

# CATSINaM

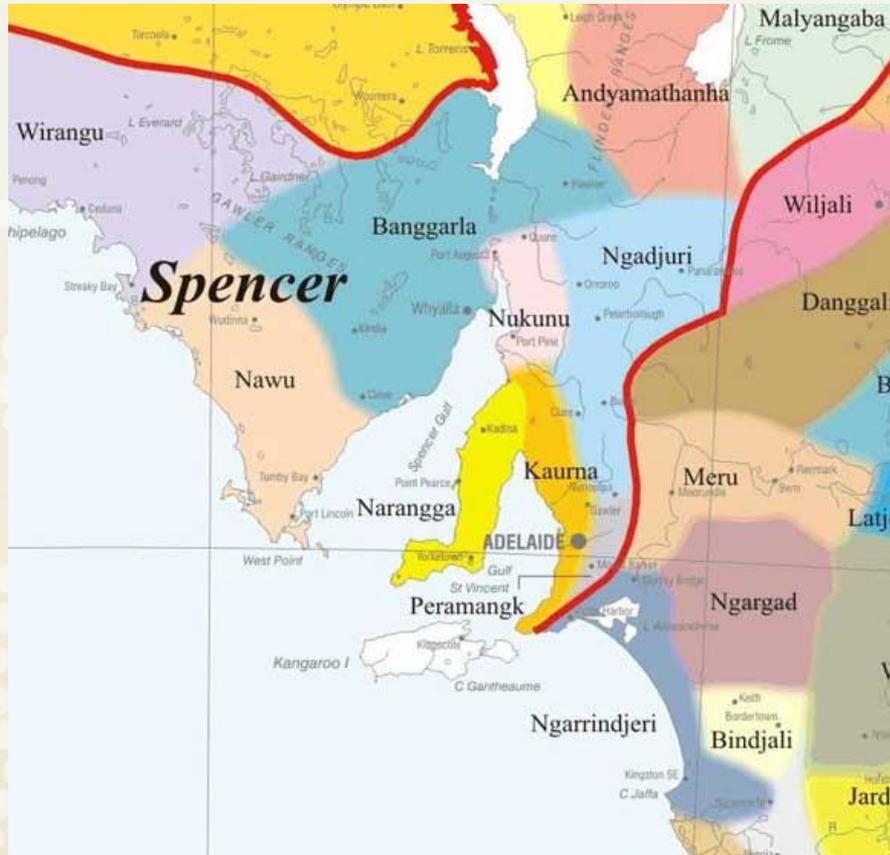
CONGRESS OF ABORIGINAL AND TORRES  
STRAIT ISLANDER NURSES AND MIDWIVES

## Indigenous Nurses Aotearoa Conference 2015



*Unity and Strength through Caring*

# Home



Unity and Strength through Caring



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STRAIT ISLANDER NURSES AND MIDWIVES

# Purpose

-  Learning about us
-  Getting to know you
-  Navigating how we can work together
-  Beginning of the conversation

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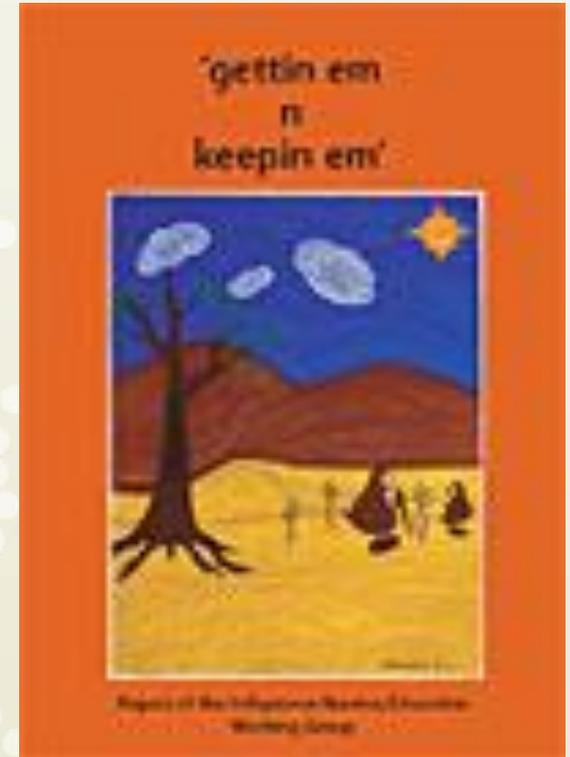
# Policy context: Aboriginal and Torres Strait Islander Health

- Indigenous persons have a life expectancy at birth which is **17 years less** than a non-Indigenous person – or 10 years based on ABS changing how they calculate this?
- Indigenous Australians have **2.5 times** the burden of disease compared to non-Indigenous Australians
- Indigenous Australians have:
  - **5 times** the burden of disease due to diabetes
  - **4.5 times** the burden disease due to cardiovascular disease
  - **4 times** the burden of **disease and disability** due to intentional injuries such as suicide or harm from violence
- We are sick for a long time!!!
- Only **36% of Indigenous students** complete their nursing and midwifery studies compared to approximately **64% of non-Indigenous students** – more on this soon...

