

National

MAY 9 - 15, 2022

# Nursing Week

#WeAnswerTheCall

Celebrated as International Nursing Day beginning in 1971, then as a week since 1985, the 2022 National Nursing Week event finds nurses facing unprecedented challenges fueled by the pandemic. As part of our health care teams, nurses have felt the impact of a strained health care system. The week, celebrated from May 9 to 15, amplifies the vital role of nurses and provides an opportunity to salute their contributions and increase public awareness. This International Nursing Week special section honours nursing professionals in our community and throughout the world.



## NURSING WEEK MAY 9 - 15, 2022

# NURSING

*through*  
**CRISIS**

With the world in crisis for more than two years battling COVID-19, it is fitting that “Nursing Through Crisis” is the theme for Nursing Week 2022 (May 9 – 15). Nurses and other health-care workers around the world have endured unprecedented pressure and stress as a result of the pandemic. And, as nurses always do, we have risen to the task and stayed committed to delivering and advocating for quality care.

As nurses, we have demonstrated strength, knowledge and courage. We have endured the day-to-day challenges in a system driven to its limits, many times at our own expense. We have overcome concerns and worried more about Ontarians than our families. Our motivation has been the public good and the health of our profession.

We have stepped up like never before. We have continued to provide patients, residents and clients across all sectors and specialties with

our commitment to get through the crisis. Our profound pride in our nursing community through this crisis continues to give us the strength to keep pushing for improvements in healthy public policy and nursing human resources that will carry us through this relentless pandemic and beyond.

RNAO thanks each and every nurse, always, and especially during Nursing Week. As an association, we remain on guard and on duty to support the public and each nurse during and after the pandemic.

We thank every nurse, and especially the 48,500 RN, NP and nursing student members of RNAO for your unwavering commitment to Ontarians and to our profession.

You have carried Ontarians through this crisis. Together, we have carried one another. It is this strong commitment that gives us hope for brighter days to come.

(L) Morgan Hoffarth, RN, MScN  
President

(R) Doris Grinspun, RN, MSN, PhD,  
LLD(hon), Dr(hc), FAAN, FCAN, O.ONT  
Chief Executive Officer



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## #WeAnswerTheCall – a history of caring for Canadians



By Jay Ménard

With a general public more appreciative of the efforts health-care workers make on a daily basis, the Canadian Nurses Association decided to launch a new mantra to coincide with National Nursing Week — #WeAnswerTheCall — to help show how integral nurses are — and always have been — to the Canadian fabric.

“The theme this year is #WeAnswerTheCall and was developed by CNA to reflect nurses’ commitment to respond to the needs of the Canadian health system, despite the personal risk involved,” explains Dr. Sylvain Brousseau, president of the Canadian Nurses Association. “It is not about being ‘called’ to nursing, but rather reflects the many roles nurses play in a patient’s health-care journey and the value they bring to health care.

“The objective of the week is to draw attention to nurses, increasing the awareness of the public, policymakers and governments of the many contributions of nursing to the well-being of Canadians. That is why it is important to celebrate National Nursing Week and create more awareness around the importance of Canadian nursing and its history.”

Dr. Brousseau pointed to some key nurses of note, of which the general public should be more aware:

- **Charlotte Edith Anderson Monture:** Born in 1890 in Six Nations of the Grand River, Ont., Monture was a Mohawk World War One veteran. She was the first Indigenous woman to become a registered nurse in Canada, as well as the first to gain the right to vote in a Canadian federal election. She was also the first Indigenous woman from Canada to serve in the United States military.
- **Bernice Isobel Carnegie Redmon:** Redmon

attended nursing school in the United States because Canadian schools would not admit Black students. On her return to Canada in 1945, she became the first Black registered nurse to practise in public health, taking a job at the Nova Scotia Health Department in Sydney. She was also the first Black registered nurse to be hired by the Victorian Order of Nurses.

- **Marisse Scott:** After graduating high school in Owen Sound, Scott was then rejected when applying to Owen Sound General Hospital for nursing school in 1946, being told that “coloured girls” weren’t accepted. Following a public campaign led by Scott and her parents, she was eventually accepted into nursing school in Guelph. She graduated with an honours distinction.
- **Gwenyth Barton and Ruth Bailey:** In 1948, Gwenyth Barton, from Halifax, and Ruth Bailey, from Toronto, became the first two Black women to graduate from a Canadian nursing school. Both attended Grace Maternity School of Nursing in Halifax.
- **Rose Casper:** In 1955, Rose Casper of the St’át’imc Nation, B.C., became the first Indigenous nurse in Western Canada. Casper worked in her home community of Shalalth as a nurse for over 50 years. To honour her legacy and service to her community, the Rose Casper Healing Centre was opened in Shalalth in 2003. The centre remains a fixture in the community, offering wellness services that are both traditional and contemporary.

