

REACHING INNU AND ATIKAMEKW YOUTHS IN THEIR COMMUNITIES

FUTURE HEALTHCARE PROFESSIONALS WORKING TOGETHER

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PLAN

- Indigenous communities in Quebec, Canada
- Université de Montréal's Mini-Schools of Health
- Interdisciplinary collaboration
- Outcome
- Future developments?



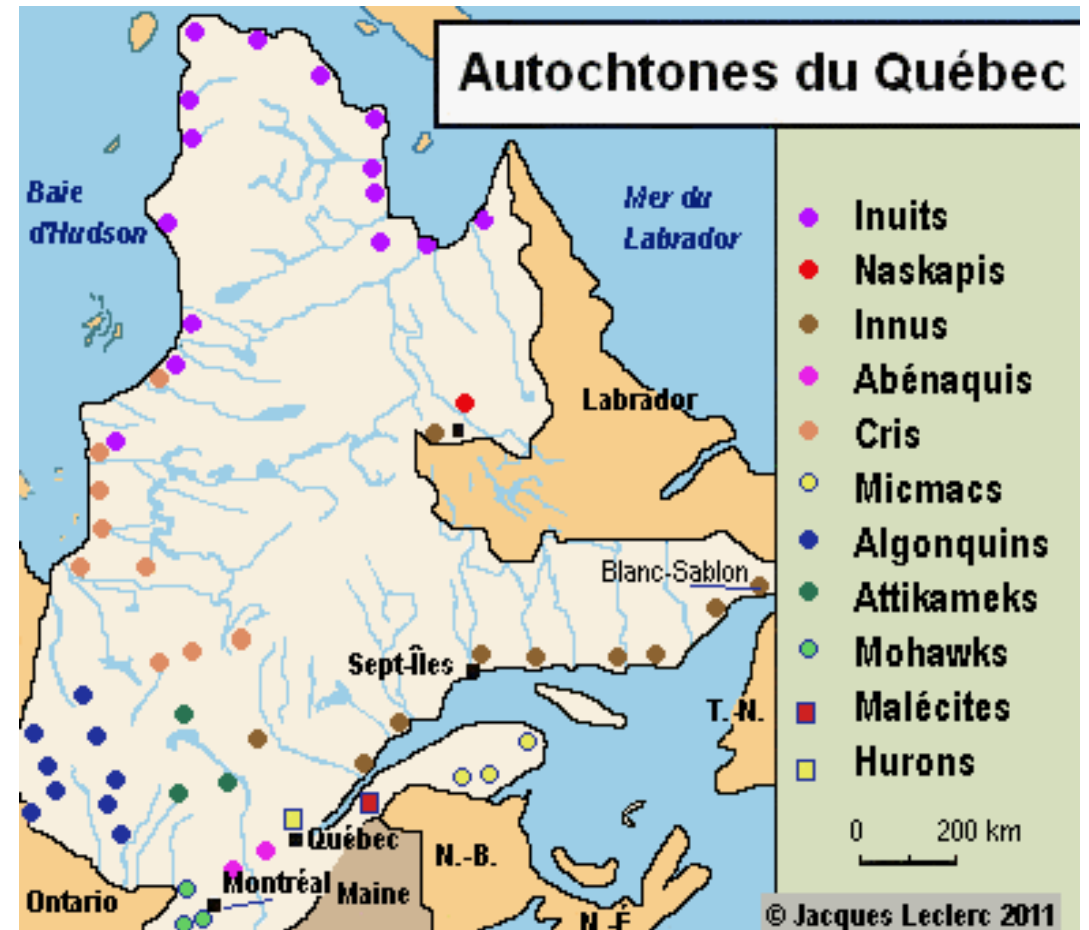
INDIGENOUS COMMUNITIES IN QUEBEC

AN OVERVIEW



INDIGENOUS COMMUNITIES IN QUEBEC

- Abenakis
- Algonquian
- Atikamekws
- Crees
- Malecites
- Mi'kmaq
- Innus
- Naskapis
- Wendats
- Mohawks
- Inuits



