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INDIGENOUS WAYS OF KNOWING AND HEALTHCARE

INDIGENOUS HEALTHCARE EDUCATION AND PRACTICE: A Community-Led and Community-Informed Collaborative Initiative



Please note:

This Companion Guide is a resource created to complement the online modules.

This online module was developed by the Office of Professional Development and Educational Scholarship (Queen's Health Sciences) and the Northern Ontario School of Medicine (NOSM) to address the Calls to Action set forth by the Truth and Reconciliation Commission. This project is made possible with funding by the Government of Ontario and through eCampusOntario's support of the Virtual Learning Strategy. To learn more about the Virtual Learning Strategy visit the <u>eCampus Ontario website</u> (*click to view*).



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INDIGENOUS HEALTHCARE EDUCATION AND PRACTICE:

A Community-Led and Community-Informed Collaborative Initiative

MODULE 03 COMPANION GUIDE



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MODULE INTRODUCTION

Welcome to the learning module titled "Indigenous Ways of Knowing and Healthcare." This module is part of the seven-module series titled "Indigenous Healthcare Education and Practice: A Community-Led and Community-Informed Collaborative Initiative." Throughout the modules in this series you will be connecting the 2015 Truth and Reconciliation Commission (T R C) of Canada Calls to Action (C T A) report, a report designed to advance the process of Canadian reconciliation and redress the legacy of residential schools, to healthcare and education practice.¹

For your interest, explore the Truth and Reconciliation Commission of Canada Calls to Action report.

Truth and Reconciliation Commission of Canada: Calls to Action

Calls to Action (C T As) addressed in this module include: C T A 10, C T A 18, C T A 19, C T A 20, C T A 21, C T A 22, C T A 23, C T A 24, and C T A 62.

The modules in this series can be used to increase your awareness and knowledge of Indigenous healthcare education and practice. You will learn about historical perspectives of Indigenous Peoples in Canada and their implications for health outcomes, biases, racism, and discrimination in healthcare, Indigenous ways of knowing, healthcare rights and services, culturally safe healthcare, and intersections between education and healthcare. This module will specifically introduce some practical strategies for implementing Indigenous ways of knowing into your future practice.

Note that these modules should be viewed as an introduction to Indigenous healthcare education and practice. It is important to continue to reflect and engage with this material over time, as our understanding and perspectives of this material are influenced by broader social and contextual factors. Please also recognize that decisions in regard to policy and legislation are constantly changing so it is important to keep up to date on current events. Gaining and understanding Indigenous healthcare education and practice is a lifelong journey that involves a willingness to learn, practice, and self-reflect. As you work through the modules of this series, please also acknowledge that the term health encompasses physical, spiritual, emotional, and mental wellness.

Content Warning: The content covered by this module may be difficult to process due to the challenging nature of the material. This may particularly occur if you have lived-experiences in relation to this material or are learning about these realities for the first time. We ask all learners to access supports if necessary.

Page Link:

https://www2.gov.bc.ca/assets/gov/british-columbians-our-governments/indigenous-people/aboriginalpeoples-documents/calls to action english2.pdf

End of Module Introduction









A Community-Led and Community-Informed Collaborative Initiative

MODULE 03 COMPANION GUIDE

INDIGENOUS WAYS OF KNOWING AND HEALTHCARE

Indigenous ways of knowing, practicing, and being are imperative to the well-being of Indigenous Peoples. This means that it must be the duty of our healthcare system to respectfully and effectively support Indigenous knowledge systems. In this module, you will learn about the importance of language, culture, and land in Indigenous Peoples' health and well-being. You will also learn about traditional medicine and healing practices, and how these can be integrated with Western medicine practices.

After completing this module, you will be able to:

- Describe languages that are part of your local Indigenous communities, including how they • surface within education and how they are referenced.
- Articulate the connection between language and land. •
- Explain the purpose of an Aboriginal Healing Centre. •
- Examine how Indigenous health centres are defined across the country. ٠
- Describe the role and importance of an Elder, Knowledge Keeper, and/or Indigenous Rights Holder.
- Recognize what Indigenous knowledge means for people in the healthcare field. •

The Importance and Influence of Language, Culture, and Land on Health Outcomes

Language and oral communication play an essential role in both guality healthcare and Indigenous cultures. This means that healthcare education needs to equip future healthcare professionals with respect, knowledge, inclusive practices, and effective tools to meet the diverse language needs of Indigenous patients.

