CHILD WELLNESS



"We have been caring for our children since time immemorial. The teachings of our values, principles, and ways of being to the children and youth have ensured our existence as communities, Nations, and peoples. The values of our people have ensured our existence. It is to the children that these values are passed. The children are our future and our survival."

- Teaching from Shuswap Elder Mary Thomas¹

Children are cherished as sacred gifts from the Creator and recognized as both the present and future of First Nations families, communities and Nations.² Each child is seen as part of what makes a family and community whole. Their nourishment and protection is a central focus – and the health of the entire community is reflected in the health and happiness of its children.³

BC First Nations have always known that childhood is a unique and precious time in a girl's growth and development. The connections that girls establish during these early years, their environments, and how their bodies are nourished all have an impact on their future health outcomes.⁴ It is during childhood that girls formulate a view of themselves and of others, the world, and their place in it. This is also when they establish habits for healthy living and self-care that can shape their wellness through adolescence, adulthood, and old age.

Educating and caring for children is understood as a collective responsibility in BC First Nations cultures. First Nations girls often benefit from the love and support of their parents as well as a network of extended family and community members – especially grandparents, uncles and aunties. These kinship bonds help to root First Nations girls in their culture, territory, family and community, and to facilitate the development of strong and healthy self-identities.

In some communities, the structures, institutions and policies of colonialism have impacted these vital networks of support around First Nations girls, and disrupted the rituals, cultural practices and passage of teachings. Racism, sexism and misogyny remain embedded in the many Western systems First Nations children and their families must interact with in an attempt to meet basic needs. Discrimination across systems such as health, education, and child welfare create barriers for First Nations girls when it comes to securing the things they need to live well. These barriers are experienced differently and in many cases more acutely by those children whose gender identity is non-binary and/or different from their biological sex. Notwithstanding these challenges, many BC First Nations girls, just like the matriarchs, mothers, aunties and grandmothers that stand behind them, are living the vision of being healthy, thriving and self-determining.

This chapter draws attention to the many ways BC First Nations girls are flourishing in their wellness. It also highlights areas in which their ability to live to their full potential is limited by the ongoing impacts of colonial practices and policies. Finally, it illuminates the many ways that First Nations girls are exhibiting resilience in the face of these limitations and, together with their communities, are reclaiming control of the systems and transforming the relationships that influence their lives, health and wellness.

Girls are defined in this chapter as being between the ages of one and 12, although the ages captured by some of the quantitative data sources discussed differ slightly.

HEALTHY, SELF-DETERMINING CHILDREN & COMMUNITIES - ROOTS OF WELLNESS

A healthy childhood is pivotal to establishing the roots of wellness for First Nations girls. The individual identity each girl forms through connections to culture, the land and the community provides a foundation for health and well-being throughout her life. When these connections are strong, girls grow up with an understanding of where they come from, where they belong in the world, and how to live in a good way.

BC First Nations take collective responsibility for establishing these roots of wellness for their girls. Each Nation has unique teachings and ceremonies to empower girls with knowledge about ways of being in the world.¹ Passed on as lived experience or orally in the form of stories, songs and humour, these teachings provide guidance about respecting and caring for themselves and others, as well as the plants, animals, water and land. They also teach girls their roles and responsibilities within their communities.



A Note about Gender Inclusivity –

This chapter is intended to honour and celebrate the strengths, sacredness and wisdom of *all* First Nations children who identify as and/or express themselves as girls. The term "girl" is used in recognition of the fact that this includes those who were, and were not, born as female, and that some children have genders not fully described by this binary of male and female. Although there is currently very limited data available on the health and wellness of non-binary, transitioning and transgender children and youth, these distinctions are important as a person's gender identity is significant in shaping their wellness journey, their social determinants of health, and their access to services.

CONNECTIONS TO ANCESTORS, CULTURE, LANGUAGE AND CEREMONY

First Nations girls connect with their culture in many different ways. Some have the opportunity to take part in cultural activities such as beading, drumming, dancing and the potlatch, being out on the land and helping their mothers, aunties and grandmothers to

gather and prepare food, or learning their language from their Elders. For many First Nations girls, ritual and ceremony are another important way to engage with and become rooted in their culture from an early age. Nations often have special rituals to celebrate the milestones of a girl's development; these include providing age-specific teachings and reaffirming the community's love and support for each girl as she grows and assumes greater responsibility in the community. As babies or as young children, many BC First Nations girls are honoured through a naming ceremony, in which an Elder from the child's family or community chooses a spiritual name for the child.

"When we teach children our traditional values, we stay connected to our ancestors. This makes children some of our most powerful teachers and healers."

- Children's Voices, Our Choices

The potlatch is a spiritual and cultural ceremony central to the cultures of many First Nations in BC and held to celebrate and honour important occasions in a community such as the naming of children, marriage, transferring rights and privileges, and mourning the dead. While the traditions vary by Nation, these gatherings commonly include community feasts, the sharing of gifts, and the passage of rights, privileges and inheritances. (U'Mista Cultural Society, 2020; Living Tradition: the Kwakwaka'wakw Potlatch on the Northwest Coast)



"I was raised in the old way where my grandparents and my aunties took care of me while my parents worked, but I didn't know that until I learned about my culture. When I finally learnt about colonialism and the effects of residential school on my own family – and the fact that my grandmother went to residential school, I finally gained an understanding of my life experiences. It was then that a big weight lifted off of me and I had the curiosity to learn more about myself so I can mold myself into who I wanted to be as an individual.

"Now I work with youth. Even before I was 10 years old, I promised myself that, when I get older, I was never going to let my kids experience anything that I had growing up. I knew that I was going to change many cycles – and so that's what I've been doing. We spend a lot of time up the mountains with youth – bringing them into nature to recharge and disconnect from technology. I help youth to have a voice – to understand themselves and build self-awareness and self-identity.

"Youth keep saying over and over that they need culture. We bring culture to them and help them to gain that mental wellness by taking care of themselves, eating healthy, and taking care of the spirit more than anything. We help to build those relationships. It truly takes a community to raise a child."

- Nicole LaRock, Yakweakwioose First Nations, Stó: lō Nation98

CONNECTIONS TO LAND, WATER AND TERRITORY

Connection to land is an integral element of BC First Nations' perspectives of health and wellness. When a new child is born, some First Nations communities have a tradition of bringing the baby outside and touching their feet in the earth to mark their sacred, wholistic, spiritual interconnection with the land. There are also sacred teachings and rituals that build upon and nurture a First Nations child's relationship with and knowledge about the land, the waters and territory at every phase of their development.

There is growing acknowledgement of the inherent rights and value of
First Nations education, including increasing integration of First Nations
land-based approaches that emphasize learning through interaction with
a child's culture, language, family and the land. Through programs such
as Aboriginal Head Start On Reserve, girls are gaining access to traditional foods
and taking part in hunting, gathering and food-preparation activities. There are also an
increasing number of land-based culture camps and activities in community to allow children to
experience and learn the language and ways of the land that are so central to their lifelong wellness.

health "I am actually
a water Indian, so my
people live off of the ocean. Our
food, our culture, our housing, our language
everything about us is the ocean. There are
rites of passage with water, there is cleansing with
water for our people — so that youth can go through
times and understand who they are as an adult
and grow into people like that. It's just a very,
very sacred thing."

Raye, Participant, Strengthening Our Relations - Reconciliation through Indigenous Youth Leadership Conference¹⁰

CONNECTIONS TO THE COMMUNITY

Community and family are integral components of First Nations perceptions of individual health and wellness — and children are seen as a focal point of community health.¹ Kinship and communal bonds are important parts of First Nations identity — and these connections with family and relations are particularly vital during childhood. Removing even a single child from a community has consequences that reverberate beyond individual families.¹¹

"One way to think of children and resiliency is to imagine them with four blankets wrapped around them. These blankets protect them, guide them, root them in who they are and where they came from — ultimately fostering resiliency. The four blankets: self, family, community, and culture/language/connection to the land."

- Monique Gray, Cree, Lakota and Scottish; based in Victoria, BC12



"A Community to Raise our Children": This image shows four adult eagles taking the younger ones under their wings and guiding them in life. "Doing together as a whole makes things easier and more beautiful."

- Gordon White, Haida, Old Massett Village¹³

PARTICIPATION IN CULTURAL EVENTS



OF FIRST NATIONS GIRLS WERE **PARTICIPATING** IN CULTURAL ACTIVITIES, SUCH AS SINGING, DRUMMING OR DANCING



PART AT LEAST ONCE A WEEK

2015-2017 | RHS

FIRST NATIONS LANGUAGE



An increasing number of First Nations in BC are learning their own languages – and as of 2018, 78.1% of these learners were children and youth under the age of 25.14 Girls who are able to take part in language nests and immersion programs in communities throughout BC are spending an average of 14.3 hours per week (nearly three hours a day) immersed in their language.¹⁴

TRADITIONAL LANGUAGE



82%

KNOW A FEW WORDS

OF THOSE WHO KNOW A FEW WORDS.

ARE INTERMEDIATE/FLUENT

3%

FIRST NATIONS FOODS



OF FIRST NATIONS GIRLS ATE AT LEAST ONE TYPE OF TRADITIONAL FOOD (OTHER THAN BANNOCK) "OFTEN" IN THE PAST YEAR

2015-2017 | RHS

CARING ADULTS

Strong kinship ties within First Nations communities help to ensure that girls are surrounded by caring adults, and these attachments have significant impacts on a child's life. Whether the adult is a family member, someone in the community, or a teacher, these relationships can help a child to feel more connected and have a sense of belonging.

2015-2017 | RHS



OF INDIGENOUS GIRLS HAD CARING ADULTS IN THEIR LIVES - EITHER THROUGH SCHOOL, IN THEIR NEIGHBOURHOOD AND/OR IN THE HOME





- 70.1% at home
- **77.6**% from school
- 59.9% in their neighbourhood

2017/18 | MDI

MEALS AT HOME WITH ADULTS

Family meals can be a time for connecting, providing support, and strengthening kinship ties. Research has found that children who regularly eat meals with family members are more likely to possess social resistance skills used to combat peer pressure, have higher self-esteem, and hold a positive view of the future.16

OF INDIGENOUS GIRLS REPORTED HAVING DINNER AT HOME WITH ADULTS AT LEAST THREE NIGHTS PER WEEK





PROMISING PRACTICES

Every year, the **HEILTSUK KAXLA SOCIETY** hosts a homecoming ceremony to welcome Heiltsuk children who are in care off reserve. This is a time for the children and their caregivers to connect with Heiltsuk culture and extended family and to be on their territory. At homecoming, children are uplifted and honoured as members of the Heiltsuk community.¹⁵

SUPPORTIVE SYSTEMS **

Teachings passed down from Elders and Knowledge Keepers serve as a reminder that children are the hearts of First Nations families, communities and Nations. The care of children is a sacred and valued responsibility,¹⁸ and cultural values and practices help to ensure that girls have strong systems of support around them, enabling them to flourish.

