

# Tiaki Moemoeā: The Dreamkeepers' Role in Supporting Pacific Learner Aspirations

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A critical element in closing the gaps in health disparities for Pacific people living in Aotearoa New Zealand is the presence of a culturally appropriate health workforce (Heke et al., 2019). This article presents Tiaki Moemoeā (dreamkeeper), a key research finding, essential in developing a culturally appropriate healthcare workforce that addresses factors impacting the health and well-being of Pacific people in Aotearoa. The study explored the lived experiences of Cook Islands Māori nurses during their three-year training within a Bachelor of Nursing Pacific (BNP) programme in Aotearoa. The aim of the research was to collect and analyse stories from registered nurses about their experiences of culturally responsive pedagogy, and their connection to content relating to Pacific world views and Pacific ways of knowing while they were students. The study used the culturally specific Tivaevae Research Model alongside qualitative inquiry. An aim of the research was to recognise factors that supported the participants to successfully become registered nurses. As a result of the data collected, the theme of Tiaki Moemoeā will be introduced and interpreted, and the discussion will show how Tiaki Moemoeā can contribute to the transformational change in nursing education in Aotearoa.

KEYWORDS: education; nursing; Pacific; Tivaevae

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**T**HE TERM 'Pacific peoples' can be interpreted in a broad sense, referring to indigenous people from the South Pacific Island nations, or in a narrower sense, referring to Pacific peoples who reside in Aotearoa New Zealand (Ministry of Pacific Peoples, 2018). The narrower term relates to peoples who have indigenous ties to at least one of eight nations, including: Samoa, the Cook Islands, Tonga, Niue, Fiji, Tokelau, Tuvalu and Kiribati (Ministry of Social Development [MSD],

2016). The broader ethnic grouping 'Pacific peoples' allows the New Zealand Government to make high-level comparisons with other ethnic groups (MSD, 2016). Pacific peoples form the fourth-largest ethnic grouping, with over 380,000 people representing 8% of the country's population (Stats New Zealand DataInfo+, 2018). From this group, over 80,500 people identify their origins as Cook Island Māori, with 83% born in Aotearoa.

Much like the canopy term 'Pacific', the Cook Islands refers to 15 islands scattered over two million square kilometres of the South Pacific Ocean, with a total population of 14,800 people (Cook Islands Statistics Office, 2018). The Cook Islands' people carry the name Māori. 'We call ourselves Māori, our language is Māori and our culture is Māori. In truth, one is only a Cook Islander outside the Cook Islands' (James et al., 2012). In the context of the Cook Islands, 'ākono'anga (culture) is determined by papa'anga (genealogy). As in many of the Pacific Islands, Cook Island Māori cultural practices are rooted in traditional ecological knowledge, such as the preservation of food systems, self-determination and promoting reciprocity between living beings, all of which is necessary for community flourishing (Spencer et al., 2020). With this understanding, Cook Island Māori peoples' relationship with their genealogies, and their connections to the land and sea, offer further evidence of the critical roles that culture and indigenous knowledge have in everyday life (Spencer et al., 2020).

The Ministry of Health (2019) reports that Pacific peoples underutilise healthcare services across the preventative, primary and secondary sectors. Identified barriers to accessing healthcare include policies and procedures that hinder Pacific families being active participants in their family members' care (Brown, 2018). For example, one hospital had a strict policy that only allowed overnight stays for one parent or caregiver. Participants from Brown's study expressed being stressed, feeling alone and worrying their child would die overnight. Another identified barrier were the inconsistencies between District Health Boards (DHBs). One DHB might pay for the cost of a parent/caregiver's flights if a minor were to have treatment in a location away from home, while another DHB would not. Brown concluded that health systems, in particular hospitals, were seen as clinical environments constructed and driven by Western concepts, ideals and values, many of which clash with Māori and Pacific world views. While there has been some improvement

towards addressing and reducing such barriers, there are still gaps in health and service outcomes between Pacific and non-Pacific people (Ryan et al., 2019).

