

Do you know...

the foundations of a culturally safe environment for your students?

What do we mean when we talk about cultural safety?

Cultural safety is a student's experience of having their cultural identity and experiences respected, and feeling safe to express that identity without fear of denial of their experiences.

How is cultural safety different from cultural competence?

Cultural competence is the knowledge, skills, and attitudes needed to behave in an appropriate manner with others within a culture.

One way to think about this is that cultural competence is what the teacher may bring to the environment, while cultural safety is how the student feels about the environment.

Teachers cannot make a student feel culturally safe, but they can create an environment in which students are more likely to feel culturally safe.



<https://www.youtube.com/watch?v=e71zOUXbPIE>

Four tips to enabling a culturally safe environment

1. **Encourage self-reflection and self-critique** – In order to create a culturally safe environment, we need to develop an awareness of where there is unconscious bias in ourselves and others. This begins with self-reflection on where you might have biases, preconceived ideas, or stereotyping. Consider the examples you use in teaching such as pictures and models, how is the human body portrayed?
2. **Te Tiriti o Waitangi** – New Zealand organisations have a responsibility to abide by Te Tiriti o Waitangi. For example, University of Otago has the [Māori Strategic Framework](#) to support University engagement with Te Tiriti. Consider your own thoughts about the rights of indigenous people to get appropriate care for health issues.
3. **Focus on relationship building** – Get to know your students. Learn how to say their names correctly and then use their names when you speak with them. In the clinical environment include students in team coffee breaks and make them feel part of the group. This is an opportunity to practice and role model manaakitanga by showing your respect and care for your students.
4. **Role model the behaviours you want to see** – Consider using culturally appropriate health frameworks when teaching students at the bedside, e.g. the Hui process or Meihana Model (See [DYK19](#) for information).

Three barriers to enabling a culturally safe environment

1. **Making assumptions about identity** – Making assumptions about students and colleagues who identify as Māori including their knowledge about things Māori. This also applies to making assumptions about the culture of other students in the classroom and their knowledge of that culture.
2. **Accepting the status quo in your environment** – Accepting colleagues', students', or patients' poor behaviour, like microaggressions, reduces the safety of students. Microaggressions are everyday subtle, insulting, discriminatory comments or actions that communicate a demeaning or hostile message to non-dominant groups. These can be split into micro-assaults, micro-insults & micro-invalidations. Allowing these to pass without comment creates an environment that is culturally unsafe.
3. **Unwillingness to examine your own unconscious biases** – Everyone has unconscious biases, such as preferring to work with people who are like themselves. Becoming defensive about what yours might be does not help you to learn and grow and become a better teacher.

Next steps you can take to begin fostering a culturally safe environment

Below we give four examples of ways you can increase the cultural safety of your teaching environment.

Remove the cultural burden from students - it is not their role to teach culture to the other students

Learn about Māori and Pacific health frameworks

Advocate with Māori and Pacific colleagues and students to promote needs and rights

Normalise Te Reo in the teaching and clinical environment

FURTHER READING

DYK 19. About the Hauora Māori curriculum within the Otago medical degree? (2020). <https://www.otago.ac.nz/oms/otago732536.pdf>

Fernando, T. & Bennett, B. (2019). Creating a Culturally Safe Space When Teaching Aboriginal Content in Social Work: A Scoping Review, *Australian Social Work*, 72:1, 47-61, <https://doi.org/10.1080/0312407X.2018.1518467>

Huria, T., Palmer, S., Beckert, L., Lacey, C., & Pitama, S. (2017). Indigenous health: designing a clinical orientation program valued by learners. *BMC Medical Education*, 17(1), 1-8, <https://doi.org/10.1186/s12909-017-1019-8>

Sayal, A., Richardson, L. & Crawford, A. (2021). Six ways to get a grip on teaching medical trainees on the convergence of Indigenous knowledges and biomedicine, within a culturally-safe Indigenous health curriculum. *Canadian Medical Education Journal / Revue canadienne de l'éducation médicale*, 12(2), e88– e93. <https://doi.org/10.36834/cmej.70340>

For further information and assistance, contact your local education adviser:
otago.ac.nz/medicine/staff/support

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