

Sexuality Education Resource Centre is committed to promoting sexual health through education.

Overview

Sexuality Education Resource Centre is a leader in sexual health education, grounded in principles of consent, bodily autonomy, and equitable access to sexual & reproductive health services. As part of our commitment to healthy sexuality, we have identified colonialism as a form of violence and as a social determinant of health for Indigenous people. In the spirit of reconciliation, we aim to support Indigenous-led processes to decolonize the structures and systems within which we work.

Background

For more than 500 years in the Americas, colonial policies have violently enforced, and negatively affected Indigenous peoples in profound ways, resulting in vast inequities. Since first negotiating the Treaties, including Treaty 1, Canada has violated their spirit and intent, the cumulative impact of which has created the current marginalization and dispossession of Indigenous peoples. Canada's unique history of colonization includes removal from lands, intentional starvation, imposed salvation, and forced sterilization. Nowhere is this more evident than in the creation of the residential schools, where culture, language, family ties and community networks were destroyed for generations of Indigenous children. This cultural genocide, "the destruction of those structures and practices that allow a group to continue as a group"¹, resulted in damage to political and social norms among the Indigenous Nations. The results of these policies have had wide-ranging effects including impact on physical, mental, sexual and spiritual wellbeing of individuals, their families and their communities.

The legacy of the residential schools and the political legal policies around their history continue to be reflected in the significant educational, income, health, and social disparities between Aboriginal and non-Aboriginal Canadians.²

In 2008, a Truth and Reconciliation Commission was established in Canada, as part of the Indian Residential Schools Settlement. This commission was mandated to investigate and report the complex history and legacy that residential schools had on Indigenous populations, and to set a path to guide healing and reconciliation within and among families and for all Canadians. Seven years later, a comprehensive document containing accounts of personal experiences, detailed government policies and historical quotes from political, church and community leaders of the time, was presented to government and the Canadian public. This document also contained an extensive and thorough roadmap of recommendations to help guide the process of repairing relationships, a call to action for all Canadians.

1 Truth and Reconciliation Commission. P. 1

2 Truth and Reconciliation Commission. P. 183

*Just as social problems spring in part from collective experience, so solutions require change at the collective level. Aboriginal people acting alone cannot shift the weight of disadvantage and discrimination. But solutions that lift the weight for Aboriginal people collectively shift it for everyone.*³

Reconciliation is the act of establishing new, equal and trusting relationships, which includes learning about the past and present, acknowledging and remedying harms that have taken place, and taking action to build a just and equitable future⁴. This concept of reconciliation has emerged from acts of colonization, the process by which people from one territory establish, maintain, and expand colonies in another territory, often claiming sovereignty over the colonized peoples and the land⁵. The resulting changes to political systems, economic priorities, and ideologies based on race, culture, and skin colour, advantageously position the colonizers. Colonial policies are embedded in economic, social, and political institutions and processes, which in turn generate and perpetuate racism and marginalization⁶. In Canada, Indigenous people continue to face marginalization from mainstream society. Racism is perpetrated on a structural level that continues to inform institutions (e.g. schools, healthcare, and justice) and cause harm to entire groups of people and their descendants⁷.

The United Nations' Declaration on the Rights of Indigenous Peoples (2007) helps guide the development of legal norms and to set standards around the treatment of Indigenous peoples. Specific to health, this document states that Indigenous individuals should have the right to access, without discrimination, all social and health services and have an equal right to the enjoyment of the highest attainable standard of physical and mental health. This declaration also identifies vulnerable individuals, including elders, women, children and those with disabilities and the need for the state to ensure protection against all forms of violence and discrimination⁸. Though it continues to be superseded by Canada's constitution and laws, the government of Canada officially endorsed this document in 2016.

Human Sexuality is a broad complex concept that describes the myriad of ways we as human beings intentionally and unintentionally express our experiences and ourselves as sexual beings (Rathus et al, 2015). SERC's sexuality wheel illustrates the complex diversity of human expression that falls within this self-construction. Our social safety and social location impacts our understandings of our bodies, our relationships, our gender, as well as our values, beliefs, thoughts and feelings.

