NATIONAL WORKSHOP ON STRATEGIES TO RECRUIT AND RETAIN ABORIGINAL NURSING STUDENTS IN THE NURSING PROFESSION

A Report of the Proceedings Submitted by the Canadian Association of Schools of Nursing

> September 26 - 28, 2003 Ottawa

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Note: The appendices appear in the language in which they were developed or submitted and have not been translated.

ACKNOWLEDGEMENTS

We wish to acknowledge the leadership of the Office of Nursing Services (ONS), First Nations and Inuit Health Branch (FNIHB), Health Canada, in recognizing the need for a national workshop on strategies to recruit and retain Aboriginal nursing students in the Nursing profession. ONS was aware of the approach taken in New Zealand to ensure the recognition and inclusion of Maori culture and values in nursing education. The Workshop was an opportunity for Canadian Schools of Nursing to learn about the New Zealand approach, explore the relevance of this approach to the Canadian context, to share information about their own initiatives in Canada, and to take further action on the recruitment and retention of Aboriginal nursing students.

FNIHB asked the Canadian Association of Schools of Nursing (CASN) to prepare an agenda and organize the invitational workshop. We are grateful for the funding received from FNIHB to defray the costs of the workshop and the travel and accommodation expenses of the participants. As well, we recognize the special efforts of CASN staff to organize and support the workshop in a timely manner.

We thank the Schools of Nursing and the following organizations: Aboriginal Nurses Association of Canada (ANAC), Aboriginal Institutes Consortium (AIC), National Aboriginal Health Organizations (NAHO), Canadian Executive Services Organization (CESO), and other national associations which had representation at the workshop.

Dr. David Gregory's presentation of *Against the Odds: Aboriginal Nursing*, the Report of the National Task Force on Recruitment and Retention Strategies, was complemented by comments from Ms. Bernice Downey, member of ANAC and NAHO, who graciously replaced Professor Fjola Hart-Wasekeesikaw, co-chair of the Task Force.

Ms. Lu Ann Hill McDonald of AIC capably facilitated the Workshop. She was also instrumental in guiding CASN to invite Irene Lindsay, a Cree Elder, to open the workshop with a traditional prayer. Lu Ann completed the circle

by closing the workshop with a prayer for success in our future endeavours to recruit and retain Aboriginal students in Nursing.

Finally, the workshop would not have been possible without the presence and participation of Dr. Frances Hughes, Chief Nursing Advisor, and Denise Wilson, Senior Lecturer in Nursing (Maori Health), from New Zealand. Their description of the historical, social, legal, and cultural history of their country and explanation of the impact on Nursing were insightful and helpful.

Wendy McBride Executive Director CASN

LOGOS

CASN logo

The chevron depicts the bachelor's, Master's and doctoral degrees in Nursing, always advancing forward.



NEW ZEALAND Ministry of Health

In Maori culture, the uncurling of a young fern frond symbolizes new beginnings, vitality, renewal, growth, hope and striving for perfection.



BACKGROUND

On September 26 to 28, 2003, a national invitational workshop on strategies to recruit and retain Aboriginal nursing students in the nursing profession was held in Ottawa. Two important initiatives, supported by First Nations and Inuit Health Branch (FNIHB), Health Canada, preceded the workshop.

I. Establishment of a National Task Force

In 2002, FNIHB funded a National Task Force on recruitment and retention strategies for Aboriginal nurses. The Task Force was co-chaired by Dr. David Gregory, Dean of the Faculty of Nursing, University of Manitoba, and Professor Fjola Hart-Wasekeesikaw, President of the Aboriginal Nurses Association of Canada (ANAC). A list of the Task Force members is located in Appendix A. The Report of that Task Force, *Against the Odds: Aboriginal Nursing*, published in June 2002, identified recommendations for support to Aboriginal students through the phases of preparation; recruitment; admission, nursing access and bridging programs; progression; and post-graduation recruitment and retention.