Dr. Brousseau admits that looking back at history isn’t cut and dried. When looking at the history of nursing in Canada, it’s important to view that through a socio-cultural lens and reflect upon some of the

negative impact nurses may have helped perpetuate.

“In our work on tackling systemic racism within nursing and the health-care system, we continue to learn that some historical figures participated in activities that have had lasting and negative repercussions on Indigenous (people) and people of colour,” Dr. Brousseau explains. “It is important to balance the valuable contribution individuals have made to nursing with the need for awareness, reconciliation and healing.

“Historically, Canadian nursing schools, administrators, associations and regulatory bodies have all contributed to establishing white, European-centric models of nursing and health, thus contributing to racism. For example, in academia, prospective Black students were refused admission into nursing schools until the 1940s. Individual and systemic action is needed to decolonize the nursing profession and ensure the profession can continue to provide safe, compassionate and ethical care to all clients and communities. This includes acknowledging our history and working with partners to build an equitable safe health system moving forward.”

But as Canadians reconcile with their past, adds Dr. Brousseau, it is important to celebrate the here and now, and look towards the future.

“Nurses deserve to be celebrated and supported because of their work and personal sacrifices to care for their patients and all Canadians,” Dr. Brousseau says. “During National Nursing Week, it is important for everyone in Canada to take a moment to recognize the incredible stamina, dedication and commitment displayed by nurses in Canada and across the globe. Nurses in all practice settings, many in crisis, have played a critical role in responding to COVID-19.”

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## Ontario's health-care workers are burning out; here's how you can support them

By Jay Ménard

While burnout amongst health-care workers was an issue even before the COVID-19 pandemic, the past two years has served to amplify the issue — both in public awareness and increasing pressure on an already stressed workforce.

“Our level of concern (about burnout) is quite high,” explains Dr. Adam Kassam, president of the Ontario Medical Association, adding the organization created a burnout task force prior to the pandemic. “Three-quarters of physicians have reported some level of burnout this year — that’s up from 66 per cent last year, and a number in the 50s two years ago.”

Dr. Kassam said it’s impacting those at the end of their careers and those just starting.

“We’re seeing attrition — people leave the practice early, retire, leave the province, scale back work hours.” He adds, “We also see it on the younger side of things. Last week, what you saw during this year’s (Canadian Resident Matching Service) was that there were a lot of positions that went unmatched in family medicine — this may mean fewer

and fewer are choosing primary family care.

“Those are the canaries in the coal mine.”

For Cathryn Hoy, RN, president of the Ontario Nurses’ Association, an already stressed industry has been further challenged by government decisions.

“The rate of burnout in health care is extreme — likely it’s safe to say it’s the worst ever in Ontario. Nurses and health-care professionals were working short-staffed for a decade or more before the pandemic,” Hoy says. “Government policies at the provincial level, underfunding, and the tendency of health-care employers to turn to the front lines — cutting nurses first — to balance the budgets had already taken an enormous toll on health care.”

Hoy adds the ONA first identified an impending nursing shortage two decades ago, but subsequent governments have failed to support the industry — and, in some cases, harmed it.

“The introduction of Bill 124 — which took away their right to freely negotiate a collective agreement,

held their annual wage and benefits increases to a maximum of one per cent for three years, and other legislation that has made their professional lives unbearable, has caused thousands to retire early, leave for less-stressful jobs, or just quit nursing.

“This current government has taken what was already a difficult situation and made it unbearable — and dangerous — for both nurses and their patients.”

Dr. Doris Grinspun, CEO of the Registered Nurses’ Association of Ontario, says her organization will be releasing a report on May 12, 2022 — a comparative analysis examining the state of nursing, especially during a crisis. The organization is revealing a series of programs and policy solutions — some of which the province has already adopted, including increasing funding for enrolment in baccalaureate in nursing programs.

“The provincial government has increased by 10 per cent, but we’re asking for more,” Dr. Grinspun says, pointing to the fact that there’s a 35 per cent surplus in applications to nursing programs. With more funding, more students can be accepted, and eventually

help to provide more resources to the health-care system.

Even some changes that would seem to be beneficial to the system are, in fact, causing harm, Dr. Kassam explains.

“One of the main factors that should help has actually been a detriment: technology,” he says, adding though it’s been a boon for patient care and access, it’s come at a cost. “With integration comes the need for documentation. Family doctors perform two hours of documentation for every one hour of care.

“Doctors are spending up to six hours a day on electronic documentation. What should have improved the system, has actually been a contributor to burnout and can take away from direct patient care.”

