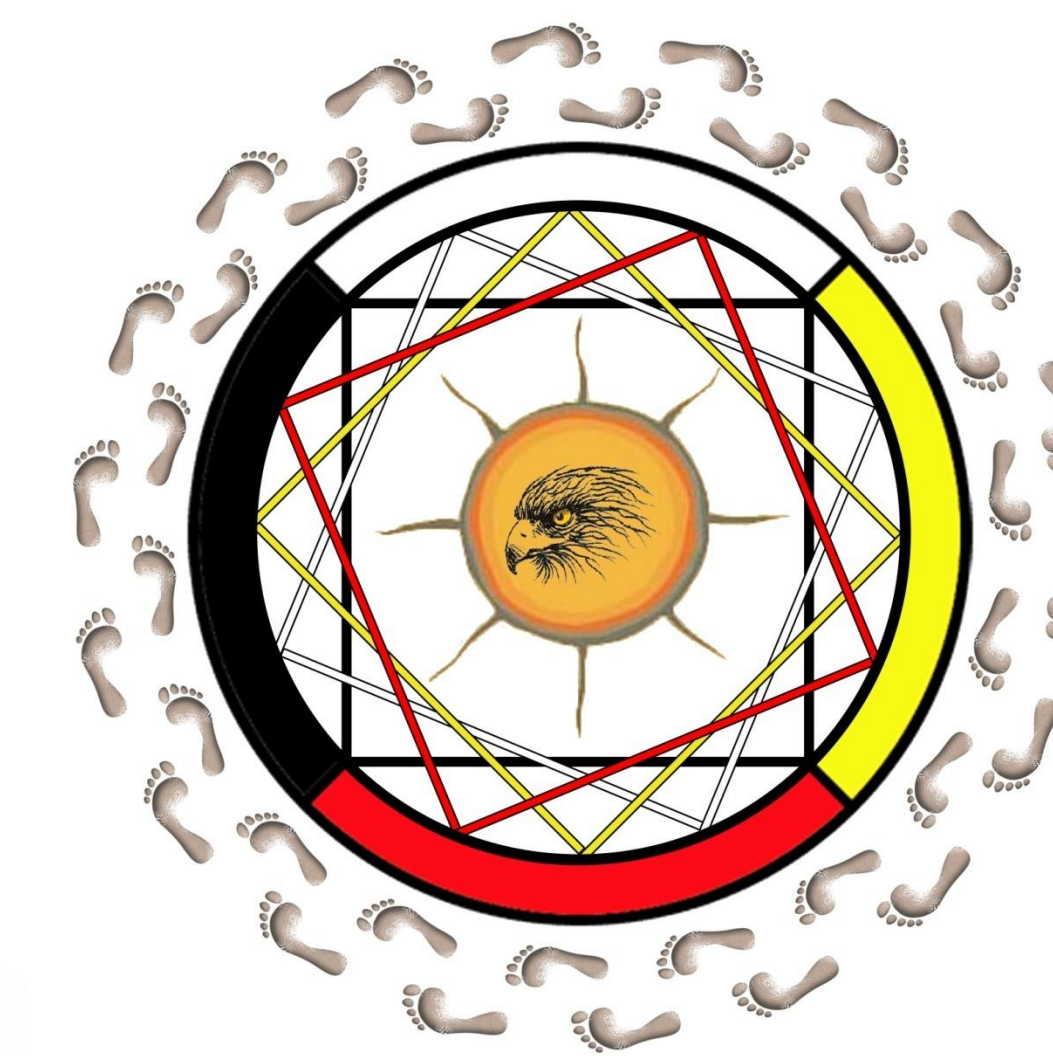


# TAjige'g Segewe'get: Pathways to Health for Mi'kmaq Families on Prince Edward Island

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## Introduction

The Mi'kmaq Confederacy of Prince Edward Island requested baseline health research for the Lennox Island band, Abegweit Band, and off reserve Mi'kmaq in Prince Edward Island in spring 2008. Under the direction of Dr. Kim Critchley, the research was carried out by three aboriginal students, led by a graduate student, at the University of Prince Edward Island in the summer of 2008. This collaborative effort resulted in a series of interviews with 29 Mi'kmaq people in Prince Edward Island. The results show the health concerns across the lifespan and the impact that access to health services have on family health. Overwhelmingly, PEI Mi'kmaq expressed that culturally safe health care delivery through relationship building will positively impact the health of Mi'kmaq people.

