



Diversity Issues, Challenges, and Opportunities in Health Care

Ann Vanderbijn, MA

avanderbijn@providencehealth.bc.ca

October 28, 2009

Who do we *say* we are?

“We do not fully respect the humanity of our fellow citizens - or cultivate our own [humanity] - if we do not wish

- to **learn** about them
- to **understand** their history
- to **appreciate** the differences between their lives and ours.”

Nassbaum

Science & the **Meanings of Illness**

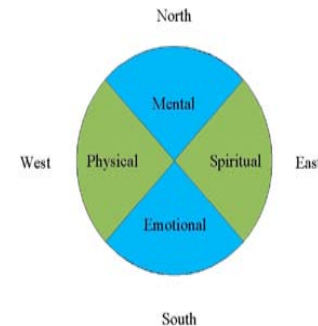
- “**A scientifically competent medicine *alone* cannot**
- help a patient grapple with the loss of health, and
 - find meaning in illness and dying.

Along with their growing scientific expertise, doctors need the expertise

- to **listen** to their patients
- to **understand** as best they can the ordeals of illness
- to **honour** the meanings of their patients' narratives of illness
- **to be moved** by what they behold **so that they can act on the patient's behalf.**”

Overview / Goals

- To develop a common understanding of ‘Diversity’
- To make the link between diversity and health disparities
- To raise awareness of our ‘invisible backpacks’
- To link quality with **equitable** care and cultural safety
- To kindle our moral imaginations



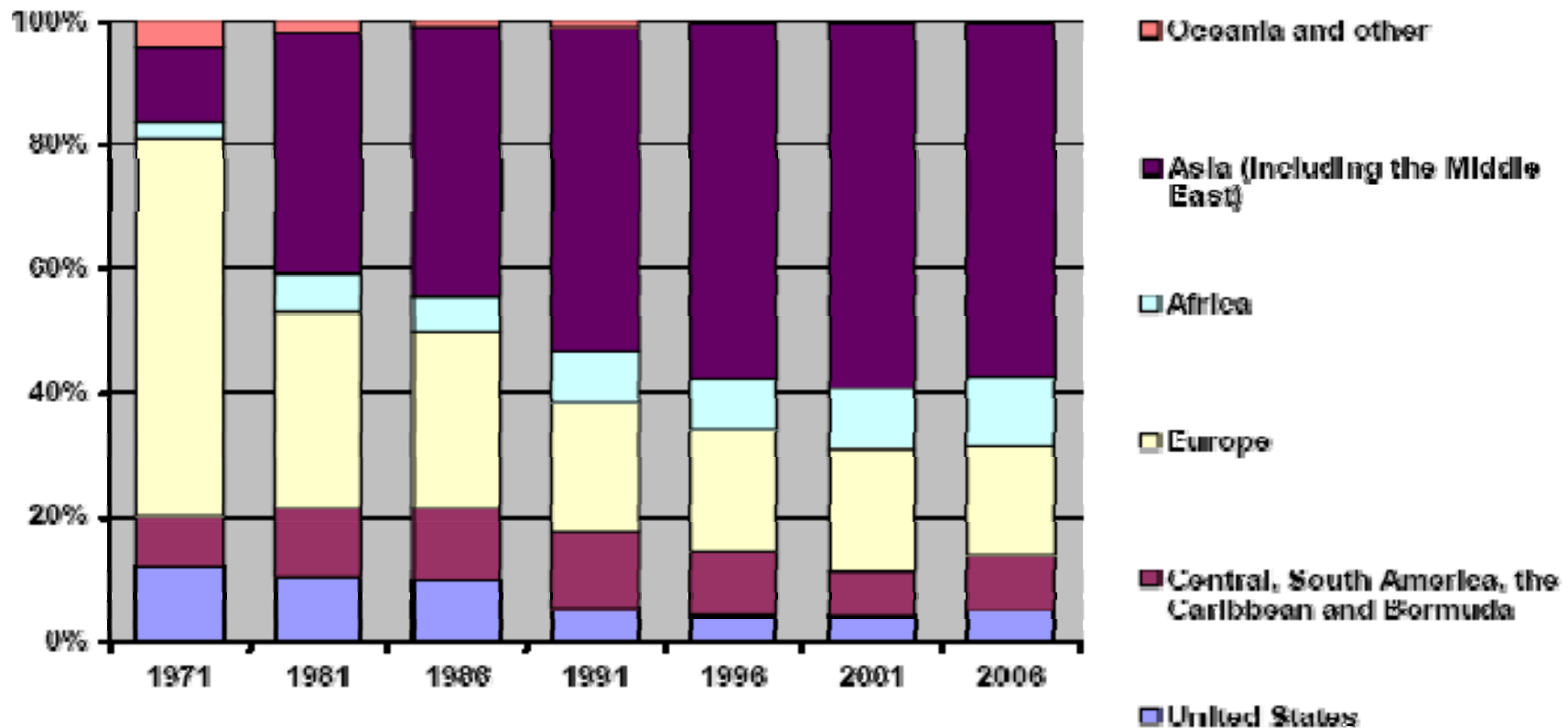
What exactly is Diversity?

