



**elbow river**  
**HEALING LODGE**

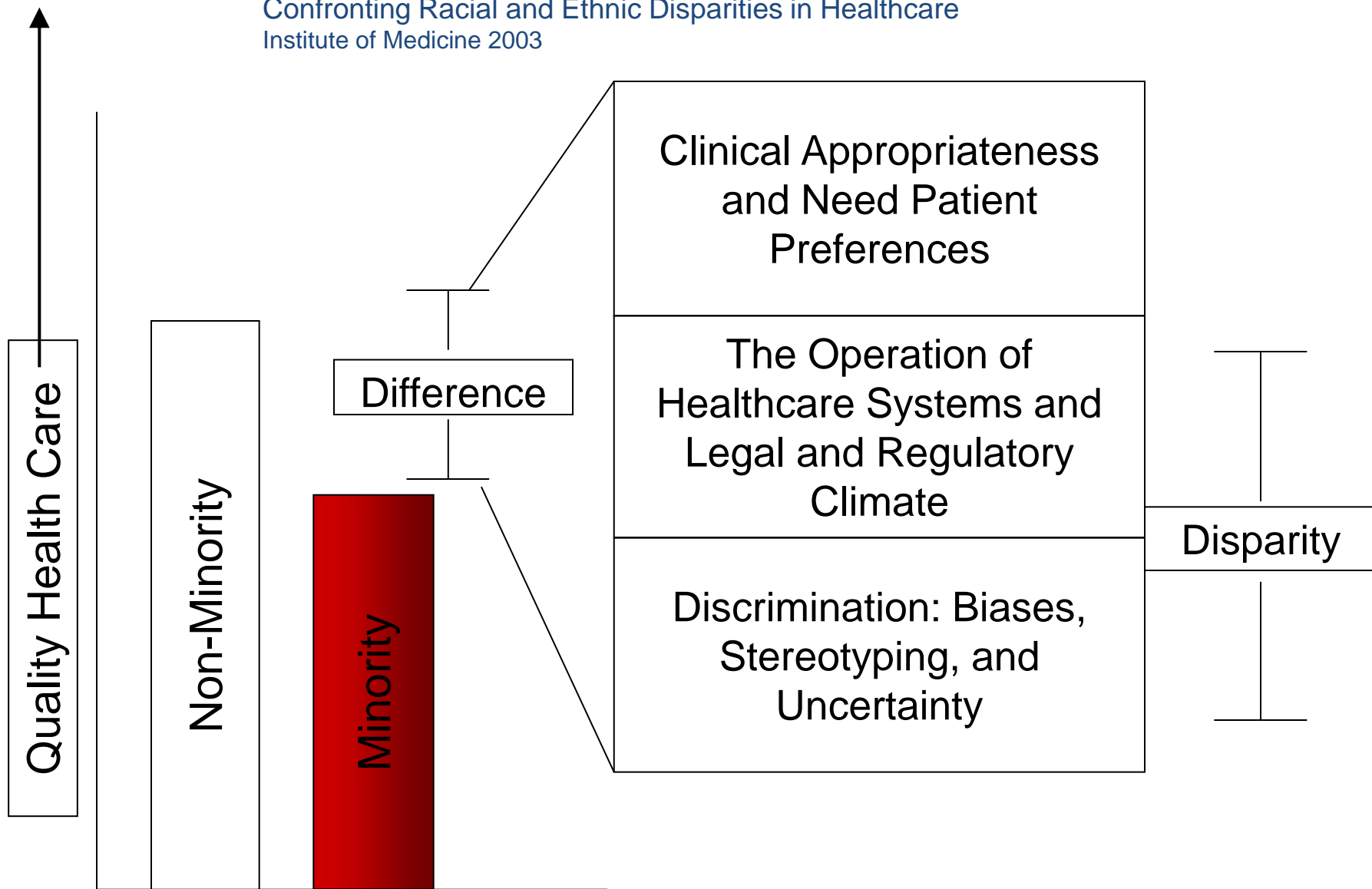
## Guiding concepts of an urban Aboriginal health centre

Local initiatives, global approaches  
CCME April 17, 2012  
Lindsay Crowshoe

# Unequal Treatment:

Confronting Racial and Ethnic Disparities in Healthcare

Institute of Medicine 2003



# Physician Remuneration

Fee-for-service prompts physicians to increase the number of patients seen, decreases the quality of care and is a cause of current health system failure

