

# The influence of yarning circles: A cultural safety professional development program for midwives



Tania Fleming<sup>a,\*</sup>, Debra K. Creedy<sup>a</sup>, Roianne West<sup>b</sup>

<sup>a</sup> Transforming Maternity Care Collaborative, SONM, Griffith University, Gold Coast, Australia

<sup>b</sup> Menzies Health Institute Queensland, Griffith Health, Gold Coast, Australia

## ARTICLE INFO

### Article history:

Received 13 August 2018

Received in revised form 8 March 2019

Accepted 22 March 2019

### Keywords:

Cultural safety  
Midwifery academics  
Learning and teaching  
First peoples  
Yarning circles  
Interviews

## ABSTRACT

**Background:** A university educated, First Peoples health workforce is paramount to improving health outcomes for Australia's First Peoples. However, a significant gap exists between the academic success of First Peoples and non-Indigenous students. The facilitation of culturally safe learning and teaching environments by academics is essential to closing this gap. There is little research on midwifery academics' understanding of Cultural Safety and the translation of this understanding in learning and teaching.

**Objectives:** To explore the influence of yarning circles within a professional development program to enhance midwifery academics' awareness of Cultural Safety.

**Methods:** A six-month staff development program which consisted of two workshops and a series of yarning circles was offered to all midwifery academics. Eight participants agreed to be interviewed after completion of the program. Interviews were transcribed verbatim, read and re-read, and analysed using a six staged thematic analysis process.

**Results:** Six key themes centred on participants' Sense of Belonging, Sense of Safety, Sense Knowing, Sense of Support, Sense of Difference, and Sense of Challenge were identified. These concepts were supportive of participants' developing awareness of Cultural Safety.

**Conclusion:** Yarning circles can encourage midwifery academics' awareness of Cultural Safety. Awareness is the first step towards becoming culturally safe. Yarning provided a safe and supportive space for challenging discussions and reflective learning about racism, white privilege, and difference. Midwifery academics described steps they could take to promote Cultural Safety in the classroom.

© 2019 Australian College of Midwives. Published by Elsevier Ltd. All rights reserved.

## Statement of significance

### Problem or issue

Significant health disparities exist between Australia's First Peoples and non-Indigenous maternal and infant mortality and morbidity.

Increasing Australia's First Peoples midwifery workforce is paramount to sustainable gains in First Peoples maternal and infant health.

A culturally safe Australian midwifery workforce is a national priority.

To support the achievement of health and workforce priorities midwifery academics, need to be culturally safe.

### What is already known

Cultural Safety continuing professional development strategies can increase midwifery academics' awareness.

Yarning is emerging as an important Indigenous research methodology

### What this paper adds

Yarning for non-Indigenous midwifery academics prompted reflection, facilitated new understandings, and consideration of different learning and teaching practices.

Yarning in a safe environment enabled participants to challenge their cultural misconceptions, biases, assumptions, and values.

\* Corresponding author at: School of Nursing & Midwifery, 1-4 Pataka Rd, Taupo, 3330, New Zealand.

E-mail addresses: [tania.fleming@aut.ac.nz](mailto:tania.fleming@aut.ac.nz) (T. Fleming), [d.creedy@griffith.edu.au](mailto:d.creedy@griffith.edu.au) (D.K. Creedy), [r.west@griffith.edu.au](mailto:r.west@griffith.edu.au) (R. West).

## 1. Introduction

This research was undertaken in Australia within the context of midwifery education. This study was part of a series undertaken during a Doctor of Philosophy with publication. The term First Peoples is used throughout this paper to refer to the Aboriginal and Torres Strait Islander Peoples of Australia as per University guidelines.<sup>1</sup> The term Indigenous Peoples is used to refer to the First Peoples of other countries with similar colonial histories to Australia. Australia's First Peoples make up 2.8 percent of the population. More than two thirds of First Peoples live in urban areas.<sup>2</sup>

In 2017 the 'Closing the Gap' report showed a significant growth in the number of First Peoples students attending universities.<sup>3</sup> Despite this increase, the success and completion rates of First Peoples students remains low compared to their non-Indigenous counterparts.<sup>3,4,5</sup> The most recent midwifery workforce data indicates that less than one per cent of the current midwifery workforce identify as First Peoples and that a five-fold increase is required in order to reach population parity.<sup>6</sup> A number of strategies aim to help address these disparities and recognise the importance of Cultural Safety in midwifery and other health professions.<sup>7,8</sup> In particular culturally safe learning and teaching environments, academics, and health professionals in clinical settings, are paramount to supporting the success of First Peoples students.<sup>7,9,10</sup>

In 2015 the Aboriginal and Torres Strait Islander Health Curriculum Framework (The Framework) was released.<sup>11</sup> The Framework outlines five interlinked capabilities (Respect; Communication; Safety & Quality; Reflection and Advocacy) and serves as a guide for higher education providers in Australia, ensuring graduates of health programs are prepared to provide culturally safe health services for First Peoples.<sup>11</sup> Similar key concepts were identified in the recently published Lancet Series<sup>12</sup> and Framework for Quality Maternal and Newborn Care. Further International endorsement of these capabilities come from the recently released International Confederation of Midwives, 'Essential Competencies'. The general competency section directs midwives to interweave human rights, reflective practice, cultural awareness, effective communication and research informed practice across all aspects of midwifery practice.<sup>13</sup>

More recently, in Australia, the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives, (CATSINaM) in partnership with the Australian College of Midwives (ACM) released a position statement endorsing the importance of action to promote Cultural Safety within midwifery education.<sup>14</sup> Key areas for improvement include: (1) ensuring academics have access to Cultural Safety professional development strategies; (2) students graduate with knowledge and skills to provide culturally safe health care to First Peoples; (3) curricula and learning and teaching environments are culturally safe, and most importantly (4) recruiting more First Peoples academics. The Nursing and Midwifery Board of Australia (NMBA) has released a Code of Conduct for Midwives and will soon publish the new Midwife Standards for Practice, that acknowledge Aboriginal and Torres Strait Islander People as Australia's First Peoples, the injustices and impact of colonisation, and the importance of Cultural Safety and culturally safe practices to help address inequities between First Peoples and non-Indigenous people.<sup>15,16</sup> [Nursing and Midwifery Board of Australia, 2018 #467; Nursing and Midwifery Board of Australia, 2018 #713]. While strategies to improve graduate attributes in regard to Cultural Safety are being implemented in most midwifery curricula in Australia, there are indications that Cultural Safety professional development opportunities for midwifery academics are not readily available.