Language is the primary form of communication between people; it allows us to share ideas, feelings, and perspectives. Language is also thought to shape the way that people view the world. This makes different languages valuable because of the unique perspectives and ways of understanding they provide for their speakers.³ Furthermore, language is closely intertwined with culture. **Culture** is the core backbone of any community, allowing for cultural norms, stories, and ways of knowing to be transmitted from person to person.⁴

Language is also closely connected to land. The concept of a connection between land and language is common and integral to Indigenous cultures across Turtle Island and around the world. The connection between language and land aligns with wholistic worldviews which emphasize interconnectedness.

"For Aboriginal [P]eoples, country [land] is much more than a place. Rock, tree, river, hill, animal, human - all were formed of the same substance by the Ancestors who continue to live in land, water, sky. Country is filled with relations speaking language and following Law, no matter whether the shape of that relation is human. rock, crow, wattle. Country is loved, needed, and cared for, and country loves, needs, and cares for her people in turn. Country is family, culture, identity. Country is self."

-Ambelin Kwaymullina⁵











The Effect of Removing Language on Culture and Land

You have learned that language, culture, and land are closely interconnected. In Canada, colonial institutions such as Indian Residential Schools stripped traditional languages away from Indigenous children. In doing so, these institutions also disconnected children from their families and culture.⁶ Today, many Indigenous languages are threatened. In response, Indigenous communities across North America are displaying resilience by working towards the revitalization of their traditional languages.⁷ As part of traditional language revitalization, it is important to consider the land you live on and the languages that have been and continue to be spoken on it.

An excellent starting resource to explore the Indigenous languages spoken in your area is **Native Land Digital**. The Native Land Digital map shows the regions where languages are spoken, as well as the nations that speak them.

Growing Your Knowledge: Language and Land

Take a moment to complete the activity and reflect on your experiences with Indigenous language(s).

Activity: Find the location of your home on the Native Land Digital map. Which Indigenous languages are spoken in your area? Have you encountered these languages in your education? Reflect on why they have or have not been discussed.

Visit the Native Land Digital map.

We strive to map Indigenous territories, treaties, and languages across the world in a way that goes beyond colonial ways of thinking in order to better represent how Indigenous people want to see themselves.

Note: Notice how the language regions depicted in the map are not limited by national/provincial boundaries created by the Canadian government. This is because Indigenous nations have existed and continue to exist irrespective of other nations.

As a future healthcare professional, there are many things you can do to ensure you are respectfully engaging with patients and their language preferences as well as help with the acceptance and revitalization of Indigenous languages. Some practical strategies for achieving these goals include:

- Don't make the assumption that every Indigenous person speaks a certain language based on region alone.
- Advocate for space within your facility to have signs written in regionally relevant languages and help encourage others to use and recognize the languages.
- Make space within your facility for Indigenous symbols or art to create a welcoming environment in which one feels valued and seen.
- Learn about the Indigenous cultures you serve. Familiarize yourself with the Indigenous history of your territory (land) and some basics of the Indigenous languages.⁸ For example, learn a few words (clinical or greetings) in regionally relevant languages.
- Advocate for your healthcare centres to provide opportunities for better communication with Indigenous patients (e.g., Indigenous navigator, translation services, including



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family/community participation, literature and resources in Indigenous languages or in pictorial form).

• Understand and create your personalized Land Acknowledgement for your territory and advocate for Indigenous involvement in land development projects in your area.