At the same time, many of the systems that First Nations girls and their families must interact with to meet their basic needs – systems for education, food security, housing, health, justice – remain rooted in colonialism. While BC First Nations have worked to change these mainstream systems in various ways over time, these systems continue to create and perpetuate racist barriers that disadvantage First Nations girls and influence their social determinants of health.

The Calls for Justice and Calls to Action issued by the National Inquiry of MMIWG (2019) and the TRC (2015) respectively, the ruling and orders of the Canadian Human Rights Tribunal (2016), and the submissions of the Kelowna Accord (2005), all outline the policy changes required to address ongoing inequities that First Nations children and their families experience. First Nations matriarchs and Elders continue their advocacy to dismantle systemic biases that undermine the health and wellness of their children.

BC First Nations girls are following the lead of their strong, resilient matriarchs. They are adding their voices, perspectives and wisdom to this work to reclaim and transform systems, attitudes and relationships in ways that are necessary to create environments where all First Nations girls are supported to

"Our people hat that whatever have

This section describes systems that influence social determinants of health for First Nations girls, including education, food, economic well-being, health and child welfare. It highlights some of the work underway to transform these systems and reclaim First Nations' inherent rights to their own systems, which have supported them for thousands of years. It also highlights the resilience of BC First Nations women and the many ways they are

"Our people had a strong belief
that whatever happened, we had to
keep our family circle strong. With a circle,
there is no beginning and no ending. Within the
family circle, we have the grandparents — who were
the teachers — and the young moms, the young dads,
big brothers, big sisters, uncles, aunts and cousins.
They are all on the outside of the circle and every
one of them had an obligation to the little ones in
the centre. Children were never growing up
without somebody there all the time."

- Teaching from Elder Mary Thomas, Shuswap¹⁷

MAINSTREAM SYSTEMS AND THE ONGOING INTERGENERATIONAL LEGACY OF COLONIALISM



"I hope that
the next generation
grows out of this
racism and ignorant
phase, and grows a healthy
bond and place where
everyone gets along and is
respectful with each other."

- Natasha, Ojibwe and Irish (and an intergenerational residential school survivor)²⁰

leading this important work.

RACISM AND DISCRIMINATION

Racism and discrimination are embedded in mainstream systems and policies, and continue to harm BC First Nations girls. Manifested and experienced in many ways, systemic and interpersonal racism denies First Nations girls' rights to basic services such as education, ²¹ safety and protection, ²² and health care. ²³ Racism and oppression perpetuate trauma for individuals and communities more broadly.

Reports by numerous inquiries and reviews, including the Royal Commission on Aboriginal Peoples (1996), the Truth and Reconciliation Commission of Canada (2015), the Audit of the Education of Aboriginal Students in the BC Public School System (2015), the Canadian Human Rights Tribunal (2016), the National Inquiry into MMIWG (2019), and the Addressing Racism Review (2020), have brought attention to the continuing effects of racism and discrimination on First Nations families. These initiatives have also outlined the necessary steps for addressing the systemic barriers that continue to shape the realities of many First Nations girls and impact their ability to thrive.

VIOLENCE AND ABUSE

First Nations have roles and responsibilities, specific to each Nation, which relate to women and girls and their rights to security, culture, health and justice. ²⁴ Since contact, First Nations women and girls have been the target of violence: violence that the report of the National Inquiry into MMIWG describes as a "race-based genocide ... that especially targets women." ²⁴

The impacts of the genocide against First Nations women are pervasive and devastating. Inflicted through interpersonal relationships, through institutions, and through laws, the violence also has a direct and acutely negative impact on the well-being and security of First Nations children.

INTERGENERATIONAL TRAUMA AND HEALING

The attempted cultural genocide of Indian residential school systems marked the beginning of cycles of intergenerational trauma and neglect for many First

"As a residential school survivor, I was removed from my family as a pre-teen and placed in an institution that was devoid of warmth and love. There was no model of family structure, and we were left to our own devices to create fragile and tenuous relationships in rigidly segregated circumstances. The abject loneliness that I felt was shared by my dormitory peers. Many nights we cried ourselves to sleep missing the warmth, security, affection and support of our parents and home communities."

- Hilistis Pauline Waterfall, Heiltsuk First Nation²⁵

Nations peoples.²⁶ Many First Nations children have been denied their right to be raised in the loving, supportive collectives that were the norm before contact. The mental, emotional, physical and sexual abuse experienced in residential schools, during the Sixties' Scoop, and in current child welfare systems, perpetuates cycles of trauma and neglect. A 2016 *Report on Indigenous Child Welfare in British Columbia* described the impacts of intergenerational trauma as "the burdens carried by survivors, including a lack of parenting skills and scars from having witnessed or directly experienced abuse, which have had a profound effect on the ability of many Indigenous peoples to care for families." ²⁷ Individual

and collective traumas manifest in many ways, including increased rates of family violence, addiction, mental health issues and suicide.²⁸ The negativity and pain caused by trauma can also, at times, be misdirected towards one's family and children, friends and community in the form of lateral violence, bullying, and abuse that perpetuates traumas.²⁹

Over time, this cycle of trauma can cause negative behaviours to become normalized and incorporated into peoples' expectations, at times leaving survivors unable to identify and apply positive strategies for dealing with and escaping from the hurt.³⁰ Particularly when experienced during childhood, trauma can have profound lifelong impacts on a child's mental, psychological, physical and spiritual wellness.

"Today we continue to teach the language, right from preschool to Grade 12 and we're so fortunate to be able to do that. Like I said, you know, my great grandchildren can speak the language a lot easier than I can. They just learn it so quickly. And they're not afraid to get out there and dance or get up there with a drum or the clappers. They feel so good about it. It's really something to see. You know, when we were so ashamed of it. I remember being young – eight years old or seven, walking to school, Mom would put braids in my hair, and before I got to school, I would have the braids out. It was shameful because of all the stigma about who we were."

- Elder Virginia Peters (Siyamex), Sts'ailes First Nation³⁹

SUPPORTIVE SYSTEMS

First Nations girls have incredible resilience that has been inherited from and sustained through generations of BC First Nations in the face of adversity. Still, the trauma that some First Nations girls experience as a result of colonial oppression and cumulative emotional, physical, spiritual and psychological traumas that have been inflicted across generations³¹ is highly complex and distinct from other types of trauma. Having community and health service providers who understand the history, dynamics and impacts of intergenerational trauma, and who support wholistic and community-grounded approaches, is vital to support their healing without perpetuating the harm. Many families and communities are also breaking the cycles of trauma by returning to teachings and ancestral protocols, reintegrating ceremony into their lives, and renewing respectful relationships within the family, community, and natural and spiritual environments.32

BULLYING AND CYBER BULLYING



GIRLS ENDURED EXPERIENCES OF BULLYING IN THE PAST YEAR

2015-2017 | RHS





PROMISING PRACTICES



"If we know about the past, we can try to make it better in the future. That residential school is something, yes, that happened and Orange Shirt Day is a time to try and educate more people."

- Haley Paetkau, Penelakut First Nation

Haley organized the first Orange Shirt Day to be held at her school in Victoria after being inspired by seeing her father, Steve Sxwithul'txw, share stories at an the Orange Shirt Day ceremony to help educate about the impacts of residential schools on Indigenous families.³³





Children from the Songhees First Nation Daycare and Preschool taking part in an Anti-Bullying/Pink Shirt Day rally.34

(Photo: Adrian Lam, Times Colonist)

SUPPORTIVE SYSTEMS

EDUCATION SYSTEM

Many First Nations peoples and communities share a view of learning as a wholistic, experiential and lifelong process. ³⁵ Beginning at a young age, children are taught about how to live in the world in a good way and about their responsibility to other people, other communities, and nature. ³⁶ Education is not restricted to formal mainstream classroom settings, but rather embedded in all aspects of life. All things, both animate and inanimate, are understood to have important teachings to impart, and children are exposed to these teachings through diverse settings all grounded in land, culture and language. ³⁷

"We need to let the people know our ways. We need to create a better understanding. The only way we can do that is to let them know and expose it to them also because you can't really gain a strong understanding of our ways and the way we do things by reading it or by just hearing it. It's something that really needs to be experiential. If we are going to be giving a teaching, you know, sitting in a classroom isn't going to be as meaningful as going to a longhouse or one of our own traditional settings."

- Elder Virginia Peters (Siyamex), Sts'ailes First Nation³⁹

Many Elders talk about teaching children as a sacred responsibility. It is also common in First Nations communities for all members to have a duty to ensure that children receive the knowledge, language and values they need to survive and thrive in the world. Research has affirmed that the learning that occurs in the first six years of a child's life — as they develop their emotional, physical, intellectual and spiritual capacities — is particularly foundational to their future development and wellness

"The children do
not belong to us; we
belong to the children.
There is real hope
when we centre children's
education as a way of life,
not just as programs."

- Children's Voices, our Voices⁸

ABORIGINAL HEAD START



OF FIRST NATIONS GIRLS
ATTENDED AN ABORIGINAL HEAD

START ON RESERVE PROGRAM

2015-2017 | RHS

journey. It is at this stage that the foundation for self-esteem and pride in one's community and culture is laid and is therefore crucial to the development of a child's identity and sense of self.³⁸

Families and extended families remain a child's most influential source of learning — and knowledge about their cultures, languages and ancestors continues to be a vital component of their education. Over the past decade, much work has been done by the First Nations Education Steering Committee and others to ensure that all First Nations children, including those attending school in the mainstream education system, have the opportunity to learn about their cultures. The public education curriculum has been enhanced so that non-Indigenous children are also taught about shared colonial history and First Nations history prior to contact. Vital progress has also been made toward restoring First Nations' inherent right to control the education of their children. Examples such as the Aboriginal Head Start On Reserve program for early learning and First Nations schools are showing the benefits of self-determination in education — not only for First Nations children, but for communities at large.

ACADEMIC SELF-CONCEPT

Children learn best in an environment where they feel safe, cared for and supported. 40 How they perceive their own academic ability and how confident they feel in mainstream classrooms can shape their learning path. Research has found that children's view of themselves as learners — or their academic self-concept^b — is also influenced by receiving consistent positive feedback from parents and teachers. Self-reported data of Indigenous students between 2013/14 and 2017/18 also suggest that younger Indigenous girls felt more supported and more confident than older Indigenous girls.