There is a lack of published research on Cultural Safety professional development strategies for academics teaching into

health programs. A review of literature found relatively few evaluated programs.<sup>7</sup> Evaluations that had been published lacked an educational appreciation of how awareness of Cultural Safety underpins academics' learning and teaching practices. The review also identified a shift in the use of terms such as cultural awareness and competency in earlier published papers, to more recent concepts of Cultural Safety and capability. Only two papers explicitly used the concept of Cultural Safety. One paper by Gladman, et al.<sup>17</sup> acknowledged the link between culturally safe practice and positive health outcomes for First Peoples. The second paper also drew similar connections between Cultural Safety and the potential positive influence on learning and teaching practices.<sup>9</sup>

Three papers evaluated an intervention or strategy to enhance Cultural Safety or cultural competence.<sup>4,18,19</sup> Durey et al.<sup>18</sup> developed an 'intercultural academic leadership program' that included six modules and provided support through small group work. Participants were encouraged to establish a community of practice at the end of the program. Participants reported that a strength of the program was the sense of community where they could discuss challenges and teaching practices. In a pre-post evaluation, Fleming et al.<sup>7</sup> found that participants attending a twelve week professional development intervention reported significant improvement in their awareness of Cultural Safety. Wilson et al.<sup>19</sup> undertook a 12 month longitudinal study that included a workshop focusing on developing academics' abilities to integrate aspects of cultural competency into curricula and interactions with students. Overall mean scores of cultural competency increased pre/post intervention. In particular, participants reported improved cultural awareness and knowledge when interacting with people from diverse cultures but not First Peoples specifically.<sup>19</sup>

### 1.1. *Yarning as an intervention and research process*

Yarning is emerging as an important Indigenist research methodology<sup>20,21</sup> with the potential to enhance collaboration and partnership between non-Indigenous and First Peoples. Across many Indigenous societies with oral traditions, storytelling has been used as a means of passing on knowledge and information. First Peoples refer to this process as yarning, which is increasingly being used as a legitimate culturally-safe research method. Bessarab et al.<sup>21</sup> described different forms of yarning for research including research topic yarning and collaborative yarning. Both forms were used in the current study. Research topic yarning is best described as a means of gathering research data that is purposeful.<sup>20,21</sup> Collaborative yarning is described as more explorative where information is shared with a goal of achieving new understanding.<sup>20,21</sup> As a strategy, yarning has the potential to address knowledge gaps and facilitate deeper understanding of complex reasons for the health and social inequities between First Peoples and non-Indigenous peoples.<sup>22</sup> The narrative interactive approach of yarning has many synergies with midwifery philosophy such as validating reflexive and culturally safe practices.<sup>7,23</sup>

To develop awareness of Cultural Safety, non-Indigenous researchers and academics need to engage in 'post-colonial discourse'. Such discourse can help build relationships with First Peoples based on a partnership model, enhance cultural knowledge, and shift power imbalances.<sup>24</sup> By challenging the history of Western dominance, the adverse impact of colonisation is acknowledged and opportunities are created to find new ways of knowledge exchange and transformational learning.<sup>20</sup> Yarning is a decolonising approach that reflects First Peoples epistemologies (Ways of Being, Knowing and Doing) and has the potential to support the provision of a safe environment that encourages engagement and critical reflection.<sup>7,22,25</sup>

## 2. Aim

To explore the influence of yarning circles as a component of a professional development program to enhance midwifery academics' awareness of Cultural Safety.

## 3. Method

A qualitative study using semi-structured interviews was conducted.

### 3.1. Participants and setting

Participants were midwifery academics (n=8) teaching on a Bachelor of Midwifery program at a metropolitan Australian university. All were female and identified as non-Indigenous. Participants had attended a Cultural Safety professional development program.

### 3.2. Overview of the staff development program

The program included two-half day workshops and six yarning circles over a trimester (12 weeks). A description of the content and learning processes of the program has been published previously.<sup>7</sup> Participants requested a continuation of the yarning circles, and a further five sessions were facilitated during the following trimester. Ten staff members volunteered to attend the second round of yarning circles and participate in a follow-up interview. Seven participants attended three or more yarning circles and one participant attended two. Participants were also encouraged to journal their reflections and raise issues during subsequent discussions. Each yarning circle focused on one of the five capabilities from the Framework (respect; communication; safety and quality; reflection; and advocacy and leadership). For example, during the yarning circle on reflection and racism, participants watched a series of vignettes of First Peoples responding to questions often asked by the general Australian public. Participants were asked to reflect on each vignette and possible implications for their learning and teaching practice.

### 3.3. Procedure

Participants provided written consent to be part of this research project interviews were semi-structured and guided by broad pre-prepared questions. The researcher's role is to ensure that participants are able to talk freely around the topic while ensuring that all questions are covered.<sup>26</sup> The interview prompts were informed through a process of consultation, guidance and feedback

between the first author and First Peoples academic colleagues, all of whom had working knowledge and understanding of the Health Curriculum Framework. Participants were asked to discuss their experience of yarning circles, focusing on positive and challenging aspects. Participants were encouraged to consider to what extent their awareness of Cultural Safety may have changed from their personal, professional midwifery and midwifery academic perspectives. Participants were asked about any changes to their learning and teaching practices and interactions with First Peoples students. They were also asked to discuss what support would be useful in moving forward to ensure their learning and teaching practices were culturally safe. Finally, participants were asked about their reflective journaling and if they wished to make any further additional comments. Open-ended prompts for interviews are presented in Table 1. The interviews were recorded, then de-identified and transcribed verbatim by a professional transcription company (Table 2).

### 3.4. Ethical considerations

Ethical approval for the study was granted by the Human Research Ethics Committee of XX University. This included demonstrated evidence of adherence to the Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research, (Values and Ethics, reference number: OTH/13/14/HREC). Participation was voluntary; and participants were informed their responses would be anonymised. Participant identifiers were recorded as participant PA and PB.

Much thought was given to the position of the first author as belonging to the participants' 'community'. A level of trust and respect is required when discussing topics such as racism, privilege and awareness of Cultural Safety.<sup>7,27</sup> The yarning circles and interviews were facilitated by the first author who is a member of the teaching team and therefore acknowledgement needed to be made about the potential for bias. To reduce the risk of researcher subjectivity and bias, a process of deep self-reflexivity and supervision by a First Peoples academic, that sat within a re-framed standpoint theory conceptualised to help guide this body of research.<sup>8</sup>

### 3.5. Approach to data analysis

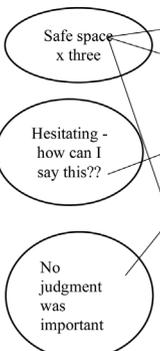
Qualitative analysis is often used to examine latent or inferred meanings of the communication under study, which may lead to the development of constructs or theories based on the researcher's knowledge and evidence drawn from the study.<sup>28</sup> Ultimately, this systematic and thorough evaluation allows for conclusions to be drawn about such factors as the presence or

**Table 1**

Prompt questions for semi-structured interviews.

