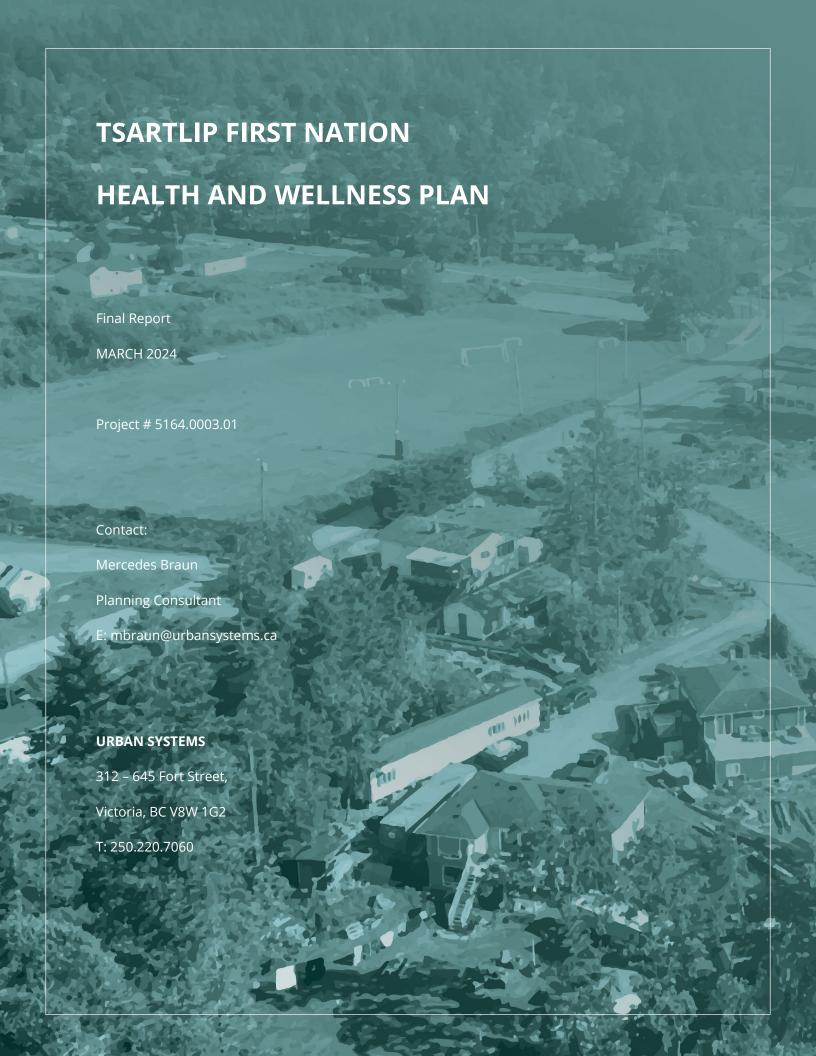


# COMMUNITY HEALTH AND WELLNESS PLAN

TSARTLIP FIRST NATION









## **HEUISTW\_ | ACKNOWLEDGEMENTS**

Tsartlip First Nation would like to thank the First Nations Health Authority (FNHA) for supporting and funding the development of the Community Health and Wellness Plan. Many individuals and groups offered their time, experiences, and support for the Community Health and Wellness Plan process and contributed to the development of this Plan.

We also thank the various community Members and staff members who provided valuable insights into the community and the Community Services Department. We would like to thank:

- Chief and Council for providing support and encouragement to undertake the Community Health and Wellness Plan.
- Community Elders for sharing their knowledge and experiences.
- The community and Community Services Department staff members for participating in engagement activities and sharing their thoughts, hopes, and dreams.
- Ivy Seward, for translating elements of this Plan into SENĆOŦEN

HÍ,SWKE SIÁM





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## **TETUTE OL SXIÁM | EXECUTIVE SUMMARY**

**TÁĆEL SW\_ SIÁM.** This Health and Wellness Plan is a strategic document that works as a guide for addressing our community health and wellness needs over the next five years (2023-2028), as defined by our community of Tsartlip First Nation (Tsartlip).

Our Health and Wellness Plan was created using the input of community Members, Community Services Department staff, and Chief and Council. Input was gathered from the results of a health and wellness survey which asked Members about the state of current individual and community health. Further input was gathered at a community-wide dinner and during targeted focus groups where community Members were asked:

- What is going well in the community in terms of health and wellness?
- Where do Members see challenges or gaps in health and wellness?
- What did health look like in the past and what, if any, traditions can be brought to present day?
- What programs and services are missing?
- What future health and wellness programming and services should Tsartlip focus on for its Members?
- What do you think the top health and wellness priorities should be for this Community Health and Wellness Plan?

Responses to these questions were used to develop vision and mission statements, and to build health and wellness priorities, goals, and actions over the next 5 years.

The Health and Wellness priorities align with Tsartlip's existing strategic plan and vision statement.



Five priorities areas were developed to reflect community Member input on what is most important for our Community Services Department and the community to focus on in terms of health and wellness. These priorities are not listed in order of importance, rather they are considered equally significant. Priorities include:

**Priority 1: Operational Wellness** 

Priority 2: Land-Based Healing & Education

Priority 3: Food Security & Sovereignty

Priority 4: Elder Support

## Priority 5: Prevention-Based Programs and Services

Within these respective priority areas, specific goals and actions were identified, along with timeframes for completion. To support our Community Services Department staff in implementing and evaluating actions and goals, a Monitoring and Evaluation framework was developed in collaboration with Community Services Department staff members (staff). This framework is intended to support staff in measuring the success of actions, what resources to draw from, what methods to use, when to evaluate, and who will be responsible for evaluation.

We express gratitude to our community: Chief and Council, staff, Administration, and most importantly, all community Members for their thoughtful input into this plan. Without community support, this 5-Year Health and Wellness Plan would not be possible. On behalf of the Community Services Department, we look forward to working with you to strengthen health and wellness services for all community Members. **HÍ,SWKE SIÁM**.





## 1.0 TUO, NIŁ TŦE SXIÁM | INTRODUCTION

Our community, Tsartlip First Nation, is one of the five communities comprising the WSÁNEĆ Nation. As Saltwater People, we, the WSÁNEĆ People, have always held the sea in great significance, which continues to be integral to our way of life. Our culture, lands, and waters are vital for our wellbeing and overall health. This Plan aligns with our community's vision of establishing a self-sufficient Nation that thrives harmoniously with WSÁNEĆ traditions, values, and culture. It aims to honour our past while also looking ahead and creating opportunities for future generations, ensuring the health and prosperity of our people.

Our Nation's mission is to foster a healthy, safe, and flourishing community that is deeply rooted in traditional laws, language, and culture. This Plan strives to align with this mission, promoting optimal health and wellness for all Members, regardless of age, gender, ability, or their stage in their wellness journey, from infants to Elders.







## **First Nations Perspective on Health and Wellness**

Our Health and Wellness Plan aims to support Tsartlip Members develop and expand upon their health and wellness. **Figure 1** is a visual expression of the First Nations Perspective on Wellness, passed down from Elders

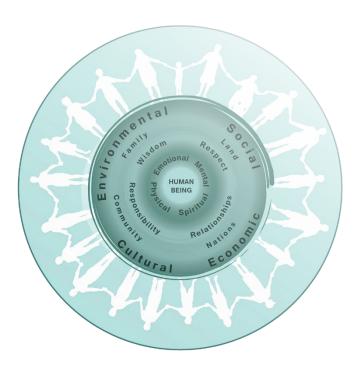
and traditional Healers. It is a tool created by and for FNHA and First Nations communities to develop a shared understanding of a holistic vision of wellness for communities.

The Centre Circle symbolizes the individual Human Being and signifies that the foundation of wellness begins with each person taking responsibility for their own health and wellbeing.

The Second Circle emphasizes the significance of maintaining a harmonious balance among the mental, emotional, spiritual, and physical facets of life. It underscores the importance of nurturing each of these areas to achieve a holistic state of wellbeing.

The Third Circle represents the overarching values that serve as pillars for wellness: respect, wisdom,

Figure 1. Health and Wellness Wheel



responsibility, and relationships. These values form the bedrock of support and uphold the wellbeing of individuals and the community.

The Fourth Circle portrays the interconnectedness of people and places that surround us. It encompasses elements such as land, community, family, and Nations, all of which contribute to our healthy experiences as human beings.

The Fifth Circle signifies the social, environmental, cultural, and economic determinants that influence our health and wellbeing. These factors encompass the broader context within which we live and play a crucial role in shaping our overall wellness.

Through the implementation of this Health and Wellness Plan, our community is provided with support in attaining all dimensions of our community's health and wellness, acknowledging the significance of personal responsibility, a well-rounded life, core values, social connections, and the impact of outside factors on our overall wellness.





## **Purpose of the Plan**

Our 5-Year Community Health and Wellness Plan is a strategic document that provides key information and insight into the current community health and wellness. Shaped by community input and grounded in WSÁNEĆ cultural values and traditions, this Plan serves as a guide for addressing our community's health and wellness requirements and shows us how we can know we have met those requirements.

Our plan should serve these main purposes:

- Act as a guiding document for our community and should be used and understood by our community's Staff, Chief and Council, and community Members.
- Act as a key communication tool to FNHA and other health and funding agencies to identify
  what our Nation is working towards and prioritizing, thus serving as a key strategic document
  to access funding for specific programs and services that are desired by our community.
- Be something we as a community are proud of and resonate with. Every community Member should see themselves represented by this plan.

The plan charts out immediate priorities, shorter-term and medium-term, as well as longer-term priorities that will take significant effort and planning to achieve.

## **Our Planning Approach**

The process of Health and Wellness Planning is a continuous and inclusive endeavor that aims to provide our community with the opportunity to reflect on, comprehend, and share information about past and present health conditions. Through this process, we strive to establish a strategic path forward by connecting our community values, culture, and traditions with clearly defined goals and actionable steps. The ultimate objective of this planning process is to enhance the overall health and wellbeing of our community.

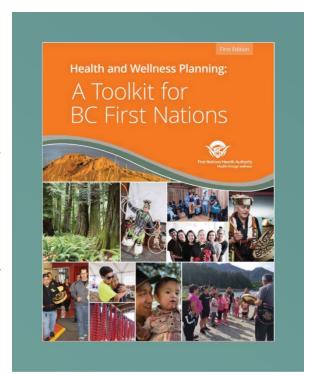




During the development of this Plan, our project team utilized the <u>Health and Wellness Toolkit</u> offered by the FNHA as a resource and reference point. Guided by this toolkit, the project team worked to develop this Plan in a manner that addresses the unique needs and circumstances of our Nation effectively and appropriately.

Our Health and Wellness Plan has been developed through a four-phase approach. The following phases outline the planning and writing stages of developing this Health and Wellness Plan.

## <u>Phase 1: Project Initiation, Information</u> <u>Gathering, and Document Review</u>



During this phase, our project team determined the scope and logistics of community engagement and conducted a review of available and relevant background reports and data that would be used to inform the development of this Plan. At this stage, the project team also presented the project to Tsartlip Chief and Council to provide the opportunity for leadership to provide comments or ask questions.

Background data used to inform this plan include:

- FNHA Health and Wellness Planning: A Toolkit for BC First Nations (2019)
- Tsartlip First Nation Strategic Plan 2021-2026
- 2022 Tsartlip Annual Report
- 2023 Tsartlip CHRT-41 Pre-Capital Needs Assessment





#### **Phase 2: Community Engagement and Data Collection**

The project team engaged with staff and community Members in community in June 2023 and again in early 2024. 2023 engagement activities included a community dinner, focus groups with Elders, Band Administration, leadership, and Staff. One detailed and comprehensive survey that took stock of self-reported individual and community health indicators was distributed during these community sessions in 2023, and an additional survey was distributed in 2024 to increase representation and enhance accuracy. To ensure all community Members had an opportunity to complete the survey, our staff and project team ensured printed and digital surveys were made available to Members who were unable to attend engagement sessions.

#### <u>Phase 3: Data Analysis - Defining the Health Landscape</u>

In this phase, the project team compiled the background data from Phase 1, and engagement input and feedback from Phase 2, and synthesized them together to create a profile on common health themes, community health assets, existing health gaps and challenges, and common goals and health visions.

#### **Phase 4: Writing the Plan**

The project team then developed a draft Health and Wellness Plan based on the input and information collected and analyzed in previous phases. The team then used community input to develop goals, action-oriented strategies, implementation frameworks, and evaluation frameworks. After creating the initial plan, the project team held a workshop with Community Services Department staff to support their understanding of monitoring and evaluation and to support the usability of the monitoring and evaluation Chart (see **XEXŁÁEMET I, XEĆT ŁTE | Monitoring and evaluation).** Upon the finalization of this plan, the project team presented the Plan to Chief and Council, Staff, and the community.





## 2.0 NIŁ EŢ WJOŁEŁP | COMMUNITY CONTEXT

## **Community History**

We, Tsartlip First Nation are a Coast Salish Indigenous community located on Vancouver Island, British Columbia. We are part of the WSÁNEĆ Nation, consisting of five communities with ancestral ties to the Saanich Peninsula's western side. Our WSÁNEĆ peoples are descendants of the original signatories to the Douglas Treaties in 1852 which protects our village sites and the rights to hunt and fish as formerly.

Our traditional territory extends east through the Gulf Islands and San Juan Islands, and even extends as far as what is contemporarily named Maple Ridge. This territory extends northeast across Georgia Strait to Boundary Bay, south as far as PKOLS (Mount Douglas), and from there across to WQENNELEŁ (Mt. Finlayson) and SELEKTEŁ (Goldstream). Today, our land holdings include a portion of the Saanich Peninsula near Brentwood Bay and part of Mayne Island (see **Figure 2**).

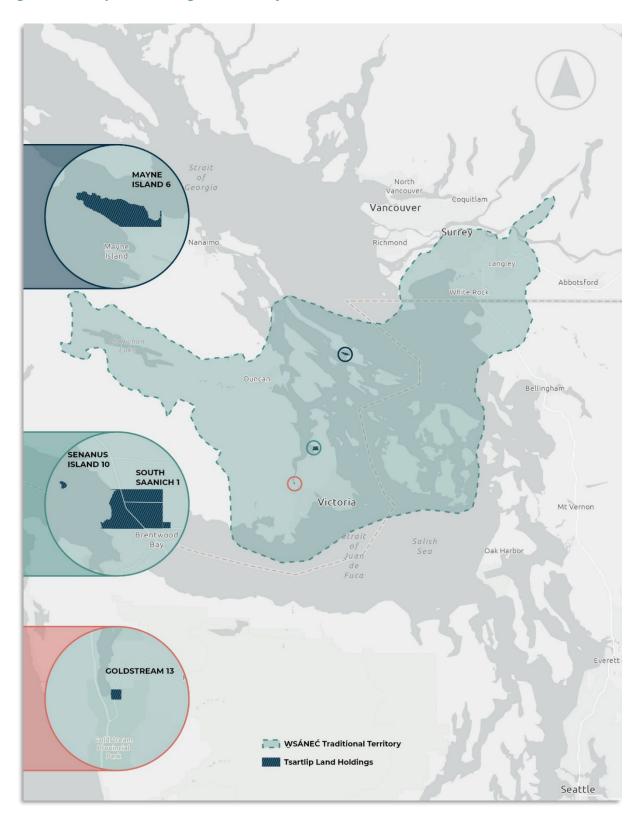
Tsartlip, also known as WJOŁEŁP in SENĆOŦEN, means "land of maples". Our people are deeply intertwined with the land we have inhabited for thousands of years. Like other Coast Salish peoples, we have a rich cultural heritage that includes traditions, oral histories, and artistic expressions.

This Community Health and Wellness Plan recognizes that the collective health of our community and the individual health of our Members are strongly interlinked with our relationship with ancestors, community, and the land.





Figure 2 - Tsartlip Land Holdings and Territory







## **Culture and Language**

Language is an essential part of our culture. Our practices, teachings, and ways of knowing are deeply rooted in SENĆOŦEN and carry ancestral knowledge, stories, and ecological wisdom which links us to our past and guides us to our present. In the past, HUL'Q'UMI'NUM' was also a language spoken by some individuals in our community. Unfortunately, this language has mostly been lost due to past and ongoing colonizing forces. When words fade, so does the profound connection to our culture and our connection with our WSÁNEĆ identity. Therefore, actively working to preserve and promote SENĆOŦEN is an integral piece of fostering wellness for our community.

Our dedication to community, cooperation, and honouring Elders reflects the importance of reciprocity and relationships for us. In addition, our relationships with each other and responsibility to one another and to the land, is foundational for us as stewards of the land and water. Our respect for cultural practices, spirituality, and connection to the land all play a vital role in shaping our identity and wellness. For us, culture and language are interwoven with health and wellness; they are all connected and influence each other. Supporting and building up our cultural identity will help guide us towards self-determination, cultural resurgence, and a flourishing and healthy future firmly grounded in our traditions.

"When Elders are more involved in community, they are healthier"







## **Community Demographics**

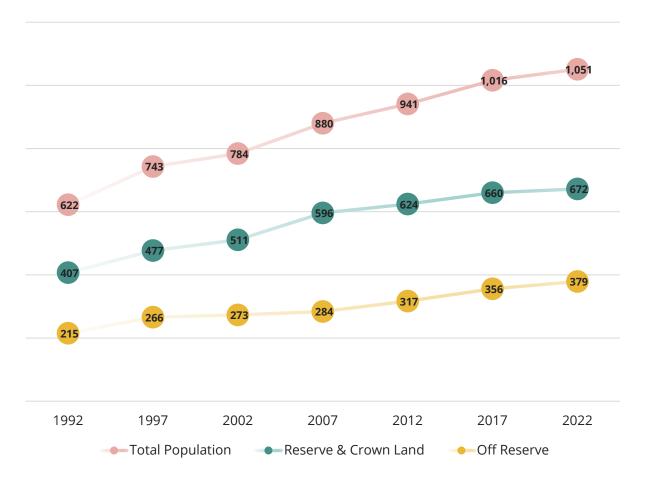
As of December 2022, our registered membership reached a total of 1,051 individuals. Our community has experienced a moderate population growth rate in recent years. Over the past three decades, our Nation's total population has risen from 622 in 1992 to 1,051 in 2022, with the on-reserve population increasing from 407 to 672 during the same period, as shown in **Figure 3**.

Currently, approximately 672 of our Members (64%) reside on-reserve, while 379 Members (36%) live off-reserve. It is important to note that our on-reserve population may be larger than stated, as recorded numbers do not account for unregistered Members or non-members.









Source: Indigenous Services Canada. Custom Tabulations, 2023.

The largest proportion of Tsartlip's population is comprised of individuals between the ages of 19 and 39, accounting for 32% of the total population (refer to **Figure 4**). The second largest age group consists of Members who are currently 18 years old or younger, representing 26% of the population, with a total of 277 individuals. Since 1991, the number of young, registered Members has exhibited a steady decline, diminishing from a peak of 37% of the population in 1996. On the other hand, the fastest-growing segment of the membership is among individuals aged 60 and above, which has expanded from 6% of the population in 1991 to 19% as of 2022.





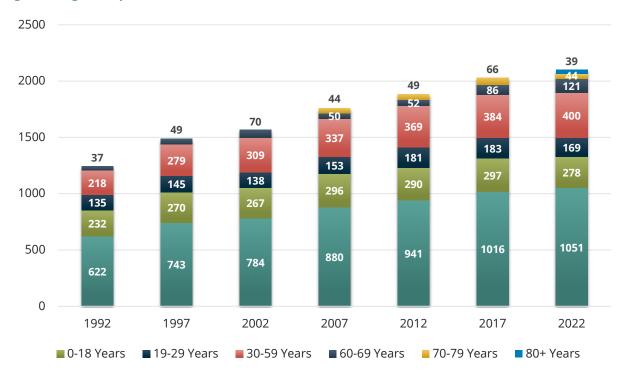


Figure 4 - Age of Population

Source: Indigenous Services Canada. Custom Tabulations, 2023.

### **Population Projections**

When developing a Health and Wellness Plan for our Nation, it is crucial to consider the potential future population growth, as it has implications for the demand for health and wellness-related services, programs, and staff.

To estimate population growth, historical data was drawn from Indigenous Services Canada's Population Indian Registration System, covering a span of 32 years from 1991 to 2022. It is important to note that this data only includes registered Members of Tsartlip First Nation and does not include unregistered Members or non-members residing on-reserve or Crown lands.

Based on this data, three population projections were developed to illustrate possible growth scenarios (low, medium, and high) leading up to 2042. These scenarios used growth rates for both the on-reserve and off-reserve populations. The specifics of the three population growth scenarios and their corresponding outcomes are outlined on the following page, and the results are visually represented in **Figure 5**.



