Reconciliation in Health Care

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I wish to acknowledge this land on which we now gather. For thousands of years it has been the traditional land of the Huron-Wendat, the Seneca, and most recently, the Mississaugas of the Credit River. Today, this meeting place is still the home to many Indigenous people from across Turtle Island and we are grateful to have the opportunity to work on this land.
Overview

- Introduction

- Key theoretical frameworks for reconciliation in research and practice:
  - Cultural safety
  - Trauma-informed care
  - Allyship
  - Anti-racist framework

- Conclusion and questions
• Introduction
• Self location
• Reflexivity
Cultural Safety

• How can we make our healthcare institutions safe spaces for Indigenous peoples?
Cultural Safety

“…health-care providers must take into consideration the social, political, linguistic, economic and spiritual realm in which their patient lives in order to communicate competently with him or her…”

(RCPSC, 2011)
Cultural Safety

- is based on understanding the power differentials inherent in health service delivery, the institutional discrimination, and the need to fix these inequities through education and system change;
Cultural Safety

- requires acknowledgement that we are all bearers of culture—there is self-reflection about one’s own attitudes, beliefs, assumptions, and values.  (IPAC, 2009)
Trauma-Informed Care

Increases the safety of care we deliver within our healthcare settings, by considering the possibility that each individual we engage with may have a traumatic history that we are unaware of.
Trauma-informed providers and organizations:

- Acknowledge the widespread impacts of trauma,

- Recognize the signs and symptoms of trauma in clients, and in staff and other providers

- Understand the variety of creative means that people can use to manage trauma (e.g., anger, avoidance, substance use)

- Recognize that people follow different pathways to healing.

- Respond by integrating knowledge about trauma into policies, procedures, practices and settings.

Trauma Toolkit, 2013
Principles of Trauma – Informed

- Acknowledgement – that trauma is pervasive
- Safety
- Trust
- Choice and Control
- Compassion
- Collaboration
- Strengths- based

Trauma Toolkit, 2013
Historical Trauma

- 1995, Maria Yellow Horse Brave Heart applied this idea of collective suffering, memory, and trauma to the historical trauma experienced by the Lakota, over the course of colonial conquest and attempts at assimilation.
Allyship

“imbued with the notion of cultivating, building and strengthening relationships between two differing individuals, groups or communities based on respectful, meaningful and beneficial interactions”

(Ashley Heaslip)
1. Are fully grounded in their own ancestral history and culture. Effective allies must sit in this knowledge with confidence and pride; otherwise the “wannabe syndrome” could merely undermine the Indigenous people’s efforts;

2. Are aware of their privileges and openly discuss them. This action will also serve to challenge larger oppressive power structures;

3. Reflect on and embrace their ignorance of the group’s oppression and always hold this ignorance in the forefront of their minds. Otherwise, a lack of awareness of their ignorance could merely perpetuate the Indigenous people’s oppression;

4. Are aware of and understand the larger oppressive power structures that serve to hold certain groups and people down. One way to do this is to draw parallels through critically reflecting on their own experiences with oppressive power structures. Reflecting on their subjectivity in this way, they ensure critical thought or what others call objectivity. In taking this approach, these parallels will serve to ensure that non-Indigenous allies are not perpetuating the oppression (Gehl).
Anti-Racist Framework

“How might we get to a position which recognises that to teach about race is not racist, but rather than pretending race doesn’t really structure health outcomes is?”

(Bond, 2017)
Anti-Racist Framework

- There are three overwhelming processes that can work in synergy to guide anti-racist practice:
  - **Seeing** the paths from stereotype to oppression;
  - **Understanding and connecting** paths of oppression to policy;
  - **Acting** for social change.

  (McGibbon and Etowa, 2009)
Conclusion

- How can the frameworks of cultural safety, trauma-informed care, allyship and anti-racist practice inform your research and clinical work?