

Cultural and Ceremonial Use of Indigenous Traditional Medicines, Foods, and Practices

1. Introduction

Providence Health Care (PHC) promotes culturally safe health care and recognizes Article 24 (1) of the *United Nations Declaration on the Rights of Indigenous Peoples*, which states “Indigenous peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals and minerals.”

Providence Health Care Staff have a duty under the [Indigenous Cultural Safety Policy](#) to demonstrate cultural safety and in the context of Indigenous patients/residents, this includes supporting access to traditional ceremonies, health practices, Indigenous Elders, Knowledge Keepers or Traditional practitioners and/or Traditional medicines and foods.

1.1. Purpose

The purpose of this policy is to ensure that Staff understands their roles and responsibilities in supporting access to cultural and ceremonial use of Indigenous Traditional Medicines and Practices.

1.2. Scope

This policy applies to all sites and facilities within PHC, all PHC designated work sites and to all [PHC Staff](#).

2. Policy

PHC health care providers will respect the right of Indigenous patients, residents and families to incorporate traditional Indigenous practices as part of the holistic care desired.

PHC will facilitate Indigenous patients/residents and families receiving health services at PHC sites in accessing spiritual support from Indigenous Elders, Knowledge Keepers or Traditional Practitioners and in accessing Traditional Medicines and Practices.

- This includes ceremonies that may consist of the burning of sacred medicines, such as Smudging, Pipe Ceremonies, and other practices. See the [Procedure to Address Indigenous Smudging and Pipe Ceremony Requests](#) for further instructions on accommodating these requests.

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- Among Inuit, the Qulliq, a traditional oil lamp, can be used for ceremonial purposes. In the event a patient/resident or family member requests to use a qulliq at PHC facilities, Staff are to contact the IWR Team to assist in addressing that request.

All PHC programs and departments are to work with the Indigenous Wellness and Reconciliation (IWR) Team to facilitate Indigenous people in having timely access to Indigenous Traditional Practitioners and ceremonial use of Traditional medicines.

Generally, the patient/resident, family, extended family or Indigenous healing practitioner will provide the supplies required for these ceremonies. The IWR Team is also able to provide supplies and assist with ceremony and with escorting Elders and Knowledge Keepers to and from clinical areas if required.

If the patient/resident, family member or extended family member requests a ceremony but do not know of an Indigenous traditional practitioner who can provide the ceremony, PHC staff will consult with the IWR Team who can assist in finding someone appropriate.

2.1. Rights to Ceremonial use of Tobacco and Smudging Medicines

Indigenous clients and those who follow traditional Indigenous spiritual practices and/or family members will have access to the ceremonial use of traditional medicines such as tobacco, sage, cedar, or sweetgrass while within PHC facilities or programs for use of ceremony or gifting. All other use of tobacco products will comply with the PHC [Smoke and Vape-Free Premises](#) policy.

The patient/resident, family member or extended family member (as defined by the patient/resident) may request the opportunity to have a ceremony while receiving services within a PHC facility.

The patient/resident can be a participant in a ceremony even if that person is unable to physically respond. This can be determined in collaboration with the patient/resident, family, extended family if appropriate, the Indigenous person leading the ceremony and the PHC health care practitioner.

The patient/resident, family member, extended family member, designated Indigenous person, or an Indigenous staff member may lead the ceremony dependent on the wishes of the patient/resident first, then family or extended family if appropriate.

PHC staff will work with the patient/resident or family members in determining the time for the ceremony to take place. All efforts will be made by PHC staff to accommodate the request in a timely manner.

In the event of the passing of a patient/resident while in a PHC facility, family members or extended family members can still request access to Traditional Medicines and Practices in order to follow traditional cultural end-of-life protocols.

2.2 Traditional Foods

In many Indigenous cultures, certain foods can be used as or regarded as medicine. This includes the use of certain plants, berries, oils and greases, teas, roots and wild proteins. Indigenous patients/residents have a right to obtain traditional foods for personal use. Staff are not expected to provide the foods, generally they can be provided through the patient's/resident's family or friend networks.

PHC recognizes that ingestion of some traditional foods may interact poorly with part of a patient's/resident's treatment or care plan, and encourages Staff to contact the IWR Team if they have medical or care concerns and need guidance or assistance.

2.3 Accessing Indigenous Elders, Knowledge Keepers or Traditional Practitioners

If an Indigenous patient/resident or family member requests assistance with accessing an Indigenous Elders, Knowledge Keepers or Traditional Practitioners, Staff will request a Consult with the IWR Team in Cerner.

