



Mū Kwen Daan

Keeping the Vision



Northern Ontario
School of Medicine



Dear friends of NOSM!

I am very pleased to present the report from the second Aboriginal Workshop of the Northern Ontario School of Medicine, which we called “Mii Kwen Daan – Keeping the Vision - Continuing the Dialogue”. This workshop was hosted by the Fort William First Nation from August 1-3, 2006.

The first Workshop held in 2003 set out recommendations for the School concerning governance structure, admissions and curriculum content. This second Workshop, after three years, was convened to measure the progress and successes achieved with respect to the recommendations and to receive further input into the development and on-going operations of NOSM.

A major result since 2003 has been the establishment and advancing role of the Aboriginal Reference Group (ARG). This Group serves as a primary resource for the School concerning Aboriginal issues, programming and involvement. This report is a product of their efforts.

More than 95 participants including 75 Aboriginal community and health care leaders actively participated for three days at this workshop, including Aboriginal Reference Group members and Coordinators hired by our Aboriginal community partners for teaching of students during first year placements. Their efforts resulted in 27 broad recommendations in the five areas of Community Engagement, Communications, Curriculum, Admissions, and Research. NOSM has greatly benefited from the participants' strengths, cultures and knowledge of their communities, and we will continue to benefit as we move forward with the recommendations made at “Mii Kwen Daan”.

We are honoured by the participants' willing and continued commitment to the School. On behalf of the Board, Faculty, staff and students at NOSM, I thank them and the many others who helped make this Workshop another success. I also wish to thank Fort William Chief Peter Collins, Health Canada, Mayor Lynn Peterson of Thunder Bay, and Brian Walmark and staff at the Keewaytinook Okimakanak Research Institute for their able assistance with workshop planning, delivery and the web-based workshop presence.

The Northern Ontario School of Medicine continues to develop and evolve, in large part as a result of the on-going contributions and continuing role of Aboriginal individuals, Elders, communities, organizations and staff.

Miigwetch.



Dr. Roger Strasser
Founding Dean
Northern Ontario School of Medicine



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*Please note there is supplemental information available upon request, or available for viewing or download from the Aboriginal Affairs Unit Document Archive located at: http://www.normed.ca/units/aboriginal_affairs/documents/Default.aspx

Hard copies of this report and referenced background material may be requested through the NOSM Aboriginal Affairs Unit by calling the Unit at 807-766-7322.

Introduction

The Northern Ontario School of Medicine (NOSM) has a special relationship with the First Nations and Métis in Northern Ontario. In the years leading up to its establishment, Aboriginal leaders and champions lobbied the provincial government, organized campaigns with like-minded leaders in the non-Aboriginal community, wrote letters, signed petitions and passed resolutions in support of the proposed medical school. Then NAN Deputy Grand Chief Goyce Kakegamic met privately with the Premier of Ontario to make the case that the Province needed a new medical school created in the North by the North for the North if the physician shortage in under-served regions was to be successfully addressed.



The long history of the relationship between Aboriginal communities and NOSM, coupled with the School's social accountability mandate, is manifested most strongly in the promise of NOSM to host gatherings of Aboriginal peoples from across the north to voice their ideas, hopes and aspirations for medical education in the region. The idea of consultations was raised during the NOSM Curriculum Workshop held in Sault Ste. Marie in January 2003 where it was agreed that the medical school would benefit by hearing from grassroots Aboriginal leaders regarding curriculum development, admissions, and governance. Aboriginal input into these three fundamental areas was the primary condition for support from Nishnawbe Aski Nation (NAN), the first Provincial Territorial Organization (PTO) to provide Lakehead University with a Chiefs' Resolution in support of the proposed medical school. The concept gained additional momentum in April 2003 when Dr. Roger Strasser, NOSM's Founding Dean, and NAN Deputy Grand Chief Goyce Kakegamic agreed while visiting Deer Lake First Nation to form a steering committee to organize such a gathering.

The first NOSM Aboriginal Workshop, "Follow Your Dreams" was held in Wauzhushk Onigum First Nation in June 2003. The three-day event attracted over 130 First Nations and participants from across the north. During the workshop, participants listened to presentations from Elders, Aboriginal physicians and medical students. The medical students shared the challenges they faced as Aboriginal people pursuing their dreams in a learning environment not always sympathetic to their traditional values and mores. Participants had ample opportunity to share their experiences and ideas with the leaders of NOSM, both informally during the breaks as well as during small group sessions. The culmination of their work was a series of recommendations for creating an "Aboriginal friendly" medical school. These recommendations are included in the Report of the NOSM Aboriginal Workshop "Follow Your Dreams" 2003 (view or download from the Aboriginal Affairs Unit document archive at http://www.normed.ca/units/aboriginal_affairs/documents/Default.aspx). At the end of the "Follow Your Dreams" Workshop, the School committed to workshop delegates that they would revisit this effort together at a subsequent workshop to be held in three years time. NOSM made good on its commitment to host a second workshop, and the results of that workshop are the subject of this Report.

Held at Fort William First Nation over three days in August 2006, the "Mii Kwen Daan – Keeping the Vision - Continuing the Dialogue" gathering was attended by more than 95 participants including 75 Aboriginal community and health care leaders from all across Northern Ontario. New for the second workshop was the world wide web-based on-line Workshop Forum, bringing the workshop presentations and large group deliberations to a larger audience along with the opportunity to comment and make recommendations remotely through discussion forums around each of the main Workshop topic areas. Cultural teachings by Elders, updates from the various Units of the School, and small group sessions to examine the School's progress since the 2003 Workshop, were some of the activities in which all participants became involved.