Without action, the challenges are going to get worse. Dr. Kassam states there are over one million Ontarians without a family doctor. Add to this an aging population and, pandemic or no, there is a crisis of care approaching. In addition to increasing funding, Dr. Grinspun points to the fact there are over 25,000 internationally trained nurses in Ontario, but the approval process is too long — forcing them to leave the profession or the province.

For Ontarians looking to support health-care workers during this time, there are some basic steps one can take to help alleviate the pressure on doctors and nurses alike.

“The best way that the public can show their respect and love is to wear a mask and get the full vaccine — either three or four shots, if you’re eligible,” Dr. Grinspun says. “Second, we need government to understand that without nursing there is no health care. All the way from the federal to provincial; to home care and long-term care. We need investments in nursing at all levels.”

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## Despite protests, blockades and abuse, nurses continue to care for us

### NURSES REALLY ARE HEALTH-CARE HEROES, AND IT'S TIME WE GOT BACK TO TREATING THEM LIKE IT

By Liz Bruckner

While there's no denying the fact that the last two years have taken an incredible toll on health-care workers of all stripes, according to Dr. Sylvain Brousseau, RN, PhD, and president of the Canadian Nurses Association, the pandemic has also shone a much-needed light on the vital impact nurses have on the health system. And in the process, it's also increased the public's understanding of what a nurse is and does.

Of course, these years have also been fraught with challenges for these professionals, many of whom, Dr. Brousseau says, are rooted in decades-long workplace issues that have been greatly exacerbated by the pandemic.

"Simply put, nurses and other health care workers are burned out, exhausted and demoralized," he says. "The main factors driving this reality and the increase in health-care worker shortages have long been a concern, but after juggling unbearable workloads and unsafe working conditions for two hard years – to the point that many have faced 16-hour-plus shifts, have not been able to take a day off, have had their vacations suspended, and/or they're facing chronic understaffing issues – it's understandable that this is the point many in the profession have reached."

Add to this the fact that pandemic fatigue has incentivized some people to take out their frustrations over government mandates and restrictions on health-care workers via protests and blockades, and it's little wonder that nurses are discouraged, drained



and overwhelmed.

"What many of the people organizing and participating in these demonstrations haven't considered is, with or without COVID-19, car accidents, heart attacks and a myriad of other health-related needs still happen and require immediate medical care," says Morgan Hoffarth, RN, and president of the Registered Nurses' Association of Ontario. "The hospital entrance protests we saw, combined with the increases in aggressive behaviour toward nurses and health-care workers in general, are disappointing, unwarranted, and they interfere with the care patients desperately need."

So, what can the general public do to help? Hoffarth says continuing to receive vaccinations, as needed, and wearing a mask in indoor public settings to help prevent the spread of COVID-19 are a great place to start.

"Not only will you protect yourself and those around you, you'll also be

protecting nurses and all medical professionals who live in the general public," she says. "Nurses who contract COVID can't go to work, which can hugely impact their workplace and, in circumstances where multiple nurses are sick simultaneously, can even result in units being closed due to staffing shortages."

Staying home and isolating when you're sick is another great way to show your appreciation and respect for all nurses have done and continue to do, as is being considerate of the human being behind every health-care worker's uniform.

"When patients reach a point where they need to seek out health care, we understand that it can be a vulnerable and stressful time, but it's important to know that releasing your frustrations on nurses who are trying to help you is counterproductive," she says. "I encourage people to remember that it's probably not the nurse's fault you may have to wait to be seen, and that,

ultimately, treating people with respect is always the right approach."

Dr. Brousseau agrees.

"We need to care for nurses so that nurses can care for us, and it's vital that Canadians as a whole understand this," he says. "Being respectful and kind to every health-care professional should be a given, as we need to do all we can to fight COVID-19 and its variants, and to ensure respectful working environments for health-care workers who are already past their breaking point."

He adds that while physical and verbal abuse in the workplace for many health-care workers is not a new or pandemic-specific occurrence – 61 per cent of nurses reported a serious problem with violence over a 12-month period in 2017 – he says it's imperative that nurses once again feel safe at work.

"When our health workforce is overworked, overburdened and not supported, there is a direct impact on the functioning and performance of the health system. Medical procedures and surgeries are delayed, wait times increase, emergency departments are scaled back or even closed, and we endanger the capacity to effectively care for the most vulnerable in our population," Dr. Brousseau says.

"The best short-term strategy to deal with our health workforce crisis is to keep the professionals we have, and to do that, we must have work environments where nurses feel safe and want to be there. Respectful interaction with the public is an important part of that strategy."

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