

Impacts of COVID-19: Part 6

Community Perspective on COVID-19 Enforcement



FIRST NATIONS
LAND MANAGEMENT
RESOURCE CENTRE

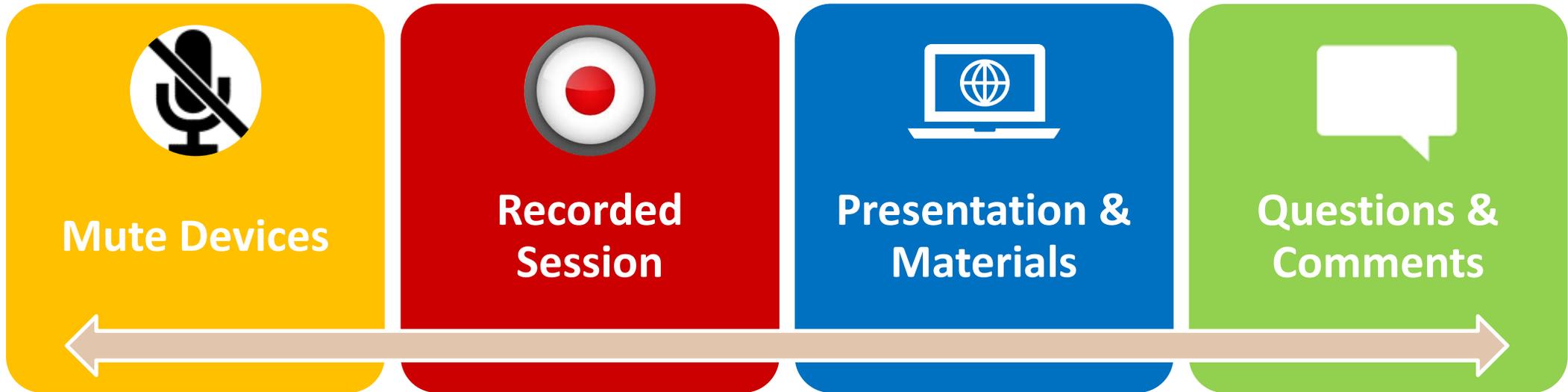


Training, Mentorship &
Professional Development

TMPD Virtual Workshop
FEB 11, 2021 - 9:00 AM PST / 12:00 PM EST

WELCOME





AGENDA & OBJECTIVES

9:05 AM

Introduction to Impacts of COVID-19: Part 6

- Sharon Jack – RC, Administrative Assistant

9:15 AM

Community Perspectives Panel

- Cowichan Tribes – Dana Thorne, Marnie Elliott
- 'Namgis First Nation – Megan Whonnock
- Chippewas of Georgina Island First Nation – Scott Jacobs

9:50 AM

Virtual Networking Exercise

- Breakout Room Discussions & Body Break

10:20 AM

Update on COVID-19 Vaccine Deployment & Confidence

- Kimberley Daly – FNIHB, ISC – Senior Nurse Manager, Communicable Disease Control Division
- Pamela Wolfe-Roberge – FNIHB, ISC – Director, Communicable Disease Control Division

10:30 AM

COVID-19 Enforcement

- Kevin Broughton – RC, Enforcement Advisor

10:45 AM

Open Questions & Discussion

Introduction



ISC Statistics COVID-19 rates of all First Nations across Canada

Date	01-Oct-2020	19-Jan-2021	10-Feb-2021
Confirmed +	689	13873	18356
Active Cases	111	5571	1761
Hospitalizations	58	576	833
Recovered Cases	566	8182	16401
Deaths	12	120	194

Cases #/Region	10-Oct-2020	19-Jan-2021	10-Feb-2021
BC	151	1348	2007
AB	292	4459	5452
SK	98	3525	4959
MB	23	3643	4768
ON	77	428	622
QC	48	462	538
ATL	0	8	10





Trends (Early on and now)

FN Issues





How my
family got
COVID-19

Symptoms

How we dealt
with it

Recovery

Stigma



Community Perspectives Panel





Cowichan Tribes

Impacts of COVID-19

February 8, 2021





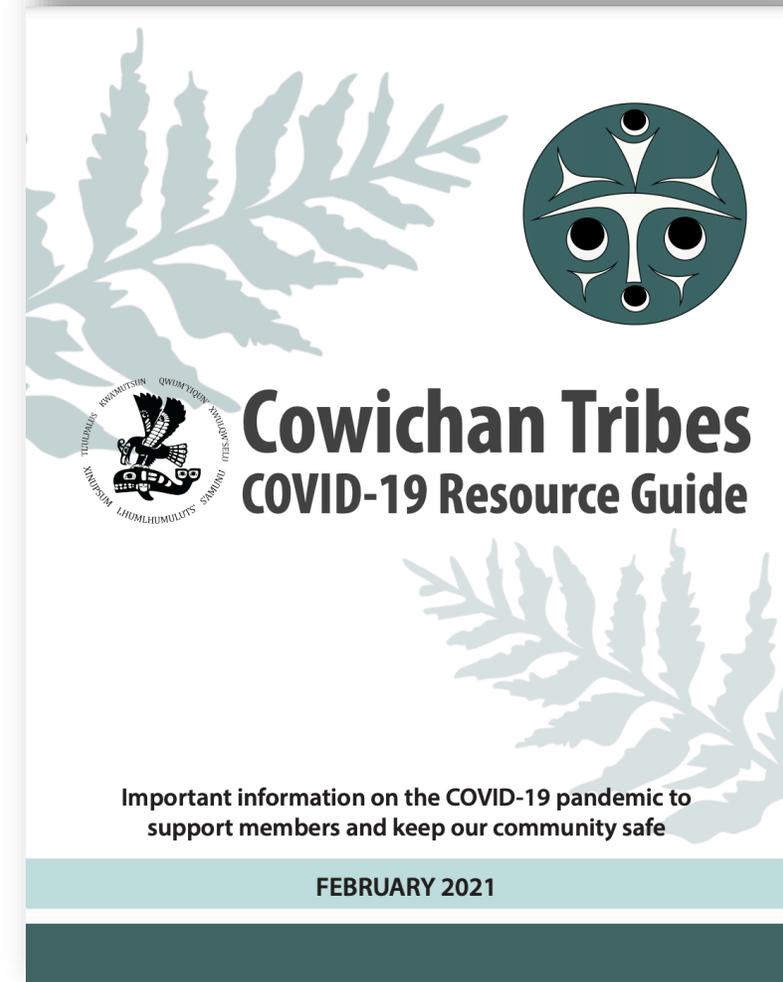
Overview of methods used to protect community