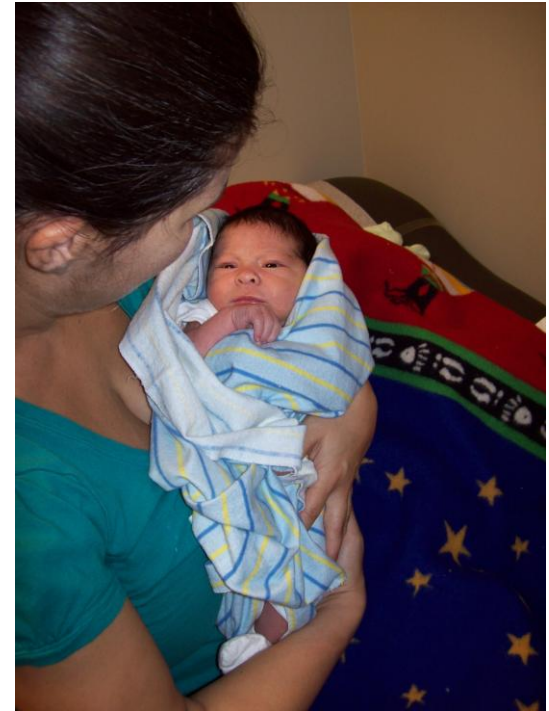
Dewa, et. Al. 2001. Using financial incentives to promote shared mental health care. *Canadian Journal of Psychiatry* 46: 488-95.

## **Vision**

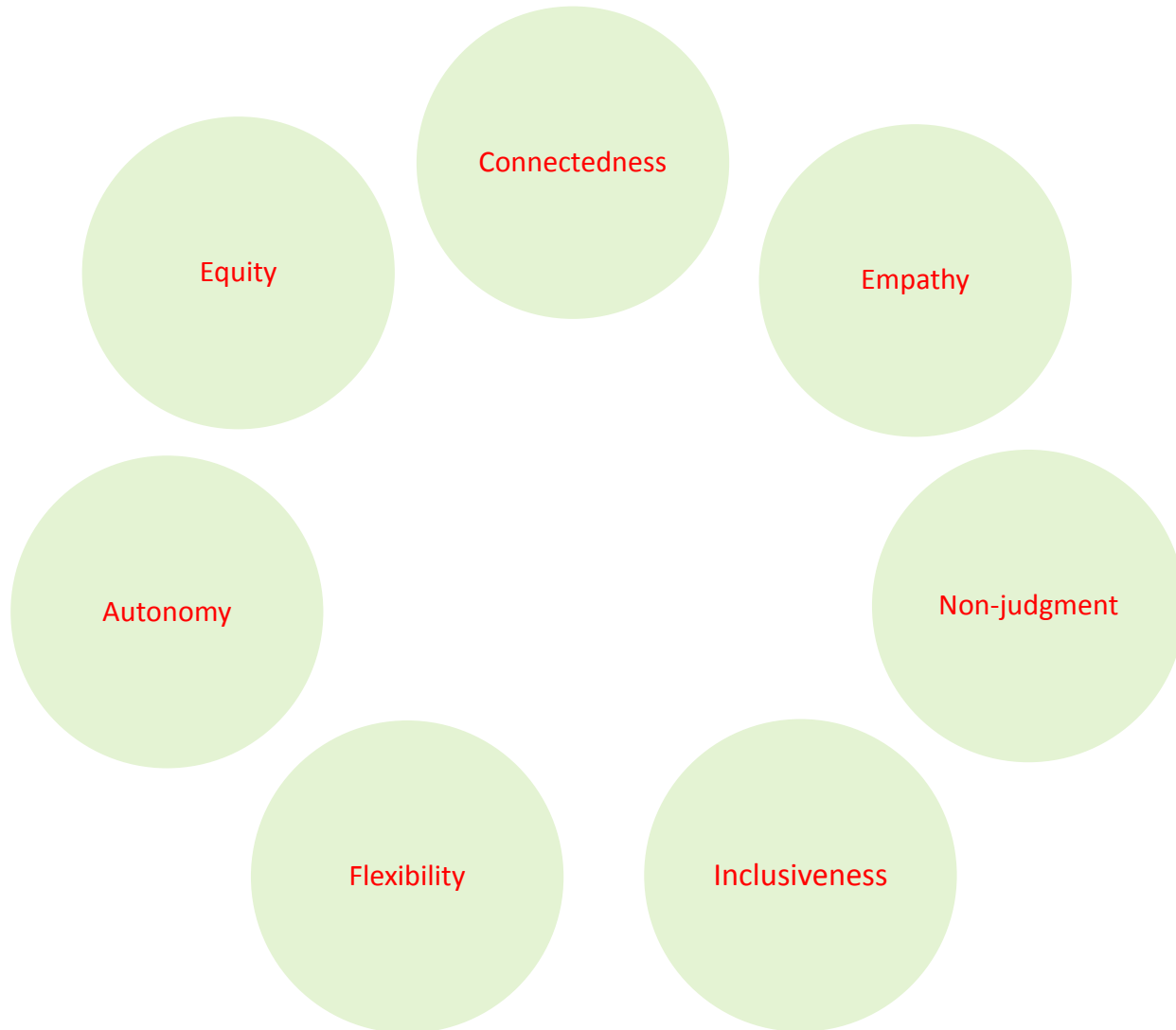
Healthy Aboriginal communities through *connectedness*

