# Providing Culturally Safe Care



SHERBOURNE HEALTH

Cultural Safety is a framework of care that has specific origins in resisting anti-Indigenous racism in health care. The concept of Cultural Safety was introduced by Irihapeti Ramsden, a Māori nurse, to examine power imbalances between health care providers and service users in the provision of nursing care to a person or family from another culture (1), however, it can be enacted within any health care context.

The goal of Cultural Safety is for all people to feel respected and safe when they interact with healthcare systems. (2)

The use of the Cultural Safety framework within medical care spaces must be understood in the context of settler colonialism in the country now known as Canada. Colonialism is the ongoing process by which non-Indigenous people and governments settle the land and resources of Indigenous people through violence and assimilation.

While still an evolving term, some key aspects of practicing Culturally Safe care include:

- Actively working against the ongoing effects of racism, colonization, and power imbalances that are built into western biomedical systems;
- Centering the choice and consent of patients in defining and directing their care;
- Provision of care not being contingent on a patient's culture, race, ethnicity, ancestry, or any other aspect(s) of their identity being "knowable" to the provider;
- Fostering caring relationships based on mutual respect and trust with the patients you serve;
- Respecting and honouring patients' cultural knowledge, lineage, identities, protocols, dignity, relationships, and values;
- Growing your understandings of wellness and holistic health within the diverse communities you serve;
- Embodying cultural humility, a life-long process of self-reflection and self-critique to understand personal biases.

An intersectional understanding of Cultural Safety must also recognize the inseparable and interactive stigmas faced by patients living at the intersection of multiple marginalised social locations, and so must be entangled with anti-racism, intersectionality, and anti-oppression based approaches to care.



The Truth and Reconciliation Commission of Canada's Calls to Action (2015) includes specific calls regarding the treatment of Indigenous people in the healthcare system (3):

"18. We call upon the federal, provincial, territorial, and Aboriginal governments to acknowledge that the current state of Aboriginal health in Canada is a direct result of previous Canadian government policies, including residential schools, and to recognize and implement the health-care rights of Aboriginal people as identified in international law, constitutional law, and under the Treaties."

"22. We call upon those who can effect change within the Canadian health-care system to recognize the value of Aboriginal healing practices and use them in the treatment of Aboriginal patients in collaboration with Aboriginal healers and Elders where requested by Aboriginal patients."

Important to note from the 22nd call is that if you are a health or wellness provider working in Canada, you are someone "who can effect change within the Canadian health-care system."

Some ways you can work to effect change and make your own practice more Culturally Safe for all those you serve include (2):

- Undertaking training on Cultural Safety and Cultural Humility particularly trainings produced by, or focused on the needs of, communities you serve;
- Reviewing and developing policies on Culturally Safe care within your practice/organization;
- Organizational commitment to evaluation, reporting and continuous improvement of Cultural Safety and Cultural Humility that is supported by leadership;
- Including Cultural Safety and Cultural Humility within organizational definitions of quality care;
- Having a clearly defined, accessible and robust evaluation process in place in your practice/organization;
- Commitment to workforce representation of marginalized community members across all levels of staff and leadership;
- Partnering with local Indigenous communities and organizations;
- Partnering with local 2SLGBTQ communities and organizations.



# **Glossary**

### **Cultural Awareness**

Cultural Awareness is the knowledge about a particular group, primarily gained through media resources and workshops. Cultural Awareness begins through the recognition that differences and similarities exist between cultures. Learning about the histories of colonialism, racism, and heterosexism in health care in Canada are key of developing Cultural Awareness.

## **Cultural Competence**

Cultural Competence is a long-term developmental process that moves beyond Cultural Safety to think critically about power and oppression. Cultural Competency involves having the beliefs, knowledge, experience, and skills needed to establish trust and rapport to be able to communicate effectively with patients from other cultures.

## **Cultural Humility**

Cultural Humility is a life-long process of self-reflection and self-critique to understand personal biases. By listening without judgement, learning from and about others, and learning about your own culture and biases you can develop Cultural Humility.

## **Cultural Safety**

The goal of Cultural Safety is for all people to feel respected and safe when they interact with healthcare systems. When you embody Culturally Safe care provision, you engage in a mutually respectful and trusting relationships with your patients where they feel supported in drawing strengths from their identity, culture, and community.

## **Cultural Sensitivity**

Cultural Sensitivity involves holding the knowledge gained through Cultural Awareness, combined with some level of direct experience with a cultural group other than one's own. Cultural Sensitivity is not "treating everyone the same," but instead involves recognition of the influences of your own culture and acknowledgement of the biases you hold because of this.

# References

- 1. **Health Standards Organization.** *British Columbia Jurisdictional Standard: First Nations, Métis, and Inuit Cultural Safety and Humility.* 2021. Draft For Public Review. HSO 75000:2021 (E).
- 2. **Northern Health Authority.** Indigenous Health | Northern Health Authority. *Cultural Safety.* [Online] 2019. [Cited: Oct 7, 2022.] https://www.indigenoushealthnh.ca/cultural-safety.
- 3. **Truth and Reconciliation Commission of Canada.** *Truth and Reconciliation Commission of Canada: Calls to Action.* 2015.

Photography credit: CIRA's Indigenous stock photo library

