



BC ASSEMBLY OF FIRST NATIONS

1004 Landooz Road
Prince George, BC V2K 5S3
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BCAFN 17th ANNUAL SPECIAL CHIEFS MEETING
March 3 & 4, 2021
Online via Zoom

Resolution 02/2021

SUBJECT: FIRST NATIONS HEALTH GOVERNANCE STRUCTURE RENEWAL

Moved BY: KUKPI7 ROSANNE CASIMIR, TK'EMLÚPS TE SECWÉPEMC

SECONDED BY: KUKPI7 WAYNE CHRISTIAN, SPLATSIN

DECISION: CARRIED

ABSTENTION: CHIEF ANDREW VICTOR, CHEAM FIRST NATION

OBJECTIONS: CHIEF TRACEY WOODS, GITANMAAX INDIAN BAND

CHIEF SHARLEEN GALE, FORT NELSON FIRST NATION

WHEREAS:

- A. Indigenous Nations have an undeniable sovereign responsibility and mandate to ensure the health, safety, and well-being of their members;
- B. the First Nations Health Authority (FNHA) has been mandated to work with BC First Nations, government partners and others to improve health outcomes for BC First Nations people;
- C. the *United Nations Declaration on the Rights of Indigenous Peoples*, which the government of Canada has adopted without qualification, and has, alongside the government of BC, committed to implement, affirms:

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Terry Teegee, BC Regional Chief

Article 2: Indigenous peoples and individuals are free and equal to all other peoples and individuals and have the right to be free from any kind of discrimination, the exercise of their rights, in particular that based on their indigenous origin or identity.

Article 18: Indigenous peoples have the right to participate in decision-making in matters which would affect their rights, through representatives chosen by themselves in accordance with their own procedures, as well as to maintain and develop their own indigenous decision-making institutions.

Article 19: States shall consult and cooperate in good faith with the indigenous peoples concerned through their own representative institutions in order to obtain their *free, prior, and informed consent* before adopting and implementing legislative or administrative measures that may affect them.

Article 21(1): Indigenous peoples have the right, without discrimination, to the improvement of their economic and social conditions, including, inter alia, in the areas of education, employment, vocational training and retraining, housing, sanitation, health and social security;

(2): States shall take effective measures and, where appropriate, special measures to ensure continuing improvement of their economic and social conditions. Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children, and persons with disabilities.

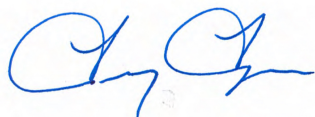
Article 23: Indigenous peoples have the right to determine and develop priorities and strategies for exercising their right to development. In particular, Indigenous peoples have the right to be actively involved in developing and determining health, housing and other economic and social programs affecting them and, as far as possible, to administer such programs through their own institutions.

Article 24(1): Indigenous peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals, and minerals. Indigenous individuals also have the right to access, without any discrimination, to all social and health services;

(2): Indigenous individuals have an equal right to the enjoyment of the highest attainable standard of physical and mental health. States shall take the necessary steps with a view to achieving progressively the full realization of this right;

- D. FNHA is mandated by several health agreements (collectively, “the Health Plans”) and direction given by BC First Nations leadership, including the:
1. Transformative Change Accord: First Nations Health Plan (2006)
 2. Tripartite First Nations Health Plan (2007)
 3. Tripartite Framework Agreement on First Nations Health Governance (2011);

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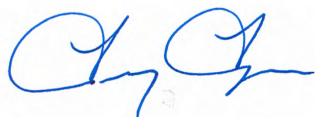


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- E. FNHA receives its funding for community health services, health benefits and other activities through the Canada Funding Agreement, a 10-year agreement which expires on March 31, 2023;
- F. In May 2011, through the *Consensus Paper 2011: BC First Nations Perspectives on a New Health Governance Arrangement*, the First Nations of BC established the following 7 directives that set the fundamental standards for the new First Nations health governance structure and process:
1. Community - Driven, Nation based
 2. Increased FN decision making and control
 3. Improve services
 4. Foster meaningful collaboration and partnership
 5. Develop human and economic capacity
 6. Be without prejudice to FN interests
 7. Function at a HIGH operational standard;
- G. in 2019 there was a change in leadership at the FNHA resulting in a shift in how the FNHA operates that has been to the detriment of First Nations communities, particularly when it comes to honouring First Nations sovereignty and governance, the provision of services and the management the COVID pandemic response;
- H. First Nations communities have found an increase in decisions being made by FNHA and health systems organizations without the involvement of, or input from, the communities;
- I. the BCAFN has supported and enacted a suite of Resolutions, including 18/2019 and 29/2008 that have strengthened the working relationship between FNHA and BCAFN and established clear objectives and challenges for the FNHA to fulfill and address; and
- J. the recent *In Plain Sight* report into anti-Indigenous racism in BC's health care system described a set of issues in Finding #10 related to the need for the First Nations Health Plans and structures to be renewed and strengthened, and made Recommendation #6 calling for an engagement process with BC First Nations to establish expectations, the concept of legislation, and changes to the First Nations health governance structure to align with the standards of the UN Declaration and utilize the tools available under the *Declaration on the Rights of Indigenous Peoples Act*.

THEREFORE BE IT RESOLVED THAT:

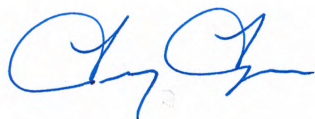
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1. the BCAFN Chiefs-in-Assembly fully supports a comprehensive engagement and decision-making process among the Chiefs to review the First Nations Health Authority governance structure's mandate and performance and alignment with the 7 directives, and make decisions regarding necessary structural changes and potential legislation in light of the *Declaration on the Rights of Indigenous Peoples Act*;
2. the BCAFN Chiefs-in-Assembly calls for this engagement and decision-making process to be immediately initiated, and for a renewed mandate and structure to be agreed upon by First Nations throughout BC including co-developing legislation as described in section 9.1 of the Tripartite Health Framework Agreement prior to renewal of the First Nations Health Authority's Canada Funding Agreement;
3. the BCAFN Chiefs-in-Assembly calls for this engagement and decision-making process to include all First Nations in BC, and be developed and overseen by an arms-length group from the FNHA, including but not limited to a sub-set of representatives of the First Nations Health Council and the First Nations Leadership Council organizations, and other Chiefs and leaders identified through an open process who will communicate with all First Nations in BC in a public and transparent way; and
4. The BCAFN Chiefs-in-Assembly directs the Regional Chief to advance to the FNHA the clear concerns and priorities First Nation communities have regarding their involvement in the planning and delivery of health services to their membership, as well as the concerns Nations have about the disconnect between them and the FNHA that is adversely impacting the delivery and quality of health services in their communities.

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A handwritten signature in blue ink, appearing to read 'Terry Teegee', is written over a horizontal line.

Terry Teegee, BC Regional Chief