

ELDERS VISIONING PERINATAL SUBSTANCE USE TOOLKIT

A toolkit describing Indigenous Elders' teachings and perspectives on providing culturally safe health care and how to engage Elders in health care services in a good way

NOVEMBER 2021



Acknowledgements

We respectfully acknowledge that the Provincial Perinatal Substance Use Project's primary location is BC Women's Hospital + Health Centre (BCWH), Provincial Health Services Authority (PHSA), which is situated on the unceded, traditional and ancestral territories of the Coast Salish People, specifically the xʷməθkʷəjəm (Musqueam), Skwxwú7mesh (Squamish) and səł'lwətaʔ (Tseil-waututh) Nations. Further, this acknowledgement, gratitude and respect extends to the diversity of all Indigenous contributions including First Nations, Inuit, Métis and non-status Indigenous identities and communities on whose traditional territories we have the privilege to build relationships and provide services.

The *Elders Visioning Perinatal Substance Use Toolkit* has been led by Dr. Elder Roberta Price, Coast Salish Snuneymuxw and Cowichan Nation and Elder Glida Morgan, Tla'amin First Nation. They are grateful to the Provincial Perinatal Substance Use Project team members who championed this work:

Jeane Riley, Fort Nelson First Nation, Indigenous Healing and Wellness Lead, Provincial Perinatal Substance Use Project, BCWH

Akash Sidhu, Program Coordinator, Provincial Perinatal Substance Use Project, BCWH

Pamela Joshi, Program Director, Provincial Perinatal Substance Use Project, BCWH

Denise Bradshaw, Director, Provincial Health Initiatives, BCWH

This toolkit is dedicated to all Indigenous lifegivers and matriarchs. We honour and respect their courage, power, resilience and strength through each of their own unique journeys.

We raise our hands up to the Elders across the province whose wisdom, guidance and experiences have directly shaped the development of this toolkit:

Elder Cheryl Schweizer
Tl'azt'en Nation, and
of the Lusilyoo (Frog) clan

Elder Edna Terbasket
Okanagan Indian Band

Elder Evelyn Voyageur
Kwakwaka'wakw
First Nation, of the
Dzawada'enuxw tribe

Elder Delhia Nahanee
Nisga'a and
Squamish First Nations

Elder Doris Fox
Musqueam First Nation

Dr. Elder Jim Ketch
Métis and Cree First Nations

Elder Lillian Daniels
Métis and Cree First Nations

Elder Lucy Duncan
Binche Keyoh First Nation of
the Lhojaboo clan

Elder Marie Bercier
Métis Nation

Elder Mary Everson
K'ómoks First Nation



We respectfully acknowledge all those who have shared their wisdom, time and experience to support the development of this toolkit:

Mary MacKillop,
Director, Patient Experience, BC Children's Hospital and BC Women's Hospital + Health Centre

Michele (Lagius) Mundy, 'Namgis First Nation,
Director, Indigovation Consulting Inc.

Ian Durning, Matthew Victoria & Craig Ross,
PHSA Media Services, BC Children's Hospital and BC Women's Hospital + Health Centre

Chrystal Sparrow, Musqueam First Nation,
Coast Salish Artist

The Provincial Perinatal Substance Use Project would like to acknowledge health care professionals across British Columbia committed to ensuring the best possible care and supports are provided for Indigenous women, children and families impacted by substance use. We do not do this work alone, and together our efforts will create ripple effects throughout each generation.

Land Acknowledgement

We encourage all health care professionals to acknowledge the Indigenous Peoples on whose traditional territories we live, work and play. Acknowledging territory shows recognition of and respect for the First Peoples of the land. It is recognition of their presence both in the past and the present. Recognition and respect are essential elements of establishing healthy, reciprocal relationships and are the key to reconciliation.

Emotional Trigger Warning

The *Elders Visioning Perinatal Substance Use Toolkit* discusses topics that, for Indigenous Peoples, may trigger memories of culturally unsafe personal experiences or experiences of their family, friends and community. This toolkit is intended to increase awareness and learning of Indigenous wise practices and traditional healing through the perspectives of Indigenous Elders with the goal of creating culturally safe and equitable care for Indigenous women, children and families across the health care system. However, the content may trigger unpleasant feelings or thoughts of the past. First Nations, Métis and Inuit Peoples who require emotional support can contact the First Nations and Inuit Hope for Wellness Help Line and On-line Counselling Service toll-free at 1-855-242-3310 or through hopeforwellness.ca. The Métis Crisis Line is available 24 hours a day at 1-833- MétisBC (1-833-638-4722). And the KUU-US Crisis line is available 24/7 at 1-800-588-8717 to provide support to Indigenous Peoples in B.C. For more information, visit: kuu-uscrisisline.ca.

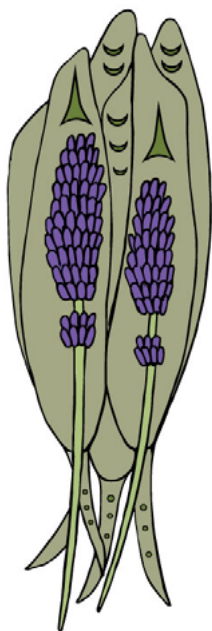
“Our Elders are our cultural keystones. They provide connections to our Ancestors, teach us our history and help light our path forward in a good way. If the legends fall silent, who will teach the children our ways.”

– Chief Dan George



Table of Contents

Acknowledgements	ii
Land Acknowledgement	iii
Emotional Trigger Warning	iii
Statement from Elders	1
Terminology	2
Foreword	4
Introduction	5
Part 1. Toolkit Hopes and Aspirations	6
Part 2. What Do Elders Bring to Perinatal Substance Use?	8
Part 3. What Do Elders Need to Do This Work?.....	11
Part 4. Understanding Intergenerational Trauma and Its Impacts	17
Part 5. Being with Lifegivers	20
Part 6. Cultural Ceremony and Teachings.....	22
Continue Your Learning Journey	27
References.....	28



Statement from Elders

A message from **Dr. Elder Roberta Price**, Coast Salish Snuneymuxw and Cowichan Nations and **Elder Glida Morgan**, Tla'amin First Nation



O Siem, Thank you.

As Coast Salish and Tla'amin Matriarchs and Elders with the Provincial Perinatal Substance Use Project Team, we raise our hands up to honour all the beautiful Indigenous lifegivers, including First Nations, Métis, Inuit and non-status Indigenous identities impacted by substance use across British Columbia.

We hold our hands up for our sister and brother Elders across the province who are currently taking incredibly good care of our Indigenous parents who are pregnant or parenting and using substances. We respectfully share the Elders' stories, teachings and personal experiences in this *Elders Visioning Perinatal Substance Use Toolkit* to expand learnings and awareness to those providing care for Indigenous lifegivers and emphasize the importance of including and supporting Elders in this work.

