The Faculty of Health Sciences, the McMaster Indigenous Health Movement – Student Group, and the McMaster Indigenous Research Institute are pleased to host the inaugural Coming together to co-create health equity – an Indigenous Community Health and Research Conference.
Providing culturally safe breastfeeding and infant feeding support to Indigenous families

Sub-topics that align with the overall theme of equity:
Women’s and Children’s Health; Indigenous Ways of Knowling

Sub-topics: Equity

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Abstract:
This workshop will introduce the practitioner to culturally safe and people-centred care principles when addressing breastfeeding and infant feeding with Indigenous families. Practical suggestions will be provided on how to incorporate these principles in your practice. We will also share some traditional teachings regarding birth and breastfeeding. A combination of slides, personal stories, and a video clip will be used during the workshop.

Author Names:
Yolande Lawson

Creating space for the ‘sacred’ in cancer care? The integration of Indigenous healing into health care

Sub-topics that align with the overall theme of equity:
Decolonization, 2 eyed seeing

Sub-topics: Equity

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Abstract:
In this decolonizing study, Indigenous First Voice and auto-ethnography (Graveline-Frye, 1998) is utilized to explore the use of the Two-Eyed Seeing/ Etuaptmumk principle to theorize the integration of Indigenous medicines into health care. Two Eyed Seeing is a Mi’Kmaq guiding principle which posits that we learn to see, with one eye, the strengths of Indigenous forms of knowledges and, with the other, the best of Western Eurocentric knowledges to benefit all (Bartlett et al 2012). Two eyed seeing is increasingly being used as a framework for research related to Indigenous health in Canada and Canadian health care (Martin 2012). Exploring my identity, and simultaneously coming to terms with a cancer diagnosis, I reflect on my own ‘living’ experience with cancer care and negotiating the tensions between using Indigenous knowledges and medicines alongside biomedicine, while also being cognisant of the political economic influences that shape knowledge. Objectives: 1. Provide First Voice lived experience of navigating Indigenous medicines and biomedicine for cancer care 2. Contributing to helping to find pathways to create and hold space for the sacred in cancer care - looking forward to a future where Indigenous healing practices can be valued and preserved.

Author Names:
Cathy Fournier; Robin Oakley
Hamilton Public Health Services-Engaging the Local Indigenous Community-Towards Development of an Indigenous Health Strategy

Sub-topics that align with the overall theme of equity:
Collaboration to work towards Indigenous Health Equity

Sub-topics: Equity

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Abstract:
Background: In 2018, the modernized Ontario Public Health Standards were released. This version of the Standards placed an increased emphasis on building relationships with Indigenous Communities and Health Equity. Hamilton has a large urban Indigenous population with unique health needs and challenges. In order to effectively meet the Standards and address local needs, the leadership team at Hamilton Public Health Services (HPHS) decided to create a new position-Indigenous Health Strategy Specialist (IHSS) to advance the work required to meet the Standards in a way that honours the principles of respect and self-determination for Indigenous people. Beginning in June 2019, the IHSS began planning and consultation with the Indigenous community; this consultation will inform the development of the Indigenous Health Strategy for HPHS. Objective: This presentation will describe lessons learned to date, the essential components of engagement efforts with Indigenous communities and next steps. This presentation will include preliminary findings gained from community consultation and the status of collaborative work which is already underway or in planning stages.

Author Names:
Terry Ramirez; Sue Connell

Indigenous Health Research is looking for you!

Sub-topics that align with the overall theme of equity:
Two-Eyed Seeing in Indigenous Health Research, Community Engagement and Patient Engagement

Sub-topics: Equity

Author name(s) title(s) and email:
John R. Sylliboy Margot Latimer

Abstract:
Presented by the Chronic Pain Network Indigenous Research Health Advisory Committee (CPN IHRAC) and Aboriginal Children’s Hurt and Healing Initiative It’s a workshop The Indigenous Research Health Advisory Committee of the Aboriginal Children’s Hurt and Healing Initiative is part of the SPOR Chronic Pain Network. IHRAC will be hosting an interactive knowledge-sharing workshop. Who will benefit? We invite anyone who is interested in learning about Indigenous perspectives in health research, Two-Eyed Seeing, patient engagement practices and community engagement. Participants: researchers, trainees, health clinicians, collaborators, stakeholders, patients and community-based researchers. Community-based knowledge: The content derives from more than 10 years of experience collaborating with Indigenous-led, community-based research with First Nations in rural and urban communities in Canada as well as informed by survey results of Chronic Pain Network members in Spring of 2019. Please consider attending if you are interested to understand more about Indigenous perspectives in health, pain perspectives, and how to approach research through Indigenous knowledge. Gardening knowledge: Expected outcomes are individually-based, but the mindset is to enhance our knowledge base and understanding about Indigenous health by sharing stories about relational processes, methods, collaboration, in a Two-Eyed Seeing approach to address Indigenous health and wellbeing. Learning Continuum: The spirit of this workshop acknowledges that everyone is on a learning journey about Indigenous health and research; therefore, we invite you to expand your knowledge so that we can all become part of transformative change in health and research with Indigenous People.

