When was the last time you saw 70 adults in the healthcare sector acting like beached whales, vocalizing a volcano, or passing energy around a circle?

Innovative games and creative theatre are being used to help improve addictions treatment. If there’s one thing participants learned at Closing the Gap: Indigenous Health Innovations Forum in May 2016, it was that innovation is all around us, often in simple things like listening and building relationships.

According to one participant, “interactive activities reinforce the point that innovation is not about re-inventing but about the creative process, and that learning and creating demand we move beyond thinking to doing.” Nike may own the brand “Just do it”, but it was a common sentiment at the Closing the Gap forum—we need to just start doing.

In partnership with the Indigenous Peoples’ Health Research Centre, the Johnson-Shoyama Graduate School of Public Policy, and the First Nations University of Canada, The Conference Board of Canada’s Saskatchewan Institute convened the forum. The event was built around three ideas: sharing innovative policies and programs that are currently helping to improve Indigenous health outcomes; focusing on the importance of including Indigenous knowledge, understanding, and methods in healthcare delivery; and creating action advice on how to incorporate Indigenous health innovations into our healthcare system.
“We call upon those who can effect change within the Canadian healthcare 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.”


The time is right to discuss health innovation rather than disparity. The Truth and Reconciliation Commission’s Calls to Action (quoted above) include actions aimed at increasing the inclusion of Indigenous culture and knowledge into healthcare in Canada.

What does “just do it” look like in the context of Indigenous health? Closing the Gap demonstrated the need to move beyond just providing a platform for sharing Indigenous innovations. Sharing is an important and required step, but taking learning into health delivery is critical. Opportunities to tackle health inequities through the Indigenization of policy exist. Programs and activities exist. Participants saw the positive impact accruing from community-based and led health interventions, and how community-based participatory research has transformed and enhanced healthcare delivery for Indigenous people.

Key to understanding Indigenous health policy is the need for a paradigm shift. The current Western paradigm has failed Indigenous peoples, as it is reactionary rather than preventive, requires communities to compete for scarce resources, and forces the fragmentation of issues in order to receive research and program funding.

Indigenous leadership is leading a new paradigm. All Nations Healing Hospital¹ and Leading Thunderbird Lodge² demonstrate that success can be achieved by placing Indigenous voices and culture at the heart of healthcare. As Dr. Colleen Dell of the University of Saskatchewan reminded participants,³ conceptualizing culture as intervention means incorporating Indigenous knowledge and culture into healthcare delivery—creating whole being solutions that include spiritual, emotional, mental, and physical well-being.

Closing the Gap provided additional insights that can contribute to a paradigm shift and move people to action:

- **Improving access to improve outcomes**: Increase capacity within Indigenous communities (like what is occurring in nursing education, e.g. the University of Saskatchewan Community of Aboriginal Nursing),⁴ adjust health delivery capacity to reflect unique circumstances (e.g. the Northern Inter-Tribal Health Authority’s Primary Care Nursing Stations),⁵ employ innovative technologies (e.g. telehealth, portable fibroscan), and support access to home-based treatments (e.g. Regina Qu’Appelle Health Region’s home dialysis program).⁶

- **Relationship-building**: Take the time to build trust with Indigenous communities and understand the needs of the individuals and communities being served.

- **Client-centred care**: Respect the culture and the supporting health communities of those being treated, allow Indigenous people to have ownership of their disease, and ensure that their treatment works for them (e.g. Canadian Virtual Hospice’s culturally centred care).⁷

- **Non-Indigenous allies**: Non-Indigenous allies can help by lobbying on behalf of Indigenous communities. They have the social and political capital to lobby, while Indigenous communities often do not.

- **Indigenous methodologies**: Research should be strengths-based and should avoid pathologizing its subjects. Further, it should focus on solutions rather than continuing to discuss problems.

Inspiration abounds after forums and conferences. The challenge is, what do we do with it? Indigenous knowledge holds that traditional culture is vital for client healing and wellness. Beyond the examples shared, how we translate this knowledge into action will be key. ■

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¹ File Hills Qu’Appelle Tribal Council, All Nations Healing Hospital, fhqtc.com/entities/all-nations-healing-hospital (accessed June 10, 2016).
³ Dr. Colleen Dell, Addiction Research Chair, www.addictionresearchchair.ca (accessed June 10, 2016).
⁵ Northern Inter-Tribal Health Authority, NITHA, nithacom.sasktelwebhosting.com (accessed June 10, 2016).