

MMS Bulletin #130 Addressing Sexual Violence and HIV

Canada's First Nations Local Health as Global Health

By Chris Simms

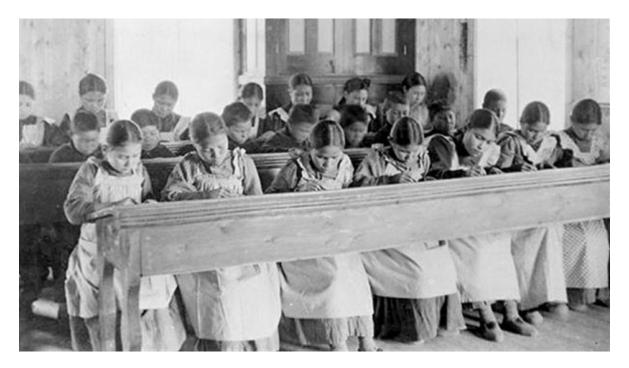
Canadians have long been proud of their healthcare system yet current research suggests a worrisome decline in some outcome indicators and rising levels of inequalities over the last few years. One factor explaining a disproportionate share of these outcomes is failure to reach marginalized populations such as Indigenous peoples. In 2012 most Aboriginal-led health programming was cut, leaving health policy development for Canada's 1.2 million Aboriginal people in the hands of the federal government. First Nations have started a grassroots social movement in 2012 known as Idle No More fighting for indigenous rights.



Idle No More, Day of Action (December 2012)

UNICEF studies on child well-being in rich countries show Canada's diminished standing among its peers, ranking it 27 of 29 countries for "health and safety", 28/29 for childhood immunization, 22/29 for infant mortality rates (UNICEF 2013 "Child Well-being in Rich Countries") and 29/29 for early childhood education. (UNICEF Canada 2013) One factor explaining a disproportionate share of these outcomes is failure to reach marginalized populations such as Indigenous peoples.

Historical inequalities among the world's aboriginal populations are well-known and indeed, explicitly recognized in 2007 by the United Nations Declaration of the Rights of Indigenous Peoples. However the squalid living conditions typical of Canada's First Nations communities and households are particularly striking, with epidemic levels of infectious disease, poverty (50-65%), food insecurity – levels similar to the world's poorer countries. IMRs for instance, are 190% higher for First Nations compared with non-First-Nations and 360% higher for Inuitinhabited areas compared with non-Inuit-inhabited areas. (J. Smylie 2012)



"Killing the Indian in the child": First Nations' children were often taken away from their communities and brought to residential schools. (Library and Archives Canada/PA-042133).

Yet, what is typical of First Nation communities (and not of poor countries) is epidemic levels of mental illness, suicide (and suicide pacts), substance abuse, inter-generational fetal alcohol syndrome, violence against women and incarceration. Much of this despair is associated with the Federal Government's Indian Residential School system in the 20th century in which I 50,000 aboriginal children were forcibly taken from their families and placed in schools with

the aim of "killing the Indian in the child" (according the Canada's Prime Minister) by assimilating language, culture and religion, backed-up by the harshest of measures. The last of 130 schools was closed in 1996 and in 2008 a Truth and Reconciliation Commission (TRC) was instituted to hear the stories of the survivors and to begin the healing process, concluding it work this year.

Government's Responses

However, the very measures meant to redress some of these complex issues in First Nations have been thwarted by policy decisions taken by the current Government. Beginning in 2006 it terminated a 5 billion dollar agreement known as the Kelowna Accord, which was intended to address a range of health, education and social priorities in First Nations communities. Similarly, in 2012 most Aboriginal-led health programming was cut, leaving "much of what remains of health policy development for Canada's 1.2 million Aboriginal people in the hands of federal bureaucrats who are overwhelmingly non-Aboriginal, and who have long been blamed for the historic inequities". (Webster 2012) Even the most conservative sources view these cuts as "a public policy travesty".

While disinvesting itself from aboriginal health, the Government was simultaneously embarking upon its resource development strategy, a \$600 billion development plan for the oil, gas, mining and pipeline industries. Many of these industries are located on, near or upstream of lands belonging to First Nations communities. However, the resource strategy does not include adequate measures to protect the environment and in fact, does just the opposite: a multitude of studies document a government systematically removing obstacles to resource extraction initiatives by gutting existing legislation, cutting budgets of relevant departments, and eliminating independent policy and arms-length monitoring bodies. (Holmes 2013)



Idle No More - Canada's First Nation grassroot movement (Picture taken from here)

Climate change has a dramativ impact on First Nations' health

With growing frustration, First Nations communities have seen the ongoing degradation of their traditional lands and territories; they have witnessed a loss of livelihoods through the global effects of climate change (glacier melt, thawing of permafrost, decreases in ice cover) and, as a direct result of their proximity to resource extraction sites – through the contamination of the air, soil and water. Scientific research this year describes the rise of polycyclic aromatic hydrocarbons (PAHs) from lake ecosystems (Parjulee & Wania 2014), and the contamination of ground water, (Frank et al 2014) and shifting of marine and wildlife ecosystems upon which they depend. Research is also showing that climate change is having a dramatic impact on mental health. In Labrador for instance, wildlife and vegetation have changed and the caribou and moose have moved north and sea ice is no longer forming – and this is the cause of a "sense of grief, mourning, anger, frustration, sadness".

