# File of Uncertainties: Final Report for BCcampus

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## Background

Since the 2015 release of the <u>Truth and Reconciliation Commission of Canada's</u> (TRC) <u>94 Calls</u> to Action, academic institutions have been called to redress the legacy of residential schools and advance the process of reconciliation in Canada. According to <u>Richardson and Murphy</u> (2018), power imbalances and health inequities exist inherently in the Canadian healthcare system, as deep scars from Canada's colonial policies of cultural genocide and assimilation manifest in significant ways for Indigenous people. In addition to calling for the Canadian government to fully implement the <u>United Nations Declaration on the Rights of Indigenous People</u> (UNDRIP), the TRC called for the recognition and implementation of Indigenous healthcare rights.

Regarding the education of healthcare providers in Canada, the TRC called for skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism. Furthermore, the TRC called for all medical and nursing students to be required to take an Indigenous health course that deals with the history and legacy of residential schools, UNDRIP, treaties and Aboriginal rights, and Indigenous teachings and practices.

Since 2016 the University of Victoria (UVic) School of Nursing has offered <u>NURS 484:</u> <u>Understanding Indigenous Health and Wellbeing</u>, which is now a core (required) course that all undergraduate nursing students take in their third year. In this course students learn about the historical legacy of colonization and its impact on the contemporary reality of Indigenous health in Canada. Students also complete learning activities that deal with anti-racism and decolonizing nursing practice. After taking this course, students are expected to incorporate this knowledge into their clinical practice to ensure provision of culturally safe care.

As Indigenous nurse educators, we know student nurses are taking the necessary theory courses to learn culturally safe nursing practices. We are less certain about how students incorporate this knowledge and information into their practical experience. Although we have anecdotal information regarding tensions experienced by students when in practice, our research aims to identify themes that will assist in developing instructional strategies that enhance understanding and praxis of the knowledge for the benefit of both service providers and clients.

## **File of Uncertainties Project**

With support from the UVic Jamie Cassels Undergraduate Research Awards (JCURA) program, we were able to provide a unique mentor-engaged research opportunity for UVic fourth-year bachelor of science in nursing student <u>Tamarah Braithwaite</u>. The <u>2020–2021 BCcampus</u> <u>Research Fellowship</u> provided financial support to carry out several key pieces of the research project, such as hiring an administrative research assistant to help with anonymous data management and allowing the purchase of gift card incentives for project participants.

The File of Uncertainties project explores themes and issues that act as barriers and supports for nurses incorporating decolonizing and anti-racist knowledge into their practice. This small-scale study used a short online questionnaire to ask fourth-year nursing students about their experiences in clinical placements. We asked questions about their perceptions of racialized tension when caring for Indigenous patients and what skills from their classroom learning they were able to apply in practice. We analyzed open-ended journal style questions using qualitative thematic analysis andLikert scale data from the questionnaire to identify trends in support of the qualitative data.

### **First Survey Iteration**

We administered the survey via Survey Monkey after receiving ethics approval from UVic. The 2020–2021 cohort of fourth-year nursing students were invited to participate in December 2020. We gathered and analyzed data from 15 respondents.

Themes from the data analysis included mistrust in the healthcare system, stereotyping and racism, uncertainty and tension, community and traditional healing, power differentials, resource scarcity, and systems and policy. The participant narratives consistently showed that while the Indigenous health class was useful and provided applicable tools such as a trauma-informed care approach, many students continued to struggle with their ability to apply this knowledge to racialized situations on the unit or to engage in difficult conversations. It appears uncertainty exists around opening up communication about topics such as historical and intergenerational trauma. Several students expressed not knowing what to say, how to respond to clients, how many questions to ask regarding health histories, or what questions to ask to provide culturally safe care and avoid re-traumatizing actions. Students also indicated they felt unprepared to disrupt unit culture or racialized incidents that occurred involving other staff members.

Tamarah Braithwaite consolidated results from this project into a poster presentation for the JCURA online conference held in March 2021. Results were also presented at the Canadian Association of Schools of Nursing Conference held in May 2021, also online. View the <u>JCURA</u> <u>poster</u>.

Researchers Tamarah Braithwaite, Leanne Kelly, and Christina Chakanyuka are currently writing an article with the summary of the project and data results for submission to a scholarly journal. On acceptance we will provide a link to BCcampus for readers.

#### **Second Iteration of Project**

Because of COVID-19, all in-person conferences were cancelled, so we had funds remaining from the BC campus Research Fellowship. The research team decided to use the remaining funds to repeat the survey in a second iteration with the subsequent cohort of nursing students (2021–2022). We hired a fourth-year nursing student to participate as a research mentee and provide gift card incentives to survey participants, and we hired an administrative assistant to maintain the anonymity of the participants who completed the survey.

The team administered the survey in September 2021. Participants were again asked to reflect on their experience in clinical practice of the barriers and facilitators in applying knowledge they learned in class to their nursing practice. This time there were 30 respondents to the survey. All respondents received a twenty-dollar gift card. The administrative assistant cleaned the data to remove any participant identifying information, and researchers Tamarah Braithwaite, Leanne Kelly, and Emma Alvernaz, the nursing student mentee, worked to identify codes and themes from the narrative entries.

Preliminary analysis yielded results that aligned with the first iteration of the survey; however, the increase in respondents provided more diversity of experiences of racialized complexity and knowledge application.

Emerging themes included knowledge/ignorance, racial tension, systems power, professional power, fear of discomfort, fear of re-traumatization, personal bias, and knowing when to act. The complexity of situations encountered by the undergraduate students who completed the survey demonstrated the need for continued support in preparing undergraduate nurses as well as a need to teach ways to disrupt systemic issues that perpetuate inequities.

The research team will continue working on compiling results into another scholarly journal submission in the coming months. Given the team's competing demands and the work schedules of the nurses in practice, the time line for writing is uncertain. If and when an article is submitted and accepted for publication, we will provide BCcampus with a link to the article.

Data from this project will also inform Leanne Kelly's doctoral studies, which examine ways to teach undergraduate nurses to be racism disruptors.

#### **Project Process and Reflection**

Despite over 20 years of cultural safety education in nursing, Indigenous people continue to face unique barriers to equitable healthcare access that include pervasive systemic racism, as detailed in the final report *In Plain Sight: Addressing Indigenous-Specific Racism and Discrimination in B.C. Health Care.* The British Columbia College of Nursing Professionals states that "nurses play an essential role in addressing racism at the individual and systems level" in its updated 2020 *Entry-level Competencies for Registered Nurses*. As nurse educators, we know it is our responsibility to address this aspect of preparation. It is also important to hear the ways in which students are experiencing the learning within their practice environments. Reflecting on the experience of undergraduate nursing students in their attempts to incorporate the content we teach has been a valuable experience. We are actively engaged in restructuring our teaching methods and trying to provide opportunities for students to practice what they learn.

As new faculty and undergraduate students in the school of nursing, being involved in research was a new experience for our whole team. The BCcampus Research Fellowship allowed us to devise and implement a small-scale but meaningful research project that will directly affect our teaching efforts. The lessons learned from this project include learning how to write, submit, and revise ethics applications, how to collect and manage anonymous data, how to manage time

lines, how to analyze qualitative data within a team structure, and how to work collaboratively to write and revise a paper for submission. Without the financial support of BCcampus, this project would not have been possible.