

The Nunavut Nursing Program: A Retrospective Reflection

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Abstract

The Dalhousie Bachelor of Science in Nursing (BScN, Arctic Nursing) program, delivered through Nunavut Arctic College, admitted its first students in 2000. There have been forty-eight graduates, seventeen of whom are Inuit. The Arctic nursing program's focus on Indigenous education is unique in many ways due to the remote setting and relationship to the territory of Nunavut. The program is currently undergoing a curriculum revision. As part of the review process, we have evaluated and reflected on the expectations and goals of the program over the years, as well as on our successes and disappointments. In this report, we share our journey, the challenges (past, present, and potential future) and the solutions, and the students' perspectives on the program's benefits. This report is part of a special collection from members of the University of the Arctic Thematic Network on Northern Nursing Education. The collection explores models of decentralized and distributed university-level nursing education across the Circumpolar North. This report is part of a special collection from members of the University of the Arctic Thematic Network on Northern Nursing Education. The collection explores models of decentralized and distributed university-level nursing education across the Circumpolar North.

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Following the signing of the Nunavut Land Claims Agreement in 1993, the territory of Nunavut, Canada was established in 1999 by the Nunavut Act (Department of Justice Canada, 1993; Nunavut Tunngavik, 2004), which resulted in the division of the existing Northwest Territories. The territory of Nunavut occupies 20% of Canada's land mass (Government of Nunavut, 2012)—it is located north of five Canadian provinces and consists of three regions spanning three time zones. The population of 37,026 (Nunavut Bureau of Statistics, 2016) is 85% Inuit (Statistics Canada, 2015a). The territory consists of twenty-four communities that are accessible only by air or ship (in the summer). Health services include one hospital in Iqaluit, two larger health centres with inpatient capacity in Cambridge Bay and Rankin Inlet, and community health centres that provide basic primary health care in the communities. The eastern communities have access to the hospital in Ottawa, Ontario, whereas western communities access Edmonton, Alberta or Yellowknife, Northwest Territories.

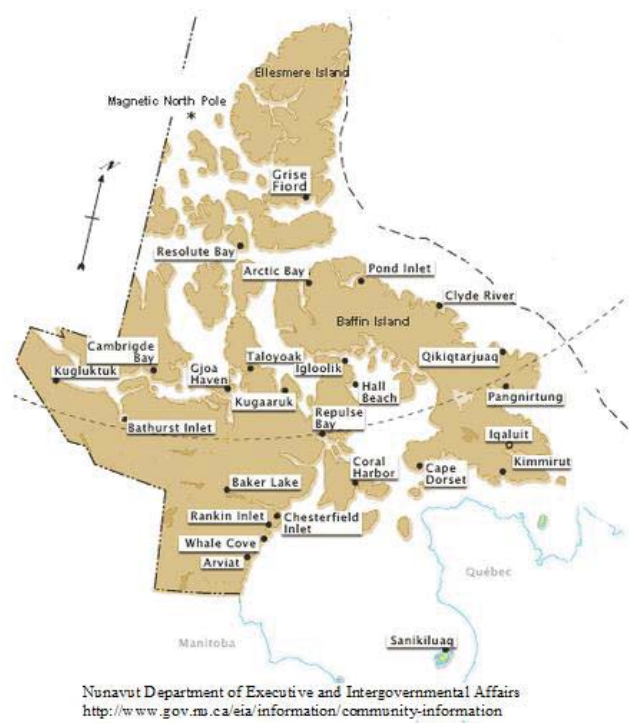


Figure 1. Map of Nunavut

One of the stipulations of the Nunavut Land Claims Agreement was to increase the Inuit participation in employment to representative levels (Indigenous and Northern Affairs, 2006). The legislation provided an incentive to develop a Bachelor of Science in Nursing with a focus on the health care needs and system of Nunavut. The Nunavut nursing program was developed through a partnership between Dalhousie University and Nunavut Arctic College to provide a quality nursing education to Inuit and other northern residents. Through this partnership, the BScN (Arctic Nursing) program was collaboratively developed as a unique program addressing both the academic requirements of Dalhousie and the cultural and contextual environment of Nunavut. The campus in Iqaluit is ideally situated for clinical practice in a variety of settings including the Qikiqtani General Hospital, the Public Health Centre, the Elders Home, and mental health services.

