Aboriginal Engagement and the College of Nursing

Meeting the Goals of the Integrated Planning Cycle, 2012-2016
Introduction

The College of Nursing plays a central and strategic role in the province of Saskatchewan’s health care system. This role requires that the College play a leadership role in shaping the province’s health workforce, responding to demographic, social and economic challenges, and supporting efforts for continual improvement.

Perhaps the most significant challenge to the future of the province’s, and the nation’s, health care system, is to improve the health and well-being of our Aboriginal citizens. By any measure, we are currently failing in that regard.

The most important thing the College of Nursing can do in improving Aboriginal health is to educate Aboriginal health professionals so they can respond to the needs of their own communities. This means supporting their success through accessible education and a range of student services. At the same time, we need to ensure that all of our graduates are able to provide culturally competent care and are cognizant of the particular cultural and socio-economic contexts influencing Aboriginal health; and foster research that improves Aboriginal primary health care and health policy at local, provincial, national and international levels.

The University of Saskatchewan has recognized its role and responsibility in contributing to improvements in quality of life for Aboriginal peoples through research, community engagement and post-secondary education. Like the broader University, the College of Nursing has recognized its responsibilities in leading positive change and has prioritized Aboriginal engagement in its Third Integrated Plan (IP3) 2012-2016. This document addresses the IP3 goals that are related to Aboriginal engagement and identifies specific aims, activities, and outcomes to achieve them. Ultimately, the College of Nursing seeks to excel at Aboriginal education, research and community engagement.

It is worth emphasizing that the College of Nursing and the University of Saskatchewan are prioritizing Aboriginal outreach and engagement not only because it is the right thing to do; but because it is the smart thing to do. The financial costs of failing to address the education gaps between Aboriginal and non-Aboriginal people are staggering, and have been estimated at $90 billion in Saskatchewan alone (Howe, 2011). Needless to say, the human costs have been far higher. Although as a College and a University we cannot address the complex Aboriginal health and education challenges facing our province alone, it is imperative that we are part of the solution.

Community Engagement

The University of Saskatchewan is actively seeking to encourage better outreach and community engagement, as outlined in its 2006 “Foundational Document on Outreach and Engagement: Linking with Communities for Discovery and Learning” and appointment of a Special Advisor on Outreach and Engagement. In that document, the University describes community engagement as: “a mutually beneficial partnership involving the core missions and functions of the University – teaching, research, scholarly, and artistic work, and service – bringing together the best of what the university and the community have to offer one another for the enrichment of both.”

Due to the nature of nursing education and the nursing profession, the College of Nursing has a variety of pathways for engaging in a mutually beneficial manner with Aboriginal communities:
• **Distributed learning**, which make the full Bachelor of Science in Nursing (BSN) accessible to communities such as Ile a la Crosse, La Ronge, Yorkton and Prince Albert, and the pre-professional, or first year, available across the province, for students who might not otherwise feel comfortable in an urban and large campus setting in Saskatoon and Regina, or might not be able to bear the financial costs or family responsibilities of relocating for a university education. Learning in rural or remote areas also makes it much more likely that students will practice in those regions, addressing the acute health professional shortage in those areas.

• **Clinical placements**, which help prepare nursing students for future practice, but also help build capacity and leadership in the communities in which the placements take place, and can help facilitate the recruitment of nursing graduates in rural and remote areas.

• **Research** that is locally-based and immediately relevant to Aboriginal communities; contributes to improvements in Aboriginal health and health policy; is reciprocal, ie. knowledge flows between both the community and the university and is not unidirectional; and follows the basic principles of OCAP (Ownership, Control, Access, Possession), such as the Standing Buffalo Youth Project.

• **Native Access Program to Nursing** which improves the diversity and success of our student body by building community through gatherings and peer networks, providing academic and personal advisement and facilitating tutoring, mentorship and referrals to culturally appropriate supports as requested. NAPN advisors are also available to provide information and referrals for child care, housing, funding and other concerns. NAPN has helped the College to be a national leader in Aboriginal nursing education since its establishment in 1984.

• **Pre-Health Professionals Club**, a health professions exploration program that provides career development experiences for secondary level students. It has operated with significant success with partners at File Hills Tribal Council in Fort Qu’Appelle and the Northern Lights School Division, covering the Northern Administrative District.

