Growing the Aboriginal and Torres Strait Islander Nursing and Midwifery Workforce

Janine Mohamed, CEO CATSINaM
Who is CATSINaM

An update on our workforce

What are our strategic directions
  - Our work regarding the Redfern statement
  - What CPD can we provide you with
  - Enabling Clinical Placements
  - CST and the NACCHO Cultural Safety Standards
A brief history of CATSINaM

- Over 100 years of being involved in the professions
- Established CATSIN in 1998. The initial establishment was supported by ANF as was keeping the doors open in 2012-13
- Response to overcome challenges facing Aboriginal and Torres Strait Islander Nurses – ‘gettin em n keepin em’ Report
Unity and Strength through Caring
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

Unity and Strength through Caring
Unity and Strength through Caring

CATSINaM National Membership

- Full Members
- Student Members
- Total Members
- Predicted Full Members
- Predicted Student Members
- Predicted Total Members

2018 target is 1200
What do we strive for?

- Non-Indigenous nurses and midwives receive a good grounding in what cultural safety and respect is, 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.
- Increased understanding and shared commitment to cultural safety in the nursing and midwifery professions.
- Culturally respectful health systems where Aboriginal and Torres Strait Islander people experience cultural safety and have better health outcomes.
The current state of play ....
Completion rates for Aboriginal and Torres Strait Islander nursing students

Close to a 30% GAP


Non-Indigenous completion rate

Indigenous completion rate

Non- Indigenous average

Indigenous average

Completion rate

2004 2005 2006 2007 2008
Factors impacting on completion of nursing and/or midwifery studies

- Family commitments
- Away from home
- Racism
- Financial burden
- Practical help with essay writing
- Mentoring and role modeling
- Navigating foreign systems

“Financial disadvantage, not understanding university processes and requirements, family obligations, Racism, Not University ready.” CATSINaM Member
Continuing on in their profession

- Mentoring and support
- Racism
- Lack of understanding of cultural and family matters
- Cultural safety

“Cultural safety of the nursing and midwifery profession in general. Lack of value for the innate understanding of the socio-cultural issues that some Aboriginal and Torres Strait Islander nurses and midwives have that has significant benefit when caring for our mob. Lack of leadership development opportunities.”

CATSINaM Member
How many Aboriginal and Torres Strait Islander nurses and midwives do we need?
Registered nursing workforce needs

Based on 2015 AIHW data
As you can see, we have higher representation in the lower status and paid sections of the workforce, and very low representation in the more senior levels.

<table>
<thead>
<tr>
<th>Occupations</th>
<th>Indigenous professionals</th>
<th>% of total health professionals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse Educators and Researchers</td>
<td></td>
<td>0.40%</td>
</tr>
<tr>
<td>Nurse Managers</td>
<td></td>
<td>0.64%</td>
</tr>
<tr>
<td>Midwives</td>
<td>70</td>
<td>0.50%</td>
</tr>
<tr>
<td>Registered Nurses</td>
<td>1709</td>
<td>0.83%</td>
</tr>
<tr>
<td>Midwifery and Nursing Professionals</td>
<td>3</td>
<td>0.85%</td>
</tr>
<tr>
<td>Enrolled and Mothercraft Nurses</td>
<td>287</td>
<td>1.60%</td>
</tr>
<tr>
<td>Nursing Support and Personal Care Workers</td>
<td>1438</td>
<td>2.04%</td>
</tr>
</tbody>
</table>
Distribution of the health workforce

57.8% of workforce

1 = Dental hygienists
2 = Dental prosthetists
3 = Dental therapists
4 = Oral health therapists
5 = Chinese medicine practitioners
6 = Podiatrists
7 = Osteopaths
8 = Aboriginal and Torres Strait islander health practitioners.

Based on 2014 AIHW data
Unity and Strength through Caring

1. Strategic Direction 1
   Elevate the profile of CATSINaM as the national peak body for Aboriginal and Torres Strait Islander nurses and midwives
   - Improve recruitment and retention of our Members
   - Increase our Member communication, support and engagement
   - Increase external stakeholder awareness of CATSINaM

2. Strategic Direction 2
   Vision
   Pivotal and respected role in achieving health equity for Aboriginal and Torres Strait Islander nurses and midwives
   - Increase capacity of CATSINaM Directors and Members to represent CATSINaM
   - Strengthen existing and establish new partnerships that enable CATSINaM to advocate on priorities

3. Strategic Direction 3
   Purpose
   Develop and promote holistic and culturally safe approaches for nurses and midwives
   - Increase our influence on research in nursing and midwifery and/or Aboriginal health
   - Increase our involvement with workforce development projects

