



Framework of
Strategies for
Nursing Education
to Respond to the
Calls to Action of
Canada's
Truth and
Reconciliation
Commission



Canadian Association
of Schools of Nursing
Association canadienne des
écoles de sciences infirmières

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Preamble

The Canadian Association of Schools of Nursing (CASN) is the national voice for nursing education in Canada. Its mandate is to promote high quality nursing education and foster nursing scholarship in the interest of the health of Canadians. As part of this mandate, CASN has worked in close partnership with the Canadian Indigenous Nurses Association (CINA) for over a decade to promote the integration of cultural competence and cultural safety in schools of nursing in Canada. CINA's mission is to improve the health of Indigenous Peoples by supporting Indigenous nurses and by promoting the development and practice of Indigenous Health Nursing.

The Truth and Reconciliation Commission of Canada: Calls to Action (2015) has direct implications for nursing education. Action 23 (i) calls for an increase in the number of Indigenous professionals working in the health care field. As nursing is the largest health profession in Canada, schools of nursing have an important role to play in addressing this. Action 24 calls on schools of nursing and medicine to

require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism (Truth and Reconciliation Commission of Canada [TRC], 2015, p.3).

In light of the TRC Report (2015), CASN member schools unanimously adopted a motion to respond to the Calls to Action in nursing education in November 2016. This was adopted as a priority in CASN's 2019–2023 Strategic Plan, which states that CASN will “Advance leading practices, equity, and the national response to the TRC Calls to Action in nursing education and scholarship”.

A joint CASN/CINA task force was, therefore, struck with a mandate to “determine directions and guide CASN in acting to advance the 2015 TRC Calls to Action”. It is chaired by Marilee Nowgesick, CINA's Chief Executive Officer; members of this task force represent CINA, other national nursing organization, and schools of nursing across Canada. The terms of reference of the task force include “supporting the responsiveness of nurse educators and the next generation of nurses in relation to the TRC Calls to Action”. As a result, this discussion paper for Canadian schools of nursing was developed to build on initiatives underway across Canada.

The purpose of this discussion paper is to provide national support for reconciliation by fostering reflection related to decolonization and Indigenization, and by offering direction to schools of nursing in responding to the TRC Calls to Action. The background context of decolonization, Indigenization, and reconciliation is presented first, followed by a review of responses to the TRC among post-secondary institutions in Canada. The paper concludes with a framework of strategies to address the TRC Calls to Action in nursing education.

Background

In 2015, the TRC published its final report and called on all Canadian institutions and citizens to recognize, acknowledge, and reconcile the profound harms that the residential schools system and its legacy have inflicted on Indigenous Peoples.

The Indigenous Peoples of Canada includes First Nations, Inuit, and Metis. According to Statistics Canada's 2016

Census, there were 1.6 million Indigenous Peoples in Canada, representing 4.9% of the total population. It had increased by over 20% since the previous census in 2011, and because almost one-third were under the age of 15, the Indigenous population in Canada is expected to continue to grow.

In May 2016, after initially voting against and remaining an objector for nearly a decade, the Canadian government announced its unqualified support of the *United Nations Declaration on the Rights of Indigenous Peoples* (2007). It therefore affirms the rights of Indigenous Peoples in Canada to enjoy the “highest attainable standard of physical and mental health”. Canada, however, has yet to ratify and make it into law. It is well documented that Indigenous Peoples continue to face significant health care inequities, experience high rates of morbidity and premature mortality, and are liable to carry a heavy burden of significant health issues throughout their lifespan (Royal College of Physicians and Surgeons of Canada, 2019). Although the health inequities experienced by Indigenous Peoples reflect a complex and multi-faceted reality: causal factors include the societal effects of colonization, the removal of Indigenous children from their families (often referred to as the Sixties Scoop), the multi-generational impact of residential schools, and individual and systemic racism. Current and future health professionals must advocate for social change if the health status of Indigenous People is to be improved. Decolonization and indigenization have been identified as essential if systemic change is to be realized in both health care delivery to Indigenous Peoples and in post-secondary education for Indigenous students.

Decolonization, Indigenization, and Reconciliation

The concepts of decolonization, indigenization, and reconciliation inform initiatives to address the TRC Calls to Action. These concepts are examined and situated within the legacy of colonization in Canada, a historical process that involved the exploitation and subjugation of Indigenous peoples (Gaudry & Lorenz, 2018).

Decolonization

Although there is debate on the concept, decolonization is generally understood to be the removal or the undoing of colonial elements. In a settler colony, however, such as Canada, the colonizers never leave. Moreover, as Tuck and Yang (2012) point out, colonial settlers, unlike immigrants, do not follow the Indigenous Peoples’ laws; they “become the law” (p.6). This increases the complexity of decolonizing processes.

