Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, including the Roma

MODULE 4: KNOWLEDGE APPLICATION

Unit 1: Strategies and Procedures
for People-Centered Health Care Services
Oriented towards Cultural and Ethnic Diversity

Elaborated by:
Amets Suess, Andalusian School of Public Health, 2015

Outline of the Session

- Activity: Video Screening and Discussion.

- Presentation:

  ✓ People-Centered Health Care: Concept and Principles.

  ✓ People-Centered Approaches in Health Care Oriented Towards Cultural and Ethnic Diversity.

  ✓ People-Centered Health Care Oriented Towards Cultural and Ethnic Diversity: Related Frameworks.

Activity 1:
Health Care Focused on Cultural and Ethnic Diversity

- Please watch the following video:

> "Two blue crocodiles and the gap in the system"
> IGIV, Implementation Guidelines for Intersectional Peer Violence Preventive Work, Education and Culture Lifelong Learning Programme, 2011.
> https://www.youtube.com/watch?v=byRjVKsM14Q

Activity 1:
Health Care Focused on Cultural and Ethnic Diversity

- Group discussion (in plenary), including the following aspects:

  - ✓ Do you think the situation described in the video could happen in your own country / regional context?

  - ✓ What advantages and limitations can you identify in culture- and ethnic-specific health care services, in self-organized health care services or in health care services oriented towards cultural and ethnic diversity and reduction of health inequalities?

  - ✓ Do you think it could be useful to work with a mixed model?

  - ✓ Which model do you think is most adequate in your country / regional context? Which adaptation would be necessary to implement it?

People-Centered Health Care:
Concept

The overall vision for people-centred health care is one in which individuals, families and communities are served by and are able to participate in trusted health systems that respond to their needs in humane and holistic ways. The health system is designed around stakeholder needs and enables individuals, families and communities to collaborate with health practitioners and health care organizations in the public, private and not-for-profit health and related sectors in driving improvements in the quality and responsiveness of health care.

People-centred health care is rooted in universally held values and principles which are enshrined in international law, such as human rights and dignity, nondiscrimination, participation and empowerment, access and equity, and a partnership of equals.
(WHO-WPRO 2007: 7)

People-Centered Health Care:
Terms

- Person-centered health care

- Patient-centered health care.
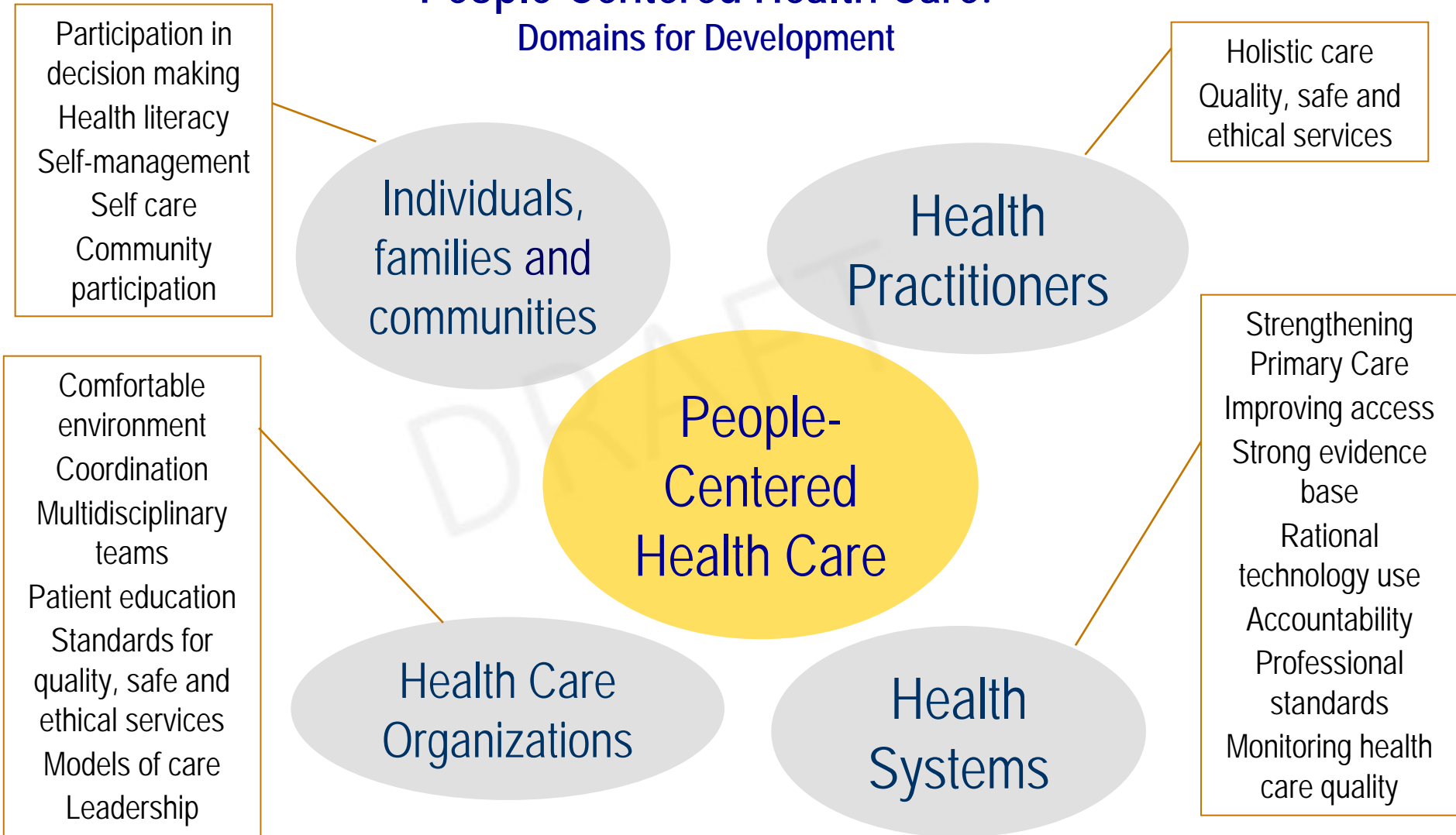
- People-centered health care.