Moving to Emergency Services

- Closed administration offices
- Communicable nurse walk-through of all worksites
- Developed departmental safety plans and Pandemic Resource Guide
- Slowly reopened essential services through guidance of communicable nurses and WorkSafeBC regulations

Educate community about virus transmission

- Video messaging
- Info-graphics and booklet
- Sharing public health order information





Overview of methods used to protect community

Educate cultural and religious leaders

- Met with cultural and religious leaders
- Informed leaders about public health orders as it relates to cultural and religious events and gatherings
- Had Chief and council, as well as cultural and religious leaders sign an agreement

Pulling Together for COVID-19 Safety in the Quw'utsun Community



Joint Commitment Letter: Cowichan Tribes Big House Leaders and other Spiritual Leaders and Chief and Council

Introduction

Quw'utsun Big House Leaders from S-amuna', Kwa'mutsun and Lhumlhumuluts', and spiritual leaders from the Shaker Church and St. Anne's Church, are working together with Cowichan Tribes Chief & Council and staff. They are working to ensure that safety measures are in place so that Quw'utsun Mustimuhw can practice culture and spirituality safely during the COVID-19 pandemic.

The communicable disease known as COVID-19 has been declared by the World Health Organization ("WHO") to be a global pandemic. In British Columbia, it poses a serious threat to the health, safety and lives of Quw'utsun Mustimuhw.

Cultural activities are important to Quw'utsun culture and well-being. Our Snuw'uy'ulth (teachings) say that we must help one another and work together for the good of all Cowichan people.

Activities that involve gathering in groups can significantly increase the risk of COVID-19 transmission. Elders, especially those with chronic health conditions, are very vulnerable to COVID-19 and developing more severe illness or complications related to Covid-19, including death. Cowichan people also face other risk factors due to colonization, such as overcrowding in homes and systemic racism in provincial health facilities.

Commitments

As a self-governing nation, it is critically important that we implement measures to protect the health and safety of our community. Under Cowichan Tribes COVID-19 Community Protection Bylaw, Cowichan Tribes can enforce laws and health orders on its territory in accordance with Quw'utsun values and authority, alongside the public health orders of BC and Canada.

Like a canoe journey, we know that paddling together as one is needed to reach our destination. During the COVID-19 pandemic, our end destination is a healthy community, free of COVID-19 cases, and the efforts of everyone are required to make this possible.

Together, we commit to upholding COVID-19 safety protocols and measures for cultural and spiritual gatherings on Quw'utsun Tumuhw. These include:



Overview of methods used to protect community

Community Protection Bylaw

- On May 27, 2020 Chief and Council enacted the bylaw to protect the health, safety, and lives of Quw'utsun Mustimuhw from the threat of COVID-19
- Provides ability to enforce Public Health Orders on-reserve
- Allows nation to react quickly to an active outbreak





COVID-19 Vaccine Community Rollout

- 600 Vaccines received with 2 days notice
- Drive-thru Vaccine clinic pulled together – vaccinated approximately 50 people per hour
- Vaccine clinic had 50 volunteers and staff
- Set priority – 60+, 50+ with underlining health conditions, and front-line Cowichan Tribes staff





COVID-19 Vaccine Community Rollout

How are you dealing with members that do not want a vaccine?

Depends on the findings of further research from health professionals and scientists

How are you planning to verify those gaining access to community have been vaccinated?

We will follow what the health professionals guide us as they learn more about the virus and future prevention



Thulamiye - Dora Wilson
Elder and Councillor



Emergency management & support tools

Testing

- Mobile testing
- Rides to testing sites
- Testing Videos

Isolation quarters and quarantine support services

- Isolation units & hotels
- Grocery and essential item delivery
 - Reference sheet on delivery services or curbside pick-up in region
- Meal deliveries

COWICHAN TRIBES COVID-19

Grocery, Pharmacy & Support Services



Some local stores and service providers in the Cowichan Valley who deliver or offer curbside pick-up. For general info purposes only. Information may have changed or may not be fully complete.

Company	Address	Telephone	Hours	Delivery	Curbside Pick Up	Payment Type	*Delivery Days
Save-On-Foods	181 Trans-Canada Hwy.	250-746-3993	7am - 10pm	No	Yes	credit/debit card	
49th Parallel Grocery	550 Cairnmore Stree	250-748-2412	7:30am - 9pm	*Yes	*Yes	cash credit/debit card	*Mon., Wed. & Fri.
Thrifty Foods	#1 - 2755 Beverly St.	250-715-2630	8am - 10pm	No	Yes	credit/debit card	
Real Canadian Superstore	291 Cowichan Way	250-746-0529	7am - 10pm	No	Yes	credit card	
Walmart	3020 Drinkwater Rd	778-275-9479	8am - 8pm	No	Yes	credit/debit card	*Must have acct. OR use mobile app
Ingram Pharmacy	149 Ingram St.	250-746-5191	9am - 6pm	Yes	No	cash credit/*debit card *NO portable debit/credit machine	Mon. - Fri.
I.D.A Pharmacy	330 Festubert St.	250-746-7494	Monday-Friday 9:00am - 5:00pm	Yes			
Pharmaparc	285 Cain St.	250-748-5252	9am - 6pm	*Yes	No	cash	Mon. - Fri.



Emergency management & support tools for membership

Mental health services

- Counselling services – 7 days a week
- Sharing external resource information

Drug use support

- Remind to not use alone
- Opioid task force
- Naloxone training
- Promote lifeguard app
- Dedicated website

Ni tsun hwule'lum'ut ch' I take notice of you (I care)
Opioid Response

Main Page | Where to Get Help | About the Opioid Crisis | How to Respond to an Overdose | Where to Get Naloxone & Training | Information for Families, Youth & Community

Welcome to the Cowichan Tribes Opioid Response webpage

To view the final report, click the image below

Chief Seymour on the Recommendations of the Opioid Crisis Response Task Force from Cowichan Tribes

09:25 vimeo

COWICHAN TRIBES



Coordinated efforts to support community

- COVID-19 Navigators
- Education Supports
- Pandemic Response Team
- Restart Project Manager
- Food Distribution
- Food Security Program
- Isolation Supports
- Communications Team

Cowichan Tribes COVID-19 Response - Member Update -

It has been six (6) months since the start of the COVID-19 pandemic. Below is a brief update for members on some of the steps taken by Cowichan Tribes to respond to the pandemic.

Thank you to everyone doing their part to keep COVID out of our community!

