Intercultural Toolkit

for Community-Based Seniors' Services (CBSS) Organizations

in British Columbia

July, 2020

HealthyAging

by United Way   At home. In community.

Introduction

This Toolkit provides a step-by-step approach that community organizations can use to enhance the level of cultural competency and relevancy of their organization and/or their individual programs. It was developed with a focus on community-based seniors serving organizations, or CBSS (Community Based Seniors' Services), in British Columbia, and highlights resources and information relevant to the local population. Key considerations for agencies working with Indigenous populations are also included under '*Indigenous Lens*' tables throughout the document.

The Toolkit includes two parts:

1. the Toolkit Checklist (see attached '*Intercultural Toolkit Checklist*'), which can be filled out by organizations as they work through the process, and

2. this document, which provides details and guidance for each step.

The Table of Contents identifies each step in the process and as such can be used for quick reference alongside the attached Checklist. Organizations may choose to prioritize certain sections of the Toolkit based on the relevancy to their work and their existing level of cultural competence. It is organized into two phases: 1. Reflecting and Assessing, and 2. Planning and Implementing – each containing several steps.

There are many definitions of *cultural competency* and *cultural relevancy*: an organization can be considered culturally competent when it is able to bring many different behaviors, attitudes, beliefs, and policies into its setting and work effectively with cross-cultural audiences.[1] It can be considered culturally relevant if its work (i.e., its programming, advocacy, and resources) and approaches to complete this work are relevant to multicultural audiences.[2] The term 'competency' is used throughout this document, however, the Toolkit equally addresses both terms.

The steps outlined in this Toolkit were adapted from the Community Tool Box's '*Enhancing Cultural Competence*'[3] and '*Adapting Community Interventions for Different Cultures and Communities*'[4] Toolkits. Community Tool Box is an evidence-informed public service resource for community health and development that was created and is managed by the University of Kansas Center for Community Health and Development.[5] Many adaptations and additions have been made using input from research conducted on culturally competent programming in British Columba and Canada. All other resources used to inform the toolkit are individually referenced throughout.

Table of Contents / Step to Take

Phase 1: Reflecting and Assessing

1. Define your mission for enhancing cultural competence.

This first step in enhancing your organization's cultural competency is to identify goals, values, vision statements, policies and procedures, and a mission for this purpose. The Government of Canada suggests that organizations working with immigrant and refugee seniors have policies and procedures in place with principles, rationales, and values for culturally competent service delivery, and for handling inappropriate language or behaviors related to discrimination and racism.[6]

If your organization already has a mission statement containing a diversity and inclusion component, it may highlight existing goals, values, and visions of the organization. Vision statements are the qualities your program or organization will have when it becomes more culturally competent; for example, that "all members of the program feel like they are understood and accepted." They should be reflected in concrete organizational policies and procedures. As part of enhancing cultural competency, they should also be accompanied with specific actions to attain each one, considering each level relevant to your work – individual, program, organization, and community.[3] If your program or organization has no mission statement or official stance on inclusion or diversity, consider developing one.

LOCAL CONTEXT

The mission statement of the United Way of the Lower Mainland regarding Diversity and Inclusion:

United Way of the Lower Mainland strives to be a model of diversity and inclusion. It is our goal to attract and develop a diverse and inclusive Board of Directors, staff, and volunteers who represent the many faces, cultures, and walks of life in our community. We believe that bringing diverse individuals together and valuing their unique attributes, characteristics, and perspectives allows us to collectively and more effectively address the issues that face our communities.[7]

2. Conduct a cultural audit / assessment of your program or organization and the community.

A cultural audit or assessment is an important step in examining the makeup of your community and in identifying what level of knowledge and biases currently exist, which is a key component of cultural competency.

a. Identify the different groups in your community.

Many different cultures, faiths, and other groups with shared experiences are present in communities across B.C. (see 'Local context' below). Organizations should identify the various groups that are present in their program or organization and in their community as part of a cultural assessment. Include groups that differ in nationality, ethnicity, native language, race, gender, and faith or spiritual beliefs. Also consider groups that differ in gender identity and sexual orientation, as LGBTQ+ individuals often have unique cultural identities. Other factors that you may want to consider, depending on your visions and mission for inclusivity and cultural competency, include: occupational status, educational status, economic status or social class, physical attributes (i.e., those with disabilities), relationship statuses (including those living independently), age group, and geographical/regional residency.

MORE INFO

Individuals may share similar cultural characteristics, but this does not mean they are a homogenous group. There is diversity within diversity in communities in B.C. as ethnic and cultural groups differ in life experiences, interests, personal views, and many other factors.

Understanding aspects of a culture does not equate to understanding how that culture is represented by all immigrants and newcomers in Canada. Religious ideas, rituals, symbols, and institutions are often re-created by newcomers in a uniquely Canadian way.[8] Immigrants often redefine some of their beliefs, values, and practices in response to the Canadian culture,[8] and in doing so create unique representations of a culture.