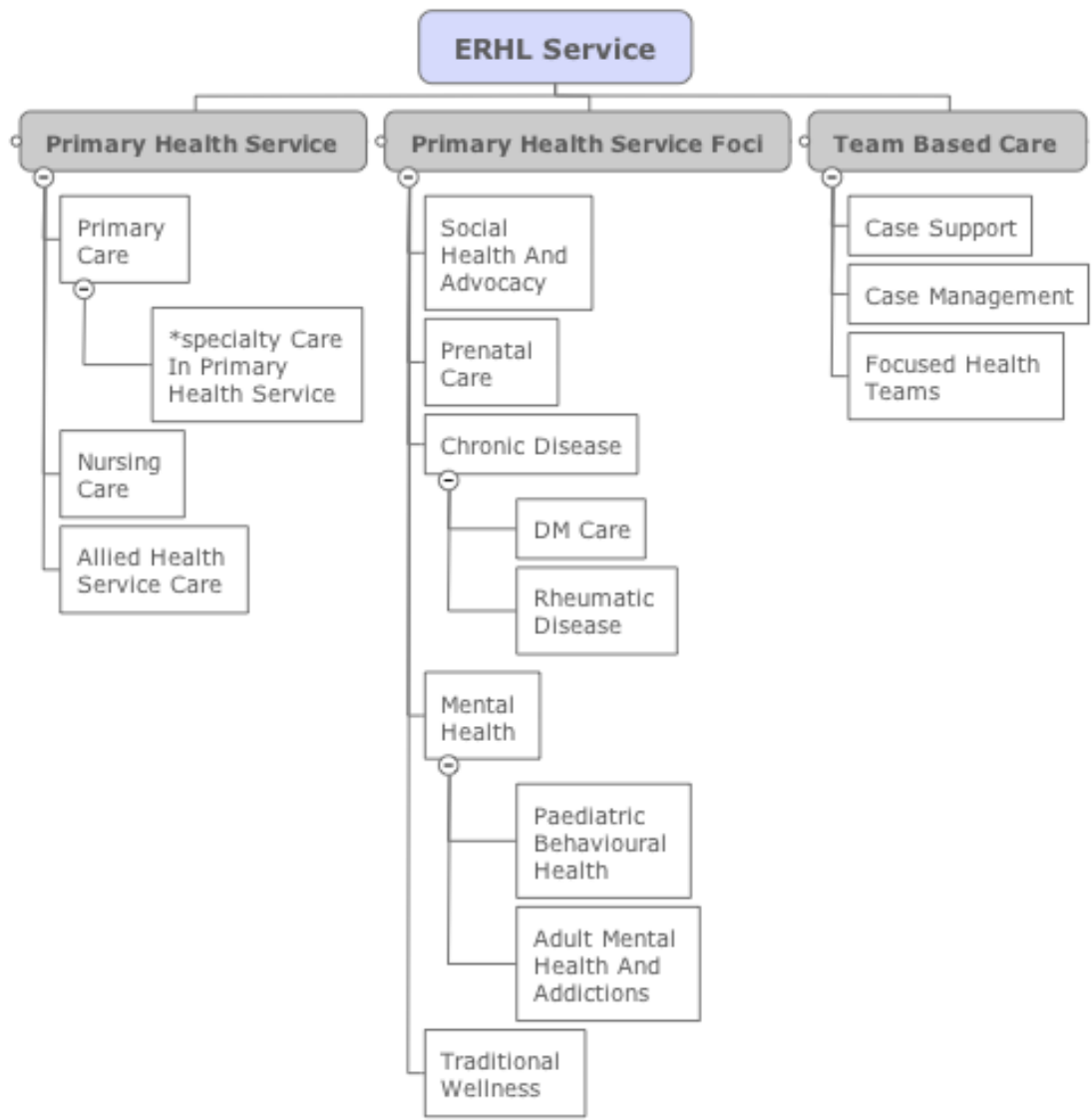
## **Mission**

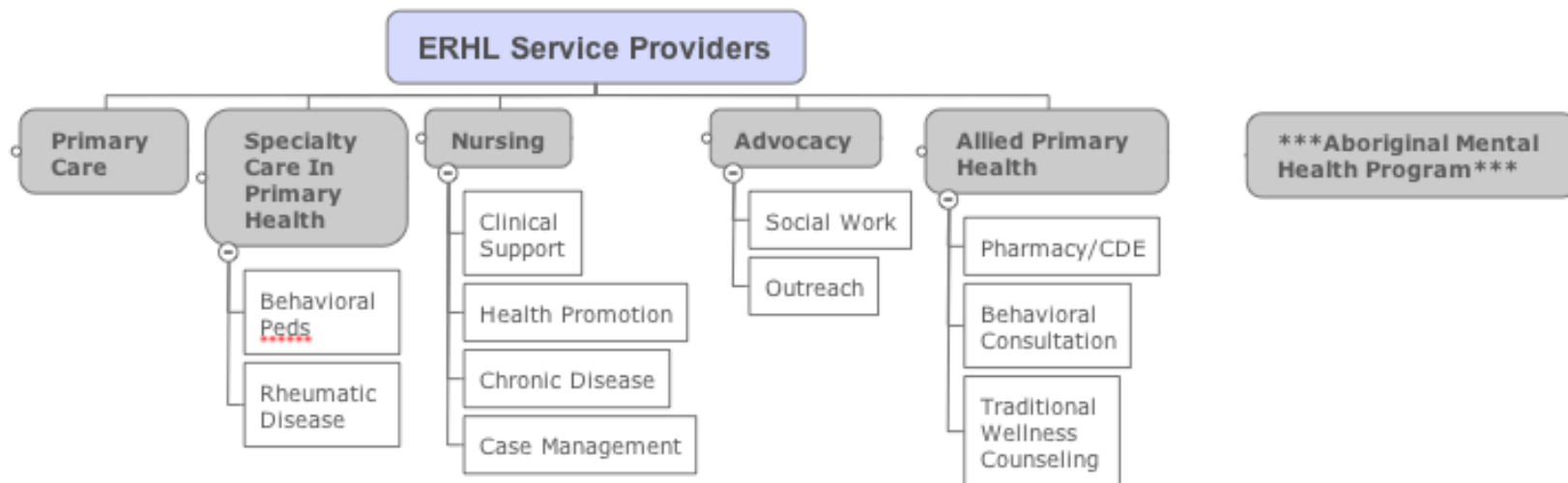
ERHL provides optimal *integrated* Aboriginal health care and supports *access to respectful resources* for Aboriginal People



# ERHL Guiding Principles







## Aboriginal Health Approach

Traditional norms and  
Modern lifestyle

Multi-generational trauma

Social Exclusion

SDOH disparities

Inequities

Prejudice...



# Core Concepts

- Trauma informed care
- Cultural competency/safety
- Health advocacy

# Historical Trauma

## Historical Trauma:

- Populations historically subjected to mass trauma (Colonialism, slavery, war, genocide) exhibit an increased prevalence of disease even several generations after the original trauma occurred
