

# Annual Report



CENTRE  
TIOHTIÀ:KE



Indigenous Health Centre of  
Tiohtià:ke Annual Report  
2018/2019

# Board News



## Wendall Nicholas

It is with great sadness that we announce the passing of Wendall Nicholas, Micmac First Nation, President of the Indigenous Health Centre of Tiohtià:ke. Wendall was a strong advocate for social justice and increased access to health services for Indigenous people across Canada. During his time with this organization, he created great partnerships for the Centre and helped pave the way to see this project come to fruition. He was liked by everyone with whom he interacted, whether it be for a short period of time or for years. He will be greatly missed. We send our deepest condolences to his wife Melinda and his family during this difficult time. Harvey Michele, from the Ojibway First Nation, acts as interim President until our Annual General Meeting in March 2019.

## New Logo for the Health Centre

You spoke, and we listened! Thanks to feedback from our membership at our 2017/2018 AGM, Graphic Artist, Leilani Shaw, Mohawk from Kahnawake, was able to develop three new logos which were posted in an online vote that was promoted via email and our Facebook page. 125 people voted on the new logo



Thank you for helping us reach 1000 likes on Facebook. Please keep sharing our page to keep everyone informed of our latest news, interesting articles, events, and accomplishments.

<https://www.facebook.com/Aboriginalhealthcentre/>

# Innovating pilot project

**Health Navigators: August 2018 public communiqué: (French version only)**

Cabinet de la mairesse  
et du comité exécutif



Pour diffusion immédiate

## Montréal octroi un soutien financier de 30 000 \$ afin de favoriser l'accès aux soins de santé pour les communautés autochtones

**Montréal, 2 août 2018** – Le comité exécutif a approuvé le projet de convention visant à accorder un soutien financier de 30 000 \$ au Centre de santé des Autochtones de Montréal (CSAM) pour le projet pilote « Navigateur en soins de santé et services sociaux pour le CSAM ». Le projet aura pour but d'éliminer les obstacles systémiques afin d'aider les patients autochtones de Montréal à accéder aux services de santé, notamment.

« Il importe que tous puissent avoir accès à des services de santé de qualité et dans des délais raisonnables. C'est pourquoi nous collaborons depuis la première heure avec le Centre de santé des Autochtones de Montréal en vue d'améliorer l'accès aux soins pour les personnes autochtones. C'est par ce type de projets innovants, visant à créer des passerelles entre les différentes approches en matière de santé, que nous arriverons à adapter nos pratiques pour offrir aux communautés autochtones les services sociaux et de santé à Montréal qu'ils sont en droit de recevoir », a commenté Rosannie Filato, responsable du développement social et communautaire, de l'itinérance, de la jeunesse, de la condition féminine et des sports et loisirs au sein du comité exécutif.

Ce projet pilote constitue l'amorce de l'implantation du Centre de santé des Autochtones de Montréal (CSAM). La mission consistera à améliorer la qualité de vie et les déterminants sociaux de la santé des Autochtones vivant à Montréal en offrant des services culturellement adaptés et dispensés selon une vision holistique, incluant les soins en cas de maladie chronique. L'accent sera mis sur la qualité et la continuité des soins.

Les Navigateurs, qui seront en poste dès cet automne, seront des personnes d'origine autochtone qui auront pour objectifs de faciliter l'accès aux services sociaux et de santé généraux à Montréal, d'améliorer la continuité des soins et la sécurité culturelle des services offerts aux clients autochtones, en établissant des passerelles entre les approches biopsychosociales et holistiques autochtones en santé. Ils feront le pont entre les services et les personnes rejointes, offriront une formation sur les compétences culturelles au personnel non autochtone et contribueront à améliorer l'accès et la continuité des soins en favorisant l'établissement d'une relation de confiance.

Ce projet s'inscrit dans le cadre de la reconduction de l'Entente administrative sur la gestion du Fonds québécois d'initiatives sociales - Alliances pour la solidarité entre la Ville de Montréal et le ministère du Travail, de l'Emploi et de la Solidarité sociale (MTESS) pour 2013-2018.

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**UPDATE 2019:** The first health navigator, Stéphanie Héroux, Anishnabe from Lac Simon, began to develop this position beginning in August 2018. Anna Aude Caouette is Two Spirited of mixt origins (Cree and Breton) and grew up in Abitibi. Anna joined the effort at the beginning of September 2018 and has innovated by creating a partnership with a street worker to reach more people from the community. Working with Pascale Annoual, longstanding board member, the 2 navigators were able to accomplish several aspects of development such as mapping out a network while also provide direct assistance over their shared half time positions. Despite efforts to find financing that would have ensured the continuity of the positions, we have failed and will

Communiqué  
ville.montreal.qc.ca

have to suspend this program at the end of March. We can only keep the many recommendations of the navigators and hope to restore this important social service in the shortest time.

