TOWARDS REDUCING HEALTH INEQUITIES:

A HEALTH SYSTEM APPROACH TO CHRONIC DISEASE PREVENTION

The Immigrant Population Working Group includes representatives from a diverse range of organizations including:

- Affiliation of Multicultural Societies and Service Agencies
- Centre for Healthy Aging, Providence
- Provincial Health Services Authority
 » Provincial Language Services
- REACH Community Health Centre
- University of British Columbia
 - » Faculty of Medicine
 - » School of Population Health and Public Health
- Vancouver Coastal Health
 - » Community Engagement
 - » Cross Cultural Mental Health Program
 - » Population Health

Immigrant Population Working Group Recommendations

The Working Group used "A Framework for Conceptualizing Equity in Health Care"¹ to organize recommendations. This framework is based on three dimensions for understanding equity in the delivery of health services:

- Availability,
- Accessibility,
- Acceptability.

Based on five meetings of the Immigrant Population Working Group and a Community Engagement meeting with various settlement and immigrant serving agencies, a number of Barriers and Opportunities for Action were identified. The following is a summary of the Working Group's findings.

1. Availability of Services

Barrier	Opportunities for Action
Immigrants can experience difficulties finding a family physician and accessing health care in their own language.	 Increase capacity within the interpreting community to provide services to GPs. Provide the opportunity for foreign trained health care professionals to act as cultural health brokers.
It can be challenging for some immigrant sub-groups (e.g. sponsored seniors) to obtain extended medical care.	• Improve the availability of extended health care services.

2. Accessibility of Services

Barrier

Immigrants have challenges in navigating the • complexity of the Canadian health care system. •

Opportunities for Action

• Increase support for cultural health brokers.

• Hire foreign trained health care professionals as cultural health brokers.

Provincial Health Services Authority Province-wide solutions. Better health.

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For more information contact:

http://www.phsa.ca/HealthProfessionals/ Population-Public-Health/Centres-For-Population-Public-Health/RHIProject.htm

¹ Health system approaches to promoting health equity: A discussion paper (Mador, 2010)



Immigrant Population Working Group Recommendations (cont...)

2. Accessibility of Services (cont...)

Barrier	Opportunities for Action
 A lack of culturally responsive and (geographically) accessible health services means: Immigrants may travel long distances. Services may not be provided at suitable times for immigrants. Health care providers may not recognize mental health issues of immigrants 	 Partner with localized immigrant community organizations to provide: Health promotion programs, Medical outreach services, Mental health services.
Discontinuity between settlement services and health services means that settlement workers often have limited knowledge about available health services.	 Build health promotion capacity among settlement workers & immigrant serving agencies. Improve information support between health literacy coordinators and settlement agencies. Improve collaboration between community agencies and settlement workers.
Information is provided in a way that does not enhance health literacy, such as using only English and using jargon or advanced vocabulary.	 Improve health literacy by utilizing: » cultural health brokers and existing community programs, » media, such as radio and TV, and » ESL classes. Promote awareness of interpreting services for health care providers. Develop partnerships between immigrant serving agencies and the BC Health Literacy Strategy.
Waiting periods can delay access for new immigrants to access the publicly funded health care system.	Examine waiting period policies in BC, to ensure they meet the Accessibility Principle of the Canada Health Act.
The Social Determinants of Health including poverty, transportation and housing affect health status of immigrants.	Provide support within the health sector to address the social determinants of health.

3. Acceptability of Services/Patient Centered Care

Barrier	Opportunities for Action
Limited cultural competency means that health care is not always culturally responsive.	Improve culturally competency and cultural safety by:
Limited cultural safety means that immigrants don't always feel their cultural identity has been respected.	• providing education to health care providers, including how to work with cultural brokers and interpreters, as well as on the use of alternate therapies, and
	 utilizing the knowledge and expertise of immigrant serving agencies to help train health care providers and/or improve health programs and services.



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