$\Longrightarrow$ Preference for "people-centered health care" as the most inclusive term.

People-Centered Health Care:
Principles

- **Culture of care and communication**
  - ✓ Informed Decision Making.
  - ✓ Respect for privacy and dignity.
  - ✓ Response to needs in a holistic manner.

- **Responsible, responsive and accountable services**
  - ✓ Accessibility.
  - ✓ Affordability.
  - ✓ Ethics.

- **Supportive health care environments**
  - ✓ Strong primary care services.
  - ✓ Stakeholders' involvement in health services planning, policy development and quality improvement.

People-Centered Health Care:
Domains for Development

Participation in decision making
Health literacy
Self-management
Self care
Community participation

Individuals, families and communities

Health Practitioners

Holistic care
Quality, safe and ethical services

Comfortable environment
Coordination
Multidisciplinary teams
Patient education
Standards for quality, safe and ethical services
Models of care
Leadership

People-Centered Health Care

Health Care Organizations

Health Systems

Strengthening Primary Care
Improving access
Strong evidence base
Rational technology use
Accountability
Professional standards
Monitoring health care quality

WHO–WPRO 2007; Figure: own elaboration.

People-Centered Approaches
in Health Care for Migrants and Ethnic Minorities

- Diversity of migration and ethnic experiences.

- Frequent situation of social vulnerability.

$\Rightarrow$ Relevance of a people-centered approach in health care for migrants and ethnic minorities.

Beach et al. 2006; Bischoff 2003; Lood et al. 2014; Koitzsch Jensen et al. 2014; Renzaho et al. 2013.

People-Centered Approaches
in Health Care for Migrants and Ethnic Minorities

- Concepts: Patient-centeredness and cultural competence

- Effectiveness of cultural competence programmes in patient-centered health care for migrants and ethnic minorities

Beach et al. 2006; Renzaho et al. 2013.

Conceptual Shifts:
People-Centered Approaches in Health Care for Migrants and Ethnic Minorities

Cultural competence: Focus on culturally specific habits, belief and needs → Health policies focused on providing specialized health care services for migrants and ethnic minorities.

↓

Intercultural competence: Focus on the dynamics of interaction between different cultures → Health policies focused on addressing health care needs in intercultural contexts.

↓

Cultural diversity: Focus on the recognition of diversity as a positive social contribution → Health policies focused on addressing health care needs from a diversity perspective.