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# A brief history of CATSINaM

- First meeting held August 1997 to establish CATSIN in 1998
- 2002: ‘Gettin em and Keepin em’
  - Submitted to DoHA and OATSIH
  - Recommendations to overcome challenges facing Aboriginal and Torres Strait Islander Nurses
  - Still largely relevant today – CATSINaM continuing to advocate on this
- Since 2012 changes in: governance, name and Secretariat location



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# CATSINaM Board

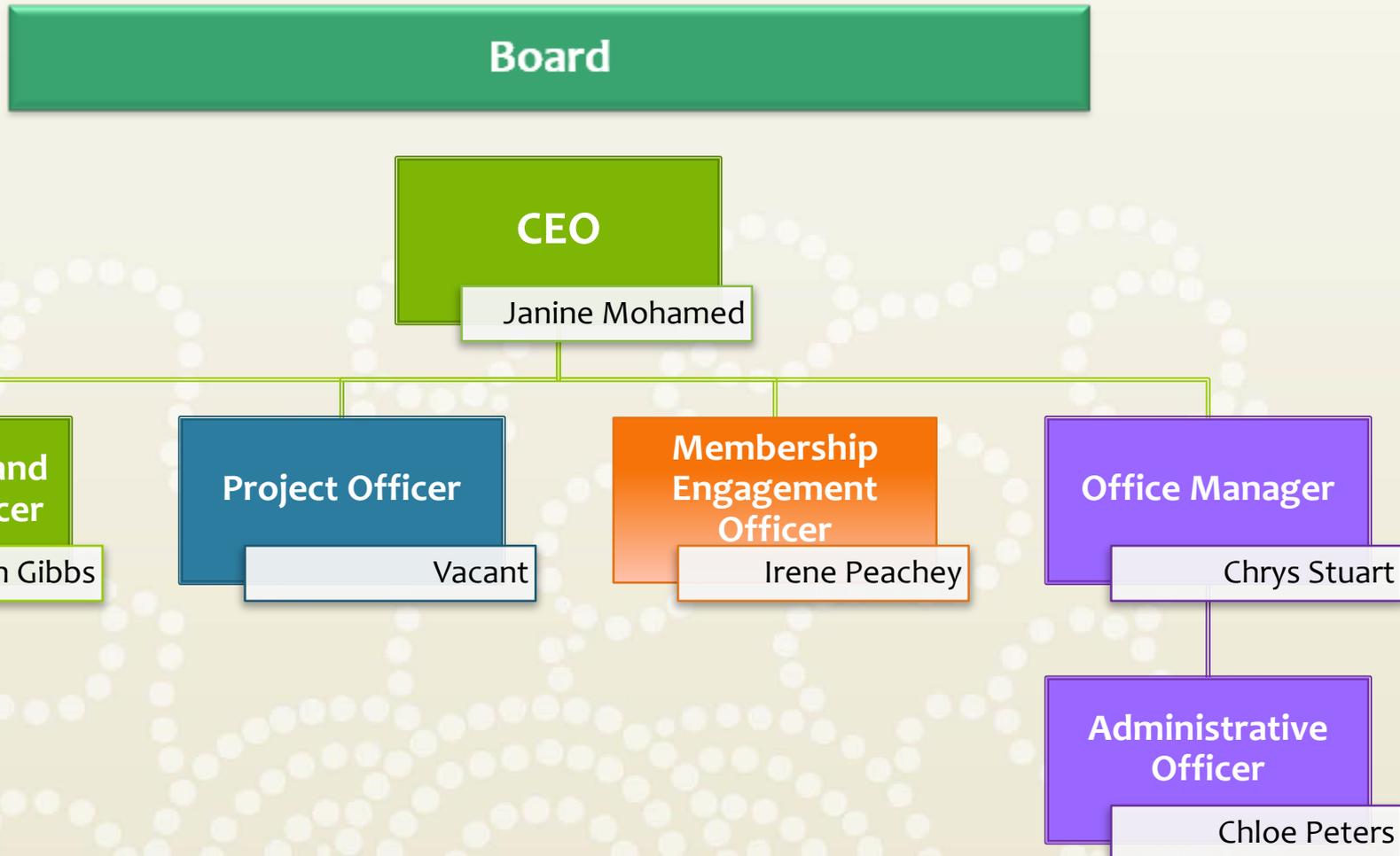


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# CATSINaM Team in Canberra



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# Our Members

**Full Members :** Registered nurses and midwives

Enrolled nurses and Assistants in nursing

Students in enrolled nursing, registered nursing and midwifery

**Affiliate Members :** Individual and Organisational



In **all** health sectors

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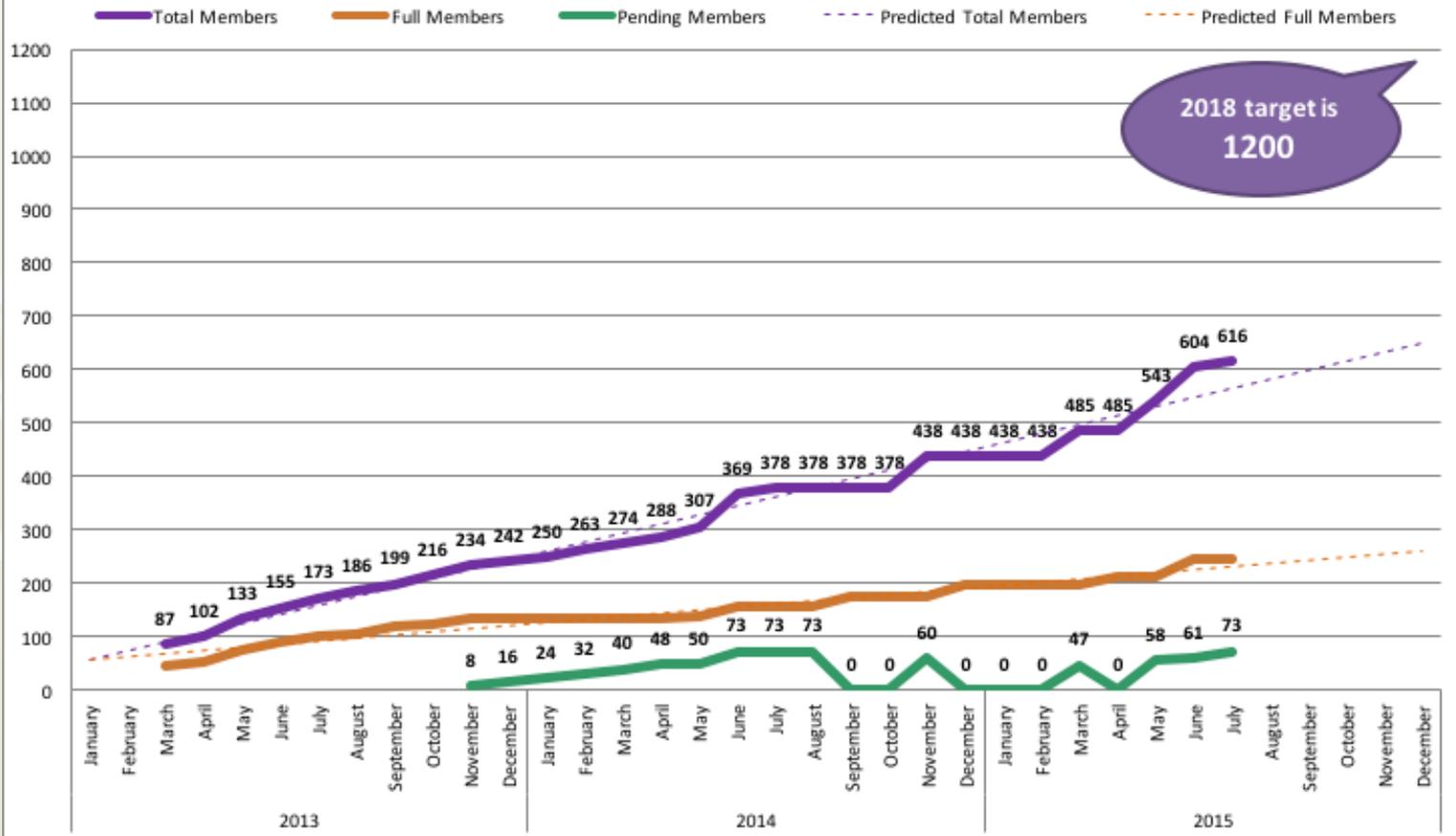


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## CATSINaM Predicted National Membership

(based on monthly membership statistics)



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# Recent Achievements

- Close the GAP and the NHLF
- Parliamentary Breakfast
- Governance Positions - ANMAC
- Clinical Coordinators Meeting
- Membership Drives, Newsletters & Dinners
- 3 current policies and 2 planned 'Uniqueness of our Nurses' & 'Birthing on Country' Positions Papers
- Media Releases & Communications
- Submissions & Funding Proposals