LOCAL CONTEXT

B.C. has a culturally, religiously, and linguistically diverse population. Consider the following:

- There are approximately 200,000 First Nations, Inuit, and Métis Peoples in B.C.[9] and traditional territories of more than 200 distinct Nations, each with their own unique cultures, traditions, and history.[9] See 'Indigenous Lens' below.

- Almost 30% of British Columbians immigrated to B.C. from more than 200 countries or regions – approximately 40,000 new immigrants arrive every year.[9]

- About 1/3 of the B.C. residents' first language is not English or French: languages commonly spoken at home include: Cantonese, Mandarin, Punjabi, German,Tagalog, Korean, Spanish, and Farsi.[9]

- About 6.7% of persons aged 65 and over in Canada openly identify as LGBTQ+. Of the 365,255 people aged 65 and over within the Fraser Health Authority and the Vancouver Coastal Health Authority regions, that would be approximately 24,471 LGBTQ+ seniors.[10]

- In 2011, there were approximately 22,655 Sikhs, 6,100 Muslims, 5,900 Jehovah Witnesses, 3,800 Jews, 4,500 Hindus, 5,500 Mennonites, and 12,000 Buddhists aged 65 years and over in British Columbia[11] (these numbers have very likely increased significantly since 2011).

INDIGENOUS LENS

There is also diversity among Indigenous people in B.C. and across Canada.[12] There are seven distinct First Nations language families, 34 languages, and over 93 dialects within these languages in B.C.[9]

Some Indigenous people may not visibly appear Indigenous, some may have an English name and a traditional name, and some may have been disconnected from their traditional beliefs altogether.[12]

b. Self-reflect.

Self-reflection, which provides the basis for cultural competence,[13] is the active and conscious process of inquiry into one's thoughts, feelings, and actions, leading to increased self-awareness.[13] Self-reflection and self-awareness allows you and your organization to become mindful of the misinformation, biases, stereotypes, personal beliefs, and values that you may have that influence your interaction with others, and start to remove the barriers that prevent mutual respect and understanding.[14]

As part of your cultural assessment, identify some of the current stereotypes that you have and that are present in your organization, program, and the community about the people from each of the cultural or faith groups that were identified – including positive, negative (or challenging), and neutral ones: e.g., "I subscribe to the stereotype that (cultural group) are passive, quiet and unengaging, but also friendly". Also consider how these stereotypes might affect your communication and ability to work together.

INDIGENOUS LENS

There are many myths and false stereotypes about Indigenous people. Indigenous stories and histories in the mainstream media have normally been told from a non-Indigenous view, and have traditionally focused on problems or unrest, leading to negative stereotypes.[15]

One example of a myth about Indigenous peoples is that their cultures were primitive, which is false. Indigenous people have complex cultures and systems of governance, commerce and trade, and agriculture, and these cultures and traditions are thriving today.[15]

c. Acknowledge current relationships.

Complex relationships likely exist between the cultural groups within your community, including past or current conflicts or struggles. These may be a result of historical events. As part of your cultural assessment, identify the current relationships within your program or organization and within the community, including positive ones (i.e., existing strong relationships between certain groups). Consider previous efforts that have been made to strengthen alliances among groups, shared values and concerns among different cultural groups, and groups that have previously effectively worked together in the community. Also determine if there are particular sub-groups excluded from your program or community and if so, why.

INDIGENOUS LENS

There are important historical aspects to the relationship between Indigenous and non-Indigenous peoples to consider:

- Colonization and government policies (e.g., forced assimilation and relocation, residential school, forced adoptions and foster care) have had and continue to have a damaging impact on Indigenous people.[12] Indigenous people continue to experience racism and discrimination in British Columbia and across Canada.[16] In the healthcare system specifically, systemic racism is so pervasive that it often prevents Indigenous peoples from seeking and receiving equitable health care, and results in poor health outcomes.[16]

- The Government of B.C. currently acknowledges the importance of reconciliation as an "ongoing process through which Indigenous peoples and the Crown work cooperatively to establish and maintain a mutually respectful framework for living together, with a view to fostering strong, healthy, and sustainable Indigenous nations within a strong Canada".[17pp.2]

d. Assess your existing level of cultural competency.

There are different levels of cultural competency (see '*More Info*' on next page). As part of your cultural assessment, consider the level of cultural competency of yourself and your organization or program, including knowledge, attitudes, and behaviors that relate to cultural competency. Identify existing skills for working effectively with people from different cultures and faiths, knowledge of the characteristics, experiences, beliefs, values, and norms of different cultural groups of interest, and your existing level of respect for cultural factors without assumptions of superiority or inferiority.

If you are lacking in cultural knowledge, awareness, sensitivity and/or cultural competence, consider participating in cultural competency training, for yourself or your staff. The Government of Canada suggests that organizations working with immigrant and refugee seniors should support ongoing professional development and in-service training for awareness, knowledge, and skills in cultural competencies.[6]

See Appendix A for a list of opportunities for cultural competency training in B.C.

