

# **Ninanâskomânânak Kâkinîkânohtêcik**

*We are grateful to the first leaders*

Celebrating 40 years of  
nursing unity in Indigenous health



**1975 - 2015**

# MISSION

The mission of the Aboriginal Nurses Association of Canada is to improve the health of Aboriginal people, by supporting Aboriginal Nurses and by promoting the development and practice of Aboriginal Health Nursing. In advancing this mission, the Association will engage in activities related to recruitment and retention, member support, consultation, research and education.



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## KEY OBJECTIVES

The Association's key objectives were updated in 2010 to be reflective of current changing health, social and political environment.

- a. To work with communities, health professionals and government institutions on Aboriginal Health Nursing issues and practices within the Canadian Health system that address particular interest and concern in Aboriginal communities with a view to benefiting Aboriginal Peoples of Canada by improving their health and well-being, physically, mentally, socially and spiritually.*
- b. To engage and conduct research on Aboriginal Health Nursing and access to health care as related to Aboriginal Peoples.*
- c. To consult with government, non-profit and private organizations in developing programs for applied and scientific research designed to improve health and well-being in Aboriginal Peoples.*
- d. To develop and encourage the teaching of courses in the educational system on Canadian Aboriginal health, Indigenous knowledge, cultural safety in nursing and the health care system and/or other educational resources and supports.*
- e. To promote awareness in both Canadian and international Aboriginal and non-Aboriginal communities of the health needs of Canadian Aboriginal Peoples.*
- f. To facilitate and foster increased participation of Aboriginal Peoples involvement in decision-making in the field of health care.*
- g. To strengthen partnerships and develop resources supporting the recruitment and retention of more people of Aboriginal ancestry into nursing and other health sciences professions.*
- h. To disseminate such information to all levels of community.*

## MESSAGE FROM THE PRESIDENT – Lisa Bourque Bearskin, RN, PhD

“Ninanâskomânânak kâkînikânohtêcik”: “We are grateful to the first leaders”. As A.N.A.C. marks its 40th anniversary, we honour our original founding leaders, many of whom have been acknowledged in their communities, across Canada and even globally as Nursing Leaders, Traditional Teachers, Elders, and Knowledge Holders. With this important celebration in mind, A.N.A.C. is committed to the goal that every Indigenous man, woman and child be given the opportunity to live a full and healthy life. As A.N.A.C. we extend our deepest gratitude to all of you for ‘bringing us together’; it is with the utmost respect for our Indigenous nursing leaders that we give thanks. In light of the Truth and Reconciliation Commission report and calls to action, there is no greater time than now to come together in spirit and language to achieve the true meaning of reconciliation.

For forty years A.N.A.C. has been instilling a vision for the recognition of Indigenous rights in Canada, as outlined in the United Nations Declaration on the Rights of Indigenous Peoples, into the social fabric of Canadian society and the foundation of nursing practice. Our nursing leaders have been nothing short of “remarkable” in their abilities to engage us deeply about how we take up concepts of culture, Indigeneity, colonization, reconciliation, equity, and resilience as part of a culturally safe approach.

Many of our Indigenous nursing scholars have their own ways of knowing. They understand community wellness and illness prevention in ways that interplay in the integration of Indigenous nursing knowledge. Frameworks for and approaches to Aboriginal health nursing that are informed by Indigenous nursing knowledge are under a critical eye. Across the country we are seeing First Nations, Inuit, and Métis nursing leaders advocating for knowledge development grounded in their worldview.



Lisa Bourque Bearskin  
President, A.N.A.C.  
2013 to present

Early in her career, Jean Goodwill, a founding member of A.N.A.C., stated:

“ I think the basic sense of personal responsibility that forms an important part of a nurse’s training must be the guiding ethic in any profession involving human and social services. For many of you, I would predict that the greatest test of your professionalism will be your ability to apply your knowledge in a practical way, to put yourselves at the service of those communities and individuals whose need is greatest.

Additionally, Jocelyn Bruyere another founding member explained:

“ A.N.A.C. is a political force within nursing and the Aboriginal health field. We need Indigenous nursing leadership in the nursing profession. It is through the Aboriginal Nurses Association of Canada that we built that bridge and expertise.

For many nurses the Aboriginal Nurses Association of Canada has been the home that nurtured our unique perspectives. It has provided us the opportunity to connect with other First Nations, Inuit and Métis nurses across the country and to discuss and learn about nursing practice issues in Aboriginal health. It is where so many of us have come together in spirit to inspire courage in one another.

As we gather for our 40th anniversary celebrations in Montreal, where we held our first ever assembly as a nurses’ association, we honour the work and lives of these courageous leaders that set in motion a vision for the practice of nursing in ways that are relational, respectful, reciprocal, responsive and meaningful to the people we serve. Over the next 40 years A.N.A.C. will continue to ensure that collaborative activity is in keeping with a self-determining approach. This international focus, as expressed by the United Nations’ recognition of “the urgent need to respect and promote the inherent rights of indigenous peoples which derive from their political, economic and social structures and from their cultures, spiritual traditions, histories and philosophies...”, will remain central to the A.N.A.C.’s vision.

# INDIGENOUS NURSING IN CANADA: TOWARD A 6<sup>TH</sup> GENERATION

Indigenous women have always held a distinct and prominent role within Indigenous societies, both as lifegivers and through Traditional medicines and healing practices. It stands to reason that the Nursing profession has been a natural fit for many Indigenous people to continue in this role.

Historian Cashman in 1996 wrote about the contribution of Cree women who supported the Grey Nuns in their establishment of nursing services in Lac Ste. Anne, Alberta. He explained how the doctors and missionaries in the late 1800s were so impressed with the knowledge that Indigenous women used to cure illnesses with herbs, roots, and berries, which they often sought out their services.

Burnett in 2006 revealed that female missionaries drew on Indigenous knowledge for their own medical and nursing work, using the specific skill set and healing knowledge of the Blackfoot, Blood, Peigan, Stoney, and Sarcee women. Both Cashman and Burnett discuss how the growth of White settlement and advances in medicine fundamentally transformed the relationship between First Nations people and early nursing pioneers.

McCallum's historical analysis of Indigenous nurses illustrates how disparities have been created and sustained in nursing. The story of Indigenous nurses in Canada is a remarkable one marred with narratives of exclusion, discrimination, and racism. As we come into a new era this account will return us to testimonies of courage, determination and resiliency in the age of reconciliation.

