Academic Staff Perceptions of Factors Underlying Program Completion by Australian Indigenous Nursing Students

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An increase in the number of Indigenous health professionals is one way to help reduce the poor health outcomes of Australia's Indigenous people. However, while Indigenous students are enrolling in Australian tertiary undergraduate nursing courses in increasing numbers, their completion rates remain lower than non-Indigenous students and many barriers hinder course completion. This critical interpretive qualitative study explores academic staff perceptions of factors enabling successful course completions by Indigenous nursing students from universities in Queensland, Australia. Content analysis of data revealed five themes: (a) Individual student characteristics; (b) Institutional structures, systems, and processes; (c) Relationships, connections, and partnerships; (d) Family and community knowledge, awareness, and understanding; and (e) Academics' knowledge, awareness, and understanding. To increase the number of Indigenous nurses, strategies such as appointing Indigenous nursing academics; partnerships between nursing schools and Indigenous Education Support Units, and the implementation of tailored cross-cultural awareness programs for nurse academics are proposed. Keywords: Academic Staff, Indigenous Undergraduate Nursing Students, Completion Rates, Strategies, Critical Qualitative Study, Strengths Based

A well-trained and culturally competent nursing workforce is paramount for reducing the poor health outcomes of Australia's Indigenous people and to ensure that care is delivered in a culturally appropriate way (Indigenous Nurse Education Working Group INEWG (INEWG) Report, 2002; Goold & Usher, 2006; West, Usher, & Foster, 2010a). While Indigenous students are now enrolling in Australian tertiary undergraduate nursing courses in increasing numbers, their completion rates remain lower than those of non-Indigenous students (West, Usher, Buttner, Foster, & Stewart 2013). We are aware that many barriers stand in the way of the success of these students, which may account for the anomaly in program completion by Indigenous students. For example, Indigenous students have reported barriers to their success in nursing programs such as financial concerns, difficulty adjusting to the university system, family commitments, and difficulties with the learning demands (Usher, Lindsay, Miller, & Miller, 2005b; Usher, Cook, Miller, Turale, & Goold, 2005a).

Indigenous students also tend to be older and have more family and social responsibilities and dependents than their non-Indigenous classmates (Devlin, 2009).

In recognition of the need for an increased Indigenous nursing workforce and the barriers faced by Indigenous nursing students numerous national and state government and nursing organizations have developed strategies to ensure an increase in the number of Indigenous nurses. For example, scholarships to help Indigenous nursing students overcome financial hardships have been implemented through schemes such as the Commonwealth Undergraduate Rural and Remote Nursing Scholarships (CURRNS). Ten of the 30 scholarships are designated for Indigenous nursing students. Similarly, the *Queensland Health* Rural *Scholarship Scheme* (QHRSS) has specific nursing scholarships of which a number are designated for Indigenous nursing students (Usher et al., 2005a). More recently, the Commonwealth Indigenous Cadetship Support (ICS) Program of Queensland Health has been successful in setting aside 80 cadetships for Indigenous nursing students in Queensland.

While the research around the barriers faced by Indigenous nursing students is important and must not be downplayed, Devlin (2009) challenges us to focus instead on success and to work towards understanding why some students manage to succeed despite the barriers they may face. Devlin (2009) identifies the need for evidence-based evaluation of current courses and qualitative in-depth exploration of the experiences of successful Indigenous students and graduates. Smith, McAlister, Tedford-Gold, and Sullivan-Bentz (2011) acknowledge that we have yet to identify how to offer experiences and contexts that foster success for these students. Research that explores the experiences of Indigenous students from a strengths based position, that is, research that looks for enablers to success rather than barriers, is limited to one study to date (West et al, 2013).

Prior research on non-indigenous academic staff preparedness to effectively teach Indigenous students indicates a general lack of knowledge, awareness and understanding of cultural issues that impacts negatively on students' success rates (Goold & Usher, 2006; INEWG, 2002; Usher Usher, Miller, Lindsay, Miller, O'Connor, Turale, & Sellen, J, 2003; Usher et al, 2005a; West et al., 2010). In addition, it has been claimed that non-Indigenous academics are often uncertain about whether students should conform to the academic culture of universities, or whether universities should accommodate the needs of Indigenous students (Dickerson & Neary, 1999). However, Indigenous students have reported that culturally aware teachers facilitate their success (Curran, Solberg, LeFort, Fleet, & Hollett, 2008; Yurkovich, 2001), and offer effective and appropriate support (Evans, 2004). From a strengths based approach however, we were unable to locate any previous research that explores the perspective of academic staff responsible for developing and implementing nursing courses and the factors they believe are relevant to Indigenous nursing students' success. In the following paper, we provide the findings of a qualitative study undertaken to explore academic staff perception of enablers of successful completion by Indigenous nursing students.