MORE INFO

Cultural competency is made up of four levels:[1]

- "Cultural knowledge" – you (or your organization) know about some cultural characteristics, history, values, beliefs, and behaviors of another ethnic or cultural group.

- "Cultural awareness" – you (or your organization) are open to the idea of changing cultural attitudes among other groups.

- "Cultural sensitivity" – you (or your organization) know that differences exist between cultures but do not assign values to the differences (such as inferior or superior). This stage is often where conflicts can arise, especially when a custom or belief is perceived to be challenged.

- "Cultural competence" – you (or your organization) have conceptualized the previous steps and can effectively put them into action.

e. Do some research.

As part of your assessment, conduct some research to get a better understanding of the different groups in your community and their cultures.[4] Use the list from Step 2a as guidance, however, expect to identify gaps; consider reviewing Statistics Canada census data to identify various demographic factors of the community. Learn about some of the cultural beliefs, political concerns, gender norms, health concerns, and other factors of the groups that you will engage with (it is important to do this research before moving onto engagement in Phase 2).[4] The Government of Canada also suggests that organizations working with immigrant and refugee seniors conduct reviews of current and emergent demographic trends for their geographic area.[6]

Use this step to understand different cultural or country profiles (i.e., characteristics of different cultures) and potential differences in cultural factors that may affect the way you engage with different groups and the way your program is ultimately run. Researching cultural factors about certain groups may help identify differences that will need to be considered when determining interventions or engagement strategies. Nonetheless, it is important to remember that individuals within cultural groups are not homogenous and that they differ in many ways.

See Appendix B for useful resources and research on cultural profile and specific cultural factors of different groups.

Phase 2: Planning and Implementing

3. Plan for culturally competent programming or adjustments

The goals and specific activities to enhance cultural competency are different for each organization depending on where they are and who makes up their community. In many cases, a program or intervention is already in place and the objective is to make adaptations. Some organizations may worry that adaptations to an evidence-informed program would result in deviations from fidelity. This may be a valid concern, however, research suggests that cultural adaptations are justified when there is ineffective client engagement and poor intervention effectiveness with a particular subcultural group.[18] Well-adapted interventions can increase the relevance of your organization's actions and increase the involvement and participation of members of other cultural groups.[4] To mitigate potential deviations, consider how to reconcile the mismatches between the intervention and the participants' lived experiences without altering the core components of the intervention or the features that are responsible for the intervention's effectiveness.[19]

Before determining what your goals and specific activities will be (step 4), consider the following steps.

a. Engage with community members from diverse groups.

Engaging with culturally diverse groups (or the specific groups that you are trying to target) can provide you with insight into their culture, religion, and aspirations, and can start or strengthen a relationship with them. The Government of Canada suggests that organizations working with immigrant and refugee seniors have meaningful participation of this population in planning, delivery, and evaluation of services.[6] This includes developing community outreach initiatives for those with limited English and/or French proficiency, and/or populations with literacy limitations.[6]

One effective way to socially connect immigrant and refugee seniors is to host 'Ideas Exchange events' with this population and partner organizations from many different sectors.[6] These events can be conferences, discussion groups, or workshops in which the participants create the agenda and focus on developing solutions together, and involving immigrant and refugee seniors in decision-making processes.[6]

When engaging different groups within a community, consider the following:

- Reach out to community champions and respected leaders or peers in community networks to learn directly from them about their culture and about appropriate interventions.[4] These can be known experts of that culture, key members of the group who are knowledgeable, business owners, community service workers, or ministers and other religious leaders. Ask them about the wants and needs of the community.

- Prioritize building trust in the engagement process, which can take time.[4] Ethnic minority older adults may have a lack of trust in formal systems of health or social services due to historical maltreatment, perceived racism and discrimination, or for personal reasons such as negative experiences with previous interactions.[20] Respecting cultural conventions, such as how to address someone, and non-verbal communication including eye contact and gestures, are important for building trust with immigrant and refugee older adults.[20]

- If hosting an engagement meeting or event, consider cultural norms (see Indigenous Lens below).

- Propose some of your intervention ideas to the key community members you have identified. Ask for feedback and take that feedback into consideration. Look for key members who are interested in working together with you to make the intervention happen.[4]

INDIGENOUS LENS

Engagement

- When seeking to engage with Indigenous groups, remember that spiritual practices are part of Indigenous culture and business relationships, so make time and space for these.[21]

- Organizations should aim to develop meaningful, trusting, ongoing and long-term relationships with Indigenous groups.[9] As mentioned, building trusting relationships can take time.