- |  |   |
|--|---|
| 1. To what extent were the yarning circles a positive experience for you? discuss further  | 6. If you are a course convenor how is learning from the yarning circles currently reflected in your course; or do you have plans to make changes? If so what changes would you like to make? |
| 2. Were any aspects of the yarning circles challenging? – discuss further  | 7. How is your awareness of cultural safety reflected in your L&T with First Peoples students? Do you have plans to make changes? If so what changes would you like to make?                  |
| 3. Discussions during the yarning circles aimed to enhance your awareness of cultural safety. To what extent do you think your perspective may have changed?<br>→From a personal perspective.<br>→From a professional midwifery perspective.<br>→From a professional midwifery academic perspective. | 8. How is your awareness of cultural safety reflected in your L&T with non – Indigenous students? Do you have plans to make changes? If so what changes would you like to make?               |
| 4. Have your Learning & Teaching practices changed over the last semester. If so in what ways?   | 9. What further support would you like to have in supporting your awareness of cultural safety and L&T practices?   |
| 5. Everyone was asked to keep a reflective journal after each yarning circles.<br>→Was this a positive experience? If so describe specific elements that were useful.<br>→Where there any challenges in keeping a reflective journal on cultural safety/yarning circle processes.                    | 10. Do you wish to make any further comments?   |

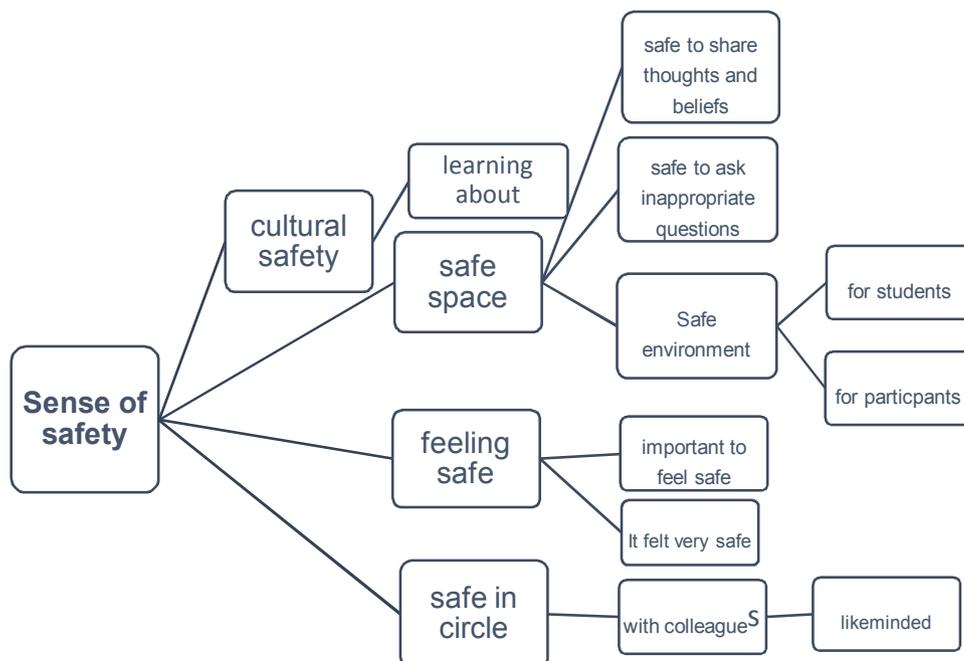
**Table 2**  
Six phase framework using the theme safe space.

Phase 1 – Become familiar with the data	Phase 2 – Generate initial codes	Phase 3 – Search for themes	Phase 4 – Review themes	Phase 5 – Define themes	Phase 6 – Writing up themes
Read re-read full transcripts –  Jotting down initial thoughts and ideas  	<b>Codes</b> Safe space Free from judgment Sharing  <i>It was a really safe space I think. I think it was a really safe space that if anyone felt that they needed to - if anyone sort of felt that they - I don't know how to say it - but didn't feel as - felt a little bit judgemental, that could actually come across and it never did. So yeah, it just like a really safe space to discuss and to share our thoughts and beliefs around...(PB)</i>	<b>Theme</b> Safe Space  It was a really safe space (PB) I needed a safe space (PF) Find a space that is safe (PD) Make a safe environment (PF)	Do they make sense? Does the data support the themes? Are there subthemes?	Sense of safety <ul style="list-style-type: none"> <li>• Safe space</li> <li>• Feeling Safe</li> <li>• Cultural Safety</li> </ul>	Participants expressed the importance of the 'safe space' ...the concept of a safe space to share ideas and have challenging conversations was very important to participants. <i>I think it was a really safe place if anyone felt they needed to discuss and share their thoughts and beliefs (PB).</i>

absence of particular ideas, theories, or biases, the coverage of specified topics, contradictions, or myths, to name but a few applications.<sup>26</sup>

The unit of analysis can be drawn from a diverse range of sources such as a community of learning, interviews, or journals.<sup>26</sup> In the current study, data were analysed using a six-step thematic analysis approach.<sup>29</sup> According to Braun et al.<sup>29</sup> thematic analysis is a process used to identify patterns or themes in data. Researchers are able to make sense of underlying ideas, concepts and assumptions<sup>29,30</sup> Other benefits include, the ability to generate unanticipated insights, allows for social as well as psychological interpretation of data, and can help inform policy.<sup>29</sup> The first step is to become familiar with the data, reading and re-reading the transcripts. In order to ensure immersion in the data, transcripts were read several times until the researcher was familiar with the

data. During this process rough notes were made, capturing early impressions of the data. Step two is the generation of initial codes, organising the data in a meaningful and systematic approach. During this step immersion in the data took place through a process of open coding (or line-by-line coding) where meaningful statements were broken down into codes. Step three is where the researcher searches for themes or patterns. This process consisted of the researcher grouping 'like' themes together in clusters. Step four involves a review of the themes, checking if the themes make sense and work in the context of the wider data set through 'identification and categorizing of descriptors. In step five the researcher refines the themes and aims to identify the 'essence' of each theme. It is also about drawing out subthemes and seeing how they interact and relate to each other. Fig. 1 is a thematic map from the current study that illustrates one of the themes and subthemes



**Fig. 1.** Thematic map – Sense of Safety.

(Sense of Safety). The final step (step 6) is the thematic analysis process. By using thematic analysis, important patterned and unanticipated patterned responses were captured from the data, by the first author. An inductive approach was taken whereby the initial coding process did not take place using a pre-existing framework. The identified themes arose from the data, which is sometimes called a 'bottom up approach'.<sup>29</sup> Each step of this process was documented, reviewed and revised by each author. Reliability and trustworthiness was maintained by following this logical staged approach, whereby the clear documentation ensured traceability of the interpretations and findings, which were derived from the data. A clear audit trail was kept.<sup>29</sup>

#### 4. Findings

The six key themes were: Sense of Belonging; Sense of Safety; Sense of Knowing; Sense of Support; Sense of Difference and Sense of Challenge.

##### 4.1. Sense of belonging

Many participants expressed a Sense of Belonging in the yarning circles. This theme consisted of 2 subthemes - the importance of feeling connected, and sense of community with colleagues. A Sense of Belonging has been described as, when an individual feels that their professional and personal values are in sync with group members and they feel secure, accepted, valued and respected.<sup>31</sup> The circles were described by participants as a place where they felt affirmed and connected. In the circles, their ideas could be shared, valued, and their midwifery philosophy and perspectives were understood. Participants found this Sense of Belonging afforded reassurance about where they were at in their own cultural journey. Participants expressed that having opportunities to hear other perspectives was 'enabling' and through which they came to see the richness of diversity and culture through the lens of others.