↓

Cultural sensitivity / Difference sensitivity / Diversity sensitivity: Focus on the awareness of diversity and intersectional character of social inequalities → Health policies focused on reducing transversal and interconnected social inequalities.

Cattacin, et al. 2013; Chiarenza 2012; Council of Europe 2006; Papadopoulos 2006, quoted in IENE 2014; Renschler, Cattacin 2007; UNESCO 2001, 2013; WHO 2001.

People-Centered Approaches
in Health Care of Migrants and Ethnic Minorities

- Cultural competence → intercultural competence → cultural diversity → **cultural sensitivity / difference sensitivity / diversity sensitivity**

- Health care addressed to specific cultural and ethnic groups → **health care with focus on social inequalities, social determinants of health and intersectionalities**

- Patient-centered health care → **people-centered health care**

⟹ People-centered health care oriented to cultural and ethnic diversity

⟹ Diversity-sensitive people-centered health care

Health Care for Migrant and Ethnic Minorities:
Policies Levels

International Human Rights and Strategic Framework

International / European Professional Networks

UN General Assembly

WHO

UN Human Rights Council

International / European Civil Society Networks

European Human Rights and Strategic Framework

European Commission

Council of Europe

European Parliament

WHO-Europe

National and Regional Policies

National Professional Associations

National Governments

Regional Governments

National Civil Society Organizations

Community-Based Interventions

Regional / Local Professional Associations

Health Districts

Hospitals

Health Centers

Social Services

Regional / Local Civil Society Organizations

Figure: Own elaboration.

People-Centered Health Care Oriented towards Cultural and Ethnic Diversity: Related Frameworks

Human Rights Framework

Social Determinants of Health

Intercultural and Diversity-Sensitive Ethics

People-Centered Health Care Oriented towards Cultural and Ethnic Diversity

Intersectionality

Community Participation

Intersectorality

Figure: Own elaboration.

International and European Human Rights Framework:
Migrants and Ethnic Minorities

- Large number of international and European strategic documents.

- Differences:
  - ✓ Geographic scope
  - ✓ Format
  - ✓ Legally binding status
  - ✓ Population group

FRA 2011; Mock-Muñoz de Luna et al. 2015a, 2015b; Suess et al. 2014; WHO-WPRO 2014.

International Human Rights Framework:
Accessibility and Quality of Health Care

International Covenant on Economic, Social and Cultural Rights, ONU 1966 [1976]

Art. 12.1.: The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

International Human Rights Framework:
Accessibility and Quality of Health Care

Committee on Economic, Social and Cultural Rights, General Comment Nº 14, The right to the highest attainable standard of health

- Health as a fundamental human right, *"closely related to and interdependent upon the realization of other human rights"*.

- Essential elements:
    - ✓ Availability
    - ✓ Accessibility
    - ✓ Acceptability
    - ✓ Quality

International Human Rights Framework:
Accessibility and Quality of Health Care

Committee on Economic, Social and Cultural Rights, General Comment Nº 14, The right to the highest attainable standard of health

- Awareness of the **constraints** to the full realization of the right to health, due to the limits of available resources.

- Principle of **progressive realization** of the right to health.

- **Retrogressive measures** are not permissible; in case of being taken, only *"after the most careful consideration of all alternatives"*.

In particular, States are under the obligation to respect the right to health by, inter alia, **refraining from denying or limiting equal access for all persons**, including prisoners or detainees, **minorities, asylum seekers and illegal immigrants**, to preventive, curative and palliative health services; abstaining from enforcing discriminatory practices as a State policy; and abstaining from imposing discriminatory practices relating to women's health status and needs.
(CESCR 2000: 10)

CESCR 2000.

International and European Human Rights Framework:
Examples of Strategic Documents Focused on Migrants or Ethnic Minorities

- Examples of strategic documents focused on migrant populations

  - ✓ International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, 1990.
  - ✓ Resolution WHA 61.17 Health of Migrants, 2008.

- Examples of strategic documents focused on ethnic minorities

  - ✓ International Convention on the Elimination of All Forms of Racial Discrimination, 1965 [1969].
  - ✓ Council of the European Union. EU Framework for National Roma Integration Strategies (NRIS), 2011.

UN 1990.