The major recommendations of the Task Force are stated in the Report (page 6):

<u>Preparation</u>: There is an urgent need to ensure that Aboriginal youth complete their high school education. In addition, students must include math, science, and English in their program of studies. Otherwise, they will not meet admission criteria for nursing programs offered by colleges and universities. Aboriginal youth need encouragement and guidance to consider nursing as an achievable career option.

<u>Recruitment</u>: Successful recruitment of Aboriginal people into nursing programs depends upon concerted and targeted recruitment efforts, visible role models, community development, and ongoing partnerships among FNIHB, Schools of Nursing, and Aboriginal communities. In particular, the Task Force is concerned about the virtual absence of Inuit registered nurses in Canada. <u>Admission, Nursing Access and Bridging Programs</u>: Affirmative actions around the admission of Aboriginal students into nursing programs is critically important. Programs demonstrating success or which have the potential to foster success include Nursing Access Programs and bridging programs for Licensed Practical Nurses (LPNs) and Registered Practical Nurses (RPNs).

<u>Progression</u>: The progression of Aboriginal students through nursing programs is enhanced when Schools of Nursing offer flexible programming and curricula that are relevant to the world views and life experiences of these students. Community-based programs have eliminated some of the barriers that students face when pursuing post-secondary education. The presence of personal and academic supports also enhance progression. Adequate funding is central to the successful completion of nursing programs.

<u>Post-Graduation Recruitment and Retention</u>: Targeted mentoring programs, further development of nurse managers, and capacity enhancement of Community Health Representatives (CHRs) hold potential for supporting new graduates and/or new employees. Designated field teaching units may have a positive impact on retention rates as well as foster partnerships among FNIHB, Schools of Nursing, and Aboriginal communities.

The Task Force offers specific recommendations under each of the five themes noted above. The Report was disseminated to all CASN member schools, as well as by FNIHB to key stakeholders in Aboriginal nursing recruitment and retention.

II. Workshop Addressing the Preparation of FNIHB Nurses

In February 2003, FNIHB hosted a workshop bringing together representatives from Schools of Nursing and the Office of Nursing Services (ONS). The purpose of the Workshop was to develop strategies to support and facilitate the learning and professional development of registered nurses employed by FNIHB. In particular, participants focussed on Nurse Practitioner education and the preparation of Aboriginal and non-Aboriginal nurses to practice in Aboriginal communities in Canada.

Several CASN member schools attended the workshop where successful educational initiatives were identified and potential new approaches were developed. FNIHB also noted competency gaps and solicited the support of Schools of Nursing to enhance the educational preparation of these nurses. Workshop participants outlined the need for practical experience and targeted practicums, for mentors and preceptors with Nurse Practitioner experience, and for interdisciplinary education/practice/supports. As well, ONS requested that Nursing schools consider increasing the recruitment of Health Canada employed nurses in September 2003. Several schools committed to work with ONS in this regard.

NATIONAL WORKSHOP

An Exploration of the Maori Nursing Model

The Executive Director, ONS, met with Dr. Frances Hughes, Chief Nursing Advisor for the Ministry of Health in New Zealand, and learned of the approaches taken to encourage Maori students to enter Nursing. New Zealand has several years of success in the education of Maori nursing students. Their model of education has resulted in increased numbers of Aboriginal nurses and their enhanced retention in Maori communities. Kathleen MacMillan and Maria MacNaughton (FNIHB) met with the Executive Director of the Canadian Association of Schools of Nursing (CASN) to discuss the development of a workshop on recruitment and retention of Aboriginal students in Nursing. CASN agreed to take on the responsibility for organizing a workshop in Ottawa, September 26-28, 2003.

Purpose

The workshop was designed to explore the nursing education approach in New Zealand, to evaluate its applicability in Canada, and to review the Task Force report *Against the Odds: Aboriginal Nursing*, including selected recommendations. As well, the workshop created the opportunity for Canadian schools to share information regarding their own Aboriginal education initiatives. The long-term plans of aboriginal institutes involved in post-secondary education were also explored.