‘**Diversity**’ is a term to describe variations

- **Between** cultural groups - and/or
- **Within** cultural groups
 - ethnicity, national origin, ancestry, race, gender, ability, age, physical characteristics, religion, values, beliefs, sexual orientation, socio-economic class, life experiences, etc.

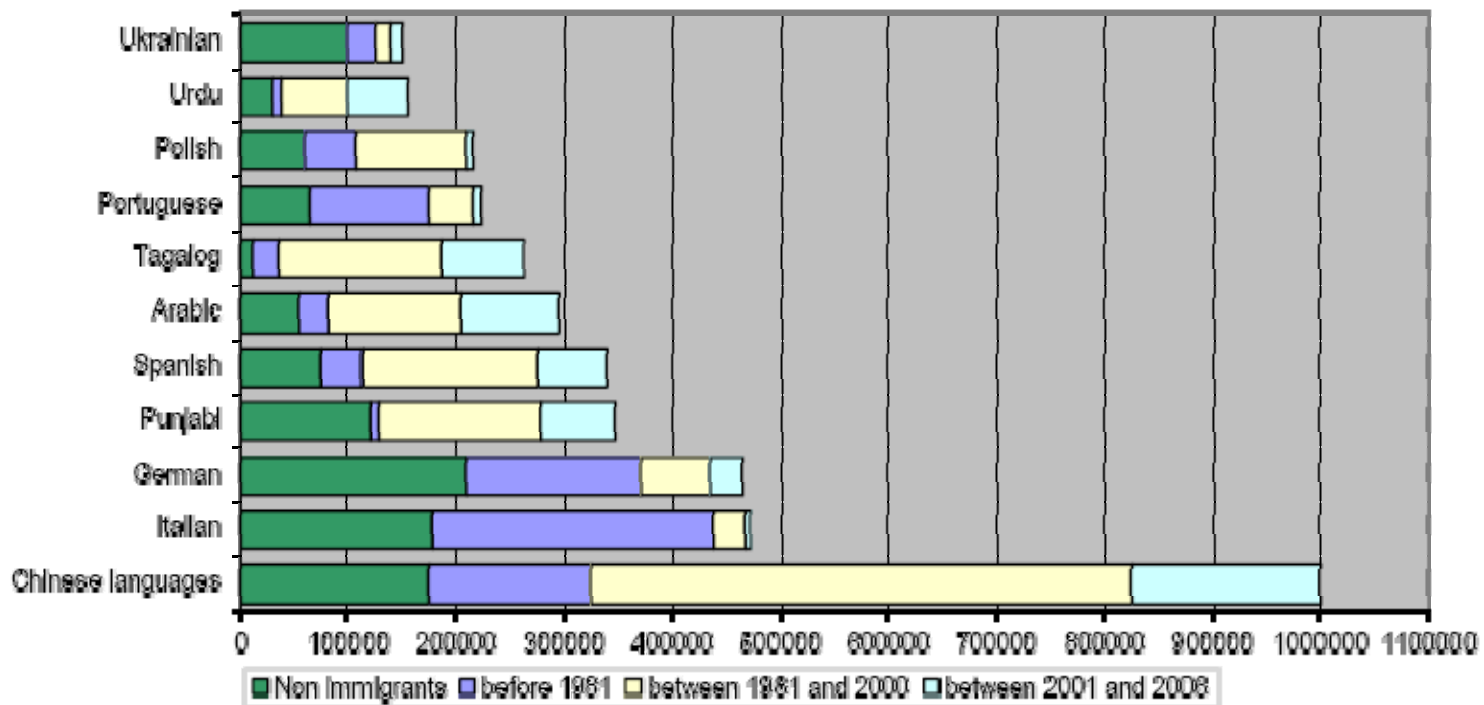
Diversity of Cultures

Region of birth of recent Immigrants to Canada, 1971 to 2006