Language, Culture, Land, and Well-being

Across Indigenous cultures, the relationship between land, language, and culture is interdependent and has a direct and cumulative effect on well-being.⁹ Land holds a central role in defining oneself and wellbeing as it is "Aboriginal languages [that] describe[d] intimately the land and culture of the people that spoke them." ¹⁰ This interconnectivity is apparent in the Social Determinants of Indigenous Health (S D O I H). All determinants can impact each other but there are particularly close associations between determinants of the same level (proximal, intermediate, distant). Both language (part of Cultural Continuity) and land (part of Environmental Stewardship) are intermediate S D O I H.¹¹

Alt Text: Diagram of the S D O I H. There are five concentric circles with four overall themes outside the circles. The innermost circle includes children, families, and communities. The second circle includes employment income, social support networks, family violence, and food security. The third circle includes gender, physical environments, education, and healthy behaviours. The fourth circle includes health systems, location, education systems, early childhood, environmental stewardship, justice, social services, racism and social exclusion, and community infrastructure. The outermost circle includes self determination, land resources, residential schools, colonization, and poverty. Finally the four overall themes around the diagram include self determination; land; language, culture, and heritage; and colonial interfaces.



The SDOHI.¹²







Note: The dispossession of land and language are both part of the assimilatory practices implemented by colonizing forces. These losses have negative impacts on multiple aspects of Indigenous well-being from depression to diabetes.¹⁸

Dr. Jason Pennington is a member of the HW Nation and a community general surgeon at the Scarborough Health Network.

Watch the video of Dr. Jason Pennington discuss the connections between language, culture, land, and health (2:46).

TRCCTAL Language, Culture, and Land

Start of Video Transcript

In Indigenous worldview and concepts around wellness, all things are related and certain things are more interrelated than others, but definitely there is a great correlation between language, culture, and wellness, and really understanding that relationship is so important in caring for Indigenous patients. And even Indigenous languages, and in any language really, does carry many cultural concepts and specificities and anachronisms and little nuances and these things are very sad whenever we lose any of them because we do know that for Indigenous patients it's been studied and published that cultural continuity, a knowledge of one's language and one's culture is actually protective against depression and suicide. They saw that in Indigenous Nations in B.C. where communities that had more connectivity were protected against these negative mental health outcomes. So having a knowledge of one's language allows one to better understand their culture and their connection to the land. Really the three things that are interconnected there are language, culture, and land. And understanding how your patient is coming to you and the importance of how all of these things interrelate is really important in how they understand their own wellness; that really, for Indigenous people, it's linked to our culture, the land around us, and how everything is related and situated in that.

So it's more than the actual words of the language but how they're expressed and how they relate us to all of Creation and what that brings us in a sense of fullness and emotional and spiritual well-being, which to us is just as important as our physical and mental health. So understanding that these concepts are all interrelated for Indigenous wellness and that if the environment isn't healthy and the language isn't healthy then we aren't healthy as well. And that those things being healthy are just as important to us as physical and mental health.

End of Video Transcript

Just as language and connection to land play an essential role in the overall well-being of Indigenous Peoples, Indigenous ways of knowing and traditional practices are crucial components of quality healthcare. As part of your role as a future healthcare professional, it is important that you familiarize yourself with all types of traditional medicine and healing practices. Indigenous knowledge systems are living entities and not relics of the past. Today, these knowledge systems are being applied to help Indigenous communities and Indigenous Peoples recover from intergenerational pain and suffering endured during the colonization process.¹³ Future policy development and implementation should aim to support Indigenous Peoples and communities when they decide to learn about, maintain, and build







upon the knowledge amassed by their ancestors.¹³ Throughout the rest of this module, you will learn about traditional medicine and healing practices, the role of Elders', Institutional Knowledge Keepers', and/or Indigenous Rights Holders' important knowledge, Aboriginal healing centres and health centres, and the importance of Indigenous knowledge in the healthcare field.

Traditional Medicine and Traditional Healing

Traditional medicine and healing are very important components of an Indigenous worldview. They encompass a wholistic view of well-being (physical, mental, emotional, and spiritual) and include the individual, family, clan, and community as well as people, animals, plants, and environment. From an Indigenous worldview, all of these parts are related and impact each other when it comes to well-being. With this broad view of well-being and health there is often a focus on preventative medicine and an emphasis placed on quality of life.