ANTICIPATED OUTCOMES

It was anticipated that the workshop would result in the identification of key success factors for both New Zealand and Canadian recruitment and retention approaches and would engender a commitment to action by Canadian nursing schools. Finally, and equally important, the workshop would enhance understanding of the needs and aspirations of Aboriginal communities and the development of key partnerships among and between Schools of Nursing and Aboriginal institutes.

PARTICIPATION

The workshop was invitational. In partnership with ONS, CASN contacted all 88 member Schools of Nursing across Canada, as well as the following Aboriginal associations, nursing associations, and national bodies involved in or concerned with the education of Aboriginal students:

- Aboriginal Nurses Association of Canada (ANAC)
- Aboriginal Institutes Consortium (AIC)
- National Aboriginal Health Organizations (NAHO)
- Saskatchewan Indian Federated College (SIFC)
- Association of Community Colleges of Canada (ACCC)
- Canadian Nurses Association (CNA)
- Canadian Executive Services (CESO)

As well, representatives were also invited from:

- Office of Nursing Services, FNIHB
- Northern Secretariat, FNIHB
- Office of the Assistant Deputy Minister, FNIHB
- Health Strategies Directorate, Health Canada
- Office of Nursing Policy, Health Canada.

In New Zealand, Dr. Frances Hughes, Chief Nursing Advisor, Ministry of Health, arranged for Denise Wilson, Senior Lecturer in Nursing (Maori Health), to accompany her from New Zealand to provide a Maori perspective on Nursing in that country.

Funding from FNIHB supported the accommodation of participants and a portion of their travel, as well as the planning, support, logistics, report writing and dissemination, and follow up to the workshop by CASN staff.

The complete list of the 58 participants can be found in Appendix B.

WORKSHOP FORMAT

Pre-Workshop

CASN prepared background information and a workshop kit for each participant with key material to support and focus the discussion at the workshop (see Appendix I). CASN also circulated a questionnaire to prospective workshop participants and compiled the responses around whether or not the school/organization recruited Aboriginal students, in what numbers, including level of programs, and whether there was unique curricula or programmatic supports for Aboriginal students. The results of this survey were provided to participants in their kits as background information.

The CASN Executive Director recruited Ms. Lu Ann Hill McDonald to present the purpose and plans of the Aboriginal Institutes Consortium (AIC) and to facilitate the workshop. On Lu Ann's recommendation, CASN arranged for a traditional opening prayer by an Aboriginal Elder.

The Workshop

The workshop began in the evening of Friday, September 26, 2003 with registration. Dr. Gregory welcomed participants and introduced the resource persons and the facilitator. MS. Lu Ann Hill McDonald reviewed the objectives and anticipated outcomes, the background materials, and the workshop agenda. Participants exchanged information over dinner about their school or organization as well as their interest and involvement in Aboriginal nursing education.

The workshop opened formally on Saturday, September 27, 2003 with a traditional opening prayer conducted by Irene Lindsay, a Cree Elder from Saskatchewan.

The facilitator reviewed the agenda for the morning and introduced the resource persons from New Zealand, Dr. Frances Hughes and Denise Wilson,

who made a joint presentation on the historical, social, constitutional and cultural context for Nursing education in their country. They emphasized the importance of the Treaty of Waitangi/Te Tiriti O Waitangi, which was signed in 1840 between the Queen of England and the Chiefs and Hapus of New Zealand. It is as a result of the interpretation of this treaty that the current principles and values concerning "cultural safety" have been enunciated and documented in various national strategies. The concept of cultural safety is strongly influencing the Maori and non-Maori relationships and - of particular interest to the workshop participants - Nursing education in New Zealand. A copy of the Treaty of Waitangi/Te Tiriti O Waitangi can be found in Appendix D.

