Measuring and Mobilizing Reconciliation and Indigenization in Allied Health Education

A Comparative Analysis of Competency Profiles, Standards of Practice, and Codes of Ethics in Canada

#### Territorial Acknowledgement

My name is Lynelle Yutani, my ancestry is half Japanese of indigenous decent on my father's side - from the Ainu tribes of Northern Japan, and half Anglo-Germanic on my mother's side – a mix of Dutch, German, and Scots-Irish.

Camosun College is located on the traditional territories of the Lekwungen people. We acknowledge their welcome and graciousness to the students who seek knowledge here.

I have been a visitor on their territories for 8 years.





#### FINAL REPORT % TRUTH AND RECONCILIATION COMMISSION OF CANADA VOLUME ONE: SUMMARY

Honouring the Truth, Reconciling for the Future



"RECONCILIATION IS NOT AN ABORIGINAL PROBLEM — IT IS A CANADIAN PROBLEM. IT INVOLVES ALL OF US."

#### **JUSTICE MURRAY SINCLAIR**

The TRC report culminates in 94 Calls to Action which outline the necessary steps that federal, provincial and municipal governments, as well as religious, educational and other institutions, must take to work toward reconciliation with Canada's Indigenous Peoples. (TRC, 2015)

# Purpose

- determine how Indigenization and Reconciliation have changed Allied Health (non-physician and non-nursing) professional practices;
- identify how the Truth and Reconciliation Commission of Canada's Calls to Action have been incorporated into national professional competency profiles;
- determine if these responses have directly resulted in positive changes for the indigenous peoples and populations (First Nations, Métis and Inuit) as intended, and/or;
- identify which of these (Allied Health Professional's) responses have directly impacted any particular, measurable health outcomes for indigenous peoples;
- determine if these practice changes have any unintended benefits or consequences to the health and welfare of all patients and clients, regardless of indigenous ancestry.



# **Hypothesis**



Indigenizing National **Competency Profiles**, Standards of Practice, and Codes of Ethics will result in increased ability to measure the effect of, and therefore achieve, the TRC's Calls to Action in Allied Health Professions.

# What is Indigenization?

Indigenization is the process by which Indigenous ways of knowing, being, doing and relating are incorporated into educational, organizational, cultural and social structures of the institution.

(Camosun College, Indigenization Initiative)

# Literature Review

- To say that rigorous, peer reviewed, literature and research on the effects of the Truth and Reconciliations' effect on indigenous peoples in Canada is sparse borders on the overly generous. This is hardly surprising based on the understandable negative cultural view that Indigenous Peoples have associated with "research".
- Historically, research with indigenous populations has frequently ended in exploitation ("TCPS – Chapter 9, 2014). In addition to the tremendous atrocities committed against Aboriginals, who were unknowingly experimented on (Ermine, Sinclair & Jeffery, 2004), the westernized, colonial idea that other ways-of-knowing are incompatible with academia still persists ("Decolonizing the classroom", 2018).

# Literature Review

- Searching the customary academic databases (National Institute of Health - USA, Canadian Institute of Health Information, Canadian Institute of Health Research, Pub Med, National Center for Biotechnology Information, EBSCO clearinghouse, Government of Canada, and single search tools offered by Weber State University and Camosun College yielded few overall results, fewer relevant, peer reviewed results.
  - Of those results that could be considered relevant, there were two distinct groupings, these coinciding with previous Reconciliation efforts in Australia and South Africa ("Home | Reconciliation Australia", 2017), ("Truth and Reconciliation Commission, South Africa)", 2018). However, due to the dissimilar approaches to Reconciliation taken by Australia and South Africa and the tremendous diversity amongst the Indigenous Peoples of Canada, the results are difficult to correlate and use as either positive or negative predictors of progress and success for Canada (Uribe, 2006).



### No data! What to do?



### "Readiness" for Reconciliation

- Determine if a comparative analysis of each Professional Certification Board's degree of indigenization could also reveal "readiness" for reconciliation which would help to identify what types of resources and supports might be required to support the process of Reconciliation and help ensure its eventual, successful implementation.
- Identify a number of simple predictors for a professional organization's level of indigenization (McKeon, 2012).
- From these, hypothesize that it can be inferred that an organization's degree of indigenization could either predict, or be a precursor to their readiness (and ability) for reconciliation.

