First Nations Health Authority

Health through wellness

First Nation Families and Health Care Providers: walking the perinatal journey together.

Leading Change across our nation: networking on the hill

Perinatal Services BC Conference

March 2018

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Thank you

First Nations Health Authority
Health through wellness

- Thank you to The Squamish, Musqueam and Tlewaytuth People for allowing us to do this work on their unceded territory.

- Thank you to our partners: Perinatal Services, Ministry of Health, and Health Canada for the collaborative work on perinatal health with First Nation.

- Thank you to the First Nations and Indigenous Elders, community members, and professionals who helped create this path so that the women can have a safe pregnancy journey.

Learning Objectives

- Recognize the need to provide culturally based, trauma informed and relational practice care
- Discuss approaches in providing holistic care to First Nation women and families
- Identify culturally relevant resources available to clients and health care providers

Building the FNHA

Our Vision

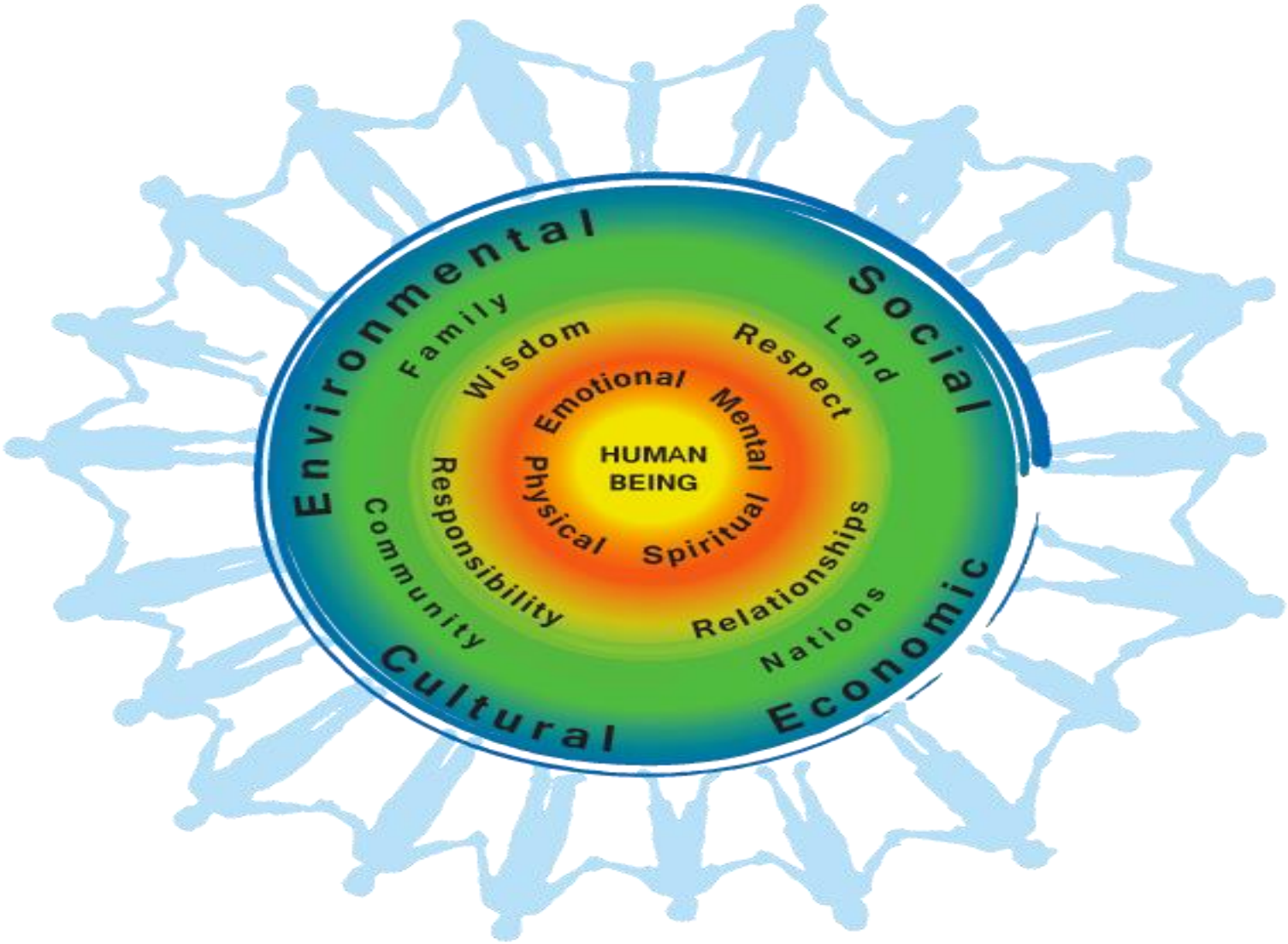
Healthy, self-determining and vibrant, BC First Nations children, families and communities