##### Connection

Connection came from being with colleagues from the same teaching team who all expressed interest in developing their awareness of Cultural Safety. For example, participants expressed the importance of being together and having a sense of collegiality. One person said:

... we came together as a group for a purpose, we shared knowledge - we were together. It's probably the only time that I felt that we were together ...it was a collective, and it was nice. I think it was collegial (PF).

Participants also described the affirmation gained from hearing different views of others and realising these connected with, or shaped, one's own views. For example, participants described the benefits of being amongst 'like-minded' women.

To sit in a circle with like-minded women and have people saying similar things resonated and then you think - that's re-affirming. (PF)

I gained from bonding with workmates and just sharing ideas and understanding other people's concepts and knowledge of cultural appropriateness - their understanding sort of helped me clarify my own knowledge. (PD)

Participants also described that a positive outcome of the yarning circles was improved connection and relationships with students. For example:

It [yarning circles] changed how I see [First Peoples] students. Not in conveying class content but more in one-on-one relationships and connections with students. The more I see the student as unique and individual and special the more they connect with me because they've been acknowledged. (PD)

##### Community

A subtheme related to Sense of Belonging was the notion of community. 'Community' is described as the importance of collectively being able to make a difference. In this study, participants saw themselves as a 'community of midwifery academics' looking for ways to improve their learning and teaching practices to make a difference for students. For example, there was a sense that collectively, their knowledge and desire for improvements were heightened:

... everyone's on the same page and wanting to move forward and improve learning experiences for our students. (PB)

And of 'the group' making a difference for individual participants.

... the yarning and discussion with others in the group, actually made a difference to the way that I view Cultural Safety, cultural inclusion, cultural sensitivity and First Peoples. (PE)

The notion of 'community' was also demonstrated when participants expressed the importance of feeling connected as midwives and midwifery academics. They were able to draw on their midwifery practice and see synergies between their midwifery philosophy and culturally safe learning and teaching practices as a midwifery academic.

It was useful for me to always think about it [teaching] and see it through the cultural lens and what it says about me as a lecturer, me as a woman, me as a midwife. Also, then to try and turn the lens around onto any First Peoples issues here. (PH)  
I guess in a way we individualise care with women when we really also need to individualise our learning, our teaching and our support of all of our students. (PB)

##### 4.2. Sense of safety

The 'Sense of Safety' was crucial to participants in the yarning circles. An important subtheme related to the nature of the 'space' as being safe, participants feeling safe to ask questions, and have open discussion without fear of being judged. Participants also expressed safety by way of their understanding and awareness of Cultural Safety.

##### Safe Space

Participants expressed the importance of a 'safe space' in which to develop shared meaning and understanding of Cultural Safety. The concept of a safe space to share ideas and have challenging conversations enhanced participants' engagement. Most participants felt that being 'in circle' also enabled them to be genuine in conversation. One participant reflected that although there were differences of opinion, these discussions continued to feel safe. For example:

I think it was a really safe place if anyone felt they needed to discuss and share their thoughts and beliefs (PB).

I needed a safe space to ask the questions that I thought may be culturally inappropriate (PF).

Participants also expressed the concept of a safe space in regard to their learning and teaching practices and enabling students to feel safe.

When I teach, I now try and make a safe environment. I am very mindful that in order to learn you need to take risks and if you don't feel safe you can't take risks. (PF)

##### Cultural Safety

Participants described their developing understanding of Cultural Safety. Responses ranged from a novice perspective to an advanced level of understanding. For example, an advanced level of understanding was expressed by this participant as:

Cultural Safety is ensuring that people feel safe in the environment they are in at the time, to do whatever it is they need to do, that's what it means to me (PF).

Cultural Safety was also linked to perceived gaps in the health system and midwifery curricula. One participant commented:

I think the yarning circles made me more aware of when you're observing [in the clinical environment], and you see huge gaps in the health system around Cultural Safety, around general respect, and how I might address that. (PC)

Cultural Safety is not scaffolded throughout [midwifery] programs and that's something we really need to improve on (PG).

#### 4.3. Sense of knowing

The Sense of Knowing theme was expressed through several subthemes including: awareness, acknowledging, and critical reflection. This Sense of Knowing was linked to the concept of cultural knowledge and the way a person sees and understands the world.

##### Awareness

Participants expressed their awareness in a number of ways. Many described how yarning made them more aware of cultural issues such as racism, white privilege and stereotyping. Participants described how their awareness grew over time, gaps in understanding were identified, and 'insight' was gained from new knowledge. Participants described, for example, how prior to the yarning circles, they had not thought about their own cultural values and beliefs:

Personally, I am now much more aware of my culture and . . . how I am in the world, I am becoming clear about who I am. (PC)

. . . talking about my own journey was just so insightful. I hadn't really ever thought about my own culture. That was hugely illuminating for me because we think of culture - on an intellectual rather than personal level (PH).

Participants also expressed awareness in terms of their learning and teaching practices and how the yarning circles helped them view their practice differently and look for ways to improve.

I guess this semester, I am more aware of how First Peoples students are tracking and if they're going okay. (PA)

Participants also gained awareness by reflecting on some previous experiences with First Peoples and recognising racism. For example, one participant reflected on her experience of working previously with First Peoples academics:

Reflecting on our yarning made me very aware of how poorly they [First Peoples academics] were treated by students, how poorly their course was attended; some of the shocking answers that people [students] wrote and thought it was okay. (PF)

Another participant looked back at her own birth experience and became aware of her white privilege:

I became aware that when I was having my first child in the late '80s I had the privilege of having a home birth, but only because I could afford it and I had access to it. Indigenous women didn't have that opportunity. (PE)

Other participants talked about discovering their lack of awareness about cultural difference and values. Insight was described in various ways including, 'eyes being opened', 'understanding stereotyping', and being challenged about their previously held values and beliefs. One participant described a new understanding of implicit racism when she said:

I think it [yarning] opened my eyes to stereotyping. I think that sometimes when we think we're culturally sensitive, we aren't, and we need to realise that we aren't. (PE)

##### Acknowledging

A Sense of Knowing was also expressed by participants as acknowledgement. This took the form of participants wanting to acknowledge First Peoples culture, and First Peoples learning needs, and show respect by being inclusive. For example:

I think we should continue to ensure that as we review our courses and our assessment(s) we ensure that we are acknowledging First Peoples knowledges and the learning needs of First Peoples students. (PF)

##### Reflection

The yarning circle discussions were described as 'thought-provoking' and lead to personal and professional reflection. Reflective practice and the concept of reflexivity underpin awareness of Cultural Safety and midwifery practice. For many participants the importance of reflection (through writing or purposeful thinking) was clearly evident. For example, one participant expressed this as:

I have done a lot of reflection, and I did find it an extremely positive, experience. It's strange that some of the feelings, particularly from our first one [yarning circle], were more powerful than I would have expected. (PC)

Participants linked their reflective processes to a journey that was going to be long and an individual undertaking. One participant said:

I think that's a journey I'm still on. I don't know whether it's a journey you ever finish. (PC)

#### 4.4. Sense of support

The theme of Sense of Support had various connotations related to learning, practical forms of learning support, mentorship from First Peoples, and improving teaching practices. Participants described how the yarning circles enabled them to gain more understanding, and desire to foster awareness of Cultural Safety in non-Indigenous students.

