

TRADITIONAL HEALING AND WELLNESS GATHERING REPORT



CREATED BY:

Traditional Healing Program, IPHCC

PREPARED FOR:

IPHCC Membership

DATE PREPARED:

February 22, 2023

MIIGWETCH, MAARSII, NAKURMIK, NIÁ:WEN!

On behalf of the Indigenous Primary Health Care Council (IPHCC) I would like to extend a sincere chi-miigwetch to all our members for their support and participation during this year's gathering. Listening to the stories and extraordinary work carried out across Ontario supporting the health of First Nations, Inuit, and Métis (FNIM) Peoples will lead to a better integrated health system for all FNIM Peoples.

Over three days, we had the opportunity to gather in-person and discuss the state of the accreditation program and how it reflects the services provided by each site. As we sat together and considered the program, we were able to hear your thoughts and concerns from the frontlines. We articulated what the program is but need to do a better job explicitly stating what it is not—it is not about sharing Indigenous knowledge. We need to re-shape the way we approach the accreditation model and mentorship program to better support wholistic needs. The findings from these discussions will guide and inform the work moving forward. This gathering could not have been successful without the valuable information shared by each and every one of you. Your support and ongoing dedication will create a better health system for all future generations.



Caroline Lidstone-Jones, IPHCC Chief Executive Officer

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EXECUTIVE SUMMARY

On December 6 and 7, 2022, IPHCC hosted its first Traditional Healing and Wellness Gathering in Takaronto (Toronto). The traditional territories of many nations, including the Anishinaabeg, the Chippewa, the Haudenosaunee and the Wendat peoples. We also want to acknowledge the original, and current stewards of Takaronto, the Mississaugas of the Credit.

At the Gathering, 150 delegates (Traditional Healers, Knowledge Keepers, CSPs, program leads, academics, and others) representing various Indigenous Primary Health Care Organizations (IPHCOs) were in attendance. Information sharing from the Gathering focused on development of an accreditation model and mentorship program. Concerns were heard about the risks that formalizing traditional healing could result in ceremonies, cultural and healing practices being shared and appropriated by the mainstream health system. Recognizing and appreciating the importance and legitimacy of these concerns, it was confirmed that the intent of the program is to create infrastructure, not share Indigenous knowledge.

The following sentiments were echoed by membership at the gathering:

- Creating equitable infrastructures that reflect the diversity and uniqueness of Indigenous communities.
- Safeguarding knowledge systems, promote best practices.
- Offer strategies to provide culturally appropriate primary healthcare within western systems as defined by Indigenous Peoples.

Throughout the Gathering, participants expressed realities that reflected their community dynamics and circumstances, geographic history, strengths, and cultural assets in support of traditional healing. An array of offerings was proposed to support the creation of a Traditional Healing and Wellness Program to ensure Indigenous people have access to traditional healing services today and into the foreseeable future.

Key highlights included:

- Exploring “accreditation” models for Traditional Healing Practitioners within IPHCOs.
- Teaching the next generation. Developing a mentorship program for Indigenous youth.
- Listening. Member sites sent delegates to participate in a Youth Forum. Twelve young folks had the opportunity to share their thoughts, experiences about the future of Traditional Healing and what a mentorship program should look like.
- Learning from each other. Six member sites delivered 30-minute presentations about their Traditional Healing programs.



BACKGROUND

Traditional healing and wellness can be defined as a journey towards good health and well-being, which begins with a focus on oneself, and involves sustaining balance through awareness and self-acceptance. With traditional healing, this balance can be achieved through integrating elements of physical, emotional, mental, and spiritual well-being contained within the model of wholistic health and well-being.

FNIM communities look to knowledge that was gifted by the Creator, practiced for centuries by Indigenous ancestors, and passed down through Cultural Service Providers (CSP), including Knowledge Keepers, Traditional Healers and Helpers, Elders, and midwives. This knowledge has been developed and refined over centuries, and predates modern medical knowledge centering around Western science. As such, traditional healing relies significantly on utilizing traditional medicines, ceremony, and land-based programming to connect deeply with earth, water, plants, and animals. *(Source: IPHCC Knowledge Keepers Circle, November 2021)*