EVERY YEAR BETWEEN 2013/14 AND 2017/18, APPROXIMATELY THREE-QUARTERS OF INDIGENOUS GIRLS REPORTED A HIGH LEVEL OF CONFIDENCE IN THEIR ACADEMIC ABILITIES

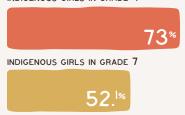
2013/14 and 2017/18 | MDI



SCHOOL SUPPORT AND BELONGING

Indigenous girls in Grade 4 were more likely than Indigenous girls in Grade 7 to feel a higher level of support at school.

INDIGENOUS GIRLS IN GRADE 4



2017/18 | MDI

STRONG SENSE OF BELONGING AT SCHOOL

Indigenous girls in Grade 4 were more likely than Indigenous girls in Grade 7 to feel a strong sense of belonging at school.

INDIGENOUS GIRLS IN GRADE 4



2017/18 | MDI

EARLY DEVELOPMENT

The Early Development Instrument^c (EDI) measures five core areas of early child development that are predictors of adult health, education and social outcomes. The EDI questionnaire is completed by kindergarten teachers across BC for all children in their classes. The data provide insights on the proportion of children within a given area who are "on track," i.e., on the path for optimal development, and who are "vulnerable," i.e., lack additional support and care, such that they may experience future challenges in school and society.



2004/05 through 2018/19 | EDI



PROMISING PRACTICES

A three-part series, **EXPLORING YOUR PROGRAM**, provides resources and knowledge to support child educators for how they might weave the relationship of land-based teaching and programs into Aboriginal Head Start On Reserve programs in community. The series covers:

- Connections to Land-Based Learning;
- Connections with our Plants, Foods and Medicines; and
- Fostering Education.

"Along with a group of like-minded friends, we have taken control of our children's education by developing a loosely organized group called the 'Indigenous Life School.' Each family does things slightly differently but the premise for all of us is that we focus on life skills, emotional intelligence, revitalizing cultural practices, and learning as a family. As parents and educators, we have experienced the disconnect from our cultures that colonization, residential schools, and the Sixties' Scoop has had on our knowledge, and as such we ensure that learning our culture and language is not just for the kids, but for the adults too! Through the Indigenous Life School, we focus on preparing our children for the future and strengthening their connection to land and culture. Many of our lessons follow the traditional seasonal round. For example, since September, we have focused on harvesting for the cold winter months ahead. We have completed our salmon harvest, and my son, an avid fisherman, has also brought in a number of char and trout to fill up our freezer. Over the years he has learned not only how to fish, but has learned about fish anatomy, food preservation methods, the sacredness of our water and the need to protect it, and how to safely use traditional and Western tools. We also garden, forage, and hunt our own foods and medicines so it has been a busy month and not a lot of formal book work - but this is education at its Indigenous finest!"

- Carla Lewis, Wet'suwet'en Nation (Gitdumt'en Clan)⁴¹

bas measured by students' level of agreement with the following statements: i) I am certain I can learn the skills taught in school this year; ii) If I have enough time, I can do a good job on all my school work; and iii) Even if the work in school is hard, I can learn it. A child was interpreted as having high self-concept if their average responses were "agree a lot" or "agree a little."

Concerns have been raised about the validity and potential bias of the EDI for use with Indigenous children. An Independent Assessment of the EDI, commissioned by the First Nations Education Steering Committee in 2016, found no bias, but as the study included only a small sample of teachers, concluded that the potential for bias in the implementation of the instrument still remains. (Ref: http://earlylearning.ubc.ca/media/publications/edi_assessing_bias_-_final_report_2016-01-16.pdf)

ECONOMIC SYSTEM

BC First Nations share strong values around respecting and caring for one another and the land, particularly as it relates to children. However, historical and ongoing colonial processes of dispossession and assimilation, together with inequitable service provision, have resulted in manufactured poverty, as well as economic and social inequities for First Nations. These inequities are particularly pronounced for First Nations children, who experience poverty at higher rates than any other population in Canada. Poverty negatively impacts children in many ways, including limiting their access to basic needs and opportunities, causing them to be isolated from social supports, raising their stress levels, and undermining their sense of hope. Strong community connections and kinship ties can be vital to a family's capacity to maintain stability in times of economic need. Still, research has affirmed that children who experience poverty are also most vulnerable to a host of other risk factors, including an increased likelihood of being removed from their families and communities and placed in the care of the state.

FOOD SYSTEM

Food is an integral element of BC First Nations cultures — and vital in nourishing a child's mind, body and spirit. For many BC First Nations peoples, the teachings, practices and ceremonies related to hunting, fishing, gathering, preparation and sharing of food are a central aspect of their identity. Ensuring that First Nations children have the opportunity to take part in these practices, and learn about and eat the foods that have comprised the diets and medicines of generations, helps them connect to their families and their heritage. Indigenous foods are highly nutritious and offer a healthier alternative to the processed foods that dominate Western-based diets.

"They have to know what's happening in their body – so they can look after it – and how to eat. All the foods – everything is medicine. They have to know that. I want them to heal naturally. Everything we need is right here around us. All they have to do is know what it is and go get it."

- Choostl'o Bunk'ut Camp Leader⁵²

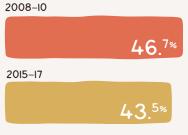
CHILDREN LIVING IN LOW-INCOME FAMILIES 30.9% OF BC INDIGENOUS CHILDREN UNDER 18 YEARS OF AGE LIVING OFF RESERVE WERE LIVING IN POVERTY*46

*as defined by the Low-Income Cut-Off Rate

2016 | Census

AFFORDING BALANCED MEALS

The proportion of First Nations households who could not afford to eat a balanced meal (in the past 12 months) remained about the same.



2008-10; 2015-17 | RHS

Despite a growing movement to revitalize Indigenous food systems and sovereignty, the lands and waters have experienced changes that now limit peoples' ability to access Indigenous foods. ⁴⁷ Diets and eating habits have been influenced by an abundance of processed, commercial food sources, ⁴⁷ as well as mainstream food safety regulations that favour market foods and limit the use of Indigenous foods in some school and early childhood settings. ⁴⁸

Colonialism, the *Indian Act*, the reservation system, and climate change have created food insecurity for many BC First Nations, which in some cases means that children are not getting enough to eat or may not be getting the right types of foods to nourish them physically and spiritually. Food insecurity can cause nutrient inadequacies in children and be associated with issues such as obesity,⁴⁹ hyperactivity and inattention.⁵⁰



PROMISING PRACTICES

NADLEH WHUT'EN periodically coordinates a cultural camp at Choostl'o Bunk'ut, also known as Ormond Lake, for its children to learn about First Nations language, food, harvesting practices. Activities include storytelling, fishing, hunting, berry picking, among other traditional activities. 52

HEALTH SYSTEM

Every Nation has its own stories and teachings on how to live well, how to take care of each other and the earth, and how to create a harmonious family and community, as well as a just society. These stories and teachings, passed down over thousands of years, provide guidance to families and communities in raising healthy and resilient girls and supporting their girls through any health challenges they might encounter. Ceremony, First Nations medicines and healing practices continue to play important roles in the wellness of BC First Nations families and their children. The mainstream health system also plays a role in addressing girls' health care needs — but to do so in a good way, the health system must be culturally safe and free of racism and discrimination.

My hope for health care is that my family gets taken care of in a good way — that my grandchildren know they can go into a hospital and be given treatment that everyone else in the province gets and not be stereotyped because of who they are and where they come from. That they don't face the troubles and traumas that my daughter faced by going into an emergency ward and being asked, 'Do you drink? Do you use drugs?'"

- Elder Syexwáliya Ann Whonnock, Skwxwú7mesh Úxwumixw (Squamish Nation)55

ACCESS TO PEDIATRICIAN CARE

ACCESS TO PEDIATRICIAN
CARE FOR FIRST NATIONS
CHILDREN AGES O TO
FIVE YEARS OLD WAS

80%

THAT OF OTHER
RESIDENTS⁵⁴

2016/17 | In Plain Sight (2020)

Unfortunately, the mainstream health care system in Canada, which is grounded in colonial and Western-based knowledge systems, has been a source of

first-hand and intergenerational trauma for many BC First Nations. Racist stereotypes at the individual level and institutionalized through practices and policies lead to discrimination towards families and individuals and impede their access to services.⁵³ As reported by the Addressing Racism Review (2020), First Nations women are disproportionately targeted and impacted by racism in the health system.⁵⁴ The barriers that exist for First Nations women have a direct, negative impact on the health of First Nations girls, and in many cases, are compounded by intergenerational trauma their families and communities have experienced within the health system.

Jordan's Principle, passed in 2007, was an acknowledgement of, and response by, the Government of Canada to the complex funding and service delivery model that discriminates against and causes harm to First Nations children. Named in honour of Jordan River Anderson, a young boy from Norway House Cree Nation in Manitoba who was a victim of these inequities, Jordan's Principle ensures that there are no gaps in publicly funded health, social and education programs, services and supports for First Nations children. Through Jordan's Principle, First Nations children (0-18 years) with an identified need can receive funding for health, social and education products, supports and services. To report a case of Jordan's Principle in BC or for more information: email: sac.principedejordancb-bcjordansprinciple.isc@canada.ca.

JORDAN RIVER ANDERSON

Jordan River Anderson was a young boy from Norway House Cree Nation in Manitoba. Jordan was born in 1999 with multiple disabilities and stayed in the hospital from birth. When he was two years old, doctors said he could move to a special home for his medical needs. However, the federal and provincial governments could not agree on who should pay for his home-based care. Jordan stayed in the hospital until he passed away at the age of five. Jordan's Principle, which makes sure that First Nations children have access to the products, services and supports they need when they need them, is named in honour of his memory.

4

PROMISING PRACTICE

RIPPLE EFFECT OF RESILIENCY is a self-led course for those who work with or support those who work with Indigenous children, youth and families. The six modules are designed to help learners develop their understanding of colonialism and how it impacts them and the people they work with. There is also a print resource: *The Ripple Effect of Resiliency: Strategies for Fostering Resiliency with Indigenous Children,* by Monique Gray Smith (ISBN: 978-0-9878690-1-2).