#### **Low Population Growth Scenario**

• Average annual on-reserve population growth rate = 1.74%

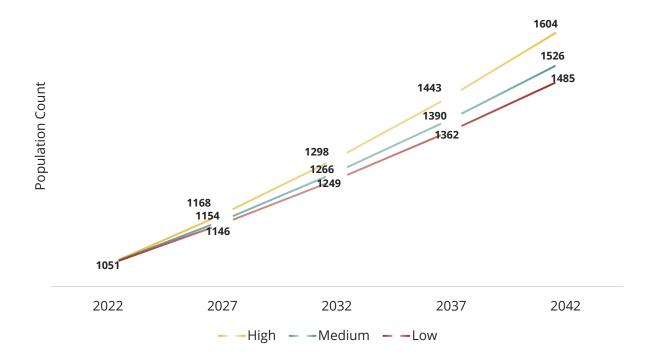
#### **Medium Population Growth Scenario**

Average total population growth rate = 1.88%

#### **High Population Growth Scenario**

Average annual off-reserve population growth rate = 2.14%

**Figure 5 - Population Forecast** 



Over the next 20 years, our Nation can anticipate an estimated increase of approximately 434 to 533 new Members, leading to a population growth ranging from 34% to 42%. It is therefore critical that we allocate future capital towards health and wellness-related programs, services, and staffing that can accommodate the growing number of Tsartlip Members with diverse needs. It is necessary to ensure that these resources are not only considerate of the current population size or demographics but can effectively support the evolving needs of the community.





## **Alignment with Other Plans**

It is critical that our Health and Wellness Plan aligns with all other Tsartlip plans, policies, and strategic priorities to ensure we are all supporting shared goals and priorities for the future.

### **2021 – 2026 Strategic Plan**

The Tsartlip First Nation Strategic Plan (2021 – 2026) identifies a shared vision for our future. This Strategic Plan guides the work of community leadership and administration by providing a structured approach to goal-setting, resource allocation, and decision-making.

#### Mission:

JÁN U, HELISET I QENT TŦE MEQ S,HELIS ÆS JI,SENS TŦE Á,LELEN ŁTE. YOŦ OL U, ĆEOUES TŦE ĆELÁNEN I TŦE SKÁL ŁTE

To promote and maintain a healthy, safe, and thriving community that is grounded in our traditional laws, language, and culture.



#### Vision:

U, QOM,QEM TŦE WJOŁEŁP Á,LELEŊ I TŦE QOMQEM EŁTÁLŊEW. U ĆEĆÁTEŊS TŦE WĊI,ĆTES Á,LELEŊ SNOUEŁ E TŦE WSÁNEĆ ĆELÁŊEN I TŦE XÁ,XE, TEŊEW\_I TŦE XÁ,XE, KO,. SØÁ,S TŦE MEQ WJLŊEW\_E TŦE MEQ XÁ,XE, ĆELÁŊEN XÁ,XE, TEŊEW\_I TŦE XÁ,XE, KO,

Tsartlip is a community of strong, independent people who have built a self-sufficient Nation that thrives in harmony with the WSÁNEĆ culture, lands, and waters to which we belong.

The Strategic Plan outlines various initiatives categorized as short-term, medium-term, and long-term projects, all aimed at achieving four strategic goals.





- **Goal 1 –** Tsartlip is a Self-sufficient Nation.
- **Goal 2 –** Our people are healthy, strong, and independent.
- **Goal 3** We maintain a safe and thriving community with adequate housing infrastructure.
- **Goal 4 –** We live in harmony with the WSÁNEĆ culture, lands, and waters.

A short-term priority identified in the Strategic Plan under Goal 2 is to:

"Develop a community-based Health Plan that incorporates traditional methods and cultural practices".

### **2022 Annual Report**

The 2022 Annual Report builds upon the same mission and vision articulated in the 2021 Strategic Plan and expands on achievements attained and potential opportunities for the community. Specifically, within the report, the Health and Social Development section provides insights into the health and social programs that have been implemented, along with an overview of the staff operating from the Health Centre as of 2022. The Annual Report serves as a roadmap for continued growth and prosperity in the health and wellness scope.







## 3.0 WJOŁEŁP HELISET I KELNEUELÁUTW | TSARTLIP HEALTH AND SOCIAL DEPARTMENT

This Health and Wellness Plan will be the first 5-Year Plan for our Nation. Our Community Services Department is eager to continue to develop a strong relationship with Tsartlip Members to provide holistic, safe care to our community.

#### **Overview**

Our Community Services Department operates and offers services out of the Tsartlip Health Centre. The Health Centre was constructed in 2013 and provides Members with a broad spectrum of health services, including counselling, primary care, prenatal and post-natal care, Elders programs, diabetes education, nutrition, and early childhood Health Centre support. The includes a kitchen and gathering



space for after-hours community events, celebrations, and ceremonies.

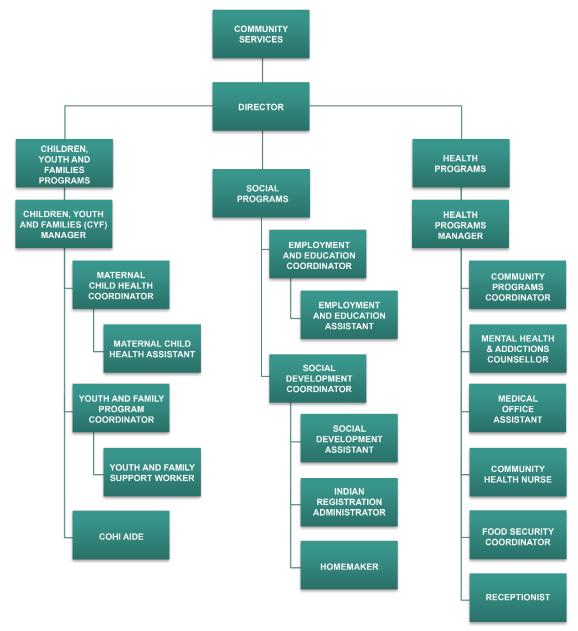
Our Community Services Department encompasses the children, youth, and family services as well as health and social services (see **Figure 6**).





**Figure 6 - Organizational Chart** 

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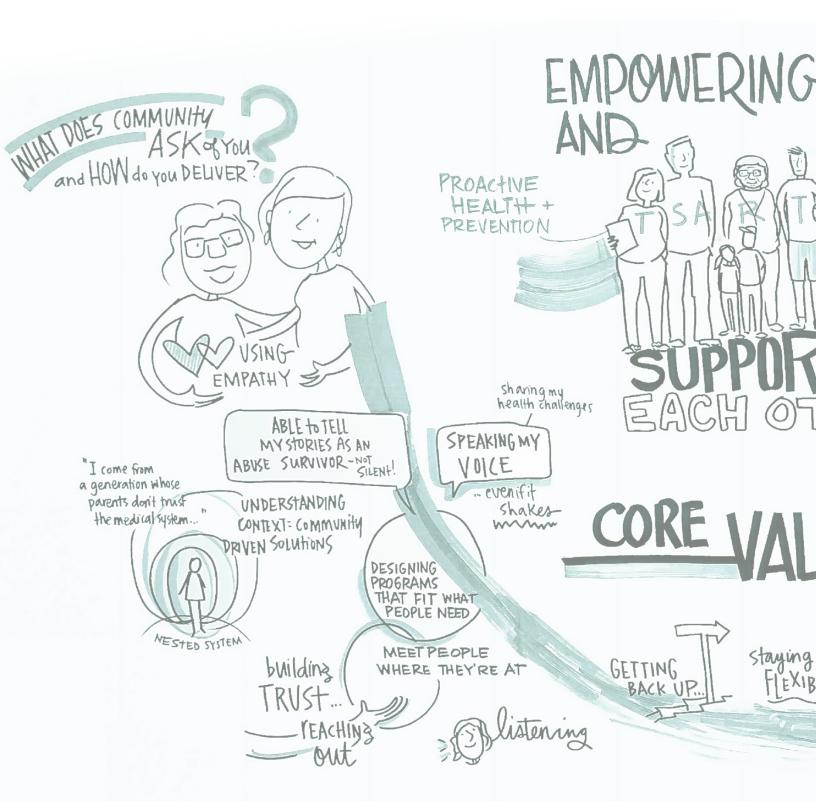
Over the last year, our Community Services Department has been committed to growing our team to provide more services to community and as such, the number of staff and positions are subject to change.

The Tsartlip Community Services Department is rooted in empowering and supporting each other. This includes building trust, listening, supporting Members' health journeys, and growing capacity in Members, families, teams and in the community overall (see **Figure 7**).





Figure 7 - Core Values











Supporting THEIR HEALTH journey





IN SELF FAMILY.
TEAM NATION

- HELP PEOPLE develop their own skills(as caregivers, eg)
- o valuing health twellness

.UES

## RELATIONSHIPS

look to the Strength in the family

strong KIDS are EQUIPPED For LIFE

CULTURE





## **Summary of Current Programs**

Our Community Services Department provides a comprehensive range of services for the community that address physical, mental, emotional, and spiritual health needs. Our team aims to enhance and maintain the health and wellbeing of individuals, families, and the community as a whole.

There are a variety of programs that have been established to address the specific needs of individuals within the community (see **Figure 8**). These initiatives encompass a wide range of services aimed at promoting physical and mental wellbeing, fostering social connections, and enhancing the overall quality of life for community Members.

Where we require additional support, we work closely with organizations such as the Saanich First Nations Adult Care Society (SFNACS), FNHA, Island Health, various pharmacies and much more. The goal is to establish effective working partnerships with these organizations so clients feel comfortable accessing culturally safe care and services that may not be provided at the health centre.







**Figure 8 - Current Programming** 

Educational and Training Initiatives	Family Movie Night	SENĆOŦEN online language classes (through the Aboriginal Head Start on Reserve Program)	Youth and Family Programming	After School Program	Youth Council		
Homework Club	Road to Wellness Program	Aboriginal Head Start on Reserve (AHSOR)	Social Assistance	Men's Group	Spring Break Program		
Family Swim Night	Women's Group	The Children's Oral Health Initiative (COHI)					







These programs are intended to, not only meet basic wellness needs, but also to provide a holistic approach to wellness which includes education, employment, recreation, wellness, and cultural preservation. Through this approach, we aim to support individual and community health and wellness needs, strengthen families, and foster a thriving and well-connected community.





# 4.0 XEĆNOW\_ŁTE | HEALTH AND WELLNESS VISION STATEMENT

In February 2019, our Community Services Department developed a visioning graphic to support holistic community health and wellness in community. This graphic was created as a dynamic and innovative tool to showcase the strengths and challenges the community faces within health and wellness, as well as highlighting potential future needs. While taking into consideration the narrative presented in the visioning graphic, and the more recent conversations had with community Members during focus groups and the community-wide dinner, it has been determined that the vision for Health and Wellness aligns with the strategic community vision and is as follows:

U, QOM,QEM TŦE WJOŁEŁP Á,LELEŊ I TŦE QOMQEM EŁTÁLŊEW. U ĆEĆÁTEŊS TŦE WĆI,ĆTES Á,LELEŊ SNOUEŁ E TŦE WSÁNEĆ ĆELÁŊEN I TŦE XÁ,XE, TEŊEW. I TŦE XÁ,XE, KO,. SØÁ,S TŦE MEQ WILŊEW. E TŦE MEQ XÁ,XE, ĆELÁŊEN XÁ,XE, TEŊEW. I TŦE XÁ,XE, KO,

Tsartlip is a community of strong, independent people who have built a self-sufficient Nation that thrives in harmony with the WSÁNEĆ culture, lands, and waters to which we belong.



Figure 9 - Visioning

Passionate. were a AM! · leadership · TI · humour · Work hard · Holistic approaches expanding COMMUNITY community driver. WHAT IS MORKING WELLS . CULTURALLY GROUNDET 115 ... eing Mble and Valuing nfident each LINESS IS. LOVE · CULTURAL · HOLISTIC · STARTS WITH SELF + is SELF we are steering our own





ensuring goals are Community DRIVEN

> less relying on outside agencies

MORE PROGRAMS = MORE

MORE

VIOLENCE

advocacy

TSARTLIP HEALTH CENTRE

DETERMINED. HEALTHY LAND, ACTIVITIES. SAFE. FAMILIES. HEALTH IS GR

ES. SATE. HEALTHY RELATIONSHIPS. FOOD SECURITY + NUTRITION





## 5.0 S,TOL,NEWS LTE | WHAT WE LEARNED FROM COMMUNITY

## **Community Health Survey**

To get a better understanding of current Tsartlip Members' health status and conditions, a community health survey was administered over May and June 2023. The community health survey provided an important snapshot of the current health and wellness status of Tsartlip Members both on- and off-reserve. The survey gathered 39 responses from Tsartlip community Members regarding their present wellness, access to health programs, and perceptions of community health. The community survey was comprehensive and asked questions of varying topics around Members' use of health services and health care, current mental and physical health, access to food, and level of social connectedness to family and friends, among other topics. Key statistics and survey highlights are summarized in the following section. Full survey statistics and responses can be found in **Appendix A**.

"There is a lack of food options and food sources in community... resulting in high levels of stress and anxiety within families".



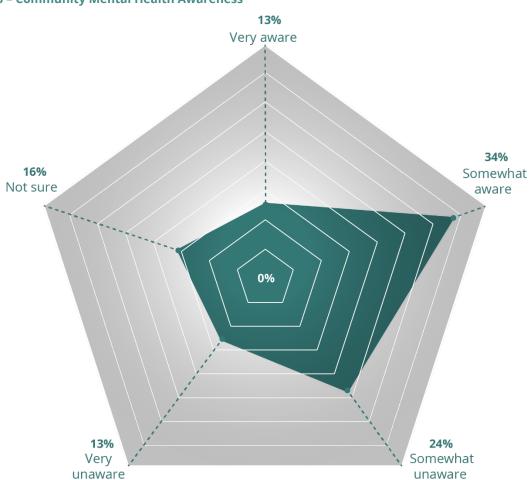


#### **Perception of Health**

Most Members indicated they believed their own health to be either "good" (46%)," fair" (18%), or "poor" (18%).

When asked how healthy Members think their community is, most community Members reported an overall positive perception of community health (59%). Most Members indicated they think their community is "somewhat healthy" (56%), and only 3% of Members think their community is "very healthy". 23% of all Members reported negatively on community health, and 18% were unsure of how they felt about community health.

Members were asked how aware they think the Tsartlip community is about mental illness and mental health. Responses are summarized in **Figure 10**.



**Figure 10 - Community Mental Health Awareness** 



#### **Access to Health Care**

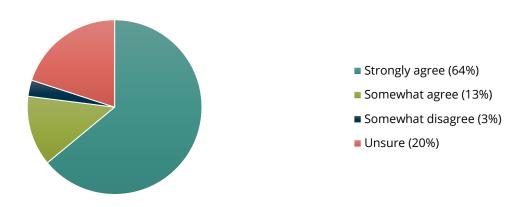
Members were asked what health care services they have accessed in the past year, and the top responses can be seen in **Figure 11**. For Members who felt they needed health care treatment, but did not receive it, the top three reasons for not seeking treatment include: health care not being available in the area (46%), health care not being available at the time it was needed (32%), wait times being too long (18%), and being too busy (14%).

**Figure 11 - Accessed Health Care Services** 



Members were asked if better access to traditional healing and medicines had a positive impact on their health, the top responses can be seen in **Figure 12**. When Members were asked if there should be a permanent childcare facility for Tsartlip families in the community, 96% of respondents answered 'Yes'.

Figure 12 - Traditional Healing and Medicines: A Positive Impact on Community Health?





#### **Top Health Care Concerns**

Members were asked to list which health conditions / concerns they currently have or have had in the past. The top responses can be seen below in **Figure 13**. In terms of mental health, Members were asked if either themselves or close family Members were affected by mental health challenges. Most respondents replied with 'Yes' (63%).

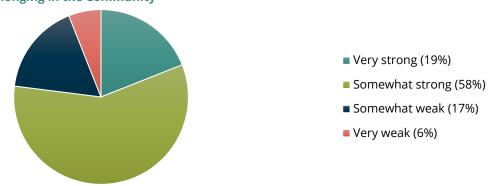
**Figure 13 - Health Condition Concerns** 



### **Sense of Belonging**

When Members were asked to describe their sense of belonging in the community, responses are noted in **Figure 14**. 33% of all Members reported participating in community meetings or activities at least once a year, 19% 3 or 4 times a year, 14% participated at least once a week, and 14% participated once a month. 20% stated they never participate. For Members that responded that they participated only once a year, the primary reason was that there are very little community meeting opportunities for people to gather and attend.

Figure 14 - Sense of Belonging in the Community

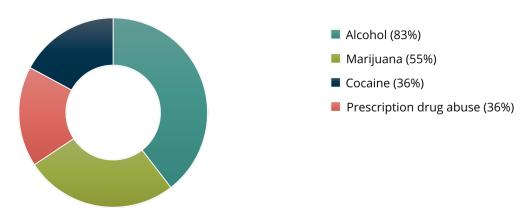




#### **Substance Use and Addiction**

Participants were asked to list the type of substances most concerns them most in their community, The top responses are summarized in **Figure 15**. While there was great concern about Members using substances in the community, when participants were asked if they experienced or had experienced any kind of substance use or addiction personally, the majority of responses were 'No'.

**Figure 15 - Substance Misuse Concerns** 

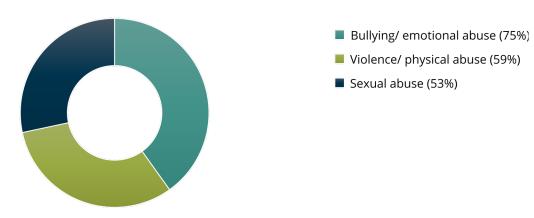


#### **Abuse**

When participants were asked if they had ever been in an abusive relationship, most respondents replied with 'No' (57%). However, when asked if they know somebody in their family that has been in an abusive relationship, most respondents replied with 'Yes' (66%).

Respondents were asked to list what kinds of abuse concerns them the most in their community. The top three responses are summarized in **Figure 16**.

**Figure 16 - Abuse Concerns** 







## **Community Engagement**

Community engagement activities included three focus groups, which involved an Elder's Lunch, a workshop with Tsartlip First Nation Council, and a separate workshop with Tsartlip Community Services staff. Additionally, a community dinner was held at the Health Centre where all community Members and staff were invited to share a meal, play bingo, complete the health and wellness plan survey, and provide input on community health and wellness.

All engagement activities involved guiding participants (including Members, Leadership, and staff) through a set of questions concerning community health and wellness. These activities were promoted through the Tsartlip Health Centre, Administration Building, newsletters, social media, and word of mouth.









During community engagement, participants were asked the following questions:

- What is going well in the community in terms of health and wellness?
- Where do Members see challenges or gaps in health and wellness?
- What did health look like in the past and what, if any, traditions can be brought to present day?
- What programs and services are missing?
- What future health and wellness programming and services should Tsartlip focus on for its Members?
- What do you think the top health and wellness priorities should be for this Community Health and Wellness Plan?

The unaltered dataset is available in **Appendix B**. Condensed responses to the questions show above are included in the following sections.





#### **Health and Wellness in Community**

Participants shared that they associate 'health and wellness' with the following words and phrases:



Participants shared that they try to stay healthy by sharing in the following:

- Traditional practices such as hunting, harvesting, carving, and drum-making
- Conversations with Elders
- Physical activities such as walking, jogging, swimming, biking, hiking and kayaking
- Sharing meals with family
- Gardening
- Talking circles
- Limiting or removing drugs or alcohol
- Community gatherings











#### **Health Assets**

Participants shared that the following programs and activities are considered assets, strengths or sources of pride for the community.

- Good Food Box program
- Men's Group
- Youth Council
- Women's Group
- Tuesday exercise group (chair yoga, strength, and flexibility classes)
- Road to Wellness program
- Youth language classes (offered at ŁÁU, WELNEW\_Tribal School)









#### **Health Challenges / Issues**

Participants shared the following health and wellness challenges?

- Lack of nurses, nurse practitioners, and doctors in community
- Inconsistent health and wellness programs and services in community (such as athletic programs for youth, prescription refills, preventative services, trauma support, paramedical services, and support for young families)
- Poor communication and outreach with Members
- Limited space available for youth programs
- Lack of community transportation options for Members to access appointments off-reserve
- Gossiping / bullying
- Mental health
- Food insecurity







#### **Priorities**

Participants shared that they would like the following to be prioritized:

- Improved access to primary care within the community
- More support for prescription refills
- Strengthen food security and food sovereignty by re-instating the Garden Program, implement a food pantry, and offer cooking classes
- Increase availability of cultural activities through dye-making, beading, drum-making, hunting, harvesting, canning, and more
- Expand health services to include acupuncture, chiropractic care, physiotherapy, and massage therapy
- Expand services and physical space for youth programming, fitness classes, daycare, boys and girls club, and more
- Improve and implement more health care prevention services such as diabetes coaches, wellness coaches, and a Tsartlip nutritionist
- Integrate traditional languages in health and wellness programs and update signage in community buildings





- Improve recruitment and retention and onboarding materials for new Tsartlip Health staff
- Provide patient travel support to health appointments and wellness related activities
- Re-instate the Health Committee to improve communication and Member involvement
- Improve Elder support and programming to include Elders luncheons, home care services, residential school survivor support, and more
- Improve communication between staff, Chief and Council, and Members



After the conclusion of all engagement activities and the development of the draft Plan, Community Services Department staff members were engaged to collaboratively validate and edit the monitoring and evaluation chart (see **Table 2**) to ensure it is user-friendly. In addition to collaborative validation and editing, this final engagement session was planned to foster an understanding of the importance of monitoring and evaluation, and to ensure staff members are comfortable implementing, monitoring, and evaluating the Plan.





