# Indigenous approaches to public health: Lessons learned from Yukon First Nation responses to the COVID-19 pandemic

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The COVID-19 pandemic brought many challenges to Yukon First Nations (YFN) in relation to intergovernmental collaboration, including coordination of health services, emergency measures communication, and access to health data. These challenges are in part related to the complex landscape of relationships between multiple governing authorities in the territory. The Yukon is one of three territories in northern Canada and is home to 14 YFNs, 11 of which are modern treaty holders. YFN modern treaties recognize and present the opportunity for collaboration between governing authorities, specifically YFN governments, the Government of Yukon (YG), and the Government of Canada. However, nation-to-nation collaboration involving both treaty and non-treaty nations must be sought.

YG is primarily responsible for health-care program and service delivery for all Yukoners, inclusive of Indigenous populations, as well as administering Yukon's Civil Emergency Measures Act (CEMA). We sought to better understand the intergovernmental dynamics that were at play during the COVID-19 response in the Yukon and identify lessons learned for interjurisdictional emergency and pandemic response. We conducted qualitative Intra-Action Reviews with YFN, territorial, and municipal government representatives involved in the pandemic response. Our preliminary analysis highlights challenges and lessons learned related to YFN self-determination in emergency planning, critical challenges faced by rural and YFN communities in emergency response, and lessons for future pandemic planning and public health strategies in the Yukon. These findings confirm key gaps and priorities that have been identified by others, provide context-specific elaboration and examples, and identify additional opportunities to be explored.

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## Introduction

In early 2020, the Government of Yukon (YG) declared a state of emergency in response to the spread of Sars-CoV-2, dubbed "the COVID-19 Pandemic". The Yukon, a territory in northern Canada, faced several governance challenges in responding to the pandemic in subsequent months and years. Some challenges were ubiquitous across Canada; for example, many jurisdictions struggled to navigate the relationship between different levels of government that is required when responding to an emergency such as COVID-19. The pandemic also presented unique governance challenges in the Yukon. These challenges were grounded in the complex legal and governance landscape, which includes modern treaty holders<sup>1</sup>, unsigned First Nations, and transboundary Nations, as well as multiple systems of law and legal traditions. The unique geography of the Yukon added further complexity to the pandemic response, as the region remains relatively isolated from much of southern Canada, has limited health-care facilities, and is home to numerous small, geographically dispersed communities. The Yukon is also no exception to a long history of exploitative and colonial treatment by the state in its relationship with Yukon First Nations (YFN). This ongoing legacy is especially relevant to health care, creating further complexities in the context of a pandemic.

In coordinating its response to the pandemic, YG was tasked with managing multiple relationships, including those with federal, municipal, and YFN authorities. The ongoing efforts to respond to COVID-19 in the Yukon therefore present an opportunity to learn about complex interjurisdictional relationships during emergencies and in health-care responses. While some literature has provided early reflections on the pandemic response in the Yukon (McPhee-Knowles et al., 2022; Graham, Curran and Johnston, 2022), there has yet to be an analysis that focuses on interjurisdictional dynamics or one that centres YFN perspectives. This perspective is especially important for informing future emergency responses in the region and may be informative for other regions with similar interjurisdictional contexts. In the Yukon, it is particularly timely to document this perspective as YG is currently undertaking a review of the *Civil Emergencies Measures Act* (CEMA).

The research team aimed to respond to these needs by supporting YFNs in a process of reflection and examination of intergovernmental relationships during the COVID-19 pandemic. In this paper we outline the key contextual elements needed to understand the jurisdictional complexities at the centre of the Yukon's COVID-19 pandemic response. We then present preliminary research results from an Intra-Action Review process and discuss these results in the context of interjurisdictional emergency planning and response involving Indigenous and non-Indigenous authorities.

# Context

Interjurisdictional dynamics and the COVID-19 pandemic in Canada

Reflections and lessons learned from the response to the COVID-19 pandemic will likely continue to emerge for years to come. Nonetheless, there are already numerous publications that provide preliminary observations and analyses of pandemic responses, including those discussing the challenges and interjurisdictional dynamics of addressing COVID-19. Early in the pandemic,

<sup>&</sup>lt;sup>1</sup> In this article, we use the term "modern treaties" and Final and Self-Government Agreements interchangeably.

Indigenous legal scholars and others observed that provincial, territorial, and federal governments in Canada were failing to acknowledge Indigenous jurisdiction and sovereignty within their pandemic responses. For example, Craft, McGregor, and Hewitt (2020) noted that both Ontario and federal emergency acts fail to provide funding to First Nation communities when declaring a state of emergency. The need to respect Indigenous sovereignty within emergency responses – for example, by ensuring Indigenous authorities decide how funding is used during a pandemic – has also been acknowledged internationally (Hillier et al., 2020).

