



First Nations Health Authority  
Health through wellness

# Leading a Framework for Cultural Safety & Humility for First Nations in British Columbia

Presented by Dr. Evan Adams  
Chief Medical Officer,  
First Nations Health Authority  
February 25, 2016



## Presentation Overview

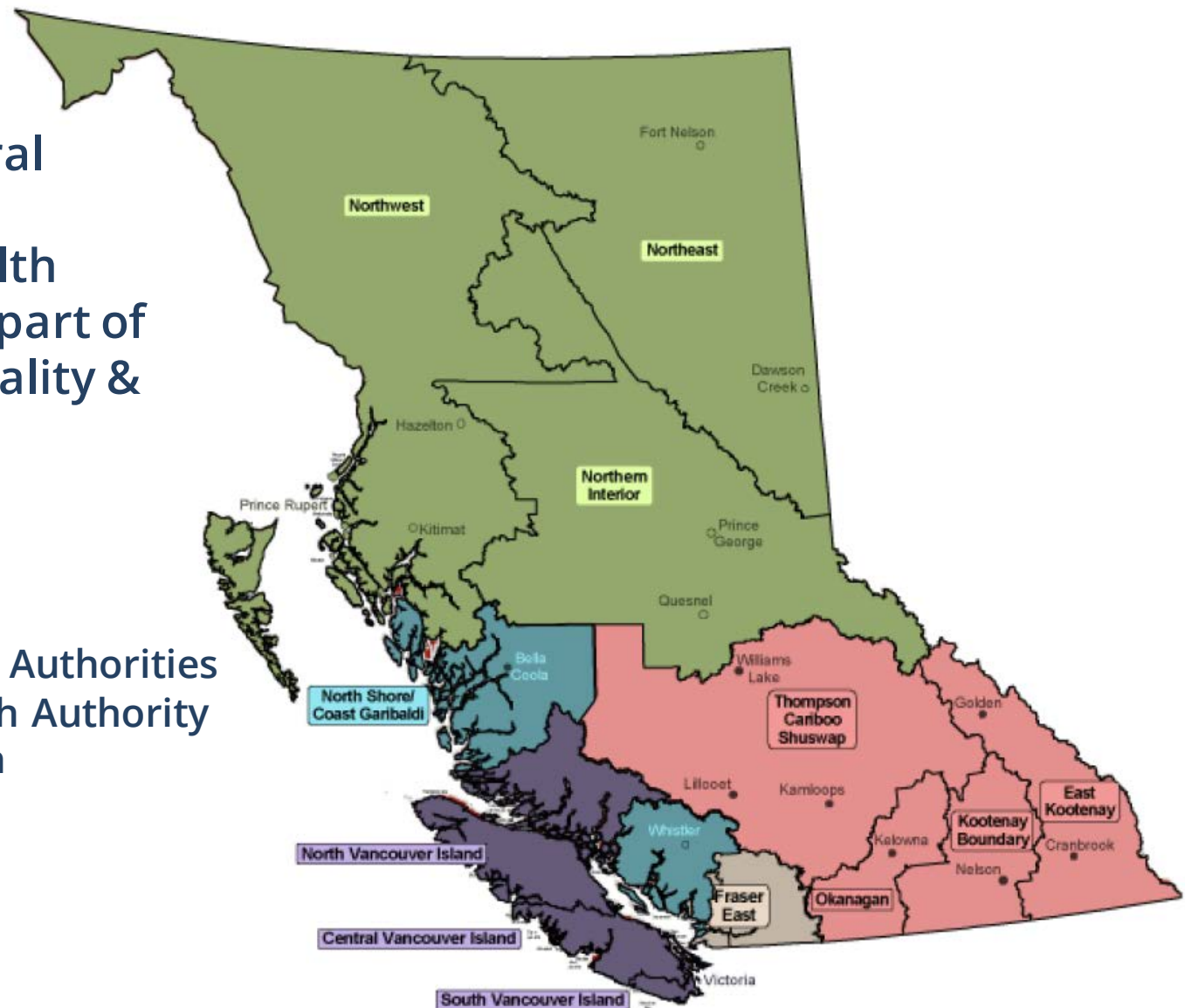
- **Leading change through a clear commitment of leadership**
  - Declaration of Commitment on Cultural Safety & Humility in Health Services for First Nations & Aboriginal people in BC
  - A guiding Framework for Action – June 21, 2016
- **Cultural Safety & Humility – Context**
- **Vision Statement for Cultural Safety & Humility**
- **Systemic barriers to achieving the Vision**
- **Discussion Questions (for last 20 min)**



# Goal

“Hardwire” cultural safety & cultural humility into health services in BC as part of the Provincial Quality & Safety Agenda

- 5 Regional Health Authorities
- 1 Provincial Health Authority
- Ministry of Health
- FNHA