We have moved carefully and thoughtfully as we created and designed this document. We do this work in kindness, with love and respect for all Indigenous ways of knowing and doing, including First Nations, Métis and Inuit. We acknowledge that this toolkit does not encompass all Indigenous ceremonies and teachings for pregnant and parenting individuals and their children; however, we hope to plant seeds and start increasing the knowledge and traditional approaches of our people in a good way and share the teachings of Elders who were able to join us on this journey thus far.

Through this initiative, we hope to guide health care providers to recognize the gaps and barriers for Indigenous lifegivers seeking care and to work proactively with Elders and Indigenous knowledge keepers to provide culturally appropriate health care, while always keeping Elders' safety at the forefront.

We hold our hands up to health care providers supporting pregnant and parenting people using substances for opening your hearts and minds to the experience of Indigenous lifegivers and families and creating space to honour and learn from Elders.

Warmest blessings. O Siem.



Terminology

Gender and Language

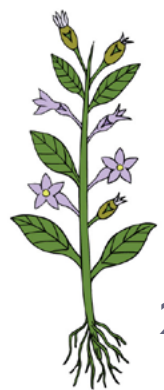
In the *Elders Visioning Perinatal Substance Use Toolkit*, the terms “women,” “lifegiver,” “person,” and “individual” are used. This is to acknowledge and be inclusive of all Indigenous, including First Nations, Métis, Inuit and non-status Indigenous identities who identify as and/or express themselves as women, including cisgender females, transgender women, non-binary Peoples and those who identify as Two-Spirit/Indigiqueer. The term “woman” is used in this document as a binary term; however, it might not accurately reflect the gender and sexual identities of all pregnant or parenting lifegivers impacted by substance use.

We encourage all health care providers to not assume the gender identity or sexual orientation of the pregnant person (or their partner) and to respectfully and non-judgmentally ask all pregnant people about their preference for how they wish to be addressed.

Indigenous Peoples

“Indigenous Peoples” refers to the original inhabitants of the land and in Canada, includes First Nations, Métis and Inuit Peoples. The first letters are capitalized to recognize nationhood, and the term is plural to recognize the multiplicity of Indigenous nations that exist across the country. In Canada, the term “Aboriginal” is sometimes used interchangeably with “Indigenous.” However, “Indigenous” is increasingly recognized as the preferred term due to the fact that “Aboriginal” is a term that was placed upon Indigenous people by the federal government. “Indigenous” is a term that was agreed upon by world Indigenous leaders at the United Nations and used in the *United Nations Declaration on the Rights of Indigenous Peoples*.

The “Ab” in “Aboriginal” is a Latin prefix meaning “away from” or “not,” so in that sense “Aboriginal” can mean “not original.” “Indigenous” comes from the Latin word “indigena,” meaning “originating or native to.”



Indigenous Cultural Safety

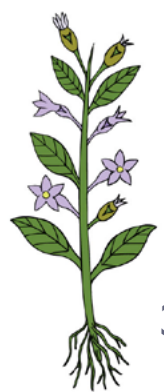
“ Indigenous Cultural Safety is the process of making spaces, services and organizations safer and more equitable for Indigenous Peoples by considering colonial history and responding to structural racism and discrimination.”

– *San'yas ICS Training, PHSA*

Indigenous Cultural Safety (ICS) is about fostering a climate where the unique history of Indigenous Peoples is recognized and respected in order to provide appropriate care and services in an equitable and safe way, without discrimination. Some examples of ICS include ensuring Indigenous ceremonies are part of health care service delivery; recognizing the role and connection of Indigenous peoples to unceded, ancestral and traditional territories and lands; and when Indigenous people determine their health care they are provided is safe. At its core, ICS draws strength from all Indigenous ways of knowing and being and it supports Indigenous Peoples to feel respected and safe when they interact with the health care system.

Elders

The term “Elder” refers to someone who has attained a high degree of wisdom and understanding of First Nations, Métis or Inuit history, traditional approaches, teachings, ceremonies and healing practices. This term does not refer to someone’s age, but rather to their place within the community and level of cultural and traditional knowledge that they possess. Elders are highly respected and pass this knowledge on to others. They share teachings and guidance on emotional, mental and spiritual experiences as well as on issues affecting their communities and Nations. First Nations, Métis and Inuit Peoples value their Elders and address them with the utmost respect. Bringing Elders into perinatal substance use related care involves creating relationships with Elders in a respectful way and being mindful of Elder Safety.



Foreword

The Provincial Perinatal Substance Use Project

The Provincial Perinatal Substance Use Project, led by BC Women’s Hospital + Health Centre (PHSA), was developed to advance provincial capacity and enhance services for pregnant and early parenting people who use substances and their infants, families and communities across British Columbia. The goal of the Project is to establish a provincial blueprint for a perinatal substance use continuum of care that will initiate, expand and improve services from community to acute care and back to community. ICS is the most important principle of care in this work and we have embarked on an ICS journey since the inception of the Project.

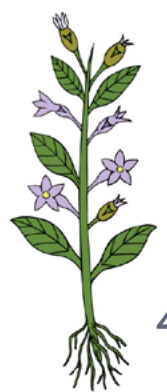


Indigenous Cultural Safety Journey

The ICS journey involves Indigenous voices across the province informing all aspects of this work, from service planning and design to education and training. The ICS journey describes an overarching approach to decolonizing how perinatal substance use services are delivered for Indigenous Peoples, and it aligns with empowerment and self-determination approaches described in the following reports: *In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care* (2020), *Truth and Reconciliation Commission of Canada: Calls to Action*, *United Nations Declaration on the Rights of Indigenous Peoples* (national and provincial declarations), the *National Inquiry into Missing and Murdered Indigenous Women and Girls*, *Sacred and Strong: Upholding Our Matriarchal Roles* and the PHSA’s commitment to Indigenous Cultural Safety.

The ICS journey centers on raising the voices of Indigenous Elders, Knowledge Keepers, Indigenous Leaders, Indigenous Midwives, Doulas, Birth Workers and Birth Keepers and honours Indigenous ways of being and knowing. In the health care context, this involves recognizing how perinatal and birth work are deeply impacted by colonialism.

The Project recognizes that Elders have an innate way of holding space and bringing healing and wellness into health care settings. A key aspect of the ICS Journey has been to integrate the involvement of Elders in this project and to take their guidance on how to strengthen services for women, children and families. As health care providers, we acknowledge our responsibility to hold space and create safety so that Elders can share their knowledge, wisdom, stories and experiences.