Another theme highlighted by the literature has been the lack of attention to specific needs of Indigenous communities within pandemic responses. This is demonstrated by the absence of action plans specific to the unique challenges of First Nation reserves in Canada, the need to better understand specific capacity constraints that the pandemic placed on Indigenous governments and organizations, and the need for public education materials grounded in local contexts and languages (Craft et al., 2020; Mashford-Pringle et al., 2021; Richardson & Crawford, 2020). In the Northwest Territories, the territorial government tailored communication strategies to specific communities and provided communication resources to local governments, exemplifying how tailored approaches can be more successful (Cochrane, 2021). In addition, the need for Indigenous-specific data accompanied by data sovereignty agreements to support pandemic responses has been noted (Mashford-Pringle et al., 2021; Richardson & Crawford, 2020).

Reflections from the pandemic response in Canada have illustrated the importance of honouring a nation-to-nation relationship between Indigenous governments and other levels of government, and the need to improve that relationship to support future pandemic and emergency planning and preparedness (Hillier et al., 2020; Mashford-Pringle et al., 2021; NCCAH [National Collaborating Centre for Aboriginal Health], 2016; Richardson & Crawford, 2020). For example, in the Northwest Territories, the territorial government found collaboration and relationship-building with Indigenous governments on the pandemic response was key to its success (e.g., meeting early on and regularly providing briefings) (Cochrane, 2021). Hand-in-hand with this relationship is the importance of ensuring community-based leadership and preparedness within emergency response (Kyoon-Achan & Wright, 2020).

Indigenous health literature has long documented inequities in health care, health outcomes, and basic services that exist in many Indigenous communities. Since the onset of COVID-19, researchers, practitioners, and community leaders have been quick to call attention to the negative impact these longstanding inequities in infrastructure and public services within Indigenous communities have on the effectiveness of pandemic responses (Inuit Tapiriit Kanatami, 2020; Levesque & Thériault, 2020; Mashford-Pringle et al., 2021; Penney & Johnson-Castle, 2020). These underlying inequities (e.g., inadequate housing, poor access to clean water) must be addressed if future pandemic responses are to be made more effective within historically marginalized communities that are often at greater risk (Levesque & Thériault, 2020).

Finally, early publications during the pandemic documented strategies and tools for responding to the COVID-19 pandemic that involve or are led by Indigenous governments and organizations. Examples include lockdowns, travel restrictions, curfews, checkpoints, failure-to-comply fines, culturally appropriate wellness responses, and Indigenous community emergency preparedness plans (Craft et al., 2020; Richardson & Crawford, 2020). Indigenous governments and organizations drew on multiple sources of authority to enact these pandemic responses, including

treaties, bylaws, various sections of the Indian Act, and the United Nations Declaration on the Rights of Indigenous Peoples (Craft et al., 2020). While some approaches have been solely enacted by Indigenous authorities, others require intergovernmental collaboration.

Although it is nascent, the literature reviewed here highlights several key themes related to jurisdictional complexities of pandemic response in Indigenous communities. These include challenges to and successes of Indigenous jurisdiction and self-determination, nation-to-nation relationships with non-Indigenous authorities, and persistent inequities impacting health within Indigenous communities. The preliminary research results presented here will build upon this emerging body of knowledge, providing additional practical considerations for policy and action.

### Geographic context and governance in the Yukon

The Yukon is geographically located in the northwest corner of Canada, with an area of 482,443 km² and a population of 43,774 (Yukon Bureau of Statistics, 2021, 2022). Approximately 22% of the Yukon's total population is Indigenous, with 17% identifying as First Nations² (Statistics Canada, 2021). There are 14 YFNs that are part of eight linguistic groups including, Gwich'in, Hän, Upper Tanana, Northern Tutchone, Southern Tutchone, Tagish, Kaska, (all of which are Athapascan languages) and Tlingit. There are also several transboundary Indigenous groups with settled or unsettled land claims within the Yukon (see Figure 1). The majority of the Yukon's population (79%) lives in or around the urban centre of Whitehorse (Yukon Bureau of Statistics, 2022), while the rest is spread throughout seven rural municipalities and a number of smaller unincorporated communities. Of Yukon's rural population, 43% identify as Indigenous, whereas 17% of the Whitehorse population identifies as Indigenous (Yukon Bureau of Statistics, 2021).



Figure 1: Map of Yukon First Nations' traditional territories (Department of Environment, 2021)

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<sup>&</sup>lt;sup>2</sup> There is no indication of what percent of the population are Yukon First Nations. Statistics Canada reports on the number of people who identify as Indigenous (First Nations, Métis, and Inuit) but does not identify individual nations.

The territory has always been home to Yukon First Nations. Their rich cultures, languages and community-oriented values and beliefs ensured their survival and allowed them to thrive. Although YFNs encountered European and Russian colonizers in the 1700s, the discovery of gold in 1896 brought the most transformative impacts, imposing colonial and patriarchal systems, views, and practices. These deeply affected YFN traditional ways of life, disconnecting people from their lands and food sources, and creating significant barriers to the continuity of their culture and languages.

