

# CULTURAL SAFETY:

The Importance of in Practice  
When Providing Care to  
Aboriginal People



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# LEARNING GOALS

- Understand what is meant by the terms: culture, cultural awareness, cultural sensitivity, cultural competence and Cultural Safety
- The roots of Cultural Safety
- The importance of Cultural Safety in practice
- How to incorporate Cultural Safety into your practice



# WHAT IS CULTURE?

- Culture is more than beliefs, practices, and values.
- Culture has commonly been defined as the worldview, lifestyle, learned, and shared beliefs and values, knowledge, symbols, and rules that guide behaviour and create shared meanings within a group of people (Racher and Annis, 2007).
- complex shifting relational process (Gray and Thomas, 2006).



- Gray and Thomas state that culture can also be understood as a sociopolitical construct with underlying power relationships.
- It is in this landscape whereby cultural safety resides.



# WHAT IS CULTURAL COMPETENCE?

- In social work
- Implies a heightened consciousness of how those accessing care experience their uniqueness and deal with their differences and similarities within a larger social context
- Refers to the process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, religions, and other diversity factors in a manner that recognizes, affirms, and values the worth of the individuals and protects their dignity



# CULTURAL COMPETENT CARE

The integration and transformation of knowledge about individuals and groups of people into specific standards, policies, practices and attitudes used in appropriate cultural settings to increase the quality of care, thereby producing better health outcomes



# WHAT IS CULTURAL SAFETY?

- first introduced by Irihapeti Ramsden, a Maori nurse in Aotearoa (New Zealand), in 1990.
- term explained that cultural safety moves beyond cultural sensitivity and cultural competence (i.e. having knowledge about the culture of “the other”)
- analyzes power imbalances in society, as well as political ideals of self-determination and de-colonization.

<http://www.aht.ca/aboriginal-culture-safety>



# CULTURAL SAFETY IN SIMPLE LANGUAGE MEANS:

*“an environment that is safe for people: where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning, living and working together with dignity and truly listening ”*





# CULTURAL SAFETY ALSO MEANS

- An environment that is spiritually, socially, and emotionally safe
- As well as physically safe for people
- Learning together with dignity



# CULTURAL SAFETY

- moves us beyond cultural awareness and the acknowledgement of difference.
- transcends cultural sensitivity, which recognizes the importance of respecting difference.
- help us to understand the limitations of cultural competence, which focuses on the skills, knowledge, and attitudes of practitioners.
- Anticipates care providers will understand power differentials inherent in health service delivery
- And that in turn, these inequities will be addressed through educational processes



# BY ADDRESSING INEQUITIES, WE CAN:

- Improve health care access
- Acknowledge that we are all bearers of culture;
- Raise awareness about the social, political, and historical contexts of health care;
- Enable practitioners to consider difficult concepts such as racism, discrimination, and prejudice;
- Acknowledge that cultural safety is determined by those who access care;
- Understand the limitations of “culture” in terms of having people access and safely move through health care systems and encounters with care providers;
- Challenge unequal power relations.



# WHY CULTURALLY SAFETY?

Quality care for people of diverse ethnicities:

- Acknowledges values and norms of the patient may be different from her/his own
- Care providers engage in self-reflection
- Involves empathy: the capability to share another being's emotions and feelings
- Increases capacity to become collaborator & advocate
- Embraces traditional teachings



# CULTURAL SAFETY

**Cultural safety:**  
Includes self-reflection & empathy

**Cultural awareness:**  
Acknowledge  
ment of  
difference

**Cultural competence:**  
Skills,  
knowledge &  
attitudes

**Cultural sensitivity:**  
Respecting  
difference

- 1950's & 60's - cultural awareness
- 1980's - Cultural Sensitivity
- 1990's - Cultural Competence
- 2000's - Cultural Safety (although first came into prominence in the late 80's and early 90's in academic circles)



# CULTURAL KNOWLEDGE:

- you know about some cultural characteristics, history, values, beliefs, and behaviours of another ethnic or cultural group



# CULTURAL AWARENESS

- Next stage in understanding groups
- Being open to the idea of changing cultural attitudes
- Example of cultural awareness: police officer refers to an individual of Philippine descent as an illegal immigrant. The officer has cultural awareness of his/her reaction to this group of people.



# CULTURAL SENSITIVITY

- Knowing that differences exist between cultures, but not assigning values to the differences (better or worse, right or wrong)
- Conflict can happen here especially if a custom or belief goes against the idea of multiculturalism (the belief that all are equal)





# CULTURAL COMPETENCE

- Brings together the previous stages
- Acknowledges and validates who people are
- Removes the need to blame and assume guilt
- Focuses on the how-to of aligning policies and practices with goals, everyone involved in process



# RECOGNIZING THE POWER DIFFERENTIAL IN THE RELATIONSHIP

- the power transfer is real and could threaten existing power structures within organizations and society, including the policies and practices in question.
- the essential factors in the definition of cultural safety are the visibility of cultural differences and the power that may flow from that visibility, leading to the demand for equality, respect and control by Aboriginal people.



