

# Building Community-based Integrative Health Practices on a Culturally Sensitive Foundation

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## Objectives

- 1. Define relevant terms and research hypotheses
- 2. Apply the participatory action research cycle
- 3. Assess themes from iteration #1
- 4. Define and assess cultural sensitivity and cultural sensitivity trainings
- 5. Evaluate Integrative Health Practices Group Training Results, both qualitative and quantitative
- 6. Assess themes from iteration #2
- 7. Analyze themes for future iteration #3 applying TM and Permaculture Principles





# Integrative Medicine

- A low cost, collaborative, person-centered approach to the patient-practitioner relationship that emphasizes patient participation, empowerment, health justice, and optimal treatment of the whole person.
- It uses conventional medicine approaches in conjunction with safe, evidence-based complementary interventions that rely upon the body's innovative healing response to promote meaning, resilience, and well0being across the life span

(Aggarwal, Aggarwal, and Rao 2017; Ali and Katz 2015; Chao and Adler 2018; Holmberg, Brinkhaus, and Whitt 2021; Hu et al. 2015; Jonas and Rosenbaum 2021; Ng et al. 2020; Singer and Adams 2014; Vitale 2021; Witt et al. 2016, 2017).



# Integrative Health Practices

Focus on interventions that patients can learn and practice on their own, such as breathing and relaxation exercises, meditation, guided imagery, yoga and other mind-body skills.

Russo and Fortune, 20165, Stahl et al. 2015







- Address the root causes of chronic disease
- Decrease isolation
- Provide accessible care for all community members





# Hypothesis

When built upon a foundation that incorporates cultural sensitivity and traditional medicine in a group setting, the benefits of integrative health practices will increase exponentially







"Ordinary" people as co-researchers involved in every aspect of the research

Respect for the knowledge of all participants

Mutual learning among participants

Attention to the needs of the marginalized or disempowered

Promote justice for marginalized people

#### Key Goals of Participatory Action Research (PAR)

To produce practical knowledge

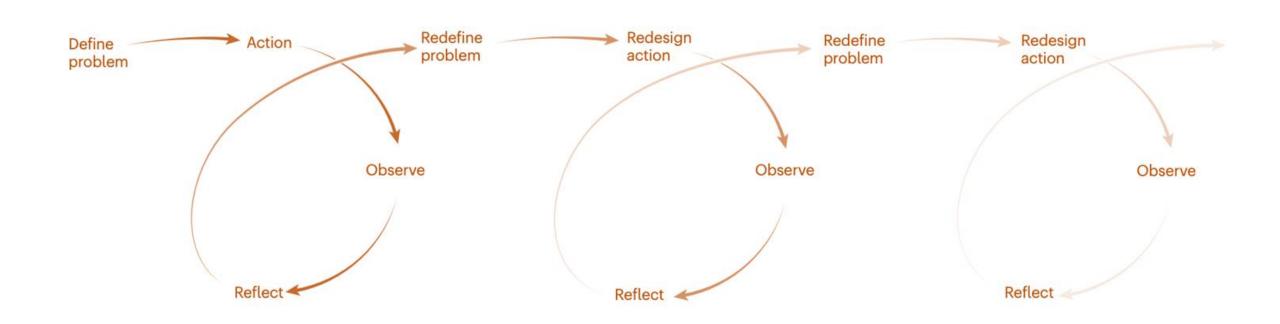
To take action and make the knowledge available

To be transformative both socially and for the individuals who take part

Cornish et al. (2023). Participatory action research. Nature Reviews Methods Primers. <a href="https://www.nature.com/articles/s43586-023-00214-1">https://www.nature.com/articles/s43586-023-00214-1</a>



#### THE PARTICIPATORY ACTION RESEARCH CYCLE



Cornish et al. (2023). Participatory action research. Nature Reviews Methods Primers. <a href="https://www.nature.com/articles/s43586-023-00214-1">https://www.nature.com/articles/s43586-023-00214-1</a>