Our Values

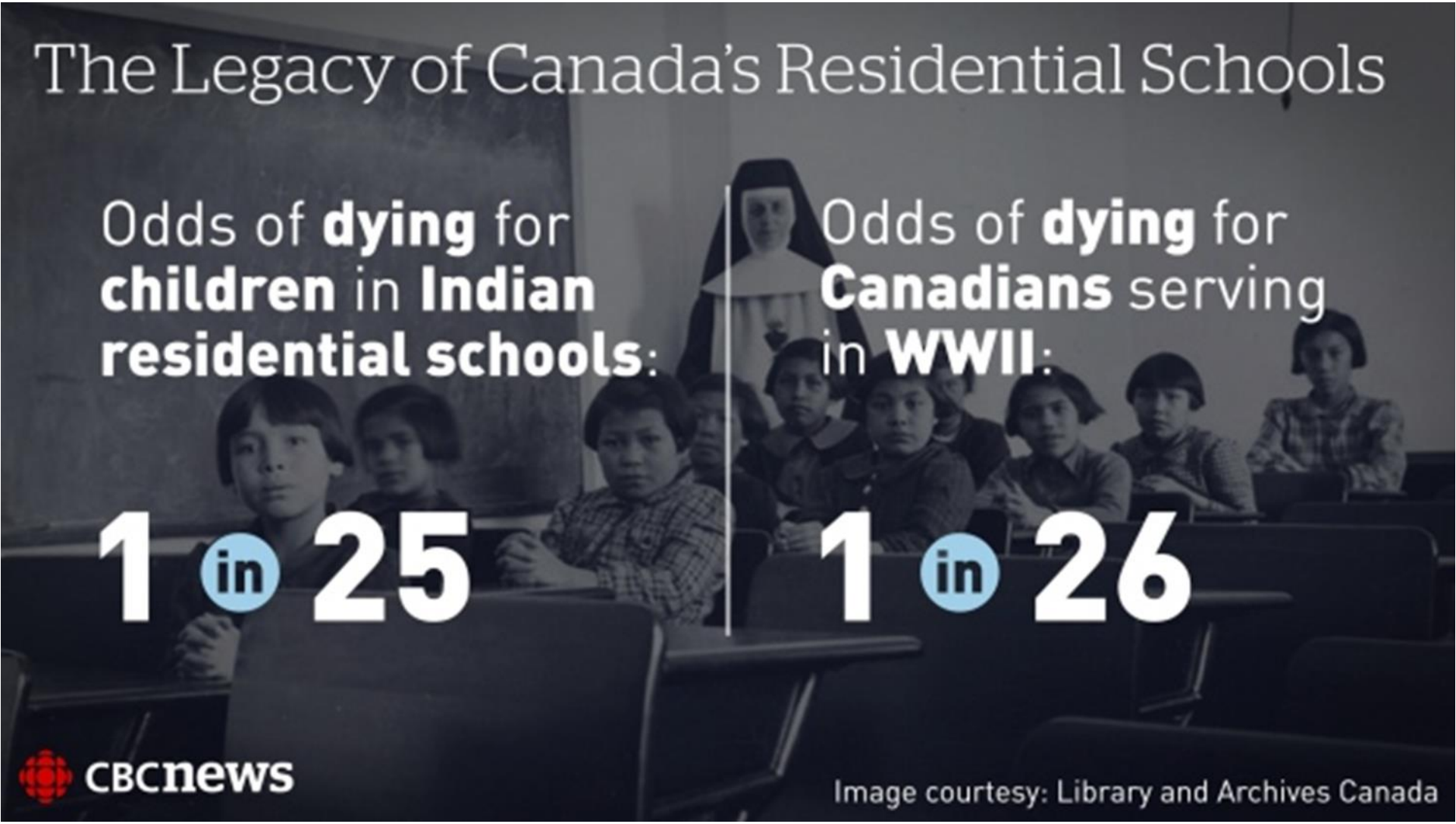
Respect, Discipline, Relationships, Culture, Excellence & Fairness

FNHA Directives

1. Community-driven, nation based
2. Increase First Nations decision making and control
3. Improve services
4. Foster meaningful collaboration and partnership
5. Develop human and economic capacity
6. Be without prejudice to First Nations interests
7. Function at a high operational standard


Environmental
Social
Economic
Cultural
Family
Wisdom
Respect
Land
Emotional
Mental
HUMAN BEING
Physical
Spiritual
Responsibility
Relationships
Community
Nations


Indian Act


The Legacy of Canada's Residential Schools
Odds of dying for children in Indian residential schools:
1 in 25
Odds of dying for Canadians serving in WWII:
1 in 26
CBCnews
Image courtesy: Library and Archives Canada

