



First Nations Health Authority
Health through wellness

ANNUAL REPORT

2024

2025



The First Nations Health Authority acknowledges the unceded lands and territories of the self-determining First Nations where the work of this report took place in what is now known as British Columbia. We express gratitude to all those whose wisdom, knowledge and contributions are reflected.

Cover photo: Shannon McDonald, Operations Director, Northern St'at'imc, BC



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Message from the Board Chair

Dr. Sheila Blackstock,

Board Chair, FNHA

'Luu amhl good'y – My Heart is happy.

It is my pleasure to share our Annual Report for 2024/25 and to express gratitude for the continued vision and guidance of First Nations in BC. In my first year as Chair of the First Nations Health Authority Board, I have had the privilege of meeting with Chiefs, Health Directors and health leads throughout BC to better understand the needs and priorities of First Nations communities residing both at home and away from home. Through these connections I have gained further insight into how the Board can walk alongside our staff, partners and key stakeholders on our shared journey to transform health services in this province.



This year, we bid farewell to Richard Jock, who concluded his tenure as the Chief Executive Officer (CEO) of the FNHA in March 2025. We remain grateful for Richard's contributions since he joined the FNHA in 2013, and particularly since he assumed the role of the CEO in 2019. His leadership, integrity and commitment to First Nations self-determination have profoundly shaped the FNHA's evolution. His wisdom will continue to inspire us as we move forward.

With excitement and confidence, we welcomed Monica McAlduff as our new CEO. Monica has been a vital part of our organization since 2020 and brings over 30 years of clinical and operational experience to the role. She has a proven record of innovative Indigenous health leadership, a steadfast dedication to upholding FNHA's mandate, shared vision and 7 Directives, and a passion for advancing the wholistic health and well-being of First Nations in BC. The FNHA Board of Directors is confident that Monica's leadership and experience position her for success in guiding the FNHA and supporting us in achieving our shared vision, values and principles.

This past year was a time of increased reflection and learning following years of concurrent public health emergencies. With input from First Nations in BC and partners, we completed the mandatory five-year evaluations of the [BC Tripartite Agreement on First Nation Health Governance](#) and the [FNHA](#). The learnings and recommendations from these evaluations provide us an opportunity to reflect on our progress, while also allowing us to look ahead and make evidence-informed changes.

We also achieved significant progress in strengthening our partnerships. The FNHA, FNHC and FNHDA developed a shared engagement plan in alignment with regional engagement and decision-making pathways, as well as a Joint Pillar 2025/26 Action Plan to guide our collaborative efforts. FNHA witnessed the renewal of the Fraser Partnership Accord between the Ministry of Health, the Fraser Salish Regional Caucus, Fraser Health Authority and Métis Nation BC and the transitioning of the Aboriginal Health Steering Committee to the Indigenous Health Collaborative Council. Partnered funding flowed to communities through the 10-Year Strategy on the Social Determinants of Health, and we advanced our work toward operationalizing the First Nations-Led Primary Care Centres.

Looking ahead, the FNHA will continue to focus on culturally safe care and health system transformation, guided by the voices and leadership of First Nations across the province. Together, we are building a legacy of wellness that will uplift the next seven generations.

Hami yaa nee loosim — *I thank you all.*

Message from CEO

Monica McAlduff,

Chief Executive Officer, FNHA



I am honoured and excited to step into the role of CEO and grateful for the trust placed in me to undertake such important work. I want to start by expressing my deepest gratitude to Richard Jock for his leadership and service as the former CEO. Richard's remarkable strength and insight have left an indelible mark not only on me, but also on the entire organization. His guidance through moments of both progress and adversity helped build the strong organization we stand on today. We wish him well as he embarks on his well-deserved retirement.

I also want to thank Katie Hughes for her service as the Acting Chief Operating Officer from October 2024 to June 2025. Since joining the FNHA, Katie has served in a variety of leadership roles, consistently demonstrating humility and kindness in working with staff, partners and communities. I look forward to working with Katie for many more years to come.

Our annual report highlights the progress the FNHA has made toward our goals. Throughout these pages, you will find stories and evidence of progress in key areas such as governance, primary care, mental wellness, data sovereignty, health emergency response and cultural safety. These stories go beyond a description of our programs and initiatives; they reflect the strength, wisdom and direction of First Nations communities across BC.

Over the past year, we have made notable strides. We advanced the First Nations Primary Care Initiative with new centres opening and service plans approved. Through the advancement of the 10-Year Strategy on the Social Determinants of Health, we took active steps to shift resources directly to communities using an equity-based funding model. Aboriginal Head Start On-Reserve celebrated 25 years of early childhood learning and development at over 150 First Nations across BC.

We responded to the toxic drug emergency and other public health challenges with compassion and cultural humility, investing in the refurbishment and construction of treatment centres. We expanded access to culturally grounded traditional healing and wellness modalities and provided funding support for community and Nation-based land-based healing initiatives, as well as harm reduction programs and services. We hold our hands up to those whose good work saved lives this year and we remain steadfast in our commitment to integrating culture into healing and recovery.

The coming year includes many more important steps on our shared journey, we look forward to engaging with First Nations in BC on the renewal of our next Multi-Year Health Plan and on our ongoing efforts toward regionalization.

Thank you to the people who have been instrumental in our work: our Nations and communities, Knowledge Keepers and youth, leadership and staff and our partners across the health system. I am inspired by your commitment and proud to walk alongside you.

Celebrating Richard Jock

The FNHA honours Richard Jock, former Chief Executive Officer, whose visionary leadership shaped First Nations-led health care across British Columbia.

Following more than a decade of dedicated service to the organization, Richard Jock announced his retirement as CEO. He became the first recipient of the Tłakwagila – Chief Bill Cranmer Award in recognition of his more than 25 years of service in First Nations health leadership. Before joining the FNHA in 2013, Richard served with Health Canada, the Assembly of First Nations, and other national and regional organizations.



Richard was a steady, thoughtful leader to the FNHA and continues to be highly regarded and respected throughout Canada for his passion, vision, and dedication to improving First Nations health and wellness. A proud member of the Mohawks of Akwesasne, his leadership at the FNHA centered on embedding cultural safety and humility in health services, strengthening governance partnerships, bringing services closer to home and providing steady leadership throughout the organization's response to multiple public health emergencies and challenges.

Richard's leadership was also pivotal in enhancing the quality and accessibility of services for First Nations in BC. Together with FNHA staff and FNHC leadership, he successfully negotiated a renewed Canada Funding Agreement, securing a 10-year funding agreement. As well, he successfully negotiated additional funding for key initiatives such as the 10-Year Strategy on Social Determinants of Health and the Indigenous Health Equity Fund. Time-limited funding streams were integrated into the renewed CFA, ensuring longer-term sustainability of several vital FNHA programs and services. At the provincial level, he advanced the First Nations-Led Primary Care Initiative and secured funding for the construction and refurbishment of treatment centres, land-based healing programs, traditional healing modalities and climate preparedness initiatives.

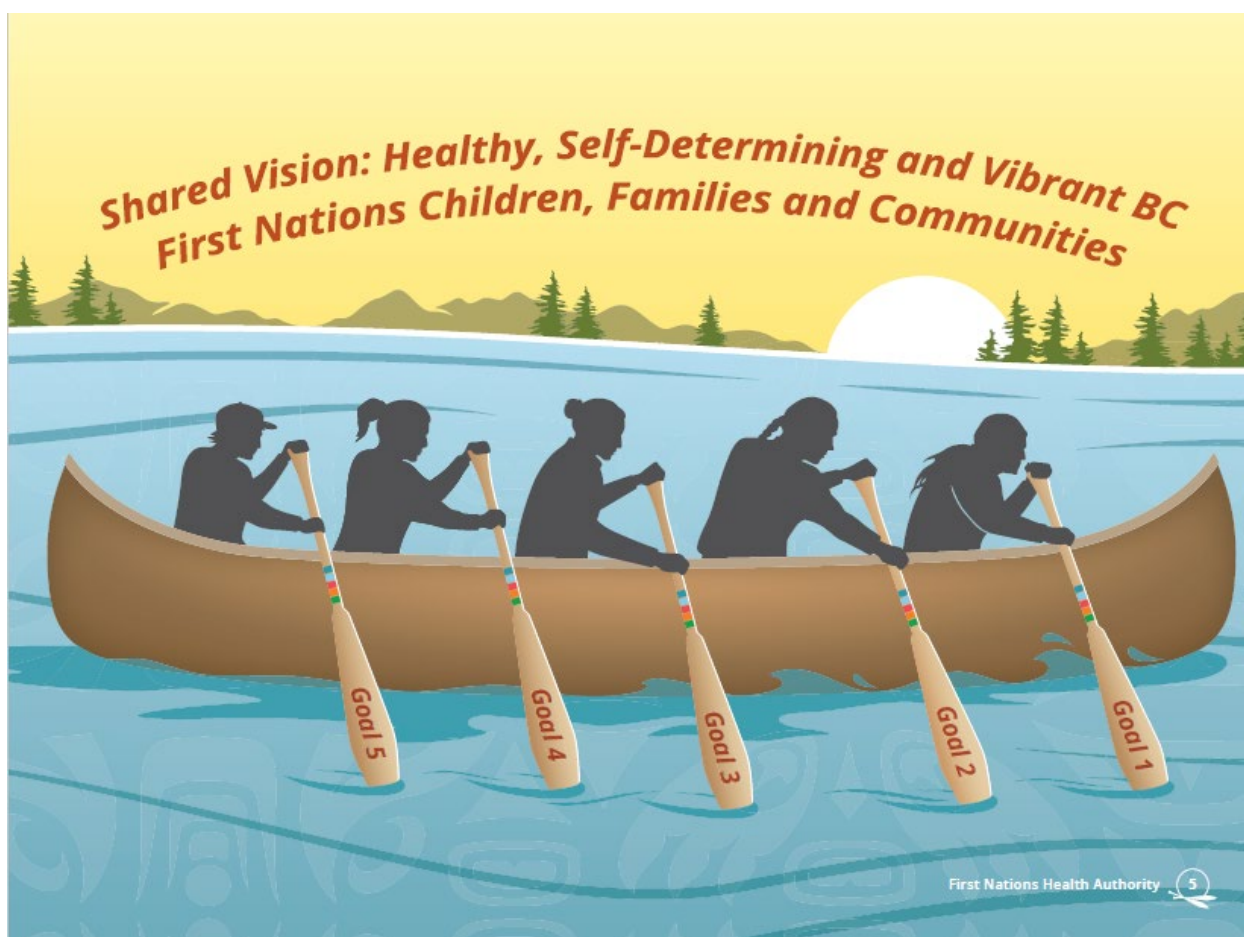
We wish Richard happiness and good health, body, mind, soul and spirit. He has touched countless lives, and we hope the years ahead will be both rewarding and fulfilling.

Introduction

The First Nations Health Authority (FNHA) 2024-25 Annual Report highlights our collective progress on the goals and strategies outlined in our [2024-25 Summary Service Plan: Paddling Together](#). The report also shares our ongoing work towards realizing our [Shared Vision](#) and the advancements made with partners to transform the health system and deliver health care services aligned with First Nations ways and perspectives.

We continue to track progress on our goals through performance measurement and this report shares both quantitative and story-based data on each of the measures in our Service Plan.

Five guideposts are woven throughout the report, highlighting the wisdom and guiding principles that ground all our work at the FNHA. The report also contains updates from each of the five regions, highlighting progress made towards our goals and the regional health and wellness plans for the [Fraser Salish](#), [Northern](#), [Interior](#), [Vancouver Coastal](#) and [Vancouver Island](#) regions.



Our Goals and Strategies

Our goals reflect the strategic-level aspirations of the FNHA for the duration of our Service Plan. In accordance with our approach to planning, the goals align with the priorities identified in regional health and wellness plans. Each goal is coupled with an outcome statement that describes the desired changed state resulting from our course of action. Strategies are also identified for each goal, which describe more specific mechanisms and processes by which the FNHA will work towards our desired outcomes. Lastly, our Service Plan outlines operational priorities for the 2024-25 fiscal year. These priorities describe where and how efforts were focused this past year in relation to the goals and strategies.



Goal 1: Governance and Partnerships

Drive transformation through the BC First Nations Health Governance Structure and partnerships by advancing work with health governance partners to take action on First Nations priorities around embedding First Nations health and wellness perspectives throughout the system.



Goal 2: Access to Quality Services

Enhance access to culturally safe health and wellness and primary care that reflects First Nations perspectives of wellness, while advancing First Nations-led primary health care projects and nursing services and virtual options to bring services closer to home.



Goal 3: Mental Health and Wellness

Enhance culturally safe mental health and wellness approaches. Healing from root causes of trauma through improved culturally safe mental health, harm reduction and substance use approaches.



Goal 4: Addressing Anti-Indigenous Racism

Advance First Nations approaches to addressing anti-Indigenous racism. Improve culturally safe health care experiences where First Nations in BC feel heard, valued and seen.



Goal 5: Health and Wellness Innovation

Drive community-based and nation-based health and wellness innovation together with First Nations and other partners. Collaborate with partners to access sustainable funding for innovative program and service delivery models.

Our Guideposts

Our Service Plan includes guideposts, which are topics of focus that flow across all five of our goals. They reflect what we consistently heard throughout our engagements with First Nations in BC and are intended to keep us grounded and offer ongoing direction as we implement our Service Plan's goals and strategies.



First Nations Perspective on Health and Wellness

We uphold a shared understanding of a wholistic view of health and well-being that understands health and wellness journeys are owned by the individual and influenced by families, communities, environments and other Social Determinants of Health.



Quality

We weave cultural safety and humility and First Nations-specific anti-racism practice into the health and wellness system to improve health outcomes for First Nations in BC. We also strive for excellence and continual improvement by seeking feedback from First Nations and building on wise practices to enhance the quality of programs and services.



Culture and Decolonization

We work with our partners to address First Nations-specific racism and transform the health system in ways that reflect the connection to land, language and culture that are foundational to First Nations health and wellness. We embrace wisdom and guidance from communities and Nations to embed First Nations priorities and perspectives in our programs, services, partnerships and operations.



Urban and Away-from-Home

We work to address barriers and expand programs and services to support First Nations peoples living in urban areas and away-from-home who have not always been meaningfully included in service design or delivery.



Innovation

We lift up, celebrate and support innovative, community-led approaches to transforming the planning and delivery of health services in ways that will improve health outcomes for First Nations in BC.

Goal 1: Governance and Partnerships

Drive transformation through the BC First Nations Health Governance Structure and Partnerships

Outcome Statement: A transformed health system in BC reflecting First Nations priorities, supported by the First Nations Health Governance Structure.

Strategy 1.1: Collaborate with the First Nations Health Council (FNHC) and the First Nations Health Directors Association (FNHDA) to advance our shared vision and strengthen BC First Nations health governance and partnerships.

Strategy 1.2: Operate through excellence, strengthening regional decision-making and bringing services closer to home.

Strategy 1.3: Champion health and wellness with partners to advance Social Determinants of Health.

2024/2025 Operational Priorities

- Bring FNHA into compliance with the Accessible British Columbia Act by September 1, 2024.
- Develop and implement a plan for FNHC-FNHDA-FNHA engagement that is in alignment with regional engagement and decision-making pathways and includes an organization-wide system that ensures that community and Nation priorities are driving the work.
- Actively center the 7 Directives, cultural teachings and practices at the core of our work with thoughtfulness and intention – and with a focus on lifting up Elders, Knowledge Keepers and youth.
- Develop an operating model that clarifies the evolved decision-making scope of VPROs under regionalization and how FNHA central and regions will work together as one with clear roles, responsibilities and accountabilities to facilitate informed decision-making and health system transformation.
- Develop and implement a plan to establish design guidelines for health facility construction and office improvement projects by the end of FY 2024/25.
- Monitor and engage with First Nations on legislative opportunities pertaining to provincial and federal legislation, (including UNDRIP and long-term care legislation) and advance appropriate responses as per the FNHA's mandate and Directive 6: be without prejudice to First Nations interests.