#### **Themes from Participatory Action Research Iteration #1**

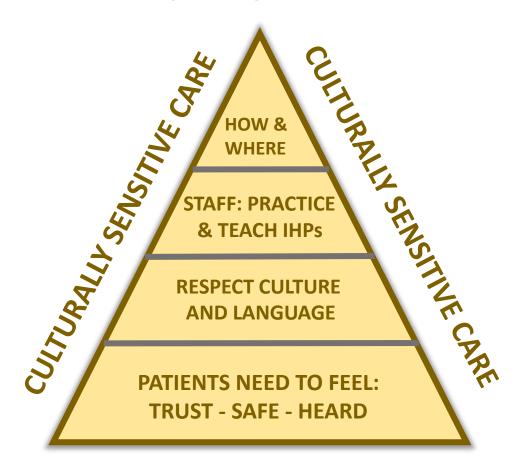




Russo, R. & Williams, K. (2022). The Power of Integrative Medicine and the Group in Equitably Advancing Health and Well-Being: *A Participatory Action Research Study,* International Journal of Health Wellness and Society.



#### **Themes from Participatory Action Research Iteration #1**







# What is cultural sensitivity?

- Being aware that cultural differences and similarities between people exist without assigning them a value
- Being aware that cultural differences and similarities between people exist and effects values, learning and behavior
- A set of skills that allows you to *understand and learn about people* whose cultural background is not the same as your own.





# What is Culturally Sensitive Care?

- Weaving culture into care. (Steinka-Fry, 2017)
- **Culture** is an integration of beliefs, behaviors, values, social practices, and acquired knowledge with religious, spiritual, and sociological characteristics (<u>Charleston</u>, 2020)

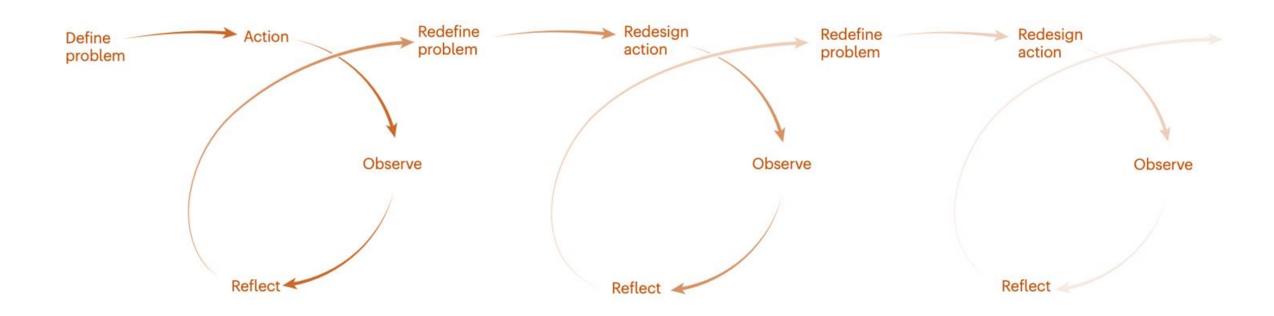


#### **Iteration 1:**

How do FQHC providers and staff feel about IHPs?

#### **Iteration 2:**

How can we design n IHP training for FQHC staff that respects the patient's cultural and language?





# Research Team Trained in IHPs & Cultural Sensitivity

- Masters of Healthcare Administration Students
- Diverse multi-cultural group
- Age: 27 to 65
- Explored trained in IHPs and shared their experiences with traditional medicine:
  - Nigeria
  - Haiti
  - Argentina
  - Dominican Republic
  - Columbia
  - Peru





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Merging of the researchers with the research





List all the cultural influences you can think of that explain or describe your identity







- 1. ADDRESSING Model
- 2. Cultural Sensitivity Assessments
- 3. Reflection and Discussion







D Disability status (developmental)

D Disability status (acquired)

