



First Nations Health Directors Association

Sharing experience for community wellness

Decolonizing Our Relationships Through Lateral Kindness

June 7, 2017

*CPHA Conference
Halifax, Mi'kmaw Nation Territory*

Symposium Overview

1. **Introduction:** the panellists and concept of lateral kindness
2. **Panellists:** panel discussion of lateral kindness
3. **Q&A on concepts and content** (10 min)

Wellness Break

4. **Panellist Fishbowl Discussion:** Key factors that support the panellists' personal work on lateral kindness
5. **Break-Out Discussion** (25 min)
 - How can lateral kindness can be applied in your practice, policy or community?
 - 15 min break-out discussion, 10 min large group sharing



Our Relationships: First Nations Health Governance in BC





Our Shared Vision is key to our relationship

“Healthy, self-determining and vibrant BC First Nations children, families and communities.”

FNHDA/FNHC/FNHA





Definition – Lateral Kindness

- A term used in First Nations communities in BC, it became a priority for FNHDA after discussions on workplace safety in 2014
- A way to address lateral violence that promotes social harmony and healthy relationships (Declaration of Commitment: Lateral Kindness, 2017)
- A way of being that is aligned with First Nations values, traditional teachings and cultural protocols about ways of treating ourselves and each other, building good relationships, and dealing with conflict (Dion Stout, 2015; Findlay, 2016)
 - Incorporates teachings of holding one another up and valuing each other from an inherent place of kindness and love (FNHA, 2015)
 - Promotes a “pay-it-forward” approach that encourages having a kind heart while interacting with the people in our lives—family, friends, co-workers and community (FNHA, 2015)
 - Aims to encourage supporting one another based on the premise that we all have strengths and gifts to contribute (Declaration of Commitment: Lateral Kindness, 2017)
 - Understands that individual harmony leads to peace, productivity and prosperity (Dion Stout, 2015)
 - Focuses on a wellness perspective, rather than a sickness perspective (FNHA, 2015)



Definitions – Lateral Violence

- Our *Declaration of Commitment: Lateral Kindness* (2017) says that lateral violence:
 - **Occurs when** we direct our feelings of dissatisfaction *towards one another* rather than recognizing that the true adversaries are colonization, internalized racism, or feeling oppression in other forms
 - **Is expressed in many forms**, including gossip; verbal and non-verbal assaults; passive and aggressive behaviours; blaming; shaming; attempts to socially isolate others; demeaning activities; bullying; and, threatening or intimidating behaviour
- Impacts people around the world, but it manifests in unique ways for First Nations because of colonization, racism and intergenerational trauma (NMAC, 2011; Bombay et al., 2014)
- *Kitimahitowin*: making one another poorer through lateral violence. It is filled with scarcity, hierarchical authority, guilt, blame, criticism, right and wrong thinking, and polarizing positions (Dion Stout, 2015)



Moving from Lateral Violence to Lateral Kindness

- Lateral kindness is a new approach to dealing with lateral violence -- by focusing on what we want to create / have instead of on the problem.
- The lateral-kindness approach tackles this emotional topic from a wellness -- rather than sickness - standpoint.
- And most importantly, lateral kindness naturally incorporates traditional First Nations values and teachings of holding one another up and valuing each other from an inherent place of kindness and love.

A Public Health Issue



Lateral kindness is a powerful approach to practice and policy that has the ability to address a number of public health issues by:

Improving individual mental and physical health

- Working to address and end *lateral violence* in the workplace, families and communities

Improve health services

- Creating more *safe, inclusive and culturally safe health services* by shifting the culture and norms about interactions between patients, health service providers and partners within health services (NCCAH, 2013; Christie & Jones, 2014)
- Increasing *workplace safety and retention of health staff* by setting values, standards and relationship practices to improve workplace safety and working relationships by building personal skills (Vessey et al., 2010; Corney in Brown 2009)

Address social determinants of health and health systems change

- Promoting *cultural continuity* is recognized as a social determinant of health for Aboriginal people by the Canadian National Collaborating Centre on Aboriginal Health (2009) and can be built through lateral kindness by drawing on the traditional teachings and values that inform the spirit of lateral kindness, and practising the teachings.
- Supporting *First Nations governance, decision-making and control* using traditional values in governance and partnerships to shift health systems to be more culturally appropriate and increase First Nations governance, both of which are associated with positive health outcomes (Chandler & Lalonde, 1998)
- When applied at the system level, lateral kindness therefore also can *address distal social determinants of health and health equity* by addressing colonization and changing power dynamics in relationships and systems through empowerment.



