Cultural Competence and Cultural Safety: A Knowledge Translation Symposium

Courtyard by Marriott Downtown Toronto Hotel
Monday, March 19th, 2012 and Tuesday, March 20th, 2012
Welcome

Bienvenue
Special thanks to the Aboriginal Health Human Resource Initiative, First Nations and Inuit Health Branch for funding this project,

and

[Logo images of Aboriginal Nurses Association of Canada, Assembly of First Nations, and Inuit Health Branch]
Learning from Previous Initiatives of Cultural Competence and Cultural Safety

Sylvia Barton, RN, PhD, University of Alberta
Cathy Graham, RN, MSc, Trent/ Fleming School of Nursing
Jane Moseley, RN, BScN, MAdEd, St. Francis Xavier University
Wanda Pierson, RN, BSN, MSN, PhD, Langara College
Terry Penny, RN, BScN, MSN, Nova Scotia Community College
St. Francis Xavier
School of Nursing
Antigonish, Nova Scotia

Jane Moseley, RN, BScN, MAdEd
St. Francis Xavier University
Workshop ‘Integrate Cultural Competency and Cultural Safety into Curriculum’
March 12, 2012

- Workshop jointly developed by:
  Nova Scotia Community College, School of Health and Human Services
  School of Nursing, St. Francis Xavier University
Workshop

- **Key Note Speaker**  Lisa Perley-Dutcher, UNB

- **Panel Discussion**  Jeff Orr & Joanne Tompkins, Education, StFXU

- **Two-Eyed Seeing**  Albert Marshall, Cheryl Bartlett, Murdena Marshall Integrated Science Program, Cape Breton University
OUTCOME from Participant Working Groups:

• Identified areas to work on for student retention and completion of programs
Invest in nursing faculty supply and nursing program infrastructure
Foster innovative initiatives to sustain an appropriately prepared nursing workforce
Invest in nursing research and knowledge translation

Student Retention

• Support diverse ways of knowing other than books and exams: diverse knowledge, ways of knowing, learning and teaching – this should be reflected in policies re: learning styles and exams

• Hire Aboriginal faculty & staff
Student Retention

• Build strong relationships with communities / elders

• Value traditional healing and knowledge as legitimate, what health means for Aboriginal peoples, and methods of treatment

• Acknowledge biases – address biases with policy changes
Student Retention

- Professors/teachers need to understand, critically assess and self-reflect - post colonial, colonization, cultural safety, indigenous knowledge, spirituality

- Faculty, staff & student education for self-reflection, critical assessment, evaluation and modification of unequal power structures that exist in academia and healthcare
Student Retention

• Understand and appreciate that culture is situated in the broader socio-economic, political and historical contexts
Successful Completion

• Ensure support for Aboriginal students – safe environments & smaller groups, financial, childcare, tutors, study buddy, flexibility

• Strong Aboriginal student advisor office – know resources and available community members
Successful Completion

• Incorporate A.N.A.C. Core Competencies into all levels of nursing curriculum – weave Mi’Kmaq culture throughout the curriculum – Aboriginal Advisors or elders should validate what is presented

• Identify and address barriers faced by Aboriginal students
Successful Completion

- Aboriginal nursing students will be understood & appreciated for their ways of knowing and doing

- Maintain relationships with Aboriginal communities
Lessons learned thus far …

**Journey:** a continuous learning & building journey

**Relationships:** Community Advisory Committee, students (Mentorship), advisor

**Guiding Principles:** Respect for Indigenous cultural integrity; Relevance to First Nations, Inuit and Métis Perspectives and Experience; Reciprocal Relationships; Responsibility through Participation (A.N.A.C., 2009. P. 18)
Lessons learned

Two-Eyed Seeing – Reflective (Lessons Learned) from Albert Marshall, Murdena Marshall, Cheryl Bartlett - Integrative Science Program, Cape Breton University.

Ways of knowing (learning) - holistic learning model (medicine wheel); Holistic Lifelong Learning Model, the learning spirit (Canadian Council for Learning)
Lessons learned

Anti-racist education (St. Denis, 2007).

Deconstruct history - unsettle the settler – history of colonization and the impact on indigenous peoples (Regan, 2011)
Lessons learned

• **Relational** – ‘deeply reflective practice is at the core of relational cultural competence’ (Hanson, 2009).

• **Personal relationship with IK and people** – self-discovery
Lessons learned

• Cross-cultural bridge building; **Becoming an ally** (Bishop, 2002)

• **Political** – transfer into social action and policy (Prosper, McMillan, Davis, & Moffitt, 2011)
Lessons learned

- Partnership with academia and community: Committee for Aboriginal and Black Student Success (CABSS, 2006) – influence academia through community partnerships, applied for project through, Canada Research Chair for Indigenous Studies and Sustainable Communities, Aboriginal Health Human Resource Initiatives.
Lessons learned

• Identify School of Nursing responsibilities and roles
  • Responsibility of ANNSO and School of Nursing
  • Responsibility of Aboriginal Student Advisor (Student Services)
  • Responsibility of University (Distance Education, etc.)
Next Steps

• Complete UCR grant – pilot research project by Dec 2012

• Resource binders

• Dedicated faculty/staff curriculum days with expert and Indigenous elders and/or advisors

• Continue to look for funding for Indigenous enrichment strategy
Invest in nursing faculty supply and nursing program infrastructure
Foster innovative initiatives to sustain an appropriately prepared nursing workforce
Invest in nursing research and knowledge translation

Conversations with Dr. Maria Battiste, Spring 2011

- Medicine Wheel directions (Mi’Kmaq colors)
- proceed West, North, East, South

NORTH

history of colonization
-Treaties, Constitution

WEST

anti-racism
discourses

EAST

Indigenous Knowledge

SOUTH

learners attitudes
non-Aboriginal & Aboriginal

J Moseley March 2012
Summary of Lessons Learned and References.

1. **Relationships with First Nations, Inuit and Metis peoples, community, elders, key stakeholders.** Guiding Principles to enhance nursing curriculum: Respect for Indigenous cultural integrity; Relevance to First Nations, Inuit and Metis Perspectives and Experience; Reciprocal Relationships; Responsibility through Participation (ANAC, 2009. P. 18)
References Con’t

2. Two-Eyed Seeing – Reflective (Lessons Learned) from the Integrative Science Program, Cape Breton University

3. Ways of knowing (learning) - wholistic learning model (medicine wheel); Holistic Lifelong Learning Model, the learning spirit (Canadian Council on Learning).
   - Anuk, J., Battiste, M., & George, P. Ningwakee (2010). Learning from promising programs and application in nourishing the learning spirit. *Canadian Journal of Native Education, 33*(1), 63-82.
Invest in nursing faculty supply and nursing program infrastructure
Foster innovative initiatives to sustain an appropriately prepared nursing workforce
Invest in nursing research and knowledge translation

References Con’t

4. Anti-racist education

5. Deconstruct history - unsettle the settler – history of colonization and the impact on indigenous peoples
   • National Aboriginal Health Organization (31 January 2006). Fact Sheet: Cultural Safety.

6. Relational – “deeply reflective practice is at the core of relational cultural competence”

7. personal relationship with IK and peoples– self-discovery
   • National Aboriginal Health Organization (31 January 2006). Fact Sheet: Cultural Safety.
References Con’t

8. Cross-cultural bridge building; building ally – transforms attitudes, imbedded in nursing practice

9. political – transfer into social action and policy