



87077266

# Challenges faced by Indigenous nursing students and strategies that aided their progress in the course: A descriptive study

## ABSTRACT

*Marked improvements in Indigenous health can be achieved by increasing the participation of Indigenous people in the health professions. Currently in Australia the participation by Indigenous people in the health professions is low and the Indigenous people of Australia continue to have poor health outcomes. This qualitative study utilised interviews with 22 Indigenous students enrolled in undergraduate nursing degrees across Australia, to explore the challenges they faced and uncover the strategies they had found helpful to their progress in the course. The findings indicate that students are challenged by financial hardship, staff insensitivity to cultural issues, discrimination, lack of Indigenous mentors, poor study skills, lack of adequate educational preparation, lack of resources, and ongoing family commitments. Strategies identified as particularly helpful to tenure within the course include specific Indigenous support units, adequate financial support, interested academics, Aboriginal Tertiary Assistance Scheme (ATAS) tutors, support from family and friends, and support from other students.*

## KEY WORDS

Indigenous nurses; retention; Indigenous health; undergraduate nursing education; qualitative research

Received 24 September 2004

Accepted 15 March 2005



**KIM USHER**  
Associate Professor  
Head of School  
School of Nursing  
Sciences  
James Cook University  
Townsville, Queensland



**DAVID LINDSAY**  
Senior Lecturer, and  
Deputy Head of School  
School of Nursing Sciences  
James Cook University  
Townsville, Queensland



**MARIA MILLER**  
Head of School  
School of Nursing  
Australian Catholic  
University  
Fitzroy, Victoria



**ADRIAN MILLER**  
Senior Lecturer  
School of Public Health  
Tropical Medicine  
& Rehabilitation Sciences  
James Cook University  
Townsville, Queensland

## INTRODUCTION

The poor health of Indigenous Australians across a wide range of indicators has been documented in many studies undertaken over the last few decades. These studies have outlined the high infant mortality rate, high rate of infectious disease and injury, low life expectancy, and the increasing burden of chronic disease borne by the Indigenous community (Thomson, 1991; Sinnott & Wittmann, 2001; Standing Committee on Aboriginal and Torres Strait Islander Health, 2002; Thomson et al., 2003; NATSIHC 2001, 2003, 2004). Further, the health and wellbeing of Australian Indigenous people is poorer than that of Indigenous populations in other countries on a number of indicators (AIHW, 1999; Kunitz, 2000). Recent studies have demonstrated significant improvement in health outcomes for Indigenous peoples by increasing the participation of Indigenous people in health care delivery (Matthews, 1997; Wilson, 2001; Report of the Indigenous Nurse Education Working Group, 2002). Given that the first health professional consumers see when they enter a health care facility is likely to be a nurse, it is vital that contact with that facility by Indigenous people is a culturally sensitive experience, or they are not likely to return.

In Australia, the need for more Indigenous registered nurses has long been recognised and documented (Goold, 1995; Lovett, 2002; Meiklejohn, Wollin & Cadet-James, 2003;), and a number of strategies have been implemented with the aim of increasing Indigenous participation in nursing. For example, a number of tertiary nursing courses designed to recruit and retain Indigenous people into nursing were introduced, including those offered by schools of nursing at Queensland University of Technology (QUT), Deakin University and James Cook University. In addition, the Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN) has worked with Deans of Nursing across Australia to develop strategies aimed at recruiting

and retaining more Indigenous students in nursing (Report of the Indigenous Nurse Education Working Group, 2002). Despite these developments, there remain relatively few Indigenous registered nurses in Australia, and little is published about their choice of career following graduation. The 2001 census reported that there were 1,114 Indigenous nurses working in Australia (912 registered nurses and 202 enrolled nurses). This represents only 0.4% of the registered nurse workforce when Indigenous people constitute 2.2% of the general population (ABS, 2002). The reasons why so few Indigenous Australians undertake nursing education have been reported elsewhere by Goold (1995) and Armstrong (2001). Indigenous students do choose to study nursing however relatively little is known of their experiences within the course. This paper provides an overview of the findings of a recent study undertaken to explore the challenges faced by Indigenous nursing students and the strategies identified by students as helpful to their successful completion of the course.

## LITERATURE REVIEW

Nurses and Aboriginal and Torres Strait Islander Health Workers play a key role in the provision of health care to Indigenous people. Not only do they provide the basis of primary care in rural and remote areas, they are also the main people that Indigenous persons will interact with when admitted for acute care. As mentioned previously, there is evidence from other countries with significant Indigenous populations that improvements in Indigenous health are linked to greater participation in health service delivery by Indigenous people (Matthews, 1997; Womack, 1997; Report of the Indigenous Nurse Education Working Group, 2002). Preparation for tertiary study remains a significant factor in the enrolment of Indigenous students in undergraduate nursing programs. The lower retention rate of Indigenous students in secondary school has signifi-

