



TRANSFORMING OUR APPROACH TO **PROMOTING SEXUAL AND REPRODUCTIVE HEALTH**

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NATIVE WOMEN'S ASSOCIATION OF CANADA

L'ASSOCIATION DES FEMMES AUTOCHTONES DU CANADA



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PURPOSE OF THIS TOOLKIT:

This fact sheet is tailored for health care providers offering care to Indigenous women, girls, Two-Spirit, transgender, and gender diverse (IWG2STGD+) individuals. It provides essential insights into:

- Trauma-informed care.
- The importance of trauma-informed care as it relates to promoting sexual and reproductive health.
- Practical recommendations for delivering trauma-informed care.

Content Warning: This toolkit discusses sensitive topics related to trauma, sexual and reproductive health, and the experiences of Indigenous women, girls, Two-Spirit, transgender, and gender diverse individuals. It contains information that may be distressing or triggering for some individuals.



SECTION



INTRODUCTION

WHAT IS TRAUMA-INFORMED CARE?

A trauma-informed approach to care acknowledges how common trauma is and how this trauma affects all aspects of people's lives, including their interactions with service providers to create a safe space for clients. When working with Indigenous women, girls, Two-Spirit, transgender, and gender diverse (IWG2STGD+) people, a trauma-informed approach recognizes how colonization continues to impact their lived experiences, as well as the social determinants of health. A trauma-informed approach does not mean reliving or reflecting on a traumatic experience, but instead emphasizes the strengths developed from surviving trauma and how that resiliency can foster healing. Failure to take a trauma-informed approach can cause re-traumatization, which may leave the client feeling unsupported or blamed and may discourage them from seeking your services or similar services.

DEFINING SEXUAL AND REPRODUCTIVE HEALTH:

Sexual and reproductive health encompasses physical, mental, and social well-being related to the reproductive system and sexuality. It involves the ability to have safe, enjoyable sexual experiences, the freedom to choose when or if to have children, and access to comprehensive information and a range of effective, safe, and affordable birth control options aligned with personal preferences. This includes education and empowerment to prevent transmitted and blood borne infections (STTBIs). For those who choose to have children, it involves access to health care for a healthy pregnancy, safe delivery, and thriving baby. Ultimately, it is about ensuring that patients have the right to make their own decisions about their sexual and reproductive health.

THE IMPORTANCE OF SEXUAL AND REPRODUCTIVE HEALTH:

- Promotes safe sex practices and awareness.
- Prevents STBBIs, including Human Immunodeficiency Virus/Acquired Immunodeficiency Virus (HIV/AIDS).
- Addresses diverse aspects of sexual health like sexual orientation, gender identity, relationships, and pleasure.
- Covers adverse outcomes like HIV, sexually transmitted infections (STIs), and reproductive tract infections (RTIs) that can lead to issues like cancer and infertility.
- Addresses unintended pregnancy and abortion concerns.
- Deals with sexual dysfunction and violence.
- Confronts harmful practices like female genital mutilation (FGM).



WHY A TRAUMA-INFORMED APPROACH TO SEXUAL AND REPRODUCTIVE HEALTH IS IMPORTANT:

The Public Health Agency of Canada (2015) underscores that women who face multiple forms of stigma and discrimination, like racism and homophobia, are at heightened risk of STBBIs due to potential exclusion from vital support networks and services. Indigenous women, girls, Two-Spirit, transgender, and gender diverse people have endured various forms of stigma and discrimination—sexism, racism, classism, and ableism—because of colonization’s impact. Strategies like the *Indian Act*, the residential school system, and the Sixties Scoop aimed to erase Indigenous languages, cultures, and knowledge, leading to enduring intergenerational trauma.

Intergenerational trauma persists due to the reinforcement of racism and systemic discrimination within health care and social service systems. For instance, instances like the forced and coerced sterilization of Indigenous women, girls, Two-Spirit, transgender, and gender diverse people illustrates systemic racism within health care. Embracing a trauma-informed approach becomes crucial to acknowledge and address these deeply rooted traumas, ensuring that health care and support systems are safe, inclusive, and conducive to healing.



SECTION 2

ADDRESSING ADVERSE CHILDHOOD EXPERIENCES AND HISTORICAL INJUSTICES

ACKNOWLEDGING HISTORICAL INJUSTICES

Recognizing past injustices is pivotal in creating a foundation of trust and safety within health care settings for Indigenous women, girls, Two-Spirit, transgender, and gender diverse Individuals.