It is commonly accepted that the ability to address the gaps in health disparities is hindered, in part, by the disproportionately low number of Pacific people in the health workforce (Wikaire et al., 2017). Health sector feedback gathered by the Ministry of Health (2014) identified that there are not enough Pacific health workers (including nurses) nor Pacific leadership to help Pacific communities thrive.

It is essential to not only recruit more Pacific, and specifically Cook Islands, nursing students, but to retain them to achieve the goals of the Ministry of Health's (2020) strategic plan, *Ola manuia*. It is also strongly argued that nursing curriculums and specific course content need to allow for an indigenous perspective to enhance success for Pacific tertiary students (Luafutu-Simpson et al., 2015; Penn, 2014; Tuitaupe, 2018). The same researchers have looked to the only dedicated Pacific nursing programmes in Aotearoa, the BNP programmes delivered by Whitireia New Zealand and Manukau Institute of Technology, referring to their approach as revolutionary. It is from within these programmes that this research sought to explore the factors that impact Cook Island Māori students during their journey within a BNP programme.

This study contributes to the growth and development of culturally responsive pedagogy and an enhanced workforce of nurses who appreciate the nuances of practicing in a culturally safe way. Ultimately, this research contributes to countering the trajectory of poor health outcomes for Cook Island Māori and all indigenous Pacific peoples living in Aotearoa.

## RESEARCH METHODOLOGY AND METHODS

Futter-Puati and Maua-Hodges (2019) assert that a context-specific research model must support research involving Pacific peoples, families and communities. Anae (2019) agrees that the use of context-specific models demands that research carried out with Pacific peoples and

communities is ethical and methodologically sound. Using such models decolonises and re-indigenises research agendas and outputs. The term 'indigenous behaviours' is a concept that expresses the complexity of social values and etiquette specific to culture, gender and class groups or subgroups. It explores how values can have their own intricate cultural protocols, like 'respect' having language, rituals and dress codes. Respect, like other social values, embraces complex social norms, behaviours and meanings, as one of many competing and active values in any given social situation (Denzin & Lincoln, 2017).

The Cook Islands Māori research framework Tivaevae (Maua-Hodges, 2001) not only provides context-specific components, but also supports qualitative research approaches. The Tivaevae research model employs four key stages within the process of designing, developing and delivering a research project, including:

1. 'akapapa | conceptualising and planning research activities,
2. 'akaruru | data collection methods,
3. pakoti | to cut, analyse and interpret data,
4. o'ora te tivaevae | presenting the report/ findings (Futter-Puati, 2017).

Further to the four key stages used within the Tivaevae Model, Futter-Puati (2017) stresses five crucial values that are important to Cook Islands Māori people. The model is grounded in the values of taokotai (collaboration), tu akangateitei (respect), uriuri kite (reciprocity), tu inangaro (relationships) and akaari kite (a shared vision), which are woven throughout each stage of the research process (Te Ava & Page, 2018). These values are essential to the design and implementation of any research project involving Cook Islands people (Futter-Puati, 2017).

### **'Akapapa – Conceptualising and Planning Research Activities**

The 'akapapa stage requires careful planning, familiarity with literature, methods and theories, as well as a clear understanding of the project goals (Futter-Puati & Maua-Hodges, 2019).

During this stage, ethical approval was sought and granted from both the Whitireia Ethics and Research Committee and the Cook Island Research Ethics Committee.

### **'Akaruru – Data Collection Methods**

The 'akaruru stage was crucial to defining the selection criteria of participants. The chosen participants were nurses of Cook Islands Māori heritage who had graduated from a BNP programme in Aotearoa more than three years ago. To mitigate any risk of the researcher having prior knowledge of potential participants, it was decided that the selection criteria only include those who graduated more than three years ago from the same school in which the researcher currently worked.

#### **Recruitment of Participants**

Participants were sourced initially from the Cook Islands Nurses Association Aotearoa and through alumni of both tertiary institutions offering the BNP programme. These networks sent out a flyer via their private Facebook pages, reaching over 800 members. However, this was not as successful as anticipated given only one person who could have met the participant criteria responded. Recruitment attempts were then made by collaborating with past and current lecturing staff (from each programme). Through their valued and trusted relationships, participants were sourced, including two living in the Cook Islands.