• **Continuing Education and Development for Nurses**, which identifies, develops, coordinates, delivers, and evaluates education for nurses and other health care providers that work in Saskatchewan and beyond. It can offer programs and education that address Aboriginal health issues; are accessible to rural and remote nurses; or that are tailored specifically for the particular health and nursing professional development needs of Aboriginal communities.

• **Programmatic activities**, such as the “Caring for Kids Where They Live” program, which put the theory and knowledge of College of Nursing faculty into practice at an individual and community level.

An important element in working with Aboriginal communities successfully is to take the time to build trust, actively consult and collaborate, and ensure any activities are mutually beneficial. Too often in the past, university researchers observed, documented and then left Aboriginal communities, without passing on any of their knowledge in a meaningful way or leaving behind any lasting benefits. In many ways this remains the case due to the structural and time limitations inherent in research grant funding cycles and graduate research.

One way to combat the limitations imposed by this model is to begin to construct Aboriginal engagement at a College, and University, level, rather than at an individual, researcher level. The College’s strategy for Aboriginal community engagement thus relies on having multiple, dynamic points of engagement, rather than one-off activities or projects. In practice this means using research projects, pre professional health clubs, clinical placements and other activities as springboards for other types of engagement. It is a model that
builds on the many existing relationships the College of Nursing has in Aboriginal communities and aims to give them greater sustainability and impact.

For the purposes of the College of Nursing IP3 goal of increasing Aboriginal community engagement, we will aim by 2016 to have 2 Aboriginal communities that have 3 or more points of engagement; and 4 communities that have 2 points of engagement. As part of this process, a spatial map will be developed during Summer 2013 to map out all existing Aboriginal initiatives undertaken in the College of Nursing and assess promising candidates by which to expand and deepen our engagement. Efforts will also be made to collaborate with or build on other university activities in these communities.

**What is an Aboriginal Community?**

The most typical way to define an Aboriginal community is as a First Nation or Métis local. There are 70 First Nations in Saskatchewan comprising a population of over 130,000; and 80,000 members of the Métis Nation – Saskatchewan, divided into 12 regions and roughly 130 locals. It is important to partner with Chief and Council, Métis local Presidents, and Mayors and Council in any kind of programmatic or research collaboration involving Aboriginal communities.

For the purposes of collaboration with the College of Nursing, however, Aboriginal community can be defined more broadly, and refer also to key Aboriginal stakeholders or organizations. Examples would include the nine Tribal Councils in Saskatchewan; the Federation of Saskatchewan Indian Nations (FSIN); the First Nation and Inuit Health Branch of Health Canada; band-level and council level health centres and agencies, such as Northern Inter-Tribal Health Agency (NITHA), Onion Lake Health Board Inc., and All Nations Healing Hospital; schools with high Aboriginal representation; and urban Aboriginal stakeholders and service providers, such as Friendship Centres and health outreach programs such as KidsFirst. The point...
is not to narrowly define “community” but to use the resources and the expertise of the College of Nursing to support and partner in activities that will contribute positively to Aboriginal health and well-being, however and wherever that may occur.

Indigenous Engagement Goals of the Integrated Planning Cycle 2012-16

1. BUILDING RELATIONSHIPS: ONE COMMUNITY AT A TIME

   a. Goal: Maintain representation of Aboriginal students in the College which is at or above the representation at the university.

   **Rationale and Outcomes:** By 2016, we aim to increase Aboriginal student representation in the College to 17% (baseline in 2013 = 10%). Although the College reserves 16.6% of our seats as Aboriginal equity seats, the College Aboriginal student body level has been as high as 18% in the past. Although the transition from NEPS to the BSN has temporarily impacted Aboriginal student numbers negatively, it is anticipated that the new programmatic model, combined with our distributed learning efforts across the province, will result in a return to Aboriginal student numbers above the provincial proportion of Aboriginal residents. Achieving this goal will facilitate the rebalancing of the nursing and health profession workforce composition, which is significantly lower than what the provincial proportion of Aboriginal residents would dictate it to be.

