Chapter IV
Culturally Sensitive Healthcare for Newcomer Immigrants

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ABSTRACT

This chapter will give an overview of the healthcare-related challenges that most newcomer immigrants and refugees encounter as they acculturate into their new environments in Western countries. It will highlight practical tips that can: enhance the caregiver and patient relationships across cultures and across continents; enhance culturally sensitive healthcare services; and help to create culturally inviting healthcare environments. Current demographics indicate that most developed countries continue to experience a growing influx of cross culturally diverse immigrants and refugees that represent the world's 210 nations. It is also evident that, although these newcomers enrich their new nations with their diverse backgrounds, language, and cultural differences continues to pose formidable obstacles to their health, healthcare providers and health system in general. While the patients and providers realize the effects of immigration on the quality and access to healthcare, they seem to be overwhelmed by the barriers.

INTRODUCTION

Most Western countries have experienced a drastic increase in the number of immigrants and refugees (Coppel, Dumont & Visco, 2001; Leininger & McFarland, 2006; & Westberg, Bumgardner, Melissa, Lind, & Patricia, 2005). Specific findings by Westberg et al (2006), indicated that immigrants made up 11.5% of the United States population and that approximately 1.5 million immigrants arrived each year. Noteworthy is the fact that, though the highest numbers of immigrants in

the United States come from Mexico and other Hispanic-speaking regions, the first group of immigrants were from the Northern continent of Europe. Other regions of the world that are represented by the immigrants and refugees in America and many Western countries include: Africa, Southeast Asia, South America, Eastern Europe, and the former Soviet Union.

Despite the fact that most immigrants and refugees leave their home countries in good health (Fowler, 1998), and with myriad hopes and expectation (Bailey, 2002), it is unfortunate because their health seems to deteriorate over time. They seem to encounter numerous health access barriers, mental and emotional health related challenges as they acculturate and integrate into their new culture and environment (Bailey, 2002). Their acculturation and their ability to access health care has remained complex due to cultural and language related challenges. Unfortunately, this insurgent increase in health access barriers has been linked to the lack of cross culturally competent and sensitive front line workers, health care providers, policies and health care environments. Though the solutions to these problems may be complex, long –term, and multifaceted, it is believed that health care providers who are knowledgeable in cross cultural competency skills as well as health care systems that have designed culturally sensitive policies and environments will optimize the ability to help alleviate these disparities. Unlike other professionals, cross culturally competent health care providers have the unique ability to eliminate health access disparities and to improve the quality of care among cross-culturally diverse immigrant and refugee populations.

The purpose of this chapter is to highlight the health care access barriers that immigrants and refugees encounter as they acculturate into their new Western cultures and environments. It will also offer suggestions of cultural competency approaches and tips that can enhance the patient-provider and the system –community relationships across cultures. The specific objectives of this chapter are to:(1) provide an overview of the influx of immigrants and refugees into Western Countries ; (2) raise awareness of the health care access barriers that immigrants and refugees encounter upon arrival ; (3) provide information that can help providers become better acquainted with the health seeking behaviors, practices and perceptions of the diverse immigrants and refugees; and, (4) offer practical and cost –effective cross cultural competency suggestions and tips that can help health care providers and health care systems deliver culturally appropriate services and design cultural sensitive environments.

Background

The 2006 Census data indicated that the total number of immigrants and refugees in the United States of America had reached an all-time high of 37.5 million. It was also evident that although the numbers of immigrants and refugees in most Western countries continued to increase, the United States of America had the fastest-growing numbers in the world (Active Voice, 2003; Bailey, 2002; Macdonald, 2003; & Portes & Rumbaut, 1996). Specific reports from Active Voice (2003), indicated that in 2000, the United States of America was home to 56 million foreign born residents and children of immigrants, compared to 34 million that was reported three decades earlier. According to Frey (2006), the immigrant population in the United States represented more than 5 percent of the population in 29 states, and more than 10 percent in 15 other States. Active Voices also pointed out that these immigrants were from diverse cultures, ethnicities, nationalities, and socio-economic status and were settling and making new homes in large and small cities across the country.

Similar trends were reported in other western countries (Coppel, Dumont & Visco, 2001). According to the 2007 reports(2007, Biggest-invasion-since-1066), Government projections from the United Kingdom indicated that immigration

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