CHILD WELFARE SYSTEM

For thousands of years, BC First Nations have ensured the safety and well-being of their children with their own laws and teachings. Suppressing First Nations systems and embedding ideologies of white supremacy in policies and practices through the *Indian Act*, residential schools, the Sixties' Scoop, and the relatively contemporary child welfare system, have eroded First Nations' inherent rights to care for their children. The system is based on colonial, Euro-Western models of the nuclear family and notions of parenting, which are different from the traditional, kinship relational approaches to child care of many First Nations. As highlighted by several inquiries and reviews, this chronic and pervasive removal of children from their families and communities has had, and continues to have, devastating individual and collective impacts on the health and well-being of BC First Nations.



For generations, First Nations have been asserting and calling for recognition of First Nations' inherent rights over the care of their children. Numerous reports and inquiries^d have echoed this call — and the call for adequate needs-based funding — in their recommendations. Reform of the child welfare system and the full and proper implementation of Jordan's Principle

was also advanced by the

Truth and Reconciliation

Takla Lake First Nation (Luxgaboo Wolf Clan)⁶⁰

life into jurisdiction we already have."

- Mary Teegee, Gitxsan and Carrier from

"Is [BILL C-92] a passable Act? We need to be

careful. I think our children deserve more than

just passable ... There should have been more

concentration given to the funding, to breathe

Commission of Canada as its top Call to Action. 58

is a tendency to codify
poverty as neglect, which is why
so many Indigenous children end up in
care ... it's not that their families don't care
about them – it's because they didn't have and
couldn't access the resources needed to care
for them. Therefore, child welfare codifies
discrimination and colonization as personal
or family deficits instead of tackling
the underlying problems."

Dr. Cindy Blackstock
 Gitxsan First Nation⁵⁷

The Act respecting First Nations, Inuit and Métis children, youth and families (also called Bill C-92) came into force on January 1, 2020 and recognizes Indigenous peoples' jurisdiction over child and family services as part of their right to self-governance. The Act also establishes principles for governing child welfare to ensure that when determining the best interests of an Indigenous child, primary consideration is given to the child's physical, emotional and psychological safety, security and well-being. The Act emphasizes the need for the system to shift from apprehension to prevention, with priority given to services that promote preventive care to support families. It also establishes protocols to preserve a child's connection to their family, community and culture. 59

"In a best-case scenario, we have to approach [BILL C-92] as an opportunity – but we have to do it with our eyes wide open, and that means acknowledging there is lots of lack of clarity here and that is never good for kids and families in vulnerable situations. So let's walk into this and ask really good questions, take it slow, do what we know we do really well – and really test the federal government's willingness to accept its responsibilities to support First Nations in their important work in caring for kids and families. And while we're doing that, we're going to have our courageous conversations in our Nations and with ourselves about how are we going to address the multigenerational impacts of colonialism in our communities ... I don't know of a First Nations law for children or family that is based on anger or based on hate. They're all based on love and unity and respect. We need to harness those values that we have traditionally – the gifts from our ancestors in our distinct Nations – and use that as a basis for moving forward."

- Dr. Cindy Blackstock, Gitxsan First Nation⁶¹

A growing number of Nations are reclaiming sovereignty and asserting their inherent right to care for their children. They are restructuring their child welfare services in alignment with their traditions, laws and teachings to keep families together.

- As of January 2021, 148 First Nations bands in BC are represented by agencies that either have, or are actively planning toward, delegation agreements to manage their own child and family services. 62
- There are 24 Indigenous agencies with various levels of delegation: three 2016 | BC Ministry of Child & Family Development; NHS can provide voluntary services and recruit and approve foster homes; seven have the additional delegation necessary to provide quardianship services for children in continuing care; and 14 have the delegation required to provide, in addition to the above, full child protection, including the authority to investigate reports and remove children. 62
- As of January 8, 2021, five First Nations had submitted requests to enter into a tripartite coordination agreement with Indigenous Services Canada. 63 If parties can reach an agreement within 12 months, "or reasonable efforts to reach an agreement were made during that year, including use of alternative dispute resolution mechanism," then the Indigenous governing body would exercise its jurisdiction — and its laws on child and family services would "prevail over federal, provincial and territorial laws." ⁶⁴



INDIGENOUS GIRLS (0-9 YEARS) WERE IN CARE AT

THE RATE OF NON-INDIGENOUS **GIRLS**

PROMISING PRACTICES

THE TOUCHSTONES OF HOPE FOR INDIGENOUS CHILDREN, YOUTH AND FAMILIES is a movement toward reconciliation in child welfare to ensure better outcomes for Indigenous children, youth and families — to ensure they are safe and living in dignity and respect. The movement is about promoting and entrenching the Touchstones of Hope principles and process in grassroots control, preparing community-based facilitators to work with communities and organizations, and developing culturally driven vision plans and next steps that are meant to inform child welfare practice and policies specific to regions and Nations. The reconciliation process is guided by five Touchstones of Hope principles that are defined and brought to life by those involved in the movement so that they reflect the unique context of Indigenous Nations and communities. These culturally relevant principles serve as the foundation of the movement toward reconciliation in child welfare and better outcomes for Indigenous children. They are: self-determination, culture and language, wholistic approach, structural interventions, and nondiscrimination.65

The **RED WILLOW** WOMYN'S SOCIETY IS a grassroots, Indigenouswomen-led organization in the Cowichan Tribes First Nations territory. It was founded in 2009 as a small group of Indigenous and non-Indigenous women who began weekly gatherings to talk about their lived experiences with daily systemic oppressions. Through these "sharing circles," Red Willow womyn helped each other navigate their daily barriers, and the circle grew. Today, the Society acts as a support for the wider Hul'qumi'num community. Through guided cultural protocols and teachings, they support and advocate for one another and work to strengthen families and the role of mothers as sacred life givers.

"Indigenous Womyn in Canada, we are the Warriors of spirit. We are guided by the wisdom of our ancestors that lives right inside our bones. Blood ties that hold the life force of the Great Unknown, held by the stars above this earthly throne. Never can this be taken from us, always we have known — how our grandmothers fought for us from the heart of our clanship homes. We connect in this ancestral flow walking in balance, sacred as we go. Saying 'No!' to the maze of the child welfare craze, joining together sisters in spirit

- excerpt from a piece written by Patricia Dawn (Métis and Cree), founding Mother of the Red Willow Womyn's Society60

womynhood medicine ways."

with sisters of these modern days, always in our



PROMISING PRACTICES

THE NA GAN TS'I'STK GRANDMOTHERS

are majority matriarchs of the nine tribes of Lax kw'alaams. Brought together around their traditional matriarchial teachings, Lax kw'alaams grandmothers support children and families to ensure children stay connected to their community, heritage, and culture. They do this by inviting children and youth to meet their extended families in Lax kw'alaams and to learn cultural activities such as traditional seaweed gathering. They help to promote healing for families in the community and, in doing so, have reduced the number of children being taken into care. ⁶⁷

On October, 26, 2018, STÓ:LO MATRIARCHS stood and reclaimed their jurisdiction for children and families in that Nation. In the Stó:lo world view, the concept of "matriarch" refers to the eldest woman or the woman recognized by family as their matriarch, who carries the thread of family history and culture, as well as ceremonial and naming rights of her family. In keeping with this ancestral role, Stó:lo matriarchs signed a declaration pledging to keep the children of the Nation safe and within their families. ⁶⁹

"This year was the first year that I got to spend time with my grandfather, and for me, it's created a lot of positive changes in my life. I believe that without him, I would be taking a very different path. You know, even after all the abuses that have happened in the past that have pushed our culture down, I think now is the time when a lot of youth are in need of that support and that guidance ... and so if you're out there and you have a chance to connect with a youth, then please — we really need you."

- Emma Joye Frank, K'ómoks First Nation, Kwakwakawakw - Namgis Nation and Eh-Cho Dene Nation

"We are here to support
children and families, to work with our
children and youth, to encourage them to complete
their education, to take pride in who and what they are,
where they come from, to teach them about their culture,
who they belong to — their Nation, tribe, crest, clan, family
— to help work towards and build self-care plans and
safety plans so that our children feel safe — and parents
as well. We're here to be mentors and role models and
helpers and teachers."

- Na gan ts'i'stk Grandmothers⁶⁸



HEALTHY BODIES, MINDS AND SPIRITS



First Nations girls live, grow and flourish in the context of their families and communities. Mental, physical and spiritual wellness is strengthened by identity, culture and kinship ties, but is negatively impacted by intergenerational trauma, systemic well as the cultural values that underlie their lifestyles, behaviours and relationships.

BC First Nations have Nation-specific laws, customs and teachings that guide families and communities in creating ensuring the health and happiness of their children and babies is understood to be a central focus, and the child's wholistic wellness is seen as a reflection of the community's well-being.⁷⁰

This section offers a glimpse into the data and lived experiences of BC First Nations girls as they relate to health outcomes associated with their

MENTAL WELLNESS AND NURTURING THE SPIRIT

Mental wellness is achieved through a balance of the mental, emotional, spiritual and physical. This balance is enhanced when girls feel a sense of purpose in their daily lives, when they have hope for the future, a sense of belonging and connectedness with their family, community and culture, and an understanding of their place in the world. When girls are supported to achieve mental

wellness, they can realize their own potential and more easily cope with the stresses of life, 73 as well as contribute to and live in harmony with family, community, nature and the environment.74

GENERAL HEALTH



of Indigenous GIRLS REPORTED BEING IN "GOOD" OR "EXCELLENT" HEALTH

"Remembering who we are is absolutely important as we look forward to who we want to be again in the future – as Nations, as families, as communities. We have ... a vision that speaks to healthy children, healthy families and healthy communities, but also having a sense of vibrancy. And what does vibrancy mean? How do you measure vibrancy? Our Elders said, it starts with the sparkle in the eye of a child. Do our children have a sparkle in their eyes? What does that actually mean for a child to have a sparkle in their eye? It's a sense of belonging, a sense of love, a sense of purpose, asense of safety. It's being inquisitive – wanting to know things."

- Gwen Phillips, Ktunaxa Nation⁷¹

2017/18 | MDI

"Indigenous children hold a unique place in our collective: they embody the past through our teachings, they experience the present, and they hold our dreams for the future. Their individual identities ensure collective cultural continuity."84

Well-Being Composite Index

The well-being composite index combines children's scores from 15 questions related to optimism, self-esteem, happiness, absence of sadness, and general health.



of Indigenous girls scored as "high" and "thriving" on the well being in the "thriving" on the well-being index.

24 5% scored in the "medium" range.

2017/18 | MDI

First Nations have always known that a girl's emotional and social development during childhood sets a path for balance and mental wellness in later years of life. In many Nations, each stage of a girl's life is filled with teachings about the world, the plants, water, and animals, and how to care for and respect them. Storytelling and humour are used to enhance their capacity to overcome everyday challenges. Each child is seen to enter the world with special gifts to share with their family and community. They also have responsibilities in the community that grow as the girls gets older, instilling in them a clear sense of purpose as well as an understanding of their role, their relationship to others, and to the land.