   **Activities:**
   - Provide clear and consistent counts on a series of Aboriginal student indicators (total self-declared, location of pre-professional year, retention levels by year, Aboriginal student numbers by campus, etc.) based primarily on UView data, semiannually.
   - Maintain and improve support and retention offered through NAPN and other campus supports as available, and ensure links are made with regional colleges and other 1st year providers to provide adequate first year support and a smooth transition to the nursing program.
   - Continue and expand participation in activities such as Pre Professional Health Club (PHPC), Discovery Days, targeted visits to career fairs, post-secondary band coordinators and counselors, and regional colleges, and improve quality and use of communication tools such as the NAPN website, posters, visual media, and brochures.
   - Invite First Nations post-secondary coordinators and counselors to campus visits annually, in addition to visiting them in communities.

   **Leads:** NAPN, Strategist for Outreach and Indigenous Engagement, Recruitment Specialist, Communications Coordinator

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   b. Goal: Realize a 25% increase in the number of relationships built with Aboriginal communities.

   **Rationale and Outcomes:** It is difficult to quantify Aboriginal community engagement; however there are a number of activities for which the College of Nursing has already collaborated with communities that deserve further and more strategic support. As outlined above, this includes clinical placements, Pre Health Professions Club, research, distributed learning, continuing education and professional development, and student services through NAPN. The College seeks to increase all of these activities. Strategically, however, the goal is to engage more communities through multiple levels of engagement, so that where activity does exist, we seek to build on those relationships to promote opportunities for greater engagement. The ultimate
goal is to transition from individual-level engagement to College-level and University-level engagement, resulting in greater sustainability and impact. The new University of Saskatchewan Aboriginal Initiatives map will be helpful in this regard. As a measurable goal, the College seeks to increase the level of engagement in four existing partnerships from a single point to a double point of contact (eg could be adding clinical placements to communities where we have PHPC) and to increase the level of engagement in two existing partnerships from a single or double point of contact to multiple points (eg. could be add continuing education and research activities in communities where we offer distributed learning and clinical placements.)

**Activities:**

- Map the spectrum of existing partnership and collaboration between the College of Nursing and Aboriginal communities and stakeholders in 2013.
- Increase visits to key Aboriginal communities and stakeholders (bands, inner-city, tribal councils, health authorities, health committees, SRNA and FNIHB networks), focusing on both community engagement and recruitment.
- Offer two additional CEDN workshops a year to either specific Aboriginal stakeholder group, or on topics of particular relevance to improving Aboriginal health.
- Expand Pre-Health Professional Club or other experiential learning activities in the K-12 system in areas with significant Aboriginal representation.
- Empower NAPN students to be ambassadors for the College in their own communities.

** Leads:** Faculty, Leadership Team, CEDN, Strategist for Outreach and Indigenous Engagement, NAPN, Research Facilitators, Recruitment Specialist

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2. **Promotion of Indigenous Engagement**

   a. **Goal:** By 2016, Ensure that our teaching, research, and administration of the College is conducted in a way that is not only considerate of Indigenous culture, but that also embraces the significant contributions and opportunities that arise from including the knowledge and wisdom of these cultures.

   b. **Goal:** Integrate Indigenous concepts throughout our curricula.

   c. **Goal:** Provide formal opportunities that help faculty to present concepts that are foreign or unfamiliar to Aboriginal students in a way that makes the concept relatable.

   d. **Goal:** Ensure that faculty, staff and students realize that we are all treaty people and understand what it means to be a treaty person.

**Rationale and Outcomes:** The overarching aim for this category is for the college to demonstrate cultural competency in its programmatic and research activity, and for our graduating students to demonstrate cultural competency in their future practice. Although there are many definitions, one that is useful for our purposes defines cultural competence as “the attitude, skills and knowledge necessary for providing quality care to diverse populations” (California Endowment, 2003). An additional concept, cultural safety, seeks to go beyond cultural awareness, sensitivity and competence, to a situation of “understanding the power differentials inherent in health service delivery and redressing these inequities through educational processes” (Spence, 2001). The Aboriginal Nursing Association of Canada has developed the Cultural Competence and
Cultural Safety in Nursing Education: A Framework for First Nations, Inuit and Métis Nursing (2009) to assist Canadian nursing schools in their efforts to achieve cultural competence and safety. Although it is difficult to identify the extent to which we have become culturally competent in our activities, there are a variety of activities we can accomplish that seek to directly fulfill that particular aim.