cant implications for their later participation in tertiary programs. Research has indicated that a number of factors are involved in Indigenous students' educational outcomes and they include remoteness, local social environments, poor health, poverty, social alienation, rurality, parents' occupation and education, poor quality and crowded housing, household members who have been arrested, household members' poor educational levels, and low English language proficiency (Hunter & Schwab, 1998; Schwab & Anderson, 1999). As a result, in 1996, only 2 percent of Indigenous adults had completed a bachelor degree or higher when compared with 11 percent of the non-Indigenous population (AIHW, 1999). In contrast, Indigenous students were 30 times more likely than non-Indigenous students to complete lower level (pre-bachelor) courses of study in health related fields (Schwab, 1999), and more likely to be enrolled in remedial programs of study than non-Indigenous students (Maslen, 1999). Compounding this, Indigenous students have a high drop out rate from tertiary programs (Indigenous Nurse Education Working Group, 2002). Despite these factors, there was a steady increase in the number of Indigenous Australians commencing and completing tertiary studies between 1995 and 1999 (DETYA, 1999; Maslen, 1999).

Although research on reasons for attrition in university programs, including the health science areas, has been conducted for some time, only limited studies specific to Indigenous nursing students have been completed. Further, only several of those studies have been conducted in Australia. However, in those conducted, the university 'culture' has been proposed as a determinant of poor retention. For many Indigenous students the university experience is totally different to any other educational experience they have had previously. Schwab (1996) claimed that Indigenous students found universities to be unfamiliar, foreign and/or hostile to their presence. He also claimed that the students reported feeling ill at ease, being unfamiliar

with the behaviours and conventions, whilst finding the entire experience disconcerting. The study by Weaver (2001) concluded that students struggled with issues such as culture shock, racist attitudes, stereotyping, and isolation from others of a similar culture. Other factors that may influence Indigenous students' success include poor socio-economic status, intense kinship obligations, frequency of funerals, the burden of increased expectations from family and community, and the pressure to maintain some level of involvement with the local community (Schwab, 1996). The study by Page et al. (1999) revealed the importance of the idea of a shared heritage to Indigenous students. They wrote: 'The perception of shared experiences led students to feel an immediate and strong identification with their fellow Aboriginal and Torres Strait Islander students which facilitated a sense of supportiveness among the group' which they claim demonstrated that '... culture matters in the educational process' (Page et al., 1999: 4-5).

The lack of sufficient support mechanisms to enhance the educational experience for Indigenous students has been identified in previous studies (Goold, 1995; Crawford, 1988; Omeri & Ahearn, 1999; Weaver, 2001). As part of its operating grant, the Australian Government Department of Education, Science and Training (DEST) allocated Indigenous support funding to enable Australian educational institutions to better meet the special needs of their Indigenous students. A total of approximately \$23 million per annum has been allocated to tertiary institutions to provide assistance with study skills, personal counselling and cultural awareness activities. All funded institutions are required to have an Indigenous education strategy and, as a result, most have established special Indigenous student support centres. The success of these centres and the support Indigenous students receive from them appear to vary between institutions (Report of the Indigenous Nurse Education Working Group, 2002). Meik-

lejohn, Wollin and Cadet-James (2003), for example, have recently described the success of support strategies offered by Oodgeroo, the Queensland University of Technology's Aboriginal and Torres Strait Islander Support Unit.

In recent years the Commonwealth and State governments of Australia have recognised the growing crisis within the nursing workforce, which has resulted in many new initiatives designed to increase upskilling, recruitment and retention, particularly in rural and remote areas. A component of this included increasing the number of Indigenous nurses by offering scholarships and dedicated places for Indigenous students within nursing programs. As a result of this initiative, New South Wales, through the development of a rural and remote Aboriginal nursing strategy (RRANS), proposed a 12 point plan by which to increase the number of Indigenous nurses in that State (Lovett, 2003). Many of the elements of that plan reinforce the findings of the study being described within this paper.

Clearly, the issues involved with Indigenous student entry to, and progress in, health-related tertiary courses are complex. This brief review of the literature has identified some of the key issues, however many of the more complex issues are beyond the scope of this paper. They remain as realities that the Government and education systems at all levels must address, in order to achieve substantial improvement in the graduation rates of Indigenous people from professional degrees.

## THE STUDY

A descriptive, qualitative study was undertaken to explore the challenges faced by Indigenous students enrolled in nursing courses and to outline the strategies the students identified as helpful to their progress within the course. A qualitative study was chosen as the most appropriate methodology, due to the lack of information specific to the topic and as the intent was to develop a deeper understanding of the prob-

lem (Streubert & Carpenter, 1999; Creswell, 2003; Polit & Tatano Beck, 2004). Universities across Australia with high Indigenous nursing student enrolment were invited to take part in the study. Ethical clearance to conduct the study was received from the Human Ethics Review Committee where the project was situated and from participating universities as necessary.

## Sample

A purposive sample was chosen as most appropriate in this study. Purposeful sampling is when individuals are selected to take part in a study because of their firsthand experience with a culture, social interaction, or phenomenon of interest (Streubert & Carpenter, 1999). Indigenous nursing students at identified universities were therefore targeted and invited to participate in the study by way of an information flier. Access to students was arranged through an Indigenous support person at each participating university. Students who attended the CATSIN Conference in 2002 were also invited to participate. A total of 22 students agreed to be interviewed in the study. The demographic details of the sample are outlined in Table 1.