Introduction

Elders Visioning Perinatal Substance Use

Through provincial engagement with Regional Health Authorities and community partners across the province, the Provincial Perinatal Substance Use Project led a series of virtual regional discussions with Elders involved in substance use services and perinatal health. In these regional circles, Elders shared healing stories, intergenerational experiences, the power of witnessing and the importance of aligning culture and ceremony to local protocols.

The resulting *Elders Visioning Perinatal Substance Use Toolkit* was developed by the Provincial Perinatal Substance Use Project (BCWH), with leadership and guidance by Dr. Elder Roberta Price, Coast Salish Snuneymuxw and Cowichan Nations and Elder Glida Morgan, Tla'amin First Nation.

This toolkit is a unique resource that highlights Elders' diverse knowledge, wisdom, approaches and practices in order to support Indigenous women, children and families in a good way. It is designed to increase awareness and learning of essential knowledge, wise practices, cultural teachings and stories and includes practical tools for health care providers about how to work with Elders and support culturally safe and equitable care for Indigenous lifegivers, children and families impacted by substance use.

Although this toolkit is about perinatal substance use, the teachings and stories from Elders can be applied broadly to how health care providers care for Indigenous women and families in both acute care and community settings and how health care providers can support Elders to do this work.



“ We [Elders] honour the pieces of your heart that you share with your voice.”

— Elder Doris Fox

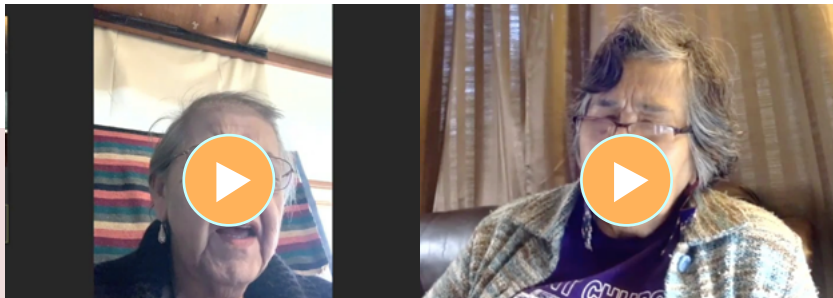


Part 1. Toolkit Hopes and Aspirations

A common theme shared among Elders is the need to develop relationships of mutual respect and to move only at the speed of trust. Elders honour the ways that both the Western health care system and Indigenous ways of knowing and doing can support Indigenous women and families. Increased awareness and understanding of both Western approaches and Indigenous approaches to healing and wellness can inspire and encourage better relationships, allyship and care for Indigenous women and their children and families.

You will hear Elders offer warm blessings and speak in their native languages. Elders share their hopes, prayers and aspirations for the *Elders Visioning Perinatal Substance Use Toolkit* and for the impact this toolkit will have for Indigenous women who are pregnant or newly parenting and using substances in communities across the province.

It is important to acknowledge the history of colonization and understand where health outcomes and inequities for Indigenous people come from.



“ We [Elders] are here to empower our people. We want to give them their power back.”

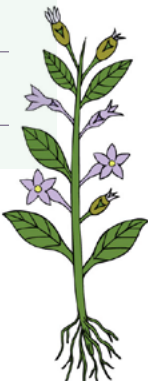
— Elder Edna Terbasket



Exercise: Listening with Curiosity and an Open Heart

Watch the Elders videos in Part 1 of the toolkit and write about three pieces of wisdom that you heard the Elders share in the video clips. How does this connect to the work we all do to support Indigenous lifegivers, children and families? Write down three hopes you have for your work as someone who provides support and care for Indigenous individuals who are pregnant or newly parenting and affected by substance use.

Elders' Wisdom	Hopes for My Work
<p>1</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>1</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>2</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>2</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>3</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>3</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>



Part 2. What Do Elders Bring to Perinatal Substance Use?

Traditional approaches to healing and wellness are diverse across nations, regions and territories and learning these approaches is a lifelong process. Elders are the knowledge keepers of that process, as they teach how to take good care of the mind, the heart and the spirit through spirituality, traditions and guidance. Health care providers should be mindful that Elders bring many credentials to their work in supporting Indigenous lifegivers and their families. These may include a combination of two-eyed seeing, academic credentials, lived and living experience and Elder wisdom.

Elders are respected individuals who play key roles in Indigenous communities. They hold traditional healing and wellness practices and historical knowledge and experiences. Elders are central to Indigenous knowledge and they link to both the past and the future. Elders ensure their history and approaches are passed down through oral teachings. Elders bring these teachings forward healing stories, intergenerational experiences, the power of witnessing and the importance of aligning culture and ceremony to local protocols.

“So many people who are walking this road, we need to understand them. We need to teach understanding.”

— Elder Evelyn Voyageur

We all share a responsibility to create space for Elders to connect with Indigenous women and families and to provide a culturally safe environment for Elders to do this important work.



TOOL: What Can You Bring to This Work?

The following is a list of practices that have been identified as being helpful in supporting traditional healing and wellness practices and ceremonies and in creating cultural safety for Indigenous individuals who are pregnant or parenting and using substances

- Honour Indigenous territories by providing a land acknowledgement at the beginning of an event.
- The most important step is to build a relationship with Elders.
- Create space for traditional practices within a health care setting such as a sacred gathering, or prayer space or access to sweat lodge.
- Invite Elders in your community to conduct opening and closing ceremonies and prayers during events.
- Make traditional medicine items available if requested, such as a medicine wheel, cedar bark, sage, sweet grass and tobacco. Take direction from the patient or Elder on where to get these medicines and how to use these items appropriately.
- Make a space available for smudging and ensure fire safety measures are in place to allow for smudging and other practices that involve smoke.
- Honour Indigenous cultures by displaying Indigenous artwork for clients, patients and colleagues to see.
- Link clients/patients with Elders, knowledge keepers and healers who work in perinatal health and substance use.
- Support connections to Indigenous doulas, midwives, birth workers and birth keepers.



In this part of the toolkit, Elders describe what they bring to the work of supporting Indigenous individuals who are pregnant or newly parenting and using substances.



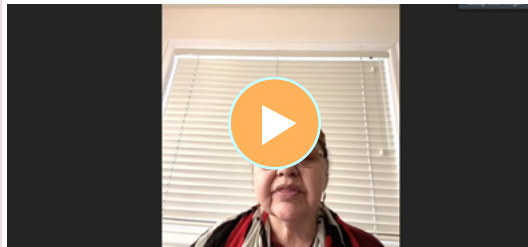
Elders bring ancestral knowledge.

Dr. Elder Roberta talks about bringing in ancestral acknowledgement, teachings and strengths.



Elders listen.

Dr. Elder Roberta shares how Elders listen, honour and ask permission and wait patiently until the time is right for the mom, baby and family.