VIRGINIA PETERS

**INTERIM ELDER ADVISOR & FORMER BOARD MEMBER,
FIRST NATIONS HEALTH DIRECTORS ASSOCIATION**

FNHDA Mandate

As a non-profit, professional association, FNHDA is:

- Composed of health directors and managers working in First Nations communities – a **member-based organization**.
- Supports education, knowledge transfer, **professional development** and best practices for health directors and managers.
- Acts as a **technical advisory body** to the FNHC and the FNHA on research, policy, program planning and design, and the implementation of the Health Plans. The Association is not a political advocacy body.



Policy Initiatives



Position Statement

A Call to Action towards a zero tolerance of lateral violence

For thousands of years, our Nations have relied on our own Indigenous governance systems that were guided by the universe, and kinship systems that provided for social harmony and healthy relationships.

Traditionally, for all Nations, if a societal code was broken there were ways of restoring peace that would allow for reflection and renewal for the individual who was harmed, or who may have harmed another. Traditional teachings provided direction for dealing with hurtful differences among people because they stressed the importance of having power *with*, not power over one another. Coming from a place of respect and strength was seen as a natural part of the process.

Due to the traumatic effects of colonization, a foreign and polarizing problem known as "lateral violence" has become common place in communities and society today. Colonization and internalized racism are the true adversaries yet they are not confronted with due diligence. Meanwhile, they play out in displaced anger, threats and attacks in homes, schools and workplaces to the extent that lateral violence has become a significant public health issue for First Nations. Our traditional medicines, practices and teachings, based on a holistic model of health, give us original instructions to counter the destructive effects that lateral violence has on individuals, families and communities. Learning on traditional medicines, practices and teachings based on a holistic model of health and wellness, these provide original instructions to counter the sources of lateral violence and its destructive effects on individuals, families and communities. Partnerships will uncover helpful roles and responsibilities for finding forward looking and innovative strategies and solutions. Practical ideas, interests and perspectives, overlaid by a cultural lens, will need to be assessed, planned, implemented and evaluated.

The FNHDA issues a decree of the following 13 actions (*in remembrance of the phases of the moon*) it calls all those who share the same values, to take a stand against lateral violence; and, strive to ensure wellness in physical, spiritual, mental and emotional health on an individual and collective basis. The 13 recommended actions for zero tolerance of lateral violence are:

1. Support First Nations' Health Centres and organizations to adopt a "zero tolerance of lateral violence" policy.
2. Use First Nations cultural values to promote equal power relations where people work, live, play and pray.
3. Model healthy behaviour and respond in compassion and solidarity without enabling or allowing the lateral violence to continue.
4. Promote the buy-in for cultural sensitivity, cultural awareness, cultural safety and cultural continuity by disseminating promotional materials.
5. Use First Nations cultural values to inform structural changes when addressing lateral violence.
6. Encourage self-knowledge about the harmful effects of colonization, historical injustices and violence including how to make these realities growth experiences.
7. Work with partners to provide accessible professional development opportunities, to learn how to deal with lateral violence in the work place and on social media.
8. Work with partners to develop First Nations specific education materials to build awareness about how lateral violence affects our health and wellness.
9. Develop First Nations specific campaigns for identifying and addressing harmful contexts and conditions in homes and schools.
10. Build on existing community support networks (available to those who may have experienced lateral violence).
11. Work with partners to document the links to health and wellness and collate related First Nations education materials, which reflect First Nations customs, values and beliefs.
12. Work with partners to provide training opportunities to Health Leads on non violence and reconciliation.
13. Work with leaders, service providers and Health Leads on prevention strategies while improving coordination and collaboration efforts in this regard.



First Nations Health
Directors Association

Sharing experience for community wellness

By fostering an environment based on our values of respect, discipline, relationships, culture, excellence and fairness, these above actions can fall on common ground. Promote the end to lateral violence in the name of peace, productivity and prosperity and take advantage of its readiness for remedial interventions. The FNHDA calls upon everyone to action, to get involved and be a part of finding and determining solutions, towards a zero tolerance of any form of lateral violence.

Approved by FNHDA Membership on September 16, 2014 - Nk'mip Resort, Okanagan Territory

Please note the 13 recommendations have equal importance, urgency, and focus, and are listed in a non-hierarchical order.

Moving from lateral violence toward lateral kindness was identified as an important topic of concern by Health Directors.

- ***A Call to Action*** was approved by FNHDA Membership on September 16, 2014, Nk'mip Resort, Okanagan Territory.
- Our own Members (including Stó:lō Nation) are developing workplace policies on lateral kindness.
- We are working with our partners (FNHC and FNHA) to support lateral kindness.