# Instead of investigating "Effects", looking for a way to quantify "Readiness"

#### The Bechdel Test

• The Bechdel test is a series of three questions, which originated from Alison Bechdel's comic "Dykes to Watch Out For" (Bechdel, 1986). The three questions (or tests) assess the presence of women in movies. If after watching a movie, the viewers answer "yes" to all three questions, that movie is said to pass the Bechdel test.

#### 3 Questions

- 1. Are there at least two named women in the movie?
- 2. Do these women talk to each other?
- 3. Do these women talk to each other about something besides a man?

(Sometimes a qualifier is added "for more than 1 minute" before the media is said to have passed)

# The right tool for the job...



# **Simple Sampling**

Simple, non-Boolean search technology was applied to each public facing website seeking the following terms:

- Indigenization, later shortened to Indigenous
- Aboriginal;
- Reconciliation;

For instances when the professional website lacked an internal search tool, this author used the "site:url search term" typed into a google search bar technique for searching an entire website (Wainwright, 2013).

Discrepancies between internal site searches and google site:search were investigated and found to be largely due to background website duplication. Duplicate results were discarded whenever possible.

# Simple Scoring

The aggregate number of results or "hits" for each search were recorded:

- 10 search results or fewer, and the organization was deemed to have "low readiness"
- 10-99 search results, and the organization was deemed to have "modest or average readiness"
- 100 or more search results, and the organization was deemed to have "high readiness"

Searches for one organization's web site were run multiple times, on multiple dates, from multiple web browsers to validate numerical accuracy. There were no variations and further searches were conducted with Google Chrome for consistency.

### **Multipliers or Modifiers**

When the analyzed organization included any of the following, their readiness score was upgraded by one level for each unique instance:

- declarative statement(s) on the Professional Certification Association's website specifically in support of the TRC's Calls to Action, Indigenization, or Reconciliation; increased number of declarative statements in support of the TRC's Calls to Action;
- official support of a declarative statement by another Professional Certification Association; multiple statements of support; support of multiple other organization's Reconciliation efforts;

### Multipliers or Modifiers, cont.

- direct support for indigenous peoples, students, and/or graduates through grants, scholarships, and/or other allocation of specific resources not otherwise required by provincial or federal regulations;
- indirect support for indigenous peoples, students, and/or graduates through non-specific identified or published activities involving indigenous representation or participation;

Multiple mentions of the same instance were discarded whenever possible unless they were generated by different sources. Unclear instances were always included, (rounding up).

### What is the score?

- I search result for indigenous, 1 other unique search result for aboriginal, and no search results for reconciliation
- 6 search results for indigenous, 2 of which are duplicates = 4 counted results for indigenous, 3 unique search results for aboriginal, and 25 search results for reconciliation
  - What is suspicious about this? Medication "reconciliation" and accounting or financial "reconciliation" need to be accounted for and eliminated, (0 results relating to TRC)

### What is the score?

- One of the search results also indicated that the organization was observing "Orange Shirt Day" to commemorate those who attended Indian Residential Schools (<u>http://camosun.ca/news/press-releases/2017/sep/orange-shirtday.html</u>)
  - This is an upgrade or multiplier! Now this organization displays "modest readiness"

A "multiplier" suggests that regardless of the unique number of search results, the professional association has demonstrated behaviours consistent with successful reconciliation and may, already unknowingly be meeting some of the TRC's Calls to Action.

This scoring is intentionally generous when approximating what would constitute readiness in allowance that not all of an organization's philosophies end up on their public facing website.

### Who to Score? (Participants)

- Organizations currently participating in National Certification Assessment and Accreditation through Accreditation Canada using the Educational Qualification Standards Program ("EQual Canada", 2018). List of educational programs (accredited and registered) Last updated: March 1, 2018:
- Cardiology technology
- Cardiovascular perfusion
- Clinical genetics
- Cytotechnology
- Diagnostic medical sonography
- Magnetic resonance imaging
- Medical laboratory assistant
- Medical laboratory technology

- Medical laboratory technology
- Nuclear medicine technology
- Orthoptics
- Paramedicine
- Radiation therapy technology
- Radiological technology

### Participants, Continued.

- Due to the familiarity of this author with Medical Radiography in Canada, corresponding competency profiles from Medical Radiation Practice in Australia and Diagnostic Radiography in South Africa were selected to compare Reconciliation approaches by countries with similar indigenous populations.
- Additionally, this author included Pharmacy Technicians, Physiotherapists, and Dietitians for reasons discussed further in the Method section.
- As the only members of the healthcare team that were explicitly mentioned in the TRC's Calls to Action, this author included Nurses and Physicians in some comparisons to determine if this had an effect on degree of action.