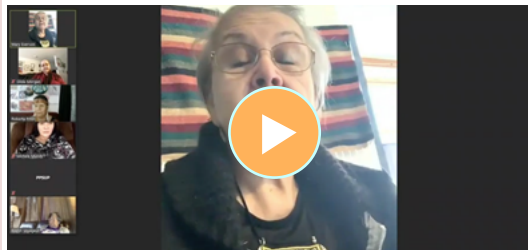
Elders bring compassion.

Elder Glida talks about the health care environment and extending the empathy and understanding she feels for the woman and family to the health care providers.



Elders are wise teachers.

Elders educate non-Indigenous people about Indigenous cultural safety and Indigenous ways of knowing and doing in a safe space.



Elders connect us all.

Elder Mary shares the importance of recognizing that each one of us breathes the same air and that this connects us all.



Elders see truth.

Elder Doris shares that Elders see women using substances as loved ones in pain.



Part 3. What Do Elders Need to Do This Work?

Bringing Elders into perinatal substance use related care involves creating relationships with Elders in a respectful way and ensuring ICS is at the heart of how acute and community programs and services are being provided. Elders have many teachings and approaches that may look different for each Elder and they are often called upon to provide spiritual healing and wellness. From the Provincial Perinatal Substance Use Project's learnings, Elders work best in pairs to provide support for each other, witness each other's practices and complement each other's strengths. Involving Elders is all part of providing culturally safe services for Indigenous lifegivers and their families.

Elders' Cultural Safety

Elders are to be treated with great respect. They are held in the highest regard in Indigenous communities. We must engage in respectful relations with Elders, treating them with deference and showing a spirit of learning. When in doubt, show humility, demonstrate respect and ask permission.



Starting the Relationship

As you reach out to Elders in your community, it is important to know that you may connect to an Elder directly or you may be connecting to someone they trust. Take the time to introduce yourself and provide a brief overview, including the context and purpose of your request. Ensure you extend the invitation well in advance.

- Find out the Elders’ traditional and English names. Determine what name they would prefer to use.
- Ask how Elders prefer to be contacted, by email or by phone. If you initially reached out by email, you might ask if it is okay to connect by phone.
- Explain your ask clearly, in detail and include information regarding honorarium.
- Arrange a follow-up call to remind Elders of the engagement and to ensure their needs are addressed and supported.

Engaging and Communicating Effectively with Elders

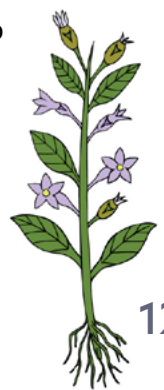
Once an Elder has confirmed that they are available to provide service for your request, it is important to follow up with a phone call, email or in-person meeting, to outline the details for the event and address any questions that the Elders might have.

- Provide the date, time, location and a detailed agenda, including a list of other presenters and the number of people that will be in attendance.
- Ensure the Elders are aware if photography or filming is taking place at the event and that they have consented to being photographed or filmed.
- Provide a host/helper who is assigned to assist the Elders throughout the event.
- If the event is virtual, offer the Elders with technology support and testing prior to the event.
- Be intentional when sending emails to Elders, and do not flood their email inboxes with emails about minor changes/additions to your event. If invitations are being sent via email, send the original invitation with event details and then a reminder email one day or a few hours prior to the event, so that this information is at the top of their inbox. If additional emails are required, indicate the change/update in brief in the email subject line.

Respectfully Addressing an Elder

“Elder” is a title they have worked all their life to achieve. To be respectful, address an Elder as “Elder [First Name, Last Name]”

Allow the Elder to guide you on how they would like to be addressed. For example, some Elders may prefer that you use the title “Elder” and just their first name.



Travel or Virtual Arrangements

It is important to offer Elders in-person, virtual and teleconference options. If Elders travel to a destination, make every effort to provide clear instructions on how to get to the parking lot, building, elevator and room. Provide them with a mailed copy of a map if one is available in advance.

- All Elders' travel expenses must be paid for (including taxi, parking and mileage).
- Whenever possible, hold a space for Elders to park when you know they are driving themselves to an event.
- Offer Elders the chance to test all of the required technology prior to a virtual event.
- Elders may travel with an Elder's helper or companion.

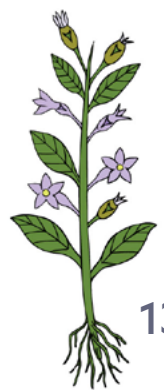
Elders' Helpers

Elders support each other and lift each other up in their work. Often Elders work in pairs or are accompanied by an Elder's helper. This person will have an established relationship with the Elder and will be available to support the Elder and anticipate their needs.

- Ask the Elder if they have a helper that they would like to accompany them and what the appropriate honorarium is for the helper.
- Assign someone to be the "point of contact" for the Elder on the day of the event. Make sure this person is knowledgeable about the event taking place and the services that the Elder is providing. Instruct this person to stay close by and assist the Elder and the Elder's helper with anything they need for the full length of the event.

Greeting the Elder

- Ensure that a "point of contact" person will be available to greet the Elder and any companion as they arrive and guide them to where they need to be. Events can be hectic for everyone so it is important to ensure the Elder and the Elder's helper have the telephone number for a "point of contact" person in advance of the event.
- Thank the Elder for attending.
- When the Elder arrives, ensure they are familiar with the space and know where the event will be held, where the restrooms are located and where they can safely keep their belongings.
- Check in with the Elder, ask them if there is anything they need before the event starts (tea, coffee, water, a sandwich, a cookie) and continue to check in throughout the event.



Food and Beverages

If you will be offering any meals, it is important to find out if the Elders have any dietary restrictions and have healthy options available.

- Before everyone eats, welcome the Elders to say a blessing, if they feel comfortable doing so.
- Invite the Elders to be seated first and to eat first.
- If the Elders have any mobility issues, offer to support them or to serve them their food.

Cleansing Ceremony

Elders may want to perform a ceremony with the woman they are supporting. Elders may offer a cleansing ceremony through smudging or cedar brushing. It is helpful to make a quiet room or space outside available for this. Please be mindful of the space and people around. Ensure a room is well-ventilated and that fire safety measures are in place to allow for any practices that involve smoke.

Ceremony

During the ceremony, it is important to be in the moment. Ensure that no one is talking, texting, or taking phone calls. Allow Elders to lead the ceremony and do not interrupt them. Always thank the Elder once they are finished.

Gifts

When you make a request from Elders, it is customary to personally present them with a gift such as a bundle or pouch of tobacco, sweet grass, sage, cedar or a combination of these sacred plants. If the Elder agrees to the request, they will accept the gift. If the Elder does not accept the gift, often they will find an Elder who is able to provide the requested service. You may also mail a medicine bundle if the Elders do not live within close proximity. It is appropriate to ask the Elder or community liaison what gift is appropriate for certain territories.