Several times during the three days, participants in the “Mii Kwen Daan” workshop applauded the work of NOSM’s Founding Dean, Dr. Roger Strasser, and his team for incorporating recommendations from the first NOSM Aboriginal Workshop into the day-to-day operation of the medical school. They echoed the desire for better communication that was voiced in the “Follow Your Dreams” recommendations and identified ways to build upon the relationship between Aboriginal communities and NOSM. This report reflects the optimism of those who participated in the “Mii Kwen Daan” as they measured the school’s progress in attaining the targets of the original gathering and created new recommendations to build upon the solid relationship that is a core value of the Northern Ontario School of Medicine.

Why another Community Consultation?

The people of Northern Ontario are dispersed over a vast region, and Aboriginal people make up a substantial proportion of the population. Like the original 2003 Workshop, this Workshop intended to provide individuals from diverse Aboriginal communities and organizations the opportunity to offer input and guidance to NOSM based on the realities of health care in their communities, and on the strategies necessary to successfully address the disparities in health between Aboriginal communities and other Canadian communities.

Acting on one of the key recommendations from the original Workshop, the School established over the last two years an Aboriginal Reference Group (ARG), presently mandated to “to provide advice to Northern Ontario School of Medicine’s initiatives....in the promotion of excellence in higher learning and accommodation of the Aboriginal world view.” ARG members represent a cross section of Aboriginal Northern Ontario’s political and service organizations, in addition to community representation. ARG members were instrumental in the Planning Committee for the “Mii-Kwen-Daan” Workshop, and members themselves either attended or designated others from their community or organization to attend.

Community input and feedback to the School was strengthened by the participation of many of the Local Community Coordinators (LCCs) from the Spring 2006 NOSM Module 106 student placements (or Integrated Community Experience – ICE). These local learning facilitators were instrumental in the success of the (first-ever) matching of medical students with Aboriginal communities for the purposes of medical student learning around Aboriginal health. There was simply no better way than a consultation such as this for the School to maintain its social accountability mandate and receive further well-informed guidance and advice based on sound reflection and front-line experience.



What were we trying to achieve in this Workshop?

The primary objectives for this workshop were to:

- 1) Provide a forum for Aboriginal peoples to communicate ongoing desired role within NOSM.
- 2) Provide an update of activities to date from the “Follow Your Dreams” workshop.
- 3) Evaluate NOSM progress in relation to its Aboriginal partners.

How did we go about the Workshop? What has NOSM achieved so far?

Planning for “Mii-Kwen-Daan” was begun by the ARG and the NOSM Director of Aboriginal Affairs, Orpah McKenzie, during the winter of 2005/2006. A number of sub-Committees was struck, and a decision was reached to once again contract a majority of the gathering’s organizational tasks to an Aboriginal organization. The Keewaytinook Okimakanak Research Institute (KORI), a branch of Keewaytinook Okimakanak tribal council based in Thunder Bay, was selected, in part because of their experience with creating and facilitating similar on-line conference environments within the world wide web. (<http://meeting.knet.ca/moodle/course/view.php?id=36>)

Formal invitations for a community host for the Workshop were sent to each of the more than 100 First Nations involved so far with the School’s development. Communities were asked to express their interest and provide a brief proposal describing their role and amenities as a potential Host. Fort William First Nation adjacent to Thunder Bay as selected as the 2006 Workshop site.

Planning Committee members continued their work, considering the blend they envisioned of Updates from the School’s various Units, and presentations by Aboriginal health and community leaders of timely topics to inform and enlighten participants for both the immediate Workshop deliberations and for their work and lives when they return home. It was decided that large group circle settings would be utilized for both the presentations by invited speakers and the School Updates.

In 2003, small groups identified major themes, recommendations, and suggested milestones. To follow up on that work at this Workshop, five relevant NOSM Units provided program Updates. After each Unit Update, participants gathered in pre-assigned group settings to address focus questions related to the topic and substance of each NOSM Update, and designed to stimulate thoughtful and reflective discussion of how NOSM has been doing in that area, and what direction it might proceed in in the future. Participant assignments for the small groups were made to maximize the blending of ARG members, community representatives, as well as the Local Community Coordinators (LCCs), so that each group had people from each participant group as well as from urban, rural and remote locations.

In addition to ARG, Aboriginal community and LCC participation, Planning Committee members felt it important that the school demonstrate it’s commitment to the Workshop and Aboriginal input to the School by having good representation by School faculty and senior management. School officials readily accepted the Committee’s invitation, and the following School officials were in attendance for the entire three-days:

- Dr. Roger Strasser, Founding Dean
- Dr. Dan Hunt, Vice-Dean, Academic Affairs
- Dr. Joel Lanphear, Associate Dean of Undergraduate Medical Education (UME)
- Dr. Blair Schoales, Assistant Dean Admissions
- Dr. Greg Ross, Associate Dean Research



As well, other senior NOSM staff members were in attendance at different times to support their colleagues during presentations, and to gain insight from the eclectic participant group.

