



The Division of Aboriginal People's Health, within the Faculty of Medicine at UBC, exists to support and develop Aboriginal health programs, curriculum, research and advocacy with Aboriginal communities and partners on local, national and international levels.

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# Aboriginal People's Health

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## Director's Message

The last months of 2010 were an exciting and busy time for our division, and for the field of Aboriginal health.

The UBC Learning Circle opened on September 29th, 2010, with an information session for BC First Nations communities on the upcoming changes in Aboriginal health. In this two-hour session, senior officials from Health Canada, BC Ministry of Healthy Living and Sport and the First Nations Health Council, presented on the recently initialled *Basis for a Framework Agreement* through videoconference to BC First Nations communities. The *Basis for a Framework Agreement on First Nations Health Governance* is the first step in BC First Nations taking greater control over health programs and services. (Please see page 4 for more details on the UBC Learning Circle.)

UBC is being asked to take leadership in supporting the implementa-

tion of the new First Nations Tripartite Health Plan that will facilitate the transfer of health care to a First Nations health authority. Because of these new changes to the field of Aboriginal health in British Columbia, the Division of Aboriginal People's Health is working hard to meet the changing needs of the health-care systems in the province. As one of objectives of this new plan is e-health and tele-health growth, we have recently signed an agreement with the First Nations Health Council and Health Canada to be a center of excellence for our videoconference learning circle that we host each week with one hundred First Nations communities around our province to increase their competency, resilience and skill level. UBC has the opportunity to continue to support the work force, which will drive these significant changes in BC Aboriginal People's health.

We are proud of the work we have accomplished and are com-

mitted to those who also work in the field. We recognize that sometimes the road is not easy to get into medical school, and we honor the students who continue to persevere to realize their dreams. A thank-you to those who are interested in Aboriginal Health, and want to work with us, and other organizations devoted to this important cause.

Huy ch q'u,

Leah May Walker

James Andrew

## New Websites for Aboriginal People's Health

The Division of Aboriginal People's Health launched two new websites at the end of 2010.

The UBC Learning Circle website launched on September 17th, in time for the opening of the Learning Circle season.

Some new features include: an event calendar to keep up-to-date on upcoming sessions,

news updates with a comments option, a Facebook page, a Youth section, as well as videos, references, articles and links related to the topics discussed in the weekly Learning Circles.

The Division website launched in mid December. One of the most unique features is a private community space for aboriginal health

students at both the graduate and undergraduate levels.

Special thanks to Agustian Hermanto from Family Practice IT for the beautiful re-design of our websites.

### Visit our new websites at:

<http://aboriginalhealth.med.ubc.ca>

<http://learningcircle.ubc.ca>

## Welcomes & Goodbyes

In the fall of 2010, the Division of Aboriginal People's Health welcomed some new faces.

**Tanu Gamble** will be acting as Research Assistant for "Educating for Equity". **Danette Moulé** joined us from the Department of Family Practice. Welcome to Tanu and Danette!

Our Education Coordinator, **Lyana Patrick**, returns at the end of January from maternity leave. We say goodbye to **Aleya Abdulla**, who filled in for Lyana for the remainder of her maternity leave.

In December 2010, we said our sad goodbyes to the Director of the Aboriginal Residency Program, **Dr. Veronica McKinney**. Known as Dr. Veronica to her students, she has provided exceptional teaching and guidance to the residency program for the past five years. We wish her the best of luck in her new position in Saskatchewan and all her future endeavors. She will be sorely missed.



## Medicine

The Faculty of Medicine has currently received 21 applications from Aboriginal students to the medical program. Eleven students will be interviewed in February, and if successful, will be offered spots in May. There are currently 13 seats available.

Plans for a fall retreat for students are currently underway.

There are four students graduating this year. They are:

**Arianna Watts**

**Keith Neufeld**

**Caitlin Naylor**

**Stephanie Casey**

We would like to extend our best wishes for our students that are graduating.

Congratulations!