#### **Data Collection – Interview Process**

Qualitative inquiry aided in accomplishing one-on-one interviews using semi-structured questions. Interviews were offered by way of either face-to-face or via an online option, which were negotiated between the participants and the researcher. The researcher transcribed the interviews and sent a draft to the participants to verify their responses.

Open-ended questions (see appendix) were tailored to explore culturally responsive methods of teaching and learning, the connection to Pacific world views and engagement. The

participants were asked about their experiences and how they felt supported or challenged to express their cultural identity while in the programme. They were also asked if there was anything that stood out to them that impacted their learning journey, and if they had any recommendations for how the institutions could support Cook Island Māori nursing students in a BNP programme.

Four participants were interviewed for this research, all participants were female and had successfully completed their nursing education through a BNP programme. Two of the participants live in Rarotonga and were interviewed face-to-face in the Cook Islands. The other two participants were interviewed in Aotearoa. The participants were working in varied roles within the health-related sector.

The conceptual framework of the Tivaevae model and the practical methods guided the research approach, data collection and robust analysis.

### **Pakoti – To Cut, Analyse and Interpret Data**

To support pakoti, the third stage (Futter-Puati, 2017), the data analysis process used Braun and Clarke's (2012) reflective approach to thematic analysis, known as reflexive thematic analysis (RTA).

The data was analysed using the RTA six-phase process. The first phase involved familiarising oneself with the data by listening to the transcribed interviews. Any patterns or trends that emerged were noted, and personal thoughts and feelings about the data were documented. In the second phase, initial codes were generated by categorising participants' responses under headings for each question. This allowed for possible similarities and differences to be identified, and coding was conducted by highlighting statements and using general words to describe the narratives. The third phase involved generating themes using a thematic map. In the fourth phase, potential themes were reviewed using key questions proposed by Braun and Clarke (2012), such as: 'If it is a theme, what is the quality of this theme (does it tell me something useful about the

data set and my research question)?' and 'What are the boundaries of this theme (what does it include and not include)?'. It was confirmed that there were fully realised themes, with patterns of shared meaning underpinned by a central organising concept. The fifth phase involved defining and naming the themes in relation to both the dataset and the research question. Three themes emerged, each containing sub-themes. Finally, in the sixth phase, a report was produced that provided context for the research results using existing literature. The relevance of the findings and the value of nursing programmes specifically tailored to Cook Island Māori and other Pacific learners were highlighted.

### **O'ora te Tivaevae – Presenting the Report / Findings**

O'ora te tivaevae is the fourth and final stage in the process of Tivaevae methodology, in which researchers present their findings and offer recommendations. Centralising the Tivaevae Research methodology in this project was essential and enabled compatibility with non-Pacific research methods. The intertwining of these research approaches proved successful in ensuring that the participants voices were given authority and reverence.

## **RESULTS**

The key themes that emerged from analysis included (1) Piri'anga toto, (2) Tiaki Moemoeā and (3) 'Akapapa'anga; 'akono'anga Māori (Cook Islands Māori culture) (refer to Table 1).

The theme of Piri'anga Toto considers family as a major positive influence in successfully becoming a nurse. Smaller cohorts created a sense of community and support, offering what the participants described as a 'family oriented feeling'. Participants reported that having access to equitable support through resources such as financial assistance was invaluable during their time of study.

The second theme, Tiaki Moemoeā, identifies the essential elements relating to culturally responsive pedagogy, where culturally relevant role models utilise innovative and interactive teaching

Major themes	Sub-themes
Piri'anga Toto	<ul style="list-style-type: none"> <li>• Family – 'my why'</li> <li>• Supportive and smaller cohorts – 'no-one left behind'</li> <li>• Equitable support – ringfenced financial resource</li> </ul>
Tiaki Moemoeā	<ul style="list-style-type: none"> <li>• Culturally responsive pedagogy, delivered by culturally relevant lecturers</li> <li>• Embedded pastoral care</li> <li>• Pacific role models - industry leaders and champions</li> </ul>
'Akapapa'anga	<ul style="list-style-type: none"> <li>• 'Akono'anga Māori – Cook Islands Māori culture</li> <li>• Personal attributes – resilience</li> </ul>

**TABLE 1: THEMES AND SUB-THEMES**

methods, and offer embedded pastoral care approaches. Tiaki Moemoeā will be discussed in more detail below.