Alt Text: Medicine Wheel model depicting the gifts of each of the four directions. The North quadrant is represented by the colour white and the terms balance/respect, mental, cultural, epistemological, movement, "do it", and language. The East quadrant is represented by the colour red and the terms wholeness, spiritual, cultural, local knowledge, worldview, vision, "see it", ceremony, stories, and teachings. The South quadrant is represented by the colour yellow and the terms inter-relationship, physical, ecological, time, "relate to it", and land. The West quadrant is represented by the colour black and the terms inter-connectedness, emotional, personal, generational, reason, "figure it out", heart, and head.



Traditional medicine and healing can be described with a Medicine Wheel model. The provided Medicine Wheel diagram reviews the gifts of each of the directions as informed by Cree Elder Michael Thrasher.²⁰

Traditional healing and well-being practices take many forms that include, but are not limited to, ceremony (praying, smudging, healing/sharing circle, sweatlodge, shaking tent, fasting, etc.); singing,







drumming, dancing; and medicinal remedies (plant-based or sometimes animal-based) edibles, elixirs, and/or salves. Traditional medicine and healing practices are practiced by experts who often specialize in various aspects of healing after undergoing years or decades of apprenticeship (e.g., leading ceremonies, medicinal plants, etc.). An expert in medicinal plants for example must learn how to:

- Identify the medicine
- Understand when and how each plant should be harvested to ensure its harvesting is • sustainable
- Determine which part of the plant should be used for specific purpose
- Prepare the medicine in distinct ways to treat specific conditions •

The Indian Act, and assimilatory practices like residential schools that evolved from it, vilified Indigenous healing practices labelling them as evil and witchcraft. They were discouraged, banned, and even made illegal. The long term impacts of these assimilatory practices are still present in current Canadian society and work must be done to give an honest recount of Indigenous concepts of healing and health. The impacts have been even more marked on Indigenous Peoples who are just now in the process of repatriating their languages, cultures, and healing practices; traditional healing practices can be an important part of Indigenous Peoples' healing journey.

The Independent and Combination Use of Traditional and Western Medicine

The generations of colonial and assimilatory practices have had differing impacts, in nature and extent, on Indigenous individuals, families, and communities. These intergenerational effects have led to Indigenous patients who refuse to seek western medical attention to those that will not incorporate traditional medical practices into their care plan. Generally, within any Indigenous population there is a certain percentage of people that want to incorporate traditional healing practices into some aspect of their care plan.

Incorporating Indigenous healing practices can take any number of forms from employing traditional activities and diet into preventative medicine plans (e.g., for diabetes, obesity, etc.) to participating in ceremony to providing traditional medicines. One or more of these or other activities may be implemented either as an adjunct or in lieu of western medical options. The combinations and permutations are numerous and it takes open unbiased communication and a good therapeutic relationship with your Indigenous patients to come up with a management plan that meets all of their well-being needs.

Note: Traditional medicine and healing practices are not likely to interfere with western medical management. In fact, only a very limited number of plant-based medicines may have a significant enough physiologic impact as to make medical or surgical intervention dangerous.

Practical strategies are immensely important to consider when working to appropriately, effectively, and synergistically combine both traditional and western health practices.

Explore a short list of ways that you can work towards decolonizing and Indigenizing your future practice.





- Educate: Become knowledgeable of the traditional health practices of your Indigenous patients through patient-centered care and forms of professional development (e.g., mentoring initiatives, shadowing experts).
- Encourage: Encourage involvement of family/community and traditional practices when • Indigenous patients want these supports (to the extent and in the manner they want them)
- Advocate: Advocate for policies that support smudging and other Indigenous healing practices at your healthcare facility
- Acknowledge: Acknowledge and respectfully engage with Indigenous knowledge and ways of knowing as being valuable to wellness.

Indigenous Healing Centres

Performing a keyword search for Indigenous/Aboriginal healing centres often brings up healing lodges. While healing lodges vary in the programming and services provided, not all Aboriginal healing centres are called lodges.

Indigenous/Aboriginal healing centres are safe places where one can access residential and day programs using traditional Indigenous healing and contemporary therapeutic interventions to:

- Reduce the impacts of, or trauma arising from, sexual assault; physical, mental, and emotional • abuse; and/or family instability.
- Promote and foster the spiritual, emotional, mental, and physical well-being of Indigenous Peoples and families.
- Foster the healing, rebuilding, and strengthening of individual and family relationships. •

Healing centres found throughout Canada may be organized and funded by the Government of Canada or they may be independently run.

