

Strengthening the Voice – the Ninth Decade of the Canadian Nurses Association

Canadian Nurses Association
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Introduction

Nursing is discovering that the only certainty in the '90s is that nothing is for certain. Not only have the rules been changed, they continue to change faster and faster.

Inaugural Address
Fernande Harrison
President 1992-1994

Looking back throughout each decade in its history, the Canadian Nurses Association (CNA) has made a significant impact on the advancement of the nursing profession and the promotion of quality, accessible health care for Canadians. The ninth decade is no exception. And, during this decade, change was embraced in a dramatic way.

The ninth decade was marked by a profound and devastating transformation of the health care system affecting the daily lives of thousands of registered nurses. Yet, amidst the turmoil, the nursing profession emerged stronger and more resilient, positioned to take a leadership role as the third millennium approached. This new activism was led by a stronger, more responsive national association with a clear mandate to speak loud and clear for the profession and the public interest.

This document is a retrospective of the period 1990 to 1999, the ninth decade since the creation of the Canadian Nurses Association. It is based on available published information such as the *Canadian Nurse Journal* / *l'Infirmière canadienne*, *CNA Today*, news releases, annual reports, Presidents' addresses and Executive Directors' reports. It follows three previous reports: *The Leaf and the Lamp*, *the Seventh Decade* and *the Eight Decade*. For further information about CNA and its activities, please visit us at www.cna-nurses.ca.

Strengthening the Voice of the Profession

Our key challenge for the future is to bring our nursing groups together with a sense of unity of purpose, trust and understanding. To allow us to share opportunities and communicate with each other. We value inclusiveness through partnership.

Inaugural Address
Rachel Bard
President 1996-1998

Throughout the ninth decade of its inception, the Canadian Nurses Association continued to develop strategies to ensure nursing spoke with one voice. In 1994, the Board of Directors took a major step toward creating the future when it moved to a policy governance model. The new orientation allows the Board to concentrate on advocacy, policy development and visioning leaving operational matters to staff.

Changes in its governance and organizational structure allowed the Board of Directors to be strategic, inclusive and responsive. When members of the association adopted the changes at the 1996 Biennial Convention in Halifax, a renewed emphasis was placed on the public interest. The new structure increased representation from consumers on the Board of Directors and allowed CNA to strengthen its relationships with nursing regulatory bodies who are not currently CNA members such as the College of Nurses and the Order of Nurses of Quebec. The changes allowed CNA to build a strong voice to ensure a solid foundation for the future.

This was especially evident as the changes in structure created the National Nursing Forum, which brought together the breadth of nursing. The first of three fora made history when more than 30 nursing organizations representing 264,000 registered nurses met in Ottawa in November 1997. The message from all participants was that health care restructuring was having a negative effect on the public and on the nursing profession. The forum identified eight key strategies necessary for improving the health care system. In 1998, the National Nursing Forum issued a call for action for governments to work with nursing organizations, other health care providers and the public to support safe, quality care for Canadians. In 1999, the forum laid the foundation for moving forward in the new millennium.

The message of unity resounded strongly when nursing leaders including representatives from the Canadian Nursing Students Association, the Canadian Federation of Nurses' Unions, the Canadian Association of University Schools of Nursing, the Order of Nurses of Quebec and the Canadian Practical Nurses Association joined in a CNA-led lobby and met with the federal Health Minister Allan Rock and Prince Edward Island Health Minister Mildred Dover, co-chairs of the Federal/ Provincial/Territorial Conference of Ministers of Health in November 1999. The purpose of the meeting was to share concerns about the current issues facing the profession and suggest strategies for action.

Many of these issues are expressed through the resolution process. And in 1998, conscious that individual members need an even stronger voice at CNA, the Board adopted a new policy allowing for resolutions to be accepted year-round, not just during the annual general meeting. This means registered nurses will be heard when they need to be heard, and it allows CNA to keep pace with change.

Furthermore, in the early months of the new decade, *CNA Today*, a vibrant, quarterly news tabloid vowing to bring news about CNA as it lobbies for primary health care and health care reform, was launched. It was part of a new national strategy to increase communication among Canadian nurses.

Never before has the nursing voice resonated as strongly in policy development and program planning at many levels. Throughout the decade, thousands of individual volunteers represented CNA and participated in deliberations on a wide range of subjects from tobacco control measures and breastfeeding to immunization and drug policy.

The appointment of Dr. Judith Shamian in 1999 as executive director of nursing policy at Health Canada was seen as a clear victory for nursing and for CNA. The appointment positioned the profession with a strong voice in the federal government.

