
National Intercultural Health Strategy 2007 - 2012

Update March 2011



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Introduction

Welcome to the latest issue of the newsletter! These updates are produced twice yearly as part of our commitment to keep all interested people informed of progress made in implementation of the National Intercultural Health Strategy (NIHS).

During the last few months, work has progressed quietly on progressing strategy recommendations. The loss of key Social Inclusion staff during this period has meant some reorganization – both of our own Social Inclusion workloads and in respect of the positioning of Social Inclusion within the HSE itself. Social Inclusion, as a Care Group, is now linked into Primary Care. This offers opportunity for synergies with Primary Care colleagues around common aims and processes.

While the Voluntary Retirement and Redundancy schemes led to us losing many valued colleagues across the HSE, it is important to acknowledge the special contribution made by Alice O'Flynn and Fiona Hardy in tirelessly supporting implementation of the strategy. Their practical input and strategic expertise will be much missed.

The loss of staff has made it even more necessary to work with colleagues across all sectors in harnessing skills and collaborating towards agreed goals. Partnership working with the community, voluntary and statutory sectors is critical in reducing health inequalities and achieving aims of the NIHS.

The HSE National Service Plan for 2011 contains commitments towards continuing implementation of the NHIS. Key result areas that are listed in the plan and that must be reported on a quarterly basis include expansion of the ethnic identifier into core datasets as well as provision of support for staff in building cultural competence and helping service users from diverse ethnic and cultural groups to access health services optimally. Renewed efforts are underway in these areas, with use of an ethnic identifier a core criterion in all projects planned or supported via Social Inclusion. The importance of an Ethnic Identifier in planning and improving health services will continue to be emphasized throughout the HSE.

Efforts around progressing implementation are guided by the HSE Governance Group on Intercultural Health. National and regional input to this group helps to ensure that agreed priorities are acted upon consistently across the country.

This newsletter is one means of continuing engagement with all stakeholders in the broad area of Intercultural health. Your ideas, input and feedback are very important in maintaining a meaningful engagement and in ensuring that implementation of recommendations of the NHIS continues effectively and in line with principles of collaboration, responsiveness and participation. Please send comments to diane.nurse@hse.ie or socialinclusion@hse.ie

Prioritised Themes of Strategy

Translation and Interpreting

Translation

Translation of health related information is a quick, efficient and cost effective way of assisting improved access to health services for people who are not proficient in English. HSE Social Inclusion continues to progress this on a prioritized basis, effecting translations of material within the HSE as well as supporting key partners in translating health related information.

Translated material is placed on the “Language Hub” section of the HSE website www.hse.ie

The descriptions below provide an example of HSE collaboration in efforts to improve access to essential services for women from diverse ethnic, cultural and language groups.

Translation of material for National Cervical Screening Programme

Previous newsletters have referred to the translation of material for the BreastCheck programme. This translated material is being used to assist women to access the programme. Learning from the BreastCheck initiative has been fed into the National Cervical Screening Programme; more than 1.1 million women will be invited to attend this screening programme.

The information sheet – that each woman completes prior to consenting to a smear test – will be translated and made available to health professionals for use, and – ultimately – to the public.

Choice of languages for translation is based on census and related figures and on information and advice. Languages for translation include Arabic, Chinese, French, German, Irish, Lithuanian, Polish, Romanian and Spanish.

Social Inclusion is very happy to continue to support this worthwhile project.



Women's Aid, a leading national organisation providing support to women affected by domestic violence, re-launched its main website in summer 2010. The new site was designed to meet the needs of abused women accessing the internet for support and information on domestic violence. However, funding restraints meant that when it was launched, the information on the site was available in English only.

Reaching out to migrant women

Women's Aid knows that migrant women need their support - in 2009 27% of women using the Women's Aid one to one support service were migrant women. Women's Aid continually strives to improve responses to migrant women experiencing domestic violence.

According to Women's Aid and the National Intercultural Health Strategy, migrant women experiencing domestic violence face additional barriers. These barriers include the lack of accessible information in different languages. In late 2010 the organisation secured funding from HSE National Social Inclusion to translate key sections of its website into 7 different languages – Arabic, Chinese, French, Polish, Romanian, Russian and Spanish.

Information now available

The translated sections of website are now live on the site and can be accessed from the home page. This information includes sections on the different types of domestic violence, warning signs of an abusive relationship, and information on safety planning, as well as detailed information about the Women's Aid National Freephone Helpline, One to One Support Service and Court Accompaniment Service.

What next?

Women's Aid continues to make its support services accessible to women from migrant communities. The organisation plans to have an interpreting service available on its National Freephone Helpline later in 2011 and has also translated its information leaflet into the same 7 languages as the website. Promotion of the enhanced services will take place throughout the year.