Correctional Service Canada (C S C) operates formal healing centres in two ways: the centre may be run solely by C S C or it may be managed by partner or community organizations. In the second case, Indigenous community partner organizations sign an agreement with C S C. In both cases, C S C provides the funding. As of January 2022, ten healing centres across Canada were funded and/or operated by C S C.

Alt Text: Photo of a large fire pit with a tent and buildings in the background











Photo of the Waseskun Healing Centre.¹⁴

For example, the Waseskun Healing Centre, incorporated in 1988, is a non-profit Indigenous organization affiliated with Correctional Service of Canada (C S C) and Correctional Service of Quebec (C S Q). The goal of Waseskun Healing Centre is to facilitate the wholistic healing of Indigenous offenders who have committed crimes and violent acts, often related to drug and alcohol abuse. Oftentimes these individuals have been transferred to Waseskun as residents in order to foster their successful re--entry into their families, communities, and nations.¹⁴

For your interest, explore what is happening at the Waseskun Healing Centre now and read about the various lessons learned throughout the organization's lifetime.

Waseskun Healing Centre

The History, Lessons And Observations Of Waseskun Healing Center, A Successful Therapeutic Healing Community

Indigenous Health Centres Across the Country

Healing centres have evolved from places of healing to programs of healing in Indigenous-led health services. These programs of healing are commonly referred to as Indigenous health centres and include organizations such as First Nations community health offices or clinics, Indigenous health access centres, and/or mainstream clinics, hospitals, and community organizations.

Alt Text: Image of the waiting room in the Lu'ma Medical Centre in Vancouver. There are four chairs, a table, and a totem pole in a corner.









Lu'ma Medical Centre provides culturally safe healthcare to urban Indigenous Peoples living in Vancouver, BC.¹⁵

A variety of health centres, set up both on and off reserve across the country, provide for the unique healthcare needs of First Nations, Inuit, Métis, and Urban Indigenous Peoples. Overall, their overarching mandates are quite eloquently summarized by the Alliance for Healthier Communities:

"Aboriginal Health Access Centres (AHACs) are Aboriginal community-led health care organizations. They provide a combination of traditional healing, primary care, cultural programs, health promotion programs, community development initiatives, and social support services to First Nations, Métis and Inuit communities."

- Alliance for Healthier Communities

Apply your Knowledge: Indigenous Health Centres

Take a moment to pause and reflect on the question. Then view several considerations.

Question 1: Why do you think Indigenous health centres are both beneficial and necessary?

Provide a Safe Space Indigenous Peoples need to have spaces where they feel safe to enter and receive care. Due to the history of colonial institutions, such as residential schools and Indian hospitals, many Indigenous patients experience personal and intergenerational trauma when faced with the prospect of seeking care in Canada's public healthcare system. Up to 10% of Indigenous Peoples refuse to seek care from this system.

Provide Care Free From Bias and Racism The shortcomings of the healthcare system are not just historic. Unfortunately, Indigenous patients continue to be mistreated in the current healthcare system, leading to morbidity and mortality. The cases of Brian Sinclair and Joyce Echaquan are just a couple examples of the inequities in the Canadian healthcare system for Indigenous patients. Indigenous health centres are designed to help mitigate the colonial model and systemic racism in order to provide









care from a culturally safe, trauma-informed, and strength-based approach. As a future healthcare professional, it is important that you advocate to ensure your organization provides this culturally safe, trauma-informed, strength-based care.

Provide Indigenous Healing Practices While advances are being made in healthcare institutions around "smudging policies" and recognizing Indigenous healing practices, there is still work to be done on the acceptance, let alone encouragement, of the incorporation of Indigenous healing practices into the healing journey of Indigenous patients who so wish (as per T R C Call to Action 22).

It is important to foster an awareness of both Indigenous healing centres and other Indigenous patient supports in your region such as Indigenous Navigators, social service providers, Friendship Centres, and locations with a link to Traditional Knowledge Keepers.