During the first half of the twentieth century, McCallum describes how many hospitals, nursing stations, outposts and health centers serving Indigenous communities came to rely on the labor of Indigenous people. Most formal nursing education programs were closed to Indigenous people at this time. However at the discretion of residential school principals and Department of Indian Affairs officials, some students were supported to attain nursing education. Most found jobs in hospitals or the armed forces. Charlotte Edith Monture, from Six Nations, is the most well-known Aboriginal nurse who served in WWI was recognized as the first Canadian Indian to become a registered nurse. In WWII, she was joined by others including Irene Hoff and Isobel (Bella) Healey.

Between 1950 and 1970, the nursing profession opened its doors to men and married women; a notable expansion in the number of licensed practical nurse and registered nurse's aid programs and Community Health Representatives was seen. This growth in turn supported a growth in the number of Indigenous registered nurses. Indigenous nursing students and professionals at this time faced considerable discrimination and for a variety of reasons it is difficult to track exactly how many Indigenous people achieved education and careers in nursing at this time. By the Indian Act, First Nations women who married men without



Indian status automatically lost their status. Moreover, by the Indian Act law and in society more generally, the assumption was that post-secondary education was an indication of assimilation into mainstream Canadian society. Because of widespread anti-Indigenous racism in society, those who identified publicly as Indigenous people were often penalized. This suggests there were likely far more Indigenous nurses during this period than we know. Those who worked at this time, however were important role models and inspirations to Indigenous nurses who followed.

That next generation of nurses saw the formation and rise of the Registered Nurses of Canadian Indian Ancestry, or RNCIA.

**Indigenous nurses broke ground defining, teaching, and practicing cross-cultural care, as a result of what nursing leader Jean Goodwill called their “unique expertise.”**

Indigenous identity, language, and education influenced nurse’s approaches to health promotion, prevention and treatment. Education was being discussed and Indigenous nurses found their collective voices.

Another significant development in the 1980s is cross-cultural nursing. Cross-cultural approaches permitted a discussion of the impact of cultural difference from the patients’ perspective as well as that of the care provider. Indigenous nurses broke ground defining, teaching, and practicing cross-cultural care, as a result of what nursing leader Jean Goodwill called their “unique expertise.” During this time period Indigenous nurses found for themselves a space in the nursing profession as respected critics and providers of healthcare services to Indigenous people. They also developed an Indigenous nurse identity which combined a strong belief in social and cultural responsibility with a professionalizing nursing ethic.

A fourth generation (1989-2006) while benefitting by earlier advancements unfortunately faced chronic under-funding. Individual nurses working in transfer communities saw pay-cuts and lost benefits; university and college programs faltered due to federal and provincial funding shifts and management issues. The Aboriginal Nurses Association of Canada lost its core funding.

The most significant change in Indigenous nursing education at that time was efforts to change health professions to suit Indigenous people. This is most clearly demonstrated in the latest developments in Indigenous nursing education, practice, and administration where Indigenous health was more clearly defined and continues to evolve.

Retention and recruitment of Indigenous nurses despite being depicted as a recent crisis is, in fact, close to a hundred years old. In Indigenous nurses’ written and oral records, there has been one other important and consistent

element: almost every Indigenous nurse refers to one or more nurses who have influenced their lives and work in some way. While the retention and recruitment of Indigenous nurses continues to be a guiding issue, opening up that long and interesting history of Indigenous nursing's past to Indigenous students – nursing and otherwise – may help them to contextualize their own goals alongside those of the ones who have come before.

Over the past four decades the Aboriginal Nurses Association of Canada has worked to improve the health of Indigenous peoples in Canada and to support nurses working in First Nations, Inuit and Métis communities. During the past five years A.N.A.C.'s work has focused on extending knowledge on cultural safety and how it is taken up in nursing practice, schools of nursing, policy directions and research. Indigenous nurses combine their Western education with a firm grounding in their own languages, cultures, and healing traditions to shape the field of Indigenous-nursing knowledge. This is how Indigenous nurses provide culturally-relevant and safe care.

As we work toward supporting the sixth generation of Indigenous nurses, Indigenous nursing knowledge in policy and practice, grounded in Indigenous led research will bring greater opportunity to improve health outcomes for Indigenous people. The questions that will guide future nursing research will be heavily influenced by the wonderment and intention to learn and understand how Indigenous nurses approach their nursing practice.







## THE INDIAN NURSES COMMITTEE – 1975

It was International Women's Year when nurses of Indigenous ancestry held the first "Assembly of Indian Nurses in the history of Canada" in Montreal in August 1975. It was also the first time in the history of Canada that professionals of native ancestry had assembled.

The first task facing the three founding members and original architects of the organization, nurses Jocelyn Bruyere, Ann Callahan and Jean Goodwill, was to identify and contact other nurses of Aboriginal ancestry. This in itself proved to be a major undertaking since at the time there was no existing registry to help locate nurses according to their ancestry.

Fourteen nurses came together to form the Indian Nurses Committee. Through word of mouth, letter writing and a great deal of networking, a preliminary list of Aboriginal nurses was developed. Jocelyn Bruyere recalls "The task is more complex than people can realize. We not only sought to contact Aboriginal nurses but sought other partners."

A list of the 14 members of the Indian Nurses Committee appears below and their short biographies follow.

Mary Barkhouse – Ottawa ON

Rhonda Blood – Standoff AB

Jocelyn Bruyere – Winnipeg MB

Ann Callahan – Winnipeg MB

Cecilia Curotte – Caughnawaga (now Kahnawake) QC

Irene Desjarlais – Fort Qu'Appelle SK

Jean Goodwill – Ottawa ON

Edith Green – Ottawa ON

Elizabeth Jacobs – Cornwall ON

Helen Littlechild – Edmonton AB

Madeleine Stout – Edmonton AB

Joyce Still – Pense SK

Rozella Whiteman – Broadview SK

Marilyn Van Bibber – Whitehorse YK



## MARY BARKHOUSE



Mary Barkhouse, founding member of the Indian and Inuit Nurses of Canada, was born Mary Amy Cook in 1937 in Alert Bay British Columbia as a member of the Kwakwaka'wakw-speaking Nimpkish Band. She was enrolled at St Michael's Indian Residential School at the age of five and several years later she transferred to the village school. Finishing high school in Vancouver, Mary was determined to become a registered nurse despite resistance from some quarters. She took interim employment at the PB Electric then started the three year program at the Royal Columbian hospital in New Westminster BC. Afterward, she returned to Alert Bay to work at St George's Hospital.

After marrying, Mary worked on the infectious diseases and then ophthalmology wards. Mary's two children were born in Vancouver. Moving to Ottawa in 1964, she worked part-time at the National Defence Medical Centre. She went on to open her own esthetic studio. During this period Mary was also participating in activities that led to native women receiving legal parity with native men.