**Activities:**

- Offer and promote workshops and lunch & learns for faculty, staff and students, including those organized by the Gwenna Moss Centre for Teaching Effectiveness (Indigenous Voices series), and partner with CHS when appropriate. It is hoped that 75% of faculty and staff attend one of these workshops per year; 40% attend 2 or more per year.
- Offer field trips to staff, faculty and students to Aboriginal communities and/or health centers. It is hoped that 50% of faculty will go on a field trip to an Aboriginal northern community by 2016.
- Develop a list of resources that are easily accessible to faculty to incorporate case studies, experiential learning, anti-racism and Aboriginal health modules throughout our BSN curriculum.
- Feature indigenous engagement at the 2013 College of Nursing annual retreat.

**Leads:** Faculty, Strategist for Outreach and Indigenous Engagement, NAPN, Development Officer, Clinical Coordinators, Undergraduate Education Committee

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e. **Goal: Promote and expand the services offered through NAPN.**

**Rationale and Outcomes:** The Native Access Program to Nursing is the College’s longest-lasting and most impactful contribution to improving the numbers of Aboriginal nurses in the province. Established in 1984, it has positioned the University of Saskatchewan as a national leader in providing recruitment and support services to help Aboriginal students successfully complete the nursing program. All three campuses have at least one NAPN advisor.

Given the many changes to NAPN over the years, the most significant being that it is no longer an access program; and given the changes to the nursing degree program and the College of Nursing; it is time to relaunch and rename NAPN to better communicate what it does.

**Activities:**

- Revise NAPN’s name and website.
- Ensure appropriate Aboriginal student space is developed in new College buildings in Regina and Saskatoon.
- Ensure Pre-Health Professions Club as well as Learning Communities are offered in an environment that makes them accessible and appealing to these students.
- Increase linkages between the NAPN and other student services on campus to ensure that gaps and barriers to Aboriginal nursing student services are addressed.
- Work with institutions that offer the pre-professional year (regional colleges, A & S, FNUC, URegina) to ensure availability and continuity of Aboriginal student support.
- Increase and formalize community engagement as a core responsibility of the NAPN team.
Leads: NAPN, Strategist for Outreach and Indigenous Engagement, Leadership Team, Communications Coordinator, Facilities Management Division

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f. **Goal:** Aboriginal students are mentored throughout their academic careers with the ultimate goal being to encourage a student to complete a Masters and then a PhD in nursing and to consider joining the College as a faculty member.

**Rationale and Outcomes:** As part of the College’s philosophy of “growing your own”, as well as in furtherance of the community engagement and research goals outlined in the IP3, it is imperative that we recruit more Aboriginal nurses into the College of Nursing’s graduate program. By 2016, we anticipate that the College of Nursing Aboriginal graduate student rate (6% in 2011) will remain higher than university average (4% in 2011), and we will aim to increase our Aboriginal graduate student numbers by 100%, from 6 students in 2012, to 12 students in 2016.

**Activities:**

- NAPN and faculty actively encourage Aboriginal students to consider graduate studies.
- Hold a lunch and learn for Aboriginal students annually at each of the three campuses by NAPN and a faculty member to discuss graduate opportunities.
- Liaise with SRNA Rural and Remote Professional Practice Group to inform them of our graduate programs and disseminate information to their members.
- Develop an entrance scholarship for Aboriginal graduate students.
- Advocate for government or health authority funding for NPs with service contracts in remote communities.

Leads: NAPN, Director of Graduate Programs, Development Officer, Strategist for Outreach and Indigenous Engagement, Faculty

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g. **Goal:** College of Nursing seeks out relationships and partnerships with other colleges, administrative units as well as external organizations to promote Indigenous Engagement internally.