- Career pathways
- Referral/introduction Letters
- Review and re design of our Mentoring Program
- CPD – Resilience
- Media ie DVD's
- Developing a research agenda and working with our partners i.e. Lowitja
- Annual Conference & AGM
- Data and info graphics
- Consultation and Reports
- R&R Strategies Report



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# Recent Achievements

- Held a National Summit on Cultural Safety in Nursing and to raise profile and understanding of CS– led to universities and peaks taking on cultural safety training
  - Promoted and provided three cultural respect/safety trainings to non-Aboriginal colleagues – planning a fourth
  - Implementation of the Aboriginal and Torres Strait Islander Health Curriculum Framework
  - Advocacy with ANMAC to include ‘cultural safety’ in the curriculum accreditation standards for all professions
- Economic Analysis
- Nursing & Midwifery Recruitment & Retention
  - NEW University Completions
- New website, **newsletter** and active in social media – produced a DVD - Resources on our website i.e. Scholarships
  - Establishment of a Leaders in Indigenous Nursing and Midwifery Education Network or LINMEN to improve quality of teaching and resources used in curriculum and strategies for supporting students and staff

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# LINMEN's draft goal:

To increase the capacity of nurse and midwife graduates to provide culturally safe care (this is judged by Aboriginal and Torres Strait Islander Australians)



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# What changes do we want?

