

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



Learning from Previous Initiatives of Cultural Competence and Cultural Safety

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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

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

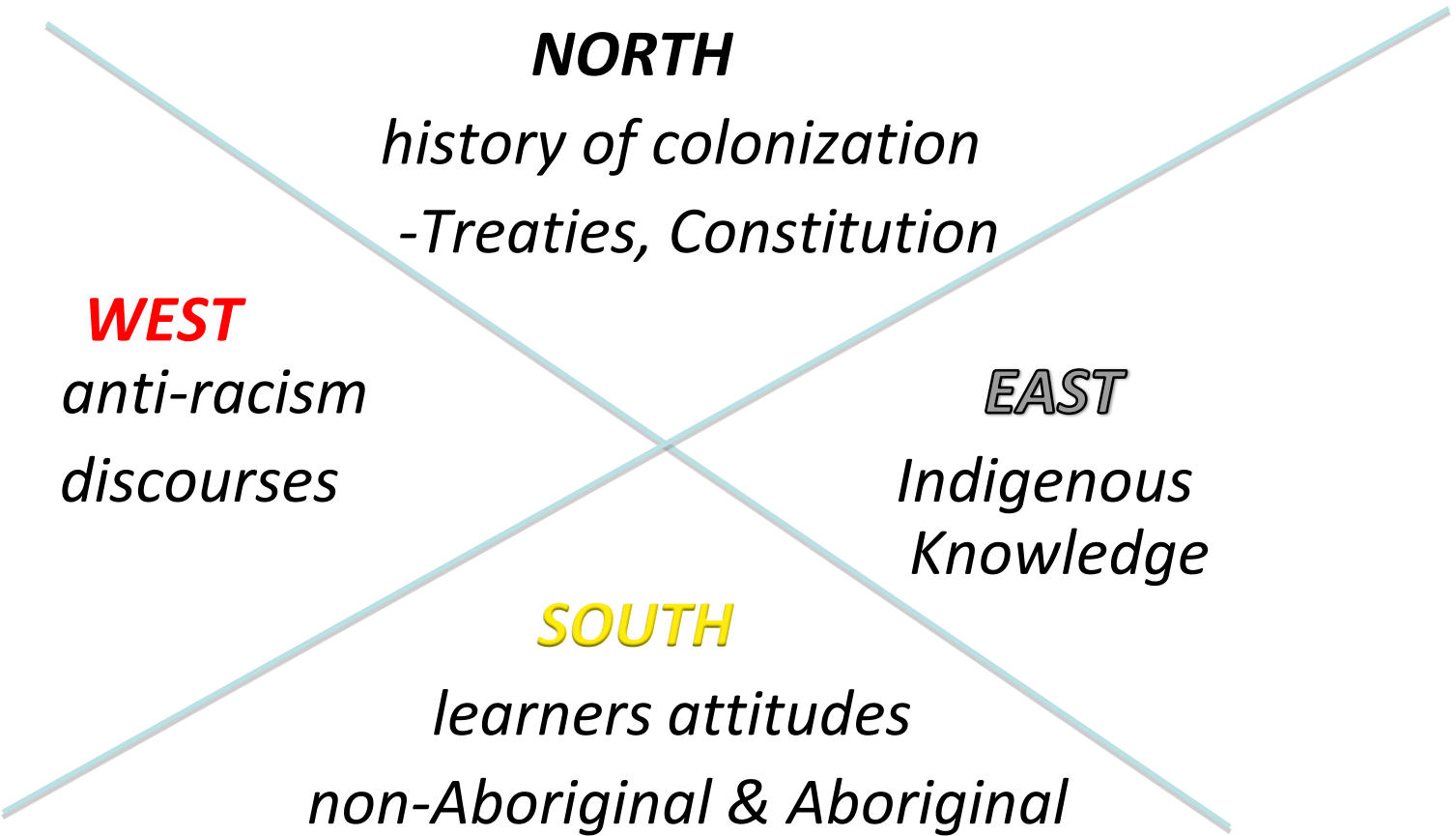
- Identify School of Nursing responsibilities and roles
 - Responsibility of ANNSO and School of Nursing
 - Responsibility of Aboriginal Student Advisor (Student Services)
 - Responsibility of University (Distance Education, etc.)

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

Conversations with Dr. Maria Battiste, Spring 2011

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



References

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

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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.
- Regan, P. (2010). *Unsettling the settler within: Indian residential schools, truth telling, and reconciliation in Canada*. Vancouver: University of British Columbia Press.

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

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