  - Mental, social, spiritual and physical health (Sotero 2006)

## Historical Trauma Response:

- Maladaptive social and behavioral patterns created in response to the trauma experience and absorbed into the culture and transmitted as learned behavior from generation to generation
  - (Healing Foundation 2004)

# The Adverse Childhood Experiences (ACE) Study

- Relationship of childhood abuse and household dysfunction



# Cultural Competency

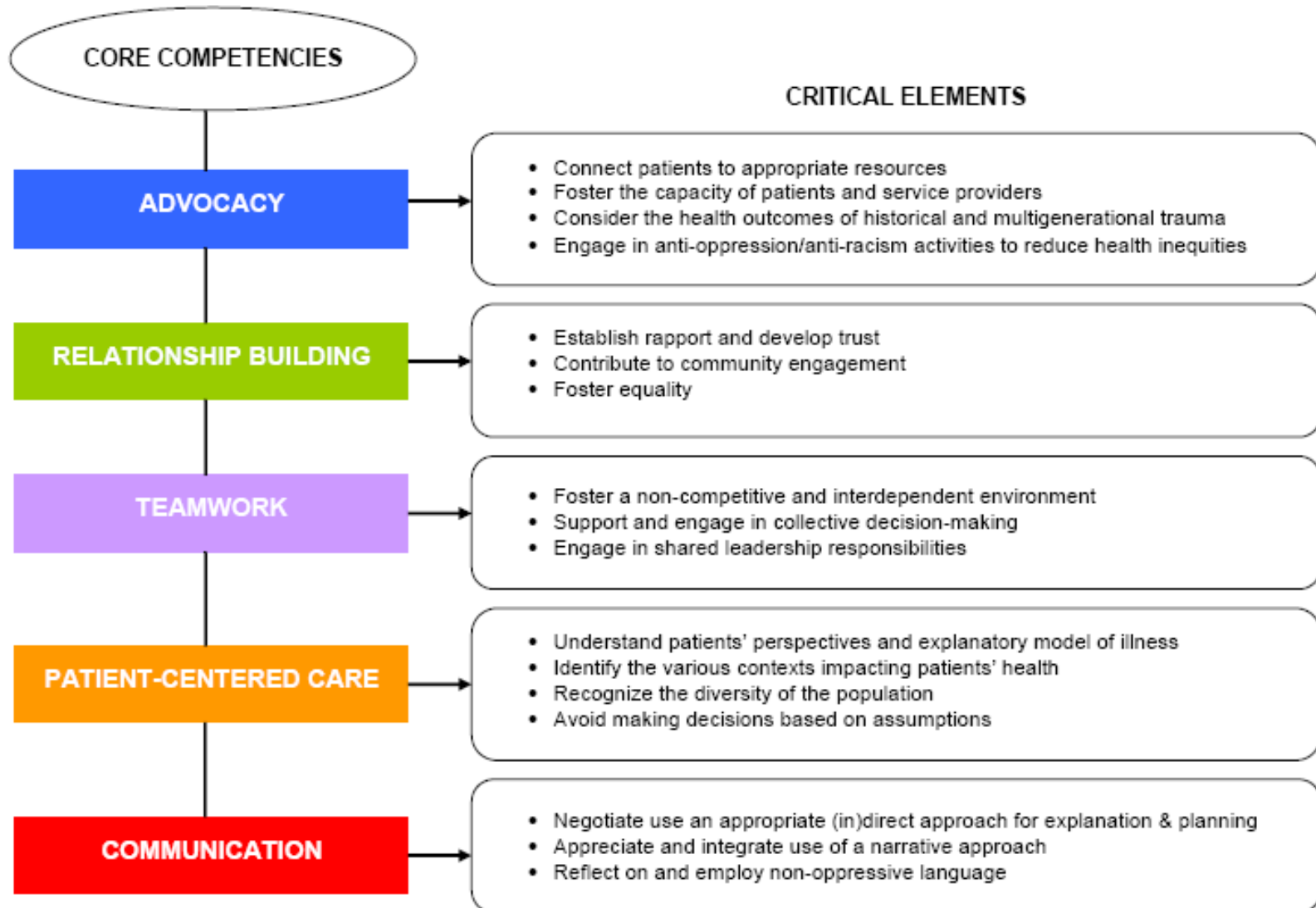
a set of congruent behaviors, knowledge, attitudes, and policies that come together in a system, organization, or among professionals that enables effective work in cross-cultural situations

