**Cultural Competence in Health Care**

 The media has become an influential segment of today’s era, primarily being accessed by people to source for information. In Australia for instance, the various media types are governed by the regulations which are aimed at ensuring the Australian people receive the best information and that which is not detrimental to any individual, group or institution. With a population that is constantly dependent on the media, there are roles and powers that accrue to the media in the country.

 In an era where information has become very valuable, the primary role if the media remains to be informing people. This is aimed at providing sufficient information to those who seek it in order to enable them make informed decisions. Decision making is greatly impacted by the information that one has on the same subject. As such, the media plays an important role in facilitating this process (Norris and Inglehart, 2009, p. 14). This could vary from the decision a customer makes on whether to purchase a particular product or not, based on advertisements they see on TV. This could also be the difference between the candidates that a person decides to vote for in an election judging from what media houses portray of that candidate. The concept of relaying information goes further than the superficial impression that is created on people’s minds upon getting information from the media, according psychologists, but influences their general decision making as it causes a significant effect on their cognitive processes (Baker, 2006, p. 32).

 The media is also tasked with performing checks. This is particularly with regard to elected representatives through ensuring that their stick to the oaths of office they take and deliver that which they promised to the people who elected them. Politics is a key aspect of the Australian society since it determines to a great extent the well-being of the country. The media has for a long time been at the forefront of scrutinizing what elected leaders do, in a bid to showcase to the citizens the status of this arena (Rundle, Carvalho and Robinson, 2012, p. 52). This is important in enabling people keep track of leaders and give the same leaders an opportunity to attest how earnest they are of such positions. Being a country whose political ambience is known to be calm, this phenomenon could to some extent be attributed to the efforts made by the media in keeping an eye on the elected individuals.

 The media is also is considered as the voice of the people. In some instances, it has been dubbed as a “fourth power”, based on its enormous impact on public opinion. The effect of this trickles down to the outcome of elections that are held in the country. The media holds to a great extent what results when elections are conducted. Furthermore, I has an indirect impact on the three arms of the government since it either critics or supports various aspect such as amendment of policies or pending legislations (Purnell, 2014, p. 65). The scope of the latter is unlimited since the media is free to choose what to relay and what not to relay in accordance to media regulations.

 Owing to the fact that media owners can misuse their power to unconventionally influence reporting, there is a limit to what power the media has. In Australia, the government controls this in two areas; the Commonwealth powers are given by the constitution to control broadcasters of the elections and Commonwealth is given control over various corporations and their respective trade by the constitution (Backshield and Williams, 2010, p. 89). The latter is done to offer regulation on the print media, which accounts for a large part of how information is transmitted in Australia and limit foreign ownership of media in the country as much as possible. The media in Australia is free to cover stories which in light of the constitution, poses no potential harm to the government, citizens or image of the country. While this sounds like a rather sufficient regulation, it has in fact been the subject of various controversies. This is primarily due to the ambiguity that is introduced by this prose. It does not specifically state what is exactly harmful, since the extent of harm is a relative parameter (Backshield and Williams, 2010, p. 102). The media is notorious for dwelling on stories that will attract the attention of their viewers, which unfortunately tend to be quite negative.

 As a result, several amendments have been done to media bills over the years, to precisely address what the powers of the media in the country are. These amendments include the Broadcasting Legislation Amendment (News Media Diversity) Bill 2013, the News Media (Self-regulation) Bill 2013 and News Media (Self -regulation) (Consequential Amendments) Bill 2013, the Broadcasting Legislation Amendment (Convergence Review and Other Measures) Bill 2013 and the Television License Fees Amendment Bill 2013 (Wepa, 2015, p. 114). 2013 saw a series of bills being brought forth to curb the rising instances of media overstepping their power to broadcast. In some instances, however, the government has been criticized for subduing the media to prevent it from being exposed on some activities that are unlawful. This however does not mean that the media is not allowed to cover occurrences which in the eye of the law, deserve public attention, whether it portrays a good or bad image of the government, as long as it is accurate and truthful (Taylor, 2010, p. 125). The media thus has the power to broadcast any such event, within the limits of the media laws, without necessarily bulging to the demands of the government.

 The media reform package instituted in 2013 also saw new laws and powers being instigated on the various media types. For instance, the public interest test was introduced, giving the media the opportunity to prove itself as being aimed at ensuring that the information it relays has the public’s best interest at heart. This was also in accordance to the public Interest Media Advocate (PIMA) (Jericho, 2013, p. 75). Licensing limits and content quotas were also introduced. This meant that commercial television broadcasting licenses were limited to the minimum and new Australian content quotas took effect thereby changing to the ABC and SBS charters. Finally, there was a permanent 50% rebate that was introduced for all commercial media transmitters.