Non-Indigenous nurses and other health workers have tended to ignore the social determinants of health that impact on Australian Indigenous people today: poverty, the ongoing impact of colonialism, homelessness, poor access to health services, and the bureaucracy of the medical system (Humphery, 2001). As a result, there has been a push to increase the numbers of Indigenous nurses (West, et al., 2010b), as well as Indigenous doctors and allied health workers, as a way of overcoming the health issues rampant in Australian Indigenous society. In fact, regardless of the imperfection of the nursing profession at times, there has been a recent move to develop strategies to recruit, retain and develop our people through its ranks (for example the Queensland Health Aboriginal and Torres Strait Islander Nursing and Midwifery Strategy, 2010–2012) (Queensland Health, 2009). We contend that Indigenous nurses are in a unique position to improve the health of

Indigenous people. Indigenous nurses know their communities ways, they know their culture, and they know the disadvantage they face. In addition, Indigenous nurses are committed to care for their own people (Stuart & Nielsen, 2011), and understand the reluctance of Indigenous Australians to access mainstream health care services or receive treatment from non-Indigenous health workers (Paradies, Harris, & Anderson, 2008).

Researcher position

The principal researcher and first author is an Australian Indigenous nurse; a Kalkadoon woman North West of Queensland. Because of the appalling state of Aboriginal health in my country I was keen to undertake education in the health area. I began and completed a nursing degree on my country after which I moved to the coast to complete a graduate program in mental health and then a Masters in mental health nursing. Eventually I completed a PhD because I saw being well educated as a way to empower myself to in turn empower my people and help improve their health outcomes. My experiences in nursing including nursing education have led me to recognise the importance of utilizing the effectiveness of the nursing profession in improving the circumstances facing our people and how developing and delivering programs responding to these circumstances, requires the input of our people.

It is our combined understanding that Indigenous Australians have higher levels of ill health and mortality than their counterparts (Paradies et al., 2008). Australian Indigenous people are the most disadvantaged in Australian society; suffering high rates of unemployment and incarceration in prison, receiving low levels of income compared to other Australians, living in substandard housing, and experiencing poor health and high mortality. Indigenous Australians are three times more likely to be admitted to hospital than non-Indigenous Australians and experience high rates of risk factors such as smoking, substance misuse, and exposure to violence, lack of exercise and obesity (AIHW, 2009).

Methods

Approach

The study used an Indigenist approach informed by a critical perspective (West, Stewart, Foster & Usher, 2012), which is respectful of Indigenous knowledge and belief systems. Saunders, West, and Usher (2010) contend that Indigenous people have an obligation to conduct research in ways that respect their values and traditions. Indigenist and other critical researchers are cognizant of the need for communities to take control of their futures and seek to undertake research in ways that foster emancipation, democracy, and empowerment while at the same time seek to redress the power imbalances so that those who were previously marginalized can find their voice (Lincoln & Guba, 2003). As explained by Kincheloe and McLaren (2003), in this way, researchers openly admit their intent to struggle for a better world for all. Indigenist research is defined as "…research by Indigenous Australians whose primary informants are Indigenous Australians and whose goals are to serve and inform the Indigenous liberation struggle to be free of oppression and to gain power" (Rigney, 1999, p. 120).

This study was part of a larger, mixed-methods study undertaken to explore the factors involved in Indigenous nursing student enrolment and completion. (West et al., 2013). A mixed method design was chosen as appropriate for the study. Mixed methods studies are appropriate when it is necessary to explore both objective and subjective areas in order to answer the research questions and when the research questions cannot be answered

sufficiently by a single approach (Morse & Niehaus, 2009). Basically, mixed method research is the combination of quantitative and qualitative approaches in one study, where the joining together of the two approaches is considered a better way to understand a problem than if either approach was undertaken alone (Creswell & Plano Clark, 2007; Elliott, 2005; Tashakkori & Teddlie, 2003). Mixed methods designs are considered stronger designs than ones that use a single approach only, as the supplemental component is thought to enrich understanding and enhance validity (Morse & Niehaus, 2009).