Acting on concerns of YFNs at being displaced from their lands and having their inherent rights eroded, in 1902, Hunde-aelth (Chief Jim Boss) of the Ta'an Kwäch'än, urged the Crown to settle a land claim with YFNs (McClellan & Birckel, 1987, p. 99). His plea was dismissed, and it was not until the early 1960s that YFNs began to mobilize again. This mobilization included producing the landmark document *Together Today For Our Children Tomorrow* in 1973, which laid out a case for the negotiation of a modern treaty recognizing First Nation rights and title in the Yukon. In 1993, the *Umbrella Final Agreement* (UFA) was signed, becoming the framework for negotiating individual Final and Self-Government Agreements for each YFN. Between 1993 and 2005, 11 of the 14 YFNs signed Final and Self-Government Agreements. These modern treaties are entrenched in s.35 of the Constitution and recognize First Nation governments as having extensive legislative powers and authorities paramount to territorial legislation. The Self-Government Agreements set out arrangements for YFNs to govern their internal affairs and assume responsibility and control over decision-making that affects their citizens, communities, and traditional territories.

Three YFNs are still governed under the *Indian Act* through the federal department of Crown-Indigenous Relations and Northern Affairs Canada. These three nations, the Liard First Nation, Ross River Dena Council, and White River First Nation, are currently participating in *Recognition of Rights* discussion tables with the Crown to advance the recognition of First Nation self-determination and protection of their rights.

In 2001, the Government of Canada transferred responsibility for lands, forests, water, and minerals in the territory to YG through the *Northern Affairs Program Devolution Transfer Agreement*. In 2003, a revised *Yukon Act* came into effect, granting province-like powers to the territorial government. This Act delegated to YG the primary responsibility for services such as health and social services, education, and land and resource management until such time as there was successor legislation developed that recognized the authorities set out in the Final and Self-Government Agreements (Crown-Indigenous Relations and Northern Affairs Canada, 2013).

# Jurisdictional responsibility for health care and emergency response

Jurisdictional responsibility for health care in Canada is divided between federal, provincial, and territorial governments. The federal government plays a critical role in allocating health-care funding to the provinces and territories under the Canada Health Transfer Program. The provincial and territorial governments have jurisdiction over the administration and operation of health-care services, but they must follow certain criteria and conditions laid out federally under the *Health Care Act*. Where things differ is regarding health-care services for Indigenous peoples (First Nations, Inuit and Métis), which are generally shared between provincial/territorial governments and the federal government (Weller, 1990), and in some cases with Indigenous governments. Across Canada, provincial and territorial governments typically provide health services to First Nations

living in urban centres and off reserves, while the federal government funds on-reserve services and non-insured health benefits (Bruce, 2016). The level of program funding for health benefits provided to First Nations, Inuit, and Métis creates a significant disparity in provision of services between them and provincial/territorial clients (Bruce, 2016).

The Yukon Government operates health centres or nursing stations to provide basic health-care support in most communities. It also provides a greater range of services at two community hospitals and at Whitehorse General Hospital. However, the provision of these services is not without challenges. Given the context of this research, it is important to note that a recent review of Yukon's health and social services found that YFNs are still experiencing racism in the health-care system and inadequate care (Health and Social Services Review Expert Panel, 2020). This finding reflects the legacies of a long and ongoing history of harmful relationships between medical institutions and Indigenous people across Canada; issues such as forced sterilization and unethical medical research involving Indigenous people have been well documented (Boyer & Bartlett, 2017; Leason, 2021; Mosby & Swidrovich, 2021).

The 11 self-governing YFNs can take over jurisdictional authority for the delivery of health and social services. To date, none have completely drawn down health services, though some have drawn down specific programs and services. For example, Kwanlin Dün First Nation provides basic health services in Whitehorse for its citizens through the Natsékhi Kù nursing clinic, the only First Nation-run health-care clinic in the territory. The majority of health services funding that comes to the Yukon from the federal government is currently allocated directly to YG. While Self-Government Agreements in the Yukon provide a mechanism for First Nations to enact health laws and provide health care, the level of funding provided through fiscal transfers is insufficient to provide these services at a comparable level to the territorial government (Abele et al., 2019).

The territorial government has primary responsibility for emergency response in the Yukon under CEMA (*Civil Emergency Measures Act*, 2002). CEMA is an outdated piece of territorial legislation that neglected to acknowledge the Yukon Final and Self-Government Agreements, despite the fact that seven YFN agreements were in place at the time that CEMA was created. Within CEMA, there are provisions for municipalities but no mention of First Nation governments. Self-governing YFNs have not yet drawn down responsibilities for emergency response, which would apply to settlement land<sup>3</sup>, but several YFNs have developed their own emergency plans.

## COVID-19 pandemic and Yukon First Nations responses

YG led the emergency response to the COVID-19 pandemic in the Yukon. When YG declared the state of emergency in March 2020, the Health Emergency Operations Center (HEOC) was created to coordinate and oversee the government's pandemic response. In Fall 2020, the YG COVID-19 Response Unit (CRU) was formed, which eventually replaced the HEOC. The CRU included staff seconded from across the government and held a range of responsibilities related to pandemic response and planning, including interjurisdictional relationships. They were responsible for communicating with federal, municipal, and First Nation governments regarding testing procedures, active cases, border control, immunization campaigns, and other pandemic-related

<sup>&</sup>lt;sup>3</sup> Settlement land refers to land that is owned and managed by a Yukon First Nation. On this land, the First Nation is the primary decision and lawmaker.

issues. YG updated their Pandemic Co-ordination Plan in March 2020 to provide details on their pandemic-related preparedness, decision-making, and actions.

