

# Recruitment and Retention of Inuit Nurses in Nunavut



Prepared for Nunavut  
Tungavik Incorporated

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|                 |                                                                           |
|-----------------|---------------------------------------------------------------------------|
| <b>BEAHR</b>    | Building Environmental Aboriginal<br>Human Resources                      |
| <b>BFF</b>      | Blueprint for the Future                                                  |
| <b>DEA</b>      | District Education Authority                                              |
| <b>DHSD</b>     | Department of Health and Social Development<br>(Nunatsiavut Government)   |
| <b>FANS</b>     | Financial Assistance for Nunavut Students                                 |
| <b>GN</b>       | Government of Nunavut                                                     |
| <b>GNDE</b>     | Department of Education                                                   |
| <b>GN HSS</b>   | Department of Health and Social Services                                  |
| <b>HC</b>       | Health Canada                                                             |
| <b>INMED</b>    | Indians into Medicine                                                     |
| <b>NTI</b>      | Nunavut Tunngavik Inc.                                                    |
| <b>NAAF</b>     | National Aboriginal Achievement Foundation                                |
| <b>NAC</b>      | Nunavut Arctic College                                                    |
| <b>NAPN</b>     | Native Access Program to Nursing                                          |
| <b>NEPS</b>     | Nursing Education Program of Saskatchewan                                 |
| <b>NG</b>       | Nunatsiavut Government                                                    |
| <b>NOSM</b>     | Northern Ontario School of Medicine                                       |
| <b>PSA</b>      | Public Service Announcement                                               |
| <b>RNA</b>      | Registered Nurse Assistant                                                |
| <b>RNANT/NU</b> | Registered Nurses Association of the Northwest<br>Territories and Nunavut |
| <b>SIAST</b>    | Saskatchewan Institute of<br>Applied Science & Technology                 |

## Executive Summary

Recruiting and retaining an adequate nursing workforce in Nunavut has been a significant challenge for Canada's newest territory since its inception in 1999. The underlying causes of this challenge are complex, but stem primarily from other factors which include a lack of a long term strategic approach and planning process to support the development of an Inuit nursing workforce, the low rate of new nurses entering the workforce, the aging nursing workforce, and a number of other issues impacting recruitment and retention including high stress levels, workplace issues and long hours.

**In an effort to address the chronic shortage of nurses in the Nunavut, the Government of Nunavut's Department of Health and Social Services (GN HSS) developed a Nunavut Nursing Recruitment and Retention Strategy in the fall of 2007. The general response to the Strategy has been positive, and the importance of including Inuit in the development of a stable, professional and representative nursing workforce is recognized and embraced as a central tenet of the strategy.**

Nunavut Tunngavik Inc. (NTI) identified the need to complement the Strategy with a more detailed analysis of the barriers and challenges impacting on the recruitment and retention of Inuit nurses specifically. The need to better understand these factors and to develop an appropriate and effective strategy to address them formed the basis of the current project.

The project was supported by the Aboriginal Health Human Resources Initiative Advisory Committee, which was comprised of representatives of NTI, GN HSS, Health Canada's Northern Region (HC), and Nunavut Arctic College (NAC). The project was funded by Health Canada and led and managed by NTI.

The first section of the report provides an overview of the current nursing situation in Nunavut, including a statistical breakdown of nursing positions by region (including the number of Inuit currently employed) and the current recruitment and retention methods in practice. A summary of the Nunavut Nursing Program is provided along with an assessment of current and future trends affecting the recruitment and retention of Inuit nurses in Nunavut.

Section 2 of the report reviews a number of successful, innovative Canadian and international approaches to addressing the barriers and challenges limiting the recruitment and retention of Aboriginal people into nursing and health care careers. Of particular interest is the approach of the Nunatsiavut Government which has achieved some considerable success in its recruitment and retention of Inuit nurses in Labrador.

Section 3 of the report summarizes the findings gleaned from interviewing key informants and conducting focus groups across Nunavut. The primary barriers affecting the recruitment of Inuit youth into nursing careers include: grade 12 graduates having insufficient skills in the area of science, math and English; a lack of awareness on the part of Inuit youth in regards to perceiving nursing as a career option; and the fact that there is no effective recruitment strategy currently in place to attract Inuit youth to nursing careers.

Primary challenges facing Inuit students in the nursing program include: financial issues; lack of sufficient math, science and English skills; family obligations; and attraction to other employment opportunities. Some of the challenges facing Inuit nurses include: a perception that Inuit nurses are not treated on an equal basis as “Agency Nurses”; the high stress levels associated with the position; and a lack of mentoring opportunities.

Section 4 discusses these key issues in greater depth, and Section Five provides a series recommendations to address them. The recommendations (which are developed at greater length in Section 5) are:

**Recommendation ONE: Adapt the Nursing Program to better reflect Inuit culture and values.**

**Recommendation TWO: Identify and eliminate systemic barriers to Inuit employment.**

**Recommendation THREE: Develop a culture of mentorship**

**Recommendation FOUR: Introduce measures to prepare students for success in nursing programs**

**Recommendation FIVE: Increase the level of support available to Inuit students in the nursing program.**

**Recommendation SIX: Introduce measures to support Inuit Nurses**

**Recommendation SEVEN: Promote nursing as a career choice for Inuit**





# 1

## Introduction

### **1.1. The Project**

The 2007 Nunavut Nursing Recruitment and Retention Strategy developed by the Government of Nunavut's Department of Health and Social Services (GN HSS) was a positive and wide-ranging response to the nursing challenges faced by Nunavummiut. The importance of Inuit in the development of a stable, professional and representative nursing workforce was recognized and embraced as a central tenet of the strategy.

While most stakeholders reacted positively to the strategy, it was recognized that there was a need to supplement the strategy with a more detailed analysis of the barriers and challenges impacting on the recruitment and retention of Inuit nurses specifically; these were felt to require a unique and specific response. The need to better understand these factors and to develop an appropriate and effective strategy to address to them formed the basis of this project.

### 1.1.1. Methodology

The project methodology included several elements, including a document review and interviews/focus groups. The Advisory Committee provided input into the development of the document and key informant lists, as well as advice on the community consultations and focus groups. Input was sought from a wide variety of stakeholders, including community health workers, Inuit nursing students, staff at GN HSS, and a number of Inuit organizations.

Interview and focus group guidelines were developed to help ensure information was collected effectively. Interview guidelines were tailored to address the specialized knowledge of the informant groups. The research instruments focused upon the following main areas:

- Current overview of nursing in Nunavut
- Impact of nursing shortage on health care for Nunavummiut
- Impact of nursing shortage on health care for Inuit
- Current and future trends affecting the recruitment and retention of Inuit nurses in Nunavut
- Primary challenges and barriers facing Inuit interested in becoming nurses in Nunavut
- Primary challenges and barriers affecting the retention of Inuit nursing students and nurses in Nunavut
- Strategies to improve the recruitment of Inuit into nursing programs and positions
- Strategies to improve the retention rate of Inuit nursing students and nurses

Project team members travelled to Cambridge Bay, Kugluktuk, Rankin Inlet, Iqaluit and Pangnirtung. Arviat was originally included in the communities to be visited but weather conditions prevented the project team member from travelling there. Telephone interviews were conducted with a number of Arviat-based informants to address this gap in the methodology.

In all, fifty-one interviews were conducted and four focus groups were conducted. The results of this research and the document review formed the basis of the project's findings and guided the development of the recommendations, action plan and economic analysis.

Copies of the actual interview and focus guidelines can be found in Appendix I.



Pallulaaq Ford – Nunavut nursing program student  
Nunavut Arctic College 2005

### 1.2. Nursing in Nunavut: Overview

It is widely recognized that nurses play an essential role in the delivery of health services around the world. Without dedicated, motivated and professional nursing staff, the quality and effectiveness of health service delivery is affected. A nursing workforce that is unstable, unhappy and unconnected to the community it serves compromises the quality of health care service delivery.

The current nursing environment of Nunavut shares a number of features with other jurisdictions, both within Canada and globally; yet nurses in the territory also face challenges and issues that are entirely unique. The Registered Nurses Association of the Northwest Territories and Nunavut (RNANT/NU), the agency responsible for the registration of nurses in Nunavut, conducted a series of recruitment and retention surveys for its membership. In 2005, a survey was conducted specifically among



nurses registered to work in Nunavut<sup>1</sup>. The survey sheds important light on some key attributes of the nursing workforce:

- The nursing population in Nunavut was older than that of the Northwest Territories (NWT) with more than 70% being forty years of age or over<sup>2</sup>;
- Although the majority of responding nurses had more than ten years of total nursing experience, most still had less than five years experience working in Nunavut;
- More than half of responding nurses (58%) indicated that they were indeterminate employees; fewer nurses indicated that they were casual (38%) or term (7%) employees; and
- The majority of respondents were employed full-time (63%) as compared to part-time (37%)<sup>3</sup>.

In summary, the survey indicates that the Nunavut nursing workforce has a large majority of nurses over the age of forty, with relatively high number of years of total experience, most of which was gained outside the Territory.

Like many jurisdictions around the world, Nunavut has been competing for nurses in a highly competitive market. The RNANT/NU has estimated that in Canada alone there will be a shortage of 115,000 nurses by 2020<sup>4</sup>. As a result, Nunavut has struggled to maintain a full complement of nursing staff, and is currently facing a vacancy rate approaching half of total positions (see Table 1). This vacancy rate is notably higher than the historical level of 30-40% identified by GN HSS<sup>5</sup>. In terms of average length of tenure, there were no statistics available; however, one key informant interviewed for the study noted that the average length of career for a “bedside” nurse had dropped to only five years in Canada, while another informant estimated the average length of tenure for a nurse in Nunavut was between two and three years. These factors have led to an increasing reliance upon Agency nurses to help meet the needs of the health care system, a reliance that has placed a heavy financial burden on the Government of Nunavut (GN)<sup>6</sup>.

*The importance of Inuit in the development of a stable, professional and representative nursing workforce was recognized and embraced as a central tenet of the strategy.*

**TABLE 1: Nursing Positions by Region – Nunavut**

| Region      | Total # | Beneficiaries Positions | Indeterminate Nurses <sup>7</sup> | Vacant |
|-------------|---------|-------------------------|-----------------------------------|--------|
| Qikiqtaaluk | 115     | 2                       | 72                                | 43     |
| Kivalliq    | 58      | 5                       | 28                                | 30     |
| Kitikmeot   | 42      | 0                       | 18                                | 24     |
| Total       | 215     | 7                       | 118                               | 97     |

*Table provided by GN HSS – Jan. 2008.*

1. The survey was sent to 380 registered nurses and 60 responses were received.
2. Registered Nurses Association of the Northwest Territories and Nunavut. 2006. Nunavut Nurses Recruitment and Retention Survey 2005: Nunavut Survey Results Report. Yellowknife. Page 12.
3. Ibid. page 15.
4. Interview with Steven Leck, Executive Director of RNANT/NU, March 9, 2009.
5. Nunavut Recruitment and Retention Strategy, Department of Health and Social Services Nov. 2007, page 6.
6. Ibid page 4.
7. “Indeterminate” refers to full-time, permanent positions.

The percentage of Inuit nurses as a total of the existing nursing positions in the territory is currently just over 3% or 6% of the total nursing workforce once vacant positions are factored into the total.