Key Highlights

- * Pandemic Response Team and Plan activated on March 11.
- * All departments moved to essential services and modified their operations to serve members online or at a distance.
- * Weekly meetings of Chief and Council until summer.
- * Economic response: Cowichan Tribes matched government funding with \$1.1 million of its own revenue to ensure all members - including those off-reserve - could access programs and funding (Federal funding is still based on a colonial formula limited to members living on-reserve).

https://cowichantribes.com/application/files/4616/0348/8628/CT_Response_Highlights_6-month_Update_1.pdf



Collecting data for input into emergency systems

Communicable Disease Emergency Plan

- Existing plan developed by Ts'ewulhtun Health Centre
- Updating plan with lessons learned

Pandemic Response Guide

- Created guide for departmental operation plans
- Essential services - when does it become essential?
- Safety Plans
- Process for updating and monitoring

Cowichan Tribes Pandemic Operation Stages

Lhihwmaat tu skw'ush tu COVID



STAGE 1 *Hun'a' COVID*

Emergency Services

- Offices Closed to public
- Emergency Service Staff Only
- No person to person contact in offices or community
- Full Personal Protective Gear (PPE) required for emergency contact

In Stage 1 if any apply:

- Limited knowledge of the virus and how it's spread
- No Industry or WorkSafeBC guidelines and regulations
- Confirmed community infection

STAGE 2 *'Unwulh COVID*

Modified Essential Services

- Offices Closed to public
- Modified work and service delivery models to minimize risks of virus spreading to staff and community

In Stage 2 if all met:

- Policy and Regulations established
- No Confirmed client or staff infection*
- Department and Services Safety Plans Finalized
- Gear and equipment in place to minimize spread

STAGE 3 *Lhihw COVID*

Regular Operations

- Offices Open to Public
- Regular operations and services resume
- Person to person contact is safe

In Stage 3 when all factors are met:

- British Columbia moves into Phase 4 of their Restart Plan
- Cowichan Tribes community is no longer considered at risk by the Cowichan Tribes Pandemic Team

*Programs or departments may have to revert to Stage 1 working conditions if there is an active outbreak within their client group or staffing. The Medical Health Officer will provide direction in these instances.



Supporting one another during COVID fatigue

- Cultural virtual gathering
- Hashtag campaigns
- Promote healthy work-life balance
- Create safe space to reflect and release

Honouring Community Through Prayer And Song Recorded Live
Cowichan Tribes

Webex Events Doreen Peter

Ron George Cal Swustus Jr Sabrina Elliott

7:11 / 38:38

Love Comment Share You, Stephanie Atleo, Toni Williams and 202 others · 103 Comments

Newest

Christina Wilson · 13:30
Huy'ch'ca ♡
Like · Reply · See Translation · 3d

Top Fan
Patricia Furgason · 18:41
♡ 🙏
Like · Reply · 3d

View more comments

2 of 103

Questions & Comments
Huy ch q'u Siem!





