliver and realign services and wellness approaches across a broad spectrum of urgent and long-term health and wellness concerns including chronic disease management, emergency management, mental health and addictions treatment, maternal and child health, treating injury or acute illnesses and public health practices.
Work with partners to design and deliver services that open people to processes that are non-invasive including approaches such as land- and water-based healing approaches and connection with ancestors.
Support Nations to design wellness approaches and deliver services that address the needs of away from home members and other self-determined populations of interest, such as children, youth, Elders, members living remotely, veterans, LGBTQ+ members, violence survivors, people with disabilities, and so forth.
Engage partners, Nations and communities in implementing healing approaches to address traumatic impacts from recent losses brought about by fires and floods as well as losses related to the toxic drug crisis and the Covid-19 pandemic.
Strengthen the linkages between federal, provincial and First Nations agencies that provide health and wellness services to First Nations communities and Indigenous knowledge keepers and support First Nations working directly with local, provincial and federal partners to ensure services incorporate the best Western and Indigenous approaches to health and wellness.
Build upon efforts already underway, ensuring continued alignment with existing agreements and discussions with ministries within the Government of Canada (e.g., ongoing discussions on federal Indigenous health legislation should be implemented locally).

Cultural Infrastructure
Objective
Focus on enhancing protective factors associated with positive cultural teachings about health and wellness, such as revitalizing language, enhancing community involvement, fostering connections with Elders, reconnection with traditional practices and foodways and supporting families with childrearing.
Work with partners to make immediate investments to address community-driven, Nation-based urgent health and wellness needs and priorities.
Advocate with partners to provide First Nations the capacity to establish close-to-home facilities and services, equip and bring existing facilities up to date and address other unmet facility concerns (such as housing).
Advocate with partners to provide First Nations the capacity to plan strategies and make investments to address staffing and workforce needs.
Work with federal and provincial partners to ensure First Nations can determine and develop the infrastructure needed to implement Indigenous healing and wellness approaches close to home, such as on-the-land detox centres and treatment facilities.
Support First Nations knowledge keepers, urban liaisons, navigators and others to provide culturally based and/or culturally safe care and to advocate, navigate, problem solve and help manage crises.
Enhance First Nations' capacity to create healthy environments for young children and youth that foster resilience through self-determined approaches, such as supporting healthy parenting, Elder engagement and mentorship and youth engagement.
Enhance First Nations' capacity to provide culturally safe and affirming Elder care services in-home, during emergencies, as well as long-term care (including in Elder housing).
Engage partners and communities in restoring cultural knowledge over the long term to heal from losses suffered under colonialism as well as from recent losses due to environmental disasters, the toxic drug crisis, and the Covid-19 pandemic.
Work to ensure fair, respectful and sustainable support and compensation for Indigenous knowledge keepers for delivery of healing services.
Make space for Indigenous knowledge keepers to safely teach, practice and share Indigenous knowledge and skills.
Work with partners to develop and implement a cultural wellness framework that provides standards for inclusion of Indigenous healing approaches that work within First Nations health systems.
Engage government partners, communities and other social determinants of health partners such as educational institutions in investing significant resources in growing the capacity of First Nations people over the long term to deliver a broad range of Western health care services while being well grounded in Indigenous concepts of health and wellness.
Facilitate a whole-of-government approach that supports First Nations to design comprehensive cultural infrastructure integrated into community services to make them culturally safe and responsive.
Advocate for partners to include First Nations as full partners in developing emergency management plans.

Nation-Based Governance
Objective
Advocate for approaches that support First Nations communities to make decisions about funding, policy, services and how services reach the people.
Advocate for inclusion of First Nations as equal, credible, respected partners in planning and decision making regarding their Nations' health and wellness, including in emergency management planning.
Ensure that FNHC's governance structure facilitates Nation-based governance.
Support Nations and communities to organize governance structures in ways that work for them. "Nation" must be self-determined.
Ensure that Nation-based governance supports addressing urgent on-the-ground issues defined by the Nations as well as building long-term capacity.
Work together with its government partners and First Nations to support communities to develop, renew or redesign health and wellness plans that align with their cultural approach to healing and are responsive to the local vision of health and wellness as well as locally determined service gaps and priorities.
Work with partners to support First Nations to build capacity to design and implement local systems that reflect and promote the values, traditions and cultures of their Nations.
Support Nations to partner with local health and service organizations as well as with other Nations to strengthen services, promote resource sharing and address persistent barriers to care.
Work with partners to align their governance, services delivery models and service delivery boundaries with those outlined by the Nations to eliminate barriers to Nations determining their service structures and partnerships.
Aligning with the spirit and principles of UNDRIP, work with the Governments of Canada and BC to establish tripartite Nation-based tables with each self-identified Nation in BC, if so desired by the Nations, in which leaders will discuss with partners on how to make progress on Nation-based plans and priorities.
Support local planning with resources that complement existing community planning, budgeting, fiscal management and reporting processes.
Provide support for nations with treaties and self-governing agreements as it relates to strategy, if requested.

Sustainable Funding
Objective
Collaboratively develop a new funding and accountability framework in BC that addresses existing inequities, provides increased investment and greater flexibility in the design, management and delivery of community-based services and adheres to established mechanisms for reciprocal accountability.
Advocate for funding to address capital projects without sacrificing services, enabling responses to urgent service needs, long-term capacity building and mitigation of the realities of the geographic challenges.
Enter into dialogue with partners to further articulate and design the protocols and process for reciprocal accountability so that partners and funders as well as First Nations are clear on and capable to meet the obligations in the funding framework.
Work collaboratively with funding partners in 2023–2024 to develop and implement direct health and wellness transfer payments to support, sustain and foster the evolution of these strategies over the long-term.
Work with Canada and BC to develop a direct, long-term and flexible investment mechanism, which consolidates the multiple funding and reporting streams currently managed by communities into a single “health and wellness transfer payment,” investing directly in priorities outlined in Nation-based health and wellness plans
Work with partners to further design and support data sovereignty.