Governance and Partnerships



Strategy 1.1: Collaborate with the FNHC and the FNHDA to advance our shared vision and strengthen BC First Nations health governance and partnerships.

Stories of Progress

FNHA and the Tripartite Committee on First Nations Health complete the 2024 Evaluation of the BC Tripartite Framework Agreement

The [Evaluation of the BC Tripartite Framework Agreement on First Nations Health Governance](#) (BC TFA), was completed in April 2025 and presented at Gathering Wisdom for a Shared Journey XIII. The evaluation, which reviews the fiscal years 2018-19 to 2023-24, tells the story of the progress made by the tripartite health partnership and the BC First Nations Health Governance Structure in advancing their shared efforts to transform the health system for First Nations in BC.

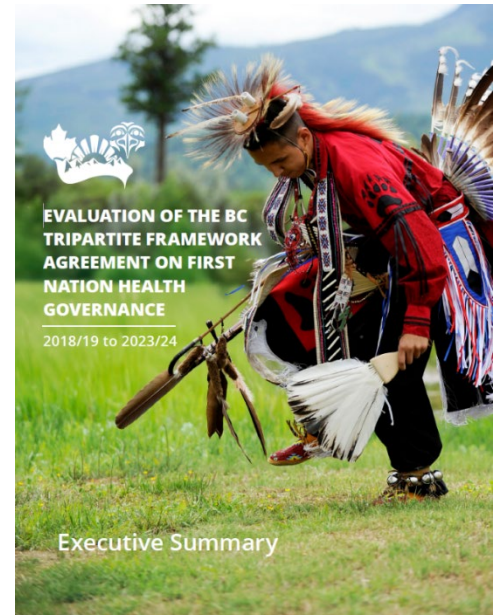
The evaluation found that the Tripartite Partners and BC First Nations Health Governance Structure have largely met, or are actively working to meet, their respective mandates, roles and responsibilities outlined in the agreement. Through collaborative efforts, the BC TFA has contributed to important advancements for First Nations in BC, including increased health funding, strengthened engagement and involvement in decision-making, and improved access to quality and effective health care.

However, despite this progress, First Nations specific racism and discrimination persist, underscoring the need for continued action, including within the health emergency management landscape. System transformation is an ongoing journey, one that requires sustained commitment, collaboration and innovation to address persistent health inequities and to advance health and wellness for First Nations in BC.

FNHA, FNHC and FNHDA co-develop a plan for engaging First Nations in BC and advance a Joint Pillar 2025/26 Action Plan

The FNHA, FNHDA (First Nations Health Directors Association) and FNHC (First Nations Health Council) held Joint Planning sessions in October 2024 and June 2025. These sessions brought together staff, senior leadership, and Health Directors from across the province and resulted in an FNHC-FNHDA-FNHA engagement plan aligned with regional engagement and decision-making pathways. The plan establishes an organization-wide system that puts community and Nation priorities at the forefront.

Joint Planning sessions will continue throughout 2025 and 2026. A Joint Pillar 2025-26 Action Plan is currently under development to guide our joint efforts and ensure ongoing progress in advancing First Nations health in BC.



Regional Spotlight: Fraser Salish

Renewed Partnership Accord Signed for the Fraser Region

On February 1, 2024, a significant step in collaborative health governance took place at Shxwhá:y Village in Chilliwack, BC. The Fraser Salish Region supported the signing of the Renewed Partnership Accord between Fraser Health Authority, the Ministry of Health and for the first time, Métis Nation BC. This agreement signifies a renewed commitment from all parties to work together on health initiatives within the region. A key outcome of this accord was the establishment of the Indigenous Health Collaboration Council (IHCC), a new body designed to facilitate shared decision-making regarding Indigenous health.



Measuring our Progress: Walking Together – We Are One

Indicator: Percentage of 2019 BC Tripartite Framework Agreement Evaluation Recommendations Addressed

The 2019 Evaluation of the BC Tripartite Framework Agreement on First Nation Health Governance told the story of change amongst the Tripartite Partners and within the broader health system. The focus was on governance, tripartite relationships and integration.

- 100% of the 23 recommendations have been or are in the process of being addressed. Two are fully implemented; the remaining 21 are supported by ongoing work.
- Tripartite Partners produced a progress report of activities undertaken in response to the 23 recommendations between 2020 and 2023.

Strategy 1.2: Operate through excellence, strengthening regional decision-making and bringing services closer to home

Stories of Progress

FNHA completes the 2024 Evaluation of the FNHA, identifies opportunities to enhance organizational excellence and operations

In April 2025, the FNHA released its [2024 Evaluation of the FNHA](#), covering fiscal years 2019/20 to 2023/24, and presented at Gathering Wisdom for a Shared Journey XIII (FNHA Evaluation). The evaluation assesses the organization's progress against its mission, goals and strategies. It highlights significant strides in advancing organizational objectives and the Shared Vision of healthy, self-determining and vibrant BC First Nations children, families and communities.

As detailed in the FNHA Evaluation, the FNHA transformed its relationships and funding arrangements with First Nation Health Providers, shifting to a partnership approach grounded in reciprocal accountability. It leveraged additional funding to sustain and expand health programs and services, enhanced engagement with First Nations communities and responded to emerging community priorities.

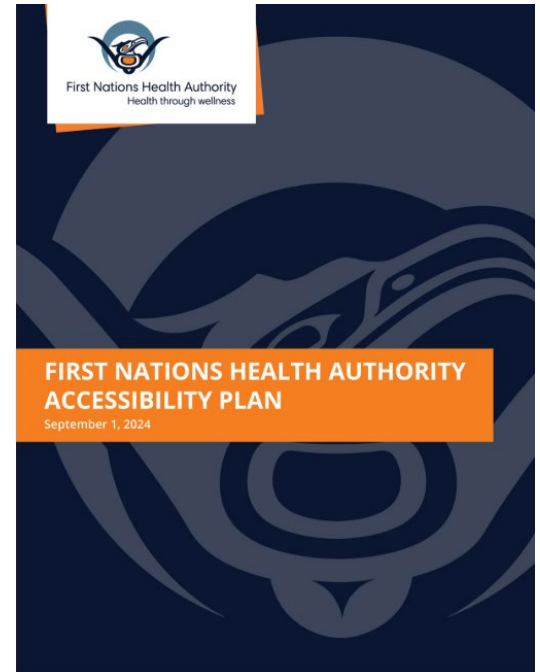
The evaluation identifies opportunities to address unmet community needs, strengthen engagement practices, define a long-term regionalization strategy and refine funding relationships. It recommends strategies to close these gaps and accelerate the ongoing transformation of health services for First Nations in BC.



FNHA achieves compliance with the Accessible British Columbia Act

In alignment with the Accessible British Columbia Act, which came into effect on Sept. 1, 2022, the FNHA met all its regulatory requirements by Sept. 1, 2024. This work reflects our commitment to creating an equitable and barrier-free society that enables the meaningful participation of everyone, including people with disabilities. To support this work, the FNHA established a new Accessibility Advisory Committee, [Accessibility Plan](#), and launched a feedback tool to gather input on accessibility.

This foundational work builds on the FNHA's ongoing commitment to inclusivity and diversity. We continue to promote cultural safety and humility among our staff and maintain [corporate policies](#), such as a Respectful Workplace Policy and a Flexible Work Arrangements Policy, both of which underscore our commitment to fostering an inclusive work environment.



FNHA responds to cybersecurity incident May 2024

During the week of May 13, 2024, the FNHA became aware that it was the victim of a security incident in which an unauthorized third party gained access to the FNHA's computer system (the "Incident"). The FNHA detected and immediately responded to the Incident while it was occurring, stopping the exfiltration of information in progress from the system and preventing the installation of any ransomware on its computer system. The unauthorized third party was able to access and exfiltrate certain files. Following closely on its immediate response, the FNHA retained third party cybersecurity experts to assist it in containing, investigating and recovering from this incident and it notified relevant organizations and law enforcement authorities of the Incident.

The type and amount of information potentially accessed in the Incident varied widely from individual to individual and may have included personal information such as demographic information, Certificate of Indian Status Card Number, Personal Health Number, eligibility and health insurance claim information for the FNHA Health Benefits Program, payroll information of some current and former employees, tuberculosis screening test results and some Compliments and Complaints information filed with the FNHA Quality Care and Safety Office.

As a result of the cybersecurity incident, the FNHA offered impacted current and former employees and individuals who had their Certificate of Indian Status Card Numbers affected, free 2-year access to credit monitoring and identity theft services and made available to individuals a Cyber Incident Support Centre where individuals could submit questions about the Incident by telephone or email.

Improving Medical Supply Delivery Brings Services "Closer to Home" for First Nations Communities

Over the past year, the FNHA have worked to assess and enhance how medical supplies, equipment and medicines are distributed to FNHA-operated health centers and nursing stations. With a focus on remote and rural locations, the goal of this work has been to establish effective and efficient pathways for ensuring our various primary care sites have the supplies they need to provide timely and quality care.

As a first phase, a new Clinical Supplies Team developed processes for sourcing, inventory management and shipping to advance a "closer to home" delivery model. As a result, the average order delivery time dropped from 26.6 days to 6.2 days within just four months.

The next phase will strengthen inventory management at the community level and expand the initiative to First Nations-Led Primary Care Centres. These efforts play a key role in regionalization, strengthening community-level health facilities to support First Nations people in accessing care closer to home.

FNHA Strengthens Regional Operations

To support operational excellence and advance community priorities around accelerating regionalization, various steps have been made over the past year to strengthen capacity of regional teams. This has included the re-establishment of a Chief Operating Officer position within the organization who has dedicated responsibility for advancing regionalization.

Regional Spotlight: Interior

Nation-Based Governance Strengthens Community-Level Health Care in the Interior Region

As defined by the St'át'imc, Secwepemc, syilx, Tšìlhqot'in, Dākelh Dene, Nlaka'pamux and Ktunaxa, the 7 Nations in the Interior Region, regionalization affirms and upholds Nation governance and self-determination, with Traditional Wellness as its foundation. This approach supports the development and implementation of wholistic care that meets the specific needs identified by each Nation and Community. Regionalization is a strategic priority of the Interior Region and underpins all initiatives and team approaches. It embodies Directive #1: "Community-driven, Nation-based."

Following a Nation-led approach, the Interior Region actively advocates bringing programs, positions, and financial resources directly to Nations. This increases local decision-making and builds capacity within communities.

Since transferring nursing services to the region (FNHA Health Centres and Ulkatcho Nursing Station), the Interior Region has successfully recruited and retained nursing staff for most vacant frontline community-serving positions. The Regional Nursing Team met with the sites and the communities they serve to build relationships and partner on strategic nursing work plans for daily programming and operations. These efforts have improved retention of nursing staff.

Other ongoing activities in support of regionalization include:

- **Gathering specific data from the Nations to define regionalization** from a Nation-based perspective.
- **Working with community and Nations to increase primary care resources** closer to home. This includes doctors, nurse practitioners, Traditional Wellness, mental health, nursing outreach, and navigation support. This work has included the allocation of new resources from FHNA and Ministry of Health towards the establishment of two Nation-led First Nations Primary Care Centres in the St'át'imc and Nlaka'pamux Nations.
- **Continuing to work with Nations on policy barriers** that impact service delivery inclusive of all government and service delivery partners. As well, supporting Nation and Community work on First Nations Primary Care Networks service and policy agreements.
- **Working in partnership with Nations** that have developed societies as an accountability mechanism to enhance their Nation-based health governance approaches and infrastructure for Nation shared services.

Measuring our Progress: Closer to Home

Indicator: Transfers of programs, services and staff closer to home.

- Direct Community Services Funding increased 42 per cent from \$259.4 million in fiscal year 2019/20 to \$368.9 million in fiscal year 2023/24. Health Services and Programs funding increased 81 per cent from \$99.9 million in fiscal year 2019/20 to \$184.2 million in fiscal year 2023/24.
- As programs and services were transferred to regional offices, regional staff numbers grew from 250 employees in 2019/20 to 577 by the end of 2024/25. Regional staff currently account for 32 per cent of the organization's workforce.

Strategy 1.3: Champion health and wellness with partners to advance Social Determinants of Health.

Stories of Progress

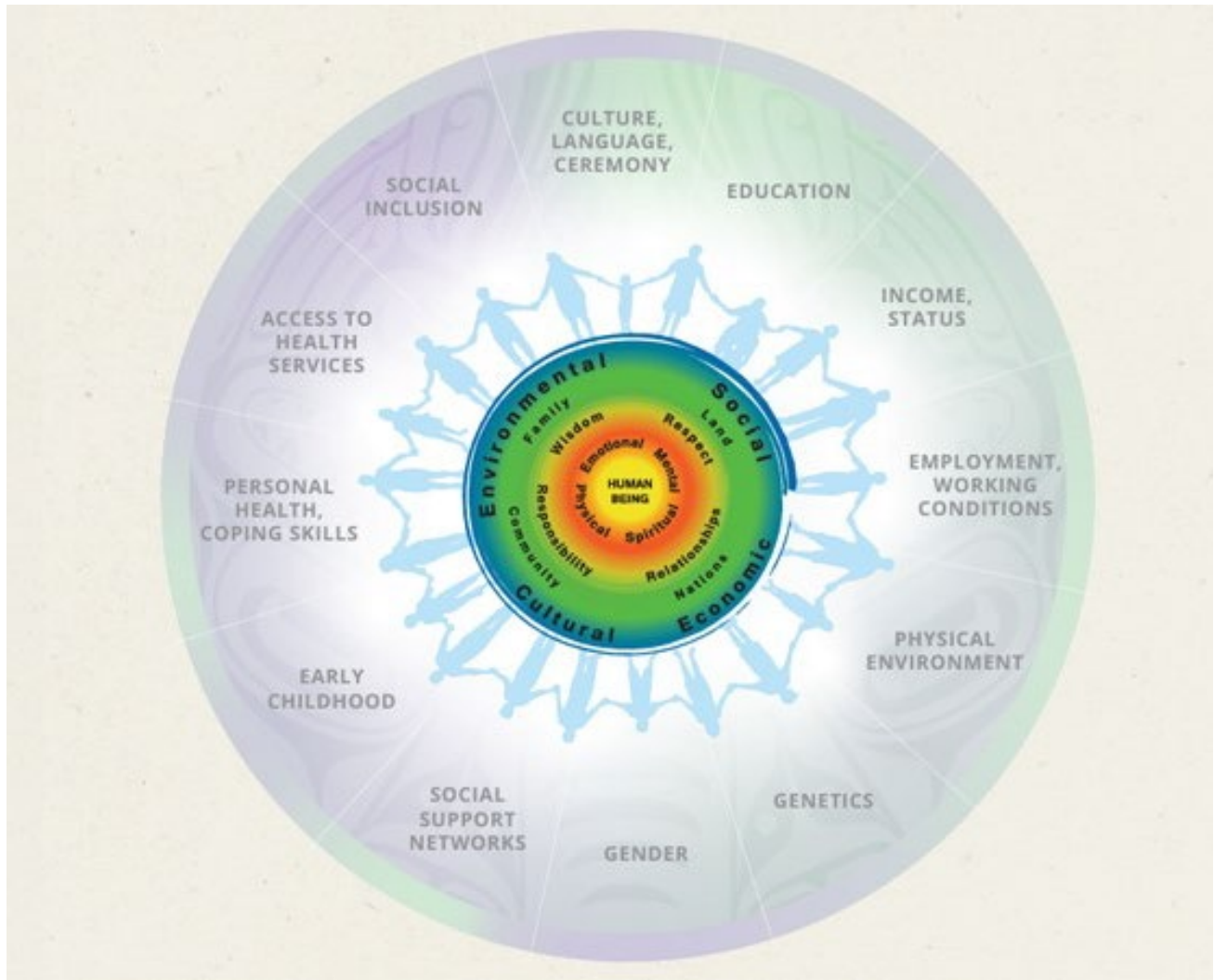
FNHA and Partners Advance Commitment on the 10-Year Strategy on Social Determinants of Health Including a New, More Equitable and Efficient Funding Allocation Strategy

The FNHA, Government of Canada and the Province of British Columbia continue to make progress toward the 43 partnership objectives outlined in [the 10-Year Strategy on Social Determinants of Health](#). The partners are defining plans for long-term, sustainable funding and have planned an inaugural Tripartite Deputy Ministers' Table for Fall/Winter 2025 to chart a path for joint efforts initially focused on housing and food security. The FNHA has drafted a two-year implementation plan, grounded in feedback from communities, to guide the strategy's next steps.

