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An online guide for health professionals working with immigrant and refugee children, youth and families.

Developed by the Canadian Paediatric Society with experts in newcomer health.

I have no conflict of interest to declare
Immigrants and Refugees

Someone who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable to, or owing to such fear, is unwilling to avail himself of the protection of that country..." - UNHCR.

Culture

- "thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups".
- exists in all patients and care providers
- Biases in perception and belief in right & wrong
- dynamic and evolving,
- learned and passed on through generations,
- shared among those who agree on the way they name and understand reality,
- often identified 'symbolically', through language, dress, music and behaviours, and
- integrated into all aspects of an individual's life.

Culture Influences Health

- Perception of health and illness
  - Causes of disease e.g. absence of germ theory
  - Which diseases are stigmatized e.g. depression
  - How illness and pain are experienced and expressed
  - Health promotion activities e.g. obesity
  - Where patients seek help e.g. traditional care
  - Patient interaction with health care providers e.g. eye contact
  - The degree of compliance with treatment

Elements of Culture – Patient & Provider

Culture

<table>
<thead>
<tr>
<th>Collectivistic</th>
<th>Individualistic</th>
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<tbody>
<tr>
<td>Focus on &quot;we&quot;</td>
<td>Focus on &quot;I&quot;</td>
</tr>
<tr>
<td>Promote relatedness and interdependence</td>
<td>Value autonomy</td>
</tr>
<tr>
<td>Connection to the family</td>
<td>View ability to make personal individual choices as a right</td>
</tr>
<tr>
<td>Value respect and obedience</td>
<td>Emphasize individual initiative and achievement</td>
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<tr>
<td>Emphasize group goals, cooperation and harmony</td>
<td>Lesser influence of group views and values, and in fewer aspects of life</td>
</tr>
<tr>
<td>Greater, broader influence of group views and values</td>
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Cultural Competence

- A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations
- About equity
- Terms
  - Cultural effectiveness
  - Culturally effective health care
  - Cultural humility
  - Cultural safety

Cultural Competence - Step 1

- Value diversity - Identify your individual biases & those of your organization
  - Prejudice – in the absence of evidence perceive 1 group as inferior to another
  - Stereotype – generalize without considering individual differences
  - Marginalization – leads to lack of equitable access to social political or economic benefits
  - Racism – actions related to power difference of 1 group related to another
  - Discrimination – actions that limit the opportunities of 1 group over another at level of organization or individual

Case #1

A 14 yr old from DRC has been brought into the clinic by her grandmother because of nausea and vomiting. She has been in Canada for 2 weeks and during her initial screening visit, stated that she had never been sexually active. Her grandmother is interpreting because no interpreter was booked. Urine test shows that she is pregnant. What do you do?

- How do you know how grandma will react?
- Maybe they will celebrate
- Maybe the patient will be beaten
- Maybe they will abort it
- Maybe they will force her to marry

Cultural Competent Clinical Care

- Awareness of your own cultural values/biases influence your interactions
- Demonstrate openess to different values/beliefs
- Adapting your practice style to different needs
- Respect
- Continuous learning regarding influence of culture on you and others
- Increase access to healthcare through outreach, education and inclusive practices

ABCDE Cultural Competence

- Affective – Cultural awareness – curiosity, perceptiveness, respect, desire to connect with patient and family
- Self-awareness – insights of healthcare providers into their personal values and biases
- Behavioural – skills that encourage provider to learn about patients cultural values, beliefs, practices to then determine best treatment/advice
- Cognitive – knowledge of generic and specific influences of culture on health
- Difference – understand how culture influences both the provider – patient interaction as well as the patient – health system interaction
- Equity – strive towards equity in health across all groups

http://www.sickkids.ca/Cultural/SickKidsCulturalCompetence/index.html
Cultural Assessment

- Cultural Identity – how we define ourselves as distinct or similar to others
- Ethnic, cultural or religious groups
- Language and need for interpreter
- Refugee/immigrant experience
- Cultural Explanations of Illness & Treatment....
- Environmental Factors

Compare 2 Stories

- A brother and sister come to Canada from a cosmopolitan city in Eastern Europe. Their mother is a doctor; their father, a lawyer. The parents organized and self-financed the entire immigration process and emigrated solely to offer a better life for their children.
- Two newcomer siblings, a boy and a girl, come to Canada from the mountains of Burma, where they spoke Chin. Their mother is illiterate. Forced into hiding with their mother, the children had to watch their father being beaten to death before they were able to flee to a refugee camp on the Thai border. They did not attend school in the refugee camp.