Barney Batise, of Mattagami First Nation, was selected as the Workshop Elder, and opened the Workshop on Tuesday, August 1 with a brief ceremony after participants enjoyed the breakfast catered by members of Fort William First Nation. Workshop MC Tim Pile of the Métis Nation introduced Fort William Chief Peter Collins, who welcomed workshop participants to their traditional territory. Mayor

Lynn Peterson of Thunder Bay and ARG Chairperson Rosie Mosquito also offered their greetings and best wishes for success to the large group. Elder Barney Batise then made a presentation on Medicine Wheel Teachings and explained how these teachings could be used productively by Workshop participants as they proceed with their tasks for the next three days.

Progress Update from Founding Dean

Next, Founding Dean Dr. Roger Strasser provided an Update on NOSM developments, with an emphasis on achievements in the Aboriginal initiatives. He began by briefly introducing this Workshop within the context of previous Aboriginal consultations, and hit the high points regarding who NOSM medical students are and how the MD program at NOSM is different from other medical schools. He also reviewed for the group how NOSM came to be, starting with the original NAN Chief's Resolution. Aboriginal participation in NOSM has been key throughout the development of the School, and is central within three primary areas: governance (with Aboriginal staff, faculty and Elders across all areas); curriculum content and delivery, and; admissions of Aboriginal persons. Dr. Strasser went on to describe planned future developments, and how they will be guided by the NOSM Strategic Plan 2006-2009 which includes Initiative F directing the School to "develop a mechanism to focus and integrate Aboriginal Health research, learning, service delivery and collaborative practice" into all areas of the School. Finally, Dr. Strasser described the tasks laid out for workshop participants, that being to review progress, celebrate achievements, identify lessons learned, propose future developments, and to explore new opportunities. (View or download Dr. Strasser's Powerpoint slides at http://www.normed.ca/units/aboriginal_affairs/documents/Default.aspx).

Workshop Guest Speaker

The next speaker was Dr. Jay Wortman, a Métis MD born in remote northern Alberta and now a director-general for the B.C. Region of the First Nations and Inuit Health Branch, to talk to the group about the links between Type II Diabetes and diet change. In his talk, "Coca-colonization: Loss of Traditional Diet and the Rise in Chronic Disease" Dr. Wortman provided numerous examples of how the types of foods we eat affect our metabolism, among other things, and how for many Aboriginal people a traditional diet high in country food can often mean the difference between a healthy and an unhealthy life. (View or download Dr. Wortman's Powerpoint slides at http://www.normed.ca/units/aboriginal_affairs/documents/Default.aspx)

Communications Unit Update

Program updates and small group sessions began after lunch, when Ms. Tracie Smith, NOSM Communications Officer on the West Campus, provided an overview of the role of her office, as well as some of the initiatives directed at various Aboriginal audiences and how her Unit adapts its overall efforts to better reach those audiences. She gave examples of the various ways and means used to communicate to Aboriginal audiences topics such as the School's Vision and Mission, highlights on specific Aboriginal initiatives, and in the presentation of other corporate information resources. Also, Ms. Smith explained how Aboriginal motif was utilized in the School logo and other NOSM branding, and how there

were regular relevant stories in the Northern Passages newsletter. New relevant content and presentation are also being developed for the School's website at www.normed.ca.

Ms. Smith's Communications Update, as well as those of all remaining Unit Updates, may be viewed or downloaded at http://www.normed.ca/units/aboriginal_affairs/documents/Default.aspx.

After the Communications Update, and after each of the subsequent Updates through to the end of the next day, Workshop participants broke into their assigned small groups and discussed together the focus questions related to the topic of the Update just received. Recommendations were then made by each group based on the consensus achieved during the small group discussions.

Aboriginal Affairs Unit Update

Orpah McKenzie, NOSM Director of Aboriginal Affairs, gave the last presentation of the day describing how the School has engaged and partnered with Aboriginal communities in Northern Ontario to develop and enhance community participation in planning and decision-making, and to raise awareness within the School of community issues and concerns. Community engagement principles adopted by the Unit have guided the development of the partnerships for learning by first year NOSM students in Aboriginal communities during Module 106. Other milestones reviewed included the Aboriginal Reference Group, traditional healing opportunities for students and staff, and the involvement of Elders and Youth.

After the Small Group session for Community Engagement, everyone enjoyed a casual dinner together at the Fort William Community Centre before retiring for the evening.

Participants gathered for breakfast the next day, and after the opening prayer, the group was welcomed and the previous day reviewed by MC Tim Pile.

Undergraduate Medical Education Unit (UME) Update

Dr. Joel Lanphear, Associate Dean of UME, gave the opening presentation of the day describing the School's four year medical program. He referred to the NOSM social accountability mandate of providing medical education programs which are innovative and responsive to the individual needs of students and the health care needs of the people of Northern Ontario, and thoughts on how best to achieve that in the School's context. A conceptual overview of curriculum was provided, including the five Themes (Northern and Rural Health, Personal and Professional Aspects of Medical Practice, Social and Population Health, Foundations of Medicine, and Clinical Skills in Health Care) and how different content Threads (eg., Aboriginal Health, Inter-professional Education) are woven through each of the Themes, and how essential Competencies (i.e., Medical Expert, Collaborator, Health Advocate) are developed throughout. The NOSM curriculum also requires that students learn through a variety of learning experiences and exercises, including small group consultative learning, relevant case based modules, "hands on", and self-directed learning. Dr. Lanphear then reviewed the eight NOSM Curricular Strategies for successful implementation of Module 106, from essential staffing and development to evaluation and reflection.