**Rationale and Outcomes:** There is a growing focus, within our College and externally, on the importance of inter-professionalism in the nursing profession. Typically this refers to health professionals, and the University of Saskatchewan, through the Council of Health Sciences and investments in new Health Science buildings at the Saskatoon campus, is actively facilitating better opportunities for cooperation. Because indigenous health philosophies are holistic, and not necessarily specific to a particular health science field, it is an obvious area for greater cooperation, in terms of student experiences, curriculum, community engagement and research. The Pre Health Professions Club and Discovery Days are good examples of this kind of cooperation and should be expanded to include a program in the central Saskatchewan region by 2014. A formal communication mechanism to inform staff and faculty from across the CHS on Aboriginal engagement, professional development and outreach activities will also be sought. Finally, the College of Nursing will seek to establish at least one inter-professional activity, pilot or major research initiative involving another CHS college during the planning period.
Given the College’s new 1+3 model, and the nature of Aboriginal and northern engagement, it is also important that we seek partnerships on campus beyond the Health Sciences. Addressing the socio-economic and physical determinants of health in Aboriginal and northern communities will require knowledge attained from the social sciences, education, engineering, computer science, business and others. Any vision of health and wellness beyond acute care will necessarily be interdisciplinary. As part of our vision of engaging Aboriginal communities on multiple points, consideration must be given to the existing and potential points of contact from other campus units, centres and Colleges. The College of Nursing will also lead the International Centre for Northern Governance and Development’s “health” sub-theme and produce one major new activity, such as a circumpolar health Summer Institute, during the planning period.

**Activities:**

- Initiate and/or contribute to stronger Aboriginal engagement collaboration and planning through the Council of Health Sciences, including joint recommendations for action, for example on a common Aboriginal health professionals resource list for guest lectures.
- Identify sustainable solutions to northern and Aboriginal oral health issues in conjunction with Dentistry and the Oral Health Coalition.
- Establish formal cooperation, such as a nursing stream in Arts and Science, between the College of Nursing and Arts and Science to ensure high levels of contact and responsiveness to pre-professional year students.
- Communicate regularly and effectively with CHS and USask Advancement team regarding Aboriginal initiatives and success.
- Develop a Pre-Health Professional Club activity in the Central Saskatchewan region involving Aboriginal communities, and increase the overall number of Aboriginal students who attend a PHPC event by 20% by 2016.
- Improve collaboration with SPHERU, IPHRC, and the International Centre for Northern Governance and Development in our community engaged research activities.

**Leads:** Strategist for Outreach and Indigenous Engagement, NAPN, PHPC Coordinator, Leadership Team, Faculty, IT, Communications Coordinator, Research Facilitators

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3. **IMPROVING INDIGENOUS HEALTH**

h. **Goal:** Aboriginal communities are engaged with in ethically, culturally appropriate and mutually beneficial research and scholarly work to improve Indigenous health and health services.

**Rational and Outcomes:** Although the College of Nursing has had several notable successes in Aboriginal research and engagement, in general Aboriginal health has not been a traditional strength of ours. Given the university and college goals around Aboriginal engagement, the imperative on Aboriginal health offered by the provincial and federal governments and local health authorities, and indeed the demographics of the province, it is important that more concerted research efforts be made to address Aboriginal health issues. That said, those areas where the College of Nursing does have significant expertise are highly applicable to an Aboriginal health context. They include child youth and maternal health; healthy aging; health equity; health
systems research; and pedagogy, education and technology. A strong platform by which to extend the current research activity of College of Nursing faculty to scholarly work that will help improve indigenous health and health services thereby exists. Indicators of indigenous health research success during this planning session will be based on a count and subsequent 10% annual increase in the number of research applications with relevance to Aboriginal health submitted by faculty to 2016; as well as by traditional criteria such as major, community-engaged, health research projects funded and peer-reviewed papers published on Aboriginal/northern/remote health issues. An indigenous scholar-in-residence will help to foment scholarly work and capacity around Aboriginal health issues.

**Activities:**

- Appoint an indigenous scholar-in-residence in 2014-15 to provide mentorship, collaboration and focus on Aboriginal health issues.
- Encourage and support faculty members in their efforts to establish research programs involving Aboriginal health issues.
- Effectively communicate policy implications of research activities to appropriate First Nations, Métis, and government stakeholders.
- Seek funding from tri-council, as well as diverse non-tri-council sources, to support community engaged research and initiatives.

**Leads:** Research team, CEDN (Innovation grant), Assoc. Dean, Rural and Remote, Faculty, Development Officer, Strategist for Outreach and Indigenous Engagement

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4. **LEADERS IN DISTRIBUTIVE LEARNING**

   i. **Goal:** Ensure students learning outside of the traditional University of Saskatchewan campus have the supports and services they need to succeed.

