A Culturally Competent Preparedness Model for Researching Limited English Proficient (LEP) Communities

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Presentation Goals

- Review definitions of diversity, culture, and cultural competency
- Present conceptual framework for cultural competency using the work of Terry Cross, et al.
- Present PH preparedness model for reaching Limited English Proficient (LEP) communities
- Identify key components in culturally competent public health preparedness planning
- Describe process of community-based participation in PH preparedness planning
Overview

• Multiple definitions of cultural competency

• Most are adaptations of the pioneering monograph on cultural competency by T. Cross, *et. al.*

Background

• Historically, conceptually embedded in direct service delivery to underserved, ethnic minority populations

• Strong mental health service delivery perspective
**Cultural Competence**: The state of being capable of functioning effectively in the context of cultural differences.

**Cultural Competence**: A set of congruent practice skills, attitudes, policies, and structures, that come together in a system or agency or among professionals and enable that system, agency, or those professionals to work effectively in the context of cultural differences.

In which of the following PH emergencies was it most important for PH agencies and the PH workforce to be culturally competent?

A. Hurricane Katrina
B. SARS in Toronto
C. Anthrax in U.S. Postal Workers
D. South Asian Tsunami
Cultural Competency: Five Core Components

1. Developing a value for diversity
2. Conducting a cultural self-assessment
3. Understanding the dynamics of difference
4. Accessing cultural knowledge
5. Adapting to diversity

Cultural Competency: moving from a clinical/service delivery focus to a public health application focus

“Seeking an answer is the scientific paradigm; finding meaning is quite another.”

Carl A. Hammerschlag, M.D., *The Theft of the Spirit.* (p.29)
Disaster Planning for LEP Populations

• Disaster/emergency plans do not adequately consider LEP populations needs.

• Potential problems facing LEP communities during a disaster include:
  ▪ Barriers in communication between LEP groups and first responders/care providers
  ▪ Challenges integrating multiple systems of care
  ▪ Difficulties delivering emergency responses to all citizens
The Role of Medical Interpreters

- Medical interpreters (MIs) are key to cultural and linguistic linkage w/LEP communities.

- Current preparedness training for health care workers does not include medical interpreters.

- Model: preparedness training for medical interpreters

Hurricane Katrina: Medical Interpreters
Image Source: FEMA
Project: The Role of MIs in Disaster Preparedness

Time frame: June 2004 – August 2005

1. Established a partnership with Interpreter Services at Harborview Medical Center (HMC)

2. Developed and administered a background survey to 38 HMC MI staff
Background Survey of MIs

Survey content areas:

- demographics
- language background
- interpretation experiences and training
- experiences with disaster situations
- training needs
Qualitative Interviews

• Total participants (n=21)
• Content areas:
  ▪ Cultural meanings of disaster and emergency
  ▪ MI training and support needs for disaster preparedness

Examples:

“How do you describe the word disaster?”

“How does your language community understand the word disaster?”
Five Thematic Categories

1. Cultural descriptions and definitions of disaster
2. Cultural descriptions and definitions of emergency
3. Experiences interpreting in disasters
4. Medical interpreter training
5. MI perceptions of language community descriptions of disaster
Project Implementation: Phase II*

1. Established partnerships with Group Health Cooperative (GHC), Public Health – Seattle & King County (PHSKC), and International Community Health Services (ICHS)

2. Recruited 50 medical interpreters to participate
   - Administered background survey
   - Conducted individual qualitative interviews

Applying cultural competency to a community-based training model for MI preparedness

- Objectives
  - Engage in planning that is mutually beneficial
  - Develop culturally competent strategies
  - Clarify roles and expectations
  - Honor both process and product

- Issues
  - Defining “community”
  - Developing effective community representation
  - Determining role of community members/partner
Feedback Poll

Regarding cultural competence, it’s most important for me to know:

A. What cultural competence is
B. Do’s and Don’ts of cultural competence
C. How I should get started
D. How to assess where my agency/organization fits within the cultural competence continuum
1. Developing a Value for Diversity

- Addresses ways PH practitioners value:
  - Diverse LEP language/cultural groups
  - Diverse methods and strategies to engage and collaborate with these target groups
  - Example: Establish partnerships with MIs as cultural brokers to their respective language communities
### Phase 1 Pilot: HMC MI

Languages interpreted (total = 30)