Research Unit Update

Dr. Greg Ross, NOSM Associate Dean, Research presented on the NOSM Research Unit after the morning break, beginning with a description of the Unit's three broad areas of focus (Clinical Health, Basic Health, and Commercialization Strategy), and the over-riding principles applied by the Unit (such as supporting excellence, building capacity, maintaining pan-northern considerations). The Unit's first project was described, and priorities for the year were presented.

Admissions Update

Next, Dr. Blair Schoales, NOSM Associate Dean Admissions, described his Unit's strategy to maximize the recruitment of students who are from Northern Ontario and/or students who have a strong interest in and aptitude for practicing medicine in northern urban, rural and remote communities. The School's Admissions Process aims to have class profiles which reflect the demographics of Northern Ontario by reducing many of the barriers which exist for northern and Aboriginal students. Early on, the School established an Aboriginal Admissions Sub-Committee comprised of an Aboriginal faculty member as Chair, as well as the Assistant Dean Admissions, the NOSM Director of Aboriginal Affairs, an Aboriginal physician, Aboriginal residents, a representative from an Aboriginal educational organization, an Aboriginal community member, and one or more of NOSM Aboriginal students. In addition to advisory tasks, this sub-Committee reviews all Aboriginal Admissions Stream applications, makes recommendations to the Admissions Committee and assists with the Aboriginal recruitment process. Advantage exists in the admissions process for Aboriginal applicants, Francophone applicants, and applicants who have spent 5 years or more in Canadian rural, remote or northern urban communities. Dr. Schoales stressed, however, that there is only one Admission Process and all applicants are evaluated by the same admissions criteria. Aboriginal student admissions to the NOSM Entry Classes of 2005 and 2006 were shared with the large group in the following chart:

Self-Identified Aboriginal Applicants		
	2005	2006
Total applications	2098	2050
Total Aboriginal applications	43 (2%) ¹	40 (2%) ¹
Interviewed	32 (8%) ²	22 (6%) ²
Offered admission	7 (22%) ³	4 (18%) ³
Accepted offers	6 (10.7%) ⁴	3 (5.4%) ⁴

¹Percent of self-identified Aboriginal applicants compared to total number of applicants.

²Percent of self-identified Aboriginal applicants interviewed compared to total number of applicants interviewed.

³Percent of offers made to self-identified Aboriginal applicants compared to number of self-identified Aboriginal applicants interviewed.

⁴Percent of self-identified Aboriginal applicants who accepted admission offers, compared to total number of spots available.

Also noteworthy was the fact that while 40 applicants self-identified as Aboriginal persons upon application for 2006, there were actually fewer of those persons who met the NOSM criteria for the Aboriginal Admission Stream. This adherence to applicable Admissions Criteria is an important principle for the School in maintaining the integrity of their Aboriginal Admissions Stream. Dr. Schoales concluded the Admissions presentation with a review of some of the opportunities prospective students may pursue to help them prepare for the Admissions Process.

Processing and Prioritizing of Recommendations from Small Group Sessions

At the end of each of the two days, the small group facilitators met together to reconcile and consolidate the results from each of the five groups into one set of recommendations around each topic area. This effort was concluded on the evening of the second day.

Before formal work ended for the day, the consolidated recommendations from the previous day were presented back to the large group for verification purposes. The process used by the small group facilitators was explained to participants, and the results of their work described. The review and verification of recommendations was repeated the next day for the recommendations resulting from the small group sessions on Day 2.

Participants enjoyed another fine supper after the Workshop day was reviewed, and tasks for the following day identified. An hour of entertainment, provided by dancers from the Fort William First Nation, followed the meal.

The next morning, Day 3, participants gathered after breakfast as MC Tim Pile reviewed the previous day and set out the tasks for the final day of the gathering. Recommendations from Day 2 were then presented back to the large group for verification of the recommendations as re-worked by the small group facilitators over the last two days. Once this presentation was complete and participants were satisfied with the resulting recommendations, everyone in attendance was asked to provide their own priority ranking for each of the recommendations. Printed copies of the recommendations were distributed, and participants were instructed to indicate their own perception of the priority of each, by indicating either Short Term (0 – 6 months), Medium Term (6 months – 3 years) or Long Term (more than 3 years). Everyone then submitted to Workshop staff the copies indicating their priority ranking. The results of the small group sessions and the large group prioritization are presented in the next section.



What were the highlights of the workshop?

Māi Kwen Daan

Recommendations

The following section presents the consolidated recommendations and the respective results from the large group and the prioritizing of each of the consolidated recommendations. The recommendations were made in the five areas of:

1. Communications
2. Community Engagement
3. Curriculum
4. Research
5. Admissions



Participants were asked to indicate their ranking of priority for each recommendation, based on the following three rankings:

- Short Term (0 – 6 months);
- Medium Term (6 months – 3 years); or
- Long Term (more than 3 years).

For some of the recommendations, people provided additional comments on their sheets. These are provided at the end of each sub-section.