- Be patient and understanding of different views on punctuality – Indigenous leaders and communities may take longer to reach decisions or may not be able to attend pre-scheduled meetings owing to other obligations.[22]

- A key intention in engaging Indigenous partners should be to acknowledge and support their right to self-determination. This is reflected in their right to determine the degree to which they are involved: they may choose to attend all or some meetings, or participate only as observers in initial stages, and change throughout.[22]

Events

- It is a recognized protocol in Canada to acknowledge the traditional host nation, its people, and its land during large group gatherings (with or without Aboriginal peoples present).[15]

- You can determine what territory you are on by speaking to your local GCPE (Government Communications & Public Engagement) Communications Shop[23] or looking online at websites such as https://www.whose.land/en/.

- Vancouver is on the traditional territories of three First Nations: Musqueam, Squamish, and Tsleil-Waututh, collectively called Coast Salish.[15]

- If an Indigenous community member is providing a welcome or blessing, reach out to them well in advance. It is also appropriate practice to have someone designated to meet them, escort them to the venue, and provide an honorarium or gift before the event.[23]

- Consider using a round table instead of rectangle ones: circles are more inclusive in Indigenous cultures, as they show no hierarchy and every gets a chance to speak.[23]

b. Engage with other organizations in the community.

Partnerships with external agencies, institutions, and other groups in a community have been shown to be an essential part of expanding the influence and ability of a centre to offer programs and services to diverse senior populations.[24] Encouraging new multi-sector partnerships to create community interventions is also considered a key action for reducing social isolation for immigrant and refugee seniors.[6] Similarly, the Government of Canada suggests that organizations working with immigrant and refugee seniors have methods in place to identify and acquire new knowledge and practice in service delivery areas.[6]

Partnering with immigrant-serving agencies is particularly important as these agencies play a key role in promoting health and social connection among immigrant older adults.[25] These agencies are seen as more trustworthy to this population.[25] Consider also partnering with the public library in your area; public libraries can serve as key place to visit for newcomers and they play a key role in facilitating access to knowledge.[26] Because of the services they provide (i.e., access to information, knowledge, culture, and leisure), libraries are uniquely positioned to foster social inclusion and enhance the ability for newcomers to integrate into a community.[26]

Initiate contact or reconnect with other CBSS, community, and intercultural/interfaith organizations in your area. This will contribute to a Community of Practice where organizations can learn from one another and share resources, knowledge, and best practices to build more inclusive and culturally competent environments. It will also contribute to your program's outreach initiatives; community partners often engage in word-of-mouth promotion by informing community members about their partners' programs and encouraging them to participate.[27]

See Appendix C for a list of some multicultural and/or immigrant-serving and Indigenous community organizations in B.C that CBSS agencies could partner with.

c. Identify existing strengths and assets.

The unique strengths and assets of communities can be harnessed to engage with diverse cultural and faith groups. The Government of Canada suggests that action to reduce social isolation for immigrant and refugee seniors includes taking advantage of existing expertise and resources across various sectors, including families, businesses, communities, and governments.[6] Consider the strengths and assets that different cultural groups in your area bring to the table and include these in your strategic planning and program development or adjustments. Skills related to visual arts, music, and craftsmanship can be considered assets,[3] as well as the strengths in existing relationships that were identified in Step 2c. For example, B.C. is made up of many rural and remote communities. Rural communities typically have unique strengths that are grounded in their level of community solidarity and close-knit relationships.[20] This level of closeness can be an asset, for example, in snowballing or word-of-mouth outreach activities. Faith communities are also key resources for engaging diverse communities. Faith community leaders have unique competencies that can add value to service provision in the community:[28] they are embedded in the local community and directly engaged with a wide range of people; they can have an important role in promoting

social cohesion; they have a trusted position of guidance and reassurance; and they can reach vulnerable or hard-to-reach groups whom other service providers cannot.[28]

d. Increase the cultural diversity of staff and volunteers.

There are many benefits to having culturally and linguistically diverse staff and volunteers. In businesses, culturally diverse workforces improve the bottom line, the quality of teams and the workplace, and improve the overall creativity and ultimate strength of the organization.[29] Bi-cultural workers may play an essential role in establishing trust and maximizing ethnocultural alignment with immigrant and refugee older adults.[20] In general, senior centers with more racially and ethnically diverse staff are more likely to have programs that reflect diversity.[24] Contrarily, a lack of diversity in staffing often creates a barrier to participation for immigrant seniors and/or seniors of colour at senior centres.[24] The Government of Canada suggests that organizations working with immigrant and refugee seniors have recruitment and retention practices that ensure a culturally and linguistically diverse workforce and/or experience in working with this population.[6] Culturally competent organizations should have representation of cultural and ethnic diversity in positions of leadership, including board members, executives, and management.[30] Racial prejudice (unfavorable or discriminatory attitudes or beliefs towards others primarily based on skin color or ethnicity) can be reduced when employees or staff are more diverse, while racism (the institutional and legal support of racial prejudice) can be reduced when power and leadership are shared by such diverse members.[30]

During the hiring process, look for those with experience working and living in diverse cultural groups, and those who are bilingual. This should be considered for both younger and older adults, as there are many culturally diverse retired seniors who are still active and interested in volunteering in their communities.