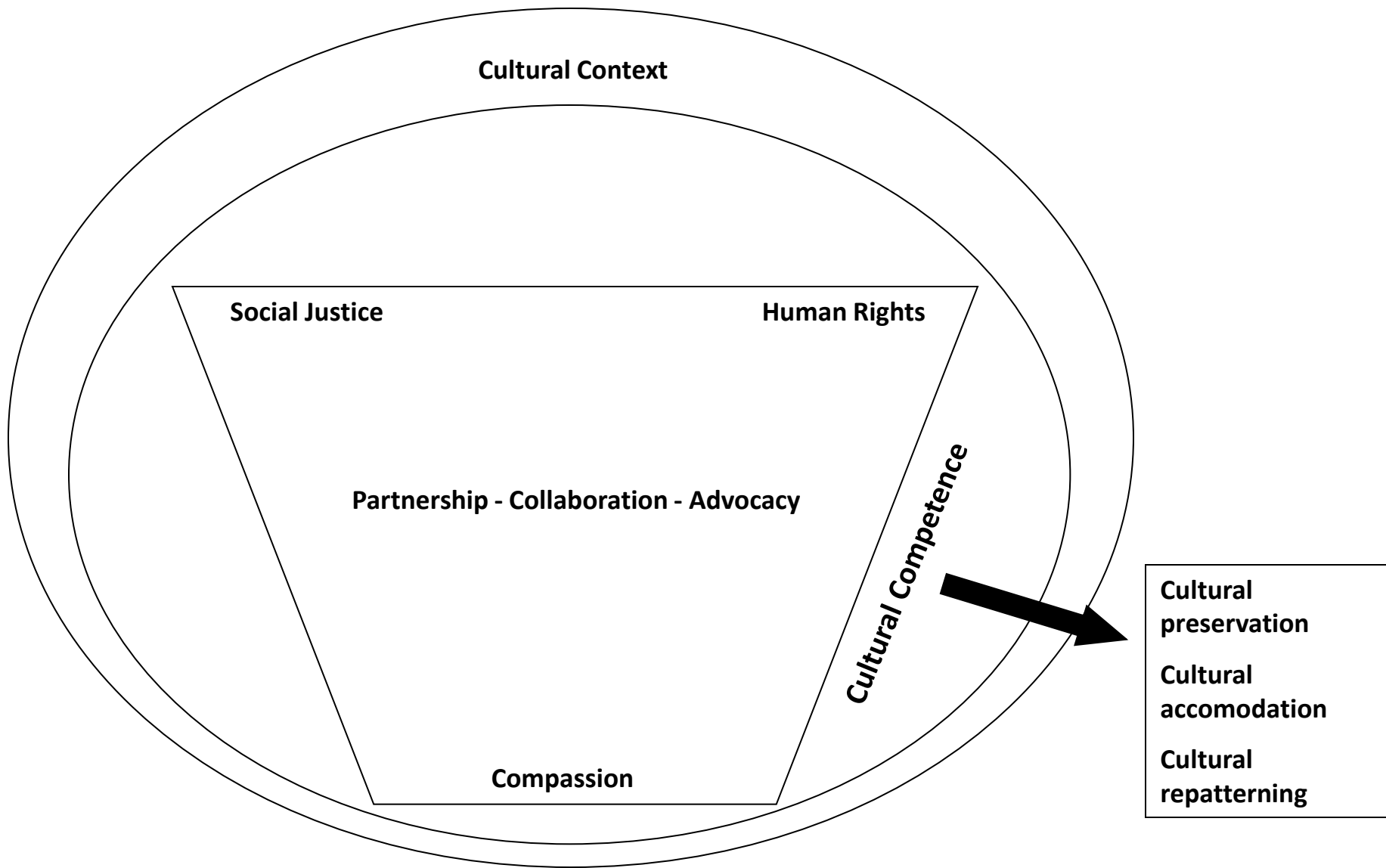
(Association of American Medical Colleges, 2005)

