



INDIGENOUS END-OF-LIFE GUIDE TRAINING PROGRAM

2019/20–2023/24

SUMMARY EVALUATION REPORT



First Nations Health Authority
Health through wellness



"The Traveller" | Digital Illustration

Completed March 2022 | ne Secwépemc'ulucw | BC

ABOUT THE PIECE

"The Traveller" was created by a family member of one of the Indigenous End-of-Life Guides. Use of the work by the program was generously gifted by the artist.

The initial inspiration for this piece originated from something a family member of mine told to me, a recollection on beginnings and ends and the journey in-between. Due to it being a sacred and personal story, I will not be writing it here. However, I took the piece beyond that story and added plenty of symbolism, all of which is completely up to individual interpretation. The water is still, and the eyes of the spirit guides are gentle, it is a welcoming and peaceful experience. The star, purposely shaped like a baby's fontanelle, is a bright window into that distant place where the Old Ones reside, ancient ancestors of the Spirit World. The pure, clear blue water reflects the Earth's perspective, the atmosphere, the distant star, the spiritual helpers on the ground. The deep space inbetween, the shooting stars representing new energy, new spirits on their way. The spirit guides' color pallet depicting either dawn or dusk, the zone between night and day. The spirits are welcoming, the man's drum facing earth, guiding earth to spirit; and the woman's drum facing the star window, guiding spirit to earth. They are singing the Welcome Song. There are four drums in total, the four directions, the four seasons of life. The Old Ones are waving, they are happy to see the traveller again.

ABOUT THE ARTIST

My name is Kísikâw ahcâhk iskwêw, Skúzás, or Lisa J. Wilson. I am a Mushkegowuk (Cree) and Státimc (Interior Salish) woman currently living, learning, and creating on Secwépemc territory in BC. I am 25 years old and have been digitally drawing as a hobby since I was 14. Only within the last couple years have I branched out from working with a limited and outdated photo editing software to an up-to-date illustration program (equipped with all sorts of bells and whistles) and it has done wonders in helping me find my style. I come from a family of artists, so creating runs in my blood. My proudest work are the pieces that are inspired by my culture, the more I connect with the land, the language, and the people of my ancestors, the more grounded I feel during my life's journey.