Strategic alliances developed throughout the decade allowed CNA to bring the nursing voice to public policy deliberations.

For example, the creation of the Health Action Lobby, also known as HEAL, resulted in a decade-long relationship among national health and consumer organizations dedicated to protecting and strengthening Canada's health care system.

In March 1991, following the release of the federal budget, a few national health care groups came together to share information and develop action plans in response to budget announcements that were viewed as disastrous because of the federal government's gradual withdrawal from health. Groups agreed the best way to effectively communicate these concerns was through a single voice, representing a diverse constituency of health groups.

HEAL emerged as a forum for policy discussion and debate growing to become a coalition of nearly 30 members committed to working with governments and other organizations to ensure an effective health system that meets the needs of Canadians. By mid-decade, its work was starting to pay dividends. Yet, further work was ahead to ensure a sustained, accessible, health care system for Canadians. CNA continues to provide leadership to the coalition: the executive director is a co-chair and staff provide the secretariat.

CNA continued to create and inspire additional partnerships. Calling for a "Back to Basics" approach for children and their families that would see a return to community-based health promotion and public health programs, CNA joined forces with an alliance of child care providers, educators and children advocates to work with governments to develop a national children's agenda.

As the president and executive director noted in the 1997 Annual Report, forming strategic alliances within, and outside, the nursing community is crucial to gaining control of our destiny.

Building strength in Canada allowed CNA to extend its reach to the world stage.

CNA on the World Stage

The tradition of Canadian nurses' positive action in developing countries is a long one that reflects the profession's commitment to leadership, participation and sustainable development.

Lynda Kushnir Pekarul
President 1998-2000
16 November 1999

More than 90 years ago, in 1909, CNA joined the International Council of Nurses (ICN). Many today agree that establishing international linkages was a key reason for the creation of a national nursing association.

CNA works closely with organizations such as the Pan-American Health Organization, the World Health Organization and the Canadian International Development Agency on projects in developing countries designed to strengthen nursing and further the common goal of health for all. Strengthening national nursing organizations and promoting primary health care are central themes.

CNA's International Program, like many similar organizations, faced the full effect of the federal government's program review during the '90s. As a result, the program was provided with little opportunity for growth. Yet with limited funding, the program continued to strive and truly make a difference in developing countries largely due to the support of hundreds of volunteer consultants.

With funding assistance from the Canadian International Development Agency, CNA continues to assist nurses in developing countries in improving their national health system. Regulation of nurses, legislation of health policies, enhancing primary health care and building leadership and management skills are some areas that receive support.

Outside of the International Program, now called CNA's International Bureau, Canadian nurses continued to have a strong presence internationally; former CNA presidents Alice Baumgart and Eleanor Ross were elected to the board of directors of the International Council of Nurses in

1993 and 1997, respectively. Former CNA executive director, Judith A. Oulton was appointed chief executive officer of ICN in 1996.

The pride of hosting the quadrennial meeting of the ICN was CNA's crowning moment in the international arena during this decade. Together with the Registered Nurses Association of British Columbia and thousands of volunteers, CNA welcomed more than 5,000 nurses from 119 countries to Vancouver for the 21st Quadrennial Congress of the International Council of Nurses. The Congress has been held in Canada only twice before: in 1929 and 1969, both times in Montreal.

The tragic and untimely deaths of two international aid workers in 1996 brought CNA to work with the Program for Appropriate Technology in Health (PATH) Canada and the Canadian Red Cross to build a Monument to Canadian Aid Workers. Nancy Malloy, a veteran Canadian Red Cross nurse was murdered in her sleep during an attack on her hospital compound in Chechnya in December 1996, and Tim Stone was killed on a hijacked flight from Ethiopia one month earlier. Tim was the executive director of PATH Canada.

In announcing the site for the monument, which will be at the Canada and the World Park on the banks of the Ottawa River, minister for International Cooperation, Diane Marleau, said the monument will be a tribute to the thousands of individuals who have brought people in developing countries hope for a better future and a more equitable world. The monument will be unveiled in June 2001.

Strengthening the Health System

In an environment concerned more with the bottom line than with people, nurses have provided the impetus to ensure that the focus of health care remain on people rather than profits.

Inaugural Address
Alice Baumgart
President 1990-1992

By mid-decade the vulnerability of the social safety net and the impact of health care reform on the health status of Canadians were the two most frequently cited concerns of stakeholders questioned to develop a trends and issues document prepared by the Canadian Nurses Association.