- Non-Indigenous nurses and midwives receive a good grounding in what cultural safety and respect are, and understand that this as a life-long journey
- Greater numbers of our Members in the health system in all sectors
- Our Members are resilient and connected
- Culturally respectful health systems where Aboriginal and Torres Strait Islander people experience cultural safety and have better health outcomes

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# Where to embed CST/Cultural Respect



 How many Indigenous nurses and midwives do we need?

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# Workforce Needs

|          | Current (No and % representation) | Population parity only | Need due to higher birth rate or BoD | Increase  |
|----------|-----------------------------------|------------------------|--------------------------------------|-----------|
| Midwives | 186 (0.81%)                       | 608                    | 852                                  | 4.6 times |
| RNs      | 1,745 (0.73%)                     | 6,363                  | 12,727                               | 7.3 times |
| ENs      | 829 (1.61%)                       | 1,328                  | 2,655                                | 3.2 times |

- The **representation** of Aboriginal and Torres Strait Islander Australians across the professions is **extremely low**
- The **geographical distribution** of Aboriginal and Torres Strait Islander nurses and midwives does not match either jurisdictional populations as a whole or where people live, i.e. metropolitan, regional or remote

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Based on 2013 AIHW data for midwives and RNs, and 2012 AIHW data for ENs

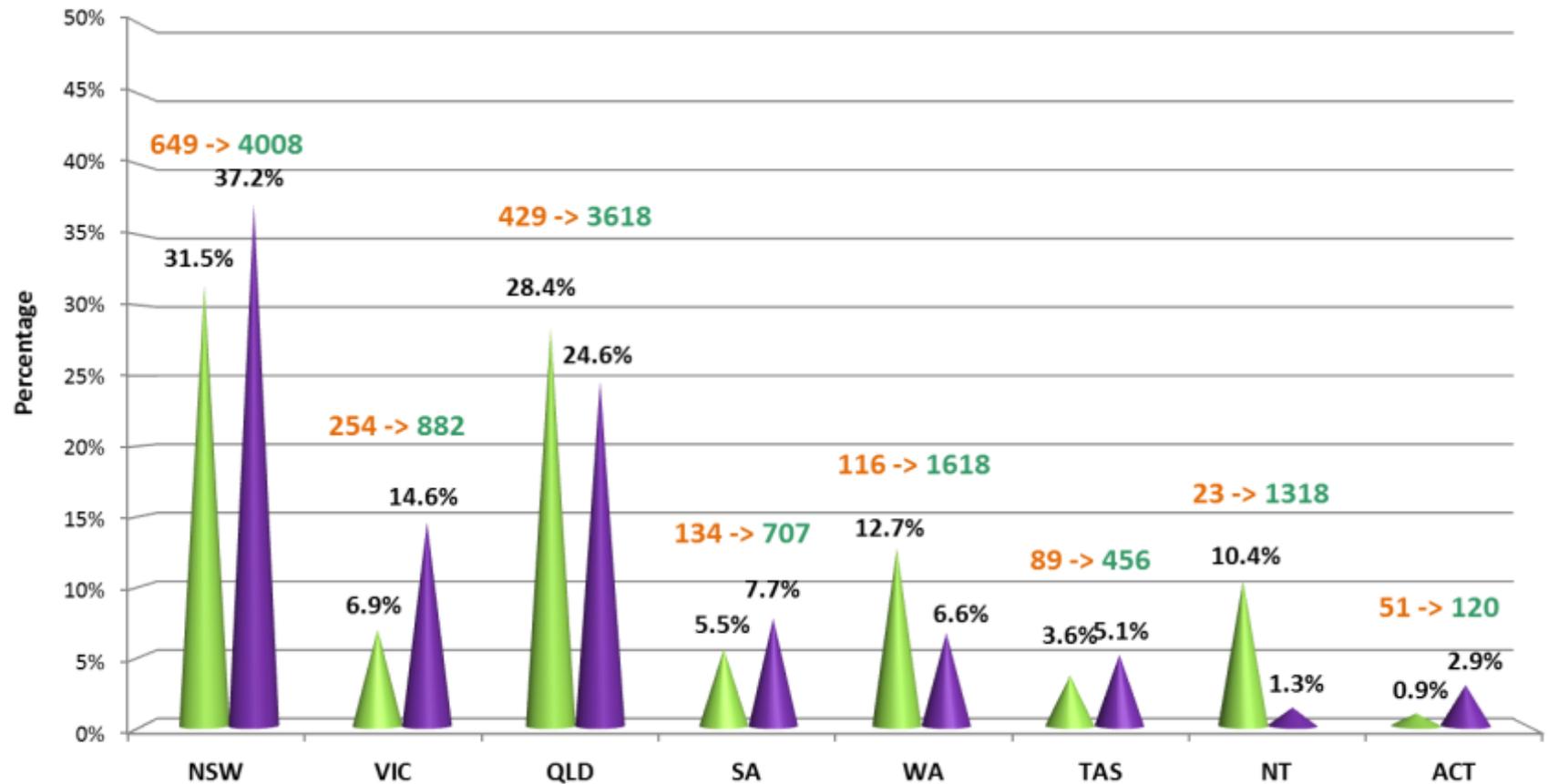


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# Registered nursing workforce needs

■ Aboriginal & Torres Strait Islander Australian population distribution ■ Aboriginal & Torres Strait Islander registered nurses workforce distribution