### **Post-Engagement Update**

After concluding 2023 engagement activities and drafting the Health and Wellness Plan, it was determined by Tsartlip leadership and staff that an additional survey be distributed to ensure that community engagement accurately reflects the community's voice and guarantees that the **5-Year Action Plan** effectively meets community needs.

107 community Members participated in the follow-up survey and answered the following questions:

- What are your greatest health concerns?
- What health services have you accessed in the past year?
- What activities keep you healthy (mentally, physically, spiritually)?
- What services does the Tsartlip Health Centre need?

#### **2024 Survey Overview**

The 2024 survey included respondents from various age groups and highlighted several health concerns and needs. When compared with the insights from the What We Learned Report (**Appendix B**) and the priorities, goals, and initiatives outlined in the 5-Year Action Plan, the 2024 survey findings indicated a strong alignment with what was heard from community in 2023, as well as with the 5-Year Action Plan's outlined priorities and goals.

The key findings from the 2024 survey show:

- A pronounced emphasis on mental health across all age demographics.
- A demand for culturally specific youth activities and daycare services.
- The necessity for extended health care staffing and extended service hours.
- A desire for comprehensive on-site services and enhanced support for off-reserve members.

These insights have led to the revision of some existing initiatives and the creation of new ones, which are now incorporated into the 5-Year Action Plan. Detailed findings from the 2024 survey can be found in **Appendix C**.





# 6.0 ŁKÁĆES SĆELÁNEN ĆA SE, | 5-YEAR ACTION PLAN

This 5-Year Action Plan for health and wellness is a comprehensive framework designed to guide and track progress in improving the wellbeing and health outcomes for our community Members. This plan consists of several key components, including priority areas, goals, actions, timelines, and performance indicators (see **Table 1**).

The Action Plan identifies five priority areas that encompass the core focus of our community's health and wellbeing initiatives. These priority areas are:



Each priority area addresses specific aspects of community health and wellness identified by community Members and staff and are intended to reflect the unique needs and aspirations of the Tsartlip community. Within each priority area, specific goals are outlined to articulate the desired outcomes and objectives. The priority areas and associated goals are outlined on the following pages.





### Priority 1: Operational Wellness

- 1. Improve trust between Health Centre staff and Tsartlip Members.
- **2.** Improve communications and coordination between the Community Services Department and other Tsartlip departments.
- **3.** Improve recruitment and retention of in-community health care staff (e.g., physician, nurse practitioner, nurses, home care staff, and others) to grow a strong prevention-focused Community Services Department team.

### Priority 2: Land-Based Healing & Education

- **4.** Strengthen WSÁNEĆ cultural identity through intergenerational language and practice renewal.
- 5. Use cultural approaches to cultivate emotional wellbeing and holistic healing.

### Priority 3: Food Security & Sovereignty

**6.** Strengthen food security and sovereignty by improving access to traditional foods and medicines and by supporting community initiatives that focus on sustainable food production harvesting, processing, and traditional medicine gardens.

### Priority 4: Elder Support

**7.** Enhance Elder support and wellbeing within the community through comprehensive and culturally appropriate programs and services.

### Priority 5: Prevention-Based Programs & Services

**8.** Enhance and expand prevention-based programs and services to promote holistic health and wellbeing within the community.





These goals serve as the primary targets to be achieved through the implementation of various actions. Next to each goal, a series of actionable steps are laid out as strategies for attaining the set goal. These actions are concrete, measurable tasks that our Community Services Department can undertake to address the identified health priorities. Some of these actions will require our Community Services Department to collaborate with other Tsartlip departments or Chief and Council. The actions are designed to be practical, achievable, and culturally appropriate, contributing to positive change and improved health outcomes. Actions are sorted within a 5-year timeframe under short-term (1-2 years), medium-term (2-3 years), or long-term (3-5 years) / ongoing. Timeframes may vary based on the complexity and scope of individual actions. Any actions sorted under long-term / ongoing are to be completed within five years, or they are recommended to be an ongoing action with an undetermined endpoint. The timeframe is intended to help our Community Services Department to set realistic deadlines and milestones to track progress effectively.

The performance indicators in the right column are metrics used to measure the success and impact of each action in achieving its corresponding goal. These indicators are quantifiable and qualitative data points that provide a tangible means of assessing progress. They offer valuable insights into the effectiveness of the community health initiatives, facilitating data-driven decision-making and continuous improvement. As the Tsartlip community implements the Action Plan, it is crucial to regularly review and assess progress against the defined performance indicators. This ongoing monitoring ensures that the community remains on track towards achieving its health goals and enables timely adjustments to strategies if needed. Regular updates and evaluations also provide valuable opportunities for community engagement, fostering transparency, and collective ownership of the Plan's success. Further details on monitoring and evaluation will be presented in **Section 7.0**.

Tsartlip First Nation has a unique cultural, historical, and social context that influences and determines Member health and wellbeing. As a result, many of the goals and actions within this plan have been developed keeping in mind the Indigenous determinants of health (e.g., food security and sovereignty, cultural continuity, language, and self-determination). Any overlap between certain priority areas, goals, or actions is a natural reflection of the deep interconnectedness between various aspects of the Indigenous determinants of health and community wellbeing. It is essential to recognize that these priorities are not isolated silos; instead, they share common threads that unite them in pursuit of holistic health for the Tsartlip community. In recognizing these interconnections, the Action Plan





embraces a comprehensive and inclusive approach to community health. By weaving together the priority areas of operational wellness, land-based healing and education, food security and sovereignty, Elder support, and prevention-based programs and services, the Plan strives to ensure that efforts are mutually reinforcing and that <u>W</u>SÁNEĆ culture remains central to all aspects of health promotion and support.

"What we need is a space for our children to grow. They grow by interacting with one another and learning from our Elders".





#### **Table 1 – 5-Year Action Plan**

Priority Area: Operational Wellness						
GOAL 1: IMPROVE TRUST BETWEEN HEALTH CENTRE STAFF AND TSARTLIP MEMBERS						
	Actions	Performance Indicators				
SHORT-TERM (1-2 YEARS)	Develop a position for, and recruit, a Community Cultural Liaison position that would support with onboarding new staff to community cultural protocols, knowledge, and tradition, as well as support and encourage them to build relationships with community members by providing opportunities for connection	<ul> <li>Community Cultural Liaison position has been developed and filled</li> <li>Members report staff are open-minded, knowledgeable, and respectful of community culture</li> </ul>				
		Safety protocols have been updated within the Health Centre and staff are compliant with protocols				
	Update safety policies for Community Services Department staff	Community Members and staff express confidence in the safety of the Health Centre				
		Safety protocols have been updated within the Health Centre and staff are compliant with protocols				
MEDIUM-TERM (2-3 YEARS)	Integrate SENĆOŦEN into Health Department signage and communications materials	<ul> <li>Notable increase in health communication materials available in both English and SENĆOŦEN over the previous year</li> </ul>				
MEDI (2		Community members express satisfaction with language integration				
	IMPROVE COMMUNICATIONS AND COORDINATION BE HER TSARTLIP DEPARTMENTS	TWEEN THE COMMUNITY SERVICES DEPARTMENT				
	ACTIONS	PERFORMANCE INDICATORS				
SHORT-TERM (1-2 YEARS)	Advocate for the development of interdepartmental communications protocols outlining how information should be shared, what channels to use, and the expected frequency of updates	Communications protocols established				
<u>ν</u>	Engage in relationship building with Tsartlip staff in	Updates are shared interdepartmentally				
	other departments	Greater cross-departmental collaborations				





# **Priority Area: Operational Wellness**

GOAL 3: IMPROVE RECRUITMENT AND RETENTION OF IN-COMMUNITY HEALTH CARE STAFF (E.G., PHYSICIAN, NURSE PRACTITIONER, NURSES, HOME CARE STAFF) TO GROW A STRONG PREVENTION-FOCUSED HEALTH TEAM

	ACTIONS	PERFORMANCE INDICATORS			
SHORT-TERM (1-2 YEARS)	Enhance strategic hiring to be based on the specific community health care needs using the survey data informing this plan, as well as any other applicable approaches (e.g., further engagement with community members, or evaluating waitlists and staffing shortages)	Community Members are satisfied with the health care services offered in community			
	Improve access to health care services in community by piloting extended hours at the Health Centre	Community Members are satisfied with access to in-community health care services and have opportunities to access Health services outside of traditional work hours			
	Explore options for developing a creative recruitment campaign using social media and digital platforms to showcase the community and its health care opportunities	Assessment of outreach initiative options complete			
	Engage with current staff to better understand how the onboarding process for new recruits can be improved to enhance job satisfaction, reduce turnover, and improve overall staff performance and community Member satisfaction	<ul> <li>All staff have had opportunities to provide input</li> <li>Analysis of engagement results reveals at least four recommendations for next steps within the onboarding process</li> </ul>			
	Provide opportunities for Tsartlip Health staff to enhance their prevention knowledge and skills through training, workshops, and conferences	<ul> <li>Staff engage in at least one professional development opportunity per year</li> <li>Staff report satisfaction in the opportunities available</li> </ul>			
MEDIUM-TERM (2-3 YEARS)	Explore the feasibility of developing an enhanced recruitment and retention incentive package including both cash and welcome incentives	Feasibility study complete with options and recommendations for next steps			
MEDIL (2-	Completion of a succession planning policy or strategy that fosters and promotes continued professional development and career growth for current Tsartlip Member employees	Completion of succession planning policy for Health staff who are Tsartlip Members			





### **Priority Area: Operational Wellness**

GOAL 3: IMPROVE RECRUITMENT AND RETENTION OF IN-COMMUNITY HEALTH CARE STAFF (E.G., PHYSICIAN, NURSE PRACTITIONER, NURSES, HOME CARE STAFF) TO GROW A STRONG PREVENTION-FOCUSED HEALTH TEAM

#### **ACTIONS**

### LONG-TERM (3-5 YEARS) ONGOING

Identify individuals within community who show potential and interest in health care careers. Develop or seek out educational programs, scholarships, or funding opportunities to support their pursuit of health care professions and provide incentives for those returning and residing in community

#### **PERFORMANCE INDICATORS**

- At least one interested Tsartlip Member per year supported to pursue a health care career
- Health staff who are Tsartlip Members are satisfied with opportunities for career growth in the Tsartlip Community Services Department
- Educational programs, scholarships, or other funding opportunities have been identified





# **Priority Area: Land Based Healing and Education**

GOAL 4: STRENGTHEN WSÁNEĆ CULTURAL IDENTITY THROUGH INTERGENERATIONAL LANGUAGE AND PRACTICE RENEWAL

ACTIONS	PERFORMANCE INDICATORS				
Recruit a Tsartlip Member as a Language Coordinator to integrate language and culture across health programs	A Language Coordinator has been recruited				
Identify language knowledge holders in the community and support them to develop language classes and programs	Knowledge holders have been identified and recruited to support language programs and community Members of all ages are participating in, and satisfied with language programs Number of language knowledge holders identified				
Establish and promote intergenerational learning initiatives that facilitate the transfer of traditional knowledge and practices from Elders to youth. This	Knowledge holders have been identified and recruited to support intergenerational learning initiatives				
may include workshops, mentorship programs, and community gatherings focused on hunting, fishing, harvesting, processing, arts and crafts, carving, drum making, beading, or other cultural activities	<ul> <li>Community Members of all ages are participating in, and satisfied with intergenerational learning initiatives</li> </ul>				
Organize regular cultural camps and retreats where	Knowledge holders have been identified and recruited to support culture camps and retreats				
traditional practices, language, and teachings	<ul> <li>Community Members of all ages are participating in, and satisfied with culture camps and retreats</li> </ul>				
Advocate for the establishment of a dedicated workshop space for art and craft activities, such as carving, beading, and other traditional crafts. This	Ongoing discussions held with community leadership				
space can serve as a hub for cultural exchange and skill development	Approved CHRT 41 application				
	Recruit a Tsartlip Member as a Language Coordinator to integrate language and culture across health programs  Identify language knowledge holders in the community and support them to develop language classes and programs  Establish and promote intergenerational learning initiatives that facilitate the transfer of traditional knowledge and practices from Elders to youth. This may include workshops, mentorship programs, and community gatherings focused on hunting, fishing, harvesting, processing, arts and crafts, carving, drum making, beading, or other cultural activities  Organize regular cultural camps and retreats where community Members can immerse themselves in traditional practices, language, and teachings  Advocate for the establishment of a dedicated workshop space for art and craft activities, such as carving, beading, and other traditional crafts. This space can serve as a hub for cultural exchange and				





# **Priority Area: Land Based Healing and Education**

GOAL 5: USE CULTURAL APPROACHES TO CULTIVATE MENTAL WELLBEING AND HOLISTIC HEALING

	ACTIONS	PERFORMANCE INDICATORS
SHORT-TERM (1-2 YEARS)	Engage Elders to facilitate Elder- or healer-led healing circles and talking circles that provide community Members with a safe and supportive space to share their experiences, thoughts, and feelings	<ul> <li>Increased interest by Elders and traditional healers in leading cultural approaches to wellness</li> </ul>
MEDIUM-TERM (2-3 YEARS)	Collaborate with traditional healers and Elders to integrate traditional healing practices into current mental health and substance use support programs	Improved Elder and Member satisfaction with mental health and substance use support programs





# **Priority: Food Security & Sovereignty**

GOAL 6: INCREASE FOOD SECURITY AND SOVEREIGNTY BY IMPROVING ACCESS TO TRADITIONAL FOODS AND MEDICINES AND BY SUPPORTING COMMUNITY INITIATIVES THAT FOCUS ON SUSTAINABLE FOOD PRODUCTION, HARVESTING, PROCESSING, AND TRADITIONAL MEDICINE GARDENS

<u> </u>	ACTIONS	PERFORMANCE INDICATORS			
FERM:	Recruit a Food Security Coordinator	Food Security Coordinator has been recruited			
SHORT-TERM (1-2 YEARS)	Build a Food Security and Food Sovereignty Program under the Community Services Department	Food Security and Food Sovereignty Program established			
	Conduct an organizational needs assessment to determine the feasibility of hiring a food expert and/or nutritionist to support Members with healthy eating, and to work closely with the community in developing culturally relevant and healthy meal plans that incorporate traditional foods	Completion of a needs assessment that includes a feasibility assessment and community input			
	Work in collaboration with the Stewardship Department to provide opportunities for Members to learn about traditional lands, waters, and territory	Community Members of all ages are participating in, and satisfied with opportunities to learn about traditional lands, waters, and territory			
	Collaborate with the Language Coordinator, Elders, and knowledge holders to increase education and awareness relating to traditional foods by developing informational materials, and by organizing demonstrations, workshops, educational sessions, and storytelling sessions to showcase traditional food preparation, medicinal plant uses, and to educate on the nutritional value and cultural significance of traditional foods	Community Members of all ages are participating in, and satisfied with initiatives implemented			
	Organize and coordinate cooking classes, bake nights, and community dinners featuring traditional dishes to foster social cohesion	Community Members of all ages are participating in, and satisfied with culinary activities and programs			





# **Priority: Food Security & Sovereignty**

GOAL 6: INCREASE FOOD SECURITY AND SOVEREIGNTY BY IMPROVING ACCESS TO TRADITIONAL FOODS AND MEDICINES AND BY SUPPORTING COMMUNITY INITIATIVES THAT FOCUS ON SUSTAINABLE FOOD PRODUCTION, HARVESTING, PROCESSING, AND TRADITIONAL MEDICINE GARDENS

	ACTIONS	PERFORMANCE INDICATORS
MEDIUM-TERM (2-3 YEARS)	Enhance and sustain the Good Food Box program to include more traditional foods and educational materials	Members are participating and reporting satisfaction in program
Ĕ	Build off the existing a community garden program to grow fresh produce and medicinal plants	<ul> <li>Members are participating in, and satisfied with the garden program and with the access to garden harvests</li> </ul>
ONG-TERM 3-5 YEARS) ONGOING	Collaborate with other departments to develop a	Community kitchen and pantry established
ONG (3-5)	community kitchen and food pantry as a hub for sharing traditional foods and knowledge	Members are participating, utilizing, and reporting satisfaction with the community kitchen and pantry hub





# **Priority: Elder Support**

GOAL 7: IMPROVE ELDER WELLBEING BY ENHANCING SUPPORTS WITHIN THE COMMUNITY THROUGH COMPREHENSIVE AND CULTURALLY APPROPRIATE PROGRAMS AND SERVICES

	ACTIONS	PERFORMANCE INDICATORS			
ERM ARS)	Establish an Elders Committee	Elders Committee established			
SHORT-TERM (1-2 YEARS)	Organize social gatherings and Elders Luncheons on a regular basis to foster a sense of community, combat social isolation, and promote cultural sharing and wellbeing among Elders	Elders are participating in social events and expressing satisfaction with those offered			
	Evaluate the medication prescribing process to identify existing barriers and strive to reduce existing barriers. This may involve working with community physicians	Community Members and Elders note an improvement in their access to prescribed medication			
	Organize educational sessions to inform Elders about available health coverage and benefits. Ensure Elders are aware of the resources and programs they can access to maintain their health and wellbeing	Elders are participating in educational sessions and report an improved understanding and awareness of health care coverage and benefits			
	Provide more recreational opportunities for Elders, for example, offer Elders access to swim/fitness passes, and facilitate wellness activities (e.g., gathering in the Big House, sewing, beading, knitting, carving, drawing, and walking) promoting physical activity and supporting their overall health	More Elders are participating in, and satisfied with recreational opportunities			
MEDIUM-TERM (2-3 YEARS)	Identify and recognize knowledge holders within the community, ensuring they are honored and provided with the necessary support and resources to pass down traditional teachings, customs, and cultural knowledge to younger generations	Number of knowledge holders reporting they are satisfied with the support and resources they receive to be able to share cultural knowledge with other Members			
	Facilitate workshops focused on empowering and nurturing Elder leadership within the community.  These workshops can include knowledge sharing, cultural teachings, and capacity building to ensure that Elders play a central role in decision-making and community leadership	Number of Elders participating in and satisfied with workshops			





# **Priority: Elder Support**

GOAL 7: IMPROVE ELDER WELLBEING BY ENHANCING SUPPORTS WITHIN THE COMMUNITY THROUGH COMPREHENSIVE AND CULTURALLY APPROPRIATE PROGRAMS AND SERVICES

#### **ACTIONS**

#### **PERFORMANCE INDICATORS**

Develop and implement a holistic Elder support program that addresses the unique needs of residential school survivors and other Elders in the community

 Elders are participating in and satisfied with the program





# **Priority: Prevention-Based Programs and Services**

GOAL 8: ENHANCE AND EXPAND PREVENTION-BASED PROGRAMS AND SERVICES TO PROMOTE HOLISTIC HEALTH

	ACTIONS	PE	RFORMANCE INDICATORS		
SHORT-TERM (1-2 YEARS)	Engage with Tsartlip youth to understand their unique health and wellness needs and involve them in planning the delivery of any youth-centred cultural and educational events, activities, or outreach	•	Youth are satisfied with the delivery of youth-centred cultural and educational events, activities, or outreach		
	Increase the variety and frequency of health programming for all age groups to encourage physical activity, mental health, social engagement, and community cohesion	•	Members of all ages are participating in, and satisfied with health programs and activities		
Enhance access to mental health supports and services including counselling (in-person and virtual), and youth and adult mental health awareness events and outreach		•	Members are satisfied with access to mental health services		
	Organize educational sessions and workshops covering various topics such as healthy lifestyles, fitness, parenting, women and girls' mental health awareness nights, and life skills	•	Members are attending sessions and reporting satisfaction in educational topics		
	Coordinate transportation services to facilitate patient travel for medical appointments and for transportation beyond patient care, ensuring community Members have access to essential services and opportunities		Members are using transportation services and are satisfied with them		
	Enhance early childhood support programs such as the Brighter Futures Program, daycare, and Child, Youth, and Family Centre services to provide a strong foundation for the healthy development of young children	•	Increased number of children enrolled in early childhood support programs and services and parents and guardians report satisfaction with early childhood supports		
	Explore daycare centre opportunities	•	Feasibility study complete		





# **Priority: Prevention-Based Programs and Services**

GOAL 8: ENHANCE AND EXPAND PREVENTION-BASED PROGRAMS AND SERVICES TO PROMOTE HOLISTIC HEALTH AND WELLBEING WITHIN THE COMMUNITY

	ACTIONS	PERFORMANCE INDICATORS			
MEDIUM-TERM (2-3 YEARS)	Incorporate further prevention-based education into nursing roles and responsibilities to support community Members in adopting healthy lifestyles, addressing health challenges, and achieving their wellbeing goals (e.g., develop a smoking cessation education program)	<ul> <li>Member satisfaction with nursing services</li> <li>Members understand how preventative care can improve their overall wellness</li> </ul>			
	Strengthen family outreach support services to assist families in accessing essential resources, counseling, and educational programs that promote positive parenting, life skills, and overall family wellbeing	Tsartlip families report improved overall family wellbeing and are satisfied with the outreach support services programs and services			
	Develop a comprehensive health education program to increase awareness, provide self-management skills, and support individuals to manage and minimize health challenges related to diabetes, asthma, arthritis, high blood pressure, and heart disease	Improved Member knowledge and awareness of common health challenges in community and improved outcomes for those with, or at risk of, diabetes, asthma, arthritis, high blood pressure, or heart disease			
	Explore opportunities for expanding the current Tsartlip Health Centre	<ul> <li>CHRT 41 application approved</li> <li>Feasibility studies complete for expanding the Health Centre</li> </ul>			
	Purchase a vehicle for medical transportation services and recruit a designated medical/ medication transportation driver	<ul><li>Vehicle purchased</li><li>Driver recruited</li></ul>			
	Coordinate transportation services to facilitate patient travel for medical appointments and for transportation beyond patient care, ensuring community Members have access to essential services and opportunities	Members are using transportation services and are satisfied with them			





# **Priority: Prevention-Based Programs and Services**

GOAL 8: ENHANCE AND EXPAND PREVENTION-BASED PROGRAMS AND SERVICES TO PROMOTE HOLISTIC HEALTH AND WELLBEING WITHIN THE COMMUNITY

	ACTIONS	PERFORMANCE INDICATORS		
LONG-TERM (3-5 YEARS) / ONGOING	Create a dedicated space that serves as a holistic health and wellness hub, offering services and programs tailored to the needs of men, women, youth, and children. This hub can include recreation facilities, a library, workshops, a community kitchen and pantry, and spaces for cultural advisors to provide guidance	A dedicated holistic health and wellness hub has been established and there is notable participation and visitation by Tsartlip members		
	Recruit sports coach(es) to mentor and train individuals of all ages, fostering athletic skills, teamwork, and community involvement through sports activities	Sports coach has been recruited and Members are participating in sports		





# 7.0 XEXŁÁEMET I, XEĆT ŁTE | MONITORING AND EVALUATION

Evaluating the outcomes of goals and actions is crucial for understanding the lasting impacts of this Health and Wellness Plan. Additionally, setting metrics to monitor and then evaluate each action helps to create accountability between the Community Services Department and the community. Monitoring and evaluation can help our team see if the plan is being implemented as expected, achieving its goals and objectives, and whether any issues have come up that require attention. Monitoring and evaluation can help identify when circumstances have changed, and the plan might require adjustment. Sharing results with Members, leadership and partners can help with continued commitment to the goals set out in the plan.

