What is reflective writing?

Reflective writing is evidence of reflective thinking. In an academic context, reflective thinking usually involves:

1. Looking back at something (often an event, i.e. something that happened, but it could also be an idea).
2. Analysing the event or idea (thinking in depth and from different perspectives, and trying to explain, often with reference to theory from your subject).
3. Thinking carefully about what the event or idea means for you and your ongoing progress as a learner and/or practising professional.
Reflective Essay

**Reflective essay or report:**

theory followed by your evaluation (might include reflections on your own work experience, on materials, activities, modules from the unit)

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Read the unit assignment brief

Carefully read the instructions, marking key and resources that Carol has put up on the Blackboard unit site.

The assignment brief provides, clear instructions, expectations in terms of writing a reflective essay.
Essay task

Write a 2000 word critically reflective essay: Incorporating the knowledge you have gained throughout the course and this unit and with reference to your Codes and Standards for practice, discuss how you will analyse cultural factors and how these affect your application of culturally safe care to a client from the Aboriginal and Torres Strait Islander population.

1. Select a client from this cultural group that you have an interest in or have had experience with. (i.e. age, gender, urban, remote, rural).

2. Use concepts and knowledge gained throughout your course and this unit to identify the health issues that may impact your chosen client.

The task

3. Then using theoretical frameworks (at least two) to draw connections between our ideas and provide structure to your argument (i.e. Knowing, 4 dimensions, etic and emic viewpoints, social imagination, social determinants), analyse the cultural factors that currently impact on care delivery and as a consequence the health outcomes of your client.

4. Select ONE health issue and analyse the cultural factors that currently impact on care delivery and consequently the health outcomes of your client.

5. Identify the requirements for utilisation and distribution of resources to achieve a culturally safe environment for you and your clients. (i.e. cultural knowledge, competence, access, alternate services).
Sources for the essay

It will be necessary to incorporate the knowledge gained from the course work, your readings, your first assessment pieces (ASS 1) as well as supporting evidence from a minimum of 15 quality journal articles/readings of your choice (No more than 7 years old).

- Seminal works may be used for this assignment.

Essay structure

- Introduction

- Body paragraphs – fleshing out topics relevant to your paper and using two frameworks (see assignment brief)

- Conclusion
Introduction

- Introduce topic
- Context
- Purpose/thesis
- Structure/Focus on the essay

Introduction example

Key attributes of enhancing health care delivery in nursing involves participating in culturally aware and safe health practices. These values are outlined in the Nursing Code of Conduct, with the Nursing and Midwifery board advocating for nurses to reflect on the updated principles to support their practice (Nursing and Midwifery Board of Australia, 2017). This reflective essay examines the cultural effects of health care to aging Australians, which is directed to a peer audience. Delivering culturally appropriate care as a health professional involves acknowledgment that ethnocentric beliefs influence patient interactions and requires commitment in respecting, acknowledging and adopting practices that facilitate cultural safety for all stakeholders (Nursing and Midwifery Board of Australia, 2017). These principles will provide the framework to analyse, interpret and reflect on promoting cultural awareness in the nursing care of an older adult suffering malnutrition.

Thank you to Heather Combes for allowing the use of her assignment for educational purposes.
Paragraphs

- **T…..** Topic sentence (One sentence that explains the idea for that paragraph)
- **E…..** Explain (Flesh out the idea a bit more)
- **E…..** Evidence (Provide research to support the idea)
- **L…..** Link (Link the idea back to your topic by explaining how the evidence is significant to the topic)

4 Rs

- **Report** – what/topic (looking back at something)
- **Relate** – analysing that something from different perspectives with reference to models/theory from your learning as well as research
- **Reflect** – thinking about what this means to you both personally and professionally
- **Reconstruct** – what does it mean for your learning/practice/how will it affect your practice?
**Writing style for reflective writing**

- Use *formal academic language*: complete sentences which follow a logical pattern using clear, concise language so that it is easy to follow the development of your ideas.
- Use *1st person* when describing experiences, making observations and connections, and/or stating one’s opinion or feelings.
- Use *3rd person* when referring to other people’s work (theory)
- Use *past tense verbs* (e.g. I felt, decided, explored, learned) to describe past events.
- Use *present or future tense* to integrate evidence/theory.

**General example**

Specific tasks were shared out amongst members of my team. Initially, however, the tasks were not seen as equally difficult by all team members. Cooperation between group members was at risk because of this perception of unfairness. Social interdependence theory recognises a type of group interaction called ‘positive interdependence’, meaning cooperation (Johnson & Johnson as cited by Maughan & Webb, 2001), and many studies have demonstrated that “cooperative learning experiences encourage higher achievement” (Maughan & Webb, 2001). Ultimately, our group achieved a successful outcome, but to improve the process, we perhaps needed a chairperson to help encourage cooperation when tasks were being shared out. In future group work, on the course and at work, I would probably suggest this.

