

'I THOUGHT I WAS HELPING': BEYOND GOOD INTENTIONS TOWARD ENGAGEMENT WITH INDIGENOUS PEOPLES

Kate Dunn¹, Keenan Boily², Troy Combo³, others TBD⁴

¹Viral Hepatitis Care Network, University Health Network, ²Reseau Access Network, ³Burnet Institute, NSW Australia, ⁴TBD

Dr Kate Dunn is an Indigenous woman from Mississauga First Nation in Ontario Canada combining Indigenous Ways of Knowing, Being Doing and Connecting with background in Nursing in co-creating culturally connected hepatitis C awareness resources.

Keenan Boily is a registered nurse working to build connections and provide wrap around care supporting wellness, harm and risk reduction and education for people in Sudbury, Ontario.

Troy Combo is a Bundjalung man from the Northern NSW Australia and is a leader in Aboriginal health known for his leadership and efforts to improve population-based health outcomes.

Background and objectives: Historical and current interconnected systems of power resulting from colonization continue to influence our bias, perspectives, how we enter and interact within healthcare spaces. Systems in place have been shaped to facilitate the needs and goals of specific people or certain populations, often at the expense of people whose living experience reveals vast inequities in access to care supporting health. As healthcare professionals we have good intentions to support the health of all. But are good intentions enough? It has been said that the road to harm was paved by good intentions. Broken Treaties began with good intentions, residential schools started with good intentions, healthcare systems are shaped from good intentions. But as evidenced by higher rates of substance mis-use, infectious diseases and other diseases of disconnection within Indigenous populations these intentions do not always have positive impact. No problem was ever solved in the same mindset that created it, so how do we break the pattern and shape action around the respectful and relational delivery of culturally connected care that exerts more than good intentions.

Description of how the session will encourage debate and idea sharing: This workshop will include conversational sharing of experiences and perspectives from an addiction programming nurse, Indigenous researcher and others with lived experience in the healthcare system related to hepatitis C.

Methods and format for promoting dialogue and networking: Conversational and thought-provoking reflections; tokenism vs intentionality in sharing space and listening to Indigenous perspectives; Consideration toward acting upon feedback from lived experience with racism. Realizing unrecognized bias is experienced by those around me; Defending current structures of healthcare sacrifices relationality; The impacts of relationality and Indigenous Knowledge on the diagnosis of hepatitis C; Being a better ally to support Indigenous community engagement in hepatitis C care and cure includes self-awareness.

Disclosure of Interest Statement: The speakers have presented at various conferences and have received consulting / speaking honoraria from various organizations.