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Enhancing Cultural Diversity Awareness of Occupational Therapy Students

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Research Team

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Cultural competency defined:

That which a health care professional needs to know and do in order to reach common ground with a patient or client from a different cultural community.

In other words, competencies required to be able to communicate respectfully, effectively, and sensitively about health issues across cultures.

Background/Context:

Training for healthcare professionals (HCPs) in the areas of cultural-spiritual diversity awareness has taken on increased urgency because of the multicultural diversity of Canada's population.

Canada welcomes over 250,000 new immigrants a year, many with different cultural-spiritual perspectives of health and different health issues than the Canadian norm.

HCPs are faced with the opportunity and challenge of caring for clients from many cultures and spiritual backgrounds, with different languages, and different understanding of illness and health.

Background/Context:

Dr. Earle Waugh and Dr. Jean Triscott's research team's previous research among practicing HCPs has shown that, while many HCPs are aware of the diversity of populations, their training had not included cultural-spiritual sensitive education.

Occupational Therapy students are among those who would benefit from cultural-spiritual diversity training.

Study Purpose

Evaluate the effectiveness of a newly introduced educational session on enhancing cultural-spiritual diversity awareness in future health care professionals (HCPs) - Master of Science, Occupational Therapy (MScOT) students.

Study Method

The study included:

- A literature review
- Self-reported questionnaire regarding cultural knowledge, awareness, and behaviours of a group of first-year occupational therapy students. A questionnaire was administered pre- and post-education to 19 students, and to 69 MScOT students who were not enrolled in the module.
- A 13 hr module (during which 19 MScOT students received formal cultural-spiritual diversity awareness education)

Literature Review

18 models for cultural competency were published between 1991 to 2006 regarding training for OT students in this area

Dr. Waugh and Dr. Triscott have also developed a curriculum to inclusive of the LEARN AND BRIDGES Model

Issue Statement	
Importance of cultural factors	Increasing demand - More individuals from ethnic minorities are in need of OT services.
	Cultural factors could influence occupational performance.
	Cultural factors need to be considered in OT process.
	Overlooking cultural influences could affect OT assessment and the outcome of intervention.
Education	Students have limited knowledge about different cultures.
	Necessity for adequate exposure to cultural awareness
	Level of cultural awareness could be supported by classroom education and fieldwork experiences.
Personal level of awareness	Impact of cultural background on a person's belief, attitude, behavior, and lifestyle
	Cultural factors that could affect OT services
	Sources of information (books, leaflets, Web sites)
	Access to translation services

Cherry K et al (2009)

Module

A 13 hour educational session/module introduced 19 MScOT students to:

- the process and stages of becoming culturally-spiritually aware
- techniques used to improve communication with clients during cross-cultural/spiritual encounters,
- cultural/spiritual competency as a problem-solving process
- cross-cultural/spiritual cases.

13 hour Module (OCCTH 543): Cultural Competency Skills in Occupational Therapy Practice

- Administration of the HPSACC pre and post course
- Introduction of Cultural Competency
- Administration of four models (Learn, Bridges)
- Mid-Learner evaluation (Case-Based)
- Post-Learner evaluation (Case-Based)
- Exam
- Final Course evaluation

Tools for Intercultural Communication

1. Self-Assessment Tool
2. Learn Model
3. Bridges Tool

HEALTH PROFESSIONAL'S SELF-ASSESSMENT OF CULTURAL COMPETENCY (HPSACC Questionnaire)

The HPSACC Questionnaire was developed by a team lead by Dr. Earle Waugh and Dr. Jean Triscott to help health care professionals (HCPs) evaluate their own cultural knowledge, awareness, sensitivity, behaviors, and cultural confidence.

(Waugh, Szafran and Hanafi,2011)

A Tool for Gauging Cultural Competency : A Canadian Questionnaire

Great Diversity of Self-Assessment Questionnaires

Almost all are developed in the United States

Trends utilized may not capture Canadian differences

The official Policy of Multiculturalism stresses cultural difference in identity

Most American research focuses on African-Americans and Latinos

Aboriginals in Canada have a unique position in national identity

A Canadian Questionnaire: 64 Questions

HPSACC Questionnaire:

Qn 1: To what extent do you AGREE with each of the following statements?

