

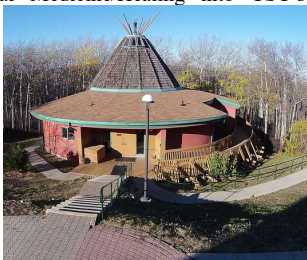
Integrating Traditional and Western Medicine:

Lessons Learned from the Okimaw Ohci Healing Lodge Traditional Healing Project

Mary-Lou Thevenot, Carson Gaudet, Nichelle Nordholt, Dr. Bryce Stoliker, Dr. Lisa Jewell, Dr. Mansfield Mela, & Chaneesa Ryan

INTRODUCTION

Correctional Service of Canada (CSC) is committed to providing effective and culturally safe programs and practices to meet the needs of First Nations, Métis, and Inuit offenders.¹ In line with the Truth and Reconciliation Commission of Canada's call to action number 22,² CSC is actively striving to integrate Indigenous healing programs and practices into its healthcare services. Accordingly, CSC's Prairie Region recently introduced the Traditional Healer/Medicine Program at the Okimaw Ohci Healing Lodge (OOHL), which is an Indigenous-focused healthcare service intended to advance the healing path of federally incarcerated Indigenous women by promoting physical, mental, and spiritual wellness. Through this patient-centered voluntary program, offered in partnership with Nekaneet First Nation, Traditional Healers support and treat residents of OOHL through cultural activities and traditional healing practices. Since launching the program, CSC partnered with the University of Saskatchewan's Centre for Forensic Behavioural Science & Justice Studies to undertake an evaluation of the program's initial implementation, ongoing delivery, and outcomes.³ This project and accompanying evaluation serves as an exemplar for integrating Traditional Medicine/Healing into CSC's Health Services model.



OBJECTIVES

As the Traditional Healer/Medicine Program is the first of its kind in a Canadian federal correctional institution, the evaluation aimed to:

- Provide an in-depth understanding of the program and how it operates (i.e., goals and objectives, roles and responsibilities, program activities, etc.);
- Highlight the successes and challenges encountered during the initial implementation of the program, as well as throughout program delivery; and
- Evaluate changes, if any, in residents' wellness (i.e., physical, mental, and spiritual) and cultural connectedness as a result of participating in the program.

FINDINGS

Findings from Phase Two of the evaluation highlighted the impact of the Traditional Healer/Medicine Program. While some ongoing challenges were noted, both OOHL residents and program collaborators held the perception that the program:

- Had been operating well since its initial implementation.
- Is an additional resource that has filled a significant gap in the provision of healthcare services at OOHL.
- Provides a unique supplementary option to Western medicine, allowing residents to choose their healthcare plan and benefit from accessing culture, traditional healing, and traditional medicines to address their health-related needs.
- Has contributed to better overall mental, spiritual, social, and physical wellness (and a stronger connection to culture) for those who regularly see the Traditional Healers.

Notably, since its implementation, most residents have participated in the program, indicating a high level of interest and satisfaction with the program. The table (presented to the right) provides a summary of residents' perceptions of their physical, mental, and spiritual well-being.

EVALUATION DESIGN AND METHODS

The evaluation was completed in two phases:

- Phase One** focused on the *initial implementation* of the program, including early insights into its purpose and core components, as well as the successes and challenges with respect to establishing the program.
- Phase Two** focused on the *ongoing delivery* of the program (including successes and challenges in providing services to residents) and its *outcomes* (i.e., whether and how it influenced changes in the wellness and cultural connectedness of participating residents).

A mixed-methods research design was used to collect/analyze quantitative and qualitative data. Phase One consisted of semi-structured interviews with program collaborators only ($n = 7$). Phase Two consisted of semi-structured interviews with both program collaborators ($n = 17$) and OOHL residents ($n = 9$), as well as a self-report questionnaire for OOHL residents ($n = 21$). All quantitative data (derived from the Resident Survey) were analyzed in SPSS 28 using descriptive statistical techniques, whereas all qualitative data were analyzed using thematic analysis.

Domain/Item	M (SD)
Mental Health (2 items)	
How do you rate your "mental health" (your thoughts and emotions)? ^a	3.7 (0.78)
How important is your "mental health" to your quality of life? ^b	4.6 (0.92)
Physical Health (2 items)	
How do you rate your "physical health" (your body)? ^a	3.1 (0.88)
How important is your "physical health" to your quality of life? ^b	4.4 (0.99)
Spiritual Health (2 items)	
How do you rate your "spiritual health" (your religious or spiritual beliefs)? ^a	3.7 (0.90)
How important is your "spiritual health" to your quality of life? ^b	4.7 (0.93)
Overall Well-Being (1 item)	
Taking into account your mind, body, and spirit, how would you rate your overall well-being? ^a	3.4 (0.88)

^a Extremely Poor (1), Below Average (2), Average (3), Above Average (4), Excellent (5) response format. ^b Very Unimportant (1), Unimportant (2), Neither Important or Unimportant (3), Important (4), Very Important (5) response format.

CONCLUSIONS

Findings from this evaluation have provided evidence for the benefits of integrating Indigenous healing practices and traditional medicine with Western medicine. This not only represents a substantive and meaningful step towards reconciliation in healthcare, but also demonstrates the importance of Indigenous healing practices and traditional medicine in the treatment of Indigenous Peoples. The evolution of this program – from a two-year pilot to a fully integrated program, with an additional five years of funding – demonstrates CSC's commitment to effective and culturally safe programs and practices to meet the needs of First Nations, Métis, and Inuit offenders. Lessons learned from this evaluation have informed the development of a National Traditional Medicine Program Roll-out Strategy and Implementation Plan that will be used to support the implementation of a Traditional Medicine Program at other CSC institutions.

REFERENCES

- Correctional Service of Canada. (2017). *Indigenous corrections: Quick facts*. <https://www.csc-scc.gc.ca/publications/005007-3001-eng.shtml>
- Truth and Reconciliation Commission of Canada. (2015). *Truth and Reconciliation Commission of Canada: Calls to Action*. http://trc.ca/assets/pdf/Calls_to_Action_English2.pdf
- Stoliker, B., Jewell, L., & Mela, M. (2023). *Evaluation of the Okimaw Ohci Healing Lodge Traditional Healer/Medicine Program: Final Report*. University of Saskatchewan, Centre for Forensic Behavioural Science and Justice Studies: Saskatoon, SK, Canada.

CONTACT

For questions related to the evaluation, direct correspondence to:
 Dr. Bryce Stoliker
 Email: bryce.stoliker@usask.ca
 For questions related to the program, direct correspondence to:
 Nichelle Nordholt
 Email: Nichelle.Nordholt@csc-scc.gc.ca