INDIGENOUS LENS

- In the 2017/18 Better At Home Aboriginal Programs (BHAP) Evaluation, it was found that having volunteers and/or contractors from the Coast Salish volunteering in that area allowed for greater understanding of the Elders and helped the family members to feel safe. Hiring contractors from a First Nation community contributes to job experience, which is often in high demand, training and employment, and also ensures that services are delivered in ways that enhance the cultural norms of the community.[31]

4. Implement new interventions or changes

a. Consider important cultural factors.

There are a variety of cultural factors that affect the way people interact with others, the activities they are interested in or deem appropriate, and the types of outreach they will respond to. Consider unique cultural factors of different groups that you identified in your research and engagement processes, and integrate these findings into your program interventions, adaptations, and outreach. Some of these may include, but are not limited to:

1. **Gender:** Traditional gender norms may impact the accessibility of health promotion services to ethnic minority older adults. Older women from some countries may be used to relying on men in societies, and therefore may have lower levels of autonomy and self-efficacy.[20] They may also rely on traditional clothing for reasons of modesty, and therefore may not participate in activities that restrict this ability (e.g., group exercise activities).[20]

   i Consider the feasibility of having same-gender service providers and certain gender-segregated program interventions (particularly those that involve situations that may be threatening to one's modesty).[20]

2. **Language:** The accessibility of health promotion resources is often restricted by a lack of adequate translation services and limited availability of materials (such as pamphlets and brochures) in minority languages.[20] Linguistic barriers may also contribute to false stereotypes about personal characteristics, such as the perception that ethnic minority older adults are passive and distant.[20] Resources, content, and outreach communication should be both translated and culturally adapted (consider demographics, places of origin, and the messaging that suits the needs of the community).[14] The Government of Canada suggests that organizations working with immigrant and refugee seniors have policies and allocated resources for the provision of translation and interpretation services, and communication in alternative formats.[6]

   i Hire a translation company (e.g., MOSAIC) to translate some of your program materials, such as pamphlets and toolkits. Some activities may also need interpretation, which is not the same as translation. Interpretation will convey the meaning of a spoken language while preserving the semantic and lexical values of the source (original) language and respecting the syntactic, lexical, and semantic values of the target (end) language.[32] MOSIAC also provides interpretation services.

3. **Family structure:** Ethnic minority older adults in Canada often have cultural ideals of a strong familial structure: seniors can view the solidarity of the family as a group as more important than the interests of the individual members (i.e., themselves).[20] These seniors, particularly women, may downplay their own needs relative to their familial responsibilities,[20] and as such may not consider participating in community activities or programs.

ℹ️ Harness the importance of family members, if any, to play a role in identifying and promoting your program to the senior and encouraging their participation.

4. **Life experiences and personal characteristics:** Personal characteristics of hardiness and independence may affect ethnic minority older adults in identifying and seeking help.[20] For immigrant and refugee older women, life experiences pre-migration, such as gender segregation and patriarchal protection, may prevent them from participating in any health promotion programs that do not align with traditional and cultural norms.[20]

ℹ️ Adopt person-centered, strength-based approaches. Health promotion interventions are most effective when they are person-centred and tailored to meet the needs of cultural/linguistic groups.[24] Person-centered approaches that build on individual strengths and interests are also most likely to be successful in building resilience.[5] Resilience allows individuals to better deal with challenging life experiences.[24] Essential to a person-centered approached is the process of learning about each individual's background, personal history, preferences, and needs, and incorporating this knowledge into the design of your activities.[33]

5. **Deep vs surface culture:** Surface culture refers to elements, such as language, food, and customs. Deep culture refers to aspects of culture such as thought patterns, value systems, and norms.[18] Sometimes adaptations are needed for one or the other, or both.[18] For example, resources and presentations may be translated to another   language (surface) but the story lines and represented values and thought patterns (deep) remain foreign to users.[18]

ℹ️ Make surface culture adaptations to allow participants to identify with the messages and interventions and enhance engagement.[18] Changing the language, photographs, and the scenarios in an intervention is often enough to make it more culturally relevant.[18]

ℹ️ Make deep culture adaptations when surface adaptations are insufficient to address the larger cultural norms that are impacting the target groups' behaviors or decision-making process.[18]

MORE INFO

Important cultural factors to consider differ among groups. Using the resources listed in **Appendix B** for researching cultural profiles, the following examples were found.

- In Syrian cultures, family members feel a duty to take care of each other. Family reputation is as important as individual freedom and so Syrians often make sure not to do anything that negatively affects other family members. The honour of the family can be ruined by improper behavior by women or the failure of men to live up to the code of honesty and generosity.[34]

  ⓘ You may need to consider the entire family's needs and beliefs, even if you are targeting only one person (i.e., the senior).