Later, Mary went on to work at the federal department of Indian and Northern Affairs in Ottawa and Vancouver.

## RHONDA BLOOD



Rhonda J. King Blood is the daughter of the late Raymond and Isabella King of the Blood Tribe of the Tall People and Many Children clans. She is married to Charles Blood Sr. and mother to three children, Pamelynn, Cameron and Charles Jr. She is also the proud grandmother of four. Rhonda was educated at St. Mary's Residential School, Magrath and Lethbridge Schools. She graduated from St. Michael's School of Nursing (1970), University of Lethbridge (1982) and Gonzaga University (1997) in Spokane, Washington. Rhonda worked primarily with Health Canada for over twenty years as a community health nurse in Alberta First Nations communities. She was employed, for a period of time, by Accreditation Canada in Ottawa. Upon her return to Alberta, Rhonda was employed by Alberta Health Services as a Health Promotion Specialist for over ten years, retiring in 2015.

Rhonda served as a Vice President and Board member of the Aboriginal Nurses Association of Canada and became a member of the College of Alberta Registered Nurses Association in 1970. She authored the Aboriginal Canadians chapter in the *Community Health Nursing, a Canadian Perspective* and co-authored the 'Aboriginal Clients' chapter in the second edition. She served as President and Board Member of Treaty 7 Urban Housing Authority for a number of years.

## JOCELYN BRUYERE



A First Nation member of Opaskwayak Cree Nation, Jocelyn is the Swampy Cree Tribal Council (SCTC) Aboriginal Health Transition Fund (AHTF) Project Manager for the Cree Nation Tribal Health Centre Inc. The work of the SCTC AHTF Project is to develop partnerships with all of the health jurisdictions that operate in the SCTC area to develop collaborative relationships in health care, to ensure services are better suited to the needs of Aboriginal and First Nation peoples, and to establish telehealth sites in the communities to ensure access to primary health care. Prior to this position, Jocelyn was the Tribal Nursing Officer of Cree Nation Tribal Health Centre. She holds a Master of Science degree in the Community Health Sciences from the Faculty of Medicine at the University of Manitoba. Jocelyn taught at the Red River College in the Access and the Joint (Red River College and University of Manitoba) Baccalaureate Nursing Program.

Jocelyn was a co-founder of the Aboriginal Nurses Association of Canada, along with Jean Goodwill and Ann Callahan. She was also co-founder of the Manitoba Indian Nurses Association and is Board member of the Aboriginal Nurses Manitoba.

## ANN CALLAHAN



Born on the Peepeekisis First Nation in 1935, Ann dedicated her life to healing and wellness. She has the given name of Wapiskisiw Piyésís Iskwéw (White Birdwoman). After completing her studies at the Birtle Indian Residential School, she enrolled in the Winnipeg General Hospital's three-year nursing program. In 1958, Ann was one of the first Aboriginal nurses to graduate from the program.

Ann began her career on the gynecology ward in the Women's Pavilion, where she quickly moved into the role of head nurse. She held this post until 1973, when she left the Health Sciences Centre to assume a pioneer position with the newly formed Continuing Care for People in Need. There she worked with other healthcare disciplines and community resources to provide services to clients, primarily Aboriginal, in Winnipeg's inner city. In 1983, Ann became an instructor and academic counsellor with the Southern Nursing Program at Red River Community College. After nearly 40 years in the nursing field, she retired in 1996. Throughout her career Ann demonstrated her unflinching commitment to healthcare, community and continuous learning.

Even after her retirement, Ann continued her education, attaining undergraduate and graduate degrees and certificates related to her vocation of healing. Through applying these skills to her career and 30 years of volunteer commitments, Ann has gained respect and renown for her contributions to the community.

In 2015 Ann received an Honorary Doctorate of Laws degree from the University of Regina. In accepting the degree she said "I accept this honour not for myself, but on behalf of all of the people who supported and guided me. I hope all the graduates will find their path to help and support others."

### *CECILIA CUROTTE*

Cecilia Curotte, of Mohawk origin from Kahnawake Quebec, completed her nursing studies at St Mary's Hospital in Montreal in 1961. After graduating Cecilia continued to work at St Mary's and other Montreal area hospitals in paediatrics, psychiatry and obstetrics, before travelling to the USA and working in Los Angeles. When Cecilia returned to Canada, she worked at Kateri Memorial Hospital where her language skills in Mohawk were particularly important for her work with the elderly. Cecilia was involved in organizing the Indian and Inuit Nurses of Canada 10<sup>th</sup> anniversary conference held in Kahnawake. She retired in 2003 after more than 40 years in nursing.



### *IRENE DESJARLAIS*

Irene Desjarlais (nee Gaddie) grew up on Cowesses First Nation in Saskatchewan. She completed her RN diploma at the Brandon General Hospital in 1945 and was then actively recruited by Health Canada to work at the Fort Qu'Appelle Indian Hospital where she became the nurse in charge. Irene later completed her diploma in public health nursing at the University of Saskatchewan.



She married, settled into the community and raised 8 children. She is fondly remembered by her children as a loving mother, an avid Saskatchewan Roughrider fan, possessing a great sense of humor and a strong role model. She loved to travel and after retirement became a Canadian snowbird wintering in Arizona with her husband Louis.

During the 1970s she held the position of assistant zone nursing officer within the Medical Services Branch. Retiring in 1981 after a total of 36 years of nursing, Irene became a volunteer Board member with the local National Native Alcohol and Drug Abuse Program and was active with the Kokums group in Saskatoon.

Irene and Louis strongly encouraged their children to pursue education and Irene in particular saw education for Aboriginal people as paramount. Irene was always available to encourage and mentor younger Aboriginal professionals. She is remembered by her nursing colleagues as funny, kind and collegial. Irene passed away in 2008.

## **MADELEINE DION STOUT**

Madeleine Kétéskwew Dion Stout is a Cree speaker who was born and raised on the Kehewin First Nation in Alberta. Ms. Dion Stout's family provided her with a strong head start on the Kehewin First Nation. After graduating as a registered nurse in 1968, she returned to school to complete a Bachelor of Nursing with Distinction, followed by an MA in International Affairs.



Madeleine was President of the Aboriginal Nurses Association of Canada and member of the National Forum on Health. She served on the Mental Health Commission of Canada as an inaugural Vice-chair of the Board of Directors. Madeleine is a Board member on the historic First Nations Health Authority in B.C. When the Honourable Monique Bégin was the Minister of Health and Welfare, Madeleine served as her Special Advisor.

