



A SNAPSHOT OF RECONCILI-ACTION AT OPH



The following table includes examples of some of the Reconcili-ACTION activities that OPH employees and Board of Health members have participated in since June 2020:

| Principle | Short-Term Outcome | Link to TRC | Activity | Feedback / Lessons Learned |
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| Respect | Increased awareness and understanding of colonial history and systemic racism and its impact on Indigenous health | 18 | <ul style="list-style-type: none">• Indigenous Cultural Safety Training (ICST)<ul style="list-style-type: none">– Ottawa Board of Health (BOH) Annual Retreat – First Peoples Group facilitated an introductory Indigenous cultural safety learning opportunity in August 2020; an overview of key anti-racism concepts and recommended actions was provided by S. Xasan (Project Officer, OPH) in September 2021.– Immunization Onboarding – 2760 new Immunization Program employees (95%) completed either one (1365) or both (1395) of the following online ICST sessions as part of their onboarding experience: Vaccine Hesitancy and First Nations, Inuit and Metis Populations: Potential Implications During the COVID-19 Pandemic, a national NCCID/NCCIH webinar by Dr. Sarah Funnell, A-MOH, Ottawa Public Health (OPH), and an introduction to Trauma-Informed Care (Alberta Health Services). Resources related to Inuit-specific cultural safety were also shared with clinical staff supporting vaccination services with the Akausivik Inuit Family Health Team.• Anti-Racism, Anti-Oppression (AR/AO) Workplace Policy – In response to a BOH motion in June 2020 that recognized racism as a significant public health issue, OPH has developed a workplace policy to establish direct actions and expectations at the organizational level to identify and resolve racism, with a particular focus on anti-Indigenous and anti-Black racism. Consultations and the creation of action and evaluation plans are currently in progress.• Knowledge Exchange Initiatives – Sharing knowledge and lessons learned with public health practitioners, City, community and academic partners, professional organizations, nursing and medical students, webinars and conferences (e.g. internal and external consultations; team meetings; OPH Daily Buzz submissions, including <i>Indigenous Word of the Week</i>; City’s First Nations, Inuit and Métis Affinity Group and Anti-Racism Secretariat; University of Ottawa Faculty of Nursing Indigenous Advisory Group; NCCID webinar; CPHA Poster on OPH Anti-Racism Workshop). | <ul style="list-style-type: none">• Mandatory ICST: (Feedback shared with Dr. Sarah Funnell) “I was with CCM, but am now being orientated to help with the Vaccination Teams. I just couldn't go on, not communicating to you, how moved I was by your very inspiring YouTube video on Vaccine Hesitancy with a focus on Indigenous Peoples. Oh my, I was tearful in many parts of your authentic approach to caring for people who have a history of trauma and the call to acts of kindness and good will to make changes and reconciliations to find peace and restore faith and trust with each other as fellow human beings on the same mission to support life. Thank you, thank you, thank you for sharing your father's wisdom, your own story, and Tommy Orange's precious words. My new favourite quote is, "I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." So warm, so caring, and so true.” - OPH Immunization Program Employee• AR/AO Policy: “I believe that my experience working on this practicum project will greatly impact my ability to advocate for and promote services and resources that support diversity and inclusion. As a public health professional, I will be able to influence future employers to incorporate an anti-racism lens in their programs, services and strategies.” - P. Sadri, MPH practicum student |

