Introduction

The Assembly of First Nations (AFN) is the national political advocacy organization representing First Nation citizens in Canada, which includes more than 900,000 people living in 634 First Nation communities and in cities and towns across the country. The AFN is honoured to be part of this important Summit on Promoting Empowerment, Equity and Leadership and commends the province of Nova Scotia and the planning committee for the extensive work conducted to plan this event. This Summit is timely as Indigenous women continue to call for and initiate action to address the many issues faced by our families and communities. The AFN welcomes the opportunity to join with Indigenous women to chart a path forward, building on the recommendations resulting from previous Summits.

The AFN Women’s Council respectfully submits this paper to support the 4th National Aboriginal Women's Summit and its intent, and to identify key practical recommendations under the three themes of this event: Empowerment, Equity and Leadership. Urgent action is required – the recommendations here are to provide a foundation for longer term change.

Empowerment

For First Nation women, European economic and cultural expansion has been especially destructive, as their valued position as equal partners in tribal society was undermined altogether. Specifically, traditional systems have been attacked and displaced due to the imposition of foreign governance and socio-economic systems. Key among these is displacement of Indigenous peoples and dispossession of lands, breaking up families by targeting children through Indian Residential Schools and the child welfare system and the discrimination and disenfranchisement of Indigenous women and their children through registration provisions of the Indian Act.

As a result, Indigenous women and girls have been pushed to the margins more so than non-Indigenous counterparts, especially within urban settings. First Nation women and girls often face economic and educational disadvantages which have wide-reaching detrimental impacts. For example, even though 9% of Canadians live in poverty, Aboriginal women make up 36% of those who live in poverty, with some regions such as Manitoba having appallingly high rates of poverty (almost 70% of Aboriginal children under the age of six are poor). Similarly, in the most recent Regional Health Survey (2008-2010), it was found that 36.2% of women living on-reserve have a personal income of $15,000 or less, with an overall 10% of women having no income at all, and 42% reporting they struggle to meet ‘food’ as a basic need.
Amidst this, First Nation women continue to show resiliency and strength. Similarly, prosperous women sustain flourishing communities; however such prosperity is not possible without the community’s support.

Empowering First Nation women to embrace their traditional significant role in their communities is an invaluable investment lasting for generations to come. Specifically, First Nation women require more responsive programs, services, and incentives to facilitate access to traditional and modern economic opportunities and establishing more women-owned and operated businesses.

Actions:
- Empowerment of First Nation women requires women being represented at economic and business decision-making tables across sectors including private sector, First Nations, Provincial/Territorial and Federal governments.
- Provide the necessary resources to support the re-establishment and sustainability of traditional economies.
- With the increase in industrial development on traditional lands and territories and the call for First Nations full and effective participation in a national economy, there is a growing need for First Nations women’s equitable access to economic capacity building and leadership tools.

Equity
The inequity that First Nation women face is undeniable. When compared to their Canadian peers, First Nation women score significantly lower in all health and social indicators. First Nation women face individual and institutional discrimination and disadvantages on the basis of race, gender and class. As mentioned above, such inequity results from colonization and the detrimental assimilation policies that came with it. Elimination of discrimination and inequity burdening First Nation women requires key areas such as health and social services, education, and justice to be addressed.
Actions:
- Applying a decolonizing lens/ methodologies to First Nations women’s research and the development of programs and initiatives to engage in meaningful dialogue with communities to establish clear priorities and goals.
- Set clear targets to eradicate demonstrated the inequalities in child welfare, education and health for First Nations peoples and report on progress annually.

Health
As it stands today, when compared with the Canadian public, First Nation populations face much higher rates of chronic and communicable diseases such as diabetes, cancer, heart disease, tuberculosis and HIV/AIDS and they are exposed to greater health risks associated with, but not limited to, jurisdictional barriers to accessing health services, poor housing, poverty, contaminated water, higher rates of smoking and exposure to second-hand smoke, higher rates of alcohol and drug abuse, obesity, violence, limited access to appropriate health services (eg., remote location and isolation of many communities), discrimination and limited access to healthy foods and employment opportunities.

Compounding these alarming statistics, First Nations programs face a challenging fiscal reality. Since 1996, federal funding for First Nations core programming have not kept up with the rate of growth, creating substantial pressures on First Nations health delivery systems. Nearly a generation has passed since the release of the ground-breaking Royal Commission on Aboriginal Peoples (RCAP) report in 1996. One of RCAP’s key recommendations is that, “governments and organizations collaborate in carrying out a comprehensive action plan on Aboriginal health and social conditions.” This recommendation remains largely unfulfilled. We must all work together to ensure that another generation does not pass without a meaningful and fundamental improvement to First Nations health. The First Nations vision is to have a First Nations controlled and sustainable health system that adopts a holistic, comprehensive and culturally appropriate approach. This vision includes access, services and benefits to all First Nations people, regardless of where they live.