# MEDICAL VS WHOLISTIC MODEL

## The Medical Model

- Committed and feels responsible to the alleviation of human suffering
- Professional responsibility
- Expertise objectivity
- Presumes of “illness” as distinct category
- Presumes perfectibility
- Presumption of all people as aspiring to same “ideal”
- Presumption of “patient” as object
- Presumes "patient" is engaged
- Search for efficient and rapid therapies
- Does not see culture as part of biology

## Wholistic Model

- Individual journey
- Balance in all four quadrants: Spirituality, Emotionality, Physicality & Intellectuality
- Balance is dynamic
- Connection to all - All My Relations
- No time constraints
- How we interact with the world
- Balance equals wellness equals health and requires alignment
- No immediate response at time of traditional “consult”



- Unsafe cultural practice is any action that diminishes, demeans or disempowers the cultural identity and wellbeing of an individual or group



# IMPACT OF COLONIAL POLICY

- Loss of Culture
- Loss of Language
- Loss of Heritage
- Loss of Identity
- Loss of Parenting Skills
- Intergenerational Family Violence
- Loss of land & livelihood
- Loss of self control & Self determination
- Child welfare system
- Cognitive imperialism: Western knowledge and education



- historically and to the present day, FN peoples have not been full participants in the nation state called Canada.
- As the political economy of Canada evolved, it became necessary to dislocate Aboriginal peoples from their traditional land and their way of life in order to make way for settler societies.



- This process of dislocation which was a result of colonization meant that many Aboriginal people and communities were socially excluded from Canada.
- This led to marginalization in education and employment, housing, health care and many other services.
- in turn, effectively created a two-tiered society in Canada - one standard for Canadians as a whole and another standard for Aboriginal peoples.



- ***Hodgen (1992) and other Aboriginal writers have examined the links between the policies and practices of colonialism in Canada and the current situation of Aboriginal people. The cumulative impacts of multi-generational experiences with residential schooling, policies of assimilation, loss of culture and traditional economic activity, loss of autonomy, subordination to the Department of Indian Affairs, poverty, and unemployment have profoundly affected Aboriginal communities.***

- **This remains unchanged today.**





# 5 PRINCIPLES NECESSARY FOR CULTURAL SAFE PRACTICE

- **Protocols** – respect for cultural forms of engagement.
- **Personal knowledge** – understanding one’s own cultural identity and sharing information about oneself to create a sense of equity and trust.
- **Process** – engaging in mutual learning, checking on cultural safety of the service recipient.
- **Positive purpose** – ensuring the process yields the right outcome for the service recipient according to that recipient’s values, preferences and lifestyle.
- **Partnerships** – promoting collaborative practice.

(Adapted from Ball, 2007b, p. 1)



# CULTURAL SAFETY: 5 PRINCIPLES

## Partnerships:

Engage in relational practice founded on authentic encounters  
Share knowledge vs. 'telling'  
Collaborative problem solving vs. expert/authority  
Strengthen mutual capacity vs. one-way 'delivery'  
Co-construct ways to move supports into place

## Personal knowledge:

Hone critical consciousness of social location/power  
Who are you? Cultural affiliations, professional persona  
Introduce yourself in terms of your cultural identities



## Protocols:

Show respect – Ask permission/informed consent  
Seek cultural knowledge – Ask questions  
Demonstrate reciprocity – Learning goes both ways  
Engage community accompaniment –  
Find allies, mentors in community of practice

## Positive Purpose:

Build on strengths  
Avoid negative labelling  
Ensure confidentiality  
Be accountable  
Do no harm  
Make it matter, ensure real benefits

## Process:

Ensure equity and dignity for all parties  
Negotiate goals and activities  
Talk less, listen



# STRATEGIES THAT ENHANCE THE ABILITY TO BE CULTURALLY SAFE INCLUDE:

- reflecting on one's own culture, attitudes and beliefs about 'others'
- clear, value free, open and respectful communication
- developing trust
- recognising and avoiding stereotypical barriers
- being prepared to engage with others in a two-way dialogue where knowledge is shared
- understanding the influence of culture shock



# INDICATORS OF CULTURAL UN-SAFETY

- Low utilization of available services
- ‘Denial’ of suggestions that there is a problem
- ‘Non-compliance’ with referrals or prescribed interventions
- Reticence in interactions with practitioners
- Anger
- Low self-worth
- Protests about lack of ‘cultural appropriateness’ of tools and interventions transported from dominant culture to minority culture



# EXAMPLE OF CULTURALLY SAFE CARE

- A social worker recognizes that homophobia in their own personality and chooses not to work in the H.I.V. ward of a hospital where there is a higher chance of encountering homosexuals. This reduces the likelihood of the SW providing demeaning, humiliating or unsafe care to a patient.



- **Cultural safety is respectful engagement that supports and protects many paths to well-being.**
- *“Finding our way to wellness among diverse communities of children and families requires many pathways. No one approach, no one program model, will reach or work for everyone.”* **Meadow Lake Tribal Council Administrator**



# RESOURCES

- <http://www.anac.on.ca/Documents/Making%20It%20Happen%20Curriculum%20Project/FINALFRAMEWORK.pdf>
- Building Community Tool Box - Chapter 7  
<http://ctb.ku.edu/en/table-of-contents/culture/>
- <https://www.humanrights.gov.au/publications/chapter-4-cultural-safety-and-security-tools-address-lateral-violence-social-justice>
- [http://www.intstudentsup.org/diversity/cultural\\_safety/](http://www.intstudentsup.org/diversity/cultural_safety/)