## Educating for Equity *Tanu Gamble*

Since our last update in the August 2010 issue of the APH newsletter the Canadian portion of the Educating for Equity (E for E) research team has been busy recruiting and hiring staff, implementing project management tools, performing literature research and planning research protocol. The E for E team has members from British Columbia, Alberta and Ontario. We gathered together in Calgary in December 2010 to welcome new staff members and to discuss research methodologies. Anh Ly has been hired as the project coordinator at the University of Calgary, and Jody Boffa has been hired as research associate; Tiina Liinamaa has

**Educating for Equity: Exploring How Health Professional education can reduce disparities in chronic disease care and improve outcomes for Indigenous Populations (CIHR HRC, New Zealand, NHMRC Australia)**



been hired as research associate at Queen's University; and at UBC Tanu Gamble has been hired to support Co-

Investigators Leah Walker (Associate Director of the UBC Division of Aboriginal People's Health), Dr. Betty Calam (St. Paul's Family Residency Site Director) and Dr. Kendall Ho (Director, eHealth Strategy Office) in their work on the project.

The project is still in the beginning stages,

with a lot of background work still to be done. We have just begun thinking about how research sites will be chosen across Canada and what research methodologies will be used. The Canadian E for E team leader, Dr. Lindsay Crowshoe, will be travelling to New Zealand in the spring to meet with our international partners from New Zealand and Australia.

Tanu Gamble is a Social Science Researcher at UBC, with close ties to both the Haida and Tsimshian nations. She has been working in the area of Aboriginal health for the past 8 years, with a focus on social justice and the improvement of Aboriginal health and health outcomes.

## The Aboriginal Residency Program

Danette Moulé

For the typical medical student, getting into his or her residency program of choice is a feat. Competition is fierce, and acceptance rates are low. However, for an Indigenous student who sees his / her future practice situated in an Aboriginal community, being accepted into a program that allows him / her to learn about traditional healing methods, and train in Indigenous communities, is vital.

The UBC Aboriginal Residency Program was created for both Indigenous and non-Indigenous medical students who wish to learn more about health issues particular to Aboriginal people. Part of the program focuses on Aboriginal populations, and allows students to gain experience by working in Aboriginal communities and treating Aboriginal patients. In addition to training students, the program seeks to address the growing health inequities within Aboriginal populations while increasing the number of Aboriginal doctors in the country. Many students also choose to combine their medical training with learning about traditional Aboriginal healing methods, therefore keeping true to Aboriginal culture and bridging some of the gaps between Aboriginal and Western medicines.

Now in its ninth year, the Aboriginal Residency Program has graduated 18 MDs, with 4 of those individuals being of Aboriginal descent. There are currently 9 residents in the program, and all 9 are of Aboriginal descent.

Two of the program's current residents, seeking to collaboratively build health and create positive change, are Lana Potts and James Makokis. Lana hails from the Piikani Nation in traditional Blackfoot territory located in southern Alberta. She was raised with traditional Blackfoot teachings, and traditional methods of healing, in an inspirational community that continues to overcome the impact of colonialism. Having seen inequities around her from a young age, Lana knew long ago that she wanted to dedicate her life to helping her people. Figuring that health was a vital starting point, Lana enrolled in nursing at the University of Alberta in Edmonton in 2000 and graduated



as an RN in 2005. She fell in love with medicine and decided to go all the way, enrolling in medical school at the Northern Ontario School of Medicine (a school where one can focus on Aboriginal health) in 2005 and graduating with her MD in 2009. Lana then competed with about 60 other applicants for one of the 4 spots in UBC's Aboriginal Residency Program, and soon found herself adjusting to the west coast way of life.

Now in her 2<sup>nd</sup> year of residency and acting as Chief Resident, Lana dreams of opening a holistic health centre in an Aboriginal community, where various practitioners would come together to create a learning centre for Aboriginal health. Lana sees this centre as a means by which Indigenous people can "take control of their lives, and build lasting health within themselves, through culturally traditional practices and values."

James Makokis has similar hopes and dreams. His roots lie with the Saddle Lake Cree Nation, the 3<sup>rd</sup> largest First Nations community in Alberta. James always knew he would go into health care, in some capacity, but his road to medical school was a long one. James obtained a Bachelor of Science in Nutrition and Food Science from the University of Alberta, followed by a Masters of Health Science in Community Nutrition from the University of Toronto. He enrolled in medical school at the University of Ottawa in 2006, and graduated with the class of 2010.