**R** Religion/Spirituality

E Ethnicity & Race

**S** Socioeconomic status

**S** Sexual orientation

I Indigenous heritage

N National origin

**G** Gender





Cultural influence	Dominant group	Nondominant or minority group
Age and generational influences	Young and middle-aged adults	Children, older adults
Developmental or other Disability <sup>a</sup>	Nondisabled people	People with cognitive, intellectual, sensory, physical, and psychiatric disabilities
Religion and spiritual orientation	Christian and secular	Muslims, Jews, Hindus, Buddhists, and other religions
Ethnic and racial identity	European Americans	Asian, South Asian, Latino, Pacific Islander, African, Arab, African American, Middle Eastern, and multiracial people
Socioeconomic status	Upper and middle class	People of lower status by occupa- tion, education, income, or inner city or rural habitat
Sexual orientation	Heterosexuals	People who identify as gay, lesbian, or bisexual
Indigenous heritage	European Americans	American Indians, Inuit, Alaska Natives, Métis, Native Hawaiians, New Zealand Māori, Aboriginal Australians
National origin	U.Sborn Americans	Immigrants, refugees, and inter- national students
Gender	Men	Women and people who identify as transgender

Note. Adapted from Addressing Cultural Complexities in Practice, Second Edition: Assessment, Diagnosis, and Therapy (p. 18), by P. A. Hays, 2008, Washington, DC: American Psychological Association. Copyright 2008 by the American Psychological Association. https://www.apa.org/pubs/books/Addressing-Cultural-Complexities-in-Practice-Chapter-1-Sample.pdf





#### Self-Assessment of cultural:

- Knowledge
- Awareness
- Skills

### Cultural Sensitivity Checklist Instructions

Read each entry in the Awareness, Knowledge and Skills sections Respond with one of the following responses

```
"Never" = 1

"Sometimes" = 2

"Fairly Often/Pretty well" = 3

"Always/Very Well" = 4
```

The more points you have, the more culturally competent you are becoming.

This is simply a tool. This is not a test.

The rating scale is there to help you identify areas of strength and areas that need further development in order to help you reach your goal of cultural competence.

Remember cultural competence is a process, and that learning occurs on a continuum and over a life time.

While you complete this assessment, stay in touch with your emotions, remember learning is a journey.



#### Cultural Competency Awareness Checklist: Awareness Section

Value diversity	I view human difference as positive and a cause for celebration
Know myself	I have a clear sense of my own ethic, cultural, and racial identity and how that is viewed by others with whom I differ
Be aware of areas of discomfort	I am aware of my discomfort when I encounter differences in race, religion, and sexual orientation, language and/or ethnicity
Check my assumptions	I am aware of the assumptions that I hold about people of cultures different from my own
Challenge my stereotypes	I am aware of the assumptions that I hold as they arise and have developed personal strategies for reducing the harm they cause
Reflect on how my culture informs my judgement	I am aware of how my cultural perspective influences my judgement about about what I deem to be "appropriate", "normal", or "superior" behaviors, values and communication styles
Accept ambiguity	I accept that in cross cultural situations there can be uncertainty and that uncertainty can make me anxious. It can also mean that I do not respond quickly and take the time needed to get more information.
Be curious	I take any opportunity to put myself in places where I can learn about difference and create relationships.
Be aware of my privilege	If I am a White person working with an Aboriginal person or Person of Color, I understand that I will likely be perceived as a person with power and racial privilege, and that I may not be seen as 'unbiased' or as an ally.
Be aware of social justice issues	I'm aware of the impact of the social context on the lives of culturally diverse population, and how power, privilege and social oppression influence their lives

#### Cultural Competency Awareness Checklist: Knowledge Section

Gain from my mistakes	I will make mistakes and will learn from them
Assess the limits of my knowledge	I will recognize that my knowledge of certain cultural groups is limited and commit to creating opportunities to learn more
Ask questions	I will really listen to the answers before asking another question
Acknowledge the importance of difference	I know that differences in color, culture, ethnicity etc. are important parts of an individual's identity which they value and so do I. I will not hide behind the claim of "color blindness".
Know the historical experiences of those I label as "others"	I am knowledgeable about historical incidents and current day practices that demonstrate racism and exclusion towards those I label as "others".
Understand the influence culture can have	I recognize that cultures change over time and can vary from person to person, as does attachment to culture
Commit to lifelong learning	I recognize that achieving cultural competence involves a commitment to learning over a life-time
Understand racism's, sexism's impact	I recognize that stereotypical attitudes and discriminatory actions can dehumanize, even encourage violence against individuals because of their membership in groups which are different from myself
Know my own family history	I know my family's story of immigration and assimilation
Know my limitations	I continue to develop my capacity for assessing areas where there are gaps in my knowledge