To support implementation of the Strategy, in 2024, the FNHA, the Government of Canada, and the Province of British Columbia embarked on a new funding approach. Each partner contributes \$5 million annually, with the FNHA and Canada committing to 10 years of funding and British Columbia currently committed through March 2026. The funding approach builds on dialogue at regional caucuses and includes a base amount per community, an allocation based on total population (inclusive of members living at home and away from home) and a BC-based measure of remoteness. Communities have flexibility to use funding to meet local priorities and the funding flows without an application process, reducing administrative burden and ensuring equitable access.

The funding supports communities and Nations in addressing health inequities and fostering long-term well-being. Nations are leveraging these funds to build partnerships and secure new investments, including in First Nations food sovereignty. To support implementation, the partners have developed new resources, such as a [SDOH Funding Guide](#), hired regional SDOH staff to walk alongside communities, and created a new Framework for sharing the impact of this 10-Year Strategy.

The framework has been built from the indicators and outcomes included in the 10-Year Strategy, the FNHA and BC's Office of the Provincial Health Officer's Population Health and Wellness Agenda and the Regional Health and Wellness Survey, with the aim of lifting up strengths-based indicators and facilitating simple and streamlined reporting. The FNHA will track and regularly publish provincial and regional-level data aligned with these indicators through existing data collection pathways while highlighting stories of impact and change direct from communities and Nations.



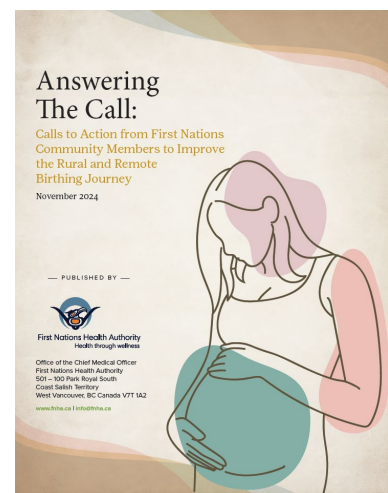
The Social Determinants of Health

The Social Determinants of Health are the social, economic, cultural and environmental factors that shape individual and community health across the lifespan, often more significantly than access to health care itself. These include factors such as education, income, early childhood experiences, employment, housing and access to culture, language and ceremony.

While Western systems are only beginning to recognize their impact, First Nations have long understood health as a balance of spiritual, physical, mental and social well-being rooted in self-determination and cultural strength.

FNHA releases calls to action to improve the rural and remote birthing journey

In November 2024, the Office of the Chief Medical Officer released [Answering the Call: Calls to Action from First Nations Community Members to Improve the Rural and Remote Birthing Journey](#). *Answering the Call* lifts up the collective voices of First Nations Life Givers, Elders and system partners, highlighting the need for system transformation to improve processes for birthing and maternity care. The report calls on the BC Ministry of Health and the five regional health authorities to operationalize calls to action to improve the birthing experience for First Nations in BC who live in rural and remote communities.



Spotlight: Fraser Salish Region

Navigation, Advocacy and Support for Maternal Health

The Fraser Salish Maternal Child and Family Wellness and Wellness Navigation teams build partnerships with community groups and health organizations to support the wellness of mothers, children and families. These collaborations provide culturally safe care, including housing, treatment services and support for Indigenous birthing practices.

On June 19, 2024, Tem'elíle Midwifery, whose name means "Salmonberry Time," held a celebration to welcome babies born between July 2023 and June 2024. During the ceremony, midwives laid cedar to receive the babies. Babies and their parents were blanketed and circled the room before resting on the cedar. Darcy Paul, master of ceremonies, expressed the intent to welcome these children into the lives of their families, communities, and Nations. Willow Walker, Council Member at Seabird Island, welcomed the babies, noting that "a new baby is the beginning of all things wonder and hope." This event demonstrates a direct application of cultural safety and humility by centering Indigenous traditions in a healthcare context.

The Tem'elíle Midwifery, whose name means "Salmonberry Time," receives funding from FNHA and operational support from the Fraser Salish regional team. The program guides Life Givers through pregnancy, birth and the early weeks of life, encouraging prenatal visits at clinics in Agassiz or the Stó:lō Health Center to increase access to culturally safe care early in their journey.

The program's success has led to the hiring of a second midwife, which will boost capacity and double the number of Life Givers and families benefiting from culturally sensitive care. This expansion reflects the FNHA's commitment to supporting services that are both clinically sound and deeply embedded with cultural safety and humility.

Goal 2: Access to Quality Services

Enhance access to quality health and wellness services

Outcome Statement: Access to culturally safe health and wellness and primary care that reflect First Nations perspectives of wellness.

Strategy 2.1: Advance timely and equitable access to culturally safe, team-based primary care.

Strategy 2.2: Champion the BC First Nations Perspective on Health and Wellness with First Nations.

Strategy 2.3: Transform FNHA programs and services in areas such as First Nations Health Benefits, Health Emergency Management and Urban and Away-From-Home.



2023/2024 Operational Priorities

- Develop and publish an interim Population Health and Wellness Agenda by end of FY 2024-25, as per commitments made within the Transformative Change Accord: First Nations Health Plan.
- Build and advance an FNHA health and wellness agenda that builds awareness, understanding and engagement on priority topics for wholistic wellness.
- Advance dialogue and develop culturally safe health literacy messages on the application of medical assistance in dying (MAID) legislation in FNHA's clinical settings, including dialogue involving First Nations clients, health professionals and partners.
- Complete implementation of the Kucén transportation system in 18 communities.
- Advance the First Nations Primary Health Care strategy, including improving access to virtual care, embedding cultural safety and humility, increasing informational continuity through implementation of a provincial Electronic Medical Record (EMR), finalizing medical affairs contracts and creating supports for Nations in need of medical affairs.
- Continue immunization education, competency registration, renewal and certification for Registered Nurses, Licensed Practical Nurses & student nurses across the province in First Nation communities.
- Build an Urban and Away-from-Home (UAH) Engagement Framework while expanding awareness of and connections to existing services for the UAH population, including primary care, mental health and wellness and health emergency management.
- Develop a strategy to address medical transportation gaps for communities; design a prototype service model for ride share options; and build on our partnership with BC's Ministry of Transportation and Transit while identifying potential grants that can help fund community investments.
- Support communities in adapting to a changing climate, including preparedness for the health impacts of climate-related emergencies, food security and protection of those most at risk of climate-related health outcomes.
- Achieve initial service offerings in the remaining 13 First Nations-led Primary Health Care Centres (FNPCCs) by Q3 of FY 2024-25.

Strategy 2.1: Advance timely and equitable access to culturally safe, team-based primary care.

Stories of Progress

Thirteen of fifteen First Nations-Led Primary Care Centres now open, bringing services closer to home.

The First Nations-Led Primary Health Care Initiative (FNPCI) is a collaborative effort between the FNHA, the BC Ministry of Health, and 114 participating First Nations communities, including urban and away-from-home First Nations individuals. This initiative is part of the broader Primary Care Transformation underway in BC and aligns with the principles of the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP). As a start, the initiative aims to establish 15 First Nations-led Primary Health Care Centres (FNPCCs), three in each of the FNHA's regions, to serve both rural and urban areas.

The FNPCI is Nation driven and community led. The vision for these centres is grounded in a cultural foundation, as shared by Chief Justin Kane, Ts'kw'aylaxw First Nation, on the opening of the northern St'át'imc Primary Care Centre:

"Our new primary care centre holds a different aspiration—health and wellness practices that are rooted in our ancestral knowledge. This is important as it helps to mitigate the impacts of colonialism and helps us to return to our wholistic and traditional healing practices. Having an appropriate, safe and accessible space for our members to reach out for their health needs is important to our wellness."

Every aspect of the planning, design and implementation of the centres is directed by the local communities and grounded in the local culture, language and traditions of the Nations. The aim is for clients to feel safe, welcomed, valued and respected and heard when they enter these centres and access care.

These centres provide culturally safe, community-driven care that reflects First Nations values and ways of knowing. Care teams may include Traditional Wellness Coordinators, Traditional Healers, Food Advisors, Elders, Doulas, Registered and Licensed Practical Nurses, Dieticians, Pharmacists, Physiotherapists, Mental Health Professionals, Family Physicians, Nurse Practitioners and other allied health and cultural practitioners.

Critical support for the capital construction and renovation costs associated with the centres this past year was provided by the Indigenous Health Equity Fund (IHEF). IHEF funds also supported the Medical Affairs and Wellness Office.

Medical Affairs and Wellness Office: Advancing Culturally Safe Primary Care Services

First Nations-led primary health care transformation requires specialized resources and technical expertise to recruit, contract and support medical staff (physicians, nurse practitioners and midwives). Using a two-eyed seeing approach, the FNHA Medical Affairs and Wellness Office (MAWO) supports medical staff to be healthy, engaged and at their best to provide high quality and culturally safe care in the communities they serve across BC.

A major milestone this year was the transition of group clinical service contracts for 57 physicians from regional health authorities to the FNHA for Lu'ma Medical Centre and the FNHA Virtual Health Services (effective April 1, 2025). Holding contracts enables the FNHA to enhance clinical oversight, strengthen relationships, and ensure clinical services align with community priorities.

Working collaboratively with provincial, regional and community partners, MAWO also supported the recruitment of 31 medical staff to expand equitable access to primary care services. MAWO helps to recruit First Nations medical staff and ensure that all medical staff are equipped to provide culturally safe care through education, training and clinical supports.



MAWO booth for medical staff recruitment

As of March 31, 2025:

- Thirteen of 15 centres are providing traditional wellness and/or Western primary care services to communities. The remaining two centres are preparing to open later in 2025.
- Through support of MAWO, four centres have onboarded family physicians and/or nurse practitioners.
- Five centres are currently using the FNHA-MOIS Provincial Electronic Medical Records (P-EMR) system, with three more FNPCCs preparing to adopt the EMR shortly.

Spotlight: Interior

Progress Towards Three New First Nation Primary Care Centres in the Interior Region

All Nations Healing House

The All Nations Healing House has been operating for 30 months, with 70 per cent of staff positions filled. To date, 1,417 clients have received care, with more than 570 clients attached to two full-time physicians. These numbers continue to grow. A Mental Health Clinician has recently joined the team, providing mental health services alongside existing staff who offer primary care (physician and nursing), Traditional Wellness, wellness navigation, and transportation services. For more information, see the video [All Nations Healing House: a Story of Reconciliation](#).



The All Nations Healing House in Williams Lake provides culturally safe, integrated primary healthcare for First Nations people and their families.

Northern St'át'imc Primary Care Centre

The northern St'át'imc Primary Care Centre opened in Spring 2025. The Centre's services will be tailored to Communities' needs and grounded in St'át'imc culture, language, and traditional wellness practices with Elders on-site. The Centre will offer wholistic and accessible care through a blend of primary care provider services including Traditional Wellness, mental health, nursing outreach, and navigation support.

The Nlaka'pamux Nation First Nations Primary Care Centre

The Nlaka'pamux Nation First Nations Primary Care Centre is operated by the Nlaka'pamux Health Services Society (NHSS), a non-profit incorporated in 2019, that will use its existing governance structure to oversee the new centre. First Nations people and their families in and around Merritt will gain access to enhanced multi-disciplinary team-based primary health services through a shared services approach that also builds capacity within the Nation and its Communities.

Measuring our Progress: Pathways to Access

Indicator: Clients' satisfaction with transformed FNHA programs and services.

Recent statistics show that the All Nations Healing House is demonstrating high rates of client satisfaction. The 42 responses received in fiscal year 2024/25 reflect high satisfaction rates:

- **98%** were satisfied with the wait time.
- **98%** felt the appointment booking process was easy.
- **93%** felt their care provider explained things in an understandable way.
- **95%** felt their care provider listened to them.
- **100%** were satisfied overall with their visit.
- **95%** felt they received culturally safe care.

Health Benefits overall client satisfaction in FY 2024/25 saw a slight decrease from the previous fiscal year, while satisfaction with claim coverage increased.

- Overall satisfaction in 2024/25 was **40.8%**, down from 41.2% in 2023/24.
- Satisfaction with claim coverage in 2024/25 was **56.3%**, up from 50.5% in 2023/24.

Survey of the First Nations Virtual Doctor of the Day Service:

- **96%** respondents satisfied overall.
- **94%** felt the care they received was culturally safe.
- **96%** would recommend the service to their family and friends.

Survey of the First Nations Virtual Substance Use and Psychiatry Service:

- **92%** respondents satisfied overall.
- **93%** felt the care they received was culturally safe.
- **94%** would recommend the service to their family and friends.

Strategy 2.2: Champion the BC First Nations Perspective on Health and Wellness with First Nations.

Stories of Progress

Celebrating 25 Years of the Aboriginal Head Start On-Reserve Program

The Aboriginal Head Start on Reserve program supports First Nations communities to design and deliver local family wellness services, including outreach, parent education and early intervention. Since 2018, the FNHA has funded Head Start programs in over 70 per cent of BC First Nations communities, increasing to 151 sites in 2024 from the original 122 in 2018 and creating more than 3,300 spaces for First Nations children. The FNHA's vision is to expand Head Start so that every First Nations community has equal access and every First Nations child receives a strong start; early-life care is essential to lifelong wellness.

Between November 28–29, 2024, the FNHA hosted the [Aboriginal Head Start On Reserve 25th Anniversary Gala](#). Over 300 attendees—including community members, early childhood educators and Elders from both original and newer sites—gathered to honour program achievements and share stories. The 69 communities that launched programs in 1999 were also honoured. Former CEO Richard Jock described early childhood learning as "prevention in the purest form" for health and wellness, praising educators who connect children to language and culture from birth through age six.



Children drumming at an Aboriginal Head Start On-Reserve program.

Providing culturally safe end-of-life care and supports

The Indigenous End-of-Life Guide Training program trains and supports natural helpers within First Nations communities to provide culturally safe care for individuals nearing end of life, as well as for their families experiencing grief and loss. The program also fosters respectful, culturally appropriate conversations to reduce stigma around end-of-life planning.

