

Dental Hygienists

Home & Away



Promoting Cultural Competency Through Indigenous Art and Dialogue

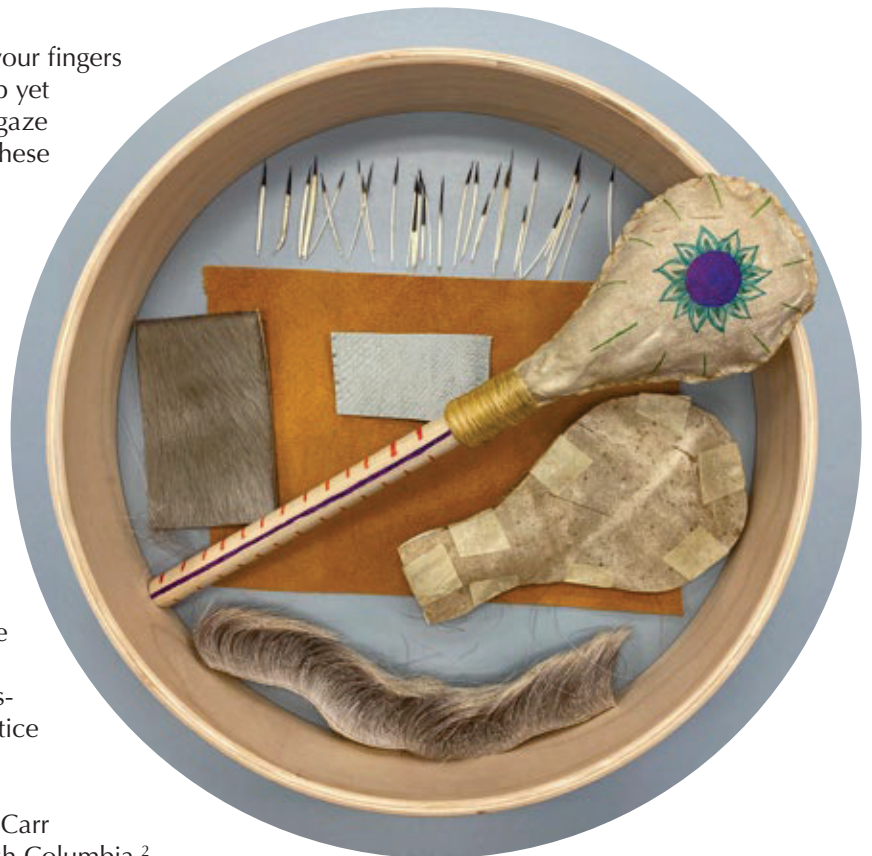
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Caribou hair—silky and fine, it slides through your fingers without any resistance. Porcupine quills—sharp yet smooth to the touch. Seal hair—shines as you gaze deeply at the texture and colour. As you hold these materials and work them in your hands, your mind wanders, thinking about the experiences being shared. Feelings of sadness, guilt, and shame flood your heart and mind. Speechless, you hold back tears.

In April 2021, six students from the College of New Caledonia's dental hygiene program participated in a pilot project developed by Emily Carr University of Arts + Design with key input from the college's executive director of Aboriginal education. The project, *Decolonizing the Healthcare System through Cultural Connections*, attempts to initiate change in British Columbia's health care system, starting with health science students.¹ Students participated in a three-day Indigenous-led workshop that used a materials-based practice approach to connect the participants.¹

Material practice kits were assembled at Emily Carr University and shipped to Prince George, British Columbia.² During the workshop, students used the materials to create culturally significant pieces such as baskets, rattles, and drums.³ The pieces created helped encourage dialogue, relationship building, and knowledge exchange between health science students and Indigenous people.¹ Students listened to stories from the Indigenous workshop participants; some focused on experiences in health care, others on experiences in residential schools.³

Prior to the workshop, students had minimal exposure to Indigenous culture. Students had varying expectations of the workshop but most centred around learning how to prevent discrimination in the health care system and listening to experiences of those who had faced discrimination while accessing health care services.³ Students recognized that systemic racism exists in our current health care system and were looking for ways to promote change and advocate for their clients.





The workshop primarily consisted of meaningful thoughts shared by an Elder, sharing circles, and a hands-on activity such as learning how to bead or weave.¹ Students listened to knowledge and stories from local Indigenous people on Indigenous culture and the role of healers within Indigenous culture. They also heard traditional stories that have shaped Indigenous beliefs.³ Dialogue about Indigenous culture fostered the students' understanding and acceptance of traditional medicine. Students believed this knowledge would

influence how they interact with their clients, providing care that is free from judgement and discrimination, and respectful of their clients' needs and preferences.³

Experiences of the impact of forestry on Indigenous culture and the impact of the discrimination experienced through the health care system were also shared. Stories that affected students the most were those about the psychological, physical, and emotional impact of residential schools on generations of Indigenous people.³ Awareness was generated, and students were able to fully understand how residential schools could influence generations of people. Students also discovered how they can create a culturally safe environment for their clients by being mindful of past experiences that may influence their clients' actions and perceptions of health care.

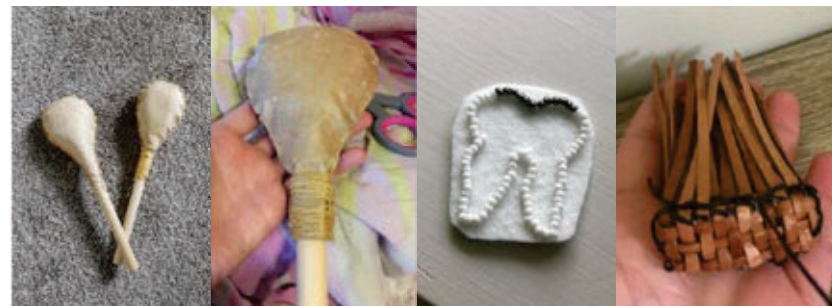
This experience was valuable for all six students as it ignited a journey of self-exploration and self-awareness. Throughout Canada's history, people have knowingly and unknowingly perpetuated racism. For decades we have socially constructed terms such as race and categorized people based on these social constructs. We have been conditioned and systemically taught through colonialism to see whiteness as "normal." These social constructs influence both our social and professional interactions.

Indigenous peoples in Canada have a reduced life expectancy due to comorbidities such as diabetes, hypertension, mental health concerns, and substance abuse.⁴ As dental hygienists, we recognize the influence of these conditions on oral and general health, and we must

help our clients to work towards a state of health. We must tailor their dental hygiene care to respect their cultural preferences, be mindful of their past experiences, and create a culturally safe environment.

Change is long overdue. This powerful workshop raised awareness that the change must start with us—dental hygienists. We have a responsibility to adhere to the *Dental Hygienists' Code of Ethics*, and we have a responsibility to provide safe, ethical care to all populations. We have a responsibility to recognize our privilege, our power, and the policies they have influenced. We have a responsibility to inspire change.

When our students graduated in June 2021, they entered the profession of dental hygiene as change agents, intent on improving the health care experiences of Indigenous peoples. The students have committed to facilitating change not only in their professional practice, but also in everyday life. They will continue their journey of cultural competency and practice of allyship.



References

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