Common ways to monitor and evaluate the plan:

**Process:** Checking if the activities in the plan are being carried out as expected and whether activities are on track to support a plan's intended outcomes.

**Outcomes / Effectiveness:** Gauging in the results of activities in relation to the plan's goals and objectives.

**Efficiency:** Assessing if resources are being used in a way that supports the achievement of intended outcomes in an efficient manner.

To support the implementation and monitoring of this plan, an evaluation chart is provided below to guide staff in determining whether goals are being achieved (see **Table 2**). The evaluation chart below identifies the goal, associated evaluation question, the inputs (sources/ participants, methods, timing, and lead), and the indicators which should be used to measure success.





### **Table 2. Monitoring and Evaluation Chart**

Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Goal 1: Improve trust between	Community Services De	partment staff and Tsartlip	Members			
Develop a position for, and recruit, a Community Cultural Liaison that would support with onboarding new staff to community cultural protocols, knowledge, and tradition, as well as support and encourage them to build relationships with community Members by providing opportunities for connection	Has a Community     Cultural Liaison     position been     developed and     recruited?     Have Members     reported improved     or increased level of     trust in Staff?	Community Cultural Liaison position has been developed and filled Members report staff are open-minded, knowledgeable, and respectful of community culture	<ul> <li>Employment records</li> <li>Potential recruits/ Members</li> <li>Community Health Committee Members</li> <li>Health Staff</li> <li>Elders</li> </ul>	Record review     Interviews     Informal conversations	By 2025     Evaluate annually	Lead: Director, Community Services Support: Health Manager
Update safety policies for Community Services Department staff	Have safety     protocols been     updated?	Safety protocols have been updated within the Health Centre and staff are compliant with protocols     Community Members and staff express confidence in the safety of the Health Centre	Community Members     Community Health     Committee Members     Health Staff     Elders     Current safety     practices and policies     Annual report	Document review     Informal conversations	By 2025     Evaluate annually	Lead: Director, Community Services Support: Health Manager CYF Manager
Goal 2: Improve communication	ons between the Tsartlip	Community Services Depart	tment and other Tsartlip d	epartments		
Advocate for the development of interdepartmental communications protocols outlining how information should be shared, what channels to use, and the expected frequency of updates	Is there interest in establishing communication protocols across Tsartlip departments?	Communications protocols established	All departments and personnel     Current Tsartlip communications policy and practice	<ul> <li>Meetings</li> <li>Informal conversations</li> <li>Document review</li> <li>Emails</li> </ul>	Ongoing     Evaluate annually	Lead: Director, Community Services Support: Human Resource Coordinator Health Manager CYF Manager





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Engage in relationship building with Tsartlip staff in other departments	Are Health staff engaged in ongoing relationship building with other departments?	Updates are shared interdepartmentally     Greater cross-departmental collaborations     Improved understanding of the various roles and responsibilities for various departments and positions     Improved trust across departments and positions	All departments and personnel     Current Tsartlip communications policy and practice	<ul> <li>Meetings</li> <li>Informal conversations</li> <li>Document review</li> <li>Emails</li> </ul>	Ongoing     Evaluate     annually	Lead: Director, Community Services Support: All staff
Goal 3: Improve recruitment a	nd retention of in-comm	unity health care staff to gr	ow a strong prevention-fo	cused health team		
Explore options for developing a creative recruitment campaign using social media and digital platforms to showcase the community and its health care opportunities	Has an assessment of outreach initiative options been completed?	Assessment of outreach initiative options is complete	<ul> <li>Health staff</li> <li>Examples from other communities</li> <li>Current recruitment and retention practice, policy or related documents</li> </ul>	<ul> <li>Document and campaign platform review</li> <li>Informal conversations</li> <li>Interviews</li> </ul>	• By 2025	Lead: Health Manager Support: Tsartlip Communications Employment and Education Coordinator
Engage with current staff and Elders to better understand how the onboarding process for new recruits can be improved to enhance job satisfaction, reduce turnover, and improve overall staff performance and community Member satisfaction	<ul> <li>Have all staff had reasonable opportunity to provide input?</li> <li>Does engagement with Health staff reveal at least four recommendations for next steps within the onboarding process?</li> </ul>	<ul> <li>All staff have had opportunities to provide input</li> <li>Analysis of engagement results reveals at least four recommendations for next steps within the onboarding process</li> </ul>	<ul> <li>Health staff</li> <li>Elders</li> <li>Current onboarding protocol and policy</li> </ul>	<ul> <li>Document review</li> <li>Annual reporting</li> <li>Sharing circles</li> <li>Informal conversations</li> <li>Videos</li> </ul>	By 2025     Evaluate annually	Lead: Director, Community Services Support: Human Resources





Actions	<b>Evaluation Question</b>	Indicators	Sources	Methods	Timing	Lead
(What do we need to do?)	(What do you need to know?)	(What does success look like?)	(What and who will be the sources of this information?)	(How will information be collected?)	(When will information be collected?)	(Who will be responsible?)
Provide opportunities for Tsartlip Health staff to enhance their prevention knowledge and skills through training, workshops, and conferences	Do staff have sufficient opportunities to enhance their prevention knowledge and skills through professional development opportunities?	Staff engage in at least one professional development opportunity per year ανδ report satisfaction in the opportunities available	Health staff     Registration and attendance data	<ul> <li>Professional development tracking</li> <li>Registration and attendance data collection</li> </ul>	Ongoing     Evaluate     annually	Lead: Director, Community Services Support: Employment and Education Coordinator, Health Manager
Completion of a succession planning policy or strategy that fosters and promotes continued professional development and career growth for current Tsartlip Member employees	Has a succession plan been developed for current staff who are Tsartlip Member's?	Completion of succession planning policy for Health staff who are Tsartlip Members	Health staff who are Tsartlip Members     Current recruitment policy     Annual report	Informal conversations     Document review     Engagement activities     Sharing circles     Informal conversations     Videos	By 2026     Evaluate annually	<b>Lead:</b> Health Manager, CYF Manager
Identify individuals within community who show potential and interest in health care careers. Develop or seek out educational programs, scholarships, or funding opportunities to support their pursuit of health care professions and provide incentives for those returning and residing in community	Is the Community     Services Department     engaging with     Tsartlip Members     and communicating     the opportunities     available for     Members who want     to work in health     care?      Have educational     programs,     scholarships, or     other funding     opportunities been     identified?	At least one interested     Tsartlip Member per     year supported to     pursue a health care     career     Health staff who are     Tsartlip Members are     satisfied with     opportunities for career     growth in the Tsartlip     Community Services     Department     Educational programs,     scholarships, or other     funding opportunities     have been identified	Health staff who are Tsartlip Members     Tsartlip Members/ Youth     Current recruitment policy     Annual report     Available programs and funding opportunities	<ul> <li>Document, grant, scholarship, and program review</li> <li>Sharing circles</li> <li>Informal conversations</li> <li>Videos</li> </ul>	Ongoing     Evaluate     annually	Lead: Employment and Education Coordinator





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Explore the feasibility of developing an enhanced recruitment and retention incentive package including both cash and welcome initiatives  Goal 4: Strengthen WSÁNEĆ cu	What are the most feasible approaches for enhancing recruitment and retention? Is it feasible to develop an enhanced recruitment and retention incentive package?  Itural identity through in	Feasibility study complete with options and recommendations for next steps  tergenerational language a	Feasibility report/memo     Current recruitment and retention practice, policy or related documents  and practice renewal	Document and campaign platform review	• By 2026	Lead: Human Resources Coordinator Support: Director, Community Services
Recruit a Tsartlip Member as a Language Coordinator to integrate language and culture across health programs	Has a Language Coordinator been recruited?	A Language Coordinator has been recruited	<ul><li>Health staff</li><li>Annual report</li><li>Potential recruits</li><li>Employment record</li></ul>	<ul> <li>Interviews</li> <li>Informal conversations</li> <li>Document review</li> <li>Job posting</li> </ul>	By 2025     Evaluate annually	<b>Lead:</b> Health Manager, , CYF Manager
Integrate SENĆOŦEN into Community Services Department signage and communications materials	Is SENĆOŦEN     integrated into     Community Services     Department signage     and     communications     materials?	Notable increase in health communication materials available in both English and SENĆOŦEN     Community members express satisfaction with language integration	<ul> <li>Health staff</li> <li>Language knowledge holders</li> <li>Annual report</li> <li>Communications materials and signage</li> </ul>	Informal conversations     Document and materials review	By 2026     Evaluate annually	Lead: Language Coordinator Support: Health Manager





Actions	<b>Evaluation Question</b>	Indicators	Sources	Methods	Timing	Lead
(What do we need to do?)	(What do you need to know?)	(What does success look like?)	(What and who will be the sources of this information?)	(How will information be collected?)	(When will information be collected?)	(Who will be responsible?)
Identify language knowledge holders in the community and support them to develop language classes and programs	Have community knowledge holders been identified and integrated to support language classes and programs?	Knowledge holders have been identified and recruited to support language programs     Community Members of all ages are participating in, and satisfied with language programs	<ul> <li>Language Coordinator</li> <li>Tsartlip Member staff</li> <li>Knowledge holders</li> <li>Tsartlip leadership</li> <li>Youth</li> <li>WSÁNEĆ language program</li> <li>Registration and attendance data</li> </ul>	Interviews or informal conversations     Community lunches and dinners     Sharing circles     Registration and attendance data collection	By 2026     Evaluate annually and as needed	<b>Lead:</b> Language Coordinator
Establish and promote intergenerational learning initiatives that facilitate the transfer of traditional knowledge and practices from Elders to younger generations. This may include workshops, mentorship programs, and community gatherings focused on hunting, fishing, harvesting, processing, arts and crafts, carving, drum making, beading, or other cultural activities	Have intergenerational learning initiatives been established and promoted?	Knowledge holders have been identified and recruited to support intergenerational learning initiatives     Community Members of all ages are participating in, and satisfied with intergenerational learning initiatives	<ul> <li>Language Coordinator</li> <li>Tsartlip Member staff</li> <li>Knowledge holders</li> <li>Elders</li> <li>Tsartlip leadership</li> <li>Youth</li> <li>Registration and attendance data</li> </ul>	Informal conversations     Community lunches and dinners     Sharing circles     Registration and attendance data collection	By 2026     Evaluate annually	Lead: Language Coordinator Support: Community Cultural Liaison Elder Coordinator
Organize regular culture camps ad retreats where community Members can immerse themselves in traditional practices, language, and teachings	Have culture camps and retreats been organized and coordinated?	Knowledge holders have been identified and recruited to support culture camps and retreats     Community Members of all ages are participating in, and satisfied with culture camps and retreats	<ul> <li>Language Coordinator</li> <li>Knowledge holders</li> <li>Elders</li> <li>Community Members</li> <li>Registration and attendance data</li> </ul>	Sharing circles     Informal conversations     Community lunches and dinners     Registration and attendance data collection	By 2026     Evaluate annually	Lead: Community Cultural Liaison Support: Language Coordinator





Actions (What do we need to do?)  Advocate for a dedicated workshop space for art and craft activities, such as carving, beading, and other traditional crafts. This space can serve as a hub for cultural exchange and skill development	Evaluation Question (What do you need to know?)      Are action leads advocating for a workshop space to be established?	Ongoing discussions held with community leadership     Approved CHRT 41 application	Sources (What and who will be the sources of this information?)  Tsartlip Leadership Elders Knowledge holders Tsartlip Members Language Coordinator Cultural Liaison Annual Report	Methods (How will information be collected?)  Informal conversations Meetings Emails	Timing (When will information be collected?)  • Ongoing	Lead (Who will be responsible?)  Lead: Director, Community Services Support: Health Manager, CYF Manager
Goal 5: Use cultural approached Engage Elders to facilitate Elder- or healer-led healing circles that provide community Members with a safe and supportive space to share their experiences, thoughts, and feelings	Have traditional     Healers and Elders     been engaged to     facilitate healing     circles and healing     practices?	Increased interest by Elders and traditional healers in leading cultural approaches to wellness	<ul><li>Elders</li><li>Healers</li><li>Health staff</li><li>Community Members</li></ul>	Informal conversations     Sharing circles	• By 2025	Lead: Elders Coordinator Support: Cultural Liaison Mental Health and Addictions Counsellor
Collaborate with traditional healers and Elders to integrate traditional healing practices into current mental health and substance use support programs	Has an approach for connecting and collaborating with traditional healers and Elders been established and have traditional practices been integrated into current mental health and substance use support programs?	Improved Elder and Member satisfaction with mental health and substance use support programs	<ul> <li>Elders</li> <li>Healers</li> <li>Health staff</li> <li>Community Members</li> </ul>	<ul> <li>Informal conversations</li> <li>Sharing circles</li> </ul>	By 2026     Evaluate annually	Lead: Elders Coordinator Support: Mental Health and Addictions Counsellor





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)			
	Goal 6: Increase food security and sovereignty by improving access to traditional foods and medicines and by supporting community initiatives that focus on sustainable food production, harvesting, processing, and traditional medicine gardens								
Recruit a Food Security Coordinator	Has a food security coordinator been recruited?	Food security     coordinator has been     recruited	<ul> <li>Potential recruits</li> <li>Tsartlip Members</li> <li>Job posting</li> <li>Employment contract or understanding</li> </ul>	Informal conversations     Interviews	• By 2025	Lead: Health Manager Support: Director, Community Services			
Build a Food Security and Sovereignty Program under the Community Services Department	Has a food security and sovereignty program been established?	Food security and sovereignty program is established	<ul> <li>Health staff</li> <li>Elders</li> <li>Knowledge holders</li> <li>Community Members</li> <li>Programs in comparable communities</li> <li>Best practices</li> <li>Tsartlip Health and Wellness Plan</li> </ul>	<ul> <li>Document review</li> <li>Community lunches and dinners</li> <li>Sharing circles</li> <li>Informal conversations</li> </ul>	By 2025     Evaluate annually	Lead: Food Security Coordinator Support: Health Manger			
Conduct an organizational needs assessment to determine the feasibility of hiring a food expert and/or nutritionist to support Members with healthy eating, and to work closely with the community in developing culturally relevant and healthy meal plans that incorporate traditional foods	Has an organizational needs assessment been conducted?	Completion of a needs assessment that includes a feasibility assessment and community input	<ul> <li>Health staff</li> <li>Elders</li> <li>Knowledge holders</li> <li>Community Members</li> <li>Annual Report</li> <li>Financial records</li> <li>Tsartlip Health and Wellness Plan</li> </ul>	<ul> <li>Document review</li> <li>Informal conversations</li> <li>Interviews</li> <li>Financial projections</li> </ul>	• By 2025	Lead: Food Security Coordinator Support: Health Manager			





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Work in collaboration with the Stewardship Department to provide opportunities for Members to learn about traditional lands, waters, and territory	Have the Community Services Department collaborated with the Stewardship Department on opportunities for land-based learning?	Community Members of all ages are participating in, and satisfied with opportunities to learn about traditional lands, waters, and territory	Stewardship     Department personnel     Health staff     Knowledge holders     Elders     Registration and attendance data     Annual report	Document review     Informal conversations     Meetings     Collecting registration and attendance data	Ongoing	Lead: Food Security Coordinator Support: Health Manager Director, Community Services
Collaborate with the Language Coordinator, Elders, and knowledge holders to increase education and awareness relating to traditional foods by developing informational materials, and by organizing demonstrations, workshops, educational sessions, and storytelling sessions to showcase traditional food preparation, medicinal plant uses, and to educate on the nutritional value and cultural significance of traditional foods	Have food security and sovereignty education and awareness been established and promoted to Members?	Community Members of all ages are participating in, and satisfied with initiatives implemented	<ul> <li>Language Coordinator</li> <li>Knowledge holders</li> <li>Elders</li> <li>Tsartlip leadership</li> <li>Youth</li> <li>Registration and attendance data</li> </ul>	Informal conversations     Sharing circles     Registration and attendance data collection	By 2025     Evaluate annually	Lead: Food Security Coordinator Support: Community Cultural Liaison Health Manager Language Coordinator (where there is crossover with Language and Culture programs)
Organize and coordinate cooking classes, bake nights, and community dinners featuring traditional dishes to foster social cohesion	Have cooking classes, bake nights, and community dinners been organized and coordinated?	Community Members of all ages are participating in, and satisfied with culinary activities and programs	<ul> <li>Community Members</li> <li>Annual report</li> <li>Health staff</li> <li>Registration and attendance data</li> </ul>	Document review     Interviews or informal conversations     Sharing circles     Registration and attendance data collection	By 2025     Evaluate annually	Lead: Food Security Coordinator Support: Health Manager CYF Manager





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Enhance and sustain the Good Food Box program to include more traditional foods and educational materials	Has the Good Food Box program been enhanced?	Members are participating and reporting satisfaction in program	<ul> <li>Community Members</li> <li>Annual report</li> <li>Good Food Box inventory of products</li> <li>Registration data</li> </ul>	Document review     Informal conversations     Inventory data collection     Registration data collection	By 2026     Evaluate annually	Lead: Food Security Coordinator Support: Health Manager, CYF Manager
Build off the existing community garden program to grow fresh produce and medicinal plants	Has the community garden program been expanded?	Members are participating in, and satisfied with the garden program and with the access to garden harvests	<ul> <li>Current garden program participants</li> <li>Community Members</li> <li>Health staff</li> <li>Annual report</li> <li>Registration data</li> </ul>	Document review     Informal conversations     Registration data collection	By 2026     Evaluate annually	Lead: Food Security Coordinator Support: CYF Manager
Collaborate with other departments to develop a community kitchen and food pantry as a hub for sharing traditional foods and knowledge	Has a community kitchen and food pantry been established?	Community kitchen and pantry established     Members are participating, utilizing, and reporting satisfaction with the community kitchen and pantry hub	<ul> <li>Planning/ strategic documents</li> <li>Annual report</li> <li>Community Members</li> <li>Health staff</li> </ul>	<ul> <li>Interviews</li> <li>Sharing circles</li> <li>Informal conversations</li> <li>Document review</li> </ul>	By 2029     Evaluate annually	Lead: Food Security Coordinator Support: CYF Manager Heath Manager Community Services
Goal 7: Improve Elder wellbein	g by enhancing supports	within the community thro	ough comprehensive and c	ulturally appropriate	programs and	service
Establish an Elders Committee	Has an Elders     Committee been     established?	Elders Committee established	<ul><li>Health staff</li><li>Elders</li></ul>	Informal conversations     Emails	By 2025     Evaluate annually	Lead: Elders Coordinator Support: Health Manager