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| Relationship | Engagement with Indigenous Elders and partners | 20/22 | <ul style="list-style-type: none"> • Pandemic Planning and Support – Throughout the pandemic, OPH has been actively supporting First Nations, Inuit and Métis partners with interpretation of context-specific COVID-19-related guidelines; providing liaison services to facilitate timely responses to clinical inquiries from OPH content experts; facilitating collaborative COVID case management with Indigenous partners as needed; advocating for equitable access to culturally safe COVID testing and resources; and sharing COVID-related employee training and information resources with partners. • COVID-19 Vaccination Rollout – In January 2021, OPH initiated a COVID-19 Vaccine Community Engagement Task Force to promote COVID vaccinations. Working with First Nations, Inuit and Métis partners, the strengths within Indigenous communities were identified and potential barriers addressed through tailored engagement and promotion activities. For example, Dr. Sarah Funnell facilitated a COVID vaccine discussion with local Indigenous Elders and Knowledge Keepers. OPH had regular meetings with Wabano, Akausivik and City employees to exchange ideas share information and resources (e.g. Maad’ookiing Mshkiki - Sharing Medicine), and leverage capacity to reach Indigenous community members. OPH and partners also kept websites up to date, posted social media and video messages, circulated news releases and posters, ran PSAs and bus ads, and were represented in multiple media interviews and news articles about the vaccine rollout. • Annual meetings with First Nations, Inuit and Métis Partners – As part of OPH’s commitment to reconciliation, meetings were arranged for Dr. V. Etches, Medical Officer of Health, to check-in with eight (8) local Indigenous agencies. The informal interactions provided time to share updates and concerns, celebrate successes, and to identify gaps and opportunities for Reconcili-ACTION and post-pandemic program planning. These meetings were a chance to build relationships with three (3) organizations that haven’t been as connected with OPH. Additional meetings are planned this fall. | <ul style="list-style-type: none"> • Pandemic Planning & Support: “Tungasuvvingat Inuit is extremely grateful for all the support, expertise and guidance OPH provided throughout the COVID-19 pandemic. OPH continually engaged and consulted with the Inuit community on the public health safety protocols and ensured communication documents were translated into Inuktitut. They understood our desire to create a barrier-free access to vaccines and collaborated with TI and Wabano to provide a west-end pop-up Indigenous vaccine clinic, which was very successful. We are indebted to OPH for all their support during this global pandemic.” - A. Kilabuk, Executive Director, Tungasuvvingat Inuit • Meetings with Indigenous Partners: “Through my participation on calls with First Nations, Inuit and Métis partners, I observed how OPH works side by side with Indigenous partners. I appreciated that these conversations were flexible to allow time to be focused on the interests and priorities of partners. Partners reinforced the time and commitment required to establish a relationship as a pre-condition to trust and successful collaboration. The value and importance of personal relationships between staff of OPH and partner agencies was also highlighted for me through the interaction between those on the calls, but also in a request for the return of specific OPH staff to their role with a partner agency. It was made clear that these relationships (between organizations, as well as between individuals) need to be committed to ‘for the long haul’.” - K. Dumont, PPEO OPH “I continue to value the time that First Nations, Inuit and Métis partners make to share their perspectives with me directly. Conversations over the last year have helped me appreciate the way some community members experience the pandemic in the context of very negative experiences with other infectious diseases and in a community that lacks safety for all. In turn, I hope that partners find OPH’s actions supportive of their leadership and more culturally appropriate as our understanding grows.” – V. Etches, MOH, OPH |

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| Reciprocity | Address the distinct health needs of Indigenous community members through shared knowledge and service delivery | 20 | <ul style="list-style-type: none"> • Adaptation of COVID-19 Information Resources – In response to requests for COVID communication support and resources, OPH developed the Resources for First Nations, Inuit and Metis Community Members webpage, that included resources that promoted various Indigenous languages (e.g. Algonquin Inuktitut; Michif) and a tailored weekly COVID Update. The Mental Health Team initiated a quarterly scan of mental health resources and services for First Nations, Inuit and Métis populations for inclusion on OPH’s Mental Health and Substance Use webpage. • Collaborative COVID-19 Vaccination Clinics - First Nations, Inuit and Métis adults were identified as a priority population in phase one of Ontario’s COVID Vaccine rollout. Following guidance laid out by the Indigenous Primary Health Care Council, a dedicated OPH liaison initiated planning discussions with the Wabano Centre for Aboriginal Health and Akausivik Inuit Family Health Team in December 2020, to ensure access to culturally safe COVID vaccination services for Indigenous communities in Ottawa. Representatives from Wabano and Akausivik were also invited to participate on Ottawa’s Vaccination Sequencing Task Force. With varying levels of OPH support, Indigenous-specific COVID vaccine clinics opened their doors for older adults at Akausivik and Wabano in mid-February 2021. • Ottawa Aboriginal Coalition (OAC) Research Committee – Supported in part by funding from OPH, the OAC Research Committee initiated a study to capture an accurate and fulsome account of the physical and social impacts of the COVID-19 pandemic on urban Indigenous peoples and organizations in Ottawa, including the ways in which First Nations, Inuit and Métis community members navigated the health system. As members of the OAC Research Committee, OPH employees met regularly with representatives from multiple local Indigenous agencies, the Royal Ottawa and the University of Ottawa, served as liaisons with OPH teams (e.g. EGAD; Epidemiology, Case Management), reviewed research proposals, and supported the development of ethics review documentation and data sharing agreement between OPH and the OAC. | <ul style="list-style-type: none"> • Collaborative COVID-19 Vaccination Clinics: “We were amazed at OPH’s ability to run the vaccination clinics so efficiently, and respond quickly to address unforeseen situations that arose. We are very proud of our work with OPH and that together we were able to provide a total of 24,000 vaccinations for the Indigenous community. When given solid support, a solid relationship and an openness to change, you will have a strong foundation to make things happen.” - A. Fisher, Executive Director, Wabano “I wanted to send quick kudos and thank you for the work being done for the Indigenous vaccine clinics. My partner and I were able to go to the St. Laurent Complex clinic a couple of weeks ago and get our vaccines early on a Sunday morning. We were so impressed with how it went. Not only was it an organized, well-executed system that flowed nicely, we remarked later that it was literally the most positive experience we have had in public in nearly a year. While everyone out in the world seems to be in a negative mood ready to snap, every single person we encountered in the building that day was friendly, greeted us with a warm welcome and asked how we were doing. And of course, the artwork that was up was so beautifully done and really made it a welcoming, community-oriented space. I wanted to make it known that it was a great experience. Nia:wen for all your continued hard work.” - M. Commandant, Community Member “This was an awesome, supportive environment and helped me feel mor at ease. Thank you for all you do.” – Client at AIFHT Vaccine Clinic “Thank you for the kindness and listening to the nurse who gave me my vax. Supportive, professional and quick. Excellent team work.” - Client at AIFHT Vaccine Clinic |