The Dalhousie School of Nursing, in Halifax, Nova Scotia, has long-standing ties to Iqaluit and the Canadian North through the Outpost Nursing Program, which prepared nurses for northern, remote, and rural nursing practice between 1966 and 1997 (Martin-Misener, 1997; Martin-Misener, Vukic, & May, 1999). The Primary Care Nurse Practitioner program was established at Dalhousie in 2000 and integrated the content from the Outpost Nursing Program. The process of BScN program development, with its associated challenges related to structure, financing, and the initial challenges of implementing a university nursing program, have been described elsewhere (Ellerton, Martin-Misener, Thibault, & Fudge, 1999). The delivery of the program remains a partnership with academic oversight provided by the Dalhousie School of Nursing. In September 2000, the first students were admitted into the program and they graduated in 2004. The purpose of this report is to share our journey over the past sixteen years, recounting our successes, challenges (past, present, and future), and solutions.

Background

Up until the Second World War, the Inuit peoples' contact with Europeans was mostly through the Hudson's Bay Company, the Royal Canadian Mounted Police (RCMP), and missionaries. In the 1950s, the Canadian government constructed schools and nursing stations in some locations. This was followed by a gradual movement of Inuit into permanent communities, driven by government policy (Edgecombe, 2006). Until the late 1980s, health care for Indigenous Canadians in the Northwest Territories was the responsibility of the Medical Services Branch of Health

Canada. In 1988, that responsibility for health care was transferred to the Government of Northwest Territories. With the formation of Nunavut, health care became the responsibility of the Government of Nunavut.

Starting in the 1950s, health care in the Canadian Arctic has relied on a system of community health centres, where primary health care is provided by resident registered nurses (RNs) in collaboration with physicians located in larger communities such as Yellowknife, Cambridge Bay, Rankin Inlet, and Iqaluit. Community health centres are well equipped, allowing nurses to provide a full range of primary health care services with individuals and families across the lifespan, including wellness care, health promotion and protection, chronic disease management, and home and school visitations. Nurses also assess and manage common illnesses, and, for those patients experiencing serious illness or injury, they provide emergency treatment and initial stabilization in preparation for emergency air evacuation to the nearest hospital.

The health care system in Nunavut is unique in several ways. The majority of primary health care services are provided at the community level and are impacted in communities that are accessible only by air. Resources are restricted to what can be provided by RNs at the community health centre. Physicians and some specialist services are available either sporadically at the community level or by flying the patient out to a larger regional centre or a territorial hospital. When necessary, patients are transferred to southern Canadian hospitals located in the cities of Edmonton, Winnipeg, or Ottawa. Midwifery services are not available in all communities; pregnant women in most communities must travel to Iqaluit, Churchill, or Yellowknife at 36 weeks to await the birth of their child.

The health care needs of the residents of Nunavut are also unique. Nunavut has a rate of respiratory disease higher than the national average, including the highest rate worldwide of hospitalizations for respiratory (RSV) infections in infants (Banerji et al., 2014). The mortality rate from lung cancer and suicide are at least three times higher than the national average (Statistics Canada, 2014). The prevalence of diabetes, while lower than the national rate, is increasing (Nunavut Department of Health, n.d.). In addition, social and mental health problems are significant but there are limited resources available (Healey, 2010). Graduates of the Nunavut nursing program—especially the Inuit graduates—have an understanding of the health issues of Nunavut, its health care system, and the Inuit culture and language. This positions them to better meet the needs of the population of Nunavut and positively influence the health care delivery system.

Challenges

Nurses are the cornerstone of health care in the Canadian Arctic. However, while Inuit make up 85% (Nunavut Bureau of Statistics, 2014) of the population of Nunavut, prior to the first graduates of the Nunavut nursing program in 2004, only one of the approximately 150 registered nurses at that time were of Inuit ancestry. Currently, there are forty-eight graduates of the program working in Nunavut, seventeen of whom are Inuit. In Nunavut, as in other Canadian rural and remote communities, the turnover rates are high, which creates service discontinuities and prohibitive recruitment costs (MacLeod, Stewart, Kulig, & Pitblano, 2004; Kulig, Kilpatrick, Moffitt, & Zimmer, 2013; Nunavut Department of Health and Social Services, 2007), and necessitates the use of agency nurses. The establishment of a baccalaureate program in nursing was an unprecedented opportunity to begin to resolve the underrepresentation of the Inuit and the problems of hiring from other locations, and to eventually rectify employment instability in the nursing workforce.