The agenda for Change

Transformative Change Accord: First Nations Health Plan BC

2005

Truth and Reconciliation on National calls to Action 2015

BC Declaration of Commitment: Cultural Safety & Humility BC

2015

CAPWHN Policy Statement on Cultural Safety and Humility 2017

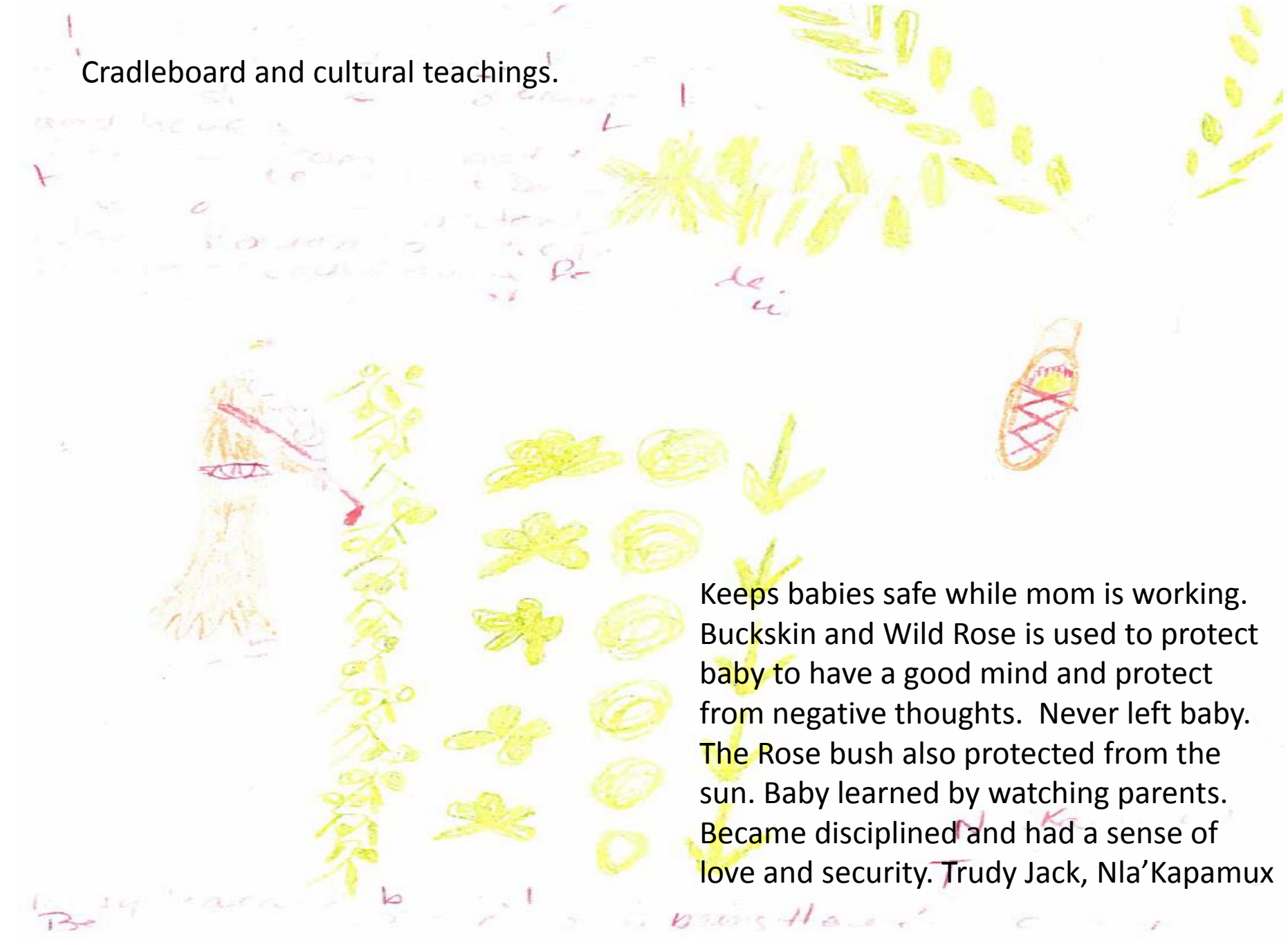
The San'yas Journey

Trained 45,000 people in Canada

Grounded in critical anti-racism and transformational learning pedagogy

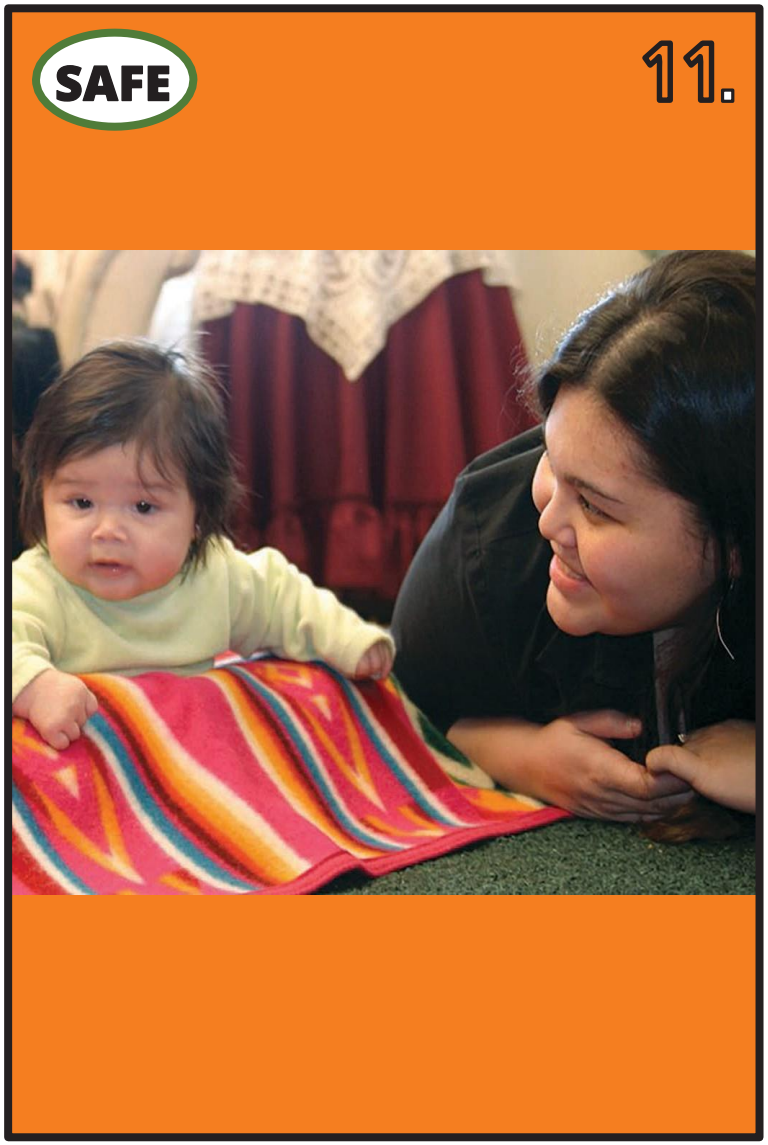
Goals are to increase awareness, enhance knowledge & develop skills

Cradleboard and cultural teachings.



Keeps babies safe while mom is working. Buckskin and Wild Rose is used to protect baby to have a good mind and protect from negative thoughts. Never left baby. The Rose bush also protected from the sun. Baby learned by watching parents. Became disciplined and had a sense of love and security. Trudy Jack, Nla'Kapamux

17 Safe Sleep Illustrated Cards



IS TUMMY TIME SAFE? WHY IS TUMMY TIME IMPORTANT?

SAFE
Tummy Time

Tummy time is safe and good when baby is AWAKE and someone is WATCHING.

DISCUSSION POINTS

- Allowing baby time on their tummy decreases the development of flat spots on their head (it can happen if baby is always on their back with head in the same position. When baby is on their back it is important to turn baby's head to different positions: right, left, centre).
- Tummy time is important for:
  - Developing healthy muscles
  - Preparing baby to crawl
  - Developing neck and back muscles
  - Improving head control
  - Brain development
- Placing baby on the tummy can sometimes help if they have gas or cramps.
- Babies should also have supervised "tummy time" when they are awake, for 10 to 15 minutes and at least 3 times a day. This can be started soon after birth but for less time. Start with 1-2 minutes and increase the time as the baby tolerates it. http://www.caringforkids.cps.ca/handouts/playtime_with_your_baby
- Lay on the floor with your baby and have fun playing. Great time to just connect with your baby.
- If baby falls asleep, make sure to turn the baby onto the back or carry baby to crib and place on back.

HONOURING OUR BABIES: Safe Sleep Cards

Babies are gifts of life from the Creator, and all parents and families share a goal to love, care for, and protect their babies.

Kukstemc over to you Barb!

Walking the Perinatal Journey together

How can we do that?

Everyone has similar goals:

families want to be healthy

we want the families we care for to be healthy

But often the paths we take

are not in harmony

What can we do so our paths are similar?

Rural versus Urban

Walking the Perinatal Journey together

So how do we do this together?

What can we learn from past experiences?

How can we use the past to shape the future?