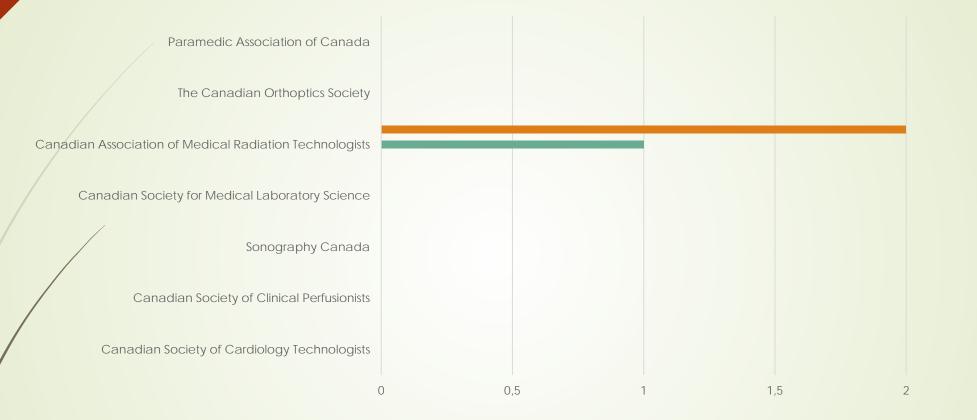
This author also sought to compare a number of non-professional certification organizations' degree of readiness for reconciliation to investigate if the estimation tool for could be accurately correlated with known organizational behaviours. To this end, these organizations were analyzed with high, self-declared levels of indigenization:

- Camosun College;
- Assiniboine Community College;
- Colleges and Institutes of Canada;

Three additional, well-known Canadian organizations with public facing websites were selected upon which to perform the readiness for reconciliation analysis as a control:

- Royal Bank of Canada
- Tim Hortons
- London Drugs

#### Readiness for Reconciliation Score for 7 National Certification Associations (13 Professions) Accredited by EQual Canada



