Indigenous health training is a journey, not a check-box
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Learning to provide safe, culturally sensitive health care for Indigenous patients is a journey, not a check box.

This is according to Lloy Wylie, Ph.D., and Stephanie McConkey, whose research has shown systemic change is a nuanced journey that will require long-term commitment from individuals and organizations.

In recent years there has been an expansion of cultural training programs for health-care professionals. The aim of these programs is to ensure health-care providers have knowledge in Indigenous history, residential schools and Indigenous people's experiences in health.

McConkey, a Ph.D. Candidate at University of Toronto who is mixed-heritage and Oneida Nation from Six Nations of the Grand River, said their research indicated that most health-care providers are unaware of Indigenous history and the distinct cultural-social needs of local communities they serve.

"Some health-care providers even admitted to their negative stereotypes against Indigenous peoples and how it impacts the care they provide," she said. "Due to this type of behavior and experiences of discrimination, Indigenous peoples are reluctant to seek health care when needed out of fear of being mistreated and receiving poor quality care."

So, while this knowledge of Indigenous history is crucial, the research team said it needs to go further than just filling knowledge gaps.

"The training that we have now gives people some good background in terms of the history and colonial relations with Indigenous people," said Wylie, professor in pathology and laboratory medicine at the Schulich School of Medicine & Dentistry, who teaches in the Master of Public Health Program. "And while that's a great start to developing the competencies needed to provide good health care for Indigenous people, it's not the solution. It's just a lot more complicated than that."

The research involved semi-structured interviews with a range of health-care providers. Participants included Indigenous people working in the health system, who also brought their own lived experience as patients or family supporters, providing unique insights on aspirations and challenges related to Indigenous health-care needs.

By asking about what the research participants want from the health-care system, the research team hoped to focus on recommendations on how to move the work forward, rather than just the shortcomings. They include questions such as, "What could ensure the provision of culturally sensitive services for Indigenous people?”.

"Indigenous cultural safety training needs to be more than a one-time check a box and you're done; it should be an iterative process throughout a health-care provider's career that includes multiple
training modalities that are integrated in early stages of a health-care professional's education and training," said McConkey.

A major finding from the research was the need for more tangible, practical strategies that health-care providers can integrate into their practices.

This could mean availability of resources in emergency rooms that provide information for practitioners on how to coordinate with local Indigenous health-care agencies, like the Southwest Ontario Aboriginal Health Access Centre (SOAHAC) and First Nations Health Directors, Wylie and her team said. These interprofessional collaborations among health-care teams can create better transition supports for Indigenous patients. "Part of the ongoing journey is looking at how we can continue to advance this work in each of our specific communities," Wylie explained. "The strategies need to be focused on each community's specific needs, not based on assumptions that we've made about what we think their needs will be."

The research highlighted the need for a multifaceted approach to training, but also that transformative change requires a commitment from organizations to change policies and practices.

Wylie and her team are working with local hospitals and health-care teams to make real change. There is now an Indigenous Healing Space at London Health Sciences Centre's Victoria Hospital, and a newly established Indigenous Health Circle, which includes Wylie, Schulich Medicine & Dentistry faculty members Dr. Rebekah Jacques and Rob Sibbald, as well as the core staff of the Indigenous patient experience team. Together they are looking for ways to use that space to support Indigenous patients and provide wrap-around care, and to support transformative change within the many units across the hospital.

Recognizing that each unit has its own policies, procedures and priorities for health care, Wylie is also hoping to designate champions in these Departments to determine how each unit can make their practice more culturally safe in order to

"We need to be focusing on our own institutions and figuring out what we need to do to allow Indigenous patients to feel safe expressing themselves and their culture, and making sure we're meeting the needs of Indigenous patients," Wylie said. "So, yes, knowing the history is important, and we also need to know how to make practical change."


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