



First Nations Health Authority
Health through wellness

Increasing Access to Indigenous Foods

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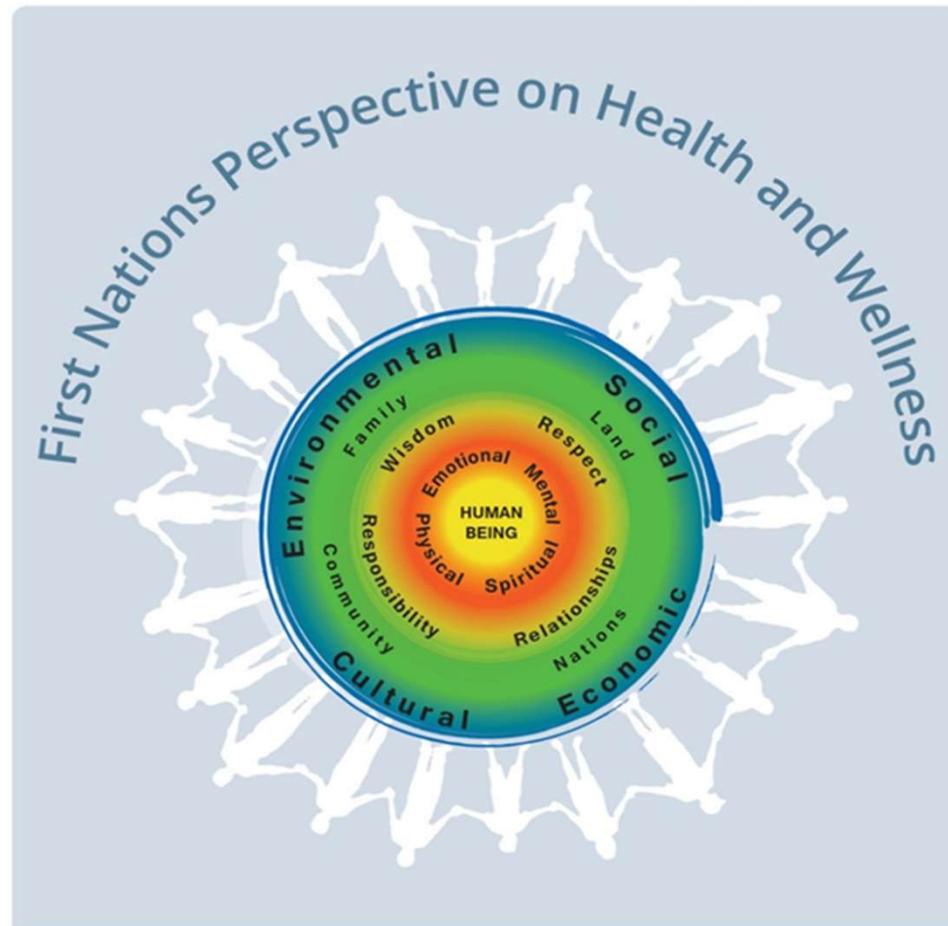


Who is First Nations Health Authority (FNHA)?





