

Type 2 Diabetes and Indigenous Peoples Webinar: Questions & Answers

On August 19, 2020, thought leaders Rebecca Sovdi and Jessica Guss provided context and understanding required to effectively support Indigenous peoples on a culturally safe and self-determined journey. Rebecca and Jessica provided the following answers to questions asked in the webinar.

Are there provincial patient handouts/resources so that everyone doesn't need to create their own?

There currently are not a lot of great resources or patient handouts that apply a cultural safety lens, but FNHA has prioritized this and hopes to develop more resources in the coming year. Stay tuned!

How can we support diabetes care beyond revising documents/patient handouts while advocating for decolonization and racism?

Certainly, reflecting upon and adapting patient handouts is a good starting point, but it is not enough. Other great ideas include continuous cultural safety learning and reflection for all team members, using quality improvement methods for programs and services, and seeking input from Indigenous people with diabetes to better understand their experiences and hopes for the future.

Relationships take time but a person needs care right now, no?

While relationships do take time to build, a lot of trust and connection can be established quickly in the first interactions. Consider the importance of communication styles, for example friendly and non-judgemental, and creating equity between care provider and person with diabetes. Health care providers don't need a lab coat or stethoscope to show intelligence. As health professionals, sometimes we feel our job is to make sure we give information, often all on the first visit, and to be the expert. Instead, start the journey side by side together with the person with diabetes, ideally with the person with diabetes in the driver's seat. This will lead to the best long-term relationships and outcomes.

How can people with diabetes be encouraged that it is not their FAULT and to be encouraged to get help when struggling? It would be ideal if more people with diabetes would study it and try to encourage more education.

The system is currently set up to generally make people feel like they have failed and there is great misunderstanding of the causes of diabetes. This includes the current education available, so pushing people with diabetes towards this education is not going to create change. Instead of focusing efforts on making people with diabetes change themselves, let's instead focus that energy on changing the system to be one that is more culturally safe and addresses the social determinants of health.

What do you think is the single biggest thing we could do at the system level to improve type 2 diabetes care for Indigenous Peoples?

Address the racism in the healthcare system – both the direct racism and the system racism. FNHA has stated that 'We will have achieved cultural safety in the healthcare system when First Nations people tell us we have.' So, we still have a lot of work to do.