Cultural Safety, Critical Race Theory, Empathetic Partnership, and Innovations in Practice and Nursing Education.

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This diverse panel of papers draws on the foundations in cultural safety, critical race theory, and clinical nurse specialist role delineation to improve health for patients through innovations in practice and in nursing education. Each presenter will offer strategies or methods for decreasing inequities/improving health. Decreasing inequities in health and education have been national goals for decades, yet structural violence, racism and other forms of oppression, and discrepancies in privilege and power continue to serve to reinforce the status quo or even increase disparities. The purpose of this panel is to examine methods and strategies for making these inequities more transparent and for addressing them within our educational and health care systems.

Findings from a recent study of new faculty in nursing education and how they have incorporated some of these concepts into their developing practices in nursing education will be presented. Based upon applied cultural safety and the relationship to critical race theory and place based education, the diffusion of cultural safety within a college of nursing will be discussed. In addition, the empathetic partnership framework consists of 6 key elements with the goal to establish and nurture equal and meaningful partnerships between health care provider and patient. The influences for this framework are from New Zealand nursing’s Cultural Safety, the cultural safety teachings of Dr. Irihapeti Ramsden as well as the work of sociologist Dr. Brené Brown. The framework uses women of sexual minority as the exemplar population, but Empathetic Partnership can be implemented for any minority or marginalized population, as well as used with the general population. The framework consists of 6 key elements: reflection, environment, language, knowledge, partnership and empathy.

These papers are relevant to the Society for Clinical Nurse Specialist Education Conference because they address improving patient outcomes and collaboration between patients and providers. They can also be used for nurse educators to teach students how to create these effective and meaningful partnerships with patients. These papers are based on respecting the unique culture(s) of each individual and working to establish meaningful partnerships that respect and nourish the individual and family within their unique context.