Understanding cultural safety from the perspective of the Atikamekw Nehirowisiwok

This research explores the vision, perception and meaning that the Atikamekw Nehirowisiwok give to cultural safety and cultural humility. It highlights the essential elements for offering culturally safe services, as well as the obstacles to their implementation. Its main objective was to contribute to the implementation of cultural safety, emphasizing cultural humility and its concordance with the values and principles of the Atikamekw Nehirowisiw Nation.

The issues addressed in this research include fair access to health care, still a challenge for Indigenous people, whether in the community or in urban areas, due to prejudice, discrimination and systemic racism. The impacts of colonialism and assimilation policies, notably the *Indian Act*, and their discriminatory consequences on the health and living conditions of Indigenous peoples are also raised.

The tragic death of Joyce Echaquan has brought to light the mistreatment and racial slurs that Indigenous people can experience in Quebec's health and social services establishments. *Joyce's Principle*, a manifesto recommending the implementation of cultural safety, was developed in response to this tragedy and adopted by the Atikamekw Nehirowisiw Nation's governing bodies in the fall of 2020. This research is in keeping with the implementation of this principle.

Participants in this research are Atikamekw Nehirowisiwok health and social services professionals who have worked or are still working in the communities of Manawan, Opitciwan and Wemotaci.

Data collection included sharing circles and 'creative conversations', well-established Indigenous methodologies. Interviews were conducted between September 15, 2022, and February 22, 2023.

The results of this research have furthered the understanding of cultural safety and cultural humility from the perspective of the Atikamekw Nehirowisiwok, based on the experiences of health and social service professionals working in these communities. It shows that participants have a good understanding of the issues involved in implementing cultural safety and underlines the importance of developing culture- and language- sensitive services, as well as offering a warm welcome and attentive listening.

For me, as an Atikamekw woman, it means so much because it's in my culture, in my language, in the way I'm greeted with kindness, that I'm listened to attentively, so that they know I don't understand French very well and that the person realizes it. Adapting to me, for example (R10) [Translation] (Dubé, 2025, p. 63).

This research also highlights the importance of considering the social determinants of Indigenous health when implementing cultural safety. This approach draws inspiration from systemic and holistic models, such as the one developed in British Columbia:

It is by taking into account the social determinants of Indigenous health and through the implementation of policies that a structural and systemic transformation can take place and lead to an outcome where Indigenous people feel welcomed and safe within Quebec's health and social services network [Translation] (Dubé, 2025, p. 113).

The results of this research reiterate the importance of sensitivity, openness and listening, to improve services and make them culturally safe, in line with the conclusions of an extensive consultation conducted in 2012 by the Health Council of Canada (HCC), which states that Indigenous people wish to be treated as human beings, with dignity and respect, and be regarded as partners in healthcare services (HCC, 2012). A change in attitude is seen as the basis for the development of cultural safety and fosters trust between Indigenous patients and healthcare providers. To bring about this change, one participant suggests that non-Indigenous healthcare professionals and administrators could gain a better understanding of the Indigenous lived realities by being invited into the communities, for example (R6). Another participant envisions a consolidation of partnerships with the healthcare system actors through dialogue and collaboration (R8).

The research also highlights the importance of factoring in the Nehirowisiwok Atikamekw's vision of health and well-being, their culture, their traditions and their social conditions, not least overcrowded housing. The holistic approach, which integrates physical, mental, spiritual and social dimensions, is advocated within the Atikamekw communities' health and social services centres. Language is strongly linked to identity and valorization of Indigenous cultures, both in the communities and in the urban environment. For example, one participant points out that the more the language is spoken, the more it is possible to appropriate one's identity [Translation] (Dubé, 2025).

The research identifies obstacles to the provision of culturally safe services, including the ambiguity surrounding the concept of cultural safety that requires clarification between Atikamekw Nehirowisiwok and non-Indigenous people working in health and social services:

> *It's a notion, an approach that's imposed upon us, it's as if it comes from the outside instead of the inside […]. When people in the healthcare sector ask me about cultural safety, I'm always amazed. It's funny, but I have the feeling that I have to answer based on their expectations, their system* (R1) [Translation] (Dubé, 2025, p. 89).

Factors hindering collaboration include lack of communication, confidentiality issues, fears and prejudices, lack of knowledge with the practice of family gathering in the hospital and negative perceptions of traditional medicine. Several research participants reported bad experiences and discrimination in the healthcare system. One account highlights this fear of not being treated properly in hospitals: «When you know you're going to the hospital; you prepare twice as much for what might happen. […] Just because we're Indigenous, we already feel looked upon and that says a lot.» (R7) [Translation] (Dubé, 2025, p. 95).

The research explores the values and principles of the Atikamekw Nehirowisiwok, such as mutual aid, family, humor, resilience and humility. The testimonies gathered illustrate how humor and resilience go hand in hand in certain circumstances: "even if we [don't] feel good when we're going through certain situations, we're able to laugh, we're able to tell funny stories even if we're sad" (R7) [Translation] (Dubé, 2025, p. 104).

To better understand the vision of cultural humility from the Atikamekw Nehirowisiwok perspective, the key elements considered are introspection and the practice of humility. Here's how one participant describes the notion of cultural humility: «I see it as the person who gives the service being aware of the other person, that there is another culture» (R8) [Translation] (Dubé, 2025, p. 107).

The main findings of the research are:

- A clearer understanding of the concept of cultural safety is needed.
- Culturally safe services improve health and relations between Indigenous and non-Indigenous people.
- Taking into account the social determinants of health from an Indigenous health perspective is a safe and respectful way to deliver care.
- Developing health-related training, programs and policies in partnership with Indigenous Peoples contributes to the implementation of cultural safety in Quebec.
- The notion of cultural humility is fundamental and plays an important role in the process of cultural safety.

Two avenues of new research propose to further explore the concept of *Mino Pimatisiwin* among the Atikamekw Nehirowisiwok, and to delve deeper into the theme of shared responsibility at individual and collective levels, particularly as it relates to the principle of community safety in healthcare.

Link to the Master's thesis:
https://depositum.uqat.ca/id/eprint/1669

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