Thirdly, 'Akapapa'anga identifies and highlights the importance of specific content knowledge that is inclusive of both Cook Islands and the broader Pacific world views, ways of knowing and epistemologies. The research identified the powerful impact that content knowledge has on the learner. Within this theme, 'Ākono'anga Māori (Cook Islands Māori culture) was found to have strong effects on a learner's self-identity, personal growth and development, with the ability to imbue pride and confidence in one's cultural being and sense of belonging. Furthermore, personal attributes of a learner were found, highlighting students' characteristics that have not only assisted with their academic aspirations, but helped them become champions and leaders within the health sector, combating and advocating for issues concerning inequities.

**DISCUSSION – TIAKI MOEMOEĀ**

This discussion focuses on the themes of Tiaki

Moemoeā and identifies essential elements that engage learners along their journey. Tiaki Moemoeā is the literal translation of 'dreamkeeper' in the Cook Island Māori language. Under this theme, the practices and characteristics of positive teaching influencers, such as lecturing staff, proved to be a major supportive contributing factor for Cook Island students to successfully become registered nurses.

During the interview stage of this research, the researcher was inspired by what the participants described as lecturers who were like family members, likening them to parents and aunts who would go above and beyond in supporting them. This, and other examples the participants shared, echoed the reflections written in Gloria Ladson-Billing's book, *The Dreamkeepers* (2022). In this book, she shares empirical findings based on the stories of eight teachers and her reflections on being a teacher of African American descent in the United States. Her explorations from within these stories set out to identify what supported African American students to persevere and prevail in their

educational pursuits. Ladson-Billing showed that the pedagogical practices of teachers made all the difference toward student academic success.

The findings related to Tiaki Moemoeā and its sub-themes of culturally responsive pedagogy, embedded pastoral care and Pacific nurse role models have the potential to contribute to transformational change for all nursing education training in Aotearoa. The following sub-themes could support better outcomes for the Pacific nursing workforce and Pacific people's health status.

### 1. Culturally Responsive Pedagogy

Culturally responsive pedagogy recognises and values students' diverse backgrounds and experiences, and incorporates this understanding into teaching practices (Ladson-Billing, 2019). Participants identified that lecturers used various interactive teaching approaches, such as practical/hands-on methods. These various approaches encouraged discussions, particularly about Pacific ways of being. Such discussions provided opportunities for the identification of similar and diverse world views, rather than assuming a hegemonic world view, and were deemed empowering by participants.

It has been accepted that Eurocentric pedagogy falls short of adequately preparing students for the increasingly diverse and interconnected world (Gay, 2018). Gay asserts that by valuing and integrating diverse perspectives, we can better equip students for the challenges of the twenty-first century. Eurocentric pedagogy often perpetuates cultural biases and reinforces dominant narratives, leaving little room for diverse perspectives. This approach can alienate and disengage students who need to see themselves reflected in the curriculum (Gay, 2018). Current research by Ladson-Billings (2019) agrees with Gay's (2018) results that culturally relevant teaching enhances student engagement and academic achievement, and can promote critical thinking and a sense of social responsibility in students, particularly for students of colour.

Further to identifying elements of culturally responsive pedagogy was the recognition of

having culturally relevant lecturers delivering content. Participants identified that all their lecturers who were of Pacific heritage, and some (but not all) non-Pacific teaching staff, demonstrated the ability to understand and appropriately apply cultural values and practices that are essential to Cook Islands Māori and the broader world views of Pacific peoples. Participants gave examples of how lecturers demonstrated their understanding of Cook Islands and Pacific cultural competency. Culturally safe lecturers, both Pacific and non-Pacific, were those who went the extra mile by advocating for and championing the students, the BNP programme and the wider Pacific community. One such example was a lecturer encouraging a participant to place her family's needs before her clinical placement arrangements. Another participant said a lecturer proactively created opportunities for placement, which benefitted the broader Pacific community (Kainuku, 2023).