## Data collection

A demographic questionnaire and in-depth interviews were used to collect the data. The interview questions were refined as the process of conducting the interviews occurred. All interviews were conducted in a place chosen by the participant. The interviews lasted between 15 and 60 minutes, were all tape recorded and later transcribed verbatim.

## Data analysis

Demographic data were subjected to descriptive analysis to determine percentages, means, modes and mediums. The data from the transcripts were analysed inductively following the usual procedures of qualitative analysis (Streubert & Carpenter, 1999). Firstly, the researchers

TABLE 1: DEMOGRAPHIC CHARACTERISTICS OF SAMPLE

Variable	Frequency		Range
	n	%	
Mode of study			
Full time	14	63.6%	
Part time	8	36.4%	
Type of program			
On-campus	17	77.3%	
External	4	18.2%	
Mixed mode	1	4.5%	
Marital status			
Single	8	36.4%	
Married or defacto	10	45.4%	
Divorced	4	18.2%	
Education			Year 9-UG1
Age			18-53

examined the transcripts overall to get a sense of the meaning for the participants. The data were coded into 'chunks' or 'meaning units' and the codes then used to determine categories or themes. The researchers also attempted to interconnect the themes in the final analysis which is also usual in qualitative analysis (Creswell, 2003).

### Trustworthiness of the data

Trustworthiness of the data was ensured by such means as cross checks between team members during the analysis phase, regular team meetings, and individual as well as collective data analysis. An audit trail was also maintained and documented for all aspects of the study.

## QUALITATIVE RESULTS

### Challenges faced by the students

#### Financial

Overall, it is apparent that financial hardship impacts significantly on the students and their ability to successfully undertake their studies. Most spoke of the anguish caused by not having

enough money. One participant described this as follows: 'Money was a really big problem ... even for transport, sometimes I would walk ... I have trodden all the way up hill to uni because I lacked resources.' The need to buy expensive textbooks further exacerbated this problem. Participants also described financial hardship associated with clinical placements, uniforms, and residential course requirements. Some of the participants reported being so disadvantaged financially that they could not afford to buy food when attending the university. The issue of financial hardship also appeared to have a cultural component. The participants described having to share their money with extended family members. Coming from poor, already disadvantaged families adds pressure to the student to share any money they do have, which further adds to the student's hardship.

### Cultural

#### Being treated differently

Some participants talked about being treated differently by non-Indigenous students, staff and faculty because of their Indigenous descent. A few spoke of racism that they had experienced in the university and whilst on clinical placement. Students felt that some staff were just waiting for an excuse to fail them. One participant said:

I was speaking to one of the girls today and she said that once they find out that you're Aboriginal they're going to watch you closely ... just wait for you to make a mistake and then they'll use that against you.

#### Failure of staff to recognise the importance of family issues

Participants described the importance of family to Indigenous students and how this caused problems at times during their study. They reported how staff were often unaware of the importance placed upon family commitments for Indigenous people and how this had come

to be problematic in the course of their studies. For example, participants had experienced resistance to leave for family commitments such as funerals, and the grieving process and how this in turn had caused problems with getting assignments in on time. This resulted in the participants seeing universities as places highly governed by rules and regulations that appeared to be at odds with Aboriginal philosophies of life or linguistic understandings. At other times, the participants described how the issue of family commitment could become a burden. For example, families often denied the value of the educational program, or their presence in the family home caused added stress when trying to study. As described by one of the participants:

For a lot of people they think nursing, white man's world ... I had my niece with me for 7 weeks over the Christmas holidays and that's a pretty common thing ... aunts and uncles turn up ... and they bring their family, and their children's children, and their boyfriends and girlfriends ... the family aspect can really bring a lot of people undone.

### Being away from home

Participants described the difficulties faced due to relocation. For some participants, undertaking nursing had meant a move to a city or town far away from their family and cultural group. Some discussed how it was difficult to relate to the local Indigenous group which resulted in them feeling isolated from their own culture. This caused a void in support which in turn interfered with the students' study. One participant described this as follows:

I used to go to the Aboriginal co-op a lot down there. I don't up here because ... like I grew up with people down there and they were like my Aboriginal community as we call it ... here I don't participate in the social activities ... because I just don't know them up here and I sort of don't feel part of them.

### Low self-esteem and self-doubt

The participants indicated that their feelings about themselves were related to how they perceived their ability to succeed in the course, compete with non-Indigenous students, and the likelihood of employment and success in the profession after graduation. Some of the self-doubt they expressed seemed to be linked to their concerns about their lack of educational preparedness for the course and the feeling of being different to other students. One participant described this feeling as follows:

I think a lot of Aboriginal people have low self-esteem anyway, if you're, you know from an Aboriginal community you're kind of put down a lot of the time and you just think, Oh well, I'll never be able to do that.