Colonial policies and practices have deliberately disrupted First Nations knowledge and practices that nurture and sustain mental wellness. As a result, many First Nations girls have limited access to their own healing practices. In some cases, families may not feel ready, or may choose not to reconnect and relearn their teachings. ⁸⁰ Colonialism has also created inequalities in the social determinants of health for many First Nations families, exposing them disproportionately to poverty, overcrowded and sub-standard housing, food insecurity, social and economic exclusion, and inadequate health services. ⁸¹ These inequities, particularly when combined with a cultural disconnect, can have a negative impact on a girl's sense of belonging and mental wellness. ⁸²

As a result of ongoing advocacy to uphold their inherent rights, a growing number of communities are working to re-establish the circles of connectedness around their children⁸³ and many First Nations girls continue to benefit from opportunities to learn their language, connect with their Elders, and establish roots in their culture. With this foundation in culture and tradition, First Nations girls are growing up proud, with strong senses of identity as well as the knowledge and skills they need to live well as they transition into adolescence.

"Each child grew up learning about their importance to the community and their responsibility to their teachers and the other people within their community. They would learn this too from the teacher mentors who guided them into the ways of communal life. Another of the Syilx laws is that we are each responsible to everyone else in the community; each of us are a healthy part of the 'whole' family. The adults had the responsibility to model and teach from the earliest age that our actions are always connected to the others within the community. In this way we learned that we needed to think about what impact everything we did had on our people. It was not okay to hurt any member of our community. Our love, health and well-being were tied to each other, and we knew this with every fibre of our being before we became an adult. We understood our connection to our family and extended family, our community, the whole Nation and our land, which included every living thing on it. This too was the law of the Syilx people."

> Sheila A. Nyman, Syilx First Nation, in memory of her Great Aunt Doll⁷⁵

"When I was growing up, my mother performed a coming-of-age ceremony. She did this on her own because unfortunately our relatives were at residential school. She was quite sad at the time but she explained what would happen. She said normally the women in the community would take me aside usually down by the river and they'd share their teachings with me of what it is growing from a young girl into womanhood and what our responsibilities are growing into womanhood. That we were there to support the whole family wherever and however we could. That we're also a gift from Creator and that we are able to bring life into the world. I was so happy to get these teachings from my mom and I too was sad that none of my aunts and grandmothers and cousins were there to support me during this ceremony, but that ceremony stayed with me all my life."

- Lucy Barney, Titget Nation (Statimc Territory)99





OPTIMISM AND FUTURE GOALS

Optimism is about having positive expectations for the future. Having goals and feeling hopeful about the future relates to a variety of long-term benefits — including greater success in school and work, less likelihood of depression and anxiety, greater satisfaction in relationships, better physical health, and a longer life. It is also a strong predictor of resiliency for children facing adversity.



78.1%

OF INDIGENOUS

GIRLS HAD

PLANS FOR

THEIR FUTURE

8/10
INDIGENOUS GIRLS
HAD EITHER
MODERATE OR HIGH
OPTIMISM ABOUT
THE FUTURE



MORE THAN
HALF OF
INDIGENOUS
GIRLS HAD
HIGH LEVELS
OF OPTIMISM

2017/18 | MDI

2017/18 | MDI

ZU1//18 | MIDI

HAPPINESS



of Indigenous GIRLS WERE HAPPY WITH THEIR LIFE AND REPORTED FEELING THAT THINGS IN THEIR LIFE WERE "EXCELLENT"

PEER RELATIONSHIPS - A SENSE OF BELONGING AND CLOSE FRIENDSHIPS

>9/10

INDIGENOUS GIRLS FELT A MEDIUM/ STRONG SENSE OF BELONGING TO THEIR PEERS



90%
OF INDIGENOUS
GIRLS HAD AT
LEAST ONE
CLOSE FRIEND

2017/18 | MDI

Every year 2013/14 - 2017/18 | MDI

SELF-ESTEEM



OF INDIGENOUS
GIRLS
EXHIBITED A
STRONG AND
HEALTHY
SENSE OF
SELF-ESTEEM/
SELF-WORTH

POSTIVE BODY IMAGE

INDIGENOUS GIRLS
IN GRADE 4 WERE
MORE LIKELY TO
HAVE A POSITIVE
BODY IMAGE THAN
GIRLS IN GRADE 7

Percentage of Indigenous girls reporting "always" or "often" liking the way they looked:

INDIGENOUS GIRLS IN GRADE 4

66.4%

INDIGENOUS GIRLS IN GRADE 7

48 ⁹%

2017/18 | MDI

2017/18 | MDI

PROMISING PRACTICES

L, KI, L (L,TH,KEEL) CHILD AND YOUTH MENTAL HEALTH PROGRAM of Hulitan Family and Community Services Society provides support to First Nations children, youth and their families to improve their mental health and over all well-being. "L, KI, L," in the SENĆOŦEN language, refers to the confidence and the positive feeling arising from an appreciation of one's own ability. The program uses a wholistic approach and embraces the teachings of the medicine wheel to build confidence, empower and address the mental, emotional, physical and spiritual needs of children and their families.⁸⁵

SEXUAL WELL-BEING AND REPRODUCTIVE JUSTICE

BC First Nations have teachings and ceremonies to teach children how to care for themselves and to respect their bodies and those of others. Prior to contact, sexual development was seen as a natural phase of a person's life journey, and sexual health was recognized as an integral component of overall wholistic health and wellness. First Nations traditions and strong kinship bonds within communities ensured that as children began to experience puberty, they were surrounded by, and had access to, the knowledge and lived experience of adults and Elders.

Residential schools and attempted assimilation introduced colonial constructs of sexuality and morality, and disrupted the passage of teachings and ceremony around aspects of sexual wellness. In addition, experiences of mental, emotional, physical and sexual abuses inflicted in residential schools, distorted and disrupted many individuals' relationships with their bodies and future sexual health.

Many First Nations cultures honour a girl's journey into womanhood and recognize women's moon time and reproductive cycles as sacred. In stark contrast, European settlers enforced strict, patriarchal attitudes towards gender and sexuality. 86



PROMISING PRACTICES

There is an Indigenous Sexual Well-Being

LEARNING MODEL that some communities have used to start conversations around traditional knowledge and ways of being in regards to healthy sexuality. It is a strengths-based model that acknowledges healthy sexuality as an important aspect of overall wholistic health and wellness. The model builds on First Nations values related to developing and maintaining healthy relationships and protecting oneself and one's community from communicable diseases including sexually transmitted infections. Being immunized for HPV is a particularly important way girls can care for themselves and help protect their future sexual well-being.

The silence, stigma, and shame that has been attached to sexual matters though colonial institutions has had intergenerational impacts, ⁸⁷ including impacting the ability of First Nations children and their families to acquire sexual health information ⁸⁸ and services when needed, and rendering First Nations girls more vulnerable to sexual assault and sexually transmitted illnesses. ⁸⁹ These challenges in accessing services are exacerbated in rural and remote communities. ⁹⁰ Children and youth who identify with a gender that is not the same as their biological sex and those who are fluid in their gender identity often face additional barriers in accessing care and discussing gender-affirming health care needs due to discrimination ⁹¹ and limited experience among health care providers in managing gender dysphoria. ⁹²

HEALTHY BODIES

First Nations culture and teachings support healthy, wholistic diets and active lifestyles that help ensure children are well-nourished physically, mentally and spiritually. Colonialism has caused a significant shift in the prevailing food systems and ways of life, resulting in more sedentary lifestyles and an increased reliance on much less nutritious or non-nutritious processed foods containing large amounts of saturated fats and sugar. While this transition has impacted the health outcomes of First Nations children, many Nations are returning to their teachings about the importance of traditional, natural foods to help ensure the health and vitality of future generations.

HEALTHY EATING

Food is a vital component of wellness for First Nations girls — with the potential to nurture their bodies and strengthen their connections to family and culture. Eating a balanced and nutritious diet, such as that provided by First Nations foods, is important to girls' ongoing growth and development. Learning about and taking part in activities such as berry picking, fishing and canning provides an opportunity for girls to connect with their families and ancestors. Sharing meals together with family and community also helps to build a sense of purpose and belonging.

HEALTHY EATING The majority of Indigenous girls reported eating junk food in moderation. 35.5% ate junk food (e.g., chips, candy, pop) once a week or never. 44.4.7% ate it two to four times a week.

HEALTHY BODIES, MINDS AND SPIRITS

Due to the ongoing negative impacts of colonization, including poverty and food insecurity, some First Nations children are vulnerable to inadequate intakes of certain vitamins and minerals, particularly vitamin D, calcium and iron.⁴⁷ Processed foods and diets high in sugar and saturated fats are also contributing to rising rates of obesity and diabetes among First Nations children.⁹⁴

SELF-RATED BODY WEIGHT

As girls become more self-aware and self-conscious, how they view their own body can have an increasing impact on their wellness. Body image dissatisfaction during childhood can impact a girl's self-esteem and lead to other mental health challenges later in life. 95



2017/18 | MDI

61.9%

OF INDIGENOUS GIRLS FELT THAT THEIR BODY WEIGHT WAS "JUST RIGHT"



PHYSICAL ACTIVITY

First Nations knowledge and teachings recognize the positive influence of physical activity on wholistic wellness. ⁹⁷ Being active during childhood is vital to a girl's development and can improve confidence, self-esteem, strength and coordination, while also helping to develop healthier social, cognitive, and emotional skills. When the activity takes place outdoors, there are the extra spiritual benefits of being on the land. Physical activities and sports are also a fun way for children to connect with their family, community and their culture.

Establishing an active lifestyle during childhood lays the foundation for health in later years, establishing the motivation, confidence and competence for lifelong patterns of activity and reducing the risks of illness and chronic disease. This is particularly important given the growing proportion of activities that are more sedentary and involve sitting in a car, or in front of a screen, computer, TV or tablet.

In balance with being active, it is equally important for a child to get adequate rest. It is precious time for the healthy growth of their minds and bodies and vital for the rejuvenation of their spirits.

"Some of my earliest memories as a youth are from the summer and fall, when everyone in my community would be smoking salmon and jarring it – and being put on fish-gutting duty. At the time, I didn't think it was so awesome, but now I know how valuable it is and it was teaching me respect. It's just like when I went to Wet'suwet'en culture camps, and we butchered moose meat. I remember all those teachings we learned there. The culture in my community is strong and it's definitely helped me a lot in growing up and being proud of being Wet'suwet'en. I remember there was a time when I wasn't proud and that was really hard for me to get through. I think it can be difficult for the youth still - being proud of who you are when we've received so much discrimination and racism as Indigenous people. It's a big part of your wellness, your mental wellness, to be proud of your culture and your identity."