If you, or someone you know, is experiencing physical, emotional, sexual or financial abuse contact the Women's Aid National Freephone Helpline on 1800 341 900 (10am to 10pm, 7 days a week). For more information on Women's Aid log on to www.womensaid.ie

Interpreting

Communication Guidelines in Cross-Cultural GP Consultations

A previous issue of the newsletter provided some information about the project to develop communication guidelines in cross cultural GP consultations. The report below details further progress in this project. Findings of this project will inform ongoing work within primary care around facilitating quality, effective outcomes for service users and providers in cross cultural communications.

NUI Galway researchers have won a prestigious award for their work on the development of guidelines to support communication in cross-cultural general practice consultations. This research was recently awarded the Professor James McCormack medal for best research presentation at the Association of University Departments of General Practice Annual Scientific Meeting

Dr. Anne MacFarlane, Lecturer in Primary Care, Discipline of General Practice, School of Medicine has led the Health Research Board Partnership Award with colleagues Mary O'Reilly-de Brún and Tomas de Brún, Directors of the Centre for Participatory Strategies (CPS), Galway and Diane Nurse of the HSE National Social Inclusion Unit.

This research has used innovative participatory research methods to enable the meaningful involvement of health service users from the migrant community and health service providers in the development of a guideline to support communication in cross-cultural general practice consultations.

This is important research for service users with limited English and their general practitioners who face significant challenges on a daily basis in their consultations because they do not have a shared language or cultural background which results in frequent misunderstandings and communication breakdowns.

According to Dr. MacFarlane; “A key finding from the research is that all those involved with the research do not think the current status quo of using family members including children and friends as interpreters, is acceptable. They wish to have access to formal, trained interpreters who are monitored and evaluated in practice”.

Members of the migrant community from Polish, Russian, Portuguese, Urdu, French Congolese speaking and Nigerian communities in the Galway region, who participated in the research last April, were invited back to the University recently to hear details of the key findings and to provide feedback about the emerging content of the guideline to the research team.

Seven representatives of the migrant community have formed a research team with academic researchers. The Service User Peer Researchers (SUPERS) are Khalid Ahmed, Jean Samuel Bonsenge Bokanga, Maria Manuela De Almeida Silva, Aga Mierzejewska, Lovina Nnadi, Florence Ogbebor and Katya Okonkwo. They trained in participatory research methods with the Centre for Participatory Strategies, Galway and this training enabled them to give members of their wider communities an opportunity to ‘have a voice’ in the development of the guideline, working in their own languages and with SUPERS from their own cultural backgrounds. As one SUPER (Florence Ogbebor) remarked, “This type of research actually brought the voices of the people upstream to the policy makers, where their voices could be heard”.

The use of participatory research approaches for research based on academic-community partnerships is very innovative in Irish primary care and the involvement of the Centre for Participatory Strategies has been instrumental in the design and delivery of the project.

Directors of the Centre for Participatory Strategies (CPS), Mary O'Reilly-de Brún and Tomas de Brún said, "In this research project, we found it very exciting to experience the enthusiasm and creativity of the SUPERS. Together, we co-designed the research process, and culture-proofed all the research materials - this ensured that no migrant participants would be offended by the visual images we use with groups where not everyone readily reads and writes. This is one of the strengths of the participatory approach used, no one is disenfranchised and everyone's voice counts."



For further information please contact Dr. Anne MacFarlane, NUI Galway on 091 495194 or anne.macfarlane@nuigalway.ie

Collaborative Work Linked to Recommendations of the NIHS

The NIHS emphasises the cross cutting, multidimensional nature of recommendations to be implemented. A partnership approach across all sectors – both within and beyond the HSE - is of critical importance in ensuring a coordinated approach to the implementation of the strategy. This is even more crucial in the current climate where resources are continually diminishing and there is an urgent need to harness all resources and use them to best effect. Much work takes place in this way. Some projects and outcomes emphasizing this collaborative approach are listed below:

Community Participation



l-r: Augustine DesMennu (BMHF), Thaw Thaw Soe (BMHF), Michelle Rooney (MIA), Pawel Bednarczyk (BMHF), Dr. Jane Pillinger (Project Evaluator), Rebeka Soares (BMHF), Aminullah Jan Wazri (BMHF) and Suzette Ruane (BMHF).

The **Ballina Migrant Health Forum (BMHF)** is working to improve the health and well-being of migrants in Ballina, Co. Mayo and to promote migrants' participation in primary health care structures. The BMHF has members who are Brazilian, Polish, Nigerian, New Zealander, Kenyan, Afghan and Karen from Burma. These members are amongst the 8% non-Irish population in the Ballina area.

The Ballina Migrant Health Forum (BMHF) was officially launched at a seminar Participating in Your Health Service held in May 2010. The BMHF was originally formed in 2009 as part of a Community Participation in Primary Care project delivered by Mayo Intercultural Action in partnership with the Health Service Executive. The project was funded under the Joint Community Participation in Primary Care Initiative which was initiated in 2008 by the former Combat Poverty Agency and the Consumer Affairs Department of the HSE.