An evaluation found that the program trained 455 guides from 163 First Nations communities and has contributed to the reclamation, revitalization and relearning of traditional and cultural end-of-life healing practices. Guides reported that the training expanded their access to information and knowledge-sharing opportunities, enhanced their skills to deliver culturally safe end-of-life care, and deepened their understanding of First Nations perspectives on end-of-life care, grief and healing.

Guides conservatively estimated that between 400 and 650 individuals and families have benefited from their support, though this number is likely underreported. The evaluation also identified opportunities to strengthen program design and delivery to further build community capacity and expertise around end-of-life care. Despite these gains, many community members still spend their final days outside their home communities, and more resources, time and effort are required to ensure First Nations people can choose culturally grounded end-of-life care.



Indigenous End-of-Life Guide Training Cohort, North Vancouver

Spotlight: **Vancouver Island Region**

Health Champions Recognized for their Dedication and Commitment to First Nations Wellness

On November 13, 2024, leaders from FNHA, Island Health, and the 50 First Nation communities on Vancouver Island gathered in Snaw-naw-as and Qualicum Territory at the Tigh-Na-Mara Resort in Parksville for the Partnership Accord Dinner with Vancouver Island Governance and Health Leadership.

This annual gathering, part of the Fall Regional Caucus, provides an opportunity for FNHA and Island Health to meet with First Nations health leadership and share progress on collaborative efforts to advance First Nations health and wellness.

Health Champions were honoured with a First Nations-designed blanket in recognition of their dedication and commitment to health and wellness. Recipients from across the region were selected through an open nomination process and partnered selection committee. Eight Health Champions were chosen across three categories: Youth, Community, and Health Leader/Service Provider. Health Champions, including both First Nations members and allies, were recognized for their exceptional

contributions in actively supporting and advocating for First Nations health and wellness initiatives in their communities and regions.

TELAXTEN (Paul Sam) shared a drum song as award recipients were presented with their gifts before First Nations Governance & Health Leadership, and health system partners attending the dinner.



Left-to-right: Recipients (Vanessa Charlong, Olivia Peters, Bonnie Smith, Hayleigh Watts, John Sampson, Dean Wilson, Vanessa Sharkey); Drummer/Knowledge-Keeper TELAXTEN (Paul Sam).

Strategy 2.3: Transform FNHA programs and services in areas such as First Nations Health Benefits, Health Emergency Management and Urban and Away-From-Home.

Stories of Progress

Making Medical Travel Easier: Updates to the Medical Transportation Benefit

Kucén (pronounced koo-hen)—a Secwepemctsin term meaning "to wander," "to travel far away," or "to go abroad"—is the FNHA's online medical travel booking system, established to simplify patient travel coordination and streamline reporting requirements. In 2024/25, Kucén was implemented in 20 communities, surpassing the launch target of 18. To date, 30 community organizations, including the Health Benefits Operations team, have adopted Kucén.

Other enhancements to the Medical Transportation Benefit this year included:

- An increase in the standard mileage rate to \$0.29/km from \$0.25/km, and an increase in the special mileage rate for remote communities to \$0.35/km from \$0.31/km (effective April 2025).
- The inclusion of travel support to identified FNHA-funded trauma and recovery programs, including *Tsow-Tun Le Lum*, *Kackaamin Family Development Centre*, *Round Lake Treatment Centre*, and *Esk'etemc Recovery House*. Additionally, travel to the *Orca Lelum Youth Treatment Centre* is now covered under the FNHA-funded substance use treatment centre policy (effective December 2024).

- An update to the meal rate to cover the cost of two meals for Clients on same-day trips to help ensure Clients have access to healthy food options while travelling for medical care and inflationary adjustments to address rising food prices in restaurants across BC.

The next phase of enhancements to Medical Transportation, to be announced in 2025, will focus on addressing barriers to access for rural and remote communities.

Building a Responsive and Community-Driven System for Health Emergencies

The FNHA's Health Emergency Management team coordinates responses to emergencies that may affect the health of First Nations in BC. To ensure a cohesive approach, the FNHA holds an annual gathering for HEM teams from across the province. Hosted by the FNHA's Northern Region, this year's gathering was held from March 17-21, 2025, in the Witset First Nation and the Sik-E-Dakh community.

This gathering allows Health Emergency Management staff to understand the local challenges communities face during emergencies. Participants learn about new emergency management tools and processes, ensuring alignment across teams. Presentations highlighted ongoing regional Health Emergency Management work and offered insights into concurrent public health emergencies. The event also featured a strategic planning session on the future of HEM, regionalization, and supporting community autonomy.

To prepare for the 2025 hazard season, participants ran a simulation to test emergency response plans and clarify roles. The FNHA's Business Continuity team also attended, presenting a plan for a standardized, community-driven system to assist First Nations communities during health emergencies. The three-day session ended with a tour of the Ksan Historical Village and Museum, providing a cultural context for the work.



Longhouse from Gitanmaax Indian Band at the Ksan Village Site, the location of the 2025 Health Emergency Management All-Staff gathering.



(Day 1 and 2 hosted at the Witset First Nation ceremony hall, Northern HEM spotlight, March 25-26, 2025)



(Day 3 – FNHA HEM team concluded with a tour of Ksan Historical Village and Museum, March 27, 2025)

Spotlight: Vancouver Coastal Region

FNHA Co-Hosts Health Emergency Management Training in Lil'Wat Nation Territory

FNHA's Vancouver Coastal Region and Mental Health and Wellness teams co-hosted a successful provincial training session in November in collaboration with the Crisis and Trauma Resource Institute (CTRI). The training was held on the beautiful territory of the Lil'wat Nation.

This opportunity was delivered at the request of 14 Nations within the Vancouver Coastal Region to build community capacity for responding to health emergencies and community crises using each Nation's unique cultural approaches.

FNHA remains committed to meeting community requests for training and looks forward to following communities' direction in transforming health emergency management, mental health, and addictions programs and services.

Thirty-seven participants, including community health staff, leaders and traditional Knowledge Keepers attended. Training topics covered harm reduction, crisis response planning, addictions and mental health, and mental health concerns in children and youth.



March 2025: Participants of HEM Training at Lil'Wat Nation Territory

Deepening Connections: The UAH Team's Reach and Impact

The FNHA's UAH team deepened its connection with community members across BC this past year. Through 40 in-person events and presentations, the team reached approximately 1,400 individuals to raise awareness of the services available to the UAH population and ways to stay connected to the FNHA. Interest in UAH initiatives is growing: the program's contact list is now nearly 1,150 people.

The UAH team conducted 20 engagement sessions across the Fraser Salish, Vancouver Island and Interior regions to inform the development of the UAH Engagement Framework and the UAH Health and Wellness Service Needs Report, both due by the end of 2025.

In partnership with the Social Planning and Research Council (SPARC) BC, the team distributed mobile phones to clients in vulnerable situations, supporting access to FNHA programs, services and other social supports. During 2024/25, 195 phones were distributed, including 11 devices topped up with two additional months of service, and to date, the UAH team and SPARC BC have provided more than 3,000 phones in total.

To further support the UAH population, the team funded 21 projects with grants up to \$25,000, totaling close to \$475,000 in funding.



Larissa Wahpooseyan, Advisor on the Urban and Away from Home team leads an engagement session focused on engagement principles and pathways.

Spotlight: Fraser Salish Region

Strong Partnerships, Strong Communities: The Nurturing Our Roots Initiative

The FNHA's Urban and Away-from-Home regional coordinator partnered with the Keginow Native Housing Society in Surrey, the Mission Friendship Centre Society, the Surrey Urban Indigenous Leadership Committee, and Skookum Surrey to deliver three Nurturing Our Roots events in 2024. The initiative, launched in 2023, attracted nearly 330 attendees.

These gatherings focused on nurturing spirit and body. Local Elders offered land acknowledgements, drum groups and singers provided cultural connections, and meals were catered by Indigenous businesses. Attendees also connected with services from the FNHA and other health partners and completed a survey to share their health and wellness needs.

Due to the dedication of partners and volunteers, Nurturing Our Roots will continue across the Fraser Salish region.

FNHA Introduces New Allied Health Department

The FNHA has introduced a new Allied Health department within the Office of the Chief Nursing and Allied Health Officer. This department is now operational and is developing its strategy, structure, and priorities.

The Allied Health department was created to strengthen partnerships with First Nations communities, the Province, and FNHA. Its mandate is to guide standards for all allied health professionals, covering practice, scope, and regulations, and to support the delivery of culturally safe, high-quality, and evidence-informed care.

Currently, the team is guided by the provincial definition of allied health, which describes professionals who deliver preventative, diagnostic, technical, and therapeutic services across the continuum of care. Work is underway to develop an FNHA-specific Allied Health Strategy that reflects the unique needs and perspectives of First Nations communities. To inform this strategy, a Guidance Council is being formed.

FNHA Oral Health: Delivering Care, Empowering Communities

The FNHA's Oral Health Team brings dental services directly to First Nations people in rural or remote areas and helps communities establish and run their own local dental programs through funding and support.

In 2024/25 as part of the Oral Health program:

- Nearly 2,000 First Nations people received dental services from an FNHA dental practitioner as part of the Community Oral Health Services program.
- Nearly 4,500 First Nations children received fluoride varnish and sealant applications as part of the Children's Oral Health Initiative (COHI).
- More than 5,000 First Nations people participated in oral health education sessions focusing on preventative oral health care.

Gold Star Dental Screenings for Children's Oral Health

The Oral Health team enhances quality care delivery through Gold Star Calibration training. Established by Indigenous Services Canada, this training brings clinicians to a Gold Star standard in dental screenings, contributing to quality, consistency and cultural safety in dental care.

The 2024/25 session was the largest ever of its kind in Canada, training 25 clinicians over two days in the community of Stz'uminus First Nation. Each clinician conducted 15 screenings on children aged four to nine. One COHI aide described how reassuring it was to see clinicians providing such culturally sensitive care to First Nations children. This feedback reinforces the Oral Health team's commitment to delivering high-quality, compassionate care.

We extend our gratitude to COHI aides Anita (Stz'uminus), Carmen (Penelakut) and Kat (Halalt) for coordinating children and teachers, and sharing vital local knowledge. We also thank Elder Ruby (Chehalis/Stz'uminus) for opening the event and reflecting on her 45-year journey working in community dental care.

Values in Action: Enacting Relational Work

During their time in the Stz'uminus community, the Oral Health team enthusiastically came together to help revitalize the community garden. They pruned, weeded and seeded new plants, resulting in a rejuvenated space for children and families in the community to safely enjoy.

The work in the garden was a tangible way for the team to express their gratitude for the community's hospitality.



On the beautiful Stz'uminus territory, the Children's Oral Health Initiative Dental Provider team and our incredible Children's Oral Health Initiative Aides—Carmen, Anita, and Kat—came together to achieve the Gold Standard Calibration!

Spotlight: Northern Region

Expanding Culturally Grounded Health Care in the North

To improve local health care, the Northern Region is partnering with communities to make services easier to access. This includes working with local health teams, developing a mobile clinic for remote areas and building new community-led facilities, like a maternity clinic in Prince George. Additionally, a major focus includes working with partners to create new healing centers that can provide culturally grounded support for youth and adults.

Goal 3: Mental Health and Wellness

Enhance culturally safe mental health and wellness approaches

Outcome Statement: Healing from root causes of trauma through improved culturally safe mental health, harm reduction and substance use approaches.

Strategy 3.1: Develop and implement a healing-from-trauma approach focused on the root causes of trauma, including residential school legacies.

Strategy 3.2: Enhance access to a continuum of mental health and wellness approaches, emphasizing cultural healing and prevention.

Strategy 3.3: Implement harm reduction strategies for substance use and the toxic drug crisis.



2024/25 Operational Priorities

- Review existing Mental Health and Wellness (MHW) counselling programs, referral pathways and provider processes to facilitate sustainable access for First Nations individuals and families.
- Strengthen capacity of addictions workers in community to support treatment and aftercare through training and support.
- Advance work and secure commitment from partners to improve access to First Nations specific, including youth-specific, culturally safe and culturally grounded detox, treatment and aftercare options.

Strategy 3.1: Develop and implement a healing-from-trauma approach focused on the root causes of trauma, including residential school legacies.

Stories of Progress

Addressing Residential School Trauma at its Root: Funding for Healing and Wellness

First Nations communities received \$1.9 million in funding under the Expanded Trauma Informed Health Supports program this past year to support healing from the lasting harms of residential schools. This funding was directed to 16 communities with 18 former Indian Residential School sites and three Indian Hospital sites located within their territories. Funded initiatives helped to build local capacity by expanding mental health services and culturally safe supports.

Spotlight: Interior Region

Building a Foundation for Wellness: The Tk'emlúps te Secwépemc House of Healing

A significant new initiative is the Le Estcwiwéy “House of Healing”, located in Tk'emlúps te Secwépemc (Kamloops). This centre will meet the needs of all impacted by the Kamloops Indian Residential School (KIRS) or any other Indian Residential School attendee, including students, day scholars, and intergenerational survivors.

The Le Estcwiwéy House of Healing will offer a safe space that will incorporate trauma-informed programs to support individuals and their families in their spiritual, mental, emotional, and physical healing journeys. Secwépemc cultural values and teachings will be shared through a lens that is land-based and trauma-informed.



March 2023: Announcement of \$12.5 M in federal funding to support Tk'emlúps te Secwépemc House of Healing.

Completion of the Indigenous Treatment and Land-Based Healing Evaluation Report

In the past year, the FNHA has continued to support land-based healing initiatives through the [Indigenous Treatment and Land-Based Healing Fund](#). Community members report that these mental wellness programs create positive change, especially when they foster connections to culture, the land, and family healing.

A 2024 evaluation assessed the Fund's relevance and effectiveness in design and implementation, and identified learnings, early successes and wise practices from initiatives undertaken between FY 2018/19 and FY 2022/23. It found that funded initiatives contributed to numerous positive early outcomes, including healing diverse populations through language revitalization, traditional hunting and gathering, medicine gathering and use, ceremony, and cultural practices. The evaluation also recommended strengthening the reach and impact of land-based healing initiatives for First Nations people by adjusting the funding mechanism and its administration, and by enhancing planning and implementation supports for recipients. It found that communities and Nations would further benefit from additional support in building community capacity and facilitating lateral knowledge exchange of innovative land-based healing practices. Healing on the land is powerful; gathering outdoors helps people connect with themselves, their community, and their culture, leading to lasting change. As one community staff member described:



"The greatest part of the project is seeing the compassion people have for each other; how each individual gains an understanding of their own journey, and that of others. Each person comes out of this camp with excitement, passion, new knowledge, and an outlook on life, ready to move forward."

Kwakwaka'wakw Healing Centre's "gratitude" pit cook, a land-based healing activity supported by the Indigenous Treatment and Land-Based Healing Fund.

Measuring our Progress: Two-Eyed Seeing

Indicator: New/expanded mental health and wellness programs and services supported by the FNHA

- Extended rapid access to private treatment beds for another year, enabling First Nations individuals at highest risk to access care more quickly.
- Expanded tobacco cessation initiatives, including Elder Quit Tips and first cohort of the Connect to Change program, where eight participants quit or reduced tobacco through the 8-week program.
- Funded 40 communities to revitalize traditional medicines through the What's Your Tobacco Initiative in 2025.
- Supported trauma and healing work at 18 former Indian Residential School sites and three former Indian Hospitals.
- Increased access to Opioid Agonist Therapy services across 85 communities and partnered on new provincially funded treatment centres.
- Advanced planning and rollout of new healing lodges, centres, and trauma-informed health supports across BC.
- Working in collaboration with provincial partners on new provincially funded treatment centres (Northern First Nations Alliance, Orca Lelum Youth Wellness Centre, Tsakwa'lutan Healing Centre, Tsilhqot'in Healing and Wellness Model).

