



WASHINGTON STATE UNIVERSITY

SPOKANE

Describe and help design the following:

- Ways to bridge the cultural divide between Salmon & Western medical education and practices
- Decolonizing approaches to rural healthcare education settings
- Engage community stakeholders to integrate cultural beliefs and values





WSU NAHS Mission

- Expand NA health care workforce
- Culturally embedded education toward holistic and equitable patient care
- Tribal community partnerships and health initiatives

WSU Native American Health Sciences Tribal Advisory Board

- Made up of healthcare professionals, administrators, educators, and tribal council members
- Contribute to WSU NAHS partnerships throughout PNW, AIHC, ATNI, NPAIHB, SIHB, Centennial Accord





New Center for Native American Health

- Serving 56 NA Health Students & 180+ Pre-Health across WSU
- 13 Pathway Programs with colleges, institutions, orgs, and communities
- 3 wings of the Center serve mission

Indigenous Clinical Simulation

- Culturally Patient-Centered
- Balances Western medicine with Indigenous teaching and practice perspectives toward equitable outcomes in an interprofessional setting
- Meant to eliminate healthcare workforce perpetuated health disparities and outcomes
- Reinforces culturally responsive and respectful communication practices
- Provides knowledge, awareness, and practice skills for Native & Non-Native health students & current workforce, through indigenous instructed simulation



Interprofessional Indigenous Developed & Instructed



- Interprofessional Indigenous Healer Cohort
- Meetings & Retreats
- Advises & impacts
 - Space design and elements
 - Simulation design
 - Indigenous standardized patient cases
 - Pedagogical practices
 - Dismantling, Decolonizing and Indigenizing the way we approach patient care
- MS Y2s research
 - Learner assessment and evaluation
 - Instructor evaluations
 - Cohort story from decolonized approaches



Indigenous Healers



Culture is Embedded throughout our Work

- Bringing healing and holism into a space that has been westernized
- Valuing harm reductive strategies through story and voice
- Expanding new envisioned spaces to teach, inform, and practice cultural knowledge, understandings, perspectives, and practices toward proficiencies of care
- Indigenous standardized patients and varying low to high fidelity levels
- Personalized faculty development following simulation best practices



How do we bridge the cultural divide between Indigenous and Western medical education and practice?

A sprig of green cedar or juniper branches lies on a white paper towel. The branches are dark green and have a feathery, needle-like appearance. The paper towel is placed on a grey surface, possibly a table or countertop. The text is overlaid on the image in a white, cursive font.