4. Strategic Direction 4
   - Increase our influence on research in nursing and midwifery and/or Aboriginal health
   - Increase our involvement with workforce development projects

Core Values
Respect • Confidentiality • Accountability • Honesty • Fairness
Strategic Direction 1: Elevating our profile as the national peak body

- Parliamentary engagement
- Governance Positions – ATSIHWWG
- CDNM,
- Clinical Coordinators Meeting
- NMBA
- Membership Drives, & Dinners
- Newsletters
- Close the GAP and the NHLF
National Congress of Australia’s First Peoples

#redfernstatement
• The Redfern Statement was coordinated and led by the National Congress and the 3 Aboriginal Campaigns, Family Matters, Change the Record and CTG

• It was compiled by a collective of at least 55 Aboriginal and non-Aboriginal organisations and peak-bodies.
It issued a bold challenge to whichever party was elected as Australia’s government come 2 July 2016, “It is time Aboriginal and Torres Strait Islander voices are heard and respected, it is time for action”
9\textsuperscript{th} of June launch at NCIE
Urgent calls to Government

**Commitment to**

- resource Aboriginal and Torres Strait Islander led-solutions
- better engagement with Aboriginal and Torres Strait Islander peoples through their representative national peaks
- Recommit to Closing the Gap in this generation, by and in partnership with COAG and Aboriginal and Torres Strait Islander people
- working with Aboriginal and Torres Strait Islander leaders to establish a Department of Aboriginal and Torres Strait Islander Affairs in the future, that:
  - addressing the unfinished business of reconciliation,
Key Primary Matters

1. National Representation
   • Restoring Congress funding
   • Processes for representation in Education, Employment & Housing

2. Health priorities

3. Access to Justice

4. Preventing violence against women and children

5. Progressing early childhood outcomes

6. Ensuring child safety, well being & cultural identity

7. Addressing disabilities.
1. Restoration of funding
   In addition to the need to restore the $534 million cut from the Indigenous Affairs portfolio in the 2014 Budget

2. Fund the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan (2013–2023)

3. Make Aboriginal Community Controlled Services (ACCHS) the preferred providers
Health Detail

• Create guidelines for Primary Health Networks
• Resume indexation of the Medicare rebate, to relieve profound pressure on ACCHS
• Reform of the Indigenous Advancement Strategy
Health Detail

• Fund an Implementation Plan for the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy

• Develop a long-term National Aboriginal and Torres Strait Islander Social Determinants of Health Strategy
30th of August
Organized event to coincide with the first sitting day of the new 45th Federal Parliament
What’s happened?

• Nigel Scullion Met with Co-Chairs at Garma 2016 & 21st September met Aboriginal and Torres Strait Islander signatories
• The committed to support a further 5 workshops on the topical headlines in the Redfern Statement
• The PM is meeting with the co-chairs today
What’s happened?

• Planning Day was held on the 15\textsuperscript{th} November in Melbourne to:
  
  • Reflect on the impact to date;
  
  • Consider and discuss a broader strategy for progressing the calls in the Redfern Statement, inc planning short – long term goals & a national summit in 2017
Where we’re headed?

• Redfern statement has been a great mechanism for bringing us together under the umbrella of the SDoH
• Under the RS we are hoping that 2017 will be a watershed year for new and meaningful engagement with government and we look forward to NACCHO’s continued support
• Social Media: #redfernstatement & @congressmob
• redfernstatement@nationalcongress.com.au
Strategic Direction 2: Strengthening the effectiveness of our advocacy on high priorities for CATSINaM

- Completed policies:
  - Recruitment and retention, cultural safety, clinical placements & terminology guide
- New policies: ‘Uniqueness of our Nurses & Midwives’, ‘Birthing on Country’ & ICE
- Submissions
- Board governance development
- Consultation and reports
  - Recruitment & Retention Strategies Report
  - Economic Analysis

Unity and Strength through Caring
Advocacy: our pre election asks

Existing challenges in nursing and midwifery - why address them?

**WORKFORCE**
Slow growth in achieving workforce population parity: 0.79% in 2011 to 1.03% in 2014 = 35% growth over three years.

**EDUCATION**
A 30% gap in completion rates for Aboriginal and Torres Strait Islander compared to non-Indigenous students.

**HEALTH OUTCOMES**
Minimal improvement in life expectancy and median age of death for Indigenous Australians since 2010.

Aboriginal and Torres Strait Islander health professionals improve cultural safety, health experiences and health outcomes for Aboriginal and Torres Strait Islander Australians.