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Organize social gatherings and Elders Luncheons on a regular basis to foster a sense of community, combat social isolation, and promote cultural sharing and wellbeing among Elders	Are social gatherings been regularly organized for Elders?	Elders are participating in social events and expressing satisfaction with those offered	<ul><li>Health staff</li><li>Elders</li><li>Annual Report</li><li>Newsletter</li></ul>	<ul> <li>Informal conversations</li> <li>Sharing circles</li> <li>Document review</li> </ul>	By 2025     Evaluate annually	Lead: Elders Coordinator Support: Health Manager
Evaluate the medication prescribing process to identify existing barriers and strive to reduce existing barriers. This may involve working with community physicians	Has the medication prescribing process been evaluated, barriers been identified, and recommendations provided?	Community Members and Elders note an improvement in their access to prescribed medication	<ul> <li>Health staff</li> <li>Elders</li> <li>Current prescription policy and practice</li> </ul>	<ul> <li>Document review</li> <li>Informal conversations</li> <li>Sharing circles</li> <li>Emails</li> </ul>	Evaluate annually	Lead: Health Manager Support: Nurse Practitioner, Family Physician, Registered Nurse
Organize educational sessions to inform Elders about available health coverage and benefits. Ensure Elders are aware of the resources and programs they can access to maintain their health and wellbeing	Have educational sessions been organized for Elders regarding health benefits and coverage?	Elders are participating in educational sessions and report an improved understanding and awareness of health care coverage and benefits	Registration and attendance data     Health staff     Elders	<ul> <li>Registration and attendance data collection</li> <li>Informal conversations</li> </ul>	By 2025     Evaluate annually	Lead: Elders Coordinator Support: Health Manager
Provide more recreational opportunities for Elders, for example, offer Elders access to swim/fitness passes or wellness activities, promoting physical activity and supporting their overall health	Have more recreational opportunities been offered to Elders?	More Elders are participating in, and satisfied with recreational opportunities	<ul> <li>Health staff</li> <li>Elders</li> <li>Registration and attendance data</li> </ul>	<ul> <li>Informal conversations</li> <li>Registration and attendance data collection</li> </ul>	Ongoing     Evaluate     annually	Lead: Elders Coordinator Support: Health Manager Youth and Family Program Coordinator





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Identify and recognize knowledge holders within the community, ensuring they are honoured and provided with the necessary support and resources to pass down traditional teachings, customs, and cultural knowledge to younger generations	Have knowledge keepers been identified, honoured, and supported?	Number of knowledge holders reporting they are satisfied with the support and resources they receive to be able to share cultural knowledge with other Members	<ul> <li>Health staff</li> <li>Elders</li> <li>Knowledge holders</li> <li>Community members</li> <li>Tsartlip leadership</li> </ul>	<ul> <li>Informal conversations</li> <li>Community dinners and lunches</li> <li>Sharing circles</li> </ul>	Ongoing     Evaluate     annually	<b>Lead:</b> Elders Coordinator
Facilitate workshops focused on empowering and nurturing Elder leadership within the community. These workshops can include knowledge sharing, cultural teachings, and capacity building to ensure that Elders play a central role in decision-making and community leadership	Have workshops been facilitated to empower Elder leadership?	Elders are participating in and satisfied with workshops	<ul> <li>Health staff</li> <li>Elders</li> <li>Tsartlip leadership</li> <li>Registration and attendance data</li> </ul>	<ul> <li>Informal conversations</li> <li>Community dinners and lunches</li> <li>Sharing circles</li> <li>Registration and attendance data collection</li> </ul>	By 2025     Evaluate annually	Lead: Elders Coordinator Support: Health Manager
Develop and implement a holistic Elder support program that addresses the unique mental health and wellbeing needs of Elders in the community	Has an Elder support program been implemented?	Elders are participating in and satisfied with the program	<ul><li>Health staff</li><li>Elders</li></ul>	<ul> <li>Informal conversations</li> <li>Sharing circles</li> </ul>	By 2026     Evaluate annually	Lead: Elders Coordinator Support: Mental Health and Addictions Counsellor
Goal 8: Enhance and expand p	revention-based program	s and services to promote	holistic health and wellbei	ng within the commu	nity	
Increase the variety and frequency of health programming for all age groups to encourage physical activity, social engagement, and community cohesion	Have health     programs been     expanded to include     a wider age     spectrum?	Community Members of all ages are participating in, and satisfied with health programs and activities	<ul> <li>Health staff</li> <li>Community Members</li> <li>Elders</li> <li>Registration and attendance data</li> <li>Annual Report</li> <li>Newsletter</li> </ul>	Document review     Interviews     Informal conversations     Registration and attendance data collection	Evaluate annually	Lead: Health Manager, CYF Manager Support: All staff





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Organize educational sessions and workshops for all covering various topics such as healthy lifestyles, fitness, parenting, and life skills	Have educational sessions and workshops been organized for healthy lifestyles, fitness, parenting and life skills?	Members are attending sessions and reporting satisfaction in educational topics	<ul> <li>Health staff</li> <li>Community Members</li> <li>Elders</li> <li>Registration and attendance data</li> <li>Annual Report</li> <li>Newsletter</li> </ul>	Document review     Informal conversations     Registration and attendance data collection	By 2025     Evaluate annually	Lead: Health Manager, CYF Manager Support: Employment Training Coordinator CYF Manager Community Health Nurse
Coordinate transportation services to facilitate patient travel for medical appointments and for transportation beyond patient care, ensuring community Members have access to essential services and opportunities	Have transportation services been coordinated to facilitate patient travel?	Members are using transportation services and are satisfied with them	<ul> <li>Community Members</li> <li>Health Staff Ridership data</li> <li>Annual report</li> </ul>	Informal conversations     Document and record review	By 2025     Evaluate annually	Lead: Elders Coordinator Support: Health Manager Community Health Nurse
Enhance early childhood support programs such as the Brighter Futures Program, daycare, and Child, Youth, and Family Centre services to provide a strong foundation for the health development of young children	Have early childhood support programs been enhanced?	Increased number of children enrolled in early childhood support programs and services and parents and guardians report satisfaction with early childhood supports	<ul> <li>Health staff</li> <li>Community Members</li> <li>Program records</li> <li>Annual report</li> <li>Registration and participation data</li> </ul>	Document review     Informal conversations     Registration and participation data collection	By 2025     Evaluate annually	Lead: CYF Manager Support: Maternal Child Health Coordinator Maternal Child Health Assistant
Explore daycare centre options	Have daycare centre options been explored and feasibility options identified?	Feasibility study complete	<ul> <li>Health staff</li> <li>Tsartlip families</li> <li>Current childcare records/ options</li> <li>Annual report</li> </ul>	Document and record review     Informal conversations     Sharing circles	• By 2025	Lead: Director, Community Services Support: CYF Manager



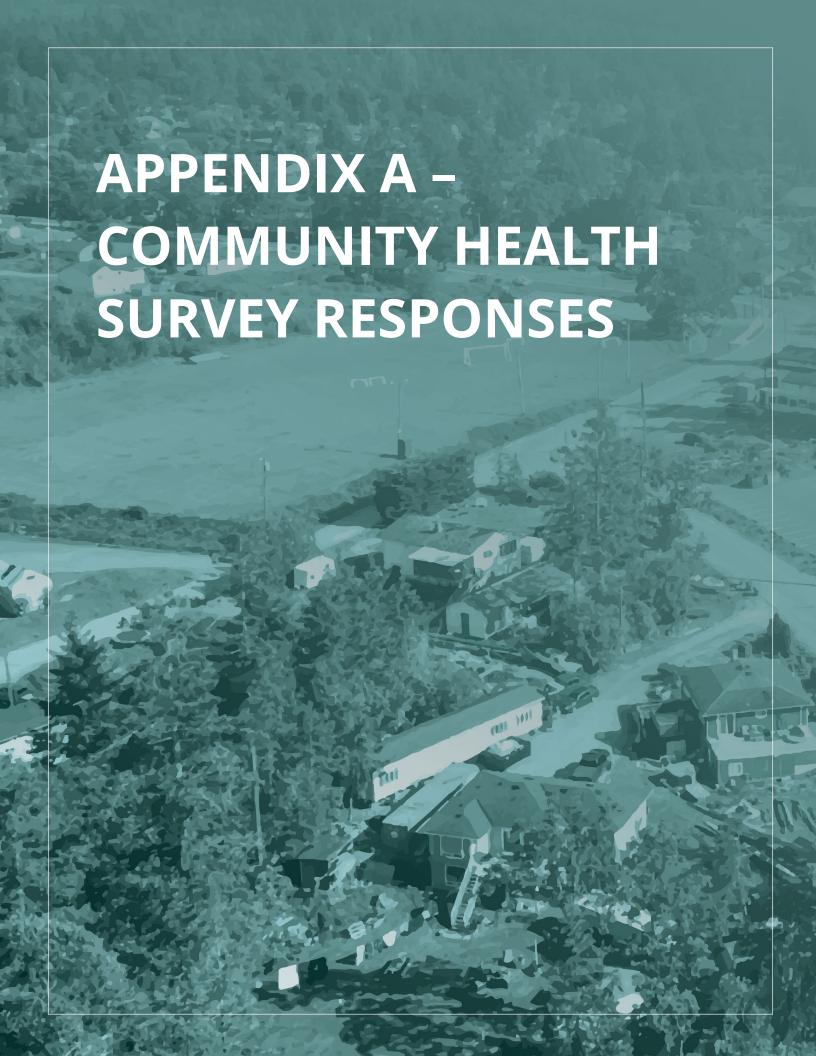


Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Incorporate further prevention- based education into nursing roles and responsibilities to support community Members in adopting healthy lifestyles, addressing health challenges, and achieving their wellbeing goals	Have prevention- based education been incorporated into nursing roles and responsibilities?	Member satisfaction with nursing services     Members understand how preventative care can improve their overall wellness	<ul><li>Health staff</li><li>Nurses</li><li>Tsartlip Members</li><li>Annual report</li></ul>	<ul> <li>Document review</li> <li>Informal conversations</li> <li>Sharing circles</li> </ul>	By 2026     Evaluate annually	Lead: Community Health Nurse Support: Health Manager
Strengthen family outreach support services to assist families in accessing essential resources, counseling, and educational programs that promote positive parenting, life skills, and overall family wellbeing	Have family outreach support services been strengthened to assist families?	Tsartlip families report improved overall family wellbeing and are satisfied with the outreach support services programs and services	<ul> <li>Health staff</li> <li>Tsartlip families</li> <li>Tsartlip Members</li> <li>Annual report</li> <li>Registration and participation data</li> </ul>	<ul> <li>Document review</li> <li>Informal conversations</li> <li>Sharing circles</li> <li>Registration and participation data collection</li> </ul>	By 2026     Evaluate annually	Lead: CYF Manager Support: Youth and Family Program Coordinator, Mental Health and Addictions Counsellor
Develop a comprehensive diabetes education program to increase awareness, provide self-management skills, and support individuals in managing diabetes effectively	Has a comprehensive diabetes education program been developed?	Improved Member knowledge and awareness about diabetes and notable improvement in individuals' diabetes self-management skills and adherence to treatment plans	<ul> <li>Health staff</li> <li>Nurses</li> <li>Tsartlip Members</li> <li>Annual report</li> <li>Health records/ clinic visitation records</li> </ul>	<ul> <li>Document review</li> <li>Informal conversations</li> <li>Record review</li> </ul>	By 2026     Evaluate annually	Lead: Community Health Nurse Support: Health Manager
Explore opportunities for expanding the current Tsartlip Health Centre	Have opportunities been explored for expanding the Tsartlip Health Centre?	CHRT 41 application approved     Feasibility studies complete for expanding the Health Centre	<ul> <li>Tsartlip Leadership</li> <li>Health staff</li> <li>Tsartlip Members</li> <li>Annual report</li> <li>CHRT 41 application</li> <li>Financial records</li> </ul>	Informal conversations     Emails/ Meetings     Document review     Financial projections	• By 2029	Lead: Director, Community Services Support: Band Administrator Health Manager Capital Projects Director





Actions (What do we need to do?)	Evaluation Question (What do you need to know?)	Indicators (What does success look like?)	Sources (What and who will be the sources of this information?)	Methods (How will information be collected?)	Timing (When will information be collected?)	Lead (Who will be responsible?)
Purchase a vehicle for medical transportation services and recruit a designated medical/ medication transportation driver	Has a vehicle for medical transportation services been purchased?      Has a designated medical/ medication transportation driver been recruited?	Vehicle purchased     Driver recruited	<ul> <li>Tsartlip Leadership</li> <li>Finance Department</li> <li>Annual Report</li> <li>Financial records</li> </ul>	<ul> <li>Interviews</li> <li>Document review</li> <li>Record review</li> <li>Meetings</li> <li>Informal conversations</li> <li>Financial projections</li> </ul>	• By 2026	<b>Lead:</b> Health Manager
Coordinate transportation services to facilitate patient travel for medical appointments and for transportation beyond patient care, ensuring community Members have access to essential services and opportunities	Have transportation services been coordinated to facilitate patient travel?	Members are using transportation services and are satisfied with them	<ul><li>Ridership data</li><li>Community Members</li><li>Health Staff</li><li>Annual report</li></ul>	Document review     Record review     Informal conversations	By 2027     Evaluate annually	Lead: Elders Coordinator Support: Health Manager
Create a dedicated space that serves as a holistic health and wellness hub, offering services and programs tailored to the needs of all Tsartlip Members. This hub can include recreation facilities, a library, workshops, a community kitchen and pantry, and spaces for cultural advisors to provide guidance	Has a dedicated holistic health and wellness hub been created?	A dedicated holistic health and wellness hub has been established and there is notable participation and visitation by Tsartlip members	<ul> <li>Tsartlip Leadership</li> <li>Health staff</li> <li>Tsartlip Members</li> <li>Annual report</li> <li>CHRT 41 application</li> <li>Financial records</li> </ul>	<ul> <li>Informal conversations</li> <li>Emails</li> <li>Document review</li> <li>Financial projections</li> <li>Meetings</li> </ul>	• By 2029	Lead: Director, Community Services Support: CYF Manager, Health Manager, Band Administrator, Capital Projects Director
Recruit a sports coach(es) to mentor and train individuals of all ages, fostering athletic skills, teamwork, and community involvement through sports activities	Has a sports coach been recruited?	Sports coach has been recruited and Members are participating in sports	<ul> <li>Employment records</li> <li>Tsartlip Members</li> </ul>	<ul><li>Record review</li><li>Interviews</li><li>Informal conversations</li></ul>	• By 2029	Lead: CYF Manager Support: Youth and Family Program Coordinator



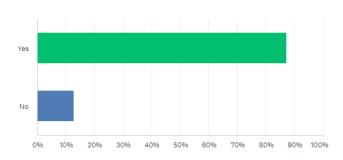


# COMMUNITY HEALTH SURVEY RESPONSES – TSARTLIP FIRST NATION HEALTH AND WELLNESS PLAN

The following graphs present the responses of community members, both on- and off-reserve, to questions in the survey. The graphs are arranged in ascending order from question two to question thirty-five. It is important to note that the initial question in the survey was **optional** and requested participants to provide their contact information for a prize draw. For privacy reasons, the responses containing contact information have been excluded from this section.

#### Are you a member of Tsartlip First Nation?



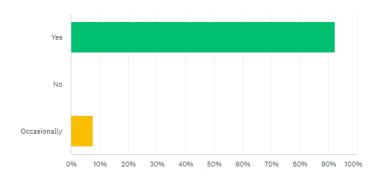


ANSWER CHOICES	RESPONSES	•
▼ Yes	87.18%	34
▼ No	12.82%	5
TOTAL		39



### Do you live on Tsartlip First Nation reserve lands?

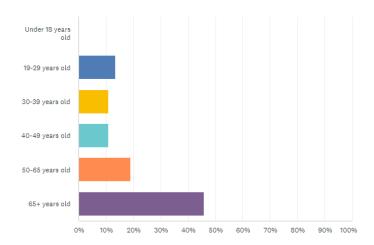
Answered: 39 Skipped: 0



ANSWER CHOICES	▼ RESPONSES	▼
▼ Yes	92.31%	36
▼ No	0.00%	0
▼ Occasionally	7.69%	3
TOTAL		39

### What age group are you in?

Answered: 37 Skipped: 2

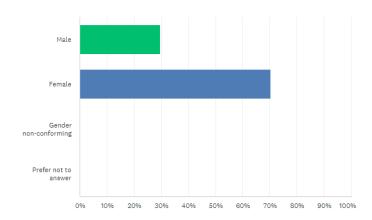


ANSWER CHOICES	▼ RESPONSES	•
▼ Under 18 years old	0.00%	0
▼ 19-29 years old	13.51%	5
▼ 30-39 years old	10.81%	4
▼ 40-49 years old	10.81%	4
▼ 50-65 years old	18.92%	7
▼ 65+ years old	45.95%	17
TOTAL		37



### What gender do you identify with?

Answered: 37 Skipped: 2

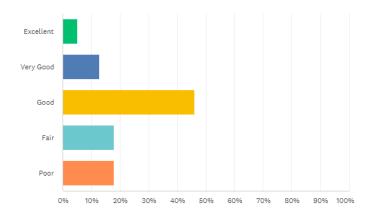


ANSWER CHOICES	▼ RESPONSES	•
▼ Male	29.73%	11
▼ Female	70.27%	26
▼ Gender non-conforming	0.00%	0
▼ Prefer not to answer	0.00%	0
TOTAL		37



### In general, would you say your health is:

Answered: 39 Skipped: 0

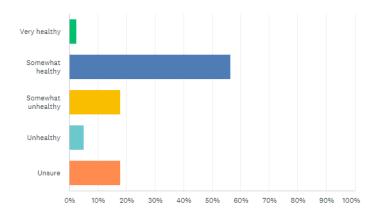


ANSWER CHOICES	▼ RESPONSES	•
▼ Excellent	5.13%	2
▼ Very Good	12.82%	5
▼ Good	46.15%	18
▼ Fair	17.95%	7
▼ Poor	17.95%	7
TOTAL		39



### Overall, how healthy do you think your community is?

Answered: 39 Skipped: 0

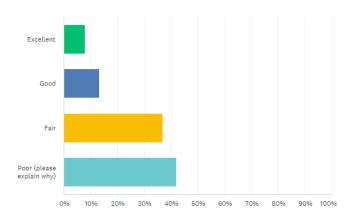


ANSWER CHOICES	▼ RESPONSES	•
▼ Very healthy	2.56%	1
▼ Somewhat healthy	56.41%	22
▼ Somewhat unhealthy	17.95%	7
▼ Unhealthy	5.13%	2
▼ Unsure	17.95%	7
TOTAL		39



### Overall, how would you rate health care services for Tsartlip members?

Answered: 38 Skipped: 1

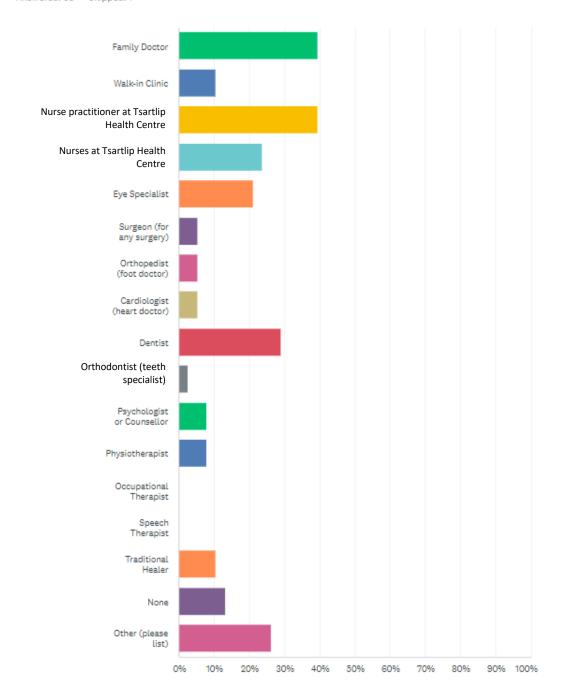


ANSWER CHOICES	~	RESPONSES	•
▼ Excellent		7.89%	3
▼ Good		13.16%	5
▼ Fair		36.84%	14
▼ Poor (please explain why)	Responses	42.11%	16
TOTAL			38



# In the past 12 months, have you visited or talked to the following health professionals about your health? (check all that apply)

Answered: 38 Skipped: 1

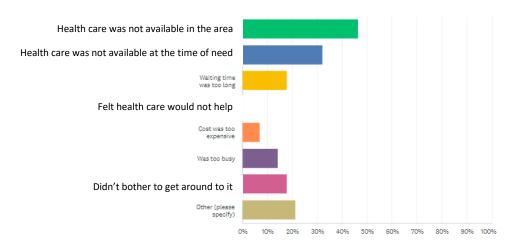




ANSWER CHOICES	RESPONSES	•
▼ Family Doctor	39.47%	15
▼ Walk-in Clinic	10.53%	4
▼ Nurse practitioner at Tsartlip Health Centre	39.47%	15
▼ Nurses at Tsartlip Health Centre	23.68%	9
▼ Eye Specialist	21.05%	8
▼ Surgeon (for any surgery)	5.26%	2
▼ Orthopedist (foot doctor)	5.26%	2
▼ Cardiologist (heart doctor)	5.26%	2
▼ Dentist	28.95%	11
▼ Orthodontist (teeth specialist)	2.63%	1
▼ Psychologist or Counsellor	7.89%	3
▼ Physiotherapist	7.89%	3
▼ Occupational Therapist	0.00%	0
▼ Speech Therapist	0.00%	0
▼ Traditional Healer	10.53%	4
▼ None	13.16%	5
▼ Other (please list) Responses	26.32%	10
Total Respondents: 38		

In the past 12 months during a time where you felt you needed health care but did not get it, what was the reason(s)? (check all that apply)



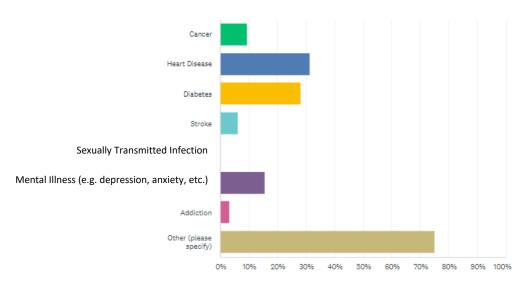


ANSWER CHOICES	•	RESPONSES	•
▼ Health care was not available in the area		46.43%	13
▼ Health care was not available at the time needed (doctor on holidays, inconvenient hours)		32.14%	9
▼ Waiting time was too long		17.86%	5
▼ Felt health care would not help		0.00%	0
▼ Cost was too expensive		7.14%	2
▼ Was too busy		14.29%	4
▼ Didn't bother or get around to it		17.86%	5
▼ Other (please specify) Res	ponses	21.43%	6
Total Respondents: 28			



# Which of the following illnesses or health conditions/concerns do you currently have or have had in the past? (check all that apply)



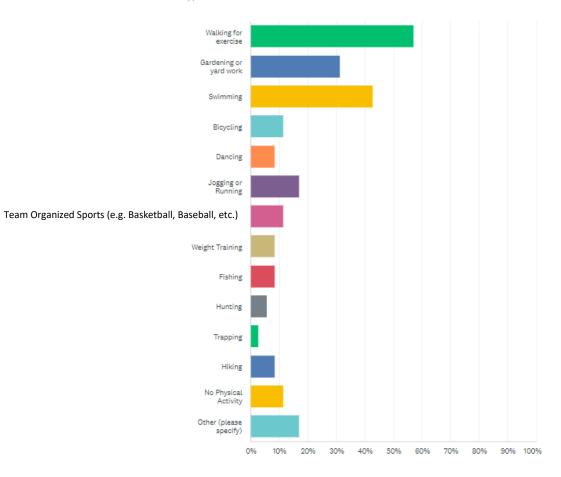


ANSWER CHOICES	▼ RESPONS	ES 🔻
▼ Cancer	9.38%	3
▼ Heart Disease	31.25%	10
▼ Diabetes	28.13%	9
▼ Stroke	6.25%	2
▼ Sexually Transmitted Infection	0.00%	0
▼ Mental Illness (e.g. depression, anxiety, bipolar disorder, etc.)	15.63%	5
▼ Addiction	3.13%	1
▼ Other (please specify) Respons	es 75.00%	24
Total Respondents: 32		



Have you done any of the following physical activities at least one in the past 3 months? (check all that apply?)



