

TRANSFORMING OUR RESPONSE TO SEXUAL AND REPRODUCTIVE HEALTH



Purpose

This fact sheet is intended to give service providers a background on:

- 1 **Trauma-informed care;**
- 2 **Why trauma-informed care is important; and**
- 3 **Tips on providing trauma-informed care.**

What is trauma-informed care?

A trauma-informed approach to care recognizes how common trauma is and how this trauma affects all aspects of people's lives, including their interactions with service providers in order to create a safe space for clients. When working with Indigenous women, girls and gender diverse people, a trauma-informed approach acknowledges how the process of colonization continues to impact their lived experiences, as well as their social determinants of health. A trauma-informed approach does not mean reliving or reflecting on a trauma experience, but instead emphasizing the strengths developed from surviving trauma and how that resiliency can foster healing. Failure to take a trauma-informed approach can cause re-traumatization, which may leave the client feeling unsupported or blamed and may discourage them from seeking your services or similar services again.



Why a trauma-informed approach to sexual and reproductive health is important:

The Public Health Agency of Canada (2015) has stated that, "women who face multiple forms of stigma and discrimination, such as racism and homophobia, are particularly vulnerable to STBBIs because they are more likely to be excluded from support networks and services." As a result of processes of colonization, Indigenous women, girls, and gender diverse people face multiple forms of stigma and discrimination such as sexism, racism, classism, and ableism. Colonial strategies of assimilation such as the Indian Act, the residential school system, and the Sixties Scoop attempted to eliminate Indigenous languages, cultural practices, traditional knowledge, and kinship systems. The trauma from this history and ongoing colonial policies is still felt generations later; this is commonly referred to as intergenerational trauma. Intergenerational trauma continues to be reinforced through racism and systemic discrimination within the healthcare and social service systems. A recent example of the racism and systemic discrimination within the healthcare system is the forced and coerced sterilization of Indigenous women and girls in Saskatoon, Saskatchewan.

Sexual and reproductive health education and interventions will have increased success when service providers learn to address the possibility of traumas such as sexual abuse or violence, only after building a trusting relationship.

Tips on how to provide trauma-informed care:

Recognize the impacts of colonialism on the lives of Indigenous women, girls, and gender diverse people.

It is crucial that service providers acknowledge the impacts of colonialism through processes like the residential school system, the Sixties Scoop, the ongoing theft of land and resources, gender-based discrimination within the Indian Act, and the forced sterilization of Indigenous women in order to establish healthy relationships and harbor safe environments for our clients.

Reflect on how your personal values and beliefs influence your interactions with clients.

All of us carry a set of values that have been formed by a variety of influences over our life course and these values can be either visible or invisible. Service providers are no different and navigate their work lives through their own values, beliefs, and assumptions. We need to question how structural racism has been built into the health and social service system and how this impacts our ability to provide services and Indigenous women, girls and gender diverse people's ability to receive services in a dignified and respectful way.

Recognize and respect that traditional knowledge and biomedicine can coexist and can be integrated into sexual and reproductive health interventions.

For example, traditional ways of sharing information, such as storytelling and sharing circles can be used in a powerful way for Indigenous people to reclaim and share their stories of misconception, pain, trauma, and stigma while also reconnecting to culture. Sharing circles have potential to be healing and can take a trauma-informed approach. They are a crucial way to help Indigenous people learn and unpack their perceptions of sexual and reproductive health, and to help destigmatize conversations about healthy sexuality, sexual health and harm reduction. It's through these conversations that we will begin to turn shame into resilience.



It is important to consider the following if you are working with Indigenous women, girls, and gender diverse people:

- What is the relationship of your client between their community and family?
- What is your client's home life like?
- Does your client have a support system?
- Are you aware that the word "Indigenous" encompasses three distinct groups (First Nations, Inuit & Métis)?
- Indigenous women, girls, and gender diverse people are strong and resilient, focus on their strengths instead of their deficits.

Tips for service providers on giving trauma-informed care:

- You do not need to know what trauma a person has gone through to provide trauma-informed care;
- Be aware of your own positionality;
- Practice empathetic listening with clients; and
- Empower your clients to make the best decision for their sexual health.

To further your understanding of trauma-informed care, consider further exploring the concepts of forced sterilization of Indigenous women, intergenerational trauma, vicarious trauma and cultural safety.

References:

HIV/AIDS Epi Updates. (2010). Public Health Agency of Canada. Retrieved from <http://www.phac-aspc.gc.ca/aids-sida/publication/epi/2010/6-eng.php>



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