Urban versus Rural

Our Sacred Journey Aboriginal Pregnancy Passport

Our Sacred Journey Chart

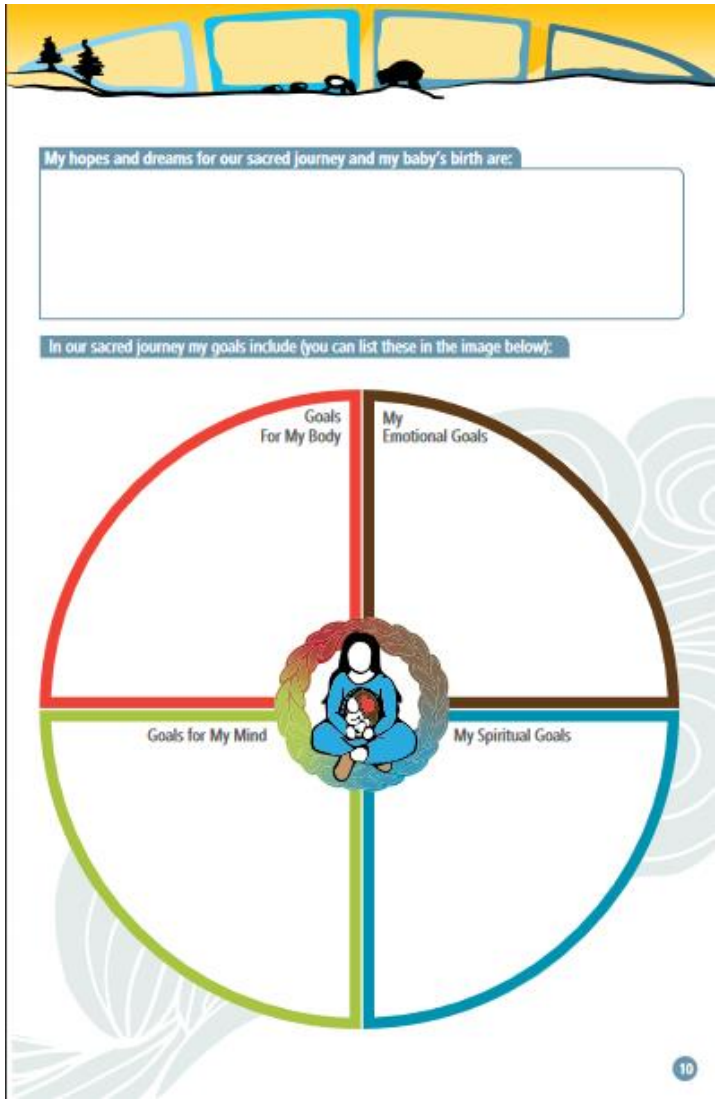
This is how I will keep track of our sacred journey through pregnancy and about the growth of my baby. When I visit my health care person I can ask for help in completing this chart which will help me learn how my baby and I are doing.

	Visit Date #1_____	Visit Date #2_____	Visit Date #3_____	Visit Date #4_____	Visit Date #5_____
My blood pressure is					
My weight (kg)					
Weeks of Pregnancy[1]					
My belly size (cm)[2]					
My baby's heart rate-drumbeat[3]	I can hear the drumbeat of my baby! from about 6 weeks on... 				
My baby's movement[4]	20 weeks and baby is letting me know she/he is there! from about 20 weeks on...				

Aboriginal Pregnancy Passport

My hopes and dreams for our sacred journey and my baby's birth are:

In our sacred journey my goals include –complete the 4 sections.



Aboriginal Pregnancy Passport

What I want to think about right now:

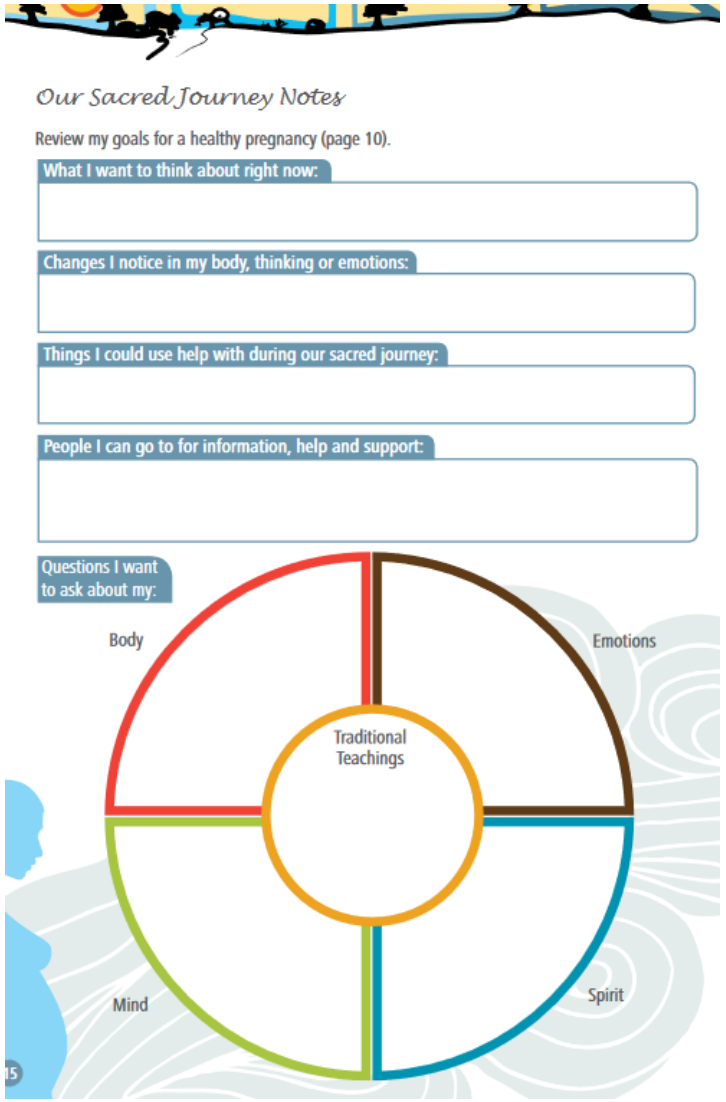
Changes I notice in my body, thinking or emotions