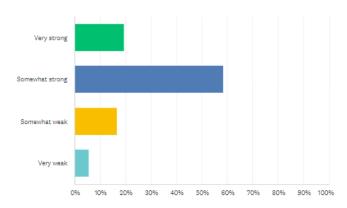


ANSWER CHOICES ▼	RESPONSES	•
▼ Walking for exercise	57.14%	20
▼ Gardening or yard work	31.43%	11
▼ Swimming	42.86%	15
▼ Bicycling	11.43%	4
▼ Dancing	8.57%	3
▼ Jogging or Running	17.14%	6
▼ Team/Organized Sports (e.g. Basketball, Baseball, Hockey, Tennis, Soccer, etc.)	11.43%	4
▼ Weight Training	8.57%	3
▼ Fishing	8.57%	3
▼ Hunting	5.71%	2
▼ Trapping	2.86%	1
▼ Hiking	8.57%	3
▼ No Physical Activity	11.43%	4
▼ Other (please specify) Responses	17.14%	6
Total Respondents: 35		



### How would you describe your sense of belonging in our community?

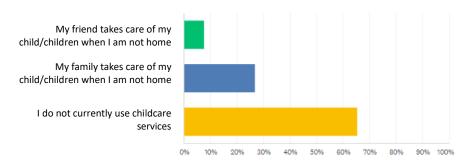
Answered: 36 Skipped: 3



ANSWER CHOICES	▼ RESPONSES	~
▼ Very strong	19.44%	7
▼ Somewhat strong	58.33%	21
▼ Somewhat weak	16.67%	6
▼ Very weak	5.56%	2
TOTAL		36

If you are a parent or guardian to a young child/children, what type of childcare services are you using?

Answered: 26 Skipped: 13



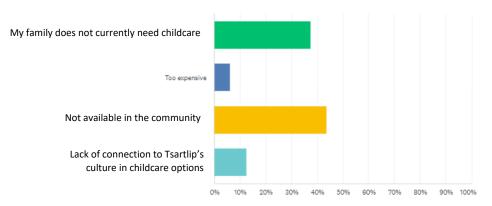
ANSWER CHOICES	RESPONSES	•
▼ My friend takes care of my child/children when I am not home	7.69%	2
▼ My family takes care of my child/children when I am not home	26.92%	7
▼ I do not currently use childcare services	65.38%	17
TOTAL		26

Comments (1)



### If you are currently not accessing childcare services, why not?

Answered: 16 Skipped: 23

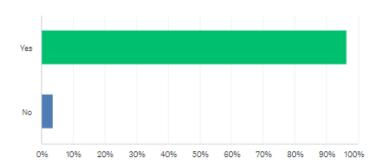


ANSWER CHOICES	•	RESPONSES	•
▼ My family does not currently need childcare		37.50%	6
▼ Too expensive		6.25%	1
▼ Not available in the community		43.75%	7
▼ Lack of connection to Tsartlip's culture in childcare options		12.50%	2
TOTAL			16

Comments (6)

# Do you think there should be a permanent childcare facility for Tsartlip families in the community?

Answered: 28 Skipped: 11

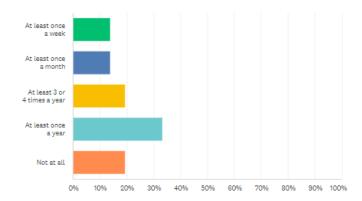


ANSWER CHOICES	RESPONSES	•
▼ Yes	96.43%	27
▼ No	3.57%	1
TOTAL		28



### How often have you participated in community meetings or activities in the past 12 months?

Answered: 36 Skipped: 3

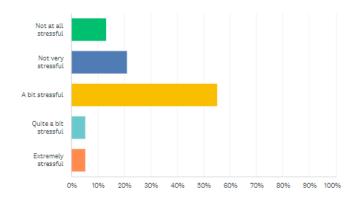


ANSWER CHOICES	•	RESPONSES	•
▼ At least once a week		13.89%	5
▼ At least once a month		13.89%	5
▼ At least 3 or 4 times a year		19.44%	7
→ At least once a year		33.33%	12
▼ Not at all		19.44%	7
TOTAL			36



Thinking about the amount of stress in your life, would you say that most days are:

Answered: 38 Skipped: 1

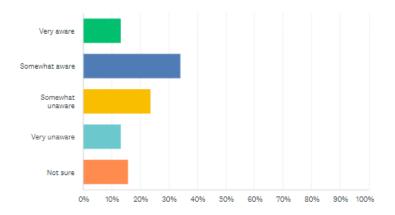


ANSWER CHOICES	▼ RESPONSES	•
▼ Not at all stressful	13.16%	5
▼ Not very stressful	21.05%	8
▼ A bit stressful	55.26%	21
▼ Quite a bit stressful	5.26%	2
▼ Extremely stressful	5.26%	2
TOTAL		38



How aware do you think the Tsartlip community is about mental illness and mental health? (For example: depression, social anxiety disorder, bipolar disorder, eating disorders)

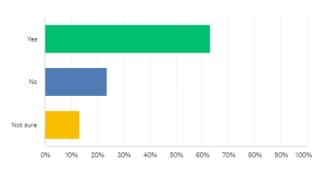
Answered: 38 Skipped: 1



ANSWER CHOICES	▼ RESPONSES	*
▼ Very aware	13.16%	5
▼ Somewhat aware	34.21%	13
▼ Somewhat unaware	23.68%	9
▼ Very unaware	13.16%	5
▼ Not sure	15.79%	6
TOTAL		38

Are you or any close family members affected by any mental health challenges in your life? (e.g. anxiety, depression, bipolar disorder, etc.)

Answered: 38 Skipped: 1



ANSWER CHOICES	▼ RESPONSES	•
▼ Yes	63.16%	24
▼ No	23.68%	9
▼ Not sure	13.16%	Б
TOTAL		38



Using a scale of 1 to 10 (1 meaning "Very disconnected" and 10 meaning "Very connected"), how do you feel about your connection with your culture? (Circle the number or the line in between two numbers that is closest to how you feel).

Answered: 35 Skipped: 4

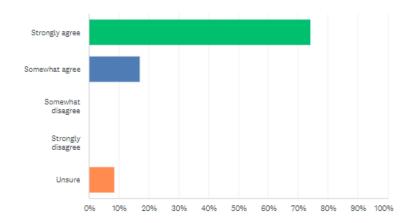


ANSWER CHOICES	-	AVERAGE NUMBER	•	TOTAL NUMBER	•	RESPONSES	•
	Responses		7		261		35
Total Respondents: 35							



Does participating in traditional and cultural activities have a positive impact on your health? (e.g. speaking traditional language, singing, drumming, hunting, trapping, dancing, feasting and other activities)

Answered: 35 Skipped: 4

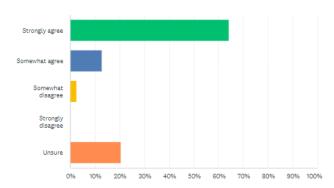


ANSWER CHOICES	▼ RESPONSES	•
▼ Strongly agree	74.29%	26
→ Somewhat agree	17.14%	6
▼ Somewhat disagree	0.00%	0
▼ Strongly disagree	0.00%	0
▼ Unsure	8.57%	3
TOTAL		35



Does better access to traditional healing and medicines have a positive impact on your health? (e.g. plant medicines, traditional teas, etc.)

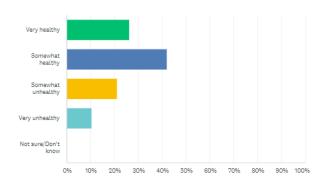
Answered: 39 Skipped: 0



ANSWER CHOICES	▼ RESPONSES	~
▼ Strongly agree	64.10%	25
▼ Somewhat agree	12.82%	5
▼ Somewhat disagree	2.56%	1
▼ Strongly disagree	0.00%	0
▼ Unsure	20.51%	8
TOTAL		39

How healthy do you feel your home environment is? (e.g. mold, bad water, poor heat, mice and other pests)

Answered: 38 Skipped: 1



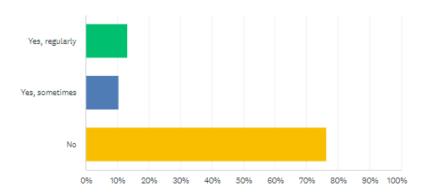
ANSWER CHOICES	▼ RESPONSES	•
▼ Very healthy	26.32%	10
▼ Somewhat healthy	42.11%	16
▼ Somewhat unhealthy	21.05%	8
▼ Very unhealthy	10.53%	4
▼ Not sure/Don't know	0.00%	0
TOTAL		38

Comments (10)



### Do you smoke cigarettes?

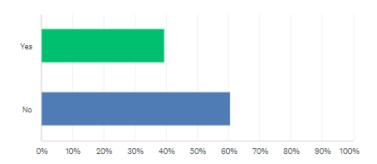
Answered: 38 Skipped: 1



ANSWER CHOICES	RESPONSES	•
▼ Yes, regularly	13.16%	5
▼ Yes, sometimes	10.53%	4
▼ No	76.32%	29
TOTAL		38

### Have you experienced an addiction with alcohol?

Answered: 38 Skipped: 1

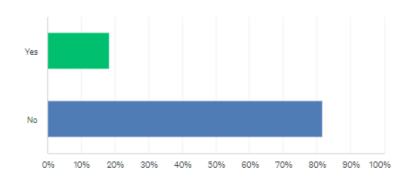


ANSWER CHOICES ▼	RESPONSES	•
▼ Yes	39.47%	15
▼ No	60.53%	23
TOTAL		38



### Have you experienced an addition with gambling?

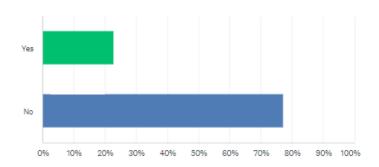
Answered: 38 Skipped: 1



ANSWER CHOICES ▼	RESPONSES	•
▼ Yes	18.42%	7
▼ No	81.58%	31
TOTAL		38

### Have you experienced an addiction with drugs?

Answered: 35 Skipped: 4

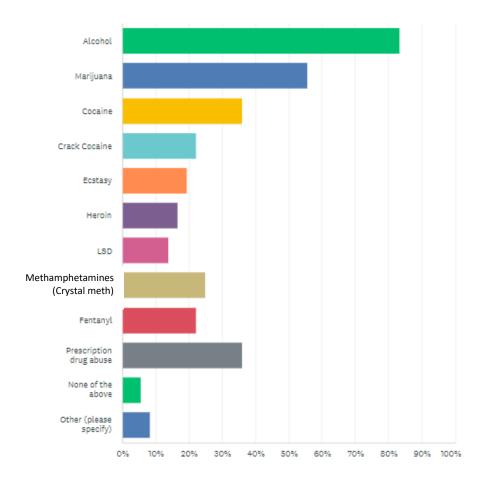


ANSWER CHOICES	RESPONSES	•
▼ Yes	22.86%	8
₩ No	77.14%	27
TOTAL		35



### Which type(s) of substance abuse concerns you the most in your community? (Please check all that apply)

Answered: 36 Skipped: 3

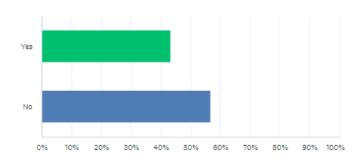


ANSWER CHOICES	•	RESPONSES	~
▼ Alcohol		83.33%	30
▼ Marijuana		55.56%	20
▼ Cocaine		36.11%	13
▼ Crack Cocaine		22.22%	8
▼ Ecstasy		19.44%	7
▼ Heroin		16.67%	6
▼ LSD		13.89%	5
▼ Methamphetamines (Crystal Meth)		25.00%	9
▼ Fentanyl		22.22%	8
▼ Prescription drug abuse		36.11%	13
▼ None of the above		5.56%	2
▼ Other (please specify)	Responses	8.33%	3
Total Respondents: 36			



### Have you ever been in an abusive relationship?

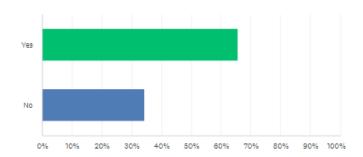
Answered: 37 Skipped: 2



ANSWER CHOICES	•	RESPONSES	•
▼ Yes		43.24%	16
▼ No		56.76%	21
TOTAL			37

## Do you know somebody in your family that has been in an abusive relationship?

Answered: 35 Skipped: 4

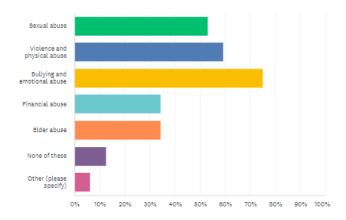


ANSWER CHOICES   •	RESPONSES	•
▼ Yes	65.71%	23
▼ No	34.29%	12
TOTAL		35



### Which type of abuse concerns you the most in your community? (Please check all that apply)

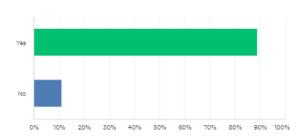
Answered: 32 Skipped: 7



ANSWER CHOICES	•	RESPONSES	*
▼ Sexual abuse		53.13%	17
▼ Violence and physical abuse		59.38%	19
▼ Bullying and emotional abuse		75.00%	24
▼ Financial abuse		34.38%	11
▼ Elder abuse		34.38%	11
▼ None of these		12.50%	4
▼ Other (please specify)	Responses	6.25%	2
Total Respondents: 32			

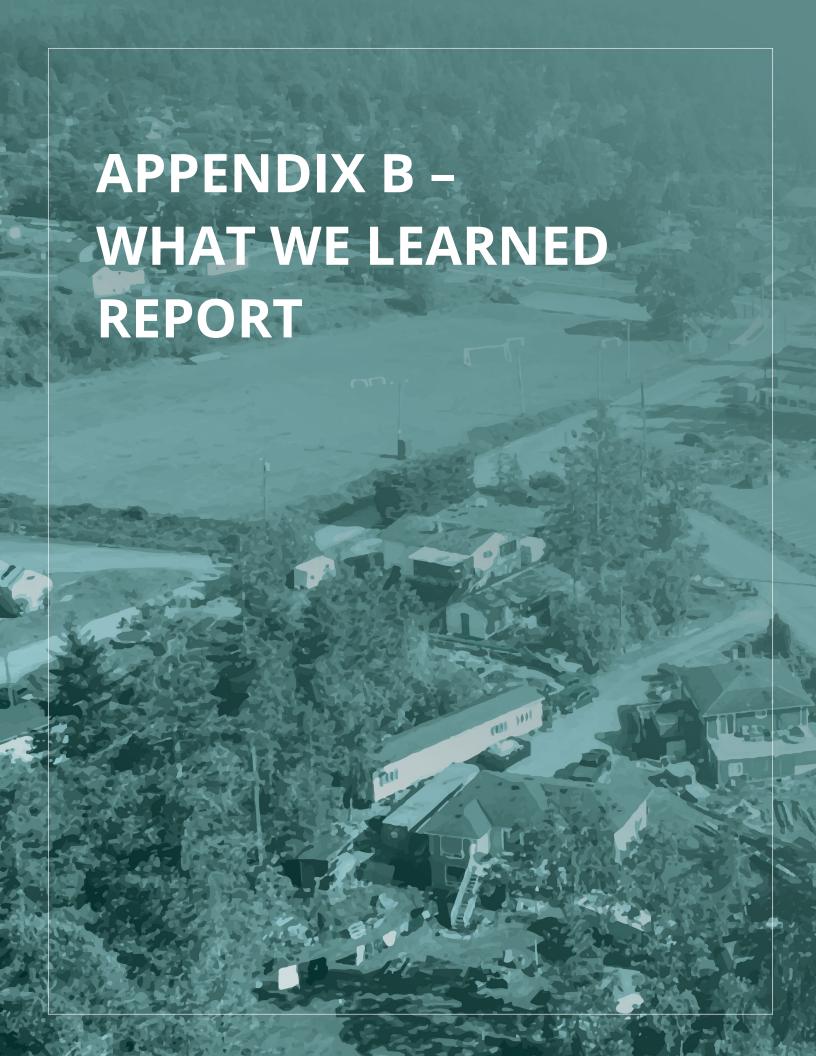
### Do you feel safe in your home and in your community?

Answered: 36 Skipped: 3



ANSWER CHOICES ▼	RESPONSES	•
▼ Yes	88.89%	32
▼ No	11.11%	4
TOTAL		36

Comments (5)





# WHAT WE LEARNED REPORT – TSARTLIP FIRST NATION HEALTH AND WELLNESS PLAN

### 1.0 INTRODUCTION

Tsartlip First Nation was provided funding from First Nations Health Authority (FNHA) in 2022 to develop a Five-Year Health and Wellness Plan. Health and Wellness planning is a comprehensive process that strives to provide a community with an opportunity to reflect upon and understand past and current health conditions, along with determining a strategic pathway forward that links community values, culture, and traditions to enhance the community's overall health and well-being.

The health planning process for this project has been guided by the FNHA Health and Wellness Toolkit for BC First Nations. Input guiding the planning process was largely influenced by the direction of Tsartlip Elders, community members and Health Centre Staff. In collaboration with Tsartlip Nation Health Staff, the following key outcomes were proposed for Tsartlip's Community Health and Wellness Plan:

- Gain a more fulsome understanding of community health and wellness opportunities, challenges, assets, and needs
- Develop community-led visions, goals, and action-oriented objectives
- Strive to meet the health and wellness needs of all members

This What We Learned Report is a key building block to the larger Health and Wellness Plan. It summarizes the engagement undertaken in the health planning process and identifies outcomes and responses provided by the community.

### **About this Report**

This "What We Learned" report summarizes the engagement activities that were held in May and June of 2023. These engagements were facilitated by Urban Systems with guidance and support from Tsartlip First Nation staff.

The author of this report acknowledges and respects that this work took place on the traditional territory of the WSÁNEĆ People, who have lived on these lands since time immemorial.



### **Engagement Objectives**

Engagement with community members is the foundation of developing a Health and Wellness plan. Engagement is also a key part of meeting the 7 Directives for Health and Wellness, as outlined by the <u>FNHA Health and Wellness Planning Toolkit for BC First Nations</u>. Specifically, engagement ensures that a community's Health and Wellness Plan:

- Is Community-driven and Nation-based
- Increases First Nations Decision-Making and Control
- Fosters Meaningful Collaboration and Partnerships
- Is Without Prejudice to First Nations Interests

The objectives of conducting engagement activities with Tsartlip members was to gather community input to inform current health and wellness assets and needs. Further, the aim is to then use this knowledge to guide the development of the Community Health and Wellness Plan which promotes strategies that maintain and enhance health and wellness assets in a community driven manner to respond to the health and wellness needs and challenges of the community.