Communications Recommendations

Short Term

- 1) Ensure that the continuing development of a NOSM Communications Strategy to inform and increase awareness of all aspects of the medical school and health careers (including benefits, challenges, recruitment, admissions, etc.) includes the following characteristics (for Aboriginal audiences):
 - 1.1 Multi-lingual
 - 1.2 Diverse and appropriate delivery modes (ads, radio/TV spots, face-to-face, broadcast faxes and emails, printed info package materials, NOSM DVD, school bulletins, briefing notes, Career Fairs, etc.)
 - 1.3 Diverse and innovative media (posters, listservs, pens, Frisbees, advertisements, any age and audience appropriate promo materials)
 - 1.4 Means for regular updating of contact lists, broadcast lists, listservs
 - 1.5 Promotion of the various delivery modes and media types
2. Prior to development and as an on-going part of the NOSM Communications Strategy, discover the best ways to maximize the impact and effectiveness of NOSM communications to each and every audience it needs to reach.

Medium Term

3. Ensure that the continuing development of a NOSM Communications Strategy to inform and increase awareness of all aspects of the medical school and health careers (including benefits, challenges, recruitment, admissions, etc.) targets the following (Aboriginal) groups:

- 3.1 Community or organizational political leadership
- 3.2 Community members
- 3.3 School age children
- 3.4 Teens
- 3.5 Parents
- 3.6 Elders
- 3.7 Regional organizations
- 3.8 Health boards
- 3.9 Educational institutions
- 3.10 Urban Aboriginals



Comments from individual participants which were indicated on returned Prioritizing Sheets:

- 1) Plan now for the students who are in Grade 7, 8, 9
- 2) Aboriginal Specific Strategy required with resource package for communities to use to help promote the school (include advertisements, posters, brochures, etc...)
- 3) Proper development will take some time in Recommendation # 2.

Community Engagement Recommendations

Short Term

1. Ensure that correspondence / dialogue (with a specific individual target about a specific topic) relating to Mod 106 ICE and other Aboriginal initiatives be copied to the Aboriginal community or other Aboriginal organization's senior managers in health, education, and social services departments in addition to the political leadership in the First Nation or Organization.
2. Provide several opportunities for students and local community staff to interact and learn from each other regarding their expectations and other student or community-specific issues to better prepare both parties for successful design and delivery of community and cultural learning/immersion experiences
3. Follow through by the ARG should be achieved to ensure that their direction is being heard and acted upon.

Medium Term

4. Develop a handbook of "Best Practices" for sharing of information (tips, successful ideas, etc.) regarding community engagement, planning, preparation, hosting/working with the students, evaluations and community specific feedback from students.

5. Utilize past and present NOSM students whenever possible during community engagement activities.
6. Increase the number of engagement opportunities (partnership engagement, recruitment, outreach, and liaison) with communities, including urban Aboriginal target populations such as in southern Ontario and Winnipeg.
7. Formalize the function of community engagement within the Aboriginal Affairs Unit so that it is properly and sufficiently resourced to serve the school in partnership development, development of ICE immersion opportunities, and trouble-shooting during the ICEs.

Comments from individual participants which were indicated on returned Prioritizing Sheets:

- 1) Re # 1: there will have to be revisions after the first draft
- 2) Re # 2: recommend wording change to say only the political leadership in First Nations -- and Métis. Rationale - because urban based organizations are covered in "other aboriginal initiatives."
- 3) Re # 3: some things can be done, but having some scheduled activities will take time
- 4) Re.# 7: add on "and that suitable resources are provided to them to fulfill their obligations to community". Also, the School needs to respect the opinion of the ARG
- 5) The ARG, it's the first time I heard of that group. They should be more visible to let people know the group exists. Also recommend to add more representatives from the remote communities in northwestern Ontario.
- 6) Reference Group to include sessions for the remote North

Curriculum Recommendations

Short Term

1. There is a need to develop opportunities outside of Module 106 (such as an immersive/longer term Aboriginal Health elective) to increase and sustain cultural awareness
2. Host an elder's gathering to seek elder input into curriculum and what characteristics of a particular research project are needed for successful integration into Aboriginal communities

Medium Term

3. We can only strive to continue increasing cultural awareness and sensitivity. NOSM language regarding the long-term results and benefits of student cultural learning and immersion should change. We can't ensure that "cultural competency" will be developed – it is not possible.
4. In order to more effectively incorporate Aboriginal health into the NOSM curriculum, students must learn how to integrate contemporary and traditional approaches into a patient's treatment plans, along with full understanding of a patient's socioeconomic and jurisdictional issues.



5. Examine existing models for integrating Aboriginal health into curriculum including an exploration of any legal/ accreditation issues
6. Increase elder involvement in curriculum development, review and revision, as well as for support and advice to students and faculty
7. Increase the number (through active recruitment) of Aboriginal faculty

Comments from individual participants which were indicated on returned Prioritizing Sheets:

- 1) Re # 1: "continue increasing cultural awareness and sensitivity", comment excellent wording
- 2) Re # 3: curriculum does take time to review and change.
- 3) Re # 4: Aboriginal health lecture series, plus elder -- in accordance with Section 35 of our constitution.
- 4) Re # 5: search out the best choices. Also, "Get them through school first!"
- 5) Re # 6: hopefully: next summer for Elder's Gathering
- 6) Re # 6: communities which have them should start to use them ASAP. Others should be setting up systems mid-term
- 7) NOSM curriculum needs to be revisited and amended in some issues - students didn't have a full setting of remote community's lifestyles. Their curriculum should be available more to community's knowledge in traditional medicine, rather than having to see them in front of computer most of their time in our communities.