In Canada, settler colonialism was manifested in government policies and legislation regarding the Indigenous population, such as the Indian Act. It was introduced in 1876 and has not been dismantled, although amendments in 1951 and 1985 removed the more oppressive measures that it imposed. There have been agreements, however, such as the First Nations Management Act of 1999 that have allowed First Nations governments to move toward some level of self-government.

The Indian Act

Although the Indian Act applies only to status First Nations Peoples, and not to the Métis, the Inuit or to non-status First Nations peoples, it is important to take into account because it has played a key role in shaping cultural and system-based power imbalances between non-Indigenous and Indigenous Peoples in Canada. Moreover, for First Nations Peoples, the Indian Act enables “trauma, human rights violations, and social and cultural disruptions for generations” (Henderson, 2018, p. 1).

This Act is the principal statute through which the federal government administers local First Nations governments, the management of reserve land, and communal moneys. It outlines the government’s obligations to First Nations Peoples and determines “status”, the legal recognition of a person’s First Nation heritage. This status affords certain rights, such as the right to live on reserve land. The determination of status, however, has changed over the years. Initially, for example, Indian status was revoked if one graduated from university, became

a Christian minister, lawyer, or doctor. Women had their status revoked by marrying a non-status man until 1985, when Bill C-31 was passed.

In 1969, the Pierre Elliott Trudeau government released a White Paper, which declared the government's intention to eliminate Indian status. As this would also eliminate reserve lands, fishing and hunting rights, education rights, federal medical services, use of land and economic development on reserve lands, there was fierce opposition from Indigenous groups and the White Paper was withdrawn. Since the 1990s, numerous attempts have been made to reform the Indian Act, but these have been mired in controversy and resistance from First Nations Peoples.

Historically, although the Indian Act protects and preserves First Nation status, it was conceived of, and used to attain the antithesis - cultural suppression and assimilation. The underlying intention of the Indian Act in 1876 was to provide Indian status as a transitional measure with the goal being the integration of First Nations peoples into the growing settler population (Henderson, 2006). Moreover, it was the Indian Act that required First Nations students to attend residential schools with egregious consequences for Indigenous identity, culture, and health.

As the Canadian Human Rights Commission and the United Nations have frequently charged, the Indian Act is responsible for significant human rights abuse. There is widespread agreement that it needs to be changed, however, there is no agreement on what those changes should be. Paradoxically, while the Act has been used to suppress Indigenous cultures, it also acknowledges and affirms a unique historical and constitutional relationship between First Nations Peoples and Canada that is valued.

Decolonizing initiatives

Given the complexity of decolonization in settler colonies, initiatives to remove or undo elements of colonialism in post-secondary education and in health care have targeted the consequences of legislation and government policies, rather than the legislation or policies themselves. Key targets of decolonization have been the colonial efforts to degrade and suppress Indigenous identity, knowledge, beliefs, and culture.

Decolonizing initiatives underway include formally acknowledging traditional Indigenous lands and honoring traditional customs at institutional events; publicly displaying symbols of Indigenous culture; offering courses, programs, and course credits on Indigenous knowledge and culture; addressing power imbalances through equity initiatives and anti-racism interventions; and providing Indigenous students with supportive, culturally safe environments.

Indigenization

Indigenization is a related process that often overlaps with decolonizing initiatives. While decolonization is concerned with undoing or removing colonial elements, indigenization is focused on adding Indigenous elements. In post-secondary educational institutions, indigenization has involved the inclusion of Indigenous knowledge, partnerships, space, students, and faculty in the academy.

Indigenization requires partnerships between education and Indigenous communities, and the engagement of Indigenous people in developing and delivering curricula, providing support to Indigenous students, and holding Indigenous ceremonies. It has also involved a revitalization of Indigenous cultures within the institution by the creation of Indigenous gathering spaces for Indigenous students to meet, and for cultural activities and ceremonies.

A key element of indigenization has involved the recognition of Indigenous epistemological perspectives. These perspectives are being incorporated in education programs, as are the stories, symbols, and metaphors through

which they are traditionally conveyed. Such initiatives involve partnerships between educational institutions and Elders, the keepers and the teachers of Indigenous knowledge, who are highly respected members of Indigenous communities. Elders acquire their wisdom through a lifetime of observations and experience.