The Nunavut nursing program has experienced, and continues to experience, challenges with student recruitment and retention similar to other Canadian programs mandated to enhance accessibility for Indigenous students in nursing education. National and territorial recruitment and retention strategies (National Task Force on Recruitment and Retention Strategies, 2002; Nunavut Department of Health and Social Services, 2007) have identified the low number of Indigenous students in Canada and summarized the literature on strategies to enhance recruitment and retention of Indigenous people in nursing programs. Adequate financial, academic, personal, and family supports were identified as essential. Similarly, the Aboriginal Nurses Association of Canada (2000; 2006) identified the following strategies to enhance the recruitment and retention of Indigenous nursing students: financial and academic support, appropriate and accessible nursing education, entry programs, and recruitment initiatives at the community level. A number of variables support the educational success of Aboriginal nursing students. These factors relate to the individual student, instructor, institutions (college/university), and external influences (Yurkovich, 2001; Smith, MacAlister, Gold, & Sullivan-Bentz, 2011). Our experience has revealed the importance of similar supports and strategies for success. In the next section of the report, we will discuss the lessons we have learned about what it takes to increase the opportunity for student success and to ensure the sustainability of the baccalaureate nursing program in Nunavut.

Focusing on Strengths

The ability of the institutional partners and the program faculty to capitalize on the program's strengths has contributed to its sustainability. The strengths are multi-faceted but can be clustered into the following categories: the students themselves, the curriculum, and the learning environment.

Students

In the early years of the program, most of the students were older. More recently, students are entering the program either immediately after graduating high school or shortly after, and are therefore younger. While Inuit students are the priority for admission, other residents of Nunavut are considered once Inuit admissions are completed. The applicants are still required to have lived in the territory for a year prior to application, ensuring that the community and culture are not completely new when they enter the program. A recent influx of immigrants into the territory has also resulted in a more diverse student body.

Historically, education opportunities in Nunavut at the primary and secondary levels have been limited. Circumstances are slowly improving due to the introduction of baccalaureate-educated teachers and more attention being directed at developing educational standards within the territory. For the last fifteen years, secondary education has been available in all communities of Nunavut. However, accessibility to all senior level science or academic math and English courses is not available in all communities; and where it is available, it is not consistent. To accommodate this, the program accepts Nunavut graduates who have completed high school but lack these courses, on the condition they successfully complete a nursing access year. Three years ago, the nursing access year replaced the more general college foundation program. The pre-nursing program is a two-semester program focusing on science, English, mathematics, and introduction to health careers. There is a major emphasis on study skills and time management skills, as well as on learning how to access information and how to write papers.

Inuit students come to the program with a high degree of commitment to family, the Inuit way, and a pride in Nunavut. They want to succeed not only for themselves but also for their families and the people of Nunavut. As a result, the students are supportive of one another and have a real desire for fellow students, across the years of the program, to be successful in their studies. This valuing of communal achievement leads to peer support.

Curriculum

The program is academically similar to other university programs in Canada, and the fit of the curriculum with *Inuit Qaujisarvingat* (IQ; Inuit knowledge), Inuit culture, and the social determinants of health in a Nunavut context are strengths, which the program has capitalized on to enhance student opportunities for success. The foundations of the curriculum emphasize the nurse's role in caring for the well-being of others and establishing partnerships with people to help clients to achieve their full potential. Students are encouraged to integrate Inuit Qaujisarvingat and culture with nursing theory and science, and to deliver health care that is current and evidenced but that also incorporates aspects of the Inuit culture. The guiding principles of Inuit Qaujisarvingat (Arnakak, 2000) are congruent with nursing values and concepts. *Pijitsirniq* (the concept of service) can be harmonious with the caring aspect of nursing. *Aajiiqatigiingniq* (consensus decision making) is consistent with the principles of person-centred care. *Pilmaksarniq* (skill and knowledge acquisition) reinforces the importance of nursing knowledge and skill mastery. *Piliriqatigiingniq* (collaborative relationships, working together for a common purpose) supports the teamwork, community development, and interprofessional nature of nursing. *Avatimak Kamattiarniq* (environmental stewardship) is a part of environmental health and infection control. *Qanuqtuurunnarniq* (being resourceful to problem solve) is a fundamental aspect of the nursing process and the critical thinking required by nurses. Elders and other Inuit resource people are involved in some courses. Literature related to Inuit culture, language, and Inuit health status is used in course delivery. Nunavut Arctic College is committed to incorporating IQ into all programs and has developed guidelines for new faculty to help them incorporate Inuit ways of knowledge into their classroom teaching (Owljoot, 2006). This is most often achieved by inviting Elders to speak to the classes on various topics, but can also mean that the class may be held out on the land – as is the case with learning to recognize and gather medicinal plants.