# Transforming the System

## Declaration of Commitment on Cultural Safety & Humility in Health Services for First Nations & Aboriginal people in British Columbia

- Endorsed & signed in July 2015 by BC Deputy Minister of Health & CEO's of 7 BC Health Authorities

**DECLARATION OF COMMITMENT - JULY 16 2015**  
CULTURAL SAFETY AND HUMILITY IN HEALTH SERVICES DELIVERY FOR FIRST NATIONS AND ABORIGINAL PEOPLE IN BRITISH COLUMBIA

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Our Declaration of Commitment is an important step toward embedding cultural safety and humility within health services for First Nations and Aboriginal people in British Columbia. This commitment reflects the high priority we, as the designated BC First Nations and Aboriginal health system leaders, place on cultural safety and humility as essential dimensions of quality and safety within the First Nations and Aboriginal health services for which we are responsible.

This Declaration of Commitment is based on the following guiding principles of cultural safety and humility:

- Cultural humility builds mutual trust and respect and enables cultural safety.
- Cultural safety is defined by each individual client's health service experience. As such, approaches to cultural safety must be client-centred.
- Cultural safety must be understood, embraced and practiced at all levels of the health system including governance, health organizations and within individual professional practice.
- All stakeholders, including First Nations and Aboriginal individuals, elders, families, communities, and nations must be involved in co-development of, action strategies and in the decision making process with a commitment to reciprocal accountability.

Strong leadership on concrete actions is essential to achieving our vision of a culturally safe health system for First Nations and Aboriginal people in our province. We, the members of the Leadership Council, will:

**CREATE A CLIMATE FOR CHANGE BY:**

- Articulating the pressing need to ensure cultural safety within First Nations and Aboriginal health services in BC.
- Opening an honest and convincing dialogue with all stakeholders to show that change is necessary.
- Forming a coalition of influential leaders and role models who are committed to the priority of embedding cultural humility and safety in BC health services.
- Leading the creation of the vision for a culturally safe health system and developing a strategy to achieve the vision.
- Supporting the development of workplans and implement through available resources.

**ENGAGE AND ENABLE STAKEHOLDERS BY:**

- Communicating the vision of culturally safe health system for First Nations and Aboriginal people in BC and the absolute need for commitment and understanding on behalf of all stakeholders, partners and clients.
- Openly and honestly addressing concerns and leading by example.
- Identifying and removing barriers to progress.
- Tracking, evaluating and visibly celebrating accomplishments.

**IMPLEMENT AND SUSTAIN CHANGE BY:**

- Empowering health organizations and individuals to innovate, develop cultural humility and foster a culture of cultural safety.
- Allowing organizations and individuals to raise and address problems without fear of reprisal.
- Leading and enabling successive waves of actions until cultural humility and safety are embedded within all levels of the health system.

Our signatures demonstrate our long term commitment to providing culturally safe health services for First Nations and Aboriginal people in British Columbia and to championing the process required to achieve this vision.

This Declaration of Commitment is endorsed by the BC Tripartite Committee on First Nations Health and signed by the members of the Leadership Council.

SIGNED on this date: July 16, 2015

*[Signature]*  
MR. STEPHEN BROWN, DEPUTY MINISTER, MINISTRY OF HEALTH

*[Signature]*  
MR. JON GALLAGHER, CHIEF EXECUTIVE OFFICER, FIRST NATIONS HEALTH AUTHORITY

*[Signature]*  
MR. CARL BOY, PRESIDENT AND CHIEF EXECUTIVE OFFICER, PROVINCIAL HEALTH SERVICES AUTHORITY

*[Signature]*  
MR. MICHAEL MANICHUK, PRESIDENT AND CHIEF EXECUTIVE OFFICER, FRASER HEALTH

*[Signature]*  
DR. SUZEE HALLIYON, PRESIDENT AND CHIEF EXECUTIVE OFFICER, INTERIOR HEALTH

*[Signature]*  
DR. BRENDAN CHAI, PRESIDENT AND CHIEF EXECUTIVE OFFICER, ISLAND HEALTH

*[Signature]*  
MS. ANNE HARRIS, PRESIDENT AND CHIEF EXECUTIVE OFFICER, NORTHERN HEALTH

*[Signature]*  
MS. MARY ACHORN-ROSE, PRESIDENT AND CHIEF EXECUTIVE OFFICER, VANCOUVER COASTAL HEALTH

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## Declaration of Commitment on Cultural Safety & Humility in Health Services for First Nations & Aboriginal people in British Columbia

### Overarching Goal

- Cultural Safety & Humility in Health Services for First Nations & Aboriginal people in British Columbia

Represents a *common message* to BC First Nations & Aboriginal people & all health agencies & partners

Provincial Leadership will focus on *concrete action* to achieve the vision of a culturally safe health system for First Nations & Aboriginal people in BC by:

- Creating a climate for change
- Engaging & enabling stakeholders
- Implementing & sustaining change



