

# Pursuing Cultural Safety: From Unearthing Bias to Realizing Reconciliation

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Fraser Health



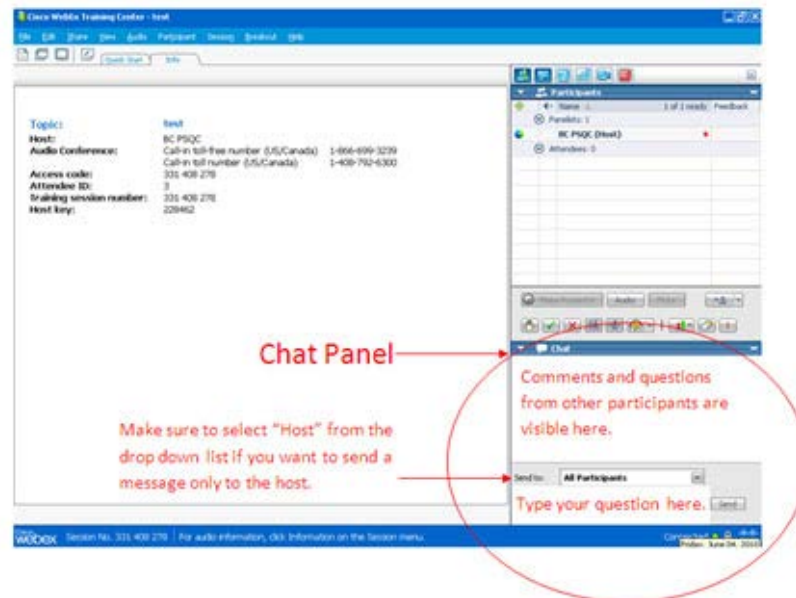
First Nations Health Authority  
Health through wellness



BC PATIENT SAFETY  
& QUALITY COUNCIL  
Working Together. Accelerating Improvement.

# WebEx: Chat Overview

- We invite you to introduce yourself in the chat panel.
- Let us know your name and where you are from!



# Session Recorded

- This session is being recorded.
- If you choose to remain anonymous, please type ANON before your question and it will be read out as such.



# Slides and Recording

- The link to the recording and slides will be distributed via e-mail.



# Twitter

- Hashtags:
  - #itstartswithme
  - #culturalhumility
- Twitter handles
  - @Fraserhealth



# Sensitive Subject Matter

- Due to the sensitive subject matter and stories shared during the webinar sessions participants may become triggered. Please ensure you have prepared a support system for yourself in advance in which you may have easy access to. This could mean an Elder, trusted mentor/family/friend, Counsellor and/or crisis contact number.
- If you need support please do not hesitate to call the toll free crisis line here in the province of BC (1-800-588-8717). Or if you prefer, have a number prepared in advance locally.



# Opening Prayer



# Pursuing Cultural Safety

## From Unearthing Bias to Realizing Reconciliation

**Dina Lambright**, Aboriginal Health Team Lead

**Carol Peters**, Aboriginal Health Liaison

**Vishal Jain**, Coordinator, Aboriginal Health Initiatives

### Aboriginal Health Services





# PHSA Indigenous Cultural Safety (ICS) Training

- The Fraser Health Authority has offered ICS training since April 2008.
- Since then, thousands of staff have gone through the training.



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# Staff Response to ICS Training

Staff who successfully completed the ICS training consistently requested a safe space to discuss their learning experiences and reactions to the curriculum.

- How to navigate emotionally charged reactions?
- How to assist staff who were experiencing ongoing or delayed reactions to the information given in the training session?



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# Cultural Safety Circle Session

- Fraser Health – Aboriginal Health began to brainstorm methods of addressing these recurring staff reactions.
- Circle Session launched in August 25, 2011.
- Collaborative endeavor with Fraser Health - Public Health.