Madeleine was a Professor in Canadian Studies and founding Director of the Centre for Aboriginal Education, Research and Culture at Carleton University in Ottawa. She continues to work as a researcher, writer, and lecturer on First Nations, Inuit, and Métis health and is increasingly adopting a Cree lens in this work.

She has received many awards including the Assiniwikamik Award from A.N.A.C.; a Distinguished Alumnus Award from the University of Lethbridge; and Honorary Doctorate of Laws from the University of British Columbia, the University of Ottawa and Carleton University. In November 2008, the Canadian Nurses Association selected Madeleine for the Centennial Award that was given to 100 outstanding Canadian nurses. In March 2010 she received the National Aboriginal Achievement Award in the health category. In July 2015 Madeleine was appointed as a Member of the Order of Canada.



## JEAN GOODWILL

Jean Goodwill was of Cree origin from Little Pine, Saskatchewan. She was the first Aboriginal to finish a nursing program in Saskatchewan, and one of the first nationally.

Jean was a founding member of the Aboriginal Nurses Association of Canada, where she served as president for seven years. She joined many associations and sat on a number of committees during her lifetime including as executive director of the Indian-Métis Friendship Centre in Winnipeg, head of the Department of Indian Health Studies at the Saskatchewan Indian Federated College of the University of Regina and a member of the Board of Directors for the Canadian Public Health Association, to name but a few.



Jean accumulated numerous distinctions throughout her career. In 1981, she received the Assiniwekamik Medal (Jean Goodwill Award), created in her honour by the Manitoba Indian Nurses Association. Queen's University gave her an Honorary Doctorate of Law in 1986. In 1992, she was named an Officer of the Order of Canada in recognition of her achievements. In 1994, she won a national excellence award from the National Aboriginal Achievement Foundation.

Jean chose her profession early in life. As a child, she suffered from tuberculosis and spent several years in the sanatorium at Prince Albert, Saskatchewan, which led her to study nursing. Already very determined, she received her nursing diploma from the Holy Family Hospital in Prince Albert in 1954.

After beginning her career at the Indian Hospital of Fort Qu'Appelle, Jean accepted the position of head nurse at the La Ronge nursing station. She worked for several years under difficult conditions in isolated northern Saskatchewan, before leaving Canada to work in Bermuda. When she returned, she became increasingly involved in developing Aboriginal organizations in Canada. Always working in the interests of health care and improving the living conditions of Aboriginal people, Jean also understood the politics of health care. In 1978, she became a nursing consultant for the Medical Services Division and an advisor to Assistant Deputy Minister D. Lyall Black at Aboriginal Affairs. Jean became the first Aboriginal woman in the federal public service to be appointed to the position of special advisor to the minister of National Health and Welfare, the Honourable Monique Bégin.

Jean's goal was to ensure that Aboriginal communities received health services appropriate to their culture and social conditions. Her involvement in and dedication to Aboriginal peoples resulted in nursing programs for Aboriginal students, the introduction of clinics on reserves and an improvement in the living conditions of Aboriginal peoples. Jean Goodwill succumbed to cancer in 1997 at the age of 69.

## *EDITH EILEEN GREEN*

Edith Green, from Tyendinaga Mohawk Territory, received her registered nurse diploma from the Toronto General Hospital. After working in Belleville and Moose Factory, she enrolled in the University of Toronto for an advanced course that would enable her to work as a public health nurse. When she completed the course in 1960, she worked at Manitowaning Indian Hospital on Manitoulin Island.

She then went on to become the public health nurse in charge of the Nipissing Agency at Sturgeon Falls Ontario. Edith obtained her BScN in public health from the University of Western Ontario.

Edith worked with the Public Service Commission for 14 years and in 1988 she retired from the Department of Indian Affairs where she worked with the Affirmative Actions program.



## *ELIZABETH ANN JACOBS*

Elizabeth Jacobs was born in 1938 in Cornwall Ontario and lived on the Ontario portion of the Akwesasne Reserve. She is a member of the Mohawks of Akwesasne and learned to speak Mohawk at an early age.

Elizabeth attended school on the Reserve up to grade 7 and then she transferred to St. Francis de Sales School in Cornwall to finish grade 8. She completed high school in St. Andrews West while staying at the residence run by the Sisters of St Joseph.

With the encouragement and help of her family doctor and his daughter, Elizabeth enrolled at the St Joseph School of Nursing in Cornwall ON. After graduating in 1959, she worked for five years in the emergency and medical departments of the Hotel Dieu Hospital in Cornwall, then she spent three months touring the British Isles and Europe. When she returned, she started working at the Hotel Dieu Hospital in the medical department where she remained until retiring in 1993.



## HELEN LITTLECHILD

Helen Littlechild graduated in 1971 from the Misericordia Hospital in Edmonton. She is originally from Enoch First Nation and moved to her husband's reserve - Ermineskin First Nation - in 1977. She worked at the Misericordia Hospital from 1971-1972. Their first daughter was born in '72. After a second child, Helen returned to work at the hospital. After moving to Maskwacis another child arrived in 1977. Helen returned to work in the community in 1979. She was a FNIHB employee until 2013 when she transferred to become a band nurse. She was the nurse in charge for 15 years and is still employed as a staff nurse. She has been married 45 years.



Helen enjoys the challenges that community health nursing brings and is inspired by her clients. She works to incorporate cultural and safety competency in her practice.

She has represented her community on federal, provincial and local health committees and supports and encourages the inclusion of traditional and cultural teachings and values in conjunction with Western medicine in the delivery of health care.

Jean Goodwill was an inspiration to her. Helen describes her participation in A.N.A.C. as being primarily supportive role in terms of their endeavours, encouraging initiatives and attending A.N.A.C. conferences when possible. She adds "I encourage all First Nation Nurses to be involved in A.N.A.C., to maintain a voice for all First Nation Health Delivery."

## JOYCE L. DESJARLAIS (STILL)

Joyce Desjarlais, born and raised in Fort Qu'Appelle Saskatchewan, is a member of the Cowessess First Nation with strong Métis roots. She is the proud mother of four adult children and grandmother of four. Joyce's career led her from bedside nursing at the Pasqua Hospital to hospital administration and nursing education with the First Nation's University of Canada. She retired to Regina from the First Nation Inuit Health Branch Health Canada in Ottawa.