First Nations Perspective on Health & Wellness





FNHA Regions





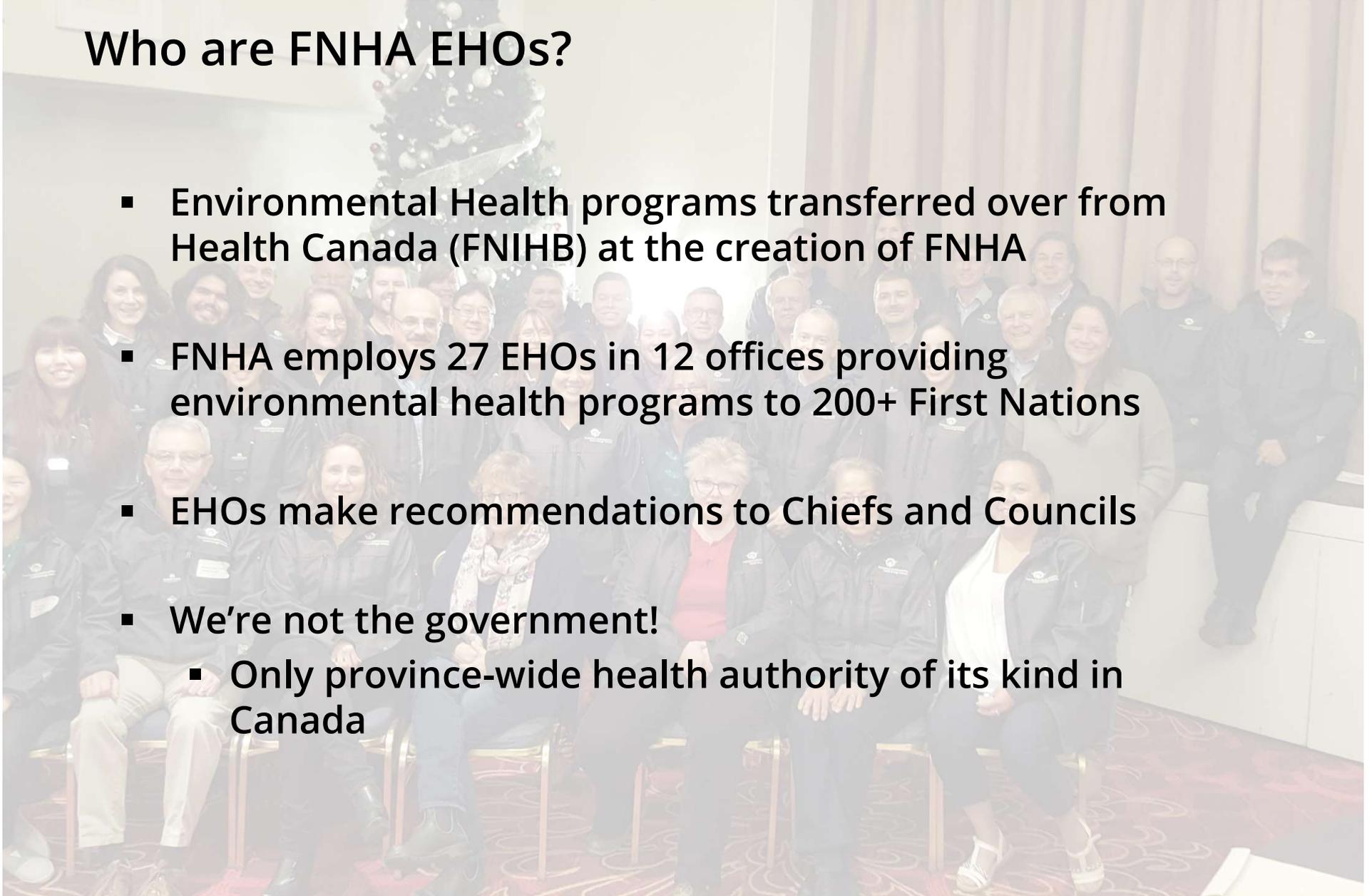
What is environmental public health?

- Focuses on the relationships between people and their environments (APHA)
- Looks at the understanding of basic human needs, and how the environment can affect them (CDC)
 - E.g. food, air, water, housing
- Protects public health and promotes wellness by identifying and evaluating environmental sources and limiting exposures to hazardous physical, chemical, and biological agents in air, water, soil, and food (NEHA)
- In B.C., “environmental health officers” and “health officers” are enabled within the Public Health Act and its regulations



Who are FNHA EHOs?

- Environmental Health programs transferred over from Health Canada (FNIHB) at the creation of FNHA
- FNHA employs 27 EHOs in 12 offices providing environmental health programs to 200+ First Nations
- EHOs make recommendations to Chiefs and Councils
- We're not the government!
 - Only province-wide health authority of its kind in Canada





FNHA EHO experiences





Indigenous Food Security, Food Sovereignty & Health Eating



Wellness:

Land based healing

Healthy lands and waters

Ceremony & Traditional practices

Nourishment and Mental Wellness

Relational & regenerative practice



Supporting Contemporary and Traditional Food Economies

Stable and viable incomes and healthy work environments

Revitalization of trade and relation-based economies



Supporting Self-determining Food Systems

Nation-based decision-making

Revitalization of traditional foods and knowledge with contemporary food practices



Climate Change and Impacts on Indigenous foodways:

Restoration of traditional harvesting areas

Sustainable food initiatives

Supporting climate change adaptation strategies



Improve Nutrition Services & Building Relationships:

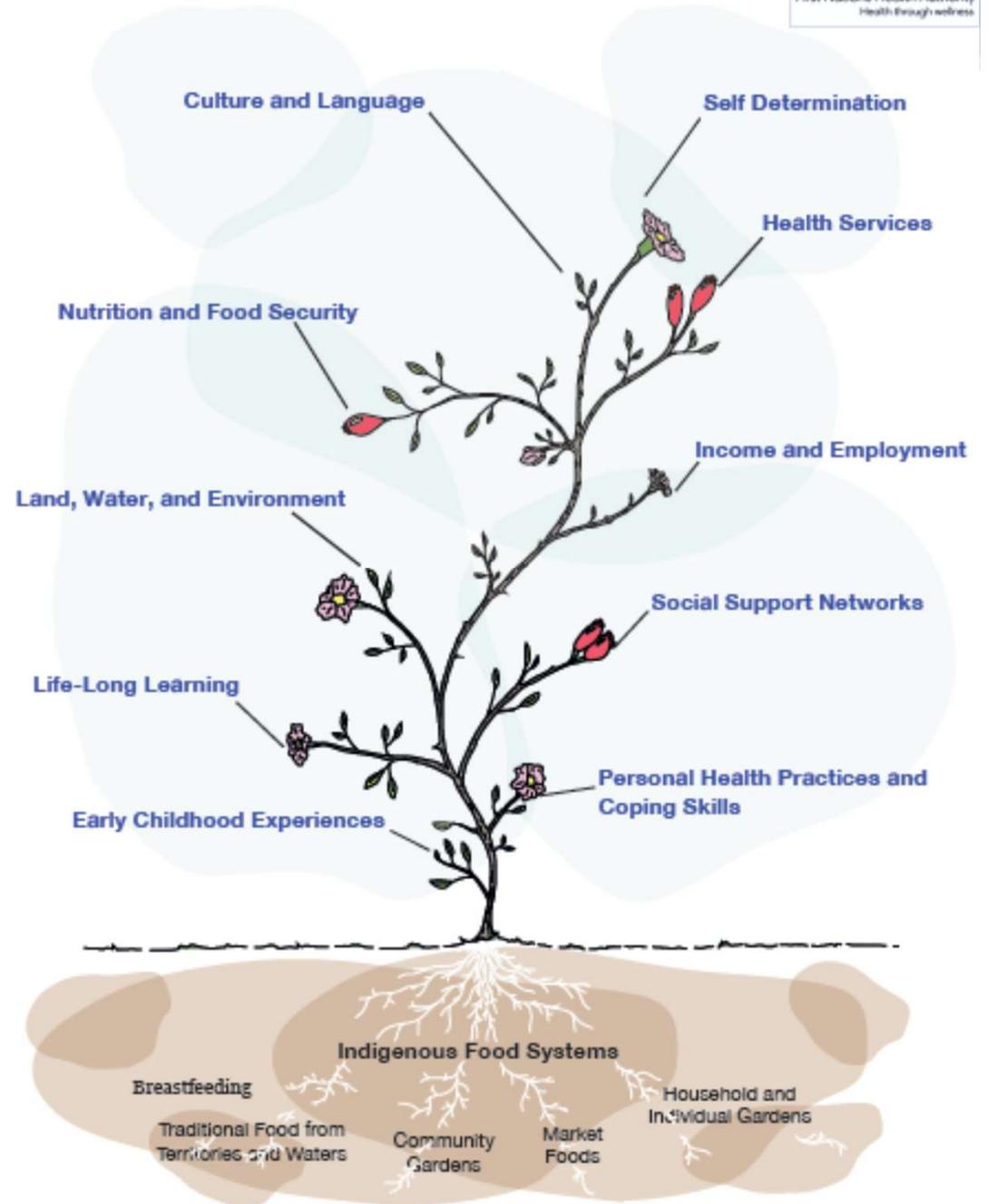
Indigenous-led Nutrition supports

Nation-based partners, and external partners (health authorities)

Revitalization of key trade relationships

← FNHA 7 Directives →

Indigenous Food Systems And Determinants of Health





Core Areas of Focus for Food Security

Food security from an Indigenous lens requires the ability to be able to meaningfully engage in multiple roles (land & water steward, provider/sharer, cook of traditional food as well) which are more adequately achieved through food sovereignty actions.

