UNIVERSITY OF SASKATCHEWAN
College of Pharmacy and Nutrition
PHARMACY-NUTRITION.USASK.CA

ohpahotân | oohpaahotaan

let's fly up together

Phase 4 Report
Date: June 8, 2026

BE WHAT THE WORLD NEEDS

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Framing this Report

BACKGROUND

The College of Pharmacy and Nutrition (the College) is situated on Treaty 6 Territory and Homeland of the Métis. As one of 16 academic units at the University of Saskatchewan, the College consists of two professional programs: Doctor of Pharmacy (PharmD) and Bachelor of Science in Nutrition. The College can make a distinct contribution to Reconciliation through the disciplines it teaches, the learning opportunities it creates, the standards it upholds, and the graduates it prepares for service to society.

This report anchors the College in a moment of accountable reflection on its commitments to Indigenous Peoples, Indigenous knowledge, and Reconciliation. The College acknowledges that a coordinated response to these commitments must be ongoing and relational. It is also imperfect, requiring continuous examination, reflection, and renewal guided by humility, honest assessment, and willingness to identify where challenges remain and where intentions are not yet translated into meaningful or actionable outcomes.

PURPOSE

The purpose of this report is to account for how Reconciliation is being understood, practiced, and lived within the College. The reflections and stories contained within are grounded in the core commitments of ohpahotân | oohpaahotaan to Safety, Wellness, Stewardship, Representation, Right Relations, Creation, and Renewal[1]. These commitments are explored across 5 Impact Domains that collectively consider how College policies, practices, and relationships have contributed to or hindered Reconciliation and respectful, reciprocal relationships with Indigenous students, faculty, staff, and communities over the past five years. Reflections and stories within this report were voiced by a working group of faculty and staff with varied lived experiences. The group included two Métis members and recognizes its predominantly non-Indigenous composition. Opportunity for consultation and feedback were made available to all staff and faculty in the College as well as students involved in Indigenous engagement initiatives.

The report is not intended to be comprehensive, but rather to offer reflective narratives that highlight areas of growth and progress toward Reconciliation, alongside honest reflections on where longstanding colonial structures and assumptions remain embedded in College practices. By sharing these reflections publicly, the College affirms its responsibility to transparency and accountability. This report is neither representative of finality nor achievement of work now complete. Commitment to Reconciliation must be continuously visited with humility and through ongoing reflection on our practices, our dialogues, and our relationships.

[1]University of Saskatchewan. 2021. *Ohpahotân | Oohpaahotaan: The Gift (Indigenous Strategy)*. Retrieved June 7, 2026. https://indigenous.usask.ca/documents/lets-fly-up-together.pdf

STRUCTURE

We start with a reflection on the past, speaking Truth before we attempt to Reconcile. Subsequent sections exploring selected themes contain narratives about initiatives undertaken within our College since ohpahotân | oohpaahotaan was received as a gift to the University from Indigenous Peoples. These sections are comprised mainly of stories illustrating how The Gift has been stewarded, championed, and challenged within our College. We end by synthesizing the journey, from awakenings (the past) to accountability (the present) and, finally, to sustainability (the future).

The Past: *Awakenings*

The College of Pharmacy and Nutrition graciously received ohpahotân | oohpaahotaan: The Gift (Indigenous strategy) in 2021 along with the greater USask community. Gifted as an invitation to reflect, renew, and transform, The Gift calls on us to look inward with humility to examine the ways in which we – individually and collectively, directly and indirectly – have contributed to the silencing and overlooking of Indigenous voices, and to take responsibility for the harm and hurt that has resulted. It also calls us to move forward with intention, guided by Truth and Reconciliation, in a good way.

While the strategy itself ushered in a new era, it emerged in response to longstanding and well-documented patterns of anti-Indigenous racism, structural inequities, and exclusion and silencing of Indigenous Peoples within the University, and society more broadly. Meaningful commitment to Reconciliation and repair requires not only reflection, but also ownership and accountability for the conditions that made such a strategy necessary. Most important is a commitment to change and actions that align.

The University of Saskatchewan, as with all educational institutions in Canada, has deep colonial roots that still widely contextualize and impact nearly all aspects of learning and work done at the institution today. From physical spaces that are curated for and by the dominant (White) culture to curricular and instructional content influenced by unchecked implicit biases, systemic racism has been deeply embedded within many aspects of institutional life, shaping learning environment, policies, and everyday practices in ways that continue to impact Indigenous students, staff, and faculty today. Non-Indigenous – and primarily White – faculty, staff, leaders, students, contractors/vendors, and other stakeholders have benefited from structures and policies that align and conform to their interests while ignoring and undermining the unique interests and needs of Indigenous Peoples. Power has been sustained and protected within non-Indigenous circles via the unearned and compounding privilege granted by race and other intersecting identities created and rewarded by the colonial system itself. Still, institutional and individual responses have not fully acknowledged or addressed these systemic realities, limiting collective and meaningful Indigenous-led change.

Looking back on what we have collectively learned in the past 5 years, we recognize within our own College examples of anti-Indigenous racism at different levels and the interconnectedness between these examples and colonial structures. The Gift asks us to reflect with reverence for the Seven Sacred Teachings by being honest, having humility, speaking truth, seeking wisdom, donning courage, and acting out of respect and love. We humbly offer this reflection in return, guided by the Seven Sacred Teachings, as a commitment to (un)learning, accountability, and ongoing transformation.

STRUCTURAL RACISM

To start with Truth is to acknowledge our history as a nation built on deliberate and systemic suppression of Indigenous Peoples, cultures, languages, and ways of being. In both the remote and recent past, government policies and programs attempted to eliminate and dismantle Indigenous identities and communities. These programs formed the architecture for colonization and the legacy of intergenerational trauma that followed. Ongoing effects of structural racism perpetuate today as widespread inequity that stems from the design of systems, policies, practices, and institutions built on anti-Indigenous assumptions and biases. The education, healthcare, and justice systems were designed to marginalize Indigenous Peoples and still remain tightly intertwined today, thus amplifying the inequity experienced by Indigenous Peoples compared to non-Indigenous people.

How non-Indigenous people perceive issues of anti-Indigenous racism may be influenced, in part, by popular culture and the dominant narrative in which history and contemporary stories of racism are framed[2]. For example, media representation of Indigenous Peoples shapes how staff and faculty perceive Indigenous students and colleagues. Anti-Indigenous narratives have not yet been eliminated as the underpinning of the news media today and those who belong to the dominant culture may not yet question this bias in what they consume. These narratives do not exist only outside the University. As such, there is an imminent opportunity for staff and faculty in our college to collectively examine these influences and intentionally strengthen more accurate, respectful, and strengths-based narratives that support Indigenous student and employee success rather than undermining it.

Structural inequities are also visible in the underrepresentation of Indigenous people within pharmacy and dietetics as professions. Visibility of First Nations, Métis, and Inuit people working with the professions remains disproportionately low compared to the general population. The intergeneration effects of structural racism within the education, healthcare, and justice systems serve to keep Indigenous Peoples out of higher education in pursuit of health sciences training, and the problem is cyclic. The College recognizes the following opportunities to name systemic racism, take accountability for perpetuation of ongoing intergenerational implications, and work toward Reconciliation and decolonization:

- lower high school graduation rates for First Nations youth as a result of multifactorial and complex structural inequities and systemic oppression
- lack of visibility of Indigenous pharmacy and nutrition students and professionals
- lack of support and resources for Indigenous-led mentoring of youth interested in post-secondary education, specifically in the health sciences
- intergenerational trauma and distrust in the healthcare system further limiting Indigenous Peoples exposure to culturally safe and appropriate care
- deeply engrained racist beliefs throughout the province with respect to providing care to Indigenous communities and people
- instructors and practice educators/preceptors trained prior to curriculum centering decolonization and addressing health inequities
- pharmacy and nutrition curricula that have been designed from a colonized viewpoint, leading to exclusion or undermining of Indigenous ways of knowing about health and wellness

The College recognizes that disproportionately low numbers of First Nations and Métis applicants is not reflective of individual ability or aspiration, but rather of systemic conditions that have historically limited

[2] Arendt, F. et al., "Media Stereotypes, Prejudice, and Preference-Based Reinforcement: Toward the Dynamic of Self-Reinforcing Effects by Integrating Audience Selectivity."

access to culturally safe and appropriate higher education. In recognizing that, we affirm that responsibility lies in transforming systems and not in attributing deficit to individuals or communities. In our case, critical systems change must address the gaps and opportunities listed above.

INSTITUTIONALIZED RACISM

Prior to the gifting of ohpahotân | oohpaahotaan, Indigenous voices were often overshadowed within our own College. With most faculty and staff in our College identifying as White or first-generation immigrants of other races, our work has historically been framed in a Western, colonized system of knowledge. Prior to starting to intentionally unpack what The Gift could truly mean to our College, we had not consistently asked critical questions such as examining whose voices were missing from decision-making. We did not consistently embrace empathic awareness and consciousness in decision making and instead placated ourselves with good intentions. ohpahotân | oohpaahotaan teaches us that it is not optional to continue choosing wilful ignorance. Indigenous people have and will continue to be harmed.

In 2015, the Truth and Reconciliation Commission (TRC) released 94 Calls to Action aimed at advancing Reconciliation[3]. Yet, it was 2024 before the accrediting body for our Pharmacy program first outlined standards that explicitly acknowledged the responsibility of the faculty and University to commit to the TRC Calls to Action. The updated standards also now require that the College facilitate recruitment processes for Indigenous students and creation of Indigenous led, co-led, or co-created curriculum[4]. Presently, entry-to-practice competencies guiding both the Pharmacy and Nutrition programs outline that graduates are expected to provide care in ways that honour the unique experiences of Indigenous patients. A coordinated effort toward curriculum renewal and assessment practices that ensure students graduate as culturally competent practitioners remains an opportunity for our College.

