

# The Rural Coordination Centre of BC's Response to the Truth and Reconciliation Commission of Canada's Calls to Action

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Progress Report  
Quarter 4, 2021



RURAL COORDINATION CENTRE OF BC

Rural Coordination  
Centre of BC







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## INTRODUCTION

*TRUTH AND RECONCILIATION  
COMMISSION OF CANADA: CALLS TO ACTION*

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Throughout the 15th century, European states and Christian churches came together to lead a powerful global migration. Lands belonging to Indigenous peoples around the world were stolen, political order was brutally forced upon them, and children were taken to learn new values and cultural practices outside their communities. The Truth and Reconciliation Commission of Canada was established in 2008 to accurately report the history of colonialism within our nation, and our government's involvement in the implementation of church-run Indigenous residential schools. Over its six years in operation, the Commission held events and hearings to ensure the proper collection of statements from coast to coast. Nearly 7,000 statements were collected from survivors, their family members, and community members. These stories and statements helped form the Truth and Reconciliation Commission of Canada: Calls to Action and will remain permanent collection pieces in Canadian residential school history.

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# MESSAGES

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## Message from the RISE (RCCbc for Inclusion, Social Justice, and Equity) Reference Group

The Rural Coordination Centre of BC (RCCbc) advocates for greater equity in rural, remote, and Indigenous healthcare in British Columbia, and supports rural health education improvements through collaboration, communication, and ongoing relationship building. As a network that closely collaborates with British Columbia's Indigenous peoples, we recognize the need to develop a progress report to keep us, and our network partners, accountable to the Truth and Reconciliation Commission of Canada's Calls to Action to advance reconciliation.

To create this progress report, which we will assess on a quarterly basis, we identified the Calls to Action that align with RCCbc's mandate. We then asked our healthcare leaders and staff to reflect on, and assess, how their current work contributes to these Calls to Action. In addition to learning about the considerations and contributions that our teams have made so far, we also discovered areas of work that still need our attention.

Moving forward, it is crucial that we embed our commitment to reconciliation into RCCbc's vision, mission, and values. We must also proactively incorporate the identified Calls to Action into the planning and development stages of our projects. In addition, it is imperative that we continue to call ourselves and our network partners in, assess the frameworks for our work, ask tough questions, and lean into any discomfort that the reconciliation process presents.

Under the guidance of the RCCbc for Inclusion, Social Justice and Equity Reference Group, we will continue to advocate for reconciliation and support others seeking further education and guidance.

Mussi cho,

Drs. Todd Alec, Terri Aldred and Robert Woollard

## Message from RCCbc's Executive Directors

The Rural Coordination Centre of BC apologizes for any involvement that we, and our network of rural physicians, may have had in the perpetuation of systemic racism, particularly, anti-Indigenous racism in British Columbia. We are committed to actively participating in reconciliation, and unravelling systemic racism in our province, with a focus on rural health. Actions speak louder than words, and our current and anticipated actions toward reconciliation are summarized on the following pages. We are learning as we go, in partnership, and welcome the opportunity to be held accountable.

Dr. Ray Markham and Leslie Carty



# Calls to Action

## How is the Rural Coordination Centre of BC responding to the 94 Calls to Action?

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We call upon all levels of government to fully implement Jordan's Principle, which ensures that all First Nations children living on- and off-reserve can equitably access any government-funded service and not be denied a health benefit while governments determine who should pay.

- Our Rural Site Visits project provides resources about Jordan's Principle to healthcare and First Nations contacts at meetings in their communities.

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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.

- Our website acknowledges traditional territory and community names under the Rural Practice Subsidiary Agreement.
- Our foundational values, such as relationship building and collaboration, embody articles in the United Nations Declaration on the Rights of Indigenous Peoples, recognizing their basic human rights and their right to self-determination.
- Our statement on anti-racism, in response to the Indigenous-specific racism rooted in the healthcare system and witnessed during our community visits under the Rural Site Visits Project, articulates RCCbc's values to our team, partners, and the public.
- Our Rural Personal Health Record Project acknowledges the legacy of colonization on Indigenous health and creates space for First Nations people to co-design the Rural Personal Health Record so it reflects their expressed aspirations and rights.