- In Korean and Vietnamese populations, caregiving is often assumed as a relational duty (i.e., as a family member) and so defining caregiving using western labels such as 'caregiver' and 'burden' cause cultural shame for these populations. In the Korean culture, the term caregiver can have a connotation of 'looking down'.[35]

  ⓘ Be careful when labeling Korean and Vietnamese clients as caregivers.[35]

  ⓘ Allow individuals to define their roles.[35]

- Japanese populations tend to avoid confrontation with others, and oftewn do not explicitly express negative responses. They may say they will consider something just to be polite.[36]

  ⓘ Pay close attention to subtle remarks or slightly negative phrases, as these may have a stronger meaning than it would appear.[36]

INDIGENOUS LENS

Cultural practices for health and wellness: Indigenous peoples have a complex system of cultural practices that provide health and wellness for themselves, the land, and the environment.[12] These practices should be respected and honoured, especially in settings that focus on Indigenous peoples' health and wellness.[12] An Indigenous holistic model of wellness includes respectful and reciprocal relationships with families, communities, the land, environment, ancestors, and future generations.[12] Within the healthcare system, research has shown that where cultural safety strategies have been implemented, health outcomes have improved for Aboriginal clients.[12]

INDIGENOUS LENS CONTINUED...

Food: Traditional foods have meaning in Indigenous cultures and are linked to the environment, family, community, ancestors, and youth. The receiving and sharing of foods allow for the practice of important cultural values such as cooperation, reciprocity, respect, and relationships. For many communities, access to traditional foods is part of their everyday life.[12]

Communication / Oral tradition: Indigenous cultures have traditionally relied on oral transmission of knowledge to sustain their cultures, political systems, health, education, and identities. True understanding of important cultural knowledge may come from knowledge conveyed through oral transmission.[12] Indigenous people may respond to questions with long stories. Be patient, as these stories can contain valuable information and indicate their feelings.[12] For many Indigenous cultures, silence is not awkward – it is a part of communicating. Do not feel the need to fill gaps in conversation with small talk. Allow pauses to occur.[12]

Elders: Each community has its own definition of who an Elder is. They are often not simply an older or elderly person.[15] An Elder is usually someone who is very knowledgeable about the history, values, and teachings of his or her culture.[15] They are valuable role models and teachers to all members of the community for their knowledge, wisdom, and behaviours.[15]

Community programming: There is a holistic perspective of elder care in Indigenous cultures, which means that medical and non-medical supports in these communities are often combined.[31] Interactions are relationship-based, meaning that when working with an Elder, one visit may entail a variety of activities including cooking and addressing medical needs.[31]

- In the 2017/18 evaluation of Better at Home Aboriginal Programs,[31] it was determined that the idea of helping Elders become or remain independent is not sought by First Nations communities. Instead, it is preferred to encourage and support interdependence. Program language should reflect a foundation in connectivity, which will help to restore and honour traditional ways of living intergenerationally and with a high degree of interdependence. Culture should be integrated into all services and First Nations peoples should be recognized as self-determining individuals, families, and communities.

- Research on cultural safety and humility service provision with Indigenous peoples suggests that cultural humility involves providers engaging in a two-way conversation where both they and the client work together as partners in care.[16] Relationships should be based on mutual respect, common understanding, lateral kindness, and reciprocal accountability.[16]

b. Consider universal tips for inclusivity

Although all programs are unique, and specific activities must be tailored to one's community, there are some actions that can and should be implemented across all community programming. This includes but is not limited to:

1. **Include important religious holidays in your program's calendar**. Acknowledge these days in your activities, including in communication such as emails. Make time and accommodate space for prayer, particularly on important days.

   - Refer to 2020 Interfaith Calender: http://www.interfaith-calendar.org/2020.htm or https://equity.ubc.ca/resources/days-of-significance-calendar/, 2021 Interfaith Calendar: http://www.interfaith-calendar.org/2021.htm, and the following years: http://www.interfaith-calendar.org/

2. **Encourage all seniors and newcomers, such as immigrants and refugees, to learn about Indigenous populations and Black Canadians**, including the history and current state of systemic racism in Canada.