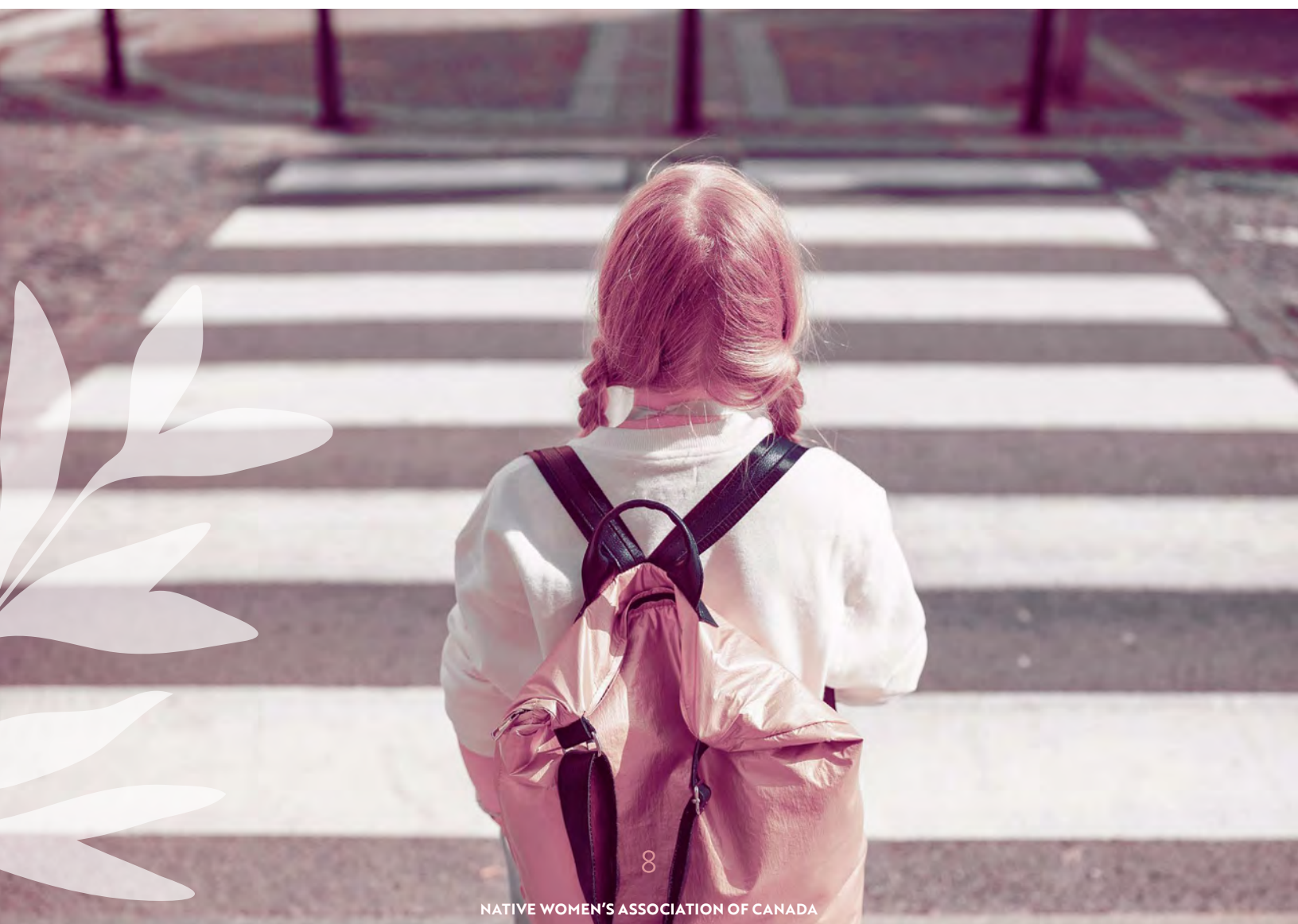
- The Sixties Scoop: The forced separation of Indigenous children from their families, perpetuating intergenerational trauma, impacting communities' trust and well-being in health care environments.
- Ongoing Land and Resource Takeover: Continuous takeover of Indigenous land and resources has disrupted Indigenous self-sufficiency and economic well-being, leading to disparities in sexual and reproductive health services for Indigenous communities.
- Gender-Based Discrimination: Within the *Indian Act*, gender-based discrimination has eroded the rights and standing of Indigenous women in matters of sexual and reproductive health.
- Forced Sterilization: The forced sterilization of Indigenous women, girls, Two-Spirit, transgender, and gender diverse people stands as a severe violation of their reproductive rights, resulting in enduring harm and trauma within Indigenous communities.