In addition to their involvement in the curriculum, Elders and Inuit leaders have been involved in activities arranged specifically to help boost morale and motivation at times during the program when students were particularly discouraged. Students have identified that the involvement of Elders in program delivery has helped them to better communicate with Elders and to develop a better appreciation of Inuit traditional knowledge, values, and culture. Several students have stated that the opportunities for interaction with Elders within the curriculum have motivated them to stay with the program and to keep focused on becoming a nurse.

Learning Environment

The learning environment is a major contributor to student success and therefore to the success and sustainability of the program. The professor-student relationship is of particular importance to the learning environment. Faculty members are mentors and tutors to the students, and students are a great resource for the faculty on Inuit culture. There is a partnership between them built on respect. The low faculty to student ratio has no doubt provided the opportunity for this transactional learning environment. While this ratio varies from year to year, it never exceeds 1:15 and has on occasion been as low as 1:3. The faculty includes a program manager, one pre-nursing instructor, a science instructor, and five nursing instructors. Although their focus might be different depending on their role, all of the faculty work as a team to ensure consistency in program delivery and expectations. This team approach across the pre-nursing and nursing programs helps to ensure a smooth transition for students taking the preparatory year. While not a member of the faculty, the coordinator of the Dalhousie BScN (Arctic Nursing) program is also a part of the team. Dalhousie remains responsible for the curriculum delivered by Nunavut Arctic College faculty.

The Nunavut nursing program has been extremely fortunate to attract nurse educators with content expertise who recognize the importance of a humanistic and culturally sensitive approach to nursing education. Stakeholders and students have vocalized that they did not want a curriculum that was less challenging than other Canadian schools, but they felt that it was essential to have instructors with certain characteristics who could provide the necessary support to help students meet the objectives of the program. Some of the qualities that students have identified as beneficial in an instructor include the following: caring and helpful; approachable, flexible; non-judgemental; willing to help students solve problems; accepting and respectful of students' cultures; able to establish and maintain a close connection with students; and, finally, communicating a faith in students' ability. These descriptors are similar to those identified by other authors (Labun, 2002; Smith et al., 2011; Yurkovich, 2001). We also agree with Evans (2004) that it is important for faculty to be trustworthy and personable so that students can safely share their personal stories.

The program has a comprehensive support system in place for students. Student progress is regularly checked, with a focus on facilitating success. Attendance is monitored and the reasons for missed classes are explored with students. Students who do not have a legitimate reason for

absenteeism meet with their instructors and, if necessary, the program manager, to develop a plan to address attendance. In addition to regularly scheduled faculty meetings, impromptu meetings are held to address problems as they surface; and, when needed, faculty from the Dalhousie University School of Nursing have been involved in these discussions.

Principles of adult learning are evident in the program, and students are encouraged to build rapport with faculty and to openly discuss their issues and concerns. Nunavut Arctic College provides a basic English course that focuses on paper writing and referencing styles such as APA. In addition to mentoring provided by professors, an academic tutor is available to assist students to develop their academic skills. A counsellor is also available to assist students with personal and social problems.

Clinical experiences take place in the local regional hospital and in various community venues including the public health centre, the correctional facility, Elders centres, and women's shelters, to name a few. The intersession for third year provides students with the opportunity to complete a six-week practicum in a large tertiary center in Halifax, along with students from the Dalhousie program. While in Halifax, they also complete a two-week mental health placement. Year Four of the program involves both a five-week community placement in Nunavut, outside of Iqaluit, and a five-week final consolidation experience in Iqaluit.