Yarning has given me a better understanding of the Cultural Safety framework and how we can facilitate that for [non-Indigenous] students and support students to develop that awareness of themselves, and of their own culture. (PH)

##### Learning Support

Participants also acknowledged that First Peoples students lacked appropriate support from the university. Several sources of learning support for academic success were acknowledged:

I don't think there's enough support to actually assist them [First Peoples students] to perform in an academic environment. Whether that support comes from the First Peoples Support Unit or whether that support comes from learning services - or whether we run a specific, propriety course. (PG)

Another participant wanted to find ways to support more First Peoples to enrol in midwifery, so they in turn could become midwives in their communities.

. . . I'm really keen to support any First Peoples to study midwifery and become midwives, so they can work with their own people and support them [women] to achieve the birth that they would like to achieve. (PE)

##### Mentoring by First Peoples

Participants acknowledged that they needed to seek support and guidance from First Peoples about their learning and teaching

practices and ensure that proposed changes were culturally safe and appropriate.

I need more guidance and support to make sure that I don't just go in blindly and make changes that aren't going to be as beneficial as I think they are. I'm happy to seek guidance. (PC)

One participant suggested that a specific First Peoples mentor be appointed as part of the midwifery team.

... it would be really awesome if we had a mentor we could go to for guidance and course content ... having an Indigenous mentor would be really awesome. (PA)

Similarly, another participant described the desire to have a bank of resources about First Peoples cultures that were easily accessible and specific to midwifery curricula. One participant felt that a consultative and collaborative process with First Peoples was important. She questioned, however, whether the burden on a small group of First Peoples academics would be significant and potentially bothersome over time.

Part of me wants to consult, collaborate, discuss, check and find information, and gain resources from First Peoples, I know that makes sense. But the flipside of that is I wonder sometimes if they go 'yeah, it's really great that you're asking me what I think, and you've got my input but I'm sort of sick of telling you'. (PD)

#### 4.5. Sense of difference

A Sense of Difference was expressed as difference, privilege and othering.

Difference as equity versus equality

Participants described being blind to 'difference' and issues of 'equality and equity'. For example, one participant reflected on the challenges of some First Peoples attending university.

It had never crossed my mind about how difficult coming to university was for First Peoples, it goes back to that white privilege lens. I see that people come from different backgrounds and socio-economic status, but then the whole way of learning and the whole way of communicating with academics in the university privileges white people. Attending university asks a lot of them [First Peoples] to even come to such an unfamiliar environment. (PH)

Difference as culturally safe

Another participant described how she finally saw 'difference' as a positive (culturally safe) view.

I finally get it, white privilege, we are not all the same. I hadn't realised the filter that was there and how that was disrespectful ... we might believe we are all the same and we are all equal but we're actually not. (PE)

Privilege

Privilege was described by participants as a new understanding of 'white privilege'. Discussions about white privilege were addressed during yarnning circles and participants described how these discussions made them more aware of their own privilege as non-Indigenous Australians. For example, in regard to Birth on Country, one participant said:

They [First Peoples women] had, I felt, more right to Birth on Country than I did, and yet I had the privilege of doing it. (PB)

Several participants also described themselves or their view of something as being 'through a white lens'. For example, one participant described her teaching as,

"I had a very white perspective on teaching. We are saying to them [First Peoples students] "come into a basically middle-class white program". (PG)

Othering

There was also evidence however, of 'difference' being unintentionally used in ways that implicitly undermine and exclude First Peoples culture. Participants' discourse was replete with words and phrases that could be described as 'othering'. Terms such as 'them', 'their', 'those' and 'they' undermine the identity of First Peoples, who become nameless. 'Othering' has emerged from critical race theory<sup>32</sup> to describe this phenomenon. By way of example, one participant said:

When they're in rural and remote areas, they're flown to the major hospitals and they're dislocated from their families and it's not ideal by any means. (PE)

Another participant said:

I know that it's not okay to treat all students the same, but I don't know how to treat them uniquely without putting them in a place of having the spotlight on them. So that's my dilemma, how do you facilitate their learning without highlighting them as being different? (PD)

An important step in developing awareness of Cultural Safety is a recognition and celebration of difference. This involves speaking in ways that acknowledge and name Australia's First Peoples and respects their ways of Being, Knowing and Doing.

#### 4.6. Sense of challenge

The Sense of Challenge theme was described by participants as feeling 'confronted' and 'challenged' about previously held beliefs and values. Having challenging conversations created uncomfortable feelings for participants. For example, one participant described feeling vulnerable:

Personally, I found it challenging in terms of being that honest and vulnerable around my beliefs in relation to my culture - and being sensitive to other people's culture. (PD)

Participants also expressed feeling challenged when discussing points of view, they did not agree with, and weighing up how much to say or not say. One participant said:

I think the biggest challenge for anyone who's in a place of sharing is the personal intimate challenges of how much to share and how much to hold back because you're not talking about neutral subjects, you're talking about subjects that often run very deep in any person whether they acknowledge them or not. So that was a challenge to actually have my voice and to hear others' voices. (PD)

Participants also described feeling challenged when teaching First Peoples students and the need to change their practices.

I feel sometimes it's still not working and the [First Peoples] students disengage or disappear. I find that frustrating and I feel a bit powerless around that, I suppose, about what to do. That's where I feel that my specific challenges are now. (PG)

Included in the Sense of Challenge theme was a sub-theme identified as 'minimising'. Participants often used the word 'little' within a sentence to perhaps soften what they were saying or minimise their feelings. For example, participants sometimes used 'little' when talking about shame, guilt, and feeling upset. One participant said:

Yarning brought out feelings ... a little bit of shame and guilt that I hadn't stayed true to those philosophies. I think it rattled my cage a little bit because - well not rattled my cage, that sounds a bit negative, but it helped me remember how I used to practice. (PD)

## 5. Discussion

This study explored participants' experiences of one component of a previously evaluated professional development intervention on midwifery academics' awareness of Cultural Safety. A major component of the intervention was the use of yarning circles in the form of both collaborative and research topic yarning.<sup>21</sup> Acceptance of First Peoples practices and research methodologies that represent respectful, culturally safe and decolonising principles must be given priority to foster transformation in learning and teaching. Yarning in the circles and during interviews allowed for relaxed but focused discussions, and the sharing of knowledge that helped build relationships and foster new insights in a safe environment.<sup>21,33, 34</sup>

### 5.1. Belongingness

Yarning is facilitated when members feel as though they belong in the group. Many participants expressed the importance of feeling connected to colleagues while attending the yarning circles. The circles were described as a 'community' – a place where ideas could be discussed, and midwifery and First Peoples philosophies and perspectives were shared and understood. Participants found this Sense of Belonging provided reassurance and safety for their own cultural journey. Bass et al.<sup>35</sup> describes this reassurance as an important factor for establishing appropriate social support networks with peers in a supported 'circle'. Hearing the perspectives of colleagues, enabled participants to see the richness of diversity and culture within their academic and practice environments and facilitate insight and change.