Research Recommendations

Medium Term

1. The school should consider expanding the students' self-study research to include the overall collection of non-confidential information regarding barriers to health care access and related issues affecting health status so that local and regional trends can be identified over the medium or long term, and students and communities can access this information for their own planning. This expansion should be a community-specific elective, initiated only upon acceptance by the community. This data collection should not significantly increase student workload on-site.
2. Guidelines for Research Initiatives in Aboriginal Communities must be developed for use by the NOSM Research Unit (developed in conjunction with Aboriginal Affairs and the ARG) to ensure appropriate and acceptable steps are taken for initiating, developing, conducting, reporting on, or acting on the results of any such research. These Guidelines should include:
 - 2.1 All points contained in the NAHO OCAP Principles
 - 2.2 Requirement for utilization of/development of local researchers with a long term view of
 - 2.3 capacity-building
 - 2.4 Research must be community-driven, and not just accepted by the political leadership. Communities must have significant input into what research is being conducted, how it will be conducted, and be accepting of the project and the intended uses of the results
 - 2.5 Projects should not exclude or segregate other populations in the same geographic area which may have the same health issues
 - 2.6 Projects should include Elder input
 - 2.7 Ensure acknowledgement of individual/community involvement and participation in research (i.e., names included on publications)
 - 2.8 Improve the exchange of information/research updates (i.e., communications strategy)
 - 2.9 Provide research outcomes and research status updates to communities on an ongoing basis

- 2.10 Utilize existing partnerships to invite research
- 2.11 Utilize NOSM students on-site in communities whenever possible in research identification, design, community buy-in, implementation, reporting, etc.
- 2.12 Preliminary results must be verified by all study subjects/ participants before publication
- 2.13 Support and advocate on behalf of the communities regarding their identified research areas/topics

- 3. Establish a Research Ethics Review sub-Committee of the ARG to assist with the development of the Research Guidelines and review any research proposed or completed with respect to Aboriginal culture, values, health, etc. (include people from the communities in such a committee, people who are knowledgeable of various topics and representative of various communities). This sub-Committee (which should include an Elder) must have some control, and not be simply an advisory committee.
- 4. Initiate more research projects / topics:
 - 4.1 in remote northern communities
 - 4.2 on Aboriginal women's health issues (WHI)
 - 4.3 on urban Aboriginal health research initiatives, instead of always conducting projects on reserve
 - 4.4 with Métis populations
- 5. Communities should have the choice of identifying potential local research topics/priorities/concerns in their community profiles which are used by the school and students for the placement selection process.

Comments from individual participants which were indicated on returned Prioritizing Sheets:

- 1) Re # 2e: Projects should include Elder input "into all Aboriginal sections in accordance to section 35 of our constitution".
- 2) Re # 2: things can get started but it should be on-going.
- 3) Re # 2: In addition to OCAP principles, legal supreme court decisions outline the duty to consult and accommodate Aboriginal First Nations. These decisions should be kept in mind.
- 4) Re # 3: make sure to have individuals input into all Aboriginal sections in accordance to Section 35 of our constitution
- 5) Re # 3: staff person for research, knowledge not to be used for profit (or) used in a wrong way

Comment: researchers to go into communities will be required to present to Chief & Councils first along with the discussions with community members, in order to get permission to proceed with research.

Admissions Recommendations

Short Term

- 1. Maintain the designated Aboriginal student admissions seats, and increase from two to three seats, as long as this does not create a ceiling on the total number of aboriginal students per year.

Medium Term

- 2. NOSM needs to advocate for greater financial support for Aboriginal medical students & applicants (i.e., Aboriginal-specific bursaries).
- 3. NOSM needs to look at increased, innovative and multi-faceted approaches to promotion, recruitment and support of prospective Aboriginal students, such as:

- 3.1 Follow-up letters or phone calls to encourage re-application
 - 3.2 Aboriginal recruitment officer position for career fairs, visits
 - 3.3 send out notices to undergrad students in Lakehead and Laurentian Universities advertising medical school and requesting that they consider applying
 - 3.4 arrange visits to Aboriginal high schools by aboriginal NOSM student ambassadors
 - 3.5 native awareness weeks & similar events at Universities & High S.
 - 3.6 “Follow Your Dreams” academic scholarship to help attract more Aboriginal students (applicants)
 - 3.7 Make funds available for Aboriginal students to access for travel for admissions process events
 - 3.8 Reinvent “Health Experience” program (in 1980s) of FNIHB.
 - 3.9 Provide assistance to aboriginal applicants in accessing and completing applications for financial aid
 - 3.10 Provide support and material resources to aboriginal communities so that they may better promote student applications to NOSM
 - 3.11 Develop innovative promo tools (i.e., Sandy Lake LCC video 2006)
 - 3.12 Partner with Canadian Aboriginal Achievement Foundation (Métis)
 - 3.13 Annual evaluation and assessment of NOSM admissions process with regards to aboriginal students
 - 3.14 Seek opportunities for assistance for living expenses as students
- 4. Increase the “Summer Science Camp” type opportunities, both on-campus and on-site in aboriginal communities, to generate increased awareness, interest, and academic ability among the prospective aboriginal students
 - 5. Aboriginal communities should be encouraged to sponsor their own students for “Summer Science Camp” experiences to increase commitment and community buy-in.