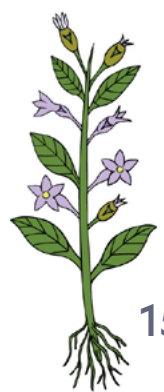
Honorarium

It is important to provide an honorarium to Elders as a gesture of appreciation for sharing their traditional knowledge and healing practices. Each Elder carries a wealth of knowledge and wisdom that they have spent their whole lives learning. The knowledge, teachings and ceremony that they hold were gifted to them by their Elders before them. It is an honour and privilege to witness ceremony and have Elders share their traditional knowledge and teachings. The amount of the honorarium must be left up to the Elder and agreed upon in advance of them providing services. You may respectfully discuss with the Elder or the Elder's helper the amount your organization is able to provide so that they can consider if the amount will suffice. It is important to consider paying Elders in cash, unless specifically requested otherwise.

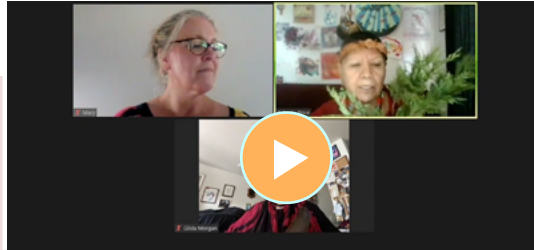
Building the Relationship

Elders provide many services and supports for their communities, such as providing opening or closing prayers, providing ceremonies and teachings, reviewing reports and resources related to Indigenous Cultural Safety, sitting on committees and working groups, teaching in schools and universities and more. Health care providers must ensure that Elders feel safe, supported and comfortable during every part of their participation, from the start of engagement with an Elder through to following up with them once an event has passed to see how it went for them. We must take good care of Elders and remove barriers whenever possible, without them having to make a request.

Honorariums respect the value of a sacred ceremony and blessings that Elders provide. We encourage program leaders to consider the honorarium amount for Elders and ensure Elders are paid according to the value they bring forward.



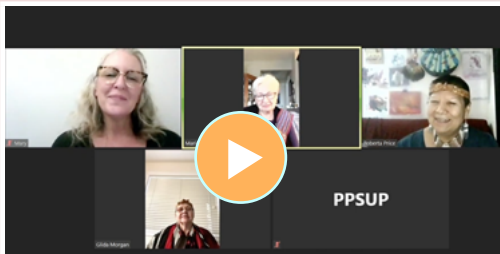
In these clips, Elders talk about how health professionals can support Elders as they provide care to Indigenous lifegivers and families impacted by substances and what Elders might need to do this work in a culturally safe way. As health care providers, we are responsible for supporting Elders in their work and ensuring they feel safe and comfortable.



Dr. Elder Roberta shares a teaching about the importance of demonstrating equity and respect for everyone's voice in the circle.



Elders need support from other Elders. Working in pairs provides Elders with support whenever they feel triggered when faced with the colonization in health care systems.



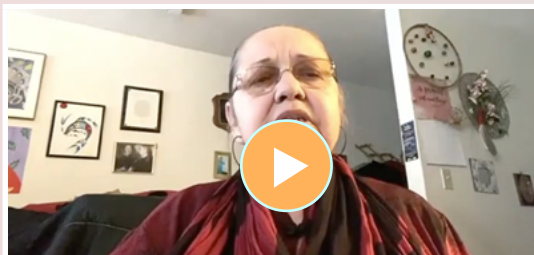
Elder Marie shares the need for Elders to be working together for Elder safety, the concept of sisterhood and the idea of lifting each other up (saa'ust).



Elders need different kinds of teachings to be available for all service providers.



Elders need people to understand about what it means to be grounded in your identity and family.



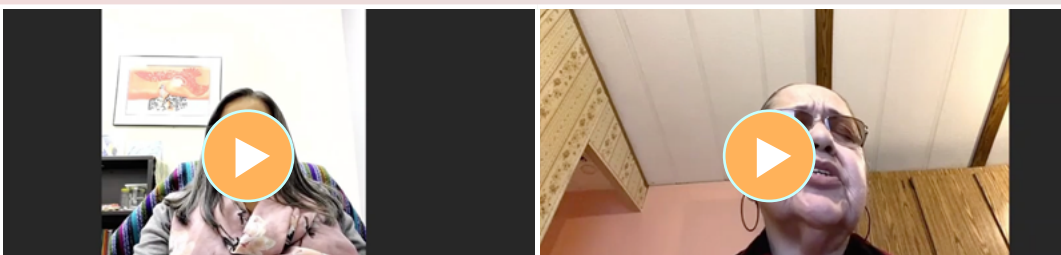
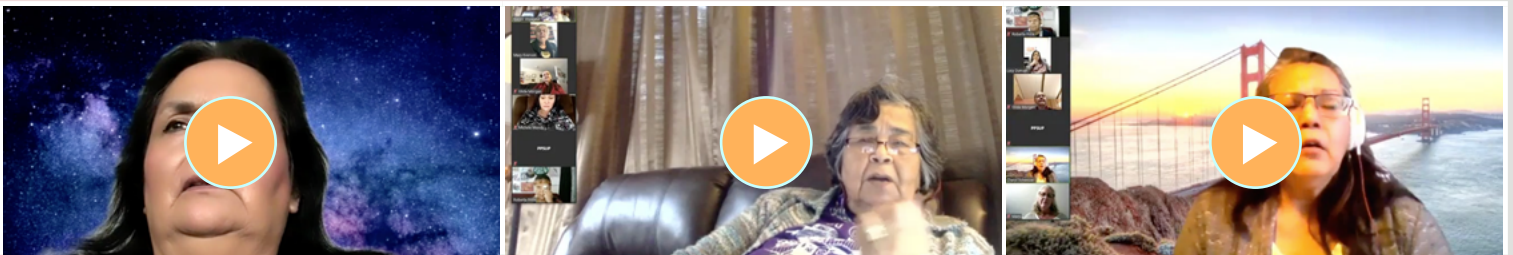
Elders need policy makers to hear Elders and support Elders to lead the decision making about their people.