Adaptation

- Terms
  - Overcoming stress
  - Acculturation
  - Resettlement
  - Racial-ethnic ID

http://www.kidsnewtocanada.ca/care/interpreters

Key points

- Accurate assessment of any newcomer child or youth requires complete, optimal communication without misunderstanding, in their native language this can only be achieved collaboratively with an interpreter.
- Engage a trusted cultural interpreter for your newcomer patients whenever possible.
- There are certain issues involved with using a patient's family member or friend as an interpreter. Avoid use of children and youths as interpreters.  

Adaptation to what?

Language
Gender roles
Clothing
School
Social norms
Disparity/ Poverty
Recreation
Climate
Child protection & discipline
Sense of security
Food
Racism
Housing
Loss
Loss of status
Employment

Cultural Assessment

- Cultural Identity – how we define ourselves as distinct or similar to others
- Cultural Explanations of Illness & Treatment
  - Nature of illness
  - Cause of illness
  - Consequences of illness
  - Treatment of illness
- Environmental Factors

http://www.nichols.edu/NNN_Learning/Introductory/Cultural/CulturalCompetence/players.html

Cultural Assessment

- Cultural Explanations of Illness/Treatment Questions
  - Tell me what you know about your child’s illness
  - Cause of disease
  - Treatment to date
  - Experience of illness for parent and child
  - Worries re illness
  - Any specific beliefs, values, traditions that can help us care for your child/you?

http://www.nichols.edu/NNN_Learning/Introductory/Cultural/CulturalCompetence/players.html

Cultural Assessment

- Cultural Identity – how we define ourselves as distinct or similar to others
- Cultural Explanations of Illness & Treatment
- Environmental Factors
  - Housing
  - Access to services including healthcare
  - Discrimination
  - Social supports and networks – formal & informal
  - Employment status & income
  - Education level

http://www.nichols.edu/NNN_Learning/Introductory/Cultural/CulturalCompetence/players.html

Case #2

- At the end of a visit, an Iraqi man who is a father of 10 children adds that he is worried about his twin daughters (aged 15), who are both deaf. They have not been seen at the clinic for over 6 months and communication was very difficult during previous visits. He is very concerned about one of them because she is constantly crying and isolating in her room. She is learning American Sign language but has been missing most school days. How do you approach this?

http://www.nichols.edu/NNN_Learning/Introductory/Cultural/CulturalCompetence/players.html

Cultural Assessment

- Environmental Factors Questions
  - Where do you live & with whom?
  - Family doctor?
  - Someone helping you at this time?
  - Any worries of having enough money?
  - Can you fill prescriptions?
  - Do you have difficulty getting away from your job to come to the doctor?
  - Sleeping, eating

http://www.nichols.edu/NNN_Learning/Introductory/Cultural/CulturalCompetence/players.html

Cultural Assessment

- Schedule a visit to see the twins and parents
  - Cultural identity – view of deafness within cultural context (family and individual)
  - Cultural perception of illness and treatment
  - Environmental issues – housing, peers, school, disability, supports, etc

http://www.nichols.edu/NNN_Learning/Introductory/Cultural/CulturalCompetence/players.html
LEARN Model

- **Listen** with sympathy and understanding to the patient’s perception of a problem
- **Explain** your perceptions of a problem
- **Acknowledge & discuss** differences & similarities
- **Recommend** treatment
- **Negotiate** agreement

LEARN Model

- **Listen** with sympathy and understanding
  - What does the health condition represent to the patient
  - What is their agenda
  - Elicit history – pre, migration & post & stress/trauma
  - Adaptation/acculturation process
  - Family conflict?
  - Bias or discrimination?
  - In adolescents for risky behaviours e.g. sex, substance?
  - Basic needs met?
  - Usual practices – perinatal, nutrition, disabilities, healthcare use

LEARN Model

- **Explain** your perceptions of a problem
- **Biases & values**: Know your own
- **Respect & validate**: Acknowledge
  - personal and cultural strengths
  - resilience in surviving adverse experiences
  - ability to adapt to a new culture
- **Acknowledge/discuss** differences/similarities
  - Let the patient teach you & know when to stand firm
- **Recommend** treatment
- **Consider** traditional, alternative therapy
- **Negotiate** agreement
- **Ensure** both agendas met

Taking a history with newcomer children and adolescents

Case #3

- A 15 yr old Iranian woman is brought in by her mother. Mother is concerned about her daughter because she fell down the stairs a few years ago and may therefore no longer be a virgin. They have lived in Canada for 8 months. She would like her teenage daughter to have a physical exam and a letter to document her status - and if she is found not to be a virgin, to document that it is because she fell down the stairs.