   - The City of Vancouver has developed "First Peoples: A Guide for Newcomers" that includes valuable information tailored to newcomers on the First Peoples' history and relationship with Canada: https://vancouver.ca/files/cov/First-Peoples-A-Guide-for-Newcomers.pdf. They can also learn about Indigenous peoples through museums, galleries, and cultural centres that offer programs or exhibits of Aboriginal art, history, and culture, and Aboriginal events open to the public.[15]

3. **Use non-English language and non-mainstream marketing channels for outreach strategies**. This has been shown to be successful in engaging immigrants in community programs.[27] To effectively reach target groups, media outlets such as ethnocultural newspapers, radio and television channels should be used.[20]

   - In British Columbia, consider: Sher-e-Punjab Radio, Fairchild Radio Vancouver, ATN, Alpha Punjabi, BTV, and TalentVision.[20]

4. **Facilitate group activities that are not strongly language dependent**, such as activities involving food, music, art, field trips and events, sub-titled movies, festivals, inter-cultural exchanges, and cultural festivals celebrating various cultures.[37] The Government of Canada lists walking clubs, volunteering, and educational input activities as key activities that can be effective in reducing social isolation in immigrant and refugee seniors.[6]

5. **Consider the varying literacy levels across the province**. 45.9% of British Columbians read at a Level 2 or below (a very low level), 38.7% at level 3, and only 15.4% at level 4 to 5 (the highest level).[9]

   - Use plain language communication to reach your audience. Consider the background, culture, health status, and literacy level of your target audience to craft messages that are accessible, clear, and relevant.[38] Consider using a

plain language guide, such as the one developed by the Government of B.C.: https://www2.gov.bc.ca/gov/content/governments/services-for-government/policies-procedures/web-content-development-guides/writing-for-the-web/plain-language-guide

6. **Plan for transportation**. Lack of transportation is a significant barrier to participation in senior centre programming by many seniors.[39] Immigrant and refugee seniors are particularly at risk of not attending health promotion activities because of a lack of transportation.[20] Contributing factors include a lack of knowledge about using public transportation, avoidance of public transit due to lack of English language skills, and a dependence on family members for transportation.[20]

- Advocate, in collaboration with the community, for increased resources and funding for older adults' transportation. If allocating or advocating is unsuccessful, consider in-home programs and services as a means of reaching older adults who find themselves isolated from their support systems or communities.[39]

c. Set your action goals and specific activities.

Based on what you have identified in your cultural audit/assessment and planning/engagement steps, the next step is to outline your organization's goals for enhancing cultural competency and determining what would need to be done to achieve them. Identify specific activities for each level: individual members of the group, the program level, the organizational level, and the community level. For each specific activity, include the following: who will complete the activity, what will they do, by when, with what resources, and in communication with whom.

This step is different than the first step of defining your mission, goals, and visions to enhance cultural competency, which was more focused on broader organizational values. After doing research, engagement, and considering multiple cultural factors, you should now have clear, specific activities in mind that you will implement.

d. Continue engagement and evaluation.

You may not be able to make changes at all levels, but this can be accomplished by engaging with other sectors, including government. When you have made adjustments to your program or initiated new culturally competent interventions, conduct an evaluation to see how your program or organization is meeting its goals. Make adjustments as needed and share this information with other CBSS organizations to contribute to a Community of Practice.

Appendix A – Cultural competency training opportunities

Many organizations offer inter-cultural training for individuals and full teams in British Columbia. Consider looking online at the various options and selecting one that would work best for you and your organization. A few examples include:

- The MOSAIC engage Centre for Diversity provides Intercultural, Diversity, and Inclusion Training through in-person workshops in the Metro Vancouver area. This training is a structured approach to building awareness and understanding of different cultural behaviors and people's diverse backgrounds. See more at: https://engage.mosaicbc.org/intercultural

- The San'yas Indigenous Cultural Safety Training was developed by Provincial Health Services Authority (B.C.) as part of the Transformative Change Accord: First Nations Health Plan (TCA: FNHP) and Tripartite First Nations Health Plan (TFNHP). It is an online training program designed to enhance self-awareness, and strengthen the skills of those who work both directly and indirectly with Indigenous people. See more at: http://www.sanyas.ca/training/british-columbia

- The Colbourne Institute for Inclusive Leadership, through Norquest College based in Edmonton, offers an online five-module course on perspectives that are foundational to an inclusive mindset, and tools to immediately impact workplace culture in a positive way. See more at: https://continuingeducation.norquest.ca/home/diversity-inclusion

Appendix B – Resources for researching cultural profiles/factors

Several organizations have developed evidence-informed resources that outline cultural profiles and cultural factors about different countries and ethnic groups.

- Global Affairs Canada provides information on common cultural differences for almost every country. Generalized information related to differences in religion, class, ethnicity, gender, conversations, communication styles, displays of emotions, conflicts in the workplace, and more are listed. The information is tailored to a business perspective, but can be useful for insight into various cultural norms. See more at: https://www.international.gc.ca/cil-cai/country_insights-apercus_pays/countryinsights-apercuspays.aspx?lang=eng

- Hosftede Insight can be used to make generalized comparisons between different countries based on cultural factors, such as individualism vs. collectivism. See more at: https://www.hofstede-insights.com/

- The Cultural Orientation Resource Center, based in the USA, has developed 'Refugee Backgrounders' that discuss various populations' history, culture, religion, language, education, resettlement needs, and demographic information. Population groups include Syrians, Haitians, Cubans, Muslims in general, and more. See more at: http://www.culturalorientation.net/learning/backgrounders

- The Stanford School of Medicine provides information on specific health concerns, cultural profiles, and demographics of various ethnic groups in America, including Chinese, South Asian, Japanese, Korean, Vietnamese, and Pakistani-Americans. See more at: https://geriatrics.stanford.edu/

Appendix C – Multicultural organizations in B.C.

