

Street Nurses Take to the Classroom

CIARA PARR, MSc(A) II

I couldn't help but think "nurse warrior" at the start of *Bevel Up*, a documentary film depicting a day in the life of a street nurse. The nurses' only armour is that the people living on the street know the nurse is there to help and not to judge them. Carrying a black satchel over their shoulder with "Street Nurse" labelled brightly on the flap, and operating within the Harm Reduction model, they are equipped with clean needles, dressing items, and supplies for taking blood samples. But mostly, as evidenced by the focus of the DVD learning tool that the street nurses were touring to promote, they are equipped with knowledge critical to the development of a nurse-client relationship with individuals who are without homes, using drugs, and battling life on the street.



The British Columbia Centre for Disease Control funds The Street Nurse Program in Vancouver's Downtown Eastside, an initiative that spurred a desire for nurses to reach out to other nurses across Canada, and encourage them to become more familiar with the health care needs of drug users and to play a part in advocating for this population. During the multifaceted presentation, the most compelling feature was the documentary's unflinching depiction of nurses in action on the streets of Vancouver. The nurses don't arrive on the scene in a Batmobile (although they do have access to a van), and they don't turn the hardships into apple pie, but their power is in the grace and visible effectiveness with which they practice the profession of nursing with an underserved population.

For more information on the interactive teaching tool designed by this group or for details on street nursing in Vancouver, visit their website at www.bevelup.com.

R.E.S.P.E.C.T.

ULRIKA DREVNIOK

The *Globe and Mail* recently published an article on a landmark decision made by the Canadian Human Rights Tribunal (“Equality for nurses about respect, not cash”, January 17, 2008). André Picard’s story is about a group of nurses who now stand to receive a \$200-million payout after years of receiving about half the salary of their physician counterparts. Both groups worked for Social Development Canada, doing the exact same assessments on disability benefits applicants. The Tribunal sided with the nurses.

This does not appear to be a case of “nurse versus physician,” nor an unjustified request on the part of the nurses. Yet reading the globeandmail.com’s online comments section, one would be left wondering. “A doctor’s time is worth at least twice that of a nurse,” wrote one commenter. “I have worked with nurses and trust me,

they are all about the money” posted another, “I highly doubt that this appeal for equal payment is anything more than a money-grab.”

This issue of *The Heart – Le Coeur* has a lot of evidence to the contrary: Jason Hickey’s article on the future of healthcare in Myanmar and Ciara Parr’s piece on nursing work with underserved populations are two prime examples. In addition, check out Cara Fedick’s spotlight on the Center for Nursing Advocacy as a way to get involved.

For those of us graduating, we would serve ourselves well to be prepared for negative attitudes towards nursing that we might encounter. In the working world, we may well be dealing with more than our friends simply asking us, “So, why didn’t you just go to med school?”

Turn Your Heart Green

CARA FEDICK

Although the plans for a dedicated website are still in the works, building a user-maintained electronic mailing list, whereby people can receive the current version of *The Heart – Le Coeur* hot off the e-press, has become the current priority. This endeavor is three-fold; first, to expand our mailing list while streamlining the distribution process; second, to cut down on printing costs; and third, but perhaps most importantly, to decrease paper consumption and run a more environmentally-friendly operation. In line with this,

we have opted to email—rather than print—this issue to McGill School of Nursing faculty, staff, and current and recent graduate students. We will continue to build our electronic mailing list over time, so if you know of a person or organization that would be interested in our publication, encourage them to drop us a line at theheart.lecoeur.nursing@mail.mcgill.ca. For those who still like to flip rather than click, print copies will continue to be available at the School of Nursing, in a variety of McGill University Health Centre facilities, and by request.

The Heart – Le Coeur is published by students and affiliates of the graduate program at the McGill School of Nursing.

The goal of *The Heart – Le Coeur* is to contribute to the McGill School of Nursing community by providing its members with an opportunity to communicate their interests, achievements and concerns to each other, and to other interested persons.

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For access to this and archived issues of *The Heart – Le Coeur*, please see the link on the School of Nursing Alumni page at www.mcgill.ca/nursing/alumni.

Comments, questions, and concerns can be sent to theheart.lecoeur.nursing@mail.mcgill.ca.