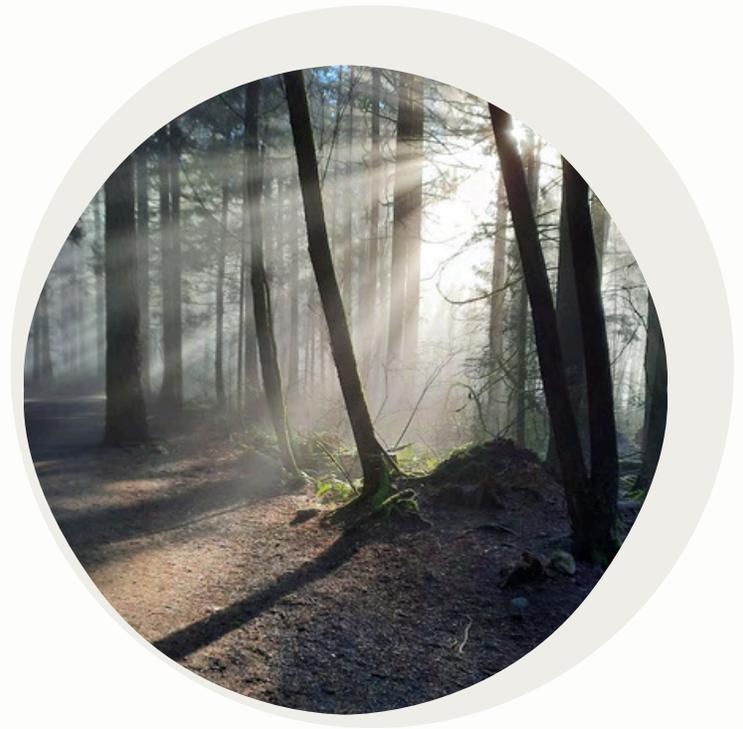
Tákem nsnekwnúkwa (all my relations),



ABOUT THIS REPORT

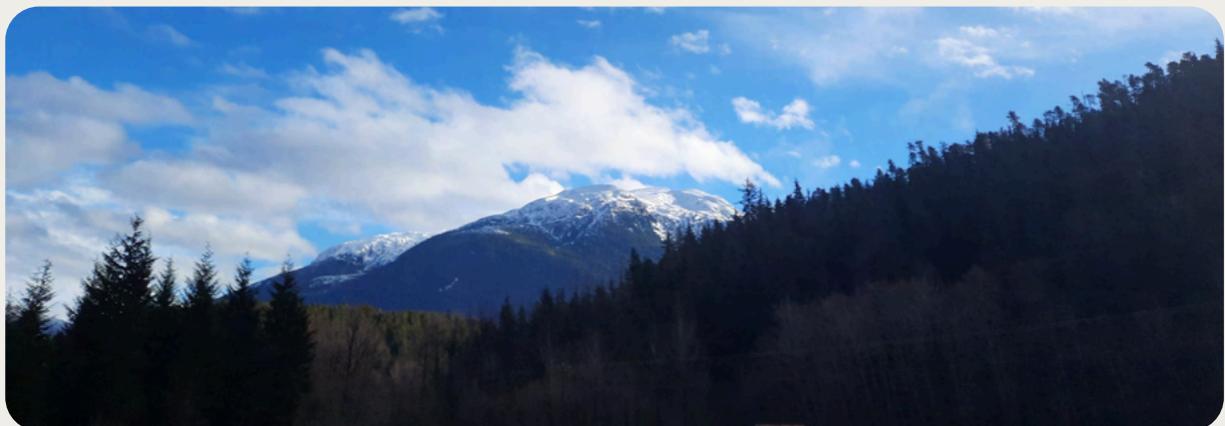
HONOURING CHANGES TO THE INDIGENOUS END-OF-LIFE GUIDE PROGRAM

This evaluation report provides a retrospective snapshot of the Indigenous End-of-Life Guide program as it was implemented between 2019/20 and 2023/24. It documents the program's design, delivery and early outcomes during that specific period. Readers should note that the findings, insights, learnings and opportunities presented in this report reflect this earlier iteration of the program and do not account for the significant shifts in direction, scope, and capacity that were introduced during the program's revitalization in late 2024.



Following the conclusion of the evaluation period, FNHA was awarded a two-year project grant through Indigenous Services Canada to revitalize and enhance the Indigenous End-of-Life Guide program. This new phase of the initiative is rooted in community feedback and evaluation learnings, with a continued focus on supporting First Nations communities in reclaiming and revitalizing sacred traditions and cultural practices surrounding the final journey. As the program moves forward, its evolving trajectory emphasizes resource development and accessibility, followed by curriculum expansion and systems integration.

This report has been published in the spirit of transparency and accountability, and to honour the voices, experiences, and stories shared throughout the evaluation process. The updated vision and pathway forward are described in the final section of the report: The Path Forward.



ACKNOWLEDGEMENTS

From a First Nations worldview, the end-of-life journey is an important time of significance and transition. Relearning, reclaiming and revitalizing traditional end-of-life and healing practices held by First Nations is a foundational element of restoring balance and wellness for First Nations communities and members. In-community and culturally safe end-of-life care and grief support can occur when First Nations communities have the capacity to support their members as they navigate the end-of-life journey, experience grief and heal.

The First Nations Health Authority (FNHA) wishes to acknowledge the FNHA staff, Douglas College faculty, and Elders and Traditional Knowledge Keepers who designed and implemented the Indigenous End-of-Life Guide training program, as well as the more than 400 individuals who completed the training and are supporting First Nations individuals and communities in BC.

The FNHA Evaluation Team conducted this evaluation in collaboration with Qatalyst Research Group Inc. Learnings came from the cumulative insight and wisdom of First Nations community leadership and members, the Indigenous End-of-Life Guide program facilitators and staff, Indigenous End-of-Life Guides, and the FNHA nursing and mental health and wellness staff.

We would like to thank all contributors for generously sharing their experiences and perspectives, including the following individuals who consented to being acknowledged by name (listed alphabetically):

AGNES CAMPBELL	DOREEN HOPKINS	ROSE PATTERSON
ANGIE COMBS	HELEN ROSE ROBERTSON	RUTH JOHNNY
ARLEEN THOMAS	IRENE WILLIAMS	SAMANTHA SAM
CAROLYN BILLY	JEFF ALECK	SANDRA GARBITT
CARRIE REID	JOAN BRETT	SCOTT COLE
CELESTINE SAMPSON	JOANNE TWAN	SERENA JACK
CHARLENE EVANS	JOCELYN MCREE	SHARIDIN TOWNSEND
CHRISTINE MACINTOSH	KELLEY MAUREEN WILLIAMS	SHONEENA LOSS
CLIFFORD RYAN	LAURA DAHL	SOLANGE MIGNEAULT
CONNIE JOE	LORETTA QUOCK SORT	STACY GALLAGHER
CORAL JOHNSON	LUCILLE DUNCAN	STELLA PETERS
CYNTHIA BRESSETTE	MARSHA SPINKS	SUE BARTNIK
DANIELLE ARMSTRONG	MELLISSA WALLACE	SUE WILSON CHEECHOO
DEBORAH GREENE	MICHAEL OCHOA	TAMMY MARSEL
DOLORES ALEC	NICOLE WIKJORD	VERONICA SMITH

INTRODUCTION

Indigenous End-of-Life Guides

Indigenous End-of-Life Guides (referred to as guides in this report) are companions who provide dying individuals and their families with practical and emotional support throughout the end-of-life journey. Guides complement the family's care and the services provided by other health care providers (e.g., nurses, physicians, care aides) by working to meet the dying person's needs and wishes and improving the quality of their end-of-life journey. Guides can also support the individual's and family's access to community-specific traditional practices and protocols by working with Indigenous cultural healers and Knowledge Keepers. The flexibility of the guides' role enables them to meet individuals and families where they are receiving care, whether that is at home or in palliative or hospice settings.