- Michelle Buchholz, Wet'suwet'en Nation96

PHYSICAL ACTIVITY



59 8%

OF FIRST
NATIONS GIRLS
GOT THE
RECOMMENDED
HOUR OF DAILY
PHYSICAL
ACTIVITY

2015-17 | RHS

SCREEN TIME



IS THE AVERAGE TIME SPENT
ON SCREEN BY FIRST NATIONS GIRLS
WHICH IS MORE THAN THE
RECOMMENDED TWO-HOUR
DAILY LIMIT OF SCREEN TIME FOR
CHILDREN

2015-17 | RHS

SLEEP

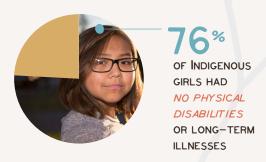


of Indigenous

GIRLS REPORTED
"GETTING A GOOD
NIGHT'S SLEEP" AT
LEAST FIVE NIGHTS
A WEEK

2017/18 | MDI

PHYSICAL CONDITION/ILLNESS

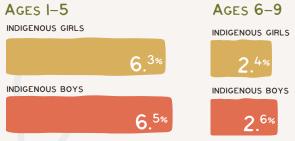


2017/18 | MDI

ORAL HEALTH

The Addressing Racism Review (ARR) highlighted the disparity between First Nations and Other Residents in the rates in hospitalization of children for dental caries as being among the greatest of all commonly evaluated health indicators.98

HOSPITALIZED TO TREAT DENTAL CARIES



2019/20 | In Plain Sight (2020)

CONCLUSION

Children are a central, vital part of First Nations societies. In many Nations, the health and wellness of the children is seen as an indicator of community well-being overall, and communities consider it a collective responsibility to ensure each child is happy, healthy and raised in a good way. This attention and care for children helps to establish First Nations girls' connections to the roots of wellness: their culture, land and community. It also fuels their knowledge and inherent resiliency as they grow and transition into adolescence.

With the reclamation of First Nations languages, ceremonies and teachings, a growing number of First Nations girls are thriving in the context of their communities. There is still work to be done to dismantle the barriers and racist discrimination that First Nations girls and their families encounter in interacting with mainstream colonial systems. With these obstacles removed, this future generation of matriarchs will be in a better position to live to their full potential.

> Memories of stolen past Towards a bright future, no going back Let's build a home where we can hope and laugh Loodis Lp 'Nunn, an Elder, told me that Let's be a voice, who remain in silence The youth of today, ain't afraid of rising For the missing women, who are facing violence There's a road of Loomsk, let's change and find it.

There's a highway of Loomsk Take us to the promised path There are many who are lost We've been waiting on these changes So if your life is going downhill Just slow down Guilks Ama niisgn (take care of yourself) We can hold on And be proud And bring hope back to where we live.



- Lyrics excerpted from "The Highway," a song written by Kitsumkalum youth 101 about The Highway of Tears, a 724-kilometre stretch of the Yellowhead Highway between Prince Rupert and Prince George that has limited public transit and where more than 40 women and girls, mostly Indigenous, have gone missing or been murdered since 1969.



CHILD WELLNESS

¹Greenwood M. BC First Nations children: our families, our communities, our future. 2003 Mar 1.

Available from: https://www.ahvna.org/tiny_uploads/forms/BC_First_Nations_Children.pdf.

²First Nations Early Childhood Development Council (FNECDC). The BC First Nations Early Childhood Development Framework. Vancouver, Canada: FNECDC; 2016. Available from: https://www.deslibris.ca/lD/232470.

³Smylie J. Our babies, our future: Aboriginal birth outcomes in British Columbia. Prince George, BC: National Collaborating Centre for Indigenous Health; 2011. Available from: https://www.nccah-ccnsa.ca/docs/health/FS-OurBabiesOurFuture-Smylie-EN.pdf.

⁴B.C Atlas of Child Development, British Cohort Study, Early Adversity Study (EAS).

⁵First Nations Health Authority. Family connections. West Vancouver, BC: First Nations Health Authority. Available from: https://www.fnha.ca/Documents/familyconnections.pdf.

⁶Carriere J, Richardson C. From longing to belonging: attachment theory, connectedness, and Indigenous children in Canada. In: McKay S, Fuchs D, Brown (Eds.), I, editors. Passion for action in child and family services: voices from the prairies. Canadian Plains Research Centre; 2009. pp. 49–67.

⁷Taylor, A.B., Chan, A., Hall, S.L., Saewyc, E. M., & the Canadian Trans & Non-binary Youth Health Survey Research Group (2020). Being Safe, Being Me 2019: Results of the Canadian Trans and Non-binary Youth Health Survey. Vancouver, Canada: Stigma and Resilience Among Vulnerable Youth Centre, University of British Columbia. Available from: https://apsc-saravyc.sites.olt.ubc.ca/files/2020/12/Being-Safe-Being-Me-2019_SARAVYC_EN-G_1.2.pdf. https://www.homelesshub.ca/sites/default/files/attachments/2_Indigenous_LGBTQ2S_Youth.pdf.

8 Metro Vancouver Aboriginal Executive Council. (2021). "Children's Voices, Our Choices" [Video] https://drawingwisdom.ca/project/generous-spirit/.

⁹Best Start. Taking care of our children. Toronto, ON: Best Start; 2016.

Available from: https://resources.beststart.org/wp-content/uploads/2019/01/K67-A.pdf.

¹⁰Indigenous Youth Wellness. Welcome to Indigenous youth wellness! [Internet]. Indigenous Youth Wellness; 2021.

Available from: http://www.Indigenousyouthwellness.ca/.

¹¹Carriere, J., &, Richardson, C. (From longing to belonging: attachment theory, connectedness, and Indigenous children in Canada. In: McKay S, Fuchs D, Brown I, editors. Passion for action in child and family services: voices from the prairies. Canadian Plains Research Centre; 2009). pp. 49–67.

¹²Gray Smith M. Fostering resiliency with Indigenous children and families. Victoria, BC: Little Drum Consulting.

Available from: https://www.gov.mb.ca/healthychild/ncd/forum2016-keynote_fostering_resiliency.pdf.

¹³Perinatal Services BC. Celebrating the Circle of Life: Coming back to Balance and Harmony. 2013. BC Reproductive Mental Health Program, a program of BC Mental Health & Addiction Services (BCMHAS), an agency of the Provincial Health Services Authority.

Available from: http://www.perinatalservicesbc.ca/Documents/Resources/Aboriginal/CircleOfLife/CircleOfLife.pdf.

¹⁴First Peoples' Cultural Council. Report of the status of B.C. First Nations language 2014. Brentwood Bay, BC: First Peoples' Cultural Council; 2014. Available from: http://www.fpcc.ca/files/PDF/Language/FPCC-LanguageReport-141016-WEB.pdf.

¹⁵Heiltsuk Kaxla Society. Community: Homecoming. https://www.kaxla.org/programs-services/community.

¹⁶http://www.discovermdi.ca/wp-content/uploads/2017/02/MDI-Technical-Guide-20170207.pdf; Fulkerson, J.A., Story, M., Mellin, A., Leffert, N., Neumark-Sztainer, D., & French, S.A., (2005). Family dinner meal frequency and adolescent development: Relationships with developmental assets and high-risk behaviors. Journal of Adolescent Health, 39, 337- 345. Zarrett, N., & Lerner, R. M. (2008, February). Ways to promote the positive development of children and youth. Child Trends Research-to-Results Brief. Publication 2008-11.

¹⁷The National Collaborating Centre for Aboriginal Health (NCCAH) and the First Nations Health Authority (FNHA). Parents as First Teachers. 2013; 2019. Available from: https://www.fnha.ca/WellnessSite/WellnessDocuments/parentteacher.pdf#search=parents%20are%20teachers Page 7.

¹⁸Assembly of First Nations. Early learning and child care [Internet]. Ottawa, ON: Assembly of First Nations. Available from: <a href="https://www.afn.ca/policy-sectors/social-secretariat/early-learning-and-child-care/#:"-text=First%20Nations%20have%20an%20inherent%20and%20sacred%20responsibility,is%20delivered%20by%20way%20of%20four%20key%20initiatives%3A.

¹⁹Crengle S, Freemantle J, Gallaher G, McAullay D, McShane K, Taualii M. Indigenous children's health report: health assessment in action. Toronto, ON: Keenan Research Centre. Available from: http://www.welllivinghouse.com/wp-content/uploads/2014/04/ichr_report-web.pdf.

²⁰Gray Smith M. Speaking our Truth: A Journey of Reconciliation Victoria, BC: Orca Book Publishers, 2017.

²¹Auditor General of British Columbia. An Audit of the Education of Aboriginal Students in the BCB.C. Public School System. Victoria, BC: Auditor General of British Columbia; 2015 Nov.

Available from: https://www.bcauditor.com/sites/default/files/publications/reports/OAGBC%20Aboriginal%20Education%20Report_FINAL.pdf.

²²National Inquiry into Missing and Murdered Indigenous Women and Girls. Reclaiming power and place: the final report of the national inquiry into missing and murdered Indigenous women and girls. Ottawa, ON: National Inquiry into Missing and Murdered Indigenous Women and Girls; 2019 Jun. Available from: https://www.mmiwq-ffada.ca/final-report/.

²³Reference Addressing Racism Inquiry

²⁴MMIWG, Executive Summary, https://www.mmiwg-ffada.ca/wpcontent/uploads/2019/06/Executive_Summary.pdf.

²⁵Waterfall PH. For First Nations, these are precedented times. The Tyee. 2020 May 22. Available from: https://thetyee.ca/0pinion/2020/05/22/First-Nations-Precendented-Times/.

²⁶TRC Final Report, Volume 33.

"("Indigenous Resilience, Connectedness and Reunification — From Root Causes to Root Solutions, A Report on Indigenous Child Welfare in British Columbia Final Report of Special Advisor Grand Chief Ed John, p. 35 https://fns.bc.ca/wp-content/uploads/2017/01/Final-Report-of-Grand-Chief-Ed-John-re-Indig-Child-Welfare-in-BC-November-2016.pdf.

²⁸Aguiar, W., Halseth, R. (2015). Addressing the healing of Aboriginal adults and families within a community-owned college model." Prince George, BC. NCCAH. https://www.ccnsa-nccah.ca/docs/context/RPT-AddressingHealingAdultsFamilies-Aquiar-Halseth-EN.pdf.