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We call upon the federal government, in consultation with Aboriginal peoples, to establish measurable goals to identify and close the gaps in health outcomes between Aboriginal and non-Aboriginal communities, and to publish annual progress reports and assess long-term trends. Such efforts would focus on indicators such as: infant mortality, maternal health, suicide, mental health, addictions, life expectancy, birth rates, infant and child health issues, chronic diseases, illness and injury incidence, and the availability of appropriate health services.

- Our Rural Site Visits project values and includes Indigenous community visits. It shares feedback from these visits with community members and policymakers, and publishes research about racism and cultural safety in the healthcare system.
- Our Rural Surgical and Obstetrics Network meaningfully engages with First Nations communities to understand their needs and preferences for closer-to-home surgical services, and collects feedback and data on health indicators and community members' surgical experiences.
- Our RISE (RCCbc on Inclusion, Social Justice, and Equity) Reference Group encourages and invites collaboration with internal and external network groups within RCCbc. It also develops and encourages the use of tools, such as the Conceptual Lens and Evaluation Matrix, to support our network and projects in elevating Indigenous health equity.
- This document, which outlines our response to the Truth and Reconciliation Calls to Action, helps hold our network and projects accountable.

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- Our 2019 Memorandum of Understanding with the First Nations Health Authority formalizes our commitment to collaborating with First Nations to redesign, transform, and innovate health service delivery and improve healthcare access amongst rural First Nations.
- Through the Real-Time Virtual Support project, numerous virtual "pathways" provide healthcare providers in rural, remote, and Indigenous communities with clinical support to deliver quality, culturally safe healthcare services to patients. Several other virtual pathways provide Indigenous people with direct access to culturally safe primary healthcare, mental health, and substance use services. The project monitors which, and how often, communities use its pathways, and collects feedback from pathway callers to improve services.

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In order to address the jurisdictional disputes concerning Aboriginal people who do not reside on reserves, we call upon the federal government to recognize, respect, and address the distinct health needs of the Métis, Inuit, and off-reserve Aboriginal peoples.

- With health authorities, RCCbc offers team members San'yas Indigenous Cultural Safety Training, which enhances self-awareness and promotes positive partnerships between healthcare providers and Indigenous people.
- Our 2019 Memorandum of Understanding with the First Nations Health Authority formalizes our commitment to collaborating with First Nations to redesign, transform, and innovate health service delivery to improve healthcare access amongst rural First Nations.
- Virtual physicians with the Real-Time Virtual Support project collaborate with Indigenous community providers to tailor patient care, based on geography, resources, and support networks, and to help patients and community providers navigate the health system. The project also offers direct access to culturally safe primary healthcare, mental health, and substance use services to Indigenous people across British Columbia.

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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.

- Through our Partnership Pentagon Plus model, RCCbc strives to demonstrate the value of traditional healing as part of First Nations healthcare service delivery through, for example, the inclusion of Tsow-Tun Le Lum Healers at the Provincial Healthcare Partners Retreat in 2019, and the BC Rural and First Nations Health and Wellness Summit in 2020.
- Our Rural Site Visits project team includes an Indigenous Research Assistant who integrates Indigenous ways of thinking, knowing, and being, and refines the project's research by using a Two-Eyed Seeing approach.
- Our Specialists, Sub-Specialty, Indigenous and Funding for Innovation project provides funding and resources for rural physicians to engage with, learn from, and heal relationships with Indigenous communities. The Mental Health Alternative Therapies Indigenous Healing educational series on Cortes Island is an example of this work.
- We champion and support the University of British Columbia's Indigenous Family Medicine Residency Training, which teaches residents the value of traditional healing within a western healthcare context.

# Calls to Action

## How is the Rural Coordination Centre of BC responding to the 94 Calls to Action?

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We call upon all levels of government to:

i. Increase the number of Aboriginal professionals working in the health-care field.

- As part of our Indigenous-led Health Initiatives, the Indigenous Physicians Network holds an annual Indigenous Medical Education Gathering with Elders, knowledge keepers, and traditional healers for Indigenous students, residents, physicians, and allied health professionals from the University of British Columbia's Faculty of Medicine and the provincial communities of practice.

ii. Ensure the retention of Aboriginal health-care providers in Aboriginal communities.