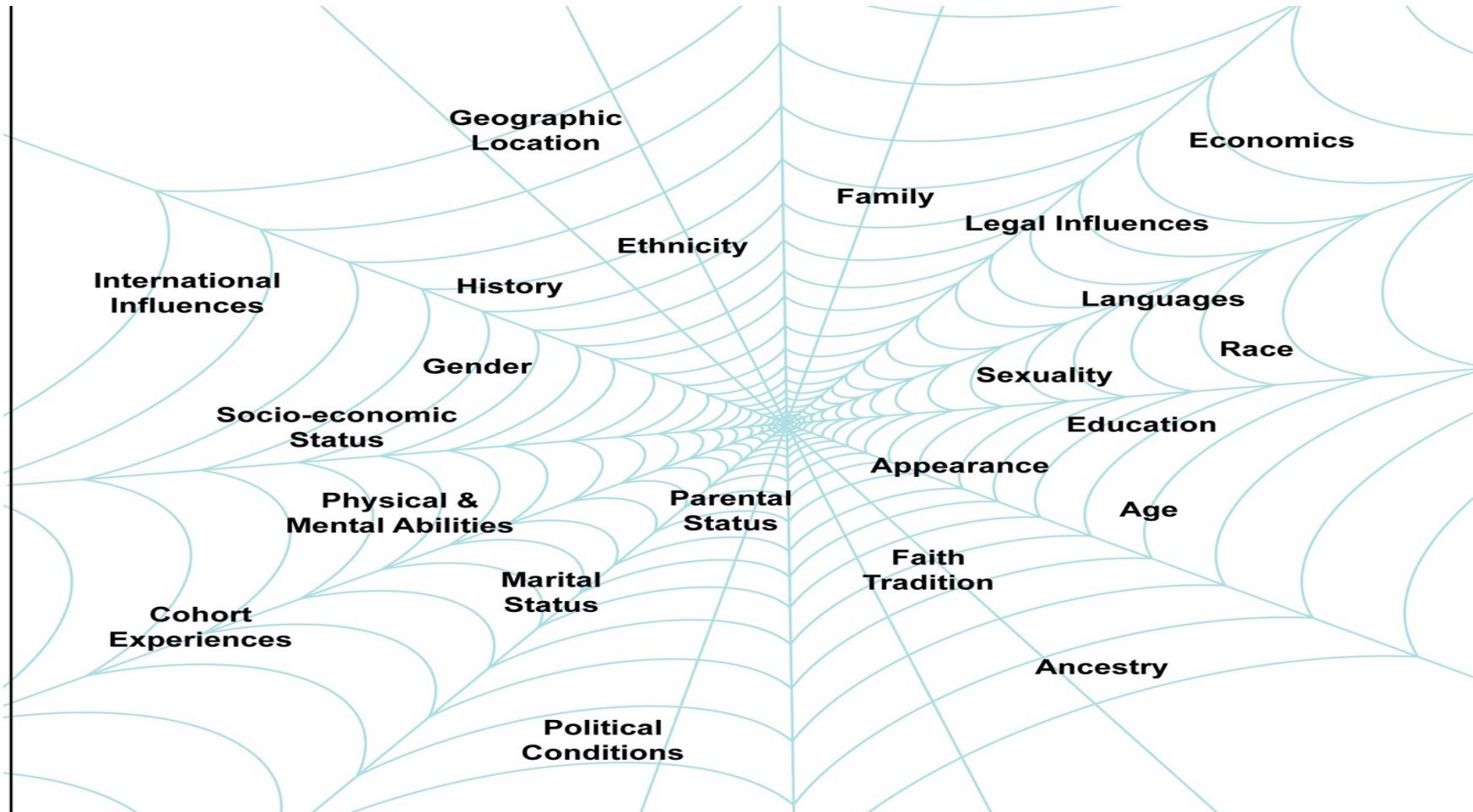
Diversity of Languages/Cultures

Non-official mother tongues by Immigrant status and period of Immigration, Canada, 2006



Note: 'Chinese languages' includes Mandarin, Cantonese, Hakka, Taiwanese, Chaochow (Teochow), Fukien and Shanghaiese, as well as a residual category (Chinese languages not otherwise specified).

Culture as a **Web of Diversity**



How does cultural diversity matter for healthcare?



