

February 2017

---

## Health Equity & Cultural Safety Network News

---

Welcome to the first edition of Health Equity  
& Cultural Safety *Network News*!

Learning  
Opportunities

Equality is giving everyone shoes.

Equity is giving everyone shoes that fit.



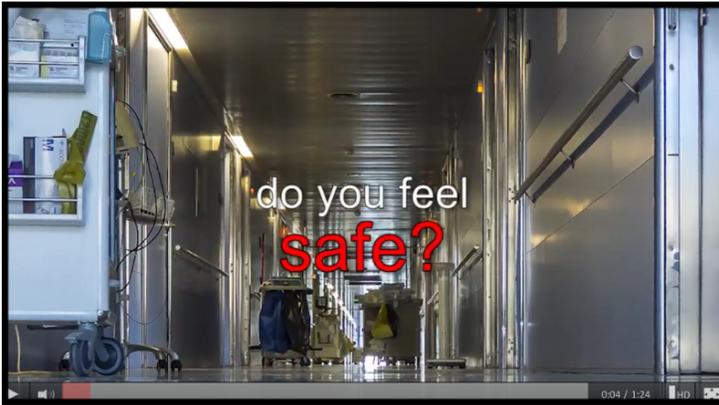
This monthly newsletter is designed to spark learning, dialogue, and health system decisions that reflect our organization's commitment to health equity and cultural safety through our [Health Equity Position Statement](#) and [response](#) to the Truth and Reconciliation Commission's [Calls to Action](#).

We welcome submissions from the SHR community - and the broader community we serve. If you would like to share a learning opportunity, resource, community event, or celebrate health equity and cultural safety innovation within our Region, [send us an email!](#)

Share with us!

### First Nations & Métis Health - Representative Workforce

Representative Workforce (RW) offers a variety of workshops, including the [Cultural Self-Awareness Workshop](#), on a regular basis and is also available to provide workshops specifically for SHR staff teams or groups. Their regular workshop offerings are listed on the SHR Training Registration System, which can be accessed internally via the InfoNet (click on 'Representative Workforce' from the menu on the right side of the page, then click 'View' beside the workshop title to see a description and upcoming workshop dates). [Other RW workshops](#) may be requested via their [service request form](#).



**If you do only one thing, listen to this.**

CBC's *White Coat, Black Art*

['I'm a white settler': Why That Matters in Health Care](#)

In addition to asking, "How well does it work?"  
we need to ask, "For whom does it work?"

## For Your Health Equity Toolkit

[First Nations & Métis Health Cultural Competency and Safety Resource Centre](#) (SHR)

Included in the virtual resource centre are links to The *Health Equity Position Statement, Population and Public Health Cultural Competency & Cultural Safety Toolkit*, the *Advancing Health Equity in Health Care* series – which includes content about systemic racism and links to many additional documents relating to this topic.

[Confessions of a Non-Compliant Patient](#) (IHI Improvement Blog)

"Here's my advice to providers who are trying to reduce costs and improve outcomes. The next time I don't follow your instructions, please take a few minutes to find out why. Instead of jumping to conclusions, admit that you probably know little about me. Humbly inquire about what might be getting in the way. Instead of just telling me what I need to do, ask me, ["What matters to you?"](#) Respectfully discussing my answer may help us both understand what would motivate me to modify my eating habits, take a medication, regularly exercise, or otherwise make big changes in my life."

[Why Does Health Equity Matter?](#) (video)

In this short video, Dr. Joan Reede explains how health equity relates to the role of health care

### Setting the Context for Indigenous Cultural Safety: Facing Racism in Health

The first offering in the Indigenous Cultural Safety (ICS) Webinar series, this recording of [Janet Smylie's presentation](#) is a great introduction to cultural safety and institutional racism, and why they're important considerations for everyone who works in health. While you're on the ICS site, check out the other webinars in the series!

providers, describes how privilege affects discussions of health equity, and offers advice to students and professionals who are interested in working to reduce disparities between populations. If you'd like to learn more about health equity in health care, take a look at IHI's 2016 white paper, [Achieving Health Equity: A Guide for Health Care Organizations](#).

[Designing from the Margins](#) (Prezi)

This interactive presentation provides a quick look at how our health care system, which has been designed by (and, to a large extent, for) white, English-speaking, [cisgender](#), able-bodied, educated, and otherwise privileged folks, could look if we shifted our focus to the people and populations who live and access care "from the margins".

[Shift toward social determinants transforming public health work: Targeting causes of health disparities](#) (APHA)

Learn about how a range of health programs and services shifted their focus upstream to address the social factors that underlie gaps in health.



Share



Tweet



Forward

---

*Copyright © 2017 Health Equity & Cultural Safety Network - Saskatoon Health Region, All rights reserved.*

Want to change how you receive these emails?  
You can [update your preferences](#) or [unsubscribe from this list](#)

MailChimp.