There was evidence that participants connected from multiple perspectives, as women, as midwives and as midwifery academics. They were able to draw on experiences from their midwifery practice to understand Cultural Safety. In the late 1980's, Ramsden translated the Māori words for health standards (Kawa Whakaruru) into English (Cultural Safety).<sup>27</sup> Cultural Safety in this context honours the principles of partnership, protection and participation, and respects the relationship between the Indigenous Peoples of New Zealand and the Crown.<sup>27,36</sup> Ramsden's work is relevant in the Australian context and for midwifery practice. Being in partnership 'with women' is the cornerstone of a female-centric midwifery philosophy. Participants were able to draw connections between the known benefits of woman-centred care and having a similar approach to their relationship with First Peoples students.

### 5.2. Safety and security

Developing awareness of Cultural Safety is challenging. The Sense of Safety and feeling secure enough to participate in challenging conversations was crucial. Participants felt safe to ask questions and have open discussions without fear of being judged. Participants expressed the importance of the 'safe space' to discuss sensitive topics related to racism and difference and develop shared meanings. Bauman et al.<sup>37</sup> described critical conditions for a safe environment in 'communities of practice' as ones where participants (1) know they are in a safe environment, (2) are afforded opportunities to feel vulnerable and show shortcomings, and (3) are encouraged and respected by others in the group. According to Bauman et al.<sup>37</sup> when participants feel safe from personal and professional harm, the group evolves.

When having conversations about race, culture and difference, a certain level of discomfort is necessary in order for transformation to occur. The notion of discomfort is also discussed in The Framework and proposed as a learning and teaching strategy that is transformative.<sup>11</sup> Bolter<sup>38</sup> describes this as a 'pedagogy of

discomfort' which represents an engaged and joint exchange, that allows for reflective, emotional investment from members of the group. Invitations from others to take conversational risks have the potential to bring about revision of one's beliefs and values.<sup>38</sup> Feelings of discomfort can provide a basis for further transformative learning to take place, especially when critical reflective processes are undertaken.<sup>11</sup>

The current study illuminates the journey of participants towards awareness of Cultural Safety. Their commitment to regularly attending the professional development program and undertaking reflective processes was commendable. The study highlights the emotional and intellectual work required to understand Cultural Safety, address racism, and understand white privilege. Findings of the current study highlight the need for ample time for reflection and change, careful attention to group formation, and establishment of group rules that foster respect and safety.

### 5.3. Ways of knowing

To change the current gap in maternal and infant health mortality and morbidity rates for First Peoples', acknowledging, and integrating First Peoples' ways of knowing, being, and doing into midwifery education and practice is essential.<sup>14,39</sup> It is important for midwifery academics to consider how they can uphold and safeguard these principles within the context of their own learning and teaching practices.<sup>11</sup>

Awareness of Cultural Safety was born out of conversations about history and colonisation during the yarning circles. Hearing First Peoples stories about the impact of Australia's shared history and colonisation on their families and communities challenged participants to re-evaluate their beliefs and values. Cultural awareness is described by Ramsden as the beginning step towards Cultural Safety and understanding that there is difference.<sup>27</sup>

In order to move towards awareness of Cultural Safety, self-reflection and reflexivity are paramount. Bass et al.<sup>40</sup> describe three levels of reflection, reflective practitioner, critical reflection, and reflexivity. Reflection and reflexivity are necessary to understand our attitudes values and assumptions.<sup>40,41</sup> Most participants linked reflection to their ongoing learning journey. According to The Framework<sup>11</sup> reflexivity is one of the most important capabilities of an academic and influences how they present curriculum content and manage 'the classroom'. A reflexive academic is able to use their greater awareness of Cultural Safety to facilitate discussion and influence knowledge sharing in ways that potentiates transformative learning.<sup>11</sup>

### 5.4. Partnership

Participants sense of 'not' knowing demonstrated their awareness of the importance of acknowledging First Peoples as experts and of the need to work in partnership to affect change in their learning and teaching practices. In 2002 Ramsden<sup>27</sup> described the key principles of Cultural Safety as partnership, participation and protection. The relationship between a woman and her midwife is a partnership based on respect and trust that acknowledges the equality and reciprocity of their relationship.<sup>42</sup> Similarly, non-Indigenous academics need to seek guidance from First Peoples academics, as well as respectfully invite First Peoples midwives and child-bearing women into the classroom to enhance student learning.

One of the key actions from the Universities Australia Indigenous Strategy (2017–2020) was that members commit to building respectful and collaborative partnerships between themselves and the First Peoples communities they serve. This partnership is seen as non-negotiable to improve First Peoples

access and success in higher education.<sup>43</sup> This partnership model is being actioned in the midwifery profession as evidenced by the joint position statement on 'Birthing on Country' between the two professional peak models that support the midwifery profession (Congress of Aboriginal and Torres Strait Islander Nurses and Midwives [CATSINaM] and Australian College of Midwives [ACM]).<sup>14</sup>

### 5.5. Cultural difference and challenges

Difference was expressed by participants as their ability to see their own 'white' privilege. Moreton-Robinson<sup>44</sup> defines whiteness as "the guise of the invisible human universal, whiteness secures hegemony through discourse by normalising itself as the cultural space of the West" (p.78). Critical whiteness theory draws attention to white privilege as a social construct.<sup>45</sup> The bulk of the yarning about white privilege in the current study centred on an awareness of white privilege and issues about equity or lack thereof. There was however, no connection between privilege and power. It is proposed that academics who are able to recognise power inequalities and make a contribution to decolonising the learning and teaching environment for First Peoples students, will potentially be able to address the historical legacy of post-colonial Australia.<sup>46</sup>

One participant talked about her 'filters' prior to attending the yarning circles and recognised these filters as her own white privilege. A number of participants recognised that they had been complicit in taking their privilege for granted. Participants also recognised the university as a place of privilege with a colonial construct that does not meet the needs of First Peoples students. While evidence of these insights was encouraging, there were examples of implicit racism. Not all participants understood the importance of difference. 'Othering' emerged from critical race theory about postcolonial discourse and the tendency of the dominate group to create the other.<sup>32</sup> Being an 'other' can perpetuate socio-political and cultural divides and reflects an imbalance in power dynamics. Othering emphasises the privilege of the dominant group and can therefore form part of a colonising process that potentially negates valuing difference.<sup>47</sup>

Racism is based on an inability or reluctance to see uniqueness and honour difference.<sup>48</sup> It is not possible to discuss Cultural Safety without discussing racism. There is consistent evidence that First Peoples experience racism within educational and health institutions.<sup>49</sup> Although participants in the current study were willing to have conversations about racism, many described these as challenging and there were examples of implicit bias. Fiahlo<sup>50</sup> describes the concept of 'courageous conversations' where the inclusion of counter-storytelling informs discussions about race where unconscious racist stereotypical beliefs can be challenged.<sup>50</sup>

Fredericks et al.<sup>51</sup> position yarning as a supportive strategy that facilitates knowledge sharing with the potential to decolonise and reposition First Peoples ways of knowing. Yarning allows for open and honest discourse when stepping into challenging conversations about racism.<sup>11,21,52</sup> Transformation occurs when alternative perspectives are called into question and challenge previously held beliefs and assumptions. There was evidence of transformation as participants in the current study reflected on previously held beliefs and values and developed new insights. However, such transformative changes did not occur equally across all members of the group, highlighting the individual and life-long nature of the journey towards becoming culturally safe.