1 = strongly disagree 2 = moderately disagree 3 = slightly disagree 4 = slightly agree 5 = moderately agree 6 = strongly agree	Rating (circle one)					
I have had many cross-cultural encounters in my life	1	2	3	4	5	6
I frequently take part in cross-cultural interactions.....	1	2	3	4	5	6
I encounter people from a wide variety of cultural groups.....	1	2	3	4	5	6
I partake in comprehensive and in-depth cross-cultural interactions.....	1	2	3	4	5	6
In general, my cross-cultural encounters have been positive experiences.....	1	2	3	4	5	6

HPSACC Questionnaire:

2. How **INFORMED** are you about each of the following areas *for the community that you serve*?
3. How **AWARE** are you of each of the following areas of *cross-cultural interaction*?
4. To what extent do you **AGREE** with each of the following statements?
5. How **SKILLED** do you feel in each of the following areas of *cross-cultural interaction*?
6. To what extent do you **AGREE** with each of the following statements?

“Learn” Model for Cross-Cultural Communication

The LEARN process enables health providers to elicit, discuss, and negotiate relevant cultural, social, and personal information relevant to an illness episode. (Berlin and Fowkes 1983)

The Guidelines are:

Listen with sympathy and understanding to the patient’s perception of the problem

Explain your perceptions of the problem

Acknowledge and discuss the differences and similarities

Recommend treatment

Negotiate agreement

Use of the Learn Model

Improves cross-culture communication

Obtains better client acceptance of treatment plan

Increases awareness of cultural issues

The primary focus is a suggested process for improved communication, which is seen as the fundamental need in cross-cultural interaction

(Berlin & Fowkes, 1983)

Tools for Cultural Understanding

B eliefs, Values, Norms

R oles and relationships with family/relatives

I dentify language, literacy, communication

D ecision-making methods/practices

G roup, community, organizations

E xtraordinary issues in health (e.g. end-of-life, childbirth, etc.)

S hare, understanding of cultures, reach common ground & compromise

(Waugh EH, Szafran O, Triscott JAC, Parent R., A Brush Education Inc. 2014)

Community-Based Modules

Learning Modules based on research findings from cultural communities

Research was based on end-of-life and dementia care which involved the elderly, and senior members of the respective communities in Northern Alberta, Canada.

(Waugh E, Szafran O, Triscott JAC, *At Interface of Culture and Medicine*, Chap. 2, University of Alberta press, 2011)

- Aboriginal (Cree)
- Chinese (Cantonese, Mandarin)
- Francophone
- Lebanese Muslim
- Sikh
- Mexican
- Cambodian

Community-Based Modules

The modules should not be regarded as being the norm for all such communities, as variability exists even within a cultural group.

During the research process, it became evident that which health care professionals were aware of issues surrounding cultural competence in patient care, they had received little or no training in cultural competence.

Health care professionals expressed a need for formal culturally-sensitive training.

Community-Based Modules

The professional script writer, Mary-Ellen Perley, Directors, Omar Moaullem and Michael Olsen.

Films were developed as teaching tools to give some real-life depth to cultural issues in dementia and end-of-life care.

The cases were based on important issues related to the respective communities.

Cultural Competency for HCPs Workshop

Modules:

- Traditional Roles of Family Care
- Cultural Issues in Obtaining Consent
- Cultural Issues in Adherence (Compliance)
- Language diversity in Health Care (French)
- Generational Views on Personal Directives
- Cultural Differences in End-of-Life (Chinese)
- Challenging Cultural Norms (French)
- Cultural Influence in Family Decision-Making
- Cultural Issues in Post-Traumatic Stress Syndrome
- Cultural Issues in Body Image

13 hr. Module with OT students

Four Modules:

1. Cultural Issues in Adherence (Compliance)
2. Language diversity in Health Care (French)
3. Cultural Differences in End-of-Life (Chinese)
4. Challenging Cultural Norms (French)

Modules for Mid-Course and Post-course evaluation:

1. Cultural Issues in Post-Traumatic Stress Syndrome
2. Cultural Issues in Body Image

KEY FINDINGS:

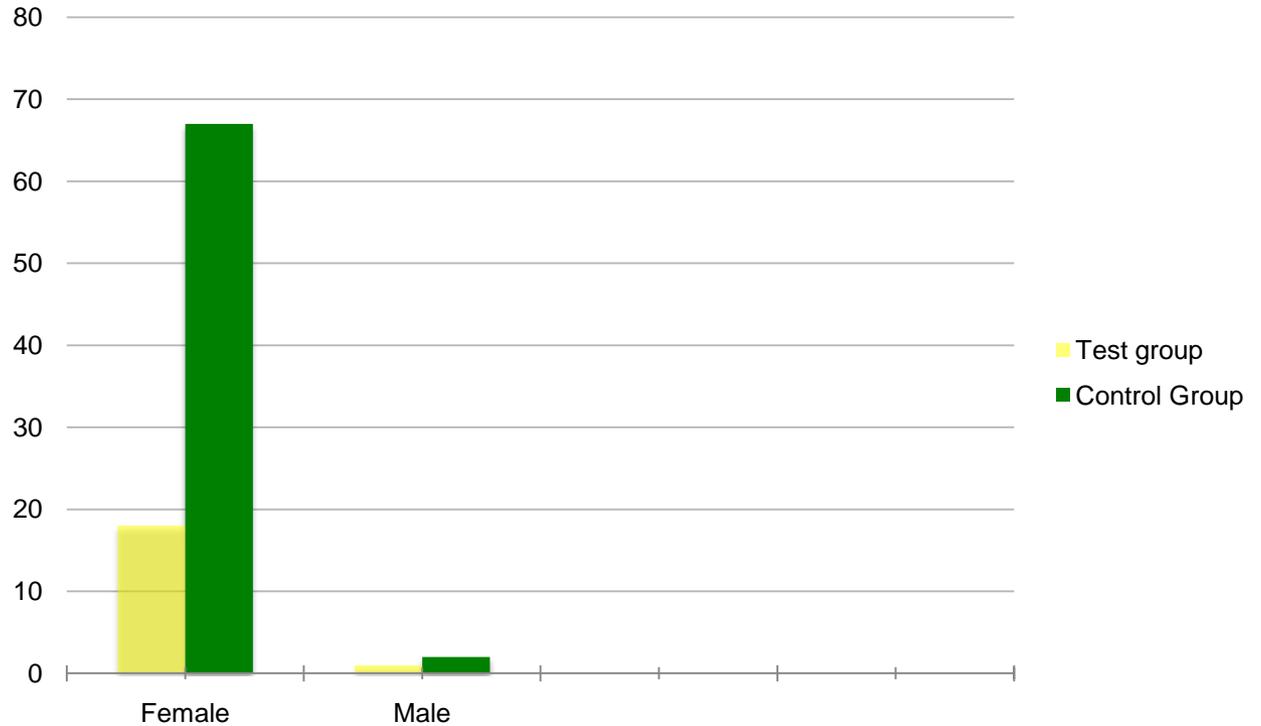
Student Demographics
HPSACC Questionnaire
Student Feedback

Student Demographics

Age Range:

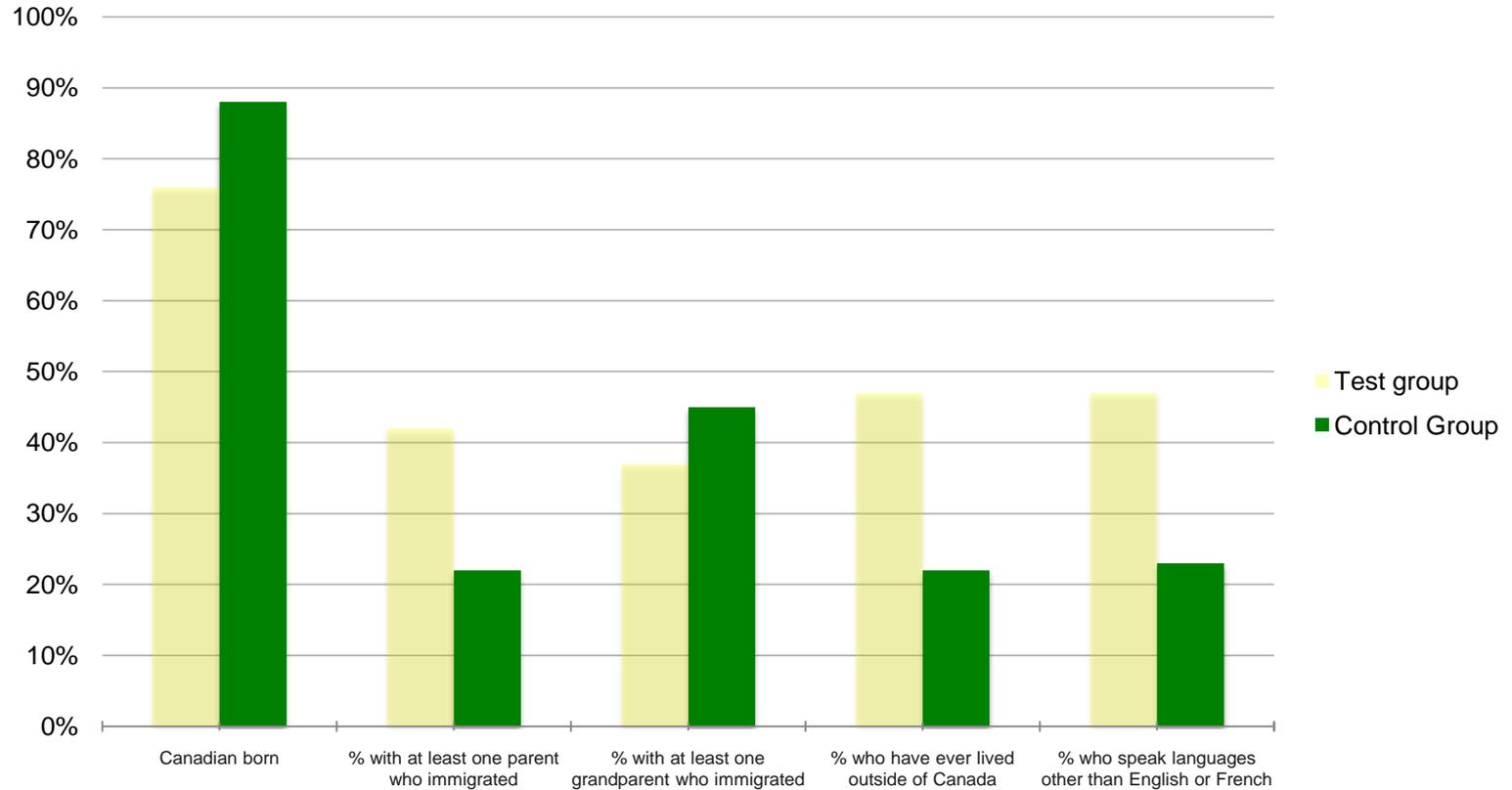
Test Group 22-50
Control Group 22-40

Gender

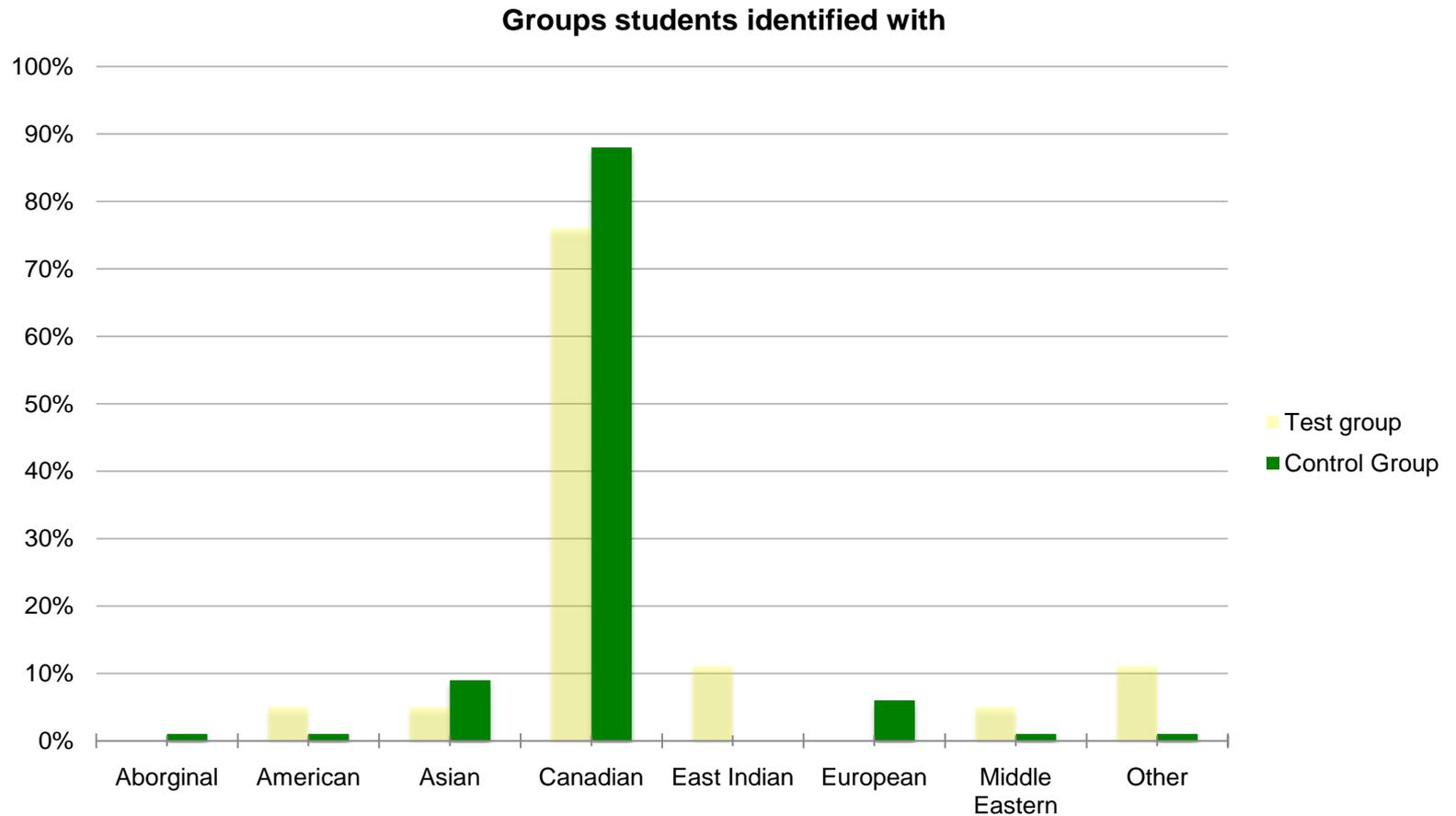


Student Demographics

Chart title

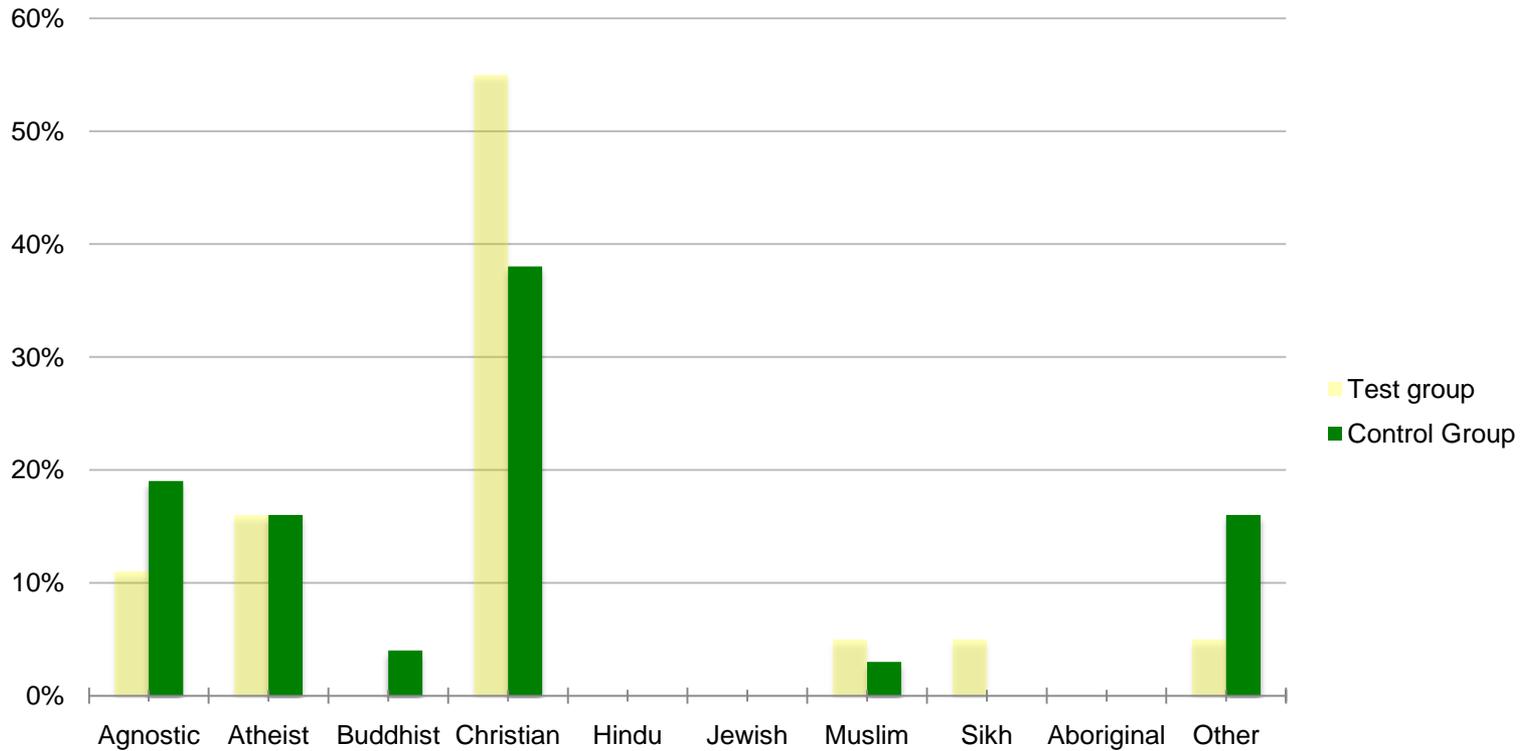


Student Demographics



Student Demographics

Spiritual/religious background most identified with:



Student Demographics

Major cultures groups regularly interact with	Test group	Control Group
Aboriginal	x	x
African		x
American	x	
Arabic	x	
Asian	x	x
Canadian	x	x
Chinese	x	x
East Indian	x	x
Filipino		x
French		x
German		x
Irish	x	
Japanese		x
Jewish		x
Latin American	x	x
Middle Eastern		x
Norwegian		x
Polish	x	
Scottish	x	
Sri Lankan	x	
Swedish		x
Ukranian		x
Vietnamese		x

Questionnaire Results

Section 1 – Past experiences related to interactions with other cultural groups

Overall, there were no differences between the control and test group (pre-module).

We interpret this finding as students across both groups are similar with respect to their experiences/interactions with other cultural groups.

Questionnaire Results

Section 2 - How INFORMED are you about each of the following areas for the community that you serve?

No differences were noted across groups for questions 2a) and 2b). Note that these questions ask respondents about general characteristics of cultural groups vs. specifics which are the focus of questions 2c) to 2o).

Questionnaire Results

Section 2 - How INFORMED are you about each of the following areas for the community that you serve?

Question 2e) asks about Spiritual/Faith practices.

At pre-test, 65% of the control group felt informed about spiritual/faith practices vs. 47% of the pre-test group.

Post-module, 74% of the students reported being informed about spiritual/faith practices.

This increase in knowledge is likely due to the content and participation in the cultural competency module.