INDIGENOUS END-OF-LIFE GUIDE TRAINING PROGRAM

Program Overview

The Indigenous End-of-Life Guide (IEOLG) training program was developed in partnership between the First Nations Health Authority (FNHA) and Douglas College in response to a request from Elders to facilitate and support traditional ways of death and dying for First Nations in BC. The program was adapted from the Douglas College End-of-Life Doula Training Program in consultation with First Nations Elders.

The program trains and supports natural helpers¹ within First Nations communities to provide culturally safe care and support for individuals facing end of life, and their families as they experience grief and loss. The program also encourages respectful and culturally appropriate conversations that help remove stigma around end-of-life planning.

¹A natural helper is a trusted community member whom people spontaneously turn to for advice, emotional support or practical help with personal or health-related challenges.

Eligibility and Recruitment

First Nations individuals working in non-regulated health care roles (e.g., care aides, Indigenous patient liaisons, natural helpers) and who are living in First Nations communities are eligible to participate in the program free of charge. Potential participants are nominated by community Chiefs, Health Directors and Health Leads. Individuals living in urban areas or away from their home communities can participate in the program if they obtain support from a manager and explain how they plan to use the skills and knowledge. Participants are screened to ensure they are working or volunteering in fields related to end-of-life or grief care, have personal experience in providing end-of-life care, or have other plans to apply the skills and knowledge taught through the program.

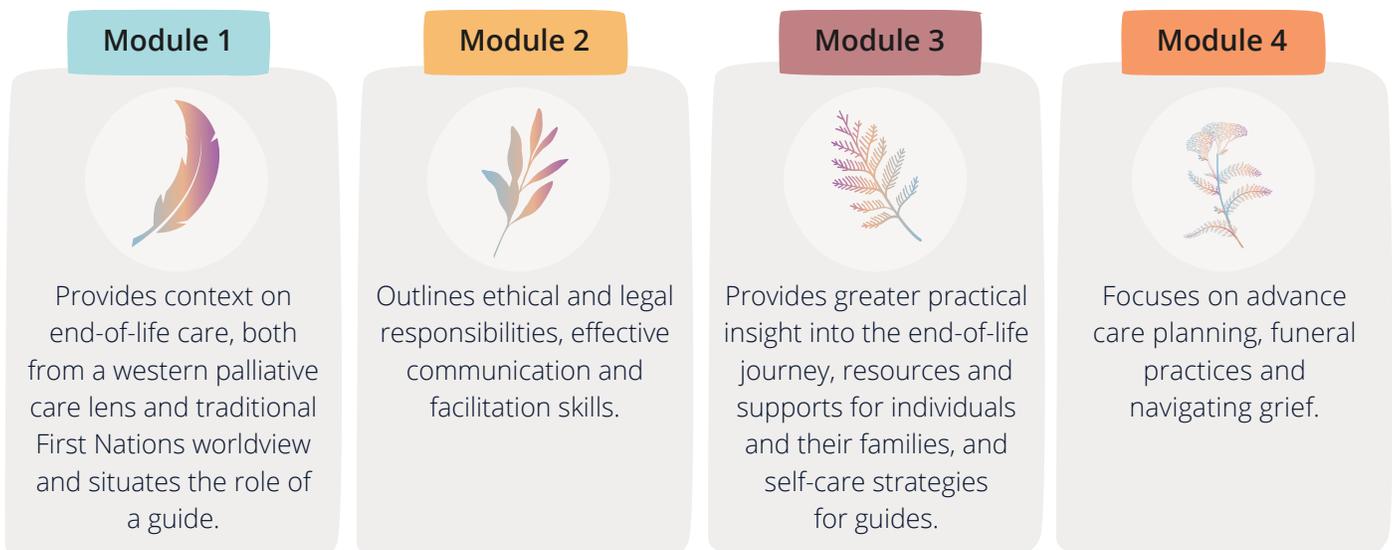


Training Design

As of December 2024, the FNHA independently provides IEOLG training to First Nations communities in BC, and Douglas College independently provides training to Indigenous communities elsewhere in Canada. Training is delivered through regional in-person and province-wide online sessions. The FNHA also provides seasonal educational sessions to offer guides additional support and ongoing learning. Individuals who complete the program receive a recognition of completion certificate issued by the FNHA or Douglas College.

