

## Samir Shaheen-Hussain

*Fighting for a Hand to Hold: Confronting Medical Colonialism against Indigenous Children in Canada.* Montreal & Kingston: McGill-Queen's University Press, 2020. 360 pp.

Translation: *Plus aucun enfant autochtone arraché : Pour en finir avec le colonialisme médical canadien.* Montréal: Lux Éditeur, 2021. 488 pp.

*Fighting for a Hand to Hold* is an account of the campaign to end the egregious practice of denying accompaniment to those airlifted from remote parts of Quebec in medical emergencies, a practice with a disparate impact on Cree and Inuit children. A key ingredient of the book's success is its placement of the separation of Indigenous children from their parents or other caregivers in a larger historical and intellectual context, including medical colonialism in Canada broadly. While it is essential, if difficult, reading for Canadian participants in professions such as medicine and social work, it is also highly relevant to those involved in legal education and the practice of law.

Shaheen-Hussain painstakingly details the practice of separating children, its harms, and the difficulties in ending it. Indigenous children from the remote regions would arrive at an urban hospital, often terrorized and unable to speak a language understood by the medical personnel. If able to follow by commercial flight, parents or other relatives would often not arrive until at least a day later. During the child's initial treatment at the hospital, nobody would know their medical history. Previous efforts to end the practice had failed, although comparable jurisdictions had long allowed someone to accompany a sick child. The media campaign to end the practice required a range of strategies over months. Even after the provincial government agreed to end the practice, children continued to be flown alone and the health minister evoked anti-Indigenous racist tropes in a press conference, clarifying that an "intoxicated" caregiver would be denied entry to the medevac airlift (p. 35).

Several chapters discuss the social determinants of health, the concepts of systemic racism and social justice, and the culture of medical education and the medical profession. The longest part of the book, "Medical Colonialism and Indigenous Children," maps conduct committed against Indigenous peoples in Canada by the state or with its blessing against the definition of genocide in the United Nations' Genocide Convention. These chapters recount the exposure of Indigenous people to disease, from smallpox to tuberculosis in residential schools; experimentation on them, without their consent; cruelty in Indian hospitals (sic); forced sterilization and coercive contraception; and the breaking up of families through interventions by child welfare, mass evacuations, and medical disappearances. The book's final section returns to structural determinants of health and decolonization. It emphasizes that colonialism is ongoing and argues that reparations must precede reconciliation.

At the risk of overshadowing the book's many other rich insights, I shall emphasize one contribution that is especially relevant to public discourse and policy in Quebec and several that I see as speaking to a legal readership.

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The point especially salient in Quebec concerns systemic racism and what lawyers might also call indirect or effects-based discrimination. Shaheen-Hussain recounts how difficult it was persuading the provincial government that requiring patients to fly unaccompanied for medical treatment discriminated against Indigenous children. How could a practice applicable to everyone be discriminatory? He provides detailed data about the populations requiring medical evacuation. Even if the practice is province wide, hospitalizing a white child from Westmount or Outremont (wealthy neighbourhoods in Montreal) simply would not separate her from her family for hours or days. Beyond the statistical questions about who travels by air for emergency treatment, Shaheen-Hussain connects the practice to colonialism, invoking the generations-long separation of Indigenous children from their parents. He shows convincingly that the intergenerational trauma experienced by Indigenous peoples exacerbates the practice's harms on them. The clear conceptual and factual presentation of systemic racism and effects-based discrimination in this context could inform those in Quebec who deny the existence of systemic racism, including the premier and his cabinet. Notably, they insist that restricting access to public employment for those wearing religious symbols cannot be discriminatory if the rules apply to everyone.<sup>1</sup>

Three points speak directly to lawyers. The first is Shaheen-Hussain's discussion of the ethics, as a professional, of participating in a system that harms its ostensible beneficiaries. Even well-intentioned medical personnel accepted as normal the separation of Indigenous children from their families for medical transit. The second is that it turned out, contrary to widespread belief, that the practice had no formal source: no written policy precluded an accompanying adult during transport of a sick child by air. There is a reminder here of the need to question common sense and of the normative weight of practice or custom. The third, for law teachers especially, is discussion of the "hidden curriculum," the norms and value systems transmitted from one generation to the next in and around the explicit elements of professional education. Drawing on literature on medical education, Shaheen-Hussain argues that the hidden curriculum for doctors has long included "discriminatory and oppressive norms and value systems" (p. 92). Passed on informally, and including actions, silences, and jokes, the hidden curriculum can be "more memorable than the formal curriculum" (p. 92). There is an unmistakable prompt for law teachers to scrutinize their hidden curriculum, looking for ways that it might neutralize or override recent innovations made after the Truth and Reconciliation Commission's Final Report.

*Fighting for a Hand to Hold* would be an achievement for any author; it is astonishing to think of it as the product of a pediatric emergency physician's spare time. I hope it and the French translation find the large readerships they merit.

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<sup>1</sup> *An Act respecting the laicity of the State*, SQ 2019, c 12.