Value of Elders, Institutional Knowledge Keepers, and/or Indigenous Rights Holders

As described by the Northern Ontario School of Medicine (NOSM), in some Indigenous communities, Elders reach their Elder status through recognition by their community as an Indigenous person with a certain special set of qualities or gifts. Elders use these gifts in their efforts to maintain the community's health wholistically; this healing is done in part through working with other community members.¹⁶ Finding ways to incorporate Elders, Knowledge Keepers, and/or Indigenous Rights Holders into patient care (under the caveat that the patient has asked for this) may be a critical step for delivering quality healthcare.

Review two pieces of supporting evidence for incorporating Elders, Knowledge Keepers, and/or Indigenous Rights Holders.

Positive Impact on Health Outcomes

Encounters with Indigenous Elders as part of routine primary care were associated with a clinically and statistically significant reduction in depressive symptoms and suicide risk among Indigenous patients.¹⁹ Emergency department use decreased, which might reduce crisis-oriented mental healthcare costs.¹⁹ Further expansion and evaluation of the role of Indigenous Elders as part of routine primary care is warranted.19

Fosters Collaborative and Community-Based Approach

Williams and Lucas, in their 2019 summary of Indigenous housing and case management, provide a good example of Elder collaboration in research. Their report strived to convey an understanding of culturally appropriate approaches to Indigenous housing that were also the most effective.¹⁷ It involved coordinating three sessions of Elder and Knowledge Keeper Circles for the purpose of incorporating Elders' culturally relevant and appropriate recommendations on potential future housing program models and their development.¹⁷

Note: True engagement of First Nations, Métis, and Inuit people is demonstrated by one's willingness to learn and understand their traditional values, beliefs, and practices.

Importance of Indigenous Knowledge in the Healthcare Field







As you should now appreciate, there are multiple knowledges and approaches to health and well-being. Your future patients may be engaging in Indigenous practices so it is essential that you have at least a general understanding of those foundational practices such as traditional medicines and healing practices. This is important to avoid pan-Indigenous language and other implications. By introducing Indigenous knowledge into healthcare education, there is an opportunity to counter the continued marginalization of Indigenous Peoples and their experiences within dominant healthcare discourses.

Healthcare professionals can do many things to ensure that Indigenous knowledge is valued, leveraged, supported, and encouraged within an individual's healthcare plan.

Click the tabs to learn some of the ways that healthcare professionals support Indigenous knowledge.

Understanding Biases

As a healthcare professional, you need to understand your own biases and open your mind to traditional ways of living including ceremonies, food, and medicines and the positive impact these ways of life have on health.

Provide Time

With colonization, healthcare is not as person-centric. Healthcare is task-based and curative-focused rather than holistic. You need to take the time to allow Indigenous Peoples to implement their knowledge into the care you are providing whether that be in the community, outpatient, or acute setting. As a healthcare professional you must advocate for safe staff-to-patient ratios that will allow time of discovery, knowledge sharing, and implementation of traditions.

Advocate for Equitable Access

Healthcare professionals also need to advocate for equitable access to healthcare and resources that allow Indigenous Peoples to thrive. There are vast amounts of knowledge as each Indigenous community/nation has their own way of living, culture, and identity unique from other Indigenous nations.

Create Safe and Accommodating Spaces

Healthcare professionals need to create spaces for patients to express their healthcare wants and needs and create spaces for knowledge sharing to be implemented into care practices on an individual basis. Healthcare professionals must have environments where ceremonies can take place and they must work with patients to ensure they have access to the goods they need to carry out their ceremonies, practices, and traditions.

Ensure a Partnership Approach

Healthcare professionals also need to ensure a partnership approach and accept that they are not the experts in this knowledge. Patients often look to their healthcare professionals for knowledge and expertise, however healthcare professionals need to share and receive knowledge as equals in their







healthcare team. In order to engage in these discussions, it is important to develop relationships based on mutual trust and respect.

Watch the video of Dr. Jason Pennington, member of the HW Nation and community general surgeon at the Scarborough Health Network, share recommendations for making a more positive and welcoming space for patients (2:48).

T R C C T A: Creating a Welcoming Space

Start of Video Transcript

So not only should our clinical encounters be culturally safe but our spaces have to be safe. I think it's much nicer to have an environment that's less institutionalized and looks less institutional, has some warmth to it, makes people feel invited, right?