The decade was marked with repeated calls to stop the cuts to federal financing for health care. Such a call was issued shortly following the 1995 federal budget in which health care took another hit. Later that year, CNA renewed its call for the federal government to make good on its promises to protect medicare by establishing a cash floor to the dollars it transfers to provinces for health care. Working with HEAL, it was CNA's view that the federal government had to take a strong leadership role to ensure accessible, quality care for all Canadians and to ensure the principles of the *Canada Health Act* could continue to be enforced. On the eve of the 1997 federal election, CNA and HEAL were pleased to see their position translated into an election promise.

The 1993 and 1997 federal election campaigns were key opportunities to show that political action is important for nurses. Leading a non-partisan offensive, CNA rallied nurses in 1993 along three key themes: medicare is a fundamental value of Canadian society and user fees will destroy it; nurses are the means to accessible, affordable health care; and quality care begins with nurses.

CNA staff developed a number of ways to communicate these three messages, including information packages, lobbying tips, news briefs and letters to the editor. CNA also worked with HEAL in delivering complementary messages.

Again in 1997, nurses lobbied candidates to underline the importance of nurses' input on how the system would be reformed. As a result, nurses were highly visible and often quoted in the media. Candidates appreciated that nursing has a strong, powerful voice. They also realized, with one voter in 70 a registered nurse, the nursing vote can significantly affect the outcome of an election.

CNA continued to present evidence to policy-makers about the contribution of nurses to quality, affordable health care. A series of fact sheets disseminated to decision-makers and legislators indicated that at a time when deficit management was driving policy, registered nurses were a cost-effective, quality alternative to more expensive providers.

In 1996, Prime Minister Jean Chrétien convened the National Forum on Health and appointed three nurses to be members of the forum. They were former CNA president, Judith Ritchie, former president of the Aboriginal Nurses Association of Canada, Madeleine Dion-Stout and from the Northwest Territories, Margaret McDonald. CNA's brief *Commitment Required: Making the Right Changes to Improve the Health of Canadians*, built on previous work such as *Putting Health into Health Care* (1980), was presented to the forum. CNA called for a health system based on primary health care as the best way to achieve health for all. CNA also endorsed strong public funding, a community health approach and funding for health promotion.

CNA was quick to endorse the recommendations put forward by the National Forum on Health. The final report proposed a transformation of the health care system and suggested that health is broader than health care. Priorities for government action included home care, pharmacare and health information. Many of the recommendations supported positions CNA had advocated over the years.

Achieving Health

In the communication age, it is the flexible knowledge worker with the right attitude who will succeed. And that's a nurse. Our knowledge, combined with the hallmarks of our profession – caring and compassion – will place us at the forefront of client health.

Inaugural Address
Eleanor Ross
President 1994-1996

World Aids Day, 1 December 1992, was a special event at CNA House when the federal health minister, Benoît Bouchard, visited to launch a new resource amidst TV cameras, microphones and red ribbons. *HIV/AIDS Education for Nurses: Practice Issues and Curriculum Guidelines* allows nurses to teach themselves how to deal with the special issues in providing quality care to HIV/AIDS patients. It also provides curriculum guidelines for nursing educators. The resource was the result of an 18-month long needs assessment study involving more than 150 nurses, students of nursing, persons living with HIV/AIDS and their families, social workers and pastoral-care workers.

This new resource was one example of how CNA continued to respond to the changing health needs of Canadians.

Other examples included:

- Published in 1992, *Family Violence: Clinical Guidelines for Nurses* provided a practical guide offering insight and advice for nurses on the job. This work supported a policy statement approved earlier.
- *Healing the Sky: Strategies for Health and Ozone Layer Protection* (1994) provided nurses with information about the effects of ozone depletion on health and outlines actions nurses can take. The environment was also the focus of the 1990 National Nurses Week.
- Tobacco is a serious problem and CNA acted. In 1996, as part of a 130-member coalition, CNA campaigned for sweeping reforms to laws regulating the Canadian tobacco industry. CNA also published guidelines for nurses to help Canadians faced with tobacco addiction.

Throughout the decade, CNA jurisdictional members, associate and affiliate members, as well as thousands of individual nurses, supported all of this work by providing valuable advice and expertise, and by representing CNA on panels, committees and during consultations.

"It's Time for Canada to Care for its Nurses"

We have witnessed dramatic changes in nursing in many areas... especially recently in budget cuts, bed closures and recruitment. We have also learned we can't stop this change, we are in for much more in the next few years. The challenge for us is to be proactive, to manage this change at all levels: the patient unit, the clinic, the local office, the region. Managed change – managed with other – is the future.

Executive Director's Report, June 1992

Judith A. Oulton

Executive Director 1989-1995.

