

Cultural Competency- Do we understand it?

Associate Professor Mike Legge

Department of Biochemistry

University of Otago

Dunedin

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Defining “Culture”

- “... the totality of socially transmitted patterns, thoughts, values , meanings and beliefs ...”

Purnell, L (2005) J Multicult Nurs Health 11 (2) 7-15.

- It is not limited to any specific ethnic groups, geography, languages, religious beliefs, clothing, sex-orientation or socio-economic group
- Cultural awareness is a pre-requisite to achieving cultural competency

Diverse Groups – Diverse Approches

Understanding the why in healthcare

- Legislation:
 - section 118(i) HPCA Act: health practitioners observe standards set by their professional authority.
 - Right 1(3) Code of Health and Disability Services Consumer Rights (1996): "... needs, values and beliefs of different cultural, religious, social and ethnic groups ..."
 - Treaty of Waitangi: Special relationship between Māori and the Crown: Partnership, Participation, Protection.
- Safeguard Māori cultural concepts values and practices in health care

Census data (2023): Diversity

- European: 67.8%
- Māori: 17.8%
- Asian: 17.3%
- Pasifika: 8.9%
- MELA: 1.9%
- **Pasifika:** Samoan, Cook Island Māori, Tongan, Niuean, Fijian, Tokelouan, Kiribati.
- **Asian:** Chinese, Indian, Filipino, Korean, Japanese, Sri Lankan, Thai, Vietnamese, Indonesian, Malaysian. Asian not specified.
- **MELA:** Middle Eastern, Latin American.

Cultural Competency

- Increase understanding and differences between different groups.
- Willingness and ability to draw on values, beliefs, tradition and customs.
- Work with knowledge of diverse groups.
- Awareness of own nuances of own culture and that of others: ***Cultural Sensitivity.***
- Understanding the wide range of ethnic and multicultural groups: ***Cultural Diversity.***
- No international agreement to describe diverse population groups.
- Australia: “culturally and linguistically diverse”

Literature focuses on Medical Practitioners and Nurses

- Focus on good health outcomes
- Fostering relationships with the community
- Ensure staff are culturally competent
- Create an environment of cultural competence
- Pronounce patient's names correctly
- Should families be involved
- Give patients your name
- Explain course of action

Ministry of Health: New Zealand

- “... creating safe space for understanding, belonging, healthy communication and inclusivity...”
- “... increasing awareness, building knowledge, acquiring the right skills, learning appropriate behaviour, developing the right attitude ...”
- “... Having awareness, knowledge and skills to effectively interact and understand people from diverse cultural backgrounds ...”

Māori Cultural Competence

- Face-to-face. Listen with ears not eyes
- Whanau – may wish to be present
- Silence – time to gather thoughts
- Time to speak – provide time for thoughts
- Personal space – respect for physical distance

Pasifika

- Diverse group >20 cultural and language groups
- Roles of church and religion
- Role of Elders
- Role of community groups – inherent Pasifika values

Other cultural groups

- Asian – very diverse
- Deaf
- Blind
- Disabled

Cultural Competency

- Learn some keywords and phrases in another language e.g., Te Reo Māori NZIMLS website: *Māori words and phrases for scientists and technicians.*
- Learn key cultural concepts e.g. Muslims fasting during Ramadan, LGBTQ+ community use their own pronouns.
- Reflect on the cultural diversity of local population

Cultural Safety

- Impact of own cultural impact on healthcare delivery
- Self-reflection – attitudes to other cultures
- Goal – provide an equitable healthcare
- Competence based approach alone fails for equitable healthcare
- Outcomes expected to provide benefits for patients and communities

Achieving cultural competency

- Organisational support
- Skills development
- Critical awareness
- Knowledge
- Understanding
- Desire to engage

Summary: Cultural Competency and Safety

- New Zealand has a diverse cultural population.
- In general Pathology workers have very little contact with the public.
- Main exceptions: Phlebotomy, Mortuary, possibly Specimen Services and rural settings
- There is no reliable international literature on cultural competency and safety for Pathology workers.
- Main focus of the literature is on Medical and Nursing staff.
- The MSCNZ should not use overseas criteria for the New Zealand Pathology workforce.
- The MSCNZ should reconsider the appropriate level required for Pathology workers in New Zealand.