Things I could use help with during our sacred journey:

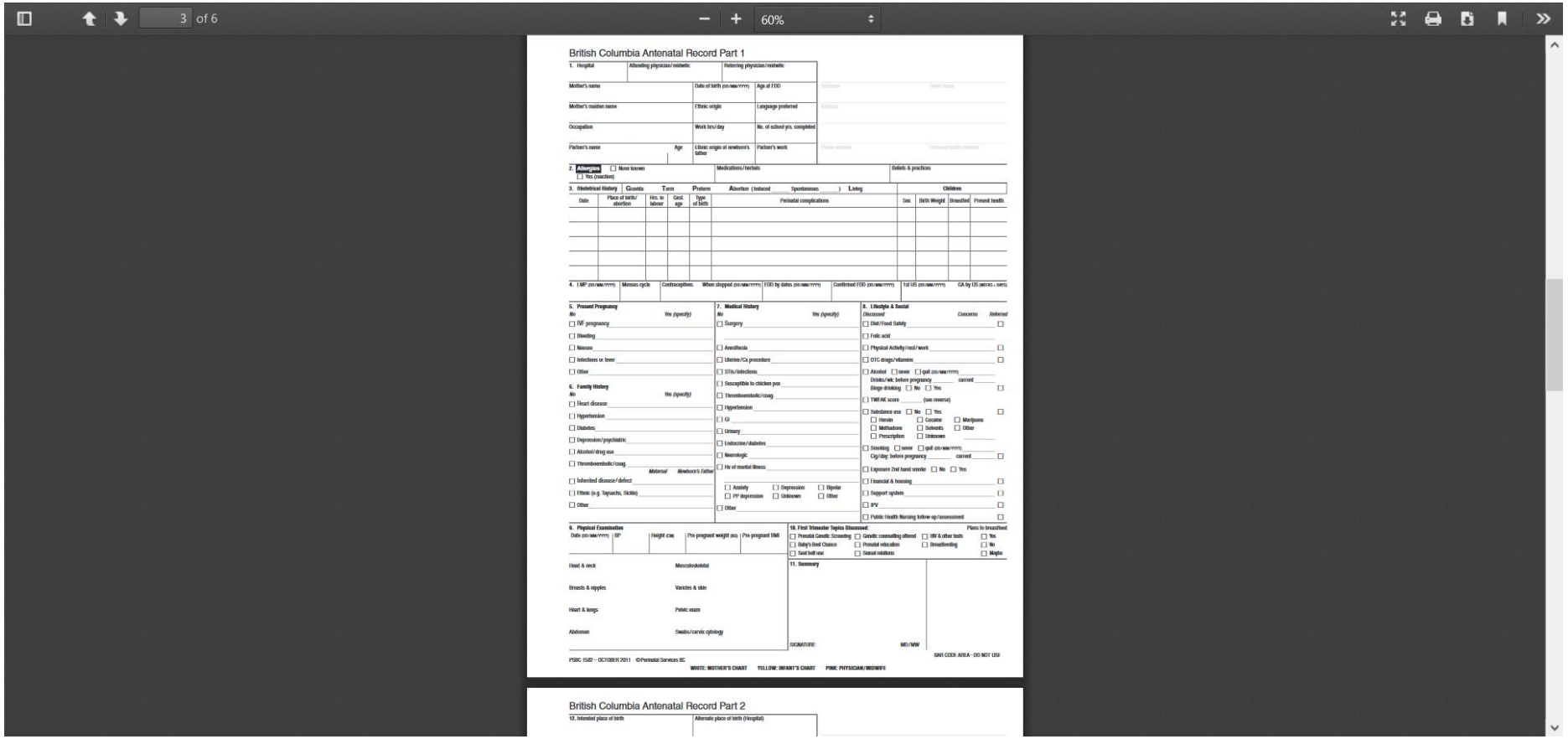
People I can go to for information, help and support:

