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For Immediate Release

### **VIHA and First Nations take the lead in Aboriginal pandemic preparedness**

**Vancouver Island** – The Vancouver Island Health Authority, in partnership with the Inter Tribal Health Authority and First Nations communities across Vancouver Island have taken a groundbreaking step in mapping out how they will prepare for and respond to a pandemic influenza outbreak. VIHA becomes the first jurisdiction in Canada to implement Health Canada's guiding frameworks to assist First Nation communities in the development of their community pandemic influenza plans.

"I applaud VIHA and the Inter Tribal Health Authority for their efforts to ensure aboriginal communities are supported in preparing for a potential pandemic," said Health Minister George Abbott. "This speaks to the power of working together in partnership with our communities to develop effective interventions to mitigate the impact of a pandemic if it occurs."

"The development of community specific Pandemic Influenza plans will ensure that our First Nations population is able to effectively manage the consequences of pandemic influenza," said Vancouver Island Health Authority Board Chair, Jac Kreut. "The goal of pandemic influenza preparedness and response is to minimize serious illness and overall deaths, and minimize societal disruption as a result of a pandemic."

"Coordination is the key to success," says David Bob, Chair of the Inter Tribal Health Authority. "We are pleased to work alongside VIHA in developing the type of response that our citizens expect and deserve."

The project, which began in April 2005, took an important first step earlier this year when the Vancouver Island Health Authority's (VIHA) Emergency Planning and Aboriginal Health programs partnered with the Inter Tribal Health Authority (ITHA) – representing 33 First Nations throughout the Vancouver Island Health Authority – to do a table-top simulation exercise.

Project leader, Byron Loucks, a consultant with JEL Protection Ltd. was contracted to facilitate discussion and planning between First Nations communities, Health Authorities and local Government about actions to be taken during a pandemic. "The table-top exercise focused on roles and responsibilities in emergency response, distribution of vaccine and antivirals, clinical health services and surveillance," said Loucks. "It covered operational and logistical processes around issues such as resource management and communication planning. Overall, it was a huge success, and a valuable learning experience for all participants."

“We know there are some issues specific to Aboriginal people that need to be addressed,” explained Darlene McGougan, VIHA’s Aboriginal Health Program Manager. “Our goal is to increase awareness of the challenges faced in managing a pandemic influenza outbreak and to familiarize First Nations communities with emergency response capabilities to react to a pandemic.”

The 700,000 people served by the Vancouver Island Health Authority include 33,000 Aboriginal people. This population is culturally and politically diverse, living in a complex mix of situations: urban to remote fly-in communities; off-reserve populations served by provincially funded programs; and 51 increasingly self-governing First Nations communities on lands still largely within federal jurisdiction.

“While off-reserve residents are served by broader pandemic plans,” stated Dr. Charmaine Enns, Medical Health Officer for the Vancouver Island Health Authority, “there are 13,000 First Nation’s residents living on reserves who have had minimal pandemic planning and who were not provided for under other plans. To date 48 of 51 First Nation communities have completed or are in the process of completing their pandemic influenza plans.”

These plans are owned by the community, are culturally and community appropriate and compliment adjacent community plans. The groundwork is now laid for First Nations to continue building capacity in All Hazards Planning.

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