

Surrey North Delta Primary Care Networks Community Engagement Session III

Overcoming Stigmatic Barriers in the Surrey Primary Care Networks

Wednesday, September 29, 2021

6:00pm – 8:00pm

Via zoom

Report

I. Session Objectives

- a. Develop a common understanding of stigma in its many forms
- b. Consider its impact on access to care and services
- c. Identify opportunities to address stigmatic barriers in service design
- d. Identify strategies for developing a stigma-free culture across the PCN partnership
- e. Determine concrete actions to drive this work within the PCN framework

II. Session Agenda

	AGENDA ITEMS	LEAD
6:00– 6:10pm	Welcome and Introductions Overview of evening and process	PCN SC Cochairs, Jeff
6:10pm – 6:25pm	PCN Service Plan – Planning to date, process steps <i>Ask for endorsement</i>	Rob, Tomas, FH Lead
6:25pm – 6:45pm	Cultural Connections in Care: An overview <i>Recommendations review</i> <i>Literature overview</i>	Jeff
6:45pm – 7:15pm	Breakout session – Cultural roles in the PCN I <i>What role(s) does your organization currently take on for its clients?</i> <i>What support do these roles require?</i> <i>What role(s) need to be augmented?</i>	Group
7:15pm – 7:45pm	Breakout session – Cultural safety in the PCN <i>How can we build cultural safety in the PCN?</i>	Group

	<i>What programs and services does your organization have to support cultural safety?</i> <i>What programs or resources would be needed or valuable to create cultural safety?</i>	
7:45pm – 7:55pm	Next steps – Engagement and further input	Tomas, Rob, Jeff
7:55pm – 8:00pm	Close	PCN SC Cochairs

III. Session Overview

Building on inputs from the initial stage of community engagement and the direction gained from the first engagement session held in April 2021, this session focused on understanding how stigma in its many forms impedes access to quality care (primary and specialized care) and social support, and on considering ways that this can be addressed within the PCN and its services as they develop.

After an update on the PCN Service Plan Development and Submission process and a discussion around a working definition of stigma for the session, participants engaged in a substantive small group dialogue session. Prior to the event, each participant had been asked to think of an example where they have seen the impact of stigma (ie: the judgement and treatment of someone based on circumstances outside of their control, be it race, culture, mental health, substance use, gender identity, age, gender or any other) on receiving support or care. In the breakouts, participants were asked to share personal and professional experiences where stigma was present and to think about one action that could have changed those experiences.

While this laid the foundation for the discussion, the conversations themselves were deep and rich – and pointed to how profoundly stigma impacts not only patients/clients but providers themselves.

IV. Inputs

A. What is stigma – a working definition

After a good group discussion, for the purpose of the session, we agreed to work with the following definition:

Any situation where an individual is treated differently based on circumstance or condition outside of their direct control.

The Goffman definition was referenced, although clearly even it is limiting:

Goffman identified *three main types of stigma*: (1) stigma associated with mental illness; (2) stigma associated with physical deformation; and (3) stigma attached to identification with a particular race, ethnicity, religion, ideology, etc.

B. Stigmatic barriers and responsive actions

Groups of 4-5 shared their personal experiences around feeling or witnessing stigma and began to look for actions that could be taken to address it.

Stigmatic Barriers and Issues

Unseen

In many of the groups, an overarching theme was the feeling and experience of being unseen:

- Lack of respect
- The feeling of the recipient as not being heard
- The feeling of not being present
- They're basically being ignored

Cultural barriers

- Lack of understanding of cultural differences
- Lack of willingness to learn and understand
- Lack of time to listen
- Systemic structures that ignore cultural differences
 - Gender, race and cultural background of providers
 - Type of treatment
 - Privacy issues

Newcomers often face multiple stigmas

- Race
- Language
- Cultural norms
- Coming from a different system
- Resources shift or disappear as their status changes (e.g., loss of interpretation when switching to MSP)

Systemic stigma

- Huge impact on First Nations and Indigenous population
- System does not allow the time that is required to understand cultural differences

Language barriers

- Lack of language support in system
- Not always culturally aware/appropriate

Potential Systemic actions

Build a cultural foundation

- Creating cultural safety
- Creating a safe space
- Setting a tone of respect
- Being present and listening
- Normalizing stigma – mental health, substance use
- Building a culture that promotes education and takes the time to understand people
- Building a culture and an environment of trust

Building connections

- Consolidate both medical community and community partners; and will be good to engage patients
- Build more communications and bridges amongst all stakeholders
- Foundry model of integration
- Ask, “what is going on, why is this happening?” and connect with appropriate resources
- Take the time to get to know the person
- Provide psycho-social assessment

Cultural supports for patients

- Culturally appropriate interpretation (cultural guides)
- Concept shift from interpreters to cultural navigators in a more holistic way
- Interpretation and cultural navigation program coverage for any medical/clinical appointment

Training and Education for Providers across the PCN

- Trauma-informed care – provider education around a trauma-informed approach
- Cultural competency
- Education for the providers around listening
- Indigenous cultural sensitivity and safety training for FPs and clinicians in the PCN
 - other cultures and ethnicities

Significant system redesign

- Barrier-free access
- Appropriate FP compensation (time)
- Foundations for a larger transformation

- Who can mediate or can talk to the family

V. Equip Health Care

Colleen Varcoe of Equip Health Care provided an overview of their research and work around health equity, with a focus in the impact of stigma. She outlined the toolbox of resources they have developed and pointed to the soon to be published revised and updated resources.

Information on Equip Health Care and the toolkit can be found here

<https://equiphealthcare.ca/resources/toolkit/>

VI. Next steps

- A proposed next step is to reconvene around the identified potential actions, using the Equip Toolkit as a point of departure for developing a PCN strategy and action plan. Participants in this session (and others who are interest) will be surveyed to understand their interest and willingness to participate and gain input on the focus and design of these sessions.
- Organize a follow-up session with more community organizations, physicians, FH and FNHA partners, and patients to get a deeper understanding of the issues.

***** END OF MEETING *****