Ladson-Billings' (1994, as cited in Ogundipe et al., 2022) pedagogical principle 'Teacher as facilitator' is similar to the findings of Ikiua (2018). Ikiua characterised Pacific education pedagogy as collaborative learning, respecting diverse perspectives and having a focus on experiential and contextualised learning that draws on the lived experiences of learners.

The findings of this study mirrored the role of 'Teacher as facilitator'. Engaging and effective lecturers within the BNP programme were those who were able to apply teaching methods that facilitated discussions, and were not only culturally responsive, but seen as ethnically relevant to the programme.

#### 'By Pacific for Pacific'

A 'By Pacific for Pacific' approach has proven effective within other studies (Elk et al., 2020; Ikiua, 2018; Tuafuti, 2016). In support of the findings in this research, when compared to non-Pacific lecturers, Pacific lecturers demonstrated the ability to provide a style of teaching that incorporated Pacific world views, values, beliefs and protocols into their lessons

with ease and confidence. This finding also revealed that content relating to cultural ethnicity was delivered more effectively by lecturers who reflected that ethnicity. Tuafuti (2016) defined Pacific-responsive pedagogy as a framework for teaching and learning grounded in Pacific cultures, values and ways of knowing.

### Cook Island Māori Cultural Capital

Cultural capital refers to the non-financial assets that individuals possess, such as knowledge, skills and education, that can be used to gain social and economic advantages (Pierre Bourdieu, 1986, as cited by Bamblett et al., 2019). This concept has been widely studied in sociology and has significantly impacted individual success and social mobility (Bamblett et al., 2019). Overall, understanding cultural capital is vital for individuals and society, as it can help to explain disparities in social and economic outcomes. By recognising the value of non-financial assets, we can work towards creating a more equitable society (Bamblett et al., 2019). The findings from this research draw on the concepts of cultural capital of which Bamblett et al. (2019) emphasise the importance of ethnic-specific teaching methods and content. All participants agreed that Cook Islands Māori content, such as Cook Islands' healthcare models and nursing assessment tools, needs to be scaffolded into the curriculum teaching content. In addition, it was also identified that participants desired Cook Islands Māori content to be delivered by lecturers who are of Cook Islands Māori heritage. They deemed these lecturers most likely to possess cultural capital, traditional practices, beliefs, customs and values that have been passed down from generation to generation.

## 2. Embedded Pastoral Care – 'I felt safe'

Pastoral care approaches have been identified as supporting the normalisation of academic learners' help-seeking behaviours and creating a sense of belonging instead of isolation and exclusion (Christensen et al., 2019). Many students face significant challenges when confronted with the additional pressure

studies bring, particularly finding a balance between competing responsibilities of family, church, community, employment and finances (Southwick et al., 2017; Ten Hoeve et al., 2017).

Participants in this study identified that feeling safe across all aspects of learning, environmental or in relationships with others, instilled and enhanced confidence. In part, the sense of safety was attributed to the pastoral-care approach extended by lecturers within the BNP programme, particularly lecturers of Pacific descent. They were opportunistic and responsive in initiating and encouraging 'help-seeking' behaviours from students. In many ways, the lecturers were described as 'going above and beyond' and being proactive in their pursuit of offering and linking pastoral-care support to students. All participants from this study gave examples of how lecturers proactively involved themselves in student absences, such as initiating discussions to prompt peers to encourage re-engagement.

Descals-Tomás et al. (2021), whose research focused on the impacts of pastoral care from teachers, showed outcomes that impacted positively on student's self-belief in their ability to succeed in their academic pursuits. Descals-Tomás et al. (2021) also suggest that offering pastoral care impacts the student's motivation to engage in their learning more than teaching content knowledge. Teachers can improve students' beliefs and goals, so they should encourage students to manifest engagement behaviours. In addition, Descals-Tomás et al. (2021) recommend that working on students' beliefs with teacher support can be a promising approach to improving student motivation and learning. These findings are congruent with the evidence provided by Ruzek et al. (2016) relating to the emotional support offered by teachers, which impacts positively on student motivation and engagement.