# Actual number of Aboriginal & Torres Strait Islander registered nurses # Required number of Aboriginal & Torres Strait Islander registered nurses



# Representation in nursing and midwifery

| Occupations                               | Indigenous health professionals | % of total health professionals |
|---|---------------------------------|---------------------------------|
| Nurse Educators and Researchers           | 21                              | 0.40%                           |
| Nurse Managers                            | 81                              | 0.64%                           |
| Midwives                                  | 70                              | 0.50%                           |
| Registered Nurses                         | 1709                            | 0.83% ★                         |
| Midwifery and Nursing Professionals       | 3                               | 0.85%                           |
| Enrolled and Mothercraft Nurses           | 287                             | 1.60%                           |
| Nursing Support and Personal Care Workers | 1438                            | 2.04% ★                         |



# Common work

- LINME
- Cultural Exchange
- CPD – Resilience and Emotional Intelligence & Mentoring Program
- Documents and Advocacy Learnings
- PRIDoC –
  - provides a space for Indigenous doctors to express themselves culturally,
  - to gain strength from our international peers in expressing our cultures, and to learn and reaffirm what makes Indigenous doctors different.
  - This strengthens Indigenous doctors to lead the way in teaching the importance of health and culture back in their home countries.

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***New Zealand Nurses Association  
Auckland, 2015***

# Indigenous Nursing and Midwifery Workforce Development

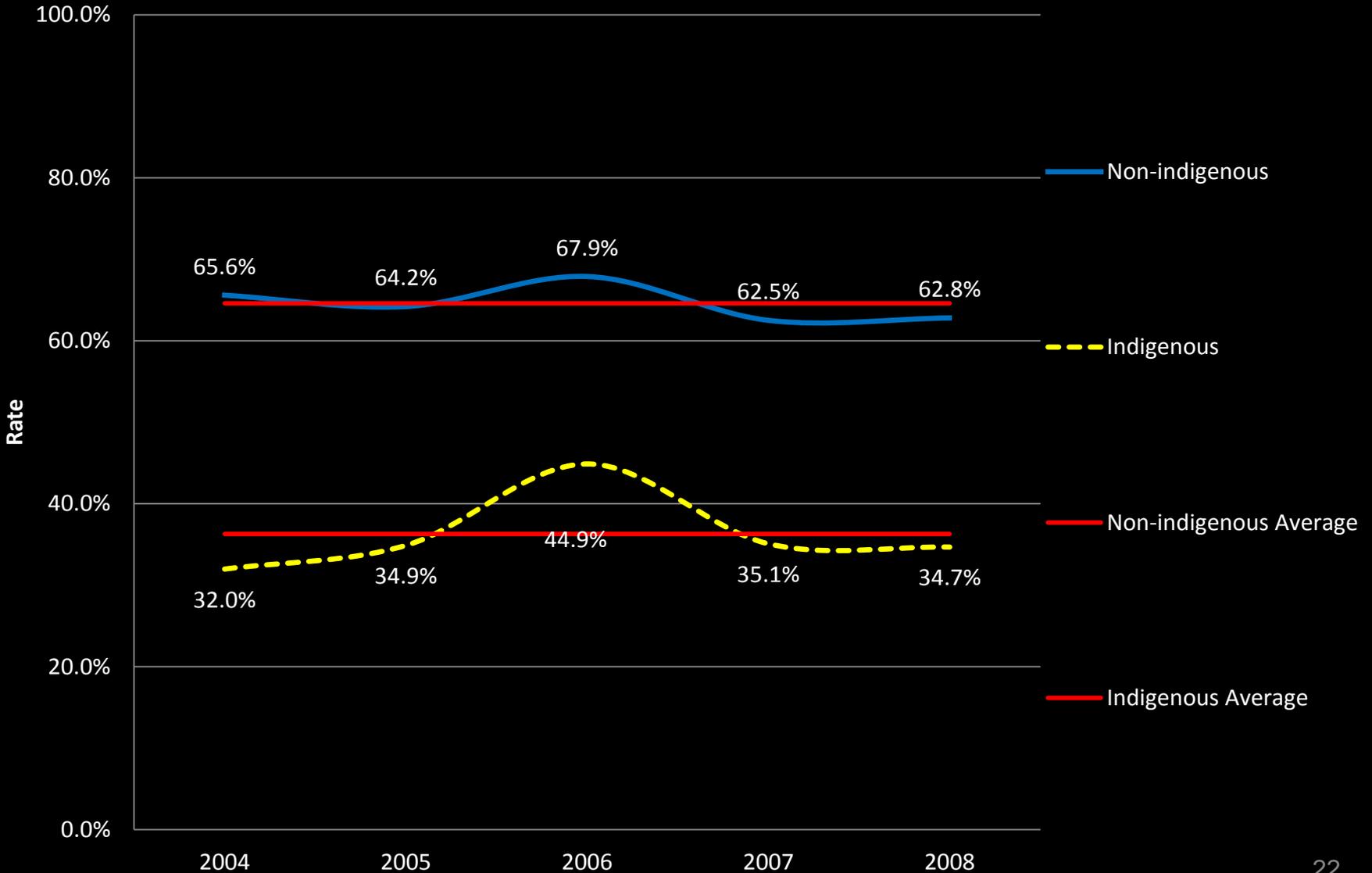
Roianne West (PhD, RN, BN, MMHN)  
Professor First Peoples Health  
Griffith University