Professional Development



- **AGM:** Sharing examples
 - Talking Circle (2015)
 - Lateral Kindness Wall (2016)
- **Regional Fall Caucus 2015:**
 - Practising lateral kindness: positive steps and tools for resolving lateral violence (with Kweykway Consulting):
 - Indigenous ways of knowing, defining lateral violence and kindness, communication during conflict, relationship building
 - Self-compassion training (with Compassion-Inspired Health)
- **Board Training**
 - “Train-the-Trainer” Lateral Kindness Training (with First Health Solutions):
 - Understanding lateral violence, communication styles, conflict strategies, understanding power and responsibility

"The most powerful tool that I gained at the lateral kindness workshop is that it's necessary to create a safe container for all our communications with one another in order for people to feel at ease, to share their knowledge, and contribute at their highest capacity."

Johnny Powell,
Mamalilikulla-
qwe'qwa'sot'em Band.

Personal Wellness

- Supporting Health Directors to improve personal wellness and job retention **creates capacity, good working environments and staff continuity**, which will improve the quality and consistency of health services.
- “Stress and Burnout” were identified as two significant challenges for Health Directors so FNHDA launched a **mental wellness campaign called *Head to Heart***.
- Info at: headtoheart.fnhda.ca



The graphic features a silhouette of a person standing in a mountainous landscape. The 'headtoheart' logo is in the top right, and the tagline 'staying well and balanced together' is in the center. The FNHDA logo is in the bottom left.

headtoheart

staying well and
balanced together

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headtoheart

Head to Heart is an ongoing shared resource comprised of stories, tips and reminders from Health Directors based on our 3 Pillar approach in reducing stress:

-  **Honouring the Land:**
Get in tune with nature. Spending time outdoors each day is a proven remedy to lower blood pressure, reduce anxiety and stress levels, and boost your immunity.
-  **Powering Down:**
Recharge your mind and soul for the upcoming day by turning devices off, and pursuing human-powered activities.
-  **Weave Networks of Support:**
Connect with your professional peers, family and friends to seek and offer support, and stay well and balanced together.

Timeline - Lateral Kindness



2014

Prioritized “Lateral Kindness” as a policy shift to address lateral violence in a webinar discussion on workplace safety (2014)
AGM (Sept. 16) - Members voted to endorse the FNHDA Position Statement: ***A Call to Action towards zero tolerance of lateral violence (towards lateral kindness)***

2015

AGM – Talking Circle: Sharing examples of Lateral Kindness
Gathering Wisdom VII (May) – Lateral kindness is presented to partners with positive reception (with Madeline Dion Stout, Kim Brooks, Brenna Latimer, Emmy Manson)
Fall Caucus – Practising lateral kindness: positive steps and tools for resolving lateral violence (with Kweykway Consulting); Self-compassion training (with Compassion-Inspired Health)

2016

AGM - Lateral Kindness Wall: Sharing examples of Lateral Kindness
Board Training - “Train-the-Trainer” Lateral Kindness Training (with First Health Solutions)

2017

Feb 27 - Declaration of Commitment: Lateral Kindness signed by FNHDA’s, FNHC’s and FNHA’s leadership
Upcoming – Regional “Train-the-Trainer” Lateral Kindness Training with partners (with First Health Solutions)



Saleatunut
EMMY MANSON
Regional Mental Health Advisor,
FIRST NATIONS HEALTH AUTHORITY



Traditional ways of knowing



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The teachings of our Elders address the importance of taking care of self and loving self. Once we learn to trust and love self, we are able to transfer a positive relationship with love and trust to our families.

Lateral Kindness = lateral love



“Returning to the old ways of our people holding one another up and honouring the gifts of other.”

- *“S’nuw’uy’ulh” is our well-being. It is based on truth, respect and responsibility -- for self, for all people, one to the other -- and to nature.*
- *We lived by a holistic system, recognizing the interconnectedness of all life. The Creator gave the people the responsibility to care for the land, water and air that supported life. We needed each other for success then, and today we need each other for success in Wellness.*

Lateral Kindness looks and feels like ...



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- Practising our traditional values
- Respecting each other
- Cooperating with each other
- Supporting each other for courage, initiative, well-being
- Feeling it is safe to be yourself
- Having healthier, happier nations and people

Why is lateral kindness important in our work



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We interact with our clients' lives -- sometimes at very vulnerable points in one's journey. Coming from a place of kindness sets the tone for relationship building and trust. We have a vital role in sharing our best attitude and energy and kindness.

It creates a safer work environment for all.



Role model Lateral kindness



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- Compliment and encourage often
- Be open to new ideas
- Embrace differing beliefs and opinions – they are not personal
- Speak truths without blame or judgement
- Don't participate in lateral violence - try to catch yourself and take responsibility for your actions if you have a relapse of this behaviour
- Create work places and homes that are free from lateral violence and filled with lateral kindness
- Call out people kindly in gentle way without blame or shame when they are laterally violent in your presence



How do I promote lateral kindness in my work



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Before You Speak...
THINK
T is it true?
H is it helpful?
I is it inspiring?
N is it necessary?
K is it kind?