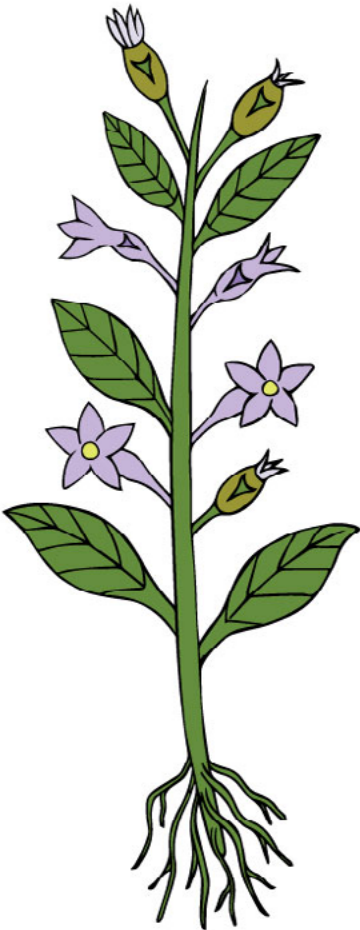
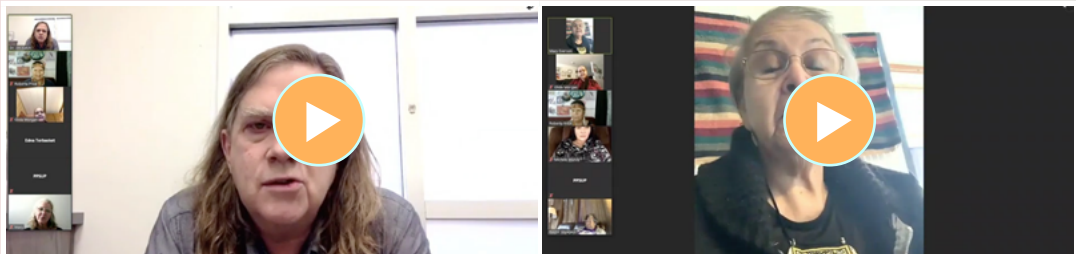
Part 4. Understanding Intergenerational Trauma and Its Impacts

Understanding how colonization, “Indian” hospitals, residential schools and systemic racism have impacted Indigenous Peoples and Indigenous family structures across British Columbia and across Canada is essential to creating changes that will support better health outcomes for Indigenous Peoples and future generations. Due to the impacts of colonization on Canada’s health care system, Indigenous Peoples experience many barriers when accessing health services. Colonization and racism in the health care system have resulted in negative health outcomes including increased substance use, impaired mental health and poor perinatal health outcomes. The disproportionate impact of the opioid crisis and historical and ongoing colonial violence and discrimination against Indigenous women has instilled a deep sense of loss and intergenerational trauma for Indigenous lifegivers along with their families and communities. Indigenous children and youth are disproportionately separated from their parents, extended families and cultures. Elders have identified that the responsibility lies with non-Indigenous people to educate themselves about the history of Indigenous Peoples, the root of the health care inequities they have endured and the intergenerational impacts these continue to create.

Elders hold wisdom from their lived experiences and bring forward this wisdom to guide Indigenous lifegivers and their families through challenges occurring today. Elder Lucy Duncan, Elder Cheryl Schweizer, Elder Glida Morgan, Elder Evelyn Voyageur and Elder Doris Fox share their perspectives on the importance of understanding how history and generational experiences have shaped the Indigenous experience today for Indigenous women, children and families. Elders share the importance of educating non-Indigenous health care providers through personal stories of forced evacuation from their homes, the impacts of residential schools and how relationships with child welfare services have instilled fear of child removals among Indigenous women and families.



Dr. Elder Jim Ketch and Elder Mary Everson share the need to facilitate support for Indigenous lifegivers and families to take care of their people. Facilitating a sense of empowerment is also key, where newly parenting or pregnant Indigenous individuals are provided love, comfort and teachings around parenting.



Health care providers must recognize and learn about the role of history and culture in shaping health and health care experiences.



EXERCISE: Understanding Impacts

Practicing cultural safety involves engaging in self-reflection and examining and identifying personal biases and your own world view and cultural lens. Follow the circles of questions in this exercise and think about how you might answer them or what they lead you to think about further.



Part 5. Being with Lifegivers

Elders engage with and support Indigenous individuals who are pregnant or newly parenting and using substances by building respectful and empowering those relationships and bringing forth Indigenous ways of being and knowing. Health care professionals may be well-meaning in their intention to care for Indigenous women and their infants based on Western medicine; however, this often results in a loss of traditional birth practices, ceremonies and rituals for Indigenous lifegivers.

Elders have an innate way of being with a woman by providing comfort and holding space for the woman to guide how their engagement will go. Elders might simply sit with the woman and listen, always believing their truth. They might offer a blessing, engage in consultation, share stories or lead a ceremony or traditional teaching.

In Part 5 of the toolkit, Elders share their ways of engaging with lifegivers, building relationships through trust and simply being there, supporting them in their own unique healing and wellness journeys.



Elders bring principles and wise practices for building relationships of mutual respect and understanding with Indigenous women.

Dr. Elder Roberta leads a welcome to the world ceremony for a mother and baby in an acute care setting.



TOOL: 10 Things Elders Do When Supporting Indigenous Lifegivers Who Are Pregnant or Early Parenting

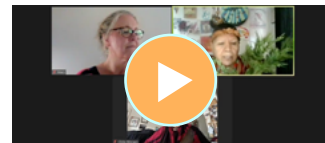
1 Elders impart tradition, knowledge, history, culture, values and lessons using storytelling and modelling traditional practices for pregnant and early parenting individuals using substances.

2 Elders believe and honour a woman's experiences and always accept her stories as truth.



3 Elders start a visit, meeting or phone call in a good way: with a welcome, blessing or prayer.

4 Elders give space for mothers and babies to be together and for spiritual connection to take place.



5 Elders know there is no single teaching to give or know, and they move gently within their teachings.

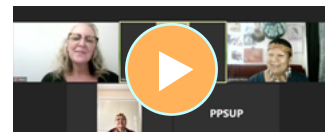
6 Elders witness the treatment of Indigenous lifegivers, children and families in the health care system.

7 Elders share the importance and impact of core values, including respect, compassion, wisdom, responsibility, care for yourself and for those around you, community, harmony and balance.

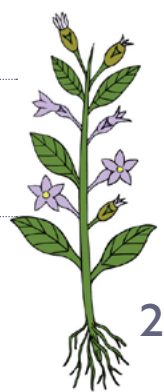


8 Elders ask permission, honour the space of the woman, and listen carefully and respectfully.

9 Elders bring healing through teachings, ceremony and silence.



10 Elders recognize that there are parts of a person's journey that may be difficult, and they use their intuition to stay with them at those times.