Residential schools directly attacked Indigenous sexuality, inflicting a number of physical, mental, emotional, and spiritual harms (TRC, 2015) on Indigenous children, which negatively impacted Indigenous sexuality and sexual wellness. Colonialist methods attempted to dictate, erase and control Indigenous bodies and bodily rights. The damage caused by these attempts are profound and continue to impact Indigenous health. As the calls to action dictate⁹, a path of healing in regards to this is essential for reconciliation to occur. Specific attention must be called to healing this specific type of sexual violence in order for equity to truly be realized.

3 <http://www.aadnc-aandc.gc.ca/eng/1100100014597/1100100014637#chp3>

4 <http://www.heretohelp.bc.ca/visions/indigenous-people-vol11/glossary>

5 http://www.nccah-cnsa.ca/Publications/Lists/Publications/Attachments/46/health_inequalities_EN_web.pdf

6 ibid

7 <https://www.youtube.com/watch?v=2kYDEXPq62Y>

8 http://www.un.org/esa/socdev/unpfii/documents/DRIPS_en.pdf

9 Specifically, 18, 19, 20, and 22

Key Considerations and Recommendations

External:

- Advocate for government support of the Truth and Reconciliation Commission recommendations.
- Support recommendations of other inquiries and from other organizations with particular creed paid to Indigenous organizations, grassroots movements and voices.
- Advocate for systemic change to address historical injustices, institutional discrimination, colonization and colonial relationships as they apply to the quality of care provided.
- Continue to advocate for equitable access to sexual and reproductive health services.
- Advocate for system-wide cultural safety training in the health, education and social services sectors to facilitate safer therapeutic encounters and challenge inequalities in services.
- Recognize that colonial practices, embedded in the current service delivery models may contribute to ongoing power imbalances.

Internal:

- Require all staff to take a course on how residential school history continues to impact Aboriginal Health (follows from TRC Call to Action #24)
- Increase staff awareness of Indigenous healing practices, while providing opportunities for their use and integration (follows from TRC Call to Action #22)
- Seek and build partnerships with Indigenous people and organizations as a preliminary step towards indigenizing the structures and systems within which we work.
- Ensure that concepts of equity and cultural safety are embedded within policies, programming and procedures
- Develop procedures on Land and Treaty acknowledgements to be used within the various facets of SERC's programs and services
- Honour and respect indigenous worldviews, knowledge and realities.
- Engage and invite people with lived experience to consult on systemic change.
- Respect and integrate Indigenous knowledge and cultural practices related to sexual health.
- Develop and sustain relationships with Indigenous organizations to support autonomy and control of service delivery to restore relationships and strengthen resilience and hope.
- Review current hiring and volunteer recruitment; identifying and implementing ways to better reflect diversity.
- Act in allyship by listening and taking direction from Indigenous Voice, understanding "ally" is not an identity SERC can claim, but must be freely bestowed upon us.

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- Ensure that staff and volunteers are trained in understanding cultural awareness, cultural sensitivity and cultural safety.
 - Encourage staff to reflect on their own culture and develop an awareness of how this impacts the services they provide.
 - Work with indigenous organizations to create a list of current TRC workshops and education.
 - Endorse recommendations from Truth and Reconciliation Commission and consider the ongoing impact of colonization in service delivery and development¹⁰.
 - Encourage research initiatives that share knowledge and support program decision-making.
 - Ensure strong connections among all programs to support the exchange of information and experiences that facilitate collaboration and reduce barriers within SERC.
 - Facilitate understandings of self-determined sexuality and sexual health, while providing our programs and services using a client-centred approach.
 - Recognize the continuing strength, self determination and resiliency of Indigenous people, families, nations and organizations in maintaining and renewing Indigenous knowledge and ways of life.
 - Explore the adoption of a Reproductive Justice lens in our work, which may include language changes, advocacy approaches, adoption of a separate belief statement/paper on the subject, and other implications.

General:

- Collect and use both qualitative and quantitative data from SERC's service-users' experiences for the purpose of program evaluation and development.
- Recognize colonization and attempted genocide as social determinants of health and part of the work to understand the complex role that colonization plays in the lives and health of Indigenous people in Canada.

¹⁰ http://www.trc.ca/websites/trcinstitution/File/2015/Findings/Calls_to_Action_English2.pdf

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