International and European Human Rights Framework
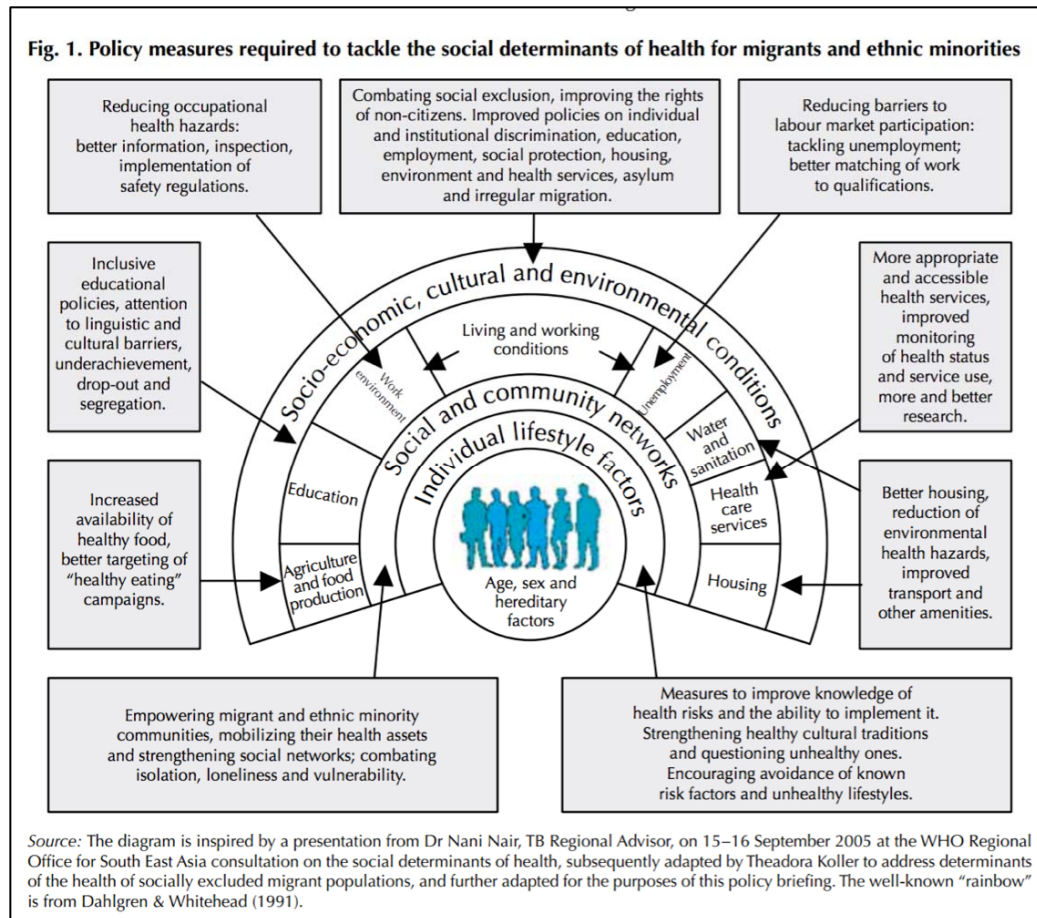## Implementation in Health Policies oriented towards Cultural and Ethnic Diversity

- Recent comparative studies in the European context:

  - ✓ Uneven fulfillment of the **right to health** and **right to health care** for **migrants in an 'irregular' situation** across Europe.

  - ✓ **Barriers** in accessing and utilizing health care services for **ethnic minorities**, including experiences of discrimination, denial or exclusion from health care.

  - ✓ Limitations due to the **frequent lack of legally binding** character or **ratification** of international treaties.

Biswas, et al. 2011; Council of Europe 2012; Cuadra 2011; Dauvrin, et al. 2012; DHSSPS 2007; Duvell, et al. 2009; FRA, European Union Agency for Fundamental Rights 2011a, 2011b, 2012; HUMA Network, et al. 2010; Karl-Trummer et al. 2010; Médicins du Monde, et al. 2009, 2012, 2013; PICUM, et al. 2014; Ruiz-Casares, et al. 2010; Suess et al. 2014; Woodward, et al. 2014.

International and European Human Rights Framework
Implementation in Health Policies oriented towards Cultural and Ethnic Diversity

- Recent comparative studies in the European context:

  ✓ Identification of the **Human Rights perspective** as an important framework for improving access to health care for migrants and ethnic minorities.