# Cultural Competency Phase I

- Cultural Competency Themes
  - **K**nowledge – understanding
  - **A**wareness – differences, diversity
  - **R**espect – differences, diversity

# Cultural Competency Phase II





# Advocacy and Aboriginal Health

“...there are deep and continuing disparities between Aboriginal and non-Aboriginal Canadians both in their overall health and in their ability to access health services. The reasons for this are complex and relate to a number of different factors, many of which have less to do with health and more to do with social conditions”

-Romanow 2002



Figure 5: Youth Suicide Rates by Cultural Continuity Factors

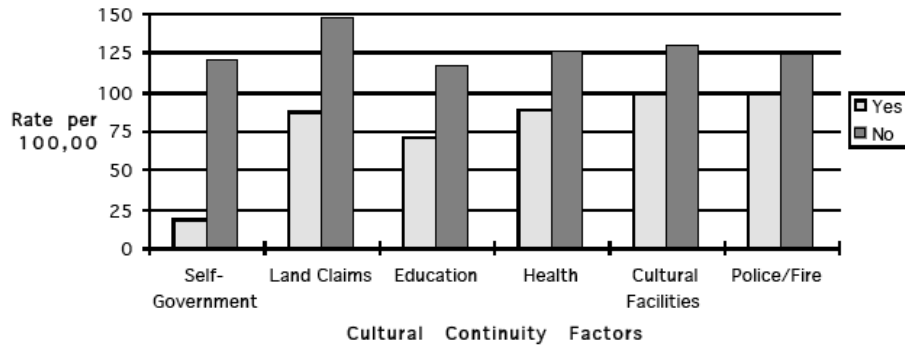
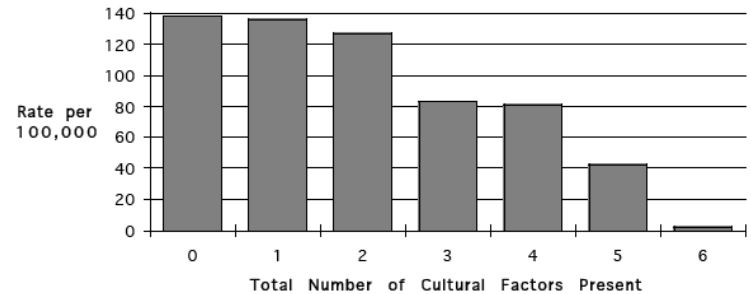


Figure 6: Youth Suicide Rates by Number of Factors Present in the Community



“The presence of Self-Government, for example, resulted in an 85% reduction in the relative risk of suicide. For the remaining variables, the percentage reduction in relative risk were: Land Claims 41%; Education 52%; Health 29%; Cultural Facilities 23%; and Police/Fire 20%.”

# Social Determinants of Health

- Proximal Determinants
  - Conditions that have a direct impact as a stressor on physical, emotional, mental or spiritual health
    - Employment, income, education, physical environment, food insecurity, health behaviours...
- Intermediate Determinants
  - Factors related to community infrastructure , systems, resources and capacities that influence the proximal determinants of health
    - Community infrastructure (including resources and capacities), systems (health care and educational), environmental stewardship, and cultural continuity
- Distal Determinants
  - The political, economic and social contexts that construct intermediate and proximal determinants
    - Have the most profound influence on health
      - Health Inequalities and Social Determinants of Aboriginal Peoples' Health, Reading 2009