Author Names:
John R Sylliboy; Margot Latimer
Circles of Conversation: Resistance and Resurgence Go Hand in Hand

Sub-topics that align with the overall theme of equity:
Indigenous Education Reproductive (In)Justice, Resistance and Resurgence

Sub-topics: Equity

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Abstract:
… stories found in memory help people find their way out of colonialism … (McLeod, 2007, p. 9) By practicing mamatowisin (an inner mindfulness), this presentation will speak to and through the regenerative synergies of poetic inquiry. Mindful of protocols and relationality, I will share how I have (re)centered and (re)stor(y)ed the powerful voices of women who have experienced reproductive violence, racism and/or injustices. This presentation will also illustrate the impacts of intergenerational and contemporary impacts of colonial violence on Indigenous women’s bodies, and the necessity of both resistance and resurgence. From my Cree scholar’s lens and worldview, I draw on Indigenous research methodologies and poetic inquiry to create spaces of resistance and resurgence in both the state-sanctioned policy of forcing sterilization onto Indigenous women and these women’s missing histories. I maintain that it is vital that this piece of hidden Canadian history be exposed, that mainstream Canada become educated. I use arts-based-methodology in the form of poetic inquiry because it informs the process of (re)stor(y)ing and performs by inviting readers into “the research space” [Glesne, 1997, p. 356]. Mindful of protocols surrounding my Cree Nisgaa Methodological Framework, I perform their narratives through (re)stor(y)ed transcripts that illuminate missing histories, and the intergenerational and contemporary impacts of colonial violence on Indigenous women’s bodies.

Author Names:
Keri Cheechoo

Quilting Storywork: Indigenous Data Sovereignty and the Path Forward through Relationships and Engagement

Sub-topics that align with the overall theme of equity:
Indigenous Data Sovereignty Indigenous Data Governance

Sub-topics: Equity

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Abstract:
Introduction: Indigenous Peoples and communities around the world have long been keepers of their own data. Traditional and cultural knowledges that were important to Indigenous Peoples were often preserved, handed down, and communicated to future generations through storytelling, song, truth-telling, ceremonies, artistic expressions, totems, etc. Goals and Objectives: Through workshops with participants from across the country, the goal is to create a community engagement story quilt on perspectives that relate to ID-SOV. This session aims to 1) advance knowledge and understanding on current Indigenous Data Sovereignty practices around the world; and 2) contribute to a community engagement art project that will become part of this project’s bundle. Each workshop participant will be given a quilt square and will have access to fabric markers to draw. Background: The overall research project that this exercise is contributing to, uses an international research approach, built upon relationships and engagement with global ID-SOV stakeholders to explore the current successes and challenges of global ID-SOV networks and movements. While vast diversity exists amongst Indigenous populations around the world, we have shared experiences with colonialism and its intergenerational impacts. By bringing together global insights, the work of the overall project has the potential to create new knowledges, drive forward research partnerships, and improve current Indigenous research practices. Rationale: Quilts have the capacity to tell a story. This workshop recognizes the importance of arts-based learning and aims to provide workshop participants with the opportunity to contribute to the creation of a quilt. Participants will be guided through discussions on Indigenous data sovereignty in Canada and around the world while having the opportunity to contribute their own understandings of the challenges and successes around data, sovereignty, and governance. The quilt squares that are made during this workshop will contribute to the creation of a community engagement story quilt.

Author Names:
Robyn Rowe
Deficit-Based Indigenous Health Research and the Stereotyping of Indigenous Peoples

Sub-topics that align with the overall theme of equity:
Research Reform & Education

Sub-topics: Equity

Author name(s) title(s) and email:
Sarah Hyett, Dr. Chelsea Gabel, Dr. Stacey Marjerrison, Dr. Lisa Schwartz; sarahlhyett@gmail.com

Abstract:
Health research tends to be deficit-based by nature; as researchers we typically quantify or qualify absence of health markers or presence of illness. This can create a narrative with far reaching effects for communities already subject to stigmatization. In the context of Indigenous health research, a deficit-based discourse has the potential to contribute to stereotyping and marginalization of Indigenous Peoples in wider society. This is especially true when researchers fail to explore the roots of health deficits, namely colonization, Westernization, and intergenerational trauma, risking conflation of complex health challenges with inherent Indigenous characteristics. In this poster we explore the incompatibility of deficit-based research with principles from several ethical frameworks including the Tri-Council Policy Statement (TCPS2) Chapter 9, OCAP® (ownership, control, access, possession), Inuit Tapiriit Kanatami National Inuit Strategy on Research, and Canadian Coalition for Global Health Research (CCGHR) Principles for Global Health Research. Additionally, we draw upon cases of deficit-based research and stereotyping in healthcare, in order to identify how this relates to epistemic injustice and explore alternative approaches. Full open access paper can be found here: https://www.cjb-rcb.ca/index.php/cjb-rcb/article/view/136.