ADVERSE CHILDHOOD EXPERIENCES (ACES):

ACEs are traumatic or distressing events that occur during a person's childhood. These experiences can include physical, emotional, or sexual abuse, neglect, witnessing violence, poverty, loss of a loved one, homelessness, substance use, domestic violence, separation from parents and other significant stressors.

The accumulation of ACEs is linked to an increased risk of various health issues including:

- Chronic diseases (e.g., heart disease, diabetes, liver disease, cancer).
- Mental health disorders (e.g., depression, anxiety, Post-Traumatic Stress Disorder) and likelihood of suicide attempts across lifetime.
- Substance use.
- High-risk behaviors (e.g., smoking, unprotected sex).



ACES AND MARGINALIZED POPULATIONS:

- Although the incidence and prevalence of ACEs overall are declining, this is not the case amongst populations who are marginalized determined by factors such as race, gender, and socioeconomic status (SES).
- Recent research has highlighted that in Canada:
 - ACEs are increasing within Indigenous populations.
 - Indigenous people experience ACEs more frequently than non-Indigenous people.
 - Indigenous people continue to confront experiences of intergenerational trauma and family disruptions due to histories of residential schools and overrepresentation in both the child welfare and criminal justice systems. These experiences intersect with ACEs (i.e. ACEs are mediated by intergenerational trauma) and further exacerbate negative health outcomes.

Understanding how these factors impact overall health and well-being will improve service providers' ability to provide effective and safe interventions.





SECTION 3

INDIGENOUS HARM REDUCTION

WHAT IS INDIGENOUS HARM REDUCTION?

- Rooted in Indigenous Ways of Knowing and Doing.
- Guided by principles of decolonization, Indigenization, inclusivity, trauma-informed care, person centeredness, and evidence-based approaches. These are all important aspects and should be centered in health and social supports for Indigenous individuals.
- Focuses on reconnecting individuals to culture, revitalizing the interconnected relationships amongst the spiritual, human, and natural worlds.
- Advocates for low-barrier, non-medicalized environments centered around IWG2STGD+ individuals.
- Aims to create supportive spaces that honour cultural identities and promote well-being within Indigenous communities.

WHAT DOES INDIGENOUS HARM REDUCTION LOOK LIKE?

- **Challenging Stigma and Discrimination:** Rejecting language like 'dirty' or 'clean,' abstaining from judgement regarding people's experiences, and challenging racism.
- **Indigenizing Services:** Incorporating Indigenous traditions, ceremonies, and teachings in healing plans.
- **Meeting people where they are at:** Recognizing we are all at different points in our healing journeys, providing support at event point. For example, providing safe injection and disposal sites to support the safety of drug users.

- **Promoting Self-Determination:** Community members know what their needs are and what resources will work for them.
- **Valuing Lived-Experience:** People come with unique knowledge from their experiences, valuing this means that their services are directed by them and that should be met with respect and compassion.

Indigenous harm reduction encompasses various critical aspects. When it comes to sexual and reproductive health education and interventions, success is amplified when service providers prioritize establishing trusting relationships before addressing traumas like sexual abuse or violence.

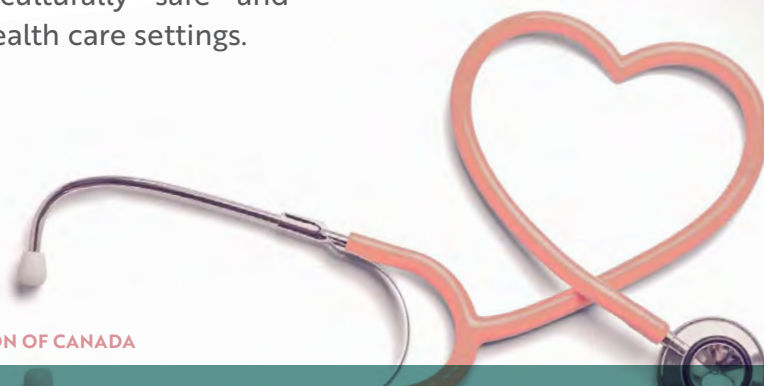


SECTION 4

REFLECTIVE PRACTICES FOR SERVICE PROVIDERS

Understanding the profound influence of personal values and beliefs on client interaction is crucial. These values, shaped by diverse life experiences, manifest both overtly and covertly in the work of service providers. Within health care and social service systems, structural racism is deeply entrenched, directly impeding service delivery. This systemic bias creates obstacles in providing dignified and respectful services, particularly impacting IWG2STGD+ individuals. It is imperative to question these institutional structures to promote equitable access and treatment within the system. Addressing and challenging these systemic barriers is vital in advocating for fair and respectful services for individuals from all backgrounds.