### Individual constraints

It was evident that the students not only struggled with issues related to the learning culture but also the many other responsibilities they had as members of a family. Most of the students spoke of family commitments and how these took up a lot of their time. Many were mothers which meant they were expected to carry out their family responsibilities whilst also undertaking the requirements of the nursing course. This is also often the case for non-Indigenous students, however, when a student has the burden of an alien culture and a disadvantaged educational background, these added commitments greatly challenge the student. Participants also identified other challenges such as time management, lack of a place to study, and attempting to learn in isolation.

### University system

#### Culture shock

University systems and ways of doing things are often alien to students. This seemed to have been particularly so for the Indigenous students inter-

viewed in this study. The study reported how almost everything associated with being at the university was alien to them. One student described her experience as follows: 'It is a bit overwhelming ... at first it is quite intimidating.'

### **Failure to include Indigenous content in nursing courses**

The inclusion of relevant Indigenous content in the nursing courses was important to the participants who were of the belief that if that content is not included, the course is culturally inappropriate for them. This was described by one participant in the following way:

I don't think the course is culturally appropriate. I really think they need more emphasis on Indigenous ... I really think that (name of institution) could learn so much from Indigenous health ... I mean ... the land, your community, our language, our stories, everything, it incorporates everything.

### **Problems with lecturers**

Some of the staff employed by the universities appeared to be disinterested and aloof to the students. This problem ranged from failure to engage with the students and being unsupportive, through to being dismissive of the students and their problems. Participants described the lecturers as follows:

They would give you handy hints but in terms of sitting down ... I remember complaining ... saying not one lecturer has asked me into their room and asked me how are you going? Not one! ... I just think they're [lecturers] never available ... when you want them ... they're never flexible with their due dates for assignments ... they're always so negative and they're always so strict with their guidelines ... they would be reading straight off the lecture notes ... what is the use of going to the lecture, they're not like explaining the notes or anything.

### **Lack of Indigenous support persons and inadequacies of support units**

Our findings suggest that most Schools of nursing do not have an Indigenous support person available to their Indigenous students. The participants felt this greatly hindered their efforts to succeed in the course. One participant described this as follows:

There's a need for someone to role model ... within the school of nursing who can guide, mentor you through the first year ... it would be very important ... having Indigenous mentors available ... they can be a sort of buddy.

Unfortunately not all participants found their university Indigenous Support Unit to be supportive of them as students. Some participants told of negative experiences at the units while some students were even not aware that they had one at their university. A few participants described the unit staff as unapproachable and explained how they were unhappy that staff from the unit never returned their calls. One participant described it as follows:

Well to get help from anyone you've got to ring, ring, ring and hope and pray that they'll ring you back. Three days later you still don't get a call so you ring them back and ... it makes you cranky and you think they don't care ... well what's the point of me going on and finishing.

### **Learning styles**

Some of the participants expressed distress at being disadvantaged in the university system because of problems with learning styles or what they perceived as academic ability. One student told how her problems had been mainly associated with writing skills:

I never went to year 10 at school so I really didn't have an idea how to write an essay,

research. Didn't know how to use a computer ... academic writing is just a whole new style of writing.

For other participants however the problems were related to teachers who assumed Indigenous students would learn the same way as non-Indigenous students and participants expressed concern about this assumption. The participants explained how lack of understanding about the issues Indigenous students face means that academics actually add to the challenges experienced by the students.

For example, one participant explained:

... trying to work with Indigenous people they don't understand their way of life. They just go in there thinking 'I will teach you this and you will learn', straight out and simple, but that's not going to happen.

### **Educational entry behaviour**

Participants also described problems related to educational entry behaviours and how these had affected their potential in the nursing course. One participant said:

I've been through our State system and ... it is about English ... because coming from an Aboriginal culture you still have people who are unable to speak correct English or write good grammar.

However, the problem was even more involved than just the ability to manage the English language. The participants in this study experienced great difficulty with particular subjects, such as reflective practice. The personal nature of the assignments and class room exercises caused concerns for many of the participants. Some of the participants were of the belief that the skills they believed they had at the beginning of the course seemed to be devalued in the process of undertaking the course. The academic language associated with nursing courses also appeared to present a difficulty to some stu-

dents. This is also often a problem for non-Indigenous students and students for whom English is a second language. One participant described it as follows:

... I can't talk at all like I do at home. You know you go home and talk Aboriginal, well broken English anyway, you talk really relaxed and you have these little Aboriginal sayings and you can share them with cousins and whatever, but here I can't be that person with these people.

### **Strategies for success**

#### **Support**

#### **Indigenous support units**

One very strong theme in the study was the importance the participants placed on the approachability and usefulness of Indigenous Support Units. One participant described it as:

... the unit here is a big help for me ... they've got their own computer lab and printer and that kind of thing. Just makes things easier ... we have access to books and the tutors and the computers and everything ... the people here are very approachable, friendly ... it should make the students who aren't using it want to.