## 6. Recommendations

There are a number of considerations for developing Cultural Safety professional development programs and recommendations

for further research as a result of this study. Midwifery is well situated to lead the way in Cultural Safety professional development programs. There are synergies between First Peoples concepts of health and midwifery philosophy as described by ICM.<sup>23</sup> It is with these synergies in mind, the following recommendations towards enhancing midwifery-specific Cultural Safety professional development programs and further research are proposed.

### 6.1. Professional development programs

This study revealed effective elements of the program that fostered learning and change in participants. In particular, attention needs to be given to participants' Sense of Safety. In the current study, perceptions of safety came from being in a circle with 'likeminded' people where trust and respect were built over several weeks at regular intervals. Participants need to be afforded opportunities to get to know each other and come together as a team with a common goal. Developing and planning Cultural Safety professional development programs for midwives need to be longitudinal in design and require respectful consideration that is inclusive of First Peoples. A partnership model for program development and facilitation is paramount to acknowledge First Peoples participation, knowledge(s) and expertise. The facilitators (preferably First Peoples) need to be trusted, respected and capable of supporting yarning that promotes reflexivity and facilitates challenging conversations. Other key considerations include a commitment from the workplace and of participants to regularly attend sessions. Finally, the use of a scaffolded approach such as the Framework would enable a program structure that covers elements of cultural capability and Cultural Safety.

### 6.2. Further research

The NMBA has taken a critical step forward by developing the Midwife Standards for Practice and a Code of Conduct for Midwives.<sup>15,16</sup> Further research is required to evaluate strategies that foster midwives' participation in Cultural Safety professional development programs. There is limited research on the effectiveness of professional development programs aimed to develop awareness of Cultural Safety. Future research could identify critical elements of effective Cultural Safety professional development programs for midwives; the development of valid outcome measures, and strategies to foster reflection and reflexivity by midwives on culturally safe practice in all workplace settings.

## 7. Limitations

This small, qualitative study was conducted with a homogenous group of female, non-Indigenous, midwifery academics. However, in some respect the voluntary participation by a group of like-minded academics with a genuine desire to use self-reflection, fostered courageous conversations about race, power and inequality. It also stimulated ideas about potentially transformative learning and teaching practices that offer culturally safe environments for First Peoples students. While social desirability could have influenced some of the participants' responses, the relationship between the researcher and participants was built on trust and respect, and truth telling was evident.

The yarning circles and interviews were facilitated by the first author who is a member of the teaching team. Participants may have therefore moderated their discussion during the yarning circles and their responses during the interviews. However, many participants expressed their gratitude at the end of the interviews for the opportunity to participate in the research. There is a lack of literature evaluating Cultural Safety professional development

strategies for academics thereby limiting comparisons with previous studies.

## 8. Conclusion

This qualitative study outlined key concepts described by midwifery academics in their journey towards awareness of Cultural Safety. In particular, processes that engendered feelings of belonging, safety and knowing were critical for change. The identified themes were consistent with the ultimate aim of the research which was to increase First Peoples students' Sense of Belonging and Safety. Yarning was used as a way to privilege First Peoples' ways of knowing, being and doing. Yarning circles afforded participants a safe environment for open and honest discussion and challenging conversations in the intercultural space. Through processes of reflexivity and shared experiences, midwifery academics expressed their commitment to and willingness to investigate ways of transforming their learning and teaching practices to provide culturally safe learning environments for First Peoples.

## Conflict of interest

All authors have no financial and personal relationships with other people or organisations that could inappropriately influence (bias) their work.

There were no external funding sources for this study.

## Author agreement

- That the article is the authors original work.
- The article has not received prior publication and is not under consideration for publication elsewhere.
- That all authors have seen and approved the manuscript being submitted.
- The authors abide by the copyright terms and conditions of Elsevier and the Australian College of Midwives.

## Ethical statement

Ethics approval was obtained from the Griffith University Human Ethics Committee – Ref No: OTH/13/14/HREC (Primary approval – 08/05/2015; amended and approved 10/11/2017).