**Reference**


- [www.ukcle.ac.uk/resources/temp/assessment.html](http://www.ukcle.ac.uk/resources/temp/assessment.html)
C&H example

Having a patient with language barriers can often impact on the health care of that patient and result in significant delays. In a study of the Sudanese population in Australia, it was found that over a third spoke very little or no English at all (Department of Immigration and Citizenship, 2014). Sudanese Australian men tended to have better English communication than females, which is mainly attributed to greater learning opportunities for males in Sudan. Consequently, the language barrier with females, impacts their ability to receive and understand health education (Department of Immigration and Citizenship, 2014). I recently experienced this language barrier on placement when I had an Indonesian fluent patient who was due for surgery and had no signed surgical consent form within his records. When the surgeon arrived to collect the patient, he was not amused with the delay, while I organised an interpreter. As uncomfortable as the situation was, I remained professional, disregarded the surgeon’s aggrieved body language and continued to organise a telephone interpreter. This experience was not a pleasurable one; however, we achieved patient satisfaction and demonstrated cultural safety by identifying and meeting the patient’s needs. The NMBA code of ethics consists of eight statements which outlines the nursing professions commitment to respect, protect, promote and uphold the rights of people who are the recipients of health care as well as the providers of health care (NMBA, 2013a). According to the NMBA code of ethics value statement 3, nurses must value the diversity of people (NMBA, 2013a). In future, I would

Adapted from a student essay. Thank you to Nicole Fitzpatrick for allowing the use of her work for educational purposes.
Conducting a cultural assessment requires the nurse to acquire sufficient understanding of an individual to produce a mutually acceptable and culturally sensitive health plan encompassing the individual’s beliefs, values and practices (Anderson et al., 2010). The Nursing and Midwifery Board of Australia [NMBA] (2008) outlines the nursing profession’s commitment to recognising and respecting the diversity of cultural and social rights of every individual. I believe to develop a culturally accurate assessment, it is important to consider the patient’s origin, their views about illness and wellness, and their healthcare expectations. Giger (2012) states that nurses must reflect on their own ethnocentric views and acknowledge that healthcare has its own cultural beliefs and practices. Critical reflection is an important practice of cultural care, as understanding how people perceive the world can influence their health outcomes. I feel significant responsibility in my position as a nurse of influencing patient outcome, which sharpens my desire to hone these skills and recognise my own ethnocentric practices. Thanks to Heather Coombes for allowing the use of her work for educational purposes.

Conclusion

✓ Restates the topic.
✓ Sums up the key ideas in relation to the topic.
✓ No new ideas.
✓ Finishes with statement to broader topic.
Conclusion Example

To conclude, using a cultural perspective in health delivery requires a holistic view, challenging one’s cultural understanding and requiring the development of new knowledge through a cycle of action and reflection. Cultural encounters are living experiences allowing the learner to develop cultural sensitivity, in unison with the application of cultural theories that provide frameworks for competent care. The health of Australia’s increasing population demands attention due to the increasing costs and resources needed to provide healthcare to individuals living longer with chronic illnesses. However, the capacity to provide support that promotes wellbeing and independent living will be determined by social and healthcare services. Improving the quality of service delivery through customised nursing is underpinned by the provision of culturally safe and competent practices across all sectors, reducing health disparities and providing equitable care. Nursing as a discipline values culturally safe practice, demonstrated through the NMBA policies in providing beneficial care to enable individuals to face illness, disability or wellness. It requires leadership in demonstrating the values of protecting and advocating every individual’s right to equitable healthcare.

A word on referencing

- In-text:
  - Surname and year only for paraphrasing e.g.
  - Smith (2014) stated ..... or
  - The objective of nursing care is to resolve actual health problems, prevent potential problems and maintain a patient’s healthy state (Phillips, 2013).
- End-text: review ECU Quick Referencing Guide and follow the format depending on the source type
  - http://ecu.au.libguides.com/referencing
  - Referencing for Beginners Resource
Proofing and editing

- **Editing** focusses on the *structure* of your *ideas* within paragraphs i.e. What you say.

- **Proofreading** focusses on the *grammar and punctuation*. If this is not your strong point, go to this site for the rules:
  - [https://owl.english.purdue.edu/owl/section/1/6/](https://owl.english.purdue.edu/owl/section/1/6/)
  - and this site for online practice exercises: [https://owl.english.purdue.edu/exercises/](https://owl.english.purdue.edu/exercises/)
  - Download a free version of Grammarly [https://www.grammarly.com/native/windows](https://www.grammarly.com/native/windows)

Formatting

Follow the 2019 Assignment Guidelines document and use the assignment template
References


References