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Chez Doris: A Sanctuary for Women in the Heart of the City

JESSICA SHERMAN, QY

Chez Doris is a non-profit day shelter for women over the age of 18, created 30 years ago in response to a recognized need for an organization dedicated to helping homeless women. The shelter is named after Doris, a woman found in the fall of 1974, raped and beaten to death, her body left in a shed in the east end of Montreal. Doris had been a regular visitor with Social Service workers, and was reported to have said that she wanted “a place to go without prying eyes and too many questions.” The founders of Chez Doris opened the shelter with the intention of offering women, like Doris, a welcoming place to go for a warm meal, a change of clothing, and support. The range of services offered has grown exponentially since the organization opened its doors 30 years ago; however, the shelter is still a place where a woman can go for the day, get a warm meal, and share only her name upon entering.

I joined the volunteer team at Chez Doris three summers ago, and worked one day a week as the receptionist. While at Chez Doris, I had the opportunity to spend some time getting to know some of the regulars. Yvette*, one of the other volunteers, has been helping out at Chez Doris, during the busy lunch period, five days a week for the past ten years. She is a caring, compassionate woman, who enjoys spending time with the women as much as they enjoy spending time with her.

During a recent visit to Chez Doris, one of the

crisis workers was kind enough to take a few minutes to talk with me. She offered that there are on average 100 women visiting the shelter daily, the majority being between 36-64 years of age. She added that during the past year, the shelter received 23,713 visitors, served 36,298 meals, and had 1,417 visitors to the clothing room.

The shelter offers vital social services, including a weekly on-site medical clinic, a legal information program, and a financial assistance program. The medical clinic is run by a physician who also oversees psychiatric and counseling services. The legal clinic is facilitated by McGill Faculty of Law students and offers the women a chance to receive assistance and information on a variety of legal

issues. The financial assistance program aids women in the administration and management of their income, and caters to 50 women who visit the shelter regularly.

Chez Doris also offers a variety of activities and educational programs. During my recent visit, I could hear the choir—that performs at geriatric wards in local hospitals—practicing adjacent to the atrium. Over the past five years, choir members have wrapped small gifts of toiletries which they pass out to patients after their performance. The women greatly enjoy the opportunity to give to others, as well as the sense of community they derive from being members of a choir. There is also a sewing program, a cooking

See *Doris*, page 6



Singer Lulu Hughs and Catherine Letarte, Director of Chez-Doris. Photo by Bernard Bujold, 2006.

Monitoring the Media: The Center for Nursing Advocacy

CARA FEDICK, MSc(A) II

As the first installment of what we hope will become a regular feature highlighting current issues in nursing, we showcase The Center for Nursing Advocacy, an international non-profit organization working to foster and promote a better public understanding and appreciation for nursing.

In a stroke of luck while researching a presentation on nursing in the media, I was directed to the site of The Center for Nursing Advocacy, and my eyes were opened to the current state of nursing's portrayal in the public eye. Until then, I knew that popular shows such as ER and Grey's Anatomy didn't always focus on the complexities and importance of nurses, but had chalked it up to Hollywood's ignorance and misinformation on the part of writers. As I soon realized, the issue goes beyond Thursday night television and I am appreciative of the work and vigilance of the Center in policing, protecting, and promoting the image of nurses in the media.

According to their mission statement, the Center "seeks to increase public understanding of the central, front-line role nurses play in modern health care." The focus of the Center is to promote more accurate, balanced and frequent media portrayals of nurses and increase the media's use of nurses as expert sources. The Center's ultimate goal is to foster growth in the size and diversity of the nursing profession at a time of critical shortage, strengthen nursing practice, teaching and research, and improve the health care system.

The Center for Nursing Advocacy was founded by

a group of seven graduate students at Johns Hopkins University School of Nursing in April 2001 when one member suggested the formation of a group to help address the growing nursing shortage which they felt

was, in part, due to an inadequate understanding of and support for the profession. The group decided to focus its efforts on improving the portrayal of nurses in the media, especially Hollywood, since television and films are so influential to the public's perception. The group was originally named The Nursing Vision and, upon incorporation in December 2002, The Center for Nursing Advocacy was born.

The Center's first project focused on the popular television show ER, whose portrayal of nurses, while positive in some ways, was viewed as inadequate and inaccurate in many respects. In November 2001, members of the Center conversed with the show's producer and medical advisor to discuss their concerns and have since continued to send letters urging improvement in the show's portrayal of nurses. While the Center believes there has been some improvement in the show's depiction of

nursing, much remains to be done. In addition to ER,



Nursing patches are included with Center for Nursing Advocacy membership. The Center urges nurses "to wear professional-looking uniforms to help create a public image of nurses as educated professionals deserving respect."