## References

1. Griffith University. *Guidelines for Aboriginal and Torres Strait Islander terminology*. Brisbane: Griffith University; 2016. p. 1–6.
2. Australian Bureau of Statistics. *Census: Aboriginal and Torres Strait Islander population*. 2017 <http://www.abs.gov.au/ausstats/abs@.nsf/MediaReleasesBy-Catalogue/02D50FAA9987D6B7CA25814800087E03>.
3. Australian Government. *Closing the Gap: Prime Minister's report 2017. The Department of the Prime Minister and Cabinet*. Canberra, ACT: Commonwealth of Australia; 2017.
4. Asmar C, Page S, Radloff A. Exploring anomalies in Indigenous student engagement: Findings from a national Australian survey of undergraduates. *Higher Educ Res Dev* 2015;**34**(1):15–29.
5. West R, Usher K, Buettner P, Foster K, Stewart L. Indigenous Australians' participation in pre-registration tertiary nursing courses: A mixed methods study. *Contemp Nurse* 2013;**46**(1):123–34.
6. Congress of Aboriginal and Torres Strait Islander Nurses and Midwives. *Nursing and midwifery workforce. Congress of Aboriginal and Torres Strait Islander Nurses and Midwives* 2014.
7. Fleming T, Creedy DK, West R. Impact of a continuing professional development intervention on midwifery academics' awareness of Cultural Safety. *Women Birth* 2017;**30**(3):245–52.
8. Milne T, Creedy DK, West R. Integrated systematic review on educational strategies that promote success and resilience in undergraduate Indigenous students. *Nurse Educ Today* 2015;**36**(2015):386–94.
9. Milne T, Creedy DK, West R. Development of the Awareness of Cultural Safety Scale: A pilot study with midwifery and nursing academics. *Nurse Educ Today* 2016;**44**(2016):20–5.
10. West R, Usher K, Foster K. Increased numbers of Australian Indigenous nurses would make a significant contribution to 'closing the gap' in Indigenous health: what is getting in the way? *J Aust Nurs Prof* 2010;**36**(1/2):121–30.
11. Department of Health. *Aboriginal and Torres Strait Islander health curriculum framework. Department of Health*. Canberra: Commonwealth of Australia; 2015.
12. Renfrew MJ, McFadden A, Bastos MH, et al. Midwifery and quality care: findings from a new evidence-informed framework for maternal and newborn care. *Lancet* 2014;**384**(9948):1129–45.
13. International Confederation of Midwives. *Essential Competencies for midwifery practice*. The Hague: International Confederation of Midwives; 2019. p. 1–22.
14. Congress of Aboriginal and Torres Strait Islander Nurses and Midwives. *Australian College of Midwives, CRANaplus. Birthing on Country position statement*. Canberra, Australia: Congress of Aboriginal and Torres Strait Islander Nurses and Midwives; 2016. p. 1–20.
15. Nursing and Midwifery Board of Australia. *Code of conduct for midwives*. Melbourne, Victoria: Nursing and Midwifery Board of Australia; 2018.
16. Nursing and Midwifery Board of Australia. *Midwife standards for practice. Advanced copy*. Melbourne: Victoria Nursing and Midwifery Board of Australia; 2018.
17. Gladman J, Ryder C, Walters L. Measuring organisational-level Aboriginal cultural climate to tailor Cultural Safety strategies. *Rural Remote Health* 2015;**15**(3050):1–8.
18. Durey A, Taylor K, Bessarab D, et al. Working together': an intercultural academic leadership programme to build health science educators' capacity to teach Indigenous health and culture. *Aust J Indigenous Educ* 2016;1–11.
19. Wilson A, Sanner S, McAllister L. A longitudinal study of cultural competence among health science faculty. *J Cult Divers* 2010;**17**(2):68–72.
20. Laycock A, Walker D, Harrison N, Brands J. *Researching Indigenous health: a practical guide for researchers*. Melbourne, Australia: Lowitja Institute; 2011.
21. Bessarab D, Ng'andu B. Yarning about yarning as a legitimate method in Indigenous research. *Int J Crit Indigenous Stud* 2010;**3**(1):37–50.
22. Geia L, Hayes B, Usher K. Yarning/Aboriginal storytelling: towards an understanding of an Indigenous perspective and its implications for research. *J Aust Nurs Prof* 2013;**46**(1):13–7.
23. West R. First Peoples health & Cultural Safety education and competence: fundamental to developing super midwives in First Peoples health contexts. *Australian College of Midwives 19th Biennial Conference* 2015.
24. Martin K. *Please knock before you enter: Aboriginal regulation of outsiders and the implications for researchers*. Brisbane, Australia: Posted Pressed; 2008.
25. Smith LT. *Decolonizing methodologies: research and Indigenous peoples*. 2nd ed. London, UK: Zed Books Ltd; 2012.
26. Polit D, Tatano Beck C. *Nursing research: appraising evidence for nursing practice*. 7th ed. Philadelphia, USA: Wolters Kluwer/Lippincott Williams & Wilkins; 2010.
27. Ramsden I. *Cultural Safety and nursing education in Aotearoa and Te Waipounamu*. Wellington: Victoria University; 2002.
28. Borbasi S, Jackson D. *Navigating the maze of research: enhancing nursing and midwifery practice*. 4th ed. Chatswood, NSW, Australia: Elsevier; 2016.
29. Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol* 2006;**3**:77–101.
30. Maguire M, Delahunt B. Doing a Thematic Analysis: a practical, step-by-step guide for learning and teaching scholars. *Ireland J Teach Learn High Educ* 2017;**3** (Autumn 2017):501–14.
31. Levett-Jones T, Lathlean J. The ascent to competence conceptual framework: an outcome of a study of belongingness. *J Clin Nurs* 2009;**18**:2870–9.
32. Delgado R, Stefancic J, Lined E. *Critical race theory: an introduction*. 2nd ed. New York: New York University Press; 2012.
33. Leeson S, Smith C, Rynne J. Yarning and appreciative inquiry: the use of culturally appropriate and respectful research methods when working with Aboriginal and Torres Strait Islander women in prison. *Methodol Innovations* 2016;**9**:1–17.
34. Dean C. A yarning place in narrative histories. *Hist Educ Rev* 2010;**39**(2):6–13.
35. Bass J, Walters C, Toohill J, Sidebotham M. Promoting retention, enabling success: discovering the potential of student support circles. *Nurse Educ Today* 2016;**20**(September):109–16.
36. New Zealand College of Midwives. *Midwives handbook for practice*. 4th ed. Christchurch, New Zealand: New Zealand College of Midwives; 2008.
37. Bauman H, Kheriaty A, Felten P, et al. *Transformative conversations: a guide to mentoring communities among colleagues in higher education*. New York: Wiley-Blackwell; 2013.
38. Boler M. *Feeling power: emotions and education*. London: Taylor & Francis Group; 1999.
39. Kildea S, Kruske S, Barclay L, Tracy S. Closing the Gap: how maternity services can contribute to reducing poor maternal infant health outcomes for Aboriginal and Torres Strait Islander women. *Rural Remote Health* 2010;**10** (1383):1–18.
40. Bass J, Fenwick J, Sidebotham M. Development of a model of holistic reflection to facilitate transformative learning in student midwives. *Woman Birth* 2017;**30**:227–35.
41. Bolton G. *Reflective practice: writing and professional development*. 3rd ed. London: SAGE Publications; 2010.

42. Midwifery Council of New Zealand. *Statement on cultural competence for midwives*. Wellington, New Zealand: Midwifery Council of New Zealand; 2007. p. 1–7.
43. Universities A. *Indigenous Strategy 2017– 2020*. Canberra, ACT: Universities Australia; 2017.
44. Robinson-Moreton A. *Talkin' up to the white woman: Indigenous women and feminism*. Queensland, Australia: McPherson's Printing Group; 2000.
45. Hook G. Towards a decolonising pedagogy: understanding Australian indigenous studies through critical whiteness theory and film pedagogy. *Aust J Indigenous Educ* 2012;**41**(2):110–9.
46. Universities Australia. National best practice framework for Indigenous cultural competency in Australian universities. *Department of Education Employment and Workplace Relations (DEEWR)*. Canberra, ACT, Australia: DEEWR; 2011.
47. MacQuarrie C. Othering. In: Mills A, Durepos G, Wiebe E, editors. *Encyclopedia of Case Study Research*. Thousand Oaks, USA: Sage Publications; 2012. p. 636–9.
48. Wepa D. *Cultural Safety. Aotearoa New Zealand*. 2nd ed. Melbourne, Australia: Cambridge University Press; 2015.
49. Reconciliation Australia. *2016 Australian Reconciliation Barometer*. Kingston ACT: Reconciliation Australia; 2016.
50. Fialho M. *Engage, empower, enact: evaluating a cultural competence program at UWA*. Western Australia: The University of Western Australia; 2013.
51. Fredericks B, Adams K, Finlay S, et al. Engaging the practice of yarning in action research. *Action Learn Action Res J* 2011;**17**(2):7–19.
52. Robinson-Moreton A. *Talkin' up to the white woman: Indigenous women and feminism*. Queensland, Australia: McPherson's Printing Group; 2000.