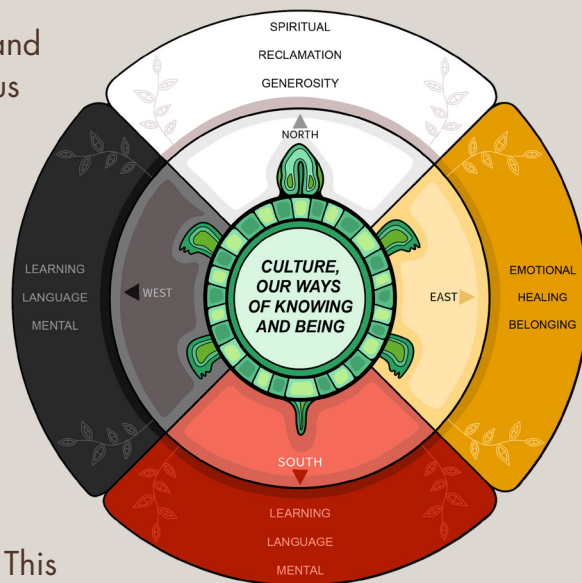
According to the First Nations Health Authority, traditional healing refers to health practices, approaches, knowledge, and beliefs incorporating First Nations healing and wellness while using ceremonies, plant, animal or mineral-based medicines, energetic therapies; and/or physical/hands on techniques.

This may include:

- Traditional Healers
- Traditional Helpers
- Spiritual Advisors
- Natural Helpers (Aunties and Uncles)
- Use of Traditional Medicines
- Cultural Specialties (ceremonies, rites of passage, etc.)
- Traditional Teachings (knowledge sharing and keeping)
- Cultural retention (language, regalia making, music, arts, storytelling, crafts, etc.)
- Land-based activities (traditional hunting and gathering, fishing, trapping, maple sugar bush, planting medicines, etc.)

Traditional healing is embedded in the Model of Health and Wellbeing (MWHW), the model that guides all Indigenous Primary Health Care Organizations (IPHCOs) in Ontario. This model represents an Indigenous perspective of what constitutes health and wellbeing. It stipulates that culture, our Indigenous ways of knowing and being, is healing. The MWHW makes it clear that Culture as Healing is necessary to promote wellbeing across all aspects of the self: physical, mental, emotional, and spiritual.

Culture as Healing as identified in the MWHW, provides inter-professional, team based primary health care that is grounded in Indigenous traditions and ways of knowing. This commitment is encapsulated by the following value statements:



We are committed to providing our clients, our communities, and our people with Culture as Healing. This commitment is guided by our Indigenous values, our ancestry, the Seven Grandfather Teachings and other sacred traditional teachings that reflect our diversity.

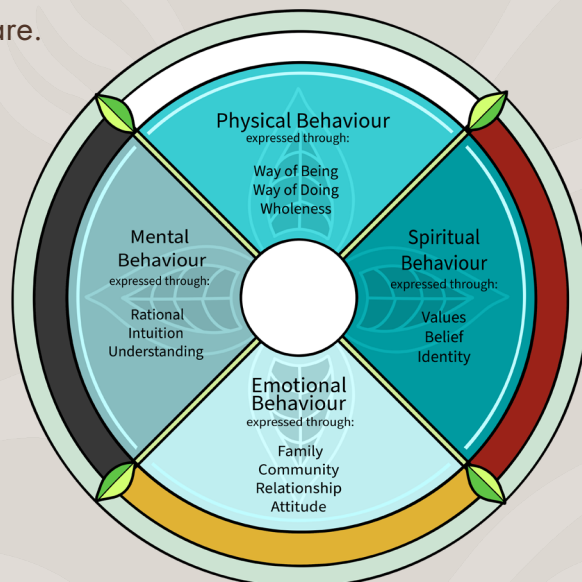
The care we provide will be inclusive and determined by the clients, family, and the people we serve. We will be guided by our connection to the land, the plants, and animals it supports, as well as our belief that food is medicine.

We will communicate in the language of our client's choice. (Source: Dr. Pamela Toulouse)

Traditional healing is integrated within every aspect of care. The four categories of programs and services together promote health and wellbeing across all aspects of the self—spiritual, emotional, physical, and mental:

- Traditional Healing Services and Medicines
- Mental Health and Wellness Services
- Community Programming
- Primary Health Care Services

Land-based activities are an integral part of a traditional healing and wellness program and encompasses client-based activities, community-based activities, and networking activities.





DEVELOPING A TRADITIONAL HEALING AND WELLNESS SECTOR – A PROVINCIAL PERSPECTIVE

At the beginning of this journey, IPHCC and IPHCOs envisioned creation of a traditional healing and wellness sector that was sustainable, equitably resourced, and promotes physical, spiritual, mental, and emotional wellbeing among FNIM.

While the work of Traditional Healing and its practice is centuries old, mainstream health care providers still lack belief in its value. The colonial structures embedded within health systems often create a hierarchy between Indigenous and non-Indigenous knowledge systems and practices, excluding or minimizing the relevance of Indigenous healing practices in addressing the holistic health needs of Indigenous Peoples.