As Table I illustrates, the distribution of Inuit nurses currently practicing in Nunavut is the highest in the Kivalliq Region (5) and lowest in the Kitikmeot (0) and Qikiqtaaluk (2) Regions. Two Inuit nurses are currently working in the Qikiqtani Hospital in Iqaluit.

### 1.2.1. Nunavut Nursing Recruiting and Retention Strategy

In November 2007, the GN HSS released its “*Nunavut Nursing Recruitment and Retention Strategy*”. The document outlines the GN strategy for addressing the nursing shortage in Nunavut. Many of the steps outlined in the strategy address the specific concerns identified, among other sources, by the RNANT/NU recruitment and retention surveys. This “living document” is intended to be a flexible, adaptable approach to increase the recruitment and retention of nurses over an extended period of time, as priorities and resources evolve.

The multi-dimensional strategy focuses on measurable performance-based indicators, including an “...increase in nursing staff retention; increase nursing “workforce stability”...; reduction of nursing vacancy rates; increase in skill profiles and increase in number of Inuit in the nursing field”<sup>8</sup>.

While addressing the nursing situation in general, the strategy makes a number of specific references regarding the recruitment of Inuit nurses; the successful recruitment and retention of an Inuit nursing workforce is identified as the long-term solution to solving Nunavut’s nursing “problem”. Specific steps primarily directed at Inuit include:

- Promoting nursing and health care services as a career for Inuit;
- Collaboration between the GN HSS and the Government of Nunavut — Department of Education (GNDE) and Nunavut Arctic College (NAC) for long-term education and training initiatives to help Inuit prepare for nursing professions;
- Increasing support for nursing students, including:
  - Extending the Foundation Studies program<sup>9</sup> and the Nursing Program, currently offered only in Iqaluit to Cambridge Bay and Rankin Inlet;
  - Enhanced tutoring support for nursing students;
  - Guaranteeing employment for all graduates of the Nursing Program;
  - Providing support to students preparing to write their final national nursing examinations;
- Preparation in high school for nursing careers —Explore the inclusion of courses in the high school curriculum that focus on basic skills and knowledge required for nursing.

8. Ibid page 2.

9. The Foundations Program provides an additional year of school to help improve the basic literacy, math and science skills of high school graduates to prepare them for further post-secondary education. The Foundation Studies Program was offered in both Cambridge Bay and Rankin Inlet in 2009.

### 1.2.2. Current Recruitment Methods

The above strategy identifies a number of steps to improve GN HSS recruitment activities. Currently, most nursing recruitment concentrates on southern career fairs and advertisements in national and local newspapers and health care industry publications. Little effort is invested in recruiting Inuit specifically, either to nursing positions or the Nursing Program in Iqaluit, other than radio Public Service Announcements (PSAs) and some advertising in northern newspapers and magazines (e.g., Above and Beyond, Up Here).

GN HSS is planning several initiatives to promote nursing and health careers among Inuit in Nunavut. These initiatives include:

- Place “Nunavut Nurse” print/radio/TV advertisements promoting the Foundation Studies program;
- Integrate elements that promote nursing as a career for Inuit into the new Nunavut Nurses website;
- Develop a new, high impact “Nunavut Nurse” brochure and/or cards and booth banners targeted to Inuit youth and young adults;
- Inuit Nurses Role Model Campaign;
- Nunavut career fairs and school events, with classroom presentations;
- Place “Nunavut Nurse” print advertisement about the planned expanded Nursing Program in Cambridge Bay and Rankin Inlet;
- Promotional activities in schools:
  - Promotion of health careers in the classroom
  - Art contest featuring health careers in elementary and middle schools
  - Health Science Camps
  - Television PSAs/Feature Program on Inuit Nurses in Nunavut — CBC and APTN
  - Pre-recorded program on Inuit Nurses in Nunavut for distribution to community radio stations
  - YouTube broadcasts<sup>10</sup>

NAC staff make an effort to recruit students to the Nursing Program, primarily through advertisements in northern papers, ads on community radio and annual visits to Inuksuk High School in Iqaluit. PowerPoint presentations are provided to current nursing students for presentation in communities, as part of their practicum requirements. Neither the NAC nor the GN HSS currently receives funding for the recruitment of Inuit students to the Program.

### 1.2.3. Nunavut Nursing Program

Inuit students graduating from high school who are interested in nursing may apply to the Nursing Program offered in Iqaluit. The Program is delivered by NAC, and funded by the GN HSS. The Program offers a four-year Bachelor of Science in Nursing degree through a partnership with Dalhousie University.

The Nursing Program was initiated in 2002, and was intended to provide a solid education in nursing skills. Students completing the Program must write a Canadian Registered Nurses Exam which, upon successful completion and registration with the



Qikiqtani General Hospital  
Source: David Boulton

10. Correspondence from key informant.

appropriate agencies, will entitle them to work anywhere in Canada as a Registered Nurse. It was initially anticipated that a total of twenty-nine Registered Nurses would graduate from the Program upon completion of its fourth year. As of 2008, eighteen Registered Nurses (RN's) have graduated from the Program, including seven Inuit. There are a total of eighteen students in the entire program currently in all four years, of whom seven are Inuit. The most current first-year program started the school year with twelve students but will finish with only four, three of whom are Inuit.

There are currently plans to expand the Nursing Program in Cambridge Bay and Rankin Inlet, but it is unclear as to when these programs will be operational. An anticipated fifteen students will attend each program<sup>11</sup>.

Students require a grade twelve diploma to apply for the Nursing Program. To ensure they have the requisite skill levels in math, science and English, two additional programs have been established:

- The Health Career Access Program was an eight-month program designed to prepare Inuit students academically for study in a health-related field such as nursing. Admission criteria included a high school diploma or equivalent. Due to low levels of interested students, the Program was eventually rolled into the NAC Foundation Program.
- The Nunavut Arctic College Foundation Program is currently offered in Iqaluit, Cambridge Bay and Rankin Inlet, and provides eight months of skills reinforcement and upgrading in preparation for further post-secondary education. The Program is not designed specifically to support nursing studies, and only one (non-Inuk) student from the Program has gone on to the Nursing Program.



Pallulaaq Ford – Kivalliq Health Centre Nurse  
Source: Ernest Akerolik, Rankin Inlet NU 2009

### 1.3. Health Impacts and Emerging Trends

The nursing shortage has had a significant impact on the health care provided to Nunavummiut. The following sections summarize the views of informants and focus groups on the effect of the Inuit nursing shortage and on trends that will impact upon the recruitment and retention of Inuit and non-Inuit nurses.

#### 1.3.1. Primary Effects of the Nursing Shortage on Overall Health Care for Nunavummiut

One of the primary effects of the current nursing shortage in Nunavut has been its negative impact on Nunavut's existing nursing workforce. Shortage of staff has led to heavier workloads and higher stress level among staff, leading to exhaustion, increased frustration, reduced alertness, and deterioration of interaction between — nursing staff and their patients, to the point that service delivery was considered to be compromised.

Several other important impacts were identified.

- Respondents described a greater dependence upon casual nursing staff, most of whom have little or no familiarity with Inuit culture, or with the workings of the health care system in Nunavut.
- Orientation for casual and agency nursing staff does occur, but does not include cultural orientation, which has exacerbated difficulties in the workplace, leading to poor communication between staff and patients.

11. (Recruitment and Retention Strategy 2007 pg 10).

- In the area of home care the shortage of nurses has increased the demands placed on health care providers (home support workers), leading to higher levels of stress causing turnover and burnout rates among the support workers. The Home Care Program sends patients back to their home communities to recover from operations, births and a variety of medical procedures. Once home, the patient gets home care nursing support; however, this transfers an additional burden to nurses in the communities.
- Nurses represent the front line and visible face of the health care system. The health sector in general is experiencing challenges associated with a lack of teamwork and low morale among staff. Public awareness of this represents a disincentive for Inuit considering careers in nursing to help their communities. Several informants noted that the growing awareness of these problems among the general public may be contributing to an erosion of confidence in the health system.
- It was further noted that the nursing shortage has underlined a shift in the focus of health care in Nunavut from public health to acute and chronic care, with predictable consequences — public health issues are not receiving the attention or resources they require.

In summary, the quality of health care has suffered in Nunavut as a result of the nursing shortage. Access to quality health care have been compromised for Nunavummiut.

**Nurses represent the front line and visible face of the health care system. The health sector in general is experiencing challenges associated with a lack of teamwork and low morale among staff.**

### 1.3.2. Impacts on Health Care for Inuit

The primary finding from the interviews and focus groups was that the nursing shortage and its consequences — overworked staff and vacancies in the communities — have reduced the quality and availability of health care for Inuit.

Key issues identified by informants were:

- Linguistic and cultural barriers separate health care providers from patients. These barriers can lead to incomplete or incorrect diagnosis and treatment of health problems due to health care providers' limited understanding of what a patient says. One informant noted that southern public health strategies tend to rely upon printed materials and provision of readings, resources, and web-based information: in Northern communities, the most effective communication is verbal, and one-on-one. This approach, however, requires both fluency in the patient's language and familiarity with culturally relevant communication styles.
- Many Inuit have little faith in the current health service delivery model and, to a certain degree, in the staff at health care centres. There is a sense that their needs are not well understood at the community level, and that the communication gap is even greater when they are forced to travel to regional centres for care.
- For communities such as Rankin Inlet, with a relatively high proportion of Inuit nurses (five out of a total of seven), informants reported a very positive impact on the impressions of Inuit patients who have been able to access health care in their own language. Several informants noted that the presence of Inuit nurses on staff reduces much of the stress experienced by non-Inuit full-time nurses.
- Reduced access to effective health care in the communities has resulted in a significant increase in the number of Inuit having to leave home for treatment which could, at least theoretically, be delivered in the community. The costs in terms of disrupted lives, medical complications and financial costs to the GN are considerable.

- There is a growing awareness of certain chronic diseases that appear to be on the rise among Inuit. Diabetes, obesity and mental health are areas identified that could more effectively be dealt with at the local level if there were adequate supply of health care providers and resources across Nunavut.

### 1.3.3. Current and Future Trends Affecting the Recruitment and Retention of Inuit Nurses in Nunavut

The nursing shortage is a global phenomenon. It is probable that the situation will continue to worsen as the nursing workforce approaches retirement, recruitment levels drop, and the population ages. Competition for nurses will therefore remain very strong, as Nunavut competes with employers in what is becoming an increasingly tight world market.

Exacerbating this trend is “credential creep”, the growing demand on nurses for additional training or education as a condition of licensing: many may simply leave the profession or retire to avoid this. Nunavut, like most other jurisdictions, is vulnerable to the impact of potential funding decreases on staffing, hospital, and community health centre operations at time when demand for health care services is increasing.

The nursing shortage underscores the need to develop and maintain a larger and more stable Inuit nursing workforce. However, competition for skilled and educated Inuit in every profession will also be strong, as Inuit continue to assume proportional representation within Nunavut’s workforce. Addressing the recruitment and retention issues currently affecting potential and existing Inuit nurses will be challenging, in light of this strong competition from other employment sectors.