Total website search results for indigenous, aboriginal, & Reconciliation

Presence of Declarative Statement(s) Supporting Indigenization/Reconciliation

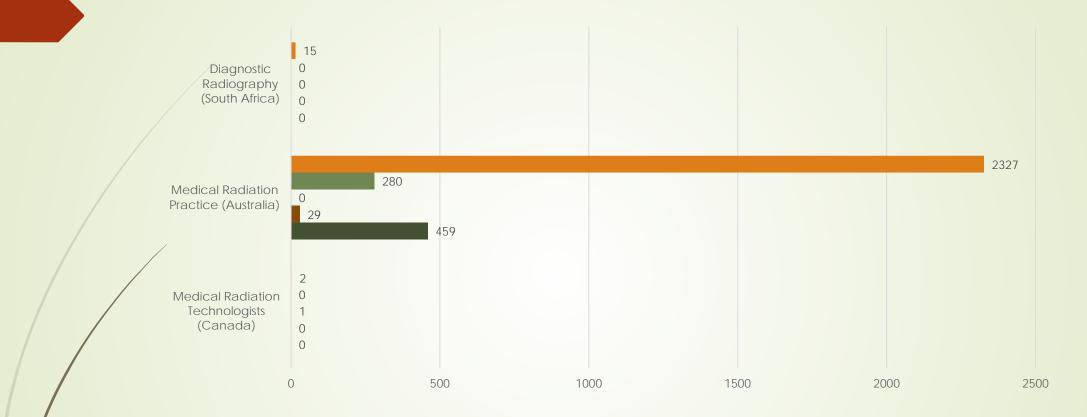
2,5

■ Officially Supporting Others' Declarative Statement(s), Multiple Own

Demonstrated Direct Support for Indigenous Peoples/Reconciliation

Indirect support involving indigenous representation and/or participation

#### Readiness for Reconciliation Score for Medical Radiographers



Total website search results for indigenous, aboriginal, & Reconciliation

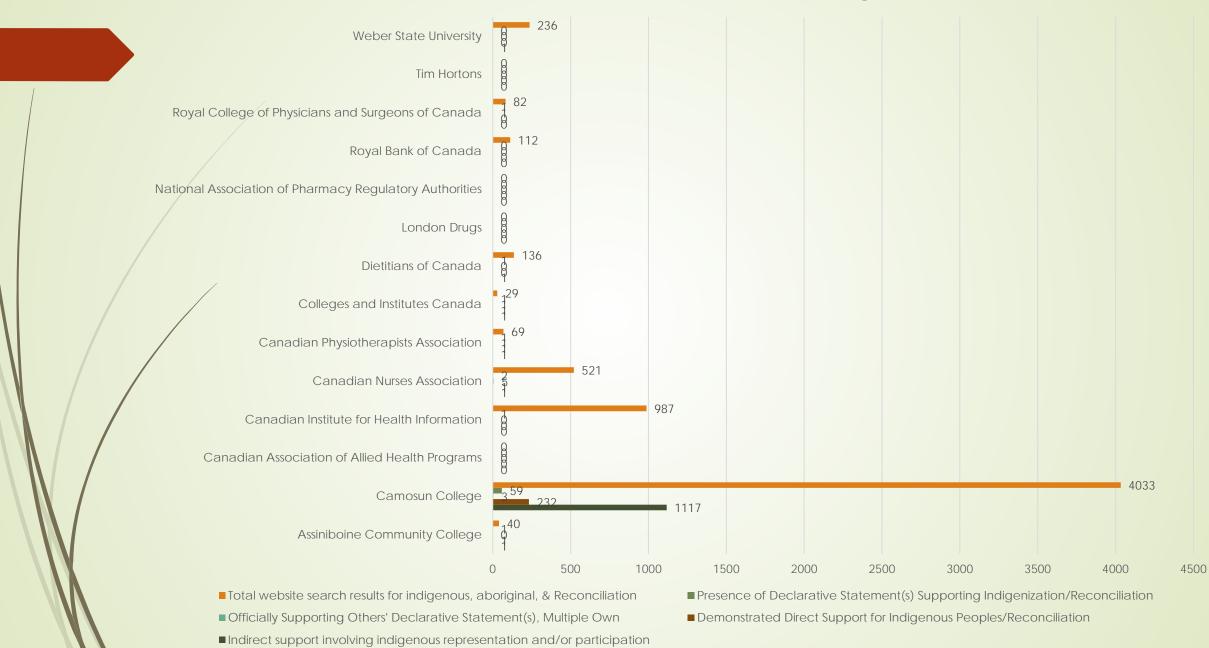
Presence of Declarative Statement(s) Supporting Indigenization/Reconciliation

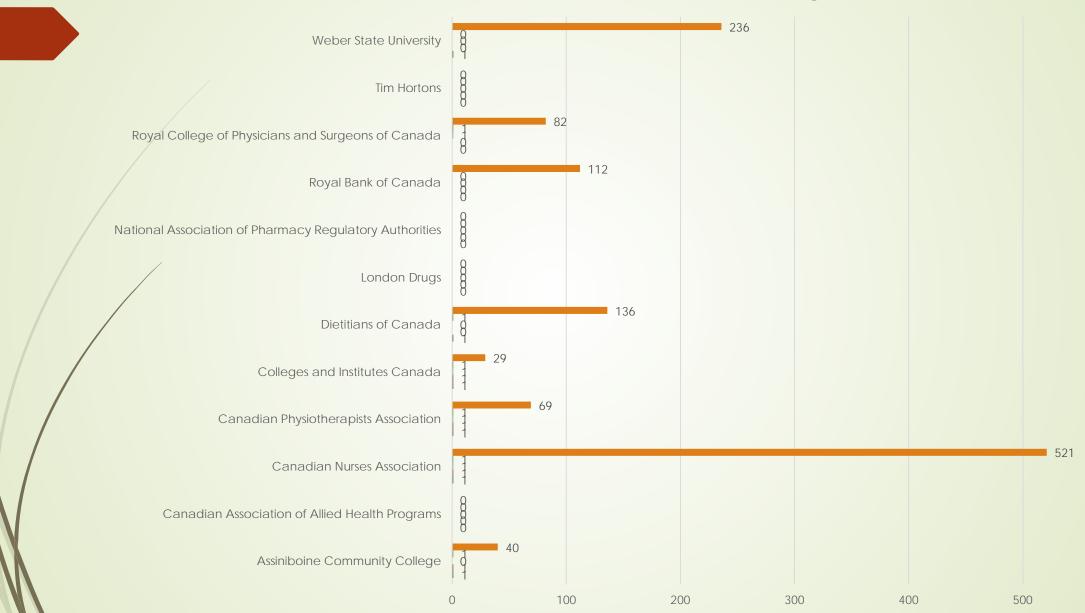
■ Officially Supporting Others' Declarative Statement(s), Multiple Own