'NAMGIS
FIRST NATION

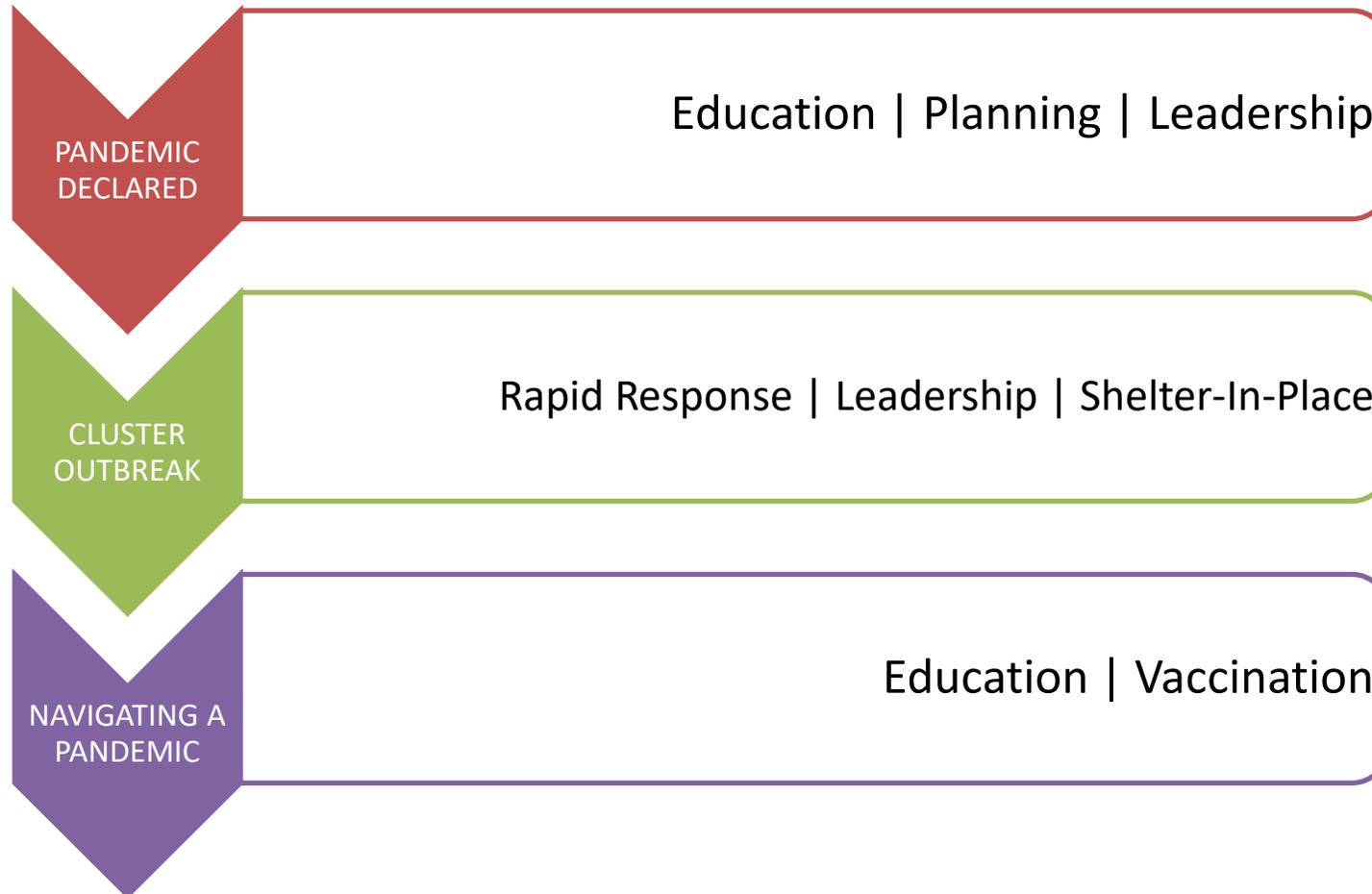
Pandemic Response: Covid-19

Information Sharing – LABRC

Megan Whonnock – Land Code Manager

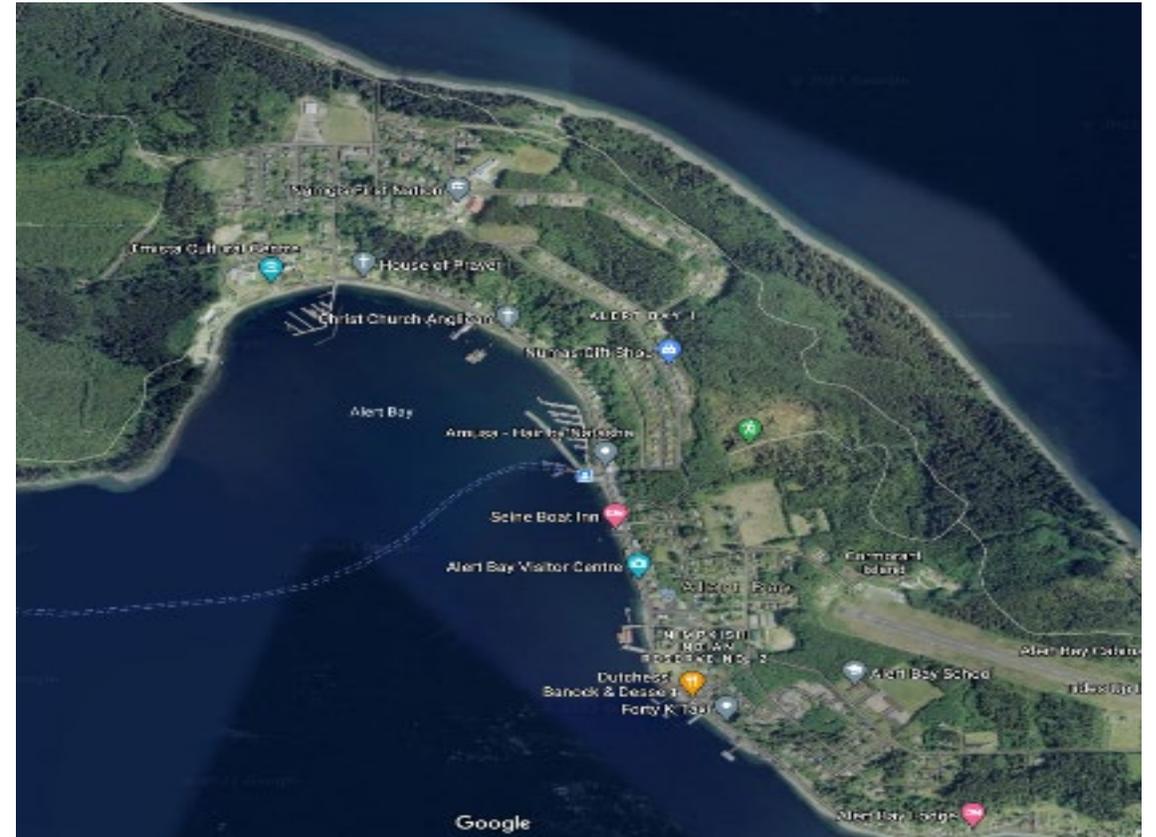
'NAMGIS FIRST NATION

OUR PANDEMIC EXPERIENCE



LEADERSHIP APPROACH

- Emergency Operations Centre
 - Health & Safety Manager
 - Health Leads
- Tri-Authority
 - ‘Namgis First Nation
 - Whe-la-la-u Area Council Society
 - Village of Alert Bay



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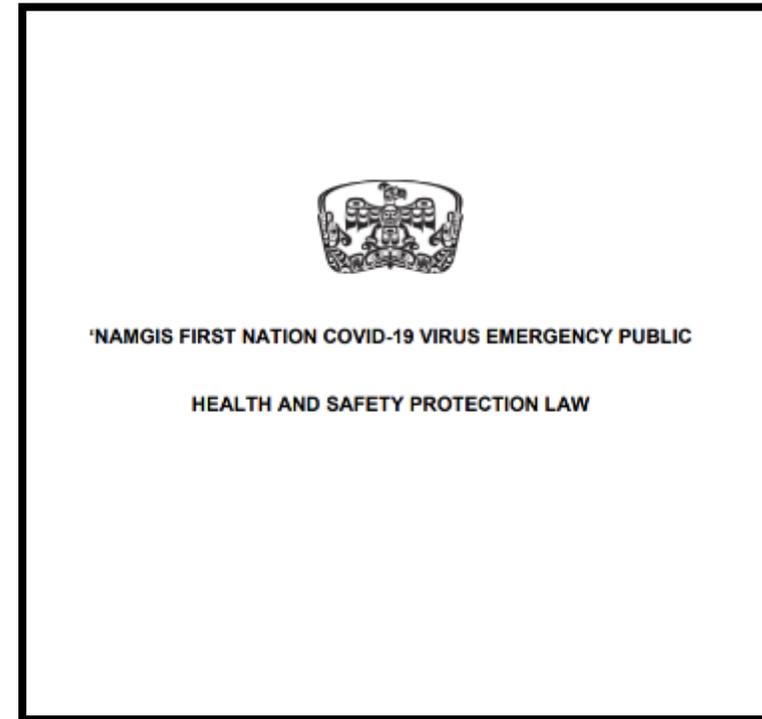
Education | Planning | Leadership

- EOC was set-up and staffed by tri-authority staff/volunteers
- Information gathering/sharing
 - Data collection – Household information
- Hand delivery of pandemic plan



'NAMGIS FIRST NATION

- Mid-April SOLE declared
- Tri-authority worked with FNHA, Island Health, Province of BC, ISC and local partners
- 'Namgis enacted an emergency law under Land Code



➤ Resources/methods/tools we used:

- Curfew (9:30pm-6am)
- Shelter-in-place siren
- Safety ambassadors
- Isolation centres
- Ferry traffic control
- Harm reduction programs
- Safety plans (household)
- Food distribution
- Island testing site



April 18- May 08, 2020

- Community health – Direction
- Tri-authority – Leadership
- Education
- Social Media
- Anti-body Testing
 - Incentives
- Flu kits
- Maintaining a local testing site
- EOC – Virtual



Golden rules for everybody

 Practice physical distancing	 Clean your hands	 Stay at home if you're feeling ill - no exceptions	 Increase cleaning at home and at work
 Stay informed	 Cover your cough	 Minimize non-essential travel	 Make spaces safer

COVID-19 IN BC

Vaccination clinic

- Island wide approach



- 735 vaccinated
- 2nd dose clinic starts next week!



