



# Nursing students' perspectives of the health and healthcare issues of Australian Indigenous people<sup>☆</sup>

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## SUMMARY

**Background:** Indigenous people are the most disadvantaged population within Australia with living conditions comparable to developing countries. The Bachelor of Nursing programme at the University of Western Sydney has embedded Indigenous health into the undergraduate teaching programme, with an expectation that students develop an awareness of Indigenous health and healthcare issues.

**Aim:** To gain insight into students' perceptions of Indigenous people and whether the course learning and teaching strategies implemented improved students' learning outcomes and attitude towards Indigenous people and Indigenous health in Australia.

**Design:** A mixed methods prospective survey design was chosen.

**Methods:** Students enrolled in the Indigenous health subject in 2013 were invited to complete pre- and post-subject surveys that contained closed- and open-ended questions. Students' socio-demographic data was collected at baseline, but the 'Attitude Toward Indigenous Australians' (ATIA) scale, and the 3-item Knowledge, Interest and Confidence to nursing Australian Indigenous peoples scale were administered at both pre- and post-subject surveys.

**Results:** 502 students completed the baseline survey and 249 students completed the follow-up survey. There was a statistically significant attitudinal change towards Indigenous Australians, measured by the ATIA scale, and participants' knowledge, intent to work with Indigenous Australians and confidence in caring for them increased significantly at follow-up. Based on the participants' responses to open-ended questions, four key themes emerged: a) understanding Indigenous history, culture and healthcare; b) development of cultural competence; c) enhanced respect for Indigenous Australians' culture and traditional practices; and d) enhanced awareness of the inherent disadvantages for Indigenous Australians in education and healthcare. There were no statistically significant socio-demographic group differences among those who commented on key themes.

**Conclusion:** Addressing health inequalities for Indigenous Australians is paramount. Nurses need cultural awareness and sensitivity to deliver culturally appropriate healthcare in Australia.

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## Why Is This Research or Review Needed?

- Culturally competent nursing care can have a positive impact on Indigenous Australians health outcomes
- Indigenous Australians experience a higher burden of disease and higher mortality compared to non-Indigenous Australians
- An awareness of the Indigenous health issues and cultural competence can improve the health outcomes of Indigenous peoples

## What Are the Key Findings?

- Supports the inclusion of Indigenous health and healthcare issues with a specific focus on cultural competence within undergraduate nursing programmes
- Education relating to Indigenous history, culture and health, improves undergraduate nursing students' perceived confidence to work with Indigenous peoples
- Challenging and reflecting on individual cultural beliefs assist the undergraduate nurse to reconcile differences and provides culturally competent nursing care

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## How Should the Findings Be Used to Influence Policy/Practice/Research/Education?

- Nursing education should take a comprehensive approach to support undergraduate nurses' understanding of Indigenous history, culture and health issues
- Immersion in the Indigenous community through clinical placements provides students the ability to apply knowledge to real life experiences and transfer this experience to the clinical setting post registration.
- Education can play an important role in establishing student nurses' confidence in caring for Indigenous Australians

## Introduction

Indigenous Australians are among the most vulnerable population in Australian society experiencing both social and health inequalities (Australian Institute of Health and Welfare, 2004). Across all measures of health, Indigenous Australians are over represented and experience a higher burden of disease and higher mortality at younger ages than non-Indigenous Australians (Australian Institute of Health and Welfare, 2012b). In fact, the health of non-Indigenous Australians has improved over the past 20 years while the Indigenous population's health status has remained largely unchanged (Australian Institute of Health and Welfare, 2012a). Disconcertingly, Australian Indigenous health has often been compared to the health standards of a third world country (Australian Human Rights Commission, 2010).

There are suggestions that the poor health of Australia's Indigenous people affects the health of all Australians. The healthy migrant theory suggests that migrants arrive in developed countries with a superior standard of health compared to the general population of the host nation. However, over time the health of the migrants declines to match the general health of the host nation. Parallels can be made with the healthy migrant theory and Australians' general health and suggest that the poor health of Australia's Indigenous population also negatively impacts the wider community health (Harding, 2004; Wingate and Alexander, 2006).

