The Nature of Rural & Remote Nursing

Fact Sheet 4 Aboriginal Nurses in Rural and Remote Canada

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While the total number of Aboriginal Registered Nurses (RNs) in Canada is currently unknown, the survey (Stewart et al., 2005) and the documentary analysis (Kulig et al., 2003) components of our national nursing study provide information about this group of nurses that is not available elsewhere. For further details and discussion, see Stewart et al. (2006).

Preparing more Aboriginal people (i.e. First Nations, Inuit and Métis people) for work in all types of healthcare professions is an important aspect of capacity building for First Nations communities, which will lead to an improved health status. Thus, special initiatives have been implemented at several universities across Canada to help ensure that Aboriginal people are successful in becoming RNs.

Aboriginal RNs have most often been employed by Health Canada, specifically their First Nations and Inuit Health Branch (FNIHB), where RNs have worked in a variety of First Nations communities across Canada. FNIHB has implemented a nurse internship program to enhance the working environment of Aboriginal RNs by providing the additional skills and knowledge needed in order to provide a full range of healthcare in remote First Nations communities.

Demographic Background of the Aboriginal RNs

Of the 3,933 RNs who responded to our survey, 210 (5%) identified themselves as having Aboriginal ancestry. Of these, 15 (7%) were male. Table 1 and Figure 1 show the age, educational preparation, initial province of registration and province of residence of the Aboriginal RNs.

Table 1. Age (n=207) and Educational Preparation (n=209) of Aboriginal RNs

<table>
<thead>
<tr>
<th>Age</th>
<th>%</th>
<th>Educational Preparation</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 - 29</td>
<td>5.8</td>
<td>Diploma</td>
<td>65.6</td>
</tr>
<tr>
<td>30 - 39</td>
<td>23.1</td>
<td>Baccalaureate</td>
<td>25.8</td>
</tr>
<tr>
<td>40 - 49</td>
<td>37.0</td>
<td>Graduate</td>
<td>1.9</td>
</tr>
<tr>
<td>50 - 59</td>
<td>25.5</td>
<td>Advanced</td>
<td>6.7</td>
</tr>
<tr>
<td>60 - 69</td>
<td>8.2</td>
<td>Nurse</td>
<td></td>
</tr>
<tr>
<td>70 - 78</td>
<td>0.5</td>
<td>Specialist</td>
<td></td>
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EMPLOYMENT PROFILES AND THE WORK ENVIRONMENT

Of the 210 Aboriginal RNs in the survey, 64% worked full time, with three-quarters of these in their current position for five years or less. Sixty-nine percent of the Aboriginal RNs worked in communities with a population of 5,000 or less. Fifty-three percent considered their workplace to be remote, whereas 65% described their workplace as rural. Twenty percent of the Aboriginal RNs worked in communities that were accessible only by air.

Sixty-seven percent of the Aboriginal RNs considered their main area of nursing practice to be acute care, while 51% considered it to be community health. Thirty-one percent noted their work setting was a nursing station (outpost/nurse clinic), with 30% indicating their work setting was a general hospital.

Within their workplace, 36% of the 210 Aboriginal RNs used interpreters to perform their nursing duties. Forty-three percent worked day shifts and 52% were required to be on 24-hour call. Figure 2 illustrates the scope of practice undertaken by the Aboriginal RNs in their respective workplaces.

The majority (79%) of the Aboriginal RNs agreed that they were frequently recognized in public by clients, but only 4% reported that this bothered them. Furthermore, 41% confirmed that they were asked for professional advice when not at work, and almost a quarter of these indicated that this bothered them.

In their communities, 63% of the Aboriginal RNs were the first healthcare contact. Fifty-nine percent of
the Aboriginal participants indicated that physician(s) resided in their work communities. The majority (66%) of Aboriginal RNs noted that physicians provided professional consultation and support, and three-quarters indicated that nurses were in their support network. Twelve percent did not have a professional support network. Despite their isolation, two-thirds of the Aboriginal RNs who responded had face-to-face contact with a colleague. Just over half of Aboriginal RNs referred directly to an allied health professional, while one-third made direct referrals to a medical specialist.

Shortcomings in the workplace environment were exposed by the percentages of Aboriginal RNs who agreed that:
- there was adequate RN staffing (42%)
- there was adequate support staff (48%)
- there was an appropriate staff mix (56%)
- equipment needed for care was available (67%)
- the equipment was up-to-date (61%)
- the equipment was maintained and ready for use (71%)
- personnel were trained to use the equipment (79%).

**Career and Education Plans**

Career plans over the next 5 years of the Aboriginal RNs in our study included plans for 13% to retire, 17% to move from their current location to a larger community, and 21% to nurse in another province. Almost half expected to remain in their present job for five or more years. Despite this, 41% had sought other employment in nursing in the last year.

Seventeen percent of the Aboriginal RNs had enrolled in or completed a university course in the previous 12 months. However, 37% planned to take further nursing education in the next 5 years.

**Implications**

- Workplace supports (i.e., adequate staffing and functioning equipment) need to be continuously examined and improved in order to enhance the quality of Aboriginal RNs' workplaces, augment their ability to provide nursing care, and reduce patient safety risks.
- Professional and educational supports are needed for Aboriginal RNs to reduce the potential turnover among this population and especially to assist those who are more recent members of the nursing profession.
- Knowledge and skills related to a variety of nursing activities need to be continually assessed and updated among this group of nurses because of the demanding work environment.
- Increased educational efforts to augment the numbers of Aboriginal RNs are needed to help Aboriginal people meet their personal educational goals and to address ongoing policy concerns.

**References**


*The Nature of Rural & Remote Nursing* is a series of fact sheets deriving from the research of the three-year project, *The Nature of Nursing Practice in Rural and Remote Canada*, supported by the Canadian Health Services Research Foundation and many co-contributors. The project’s goal was to articulate the nature of registered nursing practice in primary care, acute care, community health, continuing care (homecare), and long-term care settings within rural Canada.

These fact sheets (and related tables and graphs) are posted on the project website at ruralnursing.unbc.ca. For further information write to rm@unbc.ca.

**Citation Information**