Joyce received her initial nurses training at the Regina Grey Nun's School of Nursing. She later returned to school and completed an Arts Degree in Psychology at the University of Regina and a BScN at the University of Saskatchewan. As an undergraduate, she received several bursaries and scholarships for academic achievement. Joyce graduated with her Master

of Arts Degree from San Diego State University and then completed a PhD (Nursing) Program at the University of Alberta. Her dissertation, *“Walking in Multiple Worlds: Stories of Aboriginal Nurses”* explored Aboriginal nursing experiences.

Joyce sat on numerous provincial and national boards and committees involved in quality health care education and delivery. She was awarded *The 2003 First Nations Awards* in the category of Medicine and Health and the *2005 SRNA Millennium Award* for Employee of the Year.

Joyce remains committed to ensuring quality and appropriate Aboriginal health care and her research program focused on quality health and education for all people.

### ROZELLA MCKAY (WHITEMAN)

Rozella McKay’s home community is Standing Buffalo Dakota Nation in Saskatchewan. She attended public school in Broadview SK, did her grade 8 and 9 at Birtle Residential School and then completed high school in Shaunavon SK. Rozella received her registered nurse diploma from the University of Saskatchewan in 1963, and returned there to receive her BScN in 1985-1989.



Working in community health with Health Canada, Rozella’s nursing practice took her to many communities in southern Saskatchewan such as Poorman (Kawacatoose), Muskowekwan (& Residential School), Daystar, Gordon (& Residential School), Pasqua, Muscowpetung, Piapot, Cowessess (& Marieval Residential School), Ochapowace, Sakimay, Kahkewistahaw, Carry the Kettle, among others. She has worked as a community health nurse in several transfer communities and currently works at Standing Buffalo Dakota Nation. Rozella is a founding member of Qu’Appelle Valley Friendship Centre, Fort Qu’Appelle.

She has four children, fourteen grandchildren and fifteen great grandchildren.

## MARILYN VAN BIBBER

Marilyn is a citizen of Selkirk First Nation in Yukon and belongs to the wolf clan of the Northern Tutchone people. Following her graduation from Victoria's Royal Jubilee Hospital School of Nursing, Marilyn began her career in 1974 as a maternity ward nurse in Whitehorse and, as a nurse in Yukon cottage hospitals and health centres and the Yellowknife Stanton Hospital. Since then, her work has focused on community-based health research, ethics, fetal alcohol syndrome disorder (FASD), community health development, program evaluation and cultural safety. Marilyn also has extensive experience working with Aboriginal leaders on land claims and treaty negotiations in the Yukon and British Columbia. Marilyn is the author of a well-used manual on the prevention of FASD in Aboriginal communities, *"It Takes A Community"*, published by the Aboriginal Nurses Association of Canada in 1996. Working with Aboriginal non-profit organizations, First Nations and other levels of government and serving on many national and regional health and social boards and committees, she believes that the path to reconciliation and self-government is healthy babies and families and giving children the best start in life possible. She lives on Vancouver Island with her husband, Paul Kyba and is the mother of four children and six wonderful grandchildren.



## HOW IT ALL BEGAN...

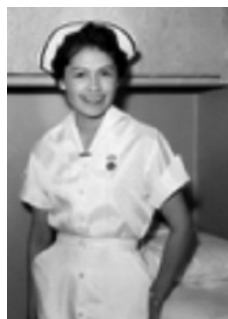
The official date for the formation of the Registered Nurses of Canadian Indian Ancestry is 1975. However, its origins precede this historic date by one year when in 1974 the groundwork was laid for the actual formation of the association. Several nurses who shared a common vision of the importance of Aboriginal caregivers for Aboriginal peoples organized a meeting in Manitoba. That meeting was the springboard for the first national meeting held in Montreal in 1975.

“ We, the Indian people of Canada, are approaching a unique turning point in our history. We are actively seeking ways to govern ourselves, to set our own standards, and, ultimately to be responsible for and to learn from both our achievements and our mistakes. The association.....is part of this trend.

Jean Goodwill, as quoted in 'Indigenous Women, Work and History 1940-1980'

The association's founders pooled their skills, education and cultural heritages to ultimately improve what they witnessed first hand as nurses - the appalling overall health conditions faced by their own people.

The nurses soon discovered that if their association was to survive and grow and successfully achieve the objectives that first brought them together they would need new skills. They would have to become familiar with the culture of politics and bureaucracy; they would have to learn the subtleties of funding criteria: and they would need to develop new skills in the arts of diplomacy and persuasion. The founders were also faced with numerous administrative and legal hurdles integral to incorporating the new organization. However, these and many other obstacles would be overcome, and the evolution and development of the association continue today in the Aboriginal Nurses Association of Canada.



Jean Goodwill



## THE FIRST NATIONAL ASSEMBLY

It was 1975, International Women's Year, when nurses of Indigenous ancestry held the first "Assembly of Indian Nurses" in Montreal. Eighty nurses of Indigenous ancestry had been identified and forty-one attended the conference. It was also the first time in the history of Canada that professionals of native ancestry had assembled. Their commonalities in education and training, cultural background and concern for the health of their people resulted in a common vision, goal and formation of what was then to be called the Registered Nurses of Canadian Indian Ancestry. The name was chosen deliberately, wrote Jean Goodwill, "so that the group would include both status and non-status Indians, a matter that, at the time, involved considerable political discussion."

The Assembly had the title of "A New Approach" with the following objectives":

- 1. To develop a registry of registered nurses of Canadian Indian ancestry, by contacting them across Canada, and to encourage communication between nurses through publications and other media.*
- 2. To examine the possibility of implementing a resource and consultative mechanism composed of Indian nurses in various fields.*
- 3. To encourage discussion of means and ways of recruiting more people of Indian ancestry into the medical field.*
- 4. To discuss ways of encouraging Indian control, involvement and decision-making in health care.*
- 5. To hold a national conference of registered nurses of Canadian Indian ancestry to commemorate International Women's Year 1975.*

The opening speaker was June Delisle, Advisor, Health and Social Services, Indians of Quebec Association; Administrator Director, Katari Memorial Hospital Centre Caughnawaga<sup>1</sup> Indian Reserve, Quebec. As reported in the conference proceedings, June Delisle "set the conference on the right footing. Her theme was local Indian involvement in health and the role of the Indian professional in enhancing local self-health." The conference program included a tour of the Katari Memorial Hospital that was described as "most inspiring and enlightening to the nurses in seeing the actual reality of a Band administering its own hospital health services." Another special guest at the conference was Rosemary Wood, executive director of the American Indian Nurses' Association.

“ There is a void in Indian communities for you to fill. You understand your people, you understand their problems, you speak their language – because you are one of them! Don’t remain complacent, don’t be overcome by frustrations – and there are many; rather make changes where they benefit our people – go out there and seek out our people. Ask questions and find answers.