CONCLUSION

- Many thanks to our amazing Health Leads, Community Leadership and Health & Safety Manager for strength, resiliency and guidance
- Continuous thoughts to our families who have lost loved ones to this virus – and to all communities/families who grieve at this time
- Encourage opportunities to virtually engage with others – we still struggle with this despite our successes during this pandemic

Gilakas'la

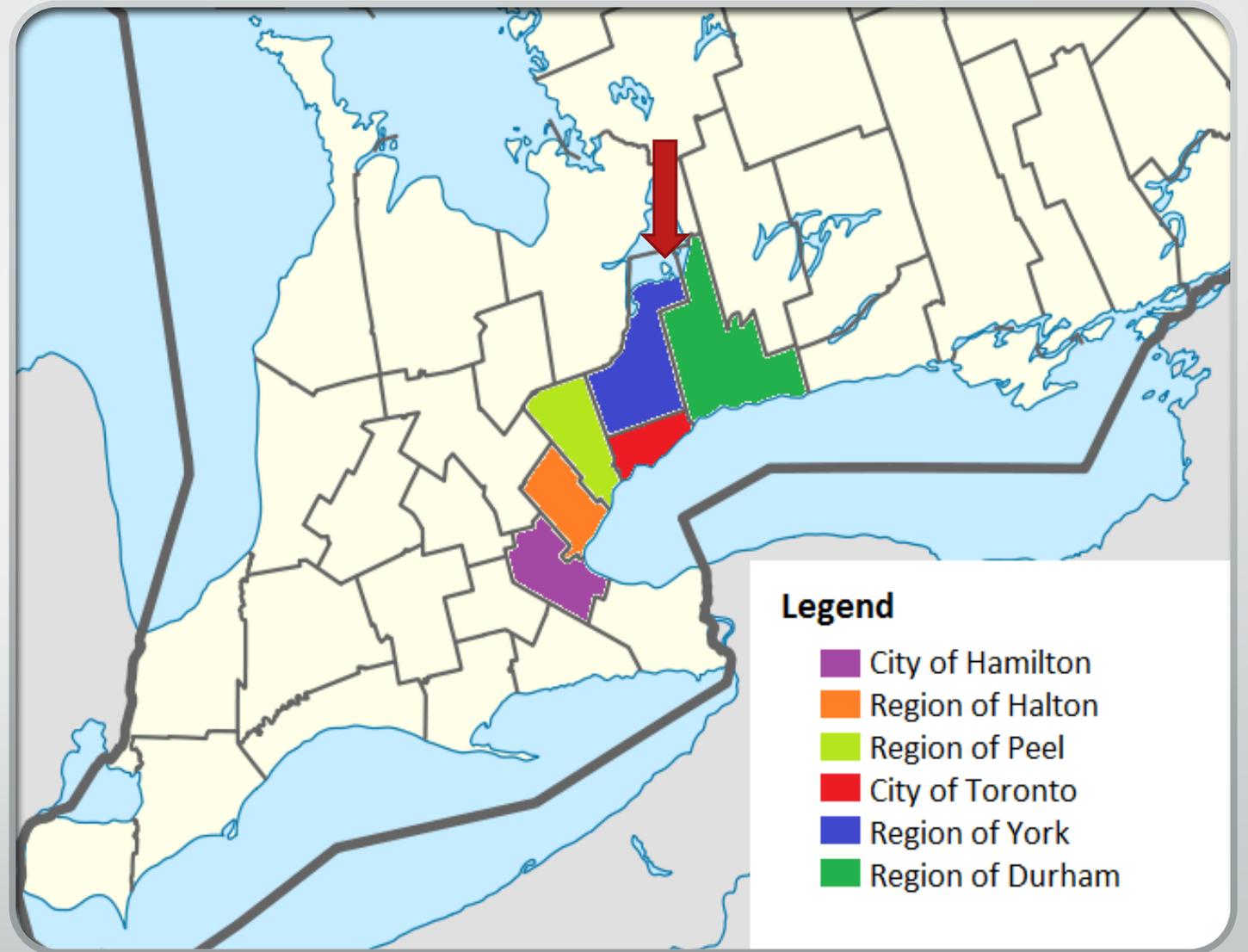
Community Response Review

COVID – 19 Pandemic Protection



Location

- 6,000,000 plus population within 2 hours driving time
- 200 Members on the Island
- Highest Daily Case Counts of Covid 19 for Ontario in Toronto, Peel, York and Durham Regions
- Monday February 8, 2021
 - 1265 Cases Total
 - 868 in Four Regions
 - 69% of New Cases reported within 2 hours driving time



Business Operations

- March 23, 2020
 - Evaluated Safety Risk/Safety Plans Developed
 - Businesses Closed for Six Weeks
 - Re-tooled service counters and service areas/Developed Separate Entrances
 - PPE was ordered and stock piled
- May 4
 - Limited access reopening/ Curbside pick up only
 - Limited contact with staff
 - Added Security Personnel
 - Masks mandatory for all
- May 15
 - Full Reopening with Customer Masks Mandatory
 - Cases Dropped
- November 2020 to Present
 - Cases Rising
 - Consulted with First Nation Health Department on a Review
 - Determined Adequate Safety Precautions in Place (Addition of Personnel now requiring masks)
 - Received Designation From First Nation as Essential Service (Convenience, Medicinal)
 - Remained in Operation outside of Provincial Government Regulations



Vaccinations

- Vaccinations started on January 22, 2021
- 48 hours to prepare and start the process
- Community Members with priority to elders and compromised individuals
- Offered beyond that to those that want one
- No Force Approach – No time for confidence or capacity building of knowledge regarding vaccines
- Allow societal requirements to deal with those that do not want vaccinations
- No clarity on relationship between vaccination and transmission (no changes to protocols)



Mental Health

- Issues
 - COVID Fatigue
 - Back to Work
 - Financial Recovery
 - Vaccination Relief
 - Vaccination Avoidance
 - Vaccination Permissions
 - Uncertainty of Change

Unique Experience

- Benefits
 - Independence
 - Law Making Ability
 - Control of the Lands
 - Easy Process
 - Rapid Implementation
 - Directing of Support
 - Knowledge of the People
 - Better Process of Communication
- Work to be Done
 - Better Information Transfer (Trust)
 - Federal
 - Provincial
 - Municipal
 - Community Understanding of Abilities
 - Power and Authority of Running a Nation
 - Better Overview of First Nation
 - Overcoming Barriers within First Nation
 - Confidence



Thank You

Questions



Group Discussion

Successes, Challenges, Needs



COMMUNICATION

What methods have you used with your community COVID-19 Vaccines?