Questionnaire Results

Section 2 - How INFORMED are you about each of the following areas for the community that you serve?

In general, the trend of having the control group reporting being more informed than the pre-test group about specific cultural characteristics holds for questions 2f)-o).

Also, the test group reports being more informed post-test vs. pre-test after taking the module.

We attribute the increase in knowledge to the students taking the module.

Questionnaire Results

Section 3 - How AWARE are you of each of the following areas of cross-cultural interaction?

Questions asking the respondent about self-awareness (questions 3a) to 3d)) show no large differences among the groups. Generally, across the groups, students stated they are self-aware. For the test group, an increase in awareness from post-test vs. pre-test can be seen in questions e, f, g, and i).

We attribute the increase in awareness to the students taking the module. This increase in awareness corresponds to reported increases in knowledge or information about culture (see section 2).

Questionnaire Results

Section 4 - To what extent do you AGREE with each of the following statements?

Overall, there are no differences between the control and test groups (pre-module and post-module).

We interpret this finding as students across all groups are similar with respect to their beliefs around the importance of culture and its influence on the therapeutic relationship including building trust, understanding preferences, etc.

Questionnaire Results

Section 5 - How SKILLED do you feel in each of the following areas of cross-cultural interaction?

The questions asked in this section ask the respondent to rate the importance of skill development for each of the listed skills vs. asking the respondent to rate their perceived level of skill in the various areas of cross-cultural interaction.

Overall, there are no differences between the control and test groups (pre-module and post-module).

Questionnaire Results

Section 5 - How SKILLED do you feel in each of the following areas of cross-cultural interaction?

We interpret this finding as students across all groups are similar with respect to their beliefs around the importance of skill development across areas of cross-cultural interaction.

Important to note that some areas of cross-cultural interaction noted in the questionnaire are generic in the sense that the skill is a general skill expected of HCPs across disciplines when working with any and all clients.

Questionnaire Results

Section 6 - To what extent do you AGREE with each of the following statements?

(Statements are of a self-assessing nature related to the respondent's cultural awareness, knowledge, and skill interaction with culturally diverse populations)

Questionnaire Results

Section 7 - How much training in cultural diversity or cultural competency do you DESIRE to receive?

>90 % of respondents across all three groups believe at least some to a lot training in cultural diversity/competency is desired.

This confirms the need for cultural competency training/curriculum in training our OT students.

Questionnaire Results

Section 8 - Please rate your CURRENT level of AWARENESS of cultural diversity issues in health care?

The level of awareness of cultural diversity was higher for the control group vs. pre-test group (70% vs. 53%). However, post-module, the test group reported greater awareness of cultural diversity issues in health care (from 53% to 84%).

This increase could be associated with the content of the module the students took.

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Questionnaire Results

Section 10 - How much TRAINING in cultural diversity or cultural competency have you received in the PAST?

For the control group, approximately half of the students had none or very little training while the other half had at least some training or more in cultural competency.

Notably, 83% of the pre-test group had none or very little training.

This could explain the motivation for these students to self-select and voluntarily enrol in the cultural competency module.

Results/Outcome:

Findings have informed educators about the impact that cultural-spiritual training may have on enhancing cultural-spiritual diversity awareness of future practicing OTs.

Acquiring skills in cultural-spiritual diversity awareness and cross-cultural communication are important in

- facilitating the therapist-patient relationship and the patient-centered approach to health care, as well as
- addressing occupational therapy competencies.

This study also informed training for other healthcare professionals.

Student Feedback

“It was great having expert advice on the subject - so knowledgeable. And I loved the application of real life cases”.

“This should be integrated as part of the regular OT curriculum”

“Overall, I thought this was a good learning experience that allowed me to be more aware of different cultural values and beliefs. I believe this will be very helpful for my future OT practice.”

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Chapter Two: Waugh E, Szafran O., Triscott JAC, "Towards Culturally Responsive Care in the Community: views of five Cultural Communities on Dementia/End of Life Issues, (Consensus Group findings)

Chapter Ten: Szafran O, Waugh EH, Triscott JAC, Cultural Competence of Health Professionals

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