# Research Questions

- 1. What are the national commencement numbers, progression, attrition, and completions rates for Indigenous nursing students since the publication of the final report of the Indigenous Nurse Education Working Group (Indigenous Nursing Education Working Group, 2002) when compared to non-Indigenous nursing students?
- 2. What are the factors identified by *Indigenous nursing students* and *academics* as **enablers** to successful course completion?
- 3. What are factors identified by *Indigenous nursing students* and *academics* as **barriers** to successful course completion?
- 4. What strategies are perceived as resulting in improved completion rates as identified by Indigenous nursing students and academics?

# National Nursing Completion Rates Pre-registration Nursing Courses Indigenous Non-indigenous Comparison by Year



# What do we know about Indigenous nursing and midwifery students ?

- **Commencements** has increased however, still remains below parity;
- **Progression** – 16.6% *difference*
- **Attrition** – 10.1% *difference*
- **Completion** – 28.3% *difference*
- Consistent (across nearly a decade).

# Enabler #1

## Individual Student Characteristics

- I. Motivations for choosing nursing
- II. Personal attributes for success
- III. Life and work experience
- IV. *Appropriate timing*



## Enabler # 2

# Academic Knowledge Awareness and Understanding

- I. Indigenous academics (nursing and others)
- II. Non-Indigenous nursing academics

## Enabler # 3

### Relationships, connections and partnerships

- I. Nursing schools and Indigenous Education Support Units;
- II. Indigenous nursing students and other students;
- III. Indigenous students and wider university resources;
- IV. Indigenous students and academics; and
- V. Indigenous students and industry



## Enabler # 4

# Institutional Structures Systems and Processes

- I. University leadership
- II. Teaching and learning
- III. Policy and procedures
- IV. Support from university leadership

## Enabler # 5

### Family and community knowledge awareness and understanding

- I. Family and community understanding of university
- II. Support from family and community
- III. Complex social issues
- IV. Family and community obligations and responsibilities