SPECIFIC HEALTH CONSIDERATIONS

- Younger (50% < 30 y/o)
 - Chlamydia : 270 vs 241 / 100 000
 - Gonorrhoea : 1 728 vs 24 / 100 000
- Crowded homes / homes requiring major repairs
- Alcohol abuse (40 % vs. 18.5 %)
- Drug use (40 % vs. 13%)

POSTSECONDARY QUALIFICATION

Proportion of the population aged 25 to 64 by highest level of educational attainment

Educational attainment	Non aboriginal	Aboriginal
No certificate, diploma or degree	12.7	28.9
High school diploma or equivalent	23.2	22.7
Postsecondary qualification	64.1	48.4
College diploma	21.3	20.6
University certificate below bachelor level	4.9	3.5
University degree	25.9	9.8

- **Source:** Statistics Canada, National Household Survey, 2011



MINI-SCHOOLS OF HEALTH



DESCRIPTION

- An initiative of Dr Stanley Vollant, an Innu surgeon
- Health sciences and psychosocial sciences students meet the Innu and Atikamekw youths in their schools to discuss
 - Health issues
 - Career opportunities
 - School perseverance



DESCRIPTION

- 20 to 40 undergraduates / Mini-School
- ~ 300 students/ year are reached
- 3 times a year
 - Wemotaci (fall or spring ; 1-day trip)
 - Manawan (fall or spring ; 2-days trip)
 - Innu communities (summer; 1 week)
 - Pessamit
 - Ekuantshit
 - Nutashkuan
 - Uashat Mak Mani-Utenam



INNU COMMUNITIES



Source: Secrétariat aux affaires autochtones. Carte des onze nations autochtones du Québec, Gouvernement du Québec, 2011

OBJECTIVES

- To sensitize future healthcare professionals to indigenous cultures
- To build cultural competence among undergrads
- To promote
 - School perseverance and a healthy lifestyle
 - Practice in indigenous communities
 - Exchange and collaboration between indigenous and non-indigenous
 - **Collaboration among future healthcare professionals**

METHOD

Recruitment

- GISA (Aboriginal health group)
- Interfaculty operational committee (IOC)
- Interfaculty student council (ISC)
- Selection based on motivation letter

Pre-departure training

- Mandatory
- Provide knowledge about the community's reality
- Promote respectful/culturally informed interactions
- **Facilitate interdisciplinary exchanges**

Mini-School

- Elementary school vs. High school
- Discussion in class
- Kiosk in the gymnasium

INTERFACULTY OPERATIONAL COMMITTEE

- Structure of concertation + formal representation
 - Professors from departments, schools or faculties of 13 disciplines
- Aim to train future healthcare and social services professionals to become efficient collaborators and partners in care
- Develops, coordinates and assesses interprofessional activities
 - Obligatory Collaboration in health sciences courses
 - Implements pilot projects to evaluate these potential activities



IOS + ISC

- Interfaculty student council (ISC)
 - Group of students from each undergraduate program
 - Work hand in hand with the IOC to ensure the improvement of its activities
- Support to mini-schools
 - Ensures part of the funding, allowing students to participate free of charge in the activity
 - Promotion of mini-schools and recruitment of participants within the University
 - Inclusion of GISA in ISC



GISA

- Student-led organization regrouping students of all health professions
- Created to answer the need of the different health faculties to increase teaching and clinical exposure to aboriginal health
- The ultimate goal is to give tools and experience to future health professionals so they become culturally competent clinicians that can work in team to organize the best treatment plan to answer the specific needs of this vulnerable population



GISA

- Advocate for aboriginal health and promote community implication
 - Conferences (members of different communities + health workers)
 - Documentary screenings
 - Mini-School of Health
- All activities are open to students of all health faculties and promote collaboration between health professions



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DISCUSSION IN CLASS : ELEMENTARY SCHOOL

- **1st and 2nd grade : Heart and Lungs**
 - Colouring
 - Basic Physiology
 - Stethoscope and other medical instruments
- **3rd and 4th grade: The journey of Mr. Blueberry**
 - Game with the GI organs
 - Introduction to the basics of nutrition
- **5th and 6th : Health and well-being**
 - What is your definition of health?
 - Discussion around the holistic approach to health