A key strategy to address the nursing shortage in Nunavut will be to increase the recruitment and retention of Inuit nurses. Advantages to this approach include;

- The cultural, linguistic and social benefit to Inuit patients would significantly enhance the services they receive from the health care system;
- The development of territorial capacity and the subsequent retention of earnings within Nunavut would be substantial; and
- The reduction of reliance upon agency nurses, which currently increases health care costs without a concomitant increase in health care services, would result in substantial savings for the health care system.

While the situation regarding nursing in Nunavut is critical, a number of positive trends were noted for Nunavut, including:

- Increased Inuit access to a better level of education in the school system. This will eventually result in a more educated workforce that will in turn seek out increasingly challenging career such as nursing and health care.
- The slow formation of a critical mass of Inuit nurses (as is happening in Rankin Inlet), is resulting in both improved service and the emergence of a group of Inuit role models. Once a critical mass is achieved, it will become self-renewing as younger Inuit increasingly consider nursing as a career. There will be no simple, quick fix to address the challenges Nunavut faces in recruiting and maintaining a professional, representative, and stable nursing workforce. However, firm and decisive measures to address the existing barriers and challenges facing the recruitment and retention of Inuit nurses will represent a major step forward.

*The nursing shortage underscores the need to develop and maintain a larger and more stable Inuit nursing workforce.*





## Literature Review: Summary of Findings

The project methodology included a review of successful, innovative Canadian and international approaches to address the barriers and challenges limiting the recruitment and retention of Aboriginal people into nursing and health care careers.

The Canadian research examined models identified by the project team and by key informants. Not surprisingly, Canada provided a wide range of successful recruitment strategies focusing on Aboriginal people. Initial research was internet and document based; particularly interesting case studies were explored in greater detail through interviews. The international research focused on English-speaking countries with large Aboriginal populations including Australia, New Zealand, and the United States including Alaska. The researchers were restricted to English language materials (original or translated), which may have limited access to models in Greenland, Finland, or other non English-speaking countries with indigenous populations.

The issue of low participation rates among Aboriginal people in nursing and other health care careers is a concern in all countries reviewed. The problem is widely recognized, and is being addressed at various levels. However, many promising initiatives in other countries are still at relatively early stages, and their actual impact is difficult to assess. The Canadian experience offered a richer range of models, with more accessible information.



New Inuit nurse graduates:  
Rebecca Lonsdale and Susie Pearce  
Nunavut Arctic College 2006

Research efforts focused on successful programs or services that:

- Sought to attract Aboriginal youth to careers in nursing, health care, or other employment sectors that required a solid foundation in math, science and English literacy;
- Raise the profile of nursing/health care as a career option;
- Provide an introduction to a career in nursing/health care;
- Support Aboriginal students attending nursing/health care programs.

There is a large body of literature on the retention of nurses generally; however, there is little information on successful retention initiatives specifically aimed at keeping Aboriginal people already working in the nursing and health care field in their positions<sup>12</sup>. This is in part because many of the issues affecting the retention of Aboriginal nurses are similar to those affecting non-Aboriginal nurses. The information provided below focuses primarily on examples of successful recruitment and retention of Aboriginal nursing/health care students.

Each of the following examples illustrates a successful attempt to encourage Aboriginal youth to consider a career in health careers, a strategy for supporting them during their education, or an approach to fostering success. This is not a comprehensive listing of initiatives, but a selection of the most useful or appropriate models identified in other jurisdictions.

## 2.1. Canada

### 2.1.1. Nunatsiavut Government, Department of Health and Social Development: Success in Recruiting Inuit Nurses

As in other jurisdictions in Canada, the international shortage of nursing has impacted the Nunatsiavut region of Labrador. However, the Nunatsiavut Government (NG) has achieved notable success in increasing the number of Inuit nurses to the highest ratio in Canada with a total of five of eight positions staffed by Inuit. A recent survey undertaken in Labrador indicated that a total of 30 Inuit nurses have been registered in the region over the past thirty years.

Some of the primary reasons for this success have included:

- Nearly half of the training is provided in Labrador, and as close to the students' home communities as possible. The main clinical training occurs in Cornerbrook, Newfoundland; however, the first two years of the Nursing Program are delivered in Goose Bay.
- The Nursing Program is designed to be as culturally relevant as possible. Inuktitut courses are incorporated into the curriculum — for example, anatomy is taught in Inuktitut. A key factor in the success of the program's cultural relevancy has been how empathetic professors in the program are to Inuit culture and the realities facing students.

<sup>12</sup>. Key informants, for example, offered a number of good examples of successful recruitment initiatives, but no examples were suggested for retention initiatives.

- The Department of Health and Social Development (DHSD) organizes public celebrations of Inuit nurses. There is a higher likelihood that Inuit youth will consider becoming a nurse or choose another health care profession if they interact with other Inuit practising their skills at the local health centres and the regional hospital.
- DHSD staff managed both the home care and public health care system. The NG manages the Nursing Program; as a result, the program can be changed to meet the needs of Inuit in the region. For example, the DHSD Director is in charge of placement for Nursing Program graduates.
- All graduates are guaranteed employment and are offered jobs prior to graduation.
- Extra tutoring is provided to students throughout the program including during their trips home during school breaks.

With the benefit of hindsight, the DHSD acknowledges a number of steps could be taken to improve their experience with Inuit nurses still further. Their suggestions for an even stronger level of support include:

- Hire students in the summer between semesters, so they can gain practical experiences in the nursing/health care field. This will also minimize homesickness, a major reason for program dropouts.
- Establish a “Return of Service”<sup>13</sup> requirement to their Nursing Program.
- Establish an Access Program that provides upgrading in skills directly tied into preparing the students for the Nursing Program.
- Improve screening applicants to the program. More effort is needed to consult with the families of the applicants — the children and husbands.

### 2.1.2. Building Environmental Aboriginal Human Resources – Success in Attracting Aboriginal Youth to Careers in the Environmental Sciences

The Building Environmental Aboriginal Human Resources (BEAHR) project is committed to increasing Aboriginal employment in the environmental sector through a multi-dimensional strategy that includes career awareness, the provision of training and employment resources, and the recognition of environmental excellence. One of BEAHR’s noteworthy successes has been to attract Aboriginal youth to careers in a growth sector that require a science background.

The following information summarizes BEAHR’s three-part strategy and activities related to developing career awareness, training resources, and employment resources.

#### A. Career Awareness

- **Aboriginal EnviroCareers (AEC)** — In order to interest youth in environmental careers, BEAHR interviews Aboriginal people who are working in the environmental field about their careers and life experiences. These interviews are presented as Role Model profiles, and placed on BEAHR’s website to inspire Aboriginal youth to enter the environmental field.

**A recent survey undertaken in Labrador indicated that a total of 30 Inuit nurses have been registered in the region over the past thirty years.**

13. “Return of Service” refers to the practice of having students agree to work for in a particular position for a set period in return for reduced tuition and reduced associated living expenses.

*The issue of low participation rates among Aboriginal people in nursing and other health care careers is a concern in all countries reviewed. The problem is widely recognized, and is being addressed at various levels.*

- **Community Partnerships** — BEAHR is working to identify potential partners for several community initiatives that will increase Aboriginal awareness of environmental careers. The first opportunity involves the adaptation of the Environmental Monitor Training Program for High School students and science camps.
- **Aboriginal EnviroCareers Calendar Contest** — BEAHR holds an Aboriginal EnviroCareers (AEC) Calendar Contest annually to engage Aboriginal youth in discovering environmental careers.

#### B. Training Resources

- **BEAHR Learning Institute (BLI)** — BEAHR has created the BLI in an effort to become a key national source for environmental education, training and professional development information and programs.
- BEAHR has developed a number of community-delivered training programs to address:
  - Environmental monitoring needs
  - Environmental site assessment needs
  - Local environmental coordinator needs

#### C. Employment Resources

BEAHR also coordinates a number of employment programs with partner agencies. These programs focus on involving Aboriginal youth with internships, gaining work experience with employers and posting appropriate job listings in the environmental sector.

#### **2.1.3. Actua Success in Attracting Youth to Careers in Science and Technology**

Actua is a registered charity that annually engages over 250,000 youth (ages 7-16) in hands-on and interactive learning experiences in science, engineering and technology. The organization has had significant success in attracting youth from a wide variety of backgrounds to careers based on science and technology. Through the National Aboriginal Outreach Program (NAOP), Actua and its thirty member organizations partner with various Inuit, First Nations, and Métis communities to deliver hands-on educational programs through week-long science day camps, school workshops, and science clubs. Actua's Dream Team has been traveling throughout Inuit regions since 2006, visiting communities such as Iqaluit, Kimmirut, Qikiqtarjuaq, Pangnirtung, Rankin Inlet, Igloodik, Hall Beach, Gjoa Haven, Kugluktuk, Inuvik, Aklavik, Tuktoyaktuk, Nain, and Rigolet.

Actua is a national leader in accessibility through the development and delivery of customized programming specifically for Aboriginal youth, girls, underprivileged youth and youth living in remote as well as inner city communities across the country. Actua builds partnerships with communities and community members in order to develop quality and effective programs. Actua provides all the materials and staff to lead a five-day science camp.

Actua's focus is on the delivery of relevant, high-quality and innovative program content. Programming addresses current issues, innovations and research in science and technology, making sure that all activities are inspiring and rooted in accurate scientific and technical theory. Actua believes in strong mentorship, and many of the programs invite mentors to

come in to speak to youth about their careers in the fields of science and technology. It is hoped that exposure to the fields of science, engineering, mathematics, and technology at a young age, will interest and inspire young participants.

#### **2.1.4. Kwantlen Capacity Development Camp: Stimulating Interest in Health Care Careers**

The Kwantlen Capacity Development Camp is offered by the Kwantlen University College in Surrey B.C. The university's School of Nursing, in partnership with a number of agencies, organizes a summer day-camp for Aboriginal youth in grades 5-8. Charging no fee, the camp engages youth in activities that will spark an interest in health care careers. Key areas of learning include math, science, computer skills and applications, and both traditional and western methods of maintaining health and wellness.

The five-day camps are attended by up to forty youth, and are lead by six Aboriginal team leaders coordinated by a project manager. Elders participate by acting as cultural counsellors and supervisors. Project staff receives leadership and first aid training, and a curriculum review prior to the commencement of the camps.

#### **2.1.5. Nursing/Health Care Camps in Northern Ontario**

The Northern Ontario School of Medicine (NOSM) uses the summer camp approach to encourage rural, remote, Francophone and Aboriginal youth in northern Ontario to consider careers in health care. The NOSM's Summer Science Camp program provides students with the opportunity to learn about the health-care sector by exposing students to health-care careers, providing valuable hands-on experience, and partnering participants with a suitable a mentor.

To encourage wide participation, there is no charge for students in Grades 8 through 11, and eligibility is based on the student's level of interest rather than their grades. Students participate in a wide variety of actual health care activities including:

- X Ray Rounds: How to put on and remove a cast;
- DNA Analysis: A look into the techniques of CSI;
- Herbal Remedies: An understanding of historic and modern medicines;
- Healing Ceremonies: A look at Aboriginal traditional healings;
- Physiology: Examine a preserved heart and understanding the heart's electrical conduction system; and
- Health Careers: How to prepare now for careers in medicine, nursing and emergency care.