**Rational and Outcomes:** Perhaps our biggest strength as a College in supporting Aboriginal health education is our distributed model of learning. However this comes with many administrative and operational challenges, not least when it comes to providing sufficient contact and support to Aboriginal students taking the BSN outside of our main campuses. The pre-professional year also poses risks to our ability to support and retain Aboriginal students from their first to second years. Concerted efforts will be made to monitor the Aboriginal participation and retention rates at regional colleges, FNUC, and Arts and Science; and on our campuses in PA, Saskatoon, Regina and our sites in La Ronge, Ile a la Crosse and Yorkton. We will seek to formalize mechanisms whereby off campus students have adequate NAPN or local student support. We will also seek to minimize technical disruptions to the distributed learning education we provide.

**Activities:**

- Implement regular and formal mechanisms where possible to connect with pre-professional year students at regional colleges, A & S, FNUC and URegina.
- Hold regular and evolving talks with northern sites, Northlands College and Parkland College to ensure needs are met and adequate support is provided.
- Anticipate and minimize technical disruptions to teaching and learning at off campus sites.
• Establish a baseline to evaluate the impact of nursing education on northern communities.

**Leads:** Leadership team, NAPN, E-Learning, Professional Advisors, Strategist for Outreach and Indigenous Engagement

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5. **CULTURE AND COMMUNITY: OUR SENSE OF PLACE**

j. **Goal:** The College of Nursing will integrate local, with a specific focus on rural, remote, northern and indigenous, and international College of Nursing initiatives and outreach within a Global Health framework.

**Rationale and Outcomes:** As part of the IP3, the College seeks to develop and strengthen linkages between local and global initiatives in undergraduate and graduate education, research, and study abroad opportunities. Linking global and local health issues help broaden our understanding of how health and health systems are socially constructed; encourages innovative thinking based on exposure to new and different ideas; and promotes leadership in improving health and health care to diverse populations in diverse contexts.

Although there are many relevant and comparable global contexts to be found, Aboriginal communities and students have traditionally faced barriers in participating in global educational and research experiences, such as family and community responsibilities, financial barriers, and a focus on challenges posed in their own community. The College of Nursing will develop a Summer Institute with partners in Yakutsk, Russia and the Philippines, to offer northern and Aboriginal students a more accessible, and locally relevant opportunity, for study abroad and global learning. At the same we will endeavor to provide more opportunities, in the form of clinical placements and field trips, to students and staff to travel to Aboriginal communities in rural and remote Saskatchewan, thereby broadening their thinking and knowledge context. Finally, efforts will be made to increase links between other colleges or schools of nursing operating in a northern or circumpolar context to share best practices and lessons learned.

**Activities:**

• Establish a Summer Institute with NorthEastern Federal University (Yakutsk, Russia) and the University of the East Ramon Magsaysay Medical Centre (Manila Philippines) by 2014 and secure funding for the medium term by 2016.
• Fund at least four northern/ Aboriginal students per year to participate in the Summer Institute.
• Organize at least one open-invite field trip to an Aboriginal health centre annually.
• Increase opportunities for clinical placements to First Nations and northern Saskatchewan communities, as well as mine sites.
• Initiate a network of schools and colleges of nursing offering northern-based nursing education.

**Lead:** Strategist for Outreach and Indigenous Engagement, Dean, Development Officer, Global Health Committee

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Sources

This document has not been developed in a vacuum; rather it builds on strategies for Aboriginal and community engagement from the University of Saskatchewan as a whole, notably its 2003 Forging New Relationships: The Foundational Document on Aboriginal Initiatives at the University of Saskatchewan and the 2006 Foundational Document on Outreach and Engagement: Linking With Communities for Discovery and Learning. In addition, best practices and conceptualization of terms relevant to Aboriginal health and nursing education have been identified by organizations such as the Aboriginal Nurses Association of Canada and the Indigenous Physicians Association of Canada. Finally, the Canadian Nursing Association released A Nursing Call to Action: The Health of Our Nation, the Future of Our Health System in 2012, which articulates the scope of nursing practice and its potential to positively impact the health of vulnerable populations.

Works Cited