Strategy 3.2: Enhance access to a continuum of mental health and wellness approaches, emphasizing cultural healing and prevention.

Stories of Progress

Expanding Treatment and Healing Centres Across BC

In partnership with various organizations, the FNHA has expanded addiction treatment services across BC. Concrete steps have been taken to build two new treatment centres and rebuild six existing ones to create a system of care that respects First Nations culture and provides vital services for First Nations people and their families. This work is supported by a Tripartite Partnership with Government of Canada and the Province of BC, with approximately \$95 million in funding for two new treatment centres and replacement of six existing ones.

Newly Opened Centre in 2024/25

The Tsow-Tun Le Lum Healing House, located on the traditional territory of the Cowichan Tribes, celebrated its Sacred Ceremonial Grand Opening on September 13, 2024. This facility provides culturally safe and trauma-informed services for First Nations people dealing with addiction, trauma or grief. Its wholistic healing programs, which are grounded in traditional culture, include spaces like a sweat lodge, walking trails, and a Big House.



September 13, 2024: FNHA and Tsow-Tun Le Lum celebrate the Sacred Ceremonial Grand Opening of the newly relocated treatment centre in Cowichan Territory.

Centres Under Construction and in Development

Construction has begun on the Seven Nations Soaring Eagle Treatment Centre, which is expected to open in Spring 2026. This new First Nations-led, 16-bed treatment centre is located in the Creston Valley on yaqan nuʔkiy territory. It will offer culturally safe care, aftercare and family lodging rooted in First Nations knowledge.



Shovels hitting the ground symbolize the construction of the new Seven Nations Soaring Eagle Treatment Centre located in Yaqan nuʔkiy near Creston, B.C.

The other two new treatment centres in development are:

- Katzie Treatment Centre (Fraser Salish)
- Shishalh Treatment Centre (Vancouver Coastal)

Additionally, five existing facilities are undergoing replacements as part of the capital plan:

- Telmex Awtexw Treatment Centre (Fraser Salish)
- Carrier Sekani Family Services (Northern)
- North Wind Wellness Centre (Northern)
- 'Namgis Treatment Centre (Vancouver Island)
- Tsow-Tun Le Lum Society (Vancouver Island)

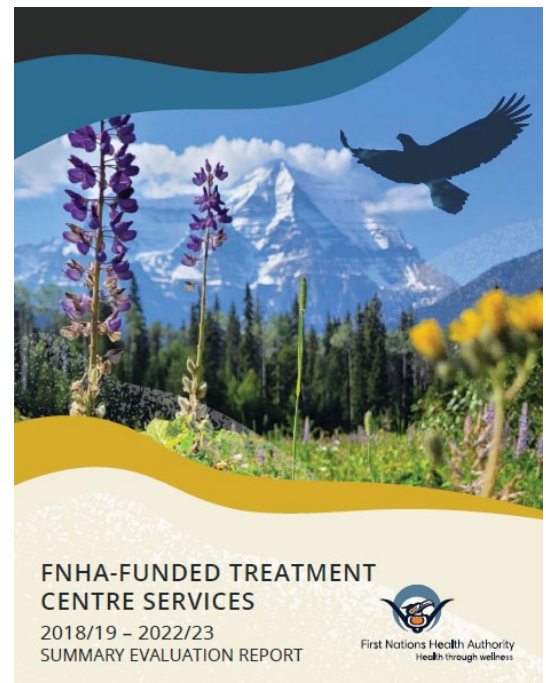
Additional Projects

The FNHA worked with provincial partners on several other treatment centre projects, including initiatives led by the Northern First Nations Alliance, Orca Lelum, Tsakwaluten, the T̓silhqot̓'in Healing and Wellness Centre, and the planned Centre for Excellence.

Completion of the FNHA-Funded Treatment Centre Services Summary Evaluation Report

The FNHA completed an evaluation of FNHA-Funded Treatment Centre Services, assessing their effectiveness and relevance of services between FY 2018/19 and FY 2022/23. The evaluation underscores the importance of providing culturally safe and grounded care rooted in traditional healing. Clients reported improved mental health, enhanced well-being and stronger cultural connections after treatment. However, barriers persist, including long wait times, inconsistent eligibility criteria, and limited services for youth, pregnant individuals, and 2S/LGBTQQIA+ persons.

The evaluation further identified opportunities to strengthen treatment centre effectiveness by enhancing pre- and post-treatment supports, improving service accessibility, addressing workforce needs, and reinforcing governance structures. It recommends deeper collaboration between treatment centres, the FNHA, and substance use system partners to support timely, culturally safe access to treatment for First Nations people.



Spotlight: Northern

Connecting Youth to Land, Culture, and Community: The Split Rock Healing House

Split Rock Healing House, or *Tsë lh̓ts'ënc'íl nec'igekh be yikh*, helps young people aged 12-29 heal by connecting them with land, culture, and community. Programs at Split Rock involve community and families, giving youth access to counsellors, Elders, and Knowledge Keepers. Split Rock also teaches youth life skills and offers families and the community a chance to heal together.

Split Rock Healing House is a newly designed environmentally responsible house certified to accommodate up to six young people. Each youth has a private bedroom and access to shared living areas like a kitchen, lounge, gym, sensory room, and social areas both inside and out. The home is fully accessible for those with physical disabilities, sensory challenges, and for visiting Elders. Construction on the Healing House began in Spring 2025. A youth advisory council helped shape the project throughout development.



Landscape design and site sketches of Split Rock by Matthew Thomson Design.

Witset Youth Healing Lodge: A Wholistic and Culturally Safe Space for All Youth

The Witset Youth Healing Lodge will open in September 2025 under the governance of Witset First Nation. This six-bed centre, funded by the FNHA, will offer a safe space for Wet'suwet'en and other First Nations youth aged 12 to 29 from northern BC, with a focus on supporting women, girls and 2S/LGBTQQIA+ people. It aims to help young people address the root causes of trauma.

The Healing Lodge will provide a wholistic approach to wellness, blending cultural safety with support for mental health, addictions, trauma and other challenges. Programs will draw on traditional culture, life skills, recreation and community connection to strengthen youth well-being. Elders and Knowledge Keepers will share guidance and traditional knowledge. The Lodge will also feature a learning centre for arts, crafts, storytelling and language, alongside land-based cultural activities and a ceremonial space. Construction began in Spring 2025, with input from a youth advisory council.

Building a Culturally Knowledgeable Workforce in the Northern Region

This year, 15 students graduated from the Indigenous Wholistic Wellness and Addictions Certificate program at the Nicola Valley Institute of Technology. Building on this success, the program is now expanding to offer a diploma in 2025, with space for 18 additional students. This growth ensures that more local practitioners are trained to provide culturally-grounded care in northern communities.

By supporting programs like this, the FNHA is actively working to ensure that First Nations people are cared for by practitioners who share their language, culture, and traditions, paving the way for a more culturally safe health system.

Strategy 3.3: Implement harm reduction strategies for substance use and the toxic drug crisis.

Stories of Progress

A Comprehensive and Community-Led Approach to Harm Reduction

The FNHA provides flexible grants to support community-driven harm reduction initiatives. Last year, we distributed over \$4.1 million to First Nations communities and organizations for projects that address the toxic drug emergency, intergenerational trauma, and mental wellness. In addition, on August 31, 2024, the FNHA provided 95 community grants totaling more than \$189,000 for International Overdose Awareness Day. This funding enabled communities to host local events and ceremonies that raise awareness, reduce stigma and promote harm reduction.

The FNHA is also expanding its [Not Just Naloxone](#) training with a new, self-paced online course. This train-the-trainer program goes beyond standard naloxone instruction to deliver culturally safe harm reduction support. Its curriculum focuses on decolonizing substance use, anti-stigma approaches and trauma-informed practice. In partnership with the Ministry of Health, the FNHA has funded the expansion of drug-checking services across all five regions. These services, which include fentanyl test strips and on-site testing, help people make informed decisions about substance use and reduce the risk of drug poisoning and death.

FNHA Harm Reduction Efforts

IN 2024 FNHA SUPPORTED



Spotlight: Vancouver Island Region

A Community-Led Approach to Healing and Recovery

In October 2024, FNHA Vancouver Island regional staff took part in the Decolonizing Addictions Conference, a free, three-day event hosted and led by the Kwakiutl, Gwa'sala - Nakwaxda'xw and Quatsino Nations. The conference explored the intersections of colonialism, cultural knowledge and substance use, while also providing health resources to attendees.

On November 28, 2024, the region joined the Huli'tun Health Society's National Addictions Awareness Week event. Under the theme, "Forging Connections," community members shared their recovery journeys to underscore the importance of community support in healing.

The year culminated in March 2025 with the Revitalizing Indigenous Heritage to Combat the Toxic Drug Crisis Gathering on Wei Wai Kum Territory. Hosted by local leaders, the gathering drew over 300 attendees to share knowledge, discover paths to healing, and honour those lost. Activities included keynote speakers, interactive workshops on traditional practices, a mourning ceremony and cultural performances.



Attendees of National Addictions Awareness Week hosted at the Halalt First Nations Gym, November 28, 2024.

Spotlight: Interior

"Walking Together": A Collaborative Response to the Toxic Drug Emergency

In April 2024, leaders from the 7 Nations in the Interior Region, FNHA, and Interior Health met in Vernon for the Walking Together: Addressing the Toxic Drug Emergency Forum. This two-day event brought together 170 participants to share knowledge on the toxic drug crisis, prevention, harm reduction, and recovery approaches. Additionally, the Interior Regional Addictions Specialist supported four Nation-led local forums focused on community-specific needs.

In response to Nation feedback, the FNHA Interior Region implemented direct changes across the care spectrum to expand Opioid Agonist Therapy access. The Regional Addictions Specialist referred requests to the nursing team and connected individuals with mental health clinicians and aftercare programs.

Nine First Nations Communities in the Interior Region now use Public Health Vending Machine Funding for naloxone and harm reduction supplies, with 12 receiving support for Community Care Cupboards. Additionally, the FNHA awarded \$50,000 in harm reduction grants to build local programs and continues to back the Okanagan Indian Band's drug-checking initiative. These measures respond directly to the Nations' calls for local action and improved access.

Measuring our Progress: Healing Journeys

Indicator: Percentage reduction of First Nations toxic drug overdose incidents and deaths in BC

The 2024 First Nations-specific data for toxic drug poisoning events and deaths in BC shows a 6.8 per cent decrease in toxic drug poisoning deaths and an 8.4 per cent decrease in toxic drug poisoning events compared to 2023. These declines underscore the importance of sustaining and expanding harm reduction initiatives.

Between January 2018 and December 2022, 1,374 First Nations people in BC died from toxic drug poisonings. During the same period, an FNHA modelling research project showed that at least 1,024 deaths (43 per cent) were averted due to evidence-informed, harm reduction initiatives and educational outreach across the province.

This data reflects only Status First Nations people and covers January through December 2024. For more details, see the [FNHA Toxic Drug Crisis Data](#) web section.

Goal 4: Addressing Anti-Indigenous Racism

Advance First Nations approaches to addressing anti-Indigenous racism. Improve culturally safe health care experiences where First Nations in BC feel heard, valued and seen.

Outcome Statement: Culturally safe health care experiences where First Nations in BC feel heard, valued and seen.

Strategy 4.1: Work with partners in BC to support a racism-free health system with embedded cultural safety and humility practices.

Strategy 4.2: Champion cultural safety and humility in BC through regional innovation, First Nations-led responses and service excellence.

Strategy 4.3: Advance First Nations approaches to addressing complaints.

2023/24 Operational Priorities

- Work in collaboration with Accreditation Canada and the Health Standards Organization to promote adoption of the Cultural Safety and Humility (CSH) Standard and the integration of CSH amongst health system partners.
- Champion anti-Indigenous racism and CSH efforts across FNHA and in Regions, implementing recommendations from the internal CSH assessment.
- Strengthen health system partner accountability in transforming models and pathways for supporting patient-centered and culturally grounded approaches for First Nations to sharing and addressing complaints with the health system.



Strategy 4.1: Work with partners in BC to support a racism-free health system with embedded cultural safety and humility practices.

Stories of Progress

Progress Implementing the BC Cultural Safety and Humility Standard

The FNHA is working to eliminate First Nations-specific systemic racism and discrimination across the BC health system. This work is supported by the [BC Cultural Safety and Humility Standard](#), which the FNHA co-developed with First Nations communities, Elders and partners.

To measure its alignment with the Standard, the FNHA completed an internal self-assessment and published the [Cultural Safety and Humility Standard Self-Assessment Report](#). The 10-month process was guided by Elder Th'et-simiya (Wendy Ritchie) alongside the Sisemó:ya Change Champions, a group of representatives from across FNHA. The self-assessment highlights areas where the FNHA is flourishing, including collaborative initiatives with communities to foster culturally safe environments, and identifies areas for improvement, such as expanding interpretation and accessibility services.

In partnership with the Health Standards Organization (HSO) and Accreditation Canada (AC), the FNHA launched the first external assessments of the standard in March 2025. These assessments are led by First Nations, Inuit, and Métis surveyors, including Indigenous patients. The Provincial Health Services Authority (PHSA) was the first health organization to undergo this assessment.



The BC Cultural Safety and Humility Standard is the first of its kind, created to acknowledge, address, and eliminate Indigenous-specific systemic racism and discrimination in the health system. Developed by the FNHA with Indigenous Elders, Knowledge Keepers, and partners, it sets a benchmark for health and social service organizations to ensure Indigenous Peoples receive culturally safe care. The standard is unique because it incorporates the voices of First Nations communities and moves beyond institutional perspectives to address systemic issues.



We have planted the seeds



We are taking root



We are starting to flower



We are flourishing in the meadow

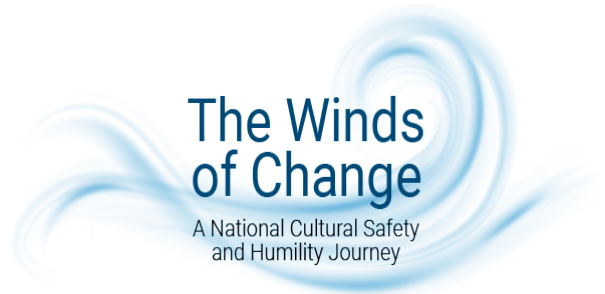
Visual representation of the Cultural Safety and Humility Continuum created for the CSH Standard.

The Winds of Change: Launching a New National Standard for Cultural Safety and Humility

The FNHA partnered with the Health Standards Organization (HSO) on *The Winds of Change*, a national cultural safety and humility initiative, which was launched in September 2024. Over the next three years, HSO will collaborate with First Nations, Inuit and Métis people and communities to advance cultural safety, address Indigenous-specific racism and align care delivery with Indigenous rights.

This initiative will establish a new Indigenous-led National Standard of Canada for Cultural Safety and Humility, along with tools and resources for health and social service organizations across Canada. The Technical Committee, made up of Indigenous patients, providers and policymakers from across the country, held its first meeting in January 2025. This work builds on the FNHA's earlier development of the BC Cultural Safety and Humility Standard.

By supporting this national standard, the FNHA aims to make Canada's health system safer for Indigenous Peoples and drive systemic change. The project's name honours Elder Gerry Oleman observation: "The winds of change are here."



The FNHA is partnering with Health Standards Organization on *The Winds of Change*.