To attain this, First Nation leadership are pursuing Provincial/Territorial and Federal partnerships that commit parties to reducing the First Nations health inequity in Canada and responding to the First Nations health disparities of First Nations and their communities.

First Nations women are substantial users of the health system and are on the front line of service provision. They are often the primary caregivers in First Nations households, and along with their children, can be at increased risk from infectious disease and other health concerns. As such, sensitivity to the needs of women’s health, and indeed all genders through a process of sex and gender-balanced analysis (SGBA) is recommended. SGBA refers to a First Nations cultural and gender lens applied in the examination of gender and those along the gender continuum at all stages of policy development and implementation. It provides for the identification and consideration of
the differential impacts of mainstream policies upon men, women, boys, and girls; the important social and economic differences between the genders, and makes it possible to identify present and potential gender-adverse impacts of policies. SGBA is all-encompassing – of all ages and genders. In 2009, along with supporting resolutions, the AFN Women’s Council developed a Sex and Gender Balanced Analysis Framework for distribution/implementation to ensure that there is no gender bias in programming, budgeting and in the development of culturally relevant programs and policies in all areas.

Health Canada’s Non-Insured Health Benefits Program (NIHB) continues to have negative impacts on the health and wellbeing of First Nations women and their families. Currently, Health Canada’s First Nations and Inuit Health Branch (FNIHB) have the authority for NIHB and First Nations and Inuit health services and programs. The NIHB provides benefit coverage for registered First Nations and recognized Inuit on a limited range of medically necessary health related goods and services that include: a specified range of drugs; medical supplies and equipment; dental care; vision care, medical transportation; short term crisis intervention mental health counselling, and approved services out of country (for students and migrant workers. This program has been the subject of several cost management measures since the 1990s, including: delisting of benefits; changes to eligibility; reductions in pharmacist service costs (mark ups and dispensing fees); enforcement of low-cost pharmaceutical alternatives (generic drugs); prior approval requirements for limited use/special authority drugs; and pre-determination (prior approval) of some dental services. In addition, the program is affected by reductions in provincial benefits since the Program views itself as “a payer of last resort”. There are also serious concerns with regional inconsistencies in processes relating to adjudicating benefit requests; this adds to the potential for additional inequities in the program for First Nations women and their families. In view of the growing NIHB program crisis, the AFN continues to meet with Health Minister Rona Ambrose to carry out a joint review of the NIHB program as mandated by AFN Resolution 56/2012.

Improving the health of First Nations is based on improving access, quality and sustainability of health services; adhering to a vision of health as part of a seamless continuum of care which links all health programs and services across all jurisdictions; and, improving First Nations control over health care and reciprocal accountability between the federal government and First Nations.

The First Nations Mental Wellness Continuum Framework was developed through intensive collaboration between First Nations partners and Health Canada’s FNIHB which represents a shared vision wherein First Nations individuals, families, and communities across Canada are supported to enjoy optimal levels of mental wellness. Achieving this vision will require: culturally grounded community development and capacity building that reduces risk factors and increases protective factors; comprehensive, coordinated; high quality; culturally responsive mental wellness services for First Nations people living on reserve; and sustained commitment and collaboration of
many First Nations, federal, provincial and territorial partners supported by strong leadership and flexible funding.

In September 2014, during the high-level *Every Woman Every Child* event at the United Nations, Prime Minister Stephen Harper announced Canada’s global leadership to end the preventable deaths of mothers, newborns and children within a generation. The aim of the initiative is to ensure that maternal, newborn and child health will feature prominently in the post-2015 development agenda, through the support of a strong coalition of global partners. Significant financial commitments and strategic partnerships generated by the Canadian-led 2010 Muskoka Initiative of world leaders, and re-energized at the 2014 *Saving Every Woman Every Child: Within Arm’s Reach* Summit in Toronto; Canada and its G8 partners have since contributed billions of dollars to improve the health of mothers and children in the world's poorest countries. While Canada is touting that under their leadership, global attention and resources have been mobilized around maternal and child health issues, Canada need not look further than their own backyard to find extreme disparities with regards to First Nations’ maternal and child health. From access to safe drinking water, education, immunization rates, and maternal and infant mortality rates, Canada’s First Nations lag far behind mainstream Canada. There must be global and domestic awareness that the same deplorable conditions that developing countries face can be found right here in Canada, in indigenous communities and this is completely unacceptable in a country as wealthy as Canada.