## Transforming the System

- The declaration provides a **Framework for Action** at the system, organization & individual level – target launch June 21, 2016.
- We now look to **operationalize** this commitment at all levels
- Guided by **stories & best practice.**
- **Building** on existing relationships, structures & successes inside/outside the health system.
- Need to **Measure Success.**





## Statement on the importance of the Declaration on Cultural Safety & Humility

- *“The Declaration is important because it gives us all permission to do what we need to do to achieve cultural safety with the services we provide through the incorporation of cultural humility.”*

From an FNHA partner shared at a session to discuss the declaration & subsequent framework (Victoria, Nov. 2015)

**“It Starts With Me”**

**we can each make a difference**





## What is Cultural Humility?

"I believe you understand what you think I said, but I'm not sure you realize that what you heard is not what I meant."

- Unknown, written on a blackboard in the band hall of the Weagamow Lake Reserve, 380 air miles north of Thunder Bay Ontario.



# Cultural Humility

*A life-long process of self- reflection  
& self-critique to understand  
personal biases & to develop &  
maintain mutually respectful  
partnerships based on mutual trust.*



*Cultural  
Humility*  
enables  
*Cultural  
Safety*





## Cultural Safety

*The aim of cultural safety is to create an environment free of racism & discrimination where people feel safe receiving care.*

Cultural safety goes beyond:

- *Cultural awareness*, which refers to awareness of differences between cultures.
- *Cultural sensitivity*, which is about realizing the legitimacy of difference & the power of one's own life experience can have on others.

Cultural Safety:

- **power imbalances** inherent in the health care system.
- **self-reflection** on culture & power.
- Improve client experiences & **lead to better care.**



## FNHA's vision for Cultural Safety & Humility

The FNHA envisions a future where First Nations people have a new relationship with their care providers.

- One which is based on mutual respect, understanding & reciprocal accountability.
- One that provides an understanding of what Health & Wellness means to the First Nations people that are seeking care that we are responsible to provide.
- One that resets the balance of power between a care provider & the client we are here to serve, clients who deserve respect & have a right to access the best service we are able to deliver.
- One that provides for a health system that has mechanisms that proactively & effectively addresses appropriate actions & behaviours within the operations of the various health institutions.

And we will know that we've achieved cultural safety when the voice of the people receiving our services tells us we have.



## Systemic barriers to achieve the vision

*“I’m sorry, I’m embarrassed to say that when I faced someone who was being culturally unsafe to patients, instead of confronting the person, I left. I didn’t feel like I could do anything. There’s such a hierarchy.”*

- shared by a healthcare worker in BC



# Questions for Discussion

## It starts with me

- What is *your* vision for Cultural Safety & Humility?

## Systemic Barriers to achieving the vision

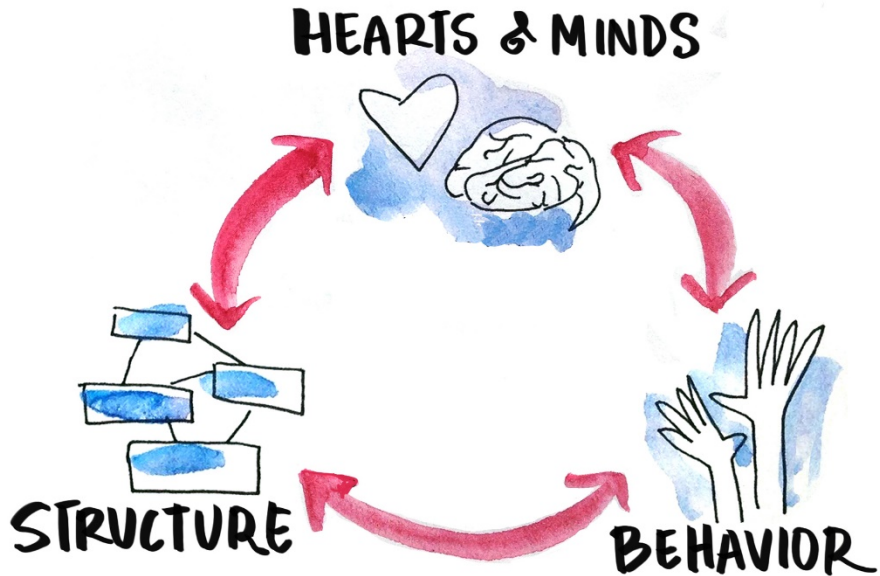
- What do *you* need to feel safe & effective in implementing cultural safety & humility?

## Personal commitment to bring awareness & change in your own work environment

- Thoughts, ideas, vision to support others



# wheel of change



we need all 3 for social change





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## Wheel of Change for Individuals

"To create real change for individuals (including ourselves), we must work in an integrated way with the three major domains that comprise our human system."

(Robert Gass, 2007)