#### **2.1.6. University of Saskatchewan and the Saskatchewan Institute of Applied Science and Technology – Native Access Program to Nursing/Medicine (NAPN/M)**

The Sihtoskatowin Native Access Program to Nursing (NAPN) was established In order to provide support to Aboriginal nursing and medical students enrolled at the Nursing Education Program of Saskatchewan (NEPS). The Program is a key support and retention service for Aboriginal Nursing students, and also functions as a successful recruitment strategy.



Qikiqtani General Hospital  
Source: David Boulton



Old Residence Building,  
Nunavut Arctic College,  
Iqaluit  
Source: David Boulton

NAPN assists students attending the College of Nursing at the University of Saskatchewan, as well as at the Nursing Division at Saskatchewan Institute of Applied Science and Technology (SIASST). NAPN/M activities include:

- Advice and counselling related to careers and academic requirements for Aboriginal nursing, medical, and pre-health;
- Academic support for students dealing with the demands of the university curriculum;
- Access to Elders and culturally appropriate counselling;
- Fall orientation for new students entering into NEPS or medicine;
- A summer employment program for undergraduate students in collaboration with a number of partner agencies. The program has provided successful employment assistance to nursing and pre-health science students over the past twenty years.
- Partnership with Muskoday First Nations to bring fifteen First Nations youth to the University of Saskatchewan campus for a two-week summer health career camp;
- Developing a student role model/ambassador component into recruitment activities for Health Sciences, using graduates working in the province in various regions, especially in the profession of nursing.

## 2.1.7. Lakehead University – An Example of Successful Recruitment of Aboriginal Youth

Several universities in Canada have initiatives linked to the recruitment of Aboriginal students into nursing/health care programs. Lakehead University in Thunder Bay offers one of the more proactive recruitment strategies oriented towards attracting students into its Nursing Program. The university currently assigns three faculty members to recruiting Aboriginal students in northern Ontario. Their recruitment activities include:

- Attending career fairs in First Nation communities;
- Making presentations at high schools that have growing Aboriginal student bodies;
- Advertising in community newspapers and magazines;
- Advertising in in-flight magazines for Aboriginal communities

An Elder is also part of the recruitment team, and helps to provide guidance and advice to interested students. The program has found that one of the most effective methods of recruitment of interested youth was by word of mouth.

## 2.1.8. Career Fairs in Nunavut

Career Fairs offer youth an opportunity to explore career options in a supportive and enthusiastic milieu. In Nunavut, there is one career fair option for promoting nursing and health careers in Nunavut.

### Baffin Regional Chamber of Commerce – Career Fairs

The Baffin Regional Chamber of Commerce (BRCC) coordinates one-day career fairs for Baffin communities, at which employers and employment/training organizations are invited to meet and interact with community members. The primary event is the career fair, where participating organizations set up booths and display materials. The community is invited to attend and ask questions, and participate in learning events.



Attending organizations are also invited to make presentations to local schools, and to meet with individuals and community groups as well. The BRCC plans to visit every community in the region at least once in two years.

## 2.2. International Models

A number of countries, including New Zealand, the United States, and Australia, have recognized the need to increase the recruitment and retention of Aboriginal nurses to develop a more stable, culturally competent nursing workforce. The following examples offer insights into some of the innovative and successful programs that have been established beyond our borders.

### 2.2.1. New Zealand – School of Population Health, Faculty of Medical and Health Sciences, University of Auckland

*Whakapiki Ake – Welcome* is an initiative of the School of Population Health, Faculty of Medical and Health Sciences, University of Auckland to increase the recruitment and retention of Māori students into the health care sector. *Whakapiki Ake* is comprised of a number of programs and supports that have been developed specifically to meet the needs of Māori students. There are three primary components to the program.

*Hikitia Te Ora* (Certificate in Health Sciences) is a one-year Foundation Program which prepares Māori and Pacific students for tertiary study in a range of health-focused courses. The Certificate is directed at youth, including both high school graduates and those who have dropped out prior to graduation, to provide a means of bridging the gap between secondary and post-secondary education.

The program focuses upon sciences, social sciences mathematics and Māori and Pacific Health. It develops and strengthens academic skills from note-taking to critical thinking. Successful graduates are eligible to apply to a number of health care degrees or diplomas.

The COACH program – Career Opportunities After Certificate in Health Sciences – is the second primary element of the *Whakapiki Ake* initiative. The primary goal of COACH is to encourage Māori high school students to consider careers in health care. The program brings Māori youth to Auckland to participate in three days of activities, and exposes them to life in the city. Delivered during summer, the program includes:

- A day at the local District Health Board working in a clinical workplace;
- A day at the University of Auckland getting an introduction to the program, a campus tour, meeting with staff and students, visiting accommodations, and a night program involving Māori health professionals working/studying in health;
- A day in workshops on various University of Auckland departments, student evaluations and traditional Māori cultural events.

Summer Exposure, the third element of the *Whakapiki Ake* initiative, provides work-experience for *Whakapiki Ake* students via the National Research Centre for Growth and Development (NRCGD), the Department of Physiology and the School of Pharmacy.

Each student experiences:

- A collaborative program involving a number of hosting departments;
- Hands on work-experience in a lab setting;



Susie Pearce – Public Health Nurse  
“Mending the seal pelt she just finished skinning”  
Source: Sheyla Kolola 2009

- Face-to-face contact with scientists;
- Opportunities to network with University of Auckland nursing/medical students;
- Workshop presentations with professionals with science backgrounds;
- Team-building opportunities through social and sporting activities;
- Hosting their closing ceremony and student DVD presentations.

## 2.2.2. United States – Innovation in Recruitment and Retention – Indians into Medicine (INMED), University of North Dakota, School of Medicine and Health Services

INMED was created in 1973 to respond to increase the number of health professionals in American Indian communities, to increase the number of American Indian health professionals, and to increase the substandard level of health and health care in American Indian communities. To date, INMED has graduated 187 allied health and nursing professionals and 179 American Indian Physicians.

INMED is a support program that identifies recruits, retains, graduates and qualified individuals into the medical professions. To do this, INMED aims to:

- Increase awareness, interest and motivation for health careers among American Indian students;
- Ensure students are recruited and enrolled in the proper curricula;
- Provide academic, personal, and cultural support to aid in successful academic achievement;
- Assist students to complete their programs of study;
- Recruit and grow our own” (the INMED motto).

Specific activities include:

- Summer Institute: — ninety youth, grades seven to twelve, participate in a six-week residential program focusing upon building skills and interest in the health care field;
- Pathway Program: a six-week program for tribal college graduates;
- Medical College Admissions Test Preparation: six-week program to prepare college juniors and seniors for MCAT;
- Pre-matriculation Program: for incoming medical students.



Sipporah Peterloosie and Martha Nowdlak learning how to care for a newborn.  
Source: Lisa Bourque 2004



# 3

## Summary of Findings

### 3.1. Scope and Scale of Consultations

The primary source of data for this project was the knowledge and experience of a wide range of Nunavut informants. To this end, a list of key informants representing major stakeholders in health care was developed in cooperation with the Advisory Committee overseeing the project. Organizations included GNHSS, District Education Authorities (DEAs), HC, NAC, and NTI. Other informants included community health centre staff, Inuit nurses working at the Qikiqtani General Hospital, and Inuit students attending the Nursing Program. In total, forty-two interviews were completed. A complete list of interviewees is included as Appendix 7.2.

To open the consultation to broader public and community input, focus groups were also initially scheduled in six communities; four were completed, involving a total thirteen participants. Focus groups participants included community representatives, community health workers, wellness workers, hamlet representatives, elders and youth.

The following section summarizes the key findings, derived from the interviews, focus group sessions and document review. These findings served as the basis for the development of the recommendations in Section Four.

**“High school graduates are graduating without sufficient numeracy, science, and literacy skills. They have to spend a year upgrading these skills before they enter the nursing program, and even then their skills may be insufficient to meet the challenges of the Program” -**

NUNAVUT ARCTIC  
COLLEGE EMPLOYEE.

### 3.2. Barriers and Challenges to Recruitment of Inuit into Nursing Careers

The findings for this section have been summarized under four headings.

- K-12 Education
- Lack of Promotion of Health Careers
- Foundations Program
- Current Recruitment Strategies

#### 3.2.1. K-12 Education

One of the critical barriers to the entry of Inuit youth into the nursing profession is the quality of education they receive in the elementary and secondary school system. While the number of the high school graduates has increased in recent years, too many graduates are leaving high school without the level of math, science and English/Inuktitut skills required for the Nursing Program. This was attributed to:

- English as the language of instruction;
- A curriculum that does not sufficiently reflect or support Inuit culture and society;
- A lack of capacity at the secondary school level to provide adequate teaching or tutorial support in these critical areas;
- Lack of adequate infrastructure and resources to support the development of stronger science skills;
- An educational system that has tended to place an emphasis on “social passing” rather than competency in basic skills;
- A lack of career counselling in high school; and
- A lack of interest in pursuing these courses on the part of students.

#### 3.2.2. Lack of Promotion of Health Careers among Inuit Youth

Careers in health have not been strongly promoted to Inuit youth. Visits to local health centres and the Qikiqtani General Hospital tend to reinforce the idea that nursing and health-sector jobs are filled only by non-Inuit. A shortage of Inuit role models in nursing and health care has exacerbated this perception; and efforts to recognize and celebrate Inuit nurses have been limited to date.

There is a widespread (and accurate) perception that nursing can be a very stressful profession, requiring a high level of education and dedication. Meeting these challenges is in some instances seen as too difficult, especially when other less stressful and demanding employment options are available. Visits to health centres and hospitals often involve anxiety and stress, which may contribute to a negative impression of the sector among young Inuit.

Many Inuit youth are simply unaware of the many career options available in the health care field. There are many “gateway” tasks and functions (e.g., taking blood samples) that could introduce young Inuit to the sector, and potentially stimulate interest in further study and employment in health.

### 3.2.3. Nunavut Arctic College Foundation Program

Students attend the ten-month Foundation Program to upgrade their academic skills. The Program is, for many, an essential precursor to successful entry into the Nursing Program: providing funding to support students in the Program would attract more students, and to enable them to focus on their studies without undue financial pressure.

The Foundation Program has, until recently, only been offered in Iqaluit, requiring that many students spend ten months away from their families and communities. Issues such as loneliness and homesickness have caused a number of students to withdraw from the course. To help address these issues, the NAC has extended the Program to Cambridge Bay and Rankin Inlet.

Several informants noted some disappointment with the Foundation Program, both across the country and within Nunavut. In their view the Program had not produced graduates with the skills required to meet the needs of nursing programs.

### 3.2.4. Current Recruitment Strategies

The methods currently followed by the GN HSS and the NAC for recruiting nurses and students to the Nursing Program are described in an earlier section of this paper. Informants suggested that there was significant room for improvement in these efforts.

Several informants noted that the GN HSS/NAC did not have a budget for student recruitment, unlike programs such as the Nunavut Teachers Education Program (NTEP) unlike the Akitsiraq Law Program which has dedicated resources and supports to recruit Inuit into law studies.

Other informants noted that GN HSS had committed resources to recruitment of nurses from the Philippines, but were perceived to be doing little to recruit and support Inuit nurses to the same degree.