Our members have worked tirelessly over the decades to restore and pave the way of integrated Traditional Healing within community health care. It is because of their commitment to honouring and restoring ancient ways, IPHCC now has a dedicated team, that will support member sites vision to integrate cultural ways of being across the various health care streams within Ontario, ensuring maximum reach of all Indigenous peoples.

GUIDING PRINCIPLES

- Honour and respect for Indigenous Health Knowledge
- Culture is Healing and Wellness
- Reciprocity in relationships
- Diversity in perspectives
- Advancement and promotion of the Model of Wholistic Health and Wellbeing
- Establishing strong roots and connections to the land
- Equitable resourcing to those who work in healing and wellness models of care delivery

COMPONENTS TO THE PROGRAM

The term “integrative primary health care” has become a new introduced concept amongst mainstream health care that seeks to include Indigenous knowledges systems on wholistic health. In its ideal form, integrative health care is interdisciplinary, non-hierarchical and collaborative. The process of integration is facilitated through consensus building, mutual respect, and a shared vision of health that involves practitioners, patients and communities.

To support development of a structured traditional healing and wellness framework that can be scaled and spread at a national level, the IPHCC partnered with the Foundation for Advancing Family Medicine (FAFM) on a proposal submission to broaden the capacity of inter-professional comprehensive primary care in Canada. IPHCC is leading the work on developing and implementing sector-based solutions to address the workforce challenges of needs of traditional healing and cultural service providers. Specific objectives within this work include:

- 1. Develop an “accreditation” model for traditional healing with the following attributes:**
 - An integrated primary care model for traditional healing within all health care sectors.
 - Traditional medicines and ceremonial practices must remain at the forefront of the model.
 - The model has the latitude to allow Indigenous organizations and communities to continue their own cultural practices and work within their scope.
 - Balances the spirit of Indigenous ways of healing with mainstream healthcare.
 - Supports ongoing quality improvement in community-based organizations that work with populations of the greatest need.
 - Processes and standards of excellence for traditional healing and cultural services.
- 2. Increase capacity of Indigenous health organizations and communities to provide traditional healing and cultural services to Indigenous peoples.**
- 3. Protect and maintain the experiences and knowledge of our Traditional Healers through promoting and delivering traditional healing training and employment opportunities for a new generation of Indigenous Traditional Healers and Cultural Service Providers.**
- 4. Support organizations in achieving quality service provision through participating in the accreditation review process.**
- 5. Develop an evaluation framework, performance indicators and tools for evaluating the new accreditation module and the implementation for ongoing monitoring and sustainability.**



GATHERING KNOWLEDGE AND DIRECTION TO MOVE FORWARD IN A GOOD WAY

IPHCC understands the limitations within this work. We look to you, for your direction and guidance for this work, going forward as it can't be done in silos.

The purpose of the Gathering was to build and foster strong alliances and work towards the development of a structured traditional healing program. In doing so, new life would be breathed into ancestral ways of healing, health and wellness; thereby renewing trust in the beauty, power and diversity of our ancestral ways of life.

To foster opportunities for collaborative engagement and dialogue, a gathering was necessary to create a safe space to gather and share information. IPHCC embarked to acquire invaluable input from delegates that would inform and shape the direction of key components within the Traditional Healing and Wellness Program, focusing on an accreditation program, evaluation framework, and Traditional Healer/Cultural Service Provider mentorship and training program for future Indigenous Healers within primary care.

The Gathering provided the basis for a provincial strategy that will guide the structuring of a framework and was borne out of a collective desire for sustainable and equitable resources for Traditional Healing and Wellness programs in Ontario. This report shares what was heard at the Gathering, from large group presentations and smaller sharing circles. The following six of our member sites facilitated thirty-minute presentations on their Traditional Healing Programs.





Shkagamik-Kwe Health Centre (SKHC)

SKHC delivers wholistic traditional programs in a culturally appropriate manner, which reflect Indigenous culture, values and traditions. The SKHC Traditional Program includes a Traditional healer and alternative health therapy services, as well as offers a variety of cultural events and workshops, such as medicine picking, wild food bank, beading, men’s and women’s sweats, craft and language classes, and a range of support groups.



Waasegiizhig Nanaandawe'Iyewigamig Health Access Centre

The Agichi'giizhigoonsag Program is a land-based program intended for youth ages 12-18 who are interested in participating in Ojibwe cultural practices and teachings. The program includes land-based activities associated with the Ojibwe practices in our area on Treaty #3 lands.