June Delisle, Advisor, Health and Social Services, Indians of Quebec Association;  
Administrator Director, Katari Memorial Hospital Centre Caughnawaga Indian  
Reserve, Quebec, 1975

In a formal luncheon address to the Assembly Dr. Helen Mussallem executive director of the Canadian Nurses Association encouraged the nurses in their efforts. She is reported to have spoken “with a wider world experience on local control of health.” The questions she posed, such as ‘how can more young women and men of Indian ancestry be recruited into nursing?’, are still pertinent today.

“ How can the health status of the Indian people be improved? Indian nurses **can** make the difference. You are the largest number of health professionals. You are the only group educated to provide continuous care. Yours is a formidable task... Where will you go from here? The work you have begun must continue.

Dr. Helen Mussallem, Executive Director,  
Canadian Nurses Association 1975

In the afternoon session the conference participants broke into small groups to discuss health and social problems in Indigenous communities and the role of the nurse. Topics included “the Indian medicine way and traditional health practices”; “areas where health services could be improved”: and “ways and means of encouraging Indian men and women to enter the health field”. On the second day the discussion focused on how to develop a registry of “registered nurses of Indian ancestry in cooperation with provincial nursing associations”, and how to improve communication and work more closely with other Indigenous organizations particularly on health related issues. These are all issues that A.N.A.C. continues to address today.

Out of this ground breaking conference came the first ever assembly of Registered Nurses of Canadian Indian Ancestry where nurses created a national structure for their organization, developed their bylaws and elected their executive. The first chairperson was Tom Dignan. As it was International Women's Year, there was some concern that a male nurse had been elected. However, it was felt that he was the best person to lead the organization at that time.

The conference's report concluded that the gathering, funded in part as an International Women's Year Project was a success locally, provincially, nationally and internationally. It laid a solid foundation for A.N.A.C. as a voice to improve the health of Aboriginal people, to support Aboriginal Nurses and to promote the development and practice of Aboriginal nursing.

“ It is foreseen that this may be a precedent in encouraging people of Indian ancestry with professional or technical training to see themselves as a force within the Indian movement and their potential for contribution in upgrading the conditions under which Indian people presently find themselves.

Report of the First Assembly of Registered Nurses  
of Indian Ancestry, 1975



## THE LOGO:

Carol Prince, an A.N.A.C. member-at-large from Manitoba, designed the logo in the late 1980s. The circle signifies the Circle of Life; the red maple leaf was drawn in a geometric fashion similar to many other Indigenous designs. Indigenous nurses are represented by the feather. The ulu at the bottom of the feather is representative of the Inuit joining with the Indigenous nurses. The flame at the top symbolizes nursing and represents the flame of Florence Nightingale's lamp. When the logo was created the organization was known as the Indian and Inuit Nurses Association of Canada.



## A.N.A.C. OVER THE YEARS

As the organization grew and developed, its official name changed accordingly.

1975 – Registered Nurses of Canadian Indian Ancestry

1983 – Indian and Inuit Nurses of Canada

1992 – Aboriginal Nurses Association of Canada

## PRESIDENTS:

Thomas Dignan 1975-1980

Grace Easter 1980-1982

Jean Goodwill 1982-1989

Madeleine Dion Stout 1989-1992

Marilyn Sark 1992-1994

Lea Bill 1994-1998

Fjola Hart-Wasekeesikaw 1999-2003

Lisa Dutcher 2003-2005

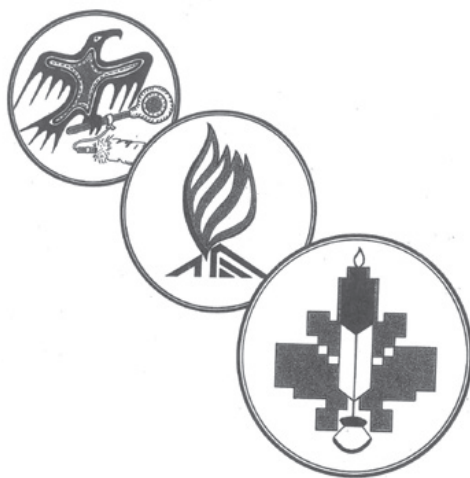
Gaye Hanson 2005-2006

Rosella Kinoshameg 2006-2010

Evelyn Voyageur 2010-2012

Rhonda Goodtrack 2012-2013

Lisa Bourque Bearskin 2013-to present



## ***A.N.A.C. EXECUTIVE DIRECTORS (alphabetically)*** ***(Includes acting and interim)***

Kevin Barlow

Dawn Bruyere

Ruth-Ann Carlson

Bernice Downey

Claudette Dumont-Smith

James Dunn

Fjola Hart Wasekeesikaw

Margaret Horn

Margaret Lanigan

Audrey Lawrence

Jo MacQuarrie

Marie Ross

Brenda Thomas

Connie Toulouse is an Ojibway woman from Sagamok Anishnawbek near Sudbury, Ontario. She has three wonderful daughters. Connie worked with A.N.A.C. from April 2005 until September 2015. She is one of A.N.A.C.'s longest serving employees. During her more than 10 years, she served in many capacities including finance/administration, acting Executive Director and recently Special Projects Officer. Among her accomplishments was initiating the 'Making It Happen' Project jointly with the Canadian Nurses Association and the Canadian Association of Schools of Nursing; the mentorship pilot project; *Following the Spirit of Courageous Leaders* publication; 'I want to be Nurse' poster campaign; and ensuring the success of many A.N.A.C. national conferences.

## ***SPECIAL PROJECTS MANAGERS***

Cindy Ashkewe

Connie Toulouse

## ***HONOURARY LIFETIME MEMBERS***

Ms. Jocelyn Bruyère: Conferred AGM 2011

Ms. Carol Prince: Conferred AGM 2010

Ms. Alice Reid: Conferred AGM 2009

Ms. Wanda Prettyshield: Conferred AGM 2008

Sister Veronica Matthews: Conferred AGM 2006

Dr. Evelyn Voyageur: Conferred AGM 2005

Ms. Madeleine Dion Stout: Conferred prior to 2005

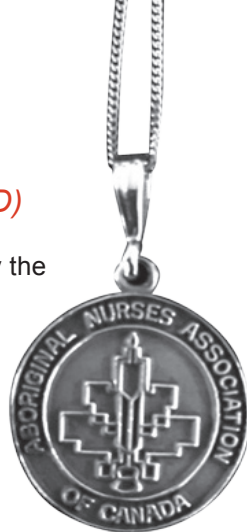
Ms. Marilyn Emily Sark: Conferred prior to 2005

Dr. Helen Mussallem: Conferred AGM 1981

## AWARDS

### *ASSINIWEKAMIK MEDAL (JEAN GOODWILL AWARD)*

The Jean Goodwill Award or Assiniwekamik Medal was created by the Manitoba Indian Nurses Association in 1981. Its first recipient was Jean Goodwill. From then on it was given every two – three years to a member of A.N.A.C. in recognition of his or her outstanding contributions to the health care of Aboriginal people. Recipients of this award include the following nurses.