Part 6. Cultural Ceremony and Teachings

It is important to acknowledge the vast diversity and experiences across BC regarding Indigenous (including First Nations, Inuit and Métis) cultural teachings around birthing practices. Elders play an integral role in the community by sharing and passing down their knowledge and wisdom as well as leading traditional practices, rituals and ceremonies for lifegivers across their perinatal journeys. Elders use spirituality, storytelling, ceremonies and traditional medicine wheel teachings within their work with Indigenous lifegivers and their families to lift them up, empower them and celebrate the gift of new life. Elders honour women with the title of “lifegivers”, as they see them as creators and people who have the ability to gift life into this world. Elders also ensure that a lifegiver’s partner or family members always have a role in any ceremonies, when this is wanted.

Ceremonies guide and protect Indigenous lifegivers, their partner or families and show them that they are precious beings. Elders are calling to bring back ceremonies at each stage in a woman’s journey so that they are honoured, respected and can connect to culture, traditional healing practices and the land. Elders highlight the traditional roles and responsibilities of family members such as the father, aunts and grandmothers and ask health care providers to respect and support these roles in the lifegiver’s perinatal journey.

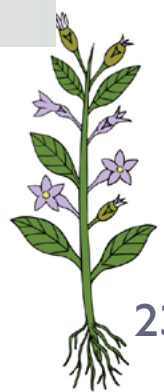
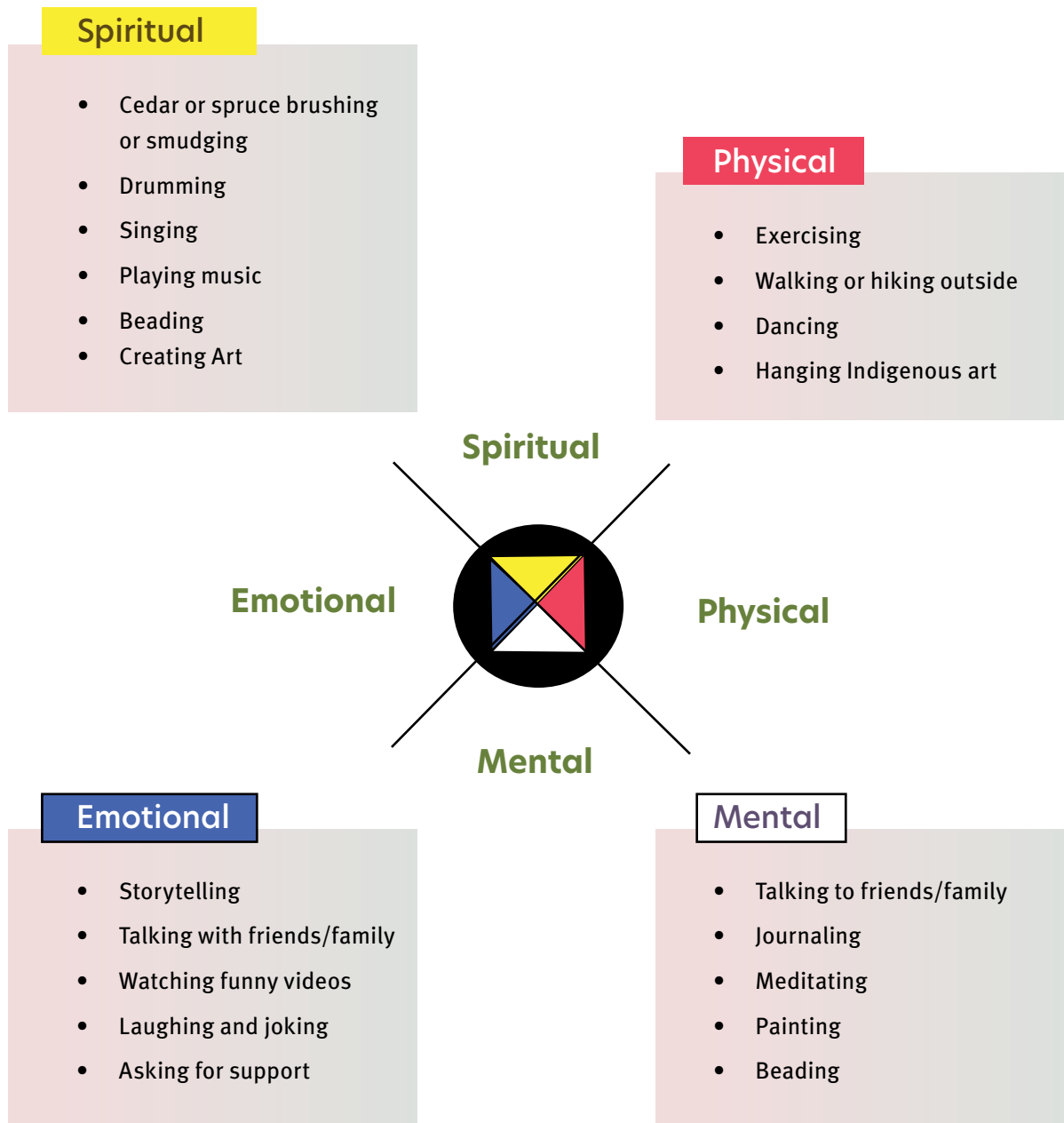
“ We need to honour our women and honour our girls and bring back the ceremony at each stage of our lives.”

— Dr. Elder Roberta Price



EXERCISE: Supporting Healing and Wellness

The medicine wheel is an Indigenous symbol and is used by Indigenous Peoples according to their own teachings that have been passed down to them by their Elders. The medicine wheel teaches us that each person has four aspects to themselves: the physical, the mental, the emotional and the spiritual. Balance among the four aspects creates healing and wellness. As you move through the four aspects of the medicine wheel, we ask you to reflect on how you can support healing and wellness for Indigenous lifegivers.



Elders share their traditional ceremonies and teachings about how they support Indigenous women, children and families impacted by substance use.

Ceremony of Introduction



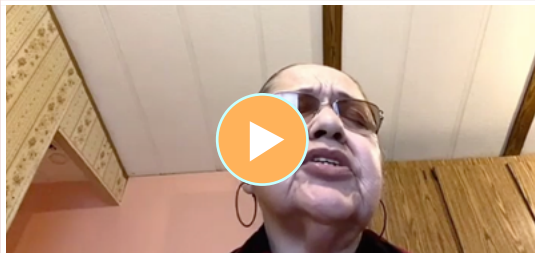
Dr. Elder Roberta shares her process for introducing ceremony to a lifegiver and family.

Building Trusting Relationships

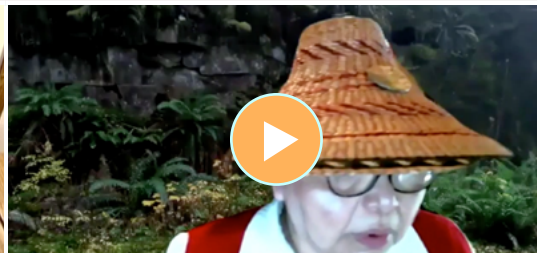


Elder Glida builds trust by creating a safe and positive space and being understanding about the challenges a person has experienced.

