



Co-RIG Project

A First Nation-Led COVID-19 Response: Coordinating integrated primary care

Project lead: Lindsay Crowshoe, MD, CCFP, Elbow River Healing Lodge, Urban Aboriginal Primary Care Clinic

Project location: Siksika First Nation, Alberta

Summary

Siksika First Nation mobilized an integrated and comprehensive approach to reduce the risk of COVID-19 within their community. The First Nation worked with a multidisciplinary team to optimize screening, support infected households to isolate, and ensure care for severe cases. Culturally-attuned education, cross-system reporting, social assistance, and patient follow-up were central to the positive impact, with similar strategies rolled out in other partnered First Nations.

Faces of COVID-19

A Nation-led approach to support Edward and his family

Edward, age 36, lives in Gleichen, Alberta, and works at the JBS Canada meat-packing plant where there is a COVID-19 outbreak. Edward lives in a small home with eight other family members, including his grandmother. He is worried about how his family will self-isolate and how they will access groceries.

Edward recalls seeing a post on the Siksika Nation Facebook group about COVID-19 support and he calls the Nation's health services centre. That afternoon a food hamper is delivered to help Edward and his family isolate at home until they are able to be tested. The medical clinic arranges for immediate COVID-19 testing on site and has the results expedited to minimize the pressure of isolating in a small living space.

While awaiting test results, Edward's doctor makes daily calls to check for symptoms and help assess whether any family members are experiencing emotional distress that requires further support. While Edward is anxious about not being able to work, he appreciates the care he and his family receive and feels confident about their ability to manage. With the whole family testing negative, he is soon back to work.

Project detail

Siksika First Nation is one of the largest First Nations in Canada. With crowded housing and a mobile population in proximity to outbreaks in Calgary and meat-packing plants nearby, the Siksika community faced high risk for rapid spread of COVID-19.

With the support of Co-RIG funding, Dr. Lindsay Crowshoe and primary care providers worked with First Nation leaders and Alberta Health Services to develop a comprehensive approach to respond to the needs of the Siksika First Nation.

In anticipation of a second wave of COVID-19 in the summer of 2020, a primary care team on site in the Siksika community innovated technical knowledge and communication lines to reduce risk of secondary infections.

Using culturally-attuned audio and print communication in Blackfoot and English, the team helped residents adopt public health directives in their own community—including resources to optimize screening, support physical distancing, and support isolation of infected individuals and households.

For patients with confirmed or suspected cases of COVID-19 the team coordinated food and social support to help ease stress and anxiety, and provided patient follow-up for severe cases.

Impact

- **Improved patient care:** Integrated services in First Nations allow social supports to buffer hardship from isolation, as well as navigate health care in cases of positive tests.
- **Front-line family medicine:** With family physicians working closely with patients and the community, there is a greater opportunity to tackle systemic drivers of health inequities and strengthen the interface between public health and marginalized communities.
- **Addresses system gaps:** By integrating distinct branches of the health system for the population served we can address health systems gaps that lead to inequitable pandemic outcomes for First Nations peoples.
- **Broader application:** Developed for the Siksika First Nation, this comprehensive approach could be adopted in other vulnerable communities.

Results to date

- The epidemiological curve for COVID-19 demonstrates a reduction in COVID-19 incidence within partnered First Nations. Difference in the curve compared to provincial data suggests First Nation-specific strategies had a positive impact on incidence rates.
- The study is still in progress (as of this publication) and results will be available upon its completion.

Methodology

Establish partnerships between Alberta Health Services, area Primary Care Networks and community health clinics, and family physicians to help plan and coordinate interventions. Planning includes:

- Developing protocols for screening, testing, and isolation.
- Establishing clinic workflows.
- Coordinating access to support services including mental health, food, lodging, and shelter for people experiencing anxiety and food insecurity

who may be experiencing domestic strain as a result of COVID-19 restrictions or who may be unable to safely isolate at home.

- Developing communication tools to support community awareness of infection-prevention-control protocols.
- Evaluating intervention strategies.
- Creating knowledge mobilization strategies to encourage use of the approach within other First Nations.

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“As family physicians, we often see ourselves as a single doctor, working with a single patient or family. The response needed to help manage the COVID-19 pandemic demonstrates the critical role we can play at the system and population health levels. These learnings are cross-cutting and not just applicable to First Nations.”

– Dr. Lindsay Crowshoe, project lead

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Project team

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