



Nurses and
Nurse Practitioners
of British Columbia

Affirming the Foundations of NNPBC's Anti-Racism Work





Acknowledgement

NNPBC engages in operations uninvited on the traditional and unceded territories of x̱m̱əθḵw̱əy̱əm (Musqueam), Skwxwú7mesh-ulh Temíxw, and Səlílwətaʔ/Selilwitulh (Tsleil-Waututh) Nations. We support and enabling nurses caring for people, families, and communities across the traditional homelands of over 200 First Nations, lodging Métis Peoples, and visiting Inuit, the geography today demarcated as the province of British Columbia. We humbly acknowledge all the unceded and traditional territories that we live, work, learn, and play. This acknowledgement includes a commitment to understanding both our individual and unified histories on these lands and upholding our responsibilities in our relationships with Indigenous Peoples.

Internal Work to Date

In 2022 and prior to our relationship starting today, NNPBC leadership made the decision to move the organization toward an explicit anti-racist position. This decision was motivated by several factors, including reflection on missteps in the past and a growing understanding that the Association has a responsibility to lead and set the example for nurses across the province.

The first steps of moving into an anti-racist commitment was undertaking a limited literature review of well-known reports of Indigenous experience of racism, both in nursing and in health care. This review of existing testimony, injustices, recommendations and calls to action helped us understand our responsibilities and begin to imagine what cultural humility as an anti-racist organization might look like.

The next internal step was to review the ways in which we were structurally reinforcing colonial constructs and harm within our own organization. We began the process of operational decolonization, which we continue in today. This includes changes to internal policies, external statements, relational outreach to begin repairing relationships, and enabling staff education. Our hope was and continues to be that these practices in our own organization will enable us to show up in a good way with our partners, demonstrate leadership in cultural humility, and take actions to disrupt racism.

In addition to looking governance and policy, we critiqued our positions, our activities, our statements, and documents (inward and outward facing) and created content where there was an absence of content. This has included:

- Examining our own bias and unconscious bias,
- Critically examining previous and existing performative actions,
- Developing a Commitment Statement
- Developing a Land Acknowledgment that is used in all written communication,
- Incorporating Land Acknowledgments and Commitments of Relationship at every meeting,
- Developing partnerships and relationships,
- Establishing expectations regarding the attitudes and behaviour of our Board of Directors and Staff,
- Enabling cultural safety and humility training for all staff members and engaging in peer dialogue to support implementation of learning in practice,
- Engaging an Elder in Residence,
- Developing a series of policy briefs focused on allyship, COVID-19 and TRC recommendations,
- Facilitating time for education, support, and debriefing.

These first steps brought our missteps of the past and our existing biases into sharp focus, creating an impetus for bold change. Change to being actively anti-racist is about unseating the terror and violence of racism where we can and when we can, with boldness and leadership that may not be popular and that will likely be uncomfortable. Indeed, we have collectively committed to understanding that



discomfort and resistance is evidence that we are making the meaningful change required to address the ongoing harm experienced by Indigenous Peoples.

Existing Answers and Directions

In 2022, we began reviewing the recommendations of Indigenous leaders, scholars and truth-tellers to understand what has already been spoken and the directions that have already been provided. This is an integral step in breaking the cycle of asking Indigenous Peoples to tell and re-tell their stories, as well as asking Indigenous People what should be done. As many have said, we do not need another question, we do not need another report.

In total, nine (9) written documents were selected for review to guide understanding of the work ahead and what responsibilities for NNPBC might be. These documents are:

1. Report of the Royal Commission on Aboriginal Peoples 1996
2. Honouring the Truth, Reconciling for the Future: 94 Calls to Action
3. Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls Volumes 1a and 1b
4. United Nations Declaration on the Rights of Indigenous Peoples: Declaration Act Action Plan 2022-2027
5. Métis Nation Relationship Accord II November 16, 2016
6. In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in BC Health Care
7. Transformative Change: Advancing Cultural Safety across British Columbia
8. Paddling Together: First Nations Health Authority Health and Wellness Plan
9. Cultural Safety and Humility Embedded Lead Report (Island Health)

Below, we share our consolidated review of each of the above nine documents, including what we heard as the key message, recommendations, and key changes that are indicated for NNPBC based on each document.

Report of the Royal Commission on Aboriginal Peoples (1996)

Author

Mary C. Hurley and Jill Wherett, Parliamentary Research Branch, Government of Canada

<https://publications.gc.ca/Collection-R/LoPBdP/EB/prb9924-e.htm>

Message

This 4,000 page report contains 440 recommendations for change and fundamentally shifted the relationship between Indigenous Peoples and non-Indigenous people in Canada. This report laid the groundwork for further action, including the first Statement of Reconciliation for Canada and later, the Truth and Reconciliation Commission.