Teevale and Teu (2018) reveal the importance of utilising and accessing help when needed. They identified that Pacific students who used Pacific-centric student support services while at university achieved higher academically than

students who did not. Teevale and Teu also discovered that Pacific students encountered peer backlash for using Pacific student support services, generating subsequent negative impacts upon future help-seeking behaviours. To counter peer backlash, they recommend including cultural competency training for university staff who work with and engage with Pacific students, whether in teaching or support services; and curriculum development to ensure academic content includes aspects of the Pacific world (Teevale & Teu, 2018).

### 3. Pacific Role Models – Enablers ‘they played a huge role’

Pacific learner success in workplace environments requires supportive relationships with facilitators to create a motivating learning experience (Ryan et al., 2017). Facilitators of learning support are essential catalysts for participation and achievement, continuation and completion (Ryan et al., 2017). In this study, the Pacific nurses that participants encountered during their clinical placements were seen as inspirational, affirming and supportive role models.

Further to the positive encounters participants had with Pacific nurses, they also asserted that seeing Pacific nurses, particularly those in charge nurse positions, dissipated the negative and unwarranted presumptions held by others. For the participants, Pacific nurses were essential beacons of inspiration, motivation and aspiration as class lecturers and role models during clinical experiences. The positive impact of role models is evident in Jack et al.’s (2017) research of undergraduate nursing students, which concludes that role modelling is an effective way to support learning and leads to student satisfaction within both clinical and university environments. Further, the participants’ points in Jack et al.’s study regarding Pacific nurses are vital to discuss, as these behaviours of affirmation and support towards Pacific nursing students are in stark contrast to what is seen in Western nursing environments (Jack et al. 2017). The findings from both Jack

et al. and this research show stark differences to McCarthy et al.’s (2018) integrated literature review. In that review, 13 of 16 studies showed that a large portion of nursing students’ stress stemmed from challenging relationships with clinical colleagues and educators. Significant stressors included lack of support, empathy and understanding, and feeling ignored, unwanted, rejected, exploited and intimidated by clinical colleagues.

Nursing literature (Anderson & Morgan, 2017; McKenna & Boyle, 2016; Tee et al., 2016) frequently highlights an ongoing issue with respect and communications between nursing and midwifery staff, clinical educators and students in clinical settings. McCarthy et al. (2018) suggests that there are still ongoing negative and unsupportive relationships between students and clinical colleagues during clinical placements, which is not a new phenomenon. Clark (2011, as cited by McCarthy et al., 2018) refers to these negative encounters as ‘incivility’, where harmful behaviours have a negative impact on others, either physically or psychologically.

Eka and Chambers’ (2019) systemic review concluded that there is a lack of consensus on what constitutes incivility, which has led to authors proposing several terms such as uncivil behaviour, disruptive behaviour, vertical violence, horizontal violence and bullying. However, these terms all encompass undesirable and disturbing behavioural acts such as disrespect and undermining others, academic dishonesty and bullying. Findings from the same review also revealed that studies investigating incivility in nursing schools were done in Western cultures, with a smaller amount performed within non-Western cultures. It was recommended that because of cultural differences, the findings of the studies conducted in the West were not transferrable to other cultural backgrounds (Eka & Chambers, 2019). Anderson and Morgan (2017) describe the situation of incivility in the nursing profession, as ‘a continuation of a destructive culture where nurses persist in eating their young’ (p. 377).