Author Names:
Sarah Hyett

Presenter Title:
Danielle Bourque Bearskin, R.N., MScN
Jillian Roberge, M.D. PGY4 Emergency Medicine

Abstract:
Culturally responsive curriculum in medical and nursing education is required to ensure that future healthcare providers, Indigenous and non-Indigenous, are prepared to become key agents of change to improve the health of Indigenous Peoples within mainstream settings and to reform the ingrained discriminatory healthcare practices and structures. Following the TRC Calls to Action (2015), there has been a growing demand for Indigenous Health and/or Cultural Safety content and training for trainees in health professions. In some cases, governing bodies such as the Royal College of Physicians and Surgeons have mandated that all trainees must complete training on this topic. Many educational frameworks are available to improve knowledge, skills, and the understanding of culturally based care. However, there are many barriers for the inclusion of Indigenous health or cultural safety content into medical and nursing education. This panel will discuss current initiatives in Indigenous Health and Cultural Safety in nursing and Post-graduate medical education. There will be discussion on the challenges inherent to developing and delivering this content as an Indigenous health provider and trainee. Lastly, dialogue regarding the barriers and possible solutions will be provided to ensure this work can continue moving forward in a good way that does not reproduce colonial discourses within medical and nursing education that are harmful to Indigenous peoples overall health.

Objectives of the Session:
• Understand the current landscape of Indigenous Health/cultural safety in nursing and medicine.
• Highlight the complexities of integrating Indigenous health/cultural safety content into the colonial and academic environment in which medical and nursing education exists
• Appreciate the challenges inherent to developing and delivering Indigenous health education/cultural safety curricula as an Indigenous person
• Describe and discuss the barriers and possible solutions for integrating of Indigenous health/cultural safety curricula in medical and nursing education.
Indigenous Student Journeys becoming a BScN prepared Nurse: insights on process & the impact of relationships on conducting Community Based Participatory Research.

Author Name:
Priscilla Patterson Professor- McMaster Mohawk Conestoga Collaborative BScN Program, School of Health, and Adjunct Professor, McMaster University, School of Nursing; Indigenous Mentor
Dr. Olive Wahoush Associate Professor Nursing, Faculty of Health Sciences McMaster University

Abstract:
This study began with a new initiative between the Six Nations Polytechnic (SNP) community, Mohawk College(MC) and McMaster University (MU) which built on a long standing partnership between SNP and Mohawk College for the Practical Nursing with Aboriginal Communities programme. This presentation will focus on the processes used to follow the 2012 cohort of Indigenous students in their journeys through the McMaster Mohawk RPN-BScN programme from Sept 2012. Classes for the RPN-BScN programme were scheduled at both SNP and the Institute of Applied Health Science (IAHS MU campus).

Preliminary findings will be shared with attendees and potential sharing activities as the study is completed will be discussed. Ethics approvals obtained from Mohawk College, Six Nations Council and McMaster University.

Longitudinal information and insights were shared by students as they progressed through the programme and by faculty and staff in the programme. Classes were hosted at SNP & at the Institute of Applied Health Sciences (MC on MU campus). The broad study aim is to inform future nursing education programming, locally, provincially and nationally.

Key assumptions included that Innovative Educational Partnerships and collaborative relationships are needed to build capacity and to increase Indigenous Health Care Providers prepared with a BScN degree.

Bridging the Gap of Health Inequity: The role of the Indigenous Patient Navigator

Sub-topics that align with the overall theme of equity:
Health system reform and determinants of health

Sub-topics: Equity

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Dr. Andrea Baumann, Dr. Bernice Downey, Dr. Ruta Valaitis, Dr. Amy Montour, Ms. Pat Mandy

Abstract:
Background: Canada’s healthcare system is complex and as a result patients and families experience fragmentation of services. Indigenous populations experience increasingly, disproportionate health disparities compared to non-Indigenous populations. Patient navigation is known as a patient-centered approach to enable and empower individuals and families to overcome health and social service barriers. Although the Indigenous patient navigator (IPN) role has been implemented in many countries to address Indigenous health and social inequities, no international reviews have been completed to date, necessitating this scoping review.