Recommendations

- Indigenous Peoples have inherent rights, including the right to self-government and the establishment of new political structures
- Indigenous culture, language and education must be undertaken to preserve and promote Indigenous ways of knowing, being, and doing disrupted by cultural genocide
- The relationship between Indigenous Peoples and governments/organizations must change to address inequity

Key Changes for NNPBC

- Critically examine our attitudes and beliefs about Indigenous Peoples and the relationship between Indigenous nurses and their professional association



Nurses and Nurse Practitioners of British Columbia

- Advocate for the inclusion of Indigenous culture and healing practices in the context of nursing care, as well as the inclusion of Indigenous knowledge in nursing education and research
- Stay vigilant that racism continues to occur and must be stopped immediately and boldly
- Continue to call out racism and take a sharp edge to disrupt, stop and enforce equality and equity
- Continue to critically examine the status quo and the systemic comfort that undermines equity and reinforces privilege

Honouring the Truth, Reconciling for the Future: 94 Calls to Action

Author

Truth and Reconciliation Commission of Canada

https://ehprnh2mwo3.exactdn.com/wp-content/uploads/2021/01/Executive_Summary_English_Web.pdf

Key Message

Indigenous Peoples have experienced a genocide in the country that is now known as Canada. This report, based on the testimony of 6,000 witnesses, sets out recommendations for immediate change as 94 Calls to Action, focused on acknowledgement and restitution of harms caused intentionally against Indigenous Peoples and reconciliation. The overarching theme from the Truth and Reconciliation Commission of Canada: Calls to Action is for Canadians to denounce racism, disrupt racism and take steps toward reconciliation. NNPBC's call for the provincial and federal governments to carry out the recommendations from the Truth and Reconciliation Calls to Action should be updated, clearly state we continue to support the Calls to Action and have made changes to our own attitude and expectations for functioning in society where cultural competence is the norm.

Recommendations

The breadth of the Calls to Action are significant and cannot be captured fully in point form. However, we note that the Calls to Action direct organizations, leaders and professionals to call out racism, denounce racist acts, and actively engage in anti-racism. Additionally, we note health care specific Calls to Action include:

- Acknowledging that health inequities experienced by Indigenous Peoples are the direct result of colonization and genocidal policies and institutions
- Close health inequities and provide regular updates on progress
- Recognize the distinct health needs of urban Indigenous Peoples, including Métis Peoples and Inuit
- Invest in sustainable funding to address harm experienced in residential schools
- Recognize the value of Indigenous healing practice and inclusion of such in the treatment of Indigenous Peoples
- Increase, retain, and support Indigenous Peoples in health care
- Embed learning related to truth and reconciliation in all health care programs

Key Changes for NNPBC

- Establish Indigenous representation and invest in Indigenous nurses
- Support and champion the Calls to Action, in actions such as our Issue Brief on "Upholding the Truth and Reconciliation Recommendations."
- In advocacy work, ensure the unique health needs and the unjust health inequities of Indigenous Peoples are at the fore
- Acknowledge publicly and often the ways in which nursing has been complicit in historical and ongoing harm



Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls (Volumes 1a and 1b)

Author

National Inquiry Into Missing and Murdered Indigenous Women and Girls

<https://www.mmiwg-ffada.ca/final-report/>

Key Message

The Final Report of this Inquiry outlines the findings, including the history and current reality of human rights violations, abuses, and violence against Indigenous women, girls, and 2SLGBTQQIA people. These losses have occurred as a direct result of Indigenous-specific racism.

Recommendations

- Transforming relationships between Indigenous Peoples, governments, and Canadian society
- Culturally-based education that incorporates Indigenous language, history, and culture.
- Reforms of the justice system to ensure equal treatment and access to justice for Indigenous Peoples
- Policing reforms and acknowledgment of the failure and biases of policing in Canada
- Health and wellness supports for Indigenous Peoples that are culturally safe, trauma-informed, and grounded in community
- Changes in media representation and public awareness campaigns
- Increased resourcing for Indigenous women's organizations and advocacy for Indigenous women

Key Changes for NNPBC

- Recognize that our membership includes nurses living with and experiencing Indigenous-specific racism and violence
- Critically consider how we support our Indigenous members and the ways in which we address gendered violence and harm
- Ensure policies and organizational action does not contribute to further harm or rights abuses
- Support staff in undertaking training on gender-based violence and gender-based assessment
- Ensuring the workplace is diverse, equitable, safe, and inclusive
- Apply a gender lens to advocacy and centre gender-based oppression in analysis of issues
- Creating platforms, policy tables, and amplification of Indigenous voices in nursing