Institutional racism remains embedded in university and college structures, especially in how academic success is defined and rewarded. Current systems for hiring, promotion, and tenure tend to prioritize Western ways of knowing, individual productivity, and traditional metrics like publications and grant funding. These standards can overlook Indigenous approaches to scholarship, which are relational, community-focused, and may therefore require longer timeframes. The College has recently revised its tenure and promotion criteria to better recognize Indigenous scholarship, community-engaged scholarship, and diverse forms of academic contribution. However, important gaps remain.

In addition, procedures for faculty recruitment, appointment, and other collegial processes risk reproducing systemic inequities. Many faculty members, including those serving on hiring committees, may lack the training or frameworks needed to recognize their own and others' implicit biases or to equitably assess scholarly contributions from Indigenous faculty, like community-based research and Indigenous methodologies. Additional training will be necessary to support committees in moving beyond the conventional criteria, such as publication metrics or grant funding, and applying more inclusive approaches that fully capture the scope and impact of Indigenous scholarship. Ongoing attention is required to ensure that policies are implemented consistently and that the evaluators apply them fairly. Meaningful inclusion of Indigenous leadership in shaping and guiding these changes within the College will also be essential to advancing Reconciliation.

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[3] Truth and Reconciliation Commission of Canada. *Truth and Reconciliation Commission of Canada: Calls to Action*.
[4] Canadian Council for Accreditation of Pharmacy Programs, *Accreditation Standards for Canadian Educational Programs Leading to the Doctor of Pharmacy (Pharm D) Degree*.

Similarly, policies that affect students must also be reviewed with a critical lens that seeks to identify and dismantle institutionalized racism embedded into the underlying assumptions and practices associated with such policies. From recruitment and admissions to progression and remediation, policies and procedures can deeply affect a students' wellbeing and sense of self. When underlying biases and assumptions are based in systemic racism, Indigenous students remain disadvantaged. For the Indigenous students or prospective students who seek to become pharmacists and dietitians, it is imperative that we ensure their educational experience is crafted to be one in which they can thrive. We want them to become pharmacists and dietitians who love their chosen careers, weave their personal and intersecting identities into their developing professional identity, and feel compelled to care for society in ways that honour and integrate their own knowledge systems.

University and College policies are intended to ensure consistency, fairness, and academic integrity across its programs and serve an important purpose in supporting operations and academic promotion. However, the lived experiences of Indigenous students remind us that policies, when applied without sufficient contextual and cultural understanding, can impose barriers to success. Honest reflection on how we have communicated and applied policy to Indigenous students within the College reveals important lessons about the limits of rigid policy application, the distinction between consistency and equity, and the responsibility to do no harm. One such experience involves a student who reported significant challenges during their time at the College and found that existing policies, particularly those related to academic progression and assessment, were applied in ways that prioritized consistency without sufficient consideration for contextual and culturally-informed implications. Interpretations of policy did not adequately account for the student's unique circumstances or the broader systemic factors including intergenerational mistrust of formal education and health systems that deeply and personally impact many Indigenous learners. Despite seeking assistance and advocacy through various support channels, the student continued to encounter procedural limitations rooted in rigid, colonial policy application. The student ultimately sought support from the Office of the Vice Provost Indigenous Engagement (OVPIE). The OVPIE contextualized the student's experience and advocated for bridging the gaps between policy and Indigenous student realities. The culturally-appropriate support was essential and, through it, our understanding of how equitable student success is achieved, was deepened. Genuine equity that is empathetic, personal, and antithetical to institutionalized racism is achieved only through careful and thoughtful discretion, relational decision-making, and culturally-informed judgment.

Senior Indigenous leadership plays a critical role in guiding this work, but the responsibility must be shared across all levels of the institution to ensure that students do not need extraordinary intervention simply to access compassion, flexibility, and support. We acknowledge a need for ongoing policy review, faculty and staff education, and partnership with Indigenous people to interpret policies in ways that uphold both institutional and assessment integrity and Indigenous student wellness and wellbeing. Supporting Indigenous student success requires not only systems and structures, but also trust, humility, and the willingness to respond to individual circumstances with care.

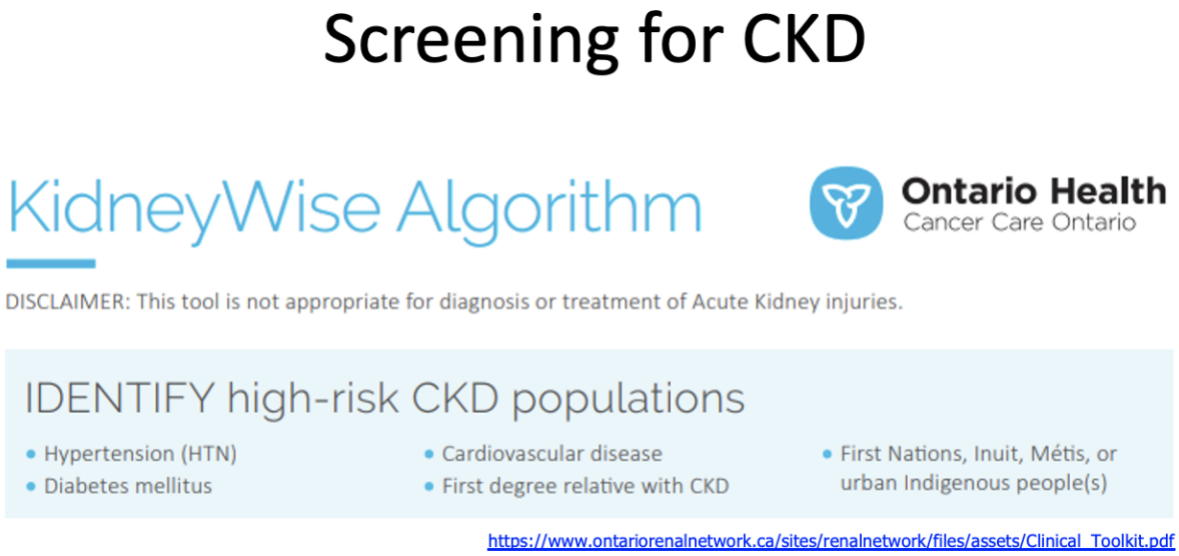
INTERPERSONAL RACISM

Layered into broader systemic challenges, interpersonal racism has affected and continues to affect Indigenous students, faculty, and staff in both overt and subtle ways. In honour of the Truth, we must take ownership of unchecked interpersonal racism that has occurred in our community and commit to demonstrable accountability and anti-racist actions.

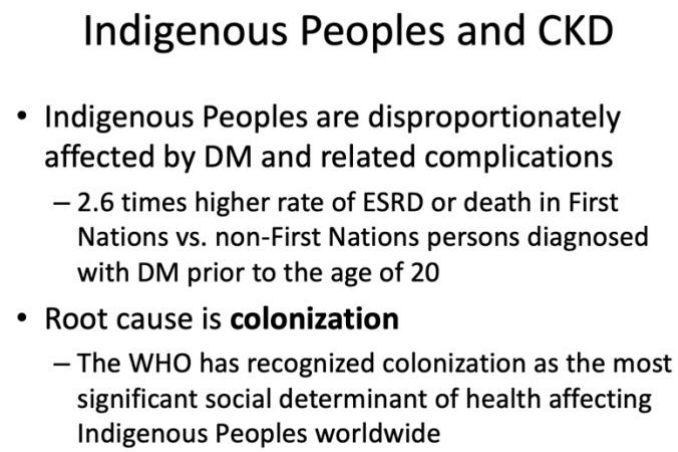
Within our own College, microaggressions have been both observed and reported. For example, up until recent years, instructors often spoke about epidemiology in ways that were misleading or unclear, leaving non-Indigenous students to assume that Indigeneity was itself a risk factor for certain diseases purely due to

race and biology. Indigenous and other racialized students were left to question why such claims were conveyed as fact. Non-Indigenous students were, at best, likely ignorant to these microaggressions or, at worst, co-opted into perpetuating this misinformation in their own professional practice. Only in recent years have conscious efforts been made to be more explicit about colonization and structural racism as the root cause of health inequity and higher rates of certain diseases (e.g. diabetes) in First Nations and Inuit populations. Updates to clinical practice guidelines have also just recently reflected a more honest and factual approach to epidemiology within the past half decade. For example, the KDIGO 2024 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease acknowledges the problematic nature of including variables for race and sex in the estimates of kidney function. ohpahotân | oohpaahotaan asks us to start with the Truth and recognize that implicit biases can be reinforced through teaching and assessment practices, contributing to learning environments that place Indigenous and other racialized students directly in harm's way when interpersonal racism goes unchecked.

Example of original slide from student learning materials in pharmacy – lacking context around the root cause of risk in Indigenous populations[5]:



Additional slide and learning around colonization:



[5] Ontario Renal Network, "KidneyWise Toolkit Clinical Algorithm."

Interpersonal racism also shows up inadvertently when instructors promote the "White Knight" mentality and saviour-orientated nature of health professionals. That non-Indigenous practitioners can "save" Indigenous people from inevitable harm resulting from disease by imposing colonized knowledge systems and western treatment options further oppresses Indigenous students who hear that their traditional knowledge systems are viewed as "lesser than" or even harmful. The token inclusion of a single class on natural medicines, a slide on traditional healing practices, or guest lecture has not met the needs of Indigenous students who need to see themselves reflected in the professions. The subliminal message and interpersonal, covert racism tells Indigenous students that their worldviews are inferior. Instead, ohpahotân | oohpaahotaan challenges us to reconsider how to embed deeper learning about Indigenous ways of knowing around health and wellness alongside western views, not as a secondary lens, but as an equally valid paradigm.

Another common way in which members of our College have experienced interpersonal racism, and we have not always intervened, is how students are exposed to implicit biases via rhetoric about First Nations health services, namely the Non-Insured Health Benefits (NIHB) program. Indigenous patients are often referred to by instructors and preceptors as "NIHB patients", and students pick up on that language, thus promoting and acquiescing its use for another generation. This language is dehumanizing and reduces an entire group of people to be labelled as policy users. Furthermore, the connotation in which this language is often used is steeped in racism and stereotyping. The College and practice communities of our professions must examine the careless use of language that serves to further alienate, vilify, and harm Indigenous Peoples. We must continue to work toward fostering more respectful and humanizing language within both academic and practice settings.

