

Doctors at this Toronto hospital can now refer Indigenous patients to a traditional healer

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By [Megan Ogilvie](#) Health Reporter
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When Indigenous patients arrive at Women’s College Hospital they will see signs that traditional healing practices can be part of their care.

Indigenous artwork is incorporated into hospital spaces, while posters placed at elevators and along busy corridors explain how patients who identify as Indigenous can receive cultural support.

Smudging kits of sage and sweetgrass are easily available in the hospital’s main clinics.

And this year, the Toronto hospital has integrated Indigenous healing and wellness practices into its electronic medical record system.

This means doctors and nurses can now refer First Nations, Inuit and Métis patients to a traditional healer as easily as to a physiotherapist, dietitian or other health-care practitioner when planning followup care.

Dr. Lisa Richardson, strategic lead in Indigenous health at Women's College Hospital (WCH), calls the inclusion of Indigenous healing practices in the electronic medical record system a "substantive and meaningful" step toward reconciliation in health care.

"It's a recognition that Indigenous healing practices for First Nations, Inuit and Métis peoples are as important as the highest-quality biomedical care," she says. "The fact that we're doing this within a hospital demonstrates that we believe these systems can work alongside one another."

Respecting Indigenous knowledge and including access to Indigenous healing within a hospital is critical to breaking down the barriers Indigenous patients face in health-care systems, Richardson says.

Reports, research and harrowing accounts document the historical and ongoing racism and mistreatment against Indigenous people seeking medical care.

In 2020, Joyce Echaquan, an Atikamekw mother of seven, died of heart failure at a Quebec hospital while staff mocked her and failed to treat her medical condition. A coroner later ruled that racism was a contributing factor to her death.

That same year, a report from British Columbia found pervasive, systemic racism against Indigenous people in the province's health-care system. It included dozens of accounts from Indigenous people describing how racism and discrimination prevented them from getting care, harmed their health and exposed them to damaging stereotypes.

Studies also show health-care system inequities lead to poorer outcomes for Indigenous people.

"Often when Indigenous Peoples are within the health-care system they are getting a different level of care," says Richardson. "Unfortunately, it's not usually higher-quality care."

Women's College Hospital opened The Centre for Wise Practices in Indigenous Health in 2018. The centre's team of staff, including Indigenous clinicians, community leaders and knowledge keepers, aim to close the health-care gaps faced by Indigenous patients and their families.

A key component is educating the hospital's leaders, health-care workers and medical students in Indigenous world views and ways of knowing, Richardson says. This includes monthly sessions at the centre, during which staff learn about specific approaches to thinking about health and well-being, including mind, body, spirit and emotion, the four-direction model of health.

Clinical teams are also trained in how to handle smudging kits that have been placed in main hospital clinics and how to support patients who want to access the kits.

Throughout the hospital, visual cues help create an inclusive and safe space for First Nations, Inuit and Métis patients and their families, says Christine Monague, Indigenous peer support and relations advocate at WCH.

“The minute somebody walks in, they see the Indigenous artwork that’s in the lobby,” she says. “They see posters about traditional healing and my role as the Indigenous peer support and relations advocate who provides cultural supports.

“We also have an Anishinaabe name for our Centre for Wise Practices — Ganawishkadawe. The name in English translation is The Heart of the Fire.”

“We all tend to the heart of the fire,” says Kawennanoron Cynthia White, Elder-in-Residence and Traditional Healer at WCH. Kawennanoron means precious words in the Mohawk language.

“That’s the essence of the centre because we are bringing spirit back into health care.”



Monague says she supports First Nations, Inuit and Métis patients by being their advocate and offering emotional support.

When Indigenous patients and clients come to WCH from outside Toronto, Monague greets them at the main entrance to help them navigate the hospital. When patients need ongoing care, she helps them access other parts of the health system, including connecting those without a family doctor to primary care.

“The care that I provide, it starts the moment that we meet,” she says.

Monague will also go to appointments with patients to ensure they feel safe, and she attends and helps with ceremonies at The Centre for Wise Practices. Always, she offers patients who identify

as Indigenous the opportunity to go to the centre's lounge, where they have access to traditional medicines.

"I do this to help ground them," she says, noting she sees first hand the importance of providing sacred medicines to First Nations, Inuit and Métis patients. "They may want to grab tobacco to have a prayer and then take that out to the land or wherever they see fit. They may want to smudge to clear the negativity or clear whatever is happening that day so they can concentrate on their health journey."

Richardson says Monague helps Indigenous people who may feel anxious to enter a hospital because of historical or ongoing mistreatment.

"Seeing someone who looks like them, who understands their experience ... who will, if requested, accompany them to appointments and be there as if she is a friend or family member, this is so important," says Richardson, adding that Monague also helps educate and debrief staff. "I see her role as part of that system change."

White has been doing ceremonial work for almost 30 years. She joined the hospital one year ago and, like Monague, has seen patients who identify as Indigenous benefit from sacred medicines and traditional counselling.

She says her work with patients can involve their physical health, something directly tied to their medical issues, but can also focus on mental health, often with an aim to help them move forward in life. Part of White's role is to understand the root causes that may underlie medical symptoms.

"These root causes may or may not be addressed in any particular clinic in a hospital," White says. "When an individual reaches out to the centre from any of the departments where they are getting treated for their symptoms I first acknowledge their current challenges but then try to get at the heart of things."

For many patients, grieving ceremonies are an important part of their hospital care, says White.

"Grief can be one of one of the things that people have a great difficulty with," she says. "Losing cherished ones can upset their whole world, and people are so heavily caught in their grief, that day-to-day functions can be quite challenging."

"There are specific grieving ceremonies that enable the people to connect with their cherished ones in a very meaningful way that wouldn't ordinarily be available to them in hospitals."

That clinicians throughout WCH can refer First Nations, Inuit and Métis patients directly to The Centre for Wise Practices and to an Indigenous healer is a significant step toward Indigenous Peoples receiving high-quality health care inside a hospital, Richardson says. Patients wouldn't have to pay for these services.

As WCH takes further steps toward reconciliation, which includes recruiting more Indigenous doctors, staff and medical students, Richardson hopes to see other hospitals incorporate Indigenous healing practices into their electronic medical record systems.

“It represents structural change, where Indigenous Peoples and their knowledge — including that of a traditional healer — is being formally recognized within a non-Indigenous health-care system.”

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