As a new decade dawned, nurses were dissatisfied with working conditions; hospitals were concerned about understaffing. Driven by burgeoning deficits and cost-cutting measures, hospitals closed beds, laid off nurses and rolled back salary increases. Nurses were angry.

By mid-decade, the promise of health care reform was no longer. The transformation of the nursing workforce had no parallel. It was a time of tremendous upheaval.

By 1997, decreasing enrolment in nursing programs, an aging workforce and the demands of an aging population pointed to the conclusion that if no action was taken, Canadians would soon be deprived of quality nursing care.

CNA responded on many fronts:

- **Advocacy:** CNA repeated calls for action and worked diligently to inform and educate decision-makers. An example is the call for action following the November 1996 meeting of the Board of Directors. CNA issued a call to governments to stop the cuts, look at the impacts and listen to Canadians and health care providers. Short-term, quick fix solutions to save health care costs were having negative effects on the health of Canadians. A lobby kit on safe care was developed, and it provided nurses with tips and strategies.
- **Policy development:** In 1996 alone, CNA published seven policy statements to help nurses cope with current issues.

- **Information:** Publications such as *Leading in a Time of Change* helped nurses understand the changes taking place and develop strategies to face the changes positively. *Taking Control*, a career planning workbook published in 1994, offered practical guidance on such points as assessing strengths, crafting a résumé, preparing for an interview and managing change.

CNA supported professional practice with the publication of many tools, guides and workbooks. The discussion paper *A Question of Respect: Nursing and End-of Life Treatment Dilemmas* (1994) helped nurses work through a host of complex issues.

The updated *Code of Ethics for Registered Nurses* was delivered to individual members during the 1997 National Nursing Week. It was produced in consultation with practicing nurses, administrators, educators and ethicists and reflects the changing environment in which nursing is practised. Companion pieces, *Everyday Ethics: Putting the Code into Practice* and *Ethics in Practice*, a series exploring ethical dilemmas, were designed to help nurses reflect on their practice and incorporate the concept of ethics into their everyday work.

Nursing Now, a popular series of publications on trends and issues in nursing, also helped to keep nurses informed.

- **Certification:** Throughout the decade, the Certification Program continued to break new ground with 8,500 nurses certified in nine specialties by the end of the decade.

As the decade unfolded, new roles and new opportunities for RNs were emerging, provincial governments were beginning to accept that a more complex health system required nurses prepared at the baccalaureate level, and it was becoming clear that RNs are the solution to providing quality care. The public trust in nurses had reached an all-time high.

No professional group has borne the brunt of health care restructuring more than Canada's nurses.... For over 350 years, since the moment Jeanne Mance set foot on this land, nurses have

been caring for this country. Now, more than ever, is time for this country to demonstrate its care for nursing.

Address to the 1998 Biennial Convention

The Honourable Allan Rock, P.C., M.P.

Minister of Health

These words would serve as leverage as CNA prepares for the third millennium.

Conclusion: The Future

Now more than ever, Canadian nursing must stand together, must share and articulate a clear vision for the future of health care: a health care system wherein registered nurses are recognized as having a full professional role.

Inaugural Address
Lynda Kushnir Pekrul
President 1998-2000

Nursing's future is well assured. Registered nurses will require a higher level of competency to respond to increasing acuity and complexity of care, as well as technological advances. As care continues to shift to the community, Canadians will require highly qualified registered nurses to practise in independent settings and to cope with complex care in the home and in the community.

CNA will not allow past errors to be repeated. Throughout the decade, governments received strong warnings. Everyday, nurses were making headlines. Armed with unparalleled public support, nurses were at the forefront.

The shortage predicted in the 1997 CNA-commissioned *Ryten Report*, a significant report that analyzed the future supply of registered nurses, was beginning to unfold. The report predicted that if no action was taken, Canada could be short as many as 113,000 registered nurses by 2011.

CNA's call to action was being heard. The Quiet Crisis lobby during the 1999 federal budget netted a \$25-million research fund for nursing and a commitment from all levels of government to address nursing issues. Plans to launch a major study of nursing were underway. Premiers and ministers of health recognized the ability to continue providing quality health care depended on its health human resources.

Never before was CNA as ready to take the challenge and forge a new era.

Speaking about the creation of the Nursing Research Fund, CNA Executive Director Dr. Mary Ellen Jeans said: *"This investment signals a fundamental shift in how we value nursing in*

Canada. This fund acknowledges that quality care begins with nurses, and it will provide the necessary long-term investment in supporting a well-educated and highly qualified nursing workforce."