Demonstrated Direct Support for Indigenous Peoples/Reconciliation

■Indirect support involving indigenous representation and/or participation

#### Readiness for Reconciliation Score for Selected Organizations

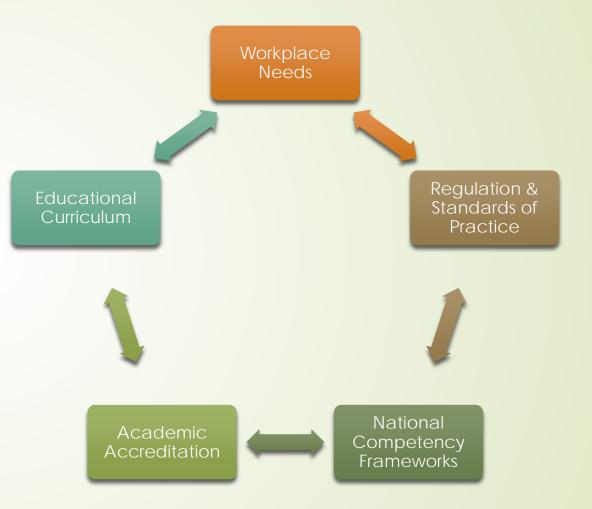


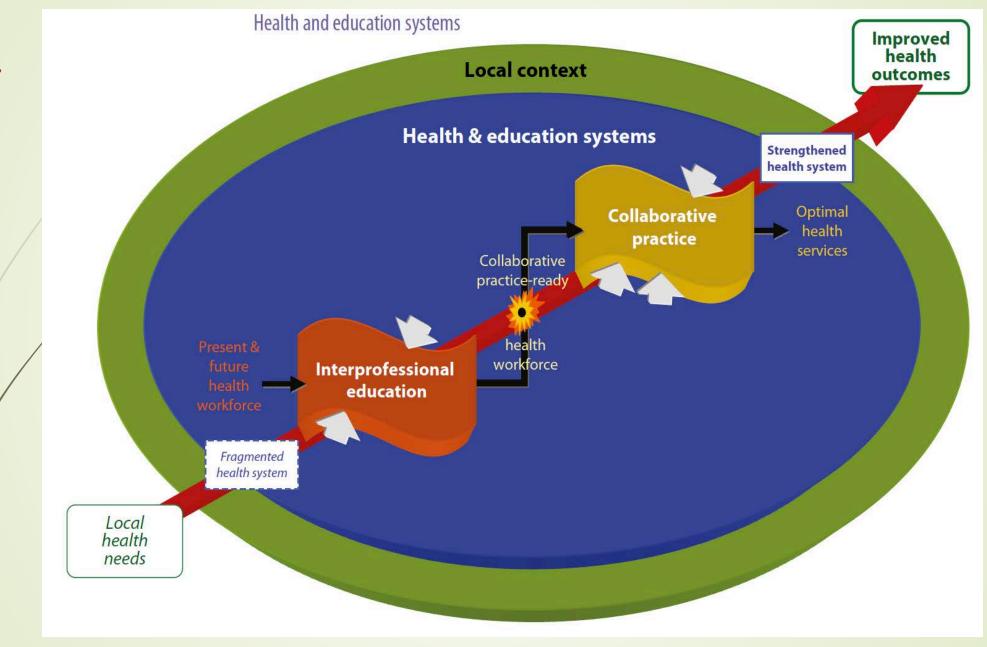


#### Readiness for Reconciliation Score for Selected Organizations

#### **Changing Practice**

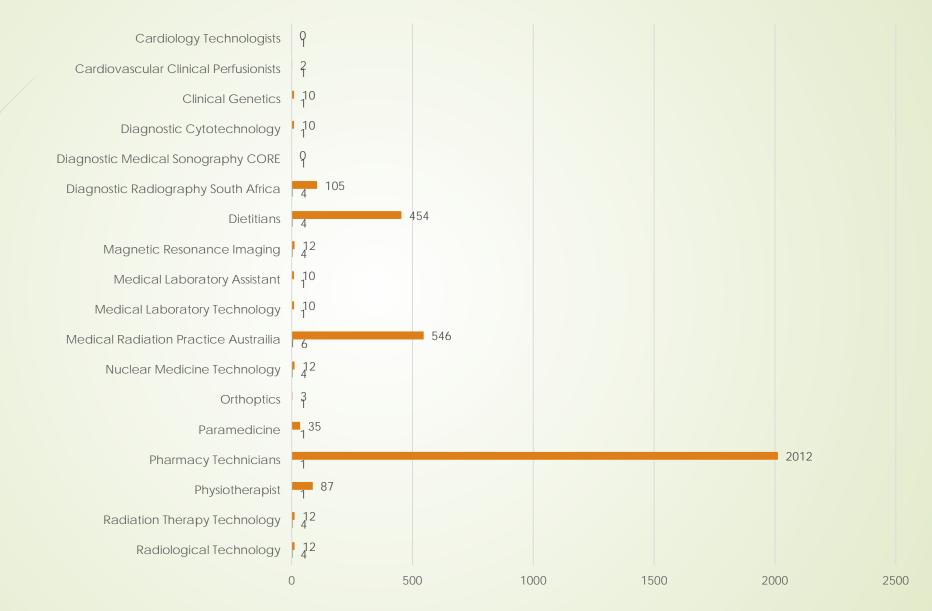
Changes to the professional practice cycle flow bidirectionally, and a transformational or sentinel event at any point can have profound effects on every other element. The