



# The Art of Being a Fly-In Physiotherapist in Northern Manitoba: Perspectives from PTs at Community Therapy Services

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**The Northern Outreach Program through Community Therapy Services (CTS) employs physiotherapists who travel to remote sites in northern Manitoba.**<sup>1</sup> The 10 First Nations communities that it serves include Bloodvein, Little Grand Rapids, Pauingassi, St. Theresa Point, Wasagamack, Garden Hill, Red Sucker Lake, Norway House, Berens River, and Poplar River. Most of these communities are fly-in access only, except for the ice roads in the winter. Here, we offer our reflections on our practice as fly-in physiotherapists servicing northern Manitoba.

## You Need to be Adaptable

The first lesson is this: things will not necessarily go as planned. You could show up at the airport an hour before your early morning flight, only to have it cancelled hours later due to weather conditions. You could board the plane, but not be able to land in the community you are travelling to. Some airports near First Nations communities are located on islands and the fog coming off the lake can obscure the pilot's ability to see the tarmac. You might need to "hitch" a ride on the winter road when air travel is not possible. You could land in the community to discover that the power is out at the Nursing Station. A myriad of challenges may present themselves during a fly-in trip, but these scenarios are simultaneously what make almost every trip an adventure. In order to do this kind of work, you must have a good sense of humour and be ready to adapt to whatever circumstances you encounter.

There are "comfort tricks" that make a travelling PT's life easier. Make sure you have seasonally appropriate and safe clothing, and check the local weather before travelling. The roads and environment can be rugged, so investing in a pair of hiking shoes is indispensable. Plan your meals in advance and pack a cooler. Always bring extra food and clothes in case of an extended storm stay. Keep extra food in your carry-on in case your cooler flies to another community. Bring a good book and download episodes on Netflix in advance.

## You Need to be an Advocate

The inequity with respect to access to physiotherapy services for Indigenous peoples, especially those residing in remote areas of Canada, is well documented.<sup>2,3,4</sup> As fly-in PTs, we face the reality of this inequity head on. In several of the First Nations communities we serve, we are the only PTs providing local services to adults. Before Jordan's Principle<sup>5</sup> came into effect in 2017, we were also providing the majority of community-based physiotherapy services to paediatric clients. Now, children in need of locally provided physiotherapy services are primarily seen by centres and organizations that receive funding through Jordan's Principle. In the wake of system reorganization within the Winnipeg

Regional Health Authority, there are fewer opportunities to refer clients to Winnipeg to access more intensive physiotherapy when needed. These conditions are further complicated by the fact that private physiotherapy clinics are not accessible for people living in the communities that we serve for a variety of reasons. Health Canada's Non-Insured Health Benefits (NIHB) Program does not fund private physiotherapy services.

We see the sequelae of this access disparity in our practice. It is not uncommon for a client to present with decades-long chronic back pain that would have been amenable to early physiotherapy intervention. Similarly, a client may have remotely sustained a fractured or have undergone surgery, but did not achieve the best possible outcome given the lack of timely physiotherapy intervention.

The disproportionate burden of disease and disability experienced by Indigenous peoples, coupled with limited access to physiotherapy services,<sup>4</sup> requires that advocacy feature heavily in our clinical practice. A good understanding of the health care system is necessary in order to help our clients access the best opportunity to rehabilitate. We collaborate frequently with other health care disciplines and community health representatives. Joint consultations with nurses and/or doctors in Nursing Stations are a common occurrence. We often write letters to Band Councils to request modifications for housing and send letters of justification to NIHB for equipment. Our role as advocates also extends to appreciating the value and importance of the community-based physiotherapy services that we provide in First Nations communities. Our agency is involved in an ongoing manner in justifying the provision of services to persons in their home communities when possible and appropriate, on the basis of not only increased comfort and convenience to the patient, family, and community, but improved adherence to treatment as well.

## You Need to go Beyond Advocacy; You Need to be an Ally

Maybe you find yourself now asking, "How did these disparities with respect to access to physiotherapy and other health care services manifest?" This line of questioning is one of the first steps toward allyship, which is an ongoing process of learning about how racism permeates

Crossing the lake from the airport on Stevenson's Island to Garden Hill.



Charter flight to and dock at St. Theresa Point.



Sunset view over a bay from behind the hospital in Norway House.

Canadian society and its institutions, and acting to disrupt systemic oppression.<sup>6</sup>

Allyship is fundamental to providing physiotherapy services to residents in remote First Nations communities. It is important to understand how colonization has, and continues to, create health inequities that negatively impact Indigenous peoples. The history of colonization in Canada is that of attempted “cultural genocide.” It involved, but was not limited to, the dispossession of Indigenous peoples from their lands and relocation to reservations, forcible removal of children from families and their placement in residential schools in order to sever familial and cultural ties, disruption of existing forms of government, and prohibition of traditional healing practices. The consequence is that Indigenous peoples have endured significant trauma and experience reduced opportunities to live healthy lives. The reports created by the Truth and Reconciliation Commission (TRC) are important resources in terms of understanding our shared history in Canada and contain Calls to Action relevant to physiotherapy.<sup>7,8</sup>

Allyship also involves the realization that colonization has a strong foothold within our profession. Therefore, there is the potential of unintentionally perpetuating colonization through our practices and harming clients who are Indigenous.<sup>9</sup> Another element of allyship in this context is engaging in continuous reflection and deconstructing our clinical practice in order to serve Indigenous clients better. PTs in the Northern Outreach program have provided practicum placements to physiotherapy students, a part of which is informing students of this history, the disadvantages experienced by Indigenous peoples, and how this affects our practice.