Most informants view the GN HSS's 2007 recruitment and retention strategy as a positive step. Some recommended that it should place a greater emphasis on improving the educational foundation of Inuit students, and less emphasis on hiring Agency Nurses. Suggestions to improve recruitment of Inuit students included having nurses visit high schools more often, promotion of health careers as an option for Inuit youth, and building better school-work linkages.

## 3.3. Challenges and Barriers Affecting the Retention of Inuit Nursing Students and Inuit Nurses

The findings for this section have been summarized under the following headings:

- Inuit Students in the Nursing Program
- Inuit Nurses Employed in Nunavut

### 3.3.1. Inuit Students in the Nursing Program

A number of barriers and challenges limit the ability of Inuit students to complete the Nursing Program.

Inuit tend to have children at a younger age than other Canadians and many Inuit students in Nursing Program have young families. The assumption of family



Ataguttaaluk High School, Igloodik.  
Nunavut Arctic College 2005

**“We should be investing more into encouraging Inuit to become nurses rather than going around the world to recruit nurses”-**

EXECUTIVE DIRECTOR  
OF REGISTERED NURSES  
ASSOCIATION OF THE  
NORTHWEST TERRITORIES  
AND NUNAVUT





Susie Pearce and Pallulaaq Ford demonstrating techniques on how to remove a cast from a patient  
Nunavut Arctic College 2005

responsibilities for young parents is a challenge under any circumstances; serious issues can arise when one parent is attempting to complete a challenging four-year degree program in nursing. Beyond the demanding academic workload, stressors related to housing, childcare, finances and regular family life have proven insurmountable for some students.

In several, Nunavut's K-12 education system does not adequately prepare students for post secondary, so many Inuit students begin the Program with marginal skill levels in the key subject areas of math, science and English literacy, and require upgrading during their first year coursework; this need can contribute to already high levels of stress.

Inuit students have access to a number of financial supports, including Financial Assistance for Nunavut Students (FANS), the Regional Inuit Development Organizations, and various scholarships and bursaries (including Queen Elizabeth II Awards and Science Awards from the Nunavut Research Institute; Christine Egan Award; Northern Nurses Memorial Fund — Clinical Excellence Award; and National Aboriginal Achievement Foundation). Financial pressures, however, continue to be an issue for many. Most non-Inuit nursing students had part-time jobs; but the combination of academic disadvantage and family responsibilities that characterize most Inuit students meant that little time was available for part-time work while the program was in session. An increase in student financial assistance would relieve that stress and allow students to concentrate on their studies.

Students often return to their home communities during holidays and the summer break. While home ties are critical to wellbeing and rest, some students are unable to find jobs to supplement their living expenses, or decide not to return to the nursing program during these breaks from the Program.

Several informants noted that the current Nursing Program was based on a southern model which did not adequately reflect Inuit culture or relevancies, or treat Inuit as equals. It was suggested that incorporating more elements of Inuit culture in the curriculum would increase Inuit students' level of comfort, and thus the number of successful graduates.

Students from other communities attending the Program in Iqaluit often face periods of loneliness and homesickness. More social programming for students was identified as a way to help Nursing Program students stay active and healthy, reducing the likelihood of loneliness, depression, and self-destructive behaviours like substance abuse. Nunavut Arctic College is currently seeking to address this issue via a recently filled position of social coordinator.

Students that begin to fall behind or need additional help can currently request assistance from a tutor provided by the NAC. However, there is a need to establish mentorship supports to assist the nursing students on a number of levels beyond academic support. Mentors can provide an important link between school and the eventual career placement, and provide valuable guidance regarding course selection, specialized areas of healthcare, and overall support. No formal mentorship program is in place, due in part to the challenges associated with finding nurses willing and able to mentor students, particularly during the practicum portion of the Nursing Program and the successful graduate's first years as a trained nurse. Mentorship of students was identified as a critical support in helping students through both academic challenges and supporting the transition from school to the workplace.



It was noted by that a significant number of Inuit students decide to explore other non-health careers. Becoming a nurse requires a four-year commitment, and an affiliation with Dalhousie University has helped ensure high standards are maintained in the Program. However, many other jobs in Nunavut are available with equal or better pay and require less training and education. There is currently, and for the foreseeable future, strong competition among employers for educated and skilled Inuit.

### 3.3.2. Inuit Nurses Employed in Nunavut

Many issues affect the retention of both Inuit and non-Inuit nurses in Nunavut. Hard work, long hours, shift work, and high stress levels are part of the profession, regardless of education or ethnic background. Successful Inuit Nursing Program graduates, however, face a number of unique retention challenges when entering the workforce upon graduation.

One of the primary challenges to the retention for Inuit nurses is a perceived lack of equitable treatment with Agency Nurses. Agency nurses work under contract for specified periods of time. In return they receive a number of benefits in addition to their salaries, housing, paid trips south, and other incentives. Inuit nurses, like all nurses working for GN HSS, are covered by a collective agreement that provides a series of bonuses related to length of term of service<sup>14</sup>, but some do not receive housing assistance or vacation/travel supplements.

The high cost of living was cited by a number of informants as a barrier to the hiring of non-Inuit nurses and the retention of Inuit nurses. This is exacerbated by increasing competition from other jurisdictions for nurses.

- As of April 1, 2009, new nurses in Nunavut will be paid \$36.93/hr as a starting salary. The top salary is \$41.92/hr.
- Alberta offers nurses with five years of experience \$48.00-\$50.00/hr.
- Other provinces are offering additional incentives. Alberta offers \$50,000.00 bonus for 2 year service contract; other provinces offer \$36,000 bonuses. Nunavut offers \$5,000.00 for no-return service, with gradual increases as the nurses stay longer.
- In Western Canada front-line health care workers are offered additional bonuses beyond what is offered in Nunavut<sup>15</sup>.

This discrepancy in pay and inequity in treatment is important; some Inuit respondents report a perception that Inuit nurses are not being treated as the equals of Agency Nurses, even if some agency nurses have little job experience.

A number of informants with particular expertise in the health care field noted that the complexity of care for some patients has increased. The Home Care Program, for example, sends people home to recover from operations in Iqaluit. Once back in their community, the patient receives home care nursing support. While definitely advantageous for patients in terms of comfort and support, this does increase the burden on nurses in the communities.

It was also pointed out that working conditions can be an important source of stress. Shift work, for example, was identified as being difficult for Inuit nurses, particularly

**“New nurses find being on-call very stressful. Being by yourself, making life and death decisions, and maybe not having total confidence in your new skills, can be highly stressful.”**

GN-HSS NURSE

14. The current Collective Agreement with the Public Service Employees in Nunavut outlines the various bonuses paid to permanent Nunavut nurses, but several informants indicated that these additional payments are falling behind what other jurisdictions are paying.

15. Figures provided by key informant in an interview conducted for this project.

**“If the hospital doesn’t hire our new nurses, what message does that send to our students? We have a huge nursing shortage, yet we don’t hire our own nursing graduates at our own hospital. It doesn’t make sense.”**

FOCUS GROUP  
PARTICIPANT IQALUIT

at night, as many have young families. New nurses often find being “on-call” difficult; it is very stressful to be placed in charge during medical emergencies. In some cases no additional support or “phase-in” period is offered to new nurses during their initial “on-call” shifts.

Inuit nurses entering the field receive no gradual or phased-in introduction to their jobs; they are expected to perform as experienced nurses from their first day on the job. Although they have all necessary qualifications and level of competencies for the position, a transitional period of orientation and adjustment would help alleviate stress.

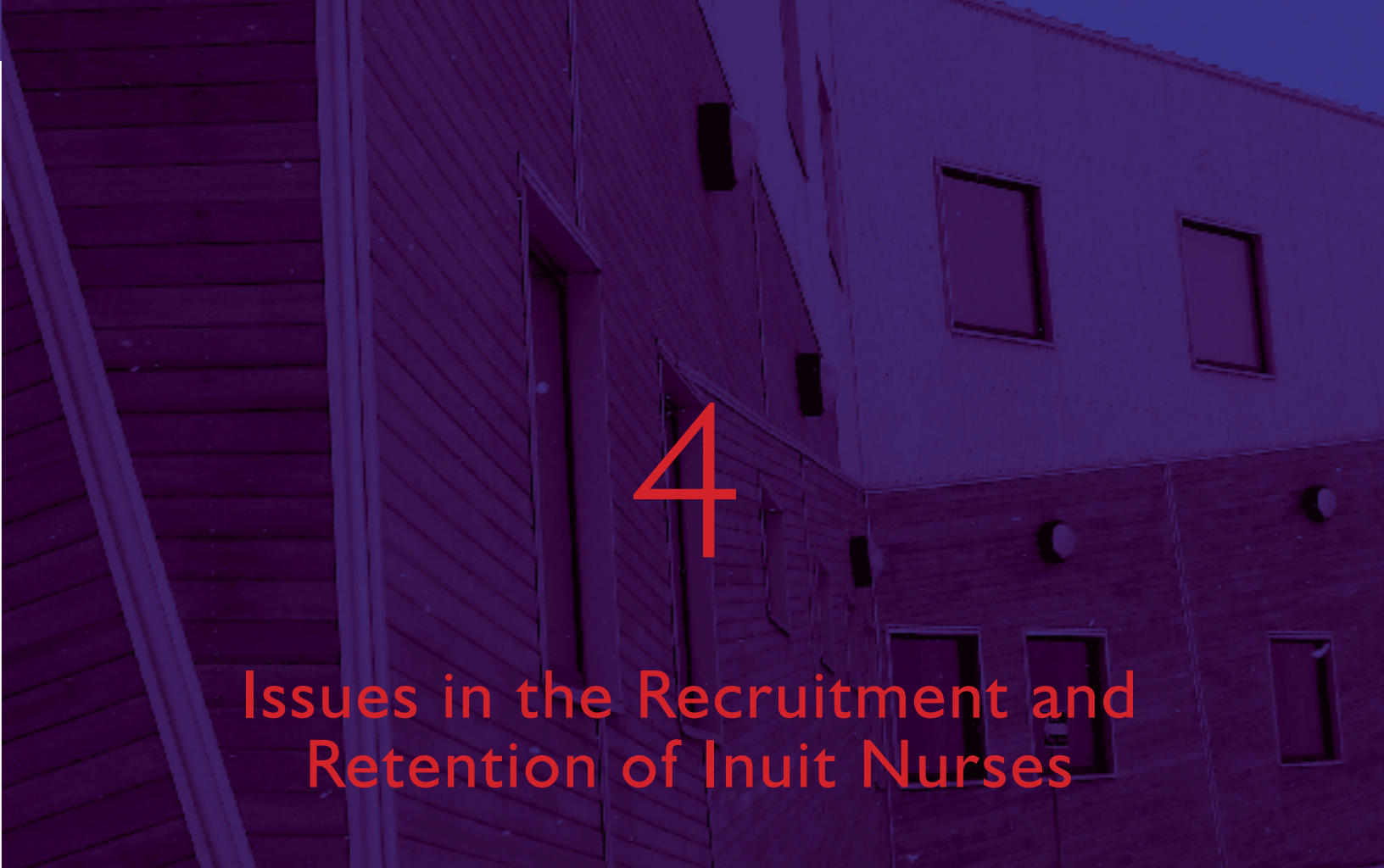
A mentoring program would also help reduce the stress of transition from education to employment, providing an opportunity to build self confidence in the “real-world” application of new novice nurses’ skills and confidence. It was noted that there is a tendency among Inuit nurses to refrain from complaining or asking questions to other staff, as such questions might make them seem unqualified. To address this issue, several informants suggested that formal mentors mandated to encourage questions, provide feedback and offer guidance would provide a welcome source of advice, support, and stress relief.