The *Winds of Change* is part of Health Standards Organization's declaration of commitment to advance cultural safety and humility and address Indigenous-specific racism in health and social services across Canada.

Spotlight: Vancouver Coastal Region

Engaging the College of Pharmacists to Address Racism and Enhance Accountability

The FNHA Vancouver Coastal Region engaged the College of Pharmacists of British Columbia to address pharmacy-related racism complaints from community members. This collaboration establishes pathways to investigate and respond to these complaints. The region remains committed to health system accountability through ongoing discussions with health partners about anti-racism measures and how systems respond to reports of unsafe care.

Another effort to address racism involves Southern Stl'atl'imx leadership, the FNHA Vancouver Coastal Region and the Vancouver Coastal Health (VCH) Authority. Together, they will work to address high incidences of racism identified at the VCH-operated Pemberton Health Centre. As health authority partners, they also plan to expand this work to include two additional sub-regions in the future.

Measuring our Progress: Cultural Safety and Humility

Indicator: Stories of FNHA-related work and accountability among health system partners

- Launched a media campaign and position statement in support of the BC Cultural Safety and Humility Standard.
- Partnered with Health Standards Organization on the development of a national standard for cultural safety and humility.
- Provided advocacy and support to regional health authorities progressing implementation, including on enhancing complaints and compliments and resolution pathways.
- Collaborated with academic institutions and professional institutions (e.g. College of Pharmacists of BC, BC College of Physicians and Surgeons) on hardwiring cultural safety and humility and anti-racism.

Strategy 4.2: Champion cultural safety and humility in BC through regional innovation, First Nations-led responses and service excellence.

Stories of Progress

Embedding Cultural Safety and Anti-Racism at the FNHA

In 2024/25, the FNHA's Cultural Safety and Humility team developed a draft *Cultural Safety and Humility and First Nations Specific Anti-Racism Framework and Action Plan* in consultation with First Nations communities in BC, FNHA leaders and employees. This draft framework and action plan aims to embed cultural safety and humility throughout FNHA while addressing anti-racism within the organization.

In March 2025, the FNHA convened its cultural safety and humility champions for a two-day gathering. The meeting served two main purposes: to share the new draft action plans and collect feedback from the champions, and to provide leaders an opportunity to connect and participate in wellness activities. This gathering was a crucial component of the broader engagement strategy for cultural safety and anti-racism efforts.

Additionally, the Cultural Safety and Humility team continued to facilitate the Cultural Safety and Humility Community of Practice for FNHA staff. This internal forum consistently engages over 200 participants per session and feedback highlights its beneficial impact on staff practices. At the June 2024 Community of Practice, the team presented the draft framework and conducted a survey to gather further input. Sessions over the past year have included "Fractures and Repair," featuring the film *My Legacy*; "Power of Ceremony: Indigenous Contemplative Practices"; and "Neurodecolonization and Healing" —all designed to deepen understanding and promote culturally safe practices within the FNHA.

Developing an Inclusive Framework for 2S/LGBTQQIA+ Wellness

In March 2025, the FNHA convened a virtual knowledge sharing event with 2S/LGBTQQIA+¹ First Nations Peoples, advocates, practitioners, and organizations across BC. This gathering supported FNHA's work toward developing a 2S/LGBTQQIA+ framework. Participants shared lived experience, challenges, visions for the future, and discussions identified systemic gaps and opportunities.

The draft framework is grounded in four pillars: intersectionality; safe spaces; inclusive language and storytelling; and training that celebrates 2S/LGBTQQIA+ diversity. FNHA utilized key learnings from this event to inform the development of a framework and action plan that is rooted in lived experiences, community priorities and cultural knowledge, with the goal of furthering access to inclusive, culturally safe and wholistic health and wellness services for all 2S/LGBTQQIA+ First Nations individuals in BC.

Spotlight: Vancouver Island Region

"Remembering Keegan": A Powerful Story Inspiring Safe Care

The regional team collaborated with new physicians to discuss delivering culturally safe and anti-racist care on Vancouver Island. The team also highlighted key themes from feedback of local First Nations accessing care. For the third consecutive year, they hosted an annual learning session with UBC Resident Physicians at the Strathcona site, using the powerful "[Remembering Keegan](#)" case study to examine Indigenous-specific racism in BC's health care system.

Keegan's caregiver was invited to support the conversation, and participants shared their commitments to cultural safety and humility.



UBC Resident Physicians share their commitments to cultural safety and humility after attending a learning session with the FNHA Vancouver Island Regional Team.

¹ 2S/LGBTQQIA+ refers to Two-Spirit, lesbian, gay, bisexual, transgender, queer, questioning, intersex, asexual and other gender/sexual identities.

Spotlight: Fraser Salish Region

C̓hi:ya:yəstəl' (Working Together): A New Cultural Safety Training

The FNHA Fraser Salish team collaborated with Fraser Health to develop C̓hi:ya:yəstəl' (Working Together), a new cultural safety training program that weaves in stories from local First Nations communities. Designed to deepen understanding of regional cultural contexts and histories, C̓hi:ya:yəstəl' is now mandatory for Fraser Health staff and will soon be available for FNHA staff as well. This initiative represents a significant step in fostering a health system grounded in cultural understanding and respect.

Measuring our Progress: Cultural Safety and Humility

Indicator: Stories of FNHA-related work and accountability among health system partners

- Review of all First Nations engagement results related to cultural safety and humility and First Nations-Specific Racism between 2021 & 2024 (186 documents).
- 2024 year long engagement with BC First Nations to inform the draft First Nations Specific Anti Racism (FNSAR) Framework.
- Completion of an FNHA self-assessment against the BC Cultural Safety and Humility Standard and planning to implement actions in support of the findings.
- Convening of a Cultural Safety and Humility FNHA All Staff virtual gathering in March 2025.

Strategy 4.3: Advance First Nations approaches to addressing complaints.

Stories of Progress

Cultural safety and humility are foundational to the FNHA's work, ensuring that First Nations people in BC can access healthcare free of racism and discrimination. A key part of this is establishing clear and culturally safe complaints processes. Each FNHA regional team partners with health authorities and communities to design responsive and accountable systems tailored to local needs.

Below is an overview of each region's progress in partnering with communities and health authorities to develop unique and responsive complaint pathways.

Fraser Salish Region

The Fraser Salish team is a key partner in implementing the *Xwélalà:m Xwelá Ye Xwexwílmexw* Blueprint, an Indigenous led, culturally grounded approach to health care complaints. This unified pathway replaces fragmented systems and centers First Nations values. Together with Fraser Health Authority, the team identifies systemic issues and patterns that contribute to Indigenous-specific racism.

Interior Region

The Interior team works directly with Interior Health to improve the complaints process. They advocate for policy reforms that bolster cultural safety and address the specific needs of First Nations people. This collaboration is designed to integrate culturally safe approaches and counteract racism throughout the health care system.

Vancouver Island Region

On Vancouver Island, the team focuses on improving accessibility to the complaints process. By partnering with health professional governing bodies, they develop culturally safe complaint pathways. An on-site presence in hospitals allows the team to address issues in real time and build trust with staff, leadership, and most importantly: First Nations patients.

Vancouver Coastal Region

In the Vancouver Coastal Region, the team engages multiple health partners to strengthen the complaints process. They collaborate with the College of Pharmacists of British Columbia to establish an investigative and responsive process for racism complaints. In partnership with Southern Stl'at'imx Leadership and Vancouver Coastal Health, they're also addressing high incidences of racism at Pemberton Health Centre, with plans to expand this work to other sub-regions.

Northern Region

The Northern Region continues to work alongside Northern Health to ensure accountability when community members report experiences of racism or unsafe care. Their efforts include establishing clear reporting procedures and implementing cultural safety measures to improve experiences within the health care system.

Spotlight: Northern

Making Space for Ceremony: A New Approach to Cultural Safety Training

The Northern Regional team strengthened its cultural safety and wellness team over the past year to collaborate with all 55 First Nations in the region on a series of initiatives, which included hosting Learning Feasts rooted in local traditions and organizing meetings focused on improving teamwork.

In Prince George, the Northern Region hosted a training event to deepen staff understanding of traditional governance, cultural protocols and community wellness through ceremony. Drawing on the Dakelh (Carrier) Nation and the Gitxsan Nation's traditions, the event featured two ceremonies:

- Gitxsan Feast at the House of Ancestors: Participants engaged with the Gitxsan feast system, a form of governance affirming law, community structure and hereditary rights through ceremonial protocols and shared meals.
- Bah'lats ceremony: Guided by Dakelh Elders, knowledge holders and community leaders, this ceremony was hosted in the governance style of the Dakelh people.

By centering law, language and governance in this training, the FNHA reinforced its commitment to cultural safety, reconciliation and health transformation. The event highlighted the importance of making space for teachings and ceremonies within health systems and organizational practice.



Participants engaged in a cultural ceremony during the Northern Region's training event aimed at strengthening cultural safety and wellness capacity within health systems.

Enhancing Complaint Handling and Accountability

The Northern team also improved its complaint handling processes by making the process culturally safe and respectful to the patient through a number of enhancements to:

- Client identification processes,
- Training for staff on handling complex cases, and
- Strengthened relationships with local health partners.

Together with the FNHA Quality Care and Safety Office, the Northern Regional team worked alongside Northern Health to uphold accountability when community members report racism or other care incidents. This collaboration involves regional engagement in addressing incidents and contributing to system-level changes that improve response. Northern Health also maintains policies for complaints related to professional conduct.

Goal 5: Health and Wellness Innovation

Drive health and wellness innovation together with First Nations and other partners

Outcome Statement: Innovative community-driven, Nation-based wellness initiatives are supported and amplified throughout the health system.

Strategies:

- Champion BC First Nations initiatives, supporting capacity building and the sharing of innovative practices.
- Advance First Nations data governance principles, health research partnerships and evidence-based data
- Leverage innovative partnerships to advance creative health and wellness initiatives.



2023/24 Operational Priorities

- Finalize and implement the FNHA Data Strategy, Surveillance Strategy, an Ethics Framework and the Research Agenda.
- Develop and implement a plan to operationalize the 10-Year Strategy on the Social Determinants of Health (SDOH).
- Develop and implement a capacity building strategy to advance current and next generation First Nations health leaders at FNHA and in community.
- Work to strengthen commitments and accountabilities among health system partners in relation to Urban and away from home (UAH) populations, Cultural Safety and Humility (CSH) and the social determinants of health.

Strategy 5.1: Champion BC First Nations initiatives, supporting capacity building and the sharing of innovative practices

Stories of Progress

Advancing The First Nations Health Foundation

The First Nations Health Foundation (the Foundation), a registered charity established by the FNHA to raise funds in support of FNHA programs and services, made significant strides in 2024/25. Over the year, the Foundation built its team and began actively advancing fundraising initiatives. In fall 2024, the Foundation convened its first Board meeting. Foundation staff attended regional caucus sessions to introduce the organization to communities, and the first public information session was held on January 31, 2025. Staff also met with numerous prospective donors, building relationships and sharing the vital work of the FNHA. Early support was confirmed from key sponsors—including Scotiabank, Ventana Construction, Boyden, ITK Consulting, Intercontinental, and McCuaig & Associates Engineering—for the Foundation’s inaugural Together in Healing Gala held in June 2025, which raised over raised over \$352,000.

To increase its visibility and make it easier for donors to engage, the Foundation launched its website, providing a central platform for information and opportunities to contribute. Looking ahead, the Foundation will build on this strong foundation to deepen relationships with First Nations communities, partners and donors, broaden its fundraising activities, and support transformative health initiatives.

Advancing First Nations Food Security and Sovereignty

The FNHA is strengthening First Nations food systems through a dual approach of high-level governance and community-based initiatives, advancing food security and sovereignty through self-determination.

The First Peoples' Food Sovereignty Table, co-led by the FNHA and the Ministry of Agriculture and Food, brings together leaders from 14 organizations with shared principles: decolonizing power dynamics and respecting customary laws.

Guided by a wholistic understanding of food systems, the Table’s vision is best captured by one participant’s thoughts:

“Food sovereignty is not just about the things we eat; it’s about land, culture, governance, and identity.”



Canning Champions Emma and Brenda during their stew cooking demo.

At the community level, the [Canning Champions Network](#) strengthens food preservation skills by hosting events that bring together leaders and traditional knowledge holders. In February 2025, the

network held its annual Pressure Canning Workshop at UBC on xʷməθkʷəy̓əm (Musqueam) territory, followed by a gathering in June at Shxwhá:y Village. Through this workshop, participants gained essential skills while fostering cultural reconnection, peer learning, and community empowerment. The impact of the network is both personal and collective, as reflected in this participant's words:

"It's bigger than just food preservation work, it has helped disrupt colonial processes and teachings that surrounded me."

These events also foster intergenerational learning by bringing together youth and Elders, creating ripples that extend across generations.

Spotlight: Fraser Salish Region

Boothroyd Indian Band's Environmental Initiatives: Preserving the Land for Future Generations

In July 2024, members of the Fraser Salish Region visited Boothroyd Indian Band to observe recent environmental impacts on its traditional territories. Chief Mike Campbell, Health Director Terrie Davidson, band staff and community members, welcomed the group. Significant climate-related events have altered, or rendered inaccessible, many core areas of the territory.

During the visit, the group observed a still-accessible rearing channel where youth engage in salmon smolt identification. The effects of the Kookipi Creek wildfire were evident, with blackened trees reducing shade and degrading fish habitat. To address this, plans are now underway to install logs for shade, reintroduce native plant species, and encourage the return of wildlife. Councillor Lawrence Campbell, a natural resource worker, highlighted youth involvement in fish repatriation and forestry initiatives.

Chief Mike Campbell acknowledged the challenges and ongoing uncertainties but expressed optimism about new restoration and land rejuvenation projects. Councillor Lawrence Campbell emphasized the community's responsibility to preserve the land for the next generation, sharing:

"Look after the land and the land will look after you. It is for us to pass down to the next generation."

The Boothroyd Indian Band is committed to ensuring the land's well-being for its youth, who are actively engaged and ready to take on that responsibility.



Councillor Lawrence Campbell highlights involving youth as a key responsibility to the future of the land.

Regional Spotlight: Vancouver Island

Vancouver Island's Wholistic Diabetes Strategy

The Vancouver Island Region of the FNHA has recently developed a Regional Diabetes Strategy — an initiative rooted in the collective vision to support all First Nations people, ensuring no one is left behind. Endorsed by Nation leadership at Fall Caucus 2024, this strategy has been shaped through extensive engagement with individuals, communities, health staff, and leadership from the three Vancouver Island cultural families. Grounded in cultural safety and guided by traditional knowledge, the strategy outlines a seven-year plan (2025-2032) to improve diabetes care, outcomes and overall wellness for First Nations people on Vancouver Island. It builds on the successes and experiences that currently exist. The Diabetes Strategy has three strategic goals, framed as three layers of care. These include:

- *First Layer* – **Uphold and Honour All People:** Foundational layer that is an approach to wellness across the lifespan to prevent diabetes and to provide wholistic care ensuring that no one is left behind.
- *Second Layer* – **Seek, Find and Support Diabetes:** Early detection is essential and having a support system that is grounded in culturally safe care based in First Nations ways of knowing.
- *Third Layer* – **Best Care No Matter Where You Are:** A Diabetes Central Hub will be established to provide the best possible diabetes care for all people within the Vancouver Island Region, no matter their location.

Strategy 5.2: Advance First Nations data governance principles, health research partnerships and evidence-based data.