(Suzanne Johnson, RD, 2018, Penticton Indian Band (Okanagan Nation))

Four Key Principles that provide pathway to support food sovereignty:

- 1) Sacred or divine sovereignty;*
- 2) Participatory;*
- 3) Self-determination; and*
- 4) Policy*

<http://www.indigenousfoodsystems.org/food-sovereignty>



Benefits of Improving Access to Traditional and Seasonal foods

- Linkage of food and traditional diets to culture and language
- In early years programming – linkage between food and Indigenous food systems and land-based learning
 - E.g. life cycles of animals; seasonal changes and availability of food items; food processing at different times of year
- Food as medicine (both literally – traditional medicines – and holistically)
 - Connection to land, family, traditional teachings, gatherings, ceremony, etc.





Background – 2014 report

- Discussed the relationship between regional health authority licensing programs and Indigenous educators
- Developed as a resource for both educators *and* Community Care Licensing Officers
- Explored the importance of traditional foods for early years programs



What you Need to Know about
Providing Traditional Foods
in Early Childhood Development Settings

Why Serve Traditional Foods?

First Nations and other Aboriginal children benefit from learning how traditional foods are harvested, prepared, and served. The primary reason to serve traditional foods is to teach children the spiritual connections with these foods. When we engage children in gathering, preparing, and eating traditional foods, we are introducing them to their cultures and the spiritual values associated with food.

Eating traditional foods builds children's sense of community and strengthens their identities. Helping children see the earth as the source of nourishment teaches them to respect the land and the sea and their gifts.

Countless generations of our families enjoyed nutrient-rich natural foods.

The introduction of processed foods has resulted in health challenges for many children and adults. When children are exposed at an early age to a variety of traditional foods, they are more likely to accept them as preferable alternatives to the commercial foods that have put our health at risk. By serving traditional foods, early childhood programs can help promote community health.

This resource sheet was developed by the British Columbia Aboriginal Child Care Society (BCACCS) in response to findings of the 2013 research project *Licensing First Nations' Early Childhood Programs*. Early childhood programs reported difficulties serving traditional foods. The information that follows summarizes the *Food Premises Regulation* that early childhood programs must follow in order to prepare and serve traditional foods in their facilities. ©2014





Background – Increasing Access Phase One (2016)

Increasing Indigenous Children’s Access to Traditional Foods in Early Childhood Programs

December 2016



Funded by:



In collaboration with:



BC Aboriginal Child Care Society

Case study

The first thing you notice when you arrive at the Aboriginal Head Start program are the dozens of posters lining the walls. Each poster holds a grouping of photos, carefully labelled in their traditional language and English, of the children, educators, parents and Elders who visit the program. The posters tell about field trips—to the beach, to the forest—and feasts. These field trips are opportunities for learning about the traditional ways of harvesting and gathering, like catching salmon fry with blades of grass, and followed by big community feasts at the Head Start with salmon, crab, herring roe and venison.



On this day, the Head Start program is on the land, harvesting stinging nettles. The children and families gather around to listen to the educator. After talking about the importance of giving thanks, she then sprinkles tobacco near the site where they will harvest. She hands out gloves, collection bags and scissors to each child and parent and explains how to harvest. As the families carefully snip and bag the nettles, there is much conversation. Adults with more knowledge share information with those that are less experienced. Adults and children discuss how to cut the plants so as not to damage them and so that they can keep growing more leaves. When the group feels they are ready, they head back to the centre to have a snack and enjoy their harvesting.

One of the parents (who is also a staff member in another program at the centre) cooks up the nettles and dishes them up alongside the feast that has been prepared for their snack. Salmon, halibut crusted with crab, pickled sea asparagus, herring roe on kelp, smoked black cod and potatoes are



nested together on the small counter waiting for the children and families to wash their hands and say thanks together. The program’s Elder, a woman in her 90’s who visits the program each day, calls for the children to wash their hands, first in their traditional language and then in English. Once everyone is gathered around the table, she leads a prayer of thanks. Then, the feasting begins.

It is easy to see that the children are familiar with, and favour, the traditional food. Without exception, the children choose from the wide variety of traditional foods on offer. Even the very youngest children are at home with these flavours. Child after child reaches for the herring roe on kelp. They pop the small cream coloured roe between their teeth making a crackling sound, asking for more and more until it is all gone.