Several decades ago, Dr. Albert Marshall, an Elder of the Eskasoni First Nation, (a Mi'Imaq community in Nova Scotia) introduced and promoted the concept of “two-eyed seeing”, the ability to see the world through the wisdom of Indigenous knowledge with one eye, and the strength of Western knowledge with the other (Bartlett, Marshall, & Marshall, 2012). Although the diversity of Indigenous knowledge and cultures is recognized, an Indigenous worldview has been put forward to capture some of the traditional wisdom needed for “two-eyed seeing”. At the heart of this worldview is an understanding that everything in life and nature, including the elements, plants, animals, and humans, are interconnected in a web of interactive and reciprocal relationships. Moreover, everything of Mother Earth is understood as possessing a spirit and consciousness. Thus, there is an epistemological emphasis on: taking context into account when interpreting a given phenomenon or situation; constructing the fullest picture of a situation by collecting and integrating multiple viewpoints including the views of ancestors that are embedded in people’s memory, stories, songs and dances; respecting the reciprocal nature of all relationships; and seeking balance and harmony in life. Learning emerges from the exploration of the complex interrelationships that are experienced by the learner. It is understood to be a holistic phenomenon involving emotional, physical, spiritual and intellectual aspects of a person that expands beyond the individual to the family, community, and universe.

In addition to the inclusion of Indigenous perspectives in education programs, indigenization is also used to refer to initiatives that promote the inclusion of Indigenous students and faculty in the institution. Indigenization in this sense incorporates a wide range of recruitment and retention strategies including designated seats, outreach programs, special admission pathways, transition support programs, culturally safe counselling, and supporting unique needs.

Reconciliation

Chief Justice Murray Sinclair, Chair of the Truth and Reconciliation Commission, stated “Reconciliation is not an Aboriginal problem – it involves all of us” (McGill University, 2017). Reconciliation is understood to mean work to ameliorate a damaged relationship by both parties. Although there has been some controversy about the use of the term reconciliation because it implies the pre-existence of a harmonious and respectful relationship between Indigenous Peoples and non-Indigenous people, its forward-looking aspirations are valued (McGill University, 2017).

Reconciliation between Indigenous and non-Indigenous people is concerned with repairing the effects of damaging relationships between a society of settlers and many cultural groups of Indigenous peoples over many generations and hundreds of years. Thus, the work to repair this relationship must build trust on many levels, across all sectors of society. In nursing education and health care, initiatives to undo the harms inflicted by colonization, promote the inclusion of Indigenous People, and revitalize Indigenous knowledge and culture provide opportunities to build the trust needed for reconciliation.

Response of Post-Secondary Education to the TRC

Chief Justice Murray Sinclair emphasized that although it was the educational system that created many of the problems that the Calls to Action are addressing, it is the educational system that can help restore the balance between Indigenous and non-Indigenous peoples. Universities and Colleges throughout Canada have responded with institutional initiatives supporting the recruitment and retention of Indigenous students, as have schools of nursing within them at the program level.

Universities Canada launched the *Principles on Indigenous Education* in June 2015 to improve access and success for Indigenous students, staff and faculty (Universities Canada, 2019). As a result, Canadian universities have been developing and implementing Indigenous Strategic Plans at the institutional level. The College sector of post-secondary education has also been responding to the TRC Calls to Action at the institutional level. A recent survey of the Colleges in Ontario, for example, found that multiple initiatives are in progress to address the legacy of residential schools that are reducing the gaps in post-secondary success, although it acknowledges that the work to date is just the beginning and needs to continue (Colleges of Ontario, 2018).

Many schools of nursing in universities and colleges across Canada have been actively engaged in these institutional initiatives. They are well positioned to address Call to Action 23 by increasing the number of Indigenous students who are admitted to nursing programs, successfully complete these programs, and join the health care work force. They are also well positioned to address the health care inequities experienced by Indigenous People through curricula and pedagogical approaches that will better prepare the next generation of nurses to provide optimum care to Indigenous Peoples.

Framework of Strategies in Nursing Education to Address the TRC Calls to Action

Initiatives underway to respond to the TRC in nursing education can be grouped into the following:

- I. Foundational strategies supporting reconciliation
- II. Strategies focused on the recruitment and retention of Indigenous students
- III. Strategies targeting the curriculum and pedagogy of the program

Taken together they offer guidelines for schools of nursing to support reconciliation.

I. Foundational Strategies

Foundational strategies being implemented provide a supportive base for both the recruitment and retention of Indigenous students and program changes that the TRC has called for. They include partnerships, faculty and staff training, institutional respect, and a welcoming environment.

Partnerships

Partnerships between schools of nursing and Indigenous communities provide an essential foundation in addressing the TRC's calls to action. A variety of approaches have been developed. These include, but are not limited to: Elders in residence to support Indigenous students and provide guidance to the program; Collaboration with Elders and Indigenous faculty members to develop curricula and to teach students; Partnerships with Indigenous agencies to help recruit students; Partnerships with Indigenous organizations to provide community placements for students; and partnerships to assist with the delivery of distributive learning modules in a given community.

