



Community as teacher: Health professional students learn Cultural Safety from an Aboriginal community

*An interprofessional, experiential, cultural
immersion program for UBC students and
a partnership of the Division of Health
Care Communication and Xyolhemeylh
2006-18*



Why is this program needed?

Communications between health care professionals and Aboriginal people have long been identified as contributors to poor health outcomes. Associations between history, time, and trust create some of these difficulties. When we asked Aboriginal people for a solution they said health professionals should “come and spend time with us”. Cultural immersion for health professional students allows the Aboriginal community to become their teacher. (*Towle et al 2006)

Who is involved and what happens?

Our partnership with Fraser Valley Aboriginal Children and Family Services Society (Xyolhemeylh) since 2006 resulted in a unique educational model – a variation on community-based education. UBC students learn alongside Aboriginal youth at summer camps led by Elders, youth workers and cultural leaders. UBC students learn *cultural safety* and about developing culturally-appropriate relationships.

Camps are held on the Chehalis Indian Reserve and neighboring communities, in a Longhouse or outdoors and provide a learning environment unlike classrooms and clinics. Over 3 or 4 days students experience the lifestyles of the Stó:lō people and learn about themselves and First Nations.

At the Family camp traditional teachings about family and parenting skills are shared with Aboriginal families. The Youth camp for

12-19 year olds provides cultural teachings through traditional activities, sports and games. Two camps are coming-of-age celebrations held for boys (‘Warriors’) aged 10-16 and girls (‘Natural changes’) aged 10-16 to teach self-discipline, traditional responsibilities and customs.

UBC students attend in groups of up to 6. Their role is to learn through drumming, singing, canoeing, Longhouse ceremonies, talking with Elders and interacting with the youth. In exchange they help with chores and facilitate health-related discussions on topics chosen by the participants. Topics have included nutrition, body image, hygiene and sexual health, and a modification of our ‘Talk to Your Doc’ program, facilitated by medical students in BC high schools, to help adolescents develop independent and active relationships with health care providers.

What is cultural safety?

Cultural safety is a concept from New Zealand nursing education that emphasizes self-awareness on the part of health professionals, to understand how their own culture (both personal and professional) affects practice. **Key features** of cultural safety are:

- awareness and respect for cultural differences
- self-reflection and analysis of power inequalities
- trust
- is defined by the recipient/patient/client

Programs & Number of Students 2006-18

Dental Hygiene	5
Dentistry	5
Land and Food Systems / Dietetics	7
Medicine	78
Midwifery	7
Nursing	21
Occupational Therapy	13
Pharmacy	35
Physical Therapy	2
Psychology	9
Public Health	8
Social Work	13
Speech-Language Pathology	3
Other (Vocational Rehab, Science, Respiratory Therapy)	10
Total	212

2012 NATIONAL COMMUNITY SERVICE LEARNING AWARD
from the
J.W. McConnell Family Foundation to recognize successful community initiatives supported by robust community service-learning programs

VIDEO: *Aboriginal Community as Teacher,*

<https://pcpe.health.ubc.ca/sites/default/files/videos/communityteacher.mov>



Patient & Community
Partnership for Education



What difference does it make?

Student learning of cultural awareness, sensitivity and safety has been revealed through interviews and focus groups with many students, camp leaders, Elders and campers.

UBC students were grateful for first-hand encounters with Aboriginal culture. The experience challenged the ideas they had formed from health statistics, media and treating patients. They became aware of cultural differences, their own values, beliefs, biases and prejudice, and underlying reasons for distrust of health professionals. Some were inspired to choose a career focusing on

Students: *"I have gained a heightened appreciation for the interconnectedness between health and all facets of our life. Our health is intimately related not just to our physical, mental, emotional, and spiritual self, but broadly extends to our communities, ancestors, and cultural traditions, the land we live on, and all living things connected to it."* [Medical Student]

"This camp has given me a great opportunity to interact with Aboriginal individuals and communities as well as foster families. I appreciated and feel privileged to have met the people in the camp and learn about Aboriginal perspectives, worldviews, cultures, and traditions." [Social Work Student]

Many thanks to the Fraser Valley Aboriginal Children and Family Services Society (Xyolhemeylh) for welcoming UBC students to their camps. Special thanks to Natalie Brandon, Elaine Ryans, Teresa James, and Keith Points, who in their different roles have made it happen and given us their guidance and support.

We are especially grateful to the Elders, camp leaders and youth for teaching these future health care providers and to the students who took the opportunity to learn in the Aboriginal community.

The project *Doctor-Patient Communications in the Aboriginal Community: Development of Educational Programs* was supported via grants from the UBC Centre for Community Engaged Learning. In our preliminary findings, we found that UBC students are integral part of the summer camps and resonate well with the Aboriginal belief of being a life-long learner. The students' positive attitude towards learning shines well with their belief of continuously wanting to learn without asking for anything in return.

Publications & Presentations

****Kline C, Godolphin W, Chhina G, Towle A.** Community as teacher model: Health profession students learn cultural safety from an Aboriginal community. *Michigan Journal of Community Service Learning* 2013; 20(1): 5-17.

Bain M. International service learning in Canada: Lessons from a university-indigenous partnership. Presentation at the *International Association for Service-Learning and Community Engagement*, Omaha, Nebraska 2013 Nov.

***Towle A, Godolphin W, Alexander T.** Doctor-patient communications in the Aboriginal community: Towards the development of education programs. *Patient Education & Counseling* 2006; 62: 340-346

Bain, M. M. (2014). *Community-university engagement : case study of a partnership on Coast Salish territory in British Columbia* (T). University of British Columbia. Retrieved from <https://open.library.ubc.ca/cIRcle/collections/24/items/1.0165857> (Original work published 2014)

Features of this project have been presented at several international conferences. *Where's the Patient's Voice in Health Professional Education?* Vancouver 2005, ICCH-AAPP Chicago 2005, CPH Toronto 2007, AAMC-RIME Boston 2009, AMEE Vienna 2011.

Aboriginal health. Long-term follow-up interviews showed students retain their learning and apply it to practice.

Community members who led the camps were struck by the reciprocity of students and their desire to learn. They appreciated the respectful way students engaged with Elders and the good role modeling and mentorship they provided the youth. They valued the opportunity to share their culture with future health care providers. Young camp leaders were especially interested in the information about health careers. (**Kline et al 2013)

Community: *"Earning is through learning and that is what the UBC students are doing. Learning is a life-long process and for the UBC students to give their time to always want to know more is very good."* [Camp Elder]

"The UBC students all seem to want to be here, want to learn, and all want to know. I can't imagine not having the students being here because we're used to them being here." [Camp Parent]



Our Community-University partnership: The Aboriginal Student Community Learning Coordinator at the UBC Audiology and Speech Sciences would like to integrate the cultural camps into their course, AUDI 540: "Approaches to Speech-Language Pathology and Audiology for Peoples of First Nations, Métis, and Inuit Heritage." This immersive cultural learning experience is a great opportunity for students of the course to get a stronger understanding of Aboriginal culture. We are excited to further our relationship with the program and see what new opportunities we will create.

Future We aim to maintain this partnership, to find ways to formally recognize, honor and give credit to the community and participants, and we continue to develop the community-as-teacher model to include other community and patient groups.



Curious about our logo?

Designed for us by Sonny Assu, well-known artist, of the We Wai Kai First Nation (Cape Mudge). <http://sonnyassu.com/>