

Oct 2025

Local 196 SPOTLIGHT



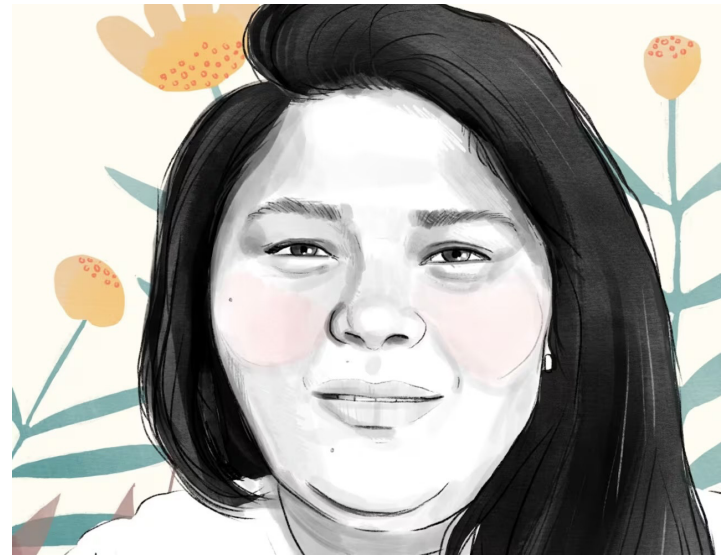
Decolonizing Nursing: Five Years After Joyce Echaquan

On September 28, 2025, we mark five years since the tragic death of Joyce Echaquan, an Atikamekw woman who died at a hospital in Joliette, Quebec, hours after live-streaming racist abuse from hospital staff.

Echaquan's death was ruled accidental, the result of pulmonary edema. Yet the coroner who investigated her case concluded unequivocally that racism and prejudice in the hospital setting contributed to her death.

Her story is a stark reminder that systemic racism is not an abstract concept but a lived reality with life-and-death consequences.

Nurses in Alberta are stretched thin. When resources are scarce, marginalized patients—too often bear the brunt of inadequate care. We must ensure that compassion, cultural safety, and accountability remain at the center of nursing practice, even in crisis.



Portrait of Joyce Echaquan by visual artist Marie-Ève Turgeon

In response to Echaquan's death, the Atikamekw Nation developed Joyce's Principle—a framework demanding that Indigenous people have equitable access to health and social services, free of discrimination.

Truth and Reconciliation: Calls to Action for Nursing

Call to Action #23 urges all levels of government to increase the number of Indigenous professionals working in healthcare and ensure the retention of Indigenous healthcare providers.

Call to Action #24 calls for medical and nursing schools to require education on Indigenous health issues, including the history and legacy of residential schools, and the rights of Indigenous Peoples.

Seven Elements of Colonization

- 1. Dominance of Western biomedicine and marginalization of Indigenous healing modalities.
- 2. Deficit framing of Indigenous patients (e.g. “non-compliant,” “at risk”) instead of recognizing resilience and systemic constraints.
- 3. Imposition of systems (hospital, physician-led, institutional models) that displace Indigenous relational, community-based models.
- 4. Racism as regulatory tool, normalizing inequity and embedding internalized biases.
- 5. Exclusion from self-determination—Indigenous voices too often shut out of curriculum design, decisions, and health policy.
- 6. Violence through racism—from the overt to the insidious. Joyce’s death is a tragic example.
- 7. Systemic socioeconomic and health oppression, born of colonization, that compounds Indigenous health burdens.

What Can Nurses Do?

C	Call out, How can I help? Target behavior not the healthcare provider.
P	Plan and practice your intervention strategy in advance.
R	Review chart, speak to client, and assess the client.
R	Review treatment plan and respectfully request rationale for current treatment approach.
A	Allyship, advocate, educate yourself and colleagues about becoming anti-racist.
C	Check with the client and verbalize your position, are you okay? Become the safe person.
I	Intervene, always be an active bystander.
S	Speak up to leadership about your concerns and seek support for yourself.
M	Model safe, competent, compassionate, ethical, and trauma informed care in all interactions.

FOR MORE INFORMATION ON CPR RACISM:



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Call-To-Action Checklist

- **Learn & Reflect:** Use the CPR RACISM framework in team debriefs.
- **Advocate in Curriculum:** Push for Indigenous co-governance in nursing programs and accreditation committees.
- **Mentorship & Sponsorship:** Volunteer to mentor Indigenous nursing students or researchers.
- **Speak Up:** When clinical racism or inequities occur, intervene (using frameworks) and report to professional bodies.
- **Partner with Knowledge Keepers:** Invite Elders, cultural advisors, and Indigenous health organizations into planning, care, and education.
- **Promote Two-Eyed Seeing:** In care planning, consider both Western and Indigenous knowledge systems equally.
- **Support Indigenous Nursing Identity:** Celebrate the contributions of Indigenous nurses historically and today.
- **Demand Institutional Accountability:** From health regions, governments, and colleges—demand policies, audits, and transparency in Indigenous health outcomes.

Acknowledging systemic racism is not optional; it is the first step toward ensuring no one else suffers the same fate as Joyce Echaquan.

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