Culture influences the way people access & respond to medical services and preventative interventions.

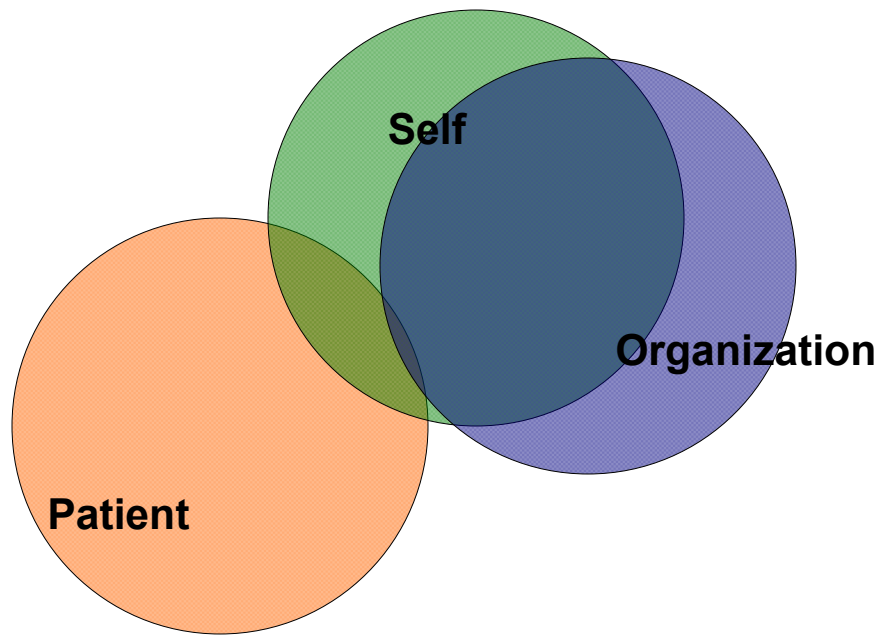
Definitions of

personhood
health
illness
treatment
the 'body'

Beliefs and values

gender & age
family & community
food
bodily modesty and pollution
who's in control
respectful communication

Cultural Mismatches?



How does diversity matter for healthcare?