Ceremony to Celebrate a Lifegiver and Newborn





Elder Glida shares ceremonies performed to celebrate women and newborns. The most important thing is finding the ceremony that works for the woman.



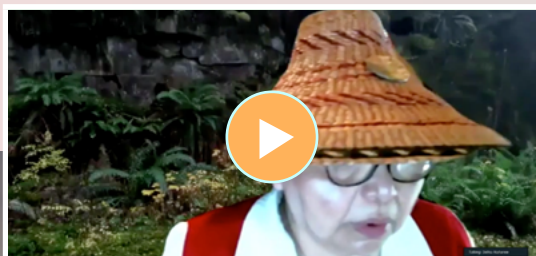

Elder Delhia shares many ceremonies for a woman, the newborn, and the community.



Traditional Birth Ceremony in Hospital

 <p>Edna Terbasket</p>	
<p>Elder Edna shares a story about challenges from health care providers to bringing in a ceremony at the time of birth.</p>	<p>Dr. Elder Jim shares how providers can make time and space for traditional ceremony, as he did when he delivered Elder Edna's great-grandchild.</p>

Teachings of Healing and Wellness

	
<p>Elder Delhia shares a cultural teaching about the birthing of babies and talks about the pressures placed on women and how to bring this knowledge to the perspective of how we support pregnant and parenting women affected by substance use.</p>	<p>Elder Lucy shares a story about her own health as a child and her grandfather's perspective on sickness, healing and health.</p>



Here is a list of traditional and cultural ceremonies Elders talked about when supporting pregnant and parenting individuals and their infants. We acknowledge this list does not encompass all Indigenous ceremonies and teachings for pregnant and parenting people. In the blank lines below, we encourage you to write down additional ceremonies or teachings you have witnessed Elders share in your community.

- Ceremony of Introduction
- Blanketing Ceremony
- Birthing Ceremony
- Birth of the Baby Ceremony
- Welcome to the World Ceremony
- Moon Time Ceremony
- End of life Ceremony
- Indigenous languages
- Belly Wrapping
- _____
- _____
- _____
- Land-based Healing Ceremony
- Opening and Closing Blessings
- Ceremonies with sacred medicines such as tobacco, sweet grass, sage, cedar, huckleberries, salmon berries
- Community Healing Ceremony
- Placenta Ritual
- Cedar or Spruce Harvest and Brushing
- Smudging
- _____
- _____
- _____

Health care providers must create space for traditional birthing practices and ceremonies that include partners and families, provide different options for safe maternity care settings and increase the number of Indigenous maternity care providers (e.g., midwives, doulas, birth workers).



Continue Your Learning Journey

1) *The Elders Visioning Perinatal Substance Use Toolkit suggests ways to start engaging Elders into your practice and perinatal substance use care and how to provide culturally safe care for pregnant and parenting women impacted by substance use and their families. We encourage you to continue your learning journey and reflect on how you can:*

- Engage with Indigenous Elders to address the gaps and barriers in services and supports for Indigenous women using substances who are seeking care.
- Proactively work with Elders and Indigenous knowledge keepers to provide culturally appropriate health care.
- Focus your attention and care to Elders and create safe spaces for Elders throughout the entirety of an engagement.
- Ensure cultural safety when you are in spaces with Elders and pregnant and parenting women using substances by modelling and engaging in a respectful way.

2) *Indigenous Cultural Safety training is available online throughout BC and includes provincial and Regional Health Authority training offerings. These training opportunities unpack how to work in a culturally safe, good way. Some examples are highlighted here:*

- Sany'as Indigenous Cultural Safety Training (PHSA) is designed to enhance self-awareness, develop understanding and promote positive relationships when working with Indigenous Peoples.
- UBC Learning Circle, Centre for Excellence in Indigenous Health provides educational and informational opportunities to health care providers working with First Nations communities with a diverse range of Indigenous speakers, leaders, Elders and experts.



References

Elder Oral History: Dr. Elder Roberta Price, Coast Salish Snuneymuxw and Cowichan Nation; Elder Glida Morgan, Tla'amin First Nation; Elder Cheryl Schweizer, Tl'azt'en Nation, and of the Lusilyoo (Frog) clan; Elder Edna Terbasket, Okanagan Indian Band; Elder Evelyn Voyageur, Kwakwaka'wakw First Nation, of the Dzawada'enuxw tribe; Elder Delhia Nahanee, Nisga'a and Squamish First Nations; Elder Doris Fox, Musqueam First Nation; Elder Dr. James Ketch, Métis and Cree First Nations; Elder Lillian Daniels, Métis and Cree First Nations; Elder Lucy Duncan, Binche Keyoh First Nation of the Lhojaboo clan; Elder Marie Bercier, Métis Nation; Elder Mary Everson, K'ómoks First Nation

Elder Protocol Handbook. Queens University. Retrieved from:

<https://www.queensu.ca/culturalstudies/sites/webpublish.queensu.ca.cltstwww/files/files/Elders%20Protocol%20Handbook.pdf>

First Nations Elder Protocol (2014). Indigenous Corporate Training Inc. Retrieved from:

<https://www.ictinc.ca/blog/indigenous-elder-definition#:~:text=Indigenous%20Elders%20are%20deeply%20committed,of%20the%20elements%20and%20seasons.>

In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in BC Health

Care (2020). Dr. Mary Ellen Turpel-Lafond. Retrieved from: <https://engage.gov.bc.ca/app/uploads/sites/613/2020/11/In-Plain-Sight-Summary-Report.pdf>

National Inquiry into Missing and Murdered Indigenous Women and Girls. (2021). Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls. Retrieved from: <https://www.mmiwg-ffada.ca/final-report/>

Rooming in Guideline (2019). Provincial Perinatal Substance Use Project, BCWH, PHSA.

Retrieved from: <http://www.perinatalservicesbc.ca/Documents/Education/Rooming%20In%20Guidelines%20for%20Perinatal%20Women%20Using%20Substances.pdf>

Sacred and Strong: Upholding our Matriarchal Roles. The health and wellness journeys of BC First Nations women and girls (2021). First Nations Health Authority and Office of the Provincial Health Officer. Retrieved from: <https://www.fnha.ca/Documents/FNHA-PHO-Sacred-and-Strong.pdf>

Truth and Reconciliation Commission of Canada: Calls to Action. Retrieved from:

https://www2.gov.bc.ca/assets/gov/british-columbians-our-governments/indigenous-people/aboriginal-Peoples-documents/calls_to_action_english2.pdf

The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP). The United

Nations. Retrieved from: https://www.un.org/esa/socdev/unpfi/documents/DRIPS_en.pdf