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| Reflection | Culturally humble employees through a commitment to lifelong learning | 23iii | <ul style="list-style-type: none"> • Team-specific reflection activities – The OPH Mental Health Team (MHT) made a conscious decision in January 2021 to initiate quarterly activities that encouraged team members to reflect on their commitment to reconciliation. Examples of activities include: review and discussion of OPH’s Reconcili-ACTION plan in context of core principles; participation at Indigenous-specific learning opportunities – (a) Crime Prevention Ottawa’s Responding to Mental Health Crises – OCPHE series featuring Minwaashin Lodge’s Street Team Outreach Mobile; (b) Review and reflection of the Healing From Trauma Through Indigenous Wisdom; (c) City’s National Indigenous History Month session, <i>Reconciliation: From Truth to Action</i>, featuring the Legacy of Hope Foundation. • Acknowledgement of Unmarked Graves at former Indian Residential Schools – Employees were encouraged to take time to reflect on these events through internal communications (e.g. Daily Buzz; TEAMS chats; team-based discussions), highlighting available support and actions that can be taken to promote truth and reconciliation. Messaging amplified the OAC’s statement about the unmarked graves and promoted resources and activities (e.g. Legacy of Hope Foundation; Reconciling History Walking Tour). Externally, public statements were shared at BOH meetings, at media events, and through social media. • Anti-Racism Initiatives <ul style="list-style-type: none"> – Mental Health Team created haveTHATtalk About Racism videos to increase awareness of the impacts of racism, including anti-Indigenous racism. The launch of the videos featured Indigenous Elder Albert Dumont to highlight the impacts of racism on the health of Indigenous communities. – Neighbourhood Engagement Team initiated reflective conversations about racism (i.e. overview of key concepts) and reconciliation from an Indigenous perspective (i.e. impact of residential schools; inter-generational trauma; current events; needed next steps on OPH journey). – AR/AO Policy, Engagement Sessions - As part of the policy development process, OPH facilitated reflective consultations with 63 participants (i.e., 51 OPH employees; 12 partners representing ACB and racialized communities), and preliminary discussions with 13 representatives from local Indigenous organizations, to gather feedback to be integrated into the OPH policy, action and evaluation plans. | <ul style="list-style-type: none"> • Team-specific reflection activities: (Comments from MHT members) <ul style="list-style-type: none"> (a) “Language is powerful. Terms such as “at risk, underserved and vulnerable” in reference to Indigenous populations, is damaging and does not recognize the historical and current system injustices. To quote one of the speakers from the session ‘Indigenous people are not vulnerable, they are targeted.’” (a) “Until I attended the STORM session, much like everyone else, I used the term ‘discovered’ to refer to the unmarked graves at former residential schools. It was at this session where I heard the term “uncovered” or “recovered” to refer to the unmarked graves...the Indigenous community always knew about the existence of these graves. This is not a discovery but an uncovering of what was always there.” (b) “The article is a reminder of Indigenous approaches to mental health and wellness which are holistic and are concurrent with mental health promotion strategies. The connection to land in finding balance, purpose and meaning, resonated with me. Learning about the Indigenous ‘traditional ways of healing from traumatic experience’ is something I would like to learn more about.” • Anti-Racism – Neighbourhood Engagement Team (NET) Discussion <p>“I want to do my part in calling out instances of racisms, discriminations and microaggressions. I want to keep a watchful eye on my own actions, words and biases, and continue to seek learning opportunities. I plan on continuing to use the anti-racism lens and approach when it comes to planning, working and reporting.”</p> <p>“I will apply what I have learned by being empathetic, supportive and an active listener. Also, I realized from the workshop that I have a lot to learn - so I will actively try to learn so I can be better in my role.”</p> |