**Actions:**

- The development of a First Nations Women and Child Strategy that will focus on the challenges, gaps and opportunities for First Nations women and children in Canada such as access to water, education, immunization, maternal and infant mortality issues.
- Full and effective engagement of Indigenous Peoples in post-2015 development agenda to address maternal and infant mortality issues and other related concerns.
- Improved government policies at the federal and provincial levels to address jurisdictional issues which act as barriers to First Nations women’s health services and programs.
- Improved communication and coordination between services supported by governments, regional health authorities, and communities.
- Improved access to the NIHB program for First Nations women status members and their families; this includes improved access to medical transportation for travel to urban centres to receive care.
- Apply a social determinant of health approach to policy discussions regarding First Nations women's approaches and well-being, implemented in accordance with the values, attitudes and aspirations of First Nations peoples; while blending traditional and Western practices in program and services delivery aimed at First Nations women.
- Improving health care for First Nations women must place culture as a core component throughout all programs and policies.
- That the federal and provincial governments support flexible mental health and wellness funding models to ensure First Nations communities can work within the continuum of care to
strengthen culture, meaning, hope, belonging and purpose among women, men, children, and families in communities.

**Ending Violence**

There is an immediate and pressing need to seek justice for First Nation women and girls in Canada and ensure that they have the same opportunities to fully enjoy their rights, regardless of where they reside. A recent report released by the Royal Canadian Mounted Police (RCMP) found incidents of Aboriginal female homicides and unresolved missing Aboriginal females total 1,181 – 164 missing and 1,017 homicide victims. These are unacceptable levels of violence against Indigenous women and girls and the AFN is committed to take action.

For Indigenous women, violence is not only seen in the context of victimization but it is also part of a cycle that is perpetuated by their overrepresentation in criminal justice and correctional systems. The 2012 Public Safety Canada report, *Marginalized: The Aboriginal Women’s experience in Federal Corrections*, and the March 2013 report of the Office of the Correctional Investigator, *Spirit Matters: Aboriginal People and the Corrections and Conditional Release Act*, underscore these facts. While Aboriginal people account for just four per cent of the Canadian population, one in three females in the federal correctional system is Aboriginal. In addition, over the last 10 years, the representation of Aboriginal women in the prison system has increased by nearly 90 per cent, making them the fastest-growing offender group.

Furthermore, involvement in the criminal justice system is the result of a complex set of collective and individual life circumstances marked with violence and poverty. Consequently, upon entering federal correctional institutions, many Aboriginal women present with a range of programming needs including culturally appropriate and gender appropriate programming regarding life skills; parenting skills; education; employment; alcohol and substance abuse; anger management; and spiritual programming. In addition, a number of Indigenous women may present with a need for mental health care and treatment.

The high rates of First Nation children in state care (8 times that of non-First Nation children) and chronic underfunding of First Nation child welfare services introduces additional vulnerabilities to violence. In addition, women and girls often face economic and educational disadvantages which make them vulnerable to violence. Compounding these indignities is the widespread silence of mainstream Canadian society and media on violence against Indigenous women and girls.

All of these factors have worked together to develop a societal narrative that allows violence against Indigenous women to persist. Just one example is the perception that women working in the sex trade are leading “high risk lifestyles” and are therefore less likely to garner police and media attention. Consequently, the violence that they experience has become normalized and, in some cases, almost expected.
At the 2012 Annual General Assembly, over 1,800 Chiefs and First Nations citizens made a pledge to “live violence free and to personally work to achieve safety and security for all Indigenous peoples – women and men, girls and boys.” At the 2012 Council of the Federation, Premiers took up this pledge as a reminder in their professional and personal lives of their responsibility to ensure the safety of Indigenous women and girls. The pledge is a clear recognition that ending violence and ensuring the safety and security of citizens is everyone’s responsibility and that all governments – federal, provincial, territorial and First Nation – must use any and all tools available to them to end violence.

The best and most successful efforts to prevent and end violence against Indigenous women and girls are grounded in communities, are inclusive of the voices of women, youth and Elders, and respect the jurisdiction of First Nation governments. Communities are best able to coordinate, support and mobilize the appropriate people – including leadership, frontline workers, volunteers, families, youth, service providers and external supports – to create safer homes and environments.

The AFN welcomes the collaboration of all jurisdictions in the development of the Framework to Coordinate Action to End Violence Against Aboriginal Women and Girls and hopes this will lead to further action and accountability in this area.

In May 2014, the RCMP released a national operational overview report on Missing and Murdered Aboriginal Women affirming 1,181 Aboriginal women in Canada were missing and murdered between the years 1980 and 2012. These disturbing findings are evidence of a deep social malaise and demand the attention of a National Inquiry.