Faculty and staff training

An important foundational strategy is faculty and staff training to provide a culturally safe environment that is responsive to differences related to social and cultural diversity and to unique socio-cultural needs (Yeung, 2016). The concept of cultural safety was introduced by Maori nurses in New Zealand (Nursing Council of New Zealand,

2005). It focuses on mitigating the effects of power imbalances that put a disadvantaged person in an interaction or relationship at risk. Cultural safety is an inherently anti-racist approach.

Institutional respect

Publicly honouring Indigenous history, culture, and knowledge provides visible evidence of an institutional desire to undo harmful colonial elements, especially the degrading of culture and intentional cultural suppression that occurred. Examples that are commonly used to demonstrate this respect include acknowledging traditional Indigenous lands at institutional events, displaying symbols of Indigenous culture in the school, and opening events with Indigenous ceremonies.

Welcoming environment

The creation of a welcoming environment for Indigenous students supports retention of Indigenous students and fosters a greater understanding of Indigenous culture among non-Indigenous students. This includes displaying symbols of Indigenous culture in the environment and providing Indigenous gathering spaces to carry out cultural and ceremonial activities

II. Recruitment and Retention Strategies

Social, cultural, and economic factors are often barriers to the successful recruitment and retention of Indigenous students. Strategies being implemented to facilitate admission into nursing programs and program completion include designated seats, pre-admission outreach, transition support, cultural support, and distributive program delivery.

Designated seats

One recruitment approach has been the designation of a given number of seats to Indigenous students. These seats may or may not be associated with financial support. Typically, while Indigenous students who are admitted to these seats have the foundational learning needed, the seats are reserved for Inuit, First Nation, or Métis applicants.

Pre-admission outreach

Pre-admission outreach programs in Indigenous communities are being used to promote the recruitment of Indigenous nursing students. They involve ongoing relationships between the school of nursing and high schools in Indigenous communities and include providing prospective students with information and guidance about the program. Outreach strategies may include opportunities for prospective students to visit the school of nursing and/or to participate in a pre-training program. They may also include the creation of special admission pathways for Indigenous students.

Transition support

When Indigenous students first enter a nursing program, transition support can facilitate their retention. This support may include an orientation especially designed to meet their needs. Besides providing information about the program and about Indigenous gathering spaces and activities, it may also include providing support to meet

transition needs such as the need for housing.

Culturally safe support

Indigenous students may need culturally safe counselling and support during the program. A variety of approaches are being used to provide this including having Elders in residence, providing Indigenous mentors, creating peer support programs, and involving Indigenous alumni in support groups for Indigenous students.

Distributive delivery

Geographical access to a nursing education program is a barrier for many potential Indigenous students. It can also be a factor in the retention of Indigenous students. Strategies to overcome this barrier have included delivering some or all of the program in Indigenous communities by distance delivery modalities and/or by faculty teaching in the community.

III. Curricular Strategies

Call to Action 24 of the TRC specifically highlights a need for curricular strategies in nursing education programs in order to address issues related to health care delivery to Indigenous Peoples. Initiatives to respond to this Call to Action have included having Indigenous teachers in the program; welcoming Indigenous pedagogy in the classroom; incorporating Indigenous community placements; teaching students about Indigenous history, knowledge, and culture; and incorporating anti-racism and cultural safety in the curriculum.

Indigenous faculty

A valuable approach in addressing Call to Action 24 is to have Indigenous teachers in schools of nursing. Recently, Indigenous faculty have been increasing in nursing education and initiatives are underway to promote the recruitment and retention of Indigenous nurses into graduate programs. Elders and other members of Indigenous communities are providing input into curricula and are teaching students with a view to increasing the relevance of what future nurses are learning related to cultural safety and Indigenous Peoples.

Community placements

Placements in Indigenous communities provide valuable practice experiences in developing nursing students' understanding of Indigenous societies and culture. It also fosters their abilities to provide culturally safe and culturally competent care.

Indigenous history, knowledge, and culture

As indicated in the TRC calls to action, it is essential that nursing students develop a good understanding of the history of Indigenous Peoples in Canada, Indigenous ways of knowing, and cultural understandings. This may be incorporated into existing courses, specially designed modules or dedicated courses.

Anti-racism and cultural safety

Nursing students need to develop an understanding of the social determinants of health including systemic and interpersonal racism, learn to implement anti-racism interventions, and to provide culturally safe care. This requires students to move beyond an awareness of culture to a recognition of power differentials and interventions that address inequities.

Summary and Conclusion

CASN member schools unanimously supported a motion for nursing education to respond to the TRC's Report. As a result, a task force was struck, chaired by the CEO of CINA, with the goal of supporting decolonization, Indigenization, and reconciliation in nursing education. To this end, a framework of foundational strategies, recruitment and retention strategies, and curricular strategies for nursing education has been developed to advance responses to the TRC.

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