The units were seen as places where the students could get help, support and resources such as access to cheap photocopying, books and computers. They also told of the importance of the help they received with draft assignments.

#### **Lecturers and tutors**

Participants described how many academics in nursing schools were very helpful and that these people supported their continuation in the course. One participant said:

... the most useful person in the school is Mary and she's in charge of the nursing section ... she takes a keen interest in



Indigenous students, even though she is not Indigenous ... her continuous phone calls and kicks up the bottom and slap over the head every now and then has sort of been a great inspiration and the words of encouragement has just been wonderful from her.

Another student talked of help received from a science lecturer:

The guy that does the bioscience ... he was exceptional ... he sort of took interest in our situation ... there was two of us and he took time and seeing if we were okay and checking up on us ... took a keen interest as to our results.

#### ATAS tutors

Most participants took advantage of the free tutoring scheme available to them. Tutors from support units were usually highly valued by the participants, especially when they had some understanding of participants' cultural background. For example, one participant said: '... they make things a lot easier ... it makes the whole transition from school to university a lot easier ... it is not so scary as doing it by yourself.' The participants appeared to be appreciative of the time and effort from the tutors to help them make sense of the theory in the course. This was considered especially important as many viewed themselves as learners in the oral tradition, and unused to the Western ways of analysis and interpretation of the written word.

#### CATSIN

CATSIN was seen as a positive influence for the participants. They believed that the organisation helped them to realise not only how they can benefit from the course but also how it can prepare them to help promote the image and health of Indigenous people in Australia. CATSIN was also considered as an important

source of role models and nursing schools that encouraged their involvement with the organisation were seen as supportive of their attempts to succeed in the course. Those participants who had attended a CATSIN conference reported how they found the experience to be very supportive and encouraging of their study. One participants described the conference experience as follows:

... you come to a CATSIN conference and you hear about cultural safety and you think, wow that's what I've just been through ... about grappling with those very issues.

#### Family and friends

Family and friends were an important support strategy. Many spoke of how family helped with encouragement, financial support, assistance with babysitting and relief from other usual responsibilities. For example, one participant said: 'I could not have succeeded unless I had a supportive family ... not only in my husband and my children, but also supportive in terms of my parents and my brothers and sisters.' Others spoke of how their group of friends, not necessarily other students, were important to their success because of the many forms of support they provided.

#### Other students

Other students were also a source of support to the participants. The participants talked of the help they had received from both Indigenous and non-indigenous students in the course. They also described how they had found their friendships and links with non-indigenous students to be very positive. Many of the students had formed study groups and some had forged individual friendships that they had found to be extremely rewarding. One participant said:

I was the only Aboriginal student that year ... the non-indigenous students that were doing nursing ... were terrific, they were really

great to me ... they had a study group and I was continually invited.

### **Mentoring by other Indigenous students**

The peer support from other Indigenous students enrolled in nursing or other courses was very valuable to the students. The participants described how these students were particularly supportive because they not only understood the content but also the issues from a cultural perspective. The students strongly encouraged the notion of a mentoring scheme where the Indigenous students in the year ahead mentor the students in the following year. For example:

... being able to talk to somebody about different things and knowing that they're coming from where you're coming from ... and we're not just mates at uni ... but standing up for each other because of our Aboriginal heritage.

### **Becoming part of the university/school culture**

#### **University orientation programs**

University orientation programs were deemed to be extremely beneficial by the Indigenous students interviewed in the study. They described these as useful ways to get to know the environment, the expectations of the university, where to go for lectures, and how to interpret the timetable. One participant expressed her thoughts as follows:

... well they had a lot of information about lectures and they helped us set up our timetables for our lectures and tutes and they gave us information about ATAS tutoring ... and they talked about scholarships ... and the technical things and showed us through the computer rooms and how to use them.

There was a general call for more emphasis on study skills, and literacy and numeracy pro-

grams during orientation weeks. Some universities also held orientation programs especially for Indigenous students and these were considered to be extremely supportive strategies by the participants. The participants described how such events made them feel accepted and welcomed by the staff.

### **Building networks**

The participants described the development of a sense of belonging that appeared to be related to the development of networks with other students, staff and other resource people. The opportunity to join together with other Indigenous nursing students was considered an important supportive strategy. One participant described it as follows:

... we get along and I go and see her outside of uni. So we're not just mates at uni and we're standing up for each other because of our Aboriginal heritage ... so having an Indigenous friend is really important to me.

The participants also described the importance of belonging to the larger group of nursing students and expressed the importance of building networks with non-Indigenous students enrolled in the same program. The participants told how they believed it was important to be considered as part of the larger group rather than be conceived as part of a small, segregated group. The fact that they would all need to work together one day as registered nurses appeared to be the motivator behind this belief.