²⁹Bombay A, Matheson K, Anisman H. Origins of Lateral Violence in Aboriginal communities. Aboriginal Healing Foundation. 2014. Available from: http://www.ahf.ca/downloads/lateral-violence-english.pdf.

³⁰Aguiar W, Halseth R. Aboriginal peoples and historic trauma: the process of intergenerational transmission. Prince George, BC: National Collaborating Centre for Indigenous Health; 2015.

 $\label{lem:https://www.ccnsa-nccah.ca/docs/context/RPT-HistoricTrauma-IntergenTransmission-Aguiar-Halseth-EN.pdf.$

³¹Brave Heart MYH. The return to the sacred path: healing the historical trauma and historical unresolved grief response among the Lakota through a psychoeducational group intervention. Smith College Studies in Social Work. 1998;68(3):287-305.

³²LaBoucane-Benson, "Reconciliation, Repatriation and Reconnection: A Framework for Building Resilience in Canadian Indigenous Families." https://aventa.org/wp-content/uploads/2018/01/Trauma-Child-Development-Healing-Resilience.pdf.

³³Coles K. Nine-year-old history teacher inspires action at B.C. school. Haida Gwaii Observer. 2018 Oct 4.

Available from: https://www.haidagwaiiobserver.com/community/nine-year-old-history-teacher-inspires-action-at-b-c-school/.

³⁴Times Colonist. Photo Gallery on Times Colonist Gallery: Anti-bullying day at Songhees Preschool: February 27, 2013. https://www.timescolonist.com/gallery-anti-bullying-day-at-songhees-preschool-1.81711.

³⁵Battiste M. Indigenous Knowledge and Pedagogy in First Nations Education: An education: a Literature Review with Recommendations. Ottawa, ON: Indian and Northern Affairs Canada; 2002 Oct 31. Available from: https://www.afn.ca/uploads/files/education/24. 2002 oct marie battiste indigenousknowledgeandpedagogy lit review for min working group.pdf.

https://www.am.ea/aprodus/mes/education/24._2002_0e_mane_battiste_magenousknowledgeanapedagogy_ne_cenew_to_mini_working_group.pdf.

³⁶Cajete G. Look to the Mountain: An Ecologymountain: an ecology of Indigenous Education. Skyland:education. Durango: Kivaki Press; 1994.

³⁷FNIGC. (2018). Understanding Child Care in First Nations Communities. FNIGC Research Series: March 2018. https://fnigc.ca/wp-content/uploads/2020/09/bd344e1dba275b7a507eec2322bce7db_fnigc_research_series_child_care_en_final.pdf. ³⁸Phillips, C., (1994). The movement of African -American children through socio -political contexts. In B.L Mallory and R.S. New (Eds.), Diversity and Developmentally Appropriate Practices Challenges for Early Childhood Educators.

(pp. 137-154). New York, NY: Teacher's College, Columbia University; Gonzalez-Mena, J. (1993). Multicultural issues in child care. Mountain View, CA: Mayfield Publishing Co.; Derman-Sparks, L. and the ABC Task Force, (1989). Anti -bias curriculum tools for empowering young people. Washington, DC: National Association for the Education of Young Children. Michael Chandler's (2000).

³⁹First Nations Health Council. Leading with culture in First Nations community contexts [video file]. 2017 Nov 2. Available from: https://www.youtube.com/watch?v=N_LpTXiTqCl&feature=youtu.be.

⁴⁰http://www.discovermdi.ca/wp-content/uploads/2017/02/MDI-Technical-Guide-20170207.pdf Human Early Learning Partnership. The middle years development instrument. Vancouver, BC: Human Early Learning Partnership. University of British Columbia. 2018 Jan. Available from: http://www.discovermdi.ca/wp-content/uploads/2017/02/MDI-Technical-Guide-20170207.pdf.

⁴¹Deaust, A. 'Carla Lewis shares her wellness and home schooling tips' October 29, 2020. https://thebighouse.fnha.ca/news/Pages/Carla-Lewis-shares-her-wellness-and-home-schooling-tips-.aspx.

⁴²Royal Commission on Aboriginal Peoples. Report of the Royal Commission on Aboriginal Peoples. Volume 5. Renewal: a twenty-year commitment. Government of Ottawa, ON: Canada. Communication Group — Publishing; 1996. Available from: http://data2.archives.ca/e/e448/e011188230-05.pdf.

⁴³Brittain M, Blackstock C. First Nations child poverty: a literature review and analysis. Edmonton, AB: First Nations Children's Action Research and Education Service; 2015. Available from: https://fncaringsociety.com/sites/default/files/First%20Nations%20Child%20Poverty%20-%20A%20Literature%20Review%20and%20Analysis%202015-3.pdf.

⁴⁴National Collaborating Centre for Indigenous Health. Poverty as a social determinant of First Nations, Inuit and Métis Health. Prince George, BC: NCCIH.National Collaborating Centre for Indigenous Health; 2020 Mar.

Available from: https://www.nccih.ca/495/Poverty_as_a_social_determinant_of_First_Nations,_Inuit,_and_Métis_health.nccih?id=289.

⁴⁵Office of the Auditor General of Canada. (2008). 2008 Report of the Auditor General of Canada, Chapter 4: First Nations child and family services program: Indian and northern affairs Canada. Minister of Public Works and Government Services Canada. https://www.oag-bvg.gc.ca/internet/ English/parl_oag_200805_04_e_30700.html; Office of the Auditor General of Canada. (2011). 2011 June status report of the Auditor General of Canada, Chapter 4: Programs for First Nations on reserves. Minister of Public Works and Government Services Canada. https://www.oag-bvg.gc.ca/internet/English/parl_oag_201106_e_35354.html; First Nations Child and Family Caring Society of Canada and Assembly of First Nations vs. Attorney General of Canada. (2014). Closing submissions of the First Nations Child and Family Caring Society of Canada. Ottawa: ON. Canadian Human Rights Tribunal: File No. T1340/7008.; https://fncaringsociety.com/sites/default/files/First%20Nations%20Child%20Poverty%20-%20A%20Literature%20Review%20and%20Analysis%202015-3.pdf.

⁴⁶First Call BC Child and Youth Advocacy Coalition. 2019 BC child poverty report card. Vancouver, BC: First Call BC Child and Youth Advocacy Coalition. Available from: https://still1in5.ca/wp-content/uploads/2020/01/First_Call_Report_Card_2019_Summary_revised_Jan_22_2020_web.pdf.

⁴⁷First Nations Health Authority. Healthy food guidelines for First Nations communities. West Vancouver, BC: First Nations Health Authority. Available from: https://www.fnha.ca/Documents/Healthy Food Guidelines for First Nations Communities.pdf.

⁴⁸Provincial Health Services Authority. Increasing Indigenous children's access to traditional foods in early childhood. Vancouver BC: Provincial Health Services Authority; 2016. Available from:

https://www.acc-society.bc.ca/wp-content/uploads/2018/06/Increasing-Indigenous-childrens-access-to-traditional-foods full-report.pdf.

⁴⁹Bhawra J, Cooke MJ, Guo Y, Wilk P. The association of household food security, household characteristics and school environment with obesity status among off-reserve First Nations and Métis children and youth in Canada: results from the 2012 Aboriginal Peoples Survey. Health Promotion and Chronic Disease Prevention in Canada. 2017 March;37(3):77-86.

⁵⁰Melchior M, Chastang J, Falissard B, Galera C, Tremblay R, Cote S, et al. Food insecurity and children's mental health: a prospective birth cohort study. PLoS One. 2012 Dec;7(12):e52615.

⁵¹First Nations Health Authority and Office of the Provincial Health Officer. First Nations Population Health and Wellness Agenda. 2021.

⁵²Nadleh Whut'en First Nation. Nadleh Bunk'ut Cultural Camp. http://www.nadleh.ca/programs/cultural-camp/

⁵³Allan B, Smylie J. First peoples, second class treatment: the role of racism in the health and well-being of Indigenous peoples in Canada. Toronto, ON: The Wellesley Institute; 2015. Available from: https://www.wellesleyinstitute.com/publications/first-peoples-second-class-treatment/.

⁵⁴Addressing Racism Review. December 2020. In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care. https://engage.gov.bc.ca/app/uploads/sites/613/2020/11/In-Plain-Sight-Full-Report.pdf. 55BC Patient Safety & Quality Council. Caring for First Nations: Syexwaliya / Ann Whonnock at Health Talks [video file]. 2017 Mar 30. Available from: https://www.youtube.com/watch?v=TBZ9YyxX0x4.

⁵⁶Blackstock C, Cross T, George J, Brown I, Formsma, J. Reconciliation in Child Welfare: touchstones of hope for Indigenous Children, Youthand Families. Ottawa, ON: First Nations Child & Family Caring Society of Canada, National Indian Child Welfare Association; 2006. Available from: https://cwrp.ca/sites/default/files/publications/Touchstones_of_Hope.pdf.

⁵⁷Sanders C. Children in poverty perceived as neglected. Winnipeg Free Press. 2013 Apr 30. Available from: https://www.winnipegfreepress.com/local/children-in-poverty-perceived-as-neglected-205352501.html.

⁵⁸First Nations Child and Family Caring Society of Canada. Preliminary Briefing Sheet: Bill C-92 an act respecting First Nations, Métis and Inuit children, youth and families. Ottawa, ON: First Nations Child and Family Caring Society of Canada; 2019 Mar 9.

Available from: https://fncaringsociety.com/sites/default/files/legislation_bn_march_9_2019.pdf.

⁵⁹Government of Canada. Key highlights of the act [Internet]. Ottawa, ON: Government of Canada. Available from: https://www.sac-isc.gc.ca/eng/1568071056750/1568071121755.

⁶⁰Barrera, J. 2019. Child advocates worry about funding for Canada's 'path-breaking' Indigenous child welfare bill.' CBC News. Available from: https://www.rcinet.ca/eye-on-the-arctic/2019/03/01/indigenous-children-canada-bill-c92-welfare-funding/.

⁶¹Warrior Life. Cindy Blackstock on Bill C-92 Indigenous Child Welfare. Available from: https://soundcloud.com/pampalmater/cindy-blackstock-on-bill-c-92-indigenous-child-welfare.

⁶²Government of British Columbia. Delegated Aboriginal agencies in BC [Internet]. Victoria, BC: Government of British Columbia. Available from: https://www2.gov.bc.ca/gov/content/family-social-supports/data-monitoring-quality-assurance/reporting-monitoring/accountability/delegated-aboriginal-agencies.

