

IMPROVING END-OF-LIFE CARE IN FIRST NATIONS COMMUNITIES

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Background

The number of First Nations people facing end-of-life is increasing each year due to the growing number of seniors and the high burden of chronic and terminal disease amongst this population.

Addressing the unmet need for accessible, culturally appropriate palliative care services for First Nations communities is a growing social obligation and an emerging Canadian policy priority.

Palliative care is a wide range of services that are brought together to improve the quality of life for persons living with a terminal illness. Palliative care is active, holistic care.



This project is funded by the Canadian Institutes of Health Research (2010-2015) and builds on palliative care research completed in First Nations communities in Northwestern Ontario from 2003–2010.

Partnering Communities

- Fort William First Nation, Ontario
- Nautkamegwanning First Nation, Ontario
- Six Nations of the Grand River Territory, Ontario
- Peguis First Nation, Manitoba



Methodology

Utilizes a **comparative case study design**: Research partnerships with four unique First Nation communities.

Participatory action research: Health care providers will be empowered and supported to be catalysts for community change in developing local palliative care programs.

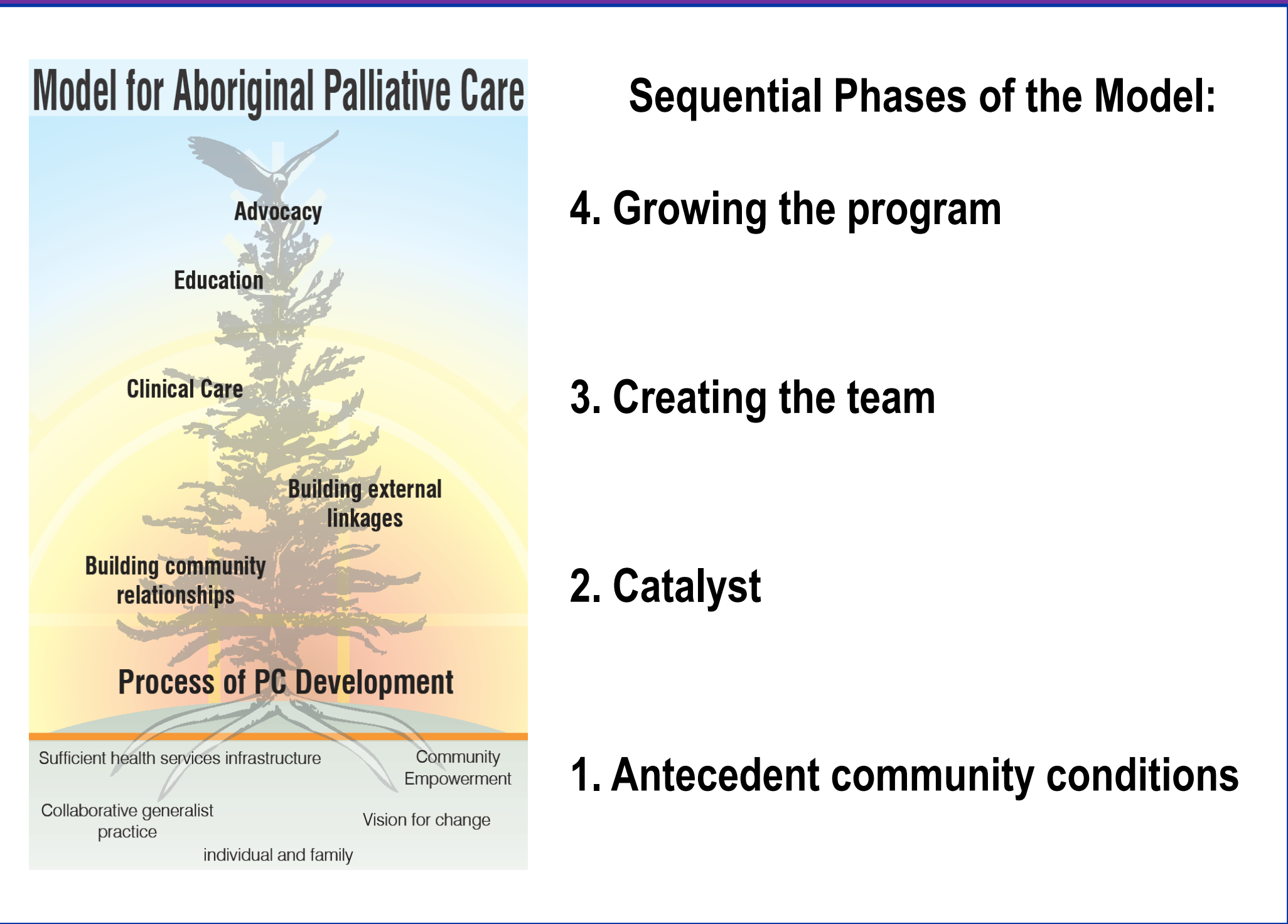
Community capacity development: Applied research and community education aimed at creating local palliative care programs in First Nations communities.

Community control and ownership of the research project through local Project Advisory Committees.

The Model: A Growing Tree

Based on a **four phase conceptual model** for developing palliative care.

This model was developed by Dr. Mary Lou Kelley in rural communities and was adapted by Six Nations of the Grand River Territory.



Research Activities

- Engaging the communities and conducting community assessments (Year 1)
- Articulating the community vision for change (Year 2)
- Assessing antecedent community conditions and empowering First Nations health providers to be catalysts for change (Year 2)
- Creating palliative care teams (Year 2)
- Growing the program (Years 2-5)
- Creating capacity & sustainable community change by building partnerships between First Nations communities, palliative care experts & project collaborators (Years 1- 5)
- Implementing and evaluating all interventions and generating a culturally appropriate theory of change (Years 1-5)
- Engaging community members, partners & Aboriginal university students in research & dissemination activities (Years 1-5)

Research Goals and Objectives

To document **Indigenous understandings** of palliative and end-of-life care.

To create a **tool kit for developing palliative care** programs in First Nations communities that can be shared nationally.

To **empower First Nations** health care providers in developing their own palliative care program.

To **improve capacity within FN communities** by developing palliative care programs, and strengthening linkages to regional palliative care resources.

To develop **knowledge and skills in research** for FN community members, students and health professionals.



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