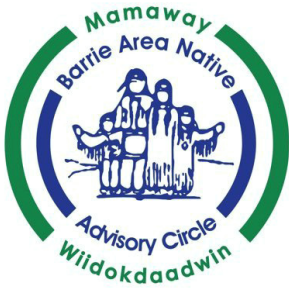
The Waashkootsi Nanaandawe'iyewigamig Healing Lodge provides a culture-based, residential healing program intended to break the cycles of violence, abuse, and addictions by addressing underlying causes and developing knowledge and skills that support healthy lifestyles.



South Western Aboriginal Health Access Centre (SOAHAC)

SOAHAC provides Traditional Healing Services through Traditional Healing Liaisons (THLs) and Visiting Healers. Clients can meet with a Healer individually or in a group, and they can access regularly scheduled cultural programming that is led by the THLs. Some examples include:

- Ceremonies/Life Transitions – gain support/strength through traditional practices (e.g., naming, clan, sweat lodge, berry fast, buffalo fast, etc.).
- Spiritual Support/Counselling/Doctoring – healing from trauma, grief, ongoing legacy of colonization, residential schools, 60s scoop.
- Traditional Medicines – strengthen connection to the Land/Creation and our own capabilities to care for self.
- Traditional Teachings and Language – connecting to value and belief systems that guide healing, shape wellness, and help fulfill our human purpose (e.g., 7 grandfather teachings, fire keeper teachings, sweat lodge teachings, roles and responsibilities, etc.).



Mamaway Wiidokdaadwin

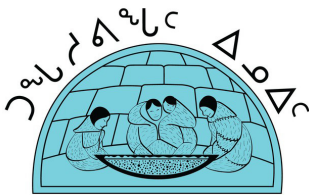
Through a diverse network of Elders, knowledge carriers and storytellers, Mamaway offers specialized ceremonies, traditional medicines, cultural knowledge, teachings.

One of Mamaway's most popular supports is the Red Road to Recover Program. A ten-week program that addresses addiction and mental health recovery using medicine wheel teachings with the emphasis of incorporating a wholistic approach to healing.



Anishnawbe Health Toronto (AHT)

The Traditional Team is the core of AHT and works with all programs within the organization. Our team is made up of Traditional Healers from varying First Nation communities and Osh-ka-be-wis (Traditional Helpers). The team works with clients on a daily basis doing one-on-one doctoring and teachings to make sure they are healthy spiritually, mentally, physically, and emotionally. The program offers sweat lodge ceremonies which are conducted for the community, family or individual. Fasting ceremony is done in the spring and fall. Shake Tent ceremonies are done in the fall, winter, and spring and we have the Ancestors Feast twice per year.



Tungasuvvingat Inuit Ontario

Mamisarvik Healing Centre is an Inuit-specific, eight-week, residential treatment program for women and men aged 18 years and older. The supportive and experienced interdisciplinary team incorporates a strengths-based, trauma-informed approach with an emphasis on cultural healing and wellness. Clients attend day-time programming focused on trauma, addiction, Inuit history, anger management, gender-group discussions, assertiveness and continuing care. Elders offer traditional healing knowledge and incorporate on-the-land activities. Staff support clients with evening recreational activities including art therapy, Inuit crafts, life skills, visits to community centres and recovery support groups.

STORIES, PERSPECTIVES AND GUIDANCE SHARED

Over the two days, participants spoke candidly on behalf of their communities and organizations. The interactive sessions provided them the opportunity to share successes, lessons learned, and best practices while ensuring specific strategies were in place to hear Elder and youth voices as well.

The Gathering also offered an opportunity for delegates to explore models already in place that have seen success with integrating traditional healing into primary care service and program delivery. For example, like SOAHAC that offers Traditional Healing Services combined with western therapies for optimal wholistic health and wellness programs.

While we work towards structuring a program that enables consistent and comprehensive integration of the MWHW that is inclusive of traditional healing, it is important to note, that integrating traditional healing practices into primary health care is not a new concept. Many of Indigenous organizations and communities across the country, including IPHCOs in Ontario, have successfully integrated traditional healing practices within their own primary health care models. For example, Anishnawbe Health Toronto (AHT), an accredited community health centre (since 1989) serving the Indigenous community in Toronto, works under a unique model that provides primary health care and healing guided by the teachings of Traditional Healers, Elders, and Medicine People. Western health-care practitioners work side by side with Traditional Healers to build a healthy, strong Indigenous community by looking at health holistically and helping clients to overcome barriers to health and living a good life.

Although AHT has been successful with their integrated health model, this framework is not available to all FNIM peoples accessing health care services within Ontario's broader health sector.