### **Financial assistance**

Financial concerns were of paramount importance to the students in this study. Therefore any schemes considered helpful in reducing financial hardship were highly valued by the participants and deemed important to their successful tenure in nursing courses. Schemes such as Abstudy were welcomed as were the more recent Commonwealth and State government Indigenous scholarship schemes. One student said she would

not have been able to continue if she had not received a scholarship and another described the importance to her as follows:

I mean there definitely needs to be more funding scholarship wise ... with my scholarship there were 10 given to the Indigenous students and 100 given to non-Indigenous ... but if you want to encourage Indigenous people to be, ... you know getting out there and being a nurse, you're going to have to do better than 10 scholarships ... without it I wouldn't have been able to afford my computer and my books ... it has been a God-send.

Unfortunately not all students interviewed were in receipt of a scholarship and those students told of a continual struggle to survive while undertaking the course.

Other schemes such as text book bursaries and computer scholarships were also viewed positively by the participants. They had all found these to be helpful.

### **Qualities of the course**

#### **Flexibility within the course**

The participants were extremely positive about courses that offered flexibility. The ability to study part-time, as well as flexibility surrounding mode of delivery, subject selection, and assignment times was held as the key to success for many students. One participant described her situation as follows: '... cause I got to a stage where I was that stressed out and I was constantly sick ... being able to go part-time meant I could stay.'

#### **Indigenous content in the course**

A need to increase the Indigenous content in nursing curricula was a recurring theme in the study. The participants indicated that undertaking a nursing course that included relevant Indigenous content made them believe that Indigenous people were held in higher regard

by the institution/school. Similarly, the participants applauded schools that fostered strong links with Indigenous communities and the students studying at those schools described a strong feeling of acceptance. They reported this helped them feel more comfortable in the environment and led to a successful study outcome.

### **Individual motivation**

#### **Making use of available resources**

The participants indicated that taking advantage of the help that is available is an important strategy for success. The participants explained how it is important that the students become aware of the resources available to them and then ensure they make the best possible use to maximise successful outcomes. It was apparent during the course of the study that not all of the participants interviewed were actually aware of the entire range of support services available to them and as a result, they had missed out on potentially helpful support.

#### **Being determined**

A certain amount of determination is necessary in any academic endeavour. However, the participants in this study identified how it was important for them to remain determined in order to achieve their goals. They also described how some Indigenous students seemed to give up too easily and they believed they needed to be more determined to succeed. One student described the importance of this as follows:

... you know they think 'Oh this is too hard, you know I'll pull out' instead of thinking 'well this is hard, but I can get through it' ... like it is so much more of an achievement if you finish an assignment, put it in and, you're like, that was great.

#### **Fear of failure**

Fear of failure was described by participants as

a motivator and as a strategy that helps them to continue with their studies. The participants in the study described how the fear of failure was linked to a shame of failing that actually caused that fear to become a motivator for success. The fact that some of the participants' families had gone without to support them during the course also made the students fear failure. Some participants were also concerned that if they failed it would require them to repeat subjects and thus extend their period of study. One participant described this as follows:

... it's stressful as well, you're thinking you know what am I going to do if I fail? And what you're thinking is how much time it is going to put onto the end of your degree.

#### Taking advantage of available moments

Taking advantage of all available moments of time was described by the participants as a useful strategy for success. The students who used their time wisely described how they ensured that any spare time was dedicated to assignments or study. Some of the participants were of the belief that students who failed often did not make use of available time to their advantage and as a result, struggled to meet deadlines.

#### Past work experience

Past work experience was described as helpful to the participants in this study in a number of ways. Past experience as enrolled nurses or health care workers helped the participants to understand terminology as well as read and write reports. That experience also helped with clinical skill acquisition and seemed to help the students adapt more easily to the clinical learning environment. One participant described it as: 'I did my prac. [*clinical practicum*] in mental health and it helped because I've worked with suicide issues and self-harm in my previous work.'

## DISCUSSION

The findings of this study have revealed that a number of strategies proposed to increase Indigenous student recruitment and retention have been adopted by Australian schools of nursing. Unfortunately, however, the findings indicate that the support strategies have been adopted only sporadically, and even when in place, their outcome has yet to be evaluated.

The participants interviewed in this study indicated that the financial burden of undertaking a nursing degree greatly impacted on their potential for successful completion of the course. The severity of the impact of financial disadvantage was both surprising and alarming even though it has been mentioned previously (see for example the Report of the Indigenous Nurse Education Working Group, 2002). While the degree of financial difficulty varied across the participants, it remained a consistent concern expressed by many. This financial hardship may be similar to that experienced by non-Indigenous university students, for example the non-Indigenous students studied by Turale (1997), who found the financial burden of university study overwhelming. This group may be different in that the participants of this study described instances where they were expected to share the money they had with other family members; a cultural expectation not usually experienced by non-Indigenous students. Further, the fact that Indigenous students often enter the university system already disadvantaged in many ways including financially, may actually compound the situation.

Whilst Abstudy was accessed and deemed useful by the participants, they described many instances where obstacles interfered with their access to this service. For example, participants spoke of problems with the seemingly endless paperwork and others expressed disappointment about the process of accessing entitlements under this scheme. The new government scholarship schemes offered to Indigenous

nursing students have had a positive impact for those students receiving them. Receiving a scholarship was acknowledged by the participants in this study as a significant factor in their attainment of a nursing degree. Despite the advent of these scholarship schemes, many Indigenous students remain financially challenged. Not all participants in this study had been successful in attaining a scholarship because a limited number are available; this has a significant impact on those who miss out or who are deemed ineligible due to the level of earnings of their partner.

