

# Understanding Integrated Care: The Aboriginal Health Initiative Heads North

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## ABSTRACT

With an increasing emphasis on holistic and culturally appropriate healthcare, a community in the Yukon has set a new standard for serving the needs of its specific population. Whitehorse General Hospital has collaborated with representative Yukon First Nations elders to create the First Nations Health Program, a program dedicated to allowing Aboriginal people to access Traditional practices, which are integrated alongside Western healthcare. This program has successfully demonstrated the importance of incorporating culture into the healing process.

KEYWORDS: *first nations, rural, elders, cultural healing, holistic*

This year, the Aboriginal Health Initiative, a student interest group operated through the University of British Columbia's Faculty of Medicine, traveled to Whitehorse, Yukon to tour the community-led First Nations Health Program (FNHP) at Whitehorse General Hospital. As part of our mandate to promote Aboriginal health through improving the cultural competency of future health practitioners, we wanted to learn from this working model of culturally competent, community-led care. We hoped that from this we would find a model to illustrate to fellow students how a program grounded in an indigenous world view can work harmoniously within a conventional western hospital.

Unacceptable health disparities exist between Aboriginal and Non-Aboriginal Canadians, and the cultural competency of physicians has been promoted as a means of addressing these.<sup>1</sup> As medical students, we are interested in learning how to adapt our own practices to promote Aboriginal health and reduce barriers to care for Aboriginal people. However, we recognize that the determinants of health for Aboriginal people extend far beyond the doctor's office and that in order to make meaningful progress, we must support Aboriginal communities in their broader journeys toward health. Chandler and Lalonde have identified several indicators of cultural continuity important for strong Aboriginal communities that we feel physicians are capable of supporting. These include community control over health services and facilities for the transmission of cultural practices.<sup>2</sup> As future physicians, we will have the opportunity to support these indicators of cultural continuity by welcoming, and advocating for, community control over health services and for facilities within hospitals for traditional healing practices.

## Correspondence

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The FNHP at Whitehorse General Hospital is a result of several agreements forged in the early 1990s. In 1990, the Yukon Hospital Corporation (YHC) was formed in preparation for the First Phase Transfer Agreement in which the Federal Government handed over responsibility for health services to the Yukon Territorial Government.<sup>3</sup> This was an opportune time for the Council of Yukon First Nations (CYFN) to develop an agreement with the YHC and Yukon Government to create a First Nations Health Committee on the hospital Board of Trustees and negotiate for the FNHP in the new transfer. This agreement enabled the Council to respond to the needs of the 14 First Nations it represents and develop a health program conceived, developed, and delivered by Yukon First Nations.

In April 1993, Whitehorse General Hospital was officially transferred to the YHC.<sup>3</sup> The First Nations Health Committee currently oversees the program and constitutes four of the 14 YHC Board members nominated by the CYFN. This is approximately representative of the Yukon population, 25 % of which are Aboriginal.

The mission of the FNHP is to “promote provision of quality, culturally-sensitive holistic healthcare to Aboriginal people” through advocacy, social and spiritual support, education of healthcare practitioners, and recognition of the effects of

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residential schools and colonialism on the health of Aboriginal people.<sup>4</sup> Program services include Health and Social Liaison Workers, access to traditional medicines and healing practices, a traditional diet program, Child Life Workers, and Community Liaison Discharge Planners.


Health and Social Liaison Workers connect with Aboriginal patients on admission to help them navigate the system and ensure diagnosis, treatment, and palliation options are fully understood. They provide culturally sensitive support to patients and their families who are often far from home. Since traditional clan systems remain an integral part of Yukon Aboriginal identity, Health and Social Liaison Worker knowledge around clan protocols is essential in matters of death, dying, and grieving. First Nations patients also have access to traditional medicines, a traditional healer, and the healing room Na Ku. Na Ku is a dedicated space within the hospital, built under the guidance of Elders, where patients can hold ceremonies and tend to their cultural needs. The traditional diet program serves donated traditional foods harvested from the territory such as moose, caribou, and salmon. Child Life Workers support families of hospitalized children while Community Liaison Discharge Planners coordinate a smooth transition from hospital to community care.

The benefits of the FNHP extend from patients to staff and physicians who work under this model. Patients benefit by accessing holistic care that has traditionally been integral to Aboriginal health and healing. Patient advocacy by liaison workers has helped reduce miscommunication between patients and their healthcare team. This ensures that physicians receive accurate information from patients and that patients actively participate in their recovery. The traditional diet program respects First Nations' knowledge that traditional foods are healthy foods and eliminates the stress of a foreign diet during recovery.

Staff and physicians benefit by learning to adapt their care to the population they serve as workshops offered through the FNHP provide them with the resources to become culturally competent practitioners. The program has increased understanding and acceptance of cultural norms of local First Nations, and in the words of one Whitehorse GP, has “increased respect for all patients.”

While the FNHP continues to successfully operate and grow, there are still some challenges that exist. Although the YHC undergoes accreditation every three years, the FNHP has never been formally studied. Program staff indicated that the lack of evaluation is due to time constraints on staff as well as a lack of funding for an external evaluation.

After visiting the Whitehorse FNHP, our group members returned to Vancouver feeling inspired and convinced that this

quality of care should be available in more hospitals. It was remarkable to see a hospital adapt its culture to care for Aboriginal patients, as so often it is Aboriginal patients who are expected to adapt to the culture of the hospital in order to receive basic care. As we are being educated as doctors in the era of patient-centred care, it makes perfect sense to us that the health services in a community should be guided by the values of that community, work to achieve the goals of that community, and be equipped to support the holistic health of that community. We are grateful to the staff and patients at the Yukon FNHP for allowing us to learn from their example and share it with our colleagues. 

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