James initially planned on going into Public Health, but the idea of having the opportunity to refine his skill in an Aboriginal context, under an Aboriginal program Director, led him to Victoria for UBC's Aboriginal Residency Program. Still in his first year, James has now had the pleasure of spending a month working in an Aboriginal community, as well as connecting with Indigenous peoples from various nations and backgrounds. "It is so rewarding getting to connect and work with people from

various Indigenous backgrounds, and treat their particular issues, which, in many ways, are quite distinct from the rest of society," says James.

Next year, James will have the opportunity to complete a traditional medicine rotation in his own Saddle Lake community. Along with Lana, James sees a holistic, integrative clinic in his future, where health education is fostered and shared. Being a two-spirited person, James also wants to create a safe environment for other two-spirited, gay, and lesbian individuals to receive care.

With similar goals in mind, James and Lana have decided to join forces and return to James's home community of Saddle Lake at the end of their respective residencies, to realize their dream of a holistic healing centre. Being from traditionally



rival tribes, their decision to unite in partnership is significant on two fronts: the coming together of various Indigenous communities to face common social issues, and the fostering and sharing of traditional methods of healing. "I'm so excited at the thought of bringing what I have learned about health to such a large community, and working with people within the community to collaboratively bridge that gap between traditional and western medicines," says Lana. "It will truly be an extraordinary experience."

In B.C., there are currently 198 Aboriginal Bands spread across over 250 communities, comprising 150,000 status Aboriginal people. About 50% live on reserves, and about 5% of B.C.'s population is Aboriginal, the fastest growing population in Canada. There is a growing need for qualified doctors with the skills necessary to address Aboriginal people's unique needs. To learn more about UBC's Aboriginal Residency Program, please visit <http://www.familymed.ubc.ca/carms>.

## The UBC Learning Circle

The first Learning Circle of the 2010/2011 year opened strongly on Sept 29<sup>th</sup> with a session on the Tripartite First Nations Health Plan. The three panelists, who all made short presentations before taking questions from communities, were: **Grand Chief Doug Kelly of the First Nations Health Council; Ian Potter, Chief Federal Negotiator, Health Canada;** and **Dr. Shannon McDonald, Executive Director, Aboriginal Healthy Living, Ministry of Healthy Living and Sport.** Participation by First Nations communities in the September 29 session was very impressive, with approximately 30 sites connected and almost 200 individuals listening in and putting their questions to the panelists. Thanks to **Al Wiebe, Jennifer Rapp and Stephen Prevost** from the FNH eHealth office for their hard work in ensuring the technology ran

flawlessly. The new website for the UBC Learning Circle (<http://learningcircle.ubc.ca>) launched in early September, with fantastic feedback to date. New user-friendly features of the website, such as event registration, comments and a Facebook page, are aiding in the steady growth of Learning Circle participants. The Learning Circle had fantastic speakers in its fall season, beginning with representatives from the **First Nations Health Council** providing updates on their ongoing work, and ranging from palliative care with **Evelyn Voyageur**, addictions with the well-known **Dr. Gabor Maté**, and closing the fall season with **Dr. Daniele Behn-Smith**. A full list of our speakers can be found at: <http://learningcircle.ubc.ca>



The Learning Circle runs every Wednesday from 10 to 11:30am with a facilitator and invited expert guests to discuss topics relating to health and healing. Past participants will continue to receive event posters by email, or may follow the Learning Circle website event calendar. If you would like to be added to the Learning Circle mailing list or have more information, please contact **Jamie Witt** at [learningcircle@familymed.ubc.ca](mailto:learningcircle@familymed.ubc.ca).

## IHHS 408 "Topics in Aboriginal Health: A Community Based Experience"

**The deadline to apply for IHHS 408 is February 11th, 2011. Apply Today!**



The UBC College of Health Disciplines and Division of Aboriginal People's Health offers a practice-based Aboriginal health elective for health science students. This 4-week course provides students with a unique opportunity to live and work with students from other health disciplines within an Aboriginal community in BC. Key areas of focus include: Interprofessional teamwork and patient-centered care; Western and Aboriginal views on health and medicine; Reflective understanding of local health concerns, values and culture. IHHS 408 will be offered from **June 1-30, 2011**, following a two-day orientation at the First Nations House of Learning on the UBC campus.