This is a non-exhaustive list of some organizations in B.C. that work with culturally diverse seniors. CBSS organizations should consider developing partnerships with these or similar organizations.

- The CBSS Leadership Council supports ongoing outreach and leadership to CBSS service providers across B.C. and advocates for increasing the capacity of CBSS' to meet the growing needs of B.C.'s aging population.[37] This Leadership Council strengthens the CBSS sector as a whole. The Inter-Cultural Working Group, under the CBSS Leadership Council, works to champion and advocate for the inclusion of ethnically diverse older adults in community-based programming in B.C. The '*Multicultural Supports for Older Adults*' group on CORE BC is a place to find and share resources related to this work. See: https://healthyagingcore.ca/group/multicultural-supports-for-older-adults-building-trust-resources

- MOSAIC, a Vancouver-based non-profit agency, has expertise in the settlement and integration of immigrants and refugees in British Columbia and across Canada. They offer intercultural training and language translation for a wide range of documents, including reports, product literature, promotional pieces, proposals, manuals, marketing materials, advertisements, presentations, internal corporate information, websites, and more.[40]

- The Burnaby Intercultural Planning Table (BIPT) is a working group of senior representatives from 15+ different agencies, including health, education, recreation and culture, the library, the City of Burnaby, volunteer groups, immigrant service agencies, and others. This Local Immigration Partnerships (LIP) project builds on local services to optimize engagement, planning, and coordination in the area of newcomer settlement and integration. They serve seniors and host a variety of events focused specifically on seniors.[41] Their website lists 125 services and programs in the Burnaby and Vancouver area, including existing ethnic and cultural associations that support new refugees and immigrants. See: https://bipt.ca/resources/

- The Government of B.C. has a directory of organizations found in the multicultural database in the province (such as consulates, societies, and agencies). The database is updated and changed based on existing organizations' requests. Consider reviewing which ones may be valuable to refer to. See: http://www.vcn.bc.ca/multicultural/the_index.html

- The interCultural Online health Network (iCON) is a community-driven health promotion initiative that supports multicultural communities collaborating with a variety of stakeholders, including community organizations and volunteers, to optimize chronic disease prevention and self-management. They have hosted many workshops/ public health events with Punjabi and Chinese speaking communities in B.C.[42]

- Ten other organizations that work with immigrant and refugee seniors in B.C. are listed and described in a national environmental scan from 2017 by the *Saskatchewan Population Health and Evaluation Research Unit.* See: https://spheru.ca/publications/files/SI_NIRS%20Programs%20Scan_18June2017final.pdf

- The Multifaith Action Society is a charity in B.C. that facilitates interfaith education and dialogue in the community. They provide information and resources about world religions and their spiritual traditions, and share community-source artwork primarily through their annual Multifaith Calendar. They collaborate with other local organizations and institutions.[43] See: https://multifaithaction.jimdo.com/who-we-are/. Many organizations exist for specific faith groups as well, such as the BC Muslim Association. See: https://thebcma.com/

- QMUNITY in Vancouver provides a number of services and projects focused on the needs of LGBTQ+ older adults in the community. They have engaged in community-based research processes in the form of focus groups, interviews, training workshops, and policy dialogues[10] and may be useful partners for CBSS organizations.

Community organizations for Indigenous groups

- The Government of B.C. provides a resource listing of over 1,100 Indigenous community-based organization and resources, including the area where they are located. Consider consulting this list and reaching out to the organizations in your area. See: https://www2.gov.bc.ca/gov/content/governments/indigenous-people/aboriginal-organizations-services

- Each Health Authority in B.C. offers some form of Aboriginal Patient Navigator or Liaison within their health care system. CBSS organizations can consider connecting with these services. See each service's website here: https://www.healthlinkbc.ca/health-topics/common-health-concerns/first-nations. Internior Health describes the Aboriginal Patient Navigators service as one that assists Aboriginal patients with access to community services that enhance continuity of care and efficient use of resources. This includes assisting with spiritual connection, community and hospital linkage, promoting access to community services, and more.[44]

- There are 25 Friendship Centres in B.C. that support urban Indigenous people by running 580 programs relating to youth, culture, art, language, health, employment services, family, preventing violence, economic development, sports, and recreation.[1] The Vancouver Aboriginal Friendship Centre (VAFC) offers holistic, drop-in support to Aboriginal people in Vancouver in keeping with their cultural connections and values. VAFC offers many programs and services, including a weekly Elders' luncheon, weekly Powwow Night (a family-friendly evening of drumming, dancing, and foods in the prairie traditions), arts, crafts, and cooking classes.[15]

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