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# The Talking Circle

- Sessions are conducted through a talking circle format
  - The circle has often been thought of as the principle symbol for understanding life's mysteries.
    - People looked out on the physical world through the eye, which is circular. The earth was round, so are the sun, moon and planets. The rising and setting of the sun followed a circular motion. The *seasons* formed a circle. Birds build their nests in circles. Animals marked their territories in circles.



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# Parameters of **The Talking Circle**

- Emphasis is on the personal and professional impact of the training on staff.
- Committing to the Principles of Inclusion, Respect, Confidentiality and Intentionality is essential.
- Successful completion of Indigenous Cultural Safety Training as a prerequisite.
- Each person has the right to speak their truth as it pertains to their journey of self-discovery.



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# Inside the Circle

Participants enter the room and sit in a circle.

Participants are provided with the ground rules

Open Session with prayer or drum song.

Engage in open discussion around the professional and personal impact of PHSA's ICS course.



FHA-111 aboriginal PPT template



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# Inside the Circle: Part 1

The participant passes an Eagle feather to the person on their left side.

This Person describes how the training has impacted them mentally, emotionally, physically or spiritually.

Once the eagle feather makes its way around the room, the facilitator summarizes the comments and highlights recurring themes.



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# Inside the Circle: Part 2

Participants are then requested to discuss systems-related questions they encounter in their workplace.

Part 2 allows for more fruitful discussion around how to practically incorporate the knowledge gained through the training into their daily lives.

Part 2 is also a space to discuss engaging with local First Nations communities, Aboriginal Agencies, and Aboriginal specific resources.



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# Inside the Circle: Part 3

The third and final part of the ICS debrief circles asks all participants to **select one word that expresses how they feel or what they have gained from their learning.**

Why select this exercise to close the circle?

The purpose is two-fold:

1. To encourage simple practices of self-reflection
2. To allow participants an opportunity to re-center themselves.



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# Outside **The Circle**

## 2016 Evaluation Survey Highlights:

**80%** of survey respondents agreed that the Post ICS debrief session supported them to deepen their understanding of the online ICS course.

**85%** of respondents feel more confident in working with Aboriginal clients.



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# Outside **The Circle: Feedback**

Participants are requested to fill out feedback forms. Common Themes include:

- Request for more information relating to Aboriginal health.
- Helped build empathy.
- Helpful to situate Aboriginal Health within the broader context of European-Aboriginal relations.
- Helpful too openly address stereotypes and misconceptions.



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# Outside **The Circle** - Feedback

Please share a key insight or what you liked about today's session?

- I enjoyed listening to varying perspectives from everyone in the circle
- A safe space to have an open discussion. I really enjoyed that we were able to speak our minds without being judged.
- I enjoyed hearing about everyone's experiences and felt very supported. It was helpful to know I was not the only one that was feeling this way after the training.



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# Key Concerns Encountered

- Capacity Concerns
- Backlash Management
- Concerns over qualified facilitators
- Support for emotionally charged environment



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# Call to Action

Unfortunately, many health care providers have encountered Aboriginal people only when they are in the most difficult situations and are most vulnerable. As a result, negative stereotypes have become firm attitudes. Others, who have actually worked in Aboriginal communities, may have had the opportunity to know many healthy and happy Aboriginal people so will bring a somewhat different perspective.

Levin and Herbert, 2004



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# Call to Action

We call upon all health care providers to reach out and find opportunities to actively engage with Aboriginal communities in your area. Move towards inquiry-based learning through community integration.



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*Kw'as ho:y (Halq'eméylem)*

*Huy ch q'u (hen'q'emi'ne'm)*

*Kwukwstéyp (Nlaka'pamux)*

*HísWKe (Senæoten)*

*Thank you!*



# BEST OF BOTH WORLDS: DIMENSIONS OF QUALITY, INDIGENOUS PERSPECTIVES

0830-1700 | \$125

**MARCH 1, 2017**





Webinar: Noon – 1:00

**APRIL 5, 2017**



# Survey