Non-Inuit nurses often have valuable experience in other health care systems, and different areas of specialization. However, they are generally only in Nunavut for a short time. This, combined with heavy workloads, constrains their ability to pass on knowledge and experience to their Inuit colleagues. Similarly, a significant proportion of Nunavut nurses are over the age of forty. When older nurses retire, the extensive and valuable knowledge and experience they have is all too often lost. Developing a mentoring program would enable this valuable knowledge and experience to be passed on to the remaining nursing staff, deeply enriching their expertise and confidence.

A number of social pressures also impact Inuit nurses differently from non-Inuit nurses. These include:

- Community members will often contact Inuit nurses at home during off hours for advice or assistance, while tending to leave non-Inuit nurses alone during their time off;
- Inuit nurses can be placed in awkward situations when Inuit patients complain about non-Inuit nursing staff;
- Inuit nurses can be expected to translate for family members reducing the time they have to complete their regular duties;
- Family and friends seeking medical assistance can also place Inuit nurses under a lot of stress while on duty by expecting differential treatment; and
- It was reported that Inuit nurses often had to struggle to be able to work in their own communities, although many Inuit prefer to work in their home communities.

Perhaps the most surprising finding from the consultation process was the fact the despite the strong and widely recognized need to recruit and retain Inuit nurses, the Qikiqtani General Hospital does not currently hire nurses without experience, and this is often due to not having a senior nursing staff available to mentor new nursing graduates. One informant noted that a graduate Inuk nurse had to wait so long to get a position at the hospital that she left the nursing field entirely, representing a substantial loss of investment and potential for the GN HSS, the student and Nunavummiut.



# 4

## Issues in the Recruitment and Retention of Inuit Nurses

The following discussion of issues is based upon the findings obtained through interviews, focus groups, and document review.

The intent of this study was to identify and address factors impacting on the recruitment and retention of Inuit nurses specifically, as distinct those affecting all nurses in Nunavut. Many factors that characterize the workplace of all nurses, such as overwork and high levels of stress, have a significant effect on Inuit nurses as well; however, the findings in this section focus more narrowly on the recruitment and retention of Inuit nurses.

Achieving a professional, stable and representative nursing workforce by maximizing the successful recruitment and retention of Inuit nurses will require much more than minor adjustments to the current health care and education systems. It will require profound systemic and attitudinal change, and it will not be achieved overnight. Successful implementation of the following recommendations will require consistent and long-term stakeholder participation and cooperation, and a significant amount of political will. The most critical factor will be a consensus among all stakeholders that the establishment of a representative, professional Inuit nursing workforce that is able to provide effective, accessible and appropriate health care services is fundamental to achieving and improving the health, prosperity and self-reliance of Nunavummiut.

### 4.1. Recruitment of Inuit Nursing Students

#### 4.1.1. ISSUE – Lack of awareness of nursing as a career option for Inuit youth

A primary obstacle to the recruitment of Inuit nurses in Nunavut has been the fact that a large majority of Inuit do not consider nursing as a career option. There are many reasons for this, ranging from the legacy of post-colonialism to a lack of Inuit in nursing positions. Whatever the underlying reasons, increasing the awareness among young Inuit of careers in the health care field is an important step in ensuring that more Inuit enter the profession.

The solution lies in a comprehensive, on-going multimedia campaign to promote nursing as a practical and desirable career option to Inuit students from K-12, using a broad spectrum approach that builds on existing resources and activities while supporting these with new initiatives. Examples such as the Building Environmental Aboriginal Human Resources (BEAHR) have had considerable success in drawing Aboriginal youth into non-traditional, science-based careers ([www.beahr.com](http://www.beahr.com)). Exposure to positive role models and knowledge about the valuable role nurses play in the community can also stimulate interest in nursing careers.



Susie Pearce – Public Health Nurse  
Source : Sheyla Kolola 2009

#### 4.1.2. ISSUE – Need to improve numeracy and literacy skills at the K-12 school levels.

A key finding was the strong dissatisfaction among Nunavummiut with the level of math, science and English/Inuktitut skills of Inuit students graduating from high school. Without proficiency in these areas, students hoping to attend the Nursing Program are required to attend an upgrading year in the Foundation Program, which was formerly known as the Health Careers Access Year Program and, for some students, additional upgrading once they actually have entered the Nursing Program<sup>16</sup>. The Nursing Program is a demanding one, requiring high levels of math, science and English/Inuktitut skills. Without strong literacy, numeracy and science capacity, students are at a serious disadvantage, not just for the first year of the Program but throughout their studies and into their nursing careers. Development of a more representative Inuit nursing workforce is, to a large degree, dependent upon ensuring that Inuit graduating from high school have the full level of skills and literacy that successful graduation should guarantee.

The educational system must be reviewed to determine how the acquisition of math, science and English/Inuktitut skills can be improved for Inuit students. This is clearly a fundamental, long-term and potentially costly exercise; there is, however, no alternative. A successful Inuit nursing and health care workforce can only be based on a foundation of skills and knowledge;

<sup>16</sup>. A Nursing Access Program had been offered by the NAC in the past but was discontinued due to low levels of attendance. Such a program would be more effective in preparing students for entry into the Nursing Program than the Foundations Program as it would be more tailored to the specific requirements of nursing. To ensure a NAP is successful, it would need to be developed in collaboration with a nursing facility.

#### **4.1.3. ISSUE – Lack of linkages between the school system and the health care system**

Another element missing in the current educational system is the lack of linkages between schools and health centres. Stronger formal connections could foster interest in nursing and health care as a career option, while providing students with valuable learning experiences about the stimulating and rewarding aspects of the field.

Measures are therefore required to encourage students K-12 to consider careers in health care by building linkages between schools and health centres. An initiative can be undertaken to promote careers in health care through a course of study in high schools, as has been done for Trades and Engineering.

#### **4.1.4. ISSUE – Foundation Program**

For the foreseeable future, a significant proportion of Inuit students intending to apply to the Nursing Program will require skills upgrading after they graduate from high school. The current Foundation Program delivered by the NAC needs to be reviewed to ensure it provides the skills and knowledge students will need to succeed in the Nursing Program. Measures are also needed to make the program more widely accessible; finally, consideration should be given to re-establishing the Nursing Access Program.

#### **4.1.5. ISSUE – Funding for Recruitment Activities for GN HSS and NAC**

Currently neither the GN HSS nor the NAC receive funding specifically for the recruitment of Inuit nursing students. Recruitment efforts for the Nursing Program have been mostly limited to advertisements in local papers and on community radio stations. By contrast, the Nunavut Teachers Education Program receives funding for student recruitment and actively pursues potential students including visiting students attending courses in other provinces. Comparable funding should be provided to the NAC and the GN HSS for recruitment of Inuit youth.

#### **4.1.6. ISSUE – Lack of linkages between high school students and the Nursing Program.**

Students will be better prepared for the Nursing Program if they participate in an orientation to the Program and the health care field by the nursing students and health care staff. Interested students in all communities should have basic travel costs covered for a one or two-day orientation visit. Elements of this orientation could be incorporated into the BRCC Career Day visits by NAC staff and nursing students and health care staff.

#### **4.1.7. ISSUE – Recruitment of Inuit into non-nursing health care careers**

Increasing the number of Inuit in the health care field will improve the quality and level of access to health care services in the communities; it will also provide an important opportunity for more Inuit to consider a career in nursing. Community Health Representatives, home-care workers, medical interpreters and other non-professional staff should be encouraged to build upon their knowledge and experience and upgrade their qualifications in the health care field, through participation in a pre-nursing or nursing assistant program.

*Achieving a professional, stable and representative nursing workforce by maximizing the successful recruitment and retention of Inuit nurses will require much more than minor adjustments to the current health care and education systems.*



One of the primary challenges facing Inuit nursing students are the pressures placed on them by their family and economic situations.

## 4.2. Retention of Inuit Nursing Students

The current first year of the Nursing Program started with twelve students. As of February 2009, only four remained, three of whom were Inuit. The dropout rate in the Program is a serious problem, and highlights the need to improve the skill level of students entering the Program, and to provide more effective support to students once in the Program.

The Program is challenging for all students, regardless of academic and social background. The challenge is particularly acute for students with below standard academic skill levels, or those raising young families; these disadvantages frequently lead to frustration, disappointment, and departure. Each dropout represents a substantial loss of investment on part of the students, and of all Nunavummiut.

Overcoming these barriers and challenges will be critical to ensuring the successful development of an Inuit nursing workforce. While resources and effort will be required to increase the retention rate of Inuit students, the net gain in both financial and social returns will be significant.

One of the primary challenges facing Inuit nursing students are the pressures placed on them by their family and economic situations. Many have young families, often relocated from other communities. Most lack sufficient resources, beyond FANS and scholarships, to provide for themselves and their family over the course of their studies. Housing, daycare, family support, social relationships all impact directly on the performance of the students and their ability to focus on their studies.

### 4.2.1. ISSUE – Preparation of Students and Their Families

Recruitment and orientation processes and materials for Inuit students should include a detailed and realistic description of the academic and social demands they will face. Interviews should be conducted with the prospective students and their families to ensure they all have a realistic understanding of how much work and dedication a nursing student's life will entail.

Students unfamiliar with Iqaluit should be provided with information on supports and resources available, as well as a description of processes and resources to help settle families in the community. Without adequate family support, students will not complete the Program.

Students themselves need to be fully apprised of the workload, difficulty level and time requirements needed to be successful in the Program. This information could best be provided by current students and NAC staff, perhaps in separate sessions. The orientation process should include a visit by prospective students to the Program either in their last year of high school or at least prior to their application and also visits from the health care providers from QGH, Public Health, Home Care, Mental Health and Elders who have caring knowledge around health.

### 4.2.2. ISSUE – Support for Nursing Students

A number of issues add to the level of stress and frustration among students attending the Program; some are persistently identified by respondents as a primary cause for student drop-out. These include

- **Housing** — The availability and adequacy of housing is a matter of concern across Nunavut, and a major challenge for many students. Single students without families are housed at the old Residence building in Iqaluit. Students with families have



been housed there in the past, but there are plans to provide newer housing units to families in 2009. Students need comfortable, safe and adequate housing to be able to focus adequately on their studies, and current housing resources need to be reviewed to provide the best housing possible for students. Students also need to be secure in their housing and not be overly concerned about losing their housing status if they fail a course or fall behind.

- **Childcare** — Most Inuit students have young families, adding to the already weighty burden of their extensive academic responsibilities. Childcare spaces are at a premium in Iqaluit, and are expensive for students.
- **The cost of living** is much higher for Nunavut students than for their southern counterparts. Inadequate levels of funding have been identified as another important stressor.
- **Social support** — Students arriving in Iqaluit may not have family members or other social support systems available to help them at a difficult transitional period when they most require moral support, childcare support, orientation to resources and services available in the community, or a feeling of community and belonging. Steps need to be taken to help create social networks with students who may be alone in Iqaluit.
- **Academic Support** — Inuit students attending the Nursing Program often require pedagogical support to shore up weak academic areas and to help guide them through their studies.

