

May 2017

Health Equity & Cultural Safety Network News

Why Health Equity & Cultural Safety Network News?

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](#).

If you would like to share a learning opportunity, resource, community event, or celebrate health equity and cultural safety innovation (and learnings from our mistakes, too!) with our readers, [send us an email](#) or click the purple button below!

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Learning Opportunities

Webinar Wednesday: How Health Care Can Accelerate Health Equity

11:00 am - 12:30 pm, May 10
Theatre - West Winds Primary
Health Centre (3311 Fairlight
Dr., Saskatoon)

What might be possible if health care systems made a commitment to work to achieve health equity in their communities in dramatically new ways? This webinar offers suggestions and lays them out as part of a new framework that includes making health equity a strategic priority at the highest levels and throughout our organization. Registration not required. Questions? [Email Erin Beckwell](#).

**Trauma-Informed Practice
with Indigenous Peoples
across the Life Span**



This month's *One Small Thing*

Watch this video:

Cultural Safety:
Respect and Dignity in Relationships

BY NEXT TUESDAY:

What action can I take toward achieving health equity in Saskatoon Health Region?

For Your Health Equity Toolkit

[Peoples' Experiences of Colonization in Relation to Health Care](#)

(online learning module - Thompson Rivers University/University of Victoria)

The purpose of this module is to reflect on Aboriginal peoples' experiences of colonization and racism as these relate to health and health care. The modules are designed for nurses, nursing students, and nursing instructors, as well as other health and human service workers, to explore the concept of cultural safety as it relates to practice.

[Homelessness as a medical condition? Hawaii doctors could soon prescribe housing](#)

(CBC - *As It Happens*)

A bill that would classify homelessness as a medical condition is making its way through the Hawaii state legislature. It's the brainchild of Josh Green, a Democratic senator and doctor. He wants physicians to be able to write prescriptions for homes for people who have been living on the streets for longer than six months and who suffer from mental illness or drug addiction. Senator Green spoke to *As It Happens* host Carol Off about his proposed law.

(webinar)

1:00 to 2:15 pm (EST), May 16

This webinar will explore the development of Indigenous intersectional, trauma-informed and culturally safe practice approaches with people of different age groups, and discuss how to assist Indigenous peoples in understanding and improving their coping responses to daily triggers including the impact of experiences of racism, poverty, sexism, and colonialism. [Click here to register.](#)

[Hamilton doctors see 'reality up close,' making house calls to the disadvantaged](#) (CBC News)

Dr. Christian Kraeker and Tim O'Shea, both McMaster University doctors, have started [HamSmart](#) (Hamilton Social Medicine Response Team), a program where they visit the elderly, the immobile, the addicted, the homeless and others who have fallen through the cracks of the health-care system. HamSmart patients come from various places. They're referred by social workers, or homeless shelters, or family doctors. Sometimes they're referrals by paramedics or police officers. They spend the day visiting people wherever they are, whether at a shelter, a coffee shop or darkened apartments in Hamilton's lower city. In essence, they are Hamilton's street doctors.

[How discrimination affects access to healthcare for transgender people](#) (Nursing Times)

Lesbian, gay, bisexual and transgender people are vulnerable and ostracized due to discriminatory attitudes among many individuals and groups in society. This article discusses a literature review exploring barriers to and facilitation of access to healthcare for people who identify as transgender, which identified that discrimination and healthcare education and attitudes can result in postponement of care, a disparity of research, inadequate education and training opportunities, and uncomfortable or problematic interactions, which accumulate to negatively affect the overall health of transgender people.



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