



# High-Level Event Summary

## *Outputs from the Indigenous Nursing Direction Setting Gathering*



Nurses and  
Nurse Practitioners  
of British Columbia

### **Our Vision**

Transforming health through a range of nursing expertise.

### **Our Mission**

NNPBC supports and promotes excellence in nursing practice, education, research, and leadership by empowering nurses to actively influence and advocate for changes to health and social policy, the nursing profession, as well as individuals and communities.

## Project and Gathering Overview

In December 2022, the Nurses and Nurse Practitioners of British Columbia (NNPBC) entered into a funding agreement with the Office of Indigenous Health and Reconciliation in the Ministry of Health. NNPBC received one-time funding of \$275,000 to initiate work around *Anti-Racism in Nursing*. The agreement set out key actions that NNPBC would undertake. Specifically, these activities included hosting a *Direction Setting Gathering* and establishing a *Cultural Humility Practice Support Program*. A joint formal announcement by NNPBC and the Ministry of Health was made in June 2023 (<https://www.nnpbc.com/pdfs/media/press-releases/2023/PR-Improved-mental-health-anti-racism-supports-coming-for-nurses.pdf>).

The Direction Setting Gathering was proposed as an approach to ensure subsequent actions would be Indigenous-led and meaningfully informed by Indigenous nursing voices. The Direction Setting Gathering took place on May 31, 2023, at the Songhees Wellness Centre on the unceded homelands of the Songhees Nation. The purpose of the Direction Setting Gathering was to affirm relationships; review the proposed project designs, including potential programs and services; and to listen. In addition, NNPBC offered a formal apology for past actions in which the Association did not uphold Indigenous nurses, Indigenous health, and reconciliation.

## Key Themes

Through facilitated discussion, attendees shared their responses to three core questions:

- Is the proposed project design focused on the right first things to address Indigenous-specific racism in healthcare and in nursing?
- If these are the right first things:
  - What would an Indigenous Leadership Table look like?
  - What would a Cultural Humility Practice Support Program look like?

Attendees shared their wisdom through a series of facilitated small group and all-room dialogues, which was captured and summarized under the following themes:

- NNPBC Structure and Internal Audit
- Healing and Dismantling
- Bringing the 'Bubbles' Together
- Data
- Communications
- NNPBC as 'Home'

## High Level Themes

### NNPBC: Structure and Internal Audit

- Attendees noted that NNPBC has not to date articulated an organizational plan to examine the Association itself from a decolonizing perspective. This was noted in a variety of ways, including as a need to “decolonize the colonial NNPBC structure,” to review governance structures including Indigenous-specific seats on Councils and the Board, and to create an NNPBC action plan based on the many existing reports on Indigenous-specific racism in nursing and in healthcare.
- Attendees also raised key questions around what the key principles, intentions, and deliverables are across NNPBC in relation to anti-racism work. Furthermore, attendees offered suggestions as to where NNPBC can start to demonstrate organizational commitment and progress on anti-racism and reconciliation work.
- Attendees also cautioned that this work must be done *first* before NNPBC can begin to convene leadership spaces. They also shared that allyship can quickly turn into appropriation and that NNPBC must preface all work with a commitment to not publishing or self-claiming the work of Indigenous nurses.

### Healing and Dismantling

- Attendees shared that the work of Indigenous peoples and the work of non-Indigenous people in anti-racism is not the same. Specifically, the work of Indigenous Peoples is *healing* and *recovering*. Spaces and activities

specific to Indigenous Peoples, such as the proposed Leadership Table, must at their core create space for healing and recovery.

- The work of non-Indigenous people was identified as *dismantling* and *taking responsibility*. Spaces and activities aiming at active dismantling of racism and colonialism in nursing and healthcare are thus, by definition, spaces where non-Indigenous people must shoulder the work.