United Nations Declaration on the Rights of Indigenous Peoples: Declaration Act Action Plan 2022-2027

Author

Government of British Columbia, secondary to United Nations Declaration

https://www2.gov.bc.ca/assets/gov/government/ministries-organizations/ministries/indigenous-relations-reconciliation/declaration_act_action_plan.pdf

Key Message

UNDRIP is a Declaration adopted by the General Assembly of the United Nations and is a legally non-binding resolution that sets global standards for the rights of Indigenous Peoples. In response to UNDRIP, the Government of British Columbia passed a Declaration Act into law in 2019, as the provincial framework for reconciliation. The Action Plan directs the BC Government to ensure directives from UNDRIP are met, created, aligned in order to uphold laws regarding Indigenous equity and equality. Periodical reporting is expected. A key feature of UNDRIP is the expectation that all action and



Nurses and Nurse Practitioners of British Columbia

development relating to Indigenous specific work is led by Indigenous peoples. The overarching theme of the UNDRIP and the BC Action Plan for British Columbia states, by law, that Indigenous Peoples have the right to experience not only safety in all aspects of their life, but to experience enjoyment and self-actualization in their lives. The Action Plan directs a 5-year focused strategy in which government-based firms will make organizational changes in order to not only decolonize but to uplift and enhance the lives of Indigenous peoples.

Goals

- Self-determination and self-government for Indigenous Peoples
- Full exercise and enjoyment of the inherent rights of Indigenous Peoples
- Fully express and exercise the inherent rights of Indigenous Peoples without racism and discrimination
- Full enjoyment and expression of and the right to maintain, control, develop, protect and transmit Indigenous culture, knowledge, food systems, sciences and technologies.

Key Changes for NNPBC

- Ensure cultural competency of staff, including access to education and training
- Change organizational hiring practices to ensure processes address racism, stigma, and discrimination
- Actively work with the *In Plain Sight* recommendations as a guiding document in all work
- Where appropriate, partner to support the health and wellbeing of Indigenous members
- Amplify the voice of Indigenous nurses, including Métis nurses
- Centre Indigenous wellbeing and health as a key part of our advocacy agenda, as defined by Indigenous Peoples
- Advocate for and mentor cultural humility and anti-racism to BC nurses

Métis Nation Relationships Accord II (November 16, 2016)

Author

Métis Nation of British Columbia, Government of British Columbia

https://www2.gov.bc.ca/assets/gov/british-columbians-our-governments/indigenous-people/aboriginal-peoples-documents/metis_nation_reconciliation_accord_ii_-_nov_16_2016.pdf

Key Message:

BC Government commits to recognition of the Métis Nation and to ensure the unique needs of the Nation are met and upheld, constitutionally. Metis People are known as a unique heritage and hold a unique history in North America and have unfortunately been subject to the same racisms as First Nations, Inuit and other Indigenous people and communities.

Objectives

- Strengthened relationships based on mutual respect, responsibility, and sharing
- Improve information sharing and collaboration
- Meet agreed upon commitments

Key Changes for NNPBC

- Intentionally grow reciprocal relationships of trust with Métis peoples
- Amplify the voices of Métis peoples in nursing in BC, grounded in a shared understanding of the unique heritage and history of the Métis
- Including our acknowledgments and processes our commitment to a relationship with Métis peoples
- Learn from the leadership of Métis peoples and improve information sharing and collaboration with all Indigenous Peoples



In Plain Sight

Author

Mary-Ellen Turpel-Lafond

<https://engage.gov.bc.ca/app/uploads/sites/613/2020/11/In-Plain-Sight-Summary-Report.pdf>

Key Message

Harmful systemic racism in health care has been the norm experienced by Indigenous Peoples, consistently and constantly, and not the exception. Past due are truth, apology, and action by leaders and health care professionals.

Recommendations

Organizations connected to health care system in BC are called upon to apologize and stop violent acts of racism against Indigenous people. A total of 24 recommendations are set out specifically for health care in BC.