#### 4.2.3. **ISSUE – Make the Nursing Program more reflective of Inuit culture**

The current Nursing Program is based upon, and offered in conjunction with, the Dalhousie University School of Nursing. While the Program has been very successful in many ways, ‘cultural shock’ can alienate Inuit students and exacerbate a feeling of being overwhelmed by the Nursing Program culture. While most aspects of the Nursing Program are rigidly structured to achieve clear objectives and national guidelines and requirements, there is a critical need to adjust certain elements of the Program to help accommodate Inuit culture and values.

#### 4.2.4. **ISSUE – Building and strengthening linkages to health careers**

Inuit students face a number of challenges when making the transition from the Nursing Program to the work place. That transition can, to some degree, be eased by building stronger linkages between the Program and the workplace. Successful graduates will feel a stronger sense of identification with the profession, have a higher level of awareness of the actual conditions of employment, begin their career with mentorship connections and support, and will more likely find positions that reflect their true interests and abilities.

Beginning the second year of the Nursing Program, students should be encouraged to consider which area of nursing they are interested in. Mentorships should be established between the students and health care professionals/nurses from a range of health care areas. Mentors could support students in choosing an area of nursing to pursue upon graduation, and provide moral and indirect academic support to the student throughout the Program, including facilitating decisions on the student’s practicum location.



Nunavut Arctic College –  
Cambridge Bay  
Source: David Boulton

### 4.2.5. ISSUE – Lack of recognition of Inuit nurses

Graduating from the Nursing Program is an important achievement and should be widely acknowledged and celebrated. The graduation ceremony marks the successful achievement of a critical goal not only for the students themselves, but for Inuit and all Nunavummiut. It should be both an occasion for celebration in its own right, and an important opportunity for promoting the Nursing Program and profession.

## 4.3. Retention of Inuit Nurses

Many retention issues that impact on nurses across Nunavut are part and parcel of nursing in any country or culture. The profession demands physically and mentally challenging work, long hours, shift work, high stress levels and deep personal commitment, regardless of ethnicity.

There are, however, a number of factors that place additional pressures and stresses on Inuit nurses — some are largely distinct from those affecting non-Inuit nurses, while others are a question of degree. In both cases, steps must be taken to address the short, medium and long-term factors affecting the retention of Inuit nurses to ensure that Nunavut develops a representative, professional, and culturally competent nursing workforce.

### 4.3.1. ISSUE – Improved hiring policies

Currently the Qikiqtani General Hospital does not hire nurses without experience<sup>17</sup>. This is an obvious barrier to recent graduates, and has forced fully qualified Inuit nurses to seek employment elsewhere, or, in some cases, to withdraw from the health care field entirely. This policy is clearly in contradiction to the intent and spirit of the current project, and the philosophy of encouraging the development of an Inuit nursing workforce for Nunavut. The policy needs immediate review and revision, with the goal of promoting the hiring of new Inuit nurses and providing a supportive environment to assist with their transition from new graduates to professionals. Priority hiring of Inuit nursing graduates is one of the actions identified in the GN HSS's Nurses Recruitment and Retention Strategy (2007).

Having a stable, contented, local nursing workforce is a key to establishing an effective, appropriate and professional health care service in Nunavut. Where possible, Inuit nurses should be permitted to select the communities in which they wish to serve. With a significant percentage of the current indeterminate nursing workforce in Nunavut approaching retirement age, accommodating the choices of Inuit nurses should become easier over time.

### 4.3.2. ISSUE – Equity between Agency nurses and Inuit nurses

There is a growing perception among Nunavummiut that Inuit nurses are not being treated fairly by the current health care system. Agency nurses receive higher salaries and greater benefits, housing allowances and paid flights in and out of Nunavut. Interviewees acknowledged that Agency nurses are required to meet the short and medium term health care needs of Nunavut; many, however, questioned the large



Source: David Boulton

17. This Strategy guarantees all nursing program graduates employment but does not specify whether this would include the hospitals (page 10).

disparity between them and Inuit nurses. There was a strong sense of needing to “bridge the gap” between these casual nurses and the indeterminate nursing workforce, including Inuit nurses; more generally, there is a need to ensure that Nunavut can compete for nurses with other jurisdictions in Canada. Nunavut cannot afford to lose any of its Inuit nurses to other jurisdictions and must reduce the current inequity.

#### 4.3.3. ISSUE – Workplace Support for Inuit Nurses

Nursing is a challenging profession; and many of the stressors common to the field are exacerbated by the social, economic and geographical realities of Nunavut. The following recommendations will help alleviate some of the major identified stresses for Inuit nurses, and help to develop a stronger and healthier workplace environment for all.

##### Mentorship

To begin with, the nursing profession in Nunavut must be encouraged and supported to build a culture of mentorship to facilitate the exchange of this knowledge and expertise. Past efforts to establish a mentoring program for new nurses entering the field were halted due to staff availability and work loads. Nevertheless, it is clear that Inuit nurses would benefit from a formal, structured mentoring program to match new nurses with more experienced nurses in their field of interest.

The mentoring program should be linked with the mentorship strategies proposed earlier in this report vis-à-vis the Nursing Program, and extended to all health centres in Nunavut. The participation of experienced nurses in this program will require their time and commitment, as well as a concomitant increase in the overall budgets for nursing staff; it is anticipated, however, that the increased retention rate of Inuit nurses will, over time, help offset these costs. The Program should be considered a mandatory service.

##### Cross-Cultural Training

Non-Inuit nurses currently receive no cross-cultural training prior to their arrival or during their tenure<sup>18</sup>. The lack of cultural competency has, on many occasions, caused unnecessary and avoidable misunderstanding and tension between Inuit and non-Inuit nursing staff. Lack of cultural orientation, sensitivity and adaptation has also been an impediment to effective delivery of health care service to Inuit by non-Inuit staff. Cultural orientation and training developed and delivered by Inuit for new arrivals to Nunavut must be mandatory for the health care sector.

##### Stress Management

Inuit nurses, particularly early in their careers, often find it difficult to achieve an appropriate life/work balance. Family pressures can quickly build, and are often exacerbated by shift work and working nights. There are several measures that could alleviate that stress.

- Set work schedules for nurses in advance. The more notice Inuit nurses have, the better they can plan their personal lives and family schedules, reducing stress in both their professional and personal lives. One option would be of setting permanent/Inuit nurse schedules similar to those established for Agency nurses, who know how long their rotations will be and when their breaks are scheduled.

**...the nursing profession in Nunavut must be encouraged and supported to build a culture of mentorship to facilitate the exchange of this knowledge and expertise.**

18. The 2005 RNANT/NU Nunavut Nurse Recruitment and Retention Survey indicated that no cultural orientation took place for nurses, and 20 per cent reported that they had not received any orientation at all.

- New Inuit nurses should be supported during their first year of being “on-call”. This was identified as an important source of stress and concern for Inuit nurses as it placed a huge responsibility on new nurses who had not yet developed confidence and experience to deal with emergencies. As well, major difficulties and stresses were reported as childcare can be exceedingly difficult to find on short notice. Consideration should be made to include some support from mentors during the first year of “on-calls” for new Inuit nurses.

#### 4.3.4. ISSUE – Professional support for Inuit nurses

A number of professional supports were identified that would assist in the retention of Inuit nurses.

Inuit nurses should be publicly recognized and celebrated for their success and their contribution to Nunavut. A public recognition program should be established to highlight their achievements annually. This program should be integrated with the promotional campaign oriented to young Inuit.

Inuit nurses need access to new learning opportunities to keep their skills current and to broaden their experience. To provide such opportunities, exchange and professional development program linkages should be established with a wide range of hospitals across Canada, including institutions with areas of specialization that Inuit nurses will require. Exchange programs with other jurisdictions across Inuit Nunaat could also provide additional benefits, encouraging networking and mobility within an Inuit/Northern context.

Where possible and practical, the Inuit language should be promoted within the healthcare workplace. This may be most effectively undertaken in coordination with an HSS review of the Inuit Language Protection Act, which mandates strong efforts to promote use of Inuit language in all government workplaces.



Source: David Boulton



# 5

## Recommendations

The key to addressing current and future nursing shortages in Nunavut will be the successful recruitment and retention of Inuit nurses. This ambitious goal will require long-term cooperation, dedication and political will on the part of many stakeholders in the development of an integrated, multi-party strategy to develop a sustainable workforce of Inuit nurses, at all levels of the profession — from bedside to senior management positions.

Many of the following recommendations mirror or complement elements of the GN HSS Nunavut Nursing Recruitment Retention Strategy (2007). The current recommendations are intended to supplement that important document by identifying approaches to address recruitment and retention issues that limit the participation of Inuit in the nursing workforce of Nunavut. It is hoped that the recommendations of this study can be integrated with the Territorial Nursing Strategy, which also includes Inuit-specific action items.

The following section provides recommendations and proposed actions to be implemented in the short term (0-2 years — April 1, 2009 — March 31, 2011), medium term (up to 5 years — April 1, 2009 — March 31, 2014), and longer term (greater than 5 years — April 1, 2009 beyond March 31, 2014).

Each recommendation is followed by the proposed action(s) necessary to implement it. A number of recommended initiatives overlap in scope and application, offering the potential for increased impact and savings in both human and financial resources.

It is understood that a detailed strategic plan for the implementation of these recommendations will be contingent on acceptance of the recommendations, and their concomitant responsibilities, by the various authorities participating in this project.

Finally, it should be emphasized that these proposed actions are not meant to replace any part of the GN Nunavut Nursing Recruitment and Retention Strategy (2007), but to complement and inform its actions to address the specific issues limiting the effective recruitment and retention of Inuit nurses.

## **Recommendation ONE:**

### **Adapt the Nursing Program to better reflect Inuit culture and values.**

#### Short Term

- Increase student financial aid to Inuit nursing students to adequately provide resources and support for a healthy, safe and stable quality of life while studying

#### Medium Term and Long Term

- Emphasize culturally appropriate learning/teaching strategies (learning by doing and watching, using a hands on approaches).
- Utilize Inuit instructors where possible.
- Encourage Inuit nursing students to conduct seminars on traditional healing methods and perspectives.
- Integrate Inuit resource materials into the curriculum where possible; consult with the Nunatsiavut Government on incorporation of elements of Inuit culture into their nursing program.

## **Recommendation TWO:**

### **Identify and eliminate systemic barriers to Inuit employment.**

#### Short Term

- Review existing staffing and training policies and plans addressing the hiring of nurses at the Qikiqtani General Hospital, and identify obstacles and barriers to the hiring of Inuit nurses, including selection criteria and weighting, recruitment methodologies, job requirements, and others.
- To the extent compatible with quality of service, public safety, availability and existing contractual arrangements, establish targets for hiring of Inuit nurses.
- Conduct in-depth comparative analysis of salaries and benefits paid in Nunavut to health care workers, including Nunavut resident nurses and Agency nurses. Factor in additional costs associated with offshore recruitment, selection, relocation, housing, benefits, travel assistance etc.
- Set work schedules for nurses in advance.
- Give Inuit nurses priority choice on shift selections and rotations.

