

We The People
Program 304 July 23, 2018
We the People 304 Racism and Political Correctness



Good Day to you. In February this year I broadcast a 'we the people' narrative called '**White Privilege**'. The matter centred on the new guide lines package from the Nursing and Midwifery Board and its policies to its members. This unduly long and politically correct tome went too far and instructs the members to declare their '**white privilege**'. Allow me to quote again from their code of conduct glossary, qualifying and explaining matters within the code....." *In relation to Aboriginal and Torres Strait Islander health, cultural safety provides a de-colonising model of practice based on dialogue, communication, power sharing and negotiation, and the acknowledgment of white privilege.* I suggest you listen again to the narrative as background so just go to the Sentinel web site and bring up number 281. Let's be clear here in that I believe this represents toxic racism and political correctness on hyper drive and as promised I am reporting back to 4CRB Listeners.

I wrote to the federal member for Macpherson, Karen Andrews and asked why this was allowed. Karen responded and said she too was 'concerned' and would follow through, which she did. However I only received a formal response on June 12, a delay of 16 weeks and not from Minister Greg Hunt but from the relatively unknown Minister for Sport, Regional Communications and Rural Health, Bridget Mackenzie. It appears to me that Minister Hunt flicked it to Bridget because it was an embarrassment politically. Put simply the letter of response was worthless and straight out of Yes Minister. Let's be clear here that Minister Hunt has ultimate responsibility for this nasty piece of work by the Nursing and Midwifery Board. I have reviewed the document and the edict and there can be no doubt its racist and how dare Minister Hunt's Qango tell us we have some kind of white privilege. If an aboriginal woman is having a baby must the nurse stop and declare her white privilege or if a dying aborigine is about to expire must the nurse stop and make the racist apology or even contemplate it. The Nurse and Midwifery Board suggests no but the problem is their document is so stupid and insensitive toward white people it quite effectively builds that impression. It doesn't level the nations playing field but further divides society just as the newly introduced aboriginal hospital waiting rooms do across the country which are called "**culturally appropriate spaces**". Just a carelessly sanitized form of segregation separating whites from blacks and that is abhorrent. Even Aboriginal leader Warren Mundine said it's "bizarre and a "step too far".

Now if you think my anger at this insidious mess is mine alone you would be wrong because people like Cory Bernardi, Andrew Bolt, Pauline Hanson, Paul Murray and Peta Credlin think the same way. Add to this major media where notable journalists have condemned the matter and yet we are asked to believe there is nothing untoward about these 'new world' racist proclamations. Only the self serving ABC and the smug Paul Barry on Media Watch fail to see just how insidious political correctness can be. In all this there is potentially another casualty in Karen Andrews the federal Member for Macpherson. I live in her constituency and generally I like her as a person but as time passes I am beginning to worry her influence in Turnbull's government is weak. Karen appears ready to listen but I believe this matter which she showed concern for, has fallen off her radar. As with all elections we do not vote for parties, we vote for people. I find it difficult to determine what Karen Andrews' own policies are on some matters because she holds the party line and that's not good enough. I have encouraged her as a constituent to let us know her own views on a range of matters over time but it's always the party line. Ms Andrews, you were concerned over this matter of apparent racism but what have you done about it and what steps are you taking to have the Nurses and Midwifery Qango brought into line as it's paid for with tax payers money. Maybe even asking is pushing my white privilege too far, what do you think my listener friends as I think it's time to drain the billabong.

Until next time this is Kent Bayley
(scroll down)

The Nurses Professional Association of Qld (NPAQ) has called the new Code of Conduct for nurses an affront to all nurses irrespective of the nurse's race or culture.

It is equally insulting to aboriginal nurses as it is to White, Asian, Indian and Islander nurses. They've called it "racist to its core" because it presumes any privilege that a nurse may have in relation to the care they are delivering to their patients is a function of their skin colour or culture. Not only is this offensive to all nurses and their patients, more importantly, it is patently untrue. The NPAQ believes that the wording in the Code and its Glossary can be clearly understood by any nurse and the words used have their normal meaning. Any suggestion by the Nursing and Midwifery Board of Australia (NMBA) that the words have a different meaning is just rubbish.

Failure to Consult with Nurses

NPAQ has also pointed out that the NMBA has violated its legislative requirement to consult widely before introducing any changes to clinical or operational standards. The NMBA claimed to have had 2937 responses to its survey and all the Code changes were supported by the Australian Nurses and Midwives Federation (ANMF, QNMU in Qld) and Turnbull Government. That claim is incorrect. We now know that only 305 actual nurses agreed with what they were told was to be the new Code.

NPAQ has called for the resignation of Professor Cusack, who as the Chair of the Nursing and Midwifery Board of Australia, has put her name to this new Code. No Australian nurse could ever have confidence in her ever again.

Nurses Careers at Risk

NPAQ has also called for the removal of section 3.2 (a) of the Code because it declares that the sole arbiter of whether the nurse has delivered "culturally safe" care to the patient is the patient or the patient's family. This is profoundly unfair, cannot be trained for, and exposes nurses to the potential loss of their careers at the whim of the patient or the patient's family.

The Code Conflicts with existing workplace laws

NPAQ has called for the removal of section 3.2 (b) to (f) because this is a replication of existing State discrimination and workplace health and safety laws and will have the effect of diluting their efficacy in the jurisdictions where they can be used to protect nurses both quickly and effectively. AHPRA has proved to be very slow (18 month average time for investigation) and ineffective in dealing with all issues. They cannot be trusted with more responsibility.

The Code is Racist

NPAQ has called for the excision of the entire section in the "glossary" of the Code which deals with "Cultural Safety". Their explanation in the glossary is insulting to nurses and fundamentally racist. Nurses are required to acknowledge their "white privilege". All the words used in the glossary are perfectly clear and unambiguous. They are also words that were not in the draft document which 305 nurses out of 350,000 nurses Australia wide were somewhat in agreement with. However, the draft of the Code that the 305 nurses agreed with was different to the code that was finally published.

NPAQ believes that

1. The consultation process was misleading and the facts and circumstances of it were misrepresented by Professor Cusack
 2. The fact that the final and released Code was strikingly different from the draft Code is simply fraudulent.
 3. The claimed support for the code from the Turnbull government is simply untrue. (see Credlin article)
- The Minister has advised he has not even seen the final draft.

The NMBA claims that the plain meaning of the words in the explanatory section of the new Code somehow do not apply to nurses but they will not remove those words or reword the section to make their position clear. The NPAQ believes that the words "acknowledgment of white privilege" with respect to the dealings of a nurse with the patient is clear and unambiguous. We further believe that this is exactly what the NMBA expects nurses to do. Qld nurses, those at the coalface of caring for their patients, are horrified at the implications of racism and lack of professionalism that this new layer of regulation implies. Plus the potentially catastrophic impost they may have on their career paths and their ability to deliver professional care to those patients who may come from troubled communities.

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