Question content included in the survey was different from content guiding the community workshop and focus groups. The specific purpose of the survey was to create a community health profile; a means of understanding current individual and community health. Question content used to guide the community workshop and focus groups was designed to more specifically provide the community with opportunities to inform key components of the Health and Wellness Plan.

### **Summary of Engagement Activities**

The following page highlights engagement opportunities held during this project's timeline. Based on the recommendation of Tsartlip staff, and to reach as many community members as possible, activities were promoted at the Tsartlip Health Centre and Administration Building, and through the community's monthly newsletters, social media posts, and word of mouth from staff members and Elders. Descriptions of all activities are detailed later in this report in **Appendix A**.



### **COMMUNITY FOCUS GROUPS**



Focus group conversations occurred throughout May and June 2023 to better understand health and wellness in the community across different demographics and service delivery. Approximately **twenty-four** (24) community members living on and off reserve were engaged through the following groups:

- Elder's Lunch
- Tsartlip First Nation Council

### **NEEDS ASSESSMENT SURVEY**



A survey (hard-copy and digital) was circulated to Tsartlip community members between May and June 2023. The survey asked participants about their current wellness, the frequency in which participants access health programs and services, and members experiences and perception of health in the community. A draw prize was offered to encourage participation.

A total of **thirty-nine** (39) survey responses were submitted to the project team.

### **STAFF WORKSHOP**



A Tsartlip Staff Workshop was held to gain insights from staff that could inform the Community Health and Wellness Plan.

The workshop was held on June 6<sup>th</sup>, 2023 from 9:30am – 11:00am. Discussions focused on opportunities to integrate more traditional language in the health department, improve workplace safety, and improve staff training and understanding of culture. **Ten** (10) staff members attended and participated in the workshop.

### **COMMUNITY DINNER**



A community dinner was hosted on Friday, June 16<sup>th</sup> 2023 from 5:00pm to 7:00pm at the Tsartlip Health Building.

**Thirty-two** (32) community members attended the community dinner.

The community dinner invited all members to share a meal, play bingo, fill out the health and wellness plan survey and share their input on health and wellness in the community. Door prizes were offered.



### 1.1 What We Learned - Key Engagement Themes

The project team learned from Tsartlip First Nation on several topics related to community health and wellness. The main themes from these conversations are described in the tables on the following pages. What we heard from community members is divided into:

- What we learned from the survey
- What we learned from the focus groups and the community dinner

Accordingly, this section will be divided into what was learned in the survey, and what was learned from the community dinner and focus groups.

### 1.1.1 What We Learned from the Survey

The community survey consisted of 34 questions.

- 36 community members filled out the Community Health Survey
  - o 36 community members living on-reserve
  - o 3 community members who indicated either living off-reserve or being transient

Due to certain limitations of these data, the most reliable data is that which includes all members. Limitations to consider include that:

- Not all survey respondents answered all questions
- Widely divergent sample sizes between on-reserve and off-reserve means the two cannot reliably be compared. Off-reserve member survey results are taken into consideration but presented anecdotally due to the widely varied survey population sample sizes.
- Engagement activities may have attracted certain demographics or groups disproportionately. For example, more women filled out the survey than men as well as more people over the age of 65.

The primary survey findings presented immediately below consider both on-reserve members and off-reserve members. While the most reliable results are those based on data collected for all Tsartlip members, where considered notable, off-reserve findings are provided for comparison. Graphs presented in **Appendix B** include a full breakdown of answers by the percentage of participants who selected various categories. These graphs are representative of answers for all members.



In summary, survey results indicate the following:

# 1. SURVEY RESPONDENTS WERE MAJORITY WOMEN, WERE ABOVE THE AGE OF 65, AND MAINLY RESIDE IN TSARTLIP FIRST NATION.

70% of survey respondents were women, making up the majority. 30% of respondents in the survey identified as men. Approximately 92% of participants indicated living on Tsartlip First Nation reserve land, and 8% indicated living occasionally on reserve land. Members of the community who filled out the survey were relatively older, with a large portion of the respondents above 65 years old (46%), however, 25% of respondents were below the age of 40.

#### 2. OVERALL PERCEPTIONS OF COMMUNITY HEALTH ARE MIXED.

Most members indicated they believed their own health to be either "good" (46%)," fair" (18%), or "poor" (18%). When asked how healthy members think their community is, the majority of community members reported an overall positive perception of community health (59%). Most members indicated they think their community is "somewhat healthy" (56%), and only 3% of members think their community is "very healthy". 23% of all members reported negatively on community health, and 18% were unsure of how they felt about community health.

## 3. AVAILABILITY, QUALITY, AND ACCESS TO TSARTLIP HEALTH CARE SERVICES WERE CONSIDERED MOSTLY NEGATIVE.

Most members rated the availability and quality of health care services for Tsartlip members as either "poor" (42%) or "fair" (37%). Only 8% of members reported having "excellent" availability and quality of health care and 13% responded with "good". For community members that responded with the availability and quality of health care services being "poor", a large portion of responses mentioned that there is very limited access to health practitioners, including doctors and nurses, as well as little to no communication between health staff and community members.

# 4. MOST VISITS FOR HEALTH CARE ARE TO EITHER A FAMILY DOCTOR, TSARTLIP NURSE PRACTITIONER, NURSE, OR DENTAL HYGIENIST.

In the last 12 months, most members have visited or talked to a family doctor (40%), a nurse at Tsartlip Health Centre (63%), or a dentist (29%). Other kinds of health professionals that community members have accessed over the past 12 months include pharmacists, traditional healers, and eye specialists.

# 5. MEMBERS THAT CHOSE NOT TO ACCESS HEALTH SERVICES DID SO BECAUSE HEALTH CARE WAS NOT AVAILABLE IN THE AREA, WAIT TIMES WERE TOO LONG, OR THE HEALTH CARE SERVICES NEEDED WERE NOT AVAILABLE AT THE TIME OF NEED.

For members who felt they needed health care treatment, but did not receive it, the top three reasons for not seeking treatment include: health care not being available in the area (46%), health



care not being available at the time it was needed (32%), wait times being too long (18%), and being too busy.

# 6. ARTHRITIS, DIABETES, AND HEART DISEASE ARE THE GREATEST HEALTH CONCERNS FOR MEMBERS.

For both on-reserve and off-reserve community members, the top 3 health illnesses/ conditions/ concerns individuals are dealing with either currently or in the past are arthritis (38%), heart disease (31%), or diabetes (28%).

# 7. MANY MEMBERS ARE PHYSICALLY ACTIVE AND THE MOST POPULAR ACTIVITIES ARE WALKING, SWIMMING, GARDENING, AND JOGGING.

89% of members who participated in the survey expressed having performed physical activity at least once in the past 3 months. Most members reported that they stay physically active by walking, swimming, gardening, and jogging.

#### 8. MOST MEMBERS FEEL A SENSE OF BELONGING TO THEIR COMMUNITY.

When it comes to community belonging for Tsartlip members, 58% of members reported positively, as having either very strong or somewhat strong sense of belonging in their community. 17% reported a somewhat weak sense of belonging and only 6% reported having a very weak sense of belonging.

# 9. THE MAJORITY OF MEMBERS DO NOT CURRENTLY USE CHILDCARE SERVICES, BUT MOST MEMBER THINK THERE SHOULD BE A PERMANENT CHILDCARE FACILITY FOR TSARTLIP FAMILIES IN THE COMMUNITY.

The majority of community members responded that they do not currently use childcare services (65%). The reason as to why they did not was mostly because their family did not need childcare (37%), or those services were not available in the community (44%). For those that did access childcare services, either their family (27%) or their friends (8%) were their primary source of childcare.

96% of respondents felt that there should be a permanent childcare facility for Tsartlip families in the community.

# 10. MOST MEMBERS PARTICIPATE IN COMMUNITY MEETINGS OR ACTIVITIES AT LEAST ONCE A YEAR.

33% of all members reported participating in community meetings or activities at least once a year, 19% 3 or 4 times a year, 14% participated at least once a week, and 14% participated once a month.. 20% stated they never participate. For members that responded that they participated once a year,



the primary reason was that there are very little community meeting opportunities for people to gather and attend.

#### 11. MENTAL HEALTH FOR MEMBERS IS POOR.

Stress levels are relatively diverse for Tsartlip members. 55% of members experience a life that is "a bit stressful and 10% say their life is "very or extremely stressful". 21% of respondents mentioned that their life is "not very stressful" and 13% respondent that there life is "not at all stressful".

When asked how aware members thought the overall community is about mental illness and mental health, 47% of members reported believing their community was either "very aware" or "somewhat aware". 37% stated the community was "somewhat unaware" or "very unaware". 16% were "not sure" whether fellow community members were aware.

The number of Tsartlip members affected by mental health challenges in life is high – 63% reported having mental health challenges, only 24% reported having no challenges and 13% reported they did not know. Members reported that they believed suicide to be an issue that needs attention in the community.

# 12. MOST MEMBERS CONSIDER CULTURAL CONNECTEDNESS AS AN IMPORTANT COMPONENT OF THEIR HEALTH.

Connection to culture varied amongst Tsartlip members. On a scale of 1 to 10 (1 meaning Very Disconnected and 10 meaning 'very connected'), most members rated their cultural connectedness as a 7.

Most members (91%) agreed that participating in traditional and cultural activities had a positive impact in their lives. 9% were "unsure" of the impact. Notably, no community members reported negative impacts from cultural participation.

77% of members reported that they either "strongly agree" or "somewhat agree" that having better access to traditional healing and medicines has a positive impact on their health. 23% reported being "unsure" whether better access to traditional healing and medicines have a positive impact on their health.

# 13. COMMUNITY MEMBER'S HOME ENVIRONMENT HAVE A VARIED EFFECT ON THEIR HEALTH.

When asked how healthy members felt their home environments are, 68% reported their living situation was either "very healthy" or "somewhat healthy". 32% reported their home environments were either "somewhat unhealthy" or "very unhealthy". For those who reported that their home environment had a negative impact on their health, most community members mentioned that their homes have mold.



# 14. THERE ARE LOW REPORTED INCIDENCES OF SUBSTANCE USE AND FEW MEMBERS REPORTED BEING CHALLENGED BY ADDICTION.

Many Tsartlip members do not smoke cigarettes. 13% reported smoking regularly, and 11% sometimes. 76% reported not smoking.

More members have not experienced addiction with alcohol than those who did not. 40% reported having experienced this addiction, and 60% reported having not experienced this addiction. 19% of members have, at some point, experienced an addiction to gambling and 81% reported that they have not. 23% of members have experienced addiction to drugs and 77% reported they have not.

When presented with a long list of substances and asked which ones were felt to be of concern the four highest concerns were alcohol (83%), marijuana (56%), cocaine (36%), methamphetamine (25%) and crack cocaine (22%). 6% of members stated that "none of the above" were a concern.

# 15. MANY MEMBERS REPORT HAVING BEEN ABUSED AND MANY MORE REPORTED KNOWING A FAMILY MEMBER WHO HAS EXPERIENCED ABUSE. DESPITE HIGH REPORTED ABUSES, MEMBERS GENERALLY FEEL SAFE IN COMMUNITY.

43% of members indicate they had been in an abusive relationship, and 66% indicated that someone in their family has been in an abusive relationship. This may suggest not all members felt comfortable disclosing they are/have been in an abusive relationship.

Overall, the community is concerned about abuse. The four abuses members are most concerned about, in order of concern, appear to be bullying and emotional abuse, violence and physical abuse, sexual abuse and Elder abuse.

Despite concerns of abuse and violence in community, 89% of members feel safe in their homes and in community.



### 1.1.2 What We Learned from Focus Groups and Community Dinner

Several key themes came out of the various questions asked at the community workshop and focus groups. A comprehensive list of member answers to questions, by event, can be found in **Appendix B**. A summary of these results are provided below and questions are grouped into five themes:

- Personal and community reflections on health and wellness
- Health assets
- Health needs
- Vision and mission for health and wellness
- Goals and priorities for achieving a high standard of health and wellness

#### PERSONAL AND COMMUNITY REFLECTIONS ON HEALTH AND WELLNESS

Participants were asked what health and wellness means to them, both as individuals and at a community level. Many participants noted that it is important to think of health holistically and that to have good health there should be an alignment of different health elements (e.g., physical, emotional, spiritual, cultural, and mental). Many participants noted that maintaining good health involves being culturally connected. A complete summary of participant answers can be seen below.

Questions	Summarized Answers
What does health and wellness mean to you?	<ul> <li>Having a kind community that supports and cares for each other</li> <li>Positive mindset</li> <li>Cultural connectedness</li> <li>Access to traditional foods and medicine</li> <li>Having healthy land, air, and waters</li> <li>Hunting and harvesting</li> <li>Outdoor activities</li> <li>Traditional arts and crafts (i.e., carving, drum making, beading)</li> <li>Being balanced</li> <li>Eating well and maintaining a healthy diet</li> </ul>
What does healing look like to you?	<ul> <li>Being supportive to community and family</li> <li>Follow-up with family / community</li> <li>Limiting or removing drugs or alcohol</li> <li>Talking circles</li> <li>Fitness gatherings</li> <li>Community meetings</li> <li>Sharing meals with family</li> </ul>



#### **Questions** Summarized Answers

• Showing care for one another

#### **HEALTH ASSETS**

When participants were asked about health assets many praised the Good Food Box program, men's group, and counselling services. However, when asked how these assets can be developed further, many participants indicated that most programs and services should be expanded upon. For example, members would like to see the more of the Good Food Box program, bring back the Garden Program and increase paramedical services at the Tsartlip Health Department. It was also noted that the Road to Wellness Program is offered at the Tsawout First Nation gym, and members would prefer to see this offered in Tsartlip. Further participant answers can be found immediately below.

Questions	Summarized Answers
What is going	Road to Wellness program (includes fitness, self-defense classes, rugby)
well in the	Mens Group
community in	Youth Council
terms of health	Womens Group
and wellness?	Good Food Box
What should	Family support
Tsartlip be	<ul> <li>Tuesday exercise group (includes strength and flexibility class, chair</li> </ul>
proud of?	yoga)
	<ul> <li>People feel generally safe in community</li> </ul>
_	<ul> <li>Language classes being taught to youth (in school)</li> </ul>

#### **HEALTH NEEDS**

Participants described many community challenges and needs. In particular, numerous participants brought up challenges with accessing primary health care, specifically nurses, nurse practitioners and doctors. Many more were concerned about a lack of programs and services in community such as athletic programs for youth, prescription refills, preventative services, trauma support, paramedical services, and support for young families. Many other issues were brought up and are summarized below as well as some suggested solutions for how these issues can be addressed in the Health Plan.



Questions	Summarized Answers
What are some health and wellness challenges Tsartlip members face?	<ul> <li>Lack of nurses, nurse practitioners and doctors in community</li> <li>Lack of transportation options/patient travel options to access health care</li> <li>Lack of consistent programming</li> <li>Mental illness</li> <li>Gossiping</li> <li>Food insecurity</li> <li>Lack of support for Elders and youth</li> <li>Bullying</li> </ul>
What does your community need to be healthy?	<ul> <li>Recreational Center for Elders and youth</li> <li>Elder gatherings</li> <li>Transportation for Elders to travel to medical appointments, community events, and to and from the ferry</li> <li>More education on healthy lifestyles, fitness, parenting skills, household management, finance, food security</li> <li>More paramedical services such as massage therapy, acupuncture, chiropractic care, physiotherapy</li> <li>Improved communication between Health Department and community</li> <li>Traditional healing practices</li> <li>More food awareness and food security</li> <li>Family and youth activities such as bake nights, weekly drum group, game nights, youth language night, fishing, hunting, craft nights, carving, canning</li> </ul>
How should they be addressed in the Health and Wellness Plan?	<ul> <li>Longer contracts for staff so community members have time to build relationships and trust</li> <li>Hire more staff for preventative services</li> <li>Prioritize purchasing a vehicle for patient travel</li> <li>Expand health services to include acupuncture, chiropractic care, physiotherapy, massage therapy</li> <li>Re-instate a Community Health Committee</li> <li>Provide more outreach to the community on new programs and services</li> <li>Commit to frequent, consistent community gatherings</li> <li>Strengthen food security and food awareness by bringing back the Garden program, improving the Good Food Box program, offering food</li> </ul>



#### **Questions** Summarized Answers

canning workshops, providing cooking classes for families and hiring a nutritionist

- Integrate SENĆOŦEN language in community buildings and communications to community
- Develop better onboarding and training materials for new health staff regarding Indigenous culture and Tsartlip history
- Work towards developing a new recreational centre for more programming

#### VISION AND MISSION FOR HEALTH AND WELLNESS

Participants were asked to think about what a mission statement might look for the Health Plan. They were asked what types of words and ideas could describe the present-day objectives and values Tsartlip has for health. Participants did not distinguish between mission and vision but did provide some direction as to what kind of language to include in a vision and mission statement. A list of words and ideas to describe a mission and vision for Tsartlip is summarized below.

#### **Questions**

#### **Summarized Answers**

When you think about Health and Wellness Vision and Mission Statement for Tsartlip for the next 5 years and beyond...what types of words and ideas come to mind?

- Cultural safety
- Respect
- Welcoming environment
- Reconciliation through health
- Consistent health
- Access to health care
- Holistic health care
- Unity
- Strength
- Wellness
- Healing from the past
- Language and culture
- Acceptance
- Kindness
- Reassurance
- Spiritual healing
- Perseverance



Support

# GOALS AND PRIORITIES FOR ACHIEVING A HIGH STANDARD OF HEALTH AND WELL BEING

Participants were asked about the specific types of health and wellness programming and services they would like to see. The responses indicated a strong desire for improved access to primary care within the community and more support for prescription refills. Additionally, there was a call for increased availability of community and cultural activities, especially those targeted towards youth and designed to foster intergenerational connections and learning between youth and Elders. Several participants expressed the need for expanded facilities for youth programming, fitness classes, daycare, and more. A fully summary of responses can be seen below.

Questions	Summarized Answers
What future	Increase in primary care (nurses, nurse practitioners, doctors)
health and	Community gatherings
wellness	Transportation for patient travel
programming	Commercial kitchen for cooking classes
and services	Brighter Futures Program
should Tsartlip	Daycare centre
focus on for its	Recreation centre
members?	Hire a sports coach/ recreation coordinator
	<ul> <li>Hiring full-time home care nurses for Elders</li> </ul>
	<ul> <li>Treatment and support groups for substance use, addiction, and mental</li> </ul>
	health
	<ul> <li>Mental health therapy sessions for youth and mental health days during</li> </ul>
	the school year
	<ul> <li>Traditional arts and crafts sessions (i.e., dye-making, beading, drum-</li> </ul>
	making)
	<ul> <li>Traditional hunting classes and fish canning</li> </ul>
	Elders luncheons
	Language programs
	Workshop space
	Library space
	Residential school survivor support
What do you	Bringing long-term primary care services to Tsartlip such as nurses,
think the top	nurse practitioners and doctors
health and	Elder support



Questions	Summarized Answers
wellness priorities should be for this Community Health and Wellness Plan?	<ul> <li>Food security through community gardens, cooking classes and hiring a nutritionist</li> <li>Youth support and programming such as developing a daycare and starting a boys and girls club</li> <li>Increased programming and activities</li> <li>Culture and land-based education and programming</li> <li>Mental health support</li> <li>Substance use and addictions support</li> <li>Improving communication between health staff, Chief and Council, and community members</li> </ul>
What health and wellness traditions do you want to continue to practice in the future?	<ul> <li>Traditional medicines and foods</li> <li>Knowledge keepers</li> <li>Collaborative programs across nations on South Vancouver Island</li> <li>Trading protocols</li> <li>Territorial boundaries</li> <li>Leadership involvement and accountability</li> <li>Elder leadership/ workshops/ teaching</li> <li>Traditional family values and roles</li> <li>Harvesting and sharing in community</li> <li>More activities out on the land</li> <li>More community involvement in program creation</li> <li>Learning to grow/hunt and relearning traditions from Elders (e.g., canning, tanning, hunting)</li> </ul>



### **WWL APPENDIX A**

#### **Elders' Tea**

An Elder's Tea session was hosted at the Tsartlip Health Centre on June 9<sup>th</sup>, 2023, from 9:00am-12:00pm. Twelve Elders were in attendance for the tea and shared stories of their past and present experiences with health and wellness, as well as their hopes and aspirations for the future of Tsartlip's health and wellness. This session consisted of informal, small group conversations with Elders.

#### **Summary of Key Points:**

- The need for more access to doctors and nurses and to improve and increase frequency of visits
  - o Elders are experiencing asthma, cysts, Parkinson's, kidney disease, heart issues
- Programs need to be congruent and continuously improved
  - o There is little consistency in health care programs and services
  - Nurses used to visit Elder's homes once per week, but eventually they stopped with no communication as to why
- Better communication between Health Department and Nation Administration and the community
  - Elder suggested having an advisory group to communicate community needs to Chief and Council
- Elders are concerned there are little to no nurses in community
- The community needs more space for programming
- There is a need for community gatherings
  - o Community gardens are important for improving health, wellbeing and connections
- Interest in bringing the yoga programs back for Elders
- Interest in bringing back Residential School Survivor support/workshops
- · Need for more enhanced communications and connect with Chief and Council
- Elders would like to see connections with other communities (ex. Pauquachin First Nation) to provide more support on the following services:
  - Filling prescriptions
  - Nurses
  - o Doctors
  - o Dentists
  - Extended health services (acupuncturist, etc.)