⁶³Government of Canada. Notices and requests related to An Act respecting First Nations, Inuit and Métis children, youth and families [Internet]. Ottawa, ON: Government of Canada. Available from: https://www.sac-isc.gc.ca/eng/1608565826510/1608565862367.

⁶⁴McKenzie, A. 26 Indigenous governing bodies are reclaiming authority over child welfare. IndigiNews. 2021 Jan 21. Available from: https://indiginews.com/vancouver-island/reclaiming-authority-over-indigenous-child-welfare-systems.

⁶⁵First Nations Child & Family Caring Society of Canada. Touchstones of hope for Indigenous children, youth and families: reconciliation in child welfare. Ottawa, ON: First Nations Child & Family Caring Society of Canada; 2019.

Available from: https://fncaringsociety.com/sites/default/files/how-to_quide_-_reconciliation_in_child_welfare_2019_0.pdf.

⁶⁶Dawn P. We are the sacred life givers: reclaiming the sacred sister hoop. Cultural Survival Quarterly Magazine.

Available from: https://www.culturalsurvival.org/publications/cultural-survival-quarterly/we-are-sacred-life-givers-reclaiming-sacred-sister-hoop.

⁶⁷De Finney, S. 2015. Na Gan Ts'i'stk Grandmothers' Group of Laxkw'alaams. First Peoples' Child & Family Review: 10(1). 2015. Available from: https://48fefbb5-5e3d-4a93-89eb-404d5b1af024.filesusr.com/ugd/9675f5_6957e6065e07497fa98990885ad3425c.pdf.

68Northwest Inter-nation Family and Community Services Society. Grandmothers' Group. https://www.nifcs.org/.

⁶⁹Grand Chief Doug Kelly, in Government of Canada. Support for Child and Family Services Co-Developed Legislation. November 30, 2018. Available from: https://www.sac-isc.gc.ca/eng/1543584936789/1543585105080.

⁷⁰https://www.nccah-ccnsa.ca/docs/health/FS-HonouringOurChilldren-Smylie-EN.pdf; Aboriginal Healing and Wellness Strategy. AHBHC Program Overview. Aboriginal Healthy Babies Healthy Children Program. Toronto, ON: Aboriginal Health and Wellness Strategy.

⁷¹First Nations Health Council. The social determinants of health from a First Nations perspective [video file]. 2019 Jul 16. Available from: https://www.youtube.com/watch?v=aD-wYpDsooQ.

⁷²Health Canada. First Nations mental wellness continuum framework: summary report. Ottawa, On: Health Canada; 2015 Jan.

⁷³World Health Organization. 2018. Mental health: strengthening our response. Fact Sheets. March 30, 2018. https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response.

⁷⁴Vukic, A., Gregory, D., Martin-Misener, R., & Etowa, J. (2011). Aboriginal and Western Conceptions of Mental Health and Illness. In Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health 9(1) 2011. 65-86.

⁷⁵First Nations Health Authority. BC First Nations and Aboriginal Maternal, Child and Family Strategic Approach. West Vancouver, BC: First Nations Health Authority; 2013 Aug. Available from: https://www.fnha.ca/WellnessSite/WellnessDocuments/BC_First_Nations_and_Aboriginal_Maternal_Child_and_Family_Tripartite_Strategic_Approach.pdf#search=families%20teachers%20children.

⁷⁶National Collaborating Centres for Public Health. (2017). Population mental health promotion for children and youth: A public health primer. Ottawa, ON: Author.

⁷⁷Best Start Resource Centre. A child becomes strong: Journeying through each stage of the life cycle. Toronto, ON: Best Start Resource Centre; 2010. Available from: https://resources.beststart.org/wp-content/uploads/2019/01/K12-A-child-becomes-strong-2020.pdf.

⁷⁸Royal Commission on Aboriginal Peoples. Report of the Royal Commission on Aboriginal Peoples. Volume 3. Gathering strength. Ottawa, ON: Canada Communication Group — Publishing; 1996. Available from: http://data2.archives.ca/e/e448/e011188230-03.pdf.

⁷⁹Best Start Resource Centre. Supporting the sacred journey: from preconception to parenting for First Nations families in Ontario. Toronto, ON: Best Start Resource Centre; 2012. Available from: https://resources.beststart.org/wp-content/uploads/2018/12/E31-A.pdf.

**Metz First Nations Health Authority. Good medicine: wellness champion Megan Metz draws on Haisla culture to support youth mental health and wellness [Internet]. West Vancouver, BC: First Nations Health Authority; 2020 Aug 12. Available from: https://www.fnha.ca/about/news-and-events/ news/good-medicine-wellness-champion-megan-metz-draws-on-haisla-culture-to-support-youth-mental-health-and-wellness.

⁸¹ King, M., Smith, A., & Gracey, M. (2009). Indigenous health Part 2: The underlying causes of the health gap. Lancet, 374, 76-85. Loppie, C., & Wien, F. (2009). Health inequalities and the social determinants of Aboriginal Peoples' health. Prince George, BC: National Collaborating Centre for Aboriginal Health.; Smylie, J. (2009b). The health of Aboriginal Peoples. In D. Raphael (ed.), Social determinants of health, 2nd Ed. (pp. 280-304). Toronto, ON: Canadian Scholars' Press.).

⁸²Atkinson, D. 2017. Considerations for Indigenous child and youth mental health promotion in Canada. Canada: National Collaborating Centres for Public Health. Available from: http://nccph.ca/images/uploads/general/07_Indigenous_MentalHealth_NCCPH_2017_EN.pdf.

⁸³Government of Canada. Aboriginal children: the healing power of cultural identity. Ottawa, ON: Government of Canada. Available from: https://www.canada.ca/en/public-health/services/health-promotion/childhood-adolescence/programs-initiatives/aboriginal-head-start-urban-north-ern-communities-ahsunc/aboriginal-children-healing-power-cultural-identity.html.

⁸⁴Greenwood M, Jones E. Being at the interface: early childhood as a determinant of health. In: Greenwood M, de Leeuw S, Lindsay NM, Reading C, editors. Determinants of indigenous Peoples' health in Canada: beyond the social. Toronto: Canadian Scholars' Press Inc.; 2015. p. 64–77. (p.65)

⁸⁵Hulitan Family & Community Services Society. L, KI, L (L,TH,KEEL) Child and Youth Mental Health Program.

https://www.hulitan.ca/child-and-youth-mental-health-program/.

⁹² Press Progress. 14 first-hand stories underlining how residential schools tried to "get rid" of Indigenous cultures [Internet]. Press Progress. 2015 Dec 16. Available from:

https://pressprogress.ca/14_first_hand_stories_underlining_how_residential_schools_tried_to_qet_rid_of_indigenous_cultures/.

⁸⁷Truth and Reconciliation Commission of Canada. (2015). The Survivors Speak.

Retrieved from: http://www.trc.ca/assets/pdf/Survivors_Speak_English_Web.pdf.

⁸⁸Chavoshi N. The cedar project: understanding the sexual vulnerabilities of Indigenous young people who use drugs in British Columbia, Canada. PhD [dissertation]. Vancouver: University of British Columbia; 2017. Available from:

https://open.library.ubc.ca/cIRcle/collections/ubctheses/24/items/1.0354389.

⁸⁹University of British Columbia. Children of residential school survivors and victims of childhood sexual abuse are at increased risk of sexual assault [Internet]. Vancouver, BC: University of British Columbia. Available from: https://med-fom-spph-internal.sites.olt.ubc.ca/2015/04/10/children-of-residential-school-survivors-and-victims-of-childhood-sexual-abuse-are-at-increased-risk-of-sexual-assault/.

⁹⁰Sexual and reproductive health, rights, and realities and access to services for First Nations, Inuit, and Métis in Canada. Journal of Obstetrics and Gynecology Canada, 33(6):633–637.

⁹¹Veale J, Saewyc E, Frohard-Dourlent H, et al. Being safe, being me: results of the Canadian Trans Youth Health Survey. Vancouver: Stigma and Resilience Among Vulnerable Youth Centre — University of British Columbia; 2015.

⁹²Joseph H. Bonifacio, J.H., Maser, C., Stadelman, K. & Palmert, M. 2019. Management of gender dysphoria in adolescents in primary care. CMAJ January 21, 2019 191 (3) E69-E75. https://www.cmaj.ca/content/191/3/E69.

⁹³Reading, J. (2009). The Crisis of Chronic Disease among Aboriginal Peoples: A Challenge for Public Health: Population Health and Social Policy. Victoria, BC: Centre for Aboriginal Health Research.

⁹⁴Earle, L. 2013. Traditional Aboriginal Diets and Health. National Collaborating Centre for Aboriginal Health. Prince George. https://www.ccnsa-nccah.ca/docs/emerging/FS-TraditionalDietsHealth-Earle-EN.pdf.

⁹⁵Willows, N. D., Ridley, D., Raine, K. D., & Maximova, K. (2013). High adiposity is associated cross-sectionally with low self-concept and body size dissatisfaction among indigenous Cree schoolchildren in Canada. BMC pediatrics, 13, 118. https://doi.org/10.1186/1471-2431-13-118.; Human Early Learning Partnership. 2017. Middle Development Instrument — Technical Guide. http://www.discovermdi.ca/wp-content/uploads/2017/02/MDI-Technical-Guide-20170207.pdf.

⁹⁶First Nations Health Authority. First Nations students' reflections following the regional data governance engagement session. West Vancouver, BC: First Nations Health Authority. Available from: http://www.fnha.ca/wellness/sharing-our-stories/first-nations-students-reflections-follow-ing-the-regional-data-governance-engagement-session.

⁹⁷Indigenous Sport, Recreation and Physical Activity Partners Council. Aboriginal sport, recreation and physical activity strategy. Indigenous Sport, Recreation and Physical Activity Partners Council; 2009 Apr. Available from: http://isparc.ca/pdf/asrpa_strategy.pdf.

⁹⁸Addressing Racism Review. December 2020. In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care. Data Report. Available from: https://engage.gov.bc.ca/app/uploads/sites/121/2020/11/ln-Plain-Sight-Data-Report_Dec2020.pdf1_.pdf.

⁹⁹Personal communication. Nicole LaRock, March 30, 2021.

¹⁰⁰First Nations Health Council. Leading with culture in First Nations community contexts [video file]. 2017 Nov 02. Available from: https://www.youtube.com/watch?v=n_lptxitqci&feature=youtu.be.

101New Jinan. N'we Jinan Artists — "THE HIGHWAY" [video file]. 2017 Jan 23. Available from: https://www.youtube.com/watch?v=hG_9d260Yel.