

*MEDIA RELEASE*

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**FOR IMMEDIATE RELEASE**

## **MATAWA ROAD-ACCESS FIRST NATIONS CALL FOR VACCINE INCLUSION AND PRIORITIZATION IN PHASE 1 OF ONTARIO'S VACCINATION PLAN AS COVID-19 OUTBREAKS BEGIN TO SOAR IN THEIR COMMUNITIES**

**Thunder Bay, ON:** Matawa First Nations from the road-access communities of Constance Lake, Aroland, Long Lake #58 and Ginoogaming First Nations have reached out by [letter](#) to the *COVID-19 Vaccine Distribution Task Force* (Task Force) chaired by retired General Rick Hillier to call for inclusion and prioritization in Phase 1 of Ontario's vaccination plan which, to-date, has excluded them.

They also demonstrated their readiness to assist in the administration of the Phase 1 Moderna Vaccine in their communities through the Matawa Health Co-operative (MHC) which has health staff consisting of 8 nurses and 1 physician. Since the start of the pandemic, the MHC have administered over 4,000 COVID-19 tests in the Matawa communities and in Thunder Bay. MHC is also currently undergoing health staff vaccination and training and obtaining infrastructure for vaccine storage and travel.

The Matawa First Nations from the road-access communities expressed frustration in being left out of Phase 1 roll-out initiatives such as "Operation Remote Immunity" (ORI) and have indicated to the Task Force that priority should also be placed in their communities where outbreaks are currently taking place and States of Emergencies are being called as a result. They say their communities cannot wait until Phase 1 is completed and need to be included in it. Through ORI, five remote Matawa First Nations will be receiving mass-community vaccinations in the month of February 2021. ORI plans to complete vaccinations in all remote First Nations in Ontario by April 30, 2021 using the Moderna vaccine. Matawa First Nations from the road-access communities are saying at the very least surplus vaccines from ORI should be earmarked for them.

To-date, the Matawa First Nations from the road-access communities have not had an opportunity to participate in provincial tables established to make decisions on vaccination roll-out which resulted in initiatives such as the ORI, including the *First Nation Vaccination Distribution Sub-Table* established by Greg Rickford, MPP for Kenora-Rainy River, Minister of Energy, Northern Development and Mines, and Minister of Indigenous Affairs.

They have indicated to the Task Force that some of the guiding principles and assumptions in decision matrixes that were used to prioritize remote First Nations in Phase 1 such as: risk of evacuation, quality of water, access to health services—ignore equally important challenges they are currently facing in their communities including: the need to protect elderly Indigenous language speakers where some communities are experiencing up to a 90% loss of language; lack of personnel and burn-out being experienced due to the communities' small size; an inability to sustain a long-term response; similar socio-economic conditions as remote First Nations; large high-risk population of individuals with mental health and addictions issues who are harder to track and treat; smaller and less specialized health care services; lack of broadband/interconnectivity preventing access to information and remote health services; less economic diversification and fear of crash of economic systems; and an inability to participate in local, regional and national environmental assessment processes that are taking place due to the not being able to congregate members to share information and obtain feedback.

The Matawa First Nations from the road-access communities have made a request to address the Task Force to further discuss the outbreaks currently taking place, their inability to address them and the unique challenges they are facing.

## QUOTES

“As First Nations where COVID-19 outbreaks are currently taking place, we are facing unique challenges and have socio-economic conditions similar to remote First Nations. We should be made a priority for COVID-19 vaccinations alongside remote First Nations in Ontario or at the very least, be prioritized to receive them shortly after the remote First Nations, prior to the larger Phase 2 vaccine roll-out.”

*Councillor Sheri Taylor, Ginoogaming First Nation*

“We are happy that remote First Nations have received specific dates for when they will be receiving the Moderna vaccine. Due to the urgency in our communities, we are calling for vaccination dates for our First Nations in the near future.”

*– Chief Dorothy Towedo, Aroland First Nation*

“The COVID-19 vaccine needs to go in arms now where outbreaks are happening. Our First Nations simply cannot be compared on a COVID-19 vaccination matrix to First Nations southern Ontario. We cannot wait for the spring or fall—we need them now.”

*— Chief Rick Allen, Constance Lake First Nation*

“Addressing the COVID-19 virus currently in our communities has been challenging and taxing on our personnel and community volunteers. Our communities are in a syndemic. We are not just dealing with the global virus but other epidemics that are contributing to our inability to contain the virus. We are trying almost everything and don’t see any other way to control it other than getting the vaccine immediately.”

*— Chief Judy Desmoulin, Long Lake #58 First Nation*

“The Matawa Health Co-operative been preparing to assist with administering the Pfizer, Moderna or other approved COVID-19 vaccine in our road-access Matawa First Nations. Already since the pandemic began our nurses safely administer 4,000 COVID-19 tests both in our communities and, in the city of Thunder Bay. With the health infrastructure and personnel in place—we will be ready to assist when a decision is made.”

*– Frances Wesley, Matawa Health Director Executive Director*

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