The larger study included a quantitative phase that collected and analysed all available Australian data on Indigenous nursing student commencements, progress and completions, while the critical interpretive qualitative phase focused on students' and staff stories of success (West et al., 2013) that offered deeper understanding of the issues arising in the first phase of the study. In this current paper we present the Academic staff perceptions of the factors involved in successful Indigenous

Participants

Purposive sampling was used to recruit 15 academic staff members involved in supporting Indigenous nursing students in the final year of an undergraduate nursing course in Queensland. Academics were drawn from five Queensland universities. The universities were chosen because they had been enrolling nursing students since the seminal "Getting em n keepin em" Report was released in 2002, and Queensland was chosen as it has a very high population of Indigenous people and Indigenous nursing students. Participants included two male and 13 female academics ranging in age from 32 years to their early 60s. Academic levels of experience ranged from 1 to 20 years in university settings, as well as many more years of experience as nurses in clinical environments. Seven of the academics identified as Indigenous and the remaining eight were non-Indigenous. Academic roles included heads of schools, academic advisors, first-year coordinators, and Indigenous student support roles (see Figure 1). Participants were recruited through advertising, recommendation, and word of mouth.
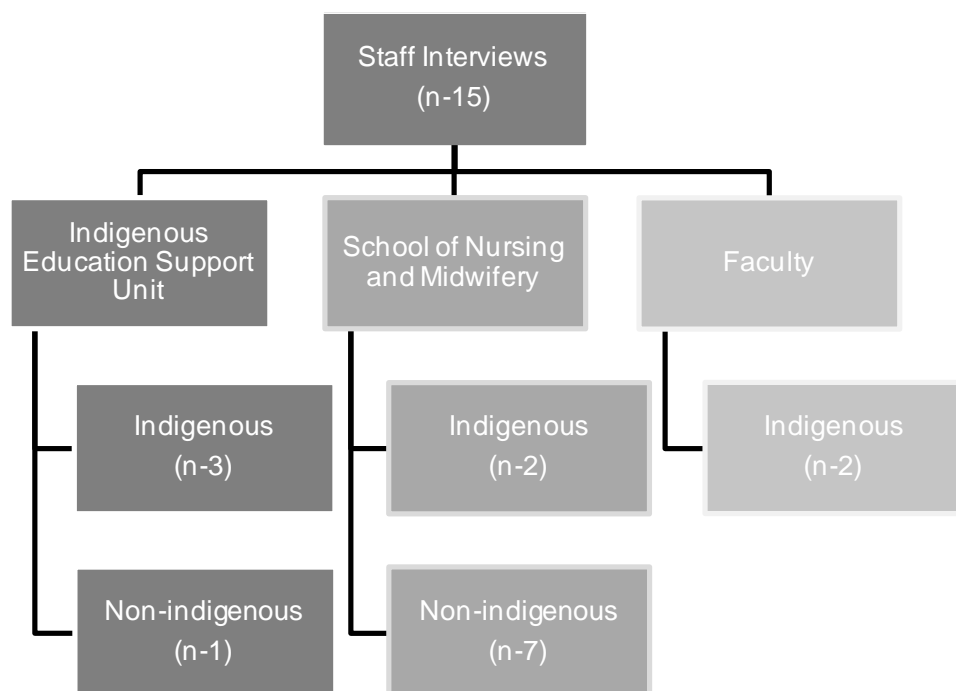

Figure 1: Staff interview map.

Ethical Considerations

Ethical approval was received from the relevant Human Research Ethics Committees of the participating universities and, importantly, met the requirements for research with Indigenous Australians, which included the National Health and Medical Research Council (2003) *Values and Ethics in Aboriginal and Torres Strait Islander Health Research* guidelines, of which there are six principles that guide the researchers. These are reciprocity, respect, equality, responsibility, survival and protection, spirit and integrity. Participants were provided with an information sheet and provided written informed consent if they agreed to be interviewed. The participants were reminded that they could stop the interview at any time without any repercussions. Pseudonyms were allocated to all transcripts to ensure confidentiality and all data were stored securely during the research process.

Interviews

Data were gathered through in-depth, semi-structured interviews. Interviews were from one to two hours long and included questions related to staff perceptions about what enhanced student success in the program and strategies that helped students to succeed. Interviews were conducted by the first researcher at a time and place chosen by the participant. All interviews were audio-taped with consent, transcribed verbatim, and stored for analysis. Questions such as:

"What do you think were the factors that have contributed to you successfully completing the nursing program?" were asked of the participants.

The questions arose from the first quantitative phase of the study and were developed to help unravel and explain the quantitative findings.

Data Analysis

Data were analyzed using content analysis. Content analysis, a common approach to qualitative data analysis, is defined as a process of coding and identifying themes or patterns (Hsieh & Shannon, 2005). It is a useful form of data analysis when some degree of interpretation is required, such as in qualitative studies, but it does not allow for the description of each and every aspect of the data, as is the case with analytical methods such as hermeneutics (Schreier, 2012). Schreier (2012) explains that in content analysis it is the research question that determines the angle from which the data is examined. In the case of this study we aimed to examine the data for evidence of enablers of student completions so content analysis was considered a good fit. The first author undertook the analysis using NVivo. The team discussed the codes and themes to determine their fit with the research question, their link to the data and their representativeness of the stories heard during the data collection.