  ✓ Recommendation of implementing policies and interventions addressed to **providing access** to health care for all people living in Europe, regardless of nationality, administrative status and ethnicity, as well as **eliminating barriers** to effective access to health care.

Biswas, et al. 2011; Council of Europe 2012; Cuadra 2011; Dauvrin, et al. 2012; DHSSPS 2007; Duvell, et al. 2009; FRA, European Union Agency for Fundamental Rights 2011a, 2011b, 2012; HUMA Network, et al. 2010; Karl-Trummer et al. 2010; Médicins du Monde, et al. 2009, 2012, 2013; PICUM, et al. 2014; Ruiz-Casares, et al. 2010; Suess et al. 2014; Woodwork, et al. 2014.

Social Determinants of Health
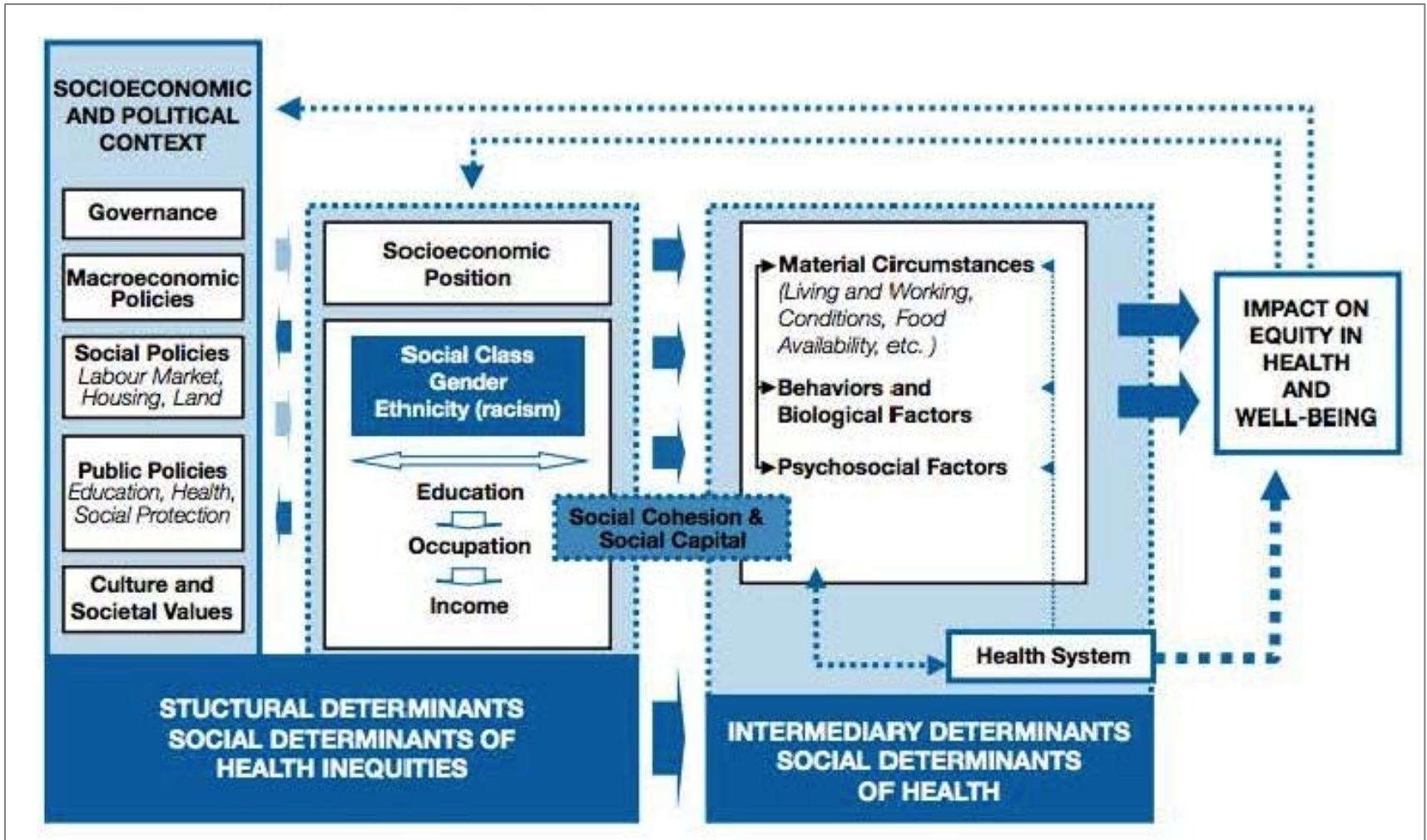
Policy Measures to Tackle Social Determinants of Health:
Migrants and Ethnic Minorities

Fig. 1. Policy measures required to tackle the social determinants of health for migrants and ethnic minorities

Dahlgren, et al. 1991; WHO 2010. Figure: WHO 2010: 14, adapted from: Dahlgren, et al. 1991.