most recent example of a transformational practice change for Health Practitioners in Canada was the addition of Patient-Centred **Collaborative Practice and Interprofessional Education** to fundamental entry-to-practice competencies across nearly all health disciplines. (Curran, 2011)





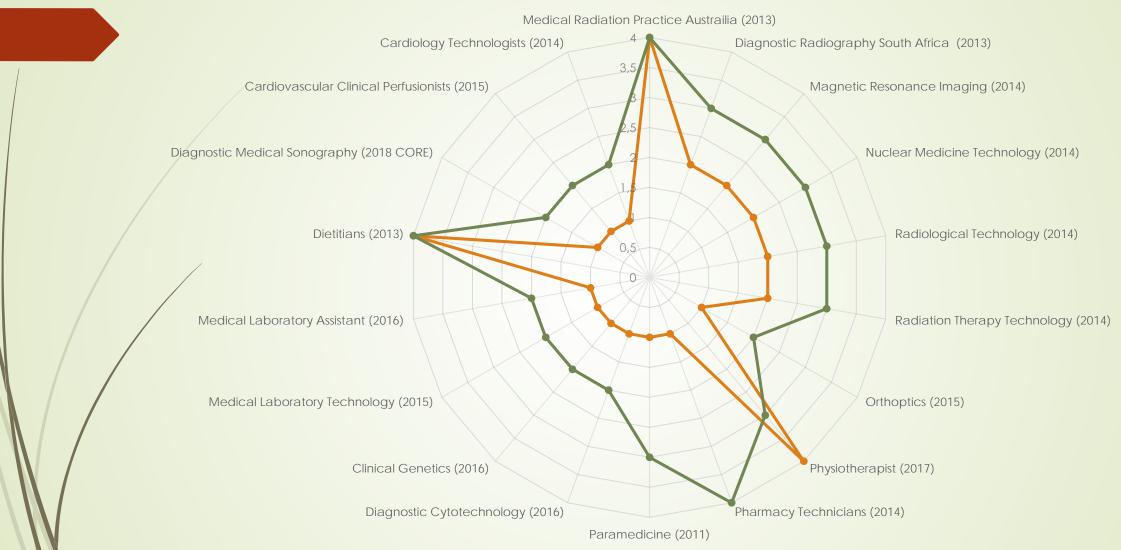
(World Health Organization, 2010)

#### Interprofessional, Interdisciplinary, Collaborative Practice Readiness Score



Interprofessional, Interdisciplinary, and Collaborative Practice Search Results
Declarative Statement for or about IPC/IDE including specific competencies

