Cultural Competency
- what does that really mean in practice?
Karakia to start

Pou hihiri
May clarity be yours

Pou rarama
May understanding be yours

Pou ő te whakaaro
Through reflection

Pou ő te tāngata
Through personal endeavour

Te Pou e here nei i a tātou
The virtues which bind us as one

Mauri ora ki a tātou
May we be filled with well-being

Haumi e hui e taiki e
Join all together, bind all together, let it be done

Artwork by Theresa Reihana
1. **Cultural Awareness** - Knowledge and understanding of cultural differences and history *(Participation)*
2. **Cultural Competence** - Sensitive and effective health care behaviours *(Protection)*
3. **Cultural Safety** - Trust and genuine partnership *(Partnership)*

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**Continuum of Cultural Competency**

- **Cultural Destructiveness**: Forced assimilation, subjugation, rights and privileges for dominant groups only.
- **Cultural Incapacity**: Racism, maintain stereotypes, unfair hiring practices.
- **Cultural Blindness**: Differences ignored, “treat everyone the same”, only meet needs of dominant groups.
- **Cultural Pre-Competence**: Explore cultural issues, are committed, assess needs of organization and individuals.
- **Cultural Competence**: Recognize individual and cultural differences, seek advice from diverse groups, hire culturally unbiased staff.
- **Cultural Proficiency**: Implement changes to improve services based upon cultural needs.
Five elements of Cultural Competence

**Organisational Level**

1. value diversity
2. conduct self-assessment
3. manage the dynamics of difference
4. institutionalize/embed cultural knowledge
5. adapt to diversity (values, policies, structures & services)

**Individual Level**

1. acknowledge cultural differences
2. understand your own culture
3. engage in self-assessment
4. acquire cultural knowledge & skills
5. view behavior within a cultural context

Ref: Cross, Brazon, Dennis and Isaacs 1989.
Slide source 2015- Georgetown University National Centre for Cultural Competence
10 tips towards achieving equity of health care for Māori through the Treaty Principles - Partnership, Participation and Protection

1. Learn about the Treaty of Waitangi and the impact of colonisation on Māori health
2. Learn Te Reo Māori
3. Know who is in your Māori community.
4. What could your team learn about Te Ao Māori?
5. Improve health literacy.
6. Who’s participating in Māori health strategy and policy development?
7. Ensure Māori data is up to date
8. Regularly evaluate the effectiveness of initiatives
9. Be informed
10. Make improving Māori health - business as usual
1. Learn about the Treaty of Waitangi

TREATY PRINCIPLES - Partnership, Participation, Protection

- Learn about the impact of colonisation, land loss and cultural alienation on Māori health

- What do you know about local Māori history within your area of work?

- What do you know about local Treaty settlements?
2. Learn Te Reo Māori together

TREATY PRINCIPLES - Partnership, Participation, Protection
3. Know who is in your Māori community

**TREATY PRINCIPLES - Partnership And Participation**

- Hongoeka Marae, Plimmerton
- Pipitea Marae, Wellington
- Tapu Te Ranga Marae, Island Bay
- Takapuwahia Marae, Porirua
- Horouta Marae, Porirua
- Whakarongotai Marae, Kāpiti
4. What could your team learn about Te Ao Māori?

Te Ao Māori (the Māori world)
- health, culture, whānau ora, Te Reo
- Māori, local Treaty settlements

Māori models of health:
- Te Whare Tapu Whā
- Te Pae Mahutonga
- Te Wheke
- Te Tuakiri o Te Tangata
5. Improve Patients’ Health Literacy

As a health professional, it is **your** responsibility to **give** and **receive** health information.

*Check out - [www.healthliteracy.org.nz](http://www.healthliteracy.org.nz)*

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TREATY PRINCIPLES - Partnership, Participation

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**5 STEPS**

- Speak slowly
- Teach back
- Encourage questions
- Use plain language
- Show examples

**To better health literacy**

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**Patients with low HEALTH LITERACY...**

- Are more likely to visit an EMERGENCY ROOM
- Have more HOSPITAL STAYS
- Are less likely to follow TREATMENT PLANS
- Have higher MORTALITY RATES

*www.cdc.gov/phpr*
5b. Health Literacy issues for Māori

**Health Literacy** - 76.4% of Māori adults have low levels

- 4/5 males and 3/4 females
- Māori living in rural areas
- 16-24yrs and 50yrs and older
- Unemployed Māori

**Patient - doctor/health professional communication**

**Māori Identity** - diverse cultural realities
6. Policy Development

**TREATY PRINCIPLES - Partnership, Participation, Protection**

How does the planning and policy where you work address health inequities?

Who is sitting at the decision making table?

Who is NOT sitting at the decision making table?

Are Māori involved and consulted with in your organisation?

What are the Māori values in your organisation?

**Tikanga - doing the RIGHT thing, at the RIGHT time, in the RIGHT way**
7. Improving access - significance of non-clinical data

**TREATY PRINCIPLES - Partnership, Participation**

- Māori whānau names - spelling and correct pronunciation
- **Ethnicity** - an opportunity to respect the patient’s heritage, and to discuss their cultural preferences when accessing your health services
8. Evaluation - whānau feedback

TREATY PRINCIPLES - Partnership, Participation

Ask whānau:

How were you greeted and treated by our staff?

Were your health issues explained clearly?

Was the information helpful to you?

List two things we did well.

List two things we could do better.
9. Be Informed

Ministry of Health publications:
- He Korowai Oranga - Māori Health Strategy guide
- Equity of Health Care for Māori - a framework
- Te Ohonga Ake - health determinants for Māori
- Māori Health Literacy framework
- NZ Health Strategy - Roadmap of Actions 2016
- Te Ara Whakapiri Toolkit
- Palliative and Māori from a Health Literacy Perspective (2014)

Other:
- Best Health Outcomes for Māori: Practice Implications (MCNZ)
- RNZCGP Māori Health Strategy
- He Ritenga - Treaty of Waitangi Principles Health Audit Framework (Bay of Plenty DHB)
10. Business as Usual - in your service?

TREATY PRINCIPLES - Partnership, Participation, Protection

Make achieving equitable health services for Māori a **top priority**

Ensure Māori Health is a regular agenda item at staff and Board meetings

Set objectives that are achievable and measureable

Support, encourage and challenge each other - celebrate success

“Of all the forms of inequality, injustice in health care is the most shocking and inhumane.”
- Rev. Dr. Martin Luther King, Jr.

“Health cannot be a question of income; it is a fundamental right”

Nelson Rolihlahla Mandela
1918 - 2013
To summarise ...

Being culturally competent is actually about reflection of self ...

• Know yourself - “What might affect this interaction?”

• Park yourself - “I’ll hold that aside, its really about me”

• Pace yourself - share power, let others lead

• Educate yourself - know, learn, engage with difference

• Share yourself - a little more might put others at ease

• Make no assumptions - Māori are a very diverse people.
A Māori proverb

Kia ora and thank you!

‘Nāku te rourou
nāu te rourou
ka ora ai te iwi’

‘With your basket
and my basket
the people will thrive’*

• (Referring to co-operation and the combination
  of resources to get ahead)
Do you have any comments or questions?
References


Te Ara - the Encyclopaedia of New Zealand, http://www.TeAra.govt.nz

NZ History - https://nzhistory.govt.nz/

www.healthliteracy.org.nz


Treaty Resource Centre - He Puna Mātauranga o Te Tiriti

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