#### *1983 GRACE EASTER*

Grace Easter, of Cree heritage, was born in Easterville Manitoba. In 1977 she graduated with her RN diploma from the Red River Community College in Winnipeg. For the next five years she worked as the Health Advisor for the First Nations Confederacy. She was president of the Registered Nurses of Canadian Indian Ancestry from 1980-82. She became president of the Manitoba Indian Nurses Association in 1983, the same year that she joined the Regional Office of the Medical Services Branch.

#### *1986 CAROL PRINCE*

Carol Prince is of Cree Ancestry. She was born and raised in Nelson House, Manitoba. Upon completion of her secondary school education at the Birtle Indian Residential School in Manitoba, Carol went on to complete a diploma program in psychiatric nursing. She served on National Committees for Medical Service Branch of Health and Welfare Canada. Carol, also an artist, designed the A.N.A.C. logo in the 1980s.

#### *1989 ROSELLA KINOSHAMEG*

Rosella Kinoshameg is the youngest in a family of nine, a Pow-Wow traditional dancer and a former Indian princess in Sudbury. She graduated from Marymount School of Nursing in 1968 and then obtained a BScN from the University of Ottawa in 1977. She worked as a community health nurse in Wikwemikong starting in 1977. Rosella has served as a health board member of Wikwemikong, president of the Parish Council, a band council member and First Aid/CPR instructor and; held workshops on traditional food. She served as president of A.N.A.C. for four years from 2006-2010.



## **1991 JEANNETTE WATTS**

Jeannette Watts of the Nuu-chah-nulth Health Board in British Columbia received the award for her extensive work in her community. She was involved in strategies against HIV/AIDS; participated on behalf of IINC at a Canadian Public Health Association conference; worked as a staff and community health nurse and; sat on the Joint IINC/MSB Advisory Committee.

On presenting the award, Jean Goodwill remarked, "I have known Jeannette for many years and I know her background ... she is a nurse we can all be proud of. I think she is a fantastic role model." In her acceptance speech, Jeanette recognized her father's support, love and encouragement to pursue education and conveyed her appreciation and pride in being an IINC member. As tokens of her appreciation, she presented Jean Goodwill and Evelyn Voyageur, I.I.N.C. Board member for British Columbia, with a video and a beaded belt, respectively.

## **1993 MADELEINE DION STOUT**

Madeleine Dion Stout was a former president of A.N.A.C. and, at the time, director of the Centre for Aboriginal Research, Education and Culture at Carleton University, Ottawa. Madeleine attended the first Aboriginal Nurses Meeting held in Montreal nearly 20 years ago. Over the years, Madeleine has always been there to provide advice and services to the association, in various ways, and has played a key role in making A.N.A.C. the respectful association it has become. A more complete biography of Madeleine can be found earlier in this publication.

## **1995 HELEN CROMARTY**

Helen Cromarty is of Cree ancestry from Sachigo Lake, Ontario. She is a member of the Big Trout Lake First Nation. Helen specialized in intensive care nursing for over twenty-five years, during which time she gained outpost nursing experience at Big Trout Lake. In 1991, she received her Honours Bachelor of Science from Lakehead University. In 1991-92 Helen coordinated the Suicide Prevention Program at Nishnawbe-Aski Nation and became the Community Health Coordinator. In this position, she regularly dealt with issues of family violence, suicide, cross-cultural education, access to health services and other health concerns. Helen has worked on all phases leading to the development of both the Aboriginal Health Policy and the Aboriginal Family Healing and Wellness Strategy. As of April 1995, she took the position of the Health Policy Analyst responsible for Ontario Health Initiatives. She served as Chair, Co-chair and member of the Advisory Committee to the Native Nurses Entry Program at Lakehead University.

## *CLAUDETTE DUMONT-SMITH*

Claudette, of Algonquin heritage, comes Kitigan Zibi Anishinabeg, Quebec. She began her career in health care as a community health representative. She earned her registered nurse diploma from Algonquin College. She worked in several places until Medical Services Branch offered her the position of community health nurse in Maniwaki QC, close to her home. She was both staff and board member for I.I.N.C. . "We Native nurses can share our problems, support and encourage one another and try to overcome the many health problems our Native brothers and sisters are experiencing in Canada. Claudette is currently the executive director of the Native Women 's Association of Canada (NWAC).

## *MARILYN SARK*

Marilyn Sark comes from Lennox Island PEI and is of Mi'kmaq heritage. She wanted to be a nurse as a child and fulfilled that ambition when she graduated from the Halifax Infirmary School of Nursing with her B.Sc.N in 1963. She was employed as a Clinical Instructor in surgical and psychiatric nursing becoming a community health nurse for the Lennox Island Indian Band. Marilyn was the president of A.N.A.C. from 1992-1994. She has four children.

## *CLAUDETTE DUMONT-SMITH*

Claudette Dumont-Smith, of Algonquin heritage, comes Kitigan Zibi Anishinabeg, Quebec. She began her career in health care as a community health representative. She earned her registered nurse diploma from Algonquin College. She worked several places until Medical Services Branch offered her the position of community health nurse in Maniwaki QC, close to her home. She was both staff and Board member for I.I.N.C. "We Native nurses can share our problems, support and encourage one another and try to overcome the many health problems our Native brothers and sisters are experiencing in Canada. Claudette is currently the executive director of the Native Women 's Association of Canada (NWAC).

## *BAXTER CORPORATION – JEAN GOODWILL SCHOLARSHIP*

A.N.A.C. over the years has worked tirelessly to promote Aboriginal nursing at different venues and gathered financial support for educational bursaries and scholarships for Aboriginal nursing students.

This scholarship was established in 1986. The criteria for applying for the Baxter Corporation – Jean Goodwill Scholarship included entry into specialized post-RN training programs; graduate nurses serving in isolated communities who are accepted into specialized training programs; and those who are or will be enrolled in a bachelor level nursing program. Successful applicants were expected to commit themselves to providing nursing services in northern Canada for a period of at least one year.