Sessions are co-facilitated by a Knowledge Keeper with expertise in First Nations knowledge and cultural practices and an end-of-life care educator with expertise in western palliative care practices. Whenever possible, Knowledge Keepers local to the area where the training is being delivered are invited to share cultural practices.

The training is delivered over four days and consists of the following four modules:



Training Delivery and Reach

Between January 2019 and October 2023, 27 training sessions were delivered. Approximately two-thirds were conducted in person, while the remainder were held online. Online sessions were introduced in 2021 due to pandemic restrictions and were the only format offered that year. In 2022 and 2023, both in-person and online options were available.

27+



sessions delivered between 2019/20 and 2022/23

67%



of people who attended the training attended in person

A total of 455 participants completed the training, representing 163 First Nations communities. A large majority (80 per cent) of participants worked in related fields, for example, working as care aides, support workers, community health representatives (including Health Directors, Elder coordinators, paramedics), cultural and spiritual workers, and Aboriginal or Indigenous patient liaisons. The remainder (20 per cent) identified as volunteers or natural helpers within their community. All participants were already providing end-of-life services and supports to community members and sought to gain additional knowledge and skills to enhance the relevance and quality of their services to better meet the needs of individuals and their communities.

455



people have completed the training

163



First Nations communities in BC had members complete the training

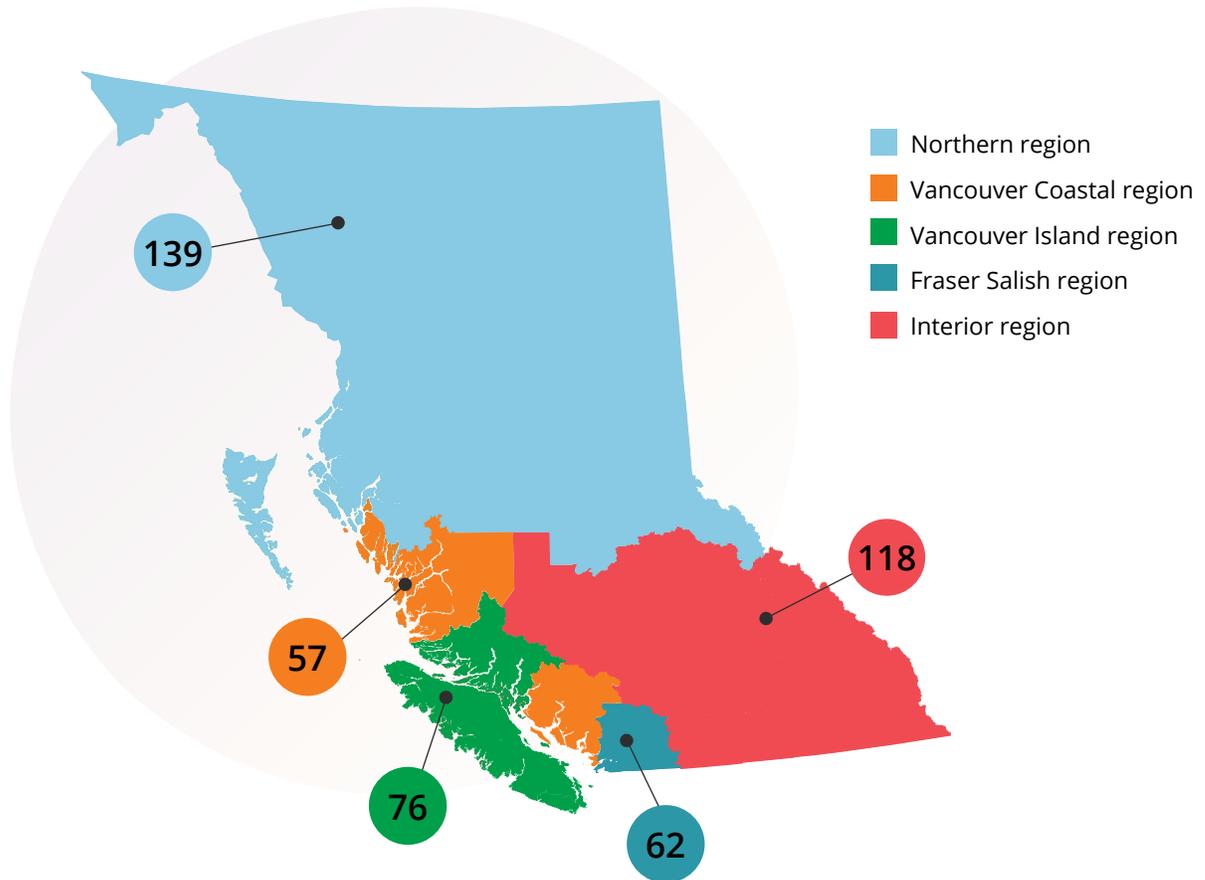


80%

of people who completed the training work in a health and wellness role

Individuals from all regions participated, and regional representation aligned with the geographic distribution of the First Nations population in BC.