Changes in the program have been made based on student input and on course and program evaluations. These changes have not only improved the program but have helped to empower students. Research has found that assertiveness enables students to become advocates for their own learning and to be actively involved in program planning (Yurkovich, 2001). In the last three years, students have participated in a two-day "Leadership Bootcamp" in Halifax for students involved in a clinical mentorship program at Dalhousie. As a result of this experience, they have shown initiative in advocating for similar mentorship experiences in the Nunavut nursing program.

Small class size allows for flexibility in program delivery while maintaining the standards of nursing education. Because students relocate their families to Iqaluit with them, usually for the duration of their studies, they often find that their family responsibilities limit the amount of time to study and work at home. To compensate for this, the program is structured to provide ample study time to complete some of their "homework" and assignments during the day. In addition, a study space at the college is available in the evenings and on weekends. At times, it has been necessary to develop creative strategies such as extending courses, sequencing

courses differently, or arranging individual preceptorships to enable some students to complete course requirements. Flexible programs that are relevant to the life experiences of the student are contributing factors in Indigenous student progression through nursing programs (National Task Force on Recruitment and Retention Strategies, 2002).

External Supports

Several external supports, including financial assistance for students, program funding, and community support have been instrumental to the sustainability of the program.

Student Financial Assistance

The main source of support for many students is the Financial Assistance for Nunavut Students (FANS) program, administered by the Government of Nunavut Department of Family Services (Government of Nunavut, n.d.). In keeping with the government's mandate to educate and employ lands claims beneficiaries and Nunavut residents, the funding structure is tiered and includes return-of-service incentives for those who remain in the territory to practice following graduation. For beneficiary students, the FANS program offers basic and supplementary grants that do not have to be paid back at graduation. These grants will cover all school costs and travel fees for the students, their spouses, and dependants. Needs-assessed loans are also available on an individual basis. For non-beneficiary students who are residents of Nunavut, the basic grant is available to cover one year of post-secondary education for each three years that they have spent in the public school system in Nunavut. These students are eligible for primary, secondary, and needs-assessed loans. And, finally, Nunavut residents without Nunavut schooling are eligible for loans only, which can be forgiven with a return-of-service agreement, in this case to practice nursing in Nunavut. These funding opportunities are contingent on satisfactory attendance and academic performance (Government of Nunavut, n.d.).

Several Inuit associations offer grants and scholarships to Inuit students, such as the Kakivak Association. Some of this funding is also contingent on attendance and academic achievement while enrolled in the program.

Nunavut Arctic College offers accommodation at affordable rates, with priority given to students from out of town. There are single and family units available, with the latter only available to students with families (Nunavut Arctic College, 2012). There is a day care on-site, with

reserved spaces for students and a subsidy available from the Department of Family Services (Nunavut Department of Family Services, n.d.). This is next door to the college; for housing that is further away, a shuttle bus service brings students to class or to campus for meals.

The local co-op grocery store offers a student discount, and students are eligible for discounted rates at one of the fitness centres. As well, the college has an active student services department, which offers academic and personal counselling, and arranges social events and holiday celebrations for students and their families.

For nursing students, there are several awards available. The Queen Elizabeth II scholarship award is given every year to the two students with the highest grade point averages in Years 2, 3, and 4 (Nunavut Arctic College, 2015). This award is administered by the Department of Health.

Nunavut beneficiaries are also eligible to apply for the Dr. Christine Egan Memorial Scholarship. This award comes from the University of Manitoba and is awarded to those who demonstrate commitment to pursuing their nursing career in Nunavut (University of Manitoba, 2015). Several Nunavut Arctic College students have received this award to date. The support for nursing students continues after graduation, and is recognized by the Government of Nunavut as an important step towards building a strong and stable northern workforce. The government priorities for supporting nursing students include such action items as increasing the math and science skills of high school students; helping them to be eligible for enrolment in the nursing program; and providing tutoring support, child care support, and guaranteed employment for all nursing program graduates with the Department of Health and Social Services (Nunavut Department of Health and Social Services, 2007).