**For further details and to submit an application consisting of a one-page letter and CV, contact Jamie Witt: [aph.assistant2@familymed.ubc.ca](mailto:aph.assistant2@familymed.ubc.ca) and cc: [leah.walker@ubc.ca](mailto:leah.walker@ubc.ca) or phone 604-682-2344 ext. 62242.**

## IHHS 409 “Is the Past Present: International Indigenous Experiences of Colonization”

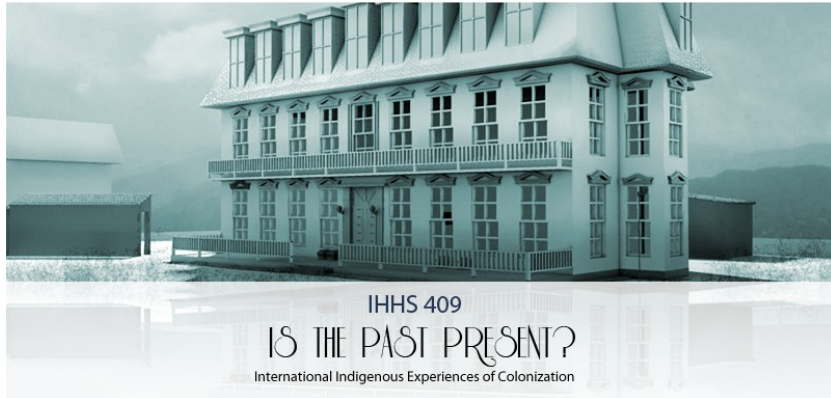
Aleya Abdulla

The **Division of Aboriginal People’s Health** is thrilled to announce the highly successful delivery of its pilot Inter-Professional Health and Human Services (IHHS) course: ***Is the Past Present? International Indigenous Experiences of Colonization***. This online course was offered to students internationally and included participation from countries such as Canada, the United States, Sweden, Mexico, the United Kingdom, Hong Kong, and Australia.

The course was a partnership among many individuals, groups and organizations: UBC Division of Aboriginal People’s Health, Arts Instructional Support and Information Technology (ISIT), First Nations Studies, the College of Health Disciplines; Onemda VicHealth Koori Health Unit, The University of Melbourne; Xay:tem Longhouse Interpretive Centre; and Indian Residential School Survivors Society. Additionally, the contribution of Elders and survivors to this course was invaluable and greatly lent to students’ understanding of the lasting, present-day impacts of colonization.

As a joint offering with the University of Melbourne, Australia, IHHS 409 explored the historical relationships between Indigenous peoples and their colonizers in Canada and Australia. Through engaging in role play, reading testimonies and articles, and listening to video and audio clips to discover how these experiences influenced Indigenous peoples, students learned about the impacts of these early relationships and how they reverberate today. Students had the opportunity to explore their relationship with these experiences, and with each other, and work towards building healing partnerships.

Students began the course by learning some key processes of colonization in Australia and Canada, and the similarities between the countries in its relations with Indigenous peoples. They learned of the Mission System in Coranderrk, Australia, through entering into a role play where they were placed into 1860s Victorian Australia. Next, the focus was on the Indian Residential School Experience in Canada, specifically in British Columbia. Students engaged in respectful discussions around cultural safety while exploring how health professionals can collaborate to positively impact health and health professional-community relationships.



The contribution of Gerry Oleman, our Online Elder, was invaluable to the course. Students had the opportunity to engage in online discussion with Gerry, where he shared his personal experience with residential schools. His openness to fully share these experiences and his healing journey, undoubtedly gave students a greater insight into the effects of colonization and its lasting impact on First Nations communities. Gerry’s insightfulness is reflected in his following comment (just one of many):

*...This has been an honour for me to see the growth that has happened, we have all learned more about what happened in history and see its impacts, so the past is still present. Let us help the victims to be free with our new found knowledge and awareness. As a wise monk said "I am not interested in who you were, I am interested in who you are". I do believe that our pure selves are still inside of us, we need to free ourselves of negativity and live our lives to the fullest. (Posted November 4, 2010)*

Throughout the course, students engaged with colleagues on collaborative decision-making in health education through group work, considered key determinants of Indigenous peoples well-being and identified, compared and contrasted key processes of colonization in Australia and Canada. Through their final projects, (a choice of a creative work or comparative essay), students described

impacts of colonizing experiences and the correlation to contemporary Indigenous health issues, deeply identified with Indigenous experiences and responses to colonization as experienced in the residential school and mission systems while also reflecting upon their own reactions to historical and current relationships with Indigenous peoples.