A scathing report by Canada's Auditor General (October 2014), an independent government watchdog confirms these trends and finds that government has no detailed plan to meet its emissions reduction targets, is on pace to fall well short of meeting them and has made no long-term commitment to environmental monitoring in the oil sands region.

Rather than address legitimate claims by First Nation for consultation on resource development and community well-being, the government has instead sought to curb the flow of unwanted information

- I. by eliminating the Statistics Canada long-form census (a key source of data on vulnerable groups)
- 2. defunding the First Nations Statistical Institute (Webster 2012),
- 3. muzzling its own scientists,
- 4. failing to adequately monitor toxic air pollutants (Kurek et al 2013) and
- 5. defunding environmental and Aboriginal NGOs that disagree with government policy.

As a result of these and similar measures, Canada is criticized by leading journals such as Nature, Science and the New Scientist for being anti-science and anti-information. In an attempt to have their voice heard, First Nations have started a grassroots social movement in 2012 known as *Idle No More* – a nation-wide peaceful protest movement which seeks to draw attention to the environmental impact of the government's resource development strategy and to the deplorable living conditions in First nations communities. The government's response to this was to engage the Canadian Security Intelligence Service and Royal Canadian Mounted Police to monitor Aboriginal activists and environmental groups, subsequently sharing this information with industry stakeholders. Revelations this year that the watchdog body mandated to oversee these two agencies is led by lobbyists for the resource industries have startled even the most seasoned observers.

The government has also targeted non-governmental organizations (NGOs) – especially environmental NGOs and those that would lend support to the First Nations' cause. The government has withdrawn federal funding for NGOs that are critical of governmental policy, a reversal of a 50 year tradition of non-partisan support for civil society. The Prime Minister said "if it's the case that we're spending on organizations that are doing things contrary to government policy, I think that is an inappropriate use of taxpayer's money and we'll look to eliminate it." Still another response has been to engage the Canada Revenue Agency (CRA) to conduct extensive audits on some of Canada's most prominent environmental NGOs which have been highly critical of the government's record. According to experts, the CRA will launch an investigation in response to complaints; one source of these complaints is Ethical Oil (an online activists group working in defense of the oil-sands development) whose founder is currently the director of issues management in the Prime Minister's Office.

Taking a global health perspective

The 2014 Report of the United Nations Intergovernmental Panel on Climate Change (IPCC), warns that climate change will give rise to increased inequalities and conflict across the globe. Indeed, with loss of livelihoods and traditional ways of life coming on top of rising inequalities and less voice with which to protest about either, Canada's First Nations have become increasingly frustrated and tensions and conflict the federal government have greatly increased.

The IPCC 2014 Report emphasizes the linkage between, environmental issues, resource development, public health, human rights and good governance. Over recent years, Canada's reputation as a global citizen has declined. (Simms 2014) For example the Climate Action Network (2013) recently ranked it 55th of 58 countries in tackling of greenhouse emissions and this should be cause for concern. (German Watch 2013) It is also repeatedly cited for its apparent loss of democratic values – most recently by the Center for Law and Democracy, in co-operation with the Madrid-based Access Info Europe which ranked Canada 55th of 93 countries, down from 40th in 2011.

From an international relations or foreign policy point of view, it makes sense for Canada to reverse these trends and recapture its global stature. From a public health point of view, it ought to address its worsening performance outcome indicators in particular, those related to equity. From an economics or development point of view - with increasingly more of Canada's 600 First Nations communities prepared to challenge the Government's resource strategy; it seems a better plan to reach an accommodation than continued conflict. One step in the right directions is to design and implement a global health strategy to help set priorities and improve transparency and lead to better coordination and cooperation with its global partners. After the cuts to Aboriginal healthcare in 2012 former Prime Minister Paul Martin concluded "we have never admitted to ourselves that we are – were and are – a colonial power". It's time that we did; it's time to put people ahead of profits. A recent UN report warns Canada's leadership that it faces a grim crisis caused by the way it treats its aboriginal people and that it's indeed a time for soul-searching.

Ressources

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