Dr. Hughes and Denise Wilson informed participants about the various reports, policies and strategies developed during recent years and provided the following resources:

- The New Zealand Health Strategy, Ministry of Health, December 2000
- > <u>Reducing Inequalities in Health</u>, Ministry of Health, September 2002
- He Korowai Oranga: Maori Health Strategy, Ministry of Health, November 2002
- > <u>Whakatataka: Maori Health Action Plan 2002-2005</u>, November 2002

This presentation created considerable discussion and exploration of the concepts of cultural sensitivity/respect/safety and how to ensure them through Nursing organization, practice, and education. A copy of the presentation slides can be found in Appendix F. Copies of the documents reports listed about can be accessed through <u>www.Maorihealth.govt.nz</u>.

Following the presentation on New Zealand's model, Lu Ann Hill McDonald presented the background and current activities of the Aboriginal postsecondary institutes which are members of the Aboriginal Institutes Consortium (AIC). She explained that the AIC members include 11 Aboriginal post-secondary institutions in Ontario. As well, there is a national association of Aboriginal post-secondary institutions. Ms Hill McDonald reviewed the priorities and challenges of these institutions and explained that Aboriginal people aspire to educate their people on reserve within their own institutions wherever feasible and needed. The major challenge is to have their institutions and their programs recognized by provincial governments and mainstream post-secondary institutions. AIC members are seeking partnerships with non-Aboriginal institutions in areas of mutual interest.

Ms Hill McDonald then presented information on the nursing diploma program currently offered on Akwesasne reserve in Eastern Ontario in collaboration with St. Lawrence Community College in Cornwall. More partnerships at the degree program level are welcomed by AIC members. A copy of the presentation slides can be found in Appendix G.

Dr. Gregory then made a comparison of the New Zealand and Canadian contexts for nursing education. He explained the differences in geography, numbers, bands and distribution of Aboriginal peoples in Canada and the challenges facing educators to provide access and support for Aboriginal students on and off reserve, in remote communities and in urban settings. Participants shared information on their various initiatives to reach and support Aboriginal students as well as the human and financial resource constraints with which Schools of Nursing must operate.

Participants reviewed the recommendations in *Against the Odds: Aboriginal Nursing* related to these challenges and the supports which could be offered to students and educators. A copy of Dr Gregory's presentation is located in Appendix H.

The participants then engaged in small group work to discuss and identify possible projects and partnerships to advance the recruitment and retention of Aboriginal nursing students in Canada. When the small group reported back to plenary, there resulted a broader discussion and identification of key success factors. On Sunday, September 28, ONS staff presented information on the current funding levels and priorities of the federal/provincial/territorial Advisory Committee on Health Delivery and Health Human Resources. Participants were encouraged to keep up to date with opportunities and calls for proposals, which will be issued during the remaining months of 2003 by governments.

The small group discussions continued and participants considered the need for projects and partnerships, including the key elements of a strategy and the next steps to move forward with the recommendations in *Against the Odds: Aboriginal Nursing*. When the small groups reported back in plenary, there was a lengthy discussion of the ability to adapt new approaches or concepts learned from the New Zealand presentation. Participants spoke to the need for "next steps" and an action plan.

Addressing Challenges and Barriers to Recruitment and Retention

Two significant barriers concerned policies and funding. In the final plenary discussion, the following graphic was presented as a means of addressing the barriers through strategic partnerships. The graphic was based in part, on recommendations from the Canadian Nursing Advisory Committee (CNAC) Report and *Against the Odds: Aboriginal Nursing*.



Strategic Partnerships for Success in Aboriginal Nursing

Strategic Partnerships are seen as the key to ensuring recruitment and retention of aboriginal people into nursing. These partnerships are dependent on several components and relationships between and among the components. Within a framework of overarching policies and guiding principles, the partnerships will flourish through an established consultation process and communications/marketing plans. The result will be consensus on mutually agreed to strategic plans and actions.

Policy

Participants underlined the overriding importance of clearly stated policies similar to the New Zealand policy on cultural safety - at the level of federal, provincial and territorial governments. Such policies would be supported by data and information on Aboriginal health and social conditions, and perhaps more importantly, the Aboriginal perspective on their current conditions, their culture, and their future.