An independent National Public Commission of Inquiry on Violence Against Indigenous Women and Girls must focus on developing action plans to address violence and the factors that lead to it, inclusive and reflective of the perspectives of Indigenous women, First Nation, Inuit and Métis communities, and the families of missing and murdered women.

A National Public Commission of Inquiry is critical for accountability and to create change. However, without a strong and actionable national strategy and plan for implementation, change will continue to be delayed. While the federal government released an “Action Plan” in September 2014, this is simply a compendium of existing efforts and does not take the steps needed to create demonstrable results.

To advance dialogue towards tangible change, national Indigenous leaders are working with Provinces and Territories and inviting federal partners to participate in a National Roundtable on Missing and Murdered women.

The safety and wellbeing of Indigenous women and girls is integral to ensuring healthy and prosperous Indigenous families, communities and nations. Clearly, the factors that have led to the current rates of violence against Indigenous women and girls are complex and intersecting. Therefore, our responses must be similarly comprehensive and far-reaching. An effective strategy
must include full commitment and participation from all levels of government including First
Nations, civil society and both Indigenous and non-indigenous people. Our actions must be able to
ensure justice for women and girls who are or have been victims of violence, make changes to laws
and policies that allow these problems to persist, ensure the availability of adequate support services
and generate a fundamental societal shift that will no longer allow epidemic levels of violence
against Indigenous women and girls to continue.

**Actions:**
- The Government of Canada, as well as other relevant bodies must recognize First Nations
governance and address the critical gaps in First Nations health, through advancing First
Nations systems that are culturally appropriate and effective; delivering sustainable, fair and
equitable funding for First Nations health services; and improving coordination and effective
intergovernmental cooperation and partnership.
- Educational programs and services for Indigenous peoples must be developed and implemented
in consultation and cooperation with the Indigenous peoples concerned in order to address and
incorporate their specific needs, histories, identities, integrity, values, beliefs, cultures,
languages and knowledge, as well as their social, economic and cultural priorities and
aspirations. Such consultation processes must ensure that adequate representation by
Indigenous women is at the decision-making tables.
- Educational programmes and services for Indigenous peoples should be of high quality,
culturally safe and appropriate, and must not aim at or result in unwanted assimilation of
Indigenous peoples.
- Investment in front-line services and shelters on-reserve and in rural areas so that every First
Nations woman and girl experiencing violence has access to immediate support.
- Coordinated strategy inclusive of service providers and First Nations governments to prevent
and address violence against Indigenous women and girls in urban centres.
- Develop compulsory protocols between and among police services to share information and
immediately respond to and appropriately investigate reports of missing persons by Indigenous
families.
- Create a resource centre/hub for First Nation communities of prevention, awareness and
response materials.
- Support a National Gathering led by and for the families of murdered and missing Indigenous
women.
- Call a National Public Commission of Inquiry into Violence Against Indigenous Women and
Girls, including those that have disappeared or have been murdered.
- Provide Local Community Action Grants to support the development of Community Action
Plans & Emergency Management Teams in every First Nation community so they are
equipped to intervene in incidences of violence.
- Provide sustainable, adequate resources to First Nations Police Services.
• Create a National public awareness and prevention campaign on violence against Indigenous women and girls.

**Leadership**

While there are many different ways Indigenous communities organized and governed themselves pre-contact, their laws, traditions and customs established that Indigenous women generally exercised leadership roles within their families and societies. Their participation was central to the safety and security of their families and community members. Women in some pre-contact traditional societies, such as the Haudenosaunee, had the power to appoint and remove the Chiefs. Indigenous governance systems had established processes to protect all members, especially the vulnerable and to deal with violence in a way that continued to support families and the community. However, these traditional systems have been eroded over time due to the imposition of foreign governance and justice systems, federal government interference, legislation and policies – reaching far back to the development of Canada and continuing to today.

Currently, official leadership positions remain mainly dominated by men, and the challenges for women to fill these positions compound as they struggle to meet basic necessities for their families within a western male-dominant society. First Nation women continue to express the need to reclaim their traditional honored role within their communities. Given, the detrimental generational gap that residential schools created, reclaiming such traditional roles for women requires bridging that gap which requires re-connecting Elders and youth.

Similarly, community processes that facilitate, support and ensure women leadership are necessary and building the capacity of women for active participation in social, economic and political life of the community is seen as a critical step for effective leadership, healing, initiating and sustaining development of Indigenous communities.

**Actions:**

• Increased opportunities to build effective leadership expertise and tools for First Nations women in communities.

• Enhance First Nations women’s skills in addressing lateral violence, conflict resolution, strategic planning and overall life balance.

• Creation of mentorship opportunities within and among communities involving current leaders, Elders and youth.