Training participants per region



Post-Training Events and Support

Between April 2021 and January 2024, 14 post-training events were held, covering a range of topics including advance care planning, medical assistance in dying, wills and estate planning, difficult conversations, and healing and sharing circles. Attendance has increased from three to five participants per post-training event in 2021 to over 20 in 2024. Program staff and facilitators have also provided ongoing support to guides, as requested.

Funding and Expenditures

The program is supported through a Home and Community Palliative Care fund received from Indigenous Services Canada, and in-kind community contributions in the form of training venues, staff accommodation and learning materials related to the community's cultural teachings and practices.

Between FY 2019/20 and FY 2022/23, program expenditures totalled \$427,678. Over half (60 per cent) went towards salaries and wages for FNHA staff, payments to Douglas College facilitators and honoraria for participating Knowledge Keepers and Elders. Twenty-three per cent of the expenditures went towards training coordination and delivery, and 17 per cent funded participant and facilitator travel.

Douglas College facilitators charge a fee of \$675 per participant. From 2019 to 2022, most sessions were delivered by Douglas College at an average cost per participant of \$2,288 for in-person sessions and \$791 for online sessions. Since 2022, FNHA staff facilitators have delivered training at an average cost per participant of \$1,613 for in person and \$131 for online.



EVALUATION OVERVIEW

PURPOSE AND SCOPE

This evaluation assesses the relevance and effectiveness of the IEOLG training program design, delivery, impact and value to First Nations individuals and communities between FY 2019/20 and 2022/23. Learnings are intended to support program planning and ongoing quality improvement, and to provide guidance to the FNHA's partners.

DATA SOURCES AND ANALYSIS

Evaluators collected data through the following methods:

Engagement with 115 key informants including:



- 17 FNHA key informants, including six IEOLG program staff, four program facilitators and seven representatives of other FNHA programs involved in delivering end-of-life care;
- 92 community leaders, including Chiefs, Health Directors and Health Leads; and
- 6 practicing guides, representing all five FNHA regions.

A survey of individuals who completed IEOLG training between 2019 and 2023 (response rate: 94/369, or 25 per cent).



A document and data review.



A literature review of First Nations traditional and cultural approaches to the end-of-life journey, grief and healing support in Canada, and challenges related to traditional and cultural practices during the end-of-life journey.



An environmental scan of similar programs in other jurisdictions.



Please visit the FNHA Evaluations web page to access the [full report](#).

SUCCESSSES AND ACHIEVEMENTS OF THE IEOLG PROGRAM

REVITALIZING FIRST NATIONS KNOWLEDGE AND CULTURAL PRACTICES

The IEOLG program supports the reclamation and revitalization of traditional and cultural end-of-life beliefs. Through the training, knowledge is passed from Elders and Knowledge Keepers to the guides. Guides impart the knowledge to the individuals and families they serve, while honouring the diverse perspectives, traditions and customs of individual families. Guides also connect the individuals and families they serve with community Elders and Knowledge Keepers, further bridging connections and supporting greater access to traditional practices surrounding end of life.

“The training helped me have those difficult conversations to ensure that Indigenous values around death and dying are respected.”

– Guide

SUPPORTING SELF-DETERMINATION AND STRENGTHENING COMMUNITY CAPACITY

The IEOLG program supports community and Nation self-determination by following each community's direction on participant selection and the incorporation of guides into community health and wellness teams or cultural support services and networks. Community leaders authorize who from their community is eligible to attend the training, which enables them to strengthen capacity in line with their community's unique context and needs. Community leaders also determine how the guides are integrated into community health teams and other cultural support services and networks.



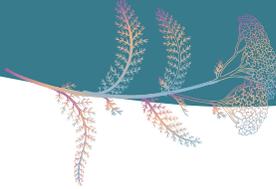
“The course created curiosity. I have spoken to the local leaders, Elders and individuals regarding death and dying. These conversations have been my biggest support.”

– Guide

Following each community's direction resulted in the successful recruitment of participants from targeted occupations who had the desired motivation and enthusiasm to use their acquired skills and knowledge to benefit their communities. Eighty per cent of individuals recruited for the training were already in occupations providing end-of-life care or grief support, and the remaining 20 per cent were community champions and natural helpers.

“I have been a home support worker for 23 years and, in that time, I have experienced a lot of death. To have this training means a lot – to help the family who may not understand that death is a very beautiful, peaceful experience, although, yes, it hurts.”

– Guide



“I am the Elders Coordinator, and we have had too many losses in the past couple of years. I needed to know how to make it manageable and support the Elders in our community.”

– Guide



TRAINING AND SUPPORTING GUIDES TO PROVIDE END-OF-LIFE SERVICES

Guides reported that the training met their objectives to learn about the end-of-life journey and care from both Indigenous and western perspectives, and that they learned how to support individuals and families navigating the end-of-life journey.