The delivery of *IHHS 409: Is the Past Present? International Indigenous Experiences of Colonization* marked the culmination of two years of visioning, discussion, brainstorming, and hard work amongst course creators and designers. Though we encountered some bumps along the way, the following comments from students fill us with a deep sense of accomplishment - and of excitement for the future:

*Thank you so much to Gerry for sharing his experiences! The discussion topics were excellent! This is one of the most valuable courses I have taken.*

*Overall, this course had a profound effect on restructuring my perspective on the repercussion of colonization in indigenous peoples. I appreciate the opportunity to be a part of such a wonderful learning community.*

We are thrilled to announce that this course will be offered again, in September 2011. We hope to see you online!



## Acknowledgements

**Aboriginal People's Health would like to recognize all of our staff, partners, and wonderful people that make our work possible. Thank You!**

### Division Staff

Dr. Evan Adams, Director (On leave with the Ministry of Health)  
Leah May Walker, Associate Director  
James Andrew, Associate Director  
Lyana Patrick, Education Coordinator  
Bertie Glusman, Program Assistant  
Jamie Witt, Program Assistant  
Aleya Abdulla, Program Assistant  
Danette Moulé, Program Assistant

### Adjunct Professor

Dennis A. Wardman

### Clinical Associate Professors

Dr. Veronica McKinney  
David Tu

### Clinical Assistant Professors

Dr. Evan Adams  
Laurel Shugarman  
Jay Wortman  
Leah May Walker

### Clinical Instructors

James Andrew  
Gary Bauman  
Shaunee Casavant  
Judith Gohn  
David Henderson  
Leanne Kelly  
Rose Lenser  
Payam Sazegar  
Krista M. Stogryn  
Maureen Tommy

### Honorary Instructors

Gerry Oleman

### Other Instructors

Dr. Rif Kamil  
Doreen Littlejohn  
Dr. Betty Calam

### Institute for Aboriginal Health

Dr. Lee Brown, Phd, Director  
Kerrie Charnley, Education Coordinator

### UBC

Linc Kesler, Director of the First Nations House of Learning  
Rick Ouellet, Aboriginal Student and Community Development Officer

### Health Canada

Al Wiebe, Regional e-Health Network Administrator  
Post-Transfer  
Jeffrey Yu, First Nations eHealth & Telehealth  
Dr. Shannon Waters, Director of Health Surveillance

### Community Members

Rose Point, Elder  
Shane Point  
Greg Sam, Elder  
Jewel Thomas, Elder

### IHHS 408 Communities The staff of the Mt. Currie

**Health Center**  
Allison Twiss, Health Director  
Cedric Jones  
Vickie Louis

### The staff of the Cowichan Health Center

Judith Gohn, Health Director  
Maureen Tommy  
Charlotte Williams  
Leanne Kelly

### The staff of the Esketemc Health Center

Joyce Johnson, Health Director  
Irene Johnson  
Stella Nilsson

### The staff of the Seabird Island Health Center

Carolyne Neufeld, Health Director  
Gracey Kelly

### IHHS 409 Contributors

Gerry Oleman, Elder  
Chief Robert Joseph, Elder  
Charon Spinks, Elder  
William Blackwater, Elder  
Archie Patrick, Elder  
Linnea Battel, Elder  
Lauren McLennan, UBC Education graduate  
Negin Mirriahi, Course Developer,  
Arts ISIT  
Shaun Ewen, Course Instructor,  
University of Melbourne



## ABORIGINAL PEOPLE'S HEALTH

### Location:

#201- 1190 Hornby Street  
Vancouver, BC  
V6Z 1Y6

### Mailing Address:

1081 Burrard Street  
Vancouver, BC  
V6Z 1Y6

Phone: 604-682-2344 x62242

Fax: 604-806-8499

<http://>

[aboriginalhealth.med.ubc.ca](http://aboriginalhealth.med.ubc.ca)

### Email:

[aph.assistant2@familymed.ubc.ca](mailto:aph.assistant2@familymed.ubc.ca)

[ca](#)