*How do we decolonize & Indigenize
approaches within
Rural Health Education?*



*How do we involve
community & integrate
cultural beliefs & values?*

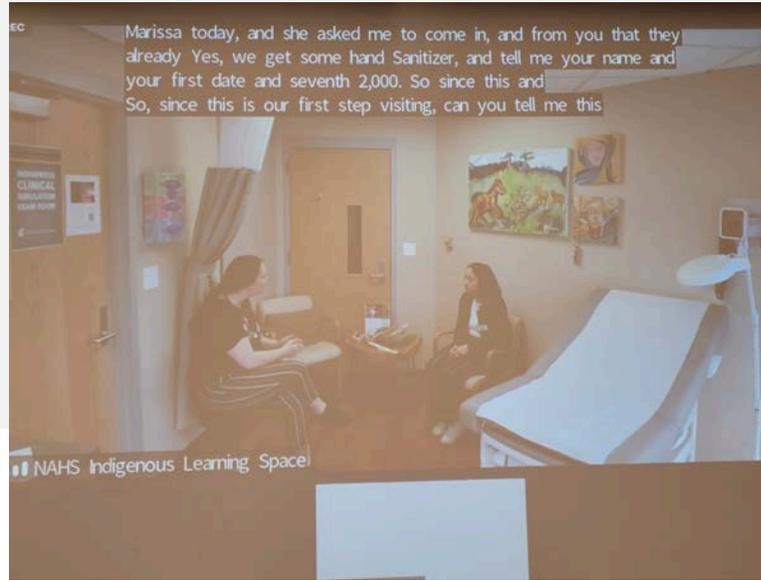




Individual & Group Work Sessions

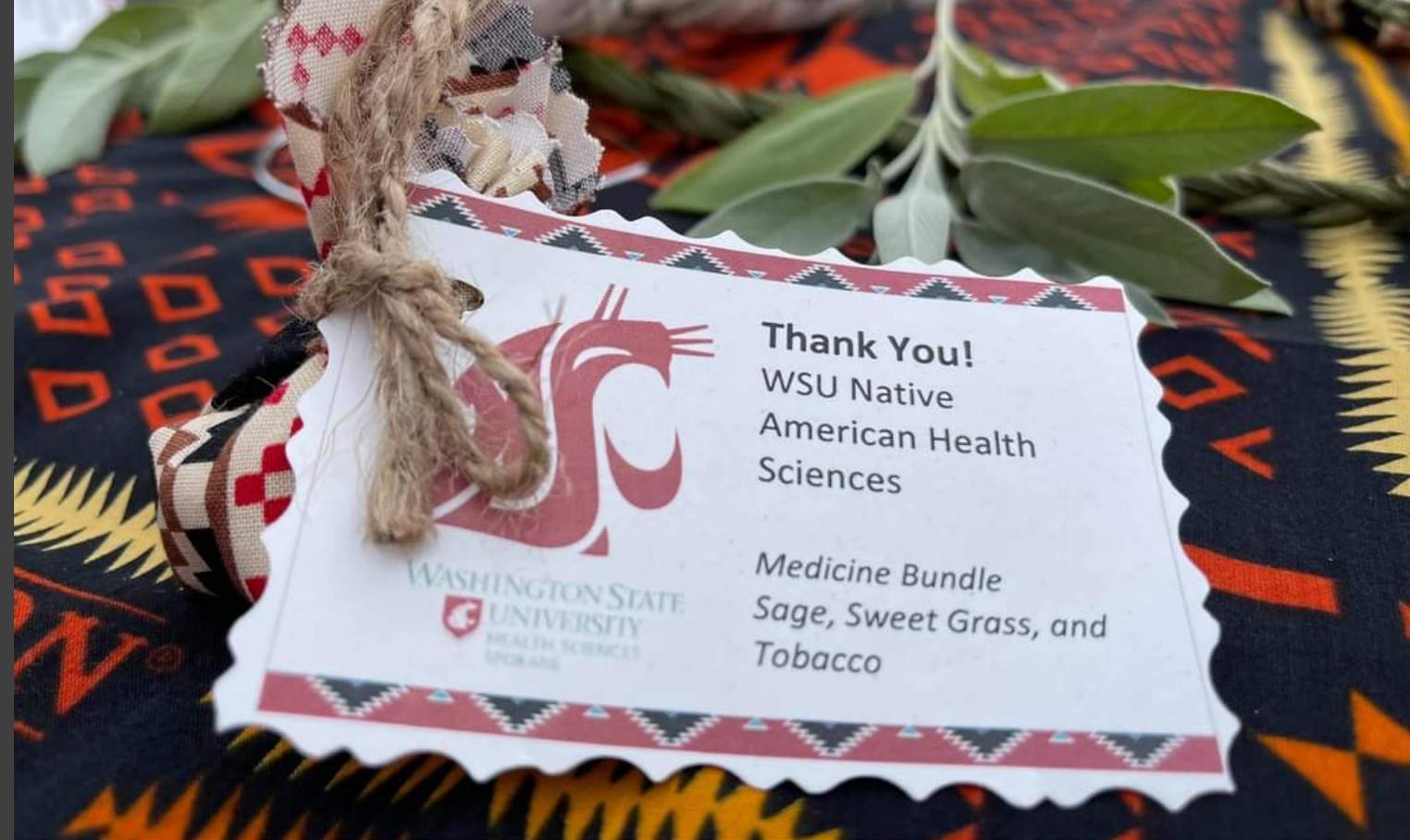


<https://native-land.ca/>



Group Exercise

- Who do you serve in your rural community?
- How do you get to know who you serve?
- How do you begin to bridge Western views, education, and practice, with Indigenous ones?
- How do you decolonize and Indigenize views, education, and practice?
- How do you involve community and integrate cultural beliefs and values?



Sulpayki!
Thank you!
Go Cougs!