Guiding Principles

Guiding principles arise from these policies, substantiate decisions, identify funding, and support programs for aboriginal people.

Partnerships

Essential to the development of the policies and guiding principles, their interpretation and implementation, is the need for partnerships among Aboriginal and non-Aboriginal associations, communities and governments.

Consultation Process

Consultation with and by Aboriginal communities, institutions, students, Elders, etc. is critical to identify the needs and find solutions to support recruitment and retention of Aboriginal nurses.

Communication/Marketing

Partnerships are the best mechanism for ensuring successful communications about Nursing to potential Aboriginal students and for marketing Nursing education programs within Aboriginal communities.

Strategic Plan(s)/Action(s)

Strategic plan(s) and action(s) would be formulated by partnerships at the national, provincial, regional and local levels.

Next Steps: An Action Plan

Participants agreed at the end of the workshop that the momentum gained during the previous two days should not be lost. They made a call to action and described a feasible structure for moving forward to implement the ideas generated in this workshop, the previous meeting, and in the Task Force report.



Specific Actions

A number of ideas surfaced during the small group discussions and the plenary discussions over the two days of the workshop. It was agreed that CASN schools, Aboriginal communities, provincial, regional and national associations could all begin work within their respective areas of influence, without waiting for creation of a National Steering Committee and/or resultant strategies. Following are some of the specific actions which are anticipated as outcomes of the workshop:

National Level

- 1. CASN will produce a final report on the workshop, submit it to Health Canada, and disseminate it widely, including the CASN website.
- 2. CASN will create a list-serve of the workshop participants to promote communication and sharing, to encourage commitment to carrying out the ideas and plans generated during the workshop, and to provide follow-up reminders in three months on actions taken.
- 3. CASN will develop international links to New Zealand Schools of Nursing and Maori nursing associations in order to promote sharing and partnerships.
- 4. CASN will organize a Working Group with representatives of FNIHB, CASN, AIC, CNA, ANAC, the Office of Nursing Policy, other relevant directorates within Health Canada, and possibly CHSRF, to develop a proposal to government to fund a National Steering Committee. The Committee will develop a strategy and workplan to implement the ideas generated in the workshop and relevant recommendations in *Against the Odds: Aboriginal Nursing*.
- 5. Health Canada and FNIHB will provide information on Requests for Proposals to workshop participants, through the CASN list serve.
- 6. CASN and ONS/FNIHB will work with ANAC to secure ongoing funding support for that association.
- 7. ANAC will advise the Assembly of First Nations Education Committee of the workshop and solicit their support for further action.

Provincial/Regional Level

- 1. CASN Schools of Nursing and Aboriginal associations will explore potential partnerships, engage in dialogue around recruitment and retention issues, identify provincial and territorial resources, and explore common goals
- 2. Universities, colleges, and Aboriginal communities will meet with provincial governments to identify barriers to recruitment of Aboriginal students and their ongoing requirements for support.
- 3. CASN Schools of Nursing will work with their provincial and regional associations to bring relevant stakeholders "to the table" and propose to universities and colleges changes in policies and programs.,

Local Level

- 1. All participants will share what they learned during the workshop when they return to their home institutions or organizations.
- 2. Participants will forward to CASN National Office, information on their cultural competencies statements or policies for compilation and sharing with CASN Members.
- 3. CASN Schools of Nursing will consider liaising with local Aboriginal associations in order to review recruitment and admission approaches and criteria; and how to include the Aboriginal voice in their institutional decisions/policies (e.g. include Aboriginals on Senates/ Boards of Governors).
- 4. CASN Schools of Nursing will review admission criteria, selection criteria, and measures of academic performance, and to identify, with Aboriginal communities, any changes necessary to accommodate and support Aboriginal students.
- 5. CASN Schools of Nursing will invite local Aboriginal communities to explore cultural sensitivity within the context of nursing curricula
- 6. CASN Schools of Nursing will review with local Aboriginal communities on how to best "reach" Aboriginal high school students.