Nurses' practising cultural safety has a direct impact in reducing the health disparities experienced by Indigenous Australians (Lee et al., 2006; Durey, 2010). Therefore, it is crucial that Indigenous health is embedded into nursing practice as the effect on Indigenous health, morbidity and mortality are significant. This is supported by previous research that suggests restructuring nursing education to embed Indigenous perspectives into the curriculum and conduct clinical placements within Indigenous communities improves cultural sensitivity, changes attitudes towards Indigenous peoples, reduces racism and improves health outcomes for Indigenous Australians (Lee et al., 2006; Durey, 2010; Webster et al., 2010; Turale and Miller, 2006). Long term, the more culturally safe the health care system and its workers are, the more likely Indigenous people are to engage and use the services available. Early engagement in the health care system results in early health intervention strategies, prevention of illness and improved overall health outcomes for Indigenous Australians.

## Background

Nurses can play a significant role in improving the health of Indigenous people and thus the wider community. The Nurses Code of Ethics and Nurses Code of Conduct require nurses to undertake patient advocacy and ensure that all patients are treated equally. The codes also require nurses to display a respect for culture, beliefs and traditions of all patients (Nursing and Midwifery Board Australia, 2006; Nursing and Midwifery Board of Australia, 2002). Specific to Indigenous health, the literature reports the benefits of cultural competence for improved

health outcomes in the Indigenous population (Durey, 2010; Liaw et al., 2011; Reibel and Walker, 2010; Stuart and Nielsen, 2011).

To improve health outcomes requires an understanding of the reasons why there is an increased morbidity and mortality in Indigenous populations. Advocating for the health of Indigenous peoples not only involves knowledge but empathy for the basis for the disparities in health. Both may be fostered through undergraduate nursing programmes and positively impact in the long term on Indigenous health outcomes (Goold and Coulthard, 2009; Goold and Usher, 2006; Turale and Miller, 2006). There has been a move towards an increased Indigenous focus across nursing faculties by including Indigenous health and cultural competence in the undergraduate nursing student curriculum in an attempt to improve the health outcomes of Indigenous Australians (Nash et al., 2006; Ramsay and Kermode, 1997; Turale and Miller, 2006).

The School of Nursing and Midwifery (SoNM) is a multi-campus school within a large university in the western region of Sydney. The student population is multicultural with 50% of students being born overseas across 16 different countries, with Asia being the birth place of 36% of these students (Salamonson et al., 2011). The Bachelor of Nursing programme has a dedicated unit exploring the factors effecting Australian Indigenous health in contemporary society. This dedicated unit of study consists of face to face tutorials and lectures. A range of topics are explored related to the historical, political and social aspects of Indigenous health. These aspects are taught in relation to the contemporary healthcare issues of cultural competence, cultural safety, racism, equity and access. This undergraduate programme is supported by the National Competency Standards for the Registered Nurse developed by the Nursing and Midwifery Board of Australia (Nursing and Midwifery Board Australia, 2010).

## The Study

### Aim

The aim of this paper was to gain insight into students' perceptions of Indigenous peoples and to determine whether the course learning and teaching strategies improved students' learning outcomes and attitudes towards Indigenous people and Indigenous health issues in Australia.

### Design

To meet the aims of this research, a mixed methods approach was chosen, with concurrent quantitative and qualitative data collection. This mixed methods design was chosen as it offers responses to variables such as rating of knowledge about the topic while exploring the in-depth perspectives of individuals. The qualitative component allowed participants to provide in-depth responses to open-ended questions that could then be compared to the quantitative data and ultimately enhanced the richness of the data.

### Study Setting and Participants

The study was undertaken at a large multi-campus university in New South Wales, Australia, between March and June of 2013 in semester 1. Of the 944 students who enrolled in the unit, 502 (53.2%) completed the baseline survey. A total of 435 (86.7%) of those who completed the survey also provided consent for their completed survey to be linked to the follow-up survey. Of the 435 participants, 249 (57.2%) was available and completed the follow-up survey at the time when the follow-up survey was administered. The reduced participation rate in the follow-up survey may relate to the following factors: 1) participation in the study was voluntary and; 2) the unit of study did not have compulsory attendance requirements and as such, class participation rates declined during the semester.

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