In March 2020, YFN Chiefs identified the need for a coordinated approach to pandemic response and communications, leading to the creation of a new initiative under the Council of Yukon First Nations (CYFN) called the YFN COVID Response Team. This team was made up of staff from YFN governments, non-governmental organizations, and independent contractors. There were also political representatives who participated in the YFN COVID Response caucus calls, including YFN Chiefs and Executive Directors, and YG Ministers and Deputy Ministers. The COVID Response Team was intended to be nimble and responsive to the direction of YFN Leadership, which was provided through the caucus calls. This collaboration led to the development of the YFN COVID Communications Working Group, made up of communications experts and those tasked with COVID-19 coordination from various Yukon First Nation governments. This working group developed new channels of communication to reach YFN citizens. These included an information hub on the CYFN website and a social media presence on Facebook, YouTube, Twitter, and Instagram.

# Yukon's COVID-19 pandemic phases

Yukon First Nations COVID Response

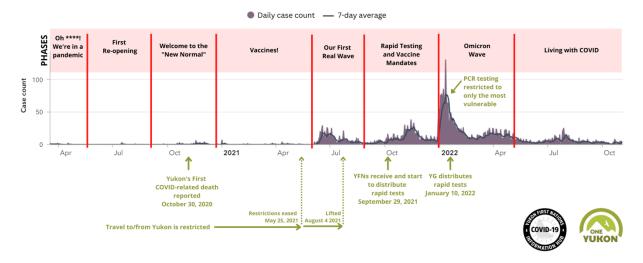


Figure 2: Timeline of pandemic phases in the Yukon based on key events marking shifts in public policy and emergency response.

YFN Leadership advocated for an abundance of caution to protect Yukoners, knowing that colonization and historic traumas have left First Nations people more vulnerable to the COVID-19 pandemic. During the Yukon's "First Real Wave" in June/July 2021 (Figure 2), it became clear that barriers such as systemic racism in the health-care system prevented a number of YFN citizens from accessing testing. This meant it was difficult to assess the level of transmission and accurate number of active and total cases in a given community. In August 2021, data communicated by YG confirmed what the YFN COVID Response Team suspected, that Indigenous Yukoners were disproportionately affected by the pandemic. While approximately 22% of Yukon's population identify as Indigenous, they accounted for 56% of Yukon's cases, 63% of hospitalizations, 56% of

medevacs, and 50% of deaths related to COVID-19 (Government of Yukon COVID Response Unit, personal communication, April 9, 2021).

There were multiple organizing bodies at the heart of the COVID-19 pandemic response in the Yukon, including one providing a coordinated approach for YFNs (the YFN COVID Response Team). Relationships between these organizations and individual territorial, federal, and First Nation governments were complex, leading to multiple tensions and frustrations, and highlighting significant inequities and barriers. However, there were also opportunities for relationships to evolve in new, collaborative directions. The research described below aimed to further explore these complexities, with the goal of using the COVID-19 response to elucidate broader lessons about interjurisdictional dynamics involving Indigenous and non-Indigenous authorities in emergency response.

#### **Methods**

#### **Approach**

The research project was designed to respond to needs identified by YFN Leadership and the YFN COVID Response Team. The project was hosted and administered by CYFN, a non-profit society in the Yukon dedicated to working for YFNs in advancing their rights, title, and interests. CYFN worked with a team of Yukon-based researchers with experience working alongside First Nation communities to design and implement the project. Math'ieya Alatini is a member of the Kluane First Nation and worked throughout the pandemic for CYFN and YFNs as a member of the YFN COVID Response Team. Kari Johnston is a community member in Haines Junction where she coordinated COVID-19 initiatives for Champagne and Aishihik First Nations and was the Communications Lead for the YFN COVID Response Team. Alison Perrin, Rhiannon Klein, and Kiri Staples are academic researchers who have extensive experience working with YFNs. Kristeen McTavish has a background in health research and works on data governance and related initiatives for CYFN.

The goal of this project was to understand the perspectives of YFN governments<sup>4</sup> and organizations, as well as other governments in the Yukon, on interjurisdictional dynamics during the COVID-19 pandemic response. The World Health Organization's Intra-Action Review (IAR) process was employed to support participants in reflecting on lessons learned from the COVID-19 response (World Health Organization, 2021). The aim of an IAR is for stakeholders to identify current best practices, gaps, and lessons learned, and propose corrective measures and actions to improve and strengthen the response (Mayigane et al., 2020; World Health Organization, 2021). IARs can be used to explore questions related to communication, resources, operational procedures, strategic planning, and long-term resiliency (Greiner et al., 2021; Hoang et al., 2022). IARs bring together small groups of people within an area of expertise – in this case, pandemic governance or operations in the Yukon context – and can be adapted to be conducted with individuals when necessary (World Health Organization, 2021).

<sup>&</sup>lt;sup>4</sup> The term "YFN government" is used throughout the remainder of the paper to refer to the governing authorities/bodies of all 14 YFNs, regardless of whether they have signed Self-Government Agreements.