 The Treaty of Waitangi is largely linked to the concept of culturally safe care. It involves the empowerment of both the patient and the health practitioner, without compromising on the well-being of either parties. In relation to this, the media has done a good job in educating the public on what culturally safe care is. It was a concept that was not popularly known to people, but through the media, people have learnt and appreciated its importance. As a result, the concepts of participation, protection and partnership have become widely integrated into the Australian health care system thanks to the media (Conrad,2007, p. 77). Moreover, practitioners have learnt to acknowledge that holding on to their own personal beliefs may potentially harm the recipient of the services. This has been a milestone in the healthcare sector. Nationally, the delivery of culture safety knowledge and practice has largely been due to the media which has the capability of reaching out to a larger crowd within the shortest time possible.

 The first item on the do’s and don’ts of social media for healthcare addresses what are some of the key aspects of culturally safe healthcare. In its demonstration, it advocates for strategy, listening & responding, building relationships among others. These three concepts are well in line with the realms of cultural safety. The three aspects which are participation, protection and partnership are succinctly attributed to with regard to this item. The recipient of the care defines the determinants of safe care at all costs. This therefore makes the recipient the centerpiece of the whole idea (Mathis and Galloway, 2013, p. 146). Drawing back to this media item, advocating for an appropriate approach which is captured by the idea of a strategy ensures that the recipient of the services is kept at the forefront. Consequently, listening and responding all fall back to the recipient. This means that the medical practitioner should give a keen listening ear to the recipient and ultimately respond adequately to their concern. Whilst doing this, an environment is created which does not infringe on the status or condition of either of the two; which is again what cultural safety aims to satisfy. Building relationships is not only important to cultural safe healthcare but to healthcare in general (Rundle, Carvalho and Robinson, 2012, p. 40). Having a healthy relationship between practitioners and patients is the initial step towards empowerment of both parties. If the relationship is amicable, there is no reason as to why the concept of cultural safety would not work.

In as much as this concept capitalizes on the need to uphold the empowerment of the two parties, it is a dynamic situation whose success can only be assured via a series of factors which come into play. Since culture differs depending on consideration such as age, gender, generation, sexuality religion, occupation and more, nursing practices will be affected by these factors. In the picture however, a generalized criterion is employed touching on the four different principles. The first is the aim to improve the health status as well as well-being of Australians which in the picture is recommended by most of the information on it. Secondly, improving health service delivery counts as another principle (Mathis and Galloway, 2013, p. 61). Unlike conventional or rather traditional ways of advocating for health care, the media item which in this case is a picture, gives alternative ways of achieving the second principle using more contemporary and generation friendly means. Social media has become mainstream and is accessed by a large number of people, making social media for healthcare a subject that is worth visiting, just as the picture does (Browne, 2011, p. 12). The penultimate principle touches on the differences and diversity that exist among the different people who receive treatment and advocates on the need to accept these differences.

In a world that is very diverse, especially with respect to culture, it is vital that practitioners acknowledge and accept the cultural differences that their patients have. In the don’ts section, the picture advocates that a practitioner should not neglect patients who are engaging (Mathis and Galloway, 2013, p. 97). This comes out as a way of embracing the fact that there are those patients who will keep to themselves and those that are outspoken and would therefore want to engage with the practitioner. This is a way of accepting the differences that are there among patients.

Even as the first picture brings out how effective social media, which is a type of media, can be well utilized to achieve the goal of culturally safe health care, the second media item brings out the absolute contrast. The concept of social media addiction has been of concern in the last few years. It is a crawling problem that not only affects teenagers but also professionals of older ages (Purnell, 2014, p. 85). These could even be medical practitioners. The impact of this would be utter incompetence and negligence by such professionals, which in the case of the health sector would result in probable loss of life or worsening of existing medical complications or conditions. Relative to the fourth principle which is on understanding the power that health services have and how this care influences families and individual people, the picture depicts a direct opposition to this principle (Purnell, 2014, p. 23). Neglecting their role because of media counts as a counter-aim of what cultural safety advocates for. A close look at the negative impact of social media addiction reveals just how much of a problem it is since some people go as much as skipping mundane activities such as taking meals. This media item has the potential to act as a warning to practitioners to refrain from such tendencies hence it is not entirely negative, but only shows the negativity of the action contained within it.

In conclusion**,** culturally safe healthcare is a beneficial phenomenon whose importance cannot be undermined. Its significance can be seen through the developments that have been witnessed in countries like New Zealand where it is believed to have originated. The country has seen tremendous growth in its health sector thanks to it. Culturally safe care should thus be encouraged and implemented.

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