- Arabic
- Amharic
- Cambodian
- Cantonese
- Chao Chou
- Chinese
- Dinka
- English
- German
- Hebrew
- Hindi
- Ilocano
- Indonesian
- Lao
- Mandarin
- Malaysian
- Mien
- Oromo
- Polish
- Punjabi
- Swahili
- Russian
- Somali
- Spanish
- Tagalog
- Taiwanese
- Tigrinya
- Ukranian
- Urdu
- Vietnamese
Phase 2 Implementation: MI across 3 sites

Languages interpreted (total = 30)

- Arabic
- Amharic
- Bosnian
- Bulgarian
- Cambodian
- Cantonese
- Chao Chou
- Croatian
- Dari
- English
- Farsi
- French
- Hindi
- Ilocano
- Japanese
- Korean
- Lao
- Mandarin
- Mien
- Punjabi
- Russian
- Serbian
- Somali
- Spanish
- Tagalog
- Thai
- Tigrinya
- Ukranian
- Urdu
- Vietnamese
2. Conducting a Cultural Self-Assessment

Self-assessment by those involved in population-level disaster preparedness activities:

- Professional preparedness language and models
- Cultural beliefs, values, and training regarding PH “risk” behaviors
- Stereotypes and biases regarding causation, response, and recovery (including assumptions about MIs)
- Organizational structure of PH response systems
- Cross-cultural training needs of PH workforce
2. Conducting a Self-Assessment (cont)

Example

- Few MIs listed any training in disaster preparedness.
- MIs are unclear of their role during a disaster event.
- MIs are unclear about how to protect themselves during a disaster event.
3. Understanding the Dynamics of Difference

- Awareness of and attention to interaction of different cultures

- How differences shape public health actions

- Example: Language Communities (LC) perceptions of “disaster”
  - “Disaster” and “emergency” are different
  - Cause by fate; or will of God
  - Regional and cultural context (famine, civil war, etc.)
  - Taboo topic: cannot be foretold
For many immigrants/refugees who survived wars and conflict, America is considered a “safe place”:

“I think…this is our final destination. If something happens in the United States, there’s no way you can get out of here… when you left home, that’s it. This is your last place.”

“They think they’re safe here; there’s no more disaster...”
4. Accessing Cultural Knowledge

- Participatory learning experience about cultural differences and commonalities
- Appreciation of role of culture
- Steps to integrate cultural knowledge and understanding with sound scientific knowledge
4. Accessing Cultural Knowledge (cont)

• Example: Community preparedness
  ▪ Not discussed across most communities
  ▪ “Preparedness” is not a concept for many communities
  ▪ Community just deals with whatever happens—no preparation
  ▪ No resources available for LEP communities
5. Adapting to Diversity

- Demonstrates culturally congruent approaches and strategies
- Includes systems’ changes and flexibility
- Supports creative approaches and new methods
- Example: MI training needs and support
  - MI want to help their communities.
  - MI want training.
  - MI need clarification of their roles and expectations.
5. Adapting to Diversity (cont)

- MI desire respect for and acknowledgement of their work
- MI want inclusion as part of the PH workforce
- MI want to contribute preparedness ideas and strategies

“I would like to know as much as possible about the disaster and how I can prepare for it, because if I know that, I can transfer the knowledge to my community. So I need more education and more exercise and practice…”
Let’s stop here and do a quick brainstorm about potential cultural brokers among vulnerable populations in your community. Think of those who would make good partners in PH preparedness.

What are some other groups?

Type your responses quickly into the text chat window.
“…knowledge is always relative to the knower.”

Next Steps

- Develop and initiate interpreter training
- Educate PH practitioners about roles of MIs and the scope of MI work
- Educate PH practitioners about the distinction between interpretation and translation
- Educate PH practitioners on how to work with MIs
- Formally integrate MIs as members of the public health workforce
- Develop culturally appropriate strategies for mobilizing a trained linguistic/cultural response workforce
- Expand training to bilingual/bicultural workers in community-based organizations
“What we call familiar is built up in layers to a structure known so deeply that it is taken for granted and virtually impossible to observe without the help of contrast. Encountering familiar issues in a strange setting is like returning on a second circuit of a Mobius strip and coming to the experience from the opposite side. Seen from a contrasting point of view or seen suddenly through the eyes of an outsider, one’s own familiar patterns can become accessible to choice and criticism. With yet another return, what seemed radically different is revealed as part of a common space.”