Health Disparities

Care

“...Visible minorities, First Nations, those with physical/mental disabilities, of a different sexual orientation, different educational or socio-economic backgrounds ... have made it clear that there are many ways and times they have been made to feel **unwelcome in nursing and healthcare ... from feeling uncomfortable ... to subtle discrimination ...to outward hostility**” –

Cure

Disparities in health **outcomes**

Disparities include

differences in:

- Delivery of health care
- Access to health care services
- Medical outcomes based on ethnicity, race, culture, geography, gender and other factors

What research tells us...

- **Mistrust**
- **Increased length of stay**
- **Defensive testing**
- **Inadequate testing**
- ***Lack of equivalence in concepts across languages***
- **Higher rates of re-admittance**
- **Higher use of Emergency Dept.**
- **Patient dissatisfaction**
- **Staff dissatisfaction**
- **Disrespect related to racial/cultural stereotyping**
- **Non-adherence to treatment recommendations**
- **Clinical uncertainty and misdiagnosis**
- **Greater number of adverse events, with more serious clinical consequences**
- **Drs as unquestioned authority so no questions are asked**

Healthcare 'Culture' & 'Canadian' Culture

Cultures of 'no culture'?

- * The more homogeneous medical practice is &
- * The more its values and beliefs are aligned with those of the 'dominant' culture -
 - ▶ the more these values and beliefs become **invisible**, and
 - ▶ the more they are seen as **common sense**, as the '**right**' way of doing things.

Invisible Backpacks



Our “**Common Sense**”

**When cultural values, medical practices,
communication patterns & languages **don't line up****



Our human need for ‘**Recognition**’

“**Worldview recognition** is a fundamental human identity need.”

A “**collision of worldviews**” can cause a significant crisis in people’s lives.

Moral Distress

Moral Distress

“...Where there is incoherence between one’s beliefs and values - and one’s actions, and possibly also outcomes.”

Quality Care

“Health disparities and quality are two sides of the same coin...that’s it in a nutshell. If you’re going to provide quality care and services, then you need to address health disparities.”

“Addressing cultural and linguistic barriers is about saving lives.”

Equity or Equality

Equity of Outcomes?

Equal Treatment?

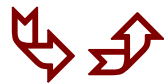
One requires **transformation of our practice** to deliver **equal outcomes** of health status.

The other **maintains the status quo**, which we already know involves unacceptable **health disparities**.

Equitable Care = Patient-centred Care

Equity

- The fair and just distribution of resources **based on need**
- Care that does not vary **in quality** by personal characteristics



Patient-Centeredness

- Respect for patients' values, preferences, and **expressed needs**

Cure & Care

“The *physical body* always exists within a **social, spiritual and cultural** context. This context is what gives personal meaning to behaviours, relationships, and to illness experiences. It provides, therefore, the **implicit moral framework** for provider- patient interactions. Without understanding that context, we risk violating important **moral values**, and unknowingly, risk compromising basic **medical care.**”

Outcome of **equitable** care

↘ **Cultural safety = Clinical safety = ↗**

↗ **Cultural safety = Clinical safety = ↘**

↗ **Cultural safety = Clinical safety = ↗**

↗ **Cultural safety = Clinical safety = ↗**

↗ **Cultural safety = Clinical safety.**

Cultural Humility

“ The starting point for such an approach... [involves] careful consideration by healthcare providers of the assumptions and beliefs that are embedded in their own understandings and goals in the clinical encounter.”

(our Invisible Backpacks)

Cultural Diversity & An Ethics of Care

“**Identifying our differences** is just as important as [searching for what we have in common].”

“**Both what we share and what separates us** can lead to ethical insights that would otherwise be unavailable. Stories allow us to buy into and share our **communal imaginative** experience...”

“Finding a **shared ethical base** in a pluralistic, multicultural, global society **is not optional, it is crucial to our survival physically and morally.**”

Using our **moral imaginations** to start our conversations today...