PROTOCOL

Do you have a rollout protocol in your First Nation?



PROCESS

Do you have a process for contact tracing and other support tools?



VERIFICATION

Do you have recommendations on how to verify vaccination for those accessing the community (visitors, services, etc.)?



Update on COVID-19 Vaccine Deployment & Confidence



Preparedness in First Nations communities related to COVID-19

**Briefing to Training, Mentorship and
Professional Development
Workshop
February 11, 2021**



COVID-19 – Canadian Context

- As of February 8, 2021, 804,260 cases have been confirmed in Canada, with 20,767 deaths. This compares to the estimated 3,000 – 4,000 influenza-related deaths in Canada each year.

Province/ territory	Tested positive	FN Community Associated	Active Cases	Ever Hospitalized	Deaths	Recovered
BC	69 245	1898	292	109	31	1575
AB	125 672	5341	563	293	47	4731
SK	24 680	4637	445	124	38	4154
MB	29 968	4677	364	246	52	4261
ON	273 660	570	66	30	4	500
QC	266 672	524	18	13	4	502
NB	1318	7	2	0	0	5
NS	1584	3	0	0	0	3
NL	411	0				
PEI	113	0				
YK	70	No specific FN breakdown				
NWT.	32	No specific FN breakdown				
NU	296	No specific FN breakdown				

*note - FNIHB does not collect complete data on recoveries or hospitalizations in BC, QC, and NR. Cases are estimated to be recovered 14 days following date of case confirmation or date reported to FNIHB. Information on whether a hospitalized case in BC, QC, NR, or Nunavik has been in ICU or has been discharged is unavailable.

**note – these cases reflect all cases reported in Yukon and NWT, including non-Indigenous. For information on confirmation of FN cases for YK and NWT – please request from Medical Officers of Health (Dr. Elliot in YK and Dr. Delli Pizzi in NWT) - to provide full picture.

COVID-19 Vaccines

Track 1 Vaccines (Winter 2021)

- There are two COVID-19 vaccines (Pfizer and Moderna) currently approved for use in Canada. Both vaccines have complicated logistical requirements, requiring considerable planning across jurisdictions
 - As of January 29, 2021, ISC is aware of 299 First Nations communities with COVID-19 vaccinations underway, for varying subgroups of the eligible population

Track 2 Vaccines (Spring/Summer 2021)

- These vaccines have more standard logistical requirements allowing for more use of existing PT vaccine capacity.
- Vaccines anticipated include NovoVax, AstraZeneca, J&J, Sanofi, and Medicago

Track 3 Vaccines (Fall 2021)

- It is anticipated that track 3 will involve immunizing special populations (e.g., children, pregnant women) will depend on availability of safety and efficacy data
- NACI will inform population-specific strategies as new evidence emerges

Provincial/territorial vaccine distribution

- The following table describes the quantities of COVID-19 vaccines that have been delivered to provinces and territories to date. This table reflects the most recent information made public by PHAC and will be updated accordingly.

Total COVID-19 vaccine confirmed distribution as of February 4, 2021, at 8 am ET

Vaccine distribution	Pfizer/BioNTech	Moderna	Total
Total distributed in Canada	858,000	340,200	1,198,200
Newfoundland and Labrador	12,675	4,800	17,475
Prince Edward Island	7,800	2,400	10,200
Nova Scotia	23,400	7,400	30,800
New Brunswick	17,550	5,100	22,650
Quebec	190,125	66,500	256,625
Ontario	328,575	109,400	437,975
Manitoba	36,075	14,700	50,775
Saskatchewan	28,275	10,300	38,575
Alberta	98,475	34,000	132,475
British Columbia	115,050	41,200	156,250
Yukon	0	14,400	14,400
Northwest Territories	0	14,400	14,400
Nunavut	0	12,000	12,000
Federal allocation Footnote1	0	3,600	3,600
Footnotes			
Footnote 1 Federal allocation includes doses for Public Health Agency of Canada (PHAC), the Canadian Armed Forces and Correctional Service Canada			

Vaccine Prioritization

- Indigenous peoples may be at a higher risk of more severe outcomes of COVID-19 due to social, environmental, and economic factors which are rooted in the history of colonization.
- As Canada plans for vaccine roll out, Indigenous Services Canada has been working closely with the National Advisory Committee on Immunization (NACI), an external advisory body to the Public Health Agency of Canada, and NACI recommends that the COVID-19 vaccine should be offered to the following populations first:
 - Residents and staff of congregate living settings that provide care for seniors
 - Adults 70 years of age and older, beginning with adults 80 years of age and older, then decreasing the age limit by 5-year increments to age 70 years as supply becomes available
 - Health care workers (including all those who work in health care settings and personal support workers whose work involves direct contact with patients)
 - Adults in Indigenous communities where infection can have disproportionate consequences
- Provincial and territorial governments are responsible for allocating the vaccine within their jurisdiction, Indigenous Services Canada is working closely with these governments to advocate for equitable access to the vaccine for all First Nations, Inuit, and Métis peoples, including in First Nations populations who are living off-reserve.

Vaccine roll-out into First Nations and Inuit communities in the provinces and among the Indigenous and non-Indigenous population in the territories

Province/territory	Number of communities with clinics started
British Columbia	81
Alberta	13
Saskatchewan	64
Manitoba	60
Ontario	16
Quebec	25
New Brunswick	1
Nova Scotia	
Prince Edward Island	2
Newfoundland and Labrador	2
SUBTOTAL (First Nations on reserve)	264
Nunavut*	12
Northwest Territories*	35
Yukon*	14
Nunavik	14
Nunatsiavut	5
SUBTOTAL (Northern and Inuit regions)	80
TOTAL	344

Number Immunized as of Feb.5 (first dose):

- First Nations living on-reserve: over 39,000
- Northern and Inuit communities: over 28,000

Total: over 68,000

*Note – Information gathered from multiple sources, including media, ISC Regional offices and territorial websites. Number is evolving each day as source of information is refined, and often due to a lag in reporting

Current Vaccine Delays

- Beginning in late January, the supply chain for vaccines into Canada experienced a temporary reduction.
- This is a normal occurrence in vaccine supply chains, as suppliers work to ramp up production and meet the high demand for vaccines.
- To mitigate supply chain issues, Canada has put in place seven agreements with leading vaccine manufacturers and developers to ensure Canada has diversity and flexibility when it comes to supply chains.
- Currently, vaccine supply has begun to ramp up again, with deliveries of the Moderna and Pfizer vaccines arriving in Canada regularly.
- The Government of Canada remains on track to have enough supply to offer vaccinations to everyone in Canada for whom these authorized COVID-19 vaccines are recommended by September 2021.