Interview transcripts were de-identified and coded for enablers of success. The iterative coding process resulted in identification of five enablers of student success. Data were managed utilizing the qualitative software analysis package NVivo. NVivo was used to classify, sort, and arrange information; including the frequency of codes and themes (See Table 1); and to examine relationships in the data (See Table 1 and 2). Data saturation occurred after interviewing 15 participants, with the same information being heard, and interviews were discontinued.

Rigor and Trustworthiness

Trustworthiness was enhanced by regular meetings of members of the research team to discuss the themes as they emerged. Codes and emergent themes were presented to the group alongside raw data. Discussion was continued until consensus was reached (Strauss & Corbin, 1990) Rigour was supported by the purposeful inclusion of participants who had experience with the phenomenon under investigation, an important consideration when the aim is to gain an in-depth understanding of a phenomenon, and by the keeping of an audit trail that can be followed by others (Roberts & Priest, 2006).

Results

The factors involved in student success were organized into five major themes and related sub-themes as outlined in Table 1. Major themes are

(i)   individual student characteristics;
(ii)   institutional structures, systems, and processes;
(iii)   relationships, connections, and partnerships;
(iv)   family and community knowledge, awareness, and understanding; and
(v)   academics' knowledge, awareness, and understanding.

In the following themes, participants are identified as either non-Indigenous academics (NIA) or Indigenous academics (IA).

Table 1: *Factors Underlying Program Completion by Australian Indigenous Nursing Students as Identified by Academic Staff*

Theme	Sub-themes	Frequency
Individual student characteristics	I. Motivations for choosing nursing II. Personal attributes for success III. Life and work experience IV. Appropriate timing	244
Institutional structures, systems, and processes	I. University leadership II. Teaching and learning III. Policy and procedures IV. Support from university leadership	170
Relationships, connections, and partnerships	I. Nursing schools and Indigenous Education Support Units II. Indigenous nursing students and other students III. Indigenous students and wider university resources IV. Indigenous students and academics V. Indigenous students and industry	157
Family and community	I. Family and community understanding of university II. Support from family and community	

| knowledge, awareness, and understanding | III. Complex social issues
IV. Family and community obligations and responsibilities | 127 |
| Academics' knowledge, awareness, and understanding | I. Indigenous academics (nursing and others)
II. Non-Indigenous nursing academics | 64 |

Table 2: Example of thematic analysis

Individual Student Characteristics

During the interviews, the factor most often raised by academics as enabling student success was *individual student characteristics.* The theme encompasses four sub-themes:

(i) motivations for choosing nursing,
(ii) students' personal attributes,
(iii) life and work experiences, and
(iv) timing.

The model in Figure 2 was derived from the words that the academics used throughout the interviews when asked what they thought contributed to students' successful progression. The staff felt that student motivations for choosing nursing were very important to their success. For some students it was a personal obligation to give something back to their people. One participant said, *"... he felt that he wanted to give something back to his people... his people had believed in him enough to trust him to do something positive and he wasn't going to let those people down."* (NIA)

Another said,

There was another student ... she'd been a health worker for such a long time, and she wanted to be able to do more. And she thought being a nurse she could, and she wanted to do it because she's an elder and she wanted to set an example, a role model for younger people. (NIA)

Others thought being the first from their family was strong motivation for students' success: *"For some of them, it's that pride, being the first one in the family to get a university degree."* (IA)

Staff thought that personal attributes, such as student attitude towards being a student and the strength of their Indigenous identity, contributed to students' resilience, helped them overcome racism, and enhanced their ability to become independent learners. Attributes included persistence and determination, belief in themselves, being independent and organized, and having initiative.

Guess they've gotta [sic] have that belief in themselves that if they ask for help they can do it. So then, in that sense too, they've got to have faith in the institution that help is forthcoming if they ask for it and that, plus their

resilience will get them over the line. (NIA)

For some students, it was the strength of who they were as an indigenous person that staff considered helped keep moving forward in their studies. "*They've actually embraced their culture, embraced who they are, and they believe in themselves.*" (NIA)

Critical to the success of Indigenous students, irrespective of the available support, was timing. This included the timing of undertaking the nursing course and studying in relation to their family and community roles and responsibilities. Timing also extended to the complexity of their social needs such as housing, income, and childcare, and the personal health of the students, their families, and communities. "*There's [sic] certain social reasons ... they've just been on struggle street, you know, emotionally for so long that it becomes overwhelming. And sometimes, time is the only thing that helps*" (IA).

Figure 2: Sub-theme II model of student personal attributes for success.

Institutional Structures, Systems, and Processes

Academic staff reported *institutional structures, systems, and processes* as the second most frequent theme. Staff recognized how the structures, systems, and processes of the university could enable Indigenous students as they undertook a nursing degree. The theme encompasses four sub-themes:

(i) Staff leadership,
(ii) teaching and learning,
(iii) policy and procedures, and
(iv) support from the system.