Social Determinants of Health Framework
Applied to Health Care Oriented towards Cultural and Ethnic Diversity

- Analysis of an impact of social determinants of health on the health of migrants and ethnic minorities.

- Observation of a tendency to reduce social determinants of health to socioeconomic factors, without taking into account migration background or ethnicity, or viceversa, to reduce social inequalities to cultural and ethnic aspects.

Fésüs et al. 2012, Hajduchová et al. 2014; Ingleby 2012; Marmot et al. 2012.

Social Determinants of Health Framework
Applied to Health Care Oriented towards Cultural and Ethnic Diversity

- Proposed policies:

  - ✓ Relevance of action on the social determinants of health to achieve greater health equity.

  - ✓ Importance of addressing processes of exclusion rather than focusing on the characteristics of excluded groups, including migrants or ethnic minorities.

  - ✓ Relevance of aligning health policies focused on reducing health inequalities with education, economic, labour, housing and environmental policies.

  - ✓ Relevance of integrated, intersectional, multivariate and multilevel approaches to tackle health inequities.

Fésüs et al. 2012, Hajduchová et al. 2014; Ingleby 2012; Marmot et al. 2012.

Intersectionality
in People-Centered Health Care Oriented towards Cultural and Ethnic Diversity

- Relevance of intersectional approaches for people-centered health care oriented towards cultural and ethnic diversity.

Intersectionality: Concept

Employment Status
Income
Social Class
Migration Status
Education
Ethnicity
Age
Culture
Health Status
Religion
Ability
Language
Gender
Geographic Location
Family Status
Housing Conditions

Acevedo-García, et al. 2012; Aspinall, et al. 2013; Bauer 2014; Cattacin, et al. 2013; Gazard et a. 2014; Hankivsky (ed) 2011; Kovandžić, et al. 2012; Roberston 2014; Rosenfield 2012; Seng, et al. 2012; Sears 2012; Van Laer, et al. 2014; Viruell Fuentes et al. 2012; figure: own elaboration.

Intersectorality
in People-Centered Health Care Oriented towards Cultural and Ethnic Diversity

- Relevance of **intersectoral collaboration** for people-centered health care oriented towards cultural and ethnic diversity.