Overt racism and covert racism in the form of microagressions both happen outside the classroom as well. Students who are visibly Indigenous have reported feeling singled out by requests for program feedback and input, citing unsolicited responsibility of representing a whole group of people. There have also been reports of Indigenous students hearing from classmates that there are widespread assumptions that admissions policies are waived for them or that standards have been lowered. Rumors also circulate about how fees are waived or lowered for Indigenous students and still even to the extent that all Indigenous people have their education paid for in full by the government. These are obviously factually incorrect, but bystanding these rumors and choosing not to address them in real time is a conscious choice many in our community have made. Indigenous students have reported that they do not feel comfortable self-identifying to their classmates if they can instead conceal their identity because they fear their classmates and instructors will view them in light of these assumptions, perhaps taking pity on them or, worse, targeting them with envy and a deficit mindset. Indigenous students who choose to conceal their Indigeneity remain subject to this interpersonal racism that keeps them in hiding, further promoting the harmful rhetoric and rumor mill when left unchecked by non-Indigenous allies who hold the responsibility to address covertly racist remarks by correcting misinformation.

All of the above considered, an exodus of Indigenous faculty and staff from the University of Saskatchewan made the news in 2020, reporting widespread racism at institutional and interpersonal levels leading to compounding, intolerable work conditions[6]. Shortly after, our College lost a valued colleague for similar reasons. Despite the obvious cues, signs, and opportunities to take heed, we collectively failed to pause, listen, support, and change. This colleague had reported feeling undervalued and unsupported, particularly as their work and perspectives became more grounded in Indigenous epistemologies and pedagogy over their professional and personal development journey. Opportunities for reporting, recognition, dialogue, and shared learning were systemically and individually stifled. Rather than being met with curiosity,

[6] Warick, "Indigenous Professors Cite Racism, Lack of Reform in University of Saskatchewan Exodus."

humility, empathy, and flexibility, this colleague met resistance and discomfort. They experienced microaggressions and overt racism. Although no one should *ever* have to, a person can only experience and tolerate so much marginalization, oppression, and silencing. A departure from an unchanged, colonized and racist system, therefore, should not have come as a surprise. We acknowledge and take accountability for the conditions within our College at the time that did not provide the support, recognition, allyship, and responsiveness that this colleague deserved and needed to thrive. Not only were there individual moments of missed response, but reflection reveals broader systemic gaps in how we listen to, value, and act on Indigenous perspectives and leadership. The responsibility to create change needed to come from and be championed by the non-Indigenous community and should never have been shouldered by an Indigenous person. In reflection, we did not honour the commitments to wellness, safety, representation, and right relations. We are committed to learning from this experience and following the lead of Indigenous colleagues who thrive when able to bring their full identities and knowledge systems into their work.

These experiences highlight a broader tension that can exist within post-secondary institutions: the incongruence of symbolic commitments to Indigenization and the realities faced by Indigenous faculty and staff. While policies and strategic language may aim to affirm Indigenous inclusion, institutional culture and colonized decision-making structures still impede and debase Indigenous faculty visibility and expression. This reflection is not offered to assign blame to individuals, but to acknowledge that systemic racism manifests at the interpersonal level through inaction, silence, and an inability to support Indigenous students and colleagues as they express, explore, and work in honour of their Indigenous and intersecting identities and knowledge systems. To say that we wish we could rewrite history and go back in time to change these circumstances is a hollow aspiration. We simply cannot, and conceding to wishful thinking will not incite the systemic and personal change required to prevent harm from happening again. Critical systems change aims to transform our College into a more inviting, safe, and celebratory space where Indigenous faculty, staff, and students are wholly supported to thrive, not to assimilate and stay quiet for others' convenience.

INDIVIDUAL RACISM

The most personal level of racism exists at the individual level. Each member of our College community is on their own journey toward Reconciliation, and beliefs about the necessity and urgency of Reconciliation are variable. While some have meaningfully embraced their role in Reconciliation in spirit and action prior to The Gift, opportunities remain to strengthen shared understanding and capacity, particularly in the areas of implicit bias and race literacy.

Our University and College do not have formalized implicit bias training in onboarding new employees, so race literacy remains inconsistent. By not ensuring that employees and students receive credible and fact-based learning (or unlearning) opportunities about the junk science of race theory and its implications specific to our professions, it remains uncertain the extent to which each individual person recognizes their own role and responsibility in anti-racism.

As a simplistic example, widespread understanding of definitions and concepts, such as the differences between First Nations, Métis, and Inuit Peoples, has been something we as a College have aimed to facilitate over the past number of years, yet inconsistent and inappropriate use of terminology has been noted. Opportunities exist to strengthen confidence in using appropriate and accurate terminology so as to avoid further harm via microaggressions and interpersonal racism. Individual racism can also manifest through hesitation and uncertainty about how to respond when bias and discrimination are observed. Building capacity for anti-racist action requires not just awareness, but also fact-based knowledge, skills training, practice, institutional support, and a supportive community to encourage confident and decisive

behaviours. Strengthening these competencies across our community is an essential part of reshaping culture where responsibility for addressing racism is shared, expected, and supported.

It is also important to recognize that individual growth is an ongoing process rather than a fixed outcome one aims to achieve. Many members of our College have taken meaningful steps in their own learning (and unlearning) journeys even prior to receiving The Gift. ohpahotân | oohpaahotaan has created impetus and space for our entire College community to move forward together with humility, openness, and accountability. We must move beyond the fear of making mistakes and shift focus to continuous growth and improvement.

While we are responsible for the present and future, we start with ownership of the past. ohpahotân | oohpaahotaan calls on us to recognize that *"we are all our relations"* and to be accountable to those who came before us and those who have yet to come. Our intention is to create conditions within an accountable and anti-racist learning and work environment where Indigenous students and colleagues of the next seven generations see themselves in our professions in ways that honour and celebrate their Indigeneity; that they thrive as students, pharmacists, dietitians, or educators not in spite of their Indigenous identity, but because of it.

MOVING FORWARD WITH OHPAHOTÂN | OOHPAAHOTAAN

Taken together, these examples of multi-level racism that have pervaded throughout our College's history - whether intentional or not – illustrate an accountability gap. If our College's mission is to "d*evelop pharmacy and nutrition professionals and researchers to advance health, drive discovery, and engage with communities*", we must demonstrate both intention and action to fulfil these commitments for and with *all* people. If truly committed to Reconciliation, we must sit with humility, learn from these reflections, and accept accountability and responsibility to do better, as we continue to reflect on how policies, leadership practices, and College culture must better support Indigenous faculty, staff, and students throughout their evolving professional and personal journeys, including celebrating achievements and reducing barriers.

Over the past five years, we have embraced the Indigenous Strategy to varying degrees at varying times. That is the honest truth. A more consolidated and effortful approach to navigate change as guided by the strategy's seven fundamental commitments is more than warranted.

At the ohpahotân | oohpaahotaan Spring 2026 Symposium, kohkum Linda Young's words rang loud and clear as she spoke about reparative actions. Her wisdom calls on us to not just "go back to the past where the damage has been done", but to come back to the present to fix it. The narrative reflections offered in this chapter place us back in the past to reflect on our role in the hurt and harm caused. The subsequent chapter offers narrative reflections on the fixing work that has taken place to date.

With humility, we move forward by owning the earnest responsibility of implementing the strategy and, with honesty, admit that the impact of work done to date remains far from realized.

BE WHAT THE WORLD NEEDS

The Present: *Accountability*

IMPACT OF INDIGENOUS INITIATIVES ADVISORY COMMITTEE

The Indigenous Initiatives Advisory Committee (IIAC) has played a transformative role in advancing Indigenous engagement, learning, and inclusion within the College of Pharmacy and Nutrition, building on a foundation of early grassroots initiatives and evolving into a more structured, strategic approach aligned with the university's Indigenous Strategy, *ohpahotân | oohpaahotaan*.

I. HISTORY AND CATALYST FOR THE COLLEGE OF PHARMACY AND NUTRITION'S IIAC

Prior to the formal establishment of the IIAC, the College demonstrated a clear commitment to Indigenous initiatives through the creation of the Indigenous Activities Fund Advisory Committee in April 2018. Supported by $67,000 in internal funding over two years, this initiative enabled a range of student- and faculty-driven events that elevated Indigenous knowledges, voices, and practices. These included cultural learning sessions, health and wellness presentations, co-sponsored community events such as the Annual Spring Round Dance, and targeted programming such as Indigenous student recruitment and mentorship activities. Collectively, these efforts reflected an emerging recognition of the importance of Indigenous perspectives in education and practice, while also building early momentum and awareness across the College community.

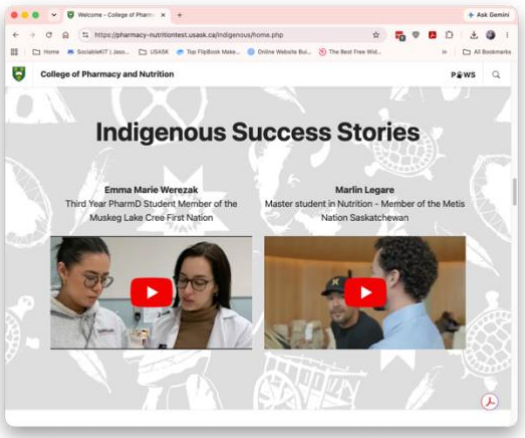
The establishment of the Indigenous Initiatives Committee in December 2020 marked a significant shift toward a more coordinated and strategic approach. The committee is composed of engaged faculty, staff, undergraduate and graduate students. This provides a community and shared learning space for those engaged in Truth and Reconciliation in our College. Early efforts focused on building awareness, establishing baseline measures, and fostering engagement through education and communication. Initiatives such as the administration of a college-wide survey in 2021, promotion of San'yas Indigenous Cultural Safety Training, and dissemination of learning opportunities such as the course "The Role of Practitioners in Indigenous Wellness" helped lay the groundwork for measurable progress. The Committee also introduced mechanisms to strengthen community engagement, including coordinated activities for the National Day for Truth and Reconciliation and the creation of a dedicated communication channel to share resources and events (e.g. Google Doc).