## Project Logo

(Designed by S. Brady)

The footprints around the traditional medicine wheel represent the continuous path to good health. The lines form a dreamcatcher and create the ties between the four corners of the medicine wheel, focusing on the physical, emotional, spiritual, and mental health. The image of the eagle overlaying the sun represents strength and closeness to the creator.

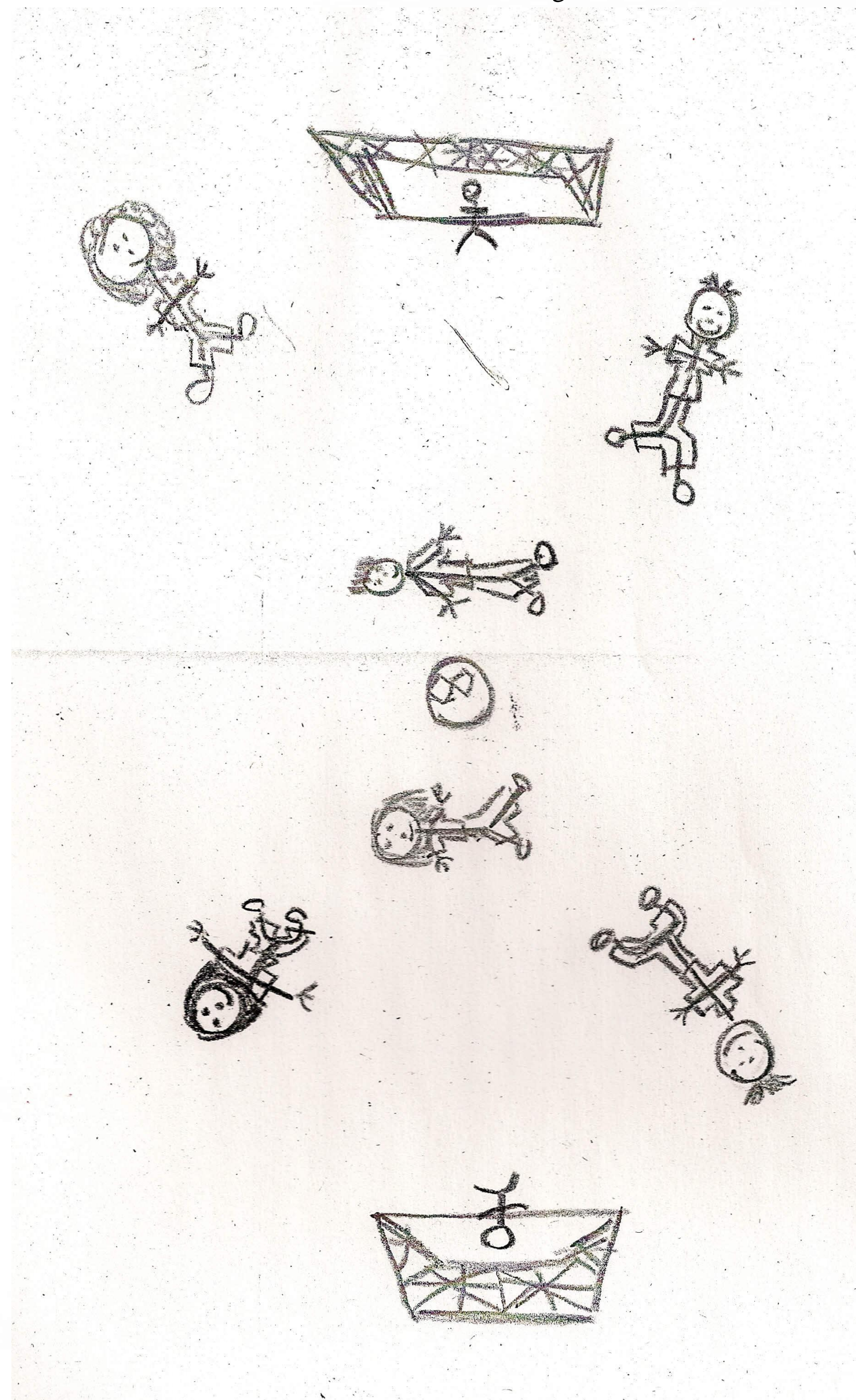
## Research Questions

1. What are the health concerns across the lifespan for PEI Mi'kmaq?
2. What are the benefits and gaps in the current health care system?
3. How can the health and access to health care improve for PEI Mi'kmaq?

## Participants

Twenty nine families were interviewed for this study. These represented Abegweit Band (n=14), Lennox Island Band (n= 11), and off reserve (n=4). The majority of participants were female (n=25) while only four were male. There was an age range from 22 years old to 63 years old with varying levels of education, employment, income, and marital status

Children were given the opportunity to draw a picture that described what health meant to them. Here is one such drawing.



## Results

### Determinants of Health

Areas of concern are: low levels of education, under-employment or unsustainable employment, social and physical environments, and personal coping skills and health practices.

*"Some of the health concerns are travel...it can take too long to get to where we need to go"*

### Access to health care

Overall, participants felt satisfied with the health care they receive; however, areas for improvement are dental services and cultural components.

*"I think if they had cultural awareness or something, like the doctors and nurses, I think there would be better care"*

*"I think that maybe there should be education promotion for Mi'kmaq people or young native people to enter the health field: then there is more visibility when they are in the field and then people might feel more comfortable with someone who is like a liaison"*

### Children and youth health

Areas of concern for children and youth health are: early childhood development, teen pregnancy, addictions, physical fitness and lifestyle choices, and lack of positive role models.

*"Keep the youth occupied in groups and sports and stuff like that to keep them out of trouble...anything that gets them gathered together"*

### Adult and elder health

Areas of concern are mostly around chronic disease and lifestyle. Participants also indicated that income and ability are of concern for many older adults.