Key Changes for NNPBC

- Move toward becoming an explicitly anti-racist organization
- Critically examine each recommendation to understand how a professional association might implement them
- Continue to name Indigenous-specific racism and to support BC nurses in doing so in their daily practices
- Continue to be open to criticism, offer apology where needed, and engage with humility, understanding that we will fail often as we move forward
- Hold the tension between advocating for Indigenous nurses who experience the hurt and harm of racism and supporting nurses continuing racism, stigmatization, and harm in changing their beliefs and practices
- Address our absence of relationship with Métis peoples and Inuit
- Communicate our commitments more effectively and provide regular updates on our progress, even when we are slow to change

Transformative Change: Advancing Cultural Safety Across British Columbia

Author

First Nations Health Authority, Accreditation Canada

<https://peoplepowered.info/content/cultural-safety-humility-webinar>

Key Message

Indigenous Peoples have the right to experience safe, culturally safe, equitable and equal health care provided by the health care system. Indigenous Peoples can and should participate in changing a systemically harmful health care structure to one that is culturally safe. This practice standard sets expectations for disruption of racism against Indigenous Peoples seeking care and is relevant to all organizations and health care professionals involved in health care in BC.

Recommendations

- Establish accountability and a commitment to anti-racism
- Establish partnerships
- Participate in responsible, moral leadership
- Invest in infrastructure for anti-racism
- Develop human capacity for cultural safety
- Build organizational culture founded on safety and quality assurance
- Change in health authorities to address systemic racism



Nurses and Nurse Practitioners of British Columbia

- Leadership pivot to decolonize organizations, including governance and operations

Key Changes for NNPBC

- Acknowledge in-house racism, colonialism, violent coding and patterns, exclusion, and discrimination. Historically, we have only acknowledged racism when such an acknowledgement was unavoidable, and upon reflection, we did not before express a full understanding of the harms of colonialism and our participation in continuing harm
- Establish formal infrastructure for Indigenous-specific anti-racism work
- Ensure all staff have the capacity for cultural safety, including commitment and formal training. Additionally, we are grateful for Diana Day who has joined NNPBC as an Elder in Residence

Paddling Together: First Nations Health Authority Health and Wellness Plan

Author

First Nations Health Authority

<https://www.fnha.ca/Documents/FNHA-Summary-Service-Plan-2023-2024.pdf>

Key Message

This iterative service plan provides significant insight the health care needs of Indigenous Peoples, specifically in First Nations, across BC. It outlines the goals of programs and services in place to improve health, address health equity, and ensure access to culturally safe care.

Recommendations

- The culture and traditions of Indigenous people must be *the* structure, framework, and foundation. It is from this foundation that healing and helping in the western European tradition emerge, not the other way around
- Planned goals achieved through strategic planning provide direction, change and assurance of restructuring how health care is offered in terms of all physical, mental and spiritual well being for the individual and for the larger communities
- Intersections between Nations, FNHA, health authorities, and health providers must be oriented to serve those seeking and needing care, not become barriers
- Upstream teaching to stem subversive attitudes, cultural competency and quality assurance are required to ensure First Nations peoples receive high quality care

Key Changes for NNPBC

- NNPBC strategic planning can and must include Indigenous perspectives
- NNPBC must recognize that we work and support nurses who work on lands where they are often uninvited guests. Trusting relationships, including with NNPBC, are the first step in truly working in partnership with self-governing, self-determining Nations
- There is no single, one-size-fits-all approach. Indigenous Peoples are diverse and reductive beliefs about that diversity perpetuate Indigenous-specific racism and harm
- Take cues and learnings wherever they may be, understanding that a service agreement like that provided by FNHA sets out expert direction and action

Cultural Safety and Humility Embedded Lead Report (Island Health)

Author

Elizabeth Hietkamp

not yet publicly available



Key Message

Decolonization and becoming anti-racist is not a passive position. 'Being' actively anti-racist is taking action and assertively giving, enabling, and prioritizing space for traditional practices of knowledge and reciprocity and cultural humility practice support. This report provides a tangible example of mobilization and active action across the entirety of a work environment in the context of healthcare implementation, space for learning and understanding cultural in particular as it occurs in the health care setting and embedding leaders to facilitate active anti-racist practice in healthcare teams.

Recommendations

Embed practice supports for anti-racism and cultural humility as a key strategy for achieving cultural safety in health care.

Key Changes for NNPBC

- Continue to provide staff training and education on cultural safety and humility
- Make bold moves to establish practice supports for nurses in BC, as an approach to enabling the implementation of the cultural safety, humility and anti-racism nursing standard

Next Steps

Three essential directions arose as we considered the breadth of testimony and direction in the above nine documents and, over the past year, reflected on our organizational (in)action. When contrasting our former professional positions, our opinions and patterns against the realities of racism experienced by Indigenous persons captured by reports and research, we acknowledge that NNPBC is lacking in providing a fulsome acknowledgment of systemic racism in health care, in addressing and growing cultural safety, and modelling equity and anti-racism in nursing.

In every step going forward, NNPBC is open to criticism and guidance. We are honoured to find new ways that are uplifting, in partnership and growing trust.

