

# What does the 3rd space mean to you as a health professional

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Third Space Third Space According to Oldenburg, each individual person has three spaces-the first, second and third. In his opinion, the first space refers to the homes in which they live and those whom they interact with (Oldenburg, 2000). These simply refer to the family members who are present in these homes. The second space refers to the work place which is where most people spend a lot of their time. This is because a typical work day usually consumes up to eight hours each day. On the other hand, the third space is the broader community life which arises from the environment in which a person lives (Eckermann, A. K. et al., 2010). In the context of this assignment, the third space was the forum where the aboriginals and the non-aboriginals gathered to talk and interact with one another away from their homes and places of work.

There is a general agreement that social capital or what others would call cultural capital is not the only way to deal with the social exclusion menace. Aboriginals in Australia struggled for many years to be able to get the second and third space. It was actually hell to get the third space (Fenwick, 1998). They were at the periphery of service delivery in Australia for many years. They had health issues to deal with, and it was hard because they didn't have the third space (Fenwick, 2001). A health professional finds the third space very important because it provides a forum in which they got to know about the health of the aboriginals, unlike the past where they would have health problems and nobody would care about it.

The aboriginal health was in the past the hardest thing to understand because they lived in seclusion and felt unneeded because of their identity. It would be easier for health professionals to find ways to help the

aboriginals with their health problems if informal settings are created in which the aboriginals and the non-aboriginals can sit together and talk, and just interact on a number of things touching on their lives (Eckermann et al. 2010).. There were certain social determinants of an aboriginal's health and all of them touched on the social exclusion they suffered in the hands of the non-aboriginals, supposedly because they are viewed as an inferior race to the non-aboriginals. This made it hard to understand the health issues of the aboriginals. Third space creates an environment in which these two groups of people can interact. Through such interaction, it is no doubt that the health professionals will find it easy to understand the health of the aboriginals, and prescribe the best medication for them.

The aboriginals are particularly very hard to understand because apart from living in designated areas where they don't interact much with the non-aboriginals, they are uneducated and therefore cannot secure good jobs which can earn them some good money to enable them get medical services from the Australian hospitals. With third space, there is the social equity which will grant both the aboriginals and the non-aboriginals equal opportunities on matters such as education and parity in the service provision. With the guarantee of equality in the provision of health services, the health professionals will find it much easier to handle the health issues of the aboriginals ((WHO 2008)). This is especially because they (the aboriginals) will be free to visit those hospitals and find the professional attention of the health professionals.

Besides, they will afford such medical attention because with the education, they will probably have some better paying jobs and with the money, they

will afford the services at the health facilities across the country. They will get those services without any form of bias towards them.

## References

Eckermann, A. K. et al. (2010). Binan Goonj: Bridging Cultures in Aboriginal Health (3rd ed., pp. 161-195). Marrickville, NSW: Elsevier.

World Health Organization (WHO) (2008). Closing the Gap in a Generation. Health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Geneva, World Health Organization (WHO).

Fenwick, C (1998) Post operative pain experiences in Central Australian Aboriginal women: What do we understand? B. Nursing (hons) thesis, Southern Cross University

Fenwick, C. (2001) ' Pain management strategies for health professionals caring for Central Australian Aboriginal people, Commonwealth Department of Health and Aged Care, Canberra.

Fenwick, C & Stevens, J. (2004) Post operative pain experiences of Central Australian Aboriginal women. What do we understand? Australian Journal of Rural Health, vol. 12, no. pp. 22-27.

Oldenburg, R. (2000). Celebrating the Third Place: Inspiring Stories about the " Great Good Places" at the Heart of Our Communities. New York: Marlowe & Company.