See *Nursing Advocacy*, page 6

A Future In Myanmar?

JASON HICKEY, QY



Photo by Jason Hickey

On a recent trip to Myanmar I saw two beautiful girls playing outside a temple. It was hard for me to reconcile their laughter and smiles with the poverty and injustice they will face throughout their lives.

Myanmar is a South East Asian country bordering Thailand that has been forcefully ruled by a military junta since 1962. Although the country is blessed with rich natural resources, the distribution of wealth is uneven. Members of the government live in huge mansions and drive foreign cars while over 35% of the population live below the poverty line.

The authorities deliver harsh penalties to anyone who criticizes them. A comedian in Mandalay was sentenced to seven years hard labour for telling a joke about the government, and the leader of the National League for Democracy, Nobel Peace Prize winner Aung San Suu Kyi, has been under house arrest since 1989.

The junta spends only 0.5% of its annual GDP on health care. In Bagan I met a woman who had a 'good' job – 12 hours a day, 7 days a week, behind the front desk of a busy hotel. She was paid \$20US per month for her efforts. Where she would find the extra money to pay for health services, let alone feed her family, I do not know.

Many NGOs and other external agencies are working to improve health conditions in Myanmar but they often face strong resistance from the government.

In 2006 the Red Cross was forced to close five field offices in regions plagued with malaria, HIV/AIDS and tuberculosis. The same year, the French chapter of Médecins Sans Frontières (MSF) was forced to cease all operations in the country. In an interview posted on MSF's website, Program Director Hervé Isambert, explains why MSF France left Myanmar: "We had to face up to the facts: the authorities don't want anyone to witness how they organize the forced displacement of the population, the burning of villages, and forced recruitment."

Unless something is done to improve the quality of life for Myanmar's 51 million residents, they face a bleak future. Recently in the media, we've seen images of brave Buddhist monks leading protests against the government. Most of those monks have been arrested or worse, but protests continue around the world and international pressure is increasing. This new tide of pressure may force the government to make progressive changes to their country's administration. Otherwise, continuing support from the international community may give those in opposition the strength and courage needed to overcome the unwanted military junta.

If you would like to help two beautiful girls, and the people of Myanmar, move towards a brighter future, there is information and a petition available on the following two websites: www.cfob.org and web.amnesty.org/pages/mmr-260907-news-eng.

Doris, from page 3

program and a clothing and hygiene program. Chez Doris is located in an old house, so there are showers and bathing facilities. Women are also provided with information and products to encourage proper hygiene. The clothing program relies on donations that are distributed on designated days via sign-up list. Additionally, there is a mile-long list of activities offered, including outings both within and out of the city, which women can participate in free of charge.

There are 10 full-time and six part-time staff, and many volunteers, including student placements from McGill, Concordia, and a few of the CEGEPs in Montreal. I volunteered with Chez Doris for about 3 months, and if I had the time, I would go back. The

“Chez Doris is still a place where a woman can go for the day, get a warm meal, and share only her name upon entering.”

shelter is open daily from 8am-3pm, and serves both breakfast and lunch. They accept clothing donations,

as well as toiletries, bus tickets, and non-perishable food items. Volunteers are always welcome to join the organization, whether to participate

in existing activities or plan new ones. Chez Doris is a truly unique home in the heart of the city, offering women a place

to get a warm meal, seek support, and simply relax away from the outside world.

If you would like more information on Chez Doris, or to volunteer or donate, please visit their website at www.chezdoris.ca, email chezdoris@yahoo.com, call (514) 937-2341, or

stop by to visit at 1430 rue Chomedey.

** Names have been changed.*



Cooking in the Chez-Doris kitchen. Photo by Bernard Bujold, 2006.



Nursing Advocacy, from page 4

the Center has included other popular television shows (Grey's Anatomy, House, Scrubs, and Private Practice) in their letter-writing campaigns. Commercials, print ads, movies, talk-shows, and even the well-known organization Doctors Without Borders/Médecins Sans Frontières are being held accountable, and the Center's annual "Golden Lamp Awards", for the best and worst media portrayals of nurses and nursing, continue to identify those that help—and hinder—the profession.

For more information on the work of the Center, and how you can become informed and involved, visit their website at www.nursingadvocacy.org.