Program Funding

The program was initially funded on an annual basis by the Department of Health and Social Services. In 2005, ongoing long-term funding was established and the program was transferred to the Department of Education. A close relationship to the Department of Health continues. It is recognized that it will take time for the program to grow and for enrolment to increase. This is difficult to reconcile with the aspirations of increased Inuit employment contained in the land claims agreement; however, the shift to a predominant Inuit nursing workforce in Nunavut will happen gradually over many years.

Community Support

Finally, the community at large is supportive of the nursing program. In the clinical settings, patients express to the students how important it is to be cared for by Inuit nurses, and also by non-Inuit who are knowledgeable and respectful of the Inuit culture.

Addressing the Challenges

In many ways, the challenges of implementing the Nunavut nursing program are the shadow side of the many things that have gone well. Some of the challenges have existed since the program began but have found different forms of expression within the evolving context of the territory of Nunavut. Implementing a unique nursing curriculum that is designed to be relevant to the health needs of Nunavut and the Inuit culture is complex. One of the challenges is the non-Inuit faculty being asked "what does it mean for a curriculum to be relevant to Inuit culture" and "what is relevant?" These are questions we continue to grapple with. Through conversations with students, Elders, and other community members we continue to evolve our understanding of the diverse nature of the Inuit culture. Because language is an expression of culture, it is particularly useful for illustrating this point.

The nursing program encourages students to use their traditional languages, because being able to communicate in a client's first language is a component of culturally relevant nursing care (Manifold & Rambur, 2001). Students in the nursing program are expected to participate in the Nunavut Arctic College Inuktitut language modules. However, Inuktitut has numerous dialects and written forms and is not the only Inuit language of Nunavut. Although many Inuit students are fluent in their traditional language, some students, especially the younger ones, do not speak or write Inuktitut; similarly, students who are non-Inuit but long-time residents may or may not be fluent in Inuktitut. While the Inuktitut modules, incorporating Inuit medical terminology, attempt to address the language in the program, some students and faculty continue to encounter communication difficulties with unilingual Inuktitut-speaking clients, particularly Elders.

An obvious challenge for faculty is their limited knowledge of Inuit culture. The Nunavut Government and Nunavut Arctic College provide a number of initiatives to promote understanding of Inuit culture. There are free education sessions, cultural awareness events, and language courses. The college has published a series of books entitled *Interviewing Inuit*

Elders, which are transcripts of Inuit Elder interviews about traditional knowledge. Faculty have found these books to be very helpful. Faculty remain aware of their limited knowledge of the culture and the challenges this creates in teaching nursing. Dickerson and Neary (1999) and others (Smith et al., 2011) reported similar concerns of faculty teaching Indigenous nursing students. One solution to this problem is to have Inuit faculty, and Nunavut Arctic College has created a training position that would mentor an Inuit nurse to work on a master's degree while being mentored into a teaching role. We currently have not been able to recruit into this position.

Another challenge for the program is the availability of clinical learning experiences. There are good opportunities for clinical learning in community settings in Nunavut, but the opportunities for clinical learning in acute care, rehabilitative care, and mental health settings are limited. There is one full-service hospital located in Iqaluit. Unfortunately, the inpatient services provided there are low in volume, variety, and acuity. The program must provide students with sufficient opportunities to develop the competencies required of an entry-level nurse in the Northwest Territories and Nunavut (Registered Nurses Association of Northwest Territories and Nunavut [RNANT/NU], 2014), and to meet the competencies tested on the NCLEX licensing exam. To supplement the clinical experience, simulation in the form of case studies, virtual experiences, and use of medium-fidelity manikin scenarios are utilized. The clinical experience in Halifax at the end of third year allows evaluation of the students' competency level and boosts their confidence in their education experience in Nunavut and their own evolving knowledge and skills as a nurse.

Recruitment and retention of faculty has been a challenge for a number of reasons. The program seeks to hire nursing faculty with a master's degree and relevant teaching experience, but this has not always been possible. Our challenge has been to provide opportunities for continuing education, and to find a meaningful way to provide the mentorship and support for faculty who are new to teaching in university education. Usually there are nursing faculty at Nunavut Arctic College who have sufficient experience in nursing education and practice to mentor new faculty with less teaching experience, and this on-site method of peer mentoring has been quite successful. Opportunities for faculty to engage with faculty from other universities are helpful for broadening perspectives. However, geographic distances, time zone differences, conflicting work schedules, and technology make this difficult. Arctic College provides faculty with annual professional development funds and has been supportive in

continuing education opportunities. Many of the faculty have completed degrees while employed in the program. When we have not been able to recruit master's level faculty, we have hired a limited number of baccalaureate-prepared nurses with northern experience on the condition that they actively pursue their master's degree. As Internet connections improve, so do the possibilities for faculty to participate in professional development opportunities at Dalhousie. The modified BScN program at Dalhousie may provide the opportunity for Nunavut Arctic College faculty to be mentored in Halifax during summer semesters.