### Cultural Competency Awareness Checklist: *Knowledge* (con't)

Awareness of multiple social identities	I recognize that people have intersecting multiple identities drawn from race, sex, religion, ethnicity, etc and the importance of each of these identities vary from person to person
Inter-cultural and intra- cultural differences	I acknowledge both intercultural and intracultural differences
Understand point of reference to assess appropriate behavior	I'm aware that everyone has a "culture" and my own "culture" should not be regarded as a point of reference to assess which behavior is appropriate or inappropriate



### Cultural Competency Awareness Checklist: Skills Section

I am developing ways to interact respectfully and effectively with individuals and groups
I can effectively intervene when I observe others behaving in a racist and/or discriminatory manner.
I am able to adapt my communication style to effectively communicate with people who communicate in ways that are different from my own.
I seek out people who challenge me to maintain and increase the cross-cultural skills I have.
I am actively involved in initiatives, small or big, that promote understanding among members of diverse groups.
I can act in ways that demonstrate respect for the culture and beliefs of others.
I am learning about and put into practice the specific cultural protocols and practices which are necessary for my work.
My colleagues who are Aboriginal, immigrants or People of Color consider me an ally and know that I will support them with culturally appropriate ways.
I work hard to understand the perspectives of others and consult with my diverse colleagues about culturally respectful and appropriate courses of action.
I know and use a variety of relationship building skills to create connections with people who are different from me.

#### Cultural Competency Awareness Checklist: *Skills* Section (con't)

Recognize my own cultural biases	I can recognize my own cultural biases in a given situation and I'm aware not to act out based on my biases
Be aware of within group differences	I'm aware of within-group differences and I would not generalize a specific behavior presented by an individual to the entire cultural community.







- Reflected individually and as a group
- Discussed, to the extent each person was comfortable, how we felt about what we had learned
- How to incorporate into IHP trainings





# Integrative Health Practice Trainings





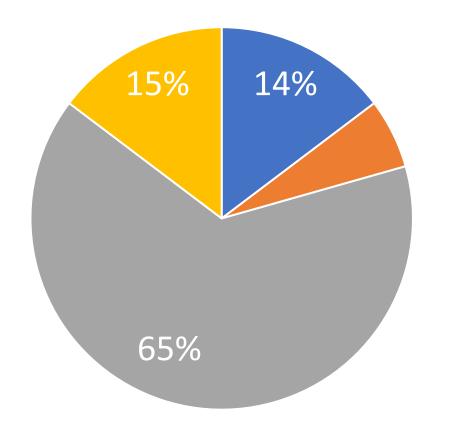
## **Participants**

- 2 Local FQHCs
- 31 participants (3 male, 1 transgender woman, 27 female)
- 17 finished all aspects of the study



# Participant Demographics

#### **Ethnicity**



African/Afro-Caribbean/Black/African American:

Jewish:

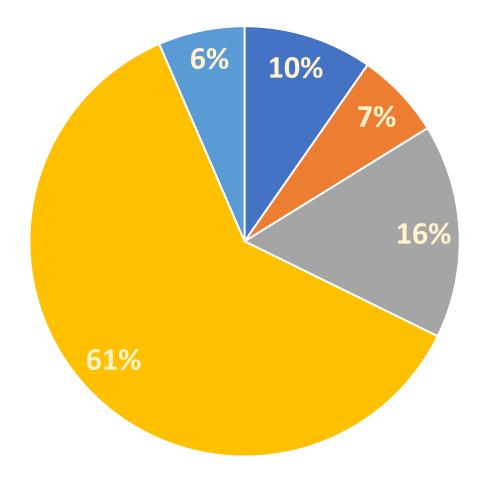
■ Hispanic/Latinx/Chicanx:

White/European American:

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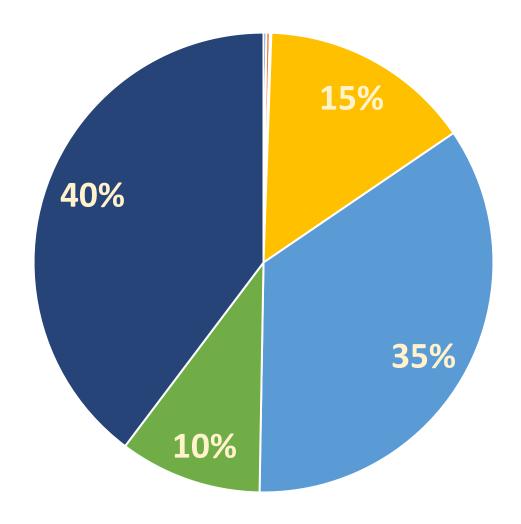
#### Education



- High School:
- Associates:
- Bachelors:
- Masters:
- Doctorate:



# **Primary Job Function**



- Administration:
- Clinical:
- Licensed Practical Nurse:
- Registered Nurse:
- Therapist/Social Worker:
- Advanced Practice Nurse:
- Case Managers:





Pre-Training Assessments (1 to 3 days < training):
6-Measure Brief Resilience Scale (BRS)
10-Measure General Self-Efficacy (GSE) Scale
15-Measure Mindfulness Attention Awareness (MAAS) Scale

8 Training Sessions, 15 minutes each
During One Virtual 2-hour 9am Session

Post-Training Assessments (day of training):
6-Measure Brief Resilience Scale (BRS)
10-Measure General Self-Efficacy (GSE) Scale
15-Measure Mindfulness Attention Awareness (MAAS) Scale



PreTraining
Interviews
+
PostTraining
Qualitative
Survey

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#### Research Team Trained in IHPs & Cultural Sensitivity

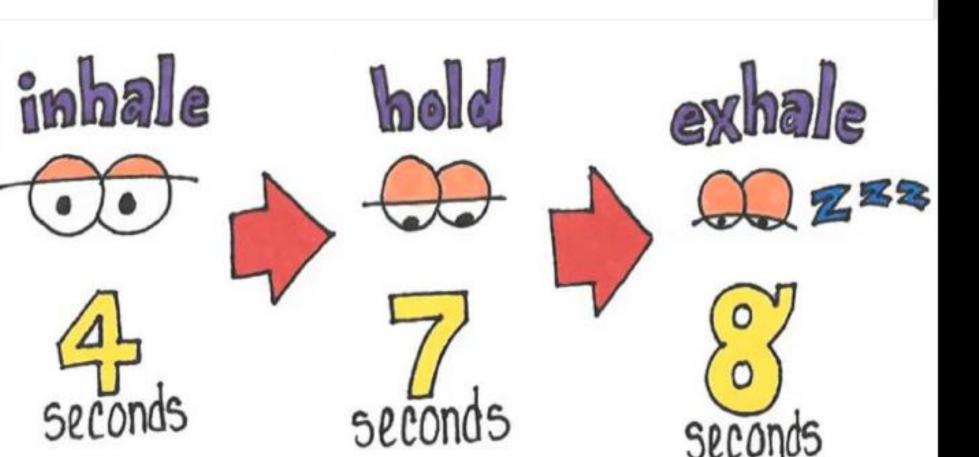
- Breathing
- Meditation
- Gratitude
- Guided Imagery
- Progressive Muscle Relaxation
- Qi Gong
- Acupressure
- Yoga



\*\*Chosen with guidance from participants



## 4 - 7 - 8 Breath















Chat Messages

M 55:52
I feel great!!! Thank you

NM 01:01:50

I feel a bit more energetic

.. 01:02:09

NM 01:02:29

O1:11:56

my anxiety has decrease

O1:20:17

I feel very relaxed now



#### Paired t-Test Results

**Self Efficacy**: .318/(.258/4.12) = 4.74 = means not equal

**MAAS**: .54/(.555/4.12) = .54/.135 = 4 = means are not equal

**Resilience**: 2.06/(1.51/4.12) = 2.06/.367 = 5.61 = means not equal



#### Scale measures with greatest differences

#### **Self-Efficacy Scale:**

- It is easy for me to stick to my aims and accomplish my goals
- I can solve most problems if I invest the necessary effort