I think it's also -- because people see themselves in that space that it doesn't seem so institutional or run people back to bad experiences in these institutional schools or "Indian hospitals" or places where they might have had more negative experiences or family have had negative experiences in the past. But also when you come in and you recognize yourself so, from an Indigenous perspective, having Indigenous art on the walls from different various artists and having welcoming in multiple languages shows that you're inviting to people from various different cultures and different areas.

And then to me like people, you know, for a positive space I think even though it's not an Pan-Indigenous, a sticker or a sign of a Medicine Wheel being up in your area does show, you know, your recognition of Indigenous rights and Indigenous Peoples and concepts of wellness around the Medicine Wheel and the same way as putting up the rainbow triangle in your space shows that you're an LGBTQ2S ally or hopefully in a positive space for those people to express and be themselves. So, you want all of your patients coming into your area to feel that they are welcomed.

So like my art here from an Indigenous artist, to having some, you know, softer colours, less institutional aspects of things I think especially makes people who are suffering from intergenerational trauma and PTSD feel much more comfortable. I have several acquaintances, friends, who suffer from this and I have not infrequently had to actually accompany these people to clinic visits, to hospital visits because they get so anxious going into these environments.

So if we can make them much more relaxing and comfortable for people just to enter and have -- show examples of how we are open to people who are not exactly the same as ourselves, anything we can do, makes that better.

End of Video Transcript

Page Links:

https://native-land.ca/

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End of Indigenous Ways of Knowing and Healthcare





MODULE CONCLUSION

In this module, you began by learning about how land and language contribute to definitions of Indigenous Peoples' culture, self, and well-being. Furthermore, you learned that your knowledge of land and language inform and impact your understanding of the other. You recognized that land and language are both intermediate S D O I H, thereby emphasizing how dispossession of land and language impact each other and health/well-being negatively.

You have learned to appreciate that the vilification and banning of traditional healing practices has had lasting negative impacts on Indigenous Peoples and Canadian society. The impacts of intergenerational trauma on Indigenous patients and communities has led to differing levels of involvement of the multitude of traditional healing practices by Indigenous patients. You learned that traditional medicine and healing practices, often described with a Medicine Wheel model, are broad, varied, and wholistic where aspects of well-being are interrelated. You learned that traditional healers are experts and carry extensive important Indigenous knowledge. Traditional healing practices include the patient, extended family, and community and are very unlikely to adversely impact western medical interventions.

Finally, you learned that Indigenous patients should be supported to allow the incorporation of Indigenous healing practices in their well-being journey. You were provided with some strategies to help you accomplish this in your future practice.

You have completed one of the seven learning modules within the series "Indigenous Healthcare Education and Practice: A Community-Led and Community-Informed Collaborative Initiative." The modules within this series aim to increase your awareness and knowledge of Indigenous healthcare education and practice. These modules explore how Indigenous Peoples' health outcomes have been negatively impacted by colonial policies and practices, and how the health and well-being of Indigenous Peoples can be improved through the inclusion of traditional healing practices and by addressing biases, racism, and discrimination within the healthcare system.

Acknowledgements

This online module was developed by the Office of Professional Development and Educational Scholarship (Queen's Health Sciences) and the Northern Ontario School of Medicine (NOSM) to address the Calls to Action set forth by the Truth and Reconciliation Commission. This project is made possible with funding by the Government of Ontario and through eCampusOntario's support of the Virtual Learning Strategy. To learn more about the Virtual Learning Strategy visit the eCampus Ontario website.

