Health Equity in First Nations Health Governance

Equity Lens in Public Health

Centre for Aboriginal Health Research

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Indigenous Equity Framework of Relational Environments

Research

Equity Lens in Public Health (ELPH) research program
Study 1: Health Equity Priorities and Strategies

- ☐ One of four inter-related studies over five years
- ☐ Analyzing the factors that promote or restrict the uptake and implementation of equity as a priority in BC's health authorities

Indigenous Equity Analysis

- ☐ Parallel analysis conducted in partnership with the Centre for Aboriginal Health Research (CAHR)
- ☐ Using the *Indigenous Equity Framework of Relational Environments* to guide the analysis of equity/inequity in public health as it pertains to Indigenous peoples in Canada

Methods:

- ☐ Document review and critical discourse analysis
- ☐ Data coding and thematic analysis using NVivo software

Data sources:

- ☐ Ministry of Health (MOH) and health authority (HA) Service Plans and Strategic Plans (18 documents)
- ☐ Focus groups with HA front line staff
- ☐ Interviews with HA managers and MOH policy analysts

Objective:

- ☐ Compare baseline analysis to follow-up analysis for each health authority to track implementation and change over time
- ☐ Produce six case reports and a provincial level summary

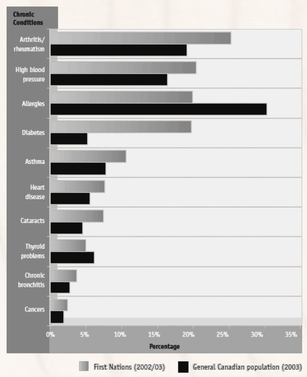
Purpose:

- ☐ Promote health equity as a priority, and integrate into public health policy and program development
- ☐ Transform the health system to reduce systemic health inequities

Background

- ☐ **Health inequities** are *avoidable* or *preventable* inequalities in health status between groups of people between and within countries
- ☐ Canada ranks fourth out of 177 countries in the 2007-2008 United Nations Human Development Index; yet, the health status within many First Nations communities is comparable to *"Third World health status"* (Matthew Coon Come, as cited in Adelson, 2005)

Prevalence of Chronic Conditions among First Nations Adults Compared to the General Canadian Population



Source: First Nations Regional Longitudinal Health Survey

- ☐ First Nations **health governance** is influenced by a unique combination of federal, provincial/ territorial, and local policies, legislation, and relationships
- ☐ Despite the multiplicity of authorities responsible for First Nations health, complete coverage is not ensured; rather, the complex system has led to jurisdictional gaps and fragmented service delivery that produce and perpetuate health inequities

Relational Environments

- ☐ The Indigenous Equity Framework uses **relational environments** as physical and theoretical settings where health equity is analyzed
- ☐ Relational environments can be understood using the metaphor of a tree and its three basic elements: the crown (leaves and branches), the trunk, and the roots
- ☐ Each part of the tree is interconnected and interdependent upon the other parts and also upon the surrounding environment that can be both nourishing and sometimes destructive

Stem Environment

- ☐ The **stem environment** can be understood as the crown of a tree
- ☐ The stem environment includes one's physical and social context, which influence health in the most obvious and direct ways
- ☐ **Human:** interpersonal relationships between and among clients/ patients and health service providers
- ☐ **Non-Human:** natural and built environments, services and resources, barriers and facilitators to accessibility
- ☐ **Symbolic:** how people, cultures, health and health equity are perceived, portrayed, and/ or positioned

Core Environment

- ☐ The **core environment** can be understood as the trunk of a tree
- ☐ The core environment has a less direct impact on the health of individuals, yet profoundly influences stem environments
- ☐ **Communities:** Indigenous communities, Band governments, locally-controlled health authorities, etc., and their roles in planning, managing and administrating health services
- ☐ **Institutions**: organizations, agencies, foundations, etc. devoted to a particular cause or interest
- ☐ **Systems:** overarching frameworks that encompass a number of governing bodies, authorities, and institutions that share a common purpose (e.g. health, education)

Root Environment

- ☐ The **root environment** can be understood as the roots of a tree
- ☐ The root environment includes the broad determinants that shape health equity as well as the historical foundations upon which current structures within the core environment have evolved
- ☐ **Culture:** the significance of culture and cultural connection to health and wellness at the individual, family, and community levels
- ☐ **Historical:** the historical context, including past circumstances and events, that have led to or have impacted the current conditions of health equity
- ☐ **Political:** political institutions, governing structures, and power dynamics
- ☐ **Social:** the conditions in which people are born, grow, live, work and age

Haida Tree by kireihiryu http://kireihiryu.deviantart.com/art/Haida-Tree-173902964