Cultural issues continue to jeopardise Indigenous students' opportunities for successful completion of nursing degrees. For some, the actual experience of the university system was so alien it was likened to a type of 'culture shock.' This is similar to the findings of Schwab (1996) who claimed that Indigenous students found universities to be unfamiliar and even hostile to their presence. Students also commented on the lack of Indigenous content in nursing courses. This is a concern given the current alarming state of Indigenous health in this country (McMurray, 2003). During the course of the study, it became clear that family commitment at times placed an added burden on Indigenous students, who often struggled to meet the challenges related to culture and kinship. Participants in this study described instances where university academics failed to understand or make allowances for these cultural obligations, a factor that has been previously noted in other studies (Schwab, 1996; Omeri & Ahearn, 1999). As a result, university academics and university culture were perceived as insensitive and inflexible. Given that most universities with high enrolments of Indigenous students offer cultural awareness training to their staff, the findings from this study indicate that the desired outcomes are not being achieved and the effectiveness of such training may need to be re-evaluated.

It was disappointing to find that some Indige-

nous students were unaware of the support services available to them at their university. Given that the government has committed substantial funding to this area, this problem needs to be addressed urgently. Those students who reported using the support services provided by the university, generally found them to be extremely useful and supportive. The ATAS tutoring scheme was also considered a very important study strategy by the participants, however it is important for students to be allocated tutors who have a background relevant to the student's area of study. It was also interesting to find that some of the strategies students identified as helpful to their progress were, in fact, not formal strategies but informal ones such as peer mentoring and family support.

### **SUGGESTIONS FOR FUTURE RESEARCH**

Due to the paucity of research on this topic the authors recommend further research be undertaken to explore the findings from this study. Further national research should also be undertaken to investigate the following:

- the extent to which Indigenous RNs participate in postgraduate nursing courses, particularly in specialty areas such as mental health and midwifery;
- improved partnership models between Indigenous groups and universities to enhance the recruitment and retention of students in all health courses;
- the effectiveness of cultural awareness workshops delivered to nurse academics;
- the roles played in health care by practising Indigenous registered nurses, and
- the development of flexible pathways by which Indigenous Enrolled Nurses and Aboriginal and Torres Strait Islander Health Workers can 'up-skill' into tertiary Bachelor of Nursing courses.

### **LIMITATIONS OF THE STUDY**

The use of a purposive sample, whilst appropri-

ate for the study, limited the sample size and therefore the outcome of the study. When reading the findings it must be remembered that the students who were not interviewed may have had different experiences. Access to potential participants was dependent upon the support of the universities conducting undergraduate nursing courses. At times this support was not forthcoming and therefore the sample size was not as large as the original intent.

## CONCLUSION

The 'third world' state of Indigenous health in Australia means that strategies at many levels and within many sectors must continue to be employed in order to reverse the alarming trends in many health indicators. Nurses constitute the largest component of the health workforce, particularly in rural and remote areas, where large numbers of Indigenous people live. While the number of Indigenous Registered Nurses is low, there are positive signs that this is improving.

The purpose of this paper was to outline the challenges faced by Indigenous nursing students and to describe the strategies the students found helpful to their progress. A descriptive qualitative study was undertaken to explore the issues. Despite the limitations of the study, the authors found that students were faced with many, often-competing challenges of a socio-economic, pedagogical, cultural and inter-relational nature. The strategies identified by the students as helpful to their success reinforced the need for universities to continue to improve the processes by which Indigenous students are identified and supported within the university system. Clearly, further research is required to explore the complex relationships between Indigenous health, education pathways for Indigenous nurses, and the development of the Indigenous nursing workforce.

## Acknowledgements

This project was supported by a Queensland

Nursing Council grant (Grant No. 02030) and the views expressed do not necessarily represent the views of the Council or the members, executive officer or staff of the Council. We would also like to acknowledge Judith Sellen, the research assistant to the project, and Sue Turale and Teresa O'Connor, members of the original research team. We would also like to thank the students who participated in the project and the liaison persons who assisted with data collection.