KEY THEMES

The following highlights key discussion points gathered from large group discussions and sharing circles:

1. Challenges in adopting a Western-style accreditation process...

- Ensuring that our Traditional Healers are seen and are validated just as much as Western doctors.
- Making room for our traditional values of health in our journeys, nurturing ourselves and our people.
- Interference of traditional care and Western medicines, with vaccine mandates being an obstacle for many healers.
- Finding common ground. We must meet within worldviews and tackle toxic systems that make mainstream society.
- Being confined in invisible lines – being suppressed in government systems and fighting for reclamation.
- Challenging the thin perspective of Western ways – the challenge of fitting Indigenous ways into a Western model.
- Adopting accreditation processes into traditional healing practices is like fitting a square peg into a round hole.
- We must be careful because accreditation doesn't belong to us – traditional healing does.

2. Accreditation processes being reconciled with traditional healing practices...

- Is a sticky process – not everyone can grow into a healer or understand/grasp the education and teachings that are traditional healing.
- Interference with papers, fees, permits, etc. – these are not our ways. For example, you can have all the knowledge and teachings needed to do this work, but without the degree or permit behind you, you are not considered.
- It is hard, because Traditional Healers do not put themselves out in a way that is defined with “accreditation.” Accreditation, much of the time, is about money. This does not align with our purpose and values of traditional healing.
- Our traditional healing services are not to be compared to “other services.” Accreditation processes being reconciled with traditional healing practices bring these questions and comparisons about.
- It can be a challenging process because healers are more than just doctors; doctors treat physical and that’s all – while healers treat spirit, body, and mind. For example, a doctor may prescribe medication for anxiety and depression, whereas a healer would help with childhood trauma that causes the anxiety and depression.
- Doctors have education, or “the papers,” whereas healers have the gifts and knowledge that treat the whole person – healers get more insight.
- Accreditation for a healer is more than what the doctors have.

3. Building a narrative for certification – What do we need to get started?

- A piece of paper is not needed to be “certified” as a healer. It is the gifts, knowledge, trauma, and journey that choose you to be a healer. You are chosen when you are born – there is no approval process.
- Healers already hold a narrative aspect of certification, not written. This narrative aspect consists of wide ranges of teachings.
- We need to look at what the term “traditional” means to us. For example, we live a lifestyle that is traditional and led by spiritual wisdom. To fit who we are, we must start abolishing the words “certification” and “accreditation” and replacing it with “life-long learning” and/or “of one mind.” This way we can have our own language (like we always have since the beginning of time) that can equate to Western English language.
- Creating our own model to represent something very sacred: our lifelong experience, our relationship with the environment. Healers are the vessel of this.
- Rather than approaching this in a non-Indigenous way, we need to put this into ceremony. Then create bundles that represent the spirit of what we do. Then caring for these bundles and feasting them on every season.
- Teaching young people, especially the youth with the drive, passion, and interest.

4. How are Traditional Healers/Cultural Practitioners selected in the community? Can this same process be used by primary healthcare organizations?

- Some processes cannot be used by Primary Healthcare Organizations because they cannot view people over time.
- The problem with the process of community-provided selection of Primary Healthcare Organizations is that sometimes the chosen one isn't a healer (nepotism having a role).
- When selecting Traditional Healers in the community, Traditional Healers choose who they want to pass their skills and knowledge to.
- We need a system of united services – traditional healing, primary care, and land-based care working together.
- Healer's names are given by word of mouth and experience. It is not only based on knowledge, but also relationship and trust.

5. How do we share Traditional Knowledge? How can we protect and preserve it?

- We must treat each other as equals especially in ceremony and sharing.
- Relationship building. *Not* through colonial, organization-led lens.
- Our traditional knowledge and ceremony do not belong to an organization and never will.
- Storytelling and oral teachings, especially to our young ones. For example, often we see someone attempting to make money from our knowledge and they do this by writing books in a way that makes it "theirs." This is not right because this is the taking of our knowledge from our teachers and selling it to the masses for profit. *Our* stories are free, no book buying required. Just respect, honouring, and ceremony.
- We protect our traditional knowledge by healing ourselves.

6. How can we approach Traditional Healing mentorship/knowledge transfer for our youth?

- Families are responsible for helping our children find their gifts. This is done by living by our traditional values and teachings. Educators, especially in mainstream schools, must combine education with health services.
- We must provide survival skills, land-based teachings, and teach our language onto the next generation so we don't lose anything more.
- Bring the youth onto the land.
- Continue teaching the language that was taken from us.
- Quit diagnosing our children with so many different things and start embracing the gifts that are the true things behind these so-called "problems," especially in the mainstream school system.
- Teach our youth ceremony.
- Exposure, programming, and traditional/cultural education.