Consider the following questions regarding values, biases, and approaches in providing care to Indigenous individuals. Take time for reflection and thoughtful consideration of these prompts to enhance your understanding and commitment to culturally safe and respectful practices in health care settings.





SELF-AWARENESS AND PERSONAL VALUES:

1. What personal values and beliefs influence your approach to providing health care for Indigenous individuals?
2. How do these values and beliefs impact your interactions and decision making in health care settings?



CULTURAL COMPETENCY AND LEARNING:

1. What steps have you taken to enhance your cultural competency in serving Indigenous communities?
2. How do you ensure continuous learning in understanding diverse cultural perspectives?



UNDERSTANDING BIASES AND POSITIONALITY:

1. How do biases or assumptions about Indigenous people influence the care you provide?
2. In what ways does your social or professional identity affect the way you engage with Indigenous patients?



COMMITMENT TO CULTURALLY SAFE CARE:

1. How can you advocate for culturally inclusive and sensitive practices within your health care setting?
2. How committed are you to creating a safe health care space for Indigenous patients? What changes or actions will you take to ensure this?

SECTION 5

INDIGENOUS HARM REDUCTION

Incorporating Indigenous Ways of Knowing and Doing into Western, biomedical frameworks for sexual and reproductive health interventions is pivotal. This integration involves various practices:

Enhancing the Patient Experience and Care:

- **Access to Indigenous Healing Practices:** Offering opportunities for practices like smudging, Sweat Lodges, and medicine pouch making enhances the holistic patient experience.
- **Tailored Treatment Plans and Regular Check-ins:** Developing individualized treatment plans and maintaining open communication channels ensure effective health care that accommodates the unique needs of each Indigenous patient, fostering trust and personalized care.





Cultural Integration and Supportive Environments:

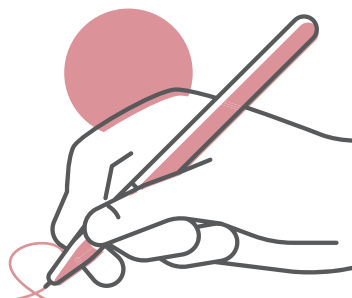
- **Utilize Traditional Methods of Information Sharing:** Implementing traditional methods like storytelling and sharing circles empowers Indigenous individuals to reclaim narratives of misconception, pain, trauma, and stigma while reconnecting with their cultural roots and identity.
- **Trauma-Informed Approaches:** Employing trauma-informed sharing circles can foster healing and address perceptions of sexual and reproductive health to destigmatize discussions on healthy sexuality, sexual health, and harm reduction, transforming shame into resilience.
- **Collaboration with Elders and Advisors:** Engaging with Indigenous Elders and cultural advisors offer spiritual guidance, cultural ceremonies, and counselling services to Indigenous patients, enhancing healing.

Creating Inclusive Health Care Spaces:

- **Health Care Training:** Provide cultural sensitivity and Indigenous awareness training to all health care professionals, ensuring they are well-prepared to serve Indigenous patients effectively.
- **Integration of Cultural Elements:** Incorporate traditional teachings, language courses, and cultural workshops into health care programs to support cultural reconnection.
- **Establishment of Safe Spaces:** Creating talking circles or healing circles within health care settings provides a safe and supportive environment for Indigenous patients to share their experiences, emotions, and challenges.

This comprehensive approach fosters a sense of cultural inclusion, trust and personalized care for Indigenous individuals and communities within health and social service settings.

REFLECTIVE ACTIVITY



CULTURAL ENGAGEMENT ASSESSMENT:

Objective: Evaluate the level of cultural integration in your current health care or social service practices concerning Indigenous Traditional Knowledge.

