



Honoring truth and pursuing reconciliation: The physician's role in healing beyond the clinic

In Canada, 30 September is the National Day for Truth and Reconciliation. For Indigenous Peoples, it is a symbolic day—a collective acknowledgment of historical trauma, systemic injustice, and the resilience of cultures that have survived genocide. For us in the medical profession, it is an invitation to look inward at our role and reflect on the harm suffered and the healing that must be done.

A history that cannot be ignored

Canada's health care system, often seen as a source of national pride, has not served all communities equitably. From forced sterilizations to inadequate care in remote areas, First Nations, Métis, and Inuit patients have faced systemic racism, neglect, and dehumanization within the institutions responsible for preserving life and dignity. The death of Brian Sinclair, a 45-year-old Indigenous man who died in a Winnipeg emergency room in 2008 after waiting 34 hours without being seen, exemplifies Indigenous-specific racism. Staff assumed he was intoxicated or homeless—but he was neither. Mr Sinclair was suffering from a treatable infection and was seeking help. His death was not due to a lack of knowledge or resources but resulted from assumptions and systemic racism.

Although we've made progress, the legacy of colonialism and intergenerational trauma from residential schools, forced relocations, and cultural violence continue to manifest in health outcomes. A 2024 Statistics Canada survey showed that nearly one in five Indigenous adults reported facing racism or unfair treatment from a health

care provider in the prior year. Indigenous people in Canada experience higher rates of chronic diseases, greater mental health challenges, and lower life expectancies. These outcomes are not simply a result of individual choices or rural geography—they are symptoms of systemic neglect.

We are in a unique position to lead reconciliation in health care by listening, learning, and standing alongside First Nations, Métis, and Inuit communities to build a safe and equitable system for everyone.

The physician's role in reconciliation

As physicians, we are among the most trusted voices in society. That trust comes with a responsibility to care for patients and remedy harmful health care systems. We are in a unique position to lead reconciliation in health care by listening, learning, and standing alongside First Nations, Métis, and Inuit communities to build a safe and equitable system for everyone. Confronting Indigenous-specific racism is our ethical and professional obligation. Culturally safe care must be a professional standard.

To foster meaningful change and support physicians on their reconciliation journey, Doctors of BC, in collaboration with the

Joint Collaborative Committees, is working in partnership with First Nations, Métis, and Inuit leaders to co-create engagement and learning opportunities for physicians, including First Nations community-based experiential learning sessions, webinars, and facility-based learning sessions. This work also encompasses supporting physician champions to connect with one another to amplify activities and practices aimed at eliminating Indigenous-specific racism and increasing cultural safety and humility.

Honoring truth and pursuing reconciliation

On 30 September, I encourage you to wear orange in honor of residential school survivors, attend a local community event, and reflect on your role in this work. There are also several simple steps you can take to show your commitment to providing culturally safe care as part of your daily practice:

- Acknowledge bias and educate yourself. Enroll in unconscious bias training or the San'yas Indigenous Cultural Safety Training Program (<https://sanyas.ca>), learn about the legacy of colonialism, and review the Truth and Reconciliation Commission of Canada's Calls to Action¹—particularly those focused on health, #18–24.
- Prioritize cultural safety. Take action to ensure Indigenous patients feel respected, heard, and valued. This includes involving Indigenous voices in health care planning and delivery.
- Advocate for equitable access. At the institutional and policy levels, advocacy is needed for investment in

Indigenous-led health care initiatives, especially those rooted in traditional knowledge and healing.

- Support Indigenous medical learners and colleagues. Representation matters. Encouraging and mentoring Indigenous medical students and supporting Indigenous physicians are critical to creating a more inclusive profession.

Reconciliation is a lifelong commitment. Physicians are trained to listen to their patients' stories, validate their pain, and offer a way forward. Indigenous communities are sharing their stories with us. Let's commit to truly listening and building a health care system where every patient feels safe, heard, and respected—a system that acknowledges the past and actively works to heal it. ■

—Charlene Lui, MD
Doctors of BC President

Reference

1. Truth and Reconciliation Commission of Canada. Truth and Reconciliation Commission of Canada: Calls to Action. 2015. Accessed 25 July 2025. www2.gov.bc.ca/assets/gov/british-columbians-our-governments/indigenous-people/aboriginal-peoples-documents/calls_to_action_english2.pdf.

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