Social and family context

Media

Health Care System

People-Centered Health Care Oriented towards Cultural Diversity

Legal System

Education System

Social Services

Marmot et al. 2012; figure: own elaboration.
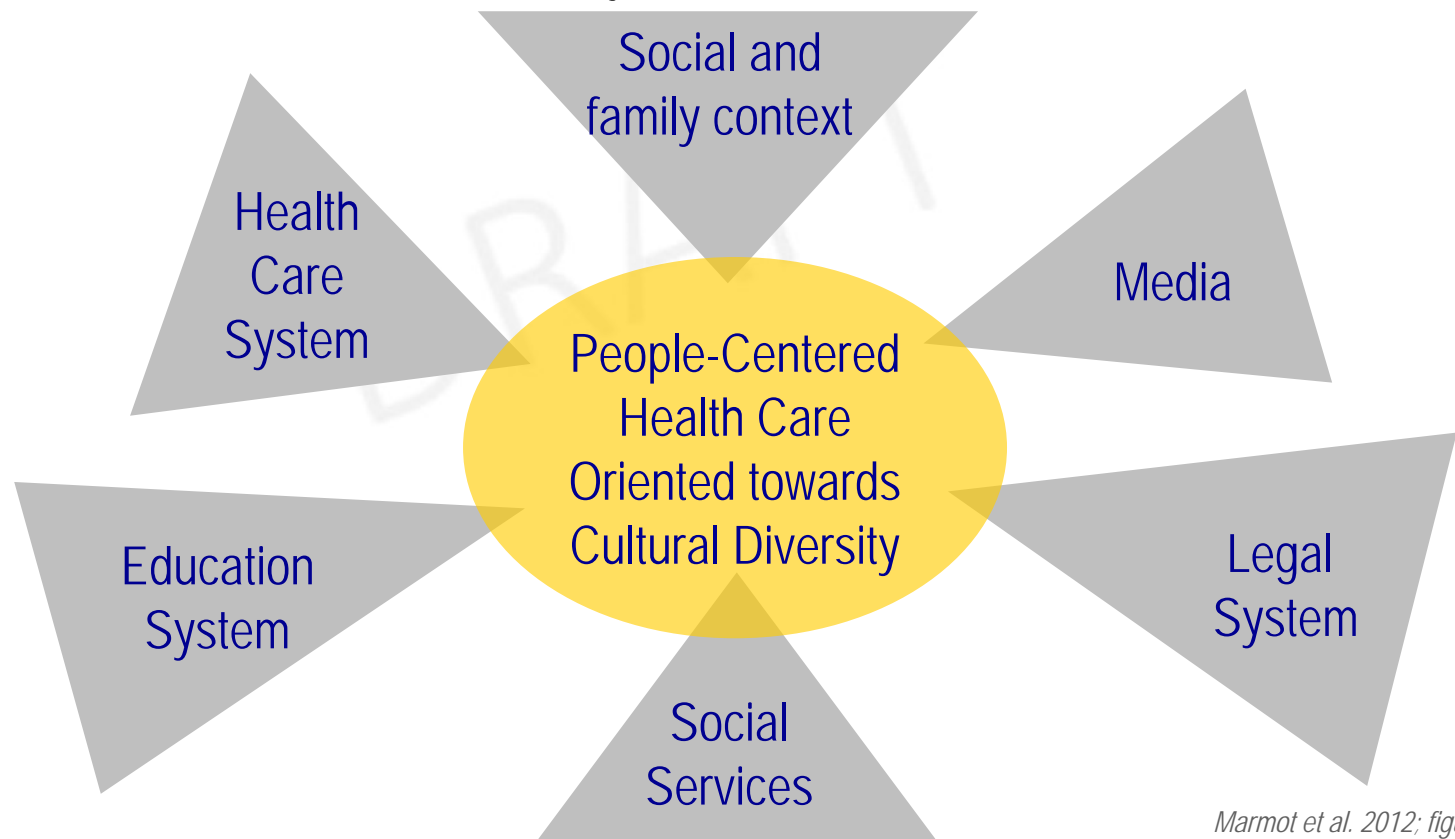
Community Participation

- Relevance of **community participation** for diversity sensitive people-centered health care.
- Experiences of migrants' and ethnic minorities' participation in health policies on **different levels**.
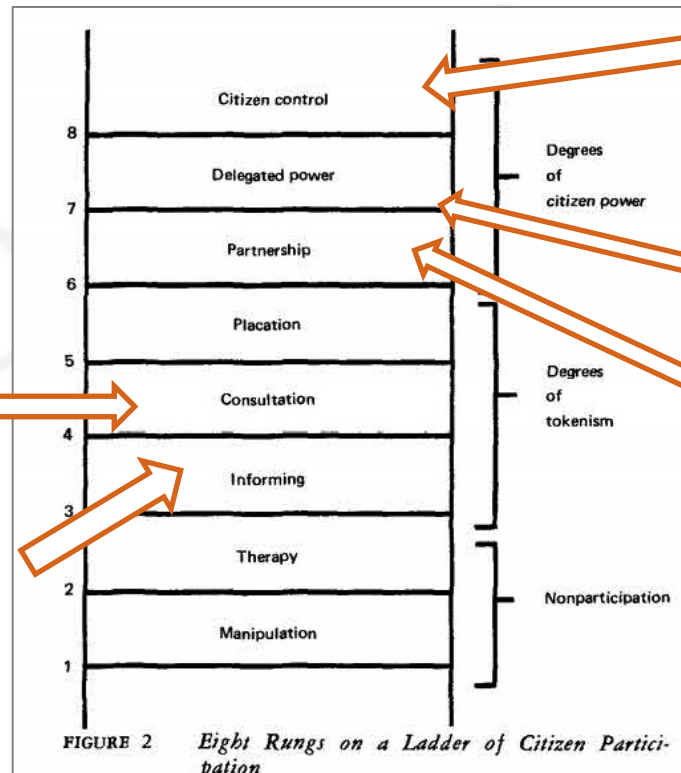
Surveys on health related issues; participation forums; research projects