The Ballina Migrant Health Forum is currently working on developing a drop-in service for migrants. This will be a migrant led service meeting the needs of migrants in the Ballina area, and will be a source of information on services and supports available in Co. Mayo.

Research: Migrant Women and Sexual Health

On the 1st of January 2010, the Crisis Pregnancy Agency merged with the Health Service Executive (HSE) and is now the HSE Crisis Pregnancy Programme (CPP). The HSE Crisis Pregnancy Programme is a national programme tasked with developing and implementing a national strategy to address the issue of crisis pregnancy in Ireland. The Crisis Pregnancy Programme works to achieve the following core objectives:

1. A reduction in the number of crisis pregnancies by the provision of education, advice and contraceptive services.
2. A reduction in the number of women with crisis pregnancies who opt for abortion by offering services and supports which make other options more attractive.
3. The provision of counselling services, medical services and such other health services for the purpose of providing support, after crisis pregnancy, as may be deemed appropriate by the Crisis Pregnancy Programme.

In 2002 the then Crisis Pregnancy Agency commissioned qualitative research studies on the perceptions of Irish women about issues relating to fertility, sex, and motherhood. (Understanding how sexually active women think about fertility, sex and motherhood (Murphy-Lawless, Oaks & Brady); <http://www.crisispregnancy.ie/pub/Rep6.pdf>). A follow-up project on perceptions of women about fertility, sex, and motherhood: probing the data' Murphy-Lawless, 2006 http://www.crisispregnancy.ie/pub/cpa_report_no17.pdf). Both these studies explore the meanings young women attribute to their relationships, sexual health, and reproductive healthcare decisions. The Agency commissioned the projects with the objective of providing service planners, policy makers, researchers and practitioners with valuable insight into how sexually active women think about and respond to their fertility and sexual health.

In recognising Ireland's non-Irish national population of minority ethnic women, the CPP recently commissioned a project which explores how migrant women living in Ireland perceive and make decisions about their sexual health. The objectives of this research project mirror the studies referred to above, with the focus on ethnic minority women living in Ireland and the range of challenges they face in relation to these issues. The commissioned researchers will conduct a series of interviews, focus groups, workshops and seminars among migrant women and with migrant support organisations.

Diane Nurse of HSE National Social Inclusion and Dr David Weakliam of HSE Population Health are working with the CPP to provide advice and guidance for the project. The researchers - Dr Catherine Conlon and Ms Joan O Connor - began the study in January 2011; the report of their findings is expected in December 2011.

Other Information of Note

Intercultural Education Strategy

In September 2010, Ireland's first national Intercultural Education Strategy was launched. The Strategy covers the period 2010- 2015 and contains the ten key components and five high level goals of intercultural education. The Strategy was developed based on an extensive national and international research process, which included stakeholder consultations and submissions. Based on the commonalities of the findings to emerge, the Strategy is designed to be of relevance to all sectors of education.

The Intercultural Education Strategy aims to ensure that:

- all students experience an education that “respects the diversity of values, beliefs, languages and traditions in Irish society and is conducted in a spirit of partnership” (Education Act, 1998).
- all education providers are assisted with ensuring that inclusion and integration within an intercultural learning environment become the norm.

The Strategy is available on the website of the Department of Education and Skills www.education.ie.

Framework for intercultural education

Ref.	Key Component	Goal
1.	Leadership	Enable the adoption of a whole institution approach to creating an intercultural learning environment
2.	Mainstreaming of education provision	
3.	Rights and responsibilities	
4.	High aspirations and expectations	
5.	Enhance the quality of teaching	Build the capacity of education providers to develop an intercultural learning environment
6.	Knowledge of the language(s) of instruction	Support students to become proficient in the language of instruction
7.	Partnership and engagement	Encourage and promote active partnership, engagement and effective communication between education providers, students, parents and communities
8.	Effective communication	
9.	Data collection and research	Promote and evaluate data gathering and monitoring so that policy and decision making is evidence based
10.	Actions, monitoring and evaluation	

Diversity Conference

An international conference on Quality Health Care for Culturally Diverse populations was held in Baltimore in October 2010. This event was attended by more than 800 participants, with approximately 200 presentations made during the 3-4 day period.

A presentation for this conference from Social Inclusion was accepted but resource constraints prevented attendance at the event.

The website for the conference - www.diversityRxconference.org - offers a wealth of useful, innovative material around aspects of health care for service users from culturally diverse groups.

2nd European Transcultural Nursing Association Conference

This conference – hosted by the University of Limerick - is being held closer to home! It takes place on 30th June and 1st July 2011. Themes of the conference are:

Transcultural care and multidisciplinary teams

Globalisation, European mobility and transcultural care

Innovations in cultural competence in health and social care practice

Innovative methods which promote intercultural education

Further details about the conference are available on www.nm.ul.ie/etna/