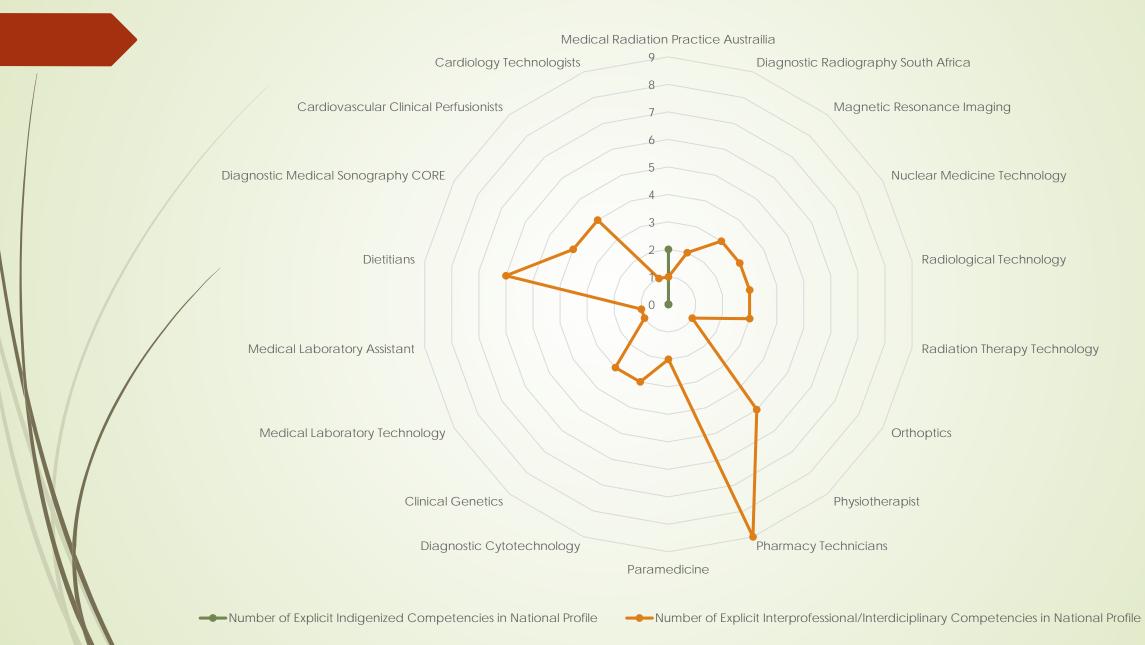
#### Comparison of IPC and Reconciliation Readiness Scores for Selected Allied Health Professions



Readiness for Reconciliation Score\* (Scaled No. of Website Search Results, Declarative Statement, Support for Declarative Statements, Direct, and Indirect Support of Indigenization and Reconciliation)

Readiness for IPE Score\*\* (Scaled No. of Website Search Results, Declarative Statement or Specific Competencies, Support for Declarative Statements, Direct & Indirect Support Inteprofessional Collaboration)

#### Interprofessional Competencies vs. Indigenization Competencies

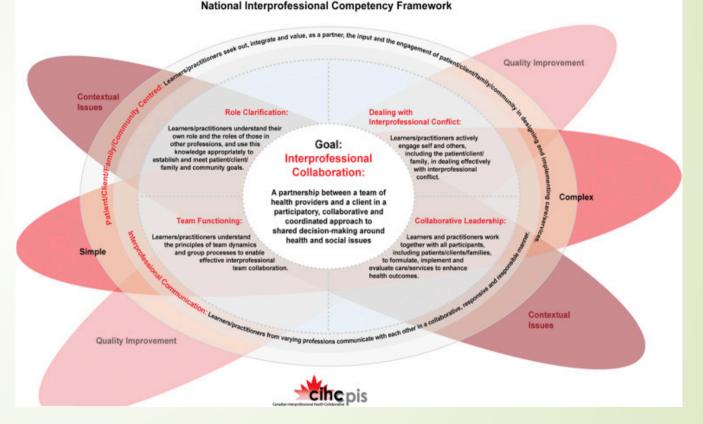


# What is the point?

What does it all mean?

#### **Robust Competencies Result in Measurable Practice Behaviours**

In Canada, the Canadian Interprofessional Health Collaborative (CIHC) is an interprofessional, not-forprofit national society whose mandate it is to promote interprofessional education, collaboration in healthcare practice, and patient-centred care ("Home | CIHC", 2012).