Questions I want

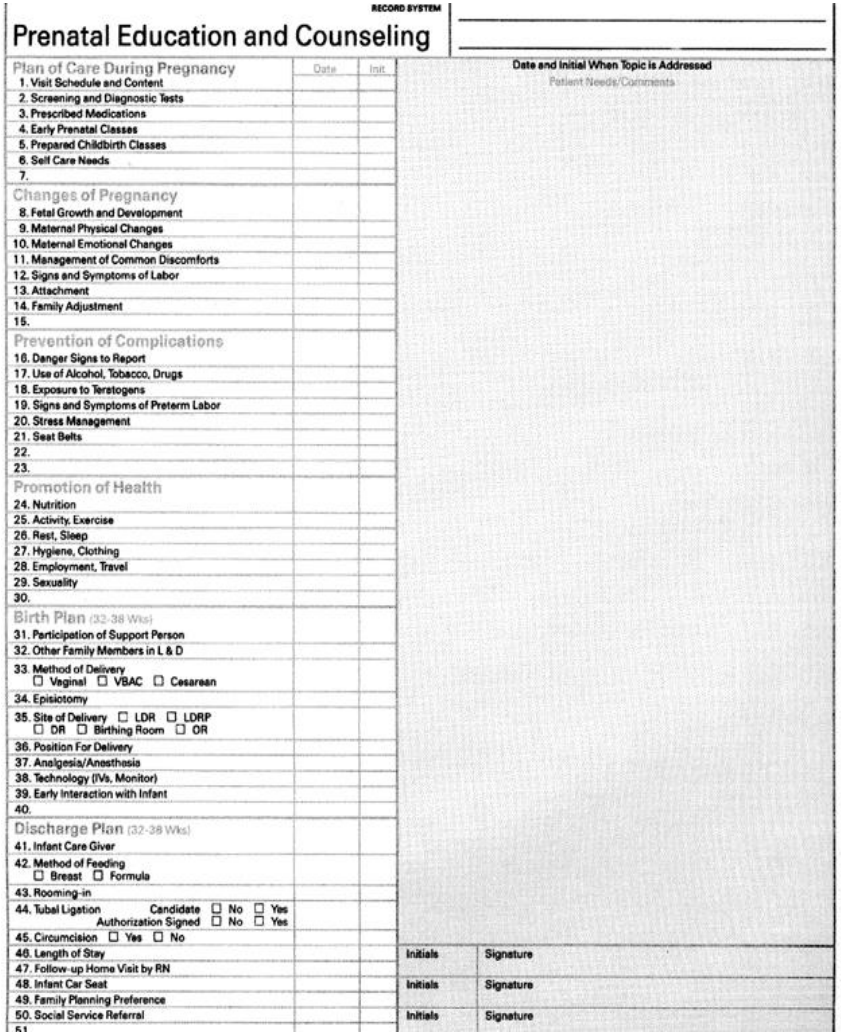
to ask about my:(fill in 4 sections)



Clinical forms



Clinical forms continued



RECORD SYSTEM

Prenatal Education and Counseling

Plan of Care During Pregnancy	Date	Init
1. Visit Schedule and Content		
2. Screening and Diagnostic Tests		
3. Prescribed Medications		
4. Early Prenatal Classes		
5. Prepared Childbirth Classes		
6. Self Care Needs		
7.		
Changes of Pregnancy		
8. Fetal Growth and Development		
9. Maternal Physical Changes		
10. Maternal Emotional Changes		
11. Management of Common Discomforts		
12. Signs and Symptoms of Labor		
13. Attachment		
14. Family Adjustment		
15.		
Prevention of Complications		
16. Danger Signs to Report		
17. Use of Alcohol, Tobacco, Drugs		
18. Exposure to Teratogens		
19. Signs and Symptoms of Preterm Labor		
20. Stress Management		
21. Seat Belts		
22.		
23.		
Promotion of Health		
24. Nutrition		
25. Activity, Exercise		
26. Rest, Sleep		
27. Hygiene, Clothing		
28. Employment, Travel		
29. Sexuality		
30.		
Birth Plan (32-38 Wks)		
31. Participation of Support Person		
32. Other Family Members in L & D		
33. Method of Delivery ☐ Vaginal ☐ VBAC ☐ Cesarean		
34. Episiotomy		
35. Site of Delivery ☐ LDR ☐ LDRP ☐ DR ☐ Birthing Room ☐ OR		
36. Position For Delivery		
37. Analgesia/Anesthesia		
38. Technology (IVs, Monitor)		
39. Early Interaction with Infant		
40.		
Discharge Plan (32-38 Wks)		
41. Infant Care Giver		
42. Method of Feeding ☐ Breast ☐ Formula		
43. Rooming-in		
44. Tubal Ligation Candidate ☐ No ☐ Yes Authorization Signed ☐ No ☐ Yes		
45. Circumcision ☐ Yes ☐ No		
46. Length of Stay		
47. Follow-up Home Visit by RN		
48. Infant Car Seat		
49. Family Planning Preference		
50. Social Service Referral		
51		

Date and Initial When Topic is Addressed

Patient Needs/Comments

Initials	Signature
Initials	Signature
Initials	Signature

Cultural Humility

In order to be Patient-Centred-

"A life-long process of self-reflection & self-critique to understand personal biases & to develop & maintain mutually respectful partnerships based on mutual trust."