The Committee expanded opportunities for experiential learning and cultural engagement. Initiatives such as the virtual KAIROS Blanket Exercise, the #SoarWithCoPN storytelling project, and a series of events tied to Truth and Reconciliation fostered meaningful reflection and dialogue among students, faculty, and staff. The introduction of a Movie Club and facilitated discussions further created accessible spaces for ongoing learning and critical examination of stereotypes and histories.

From 2023 onward, the Committee deepened its focus on relational and experiential learning through partnerships with Elders and Knowledge Keepers. A series of storytelling sessions, cultural teachings, and land-based learning opportunities—including events with Elder Duquette, teachings with Leo Yahyahkeekoot, and a Native Plant Walk at Wanuskewin—provided participants with meaningful, context-rich experiences. These events, while moderate in attendance, demonstrated strong engagement and impact among participants, fostering a deeper understanding of Indigenous histories, worldviews, and lived experiences. Continued initiatives, such as the trip to the Batoche National Historic Site and the Dumont Lodge in 2025, further reinforced this commitment to immersive and place-based learning.

II. AN HONEST REFLECTION ON THE IMPACT OF THE IIAC

The IIAC has achieved important successes, particularly as a catalyst for broader institutional change. The Committee has consistently advanced ideas and recommendations that have ultimately been implemented through other College structures. Direct accomplishments include initiatives such as the #SoarWithCoPN project connecting with Indigenous alumni, the creation of a borrowing library, and the development of the College's Land Acknowledgement.



The IIAC has also played a key advocacy role in several significant developments.

These include championing the inclusion of Indigenous content in the College's website and communications—leading to dedicated resourcing support; advocating for the establishment of an Indigenous Studies prerequisite in both programs; and promoting the documentation and systematic integration of Indigenous content within the curriculum, including the addition of this requirement to curriculum tracking processes and the formation of a dedicated working group.

The Committee has encountered several challenges. Attendance at events remains relatively low, as these activities are often not prioritized by students, faculty, or staff. Despite efforts to tailor programming based on a 2021 survey of community interests, participation levels have not significantly increased. Additionally, it has been difficult to measure the overall impact of the Committee's work. Some specific initiatives have not achieved their intended outcomes, such as the attempt to develop a registry of Indigenous students, faculty, staff, and alumni to strengthen community connections and amplify Indigenous voices within the College.

Further, the committee operates with a primarily advisory mandate and does not possess formal authority to enact or enforce changes to College policy or curriculum. As such, its influence is inherently consultative rather than directive, relying on collaboration with College leadership who retain decision-making power. While this structure allows for broad engagement and integration of diverse perspectives, it can also limit the pace and scope of change, as recommendations must be considered alongside competing institutional priorities and processes. Consequently, the committee's work has focused on identifying opportunities for Indigenization and supporting the development of initiatives that align with the College's commitment to Reconciliation, rather than directly implementing or mandating curricular or policy reforms.

Overall, the Indigenous Initiatives Committee has significantly advanced the College's journey from ad hoc, event-based activities to a more intentional, sustained, and strategy-driven approach. Its impact is evident in policy development, curriculum enhancement, community engagement, and the creation of culturally meaningful learning opportunities. While challenges remain—particularly in sustaining broad participation and deepening student engagement and evaluating the impact of the Committee—the Committee has established a strong foundation for continued progress and plays a critical role in embedding Indigenous perspectives and Reconciliation into the fabric of the College.

SHIFTING ORGANIZATIONAL CULTURE

Through curriculum design, pedagogy, assessment, research priorities, and professional engagement, the College can either advance Reconciliation and the wellbeing of Indigenous Peoples and communities or reproduce colonial assumptions and structures embedded within professional training, thus resulting in ongoing harm and systemic oppression.

I. ADVANCING COMMITMENTS TO OHPAHOTÂN | OOHPAHOTAAN THROUGH COLLEGE GOVERNANCE AND PARTICIPATION

The College understands and respects Reconciliation as a shared and ongoing responsibility that must be embedded within governance structures and everyday decision-making. As a College with no Indigenous faculty, a limited number of Indigenous staff, and a disproportionately low percentage of Indigenous students, we need to carry the responsibility of Reconciliation collectively through engagement with both college- and university-level governance bodies, advisory groups, and institutional processes dedicated to Reconciliation, decolonization, and Indigenization. This approach acknowledges both the constraints and obligations of working within our existing structure to affirm Reconciliation as central to our leadership, learning, and long-term transformation.

College leadership and faculty participate in college- and university-level Indigenous initiatives that guide our Indigenization and Reconciliation efforts. This includes engagement at the institutional level with the Mistatimōk Committee, including the various events planned by the Committee such as National Day for Truth and Reconciliation and māmowi āsohtētān Internal Truth and Reconciliation Forum. At the college level, the Indigenous Initiatives Advisory Committee and Equity, Diversity, Inclusion, and Accessibility Committee ensure that Indigenous perspectives are meaningfully integrated into College values. Through active participation, the College is aligning its priorities with wider institutional commitments that are hopefully contributing to a coordinated, system level change.

The College acknowledges that colonial structures and practices remain embedded within academic governance and decision-making processes. This creates barriers for Indigenous students, faculty, and staff. Addressing these challenges requires ongoing self-reflection, humility, and a willingness to examine how institutional and colonial norms, policies, and power structures perpetuate exclusion and inequity. Recognizing Reconciliation as a long-term reflective and action-oriented process, the College understands that meaningful change involves both individual and systemic transformation, which will require guidance from both Indigenous leadership and communities.

Through its engagement with Reconciliation efforts, the College learned that we have a responsibility to move beyond symbolic commitments to addressing structural inequities. This includes recognizing the importance of Indigenous leadership within academic and professional roles (for example, as evidenced by the reframing of an Executive Assistant to Executive Officer role to allow an Indigenous staff member to assume a People Leader role), valuing Indigenous knowledges within governance and policy contexts (for example, as evidence by revised tenure and promotion standards that acknowledge Indigenous scholarship and relationship building), and ensuring that responsibility is shared across leadership, faculty, and staff. Sustained and ongoing change depends on consistent participation, transparency, and accountability at all levels of governance.

The College is committed to continuous learning, reflective practice, and adaptive change in response to Indigenous guidance and shared knowledge. Faculty and leadership engage in ongoing professional development related to cultural safety, anti-racism, and Indigenous histories and knowledges with a view that this learning is an evolving process. The College also commits to advocating for structural changes that remove barriers for Indigenous students and faculty, including the development of flexible pathways and policies that acknowledge diverse educational pathways. Through these commitments, the College seeks to cultivate environments in which students, faculty, and staff can thrive and see themselves reflected within College leadership and governance.

II. SHIFTING CULTURE WITHIN OUR PROFESSIONS

As reflected above, there is low Indigenous representation within our College and throughout the pharmacy and dietetic professions. While certainly a generalization, individuals who tend to gravitate towards these professions are usually those with rigid thinking and resistant of change. These attitudes must change so that respectful care and inclusion of Indigenous individuals is an active part of our professional duties. Two pharmacist instructors within the College discuss the impact of the pharmacist profession's culture on ohpahotân | oohpahotaan in this video.

Our programs are widely influenced by education and professional standards that have antiracism, cultural competency and trauma-informed care as integral parts of their policies and are required in pharmacy programs. This does encourage inclusion of some Indigenous content, but more needs to be done to ensure that learning occurs at an individual level, is sustained once leaving the University of Saskatchewan and is not completed merely for a "checkmark".

Examples of organizations that directly affect our programs, students and staff:

- The Canadian Council for Accreditation of Pharmacy Programs, Association of Faculties of Pharmacy Canada, and National Association of Pharmacy Regulatory Authorities have cultural competencies that must be incorporated into pharmacy programs to achieve accreditation status[7] [8].
- The Saskatchewan College of Pharmacy Professionals outlines that for pharmacist licensure, mandatory anti-racism or cultural training must occur yearly[9].
- Employers like the Saskatchewan Health Authority have mandatory trauma-informed care training for staff.

As a college, we have limited understanding of how these standards are being incorporated into our programs. While these organizations do impact our culture, very little is understood about how this is being done outside of individuals. We need a more concerted effort to ensure Indigenous perspectives are woven through our program. Our strategic plan and IIAC can help drive this change.

Our organizational culture is also deeply influenced by the people within our college. We have students, faculty and staff who have made it a priority to learn about Indigenous culture and people. We have practicing clinical pharmacists and dietitians who see first-hand the consequences of racism, bias and aggressions. Through this real-life practice, we know that this can impact how topics are taught and incorporated into curriculum and research. Our students have indicated that they are interested and want to know more about Indigenous perspectives; they value how this knowledge will enhance their overall skills in the profession.

The interconnectivity of our profession, the College and ohpahotân | oohpahotaan and how we feel they contribute to organizational culture can be viewed with this mind map.