Methods: A scoping review of the literature was conducted following established methods to map the current state the IPN role internationally within Canada, United States, Australia and New Zealand. To be included, studies were published in the English language, between 1990 and 2019, and include the role of an IPN addressing the health and social barriers and enablers experienced by Indigenous community members accessing Western biomedical healthcare. Results: Fourteen articles were selected for review including qualitative, quantitative, and mixed methods studies. The majority of articles focused on the specific healthcare setting of cancer care. All articles were based in North America, the majority within the United States. Role ambiguity was identified within the description of the IPN role. The major themes surrounding the IPN role included logistics, support, communication, health assessments, document completion, and recruitment. Conclusion: A need exists for further research of the IPN role. This review provides a starting point to work with Indigenous communities and reinforce IPN roles to bridge the gap of health and social inequities experienced by Indigenous community members. Objectives: Discuss the literature pertaining to the role of the Indigenous patient navigator internationally including key characteristics and major themes of the role. Describe the history of the Indigenous patient navigator role in Canada.

Author Names: Justin Wurtzel
Mending Broken Hearts (Odayimman): Weaving Together Indigenous Heart Health and Wellbeing Through Storytelling

Sub-topics: Indigenous health, Indigenous women’s health, cardiovascular disease and stroke, storytelling methodology, Indigenous ways of knowing, community-based participatory research

Primary Author Name: Dr. Bernice Downey

Author Name(s), Title(s) and email: Bernice Downey BScN PhD Medical Anthropologist Assistant Professor, School of Nursing & Dept. of Psychiatry and Behavioral Neurosciences Indigenous Health Lead, Faculty of Health Science, McMaster University Research Chair, Indigenous Women’s Heart & Brain Health Heart & Stroke Foundation & Canadian Institute of Health Research A/Director, McMaster Indigenous Research Institute downebe@mcmaster.ca

Abstract: Indigenous women experience a double burden of disparity in cardiovascular health, with higher mortality than both men and non-Indigenous women. The purpose of this Heart and Stroke Foundation of Canada funded Research Chair in Indigenous Women’s’ Heart & Brain Health Heart & Stroke project titled Mending Broken Hearts is to understand, from a culturally relevant, gender-based perspective, how Indigenous women’s heart health has been negatively impacted by various cultural and social factors and to work to remedy this problem through training programs. This project aims to engage Indigenous women, communities, advocates, Traditional Healers and Knowledge Holders, and non-Indigenous health care providers working with Indigenous populations. We will be discussing the background of the Mending Broken Hearts project and our goal of centering Indigenous knowledge around health and wellness in therapeutic relationships.

Learning Objectives: To learn from the experiences of the Mending Broken Hearts project thus far, to gain an understanding of the purpose and utility of storytelling as an Indigenous research methodology, to consider Indigenous ways understanding health and wellbeing with a focus on cardiovascular health.

Water is our medicine: Preliminary results of water quality testing and impact on health and maternal health, Six Nations. GWF Co-Creation of Indigenous Water Quality Tools

The womb is the first environment and the life she carried is in water. A critically important indicator of their quality of life and wellness requires access to clean water. Co-creation has found significant concerns about barriers to environmental/food and water security are determinants of health and thus major stressors that affecting overall wellness, of specific concern noted by SN is maternal health. The GWF transdisciplinary team led by Indigenous knowledge includes health, ecosystem assessment, water testing, governance and traditional ecological knowledge with gender considerations. The consults heard from community alarming levels of water stressors community is experiencing, health services and Six Nations leads identified each aspect of the science in this project. Our project’s main objective is to sustain strong, healthy First Nations, and our co-creation health team incorporates Onkwe:Honwehneha (Haudenosaunee ways of knowing) through reinvigorating ancient practices, modalities of kinship and mentorship, and incorporating Haudenosaunee-identified metrics of wellness: the mixed methods explores (1) access to clean water, (2) eco-system sustainable living, (3) cultural knowledge, (4) teachings/stories of gender and sex, (5) land-based healing and learning, connection and expression through arts. Empowering the community through developing data, survey’s, water source testing, well and tap water testing and implications on health with a newly identified focus on maternal health. The preliminary results from the 18 months of data collections will be presented and Julie Wilson, Director of Six Nations Birthing Centre will bridge the current findings into their research on impacts of home births, newborns born to homes with no access to clean water. Dr. Lannoy will provide the engineering teams findings along with phd candidate Sarah Duignan’s pilot survey on water and health findings. The workshop will address methodologies and how community is leading the science.

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Dr. Charles de Lannoy, Department of Chemical Engineering
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