

# Moving Past the Past

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# Disclosures

- Received honoraria as proctor for Hologic and as a presenter for Bayer
- Member of Esdilagh Nation

# Objective:

- Describe historical and cultural context contributing to problematic substance use among First Nations

# WHO Human Development Index

- A quality of life calculation
- Canada ranks 6<sup>th</sup> out of 187 countries
- First Nations data calculated.... Result: 68<sup>th</sup>

# The Past and Present

- Aboriginal peoples were/are active participants in history e.g.. Treaties
- Land title was/is fought over
- Intergenerational trauma did/does affect Aboriginal people
- These items disproportionately affect women

# Trust

- “There have been centuries of formal agreements between European governments and First Nations. They were initially conducted in the spirit of friendship and cooperation, but later became centred on land ownership and resource extraction. Since they have been repeatedly dishonored, there is an environment of mistrust in First Nations towards governments, their representatives, their policies and anyone perceived to have authority.”



# Reservations

- 1876 *Indian Act*
- Idea of reserve born
- Land selected for reservations were selected for a reason
- Allowed for more control to be exerted over First Nations: passes, not allowed to own property, no voting rights, patriarchal inheritance... to promote assimilation

# Relocations

- Inuit relocated to high Arctic Grise Fiord and Resolute Bay to establish Canadian sovereignty in 1950s



# Residential Schools

- “ultimate tool in assimilation”
- “kill the Indian in the child”
- Harrowing experiences of physical, sexual, mental, cultural and spiritual abuse
- Intergenerational trauma
- Impact on the transfer of traditional knowledge surrounding childbirth and raising a family

# St. Joseph's Mission, Williams Lake







# The Sixties Scoop

- Amendment to Indian Act after 1950:
  - Federal funding now offered for each Aboriginal child apprehended by child protection agency
  - BC:
    - 1% of children in care at 1955
    - 34% of children in care at 1964

# Forced Sterilizations

- 1937-1972
- Alberta and BC

What was the end result?

# Intergenerational trauma

*Definition:* entering this world as Aboriginal with the burden of centuries of suffering behind you

Foundation in culture and ties to land fractured

Promises were continually broken by government

Families were fractured

What kinds of barriers exist for women?

# Poverty

- Insecure employment
- 35% of Aboriginal women live in poverty
- Monies garnished from Aboriginal lands fuel Canadian economy without benefitting communities
- Infrastructure/housing insufficiencies
- Food inaccessibility

# Urbanization

- Mobility to urban settings spurred on by search for opportunity
- Isolated
- Vulnerable

# Gender Inequity

- Weakened position from intergenerational trauma
- Don't know how to mother
- Less empowered position in society

# Why turn to substance use?

- Substance use for mood altering properties
- Afforded a “way out” of difficult or uncomfortable situations
- Learned coping mechanisms morphed with time  
“intergenerational trauma”
- Depression also linked with increased tobacco, alcohol and drug use

# How does this affect my patient?

- Need to provide culturally safe care....
- What does this mean?

# Cultural Safety

- Continuum of:
- Cultural awareness → cultural competence → cultural safety →→ cultural humility
- Aware of differences in culture → understanding of cultural issues → recognizing impact of one's own culture on care → progressive learning about culture and treat each other as equals

# Structural violence

- **Structural violence refers to systematic ways in which social structures harm or otherwise disadvantage individuals**
- **We need to look for and eradicate this**

# To strive for - Reproductive Justice

- “The complete physical, mental, spiritual, political, economic, and social well-being of women and girls...will be achieved when women and girls have the economic, social and political power and resources to make healthy decisions about our bodies, sexuality and reproduction for ourselves, our families and our communities in all areas of our lives.”

# Reference

1. Health Professionals Working With First Nations, Inuit, and Métis Consensus Guideline. *J Obstet Gynaecol Can* 2013;35(6 suppl):S1-S52.
2. Sexual and Reproductive Health, Rights, and Realities and Access to Services for First Nations, Inuit, and Metis in Canada. *J Obstet Gynaecol Can* 2011;33(6):633-637.