#### Data collection and analysis

IARs were the primary means of data collection, and a total of 23 IARs were conducted over Zoom and recorded. There were 36 unique participants who were recruited by email and phone. Participants were identified based on their role within a YFN government, YG, municipality, or an intergovernmental working group. Two participants took part in two separate IARs, representing different roles in each. This duplication is reflected in the breakdown of participants by group (Table 1).

**Table 1:** Number of participants by organization type and role

Participant Group	Number of Participants
YFN Government Leaders	9
(Chiefs, Deputy Chiefs or Councillors)	
YFN Government Employees	15
YFN Working Group Members	8
YG Leaders (inclusive of the Office of the CMOH)	4
Municipal Government or Association of Yukon Communities Representatives	2

IARs are similar to a semi-structured interview or focus group, with the facilitator asking unscripted follow-up questions for clarification as required. The research team created a timeline of key events and pandemic phases (Figure 2) based on publicly available documents including press releases and media articles and informed by the experiences of the YFN COVID Response Team. This timeline was used during the IARs as a visual aid to jog participants' memories. When reviewing each distinct phase of the pandemic timeline, participants were asked short prompting questions related to the pandemic response and interjurisdictional dynamics. Informed consent was recorded at the beginning of each IAR, and participants were given the choice when they reviewed their quotes to have their name attached or to remain confidential.

The IAR transcripts were automatically generated using Otter.ai software and shared with participants along with a summary report. The transcripts were coded in NVivo using a coding framework based on existing themes in the literature and emergent themes identified during the IARs. The coding framework and data analysis were both done collaboratively, ensuring that any preconceived ideas "earned" their way into the analysis, per Charmaz's (2006, 2014) approach to grounded theory. While future analysis will involve a second round of coding to add more detailed themes, the results below come from a preliminary analysis based on the first round of coding. The

contextual information (e.g., press releases, media articles, etc.) gathered to prepare the timeline used during the IARs (Figure 2) was also used during the analysis to connect personal experiences with pandemic events.

#### Results

In this preliminary analysis of the IAR data, we focused on the topics of collaboration, communication, and relationships between YFN governments and YG, and identified three broad themes. These themes highlight important challenges and lessons learned from the Yukon experience of interjurisdictional relationships throughout the pandemic.

# Yukon First Nation self-determination in emergency planning

A common theme that arose from this study was the need for YFN self-determination<sup>5</sup> in emergency planning. Participants articulated the need for self-determination as an important element of considering a First Nation lens when it comes to emergency planning and response, in particular for a pandemic. When planning the COVID-19 vaccine rollout, for example, participants raised concern that YG had not considered the historical context and related trauma of medical interventions and colonial policies in relation to First Nations in the Yukon. These experiences have resulted in a long history of distrust of the medical system and government. One YFN employee explained:

[As] a community that has faced so much trauma and has so many different challenges with the territorial government ... there's one thing that I've learned from the Elders and council is the feeling amongst community members that we are alone and we have to get through this on our own, no one is coming to help – that is the starting point in [our community] – there is an element of fear and mistrust. So, anyone coming to help needs to know this is the starting point.

Participants discussed the importance of First Nations determining how their ways of knowing, doing, and being can guide effective and relevant emergency planning, response, and communication approaches for YFN communities. When a First Nation lens is applied to emergency planning and communication, historical context is considered, and cultural values and traditions can be at the forefront of planning, policies, and response. As an example, several respondents identified that the vaccine rollout was most effective when the First Nation and local community played the lead role in organizing the logistics and communications.

Throughout the pandemic, YFN Leadership identified opportunities to use the strengths within their nations to their benefit. As an example, Champagne and Aishihik First Nations Chief Steve Smith stressed the importance of "Dän K'e", which translates to "Our Way". He noted that

<sup>&</sup>lt;sup>5</sup> Self-determination has been defined in a few ways. It can broadly be thought of as, "the right of a people to decide how it wants to relate to a majoritarian population" (Imai, 2008, p. 10). The right to self-determination is enshrined in Article 3 of the United Nations Declaration on the Rights of Indigenous peoples (UNDRIP), which states: "Indigenous peoples have the right to self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development" (United Nations General Assembly, 2007, p. 4). However, it can also be understood outside of a rights-based approach. For example, Corntassel (2008) emphasizes the self-determination of Indigenous peoples as a process that must consider the interconnections between critical features, such as environment, well-being, natural resources, sustainability, cultural practices, and future generations. In this context, "indigenous self-determination can be rearticulated as part of a sustainable, community-based process rather than solely as narrowly constructed political or legal entitlements" (Corntassel & Bryce, 2012, p. 53).

Champagne and Aishihik First Nations' citizens have unique characteristics, "and we can exploit those characteristics in a way that will enable our people to respond to emergencies and everything else and actually how our people respond to emergencies." An example of this is a YFN approach to communication which focuses on trust, accountability, and open communication. Many participants mentioned YG's lack of effective communication compared with their expectation that "when we call upon 'Our Way' to communicate to us, what is very important for us is to listen, decipher and hear, and taking the time to talk things through" (Chief Smith).