Background – Increasing Access Phase One

“the Head Start program is on the land, harvesting stinging nettles... After talking about the importance of giving thanks, she [staff] then sprinkles tobacco near the site where they will harvest...Salmon, halibut crusted with crab, pickled sea asparagus, herring roe on kelp, smoked black cod and potatoes are nestled together on the small counter...”



Background – Increasing Access Phase One

Findings:

- Recognition of the importance of traditional foods and commitment towards solutions-based approach
- BARRIER – “food from approved sources” requirement of B.C. Food Premises Regulation
- EHOs in regional health authorities didn’t feel they had the discretion / ability to “allow” foods or exercise discretion
- Educators had varying abilities to serve traditional foods based on workarounds and relationship with health authorities
- Licensing Officers had confusion in role and some lacked flexibility in incorporating culture



Background – Increasing Access Phase One

Recommendations:

- Develop new food safety guidelines/standards
- Develop through engagement with Knowledge Keepers and Educators
- Expand those new guidelines to other facilities
- Establish a province-wide working group
- Increase cultural competence in health authority staff
- Training for First Nations (food safety, safe processing)



Current – Increasing Access Phase Two



First Nations Health Authority, BC Centre for Disease Control,
and BC Ministry of Health

Increasing Access to Traditional Indigenous Foods
in Publicly Funded Facilities

- Direct result of recommendations from Phase 1
- Partnership between FNHA, BCCDC, and Ministry of Health
- A few early barriers to moving the work forward between 2016 and 2021 (staff turnover, pandemic, etc.)



Current – Increasing Access Phase Two

- ***Recommendation #1 – develop new food safety guidelines/standards through engagement with knowledge keepers and food workers***

Regional engagement sessions will bring together knowledge keepers, food workers, and environmental health professionals to discuss the barriers to accessing traditional foods (i.e. check in on 2016 work)

Engagement sessions will explore solutions from an Indigenous-led perspective (centering Indigenous voices and perspectives)

Full buy-in from Indigenous and non-Indigenous partners and decision-makers in the outcomes of the sessions



Current – Increasing Access Phase Two

- ***Recommendation #2 – Expand those new guidelines to other facilities***

Rather than just focusing on child care settings, the scope of Phase 2 engagement sessions will be *all* publicly funded facilities, including:

- Child care facilities
- Head Start facilities
- Hospitals
- Adult care facilities (e.g. community care and assisted living facilities)



Current – Increasing Access Phase Two

- ***Recommendation #3 – Establish a province-wide working group***

Phase Two work is being led by an advisory committee made up of knowledge keepers and environmental health leaders from each of the five FNHA Regions

Each FNHA Region was asked to put forward the name of an individual with experience working in traditional food systems and facilities to participate in this work, and Regions followed established engagement pathways

Regional Health Authority reps are primarily members of the *Health Authority Food Safety Committee*



Current – Increasing Access Phase Two

- ***Recommendation #4 – Increase cultural competence in Health Authority staff***

Recognized the importance of having a culturally safe environment for Indigenous participants to share their experiences and recommendations during the engagement sessions

Regional Health Authority environmental health staff (two per RHA – one people leader and one field staff) invited to participate in cultural safety training led by Qwustenuxun and Fiona Devereaux

Additional training in partnership with CIPHI to be forthcoming for more participants nationally



Current – Increasing Access Phase Two

- ***Recommendation #5 - training for First Nations in food safety***

FNHA offers FOODSAFE training to all First Nations communities (try to prioritize at least one training per community per year, with more as capacity allows)

There are ongoing discussions between FNHA, BCCDC, and the provincial FOODSAFE secretariat to explore modifications to the course that would make it more relevant to Indigenous food workers, while still retaining the certification option



Recommendation #5 - continued

FNHA EHOs are also available to attend community hunting camps, gatherings, events, etc. to support and provide food safety knowledge transfer and translation

e.g. canning and food preservation workshops in communities





Next Steps

- Regional gatherings will be taking place through the summer and in to September (two engagement sessions per Region)
- Information and learnings from the engagement sessions will be compiled into a report with formal recommendations, informed by the Advisory Committee
- Recommendations will be shared with appropriate decision-making partners for action (e.g. regional health authorities, Ministry of Health, FNHA, BCCDC, community leadership)
- Phase 3 will be focused on implementation



Thank you!

Questions and Discussion