Appendix A

Ninth Decade Presidents

Judith Ritchie	1988-1990
Alice Baumgart	1990-1992
Fernande Harrison	1992-1994
Eleanor Ross	1994-1996
Rachel Bard	1996-1998
Lynda Kushnir Pekarul	1998-2000

Appendix B

Jeanne Mance Award

Since 1980, every two years CNA honours one nurse for exceptional contribution to the nursing profession.

The following nurses were honoured during this decade:

1990 Shirley Stinson
1992 Dr. Helen Preston Glass
1994 Louise Miner
1996 Margaret Neylan
1998 Dr. Peggy Anne Field

Appendix C

Biennial Conventions

24-27 June 1990 Calgary, Alberta
14-17 June 1992 St. John, New Brunswick
19-22 June 1994 Winnipeg, Manitoba
16-19 June 1996 Halifax, Nova Scotia
14-17 June 1998 Ottawa, Ontario

Appendix D

Milestones

9 November 1990 – CNA and the Canadian International Development Agency sign a second multi-year agreement for funding of nursing activities in developing countries.

10 January 1991 – CNA releases a study on the use of tobacco and nurses.

25-26 March 1991 – CNA hosts the first in a series of conferences on work life issues and a caring practice in Saint John, New Brunswick.

August 1991 – *CNA Today* Volume 1, No. 1 is published.

4 November 1992 – First *Canadian RN Exam Prep Guide* is launched in Ottawa.

27-29 October 1992 – Nursing Minimum Data Set Conference

1 December 1992 – World AIDS Day, CNA launches a resource kit designed to enhance the quality of nursing care for clients living with HIV/AIDS.

23-25 September 1993 – CNA holds work-life issues conference in Charlottetown.

21-23 October 1993 – CNA holds work-life issues conference in Regina.

8 March 1994 – CNA Board of Directors lobby Parliament Hill. In a series of meetings, members of the board express their continuing concern for the future of Canada's health care system. Primary health care is fundamental to the reform process, nurses tell elected officials.

8 November 1995 – CNA President Eleanor Ross marks the 50th anniversary of the end of the Second World War by laying flowers at the nurses' memorial on Parliament Hill

15 November 1995 – CNA Board of Directors announce the appointment of Dr. Mary Ellen Jeans as Executive Director. Dr. Jeans is to join CNA in February 1996.

8 May 1996 – A commemorative garden in honour of Canada's Nursing Sisters is inaugurated at CNA House.

19 June 1996 – Members of CNA endorse the "Future Directions" initiative at the annual general meeting in Halifax, Nova Scotia.

Fall 1996 – CNA goes on-line at www.cna-nurses.ca

12 November 1996 – CNA Board of Directors announce new directions for its testing division. The division is established as a separate business, Assessment Strategies Inc., to allow the new corporation to better serve its existing clients and build a future client base.

18 December 1996 – CNA condemns the overt act of violence in Chechnya that resulted in the death of British Columbia nurse Nancy Malloy. Later this decade, in conjunction with the Canadian Red Cross and PATH Canada, CNA works toward the construction of a Monument to Canadian Aid Workers.

6 March 1997 – The CNA Media Awards for Excellence in Health Reporting celebrates its 10th year.

15-20 June 1997 – CNA hosts the quadrennial meeting of the International Council of Nurses Congress. More than 5,000 nurses from 119 countries attend the Congress in Vancouver. The theme is *Sharing the Health Challenge*.

14 October 1997 – The Report of the National Nursing Competency Project, a three-year collaborative effort of 29 organizations, is released.

4 November 1997 – CNA releases the *Ryten Report*, a study predicting a dire nursing shortage.

13 June 1998 – CNA holds the Second Annual National Nursing Forum in Ottawa.

10 July 1998 – CNA and the Board for Occupational Health Nurses Inc. ratify a reciprocity agreement in Ottawa.

11 May 1999 – More than 8,500 registered nurses have been certified in nine nursing specialties since the beginning of CNA's Certification Program in 1991.

10 November 1999 – Third National Nursing Forum held.

Appendix E

National Nursing Week Themes

- 1990 Nurses and the Environment
- 1991 Mental Health: A Priority for Nurses
- 1992 Nurses: Partners in Change
- 1993 Nurses: A Dynamic Force in Quality Care
- 1994 Nurses Make the Difference
- 1995 Your Family's Health: Nurses Make the Difference
- 1996 Ask a Nurse
- 1997 Sharing the Health Challenge
- 1998 Nursing is the Key
- 1999 Older Persons and Nursing: Partners for Health Aging