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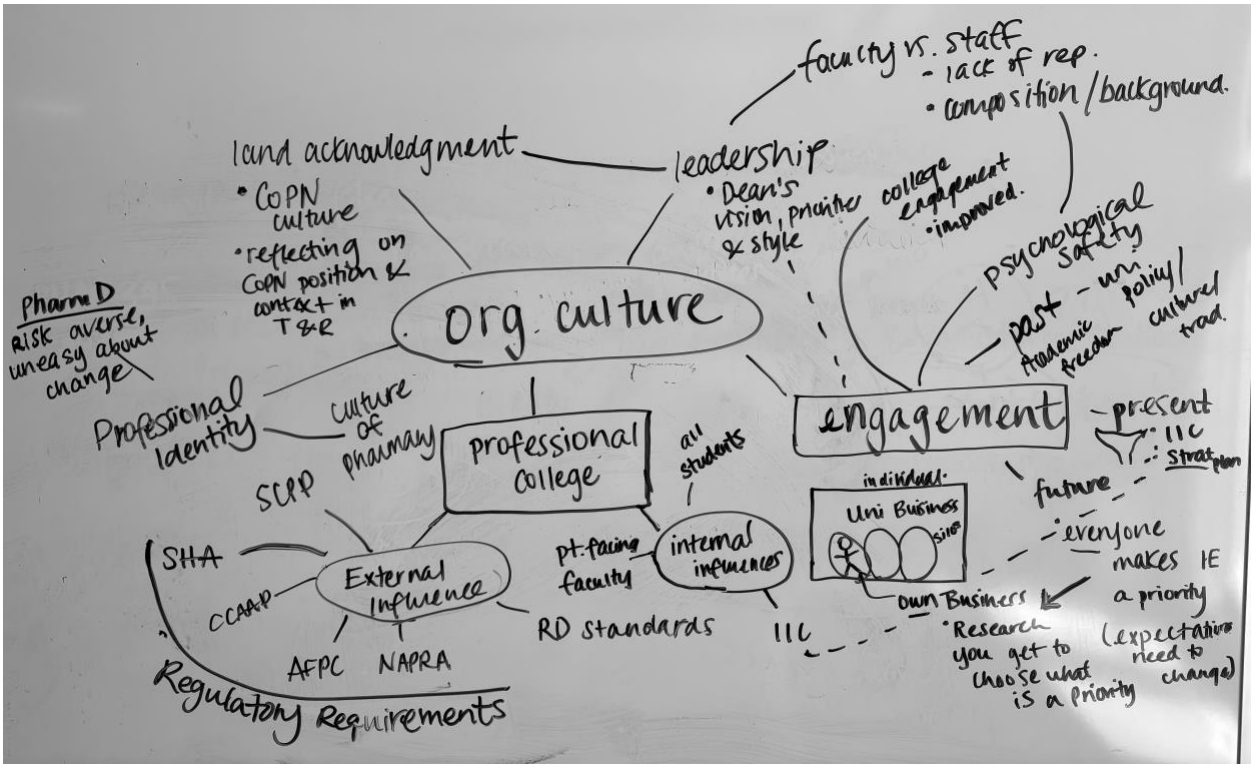
[7] Canadian Council for Accreditation of Pharmacy Programs, *Accreditation Standards for Canadian Educational Programs Leading to the Doctor of Pharmacy (Pharm D) Degree*.
[8] National Association of Pharmacy Regulatory Authorities (NAPRA), *Professional Competencies for Pharmacists and Pharmacy Technicians at Entry to Practice in Canada*.
[9] Saskatchewan College of Pharmacy Professionals (SCPP), "Continuing Cultural Safety Requirement."



TRANSFORMATION THROUGH THE VECTORS OF OUR PROFESSIONS

The Faculty, including experiential learning practice partners (i.e. preceptors), generate and transmit knowledge, shape professional identities, model ethical practice, and influence how future practitioners understand their responsibilities to Indigenous Peoples, communities, and health systems. This domain examines how the College uses its professional mandate to support its commitments to ohpahotân | oohpahotaan.

I. HOW THE SERVICE UNITS OF THE COLLEGE OF PHARMACY AND NUTRITION DEMONSTRATE COMMITMENT TO OHPAHOTÂN | OOHPAHOTAAN

Service units within the College of Pharmacy and Nutrition comprise a large staffing complement and contribute greatly to the health and wellbeing of the population at large. The units include:

- **medSask**: A pharmacist-run, provincial drug information call centre for the general public and healthcare professionals. medSask also authors and publishes Pharmacist Prescribing Guidelines and other practice tools for pharmacists. **USask Continuing Pharmacy Education (CPE) *(formerly CPDPP):*** A pharmacist-run, provincial continuing education provider that develops, implements, supports, and evaluates continuing education and continuing professional development opportunities for pharmacists and pharmacy technicians.
- **RxFiles Academic Detailing Service:** A pharmacist-run academic detailing service that provides in-person and virtual educational outreach to Saskatchewan prescribers, supporting evidence-based drug therapy decision-making. RxFiles also develops and publishes the *RxFiles Drug Comparison Charts,* a widely recognized comparative drug information resource, as well as a range of practical clinical tools. These resources are used extensively across Canada and internationally.

- **Medication Assessment Center (MAC) and USask Chronic Pain Clinic (UCPC):** A pharmacist-led, multidisciplinary clinic specializing in managing complex chronic health conditions and medication use, chronic pain, menopause, and sleep problems.
- **EatWell Saskatchewan (*ceased operations as of 2023*)**: A dietitian-run, provincial nutrition information call centre for consumers and healthcare professionals. EatWell Saskatchewan also provided nutrition information via social media and public health promotion strategies.

The service units each operate under the leadership of a faculty advisor and/or staff director. Being integrated within the College, the service unit staff are often highly engaged in initiatives that aim to advance Reconciliation, decolonization, and Indigenization of spaces and culture in the College. Within this Impact Domain, narratives are featured to describe how the service units act as a vector through which Reconciliation and decolonization happen via our professions.

Opportunities to improving access to pharmacist expertise via medSask

medSask's capacity for remote service delivery offers meaningful benefits for rural and remote communities. The drug information service is accessible to all Saskatchewan residents via telephone and email, regardless of drug coverage status and whether patients are eligible for provincial drug plan benefits or are beneficiaries of the federal Non-Insured Health Benefits program. Community partners have noted that these services can be particularly valuable in reducing unnecessary travel, including for Indigenous people who may otherwise need to travel along routes known to pose safety risks.

To improve accessibility and awareness of medSask's drug information service, medSask pharmacists staffed an "Ask a Pharmacist" booth at Back to Batoche in 2023, responding to medication-related questions directly within the community. This one-time, community-based initiative received very positive feedback and helped raise awareness of medSask's telephone consultation services. While medSask's services are broadly accessible, there is an opportunity to further explore how existing resources and materials might be more intentionally shared with Indigenous communities in ways that build on demonstrated community value.

Leading the way with continuing professional development in trauma-informed and cultural safety training via USask CPE

USask Continuing Pharmacy Education has been recognized as a leader in development and provision of cultural safety training for pharmacists and pharmacy technicians. USask CPE has worked closely with the Saskatchewan College of Pharmacy Professionals (SCPP) to develop locally contextualized educational offerings that promote continuing professional development (CPD) aimed at augmenting competence around cultural humility and person-centred care. In 2022, USask CPE (then CPDPP) and SCPP developed a Person-Centred Care Framework that incorporates education and self-reflection[10]. One of the domains of the framework is Indigenous Learning and is contextualized as learning "addressing the unique nature of stereotyping, bias, and prejudice experienced by Indigenous peoples in Canada that is rooted in the history of settler colonialism".
Each year, practicing pharmacists and pharmacy technicians in Saskatchewan must pursue ongoing learning opportunities that fulfil an annual cultural safety requirement. USask CPE developed asynchronous cultural safety training and self-reflection activities in collaboration with the Alberta College of Pharmacy (ACP),

[10] Saskatchewan College of Pharmacy Professionals (SCPP), "Person-Centred Care Framework."

which became required for all Saskatchewan and Alberta licensees during the 2023-2024 licensing year as a foundational educational opportunity[11]. They continue to develop learning opportunities that are responsive to the needs of pharmacists and pharmacy technicians working with First Nations and Métis patients in Saskatchewan. From trauma-informed approaches to stigma reduction, USask CPE continues to create and offers invaluable learning opportunities that aim to incite systemic change within and through the profession of Pharmacy. They include and platform Indigenous voices, including in their Pharmacy Perspectives: Providing Safer Spaces Podcast and in recommending and promoting learning opportunities such as San'yas Indigenous Cultural Safety Training Program[12] [13].

Improving unbiased prescribing in rural and remote Indigenous communities via RxFiles academic detailing

Staff at RxFiles, both Indigenous and non-Indigenous, are also recognized as leaders within our College with respect to Indigenous initiatives. Individual engagement with Indigenization and decolonization efforts (e.g., enrolment in the graduate certificate in Indigenous Nation-Building program) position staff to bring cultural humility and reflective practice to their work. RxFiles is nationally and internationally renowned for its objective, evidence-based health care provider resources that support best prescribing practices. Locally, prescribers in Saskatchewan are eligible to receive an academic detailing visit (one-on-one, evidence-based continuing professional development delivered from a pharmacist to a prescriber).

The RxFiles team selects academic detailing and continuing education topics in response to common and emerging healthcare issues affecting people in Saskatchewan and across Canada, including those relevant to Indigenous Peoples. RxFiles detailing reaches, on average, 55 communities in the province each year and some are among the most remote where Indigenous people access care, such as Cumberland House and Black Lake. Program evaluation shows that RxFiles supports culturally safer clinical decision-making in the province with 98–99% of prescribers reporting no perceived bias in detailing as well as assigning strong ratings for empathy and preparedness of detailers. Beyond detailing, RxFiles resources and tools have been downloaded close to one million times, supporting stewardship of evidence-based information to Indigenous patients via their prescribers.

Engagement with institutional practices and governance at the Medication Assessment Centre and USask Chronic Pain Clinic

Staff at the Medication Assessment Centre and USask Chronic Pain Clinic are among frequent participants and leaders within our College with respect to engagement in Indigenous initiatives. Beyond their personal learning and reflection journeys, the clinic has intentionally embedded Indigenous engagement into their program planning. They plan to hold a mini strategic workshop with the Office of the Vice President of Indigenous Engagement (OVPIE) and information sessions with external stakeholders, including Indigenous representation, to gain information on what the external stakeholders need. The clinic ensures Indigenous engagement is integrated into operations, service delivery, and quality improvement rather than treating it as an add-on initiative. Engaging directly with the OVPIE was initiated from leadership at the clinic, demonstrating accountability at the unit level. The team seeks to ensure alignment with institutional priorities, strengthen culturally informed decision-making, and reinforce commitment at a governance and oversight level. As a result, the clinic has incorporated Indigenous

[11] Saskatchewan College of Pharmacy Professionals (SCPP), "Equity, Diversity, Inclusion Strategy."
[12] Usask CPE and Alberta College of Pharmacy, *Pharmacy Perspectives: Providing Safer Spaces*.
[13] San'yas Indigenous-Specific Anti-racism Training, "San'yas Indigenous Cultural Safety Training."

engagement into its strategic plan, creating structural reinforcement for ongoing action. This ensures dedicated attention in annual planning cycles, clear goals tied to measurable outcomes, and continuity beyond individual champions to promote sustainability.