The expertise, humility and kindness of the facilitators, Elders and Knowledge Keepers, as well as the inclusion of First Nations traditions and customs were key factors contributing to participant satisfaction.

Guides and facilitators suggested that in-person training is best suited for meeting the needs of learners, communities and facilitators. The in-person format supports relationship building and promotes a culturally safe and wholistic learning environment. However, there remains an ongoing need for a small number of online training cohorts annually as some individuals may be unable to leave their communities or may want to limit their in-person exposure to protect immunocompromised clients.

“This was an excellent course. It's an important topic. Our teacher was great – I learned a lot when she talked. She involved all the students, and we also learned from each other.”

– Guide

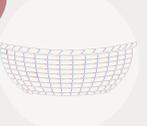


INCREASING KNOWLEDGE AND ENHANCING SKILLS

Guides reported that the training gave them increased access to information and knowledge-sharing opportunities, enhanced their skills and knowledge to provide culturally safe end-of-life care, and increased their knowledge about Indigenous perspectives on end-of-life care, grief and healing.

Most guides stated that they are better prepared to support their community following the training, and are confident and inspired to apply the knowledge and skills they acquired.

Guides' most valuable learnings

-  1 First Nations cultural and traditional practices, beliefs and values around the end-of-life journey.
-  2 Providing care and emotional support to individuals and families navigating the end-of-life journey to help individuals and families be at peace.
-  3 Effective and respectful communications skills, including demonstrating empathy and vulnerability, actively listening and being prepared for sensitive conversations.
-  4 Strategies to advocate on behalf of individuals and their families.



“The program helped me to move past the fear and discomfort of discussing death and dying. I realized that talking about it was empowering because it’s so personal. It’s a strength to address it and a comfort to be heard. Continuing to offer the program to community members is so important.”

– Guide

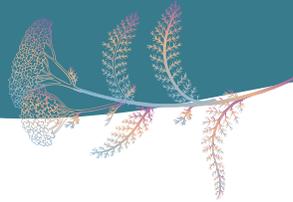
PROVIDING ONGOING SUPPORT AND INTEGRATING GUIDES IN COMMUNITY NETWORKS

The IEOLG program is successfully tailoring ongoing post-training learning opportunities to meet guides' expressed learning needs, such as sessions on grief and healing, Indigenous perspectives on and supports for cancer, and advance care planning. Program staff and facilitators have also provided ongoing support to guides, as requested. Guides shared that these relationships have reinforced their confidence and prepared them to provide end-of-life care to their community members.



“What has helped me the most is my conversations with [the IEOLG program coordinator] – she has been incredibly supportive and has validated my approach and learnings. I think this is essential for each IEOLG to have a mentor like her, otherwise it feels like I am doing this on my own.”

– Guide



There has been moderate success in encouraging communities of practice. About one-third of surveyed guides indicated that they maintained connections with other guides following the training, either through communities of practice or interpersonal relationships.

Importantly, guides are being integrated into community support networks that include community leadership, Elders, colleagues and other members of the health team such as hospice staff, social workers, nurses and counsellors.



SUPPORTING FIRST NATIONS COMMUNITIES

SUPPORTING OVER 400 FIRST NATIONS INDIVIDUALS AND THEIR FAMILIES

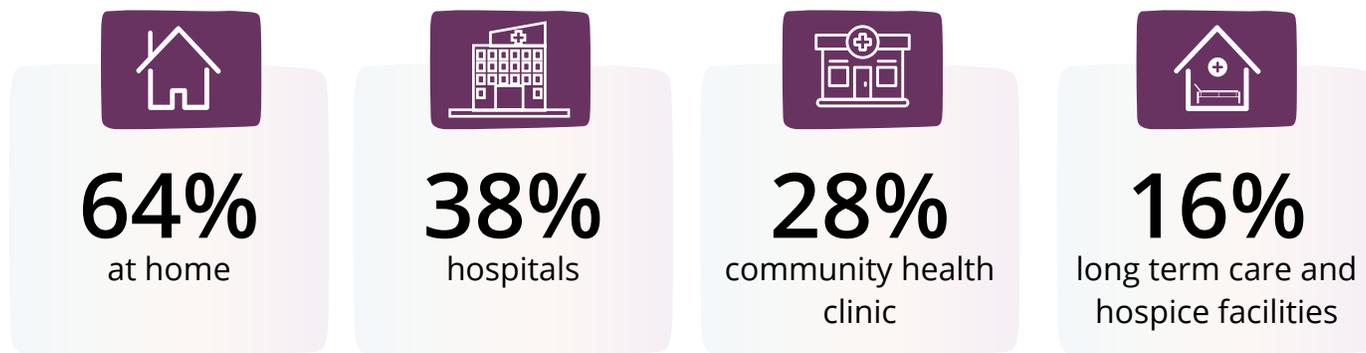
Although the exact number of individuals and families served by guides is unknown, as guides do not report to the FNHA, conservative estimates based on guide self-reported data indicate a minimum of 400 to 650 individuals and families have received support.