## References

- Armstrong, F. (2001) Australia needs more Aboriginal nurses. *Australian Journal of Nursing* 8(9): 28–30.
- Australian Bureau of Statistics (ABS) (2002) *Commonwealth of Australia*, Canberra.
- Australian Institute of Health and Welfare (1999) *Health and welfare of Australia's Indigenous peoples*, Canberra.
- Crawford, L. (1988) Recruitment and retention of nursing students from diverse cultural backgrounds. *Journal of Nursing Education* 27(8): 379–381.
- Creswell, J.W. (2003) *Research design. Qualitative, quantitative and mixed methods approaches*. Thousand Oaks, CA: Sage.
- Department of Education, Training and Youth Affairs (DETYA) (1999) *Selected higher education student statistics*. DETYA, Canberra.
- Goold, S. (1995) Why are there so few Aboriginal registered nurses? in: J. Gray and R. Pratt (eds), *Issues in Australian Nursing*, pp. 235–252. Churchill-Livingston, Sydney.
- Hunter, B. and Schwab, R. (1998) The determinants of Indigenous educational outcomes. Discussion Paper No. 160. Australian National University, Canberra.
- Kunitz, S.J. (2000) Globalization, states, and the health of indigenous peoples. *American Journal of Public Health* 90(10): 1531–1539.
- Lovett, R. (2002) *New South Wales Aboriginal Education Unit Survey for Aboriginal Undergraduate Nursing Student Numbers NSW*. Health Department: Sydney.
- Lovett, R. (2003) The NSW Rural and Remote Aboriginal Nursing Strategy. Paper presented at

- the 7th National Rural Health Conference, Hobart, 1–4 March.
- Maslen, G. (1999) Aborigine Enrolment Increases in Australia. *The Chronicle of Higher Education*, May 7, p.A55.
- Matthews, J. (1997) Historical, social and biological understanding is needed to improve Aboriginal health. *Recent Advances in Microbiology*, 5: 257–334.
- McMurray, A. (2003) *Community health and wellness: a socioecological approach*. Mosby, Marrickville NSW.
- Meiklejohn, B., Wollin, J.A. and Cadet-James, Y. L. (2003) Successful completion of the Bachelor of Nursing by Indigenous people *Australian Indigenous Health Bulletin* 3(2).
- National Aboriginal and Torres Strait Islander Health Council (2001) *National Aboriginal and Torres Strait Islander health strategy consultation draft*. Canberra.
- National Aboriginal and Torres Strait Islander Health Council (2003) *National Strategic Framework for Aboriginal and Torres Strait Islander Health*. AHMC, Canberra.
- National Aboriginal and Torres Strait Islander Health Council (2004) *National Strategic Framework for Aboriginal and Torres Strait Islander Health 2003–2013*. Framework for action by Governments. AHMC, Canberra.
- Omeri, A. and Ahearn, M. (1999) Utilising culturally congruent strategies to enhance recruitment and retention of Australian Indigenous nursing students. *Journal of Transcultural Nursing* 10(2): 150–155.
- Page, S., Farrington, S. and Daniel DiGregorio, K. (1999) Promoting academic success through valuing and supporting diversity among Indigenous students in a block mode health science program. HERDSA Annual International Conference, Melbourne, 12–15 July.
- Polit, D.F. and Tatano Beck, C. (2004) *Nursing research: principles and methods*. 7th edn. Lippincott Williams & Wilkins, Philadelphia.
- Report of the Indigenous Nurse Education Working Group (2002) 'Gettin em n keepin em'. *Report to the Commonwealth Department of Health and Ageing, Office of Aboriginal and Torres Strait Islander Health*, Canberra. p 127.
- Schwab, R. (1996) *Indigenous participation in higher education: culture, choice and human capital theory*. Centre for Aboriginal Economic Policy Research, Australian National University, Canberra.
- Schwab, R. and Anderson, I. (1999) *Trends in Indigenous participation in health sciences education: the vocational education and training sector, 1994–1997*, Discussion Paper No. 179/1999, Australian National University, Canberra.
- Sinnott, M. and Wittmann, B. (2001) An introduction to Indigenous health and culture: The first tier of the three tiered plan. *Australian Journal of Rural Health* 9(3): 116–120.
- Standing Committee on Aboriginal and Torres Strait Islander Health (2002) *Aboriginal and Torres Strait Islander Health Workforce National Strategic Framework*. AHMAC, Canberra.
- Streubert, H. and Carpenter, D. (1999) *Qualitative Research in Nursing: Advancing the Humanistic Imperative*, 2nd edn, Lippincott, Philadelphia.
- Thomson, N. (1991) A review of Aboriginal health status, in: *The Health of Aboriginal Australia*, eds. J. Reid and P. Tromph, Harcourt, Sydney.
- Thomson, N., Murray, R., Ring, I. and Garrow, S. (2003) Aboriginal health status. in: Couzos S, Murray R, Kimberley Aboriginal Medical Services' Council (eds) *Aboriginal Primary Health Care: An evidence-based approach* 2nd edn, pp. 38–60. Oxford University Press, Melbourne.
- Turale, S. (1997): *Living below the poverty line: A phenomenological study of the experiences of students at the University of Ballarat*. Unpublished doctoral thesis, University of Melbourne, Australia.
- Weaver, H.N. (2001): Indigenous Nurses and Professional Education: Friends or Foes? *Journal of Nursing Education* 40(6): 252–258.
- Wilson, J. (2001): Remote Area Aboriginal Health Services Managers: Key Practice Challenges. *Australian Journal of Rural Health* 9(3): 138–140.
- Womack, R. (1997): Enhancing the success of Native American nursing students. *Nurse Educator* 22(4): 22–36.