



The First Nations Summit encourages governments to work together in addressing the alarming conditions of First Nations health in Canada

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The Chiefs and leaders of the First Nations Summit, who are meeting this week in North Vancouver, are encouraging the governments of BC and Canada to work together in addressing the alarming condition of Aboriginal health in Canada following the release of the Romanow Commission's Report on the state of health care in Canada.

"The Romanow Commission underlines what we already know; there are deep and continuing disparities between aboriginal and non-aboriginal Canadians both in terms of their health and their ability to access health care services", stated Gand Chief Edward John, a member of the First Nations Summit political executive.

"We agree there needs to be action on improving the health of Aboriginal people across Canada. The British Columbia Provincial Health Officer, Dr. Perry Kendall, recently released a report on the state of Aboriginal health in BC. We applaud Dr. Kendall's report for taking a solutions oriented approach and for providing specific targets for action in a number of specific areas", added Chief John.

"The First Nations Summit acknowledges the immediate need for Canada and British Columbia to work in partnership with First Nations to move forward on actions which are designed to improve the health of Aboriginal people. It is critical that we establish a coordinated and proactive approach to improve on the alarming statistics on aboriginal health. The status quo is clearly not acceptable", said Lydia Hwitsum another member of the Summit's political executive.

The Summit encourages the governments to work together in achieving the targets contained in the recent report of the British Columbia Provincial Health Officer, which include;

- Achieve and maintain infant mortality in the Status Indian population at a rate equal to the general population by 2005.
- Develop measures of success for early childhood growth and development by 2005.
- Increase immunization rates among two-year-old children to 85 per cent by the year 2005.
- Reduce Aboriginal smoking rates by one per cent per year over to lower the current smoking rate of 45 per cent.

- Reduce Status Indian death rates due to HIV/AIDS to the 1991-2000 average rate of 1.2 per 10,000 by 2005, effectively halting the worsening trend (the 2000 rate was 1.4 per 10,000).
- Reduce the Status Indian injury death rate 50 per cent from the 1991-2000 baseline (17.7 per 10,000) by 2005.
- Improve Aboriginal women's Pap smear and screening mammography participation to a rate equal to other B.C. women (specific targets to be set once information systems are in place to allow improvements to be tracked).
- Decrease Status Indian preventable admissions to hospital 25 per cent from the 1987-2000 baseline (12.3 cases per 1,000) by 2005. (Preventable admissions include diabetes, asthma, hypertension, neurosis, depression, and abuse of alcohol or other drugs – conditions that can usually be managed in the community without the need for hospital admission).
- Improve continuity of care for mental health patients by 3 per cent per year (from the baseline of 60 per cent in 2000-01), as measured by the proportion of Status Indian population hospitalized for a mental health diagnosis who receive community follow-up within 30 days of discharge. (Source: Report on the Health of British Columbians Provincial Health Officer's Annual Report 2001)

The First Nations Summit speaks for BC First Nations currently participating in the treaty negotiations process.

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