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Content and Image References

- 1. Truth and Reconciliation Commission of Canada. (2015). Truth and Reconciliation Commission of Canada: Calls to Action. Retrieved from, https://www2.gov.bc.ca/assets/gov/britishcolumbians-our-governments/indigenous-people/aboriginal-peoplesdocuments/calls to action english2.pdf
- 2. Dault, M. (2021). Empowerment through revitalization of Indigenous language and education. Queen's University. Retrieved December 2021, from: https://www.gueensu.ca/research/features/empowerment-through-revitalization-indigenouslanguage-and-education
- 3. Boroditsky, L. (2011). How Language Shapes Thought. Scientific American, 304(2), 62–65.
- 4. Jackson, J. (2014). The Routledge handbook of language and intercultural communication. London: Routledge.
- 5. Kwaymullina, A. (May 01, 2005). Seeing the light : Aboriginal law, learning and sustainable living in country. Indigenous Law Bulletin, 6, 11, 12-15.
- 6. Truth and Reconciliation Commission of Canada,, & McGill-Queen's University Press,. (2016). Canada's residential schools: The final report of the Truth and Reconciliation Commission of Canada.
- 7. Gomashie, G. A. (January 01, 2019). Kanien'keha/Mohawk Indigenous Language Revitalisation Efforts in Canada. Mcgill Journal of Education, 54, 1, 151-171.
- 8. Brown, H. J., McPherson, G., Peterson, R., Newman, V., & Cranmer, B. (January 01, 2012). Our land, our language: connecting dispossession and health equity in an indigenous context. The Canadian Journal of Nursing Research = Revue Canadienne De Recherche En Sciences Infirmieres, 44, 2, 44-63.
- 9. Biddle, N., & Swee, H. (September 01, 2012). The Relationship between Wellbeing and Indigenous Land, Language and Culture in Australia. Australian Geographer, 43, 3, 215-232.
- 10. Helping you learn and teach about Aboriginal culture—Creative Spirits. (n.d.). Retrieved January 10, 2022, from https://www.creativespirits.info/
- 11. Reading, C., & Wien, F. (2013). Health inequalities and social determinants of Aboriginal Peoples' Health. National Collaborative Centre for Aboriginal Health. Retrieved from,



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https://www.nccih.ca/495/Health_inequalities_and_the_social_determinants_of_Aboriginal_peo ples health .nccah?id=46

- 12. Adapted from Greenwood, M. L., & de Leeuw, S. N. (2012). Social determinants of health and the future well-being of Aboriginal children in Canada. Paediatrics & Child Health, 17(7), 381-384.
- 13. Julian, A. R., & Jonathan, D. (October 21, 2011). Traditional Indigenous Approaches to Healing and the modern welfare of Traditional Knowledge, Spirituality and Lands: A critical reflection on practices and policies taken from the Canadian Indigenous Example. The International Indigenous Policy Journal, 2, 4.).
- 14. Waseskun Healing Center (n.d.) Retrieved December 2021, from: https://waseskun.net/
- 15. Lu'ma Native Housing Society (n.d.). Lu'ma Medical Centre: Providing Culturally Safe Healthcare to Families. Retrieved December 2021, from: http://lnhs.ca/luma-medical-centre/
- 16. Elders and Knowledge Holders | NOSM. (n.d.). Retrieved January 10, 2022, from https://www.nosm.ca/our-community/indigenous-medical-education/resources-andreports/indigenous-elders-and-knowledge-keepers/
- 17. Lucas, K., & Williams, N. (2019). Elders & Knowledge Keeper Circles: A Summary of Indigenous Housing & Case Management Engagement Sessions. The Elizabeth Fry Society, The Indigenous Health, Housing and Homelessness Collaboration. Retrieved from https://www.homelesshub.ca/sites/default/files/attachments-fr/050-201-Elders%20Documentv4%20%282%29.pdf
- 18. King, M., Smith, A., & Gracey, M. (2009). Indigenous health part 2: the underlying causes of the health gap. The Lancet, 374(9683), 76-85. Retrieved from https://www.sciencedirect.com/science/article/abs/pii/S0140673609608278
- 19. Tu, D., Hadjipavlou, G., Dehoney, J., Price, E.R., Dusdal, C., Browne, A.J., & Varcoe, C. (2019). Partnering with Indigenous Elders in primary care improves mental health outcomes of innercity Indigenous patients: Prospective cohort study. Canadian Family Physician, 65(4), 274-281. Retrieved from https://www.cfp.ca/content/65/4/274
- 20. Bell, N. (2014). Teaching by the Medicine Wheel. Retrieved from https://www.edcan.ca/articles/teaching-by-the-medicine-wheel/

End of Module Conclusion