Cultural Humility Definition, First Nations Health Authority 2015

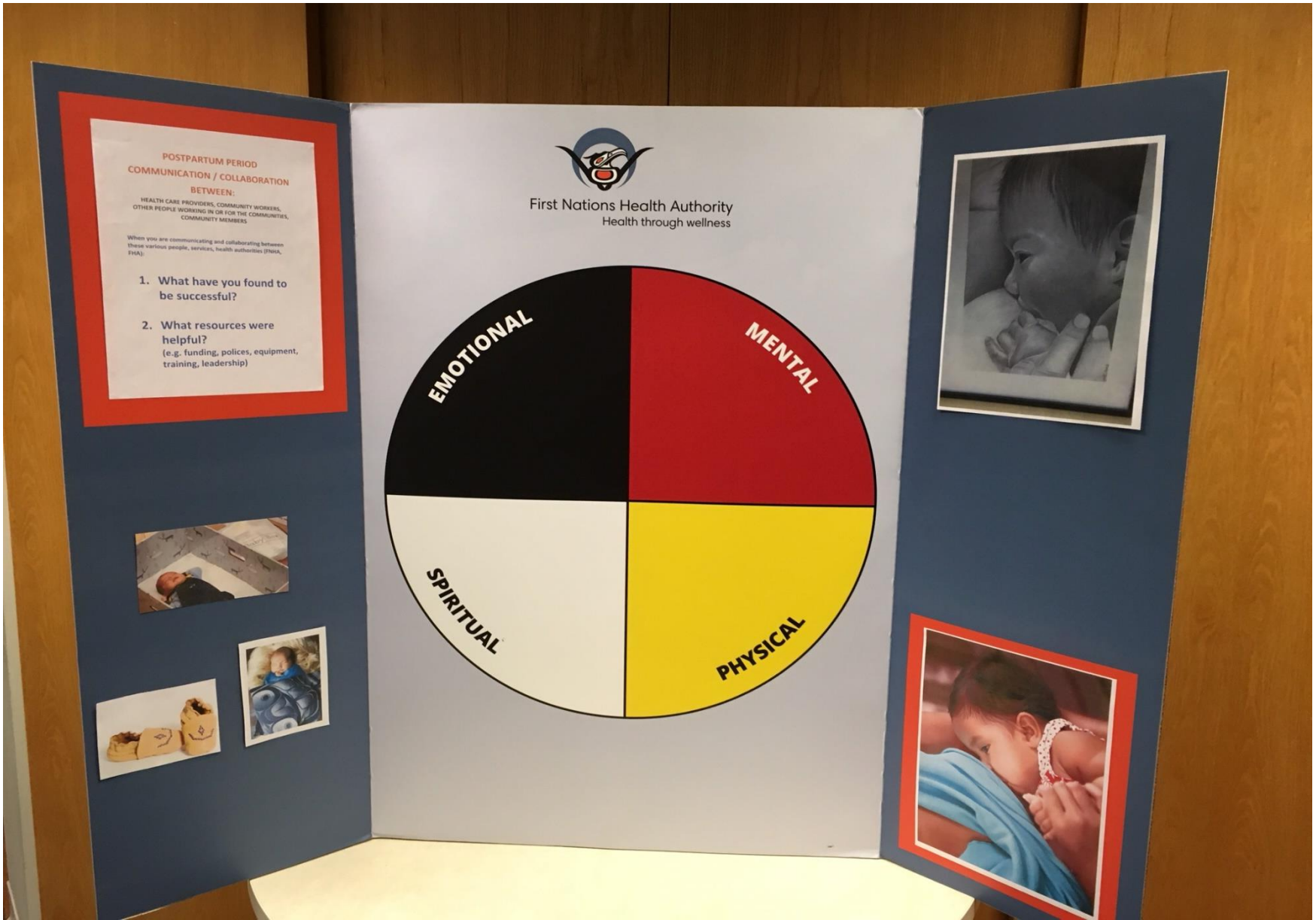
Kwakwaka'wakw initiative

Nuu-chah-nulth Nursing Program (NNP): The Mother's Story

Shifting the Public Health Nursing Care Paradigm in Island Health: The Mother's Story

Networking workshops: FNHA with Health Authorities

- Build relationships
- Learn from each other
- Share stories
- Discuss successes and challenges
- Increase awareness of each others work


POSTPARTUM PERIOD
COMMUNICATION / COLLABORATION
BETWEEN:
HEALTH CARE PROVIDERS, COMMUNITY WORKERS, OTHER PEOPLE WORKING IN OR FOR THE COMMUNITIES, COMMUNITY MEMBERS
When you are communicating and collaborating between these various people, services, health authorities (FNHA, FHA):
1. What have you found to be successful?
2. What resources were helpful?
(e.g. funding, polices, equipment, training, leadership)
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EMOTIONAL
MENTAL
SPIRITUAL
PHYSICAL

Outcomes

- Many points identified in all 4 areas
- Increased awareness of viewing health from a holistic perspective
- Increased awareness of services / resources
- Tangible suggestions

Closing Thoughts for you to take away

Curiosity

Listening

Time to pause

Nothing about us without us

Not to do to but with

Wellness and health

Starting where the client is at versus where we are at

“what would like to know, learn today”

Resources available