In the event that the patient/resident is already connected with Indigenous Elders, Knowledge Keepers or Traditional Practitioners, and any of the patient/resident, their family or the Elder, Knowledge Keeper or Traditional Practitioner indicate a wish for ceremony, Staff will implement the [Procedure to Address Indigenous Smudging and Pipe Ceremony Requests](#).

3. Responsibilities

3.1. Management

Directors and Operations Leaders are responsible for ensuring that each program or site has a procedure developed that meets the Indigenous person's right to access ceremonial use of Tobacco and Smudging Medicines and the site's safety needs.

Facilities Management and Plant Services will develop site-specific procedures to facilitate the ceremony.

3.2. Staff

Staff will follow the Indigenous practitioners' protocols for participation in ceremony. Health care practitioners, if participating in the ceremony, will respect and follow the ceremonial protocols established by the Indigenous person conducting the ceremony.

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Staff will refrain from touching any of the sacred items and medicines without first having permission from the Indigenous people involved. In the event that items or medicines do need to be moved and permission has not been granted, Staff will consult with the IWR Team.

Staff will ensure they are aware of the procedures developed for the facilities they work at.

Staff are responsible for contacting Physical Plant Services to turn off smoke detectors in the location of the ceremony, for the duration of the ceremony only. Maintenance/Physical Plant will be notified when the ceremony is completed and smoke detection can be restored.

Staff are responsible for the monitoring of hospital equipment during the ceremony.

Staff will speak to whoever is conducting the ceremony to ensure that care will be taken to keep the burning substances away from any medical equipment.

Staff are responsible for notifying other room occupants of the upcoming ceremony.

Staff are responsible to document the ceremony as part of the client's care plan.

Disposal of the ceremonial items is the responsibility of the Indigenous Elder/Traditional Practitioner and/or their helper.

4. Compliance

All staff members are responsible for adhering to this policy and monitoring their activities in accordance with the policy. Staff members may warn others if they observe a violation of this policy. Failure by staff to comply with this policy may result in disciplinary action up to and including termination of employment, services or privileges.

5. Supporting Documents

5.1. Related Policies and Procedures

[Indigenous Cultural Safety Policy](#)
[Procedure to Address Indigenous Smudging and Pipe Ceremony Requests](#)
[Smoke and Vape-Free Premises](#)

6. Definitions

“Elder” The title of being an Elder is bestowed on an individual by the community because of the high level of spiritual and cultural knowledge they hold. The term does not refer to age, but instead to their deep understanding of traditional teachings, ceremonies and cultural practices, and the recognition that they have earned the right to pass this knowledge on to others and give guidance. Something to keep in

mind is that different communities may have different meanings for the term “Elder”, and it is not a blanket term.

“Indigenous peoples” The first inhabitants of a geographic area. In Canada, Indigenous peoples include those who may identify as First Nations (status and non-status), Métis and/or Inuit. These three separate groups have their own unique heritages, languages, cultural practices and spiritual beliefs.

“Indigenous Traditional Medicines” are foods and plants used by Indigenous peoples for healing of mind, body, emotion and spirit.

“Indigenous Traditional Practitioners” are Indigenous peoples who conduct traditional Indigenous practices, including ceremonies for spiritual, mental, emotional and physical wellness.

“Cultural safety” A culturally safe environment is physically, socially, emotionally and spiritually safe. There is recognition of, and respect for, the cultural identities of others, without challenge or denial of an individual’s identity, who they are, or what they need. Culturally unsafe environments diminish, demean or disempower the cultural identity and well-being of an individual.

“Pipe ceremony” is a traditional practice that some First Nations people and communities perform in groups, typically at negotiations or meetings, in order to set a tone on partnership for truthful, respectful discussions.

“Qulliq” is a type of low-intensity oil lamp made from soapstone and an arctic cotton and moss wick fueled by animal oil, used in Inuit culture.

“Smudge” refers to the many Indigenous ceremonies for wellness throughout North, Central and South America that involve the ceremonial burning of traditional plants and medicines. This ceremonial burning, often called a “smudge” ceremony, is a holistic health practice used for prayers, offerings, cleansing and healing of mind, body, emotion and spirit.

“Staff” means all employees (including management and leadership), medical Staff (including physicians, midwives, dentists, and nurses), residents, fellows and trainees, health care professionals, students, volunteers, contractors, researchers and other service providers engaged by PHC.

7. References

1. *A Definition of Smudging*. Indigenous Corporate Training Inc. February 2017.
2. *Pipe Ceremony*. Indigenous Saskatchewan Encyclopedia.
3. *Fact Sheet: Information about the Qulliq*. National Inquiry into Missing and Murdered Indigenous Women and Girls
4. *United Nations Declaration on the Rights of Indigenous Peoples*. United Nations.

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