#### **Resilience Scale:**

- I have a hard time making it through stressful events
- I tend to take a long time to get over set-backs in my life

#### MAAS Scale:

- I break or spill things because of carelessness, not paying attention or thinking of something else
- It seems I am "running on automatic" without much awareness of what I'm doing
- I find myself doing things without paying attention







Totally = 3; Somewhat = 2; Not at all = 1

Mean	Practice(s)
2.9	Breathing, Gratitude
2.7	Progressive Muscle Relaxation
2.6	Meditation, Yoga
2.5	Acupressure
2.4	Imagery
2.2	QiGong



### Likelihood of Recommending Practice to Patients

1 = Not at all; 2 = Somewhat unlikely; 3 = Neutral; 4 = Likely; 5 = Very Likely

Practice(s)
Progressive Muscle Relaxation
Meditation
Gratitude
Breathing
Acupressure
Yoga
Imagery
QiGong



### Likelihood of Practicing and Recommending

#### **Practicing**

#### Mean Practice(s) Breathing, Gratitude 2.9 2.7 **PMR** 2.6 Meditation 2.6 Yoga 2.5 Acupressure 2.4 **Imagery** 2.2 QiGong

#### Recommending

Mean	Practice(s)
4.9	PMR
4.8	Meditation
4.7	Gratitude
4.6	Breathing
4.5	Acupressure
4.4	Yoga
4.3	Imagery
4.1	QiGong







#### **Implications & Limitations**

- Choice is important: Breathing, Gratitude, PMR, Meditation
- Positive investment for participants/FQHC's
- May have a positive impact on mood and attention
- Small sample size and no control group for validation
- Future studies should use consistent measures and more rigorous statistical tests





### Most significant learnings?

- Ask for continuous feedback
- Acknowledge and encourage the contributions of the group
- Create content driven by the attendees
- Provide incentives for post-training feedback
- Acknowledge the use of Traditional Medicines





#### WHO & TM:

- The World Health Organization reveals that approximately 80% of the global population utilizes at least one form of traditional medicine with herbal medicine being predominant (Appiah et al., 2018).
- Regions such as Sub-Saharan Africa and the Amazonian regions are renowned for their higher utilization of TCM
- TCM can be used to compliment modern treatment services to improve outcomes (James et al., 2018).





### Traditional Medicine: A Practice & A Philosophy

#### The sum total of:

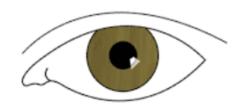
- Knowledge, skills, and practices
- Based on the theories, beliefs, and experiences *indigenous* to each different culture, used in:
  - a. maintenance of health
  - b. prevention of disease
  - c. diagnosis of illness
  - d. treatment of physical and mental illness





## Traditional Medicine: A Way of Seeing the World





#### More than half the population worldwide regularly uses T&CM:

- Unites States, 42%
- Australia, 48%
- France, 49%
- Canada, 70%
- Chile, 71%
- Colombia, 40%
- up to 80% in African countries





### Permaculture

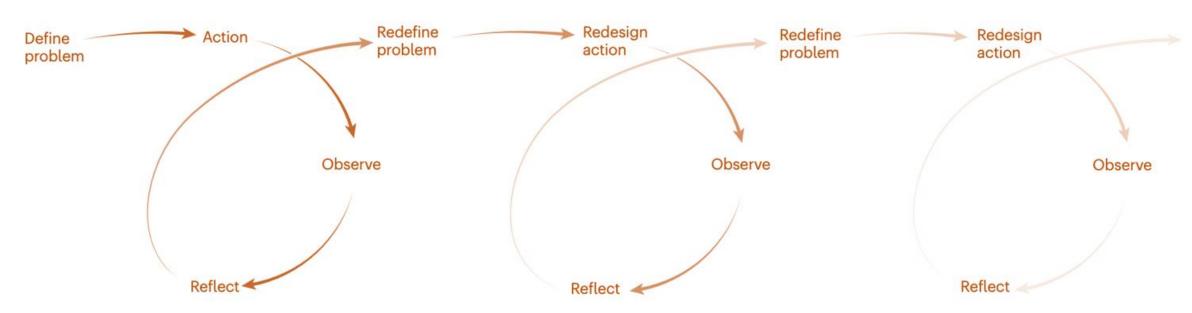
...whole-systems design, based in *indigenous methods*, to create systems that:

- ✓ benefit and teach others
- ✓ regenerate the earth
- ✓ promote equal distribution of resources (Morrow, 2006)



#### Permaculture

...premised on the redesign of unhealthy systems so they naturally regenerate and solve their problems internally.





Principle 4: Apply Self-Regulation & Accept Feedback

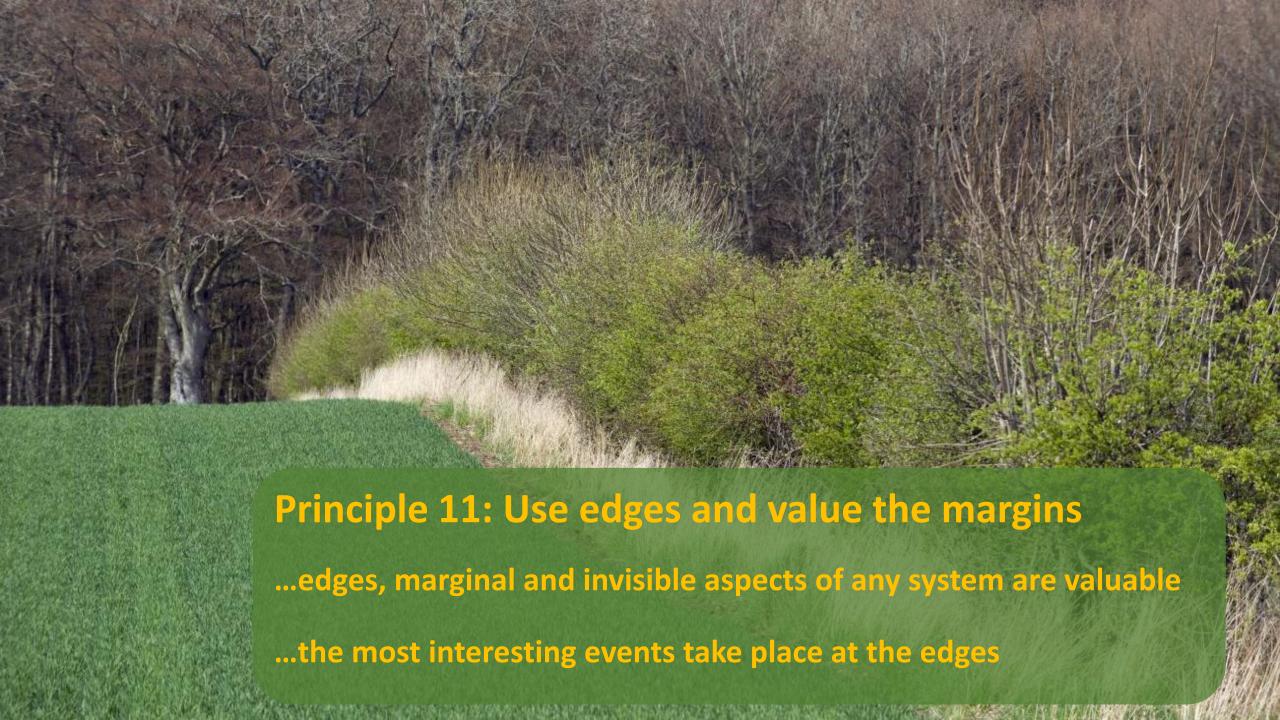
...earth's remarkable homeostasis over millions of years

...natural tendency of the human body to maintain a stable, balanced environment













# What if?



We develop skills to become self-sufficient interdependent responsible producers (of health)?

Holmgren, 2022













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