Resilience
**Resilience: Influential Factors**

<table>
<thead>
<tr>
<th>Physical and mental attributes</th>
<th>Network factors</th>
<th>Meaning, values and faith</th>
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</thead>
<tbody>
<tr>
<td>Strength</td>
<td>At least one supportive staff member</td>
<td>Sense of coherence</td>
</tr>
<tr>
<td>Emotional stability</td>
<td>Family</td>
<td>Meaning</td>
</tr>
<tr>
<td>Temperament</td>
<td>Teachers</td>
<td>Values such as hope, love,</td>
</tr>
<tr>
<td>Practical skills</td>
<td>Community</td>
<td>honesty, friendship, solidarity, faith, family, prayer</td>
</tr>
<tr>
<td>Social skills</td>
<td>Institutions</td>
<td></td>
</tr>
<tr>
<td>Strength from earlier</td>
<td>Cultural connectivity</td>
<td></td>
</tr>
<tr>
<td>Experience/challenges</td>
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**Culturally Competent Care**

- **Know your biases**
- **Think equitable care**
- **Negotiate**
- **Cultural competence**
  - Interpreters or cultural brokers – phone or fax
  - LEARN
  - Use usual sources of evidenced based screening, diagnosis and treatment
  - Resources in required languages
  - Links to community supports

**Bridge Refugee Clinic Team**

**Clinic Team**
- Physicians – GPs, pediatrician, internal medicine, psychiatrist
- Nurses & nurse practitioner
- Community Liaison worker (pt)
- Counselor (pt)
- Psychologist
- Interpreter services
- Nutritionist (pt)

**Extended Team**
- Mental health resources
- Cultural groups
- Immigrant Services Society – interpreters, settlement counselors
- Disease focused services e.g. HIV
- Volunteers to navigate health system
- Churches
- Community Centres
- Libraries
- Optimists
- Physiotherapists
- Lawyers
- etc.

**A Typical Week**

In addition to our regular returning clients and new refugee claimants, for this week (Sept 14th – 21st) Bridge's predetermined commitment was...

- Iraqis: one family of 5, and 4 single people
- Eritreans: one family of 4
- Sudanese: one family of 5
- Congolese: two families of 6, two families of 5, two families of 4, two families of 2, five single people

A total of 57 new clients....

**Case #4**

You have been advised that a 12 yo Sudanese girl interprets for her parents and you are seeing the child for the first time. Mother and father say that they trust no one else since they are both suffering from aftereffects of the war. They believe that the clinic interpreter comes from a group that persecuted them. Mother has many complaints of body pain. She sleeps poorly and constantly worries. Dad suffers in silence and attempts to be strong. He has no job and the family lives in a 1 bedroom, basement suite that is poorly maintained. How would you organize care for this family?

**Useful websites...**

- Take a test in cultural competence:
  - https://www4.georgetown.edu/uiis/keybridge/keyform/form.cfm?formID=277
- Curricula:
  - https://cccm.thinkculturalhealth.hhs.gov/
- Guidelines:
  - http://www.kidsnewtocanada.ca/
Caring for Kids New to Canada
An online guide for health professionals working with immigrant and refugee children, youth and families.
Developed by the Canadian Paediatric Society with experts in newcomer health.
www.kidsnewtocanada.ca

Exercise
- In groups of two (healthcare worker & patient) role play the scenario described (10 mins)
- Switch roles (10 mins)
- Identify key (5 mins)
  - Points learned
  - Challenges faced
  - Biases you observed
- Large group wrap up – share key points (10 mins)

DARE
- Discover – foster keen interest in patient perspective
  - What is making you feel this way
  - What do you hope we can do for you
  - Is there anything about your culture that would help me understand
  - Can you help me understand what is important to you now
- Acknowledge & Recognize – confirm understanding of patient perspective
  - I hear that this is very important for you
  - I want to work with you.....
  - I’d like to understand more about....
- Enable – take active steps to address patient needs in culturally responsive manner
  - Interpreter services
  - Translated information
  - Community organizations

http://www.kidsnewtocanada.ca/CLC/learningResources/CulturalCompetence/Online.html