# Employees

## Development Agents

Late in 2018, the Indigenous Health Centre of Tiohtia:ke has been very fortunate to receive a gift of \$20,000 of an Ally member living in Montreal. We felt good to have, for the first time, to be able to pay for the services of 10 to 15 hours/week for development agents to help CA meet ad hoc and specific tasks. We have therefore recruited Juliette Prié and Kate Legrand to primarily liaison and communicate with our members, assist in completing our application for charitable status, and even write applications to seek other funding. The 2 officers have worked with open minds and quickly started to capture many aspects of the project. They were able to adapt to the needs while remaining flexible and available for emerging priorities. They participated in several meetings allowing them to accumulate good experience and work on liaison and representation for the development of the Center. We wish to find funding to avail ourselves of their support for the years to come.

# Projects

## Cultural Safety Project

This pilot project was developed as a partnership between the IHCT Board members Sean Yaphe, Carrie Martin and Pascale Annoual and Dr. Faisca Richer at the Institut National de Santé Publique (INSPQ). The project began in the summer of 2016 when a literature review was conducted detailing programs that were developed elsewhere in Canada and across the globe. Immediately following, a draft of the manual was written. Some financial support was given by the NETWORK to hire an additional resource person to assist with the writing.

In the summer of 2017, we were approached by the CIUSSS Centre-Sud de Montréal to provide cultural safety training to a group of healthcare professionals working with Indigenous people who are precariously housed, including youth on the street, and those with chemical dependencies. The group was divided into 2 and each received 3 sessions of 3 hours each. The 3 sessions covered: the

sociocultural and socioeconomic diversity of Indigenous populations in Montreal; described the links between the history of colonization in Canada and the current health status of the Indigenous population; and applied a cultural safety approach by developing reflective practices and learning how to interact with cultural humility and respect. Trainers included Elder Morningstar Orr, Dr. Faisca Richer, Carrie Martin and Sean Yaphe.

Evaluations were conducted following each session and it was found that this pilot cultural safety training program, the first of its kind in the healthcare system in Quebec, was an overall positive experience. Adjustments will be made to the program as we move forward which include shortening its length, encouraging more discussion between participants, bringing together participants from the same profession to share experiences, and understanding the baseline knowledge about Indigenous people and cultural safety in the group.

The project was an oral presentation during the Indigenous Health Conference in Toronto in May, 2018. Additionally, it was accepted for publication in the International Journal of Indigenous Health in their May, 2019 volume.

### Quality Improvement Project

During the Indigenous Health Conference in Toronto in May, 2018, Sean Yaphe attended a Quality Improvement session led by Dr. Jeremy Rezmovitz and Patricia O'Brien from the University of Toronto, Department of Family and Community Medicine, Quality and Innovation Program. The session discussed how to develop a Quality Improvement project within an organization. They also provided times for organizations to meet with them individually to help set up a project. From this meeting, we planned to develop a project with a CLSC that would evaluate exactly Indigenous patients receive care and identify specific barriers to access to care that could be altered. Using this information, a media campaign will also be developed in order to raise awareness about the current situation of health service for Indigenous people in Montreal. Currently, the project is in development between McGill University and the CLSC Metro.

## Collaborations / Meetings

### Formulating an Option for the Indigenous Health Center on "Campus de la Montagne" site.

Late in 2018, the B.O.D. was invited to visit a site in downtown Montreal that a multitude of organizations with an educational mandate would occupy land. After a visit by a delegation of 4, it became clear that this would be an ideal space for the building of an urban Indigenous Health Center. A second visit was done with the Elder Sedalia Fazio who had been instrumental in leading the creation of the sweat lodge in the Botanical Garden (that is also the responsibility of the Health committee of the Network). She gave the space her full approval as she can imagine the development of a holistic center, surrounded with gardens for traditional

medicines. We gained the assured support of Mr. Marc Miller, Parliament Secretary for Indigenous Affairs in Ottawa, to pursue this venue. Thus we have worked tirelessly to garner the support of various leaders, stakeholders and decision makers. A partners' meeting was held on February 20<sup>th</sup> 2019 that reunited 11 indigenous community members including an Elder, 4 allies, and 2 Board Members; the partners came from McGill University, Université de Montréal, Indigenous Services Canada, CIUSSS's Table de Concertation, Community members from various First Nations as well as Inuit. We have contacted a firm of architecture that is providing technical advice on a pro-bono basis to begin with. The members who attended that meeting are very excited at the prospects and are convinced, unanimously of the necessity to pursue the development towards the full development of the Indigenous Health Center of Tiohtià:ke and our mandate.

### Table de Concertation

The Table Locale en Santé et Services Sociaux de Montréal pour la population autochtone was inaugurated in September, 2017. The provincial government in Montreal invited Indigenous organizations and the health departments, centers, and community organizations to sit together every few months to describe current projects that are being undertaken and to identify the gaps in health services that must be addressed. The first year was an opportunity to detail the workings of the group and governance. On February, 2019, Leilani Shaw, from the Mohawk Nation in Kahnawake was elected co-chair of the table and will be leading all future meetings. Recently, funds were received from the Ministère de Santé et des Services Sociaux to identify the importance of cultural safety in centers frequented by Indigenous Peoples. Our cultural safety project was mentioned as a front runner in this project, and it is hoped that it will be updated and finalized using these funds. A member of our board will continue to represent our chair at this Table in the year to come.