- The Real-Time Virtual Support project increases access to culturally safe virtual clinical support for Indigenous healthcare providers and non-Indigenous healthcare providers working with Indigenous patients in rural and remote areas of British Columbia. These providers report greater confidence in caring for patients in challenging situations as a result of having instant access to friendly, culturally safe virtual support.
- Through the Indigenous Physicians Network, experienced Indigenous physicians provide mentorship and outreach opportunities for Indigenous medical students and residents.
- We champion and support the University of British Columbia's Indigenous Family Medicine Residency Training, which teaches residents the value of traditional healing within a western healthcare context.

iii. Provide cultural competency training for all health-care professionals.

- Our Core Committee Physicians strive to better understand, integrate, and practice cultural safety with support from Dr. Terri Aldred, who leads Indigenous Health initiatives and cultural safety workshops at RCCbc and our BC Rural Health Conference.
- RCCbc supports the Rural Doctors' UBC Chair in Rural Health, which enabled students in the Northern Medical Program to attend Indigenous Youth Science Camp in Northern British Columbia.
- With health authorities, RCCbc offers team members San'yas Indigenous Cultural Safety Training, which enhances self-awareness and promotes positive partnerships between healthcare providers and Indigenous people.
- As part of our work on the Rural Site Visits project, Cultural Safety Facilitator, Harley Eagle delivered a four-session workshop on cultural safety, competency and racism to team members in the Rural Site Visits Project and RISE Reference Group in 2021.
- RCCbc supports mentorship and outreach opportunities for medical students and residents, including trips to Indigenous communities in the North to experience in-community rotations.
- Under the Indigenous Patient-Led Continuing Professional Development project, led by University of British Columbia Rural Continuing Professional Development, RCCbc supports the co-design of Nation-led cultural safety and humility learning opportunities for rural healthcare providers. The project also co-designs learning sessions for rural coaches and mentors with the Coaching and Mentoring Program, Rural Surgical and Obstetrics Network, Rural Obstetrical and Maternity Sustainability Program, and Real-Time Virtual Support project.
- Our Real-Time Virtual Support project provides virtual physicians with cultural safety and humility learning opportunities to embed the provision of culturally safe care as a core skill and to encourage ongoing learning.

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We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism.

- Our Core Committee Physicians strive to better understand, integrate, and practice cultural safety with support from Dr. Terri Aldred, who leads Indigenous Health initiatives and cultural safety workshops at RCCbc and our BC Rural Health Conference.
- With health authorities, RCCbc offers team members San'yas Indigenous Cultural Safety Training, which enhances self-awareness and promotes positive partnerships between healthcare providers and Indigenous people.
- Our Rural Continuing Medicine Education Community Program provides funding and resources to eligible Rural Subsidiary Agreement communities for groups of local physicians to receive continuing medical education/continuing professional development opportunities, including cultural safety training, closer to home.
- As part of our work on the Rural Site Visits project, Cultural Safety Facilitator, Harley Eagle delivered a four-session workshop on cultural safety, competency and racism to team members in the Rural Site Visits Project and RISE Reference Group in 2021.
- Our Compassionate Leadership Training Program, developed in partnership with and delivered by A-in-chut Ventures, equips rural healthcare providers with compassionate leadership skills, which connect people, demonstrate empathy to others, and add no additional harm.
- Under the Indigenous Patient-Led Continuing Professional Development project, led by University of British Columbia Rural Continuing Professional Development, RCCbc supports the co-design of Nation-led cultural safety and humility learning opportunities for rural healthcare providers. The project also co-designs learning sessions for rural coaches and mentors with the Coaching and Mentoring Program, Rural Surgical and Obstetrics Network, Rural Obstetrical and Maternity Sustainability Program, and Real-Time Virtual Support project.
- Though Rural eMentorship BC at the University of British Columbia, RCCbc implements a cultural safety training component for its mentors, based on content grounded in decolonization and anti-racism with emphasis on exploring power dynamics and privilege.

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