Guided by ohpahotân | oohpaahotaan, the clinic contributes to Reconciliation within the institution, but more broadly, widely impacts patient care across Saskatchewan. The virtual nature of the clinic enables pharmacists, physiotherapists, social workers, and physicians to provide care to people across the province, including Indigenous patients in rural and remote communities. By tapping into and engaging in meaningful ways with ohpahotân | oohpaahotaan and Indigenization efforts at the University, the staff are making a difference beyond the walls of the institution by forming meaningful, safe, and culturally-informed relationships with patients and communities. The overall impact of caring with cultural humility for some of the most medically complex patients in Saskatchewan experiencing chronic pain and complex medication issues serves to work toward rebuilding Indigenous peoples' trust in the healthcare system via Reconciliation.

Defunding of EatWell limits Indigenous Peoples' access to culturally-sensitive, evidence-based nutrition resources

In 2017, a 6-month pilot project was undertaken in partnership between Indigenous Services Canada (ISC), the College of Pharmacy and Nutrition at USask, and Dietitians of Canada (DC) to launch a provincial dietitian call centre accessible to anyone in the province. Reliable nutrition advice was provided by a registered dietitian via a toll-free phone line, email, and social media channels. According to a news release from DC, the service aimed to address the TRC Calls to Action around health outcomes by "bridg[ing] the gap for nutrition services to rural, remote and isolated communities, many of which are Indigenous and lack easy access to a dietitian"[14]. The registered dietitian who coordinated the centre and responded to information requests had worked within First Nations communities in Saskatchewan for over 10 years as a community nutritionist[15]. Their experience with working with Indigenous people informed a culturally sensitive approach to providing nutrition information given the uniqueness of Indigenous foodways and nutrition needs.

The center advocated for a sustainable funding model, citing that the accessibility and culturally-sensitive lens at the heart of the service directly addressed the disproportionately high prevalence of food insecurity in First Nations households in Saskatchewan. A 2021 report details how, between March 2019 and February 2021, the service received over 1100 inquiries from people in more than 100 rural, remote, and Indigenous communities[16].

A social media education and outreach campaign featured and celebrated Indigenous nutrition champions from First Nations communities across Saskatchewan, reaching over 80,000 people. Images at the core of the campaign were tagged with the hashtag #Eatwellchampion and featured Indigenous people holding signs that conveyed messages about how eating well contributes to their own holistic wellness. The images were also printed in 5000 copies of a wall calendar and were distributed in Indigenous communities across Saskatchewan. During the COVID-19 pandemic, an educational social media campaign called #Eatwellcovid19 featured photos of Indigenous Peoples' traditional food practices such as foraging, hunting, and growing food on the Land. This campaign, too, celebrated First Nations people in imagery and

[14] Dieticians of Canada (DC), "Eat Well Saskatchewan Brings Nutrition Experts to Homes across the Province."
[15] Kobitz, "Dietitian Call Centre Now Open at USask."
[16] Verishagen, *A Briefing on the Eat Well Saskatchewan Program*.

education. Accompanying education and recipes posted on social media were also culturally informed, highlighting how Indigenous foodways connect to eating well.

The service, at its core, celebrated Indigeneity. These campaigns were notably void of deficit discourse and White saviour framing, showcasing Indigenous people not in need of nutrition services because of an inherent deficiency, but as whole humans who choose to eat well for any number of reasons. Reaching over 400,000 people via social media during its tenure, EatWell played an important role in Reconciliation in Saskatchewan in terms of showcasing Indigenous People and their knowledge systems not as the "other" or "alternative", but as equally valid as any other food and nutrition system present in non-Indigenous communities.

In 2023, operations at EatWell Saskatchewan ceased due to lack of ongoing funding. Renewed commitment and innovation in expanding culturally safe dietitian services to First Nations and Métis communities in Saskatchewan is a priority for the College.

II. HOW EXPERIENTIAL LEARNING PROGRAMS DEMONSTRATE COMMITMENT TO OHPAHOTÂN | OOHPAHOTAAN

Within the PharmD and Nutrition programs, each student is required to complete various experiential learning (EL) placements as a component of their degree requirements. EL provides students opportunities to apply, integrate, and internalize their knowledge and skills in real-world practice settings. While the curriculum is designed to support students in preparing for these experiences, the unpredictable and complex nature of authentic practice requires that students adapt and demonstrate empathy for an individual's unique circumstances.

Many EL partner sites (e.g. pharmacies, hospitals, community-based organizations, etc.) in both programs serve First Nations and Métis patients and clients. Therefore, students have the opportunity in EL to identify and address systemic racism experienced by Indigenous Peoples within the healthcare system. Furthermore, some preceptors (i.e. the pharmacists and dietitians overseeing and evaluating student performance in EL placements) self-identify as First Nations or Métis. This provides students the opportunity to learn from and alongside practitioners who have established and navigated their career as an Indigenous healthcare professional.

Diverse practice sites provide students the opportunity to apply and demonstrate cultural humility and safety

EL placements across the programs intentionally include rural, remote, and First Nations partner sites. When students step into these environments, they are entering spaces shaped by distinct histories, relationships, and ways of knowing. Caring for First Nations and Métis patients and clients within these communities becomes a formative opportunity for personal and professional identity development. Students are challenged to move beyond the frameworks they have been taught in the classroom and to practice with genuine cultural humility, recognizing their biases, assumptions, and the limits of their existing knowledge. These placements often pose critical event opportunities that meaningfully shift how a student understands their role as a healthcare professional and their responsibility and reciprocity in relation to others. EL moves the theoretical practice of cultural humility to real-world experience.

In the past two years, pharmacy students have received priming experiences in earlier years of the program that are designed to help them shape their approach to providing culturally safe care in EL (see Pedagogical Initiatives). Since adding these specific priming experiences into the curriculum, students more readily

reflect on their experiences with identifying and witnessing systemic racism. Partnering with sites and preceptors who also feel convicted to address and oppose systemic racism embraces the commitment of creation. Embedding these experiences and creating reflection opportunities for students cultivates practitioners who understand that equitable care requires both technical competence and a deep, ongoing commitment to examining the structures and assumptions that shape the systems they work within.

Anti-oppressive preceptor training opportunities for professionalism and communication assessments

Preceptors are not simply supervisors and evaluators at partner practice sites. They are educators whose values-based best practices are transmitted to students via role modelling. Concordantly, a preceptor's assumptions, biases, and stereotyping can also be passed on or even imposed on students and patients from racialized and other marginalized backgrounds, including Indigenous Peoples. Recognizing the need for cultural safety training and implicit bias awareness, our programs have developed preceptor training opportunities aimed at creating opportunities for preceptors to examine their own biases and assumptions.

Synchronous and asynchronous continuing professional development opportunities invite preceptors to turn inward before they assess outward. These sessions and resources create space for preceptors to examine the biases and assumptions they carry into their supervisory relationships, particularly as those assumptions underpin the professionalism and communication standards that have historically been set by Whiteness and dominant cultural norms. By engaging with anti-oppressive frameworks, preceptors are better equipped to reflect on the reasons for which they perceive a student to not yet be meeting expectations. Different cultural norms and past negative experiences with those in authority positions may impact how Indigenous learners perform in these settings. Assuming that pharmacy and nutrition students are hegemonic and all subscribe to dominant norms is harmful for students from Indigenous backgrounds. This investment in preceptor development also signals to students that the program takes seriously the power dynamics embedded in teaching and assessment. Professionalism and communication are among the most subjective dimensions of EL assessment, and they are also the dimensions most susceptible to cultural bias. When preceptors have done the reflective work of identifying their own positionality, they become more thoughtful interpreters of student performance and more trustworthy mentors for students navigating complex, culturally layered practice environments.

The "ripple effect" of decolonizing education within practice settings

Many preceptors report an ongoing interest in precepting as they feel strongly that the relationship with students is reciprocal. Students learn how to adapt to real-world practice while preceptors keep abreast of contemporary pharmacy education topics and learning opportunities. Since teaching and reflective opportunities around cultural humility, anti-racism, and decolonizing practice have been more intentionally embedded into the programs, students now have opportunities to "champion" responsive actions in their own practice that reflect these values and commitments. In this way, the education students receive in our programs does not stay within the walls of the university. Their knowledge, skills, and attitudes related to practicing with cultural humility permeate into practice settings and, in meaningful ways, shape their chosen professions. The effect is sometimes clear and obvious with students challenging overt racism that may otherwise be accepted as normal and tolerable. It is also sometimes quiet, yet still powerful, in the ripple effect of students providing person-centered and culturally responsive care to Indigenous Peoples that is informed by an internalized sense of responsibility to Reconciliation.

The impact of this ripple effect may extend well beyond a single placement. If students can influence and motivate one other professional to move toward Reconciliation and decolonization in their practice, that professional may impact one other, and so on. If the education students receive today meaningfully influences the practitioners they work alongside, then the program's impact on Indigenous health equity is not limited to the students who graduate.

INDIGENIZING PEDAGOGICAL INITIATIVES

I. APPLYING THE COMMITMENTS OF OHPAHOTÂN | OOHPAHOTAAN TO BROAD CURRICULAR REFORM

Competency mapping of Indigenous content

CoPN has a fairly robust method to collect information about what is being taught in pharmacy courses and how that meets the required AFPC and NAPRA competencies. However, current mapping process asks instructors to be reflective of content but does not necessarily provide details about pedagogy and delivery. Though competency mapping is a required task for instructors, quality of the reports is dependent on engagement, which can influence accuracy.

A more concerted and directed effort needs to be established so that Indigenous and culturally sensitive topics can be effectively integrated into curriculum. Currently, it is up to the individual instructor to determine what and how they will teach these in their course. We need individuals currently lacking motivation to revise and prioritize Indigenous content, which may be better achieved with an enhanced strategy and guidance.