Recruitment and retention of qualified Inuit students has been an ongoing challenge for the program. The Nunavut Arctic Nursing program has utilized a number of recruitment strategies such as the development of posters featuring student photographs and personal statements of the program from current and past students. These posters and program brochures are distributed to communities and, with the assistance of key people such as the high school principal, adult educator, and supervisor health programs (SHP), they are distributed and displayed. In addition, the faculty attend recruitment events and the program manager visits communities to promote the program. While doing community placement, students take part in a variety of initiatives to promote the program by visiting schools and making presentations about the program. In 2010, the faculty solicited a book targeted to Grade 4 and 5 students, *Moe and Malaya Visit the Nurse* (by Peggy Collins & Odile Nelson), promoting nursing as a profession. Copies of the book, along with Moe and Malaya dolls, were distributed to all elementary schools in the territory.

While we have seen a gradual increase in the number of Inuit applying and being admitted to the program, the number of Inuit students remains modest for a number of reasons. According to Statistics Canada (2015b), the number of high school graduates remains low in Nunavut, with 200 graduates annually. These graduates have a number of career and educational choices both at the community and territorial level. Furthermore, while secondary school education in Nunavut continues to improve, there is still limited access to the Grade 12 academic math and sciences required to be successful in the nursing program. As recruitment material is evaluated and revised, additional information for teachers and schools will be developed, reinforcing the need for the required courses for students wanting to enter nursing.

The attrition rates in the first two years of the program remain high. The reasons for this attrition have been attributed to a variety of factors. The transition from their small home communities to Iqaluit is difficult

for both students and their families. Some students find that personal and social problems interfere with their studies. While the counselling service provided by the college is helpful, some students still leave the program. As a result of the disparity of secondary education in communities, students have on occasion found difficulty with the academic expectations of a university program. A number of initiatives have been used to address this issue. An access year in a variety of formats has been tried with minimal success. In 2013, a pre-nursing program replaced the general college foundation year. This program has significantly improved retention, as have the tutorial services available.

Internet

Internet service for Nunavut Arctic College is provided by the Government of Nunavut and has presented a number of challenges. While adequate for email and basic Internet activities, such as searching databases and downloading articles, the system is slow and behind the government firewall. Many of the educational resources, such as streaming, webinars, and online material, are not fully accessible. The college has provided several computers not connected to the government server to allow access to educational resources blocked by the government firewall, but the bandwidth remains low and, as a result, downloading is slow and websites often time out. Considering the increasing volume of online resources for nursing education, finding a solution to this remains a priority for the college.

Student Perspective

The program at Nunavut Arctic College offers many benefits, many of them aimed specifically at making education more accessible to students who have to travel to Iqaluit, and students with families. Instrumental and financial support is significant and comes from multiple sources, as mentioned above.

Collaboration with Dalhousie University allows students to experience the benefits of a small college setting while still having access to all of the academic resources available to students in Halifax. In the 2015-2016 academic year, class sizes range from between three and nine students. These small class sizes allow for more one-on-one interactions between instructors and students. Should students have concerns, instructors can address them quickly. Students who may otherwise be lost in a large class have the chance for their voices to be heard in a less threatening environment. Being in the capital, where most of the health resources

are concentrated, guest speakers and workshops are readily available to students, and most departments are eager to send representatives to speak to them. Students are able to reach out to the community and engage with agencies. In keeping with Inuit Qaujimatutunqit (IQ) principles, Elders and community leaders often visit the nursing class to share traditional knowledge about health and culture—an event always appreciated by students (Coman, personal communication).

The students have also voiced that they appreciate small classes and the personal attention: “The nursing program coordinator knows us all personally, the faculty knows who we are, the students all know each other—making for a great learning experience” (K. McConnell, personal communication, January 2016).