Health promotion and prevention campaigns; information on legal changes

Participation in health policies decision making

Participation in project design, development and assessment

Participatory Action Research; participation in health related projects

FIGURE 2   *Eight Rungs on a Ladder of Citizen Partici-pation*

8 Citizen control

7 Delegated power   Degrees of citizen power

6 Partnership

5 Placation

4 Consultation   Degrees of tokenism

3 Informing

2 Therapy   Nonparticipation

1 Manipulation

Intercultural and Diversity-Sensitive Ethics

- Relevance of a specific reflection on ethical aspects and deontological principles in people-centered health care and research oriented towards cultural and ethnic diversity.

- Intercultural and diversity-sensitive ethics
  - ✓ Health care organization
  - ✓ Health care practice
  - ✓ Health research

Berlinger et al. 2013; Bhopal 2008; Bostick et al. 2006; Dwyer 2004; Duvell, et al. 2008; Eckwiler et al. 2012; European Roma Rights Centre 2006; Marshall, et al. 2004; NHS Greater Glasgow et al. 2004; Pechurina 2014; Van Liempt et al. 2009, Wild 2011.

Intercultural and Diversity-Sensitive Ethics
in Health Care Organization

- Within the **four main bioethical principles** developed by Beauchaump and Childress (2012 [1979]): specific focus on the **principle of justice.**

    ✓**Migrants**: Limitation of health care entitlements as a contradiction with the principle of non discrimination and social responsibility.

    ✓**Ethnic minorities:** Fulfilment of the principle of non discrimination and cultural acceptability.

Beauchaump et al. (2012 [1979]); Dwyer 2004; Duvell, et al. 2008; Eckwiler et al. 2012; European Centre for Roma Rights 2006; Wild 2011.

Intercultural and Diversity-Sensitive Ethics
in Health Care Practice

- Ethical aspects in health care for migrants
  - ✓ Importance of reducing legal, structural, linguistic and cultural barriers in the access to health care.
  - ✓ Relevance of an adequate intercultural competence.
  - ✓ Ethical conflicts in age assessment procedures and in relation to legal regulations.

- Ethical aspects in health care for ethnic minorities
  - ✓ Ethical responsibility of reducing health care disparities and addressing the needs and preferences of ethnic minorities.
  - ✓ Importance of applying medical ethical codes of conduct.
  - ✓ Relevance of increasing the ethnic diversity within the professional field.

Berlinger et al. 2013; Bostick et al. 2006; European Roma Rights Centre 2006; Wild 2011.

Intercultural and Diversity-Sensitive Ethics
in Research

- Research with migrants
  - ✓ Limitation of **informed consent procedures** in multilingual contexts.
  - ✓ Contradiction between an analysis of **cultural differences** and the **duty of non-discrimination**.
  - ✓ **Risk of abuse** due to a specific situation of vulnerability.
  - ✓ Importance of guaranteeing **confidentiality and privacy**.
  - ✓ Relevance of **intercultural communication** and **ethical sensitivity**.
  - ✓ Need for taking into account the potential impact of a **re-narration of traumatic experiences**.
  - ✓ Potential ethical conflicts in **research with migrants in an 'irregular' situation**.
  - ✓ Relevance of **participatory approaches**.
  - ✓ Reflections on the **social position, cultural background, identity and role of the researcher**, insider/outsider role and power relationships.

Intercultural and Diversity-Sensitive Ethics
in Research

- Research with ethnic minorities

  ✓ Relevance of **understanding the culture and needs** of the ethnic minority community.

  ✓ Importance of using appropriate and **culturally sensitive methodologies**.

  ✓ Relevance of guaranteeing **confidentiality and privacy**.

  ✓ Critical review of **terminologies and categorization processes**.

  ✓ Consideration of the **potential impact of sensitive topics** on the community.

  ✓ **Active involvement** of the ethnic minority community in the research design and process.

  ✓ Importance of facilitating a **dissemination of the results** in the involved **communities**.

Bhopal 2008; NHS Greater Glasgow 2004.

Thank you and questions …

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