



Statement on cultural competence

Background Paper

1. Introduction

The populations in Australia and New Zealand are multicultural, representing people from many different backgrounds and cultures. Health inequities have been identified between people from different cultures, and the ANZCA statement on cultural competency seeks to challenge clinicians to address aspects of the delivery of health care that contribute to this inequity. As such, these guidelines endeavour to raise awareness of cultural issues in the healthcare setting and to assist clinicians deliver culturally competent care.

2. Review of issues

2.1 Broad range of cultures

Cultural competence requires that clinicians are able to deliver high standards of care to all patients irrespective of their cultural background or beliefs. It includes the recognition that communication may need to extend beyond the patient to include families and networks.

2.2 Indigenous Peoples

While the statement addresses all cultures there are issues specific to indigenous cultures. The College aligns with the UN Declaration of Indigenous Peoples and acknowledges indigenous rights. The impact of colonisation on the indigenous peoples is recognised and this document promotes the need for awareness of this matter.

2.3 Clinician's culture

Clinicians come from varied backgrounds, which may influence their interaction with other cultures. This awareness is central to ensuring that relationships with patients embrace the differences in a sensitive way.

3. Principles

The statement lists the principles that should be applied to all cross-cultural interactions and that they should be considered in the context of other guidelines and frameworks. The following principles have been considered in some detail:

3.1 Respect and understanding

This is based on trust and the document provides insight into the various influences that may be active within communities.

3.2 Culturally appropriate communication

This identifies barriers to communication and simple measures to address these.

3.3 Patient-centred practice

This focuses on the individual needs and avoiding generalisations based on any cultural groups. It also addresses the balance between cultural safety and clinical safety.

3.4 Partnership

This clarifies the relationship between doctors and patients and the need to ensure understanding and address unexpressed concerns. It also highlights the work environment, which consists of a team including colleagues, other health practitioners, and staff. Cultural competency must extend to include the working environment.

It must be emphasised that cultural competence does not demand forsaking quality of patient care for apparent conflicts that may be perceived. On the contrary, it should contribute to the better understanding by patients, irrespective of their cultural backgrounds, and enhance their acceptance of clinical advice, which should be presented in the context of their individual needs.

4. Summary

With increasing exposure to patients from varying cultural backgrounds clinicians can improve the delivery of health care through an awareness of the differing needs of their patients.

The accompanying statement defines cultural competence, identifies the elements contributing to competence, and communicates the expected standards.

Process of review

The document development group comprised:

Professor Ted Shipton, Dean Faculty of Pain Medicine, Co-chair (NZ)
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Dr Suzanne Pitama, Associate Dean Māori, University of Otago (NZ)
Helen Maxwell-Wright, Current consumer representative (Vic)

Following approval by Council, consultation with a range of ANZCA stakeholders during Dec 2015-January 2016 was undertaken.

Related ANZCA documents

The ANZCA publication *Supporting Anaesthetists' Professionalism and Performance – A guide for clinicians* is another resource that provides examples of good and poor behaviour within all ANZCA Roles including matters of cultural competence. From: www.anzca.edu.au/resources/professional-documents Accessed 11 December 2015.

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References

1. Royal Australasian College of Physicians. An introduction to cultural competence. . 2004. <http://www.racp.edu.au/docs/default-source/advocacy-library/an-introduction-to-cultural-competency.pdf> Accessed on October 28, 2015.

2. United Nations Educational Scientific and Cultural Organization. Mexico City Declaration on Cultural Policies. 1982.
http://portal.unesco.org/culture/en/files/12762/11295421661mexico_en.pdf/mexico_en.pdf Accessed on October 28, 2015.
3. Medical Council of New Zealand. Statement on cultural competence. August 2006.
<https://www.mcnz.org.nz/assets/News-and-Publications/Statements/Statement-on-cultural-competence.pdf> Accessed on October 28, 2015.
4. Richardson, Ivor and Cook, Len and Durie, Mason and Ballin, Ann and Bruce, Marlon and Noonan, Rosslyn, Preface: The April Report: Report of the Royal Commission on Social Policy (1988). Royal Commission on Social Policy, Wellington, 1988; Victoria University of Wellington Legal Research Paper Series Richardson Paper No. 25.
5. Secretariat of National Aboriginal and Islander Child Care Working and Walking Together: Supporting Family Relationship Services to Work with Aboriginal and Torres Strait Islander Families and Organisations. March 2010. <http://www.snaicc.org.au/uploads/rsfil/02497.pdf> Accessed on October 28, 2015.

Further reading

1. Australian Medical Council (2010) Good Medical Practice: a code of conduct for doctors in Australia. Accessible at: <http://www.amc.org.au/index.php/about/good-medical-practice>
2. Australian Charter of Healthcare Rights (2008). Accessible at: <http://www.health.gov.au/internet/safety/publishing.nsf/content/PriorityProgram-01>
3. The Code of Health and Disability Services Consumers' Rights 1996 (New Zealand). Accessible at: <http://www.hdc.org.nz/the-act--code/the-code-of-rights>
4. National Health and Medical Research Council (Australia): Cultural Competency in Health: A guide for policy, partnerships and participation (2005). Accessible at: http://www.nhmrc.gov.au/files_nhmrc/publications/attachments/hp19.pdf
5. Australian Health Ministers' Advisory Council (2005). The Cultural Respect Framework for Aboriginal and Torres Strait Islander Health. Accessible at: http://www.health.vic.gov.au/_data/assets/pdf_file/0019/270154/cultural-respect-framework.pdf
6. Medical Council of New Zealand: Statement on Cultural Competence (2006). Accessible at: <http://www.mcnz.org.nz/portals/0/guidance/cultural%20competence.pdf>
7. Medical Council of New Zealand: Best Health Outcomes for Māori: Practice implications. Accessible at: <http://www.mcnz.org.nz/Default.aspx?tabid=269>
8. Medical Council of New Zealand: Best Health Outcomes for Pacific Peoples: Practice implications. Accessible at: <http://www.mcnz.org.nz/portals/0/publications/Best%20health%20outcomes%20for%20Pacific%20Peoples.pdf>

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