Comments from individual participants which were indicated on returned Prioritizing Sheets:

- 1) Suggestion to add “Science Camp” as a recommendation.
- 2) Re # 2, L: crossed out “Canadian” and put in “National”
- 3) Re # 4: Look into setting this up for next summer.
- 4) Re # 5: This does not really matter, serves as more as a symbol while building a partnership. Important to review this on periodic basis
- 5) Suggestions to add: Aboriginal Health Sciences Entry Program and Aboriginal Student Retention Program as recommendations.
- 6) Suggestion: start (Summer Science Camps) at an earlier age. Eg: hockey camp. This can be suggested to Aboriginal, Métis, communities, etc...
- 7) Retention of students (work with aboriginal affairs)
- 8) Continue the dialogue on this issue but for the time being the designated seats should stay/or the communities expect them to be there - at least two
- 9) Health Sciences Entry Program, feedback to unsuccessful students and retention strategy.



What did participants tell us about the Workshop?

Synopsis of Post-Workshop Evaluation		
	# Responses	Average Rating (out of 5)
Speaker Presentations	41	4.31 (very good)
Working Group Discussion Circles	40	4.17 (very good)
Organizational Aspects of workshop	41	4.06 (very good)
Recognition of, & Sensitivity to Cultural Issues	41	3.96 (good)
Overall experience of workshop	40	4.49 (very good)

I liked...

- Small group discussions
- Inspiring and informative keynotes
- Face to face with the faculty and the Deans of NOSM
- Diversity of groups
- Respect for the First Nations, acknowledgement and awareness
- The participation from faculty and the genuine willingness to hear from the delegates

I disliked...

- Not enough time for discussion
- The days were too long
- The room was too large, people scattered and it was hard to hear the speakers

I learned...

- More about the vision of the organization
- Progress NOSM has made in all areas since the previous workshop
- How NOSM takes their social accountability mandate seriously
- Potential for Aboriginal people to become physicians
- That my perspective is valued, that it's so important to participate in these workshops

Suggestions for Future Workshops...

- Another workshop should be done in 2 years to see what progress has been made on the medium and long-term recommendations
- Invite Aboriginal students and ICE representatives to share their stories.
- Receive agenda in advance, packages of slides to participants afterwards. The website was helpful to find info in advance, keep it going!
- A forum for Elders to give their input. Hear from traditional medicine teachers.
- Sessions on Cultural Awareness including all Aboriginals. Research and knowledge.
- Workshop on Admissions and Recruitment of more Aboriginal students applying – or curriculum.

Other Comments...

- All delegates need to bring this information to their communities and neighboring communities. Get feedback as to how the communities will support this endeavor. See you at the next workshop!

Where do we go from here?

The success of the Northern Ontario School of Medicine is directly related to its response to the recommendations made at the first workshop concerning the unique health care needs of Northern Ontario. The creation and advancing role of the Aboriginal Reference Group (ARG) as a primary resource for advice in the School has been very instrumental concerning Aboriginal issues, programming and involvement in the development and on-going operations of NOSM. Among other duties such as advising the Aboriginal Affairs Unit and the Founding Dean, the reference group played a major role in the design and content of the Workshop and this Report.



Recommendations received from the Mii-Kwen Daan delegates and presented in this Report provide additional direction for both the ARG and the School. Since this gathering, ARG members and AA Unit staff have worked hard to turn these recommendations into a concrete implementation plan.

The ARG is now finalizing their 2007-2009 Workplan. The foundation of this document embraces the Mii Kwen Daan Workshop recommendations presented herein. In the spirit of collaboration and coordination, the ARG Workplan was referenced to the NOSM Strategic Plan, available for download at www.normed.ca/about_us/vision_mission/StrategicPlan_06-09.pdf, and the AA Unit Operational Plan for 2007/2008. Scheduling of activities within the Workplan reflects the prioritization ranking provided by Workshop participants, and some activities are occurring already. At the next Aboriginal Workshop in 2009, delegates will again measure NOSM success with the recommendations and provide further direction to the Medical School as it grows and matures. The Aboriginal Reference Group will continue to perform a critical role.

Conclusion

The Northern Ontario School of Medicine has cut a remarkable path in creating a new medical school which addresses the health needs of the north in direct response to the voices of the north. The School will continue to face challenges as it evolves into a mature organization based on its Mission and Vision. Successful evolution will require that the School fulfills its social accountability mandate by, in part, continuing to ensure meaningful engagement with Aboriginal people and communities, and response to their advice and concerns.

NOSM has reached two major milestones through the development of the Aboriginal Reference Group. The School has successfully entrenched a mechanism for the meaningful participation and on-going communication with Aboriginal peoples. NOSM achieved this by building upon the partnerships already in place with Ontario's primary Aboriginal political and service organizations by including their representation on the ARG. ARG members affirm and uphold natural law, and recognize their relationship and responsibility not only to their organizations and communities, but also to the land and creation. The work they have set out for themselves, together with the Aboriginal Affairs Unit and other Units within the School, will reflect these principles and perspectives for our overall mutual benefit.

The ARG and NOSM will continue to showcase efforts and demonstrate to Aboriginal communities that their voice is being heard. NOSM is committed to the Aboriginal Reference Group, the Aboriginal Affairs Unit, the Elders Program, and the

many community partnerships for student success. By ensuring that Aboriginal voices continue to be heard and are acted on, the School will continue to succeed and remain true to its Mission and Vision.