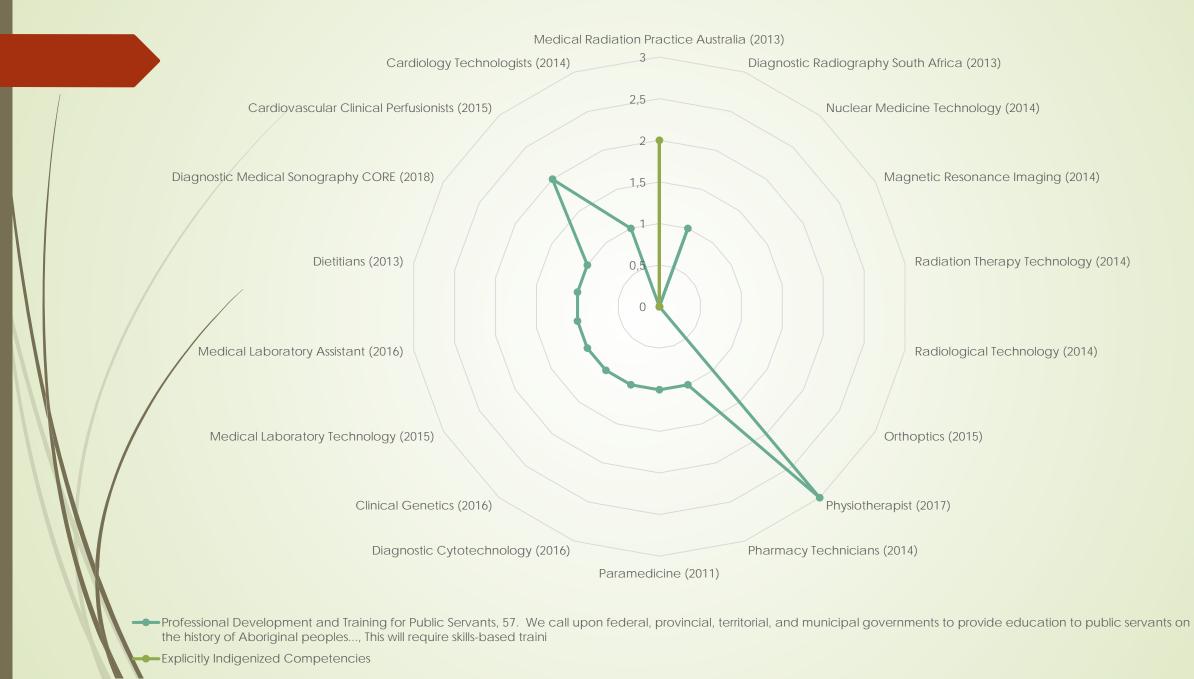
# Key Number of Candidates National School

To interpret the profile below, consider: (1) the percentage of examination questions in that category and (2) the average performance in a category. Both of these factors are equally important. The percentage of exam questions may not add to 100 due to rounding.

Competency Categories	%	0	25	50	75	100
Module A: Professional Practice	2%		65 73			
Module B: Patient Management	8%		80 80			
Module C: Radiation Health and Safety	4%		69 73			
Module D: Quality Management	2%		71 79			
Module E: Operate Imaging Equipment	13%		65 75			
Module F: Skeletal System	42%		78 79			
Module G: Digestive System	8%		73			
Module H: Respiratory System	5%		66 67			
Module I: Urinary System	2%		69 73			
Module J: Reproductive System	1%				63	
Module K: Computed Tomography	10%		71 77			
Module L: Bone Mineral Densitometry	1%		72 66			
Module M: Vascular / Interventional Studies	3%				68 74	

(CAMRT, 2017)

#### TRC Calls to Action: Professional Development for Public Servants



# Limitations

Currently, Canadians currently lack any categorical way in which to measure any of the outcomes of the Calls to Action (Antoine, 2017) – and for those in the caring professions, without specific measurable outcomes, without the means for determining if competence has been achieved and maintained, it is impossible to ensure the quality and safety of any practice (Kizer KW & Blum LN, In: Henriksen K, Battles JB, Marks ES, et al., editors, 2005).

### Conclusions (so far)

- A change at any part of the practice cycle to include indigenization and thus, increase "Reconciliation Readiness" will eventually affect all others
- Some changes will increase degrees of indigenization faster, thus increasing "readiness" faster
- Outlier organizations that (already) have very high readiness scores will need other ways to show progress in Indigenization implementation

#### Conclusions, cont.

- Indigenized organizations will need ways to show they are living Reconciliation (it isn't something that you achieve and stop)
- Organizations further along in this process should become Champions
- Serious consideration should be given to creating an Independent Accreditation (by indigenous organizations like National Collaborating Centre for Aboriginal Health (NCCAH)) for Indigenization or incorporating indigenization and reconciliation into existing structures

During this writing, all responses to the TRC's Calls to Action were still voluntary, ensuring that results will vary significantly based on an individual's or organization's personal commitment to and belief in Reconciliation.



(Camosun College, Aboriginal Service Plan 2016)

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#### 2018 CAAHP

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