Due to multiplier effects for successful graduates who go into employment, the ROI for every dollar invested is $1.60. For every additional job created another 0.6 jobs are generated and social security expenditure is reduced.

Improvement in life expectancy and median age of death will reduce stress on and costs for the health system – the second largest area of government expenditure after social security.
Recommended short term investments over 3 years: 16-17 to 18-19

CATSINaM core funding: Additional cost $2.75M
Professional and cultural leadership and expertise
Parity with other Aboriginal health professional associations

MENTORING PROGRAM:
Estimate $121K
Support for individual nursing and midwifery students

2017 - 2020
Target: Estimate $12.54M
95 extra graduates/year

LINMEN:
Estimate $2.94M
Support for higher education at the institutional level

Develop and implement a 2017 – 2023 National Aboriginal and Torres Strait Islander Nursing and Midwifery Workforce Strategy: In-kind funding

1: All figures GST exclusive, indexation of 3% per year
2: Leaders in Nursing and Midwifery Education Network

Unity and Strength through Caring
CATSINaM Policy

- Healthy industry providers
- Education departments and schools
- Clinical Placements
- Nursing and midwifery professional associations
- Australian, and state/territory health departments
- Nursing and midwifery education and training programs
Nursing and midwifery education and training providers:

- work with health industry leaders to identify clinical learning opportunities in supervised and culturally supportive environments for Aboriginal and Torres Strait Islander nursing and midwifery students and new graduates.

- work with Aboriginal Community Controlled Health Services and their peak bodies to identify clinical placement opportunities for both Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander nursing and midwifery students and new graduates in Aboriginal and/or Torres Strait Islander communities.

- prepare non-Aboriginal and Torres Strait Islander students and new graduates for clinical placements in Aboriginal and Torres Strait Islander health services through education in cultural safety.
CST: No cookie cutter approach
Treating everyone the same

Equality vs. Equity

**Equality** = *Sameness*
GIVING EVERYONE THE SAME THING → It only works if everyone starts from the same place

**Equity** = *Fairness*
ACCESS to SAME OPPORTUNITIES → We must first ensure equity before we can enjoy equality
Where to embed CST/Cultural Respect

Figure 1: ‘Where to embed cultural safety and cultural respect’

Nationally Accredited CST Training

ANMAC
ISC Universities RTOs

Within accreditation standards for our learning institutions

Within workforce competency standards

NMBA & Professions

Leadership undertake CST and champion it

Government & Execs

Changing HP Legislation

Aboriginal and Torres Strait Islander led

Aboriginal and Torres Strait Islander reviewed & evaluated

Unity and Strength through Caring
Strategic Direction 3: Recruitment and retention of Aboriginal and Torres Strait Islander nurses and midwives in their training and the workforce.

- Our Nursing and Midwifery data
- Referral/introduction letters
- CPD, Mentoring & Conference
- Media i.e. DVD’s
- Scholarships
- Resources on our website
- Advocacy with ANMAC to include ‘cultural safety’ in the curriculum accreditation standards for all professions
- Cultural emersion
Strategic Direction 4: Increasing our involvement in research and workforce development projects that focus on our priorities

- Research agenda development
- Working with our partners i.e. Lowitja Institute
- Economic Analysis
  - Nursing and Midwifery Recruitment and Retention
  - NEW University completions
- Establishing a relationship with the Clinical Coordinators Networks
- Implementation of the Aboriginal and Torres Strait Islander Health Curriculum Framework
Creating a Nursing and Midwifery Aboriginal and Torres Strait Islander Health Curriculum Framework

- The original Aboriginal and Torres Strait Islander Health Curriculum framework was released by the Australian Government Department of Health in late 2015.

- CATSINaM is currently leading a process of adapting the framework to a Nursing and Midwifery specific context.

- The framework will support higher education providers implement Aboriginal and Torres Strait Islander health curricula across their nursing and midwifery training programs.

- Tailored to meet and/or exceed the accreditation and registration guidelines for nursing and midwifery.
Activities of significance

- CATSINaM Conference
- Mentoring rolled out in NSW
- HCF Implementation Workshops
- Palliative Care Australia ‘How I want to be remembered’
- ACM Birthing on Country Project
- Our jurisdictional meetings
- A conference next March focused on Non-Indigenous Nurses
- Progressing Clinical placements
- Letters to Health Ministers re Changing the AHP Legislation to include CST
“Australians ... must constantly test their own institutions, their democracy and their defence of the human rights of minorities by the worlds best best standards.”

Justice Michael Kirby, 2004