7. How can we use technology for traditional healing?

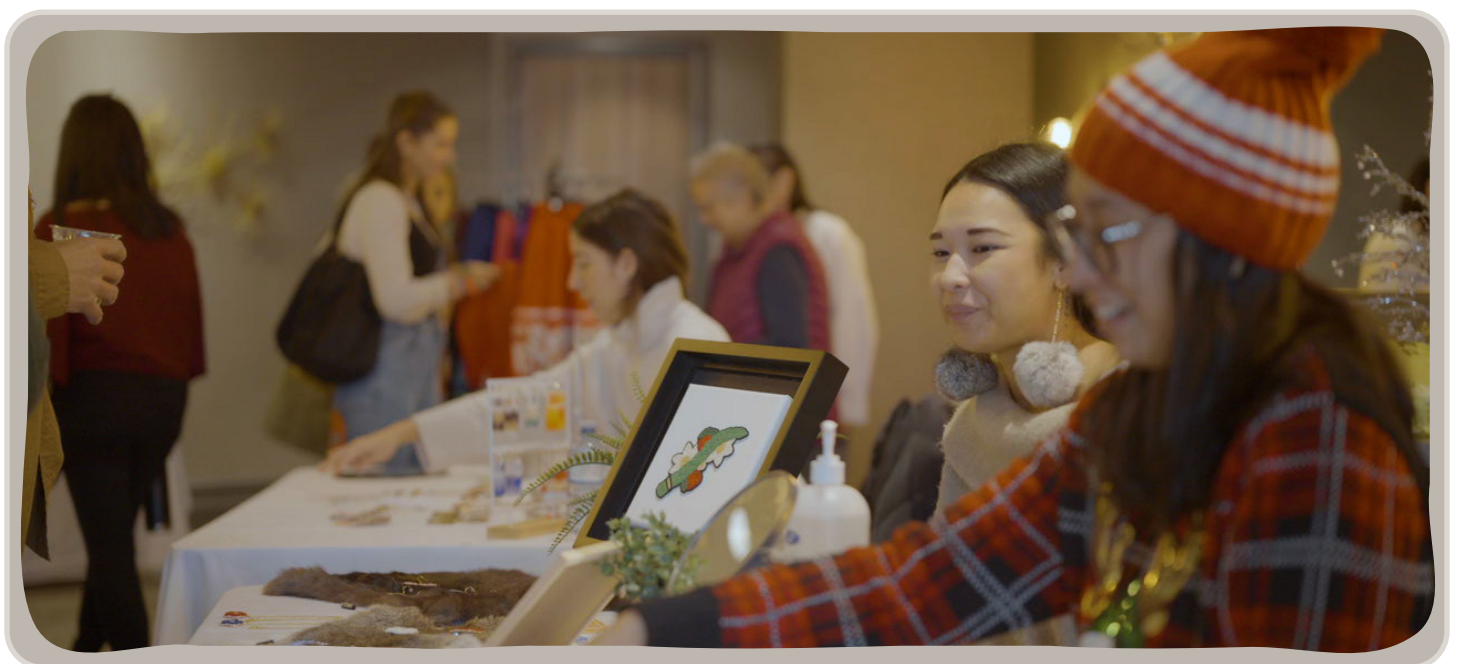
- Perhaps having a registry of Healers that sites can access can be beneficial. Things to consider about this can be being mindful of the diversity in teachings across communities, being sure we are supporting elders, understanding gaps and range.
- Digital storytelling.

8. How do we see preservation?

- Preservation is community-based.
- Preservation is making clear boundaries as our ways and teachings are sacred.
- Having teachings within education about treaties (have co-op programs to expand opportunity and exposure).

9. How do we transfer knowledge through mentorship?

- Traditional healing liaisons – they work with Healers.
- Land-based youth programming with mentors and Elders.
- Don't take the kids to the auditorium, take them to the turtle lodge for ceremony.
- Immersing.
- Bring solstice celebrations everywhere.
- Bring Knowledge Keepers into urban sites – some Indigenous people can't go home for many reasons.
- Ask youth what they want and how to deliver it – Youth Forum.



Youth delegates expressed the importance of bridging gaps and providing safe spaces for FNIM Youth to gather, explore and share their thoughts on the future of the traditional healing and wellness. Below is a summary of what Youth who participated at the forum had to say...