This Report, along with other information on the “Mii Kwen Daan”: Keeping the Vision - Continuing the Dialogue Workshop 2006 is available for downloading at the Aboriginal Affairs Unit Document Archive located at:
http://www.normed.ca/units/aboriginal_affairs/documents/Default.aspx

Hard copies of this report and referenced background material may be requested through the NOSM Aboriginal Affairs Unit by calling the Unit at 807-766-7322.



Appendix

“Mii Kwen Daan” Workshop Participants

Organizational Delegates

Veronica Nicholson	OFIFC (Ontario Federation of Indian Friendship Centres)
Marie Meawasige	OFIFC
Jessica Hill	OFIFC
Jeanette Corbiere-Lavell	ONWA (Ontario Native Women's Association)
Chantal Kaltwasser	ONWA
Jenny Grizans	ONWA
Anges Bachmann	ONWA
Lynne Picotte	MNO (Métis Nation of Ontario)
Doug Wilson	MNO
France Picotte	MNO
Bill Smith	MNO
Yvonne Pierre	OMAA (Ontario Métis and Aboriginal Association)
Linda Aelick	OMAA
Thomas Mattinas	OMAA
Linda McGuire	OMAA
Deanna Jones-Keeshig	IFN (Independent First Nations)
Vernon Fair	IFN
Diane Maracle-Nadjiwon	IFN
Shirley Commanda-Quedent	Union of Ontario Indians/Nipissing First Nation
Gail Windego	GCT3 (Grand Council Treaty #3)
Becky Kingbird	GCT3
Serena Lewis	GCT3 / Kenora Area Health Access Centre
Elizabeth Moore	NAN (Nishnawbe-Aski Nation)
Nimkii Lavell	ONWA
Cayla Gilbert	ONWA
Dr. Marg Munro	Dilico/NOSM
Eugene lafrancois	OMAA
Giselle Kataquapit	NAN / Fort Albany First Nation
Robin Ranger	UOI / Fort William First Nation
Diane Hiscox	TBRHSC Stroke Program
Pauline Bodnar	TBRHSC Stroke Program

Guests

Dr. Jay Wortman	Director General - B.C. Region F.N.I.H.B.
Dr. Elizabeth Erasmus	

Aboriginal Reference Group Members

Debbie Lipscombe	ARG – NOSM Board of Director
Blythe Morrisseau	ARG (Aboriginal Reference Group Member)
Sheila McMahon	ARG
Elizabeth Angecone	ARG
Tim Pile	Master of Ceremony/ARG
Ann Hamilton	ARG
Rosie Mosquito	Chair, ARG

Local Community Coordinators

Lydia McKenzie	Temagami First Nation
Joshane Fiddler	Sandy Lake First Nation
Beatrice Anderson	Wapekeka First Nation
Don Sofea	Nibinamik First Nation
Mary Lou Winter	Kingfisher Lake First Nation
Bonnie John George	Constance Lake First Nation
Louise Gauthier-Brisson	Constance Lake First Nation
Dean Wilson	Gizhewaadiziwin Health Access Centre
Doreen Jacko	Whitefish River First Nation
Mike Morris	Kitchenuhmaykoosib Inninuwug First Nation
Jackie Kataquapit	Fort Albany First Nation
Carmen Blais	Dilico Ojibway Health Services
Susan Beardy	Muskrat Dam First Nation
Cyril Beardy	Muskrat Dam First Nation
Jamie Michano	Ojibways of Pic River First Nation

Elders

Barney Batise	Mattagami First Nation
Ron Wakegijig	Wikwemikong Unceded Indian Reserve No.26
Mary Desmoulin	
Thomas Mattinas	Fort William
Julie Ozawagosh	Whitefish Lake First Nation
Frank Ozawagosh	Whitefish Lake First Nation

Guests

Dr. Jay Wortman	Director General - B.C. Region F.N.I.H.B.
Dr. Elizabeth Erasmus	

Other

Sheila Hardy	Board of Director/Laurentian University
Zhiish McKenzie	NOSM Student - Charter Class

Staff

Orpah McKenzie	Director, NOSM AAUnit (Aboriginal Affairs Unit)
Ian Peltier	AA Unit
Jane Yesno	AA Unit
Dr. Dan Hunt	NOSM Vice-Dean, Academic Affairs
Dr. Joel Lanphear	NOSM – Undergraduate Medical Education
Dr. Roger Strasser	NOSM Founding Dean
Dr. Greg Ross	NOSM - Research
Dr. Blair Schoales	NOSM - Admissions
Danielle Barbeau-Rodrigue	NOSM – Francophone Affairs
Christeen Jones	NOSM - Admissions and Student Affairs
Stephanie Lesage	NOSM
Ashleigh Quarrell	NOSM
Tracie Smith	NOSM - Communications Unit
Cathy Gosselin	NOSM
Cathy Powell	NOSM
Cindy Crowe	NOSM - AA Unit
Sam Senecal	NOSM - AA Unit
Tom Terry	NOSM - AA Unit
William Hellenhauser	NOSM
Loretta Sheshequin	NOSM - Admissions and Student Affairs
Tracy Al-Idrissi	NOSM - Admissions and Student Affairs
Betsy Ledger	KORI (Keewaytinook Okimakanak Research Institute)
Franz Seibel	KORI
Wesley McKay	KORI
Brian Walmark	KORI
Aaron Hardy	KIHS (Keewaytinook Internet High School)
Franklin Tibishkogijig	KORI



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