Stories of Progress

Building a Foundation for Data-Driven Health and Wellness

The FNHA has developed a clear and unified strategy for generating and using data to support First Nations health and wellness. Rooted in First Nations principles, this strategy strengthens data sovereignty by ensuring that health information about First Nations is managed responsibly and used only to inform decision-making.

Over the past year, the FNHA finalized its Data and Digital Strategy and created a new Data Governance Framework. This framework is guided by the "Bee Model," which emphasizes teamwork and the importance of everyone's contribution. The model is designed to strengthen OCAP® principles and can be adapted by each region to meet its specific needs.

The FNHA's Health Surveillance team supports this work by producing health reports for regions and subregions planning a major new health survey. The team have supplied important data to inform responses to the toxic drug crisis and COVID-19. A significant step was securing access to the provincial health data platform, granting First Nations greater control over their own health information. The team has also provided training to community leaders on how to use data for local planning.



This infographic, produced at the 2024 Spring Health Directors Gathering, describes the data we hold, how it is collected, stored, governed and how it can be used to increase access, protect First Nations privacy and enhance data literacy, which in turn increases self-determination. First Nations data represents individuals, families and community members and can be used to help set priorities, better policy decisions and increase access to care.

Measuring our Progress: First Nations Decision Making and Control

Indicator: Percentage of Initiatives generating new First Nations specific data for decision-making

- Finalized a First Nations Data Strategy and launched the Bee Governance Framework to drive community-led data creation and decision-making.
- Delivered monthly toxic drug, COVID, and community health reports, linking data directly to regional health plans and caucus feedback.
- Produced new Health Systems Reports and youth substance use infographics tailored to community and regional priorities.
- Secured Health Data Platform access to strengthen population-level First Nations health data ownership and advocacy.
- Expanded Regional Health Survey (RHS) efforts with new Nation-specific data-sharing agreements to return person-level data to communities.

Strategy 5.3: Leverage innovative partnerships to advance creative health and wellness initiatives.

Stories of Progress

Advancing First Nations Health Through Partnership

The FNHA has made it a priority to improve First Nations health and wellness through ongoing partnerships at many levels, including with provincial and national health partners. In April 2024, FNHA signed a health and housing agreement with the Aboriginal Housing Management Association. We also partnered with the BC Aboriginal Child Care Society to deliver \$27 million in federal funds for repairs to Aboriginal Head Start On-Reserve facilities. Additionally, the FNHA continues its partnership with Helicopters Without Borders to deliver fly-in dental clinics and transport services to remote communities.



Richard Jock, former FNHA CEO, speaks about the partnership between the FNHA and Aboriginal Housing Management Association.

"Housing is an integral determinant of health with many barriers that need to be addressed. Signing this Memorandum of Partnership is a big step for the FNHA and AHMA working together as it will allow us to refocus our efforts to achieve our shared goals of improving the overall health and wellness of First Nations People in BC." - Richard Jock, FNHA's former CEO.

Addressing Gaps and Unmet Needs using Indigenous Health Equity Funding

Over the past year, the FNHA received the first installment of the Indigenous Health Equity Fund (IHEF) from Indigenous Services Canada. Based on feedback that the FNHA received from First Nations in BC through Caucus and other engagements, the FNHA is targeting this funding towards improving access to quality and culturally safe health services with a focus on First Nations-led healing modalities and primary care, community capacity building and increasing the numbers of

First Nations health service providers. Regional priorities for health equity transformation will also be supported by the funds.

In FY 2024/25, a total of \$18.2 million in IHEF funds were invested in:

- Start-up, capital, ongoing expenses and clinic operations support for First Nations-Led Primary Care Centres (\$13.9 million) (For more information see Strategy 2.1)
- E-health and the Medical Affairs and Wellness Office (\$1.9 million)
- Initiatives to improve and increase access to quality and culturally safe health services among First Nations Urban and Away-from-Home populations. (\$1.4 million)

Supporting Digital Connectivity in Community

In partnership with All Nations Trust Company and the BC Ministry of Citizens' Services, the FNHA secured \$3 million to fund digital connectivity in First Nations communities. Improved connectivity is crucial for accessing virtual health care services, e-health, e-education, and e-governance. This initiative supports the FNHA's goal of enhancing First Nations participation and self-determination in the digital world.

Academic Partnerships

The FNHA focused on strengthening partnerships with several universities to support Indigenous students and enhance health initiatives.

- **Simon Fraser University (SFU):** The FNHA has a partnership with SFU on the establishment of the new Simon Fraser University Medical School to build First Nations knowledge and perspectives into the curriculum and increase the number of First Nations physicians.
- **University of British Columbia (UBC):** The FNHA and UBC strengthened their partnership by co-leading cultural safety training for resident physicians, providing dietetics students preceptorships and advancing the jointly established First Nations Health Authority Chair in Cancer and Wellness.
- **University of Saskatchewan:** This partnership aims to enhance health education and services for Indigenous peoples. A key component is an affiliation agreement that places a First Nations dental therapist in the Cowichan community, providing practical experience while addressing local oral health needs.
- **Douglas College:** The FNHA and Douglas College have co-developed the Indigenous End-of-Life Guide course, which trains community members to deliver culturally appropriate palliative care. In the past year, they reviewed the program's Memorandum of Understanding and explored an independent delivery model to boost sustainability and community self-determination.
- **Nicola Valley Institute of Technology (NVIT):** The FNHA and NVIT partnered to offer the Indigenous Holistic Wellness & Addictions programs. In spring 2025, 15 students graduated from the certificate program, an important milestone for community-driven wellness education.
- **Johns Hopkins University:** The FNHA collaborated with Johns Hopkins University's Center for Indigenous Health to adapt and expand a culturally centered home-visiting program and to develop intergenerational play spaces. Funded by the LEGO Foundation and involving global partners, the project supports First Nations caregivers during pregnancy and early childhood while fostering positive cultural identity for families. The FNHA's Fraser Salish team is leading the location adaptation of the home-visiting program for communities.

Additionally, the FNHA provided support for student practicums and Master's-level projects related to First Nations primary care and coordinated initiatives with the Ministry of Post-Secondary Education as part of BC's Health Human Resources Strategy.

CONCLUSION

During the past year, the FNHA continued to support First Nations in BC by advancing team-based culturally safe primary care and nursing services; maternal, child and youth programming; harm reduction initiatives; support and advocacy; climate change preparedness; health emergency response; and enhanced system navigation for urban and away-from-home individuals.

FNHA closely monitored and responded to the toxic drug crisis and took actions to address the growing need for mental health and wellness services and supports. We also invested in capital infrastructure for healing and treatment centres and land-based and traditional healing initiatives.

Walking alongside First Nations in BC and our partners, we aligned our work with community direction and bolstered our operational excellence through multiple reviews and evaluations. These included a review of medical transportation benefits and processes; five-year evaluations of the FNHA and BC Tripartite Framework Agreement; and a self-assessment of our implementation of the BC Cultural Safety and Humility Standard. We also collaborated with partners to address First Nations-specific racism, systemic inequities, and advance progress on the social determinants of health.

Throughout our efforts, we continue to remain adaptable and committed to excellence in programs, services and operations, grounded in the 7 Directives and the guidance of First Nations in BC.

2024/2025 Financial Report

Financial Report

This financial report incorporates analysis of the financial results and financial position for the year ended March 31, 2025. It is prepared as a supplementary resource to the audited financial statements and accompanying notes and schedules.

The audit firm KPMG LLP was appointed by Members of the Society to audit the financial statements of the FNHA. The auditors have issued an unqualified, or clean audit opinion that the financial statements prepared by management present fairly, in all material respects, the financial position of the FNHA as at March 31, 2025, and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations. These standards require financial results to be reflected for the year alongside prior year comparative figures.

At the FNHA, strategic planning, the utilization of funding and the realization of expenses are aligned with the 7 Directives and Shared Values as well as the Operating Principles.

The utilization of resources is consistent with the following:

- Strategy, initiatives and activities are developed in alignment with a health and wellness philosophy based on First Nations teachings.
- Health initiatives, programs and services support and are accessible to all First Nations and living in BC.
- The FNHA examines clients' needs to continuously improve services and approaches and remove barriers.
- Service delivery and transformation are driven by First Nations decision-making through engagement.
- Sustainability is an essential component of the business approach.
- Integrity, efficiency and innovation are essential to ensure the organization functions at a high operational standard.

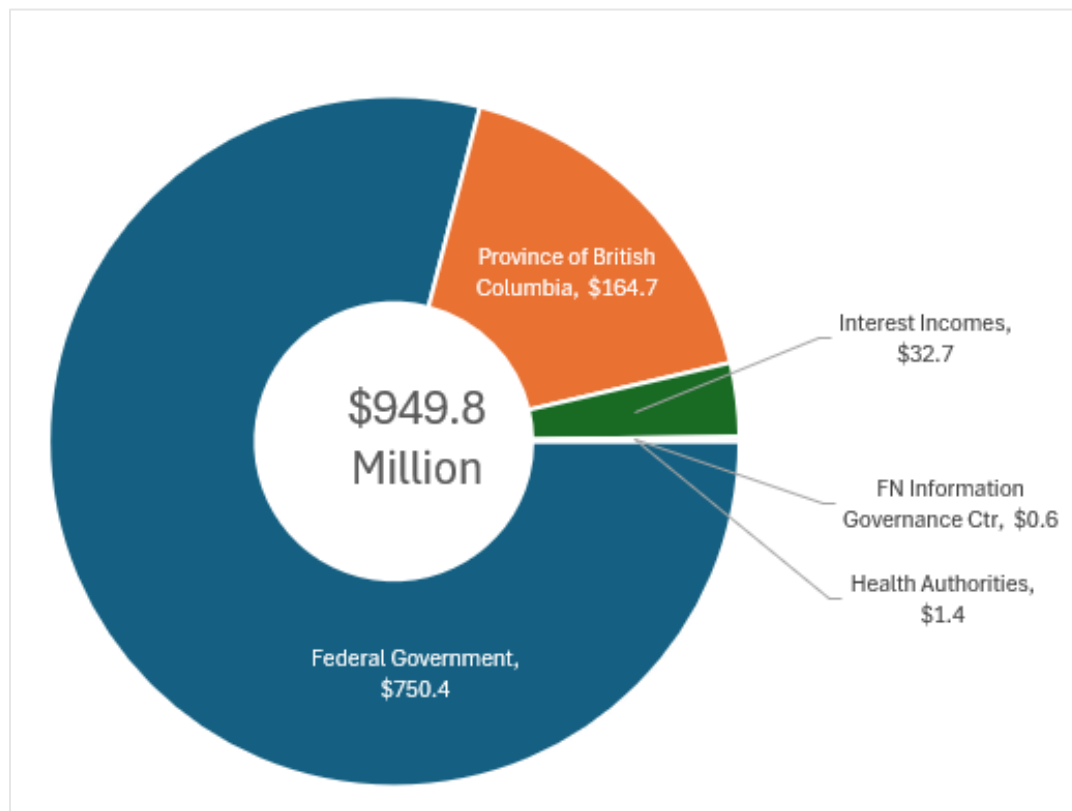
In addition, the organization continues to focus on prudent financial management, fiscal responsibility and financial sustainability. For the year ended March 31, 2025, an operating deficit of \$18.8 million on total expenditures of \$968.6 million is reported. This deficit equates to 1.9 per cent of total expenses and 2.0 per cent of total revenues for the fiscal year. This deficit is largely due to the utilization of the Internally Restricted and Unrestricted Net Assets, with Corporate Operations and Health Services and Programs costs being the main drivers.

Statement of Operations

Year ended March 31, 2025 with comparative information for 2024, expressed in millions of dollars.

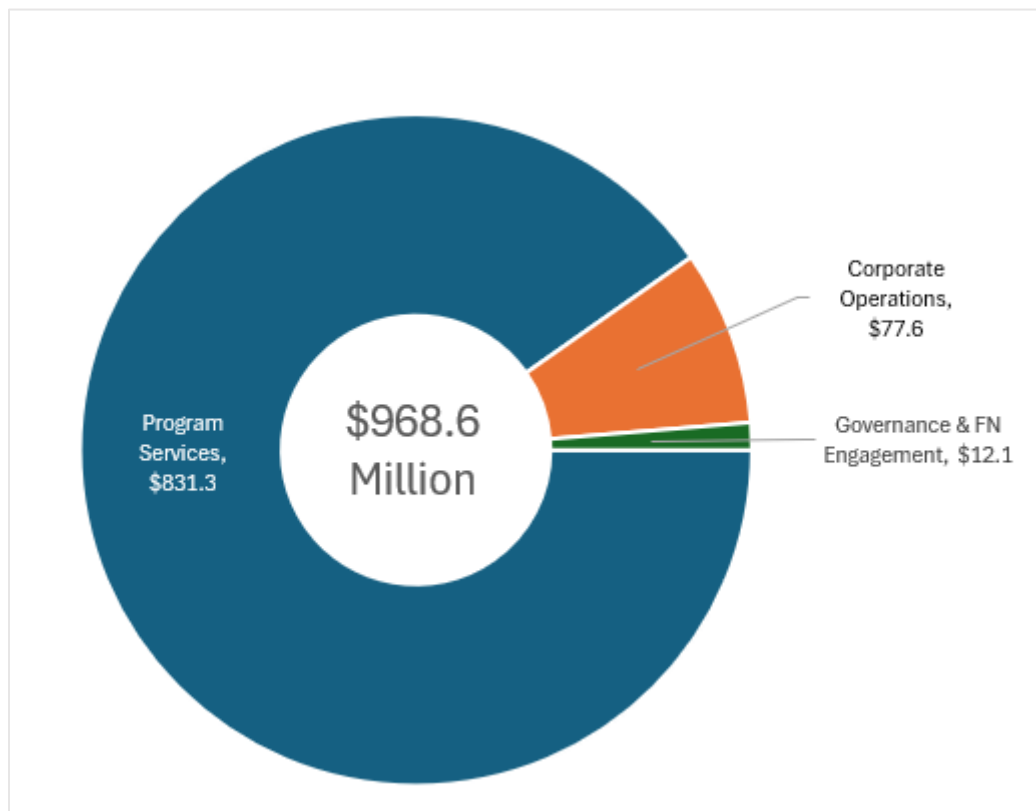
	Actuals Expenses		Actuals as a % of Revenue or Expenses	
	F2025	F2024	F2025	F2024
Revenue				
Federal Government	\$ 750.4	\$ 736.7	79.0%	80.1%
Province of British Columbia	164.7	143.9	17.3%	15.7%
Interest and Miscellaneous Income	32.7	36.3	3.4%	3.9%
Health Authorities of British Columbia	1.4	0.9	0.2%	0.1%
First Nations Information Governance Centre	0.6	1.6	0.1%	0.2%
	949.8	919.4	100.0%	100.0%
Expenses				
Corporate Operations	77.6	67.5	8.0%	7.4%
Governance and First Nations Engagement				
First Nations Health Council	2.8	2.2	0.3%	0.2%
First Nations Health Directors Association	2.7	2.6	0.3%	0.3%
First Nations Engagement	6.6	6.6	0.7%	0.7%
	12.1	11.4	1.3%	1.3%
Program Services				
Health Benefits	277.7	263.7	28.7%	29.0%
Direct Community Services Funding	377.0	368.9	38.9%	40.5%
Health Services and Programs	210.5	184.2	21.7%	20.2%
Regional Operations	13.7	14.5	1.4%	1.6%
	878.9	831.3	90.7%	91.3%
	968.6	910.2	100.0%	100.0%
Excess (Deficiency) of Revenues Over Expenses	\$ (18.8)	\$ 9.2	-2.0%	1.0%

Revenue



The largest component of funding for the FNHA comes from our federal partner through the Canada Funding Agreement and the Canada Consolidated Contribution Agreement (\$750.4 million). Provincial funding (\$164.7 million) represents commitments to: Aboriginal Head Start Initiatives (\$48.5 million); Treatment Centres and Aftercare (\$39.9 million); Response to the Toxic Drug Crisis (\$15.7 million); Joint Project Board ongoing initiatives (\$13.9 million); First Nations-Led Primary Health Care Clinics (\$12.7 million); First Nations Treatment and Land-Based Healing (\$11.3 million); Mental Health & Wellness MOU (\$7.7 million); Virtual Substance Use & Psychiatry, and Doctor of the Day (\$3.6 million); Electronic Medical Records (\$2.6 million); Homelessness Strategy (\$1.5 million); the BC Tripartite First Nations Health Plan (\$1.8 million); and various other initiatives (\$5.4 million).