Leadership from the university, including faculty and administration is an important factor in student success. The stories shared by participants indicated that staff perceive that the school and other senior staff are important in influencing the outcomes for Indigenous students. This included acknowledgement of, and respect for, students' dignity. Support from all academic levels was critical to Indigenous students' success. One academic spoke of the vital support from university deans:

The Dean of the department is obvious in the support that she wants Indigenous students to get. And we have a joint head of department and

*they're obvious in what they want for Indigenous students. So there's [sic] a
lot of support for the Indigenous students to succeed. In fact, it's very hard for
them to fail, if everything is set up and they take advantage of everything it
would be pretty hard to fail. (NIA)*

Teaching and learning as a factor in students' success refers to culturally inclusive teaching and learning practices along with embedding Indigenous content into the curriculum. Academics' consideration of different student learning styles was an important issue. One academic also identified the importance of understanding the significance of culture in learning. "*It is so powerful. Culture determines how you learn....*" (NIA)

The importance of including Indigenous knowledge and recognizing the importance of Indigenous ways of knowing and Indigenous culture was also raised by participants. *"One of the things with nursing when we looked at the embedding, it's all the way through... every subject, every unit, Indigenous parts are embedded in it... it's not just that 'tag on'."* (IA)

The inclusion of Indigenous health, knowledge, and culture in specific course units was considered important recognition for Indigenous nursing students. The need for integrating Indigenous health, knowledge, and culture into the curricula was highlighted:

*I would like to see it integrated, because then it takes away that stigma that
Indigenous health is one issue and health for the rest of the world is this
issue... I think what should be done is it's put in context. (NIA)*

While staff recognized the importance of academic policy and procedures, they also acknowledged the need for flexibility in relation to indigenous students, in relation to assessment processes, alternative progression, and the variation in study loads. One academic stated:

*The system needs to be made as flexible as they can be. And to assess people
as their situation is – not some generic idea of what 'an Indigenous student'
ideally needs. What does this student need? Where are they coming from?
What's likely to be the kinds of hurdles and difficulties that they're going to
face? For some of them it might be academic skills, others it might be just
having time and space to study. (NIA)*

Relationships, Connections, and Partnerships

Key relationships, connections, and partnerships were identified as facilitative of student completions. They included those between

(i)   nursing schools and the Indigenous Education Support Units (IESUs);
(ii)   Indigenous nursing students and other students (Indigenous and non-Indigenous nursing students and other Indigenous students);
(iii)   Indigenous nursing students and Indigenous and non-Indigenous academics;
(iv)   Indigenous nursing students and the wider university; and,
(v)   Indigenous nursing students and industry.

The importance of relationships, connections, and partnerships in the successful completion of Indigenous nursing students was captured by one non-Indigenous academic:

I think a critical mass of students that are confident and articulate students who can help the less confident ones and metaphorically hold their hand, and the serious emphasis in my view, on working with – not just the Indigenous support officer – but the Indigenous Education Support Units, the faculty and its support services and so on is what's going to make the difference. (NIA)

A further important factor in regard to Indigenous nursing student completion rates was the relationship between nursing schools and the Indigenous Education Support Units. All of the universities in this study had an Indigenous Education Support Unit. The units provided support to Indigenous students, helped create a network of Indigenous students and academics, and provided an Indigenous presence on university campuses.

We are involved in every aspect of the university, and the schools of nursing need to appreciate what we do, for the success of their program. (IA)

One non-Indigenous academic identified that successful progression at their university depended heavily on the relationship between the Indigenous Education Support Unit and the School of Nursing.

"...It depends again on the relationship with the Indigenous Education Support Unit and the academics that are in that particular school on that particular campus." (NIA)

At some universities, Indigenous Education Support Units are the first point of contact within the university for Indigenous student issues. The academic went on to say that the units were also the university's connection to the wider Indigenous communities. The units facilitate the connection of students to family through such strategies as family picnics and other social gatherings. For the nursing schools that had an Indigenous nursing academic, there were clear delineations of roles between them and the Indigenous Education Support Units in supporting students' progression. A non-Indigenous academic eloquently describes this:

There's a difference between what an Indigenous nursing academic can do and what the Indigenous Education Support Unit can do. The Indigenous Education Support Unit provides support – really critical and important support – but I think having the academics, who are part of the academic department who are nurses who are teaching nursing and they are Indigenous is really important. They do things that the Indigenous Education Support Unit can't do. (NIA)

The connections and support between Indigenous nursing students and other students, including other Indigenous nursing students, were also considered important enablers. Other important connections included the relationship between Indigenous nursing students and Indigenous academics, which was described as unique. One Indigenous student support officer identifies the importance of having someone "neutral" outside of the School of Nursing for students to be able to talk to confidentially and without fear of possible repercussions:

I think it's on that personal thing, you know, the personal relationship that's been built... because we're Murri, we're blackfellas... You gotta [sic] have

that relationship with them for them to open up and talk to you...but it could be something little like that has been blown out of proportion, but to get to find out what that is, you gotta [sic] have that relationship. (IA)

The relationship between Indigenous nursing students and non-Indigenous academics was also critical to Indigenous nursing student success. A non-Indigenous academic shares his experiences:

Initially, they're almost always shy and reserved. I have to make a concerted effort to encourage them to talk to me and interact with me, and – I assume – until I win their trust, once that hurdle is over or crossed, then that works well... they need a different sort of relationship with the lecturers to non Indigenous students... I think their expectations of academics is different, and it's not the sort of relationship that you normally find in an Anglo-Celtic university, which is most academics; fairly rigid about how much they'll give of themselves, how much time they're prepared to put into each student... I have a common debate about the meaning of equity. So many academics really think that equity means treating every student exactly the same. And that disadvantages the students who are different, particularly Indigenous students. So they won't give that extra bit to an Indigenous student because they think it's unfair on the non-Indigenous students, and they can be a bit resistive towards academics who do give it as well... Indigenous students are different. I think they learn differently and I particularly think they need a much more personal relationship with the academics for them to actually learn. (NIA)

Participants considered that the relationship between Indigenous and non-indigenous academics often determined the success of the programs.

Academics were also clear that there was the need for Indigenous students to be connected to the wider university services and that there was sometimes a tendency for Indigenous students to restrict their contact to Indigenous services.

I know we've got an identified support unit, and I know we've got an Indigenous academic, and I know we've got the Indigenous nursing support person, but somehow all of those things have to be maybe made more obvious to students, such as they want to use the support. A lot of the support in the university goes unused. (NIA)

Family and Community Knowledge, Awareness, and Understanding

Family and community knowledge, awareness, and understanding was the least frequently referred to enabler of Indigenous nursing student success. The theme encompasses four sub-themes:

(i)   understanding the university,
(ii)   support,
(iii)   obligations and responsibilities, and
(iv)   complex social issues.

Staff considered how well the family and community understood the university as an

important enabler for student success. It was also helpful for the academic or support staff to understand the student's background. *"Some of the family might not understand what the kids are going through, because of their own education, but they're so proud and they want their kids to get through."* (IA)

Family and community support was considered pivotal to Indigenous nursing student success. This included the family and community having an appreciation of the demands placed on the student by the university and by their family and community responsibilities and the potential for this to impact their studies.

> *There seems to be a big factor in terms of family support. If the family says, "we really want you to go to university it's really important that you succeed and that you get in," those students will generally succeed... That's a really big factor, the family and community support. (NIA)*

Academics' Knowledge, Awareness, and Understanding

The knowledge, awareness, and understanding of both Indigenous and non-Indigenous academics of cultural considerations for Indigenous nursing students, in particular the potential for these to impact students' academic performance, was an important enabler and consisted of three sub-themes:

(i) Indigenous academics' knowledge, awareness, and understanding;
(ii) non-Indigenous academics' knowledge awareness, and understanding; and
(iii) ways forward.

Both Indigenous and non-Indigenous academics identified that it is incumbent upon Indigenous Nursing Academics to support, mentor, and lead the Indigenous students *and* their non-Indigenous colleagues. They considered that Indigenous nursing academics provide a distinctively different role to non-Indigenous academics. *"A non-Indigenous academic could give the support...but they wouldn't have the same understanding of Indigenous issues"* (NIA). *"It gives them inspiration. Feeling honored that they are being taught by an Indigenous person, it's unique"* (NIA).

An Indigenous nursing academic is personified as an Indigenous person, a member of the nursing academic team, and a registered nurse. This brings a unique and innate knowledge, awareness, and understanding of the issues that impact the Indigenous nursing students. A non-Indigenous nursing academic stated, *"The Indigenous nursing academic can talk from a lived experience point of view, rather than the rest of us, which can say, 'Well, I've worked with Indigenous people, but I haven't lived it.'"* (NIA)

The Indigenous nursing academic was seen to provide guidance, mentorship, and leadership to students through challenging times, situations, and experiences. *"I try and keep them focused on the positives of study; that they're going to have stress in their life anyway, but this is a good stress that actually leads to somewhere good."* (IA)

Staff also perceived the value of an Indigenous nurse academic to include helping students navigate the systems and processes of the university, to provide support and leadership. They also helped non-Indigenous staff understand Indigenous culture and history. Non-indigenous academics discussed the importance of developing their awareness and understanding of Indigenous culture and history. This was considered an important strategy to understand Indigenous nursing students and in turn helped them to succeed.