Participants brought attention to the lack of recognition in CEMA of the Self-Government Agreements and the self-determination of non-signatory YFNs. As noted by a YFN Leader,

We're now starting to really see the challenges and gaps of CEMA. We're trying to go into this as partners but we're starting to get marginalized a bit. It was systemic racism and injustice that was being incredibly perpetuated. We are an order of government. Not a third order and not just another stakeholder.

Participants discussed the lack of consultation by YG on key initiatives, as exemplified by YG's immunization program that was implemented without approval from YFN Leadership, and without incorporating YFN advice on when and how to bring vaccines to their communities. Notably, participants expressed that unilateral decision-making by YG was not as much of an issue early in the pandemic, when decisions were time-pressured and sometimes had to be taken quickly. However, concerns related to unilateral decision-making did emerge in later phases, when decisions could have been anticipated and better planned in the time available (e.g., vaccine delivery and reopening of borders).

## Critical challenges faced by rural and First Nation communities in emergency response

An important theme that arose from the IARs was the urban-rural divide that exists in the Yukon, where 43% of the rural population is Indigenous. Participants described how rural experiences of pandemic-related challenges and needs, particularly for rural First Nation communities, often contrasted with those of Whitehorse. Some participants stressed that the voices of rural Yukoners and the institutions that represent them were not reflected in some pandemic policies, regulations and decisions being made by YG. In addition, we heard concerns from many participants that rural communities often felt they were left on their own without the support or resources they needed: "... we needed to have messaging that was suitable in the communities, that was relevant for the communities rather than blanket statements and blanket solutions across the territory" (working group member). This was reflected in decisions to relax measures such as travel and mask mandates, despite concerns communicated by YFNs (CBC News, 2021). While the territorial government was loosening restrictions, some communities responded by putting up checkpoints, restricting access to communities, and keeping their government offices closed, at their own expense.

Lack of access to data was a hindrance for YFN governments in being responsive to their communities' needs and acting for their citizens. As noted by a YFN employee, "[we] requested several times to have [nation] specific data, and they just blankly said that they could not do that." The small population size of rural Yukon communities posed a barrier as YG did not want to release community-specific data or exposure notices because they thought it would be too easy to identify individuals who had tested positive. They did eventually share data on community

vaccination rates but did not separate First Nation data from non-First Nation, and the information was not provided in time to inform vaccination messaging. One YFN Leader stressed how impactful the lack of access to data was on decision-making: "It's important for us to make our decisions. Overall, I think [we] did a good job ... of managing the pandemic, but we did it with one eye closed. We didn't have the proper statistics and data to back us up." The YFN COVID Response Team tracked and shared data as much as possible, supporting YFNs to respond to increased risk or active cases and safeguard their communities by moving to remote work, issuing travel advisories, and distributing resources like cleaning supplies and food to support people when isolating.

## Lessons for future pandemic planning and public health strategies

The Yukon pandemic experience provides lessons on interjurisdictional governance for both the territory and other regions. Participants noted how relationships between YFNs and other governments and organizations were critical in providing the capacity and information necessary to respond and make informed decisions throughout the pandemic. Several participants spoke to the positive relationship that existed between YFNs and YG going into the pandemic, stating how reassuring it was to feel that they could all come to the table as true partners. However, the majority of YFN participants also spoke to a breakdown in the relationship between YG and YFNs that occurred as the pandemic progressed: "Yukon government started reducing their relationship with Yukon First Nations in terms of a collaborative process for rolling out mandates, and the Yukon Government did not consult with Yukon First Nations in terms of developing a state of emergency" (YFN Leader). This breakdown in the relationship resulted in mistrust and created significant barriers to the pandemic response at the local level.

Participants highlighted the importance of relationships at the community level, including strengthened partnerships among YFNs, as well as with municipal governments. Though CYFN plays a role in convening all YFNs to discuss shared issues and opportunities, and present a shared voice when appropriate, participants said that the pandemic brought forward a particularly concerted effort and commitment to partnership and collaboration. As one YFN Leader asserted: "we've all been, to a Nation, very unequivocally together on the fact that our whole process for this has been about the protection of our people and the protection of our young ones." This collaborative partnership allowed YFN Leadership to develop a coordinated pandemic response and strengthened their position in discussions with YG.

Numerous participants identified communications with YG as one of the major challenges throughout the pandemic. This included timing of communications (e.g., not providing enough time to respond or prepare), lack of communications (e.g., releasing information to the public without consulting or informing YFNs), and content (e.g., not using plain language). As noted by a YFN employee,

there was huge frustration I think across the board from First Nations with the lack of information flow with regards to cases and communities... [I]t was very, very tightly controlled, and as a result, it did not allow First Nations to have the information, the data, the knowledge that they needed to appropriately respond; to respond with the smallest possible footprint.