1. Traditional Healing and Wellness (TH&W)... What does it mean to us?

- TH&W is identity.
- TH&W gives us self-empowerment and sense of self through mino-bimaadiziwin.
- TH&W is harvesting our own medicines, learning through educating ourselves and others along with unlearning Western ways.
- TH&W gives us the ability to practice our culture, be young activists, to be proud and Indigenous.
- TH&W is abolishing the colonial construct of “gender” – especially through practices of hunting and gathering medicines (these do not have gender roles, along with many other things).
- TH&W reminds us that shame and trauma do not belong in the body – we know that having these within our bodies is the cause of many illnesses, and many Western healthcare systems do not recognize the impact of that.
- TH&W is traditional Two-Spirit leaders, mentors, and councillors.
- We are the first generation of reclamation.
- TH&W is art (beading, language, singing), laughing, learning basic life/survival skills.
- TH&W is hope and belonging.

2. What does traditional healing and wellness look like within our communities? What should community-based TH&W programming look like? How do we engage the youth?

- Land-based education.
- Involving youth.
- TH&W in communities is held together by relationship building. We need these relationships.
- We need more teachers in our communities to spread knowledge and participate in ceremony and land-based teaching. Lots is being lost.
- Programming, such as, sewing and beading, cooking, survival skills, singing, language classes, hunting the *right* way; no waste, medicines, teachings, bone usage and care.
- Traditional food – returning to our ancestral diets for the sake of our health and healing ways through the food we eat and harvest.
- “Don’t be afraid to get dirty,” get the youth out to the land and learn the medicines through our animals – the animals know the medicines.
- Within community, we need to connect instead of divide and break the walls of “Indian reservations.”



3. What do we need from/in our mentors? What does mentorship look like for TH&W for us, our communities, and society?

- In person, hands-on training.
- Access to ceremony and connection to spirit.
- We need *honest* mentors. We need our mentors and teachers to be true and honest of their clarity.
- Mentors don't need a degree from a Western institution.
- We need drive. We need passion, willingness, and fire from our teachers/mentors.
- We need gatherings like this (the IPHCC TH&W Gathering).
- Youth gatherings focused on youth, for youth.
- Teaching through the connection of our communities; dancing, singing, learning, laughing, healing, and bringing ceremony back. Just like our previous ways.
- Balance of the four elements (physical, mental, spiritual, emotional).
- From our mentors, teachers, and communities, we need safety – the safety of respect, research (field), knowing ourselves, along with mental health and addictions.

4. What kind of support do we need for programming like this? How do we promote all these ideas for gathering together and for wellness practices?

- We need funding specifically for the youth. For travelling – this gives us opportunity and experience.
- We need funding for overall accommodations and accessibility for everyone, especially youth in far northern/remote communities.
- We need outreach support and public awareness. An example of this can be a network of bands for communication within our communities to create opportunity and awareness.
- New people – not the same people and representatives attending every gathering. We need to invite new people and give everyone a voice and opportunity to learn and bring their gifts to the table.
- Youth teaching youth – within the gatherings, training each other and learning from one another in all the activities discussed.
- We must support these programs and gatherings being welcome for everyone.
- Focus on being family oriented and eliminating “gender.”

“WE, THE YOUTH, ARE THE BASIS. SUPPORTED BY INTENTION, VALUES, FAMILY, COMMUNITY, AND PURPOSE.”