The IIAC is an important committee however, it has very little influence in terms of curriculum changes. The Terms of Reference for this committee were just changed to add “Advisory” in the committee title, weakening its overall position in program development. Individual instructors are wholly responsible for their own agency to learn about, build/find capacity, and innovate their teaching in a culturally safe way, which can pose as a barrier for sustainable curricular change.

II. STORIES OF TEACHING AND LEARNING INNOVATION ALIGNED WITH OHPAHOTÂN | OOHPAHOTAAN

A “Book Club” approach to decolonizing the classroom and feature Indigenous “First Voice”

Within the PharmD Experiential Learning curriculum, “immersion” courses are designed to prepare students for their upcoming practice experiences in real-world settings. In Year 3, students have traditionally completed Professional Practice Projects, supervised and assessed by external preceptors. Some of these projects were aimed at improving Indigenous wellness, but experiences and outcomes were highly variable. In 2024, we redesigned the course entirely to frame it instead as an opportunity for students to engage in decolonizing their continuing professional development and commit to anti-racist practice in their upcoming rotations. We invited Mr. Darryl Isbister to be a part of reimagining this course. From a systems perspective, we decided to shift preceptorship of this course internally with staff and faculty co-learning alongside students. We launched the PHAR 388 Book Club in Fall Term 2024 and have since offered it twice.

While a literature study is a colonized pedagogy, Darryl gifted us with Indigenous pedagogy and encouraged us to weave both together. We embarked on a personal and professional journey of self-study and reflection, learning about Etuaptmumk (Two-Eyed Seeing), Indigenous Principles of Teaching and Learning,

and applications of the Medicine Wheel in learning and self-reflection. As the course began to take shape, we became immersed in the experience of decolonizing our classroom. This became an outcome we were not necessarily seeking but welcomed as a challenge to our pre-conceived colonized ideas of what this experience would look like for us as instructors in a position of power.

Our lectures shifted to delivery via storytelling and reflection. Students used a 7-pointed star to explore and apply the 7 Sacred Teachings to their group/community work together. As instructors, we reflected on our own humanity and humility, teaching with transparency as we reminded students that we are also on our own Reconciliation and decolonization journeys. Following their reading and discussion of an Indigenous-authored non-fiction book, students submitted personal reflective narratives that told stories of awakened awareness related to their own biases, assumptions, and stereotypes. Students committed to change in their personal and professional lives once they received and internalized the lessons these books offer from an Indigenous First Voice perspective.

An ongoing challenge faced in the classroom is variability of student engagement and intrinsic motivation to meaningfully internalize the responsibility we all have as Treaty People to listen to the stories of, and accept the lessons offered by, Indigenous Peoples. A cohort of students continue to report that they have "learned about" Indigenous Peoples in primary school and therefore feel that these courses are redundant. It is an ongoing quest as an instructor to help students connect to a deeper level with their accountability to Reconciliation in both their personal and professional lives. Another current limitation and opportunity for further development in this course is to examine the outcomes and impact that it has at a systems level for students, staff, and faculty involved. We do not presently know how sustained any thought or behaviour change is following this course, nor how that impacts Indigenous people experiences in healthcare settings. Ongoing development in this course will involve continuing to work with Mr. Isbister to learn about how meaningful and measurable change toward Reconciliation can be evaluated.

An authentic skills lab opportunity co-created and facilitated with Indigenous Peoples

As we have started to review our pharmacy program, a focused effort has taken place in the pharmacy skills lab. In May 2024, the skills lab group held a series of sessions with the leads of Indigenous Education Initiatives at the Gwenna Moss Centre for Teaching and Learning (GMCTL) to begin the journey of deconstructing curriculum through Indigenization, decolonization, and Reconciliation. This ultimately culminated in a collaboration between the pharmacy skills lab group, the Indigenous leads at the GMCTL, the Indigenous Pharmacy Professionals of Canada (IPPC), and Dr. Jaris Swidrovich from the Leslie Dan Faculty of Pharmacy at the University of Toronto. Through the leadership of Dr. Swidrovich, pharmacy students learned about and practiced Indigenous intercultural counseling through a simulation with an Indigenous standardized patient (i.e., a patient actor).

This lab marked an important milestone in the skills stream, as it was the first lab co-developed and informed by Indigenous partners. Further, it is the first intentional opportunity for students to interact and receive feedback from an Indigenous patient actor. However, this is only a single lab and there is an ongoing need to nurture partnerships to bring authentic voices into other skills lab scenarios.

III. NAVIGATING WHITENESS IN ACCEPTING OHPAHOTÂN | OOHPAHOTAAN AS A GUIDING STRATEGY FOR DECOLONIZING AND UNLEARNING

Recognizing white fragility underpinning the fear of "doing it wrong"

As settler faculty and staff, we must acknowledge and put down our pride that comes from being rewarded in a colonial system. The fear of trying something different can suppress humility, creation, and renewal. Indigenous knowledge systems, however, must not be seen as innovative or different. These approaches to teaching, learning, and reflection preceded colonization. Yet, we have been rewarded in a system that recognizes innovation that, many times, is only so much as a slight deviation from status quo. Instead, we must focus on Reconciliation as a pathway for transformation; a shift in education not focused on "newness", but of humbly and graciously embracing longstanding traditions that have been repressed and shamed by systemic (structural and institutional) racism. Transforming the way that we approach knowledge generation and learning comes only from a place of humility and respect for ways of knowing that precede the establishment of post-secondary institutions.

In renewing curriculum and choosing pedagogical lenses that suit the intended outcomes of a course, it is easiest to rely on what one has experience and comfort with. Stepping beyond past experience is an act that requires sitting with discomfort, uncertainty, and a real fear of causing unintended harm or other consequences. The focus can become so narrow on concerns about misrepresenting, oversimplifying, and appropriating knowledge and customs that do not belong to us. While these feelings serve as evidence of the weight and responsibility of this work, hesitation and fear can no longer excuse inaction and any discomfort cannot take up more space than the responsibility we carry. Furthermore, the fear of being perceived as performative is justification sometimes used to push off pedagogical transformation for another year. This fear says more about our pride in how we are perceived than it does about commitment to the work and its possible outcomes. Every time we default to the familiar or move too slowly to make meaningful change, it has been Indigenous students, colleagues, patients, and communities who have absorbed the cost.

Reconciliation does not ask settler faculty and staff to present ourselves as if we have finally arrived at a place of enlightenment or resolve, but asks that we each be transparent about our intentions, accountable for our actions, and committed to right relations with Indigenous Peoples. This reflection is not to say that white fragility manifested as guilt or shame is excusable in the academy nor should be accepted as valid reason to defer transformation to others. Rather, settler faculty and staff must accept the internal tension that comes from shifting pride to humility. We must also remember that any recognition or award for this work is fundamentally built on the generosity and grace of Indigenous people who have shared their knowledge, time, and trust despite every valid historical reason to withhold it. This must be recognized and stated clearly, not as a guilt-centered reflection, but one of mutual respect to give credit where it is well-past due.

Unlearning what we learned as students in the very same College

For many faculty and instructional staff, the way we were taught is not simply a memory, but rather the blueprint for how we now approach our own teaching and assessment practice. Many of us learned, even as recently as the past decade, that Indigenous identity was an epidemiological factor underlying certain disease states; that genetics contributes to higher rates of diabetes, hypertension, mental health concerns, and other illnesses. That these claims and teaching practices were not critically evaluated by those who taught and modeled to us as students led us to believe that there was something inherently different (and wrong) about Indigenous peoples' genetic makeup.

Textbooks, clinical practice guidelines, and continuing professional development opportunities for clinicians and educators have more recently named the racism embedded in the undertones of these misconceptions. Epidemiological data and the junk science of race are being explicitly named. Differences observed between populations are now attributed more rightfully to the intergenerational and longstanding effects of colonization and systemic racism.

As instructional staff, it is incumbent that we all take the time to unlearn and relearn the fundamentals of our discipline in light of the Truth. At times, this can involve unpacking years of bias and stereotyping that perpetuated and galvanized within ourselves as we saw Indigenous patients through the harmful lens we inherited. This work demands humility, honesty, and courage. To say that the teaching and assessment practices of all faculty and staff in our College reflects this work is aspirational rather than true. Ongoing efforts toward faculty and staff development framed in an anti-racist and anti-oppressive lens continue to be a priority.

CRITICAL SYSTEMS CHANGE: A HEALTH EQUITY CURRICULUM

I. ADVANCING COMMITMENTS TO OHPAHOTÂN | OOHPAHOTAAN THROUGH CURRICULUM TRANSFORMATION

One tangible way the College is advancing its commitment to ohpahotân | oohpahotaan is through the intentional development of a Health Equity framework embedded within the Pharmacy and Nutrition curricula. This initiative reflects an understanding that Reconciliation must be enacted through transformative, needs-based education and sustained resultant practice change, rather than affirmed only in principle. The framework positions Indigenous health, Reconciliation, and equity as foundational to the student's curriculum, ensuring these perspectives and related learning outcomes are integral to professional identity formation rather than treated as supplemental content added onto an existing curriculum.

ESTABLISHMENT OF A HEALTH EQUITY CURRICULUM WORKING GROUP

The College responded by establishing a cross-divisional Health Equity Curriculum Working Group composed of staff, faculty members, and a professor emeritus. Formed in September 2025, the group was tasked with developing a shared curricular vision that challenges colonial ways of teaching and learning by intentionally framing new learning outcomes in the context of Reconciliation, decolonization, Indigenization, and health equity values across programs. Learning outcomes are thoughtfully structured to develop a higher-order and deeper level of commitment as students gain experience across the years of their training. Within the first weeks of the programs, learning outcomes are aimed at students' acceptance of Truth, as the basis of Truth and Reconciliation. By the end of the programs, learning outcomes aim to have students generate and internalize their own personal commitments and actions toward Truth and Reconciliation in caring for Indigenous Peoples as pharmacists and dietitians. The collaborative and relational structure of the group reflects reconciliation-informed principles of shared responsibility and collective stewardship.