## **Strategy # 1**

**Appoint an Indigenous nurse academic in all schools of nursing**



## **Strategy # 2**

**Development and implementation of resilience  
building  
training tailored for Indigenous nursing students**



## **Strategy # 3**

**Develop partnerships between Schools of Nursing and Indigenous Education Support Units**



## **Strategy # 4**

**Develop and implement a cross-cultural awareness program specifically for academics in Schools of Nursing**



## **Strategy # 5**

**Development of a critical nursing curriculum**



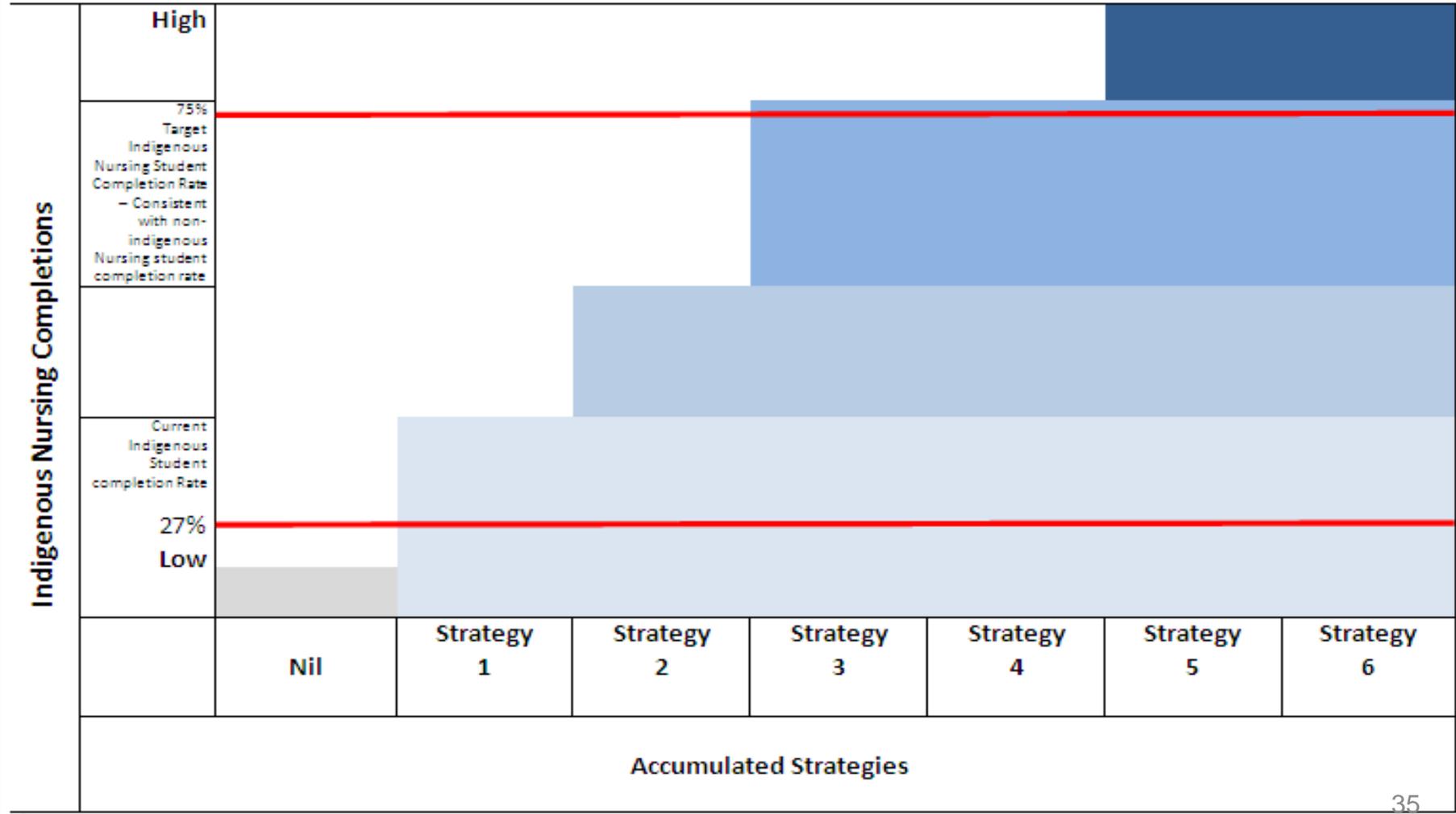
## **Strategy # 6**

**Development of pathways from school through the VET sector and University sectors.**



# Model of Excellence of Indigenous Nursing Completions

Model of Excellence Indigenous Nursing Completions



# Education

1. Revision of Undergraduate nursing courses in Australia to ensure that future Indigenous nursing students do not face the same level of disadvantage evident in results;
2. To provide a foundation of evidence that can inform more effective targeted strategies to support Indigenous students in Schools of Nursing.



# Policy

1. Targets for key indicators including enrolments, progression, attrition and particularly completion rates to be developed by all states, territories and nationally;
2. Development and implementation of a National strategy for the Recruitment and Retention of Aboriginal and Torres Strait Islander Undergraduate Nursing Student *entitled “Creating Walking Tracks to Success”* be considered by the Office of the Chief Nurse, Department of Health and Ageing; and
3. Development and implementation of an Indigenous nursing education model of excellence.