### *RECIPIENTS*

1986-87	James Dunn	Lisa Tabobondung
1987	Donna Brule	Violet Maple Whiteway
1988-89	Donna Brule	Karen Brascoupe
1989-90	Wanda Phillips	Daisy Sugarhead
1990-91	Karen Gruben	Linda Wesley
1991-92	Virginia Bayha	Phyllis Tomchuk
1992-93	Gertie Merasty Margaret Sedgemore	Joanne Montague
1993-94	Ina Thomas	Margaret Wilson
1994-95	Sue Wilson	Phyllis Jorgenson
2002	Karen Lawford	Crystal Vonier

## ABORIGINAL NURSING IN CANADA

Registered nurses are the backbone of the health care system and are central to First Nations, Inuit and Métis health care delivery.

In 2015 there were

**7,945** Aboriginal nurses  
in Canada.



Aboriginal people made up **2.9%** of the registered nursing workforce, but formed approximately **4.3%** of the population.



A higher proportion of Aboriginal health care professionals are registered nurses (**77%**) compared to the non-Aboriginal health professionals (**59%**).

*This information is based on 2011 National Household Survey data, as part of a joint project undertaken by the A.N.A.C. and University of Saskatchewan College of Nursing.*

Evidence shows that the number of First Nations, Inuit and Métis nurses in Canada is growing, as is their level of preparedness; and A.N.A.C. is benefiting from this increasing capacity. In 2014 A.N.A.C. was proud to announce that its new Board of Directors, for the first time, included three PhD scholars and three nurse practitioners and BScN prepared nurses.

## HONORARY DEGREES

The contribution of Aboriginal nurses is also being recognized with the conferring of honorary degrees. The following nurses have been recognized in that way.

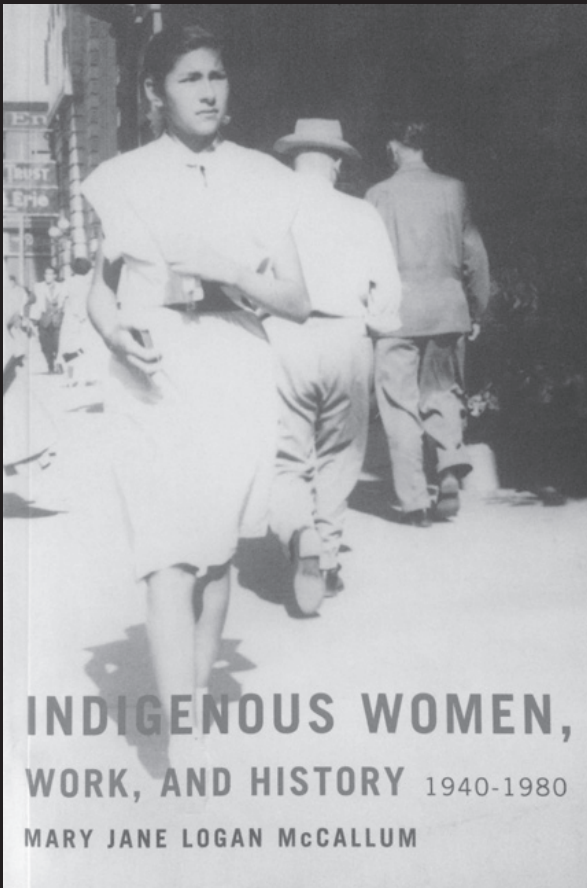
Ann Callahan: University of Regina

Jean Goodwill: Queens University

Rosella Kinoshameg: Regis College, University of Toronto

Sr. Veronica Matthews: St Francis Xavier University

Madeleine Dion Stout: University of British Columbia; the University of Ottawa;  
Carleton University



XXXXXXXX  
XXXXXX

# BEQUEST TO A.N.A.C.

## HILDA BURKHOLDER TUTTON (1930-2013)

A life-long supporter of education, Hilda Tutton requested that any remembrances of her life be directed to the Aboriginal Nurses Association of Canada for a scholarship fund. A.N.A.C. honours her life and expresses its gratitude for her generous support.





Born in the thirties, Hilda Tutton grew up on a farm near Galt, (now Cambridge) Ontario, where she completed her elementary and secondary schooling. As a child, on picnics and summer vacations, she visited the three surrounding Great Lakes - Ontario, Erie, and Huron.

Her career in education started with classroom teaching and moved on to specialization in the new field of Creative Art. The developmental patterns encountered in children's art introduced her in a practical way to psychology, which later prompted another change. "Learning disabilities" were finally being recognized at that time, and Hilda worked at the Child Study Centre of the University of Ottawa during the sixties, specializing in the solution of learning challenges related to written language. This remained her focus for the rest of her teaching career.

Most of these years were spent in Ontario, but were interspersed with time abroad to study at the Bath Academy of Art in Corsham, Wiltshire, and to teach, travel and mount a few painting exhibitions.

In 1978 she moved to Victoria BC and bought a house by the sea, with the idyllic notion of concentrating on painting. Unfortunately the house was old and the coffers low, so although some paintings did materialize, she found herself renovating her old house and earning a living.

On her journeys across Canada – especially the long haul around Lake Superior, she was so moved by the grandeur of these freshwater lakes that the fairy tale *The Great Singing Lakes* was born. The story and illustrations, directed to the 9-12 age group, provided a creative outlet over the years while she attended to the facts of existence.

For many years she served as curator of ethnic art at Alcheringa Gallery in Victoria BC and made a number of expeditions to Papua New Guinea on behalf of the gallery. After retiring Hilda returned to her own creative activities, and was fondly referred to as Alcheringa's curator emeritus.

In writing her own obituary, which appeared in the Victoria paper, Hilda thanked her friends with the words, "Your love, your truth, your humour bridged the great divide of mortal flesh and made the passage beautiful - a living tapestry of colour, touch, of fragrance, song and laughter. Thank you for this shared time."



## AN ABORIGINAL NURSES PRAYER

Oh  
Creator,  
Thank you,  
For this wondrous  
Day for providing me  
The knowledge of your  
Gifts of healing. Open my  
Eyes, ears, and heart to see  
Hear, and feel for those in  
My care today Give me the  
Courage and compassion  
To help those in need  
Give me the strength  
Wisdom, to guide  
Who have lost  
Their way  
Give me  
The  
Ability to walk with  
The broken and hurt, to  
Understand, to be a light,  
On their darkest day. Wela'lin

*Alma MacDougall*  
*Mik'kmaw Nurse 2004.*