Yet, when there was a consistent and sustainable approach to communication and consultation, information flow between YG, YFN governments, and municipal leadership supported better decision-making. Participants cited the YFN COVID Communications Working Group, which included all 14 YFNs, as a positive example of effective communications. It was a critical body that supported communication and collaboration between First Nations and created a much-needed bridge with YG. This was accomplished through both operational and leadership calls between YFNs, and with YG and the CMOH, providing avenues for information sharing and consultation. A member of this working group noted that "having those relationships and meetings that happened on a recurring basis helped give structure and helped with good communication.... There was a feeling of two-way communication and listening on both ends and incorporating feedback into responses."

Participants also identified lessons learned regarding tensions over boundaries of jurisdictional authority. These tensions were exemplified by issues surrounding borders and the freedom to travel during the pandemic. While many were worried about travel for recreation and tourism, for some YFNs the closure of borders with BC and Alaska restricted their citizens' ability to see family, access traditional lands, or access certain services. YFNs worked with YG to find solutions to improve cross-border travel for citizens. Concerned about protecting their communities, a few YFNs enacted their own community checkpoints, which brought up jurisdictional questions over who would fund these efforts and who had authority to impose and enforce travel restrictions. While community checkpoints became a touchpoint issue, they provided an avenue for sharing information with community members and visitors and were a demonstration of successful leadership by YFNs.

#### Discussion

As noted previously, reflections from the COVID-19 pandemic response are still forthcoming, including on questions related to interjurisdictional dynamics involving Indigenous governments and organizations. Several broad themes are apparent, however, including issues related to Indigenous self-determination and jurisdiction, the specific needs of rural and Indigenous communities, nation-to-nation relationships, and legacies of ongoing and historic inequities. Indigenous-led approaches to the pandemic response in Canada have also been documented. The preliminary results from our research contribute to these findings in important ways. They confirm the key gaps and priorities that have been identified by others, provide context-specific elaboration and examples, and identify additional opportunities to be explored.

#### Collaboration, communication, and the importance of relationships

A well-established and fundamental component of effective emergency planning and response is good interjurisdictional collaboration and communication (Asfaw et al., 2019; Genest et al., 2021; NCCAH, 2016). While collaboration and communication can take many different forms, there is a basic need for multiple jurisdictions to work with one another and talk to one another during an emergency such as the COVID-19 pandemic. Indeed, this assumption is at the core of our research. The results of the IARs demonstrate this point, specifically in the context of COVID-19. Although participants did identify phases where collaboration and communication between YFNs and YG was strong, there was a general sense that further and ongoing collaboration was required. The research pointed to the centrality of relationships within collaboration and communication - and,

more broadly, effective decision-making - including relationships between YG and YFNs, and community-level relationships.

The results also identified what good communication looks like and how interjurisdictional collaboration can be supported. For example, the ongoing phone calls between YFNs, YG, and the CMOH that took place throughout the pandemic demonstrated the value of working across jurisdictions. When communication was frequent and collaborative, YFNs were better positioned to make decisions quickly to protect the health and wellbeing of their communities. The IARs demonstrated the importance of having a YFN central body (e.g., the YFN COVID Response Team) that can coordinate amongst YFNs, liaise with other governments and organizations, and be flexible and responsive to communities' needs. However, the ad hoc nature of these collaborative processes raises questions about their longevity post-pandemic. While the context of future emergency responses (e.g., to a fire or flood) will likely be distinct from that of the pandemic, there is value in formalizing or codifying collaborative arrangements where applicable, in particular when a state of emergency is declared (NCCAH, 2016). A codified relationship may help ensure the ongoing sustainability of the relationship between YFNs and YG when it comes to emergency planning and response, and give direction on how YFNs will be integrated into policy and decisionmaking in future states of emergency. It may also provide direction on how information should flow between YFN governments and with YG, to aid future coordination and collaboration.

# Respect Indigenous self-determination and a nation-to-nation relationship

The preliminary results of our study align with work elsewhere that emphasizes the importance of intergovernmental collaborations founded on respect for Indigenous self-determination, and recognition of a nation-to-nation relationship when collaborating with Indigenous Peoples (Craft et al., 2020; McNeill & Topping, 2018; Montesanti et al., 2019). The IARs allowed YFNs to reflect on how they see respect for YFN self-determination being operationalized in the pandemic response. This acknowledgement of self-determination would include actions such as applying a First Nation lens to emergency response (e.g., taking a collective approach to health), recognizing YFN authority in territorial legislation, and ensuring YFN control over resources and data. YFNs felt YG's respect for self-determination was lacking; for example, when decisions about or impacting YFN communities were made unilaterally by YG, especially during phases of the pandemic where decisions were not as time sensitive. This situation was exacerbated by the failure of legislation such as CEMA to acknowledge YFN authorities, resulting in a significant gap in emergency governance. Finally, our results also highlight areas of opportunity for advancing selfdetermination. While some of these opportunities would require legislative change (e.g., updating CEMA), others may be pursued through policies or programs (e.g., communication strategies that apply a YFN lens to ways of being, knowing, and doing).