Expenses



Expenses are grouped into three major categories: Corporate Operations, Governance and First Nations Engagement, and Program Services.

Corporate Operations represents costs associated with the administration of the FNHA and includes FNHA Board expenses, CEO office, Legal, Communications, Finance, Corporate Services, Human Resources, and Information Management/ Information Technology, plus the amortization of capital assets. Total expenses for Corporate Operations were \$77.6 million, representing 8.0 percent of total expenses for the 2024-25 fiscal year (in fiscal 2023-24: \$67.5 million and 7.4 percent of total expenses). Aside from general inflation, this increase is primarily due to an increase in compensation costs per collective agreements and the FNHA board-approved compensation strategy, net repair costs relating to the building under construction, and a new initiative to improve internet connectivity and remote access to health care services in communities.

Costs related to Governance and First Nations Engagement include remuneration and travel costs of the councilors/directors of the First Nations Health Council and First Nations Health Directors Association, as well as the operational costs of the secretariat functions. Costs related to First Nations Engagement include Regional Caucus sessions, regional tables, and community engagement activities. Total expenses for Governance and First Nations Engagement were \$12.1 million, which represents 1.3 percent of total expenses for the 2024-25 fiscal year (in fiscal 2023-24: \$11.4 million and 1.3 percent of total expenses). The increased spending of \$0.6 million is primarily due to increases in salary and benefits related expenses and professional fees.

Program Services includes health benefits, direct community funding, health services and programs, and regional operations. Financial results in each area are described separately in the next sections.

Health Benefits includes the operations of the Health Benefits department, Health Benefits expenditures (such as medical transportation, vision, dental and prescription drugs), and dental therapy costs. The total expenses for the Health Benefits program were \$277.7 million, which represents 28.7 percent of the total expenses for the fiscal 2024-25 year (in fiscal 2023-24: \$263.7 million and 29.0 percent of total expenses). Year-over-year increases in expenses is attributed to changes in access, utilization of benefits and an increase in claims primarily in dental services, mental health services and medical supplies.

Direct Community Services Funding represents the portion of FNHA funding that flows directly to communities through contribution agreements. This includes funding communities to support health and wellness services and programs and other targeted initiatives. In 2024-25, \$377 million has been incurred, which represents 38.9 percent of the total expenses for the FNHA (fiscal 2023-24: \$368.9 million and 40.5 percent of total expenses). Main Drivers for the changes are increased spending for First Nations Treatment Centres, Health Planning Management, Social Determinants of Health, and the Tripartite First Nations Mental Health and Wellness MOU, offset by decreased funding for Sts'ailes Community Care Program, and Health Action programs. It is also important to note that prior year funding levels were elevated due to one-time support received for Trauma-Informed Health initiatives. While trauma funding levels have remained stable in 2024-25, the absence of that one-time allocation contributes to the overall shift in funding patterns.

Health Services and Programs includes program and services delivery as well as operational costs for nursing services, environmental services, public health response, policy and planning, as well as the costs of the Chief Medical Officer portfolio. Expenses also include costs of contribution agreements to non-community recipients and treatment centres. Total expenses were \$210.5 million, which represents 21.7 percent of total FNHA expense for 2024-25 (fiscal 2023-24: \$184.2 million and 20.2 percent of total expenses). The year-over-year change is mainly due to annual compensation increase as per the Collective Agreements, non-union increases as per the FNHA Board-approved compensation strategy, annual escalator increases for funding provided to health service organizations, Primary Care, and First Nations Treatment Recovery Aftercare programs.

Regional Operations includes costs associated with regions to support operations, programs, and projects. Total expenses were \$13.7 million, which represents 1.4 percent of total FNHA expense in fiscal 2024-25 (fiscal 2023-24: \$14.5 million and 1.6 percent of total expenses). This change is attributable to a decrease in the use of professional services. Salary and Benefit related expenses increased marginally due to compensation increases as per collective agreements and the FNHA Board approved FNHA compensation strategy. This, however, was not sufficient to offset the decrease in the use of professional services.

Net Assets

The final net asset balance at March 31, 2025, as shown on the Statement of Financial Position and the Statement of Changes in Net Assets, is \$226.9 million, which is the result of an opening balance of \$245.7 million less than the current fiscal year deficit of \$18.8 million. The net asset balance includes

\$29.4 million Invested in Capital Assets, \$182.0 million in Internally Restricted reserves and \$15.5 million in unrestricted net assets .

The Internally Restricted reserves represent balances derived from funding from the Province (\$0.7 million), the Federal Government (\$25.1 million), and FNHA Reserves created from unrestricted net assets (\$156.2 million). This results in a balance of \$182.0 million at March 31, 2025. Note 13 in the audited financial statements provides a detail listing of respective fund balances.

BC First Nations Acknowledgement and List

The FNHA respectfully acknowledges and thanks all First Nations in British Columbia. We recognize the over 200 distinct First Nations communities that call this province home. While a comprehensive, static list cannot fully capture the dynamic nature of governance and recognition, this reference honours the unique identity and contributions of each First Nation, as well as First Nation Societies, Tribal Councils, Umbrella Health Organizations, and others listed below.

The following List was retrieved from the BC Government Website, September 16, 2025.

3 Nations Society	Carrier Chilcotin Tribal Council
?Akisq'nuk First Nation (Columbia Lake Indian Band)	Carrier Sekani First Nations Society
?Aq'am (St. Mary's Indian Band)	Cayoose Creek Band (Sekw'el'was)
?Esdilagh First Nation (Alexandria Indian Band)	Champagne and Aishihik First Nations
Acho Dene Koe First Nation	Chawathil Band (Hope)
Adams Lake Indian Band	Cheam First Nation
Ahousaht First Nation	Chemainus First Nation (Stz'uminus)
Aitchelitz Band	Cheslatta Carrier Nation
Alexis Creek (Tsi Del Del)	Clinton / Whispering Pines Indian Band
Anaham Indian Band (Tl'etinqox-t'in Government Office)	Coastal First Nations
Ashcroft Indian Band	Coldwater Indian Band
Beecher Bay First Nation (Sc'ianew/Chenuh)	Cook's Ferry Indian Band
Bella Bella Indian Band (Heiltsuk Nation)	Cowichan Nation Alliance
Bella Coola Band (Nuxalk Nation)	Cowichan Tribes
Binche Whut'en First Nation	Da'naxda'xw/Awaetlala First Nation
Blueberry River First Nations	Daylu Dena Council (Lower Post)
Bonaparte Indian Band	Dease River Band Council
Boothroyd Indian Band	Ditidaht First Nation
Boston Bar First Nation	Doig River First Nation
Burns Lake Indian Band (Ts'il Kaz Koh)	Douglas First Nation (Xa'xtsa)
Campbell River Indian Band (Wei Wai Kum First Nation)	Dzawada'enuxw First Nation
Cape Mudge Band (We Wai Kai)	Ehattesaht First Nation
Carcross/Tagish First Nation	Esk'etemc First Nation
	Esquimalt Nation
	Fort Nelson First Nation

Fraser Thompson Indian Services Society	Kispiox Band Council
Gingolx Village Government (Kincolith)	Kitamaat Village Council (Haisla)
Gitanmaax Band Council	Kitasoo/Xai'xais Band Council (Klemtu)
Gitanyow Hereditary Chiefs	Kitkatla First Nation (Gitxaala)
Gitga'at First Nation (Hartley Bay)	Kitselas First Nation
Gitksan Local Government Services Society	Kitsumkalum First Nation
Gitlaxt'aamix Village Government (New Aiyansh)	Klahoose First Nation
Gitsegukla Indian Band (Kitsegugkla)	Kluskus Indian Band (Lhoosk'uz Dene Government Administration)
Gitwangak Band Council (Kitwanga)	Ktunaxa Nation
Gitwinksihlkw Village Government	Kwadacha Nation
Gitxsan	Kwakiutl Indian Band
Glen Vowell Indian Band (Sik-e-Dakh)	Kwantlen First Nation
Gwa'sala-'Nakwaxda'xw Nation	Kwaw-kwaw-a-pilt First Nation
Gwawaenuk Tribe	Kwiakah First Nations
Hagwilget Village Council	Kwikwasut'inuxw Haxwa'mis First Nation
Haida Nation	Kwikwetlem First Nation
Halalt First Nation	Kyuquot First Nation (Ka:'yu:'k't'h'/Che:k'tles7et'h')
Halfway River First Nations	K'ómoks (Comox) First Nation
Hartley Bay Village Council (Gitga'at)	Lake Babine Nation
Hesquiaht First Nation	Lake Cowichan First Nation (Ts'uubaa-asatx)
High Bar First Nation	Laxgalts'ap Village Government
Homalco (Xwemalhkwa) Indian Band	Laxkw'alaams Indian Band
Hul'qumi'num Treaty Group	Leq'a:mel First Nation (Lakahahmen)
Hupacasath First Nation	Lheidli-T'enneh First Nation
Huu-ay-aht First Nation	Lhoosk'uz Dene' Government Administration (Kluskus)
Iskut First Nation	Lhtako Dene Nation (Red Bluff)
Kamloops Indian Band (Tk'emlúps te Secwepemc)	Liard First Nation
Kanaka Bar Indian Band	Lil'wat Nation (Mount Currie Indian Band)
Kaska Nation	Lillooet Indian Band (T'it'q'et Administration)
Katzie First Nation	Lillooet Tribal Council (St'át'imc Chiefs Council)
Kincolith Village Government (Gingolx)	

Little Shuswap Lake Band	Nooaitch Indian Band
Lower Kootenay Indian Band (Yaqaṇ nuʔkiy)	North Thompson River Indian Band (Simpco)
Lower Nicola Indian Band	Northern Shuswap Tribal Council (Northern Secwepemc te Qelmucw)
Lower Similkameen Indian Band	Nuchatlaht First Nation
Lower Stl'atl'imx Tribal Council	Nuu-chah-nulth Tribal Council
Lyackson First Nation	Okanagan Indian Band
Lytton First Nation	Okanagan Nation Alliance
Maa-nulth First Nations	Old Masset Village Council
Malahat Indian Band	Oregon Jack Creek Band
Mamalilikulla First Nation	Osoyoos Indian Band
Matsqui First Nation	Pacheedaht First Nation
McLeod Lake Indian Band	Pauquachin First Nation
Metlakatla First Nation	Penelakut Indian Band
Mowachaht/Muchalaht First Nation	Penticton Indian Band
Musgamagw Dzawada'enuxw Tribal Council	Peters Band
Musqueam Indian Band	Popkum Indian Band
N'Quatqua Band (Anderson Lake)	Prophet River Band (Denetsaa Tse K'Nai)
Nadleh Whut'en Band (Fraser Lake)	Qayqayt First Nation (New Westminster)
Nak'azdli Band	Qualicum First Nation
Nanoose First Nation (Snaw-naw-as)	Quatsino First Nation
Nanwakolas Council	Ross River Dene Council
Naut'sa mawt Tribal Council (Alliance Tribal Council)	Saik'uz First Nation
Nazko First Nation	Samahquam First Nation
Nee-Tahi-Buhn Band	Saulteau First Nations
Nemaiah Band (Xeni Gwet'in)	Seabird Island Indian Band
Neskonlith Indian Band	Sechelt First Nation (shíshálh Nation)
Nicola Tribal Association	Semiahmoo First Nation
Nicomien Indian Band	Seton Lake Band
Nisga'a Nation	Shackan Indian Band
Nlaka'pamux First Nations	Shuswap Band
Nlaka'pamux Nation Tribal Council	

Shuswap Nation Tribal Council	Stó:lo Nation
Shxw'ow'hamel First Nation	Stó:lo Tribal Council
Shxwhá:y Village (Skway)	Sumas First Nation
Siska Indian Band	Tahltan Band Council
Skatin Nations (Skookumchuck)	Tahltan Central Government
Skatin Samahquam Negotiations Inc. (formally In-SHUCK-ch Nation)	Takla Nation
Skawahlook / Sq'ewá:lxw First Nation	Taku River Tlingit First Nation (Atlin First Nation)
Skeetchestn Indian Band	Tanakteuk Indian Band (Da'naxda'xw/Awaetlala)
Skidegate Band Council	Te'mexw Treaty Association
Skin Tyee Band	Teslin Tlingit Council
Skowkale First Nation	Tl'azt'en Nation
Skuppah Indian Band	Tla-o-qui-aht First Nation (Clayoquot)
Skwah First Nation	Tlatlasikwala First Nation
Sliammon First Nation (Tla'amin)	Tlowitsis Nation
Snuneymuxw First Nation	Tobacco Plains Indian Band
Soda Creek Indian Band (Xat'sull)	Toosey Indian Band (Tl'esqox)
Songhees First Nation	Toquaht First Nation
Sooke Band (T'Sou-ke Nation)	Treaty 8 First Nations
Soowahlie Indian Band	Ts'kw'aylaxw First Nation
Southern Dakelh Nation Alliance	Tsartlip First Nation
Spallumcheen (Splatsin) Band	Tsawataineuk Indian Band (Dzawada'enuxw)
Spuzzum (Spô'zêm) First Nation	Tsawout First Nation
Sq'éwlets (Scowlitz) First Nation	Tsawwassen First Nation
Squamish Nation	Tsay Keh Dene
Squiala First Nation	Tseshaht First Nation
Stellat'en First Nation	Tsetsaut / Skii km Lax Ha Nation
Sto:lo Xwexwilmexw Treaty Association	Tseycum First Nation
Stone Indian Band (Yunesit'in)	Tsilhqot'in National Government
Stswecem'c Xgat'tem (Canoe Creek Indian Band)	Tsimshian First Nations Treaty Society
Sts'ailes Nation (Chehalis Indian Band)	Tsleil-Waututh First Nation (Burrard Band)
	Tsq'éscen' First Nation (Canim Lake Band)

Ts'elxwéyeqw Tribe Society (Ch-ihl-kway-uhk First Nations)

Tzeachten First Nation

Uchucklesaht Tribe

Ucluelet First Nation (Yuulu?il?ath)

Ulkatcho First Nation

Union Bar Indian Band

Upper Nicola Band

Upper Similkameen Indian Band

We Wai Kai Nation (Cape Mudge Indian Band)

Wei Wai Kum Kwiakah Treaty Society (WKTS)

West Moberly First Nations

Westbank First Nation

Wet'suwet'en First Nation

Whispering Pines / Clinton Indian Band

Williams Lake First Nation

Witset First Nation (Moricetown Band)

Wuikinuxv First Nation (Oweekeno)

Wuikinuxv Kitasoo Nuxalk Tribal Council

Xaxli'p First Nation (Fountain)

Yakweakwioose First Nation

Yale First Nation

Yekooche First Nation

'Namgis First Nation