Continued Public Health Measures Following Vaccination

- Even after vaccinated, it is important to continue to follow public health order in order to protect communities and limit the spread of the virus.
- That's because we don't know how long the vaccine will last or whether it prevents us from transmitting COVID-19 to others, even if we don't have symptoms. Until extensive immunization is achieved, public health measures will continue to be essential to minimize the spread of COVID-19 in Canada and save lives.
- To stop the spread of the virus, enough people need to be immune either through natural infection or immunization. The World Health Organization estimates that at least 70 per cent of the population would need to be vaccinated to ensure widespread protection.
- To limit the spread of COVID-19 (even following vaccination), it is advised the following public health measures continue to be followed: avoid touching your face and keep your distance (two meters/six feet) from people outside of your household, and wear a mask when you can't maintain that distance (e.g., in a store or transit bus). Stay home when you feel sick, and cover your mouth when coughing or sneezing.

Positive impacts of COVID-19 Public Health Measures

- Though the COVID-19 pandemic has negatively impacted many aspects of life, COVID-19 public health measures may also be helping in limiting the spread of seasonal flu as well as improving overall hygiene measures.
- Though the flu season is on-going and continues to be tracked, all indicators of influenza activity remain exceptionally low for this time of year.
 - More information on influenza monitoring in Canada can be found here:
<https://www.canada.ca/en/public-health/services/diseases/flu-influenza/influenza-surveillance/about-fluwatch.html>
- Increased awareness of public health measures due to COVID such as hand hygiene, staying home when sick. Covering your mouth when coughing or sneezing and increased sanitization can have positive impacts on general health and hygiene.

Vaccine Confidence Considerations for Indigenous Populations

- History of colonialism and systemic racism within the healthcare system can impact vaccine confidence.
- These factors can lead to vaccine hesitancy, through mistrust in the system and professionals that provide the recommendations and vaccines.
- For Indigenous populations the legacy of Government sanctioned experiments that occurred at Residential Schools, tuberculosis sanatoriums as well as many other historical events makes it difficult to “trust”

 Healthy First Nations and Inuit  1h · 

Racism. Prejudice. Bias. Stereotypes. They can, and do, kill. Systemic racism in health care needs to stop. Read more from the College of Physicians and Surgeons of Ontario.

TREATING ROOT CAUSES, NOT SYMPTOMS

History of colonialism and systemic racism looms over Indigenous health disparities



 CPSO

College of Physicians and Surgeons of Ontario
Medical & Health [Learn More](#)

College of Physicians and Surgeons of Ontario
December 12, 2020 · 

#CoverStory: How does anti-Indigenous racism come into play in health care? What biases might emerge? And how can doctors make a meaningful impact on health care equity?

Five Indigenous doctors share their thoughts in this issue of **#CPSODialogue** — <https://dialogue.cpso.on.ca/.../treating-root-causes-not.../>

Moving from Hesitancy to Vaccine Confidence

- Increasing vaccine confidence in Health Care Workers and Leadership is key to providing consistent messaging
 - Chief, Regional Chief, Community Health Nurses, Health Directors, Licensed Practical Nurses (LPN), other health care workers etc. are important role models, what they say about immunization has a big role to play
- Provide educational opportunities for health care workers and Indigenous Leadership to increase their confidence in the vaccine and their competencies in addressing vaccine hesitancy
- There must be consistent messaging from all health care workers and Indigenous Leadership on accurate information about COVID disease risks, vaccine safety & benefits. Transparency is a key factor in building trust.

Informed Decision (consent)

- It is important to respect each person's autonomy to decide if they want to receive the vaccine.
- Foster an *"it's safe to ask"* environment
- Ultimately we want to prepare clients to make their own informed choice.
- Healthcare providers are responsible to ensure accurate information is available in a form that is accessible and be respectful in answering questions.
- In addition to messaging from leadership and elders, here are some reliable sources where additional information can be found on COVID-19 vaccine.
 - canada.ca/COVID-19
 - canada.ca/coronavirus-info-indigenous
 - provincial and territorial health authorities

COVID-19 Vaccine Resource Library

- ISC has started creating an online library of COVID-19 vaccine resources. It links to the work done by various organizations and provides details on what languages are available and the type of resource it is (i.e., video, poster)

Resources on COVID-19 vaccines

Filter items Showing 1 to 10 of 12 entries | Show entries

Resource name 	Also available in 	Format 
COVID-19: How vaccines are developed	not applicable	Video
Cree Board of Health and Social services of James Bay: COVID-19	not applicable	Video and frequently asked questions
First Nations Health Authority: Facts about COVID-19 vaccines	not applicable	Poster
First Nations Health Authority: What you need to know about the COVID-19 vaccines	not applicable	Webpage
Government of Canada: COVID-19: How vaccines are developed	not applicable	Video
Government of Canada: What you need to know about the COVID-19 vaccine	<ul style="list-style-type: none"> • English • Cree • Dene • Eastern Ojibwe • Innu-Aimun • Inuinnaqtun • Inuktitut (Nunavik) • Michif • 	PDF

COVID-19 Vaccine: Indigenous trusted sources and staying connected nationwide



Dr. Adams and National Chief Perry Bellegarde podcast



COVID-19 vaccine arriving in a community.

Elder Helen Clifton says she wants to be a role model for those unsure about taking the vaccine

'What is precious to granny should be precious to all,' says the 95-year-old elder who was the first to be vaccinated in her Gitga'at First Nation community.



For more information contact:

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COVID-19 Enforcement





Links to Enforcement & Trespass laws

- Land Code provides the authority for First Nations to develop, pass and enact COVID-19 laws
- COVID-19 laws provide Council the authority to issue Public Health Orders such as curfews, evacuation or isolation upon a positive COVID-19 test, or emergency lockdown requirements
- The COVID-19 law must declare that any breach of the orders is an offence and is subject to penalties outlined in the law
- The orders issued pursuant to the COVID-19 law should contain stipulations or conditions that require compliance but also considerations for exceptions
- Another consideration is a well-developed Emergency Management Law with a well-developed and up-to-date emergency plan





Links to Enforcement & Trespass laws (cont.)

