

Cultural Safety in Aotearoa New Zealand

Second edition

In this second edition of *Cultural Safety in Aotearoa New Zealand*, editor Dianne Wepa presents a range of theoretical and practice-based perspectives adopted by experienced educators who are active in cultural safety education. Thoroughly revised to incorporate the latest methods and research, this edition reflects updates in government policies and nursing practices, and features new chapters on ethical considerations when working cross-culturally, as well as the legislative requirements of the Nursing Council of New Zealand.

Each chapter includes key terms and concepts, practice examples providing content from healthcare workers' everyday experiences, reflective questions to encourage the assimilation of ideas into practice, and references to allow further exploration of the issues discussed.

Cultural Safety in Aotearoa New Zealand will equip students, tutors, managers, policy analysts and others involved in the delivery of health care with the tools to acknowledge the importance of cultural difference in achieving health and well-being in diverse communities.

Dianne Wepa is an Associate Lecturer at the Auckland University of Technology, New Zealand, and at the time of publication was completing her PhD in Māori health.

Cultural Safety in Aotearoa New Zealand

Second edition

Edited by Dianne Wepa



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Foreword

The 1980s was a transformative decade, both in a positive and negative sense. The reforming Labour Government (1984–1989) dismantled the contract that had existed from the 1930s and which had underpinned community and national welfare. But simultaneously, they also recognised Māori as tangata whenua in new ways and restored the Treaty of Waitangi as the (partial) basis of law and policy.

In this environment, how professional communities understood their own practice, the effects of that practice on client communities and the relationship with Māori came in for new scrutiny. Nursing was to take a particular step in the late 1980s, which was to prove especially significant.

Irihapeti Ramsden was to be involved in a series of hui in the late 1980s from which emerged the notion of cultural safety. Her secondment to the Department of Education in 1988 and her authorship of *Kawa Whakaruruhau* in 1990 helped develop and refine the concept and to implement it in nursing education. Along with Karl Pulotu-Endermann, I worked alongside Irihapeti in a number of nursing programmes to develop the content and principles of cultural safety as did other nursing educators. Irihapeti was a force to be reckoned with and she developed a particular approach that required an understanding of a colonial history, a sense of how culture affects individuals and professional practice, and what principles were relevant to nursing practice. In all of this, Irihapeti was clear that, while Māori should be beneficiaries of cultural safety, *kawa whakaruruhau* was to apply to any situation where the nurse and patient were of a different ethnicity. Her chapter in this book conveys something of her role and vision as one of the pioneers in transforming nursing education.

There was significant opposition and criticism to cultural safety in the early 1990s from some nursing students and lecturers, and in the wider community. The Nursing Council of New Zealand chose to initiate a review and invited Erihapeti Murchison and myself to visit and consider how cultural safety was being taught in all 16 polytechnics. Our experience was that competency and implementation varied, and our finding was that, while flawed in some respects, cultural safety was critical to contemporary nursing and ought to be retained. But we recommended that resourcing and how cultural safety was being taught needed to be improved. Erihapeti took the view that some aspects (cf. *marae* visits) should not be compulsory because this did not send the right message;

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that a basic respect for other cultures was as important as any educational principle; and that if cultural safety was to succeed in its aims, then it needed more commitment from nursing educators and providers, and from the wider health community.

This book contributes to an understanding of why cultural safety is important to nursing in contemporary New Zealand. As far as I am concerned, the adoption and development of kawa whakaruruhau/cultural safety has been one of the most significant developments in modern nursing practice, made ever more important by the growing ethnic diversity of New Zealand communities and the centrality of Māori as tangata whenua. It has been an innovative step in providing a new paradigm, not only in relation to nursing education, but also with respect to how nursing is practised in Aotearoa New Zealand.

Kia Kaha.

Distinguished Professor Paul Spoonley FRSNZ
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