## RECOMMENDATIONS

The research findings have yielded strategies that could be adopted by tertiary institutions, educators, nursing programmes and the wider healthcare sector, not only for Cook Island Māori nursing students, but for all Pacific learners. More specifically relating to the theme Tiaki Moemoeā, the researcher proposes pedagogical approaches for educators and programme content delivery. These include:

- integration of Cook Island Māori and Pacific world views throughout all nursing education curriculums,
- ethnic-specific nursing programmes adopting a 'by Pacific for Pacific' approach to ensure better outcomes for students. Participants in this study gave multiple examples of how Pacific lecturers and nurses, compared to non-Pacific lecturers and nurses, made a difference in terms of support and the participant's ability to engage in teaching content made a difference in terms of support and the participant's ability to engage in teaching content. The participants also said that during clinical placements, Pacific nurses acted as the role models in encouraging them to finish their degrees, and made them feel 'needed',
- being Pacific culturally competent. The researcher has created the Kaveinga Āpi'i: Kuki Āirani cultural competency self-assessment tool. Kaveinga Āpi'i translates, from the Cook Islands Māori language, to 'teaching guide'. Kaveinga Āpi'i was adapted from the Ministry of Education's (2018) cultural competency framework, Tapasā. The recommended use of Kaveinga Āpi'i is for educators to measure their culturally responsive pedagogy. As an educator, it is important to have a strong appreciation of cultural competency to provide a safe and inclusive learning environment. Kaveinga Āpi'i can help educators identify areas where they may need to improve their understanding and how to best meet the needs of Cook Islands Māori students. By regularly evaluating one's own cultural

competency, work can be done towards becoming a more effective and inclusive teacher for all students. Prior to using Kaveinga Āpi'i, it is critical that educators complete and review the training offered through the Tapasā workshops. Further to this, it will be important to ensure content delivery also includes the important conversation of anti-racism and equity in relation to the broader need for a Cook Islands Māori and Pacific nursing workforce,

- ensuring smaller cohort sizes for a family-oriented feel. Finally, in relation to pedagogical approaches, it is highly recommended that programmes dedicated to both Cook Islands and Pacific learners fiercely maintain their position on cohort sizes. Smaller cohort sizes support a family-oriented learning environment in which both students and lecturers can engage, build and maintain quality relationships.

## CONCLUSION

This study validates and highlights the need for ethnic-specific nursing programmes that provide culturally safe and supportive environments and aid in successful academic achievement. Culturally responsive pedagogical approaches delivered by culturally relevant lecturers have been shown to engage learners and instil opportunities for personal growth and development. By supporting Pacific student nurses, we can increase diversity in the nursing workforce and improve healthcare outcomes for Pacific communities.

A number of recommendations have yielded from the theme Tiaki Moemoeā. Ideally any person in a teaching role, particularly when teaching Pacific learners, needs to ensure they are being Pacific culturally competent. Although increasing the supply of Pacific lecturers and nurses will not detract from the influence of non-Pacific lecturers, nurses and non-Pacific school-based decision makers, it is recommended that Pacific culturally competent training becomes a prerequisite for all staff who work with and engage with Pacific students.

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**WENDY TRIMMER** RN, MA(Applied) Nursing. Wendy has worked as a mental health nurse and nurse educator for over 30 years. She is currently supervising Masters candidates and teaching in both undergraduate and postgraduate nursing programmes at Whitireia New Zealand & WelTec and Nelson Marlborough Institute of Technology.

## APPENDIX 1: Questions used to guide the semi-structured hui in the 'akaruru stage

### Pure/introductions

#### **Begin:**

- Tell me about who you are (background, ancestral ties, when did you graduate as a RN, what has been your journey since graduating)?
- Tell me why you chose the BNP programme over the other degree programmes offered?
- Did your experience live up to your expectations of the programme?

### Key questions highlighted from objectives

#### **Culturally responsive methods of teaching and learning (about the programme):**

- 1a. Was there anything that stood out to you that impacted your learning journey?
- 1b. Can you elaborate on the elements you have mentioned and at what level of importance were they for you?

#### **Connection to Pacific World views:**

- 2a. How do the concepts of Pacific World views and Pacific ways of knowing connect with you?
- 2b. While in the programme, did you feel Kuki 'Āirani world views and ways of being were acknowledged and valued within the broader concept of Pacific, if so, how?
- 2c. Were there experiences you encountered during your student journey, whereby you felt supported or challenged to express your cultural identity?

#### **Engagement (what supported them):**

- 3a. Was there anything, during your training that assisted you in the growth and development of your own personal identity?
- 3b. Any recommendations for supporting Kuki 'Āirani nurses in a BNP programme?