## **FACILITATIONAL ADVOCACY**

## **REPRESENTATIONAL ADVOCACY**

Empowerment

### ***GOALS***

Protection/prevention

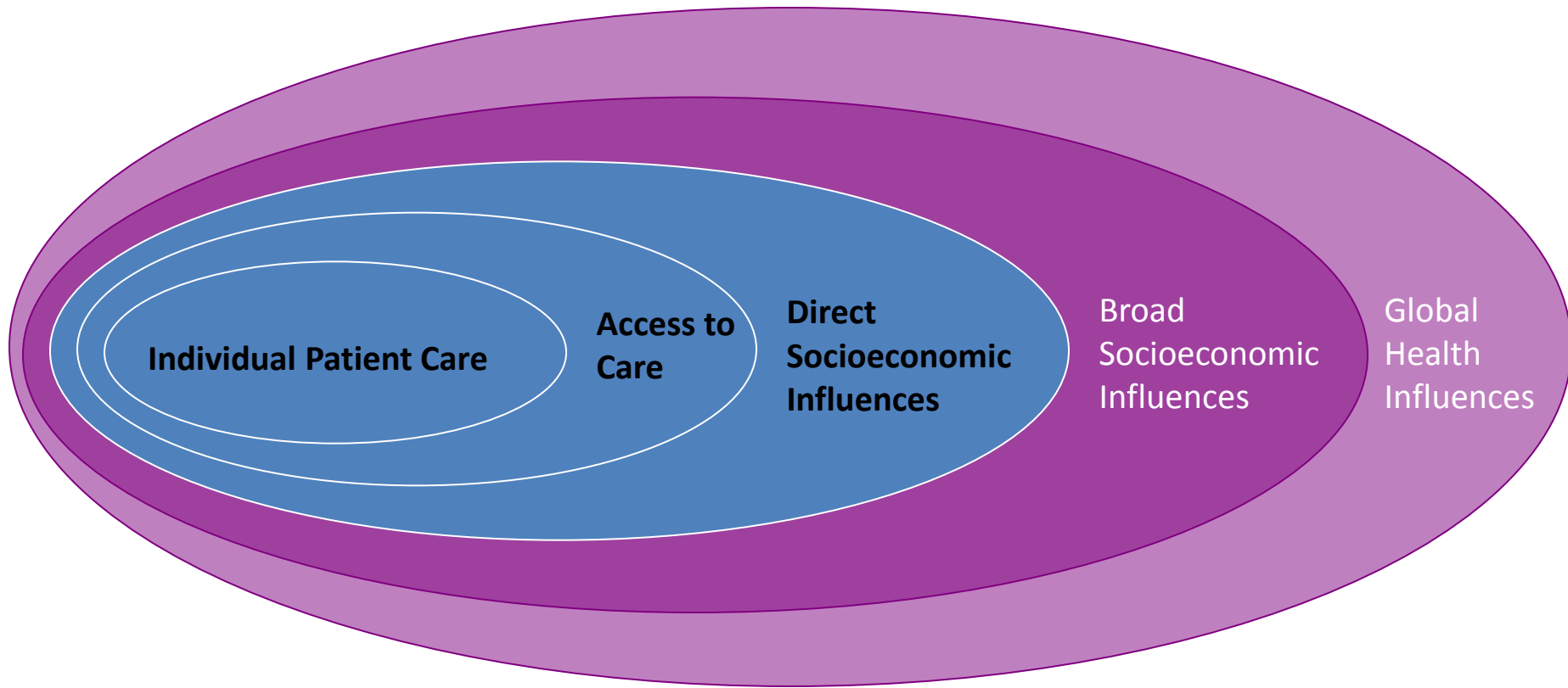
**community activism**

- **community development**
- **social health promotion**

• **social policy reform**

• **medical health promotion**

# Model of Physician Responsibility in Relation to Influences on Health



# ADVOCACY

## COMPETENCY DESCRIPTOR:

Advocacy involves working with and on behalf of patients to obtain services and resources; modifying practices and procedures that have harmful influences; promoting new policies and procedures that are beneficial; and engaging in efforts to advance social justice and patient empowerment.<sup>14</sup>

### CRITICAL ELEMENT 1

#### CONNECT PATIENTS TO APPROPRIATE RESOURCES

##### SOME INDICATORS OF EFFECTIVE PRACTICE

*A culturally competent healthcare service provider ...*

- Identifies patient needs and connects them to appropriate resources including primary health services, community services, and traditional healing services
- Possesses sufficient knowledge of urban, rural, and community services available for Aboriginal patients and families
- Demonstrates resourcefulness, creativity, and flexibility in meeting patient needs

### CRITICAL ELEMENT 2

#### FOSTER THE CAPACITY OF PATIENTS AND SERVICE PROVIDERS

##### SOME INDICATORS OF EFFECTIVE PRACTICE

*A culturally competent healthcare service provider ...*

- Can identify a range of appropriate advocacy approaches to increase patient self-empowerment
- Effectively teaches patients how to understand biomedical Western approaches and how to voice their needs within those systems

### CRITICAL ELEMENT 3

#### CONSIDER THE HEALTH OUTCOMES OF HISTORICAL AND MULTIGENERATIONAL TRAUMA

##### SOME INDICATORS OF EFFECTIVE PRACTICE

*A culturally competent healthcare service provider ...*

- Possesses an understanding of historical events using a multigenerational trauma framework to appreciate how they have shaped Aboriginal peoples' everyday experiences in Canadian society
- Identifies domains of patient experience (i.e., behaviours, relationships, self-identity) that have been impacted by multigenerational trauma
- Provides therapeutic interventions based on the integration of knowledge of multigenerational trauma and available resources