The benefits of the small setting and small community (by southern standards) also extend to the clinical setting. While some students feel that their exposure to clinical experience is limited, others feel differently: “Clinical is amazing because we see a handful of different conditions and learn in small groups. We are not stuck to just a specific area of the hospital. The nurses and doctors at the hospital in Iqaluit know who we are and what to expect of us. The hospital is a comfortable environment to learn in for nursing students” (K. McConnell, personal communication, January 2016).

Upper-year students have reported that when they travel to Halifax for the Year 3 clinical experience, they see that the standard they have been held to is quite high. They are pleased to find that they are far more prepared than they thought, which they also attribute to the small clinical groups—not only due to the personal attention, but to the fact that faculty are better able to maintain these standards. If there is a concern with student performance, it is more readily apparent, making intervention and follow-up simpler and more constructive (T. Glugosh, personal communication, February 2016).

The remote location of the school does present some unique challenges to students and faculty, the most noticeable of which is the quality and reliability of Internet service. With so many of the needed resources only available online, the students do report this as a genuine concern. This is especially significant for nursing students since licensing exams are done via computer-adaptive testing.

The high cost of safe and nutritious food in Nunavut is a well-publicized issue, with one-third of families reporting food insecurity and/or food purchases consuming most of the household budget (Roshanafshar & Hawkins, 2015). Our students are no exception, and several report that

while the funding and support is very good in Nunavut, it is inadequate to cover food costs. The college does have a food bank available to students for emergencies, but this is not a long-term solution.

And, finally, the weather can present a significant challenge to program delivery. Every academic year, there are multiple days when the college is closed due to blizzard conditions or extreme cold, with very little time left to make up the classes and labs that are missed. When the college closes, students are not permitted in the clinical placement settings either, potentially losing more time. Further complicating matters is the policy that when the public (i.e., K–12) schools close, classes are cancelled at the college even if the Government of Nunavut has not closed the college building. This came about in part because of the large proportion of students at the college with children—when their children are sent home from school, the college students naturally wish to leave as well.

Inuit students who travel from other communities to Iqaluit for their studies face some greater challenges. Inuit have a strong family connection that can outweigh other commitments (Pauktuutit Inuit Women of Canada, 2006). This can make it difficult for a student to move away from their immediate family to pursue what is essentially an independent goal. Some students feel torn between their desire to study and responsibilities to their families in the home community, to the point where they may leave the program and return home. This is reflected in the fact that although the numbers of Indigenous and Inuit nursing students are increasing, there is no data showing how many of these students complete the program (Aboriginal Nurses Association of Canada, 2009).

According to students from smaller communities, there are complicated social pressures involved in pursuing post-secondary education. Not everyone shares the idea that academics and personal achievement are priorities, and since it is not common for people from the smaller communities to leave, it can be surprising for students' families. Families are very happy for the students, but have no idea how to support them. So far removed from their families, the students must develop new social support networks and actively seek out ways to engage in traditional and cultural activities that may have been more accessible at home. All the same, the students appreciate that the program is located in Nunavut, because it still feels like home even if it is not their home community (N. Enuaraq, personal communication, February 2016).

Conclusion

The sustainability of the baccalaureate nursing program in Nunavut has been fostered by the strength of the student population, government and community support, and the commitment of the university and college partners to the success of the vision declared in the Nunavut Land Claims Agreement. The experience of Dalhousie University School of Nursing in northern nursing, and the experience of Nunavut Arctic College with the delivery of degree programs, have been assets. It will take time for potential students to see themselves as professional persons and to come to believe in their ability to complete this program. Our graduates, as role models, are important for recruiting Inuit students. Over the past fifteen years we have slowly seen an increased interest in the program and in qualified candidates. The progress is slow as such changes do not occur overnight; it is an ongoing challenge to help stakeholders understand the required time and continued support to enable this evolution to occur.

As technology such as the Internet improves in the North, there may be opportunities to provide some pre-nursing and nursing content online so students can remain at home for parts of their program. There may also be opportunities for Nunavut Arctic College to provide continuing education for nurses across Nunavut. The development of mentorship programs for new graduates is also a positive step towards ensuring that Inuit and northern nurses feel supported in their careers and stay to practice in the North.

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