*"If [Elders] need it, some of them cannot even afford the food that they're supposed to have like their meats and vegetables and grains...it is just shoving potatoes in and whatever they can pull together"*

### Family health

When asked about preparedness for natural disaster, pandemic flu, and overall preparedness, there is a wide range of responses. Most people feel somewhat prepared to care for themselves and their families in case of emergency but few feel prepared for natural disasters or pandemic flu. Those families who own generators feel the most prepared.

Participants repeated mentioned the need to have more positive role models in the communities and in the families in order to improve the health of families.

*"we need positive role models in the families"*

## Recommendations

-Assess feasibility of having the same programs and services available to both First Nations communities in PEI. Participants expressed that some services are only available in one community.

-Work with various health workers at the First Nations community health centers to provide education and awareness to Band members. Participants overwhelmingly expressed being unaware of the programs and services that currently exist.

-Work with various health care providers in PEI to provide cultural safety education and awareness to those working with Aboriginal people to improve the delivery of service.

-Provide support for community members to understand their coverage through Indian and Northern Affairs Canada.

-Work with necessary stakeholders to establish youth centers and Elder support in Scotchfort and Lennox Island.

-Revisit the discussion of having health transportation workers in the communities so that people can attend appointments.

-Work in partnership with various levels of the government as well as health care professionals to provide a health care service that is accessible and available to meet the needs of both short and long term health care services for the older adults.

-Support formal and informal training at the community level so that Mi'kmaq people themselves can take ownership of their health.

-Support community education where community members can teach and learn from one another.

-Collaborate with key stakeholders to develop a health framework for Mi'kmaq people in PEI.

-For statistical purposes, it is advisable for PEI Mi'kmaq to be involved in wide reaching research that can quantify the health status and access to services.

-Continue to work with UPEI Research team to develop and implement family centered Health promotion activities for Mi'kmaq families.

## Acknowledgements