- Communities must have well-developed COVID-19 laws clearly identifying appointments and providing inclusion authorities for the policing organization
- In most Land Codes there is the provision that the First Nation may enact an Emergency Law if there is serious or imminent threats to health and safety to the community and its inhabitants
- There must be linkages between the COVID-19 law, a Trespass Law and an Enforcement Law
- An Enforcement Law or Community Protection Law can provide for different levels of enforcement: 1) Written warning or notices of contravention, 2) A ticketing regime, 3) Summary conviction offences
- Challenges for communities that have laws exist with policing agencies, prosecutors, provincial and federal governments



The Indian Act provides the authority to enact a by-law to deal with the prevention and spreading of contagious and infectious diseases. (Section 81(1)(a)).

Indian act bylaws are not without challenges and any bylaw must be carefully drafted providing authorities, and enforcement procedures.

Challenges:

- Unable to delegate authority
- Assistance in prosecution by Public Prosecution Canada during the pandemic
- A prerequisite is an individual agreement between Public Safety Canada and each First Nation



INDIAN ACT BYLAWS AND PROSECUTION

- Public Safety Canada in some provinces have initiated a protocol to prosecute COVID-19 Indian Act bylaws (Seabird Island)
- The Resource Centre is prepared to support potential investigations and private prosecutions where the facts merit
- The Resource Centre continues to support signatory First Nations who are experiencing challenges when dealing with local policing agencies
- The Resource Centre will continue to engage the RCMP, other policing agencies both provincial and federal government ministries
- First Nations must initiate a tactical approach and can enact both COVID-19 laws under the Framework Agreement and under the Indian Act with similar provisions



Offence Notices – Ticketing process

- An effective enforcement or community protection law can provide a wide array of remedies to gain compliance.
- With the proper authority, enforcement personnel including the police could issue offence notices that could carry a monetary penalty.
 1. Verbal warnings - No monetary penalty
 2. Written warnings or certificates of offence No monetary penalty
 3. Offence notices or tickets - Monetary penalty assessed and an option to challenge
- The offence notice or ticket should include a process for dispute





Penalties and Convictions - FN, Police, etc.

- First Nation laws can provide more effective remedies and penalties under an Enforcement Law or pursuant to the summary conviction provisions of the Criminal Code
- Maximum penalties set out in the Indian Act set considerably lower maximum fines
- First Nation laws in accordance with the Framework Agreement can provide a wider range of remedies not only when considering monetary penalties but alternative remedies in keeping with customs and tradition can be applied



COVID-19 LAWS VS. BYLAWS



Land Code Laws	Indian Act Bylaws
More effective penalties	Restricted and lower maximum fines
Can be used in conjunction with other FN laws	Limited to the scope of the bylaw
The ability to delegate authority to officials within the law	Unable to delegate the authority
The ability to enforce through conventional means warnings, tickets and prosecution	Prosecution is limited to provincial court in the summary conviction process outlined in the criminal code
Enforcement can be administered by the appointment of enforcement personnel and the police	A reluctance to enforce by the police and prosecutor's office
Prosecution can be initiated through private prosecution for all FN laws	There is a reluctance to enforce and prosecute bylaws and a special agreement is required to enforce COVID-19 related laws. No guarantee that all bylaws will be prosecuted



SAMPLE OF HEALTH PROTECTION ORDER

An example of a Public Health Order outlining conditions for a curfew including exemptions.

With Permission of Misipawistik Cree Nation



Misipawistik Cree Nation
P.O. Box 500, Grand Rapids, Manitoba R0C 1E0
Ph: (204) 639-2219 / 2485 / 2486 / 2203 Fax: (204) 639-2503

MCN Public Health Order 2021-01

The following Public Health Order is enacted under the Misipawistik COVID-19 Pandemic Emergency Community Protection Law, pursuant to section 6.4, effective November 5, 2020:

EMERGENCY CURFEW

Misipawistik Chief and Council believe that as a result of the COVID-19 Pandemic, Members of our Cree Nation and neighbours are under a serious and immediate threat to health and safety. The threat cannot be prevented, reduced, or eliminated without taking additional measures to current Public Health Orders from the Province of Manitoba.

Therefore, Chief and Council are making the following order to protect our community from this very serious and immediate threat.

To:

All persons who reside or are permitted access to Misipawistik Lands

Order to Observe Curfew

Misipawistik Cree Nation is enacting a curfew, prohibiting all persons from traveling within the community between the hours of 9:00 pm and 6:00 am. Curfew is in effect immediately and expires in 7 days unless re-enacted by a resolution of the MCN Chief and Council.

Exceptions

The restrictions on travel within the community do not apply to:

- (a) People who must travel to or from their homes for employment within the curfew hours;
- (b) Emergency response; and
- (c) Special circumstances that have the written authorization of the MCN Chief and Council or Emergency Manager.

January 14, 2021



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January 14, 2021



As vaccinations are distributed to the communities and across the province some thoughts or considerations for discussion:

1. Restrictions for those that are not vaccinated.
2. Refusal to be vaccinated - Restrictions and possible prohibitions for access to the community?
3. Mandatory conditions to carry and produce upon request proof of vaccination.
4. Consideration for mandatory testing and the implementation for rapid testing.
5. A review of the pandemic response and document lessons learned.
6. From the review implement or update existing pandemic responses, laws and services to better protect the community from future outbreaks



Questions & Discussion



Updates on ongoing COVID-19 Law Development & Enforcement strategies under Land Code

Community-based approaches in the continued management of COVID-19

Virtual Networking on shared perspectives & community impacts

Ongoing RC support

Virtual Networking

- Knowledge Sharing
- Breakout Room
- Open Discussion
- Frequently Asked Questions

March 11, 2021 - 9:00AM PST / 12:00PM EST



RC FIRST NATIONS
LAND MANAGEMENT
RESOURCE CENTRE

T **M** Training, Mentorship &
P **D** Professional Development

Resource Centre

Training, Support & Resources



2 - 3 hours virtual workshop



presentation & group discussion

2021 Virtual Workshops - Save the Dates



APR 8

MAY 6

JUN 10

JUL 8

AUG 12

SEP 9

OCT 7

NOV 4

DEC 9



2-3 hour virtual workshops



presentation & group discussion

Registration opening soon!



**FIRST NATIONS
LAND MANAGEMENT
RESOURCE CENTRE**



**Training, Mentorship &
Professional Development**

THANK YOU

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TMPD Manager

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