#### Medium Term

- Implement staffing plan for territorial institutions and organizations; monitor achievement of targeted results, and adjust both strategy and intake projections depending on outcomes.



Inuksuit High School, Qikiqtarjuaq  
Source: David Boulton.



- Develop an orientation program, integrating mentorship, to introduce new Inuit nurses to the workplace and the culture of institutions like hospitals.
- Provide new Inuit nurses with list of potential postings by middle of fourth year of program.
- Give Inuit nurses priority selection of communities to work.
- Negotiate funding and terms required to address existing inequities in pay and benefits; budget for transitional period in which benefits and salaries of all nurses will be incrementally adjusted to achieve equity

**Recommendation THREE:  
Develop a culture of mentorship**

Short Term

- Integrate mentorship-related recommendations in this report into a comprehensive mentorship strategy, beginning with linkages to Nursing Program students, and continuing through to initial employment.
- Team up nurses with aspiring students for one-on-one mentoring over the course of their studies. Goals will include providing problem solving and learning support; assistance in choosing areas of specialization and a nursing career path; and introducing students to actual working environments.
- Continue to provide mentorship and contingency planning support for Inuit nurses during their first year of being “on-call”.

Medium Term

- Review current job descriptions and employment contracts, and revise to formally incorporate responsibility for mentorship as an integral element of the job.
- Develop mentorship program materials to prepare nurses for this enhanced role.
- Implement mentorship program.

Long Term

- Assess cost, effectiveness, and actual impact of mentorship strategy.
- Revise materials and approaches to reflect evaluation findings.

**Recommendation FOUR:  
Introduce measures to prepare students for  
success in nursing programs**

ShortTerm

- Establish an “Orientation to Health Care” strategy. Elements could include:
- Field program, allowing primary and high school students to observing nursing students and health care staff at work.
- Introduction of high school students to various aspects of health care — public health, chronic care, home cares, and other levels of specialization, and inclusion of health care-related activities into school curricula

**It is hoped that the recommendations of this study can be integrated with the Territorial Nursing Strategy, which also includes Inuit-specific action items.**

*The key to addressing current and future nursing shortages in Nunavut will be the successful recruitment and retention of Inuit nurses.*

- Support for the creation of science or math clubs
- A recruitment package for Inuit students that includes a detailed and realistic description of the academic and social demands of student life. Follow delivery by interviewing prospective students and their families to ensure they all have a realistic understanding of the Nursing Program's demands
- Brochure on the supports and resources available in Iqaluit for those students coming from smaller communities, including resources to help settle the family in once they arrive in the community.
- Review existing funding and support programs for the creation of summer employment, and identify resources to design and implement a coordinate Summer Employment Program.
- Increase the number of tutors with math and science backgrounds, and provided focused support to students with demonstrated interest and aptitude for sciences and math.
- Budget for additional resources such as laboratory equipment.
- Encourage nursing-focused participation in science fairs, science camps and nursing camps.
- Conduct a formal evaluation of the Foundations Program to assess its strengths and weaknesses, with the goal of increasing its success in improving the math, science and English/Inuktitut skills of Inuit students.
- Assess costs and benefits of re-establishing a restructured Nursing Access Program to match the needs of the students. If interest is high and costs are reasonable, initiate design and promotion of the Program.

#### Medium Term

- Develop science curricula that reflect Inuit cultural realities and experiences.
- Implement evaluation recommendations related to the Foundations Program.
- Deliver the Foundations Program in the larger communities, depending upon financial resources and interest, and expand to smaller communities as student numbers, resources and levels of interest warrant.
- Implement program and provide summer employment options in the health care field for nursing students.
- Design a pre-nursing program or a nursing assistant program incorporating best practices from other jurisdictions.
- Encourage Community Health Representatives, home care workers and other non-professional staff to build upon their knowledge and experience, and upgrade their qualifications in the health care field by participating in a pre-nursing or nursing assistant program.

Long Term

- Revise high school curriculum to incorporate higher levels of math and science, with hands-on training in the field of health care.
- Establish co-op programs to strengthen the links between the high school, the Nursing Program or other post-secondary pursuit, and employment in the health care field.

**Recommendation FIVE:  
Increase the level of support available to  
Inuit students in the nursing program.**

Short Term

- Increase the overall level of tutoring support.
- Introduce tutors to the nursing class early in the year, pairing them individually with students to assess strengths and weaknesses, monitor student progress, and assist with learning, problem solving, and other areas of need.

Medium Term

- Ensure that students have readily available, quality housing.
- Ensure that students have access to affordable, quality childcare.
- Set aside childcare spaces for use in the community by Nursing Program students.
- Establish day care services for students that are relatively close or within the NAC campus.
- Ensure that financial assistance currently available to Inuit nursing students meets their level of need.
- Review and evaluate the current financial assistance resources available to students. Consult with current funding agencies to explore avenues to expand financial resources where required.
- Consider requiring a commitment by funded nursing students to work for a set period of time within Nunavut in exchange for a gradual forgiveness of debt.
- Consider a payment structure for Inuit Nursing students in good standing.
- Support the creation of social networks for students who may be without family and/or friends in Iqaluit.
- Integrate workshops dealing with various life-skills (time management, budgeting, and library research skills) into curricula.



Susie Pearce – Public Health Nurse  
“Mending the seal pelt she just skinned”  
Source: Sheyla Kolola, Iqaluit NU 2009

## **Recommendation SIX: Introduce measures to support Inuit Nurses**

### Short Term

- Establish a process and schedule for the identification of professional development needs among nurses, beginning with an exit assessment following certification.
- Develop process and materials, and assign responsibility, for conduct of an annual assessment of learning and professional development needs, incorporating incumbent feedback and supervisor input.

## **Recommendation SEVEN: Promote nursing as a career choice for Inuit**

### Short Term

- Prepare a plan, schedule, budget and evaluation framework for a comprehensive and on-going promotional strategy to educate Inuit students from K-12 about nursing as a viable career option for Inuit youth. The strategy would recognize and celebrate students graduating from the Nursing Program, and honour Inuit nurses, nursing students and health care practitioners. Elements of the strategy could include:
  - Posters and brochures
  - Print, radio and television advertisements
  - Fliers
  - Formal recognition of individual achievements
  - Promotion through current social networking systems
- Regular participation in the Career Fairs initiative and other national and territory-wide career fairs where applicable
- Presentations by Inuit nurses and nursing students in the schools
- Class or individual student visits to the health centres to observe how they operate.
- Seek dedicated funding to promote enrolment in the Nursing program and careers in nursing, similar to those allocated for the Nunavut Teachers Education Program.

### Medium Term

- Track the actual, measurable impact of the promotional campaign annually, and adjust if required.

### Long Term

- Conduct a full evaluation of the promotional campaign, approaches and materials, and revise the promotional campaign accordingly, taking into consideration the employment opportunities, educational, market and labour environments.



Nunavut's 1st Year Nursing Program Graduates Asenath Idlout and Lily Amagoalik  
Nunavut Arctic College 2004



# 6

## Appendices

### 6.1. List of Interviewees

#### Iqaluit

- Natan Obed, Director of Social and Cultural Development, NTI
- Tasha Stefanis Director of Operations, Health Canada, Northern Region
- Claire Goldie Regional Program Advisor Health Canada, Northern Region
- Darlene McPherson, Executive Director of Qikiqtani General Hospital, GN Health & Social Services
- Sandy McDonald, Director of Medical Affairs — Qikiqtani General Hospital, GN- Health & Social Services
- Jennifer Pearce, Nurse Manager, Qikiqtani General Hospital, GN- Health & Social Services
- Sally Naphan, Nursing Program Instructor, Nunavut Arctic College
- Martha Nowdlak AHHRI Coordinator, NTI
- Sherry Katsak Parks, Nursing Student, NAC
- Rebecca Lonsdale Nursing Student, NAC
- Sipporah Peterloosie, Health Information Specialist,

- Fred Montpetit, Chief Nursing Officer
- Terry Young, High school Principle,
- Sheila Levy, High school counsellor
- Nubiya, Enuaraq, Former student
- Parniga Thibaudeau, Student, NAC
- Monique Charron, Visiting Executive, Deputy Minister's office
- Shawn Grossner, Recruitment & Retention Specialist
- Judith Paradis-Pastori, Director of Community Programs, NAC-Iqaluit
- Daniel Page, Coordinator of Community Programs, NAC Iqaluit
- Lori Idlout, Executive Director, Embrace Life Council & Chairperson of District Education Iqaluit
- Theresa Koonoo, Community Health Representative
- Annie Quirke, Executive Director, Makinnasuaqtiit Disabilities Society
- Pauloosie Kilabuk, Elder Advisor, Department of Justice GN
- Pamela Seitz, Coordinator Health Sciences Programs, NAC

#### **Iqaluit (Focus Group)**

- Theresa Koonoo, Community Health Representative
- Lori Idlout, DEA Chair
- Judith Pastori, NAC
- Pam Serty, Coordinator, Nursing program
- Dan Page, Head of Community Programs
- Pauloosie Kilabuk, Elder Advisor
- Fred Montpetit, Chief Nursing Officer
- Annie Quirke, Nunavut Disabilities Society

#### **Cambridge Bay (Focus Group)**

- Clara Evalik, Regional Director (Kitikmeot), GN Health & Social Services
- Rhonda Reid, Director of Community Wellness
- Alice Lafrance, Director of HR
- Eva Otokiak, Elder's Coordinator



**Pangnirtung**

- Agla Pettypiece Wellness Worker GN- Health & Social Services
- Debby Merrit Nurse — GN- Health & Social Services
- Markus Wilkie Community Health Nurse — GN- Health & Social Services
- Cathy Lee, Principal, Attagoyuk IIsavik High School
- Lena Metuq Co-Principal, Attagoyuk High School
- Don Mearns, Department of Education, GN
- Klaus Volger, Teacher, Attagoyuk High School
- Rebecca Palmer Teacher, Attagoyuk High School

**Kugluktuk**

- Gary Kennedy, Principal, Kugluktuk High School
- Millie Kuliktana, Executive Director, Kitikmeot School Operations
- Wade Morrison, Community Adult Educator, NAC
- Barbara Harvey Community Nurse Specialist, GN- Health & Social Services
- Agnes Egotak, Department of Health and Social Services NG

**Kugluktuk (Focus Group)**

- Mona Tiktalek
- Andy Topilak, Youth Coordinator
- Gary Kennedy, Principal, Kugluktuk High School

**Rankin**

- Esther Powell, Nurse, Rankin, GN
- Pallulaq Ford, Nurse, Rankin, GN
- Theresa Aklunark, Community Health Representative. GN
- Susie Pearce, Nurse, Rankin, GN
- Mike Shouldice, Director Kivalliq Campus, NAC, Rankin Inlet
- Kevin Bussey, Vice Principle, AlaittuqHigh School

**Arviat**

- Linda Pemik, NAC
- Obed Anoe, Community Health Representative
- Milly Knaebel, Community Health Nurse

### **Outside of Nunavut**

- Gail Turner, Nunatsiavut Government, Department of Health Labrador, Nfld.
- Steve Leck, Executive Director, Registered Nurses Association of NWT and Nunavut, Yellowknife
- Cheryl Young, Senior Policy Advisor — ITK, Ottawa

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