Steps:

1. Review your current practices and interventions related to Indigenous health.
2. Identify aspects where Traditional Knowledge is incorporated or is lacking.
3. Consider how to enhance or introduce more culturally integrated approaches.

Reflection Questions:

- How does the incorporation of Traditional Knowledge enhance the effectiveness of health care interventions?
- What strategies can be implemented to better integrate Indigenous cultural elements into your care practices?

SECTION 6

TAKING A HOLISTIC APPROACH - GUIDELINES FOR DELIVERING TRAUMA INFORMED CARE

Holistic care involves considering the complete spectrum of a patient's needs, encompassing the physical, social, spiritual, and psychological aspects. Research shows that delivering this comprehensive care not only prevents disease and death but also significantly enhances the overall quality of health care offered to patients.

It is important to consider the following while working with Indigenous women, girls, and gender diverse people:

- What are your clients relationships like between their community and family?
- What is your client's home life like?
- Does your client have a support system?
- How could the inclusion of distinctions-based approaches better support the distinct cultural experiences of First Nations, Inuit, and Metis?
- In what ways can you highlight the strength and resiliency of Indigenous women, girls, and gender diverse people, rather than focusing on harmful narratives or stereotypes?



PRACTICAL GUIDELINES FOR SERVICE PROVIDERS:

- **Understanding Trauma Universally:** Service providers should recognize that providing trauma-informed care does not necessitate knowing the specific traumatic experiences a person has endured. Trauma can take various forms, and individuals may not always disclose the details. Nonetheless, a trauma-informed approach involves acknowledging that many people may have experienced trauma and should be treated with sensitivity and respect.
- **Acknowledging Positionality:** It is crucial for service providers to be conscious of their own positionality. This refers to recognizing how their personal identities, biases, and experiences may influence their interactions with clients. By acknowledging their own positionality, service providers can better understand potential biases and strive to provide more equitable and respectful care. This self-awareness is a foundational aspect of delivering trauma-informed services.
- **Empathetic Listening:** Empathetic listening is an essential component of trauma-informed care. Service providers must create a safe and non-judgemental space where clients feel comfortable sharing their experiences and concerns. Active and empathetic listening involves demonstrating genuine concern, offering support, and validating clients' emotions. This practice fosters trust and empowers clients to open up about their needs and experiences.
- **Empowering Decision Making:** Empowering clients to make informed decisions about their sexual health is a key element of trauma-informed care. This means respecting clients' autonomy and choices while providing them with the information and resources they need to make the best decisions for themselves. Service providers should offer support, education, and options, allowing clients to take an active role in their sexual health decisions, which can be particularly important in the context of trauma where agency and control may have been compromised.



These guidelines underscore the importance of a compassionate and empathetic approach to providing trauma-informed care, which is inclusive, respectful, and empowering for all clients, regardless of their diverse identities, circumstances, and needs.



CASE STUDY: APPLYING TRAUMA-INFORMED CARE GUIDELINES

Background:

Sara is a 34-year-old Indigenous woman seeking sexual and reproductive health services at a local clinic. She expresses anxiety and hesitance when discussing her health concerns due to past negative experiences with health care providers.

Applying the Guidelines:

Understanding Trauma Universally

The health care provider acknowledges that Sara might have experienced trauma without knowing the specifics and ensures that they create a safe and non-judgemental space for her to discuss her concerns.

Acknowledging Positionality

The health care providers recognize their own positionality and have an understanding of how their identity and biases can affect their interactions. In this reflection they remain self-aware and strive for unbiased care.

Empathetic Listening

The health care provider can engage in empathetic listening, allowing the patient to share their experiences at their own pace. The provider can also validate the patients' emotions and offer support and understanding.

Empowering Decision Making

The health care provider can empower the client to make informed decisions about their sexual health. Ensuring informed, ongoing consent and offering all information, options, and support to the client so that they can take an active role in their care.

REFLECTIVE ACTIVITY



CULTURAL ENGAGEMENT ASSESSMENT:

1. How does acknowledging trauma and understanding one's own positionality influence the provider-patient interaction?
2. What specific strategies were effective in creating a safe space for the patient?

To further understand trauma-informed care, explore issues such as forced sterilization of Indigenous women, intergenerational trauma, vicarious trauma and cultural safety and research local services available for IWG2STGD+ people. It is crucial for health care providers to possess the skills and knowledge necessary to support individuals from diverse backgrounds encompassing various races, cultures, religions, sexual orientations, and gender identities.



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