Responding to Anti-Indigenous Racism in the Health Care System

Yvette Ringham Cowan
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Interacting in WebEx

Webex Tools:
1. Pointer ➔
2. Raise Hand 🧠
3. Yes ✓ / No ✗
4. Text tool
5. Chat

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WebEx Audio

Look for the phone icon beside your name:

- Enables you to easily mute/unmute line
- Promotes more effective discussion

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WebEx Audio

If there is NO phone icon beside your name:
1. Stay on WebEx. Hang up telephone
2. Pop-up window will appear
   – If not, click on “Audio” button
3. Pop-up window displays the dial-in details
4. If possible, do NOT use the “Use Computer Headset” option

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WebEx Chat

• We invite you to introduce yourself in the chat panel (all participants)
• Let us know your name and where you are from!

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We Are Recording!

• This session is being recorded
Slides and Recording

• The link to the recording and slides will be distributed via e-mail to all participants and posted on the FNHA and Council sites.
Twitter

• Hashtags:
  – #culturalhumility
  – #itstartswithme

• Twitter Handles:
  – @FNHA
  – @BCPSQC
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.

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Opening Prayer
Thank You
First Nations Health Directors Association
Responding to Anti-Indigenous Racism in the Health Care System

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Introductions

Yvette Ringham Cowan

Laurie Harding
Responding to Anti-Indigenous Racism in the Health Care System

October 4, 2017

Cultural Safety & Humility Webinar Action Series
First Nations Health Authority & BC Patient Safety Quality Council

Laurie Harding & Yvette Ringham-Cowan
Integration Leads, San’yas Indigenous Cultural Safety Training
Indigenous Health, Provincial Health Services Authority

Cheryl Ward
Interim Director, Indigenous Health
Provincial Health Services Authority
All meetings are transformations, what brings you here?

Kwakwaka’wakw

An Honouring and a Remembering. D. Reusch. 2014
Personal collection
Intentions

- Setting the Context
- Common Stereotypes
- Harmful Behaviours
- Where Harms Occur
- Indigenous Cultural Safety
- What We Can Do
An Agenda for Change

Royal Commission on Aboriginal People 1996

Transformative Change Accord: First Nations Health Plan 2005

Truth and Reconciliation Commission: Calls to Action 2015

BC Declaration of Commitment: Cultural Safety & Humility 2015
The San’yas Journey

• Trained 40,000 people in Canada
• Grounded in critical anti-racism and transformational learning pedagogy
• Goals are to increase awareness, enhance knowledge & develop skills
Training Format

- Online
- Interactive
- Facilitated
- 8-hours

- Self-paced
- Interdisciplinary learning pods
- Indigenous-only cohorts
Stories of Harmful Care
How did we get here?

Henry, F; Tator, C. 2010. The Colour of Democracy: Racism in Canadian Society

Pedagogy

- Critical Anti-racism
- Adult Learning Principles
- Social Justice
- On-line Modular Facilitated Interactive
- Decolonizing and Indigenous-specific
- Colonial Narratives Stereotyping
- Structural Violence Racism

On-line Modular Facilitated Interactive

San'yas Indigenous Cultural Safety Training
Provincial Health Services Authority in BC
Investigating Stereotypes & Harm

- Mixed methods study
- Data pull in 2014
- Revealed 3800 examples of stereotyping
- Coded 380 comments
- Identified 44 different stereotypes
What We Found
Top 10 Stereotypes

Alcoholic
Drug addict
Get or want free stuff
Promiscuous
Not Smart
Abuse the system
Don’t cooperate
Lazy
Can't get over it
Bad Parents

%
Pathway to Harm

Colonial Ideology (worldview)

Stereotype (beliefs)

Prejudice (attitudes)

Discrimination (behaviours)

“They are inferior to us”

“They just need to get over the past”

“They are more prone to disease”

“They are slow learners”

“They should get special treatment?”

“They’re all drunks”

Patronizing Pity

Anger

Resentment

Hostility

Disgust

Contempt

Invisible/Ignored Labelling

Violence

Aggression

Maltreatment

Avoidance

Denial of Care

Misdiagnosis

Adapted from Jackson (2012). The Psychology of Prejudice.
Harmful Behaviours

1. Less effort
2. Misdiagnosis
3. Improper procedure
4. No medication/no treatment
5. Condition minimized
6. Delay/denial of service
7. Withholding pain medication

Hot Spots

- Emergency Rooms
- Maternal care
- Pediatrics
- Acute Care/ICU/Surgery
- Mental Health and Addictions
- Home & Community Care
What can we do?
What is Cultural Safety?

- PROCESS not an event
- COLONIAL CONTEXT
- OUTCOME
A Spectrum of Approaches

Cultural Awareness

Cultural Sensitivity

Cultural Competency

Cultural Humility

Cultural Safety

Equitable Health Care

Knowledge Self-Awareness Skills

Interpersonal and Structural Interventions

Equitable & Culturally Safe Providers and Organizations

‘the Other’

‘the What’

‘the How’

‘the Goal’
A Key Challenge

• “[Colonial] policies have had a devastating impact on Native peoples but the fallout has been explained away as stemming from “cultural differences”.

(Laroque. E. 1989)
A Trajectory of Learning

- Increasing Knowledge
  - History - Colonization
  - Context
  - Diversity
  - Health inequities

- Enhancing Self-Awareness
  - Reflexivity
  - Stereotyping
  - Discrimination
  - Work culture

- Developing Skills
  - Communication
  - Mnemonics
  - Practical application

- Post Training
  - Enhanced courses
  - Communities of practice
  - Train the Trainer
  - Coaching

Integration
- Nation Context
  - Workshops
  - Cultural Protocols
- Debriefs
- Tailoring
The Impact of San’yas

• Analysis of 66 physician Post-Activity Reflective Exercise
• Completed 3-6 months post training
• Continuing professional development credits
• Self-reflection on how the training has impacted practice
Response to Incidents

- ‘Unfortunately’
- ‘so sad…’
- ‘happens all the time’
- ‘I can’t do anything because…’

PHSA Indigenous Cultural Safety Framework

A Culturally Safe Organization

- Administration & Governance
- Human Resources, Training & Staff Developm’t
- Equitable Access & Service Delivery
- Policy, Procedures, Risk & Legal
- Communications & Community Relations
- Planning, Monitoring, Evaluation & Research
Calls to Action

- Speak up: talk about racism
- Name stereotyping
- Gather data
- Examine why & where harms occur
- Reflect on practice
- Reflect on workplace culture
Moving Forward

“We can’t say goodbye to a problem until we have first said hello”

Gerry Oleman
For more information about San’yas:
www.sanyas.ca

Watch the National Indigenous Cultural Safety Learning Series webinars at
www.icscollaborative.com
Reflections
Questions/Discussion
Closing Prayer
NEXT SESSION

NOV 1, 2017

12:00 – 1:00 PM

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