- Daycare is need for single parents, especially for those with health issues
- Need for addictions support for youth and those livings in poverty
  - Needs to be an addictions counsellor and other outlets to support those dealing with addiction (workshops with incentives that don't involve enabling the addiction)
  - o There is no support with suicide prevention and drug abuse
  - Youth violence and alcoholism is prevalent in the community; there is supposed to be a safety committee, but they are not doing much to mitigate these issues
- Need for a boys / girls club for youth that are currently too young to attend the 13+ teen group
  - Youth are not getting support to become leaders
  - Suggestions for workshops to help youth with self esteem / self worth and mentorship
- Need for more cultural programs
  - o Interest in hiring a cultural youth liaison to teach how to hunt, fish, canning, canoe, off-reserve trips... etc.
  - Other cultural training opportunities such as carving, cedar work marking, drum making, weaving, canoe making... etc.
    - Tsartlip has the knowledge holders to support this, but they are not being accessed due to a number of barriers
- Need for more fitness programming
  - Rugby is prevalent in the community
- Concerns about leadership supporting the community



### **Health Staff Workshop**

A staff workshop was facilitated to gain insights from the Health Department on what health and wellness programs and services are needed in the community and where there is a need to improve program service delivery.

This workshop was held on June 6<sup>th</sup>, 2023, from 9:30am – 11:00am and ten staff members attended. Attendees consisted of health and wellness nurses, youth and community program coordinators, representatives, and leaders. Comment sheets were also provided to Health Staff to share any additional thoughts or feedback.

#### **Summary of Key Points:**

# 1) What are some of the major challenges you are facing to deliver health services and programming?

- Lack of capacity/staff
- Staff don't feel as connected to the community
- Recruitment and retention
- Safety concerns
  - o Staff have experience lateral violence and bullying from members
- Cultural awareness
  - New staff do not feel like they have an understanding of Indigenous culture and Tsartlip culture

#### 2) How can these challenges be addressed in the Community Health Plan?

- There needs to be more flexibility in Tsartlip job descriptions (what is required versus what is preferred)
  - Emphasis to decolonize job descriptions
- Need more staff for prevention services
  - Health and wellness coach
  - o Diabetes nurse
  - Family outreach
  - Cultural advisors (3)
  - Health Coach
- Need for more training and better onboarding
  - Staff suggest developing an orientation package or manual for new Health staff that shares history, cultural protocol and information
  - o Cultural liaison should be hired to support staff



- Need for stronger safety measures in place to support staff
- Need more support from our leadership team
  - Suggestion to have a Chief and Council and Tsartlip Health Staff retreat or bi-annual workshop
- No tolerance for bullying
  - Suggestion to add a statement on social media or in Health Department that there is no tolerance for bullying
- Need to pursue more grant funding for cultural programs
- More traditional awareness
  - Suggestion to incorporate SENĆOŦEN language in Health Building (e.g., signage for welcome signs, exit signs, washroom...etc.)
  - Host Cultural camps
- Community food pantry
  - Making more food sources available will limit anxiety and mental health issues

#### 3) What do you think the top priorities of the Health and Wellness Plan should be?

- Hire more Nurse Practitioners in community
- Hire more staff for prevention services
  - Health and wellness coach
  - Diabetes nurse
  - Family outreach
  - Cultural advisors (at least 3)
- Better onboarding for staff/orientation manual
- Hiring a nutritionist to work in community
- Start a community pantry and garden program
- Offer language classes, cultural camps, drum making classes
- Need for transportation and home care for Elders
- Better communication with Elders on prescriptions and medical coverage

#### 4) Additional Comments

- Community needs to understand:
  - o The ways things are changeable
  - o They must be the ones to change it
  - o They are capable of changing it
  - o A plan must be formed



- If the Health and Wellness Plan is a plan for the community, then it must really resonate with the community
- Tsartlip Administration Office and Health Building are growing (busting at the seams)
   and running out of office space and need community program facilities to accommodate healthy programs and events for community
- Knowledge keepers would benefit staff, especially the non-indigenous staff
- Staff need to know the SENĆOŦEN language this would benefit the staff, community and Elder communication

There needs to be more leadership involvement in our health building – after all we are serving the community and we don't feel supported from Chief and Council

### **Tsartlip First Nation Council Workshop**

Engagement was held with Tsartlip Council during the June 12<sup>th</sup> Council Meeting from 5:00pm – 6:00pm. Engagement was led by Urban Systems.

During the meeting, Urban Systems provided a project update and facilitated discussion for the Community Health and Wellness Plan. Chief and Council were asked where they think members are struggling with accessing health programs and services and provide insights on a vision statement and mission statement for the Community Health and Wellness Plan.

#### **Summary of Key Points:**

### 1) Where do you feel that the members are struggling with accessing health programs and services?

- Lack of access to doctors and nurses
  - o No access for wound care/bandage changing
  - Challenges with prescription refill
  - Nurse Practitioners are not available
  - o Tsartlip members need to travel to Victoria for services
  - o Saanichton walk-in clinic has recently opened but there is still a long wait
- Lack of consistent programming in community
- Poor communication
  - Need to emphasize that communication be improved around what Council can/can't do
- Long wait times
- Lack of transportation getting to and from appointments
- Lack of cultural safety



## 2) When we think about developing a vision statement for the Community Health and Wellness Plan, what phrases and/ or words come to mind?

- Consistent health
- Healthy individuals
- Individuals that are thriving
- No barriers to accessing health care
- Safety
- Cultural safety
- Respect
- Welcoming environment
- Reconciliation through health
- Holistic health care (many who seek treatment and there needs to be a more holistic approach)

### **Community Dinner**

A community dinner was hosted at the Tsartlip Health Centre on June 16<sup>th</sup>, 2023 from 5:00pm – 7:00pm. Approximately 32 participants attended including children, youth, adults, and Elders. The dinner was open to all community members to come together and share a meal, followed by small focus groups regarding community needs and values, and how feedback could inform the Community Health and Wellness Plan.

During the community dinner, two rounds of Bingo were organized for the participants. Each Bingo square featured a health and wellness program or term. Additionally, attendees of the dinner had the opportunity to complete the Health and Wellness Plan survey. To facilitate discussion, poster boards displaying the questions addressed in the focus groups were placed around the room.



#### **Summary of Key Points:**

#### 1) What does healing mean for you?

- Healing is non-linear
- Balance and working with each other
- Following up and staying connected with family
- Pow Wows
- Cooking with family
- Supporting those with addictions
- Bringing awareness around intergenerational trauma

- Show care for one another
- Connecting with the land and sprit
  - Harvesting food, spending time at the waterfront
- Strong relationship with the community
- Talking Circle for those struggling
- Community gatherings

#### 2) What does the community need to improve health and wellbeing?

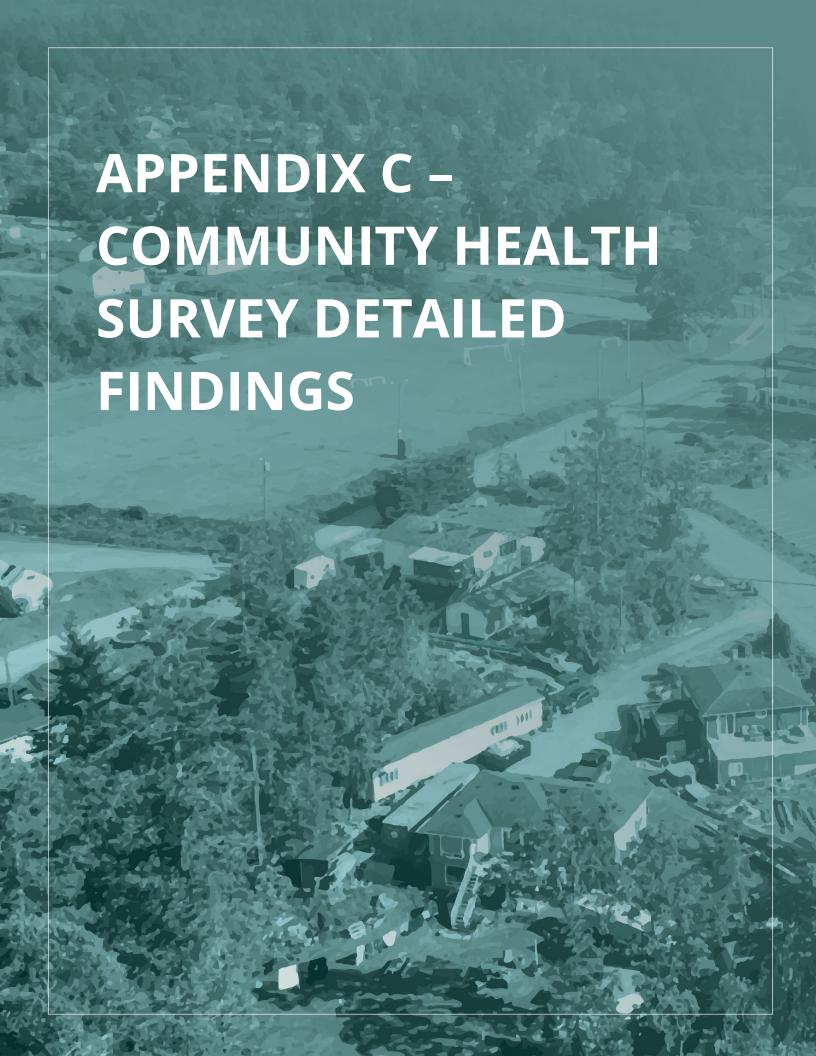
- Youth programs
- Elder luncheons
- Diabetes luncheons
- Mould-free homes
- Parenting classes
- Food security
  - Food pantry
  - Community kitchen
- More independence

- Diabetic nurse in community
- More doctors
- Youth centre for recreation, counselling
- Community dentist
- More funding for programs
- Staff support from leadership
- Employment opportunities

#### 3) What health and wellness traditions do you want to continue to practice in the future?

- Language classes
- Loom weaving
- Rye bread baking
- Meal sharing
- Fishing trips
- Sewing
- Storytelling
- Beadworks
- Traditional medicine
  - Garden program

- Knitting
- Weaving
- Gathering
- Cooking classes
- Hunting trips
- Canning
- Cedar making
- Wool preparation
- Connections to the water





### **COMMUNITY HEALTH SURVEY DETAILED FINDINGS 2024**

**Total Number of Participants: 107** 

#### Age Breakdown:

- Youth (up to 24 years old): 13 respondents
- Adults (25 44 years old): 46 respondents
- Adults (45 54 years old): 23 respondents
- Adults (55+ years old): 25 respondents

#### **Survey Questions:**

- What are your greatest health concerns? (Participants were asked to select all that apply.)
- What health services have you accessed in the past year? (Participants were asked to select all that apply.)
- What activities keep you healthy (mentally, physically, spiritually)? (Participants were asked to select all that apply.)
- What services does the Tsartlip Health Centre need? (Open-ended question for specific suggestions.)

### **Findings**

The following survey findings are presented by age group.

### Youth up to 24 years old

Notably, mental health was a concern for 10 out of 13 (77%) youth respondents. 8 out of 13 (62%) identified youth culturally specific activities that they engaged in to promote their health and wellbeing. 3 out of 13 (23%) youth noted a daycare was needed in community.



#### **Health Concerns**

These range widely, including arthritis, mental health, obesity, substance use, asthma, diabetes, cancer, heart disease, high blood pressure, and sexual/reproductive health.

#### **Health Services Accessed**

A variety of health professionals were consulted, including nurses, doctors, pharmacists, nurse practitioners, and dental services.

#### **Healthy Activities**

Respondents engage in numerous activities to maintain their health, such as walking, swimming, sewing, beading, knitting, carving, drawing, cooking, learning languages, paddling/canoeing, bicycling, dancing, team sports, and participating in Big House activities.

#### **Suggested Services for Tsartlip Health Centre**

- **Daycare Services**: Expanded daycare facilities to support families with young children, mentioned several times indicating a high demand.
- **Mental Health Resources**: Increased mental health services, emphasizing the need for accessible and comprehensive mental wellness support.
- **Community Engagement**: More community dinners to strengthen social bonds and promote cultural cohesion.
- **Disability Support Information**: Enhanced dissemination of information about services available for individuals with disabilities.
- **Maternal and Newborn Care**: Additional support and services for pregnancy and newborn care, underscoring the importance of maternal and infant health.
- **Physical Sports Therapy**: Provision of physical sports therapy services to support athletic and physically active members of the community.
- **Youth Programs**: Development of youth-oriented programs and informational sessions to engage and support the younger population.
- **Educational and Recreational Resources**: Availability of toys and stationery, likely for educational and recreational purposes.



### Adults 25 - 44 years old

Notably, mental health was the greatest concern in this age group as well; 31 out of 46 (67%) respondents reported mental health as a major health concern. 39% were concerned about diabetes and asthma (18 respondents concerned about diabetes and 18 about asthma). 17 out of 46 (37%) respondents were concerned about arthritis, and 15 out of 46 (33%) respondents were concerned about obesity. 31 out of 46 (67%) respondents identified culturally specific activities that they engaged in to promote their health and wellbeing. At least 17 out of 46 (37%) respondents expressed a need for more staff at the Health Centre, in particular, in-community physician and nurse practitioner visits.

#### **Health Concerns**

Common concerns include arthritis, mental health issues, high blood pressure, obesity, asthma, cancer, diabetes, substance use, kidney disease, sexual/reproductive health, chronic obstructive pulmonary disease (COPD), and heart disease.

#### **Health Services Accessed**

Respondents have accessed a wide range of health services, including general practitioners, pharmacists, dental services, and allied health services (like physiotherapy, massage, and acupuncture).

#### **Healthy Activities**

The activities listed are quite diverse and include sewing, beading, knitting, carving, drawing, cooking, participating in Big House activities, learning languages, fishing, hunting, walking, swimming, bicycling, dancing, paddling/canoeing, and team sports.

#### **Suggested Services for Tsartlip Health Centre**

- Maternal and Prenatal Care: Including midwives and doctors specialized in pregnancy and childbirth.
- **Mental Health Services:** A focus on consistent counseling, outreach, and awareness programs, especially for youth and vulnerable groups.



- **Culturally Relevant Programs:** Big House activities, language learning, and cultural nights for community learning and engagement.
- **Off-Reservation Access to Care:** Outreach services and improved communication for members who live off-reservation or have difficulty accessing the health center.
- **Expanded Medical Staff:** Regular availability of family physicians, dieticians, nurse practitioners, and allied health professionals.
- **Accessibility of Services:** More evening and weekend hours to accommodate working and schooling community members.
- **Transportation Services:** Providing medical drivers and transportation assistance, especially for Elders and those attending off-reservation appointments.
- **Youth-Focused Facilities:** Creation of a youth recreation room, gym facilities, and programs catering to the needs of young and single parents.
- **Communication and Navigation:** Better information dissemination and a systems navigator to help community members understand and access available services.

#### Adults 45-54 Years Old

11 out of 23 (48%) respondents noted diabetes, and 10 out of 23 (43%) respondents noted mental health as a major health concern in their community. 9 out of 23 (39%) respondents indicated asthma as a major health concern. 7 out of 23 (30%) respondents indicated that arthritis, obesity, and high blood pressure are major health concerns. 16 out of 23 (70%) respondents identified culturally specific activities that they engaged in to promote their health and wellbeing.

#### **Health Concerns**

Participants reported a variety of health concerns, with frequent mentions of arthritis, mental health, high blood pressure, obesity, asthma, cancer, diabetes, substance use, kidney disease, sexual/reproductive health, COPD, and heart disease.



#### **Health Services Accessed**

The community has engaged with a comprehensive array of health professionals over the past year, including doctors, pharmacists, dental services, nurses, nurse practitioners, and allied health professionals such as those offering physiotherapy, massage, and acupuncture.

#### **Healthy Activities**

To maintain health, participants are involved in a multitude of activities: sewing, beading, knitting, carving, drawing, cooking, engaging in Big House cultural events, learning languages, and various forms of physical exercise like walking, swimming, team sports, and more.

#### **Suggested Services**

- **On-Call Medical Staff**: Availability of nurse practitioners and physicians on call for urgent care needs.
- **Expanded Healthcare Team**: Inclusion of more doctors and nurses to provide comprehensive care.
- **Facility Expansion**: Enlargement of the health center to support larger community spaces and traditional activities.
- **Substance Use Education**: Implementation of programs aimed at educating school-aged children about the dangers of drugs and alcohol.
- **Rehabilitation Services**: Provision of specialized rehabilitation services, including aqua therapy for recovery from injuries.
- **Health and Wellness Workshops**: Organization of healthy living workshops, cooking classes for healthy eating on a budget, and sessions on maintaining healthy relationships.
- **Inclusive Program Scheduling**: Offering programs during evenings and weekends to accommodate those with day-time commitments.
- **Community Gym**: Establishment of a gym for community events, dinners, and elder gatherings.
- **Youth Educational Workshops**: Development of workshops focusing on basic life skills and education tailored for young community members.



- **Grandparent Support Services**: Creation of support groups, legal rights education, and fun night events for grandparents and their grandchildren.
- **Home Care Services**: Enhancement of rehabilitation nursing and home care services for the community.
- **Physiotherapy and Chiropractic Care**: Access to physiotherapists and chiropractors for comprehensive musculoskeletal care.
- **Nutritional and Motivational Programs**: Nutrition workshops offering dietary advice like salt-free recipes and motivational speaking events to inspire healthy lifestyles.
- **Women's Activities**: Additional post-work activities for women's groups to promote social engagement and well-being.
- **Diverse Learning Opportunities**: Activities that enable learning across various domains such as medicine, art, and weaving.
- **Health Product Availability**: Ensuring that health-related products are readily available to the community.
- **Full-Time Family Doctor**: Recruitment of a dedicated family physician to address the general health needs of the community.
- **Enhanced Fitness and Dental Facilities**: Improvement of facilities for physical fitness and dental services to ensure comprehensive health coverage.

#### Adults 55+

Among some of the greatest concerns, 14 out of 25 (56%) respondents consider diabetes as one of the greatest health concerns in their community. 12 out of 25 (48%) respondents consider high blood pressure as one of the most pressing concerns in their community. 11 out of 25 (44%) respondents indicated arthritis is a major health concern. 10 out of 25 (40%) respondents consider heart disease a major community health concern. 14 out of 25 (56%) respondents identified culturally specific activities that they engaged in to promote their health and wellbeing.

#### **Health Concerns**

Participants identified a range of health concerns, prominently including high blood pressure, asthma, mental health, heart disease, substance use, diabetes, arthritis, cancer, COPD, obesity, kidney disease, and sexual/reproductive health.



#### **Health Services Accessed**

The services accessed by the respondents in the past year cover a broad spectrum, with many utilizing the expertise of nurses, nurse practitioners, dentists, and pharmacists.

#### **Healthy Activities**

Activities that respondents partake in to maintain their health include walking, participating in Big House activities, and various forms of crafting like sewing, beading, knitting, carving, and drawing, as well as swimming and bicycling.

#### **Suggested Services for the Tsartlip Health Centre**

- **Elderly Support Programs**: A walking program for elders to promote active living and mobility.
- **All-Age Workshops**: Diverse activities and workshops designed for all age groups, allowing both joint and age-specific community engagement.
- **Comprehensive On-Site Services**: Expansion of on-reservation services to reduce the need for members to seek health services off-reservation.
- **Therapeutic Services**: On-demand availability of therapeutic services, such as massage and mental health therapy.
- **Increased Doctor Availability**: More frequent presence of doctors at the health center to enhance healthcare access.
- **Enhanced Primary Care Team**: Recruitment of additional doctors, nurse practitioners, and community nurses to strengthen primary care services.
- **Fitness Equipment**: Provision of fitness equipment to facilitate physical rehabilitation and wellness activities.
- **Specialized Health Services**: Offering specialized services such as kidney health management, nutrition and dietetics, diabetes prevention, and non-diabetic food options.
- **Language Services**: Programs to support language preservation and learning within healthcare settings.
- **Mobile Health Services**: Introduction of mobile health services like hearing tests, breast examinations, and vaccination programs.



- **Extended Professional Hours**: Increased availability of medical professionals, extending service hours to accommodate varying schedules.
- **Elder Activities and Facilities**: Development of Elder-specific activities and dedicated facilities for Elder socialization and care.
- **Expanded Medical Staffing**: Addition of more nurses and doctors to improve patient care and reduce wait times.
- **Off-Reserve Support**: Additional personnel to assist off-reserve members with accessing health services.
- **Health Education Workshops**: Workshops addressing specific health concerns and providing education on managing various health conditions.
- **Diverse Therapeutic Options**: Access to a variety of therapeutic services including physiotherapy, naturopathy, EMDR, nutritionists, and chiropractic care.
- **Smoking Cessation Programs**: Specialized clinics and updates on treatments for smoking cessation and chronic diseases like blood pressure management and COPD.