[Academics need to] do their own reading, get up to speed on history-based relations in Australia and then start talking about specific issues and the way in which that history manifests itself in education and things that happen in their education. So they get that real sense of what's gone on before and what's their role in it. (NIA)

Non-Indigenous academics also discussed the importance of recognizing that Indigenous issues are not the same as multicultural issues. *"It's not multicultural, it's [a] totally different issue. Multiculturalism is one issue – working with Indigenous students is a totally different issue in that you've got to consider different history, where they're coming from"* (NIA).

Some non-Indigenous academics discussed the importance of understanding the concept of equity and the potential for the academic's level of understanding to impact their ability to appropriately address the unique needs of students.

Make sure that their awareness and knowledge is continually reviewed and that they don't box us in, box all of our students ...because everybody is not the same. We actually probably cross a lot of equity groups... low socio-economic, Indigenous, female ... the more characteristics you have, of an equity group, the more needs that are required. (IA)

Academics indicated that leadership by Indigenous nursing academics (and Indigenous nurses in general) was important to ensure that the issues pertaining to Indigenous nursing recruitment, retention, and completion remained on the agenda. A non-Indigenous academic stated:

Indigenous nurses are needed in Indigenous health. You can have as many white, yellow, brindle people working with Indigenous people, but unless you have Indigenous nurses working with Indigenous people... you can have an understanding, but you don't actually understand where the person is coming from. (NIA)

It was agreed by all the academics that the successful progression and completion of Indigenous nursing students was an important issue. They shared three strategies based upon their experiences. These included

(i)   a commitment from every academic in the nursing school towards supporting students;

(ii)   ensuring there was an appropriate person such as an Indigenous support academic in a key position to guide the Indigenous students, and, non-indigenous Academics and

(iii)   non-Indigenous academics contributing to creating a culture in the department that Indigenous completions was everyone's responsibility.

Discussion

Historically, the relationship between Indigenous and non-Indigenous Australians has been fragmented, which has led to tensions on many levels and in many environments, including the university system. As a result, Indigenous students often find themselves in

conflict with the practices and procedures of the educational institution (Yurkovich, 2001). However, the staff interviewed in this study considered that effective leadership and sound academic policies and practices could help the Indigenous students, as could effective teaching and learning practices, and appropriate support. Others have previously criticized the university environment as detrimental to Indigenous student success (Iwasiw, Goldenberg, & Andrusyszyn, 2009; Usher et al., 2005a; Turale & Miller, 2006). Unfortunately, research has indicated that Indigenous students often feel pressured to change their personal values to accommodate the needs of the university, which is considered oppressive (Dickerson, Neary, & Hyche-Johnson, 2000), and academics are often uncertain about whether the students should conform to the academic culture or whether they should accommodate the needs of the students (Dickerson & Neary, 1999). However, Indigenous secondary school students have reported that their success is facilitated by culturally aware teachers (Yurkovich, 2001; Curran, Solberg, LeFort, Fleet, & Hollett, 2008) and effective and appropriate support (Evans, 2004). Therefore, the findings in this study are consistent with previous literature on factors that influence Indigenous students' success at university.

The individual characteristics of the Indigenous students, particularly their motivation for choosing nursing as a career and determination to complete a nursing degree, were identified by academics as paramount to success. While previous research has identified characteristics involved in success, such as family, individual student factors, and educational preparation (Anonson, Desjarlais, Nixon, Whiteman, & Bird, 2008; Martin & Kipling, 2006; Usher et al, 2005c) this study is the first to identify the importance of motivation for undertaking nursing as a significant predictor of student success. In addition, the participants outlined the importance of the students' own Indigenous identity and how that facilitated their progress through the system. Universities have been criticized in the past because of such issues as racism, discrimination, and stereotyping (Adams, Aylward, Heyne, Hull, Misan, Taylor & Walker-Jeffreys, 2005); Evans, 2004; Martin & Kipling, 2006; Usher et al., 2005a), and it is reasonable to suggest that students with a stronger sense of self-identity would be better able to handle these issues. Weaver (2001) reported that many Indigenous nursing students received no validation of their cultural identity and Yurkovich (2001) suggests that Aboriginal students who enter Western educational environments "become devastatingly aware that their cultures, values, beliefs, and practices are in contradiction with many practices of the educational culture" (p. 268). The presence of culturally appropriate supports to compensate for this lack of cultural validation is critical in education institutions (Anonson et al., 2008; Martin & Kipling, 2006; Turale & Miller, 2006; Usher 2005a; Usher et al., 2005c). This enabler has been further validated in this study and includes relationships, connections, and partnerships with other Indigenous nursing students, Indigenous academics, and Indigenous Education Support Units to provide cultural validation. These findings also indicate that Indigenous nursing academics are more critical to this process as they are seen to embody similar values, beliefs, and practices as those of the Indigenous nursing students as well as those of the education institution.