# Connect 'n' Grow

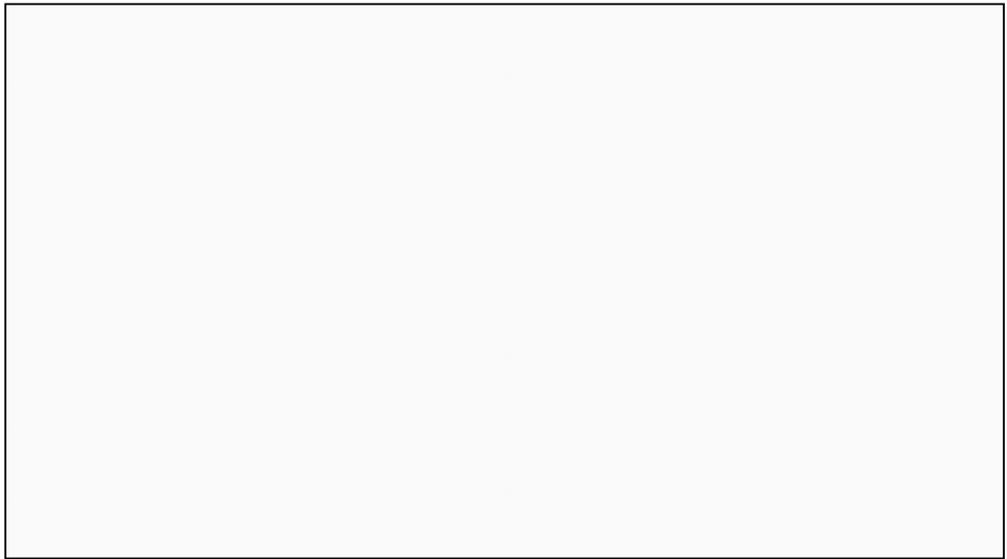
## HLT21307 - Certificate II in Aboriginal and Torres Strait Islander Primary Health Care

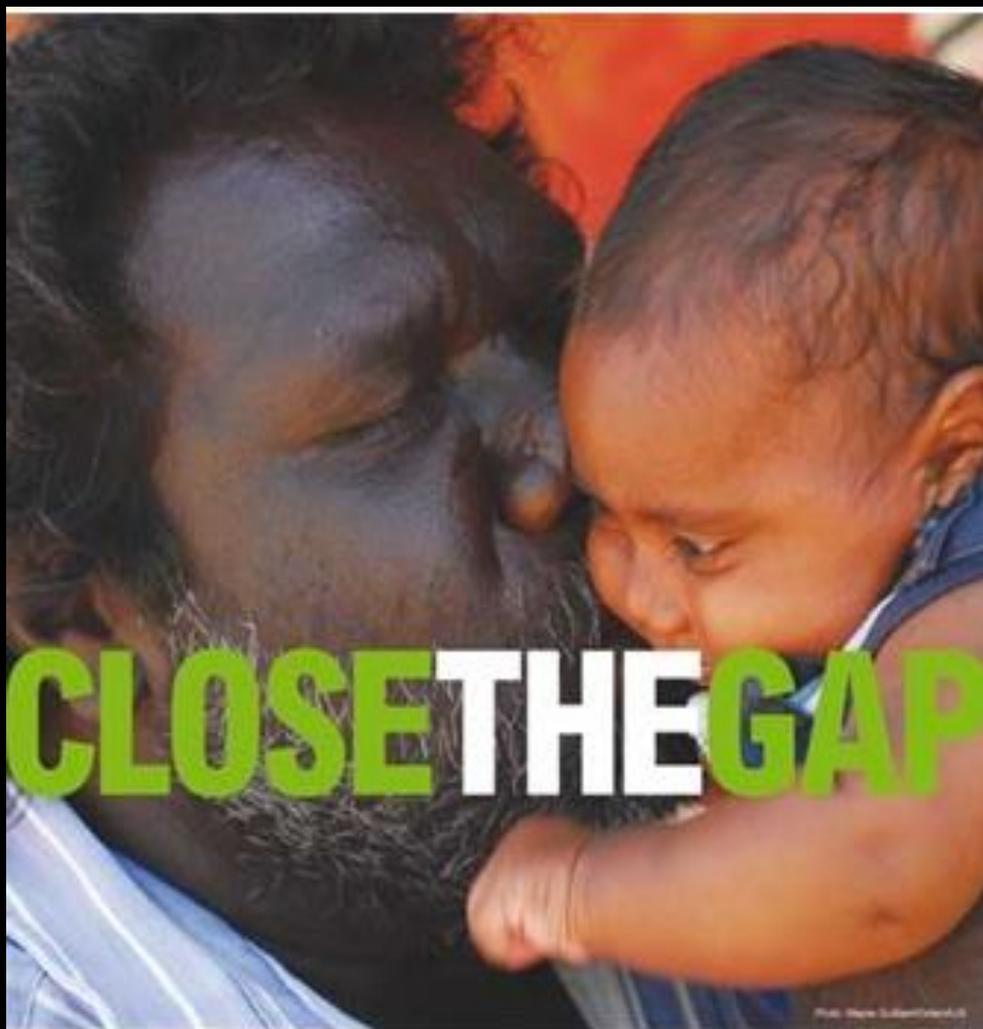


# AIM

- To empower, inspire and facilitate pathways for Aboriginal and Torres Strait Islander students to under-graduate health programs Griffith university.

# Griffith University - "Hands Up" - First People's Aspirations and Pathways to Health Programs





Indigenous Australians die 17 years younger than non-Indigenous Australians.

**Demand Indigenous health equality**

**Indigenous  
Registered Nurses  
and Midwives  
leading Australia's  
health workforce in  
Closing the Gap  
within a generation**

# Thank you



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