A 2023 survey of guides found that 20 per cent of respondents had supported one to three individuals or families; 43 percent had supported four to 15 individuals or families; and 16 per cent had supported more than 16 individuals or families.²

INCREASING ACCESS TO CULTURALLY SAFE SERVICES

Guides offer their services in a variety of settings, depending on what is most comfortable and convenient for individuals and families. While most guides assist individuals in their home, some also provide services in hospitals, community health clinics and long-term care facilities. Services are primarily provided in person but can also be provided over the phone if needed.

Locations where guides provide their services



*Results from a survey of all training participants. The survey had a 25 per cent response rate and 75 per cent of respondents had been trained within the last two years.

“A lady was in hospital. I was able to bring her cultural support from the community such as brushing and returning soul and comforting heart, and discuss who and what food and services she wanted to have in the room, and where she wanted to be buried.”

– Guide

²Results from a survey of all training participants. The survey had a 25 per cent response rate and 75 per cent of respondents had been trained within the last two years.

MEETING END-OF-LIFE SUPPORT NEEDS AND REDUCING STIGMA

Guides shared that they most often provide care that centres on:



Sharing Indigenous perspectives on death, grief, and healing (e.g., facilitating connections to traditional healers and Knowledge Keepers).



Supporting families who are experiencing grief (e.g., facilitating discussions between family members about final wishes, providing emotional support to families following a loss).



Sharing information and facilitating discussions on after-death procedures (e.g., morgues, death certificates, funeral and burial planning, finances).



Supporting health system navigation (e.g., answering questions about palliative care, advance care planning, advocating for individuals and their families).



“You have to be a good listener and let them lead the conversation. It’s their journey and you are there as a helper. [The conversation] can be related to ceremonial practices, getting documents in order, the illness the person is experiencing or questions about finances. That can bring peace to them.”

– Guide

Guides facilitate sensitive family discussions around end-of-life and advance care planning, as well as funeral and estate planning. The First Nations-specific culturally safe navigation support combined with an empathetic trauma-informed approach help reduce stigma and improve the end-of-life experience for community members and their families.

Guides also provide valuable emotional support and connect individuals and families to other resources, including Elders, Knowledge Keepers, social workers, hospice workers and grief and loss counsellors.

Some guides advocate on behalf of clients to improve the quality of care and promote cultural safety and humility among health care providers serving the community. This includes promoting an understanding of, and respect for, traditional customs and protocols.

Advocacy often involves coordinating with medical teams to improve care. It also involves working with funeral homes and provincial government representatives to ensure official procedures (e.g., autopsies and testing) are aligned with traditional practices, such as burial within four days of death.



“Some members are adamant about not wanting to go into long-term care. That is a tough conversation I need to have with individuals and then get them set up with the health care team, nurses, and doctors in their communities so that the paperwork is done and people are able to pass peacefully.”

– Guide

COMPLEMENTING EXISTING INDIGENOUS END-OF-LIFE SERVICES AND SUPPORTS

The services offered by guides complement other FNHA-supported or delivered programs and services for First Nations individuals and families in BC navigating the end-of-life journey, particularly because of the range and flexibility of services provided by the guides. Guides fill a critical gap in existing community-based health care services, which are often understaffed due to health care provider shortages. The flexible and tailored nature of the services enables guides to fill gaps and serve as liaisons and navigators.

IEOLG services and supports are a cost-effective alternative to navigation supports and traditional mental health and wellness counselling. When averaging the cost to train a guide in person over the reported number of individuals and families served by an individual guide, the estimated average cost to support an individual or family ranges between \$179 and \$290.



LEARNINGS AND OPPORTUNITIES

OPPORTUNITIES TO SUPPORT AND ENHANCE THE EXISTING GUIDE COMMUNITY



Guide Services

- ◆ Increase the awareness of guide services among FNHA staff, community leadership, and members to improve uptake and referrals.
- ◆ Provide ongoing post training learning opportunities, such as a community of practice and other knowledge sharing forums to bolster guides' confidence, skills and resilience.
- ◆ Create more opportunities for guides to deepen their understanding of cultural teachings in grief and healing support, working with Elders and Knowledge Keepers and tailoring learning to Nation, family and sub regional priorities, traditions and practices.

OPPORTUNITIES TO FURTHER ENHANCE COMMUNITY CAPACITY AND EXPERTISE AROUND END OF LIFE



- ◆ Communities suggest a one time special purpose grants or contribution agreements for Nations and communities to build end of life expertise and capacity, such as through tailored resources, funded navigator or guide positions, and end of life planning workshops.
- ◆ Support community-led end of life preparedness initiatives and, where needed, provide surge capacity for end of life, grief and healing support following crises with loss of life.