In our imperfect state of conscience and enlightenment, publicity, and the collision resulting from publicity are the best guardians of the interest of the sick.
— Florence Nightingale

Nursing Colleagueship

CARA FEDICK AND SAMANTHA LARUE, MSc(A) II
2008-08 CO-PRESIDENTS

Although we haven't yet had an official 2007-08 Nursing Colleagueship meeting, informal exchanges over email and in the newly arranged and refurbished Research Unit have allowed us to keep our finger on the pulse of the graduate students in and around the School of Nursing. The annual Wine and Cheese in October saw students from all three years of the program gather, gobble, and gossip, and Qualifying Year student Alison Mockler took home a 4Gb iPod, the prize for our Fall Fundraising campaign (during which we raised nearly \$250—thanks to everyone who contributed!). Plans to revamp the Colleagueship office were put on hold when we realized how much better the Research Unit space served our needs, especially with the purchase

of a new printer (if you haven't yet had the chance to check out the space, come by Room 221 of Wilson Hall to check your email, have a coffee, or catch up on your sleep, er... reading).

Late-January/early-February's "Career Moments" are in the works, with tentative plans for an interview prep session with the nursing representative from Career and Placement Services (CAPS), access to Health Career Interaction Day, and a Q&A session with recent program grads. And, even though we're still a few months out from entering the real world, it's never too early to start the indoctrination so for anyone interested in taking the reigns for next year's Colleagueship President(s), feel free to contact us at colleagueship.nursing@mcgill.ca and join in the fun.



Get to Know PGSS

ULRIKA DREVNIOK, MSc(A) II
PGSS COUNCIL REPRESENTATIVE (NURSING)

Thought you could get through grad school without having to do any extra-curriculars or join any clubs? Too late! As a McGill grad student, you are automatically a member of the Post-Graduate Students' Society (PGSS) of McGill. Don't worry: you don't have to do anything. That said, there is a lot that PGSS does for you. It provides representation for grad students on various committees both on- and off-campus and works to promote and defend the rights of its members.

Basically, PGSS tries to make McGill a great place for grad students. Nursing has two representatives on the PGSS Council: Ulrika Drevniok (ulrika.drevniok@mail.mcgill.ca) and Kevin Smith (kevin.smith@mail.mcgill.ca). They would love to have the chance to get up to the

microphone and let the rest of McGill know what the nurses think, so email them and give them some work to do.

Have you been to Thomson House lately? You can get a lot of reading done in one of the lounges in an afternoon (just make sure not to sit beside a group of law students re-hashing their Constitutional Law class. Your chances of an impromptu nap are increased by 450%). By the evening, it's usually pleasantly filled with other grad students doing a scotch tasting or watching hockey. Snacks and meals are cheap and a nice break from the food on campus. Check it out up the hill at 3650 McTavish.

For more information, visit www.pgss.mcgill.ca.



A Word with Jeanne

Q&A WITH QUEBEC NURSING LEGEND, JEANNE MANCE (1606-1673)



Q: You are considered to be a co-founder of Montreal (with Paul de Chomedey de Maisonneuve).

A: Mais oui! I actually arrived a few months before Paul, but you know how the history books were written in those days. By the way, Montreal was called Ville Marie in my day. I will tell you one thing: I do not appreciate being placed at Paul's feet at the monument at Place D'Armes.

Q: How did you ever manage to tend to the sick and injured with so few resources?

A: A sense of adventure, creativity, and my wits! Salves and ointments often did the trick. We cleaned their wounds as best we could. I must say, the Iroquois taught me much in the way of mixing tinctures.

Q: Tell us about your best bud, Marguerite Bourgeoys.

A: Well, chérie, Margie was an absolute saint! No, really. She actually is a saint. I must say, it was sometimes hard for me, being in her shadow. She was younger and still had a certain *je ne sais quoi*. It might have had something to do with the fact that she had been drinking good Merlot and eating nice

pâté in France, while I was subsisting on cabbage and moose meat over here in the New World. But I digress. We were like two hearty, colonizing peas in a pod: her establishing schools, me opening a hospital and tending to the sick and injured. Paul might have been governor, but we ruled this town.

Q: Did Florence Nightingale steal your thunder?

A: Listen to me, *mon petit chou*: Flo and I were very different people. I had to hustle francs from French nobility when I needed money for the Hôtel-Dieu. When we were cold and hungry during the first winter here in Ville Marie, I had to bravely say to the others "We are not here to destroy ourselves or take a single step backward!" Everyone always talks about Flo and the Crimean War; has no one heard of my efforts during the Thirty Years War? As if that was not enough, I started a hospital in my own home almost right after I got off the boat! I think you have your answer.