STRATEGIC DIRECTIONS: NEXT STEPS

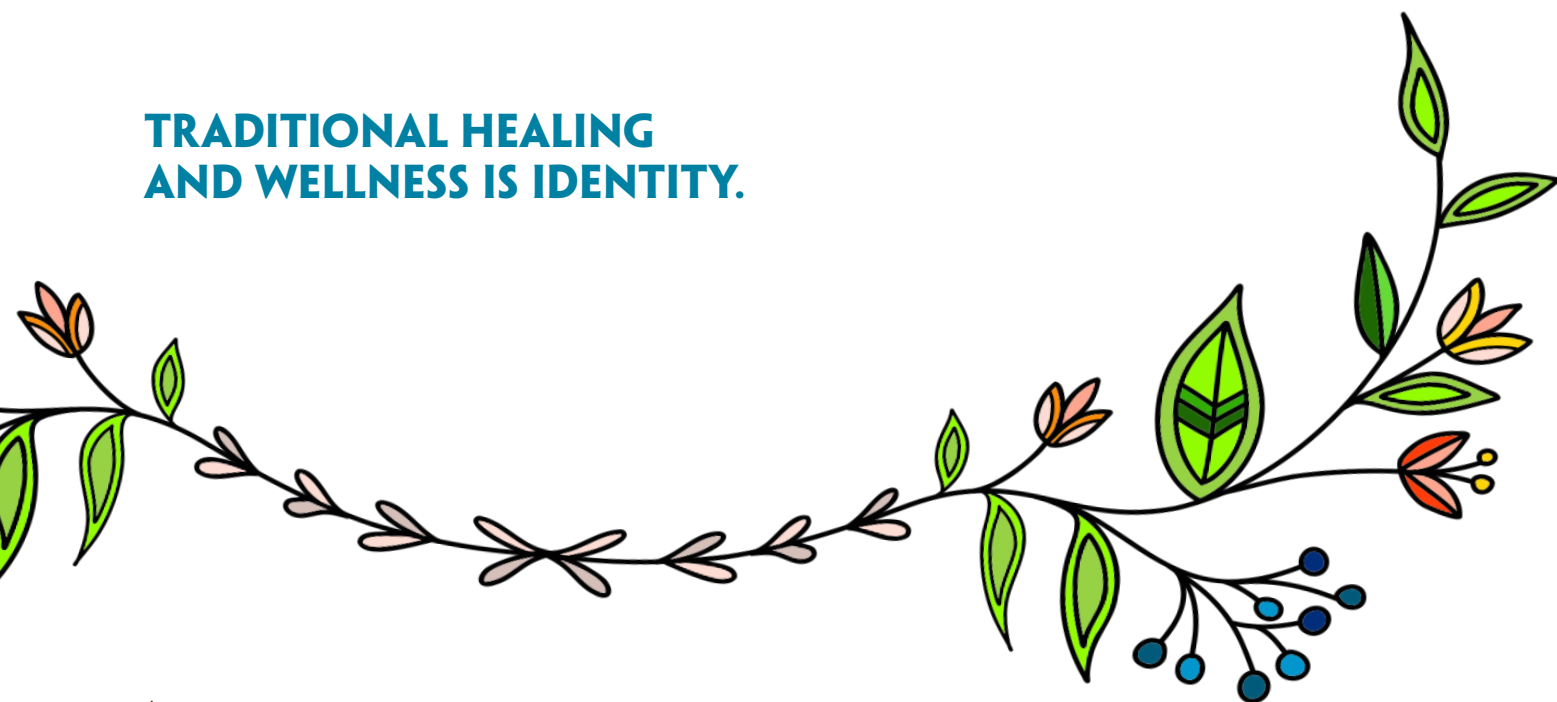
We are eternally grateful to all participants for sharing their feelings, perspectives, and guidance. There were key elements that were heard loud and clear.

First, we heard that through this process of creating a traditional healing and wellness program, Indigenous knowledge and ways of being must remain protected. The intent of this work will always remain at the forefront, ensuring that it is about putting structure in place, not about sharing information of ceremonies, or cultural and healing practices.

Second, we heard that accreditation and evaluation are Western activities and not reflective of Indigenous ways. Through this work we have an opportunity to create something that fits the Indigenous ways of doing, rather than being required to fit into the mainstream mould. By taking direction from the traditional healing community and those already developing and delivering traditional healing programs, we will learn and adopt what works to best support Traditional Healers, Cultural Service Providers, and those working with them.

Lastly, we heard that youth need their voices heard and incorporated in the direction forward. It is imperative that with this work, we keep the youth engaged and an active part of creating the foundation and pillars of the traditional healing and wellness program. By inviting member sites to participate in the Traditional Healing Advisory Circle, they will lead the framework and activities related to the accreditation and curriculum development of a mentorship program.

**TRADITIONAL HEALING
AND WELLNESS IS IDENTITY.**



GREAT GUIDANCE AND DIRECTION WERE RECEIVED FROM THE GATHERING WITH IMMEDIATE NEXT STEPS INCLUDING:

1. Create pathways to an integrated, health care system that is community-based and deeply rooted in Indigenous ways of knowing.
2. Establish an advisory body of Elders, Knowledge Keepers, and Traditional Healers.
3. Host further gatherings. IPHCC will host mini gatherings with current member sites to continue dialogue on key themes discussed at the Gathering.
4. Build connections with post-secondary institutions like Northern Ontario School of Medicine (NOSM) University and Toronto Metropolitan University, as well as accreditation bodies, such as, Canadian Centre for Accreditation, to begin conversations about housing a Traditional Healing and Wellness accreditation program.
5. Increase recognition and incorporation of traditional healing within the Ontario primary health care sector to enhance a newly envisioned funded health system.



TRADITIONAL HEALING AND WELLNESS CAN BE DEFINED AS A JOURNEY TOWARDS GOOD HEALTH AND WELL-BEING, WHICH BEGINS WITH A FOCUS ON ONESELF, AND INVOLVES SUSTAINING BALANCE THROUGH AWARENESS AND SELF-ACCEPTANCE.



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