

First in class: How participatory action research is influencing mental health services in Canada's North

by [Ashlee Espenell](#)

When Candice Waddell began looking at graduate programs, she thought she would have to leave the country to specialize in psychiatric nursing. She was advised to look into a new Master's program that was currently being developed at her alma mater. The program was exactly what she was looking for and, six months later, Waddell was one of the first ten students to begin the Masters of Psychiatric Nursing program at Brandon University. In May 2015, Candice became their first graduate.



"The Masters of Psychiatric Nursing program was a really good experience for me," said Candice. "They did a very good job of streamlining the courses and it was all very applicable to the work I was doing in the North."

Candice obtained her Bachelors of Psychiatric Nursing from BU in 2004. She went on to work as a Mental Health Nurse in Australia and New Zealand, and as a Registered Psychiatric Nurse in Manitoba, before moving to Nunavut in 2009.

"My thesis originated from trying to determine ways to reduce rates of suicides in Nunavut. I was working as a Community Psychiatric Nurse at the time and dealt with those issues daily," said Candice. "My family jokes that I've been in school longer than out, but it was almost as if I needed to be doing it. My job was very intense and this became an important part of my own self care. It was something I could become invested in and consumed with that wasn't my job."

Her thesis, ***Improving community wellness through the inclusion of traditional knowledge: A participatory action research study in Nunavut***, looked at how community wellness in one Nunavut community could be improved through the inclusion of traditional knowledge.

"When I started to delve into it I started to read in other's research that community wellness was a useful way to make an impact," she said. "I also learned about the importance of elders and their role in community wellness. The literature I reviewed showed a difference between pre and post-colonization, which began in the 1950s in the area, including surges in violence and suicides."

She worked with a local community-based research advisory council to interview 10 Inuit elders who had grown up in the community during relocation to determine the knowledge they felt would best improve community wellness. From the elder interviews, Candice identified seven common wellness themes to make the most impact in the community and developed four action goals for the community to implement.

“The research I completed really helped to change and strengthen my opinions about the work we do in Nunavut. The importance of recognizing and acknowledging innate and non-formalized knowledge became quite apparent,” said Candice. “Our communities are very small and there are a lot of individuals who may not have formal education in mental health and addiction but can and do provide services to their community members.”

Her research was enlightening and her findings reinforced the necessity of culturally-appropriate mental health services.

“My thesis helped me to understand the importance of supporting a diverse mental health and addiction system that provides both formal services such as psychiatric nurses and social workers, and that also supports non-formal services that encourage natural care givers and community members to support one another,” she explained. “We have to make sure we’re treading lightly and not demolishing existing connections and relationships within the community. We need to meet the community where they are and, instead of forcing changes, look at empowering communities and honouring the culture.”

While working as a Community Mental Health Specialist for the Nunavut Mental Health and Addictions Resource Team in Iqaluit, Candice’s role was quite diverse and saw her transition away from front-line care and into a front-line staff resource role.

“Throughout my career, my primary focus has always been improving the lives of individuals with mental illness, improving the overall mental health of the entire population and reducing the stigma associated with mental illness and mental health. In that aspect, my role didn’t change at all,” she said. “I still focused on doing all of those things, just in a slightly different way. When I was a Community Psychiatric Nurse I was able to see the results of my work directly by watching a client rehabilitate successfully, assisting a client that was suicidal to find hope or watching the Mentorship Program blossom and empower youth to take control of their circumstances. As a Community Mental Health Specialist I saw those things indirectly by assisting a colleague who might be struggling with an issue, partnering with a stakeholder to improve service, evaluating a curriculum that will be beneficial for our front line workers, implementing a program that has been seen as promising and advocating for the needs of Nunavummiut.”



The Mentorship Program—a pilot project that empowers high-school students to collaborate with their mental health staff to run after-school activities for younger children—is just one of the ways Candice and her colleagues helped to implement culturally appropriate and inclusive mental health services. She worked with Dr. Allison Crawford and representatives from Nunavut Tunngavik Inc. to develop and evaluate a training and orientation manual for new mental health and addictions staff that teaches the history of Inuit and Nunavut, provides cultural sensitivity training and touches on the importance of providing trauma-focused care. She also contributed to community psychiatric nursing standards of practice for the Territory to provide front-line registered psychiatric nurses and mental health registered nurses with policies and standards for practice.

In 2016, Candice will be undertaking a new challenge as an Assistant Professor in Brandon University’s Psychiatric Nursing Department.