Intercultural mediation

- Antonio Chiarenza
What do we mean by intercultural-mediation?

- to recognise the cultural codes of those involved in communicative relations - migrant patient/provider; providers/migrant groups - in order to overcome barriers and to facilitate self determination;
- to facilitate exchanges between the various parties – migrant users/service organisations/ migrant communities – in order to anticipate possible misunderstandings;
- to identify and encourage opportunities for dialectic interaction between people of different socio-cultural backgrounds;
- to support the organisational context in the process of making services appropriate for migrant users.
Where is the province of Reggio Emilia?

Part of the Emilia-Romagna region
2,291 square kilometres
Main town Reggio Emilia
6 territorial districts
45 municipalities
Population of 457,000 people
The Azienda Unità Sanitaria Locale of Reggio Emilia [local health service]

- Guastalla Hospital
- Correggio Hospital
- Montecchio Hospital
- Scandiano Hospital
- Castelnovo Monti Hospital

Part of the Regional Health System
One of the 17 LHSs of Emilia-Romagna
6 Districts (primary care)
5 Hospitals
3,500 employees
470 medical doctors
Reggio Emilia: A province under transformation

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The district of Guastalla is the social area with the highest population of migrants.

Average percentage: 6.6%
Impact on healthcare and initial actions

Illegal migrants' health
Overload of A&E
Poor communication and understanding
Mother and child care
Inappropriate use of hospital services

Ad hoc service (CFF)
Search for interpreters
Production of multilingual information
Specific antenatal pathways
Use of ad hoc interpreters
Launch of specific project
Project pathway

- SET UP OF SUB PROJECT GROUP
  Hospital and primary care staff

- LANGUAGE NEEDS ASSESSMENT
  statistical data and staff & patient survey

- IDENTIFICATION OF MODEL DEPARTMENTS
  Gynaecology, Paediatrics and A&E

- IMPLEMENTATION OF MEASURES
  • New intercultural mediation service
  • Service coordination
  • Written materials
  • Guidelines

- PROJECT MEASURES EVALUATION
  Staff survey
  Patient survey
Needs and resources assessment (staff and patients problem list)

- Poor patient/provider communication (diagnosis and treatment, compliance, follow-up, preventive care)
- Insufficient written information in migrants’ languages
- Limited availability of interpreters/cultural mediators
- Lack of timely access to interpreters/translations
- Need to minimise the use of informal interpreters
- Quality of interpreting needed to be improved
- Insufficient knowledge on how to work with interpreters
- Lack of coordinated language services
Implementation of measures: 1st phase at Guastalla hospital

SETTING UP AN INTERPRETING SERVICE in 3 model hospital wards by:
- Appointing a trained intercultural mediator to cover Indian languages;
- Co-operating with the district (primary care);
- Seeking integration with the local community health plan (PPS)

ESTABLISHING COORDINATION at hospital level

TRAINING and education
- For hospital staff on working with intercultural mediators

TRANSLATION OF WRITTEN MATERIALS (hospital info, patient charter, multilingual questionnaires, discharge/follow-up…)

Implementation of measures: 2\textsuperscript{st} phase in all health services

**SETTING UP AN INTERCULTURAL MEDIATION SERVICE** by:
- Engaging social cooperatives
- Appointing (trained) Inter.mediators
- Connecting hospital, primary care and social services’ needs
- Developing partnerships in the community.

**ESTABLISHING COORDINATION** at central and district level

**TRAINING** and education
- For hospital staff
- For intercultural mediators

**DEVELOPING GUIDELINES** on cultural mediation and translation/interpreting

**TRANSLATION OF WRITTEN MATERIALS** (centralised)

**SYSTEMATIC DOCUMENTATION**
continuous assessment
A definition of intercultural-mediator

<table>
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<th>Description</th>
<th>Skills</th>
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| An intercultural mediator:  
  ▪ is able to accompany relations between migrants and the specific social context, fostering the removal of linguistic and cultural barriers, the understanding and the enhancement of one’s own culture, and the access to services.  
  ▪ assists organisations in the process of making the services offered to migrant users appropriate.  
  (Regional decree of Emilia-Romagna, N.152, 10th November 2004) | Understanding of different migrant needs and resources  
Linguistic mediation: interpreting & translation  
Intercultural mediation: culturally competent communication  
Orientation of relations between migrant users/services |
Intercultural services provided

Languages: Arabic, Chinese, Hindi, Urdu, Albanian, Russian, Turkish, (Romanian)

Type of interventions for clinical encounters and health promotion activities:

• On site presence of the intercultural mediator
• Weekly scheduled intervention
• Urgent intervention (within 2/3 hours)
• Over the phone intervention
• Interpreting and translations
• Patient information and education
• Community information and education
Every intervention of the intercultural mediator is monitored through documentation - a specific form - containing the following information:

- Health service, staff and patient/s involved
- Duration of the encounter
- Language used
- Type of encounter:
  - Legal issues (e.g. informed consent)
  - Clinical and nurse care
  - Hotel service
  - Patient/community empowerment
  - Staff training

MFH evaluation questionnaires for patients and staff
Final results and conclusions

- Tendency to continue to use informal interpreters, like family members (particularly in A&E departments);
- Risk that health staff delegate certain tasks to the intercultural mediators;
- Difficulty in finding (trained) intercultural mediators, especially among Chinese;
- Need to create appropriate and recognised training programmes for intercultural mediators;
- Need to define quality standards for intercultural mediation, interpreting and translation;
- Tendency to consider the use of intercultural mediators as the panacea for the management of intercultural health care
- Need to develop a policy for culturally competent communication.