I'm Just Sayin' Signs

- Be self aware
- Share kind words when opportunities arise - don't wait to speak kindness
- Share about our need to hold up one another and acknowledge others' gifts
- Be kind to myself
- Speak only on things I have first-hand knowledge of, not hearsay
- Try not to start a conversation with "I heard" — that's gossip
- Keep in mind that "What people say about me is none of my business"



DR. SHANNON MCDONALD

**DEPUTY CHIEF MEDICAL OFFICER,
FIRST NATIONS HEALTH AUTHORITY**



Declaration of Commitment: Lateral Kindness



DECLARATION OF COMMITMENT: LATERAL KINDNESS

AMONGST
FIRST NATIONS HEALTH AUTHORITY (FNHA)
FIRST NATIONS HEALTH COUNCIL (FNHC)
FIRST NATIONS HEALTH DIRECTOR'S ASSOCIATION (FNHDA)

“Be considerate of others; treat people kindly; seek to know your Creator.”

Ray Izony, Tsay Keh Dene

As leaders, we support lateral kindness practices that create safe spaces and forums by:

-  Taking an active role in setting a positive tone at the beginning of forums and in work spaces; consider opening in prayer, ceremony or traditional song.
-  Demonstrating our cultural value of respect by actively listening and by not speaking over or interrupting our peers.
-  Utilizing Elders and cultural people as teachers of our cultural values, moral stories, and protocols at meeting forums and spaces.
-  Considering the use of talking/sharing circles or roundtable discussions as a fair approach to the sharing of speaking time wherever possible and when time permits.
-  Collectively determining positive solutions together, built on consensus; traditionally, we had to rely upon each other within our kinship systems in order to survive and we continue to need one another in the present day.
-  Demonstrating mutual respect by sincerely apologizing for any possible misunderstandings or inadvertent disrespect while also offering meaningful forgiveness.
-  Utilizing our traditional dispute resolution protocols to address possible incidences of lateral violence.
-  Expressing concerns in a concise and kind manner while offering up constructive solutions to issues that are raised in a diplomatic manner.
-  Clearly outlining how participants will treat one another at forums and meeting spaces based on our values of respect, compassion and kindness.
-  Participating throughout the duration of a meeting, staying focused on the deliberations and being “present” in the moment by actively listening.
-  Participating and contributing to discussions with a positive attitude and kind regard for peers.
-  Accepting varying opinions as they are a positive way to enrich conversations, and where there are differences, always striving to develop constructive solutions.
-  Demonstrating our quest to seek clear vision by asking questions respectfully in order to seek clarification and understanding.
-  Developing empowerment strategies (or positive “challenges”) based on practising lateral kindness, promoting innovative ideas and best practices, and encouraging the lateral kindness practitioner.





The Opioid Crisis in BC

**Harm reduction approach:
Be kind ... be kind ... be kind.**

A harm reduction approach aligns with lateral kindness, which naturally incorporates **traditional values** such as holding one another up and valuing each other from an inherent place of **kindness and love.**





Harm reduction approach: stigma around drug use can cause deaths. A non-judgmental attitude can save lives.





Transforming the System

- Declaration on Cultural Safety & Humility provides a **framework** for action at system, organization & individual levels
- Operationalize commitment at all levels
- Guided by **stories** & **best practices**
- Built on existing relationships, structures & **successes** in & outside health system
- Need to **measure** success





Working With Our Partners

Interior Health:

- Localize cultural competency training throughout IH
- Increase awareness of Interior nation-specific culture, traditions, geography and history among IH staff

Island Health:

- Collaboratively launch the FNHA's seven cultural safety committees
- Cultural safety training for Divisions of Family Practice

Vancouver Coastal:

- Systems change: "Hard wire" Aboriginal health into all planning processes moving forward
- Evaluate and report on impact

Northern Health:

- Develop a comprehensive Cultural Safety and Humility Plan that will include an anti-racism strategy for all levels of health service delivery

Fraser Health:

- Increase supports for Aboriginal patients/clients navigating the health care system



Q&A

10 MINUTES



WELLNESS BREAK

5 MINUTES



Could you please share some personal practices or personal examples on how you incorporate lateral kindness into your everyday life and work?

FISHBOWL PANEL DISCUSSION

12 MINUTES



1. Get into groups & decide on a note-taker
2. 15 minutes of discussion in groups
3. *Two-minute warning given *
4. Brief report back to everyone: Note-takers share 1-2 highlights per discussion group

BREAK-OUT DISCUSSION

HOW CAN LATERAL KINDNESS BE APPLIED IN YOUR PRACTICE, POLICY AND COMMUNITY?

GOAL: YOU HAVE TWO TAKE-AWAY IDEAS TO APPLY IN YOUR WORK



Thank you!

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Resources & References



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