ENVIRONMENTAL SCAN

To support this work, the working group undertook an environmental scan of health equity and Indigenous health curricula from peer institutions across Canada, as well as national professional resources. Particular attention was given to frameworks that centre Indigenous ways of knowing and that position Reconciliation

as a starting point for learning. Learning outcomes developed by Dalhousie University, Indigenous health outcomes articulated by Dr. Jaris Swidrovich at the University of Toronto, and the Association of Faculties of Pharmacy of Canada (AFPC) Equity, Diversity, Inclusion, and Indigenous training modules were identified as most closely aligned with the College's values and responsibilities[17]. In particular, the AFPC Indigenous training module was constructed by Indigenous Pharmacy Professionals of Canada (IPPC) with intention to be used by schools of Pharmacy across Canada. These sources informed the development of a scaffolded curricular framework tailored to the USask context and designed to have a meaningful and sustained impact on student learning and professional identity formation.

FRAMEWORK DEVELOPMENT

INITIAL DEVELOPMENT

This initiative also surfaced systemic challenges related to how health equity and Indigenous content are traditionally approached within professional curricula. Historically, such content has often been ad hoc and isolated, being dependent on the interest and undertaking of individual champions, or inconsistently applied, undermined, or devalued. The College recognized that without a coordinated framework with participation from individuals across different aspects of both programs, Reconciliation efforts risk being fragmented and vulnerable to shifting priorities and individual concern. Addressing this challenge required moving beyond individual instructor initiatives toward an intentional, program-wide structure that embeds Reconciliation into the core educational experience.

The Working Group organized learning outcomes from the three selected frameworks into broad thematic categories and adapted them to the specific needs of CoPN. Early discussions also considered how a shared framework could function across both the Pharmacy and Nutrition programs, given their differing prerequisites, sequencing, and instructional approaches.

Following extensive discussion, the group agreed to anchor the curricula in broad EDI principles that progressively build toward specific Indigenous applications. This sequencing aims to establish a strong conceptual foundation early in the program to support more advanced knowledge application later on. The group recognizes that beginning with broad principles carries the risk of oversimplification. Over the long term, the College intends to shift the framework toward grounding learning initially in an Indigenous worldview or lens.

CONTINUED DEVELOPMENT AND CONSULTATION

With the overarching approach identified, the Working Group has begun developing first-draft learning outcomes within the agreed-upon categories. Members have been assigned to prepare initial drafts for each domain.

Newly completed, the group will next proceed with iterative peer review, cross-domain alignment, and further consultation. This includes recently completed participation in five community consultation site visits led by the College of Medicine as part of their social accountability mandate. Through this collaboration, CoPN helped to shape the consultation tools, engage alongside interprofessional partners in discussions with community members, and plans to participate in a joint debrief process to interpret community-identified priority health concerns.

[17] IPPC, AFPC, PRIDE-RX, Black Pharmacy Professionals of Canada, "Equity, Diversity, Inclusivity, and Indigenous Health Modules for Pharmacy Professionals."

Insights gathered through this shared consultation process will directly inform the development and refinement of CoPN's health equity framework, ensuring it reflects community-identified needs and contributes to a harmonized health sciences approach to social accountability. This developmental process is ongoing.

GOVERNANCE STRUCTURE

Through this process, the College affirmed that Reconciliation requires clear governance, shared accountability, and values-driven decision-making grounded in meaningful consultation. The working group recognized that sustainable and accountable integration of health equity and Indigenous perspectives depends on engagement beyond a single group and is consulting broadly to inform ongoing refinement. Until Indigenous Peoples are proportionally, safely, reciprocally, and equitably engaged in curricular design in ways that honour their experience and ways of knowing, discussions and outcomes will continue to be viewed through a colonial lens. Developing and deepening relationships with Indigenous Peoples, including hiring faculty and staff and admitting students from diverse backgrounds, remains a priority underscoring the commitments of representation and right relations. While not yet implemented, the following roles have been proposed **(see Figure: Health Equity Governance Structure)**:

1. Health Equity Curriculum Committee

The Health Equity Curriculum Committee will be responsible for proposing and overseeing health equity curriculum content for both the Pharmacy and Nutrition programs. Explicit considerations will be made for both the knowledge-based curriculum, and the values needed to support effective integration.

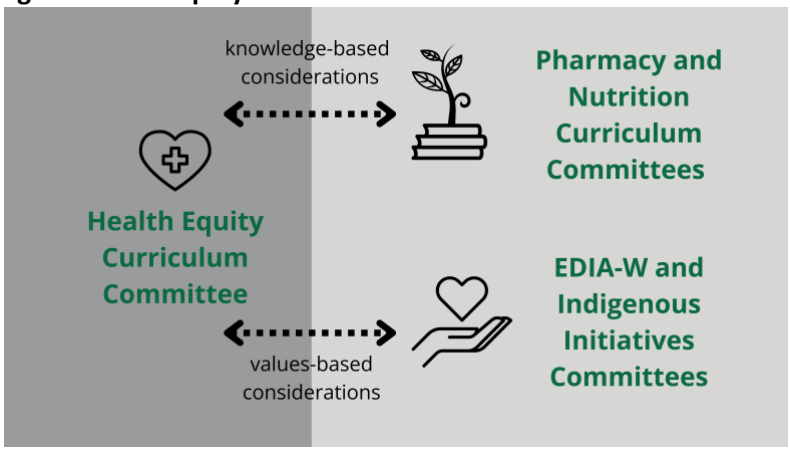
2. Pharmacy and Nutrition Curriculum Committees

The Pharmacy Program Advisory Committee (PPAC) and the Nutrition Program Advisory Committees (NPAC) will review the proposals submitted but retain responsibility for curricular authority and implementation decisions.

3. EDIA-W and Indigenous Initiatives Advisory Committees

The EDIA-W (Equity, Diversity, Inclusion, Accessibility, and Wellness) Committee and the Indigenous Initiatives Advisory Committee will be reconceptualized as committees that support values-based learning and promote a healthy, inclusive, and culturally safe environment.

Figure: Health Equity Governance Structure



This initiative demonstrates the College's ongoing commitment to learning, humility, and systemic change. By developing a scaffolded learning progression that begins with Reconciliation and Indigenous health, expands into applying equity, diversity, inclusion, and accessibility principles to other equity-seeking groups, and anticipates future integration of planetary health perspectives, the College acknowledges that colonial curricular design and delivery to date has excluded the voices of these individuals who are at the receiving end of care from professional graduates of our programs. Through intentional curriculum design, the College is taking meaningful steps to ensure graduates are not only clinically competent, but also prepared to practice with cultural humility, relational accountability, and sustained respect for Indigenous realities.

The Future: *Sustainability*

The College has publicly affirmed its commitment to Indigenous principles and the advancement of Reconciliation within post-secondary education. This commitment is reflected in our strategic plan, revised policies and standards, and curricular intentions.

However, lived experiences within the College remind us that Reconciliation is not static, nor is it achieved solely through aspiration and goodwill. Reconciliation is realized in action only through responsiveness to Indigenous voices, accountability for past harms, and development of genuine, reciprocal relationships.

The narratives selected for this report underscore several responsibilities for the College moving forward:

- Reconciliation requires relational accountability shown through active listening with humility and respect when Indigenous students and colleagues share their experiences. We must make space for Indigenous voices to guide and direct decisions affecting Indigenous Peoples.
- Indigenous and intersecting identities, and the knowledge systems embodied by these identities, are not static. The College must be receptive and adaptable to support students, faculty, staff, and the communities impacted by its work as they grow and evolve over time.
- True commitment to Indigenous principles means valuing Indigenous knowledge not only when it aligns with existing structures or when it conveniently supplements decision-making. We endeavour to embrace Etuaptmumk (Two-Eyed Seeing) and must respect Indigenous ways as equally valid.
- Learning and unlearning must occur via implicit bias training and awareness, relationship development, culturally-informed continuing professional development, and intentionally anti-racist culture change. We are all Treaty People and hold individual and collective responsibility to Reconciliation.

Through reflecting on the awakenings of the past that have informed accountability in the present, we now shift toward future sustainability. Transformation is never-ending. Critical systems change is both a lens through which we seek and create opportunities to transform our system on a large scale and also a means through which we engage, consult, collaborate, design, evaluate, and sustain meaningful progress toward Reconciliation.

The development of a Health Equity Curriculum framework serves as critical systems change. The multifaceted implementation of such a framework, informed by Indigenous Peoples and other equity-deserving groups, will provide direction and clarity at several levels of structural, operational, and pedagogical design and decision-making. Decolonization in the classroom, at Experiential Learning sites, and throughout the hidden curriculum requires every faculty or staff member involved in instruction and assessment to seek opportunities for Etuaptmumk (Two-Eyed Seeing) in a good way. Impact and

sustainability ultimately depend on the development of reciprocal and respectful relationships with Indigenous Peoples. We must have courage and humility to seek out these relationships and engage in the vulnerable work of self-reflection and acceptance of constructive feedback.

Recruitment of Indigenous students and faculty continue to be a priority for the College. While visibility remains disproportionately low, we must examine and address moving forward the structural and individual racism that impedes Indigenous applicants from applying and thriving throughout these processes. The College has begun preliminary consultative work around the development of flexible and culturally-informed pathways.

The College intends to continue to bolster the tireless work of the Indigenous Initiatives Advisory Committee (IIAC). Individuals who form the core of this committee continue to advocate for increased visibility, celebration, and integration of Indigenous excellence and knowledge systems. The IIAC plays a key role in shifting organizational culture. In reflection on the narratives compiled for this report, future work of the committee should shift toward creation of opportunities for anti-Indigenous, anti-racism education and support for members of our College community. For example, the IIAC may develop a sustainable strategy that engages staff and faculty in self-reflective work to identify their own intrinsic motivations in this work. The committee seeks to recruit Indigenous members, which remains an important vector for representation and right relations but should not lose sight of its role in engaging and holding non-Indigenous people accountable to the work of Reconciliation. Sustainability of systems-level change depends on every individual feeling deeply and personally connected to Reconciliation. Here, we can all do better.

By sharing this reflection publicly, the College affirms its responsibility to transparency and accountability. This report is not representative of finality or achievement of work now complete. Commitment to our responsibility to Reconciliation must be continuously visited with humility and through ongoing reflection on our practices, our dialogues, and our relationships.

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