The importance of creating a welcoming and supportive tertiary academic environment has also been discussed elsewhere (Usher et al., 2005c; Weaver, 2001; Yurkovic, 2001). Relationships, connections, and partnership are critical elements of creating a welcoming and supportive environment towards Indigenous nursing students' successful completion of nursing courses. Evans (2004) takes this further when he states that success among Aboriginal students could be further enhanced by efforts from faculty members to create personal, trusting relationships with students. This study found that partnerships between schools of nursing and Indigenous Education Support Units are paramount. Indigenous Education Support Units provide the linkages to students' families and communities and are set up specifically to support Indigenous students across the university.

However, historically, Indigenous Education Support Units were set up to assist Indigenous students taking Indigenous courses. More recently, Indigenous students are enrolling in "mainstream" courses and Indigenous Education Support Units and schools of nursing in this study appear to be adjusting to what this partnership entails. Specifically, how to share and coordinate roles and responsibilities in regard to Indigenous nursing student support is crucial. This area of Indigenous nursing student support is relatively new and continually evolving; therefore, schools of nursing and midwifery must ensure that they work together to benefit Indigenous nursing students and to ensure successful progression.

Anecdotally, some academics in this study believed that they produced better student outcomes because of the partnership between the school of nursing and Indigenous Education Support Unit. Another critical connection was that between Indigenous nursing students and Indigenous academics. The presence of an Indigenous nursing academic was considered to have the potential to significantly reduce the tension that can exist between Indigenous students and non-Indigenous academics and the system. However, it seems that it is more than just a presence that is having such a positive impact on successful Indigenous nursing student completion. The relationship that exists between the Indigenous nursing academic and Indigenous nursing students is a connection that allows for a "safeness" for the student that would not necessarily be established between non-Indigenous academics and Indigenous nursing students. Indigenous academic staff with a strong knowledge of community was cited by Adams (2005) as an important factor for student success and one that contributes to a culturally safe environment. Other authors confirm that Aboriginal representation in nursing education provides role models to students (Anonson et al., 2008; Malatest, 2002; McBride & Gregory, 2005) and mentors (Malatest, 2002; Martin & Kipling, 2006; McBride & Gregory, D. 2005; Usher, et al., 2005a) who act as advisors to students and who reflect general equity (Malatest, 2002).

The knowledge, awareness, and understanding of university systems and processes by family and community were important considerations for Indigenous nursing students' successful course completion. The support was greater for students whose family and community had a keen understanding of university requirements. Conversely, families and communities that had a lesser understanding of university requirements placed a greater burden upon the student. Students' personal attributes combined with academics' awareness of family and community obligations and responsibilities greatly contributed to the successful completion of nursing programs by Indigenous nursing students.

One key component of institutional structures, systems, and processes as an enabler of successful completion was Indigenous course content. Evans and Greenberg (2006) suggest that Aboriginal nursing student success is in part related to programs that reflect their students' cultural context. Others suggest this can be achieved through curricula that is relevant to the life experiences of Aboriginal students, and course content that addresses Indigenous culture, history, and health (Gregory, Pijl-Zieber, Barsky, & Daniels, 2008; Usher, 2005c; INEWG, 2002; Yurkovich, 2001). There is evidence in this research to support these statements.

Limitations

The academic staff in this study played a significant role in supporting Indigenous nursing students. Their views may not be the same as those of other academics in nursing. The study only interviewed academics from Queensland. Academics from schools of nursing in other states and territories may have different perceptions regarding factors that enable Indigenous nursing student completion.

Conclusion

This paper reports academic and other university staff perceptions of enablers of successful completions by Indigenous nursing students in Queensland Universities. Given that these data have not formerly been described, the results provide a unique perspective and offer new understandings to add to the body of knowledge around issues impacting on Indigenous student retention and completion. Increasing the success of Indigenous students in undergraduate nursing course is pivotal as more Indigenous registered nurses has been identified as one strategy that will help to improve the health outcomes for Indigenous Australians. Interestingly, the state of completions in pre-registration tertiary nursing programs by Indigenous Australian students remains critically low when compared to non-Indigenous students. Also important, the paper reveals experiences of success as described by academics, and if we are truly aiming to increase the number of Indigenous nurses in Australia, the strategies suggested which have been drawn from the findings above need to be developed and implemented accordingly.

Recommendation 1: Appoint an Indigenous nursing academic in all schools of nursing with Indigenous students.
Recommendation 2: Develop partnerships between schools of nursing and Indigenous Education Support Units.
Recommendation 3: Develop and implement a cross-cultural awareness program specifically for academics in schools of nursing.

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