# Unique considerations and needs of rural and Yukon First Nation communities

Across Canada, the pandemic has highlighted the underlying inequities that impact emergency response effectiveness, and the need for responses that address the unique contexts and needs of Indigenous communities. This trend is not unique to emergency response but one that has been noted in health-care delivery in rural and Indigenous communities across the country as well (Lavoie, 2013; Reading & Wien, 2009; Richmond & Cook, 2016; Young & Chatwood, 2011). YFNs and rural communities in the Yukon are at a disproportionate risk when it comes to emergencies, particularly health emergencies. Compounding this problem are concerns highlighted by

participants that their voices were not being heard and that legislation, policy, and key decisions are being developed through an urban-centered lens without awareness of the inequities this creates for rural Yukoners. The results from this research highlighted key inequities between urban and predominantly rural First Nation communities that arose during the pandemic including limited services, capacities, and access to community-specific data.

This research emphasized the need for community-scale data as an important component of addressing the unique considerations and needs of rural and YFN communities. Participants noted that access to data could have supported local leaders to make informed decisions about how to keep communities safe (e.g., when to enforce lockdowns or other measures). The importance of access to data was underscored by the vaccination program. Once YG started to share community-level vaccination data, it was possible for YFNs to identify where communication efforts should be targeted to increase uptake. In other words, having access to data allowed YFN Leadership to be responsive to the needs of their communities, rather than simply reacting to events and YG decisions. This example highlights the critical need for formal processes and agreements that safeguard data sovereignty for YFNs. Similar to the need for formalized communication processes, formalizing data-sharing agreements and processes would ensure there is a built-in mechanism for YFNs to access the critical data they need to make decisions in future emergencies.

Despite – or potentially in light of – these context-specific challenges, YFNs implemented several responses to the COVID-19 pandemic, many of which were seen in other regions as well (e.g., limiting access to communities and implementing rapid testing for community gatherings). Although our research did not reveal to what extent these interventions were followed, it did identify the potential for discord between competing authorities and their associated orders and legal systems. This became clear in other areas of Canada when visitors ignored checkpoints and requests to stay off First Nation reserve land, claiming that closures interfered with individual rights (Deer, 2020; Lisk, 2020). During the pandemic, some YFNs created their own emergency acts or called a state of emergency. While these were an effective means to communicate the real fear and concern in First Nation communities, they leave lingering questions about how jurisdictional overlap is managed when different governments call a state of emergency.

#### Implications for future research and policy

Several opportunities for further study were identified that could inform future policy and practice in Yukon emergency planning and management. Lessons learned about the importance of a consistent and stable approach to communications may be useful for future emergency responses. For example, in situations where an emergency affects a First Nation, a formal mechanism should be implemented to ensure immediate and ongoing communication between YG and YFN Leadership and, when appropriate, CYFN. Lessons learned from the experiences of the YFN COVID Response Team and YFN Communications Working Group also demonstrated the opportunity to explore a more formal structure to ensure YFN collaboration in health-care and emergency response.

Another critical concern in establishing pathways for YFN self-determination is to identify avenues for resolving conflicts between jurisdictions (e.g., checkpoints, enforcement, etc.). There is still an obligation to ensure that existing legislation, particularly CEMA, formally recognizes and supports YFN self-determination and jurisdiction within emergency response. Moreover, the pending reviews of CEMA and the *Public Health and Safety Act* provide an opportunity to respond to that

need. Part of that process may also include finding avenues to ensure YFN ways of knowing, being, and doing are at the forefront of emergency management.

Considering the specific challenges and needs of YFN communities within emergency response, there may be opportunities to support YFN data governance and health surveillance at the community level. There are opportunities to explore other health surveillance tools that can be used in the Yukon to support local decision-making (e.g., wastewater testing). There are also opportunities for YFNs to continue discussions on data governance and sharing with other data holders. Building on the opportunities identified through this research will require collaboration amongst YFNs, YG, and the federal government.

#### Conclusion

This study sought to prompt reflections on the interjurisdictional dynamics that were at play during the Yukon's COVID-19 response, centering YFN perspectives. Using an Intra-Action Review approach, the results from this work identified three key themes. First, it noted the importance of respecting Indigenous self-determination within the interjurisdictional response to the pandemic. The results showed that respect for self-determination can be operationalized in many ways, such as ensuring YFNs have the option and resources to apply a YFN lens to emergency response, ensuring other jurisdictions recognize Self-Government Agreements and other forms of self-determination in legislation and practice. Second, the research highlighted the specific challenges of rural and YFN communities, which were not always successfully navigated during the pandemic response. Nonetheless, we saw examples of YFN-led approaches to addressing community-specific challenges. Finally, important lessons for interjurisdictional emergency response were drawn from the Yukon's experience with COVID-19, including the importance of relationships, a consistent approach to communications, a centralized body for coordinating YFNs and communicating with other levels of government, and identifying potential sources of tension for situations where governments and their respective orders and legal systems come into conflict.

These results support initial findings from other jurisdictions in Canada, where similar experiences have been identified. Our results offer context-specific examples and highlight new areas of opportunity, revealing some of the critical governance challenges that arose in the Yukon during the COVID-19 pandemic. We have identified important lessons learned from the pandemic response, including barriers, opportunities, and innovative approaches, grounded in the experiences of YFN staff and Leadership. These insights may be useful for future policy and legislative efforts related to emergency and health-care response in the territory.

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