### Bringing the Bubbles Together

- Attendees shared that recent years have brought a surge of demand for Indigenous nurses to participate, advise, and lead work related to Indigenous-specific racism in healthcare.
- Attendees stated that NNPBC should prioritize connecting efforts already underway between different organizations and agencies.
- Attendees advised NNPBC to consider how structures created through this project are connected to other activities, to nurses providing patient care, to decision makers, and to Indigenous community. NNPBC should focus on supporting the *flow* of work between entities in nursing in BC, where NNPBC serves as a uniting presence and space. Stewardship of flow and bridging of silos is one way that NNPBC could positively impact Indigenous nurses in BC.

### Community

- Attendees encouraged NNPBC to consider how we are connected with community through the nurses the Association serves.
- Additionally, attendees shared that inviting Indigenous nurses to act as advisors is insufficient. A genuine commitment to share power and authority, to shift power, and to enable self-determination for Indigenous Peoples is required. NNPBC has opportunity to focus on the serving and supporting the practice of the Indigenous nurse within the community in a meaningful way.

### Data

- Attendees raised questions about what NNPBC knows about Indigenous nurses. Questions were raised such as, “where do Indigenous nurses work,” “how many Indigenous nurses are there in BC,” “why do they do what they do,” “how do Indigenous nurses feel about NNPBC,” and “how do Indigenous nurses see themselves in the organization?”

### Communications

- The group recommended grounding communications in the “four Rs” of *respect, relevance, reciprocity, and responsibility*.
- Attendees suggested that NNPBC engage with Indigenous nurses intentionally, uniquely, and with humility. It is important that NNPBC be clear on how it helps Indigenous nurses in their careers, in community, and in leadership.
- *Attendees also noted that language is powerful and current articulations of the project* reflect colonial language and worldviews. Indigenous nurses need to inform how the work is spoken and written about, from an Indigenous worldview that is respected and understood as equal to colonial ways of doing, being, and knowing.
- Attendees also directed NNPBC to utilize understood terminology correctly. Terms such as cultural safety, cultural humility and anti-racism are part of our lexicon and ensuring the right terminology is used is important.
- Attendees cautioned that communication from NNPBC must start broad and get more personal over time as trust in relationships grow.

### NNPBC as Home

- The final theme was “How is NNPBC a *home* for Indigenous nurses?” The concept of *home* resonated across the activities of the day, showing up in every portion of the agenda. Part of feeling at home is having Elders and Knowledge Holders present in all aspects of the project and beyond. This also includes honouring the families and communities that enable each Indigenous nurse to participate in their own work, and understanding the invisible labour of family and community that takes place when Indigenous nurses give their individual time and energy.

- Attendees called on NNPBC to uplift Indigenous nurses in work that is life-giving, not extractive. They called on NNPBC to be a space where Indigenous nurses can heal and lead.

### **Project Design Specific Feedback**

Attendees provided feedback on the Cultural Humility Practice Support Program by first providing context and feedback on the principles of an Indigenous Leadership Table (which in turn would support a Cultural Humility Practice Support Program).

#### **Principles Indigenous Nursing Leadership Table (Circle)**

- Attendees shared that the language of the Indigenous Leadership Table is colonial in nature and not reflective of an Indigenous worldview. The suggestion was made to reframe this activity as an *Indigenous Nursing Leadership Circle*.
- Attendees instead suggested that an Indigenous Nursing Leadership Circle be a “system re-set”, a place for “mentorship, welcoming, generating, feeling connection, healing and reconciliation.
- Attendees also raised pragmatic questions about compensation, equity, and the need for a framework for participation so already burdened and exhausted Indigenous nursing leaders are not shouldering more work without tangible supports. Inclusion of student nurses and new graduate Indigenous nurses was also identified.
- Attendees pointed NNPBC toward taking care in involving Elders so that Elders are safe in the Circle.

### **Gratitude**

We acknowledge that historically NNPBC has made mistakes in our organizational relationships with Indigenous nurses, including nursing leaders, and with Indigenous communities. The intention of the Direction Setting Gathering was to affirm relationships and to begin a different path for the work ahead, grounded in and meaningfully directed by the voices of Indigenous nurses. NNPBC recognizes that participating in the Direction Setting Gathering was an act of trust and an expression of hope that NNPBC can be a safe home for Indigenous nurses going forward. As your professional nursing association, thank you for this trust and for the opportunity to move forward together in a good way.