DISCUSSION IN CLASS : HIGH SCHOOL

- 3 axes
 - Mental health
 - Sexual education
 - Drug abuse
- Safe space for discussion
 - The students are asked if they prefer their teacher to stay or to leave

MENTAL HEALTH

- Prevention
- An interactive and structured discussion
 1. Define mental health
 2. Give examples of problems
 3. Find solutions / resources
 4. Encourage young people to talk about it



MENTAL HEALTH

- Discussing about mental health can
 - Contribute to reducing stigma and social exclusion
 - Strengthen the personal resources of individuals
 - Prevent the emergence of mental health problems, physical health problems and social problems

SEXUAL EDUCATION

- 6 topics
 - Protection against STDs
 - Sexual orientation
 - Romantic relationships
 - Contraception
 - Pregnancy
 - Hypersexualization



SEXUAL EDUCATION

- Awareness activities:
 - How to put a condom
 - Talk about healthy and unhealthy relationships , etc.
- Empowering young people to engage in safer sexual practices
- Provide resources to answer their questions and needs
- Peer education to increase student participation

DRUG ABUSE

- Interactive Workshop
- Defining addiction and tolerance
- Finding solutions : what to do instead of consuming
- Work on the management of risk factors and develop new skills to achieve a healthy lifestyle
- Talk about self-esteem
- Conclude with resources

KIOSKS IN THE GYMNASIUM

- Interactive games to present career prospects
 - Nurse
 - Doctor
 - Social worker
 - Pharmacist
 - Nutritionist
 - Optometrist
 - Dentist
 - Audiologist
 - Physiotherapist
- Health library



HEALTH LIBRARY BOOK COLLECTION PROGRAM

- The UdeM Health Library participates in the Mini-Schools of health visits.
- The Library funds and develops health and sciences book collections with and for the libraries of the visited schools.
- Library and Information Sciences students are included in the Mini-Schools, attend the pre-departure training and animate the book kiosk.
- 486 brand-new books (fiction and non-fiction) have been donated to ten schools.
- The program main objective is to give children and youths access to varied and quality literature in order to promote school perseverance and inspire Indigenous children to dream of future careers in health professions.





INTERDISCIPLINARY COLLABORATION



KEY ELEMENTS

- Institutional structure of concertation and formal representation of different programs
 - Reach out maximal amount of students with various backgrounds
- Participation in mini-school allows students to mobilize interprofessional competencies
 - Clarification of roles and responsibilities
 - Teamwork
 - Collaborative leadership
- Interdisciplinary teams at every level
 - Student implication allows a more direct / informal way of outreaching other students

OUTCOMES IN THE COMMUNITIES

- 250 to 300 children and youths met each year
- Short-term positive impact as suggested by positive feedback
 - Students
 - School administrations and teachers
 - Communities
- Long-term impact?
 - Evolution of the graduation rate
 - Number of future health professionals from these communities

OUTCOMES FOR HEALTH SCIENCES STUDENTS

- > 500 undergraduates (100/y)
- Team work between undergraduates from various health professions
- Participants from various study programs have developed strong friendships and have kept in touch by organizing social and academic activities
- Short-term positive impact as suggested by feedback
 - Better awareness of indigenous cultures
 - Improve knowledge of various other health professions
- Long-term impact?
 - Improvement of cultural competence?
 - Undergraduates electing to practice in indigenous communities
 - Cultural safety improvement for Indigenous patients



COLLABORATORS

- Faculty of Medicine
 - Eric Drouin
- Health Library
 - Monique Clar
- Groupe d'intérêt en santé autochtone (GISA)
 - William Davidson
 - Sandrine Filiatrault
 - Geneviève Groulx
 - Eve Forcier-Doddridge
 - Catherine Morin
 - Élise LaBossière
 - Anne-Marie Gravel
 - Arnaud Bailly
- Interfaculty operational committee (IOC)
 - Isabelle Brault



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