OPPORTUNITY FOR GREATER HEALTH SYSTEM INTEGRATION



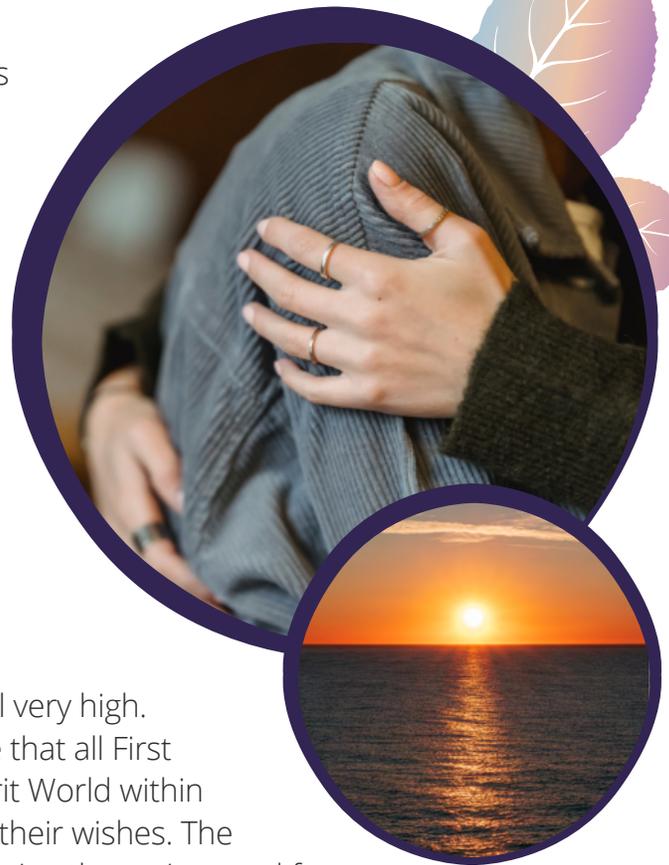
- ◆ Encourage provincial and regional partners to improve the cultural understanding of their staff who provide end of life services to First Nations and recognize First Nations customs and traditions in legislation, policies and practices related to death.
- ◆ Continue collaborative work with Tripartite Partners to bring end-of-life care closer to communities.

CONCLUSION

The IEOLG program has successfully trained 455 guides (representing 163 First Nations communities across BC), who have been active in delivering end-of-life care to community members. This has contributed to a range of positive impacts, including the reclamation, revitalization and relearning of traditional and cultural end-of-life and healing practices.

While there are opportunities for improvement, the overall delivery structure of the IEOLG program is effective. It is well-aligned with other FNHA programs and services and is complementary to existing end-of-life services and programming available in First Nations communities.

Despite progress, the number of community members spending their final days outside their community is still very high. More resources, time and effort are required to ensure that all First Nations people have the option to transition to the Spirit World within their communities, with dignity and in accordance with their wishes. The IEOLG program is viewed as a first step towards addressing the major need for end-of-life care in First Nations communities across BC.



INDIGENOUS END-OF-LIFE GUIDE EXPANSION PROJECT

The IEOLG program is entering a new phase of growth and is expanding along an alternate capacity. In this phase, the program will not offer training for new guides; instead, it will focus on further supporting and enhancing the capacity of the existing guide community. This will be achieved through the development of tools and resources that improve the accessibility of supports, and the promotion of enabling environments that foster engagement and knowledge sharing across system partners.

The Indigenous End-of-Life Guide Expansion Project will be implemented in two phases:



Phase 1: Resource Development and Accessibility (August 2025 to March 2026)

Phase 1 of the expansion project will focus on the collaborative creation of tools and resources, along with the development of a regional interactive map of current guides.

The FNHA will work closely with current guides to co-develop practical tools and resources that support their work in communities. Additionally, a digital interactive map will be created to help individuals and families locate guides and access culturally safe end-of-life support services across regions, which aligns with the opportunity identified in 5.1.

Phase 2: Curriculum Expansion and System Integration (April 2026 to March 2027)

Phase 2 will focus on enhancing the IEOLG curriculum and building communities of practice to strengthen connections and promote lateral knowledge exchange.

In collaboration with First Nations health leads, current guides and FNHA teams, the curriculum will be updated to reflect insights from the evaluation. This includes integrating five opportunities identified above:

- Updating training design and delivery
- Providing post-training support
- Strengthening community capacity and expertise
- Embedding cultural safety and humility into all services
- Bringing care closer to home

In response to community and Elder feedback, the project will also facilitate joint learning experiences between First Nations health teams and regional health authority partners. These opportunities aim to foster mutual understanding, relationship-building, and collaborative care.



First Nations Health Authority
Health through wellness

Contact: evaluation@fnha.ca

For more information on the program expansion: cdsi@fnha.ca