



# Transforming practice through education: San'yas Indigenous Cultural Safety Training

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In 2006, the First Nations Leadership Council and the Province of British Columbia entered into a bilateral agreement called the Transformative Change Accord: First Nations Health Plan. The accord outlined 29 action items designed to address some of the health inequities between Indigenous peoples and other British Columbians. Action item 19 mandated the development of a cultural competency curriculum for the health authorities.



From 2008-2009, Dr. Cheryl Ward (Kwakwaka'wakw) and Leslie Varley (Nisga'a), then the director of the Indigenous Health Program at the Provincial Health Services Authority (PHSA), developed the acclaimed San'yas Indigenous Cultural Safety Training Program.

Ward, now the executive director of Indigenous Health for PHSA and a long-standing advocate against anti-Indigenous racism in the health system, said that she has always felt driven to engage in anti-racism and social justice work. "I have always felt compelled to do this work, and that is reflected in my career," she said.

"Issues connected to social justice, inequity, racism and discrimination, and our shared experience of colonization have motivated me to be an actionist. This work is important and meaningful," asserted Ward.

According to the training website, "Cultural safety is about fostering a climate where the unique history of Indigenous peoples is recognized and respected in order to provide appropriate care and services in an equitable and safe way, without discrimination."

Since its implementation in 2010, the training has expanded to Ontario and Manitoba, training over 130,000 people across Canada. Tailored trainings are now offered for workers in British Columbia in the health, mental health, child welfare, and justice fields, including training for Indigenous-only participants working in health care.

The training is a first of its kind in the country, and offers a valuable opportunity to gain knowledge and skills that can fundamentally inform practice. It is offered free to employees of PHSA, Providence Health Care, and the five regional health authorities.

The course has had a profound impact on HSA members such as Joanna Rainer.

"It was one of the most well-designed courses that I've ever taken," said Rainer, who praised the course's integration of readings, videos, and diagrams.

Rainer, who has been an occupational therapist since 1985, said the course changed parts of her practice. “It gave me tools for working with First Nations peoples who I come across in my work.” Rainer works for Community Care Services for Interior Health in Vernon, and sometimes visits the Okanagan Indian Band reserve in her role as an OT.

“The course prompted me to use the services of the patient navigator more often and more regularly,” explained Rainer. “We are very fortunate at Vernon Jubilee Hospital to have a patient navigator, Diana Moar, who helps to support First Nations people through the healthcare system.”



“Often she might know the family and might have some helpful things to either pass on to me, or know the best way to offer services to that person. She might even accompany me on the home visit,” said Rainer.

“The course also prompted me to ask questions of the client and the family about how they would feel about me coming to their home, and who they would like to be there.”

She said the course taught her a lot about First Nations history in BC, and the history of colonization. “It’s important to know the history, both the good and the bad.”

“I became aware that some of the things that I do might be triggering. Even just being a white person coming into their home.”

Ward said that there are multiple barriers and challenges facing Indigenous peoples when accessing health care, such as geographic issues and access to transportation.

“Other challenges are related to history and in particular the way that Indigenous nations and communities have and continue to experience colonialism and the legacy of anti-Indigenous racism.”

Anti-Indigenous racism on a systemic level continues to impact Indigenous interactions with the health care system and other institutions. Just this past June, provincial child advocate and former judge Mary Ellen Turpel-Lafond was appointed by Health Minister Adrian Dix to lead an independent investigation into racism in BC’s health system.

And in August, HSA released a report on workplace racism, which included written accounts from HSA members about anti-Indigenous racism towards staff, patients, and clients in HSA workplaces.

“Interpersonal, organizational, and systemic racism is a pervasive and ongoing reality for Indigenous people across Canada. The legacy of anti-Indigenous racism has been hard wired into our society, and as a result it manifests in virtually all of our social systems.”

“This dynamic manifests in the form of attitudes and behaviours that inform the treatment of Indigenous Peoples which inevitably lead to varying degrees of harm. These attitudes and behaviours are a major barrier to receiving health care and other services that are free of bias, stereotyping and discrimination,” said Ward.

## Addressing anti-Indigenous racism

Rainer encourages her colleagues to take advantage of the San'yas Indigenous Cultural Safety Training Program. She believes that supervisors should allow the training to take part during work hours.

She said that when it comes to cultural competency, education is a good place to start. "We are just so ignorant of First Nations' history and the impact that colonization has had on First Nations people, and why we are in the mess we're in."

She said the course also inspired her to take action on a local level.

When the Calls to Action of the Truth and Reconciliation Commission were released, she engaged with other members of her church congregation in Vernon to implement Call to Action 59, which calls on church parties to develop organizational strategies to educate congregations about the church's role in colonization and the legacy of residential schools.

Ward said that various commissions and mandates - such as the Truth and Reconciliation Commission, the United Nations Declaration on the Rights of Indigenous Peoples, the National Inquiry into Murdered and Missing Indigenous Women, and the Royal Commission of Aboriginal Peoples - have clearly established the need for a cultural shift in the relationship between settlers/immigrants and Indigenous peoples.

"So, it is not for want of a clearly defined path to guide us in moving toward transforming our relationships," said Ward. "Rather, the issue we really need to face is one of creating and sustaining enthusiasm, motivation, and commitment."

"Systems do not always change because it is the right thing to do. Typically, systems shift when it becomes 'necessary' and they are compelled to do so."

Ward emphasized the importance of confronting and disrupting anti-Indigenous racism openly when witnessed.

"Whether this is something that you witness while walking on the street or shopping in a store, or whether you witness it in health care setting, people need to take action by naming the behaviour, standing up for the person who is targeted, and interrupting the harm."

She said that this can act as a "powerful deterrent."

"Racism and discrimination thrive in environments where it is tolerated; when we no longer tolerate the mistreatment of Indigenous people as a society, we will be transformed."

*This article first appeared in the [December 2020 edition of The Report magazine](#).*

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