What we are also hinting at here is the importance of practising cultural safety. We won't dive deeply into how to provide culturally safe physiotherapy services to Indigenous peoples. There are insightful articles published in previous editions of *Physiotherapy Practice* that offer a launching point into this particular learning journey.<sup>10,11</sup> There are also exceptional online courses that offer cultural safety training.<sup>12</sup> Having knowledge regarding trauma-informed care can promote safety, trust, healing, and collaboration when working with Indigenous peoples.<sup>13</sup>

We also want to emphasize that despite all the barriers, challenges, and historical and current trauma that influence the health and lives of Indigenous peoples, there is incredible resiliency within Indigenous communities.

### You Need to Build Relationships

The moment you arrive at the airport, you are visible as a health care provider to members of the community that you are traveling to. It is likely that your colleagues and some of your clients will be on the same flight. The stage is set well in advance of the clinical interaction. Simultaneously, there is a long history of Indigenous peoples having negative experiences with the health care system and a possible distrust of institutions to contend with. When we consider how to move forward in a spirit of reconciliation, it is important to begin building trust from the first moment.

When your feet hit the ground in the community, you are on their land. The gravity of this is that you have to pay attention to your own identity, especially if you are of European settler descent, and the historical role that land has played in settler and Indigenous relations.

It is important for you to become aware of local assumptions and beliefs about good manners and appropriate behaviours, and whether these vary with age and gender. You especially need to learn what is considered courteous conversational behaviour. Humour is a powerful tool and very helpful in developing rapport.

You may find, that at first, many referrals are from people working at the Nursing Station and then their family members. Over time, you see more self-referrals as the community becomes more familiar with you as a person and with growing recognition of what you can offer as a PT.

### You Need to Adjust Your Clinical Practice

You are working in a Nursing Station, which means you do not have a lot of traditional physiotherapy tools at your disposal. The clinic rooms are equipped with medical examination beds and, for many clients, it is not safe for them to transfer onto this surface. You'll have to assess hip ROM for an 80-year-old grandmother another way. Or maybe you have to teach someone active-assisted ROM post-op rotator cuff surgery, but there are no sticks to use. The long piece of crown moulding in the back storage room will have to do. Your interventions and methods of teaching exercises become creative very quickly.

Being that our services are based in the Nursing Stations, we are unable to do home visits. There are no community-based OTs servicing adults. This means we are often involved in medical equipment prescription. The challenges to providing the most appropriate equipment include needing to base clinical decisions off descriptions and photographs of the home environment, shipping costs, and being unable to trial equipment.

Many clients who present for physiotherapy appointments were referred, rather than initiating services themselves. An overview of the profession and what can be offered lays the groundwork for a dialogue. The referral might say "exercises for right knee osteoarthritis," but asking the client what the problem is from their perspective is immensely helpful. This discussion shifts the power balance in the clinical interaction from the clinician to the client and the problem can then be solved together.

All too often, we, as PTs, enter the clinical interaction with our western biomedical culture. We cannot assume, especially in this practise context, that clients are going to appreciate our frame of reference. Instead, we must contextualize their care in their world, or in other words, meet them where they are at. This involves a sincere curiosity and asking questions about their day-to-day lives. Other clinicians may not have taken the time to explain diagnoses to their clients. Taking the time to go over the anatomy and condition is always valuable.







Aerial view of Red Sucker Lake from a Perimeter Airlines flight.

### You'll Have an Incredible Experience

Being a fly-in PT exposes you to a vast array of conditions and clinical situations, and provides the opportunity to acquire a scope of skills that you might not have otherwise. It's a generalist's dream!

There are reciprocal lessons for other physiotherapy practice areas. Allyship is not limited to working with Indigenous peoples. Given the various forms of systemic oppression, there are one or more ways in which the client you are treating is possibly disadvantaged. The experience of giving and receiving health care is rarely such that both persons have equal power in the interaction, and anything that brings that to a health professional's awareness and encourages them to mitigate as much as possible will lead to better care and teaching. We learn so much from listening to, and working with, our clients. This practice area can make you a better, more knowledgeable, more culturally sensitive PT and person.

Working in northern Manitoba is also fun! You take helicopters, planes, boats, hovercrafts, and medical vans to work. The Nursing Residence where you are staying may offer stunning views. You share accommodations with exceptional and inspiring health care professionals who have traveled from various parts of Canada to work in these communities. And you always have a good story to tell by the time you get back home. 🍷

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