### CRITICAL ELEMENT 4

#### ENGAGE IN ANTI-OPPRESSION/ANTI-RACISM ACTIVITIES TO REDUCE HEALTH INEQUITIES

##### SOME INDICATORS OF EFFECTIVE PRACTICE

*A culturally competent healthcare service provider ...*

- Understands and acknowledges how uneven structures of power can affect patients' ability to obtain equitable or optimal healthcare
- Identifies how patients have been impacted by discrimination leading to differential treatment in healthcare
- Recognizes how various forms of racism (i.e., systemic, institutional, personally-mediated) are perpetuated and can identify a range of opportunities and approaches to effect change through policy and practice

*What  
recommendations  
do you have for  
this patient?*

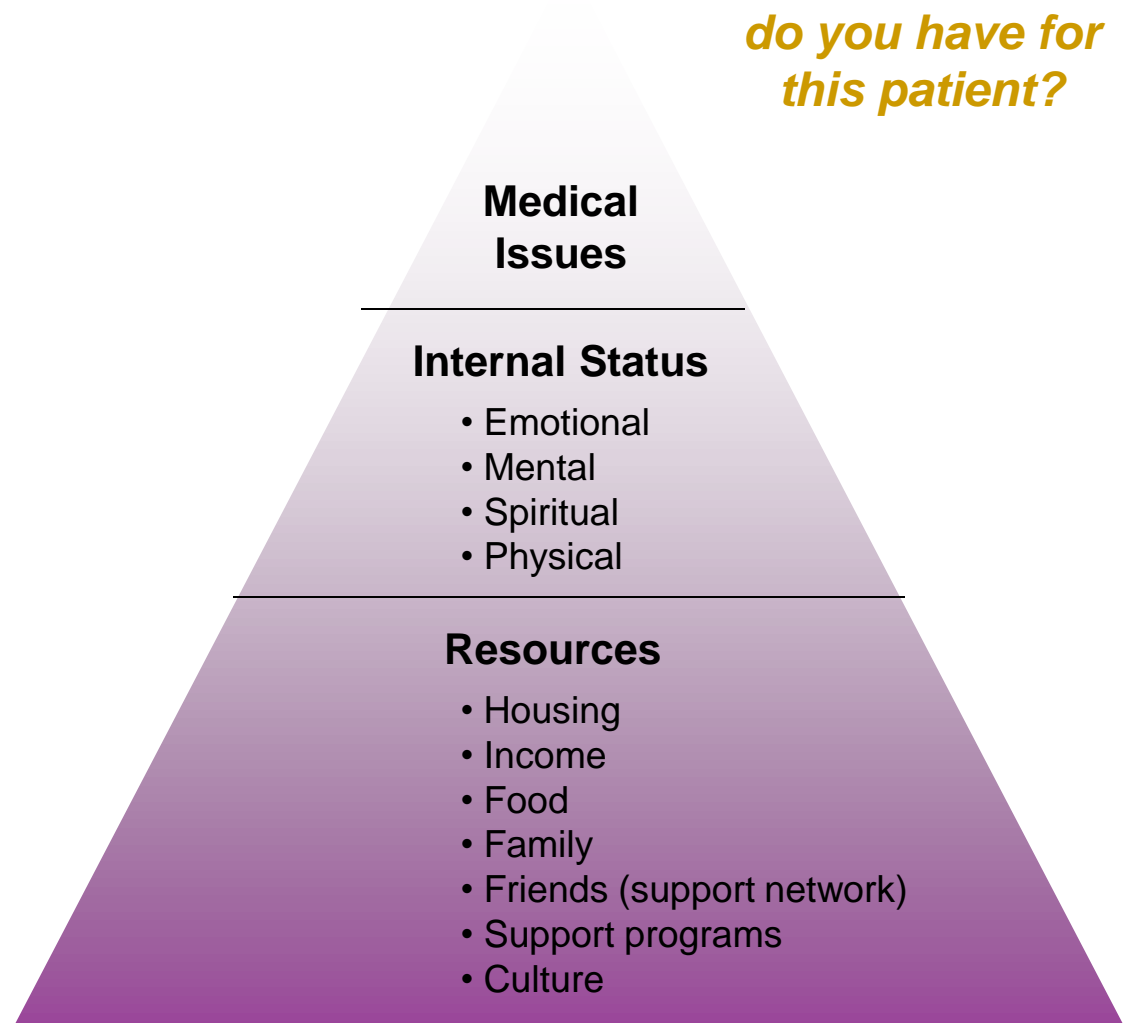
**1. Situation**

**2. Goals**

**3. Resource awareness**

**4. Resource accessed**

**5. Barriers**



# Societal Health Determinants

- Social Cohesion
- Inequality
- Relative Poverty

Unhealthy Societies: The Afflictions of Inequality (1997)  
Wilkinson



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