



*An eagle feather is significant to many Indigenous peoples. One Squamish Nation Elder told me one story about why we may hold a feather – because Eagle flies up so high it looks down and sees all of humanity as one, cannot see our various nations or small differences, Eagle just sees us as **one** people. When we hold a feather, we remind ourselves of that perspective, and can speak with respect and honesty to each other like the family that we all are.*
– Aaron Nelson-Moody / Tawx’sin Yexwulla, Artist

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Indigenous Racism in BC Health Care: An Apology and Commitment to Action

As 11 Health Regulatory Colleges, we govern more than 21,000 professionals who provide health services that Indigenous peoples access and rely on both in the public health care system and in the community. These health care professionals provide services in First Nations health centres, hospitals, rehabilitation centres, long term care settings, primary care clinics, multi-profession private clinics, schools, and many other environments.

The [In Plain Sight](#) report, published in November 2020, provides evidence of continued widespread stereotypes, discrimination, racism and abuse experienced by Indigenous peoples accessing and receiving health-care services. The report illustrates how the current health-care system continues to limit safe access to health-care treatment and negatively affects the health and wellness of Indigenous peoples—Indigenous women and girls being disproportionately impacted.

We recognize that several months have passed since the report was first published. Our communication comes now with the benefit of cumulative and collective learning to be intentional and self-reflective on our personal and systemic biases that are preventing Indigenous peoples from accessing and receiving safe health-care services.

As the leaders of health regulatory colleges in British Columbia, we respectfully and humbly apologize to Indigenous peoples (First Nations, Métis, and Inuit), communities and registrants of our respective Colleges who have experienced and suffered from racism while engaging with our organizations or with the health professionals we regulate.

We hope that this apology and commitment to action can be the start of a new journey to restore our relationship and enable collaborative work toward continued reconciliation and healing.

Our mandate is to protect patients/clients and the public by ensuring that the professionals we regulate provide ethical, safe, and quality care. We have evidence that we have fallen short in meeting this responsibility and recognize we must ensure that Indigenous people are equally heard and served as part of fulfilling this role. Our pledge now is to become anti-racist and support the health professionals we regulate to do the same.

It is through consistent, concrete actions and a “speak-up culture” that the rights of Indigenous peoples will be upheld, and racism eliminated from the health-care system. We are committed to undertaking a

journey to rebuild our relationships with Indigenous peoples through our anti-racism actions. Part of that journey means taking specific actions and being accountable, as individual leaders, within our organizations and as part of the system which has created and perpetuated these issues.

We know that we have a lot to learn and that it may not always be comfortable or easy. We commit to being guided by Indigenous Elders, Knowledge Carriers, and professionals; the recommendations contained in the *In Plain Sight* report; and by the principles of respect, dignity, and equitable health care for the Indigenous peoples in this province.

What you can expect from us collaboratively

We are committed to, and recognize the importance and value, of working together to engage in the work of anti-racism and ultimately, improve Indigenous wellness and health.

- As members of the [BC Health Regulators \(BCHR\)](#), we will continue to participate in annual Cultural Safety & Humility (CSH) training to expand our individual and collective learning.
- We commit to collaborate with BCHR to develop a “regulator’s toolkit”, composed of items that assist regulators with the development and implementation of a mandatory Indigenous Cultural Safety and Humility (ICSH) education framework for registrants.
- We commit to collaborate with health regulatory colleges to promote consistency as recommended in the *In Plain Sight* report.
- As members of BCHR, we will advocate for structural changes within the regulatory framework to support safer and culturally appropriate health-care services for Indigenous people.

What you can expect from us as leaders and individual organizations

In our role of privilege and leadership, we recognize that we can influence the system and will become better allies to Indigenous peoples and communities through these actions:

- Develop and foster a speak-up culture within our organizations.
- Acknowledge who is and is not at the table when we make decisions.
- Increase Indigenous representation on boards, committees, and amongst staff.
- Offer regular training to staff on cultural safety and humility.
- Provide resources to registrants to improve ICSH in their practice.
- Improve data collection to track and support the increase of Indigenous health-care professionals and to measure our progress of contributing to safer health-care delivery.
- Review and/or implement policies inside our organizations to address Indigenous-specific racism.
- Report on the work and progress we are making in an accountable and transparent manner.

For more information about the professionals we regulate and our individual action plans, please visit each College website.

Signatories



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