Patient education, health literacy and chronic disease: Lessons learned from a multicultural community in Quebec, Canada.

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Presentation outline

• Context
  • Challenges faced by people managing chronic health conditions (C. H. C.s);
  • Challenges faced by immigrants managing C. H. C.s;
  • Challenges encountered by healthcare professionals.

• Best practices to increase health literacy about C. H. C.s in a multicultural context.

• Conclusion.
• Nearly 50% of patients with a C. H. C. fail to comply with their health related instructions (Miller, 2016).

• In a multicultural context:
  □ Beliefs held by immigrants may affect how they understand and how they react in response to instructions given by their healthcare professionals (Shaw, Armin, Torres, Orzech & Vivian, 2012).
  □ Cultural and linguistic barriers decrease health literacy in multicultural context (Lee, Rhee, Kim, & Ahluwalia, 2015).
Local context: Welcome to the Outaouais region of Quebec, Canada.

- **Multicultural region:**
  - First Nations;
  - Natives of the region;
  - Immigrants from other regions (e.g., Canada’s Capital region);
  - Immigrants from other countries.

(Quebec Statistical Institute (in translation), 2015)
Challenges faced by people managing C. H. C.s

- A subset of patients who we ask to manage their chronic health conditions belong to the most vulnerable groups in terms of literacy.

- "It's too complicated and I'm too sore. What's the worst that could happen?"

- "I have a hard time reading food labels, so I will often buy the same things, such as rice."
Challenges faced by immigrants managing C. H. C.s

- Chronic health conditions:
  - “Imported" Chronic Health Conditions;
  - “Acquired" Chronic Health Conditions.

- Challenges faced by immigrants:
  - Different health culture (use of services).
  - Difficulties in obtaining access to health information and services (there are over 150 different reported mother tongues in Canada).
  - Discrimination stemming from prejudice within the interdisciplinary health care team.
Challenges faced by immigrants managing C. H. C.s

- Increased use of walk-in clinics.
- Expectation that they can express their health concerns in the same time as a fluent speaker of the language (English or French).

Bruno, can you describe your pain?

Umm, I don’t know, it’s complicated, it’s like, ahhh how do you say...
Challenges faced by healthcare professionals.....

• **Barriers to attaining health objectives:**
  
  o Tools that are only adapted for a specific clientele;
  o The educational culture of teaching cause and effect;
  o Professional education does not introduce the appropriate use of translators;
  o Insufficient time allocated to meetings.
Challenges faced by healthcare professionals.....

• Barriers to attaining health objectives (cont’d):

  o The often multidisciplinary context of patient education without continuity promoting tools or strategies.
  o Role ambiguity. Important patient education information can be doubled, contradicted or omitted by the presumption of another professional’s role.
Question

What are the best practice recommendations to ensure that the immigrant population who have a C. H. C. can increase their health literacy?

Are you a patient who needs a Sign Language interpreter or a Cultural Language Interpreter when you come to The Hospital? Please visit our Accessibility page for more information.
Creating ideal situations

The Health education in a multicultural context model

1- Resources:
- Human:
  - Professionals (nurses, doctors, pharmacists, dieticians, speech language pathologist, respiratory/occupational/physiotherapists, etc.);
  - Translators.
- Material:
  - Kits containing adapted educational material;
  - Instructions to use the kits.

2- Activities:
- Education sessions for professionals:
  - The influence of culture on patient care and education;
  - Intercultural communication;
  - Appropriate use of translators.
- Education sessions for IPCHC:
  - Navigation of the healthcare system group education;
  - Managing chronic conditions.

3- Objectives and results:
  (Short term)
- The IPCHC will be able to demonstrate some functional, communicative and critical literacy skills, for example:
  - Express themselves about their health condition;
  - Understand recommendations;
  - Use health services adequately.

4- Effects:
  (Advantages for the IPCHC)
- Adequate management of their health condition (self and with professionals).

5- Impacts:
  (Long term)
- The IPCHC will:
  - Favor the development of the patient-professional partnership;
  - Research their health condition;
  - Demonstrate increased health literacy.

Contributing factors:
- Inform through immigrant associations;
- Inform through patient associations;
- Organizations in the community that value equality in their institution’s interventions.

Image: https://www.stmarysaTHENS.org/images_/dyn/classes/heart-diabetes-classes.jpg
Conclusion

• This information is the starting point of implanting a program that will better meet the needs of immigrants living with a C. H. C.
• The program will also be developed to continue with other populations, such as the people native to the region.

Thank you!
Bibliographical references


