

cultural considerations in health assessment

This tip sheet lists issues that should be considered when conducting health assessments with clients from migrant and refugee backgrounds. These issues can affect a client's health status and their understanding of health and illness, and also impact on future care plans.

What you need to know	Why you need to know it
Ethnicity and country of birth	<ul style="list-style-type: none">• This information can be an indicator of the client's culture, traditions, customs, health beliefs and preferred languages. <p>Remember that:</p> <p><i>Ethnicity may be more significant than country of birth. For example, clients may have been born in a country where their parents lived briefly.</i></p>
Preferred language	<ul style="list-style-type: none">• May indicate the need for an interpreter <p>Remember that:</p> <ul style="list-style-type: none">• Preferred language may not be related to country of birth.• It is the health professional's responsibility to ensure that communication is conducted in the preferred language of the client, and can be understood by the client. This is a Victorian Government requirement at critical points of communication.
Literacy	<ul style="list-style-type: none">• May affect the client's capacity to respond to written information provided during the assessment.• May indicate the client's social status and education level in their previous country of residence or origin. <p>Remember that:</p> <ul style="list-style-type: none">• Clients may rely on family members to read and explain written information.• Clients and their families may not be literate in the language they prefer to speak.

<p>Interpreter preferences</p>	<ul style="list-style-type: none"> Identifying an appropriate interpreter, and ensuring that the client is comfortable using an interpreter, is essential for clear and appropriate communication. <p>Remember that:</p> <ul style="list-style-type: none"> <i>The client may not be familiar with using an interpreter: you may need to explain the process.</i> <i>Clients may have concerns about the confidentiality of interpreters.</i> <i>There is a small chance that the client may know the interpreter, which may raise privacy concerns.</i> <i>Consider client preferences regarding the gender and ethnicity of the interpreter, and whether an on-site or telephone interpreter is preferred.</i> <i>Only qualified interpreters should be used: the client's family members should not be used as interpreters.</i>
<p>Migration status and experience</p>	<ul style="list-style-type: none"> Stress and trauma resulting from pre-migration, migration or post-migration experiences can greatly affect a client's health and wellbeing. Visa status can affect access to subsidised health services.
<p>Beliefs about health and illness</p>	<ul style="list-style-type: none"> Clients' beliefs and past experience affect the way they view health, causes of illness and treatment. Understanding and acknowledging the client's health beliefs and practices is an important step in creating a mutually acceptable care plan.
<p>Understanding of the health system</p>	<ul style="list-style-type: none"> Clients may not be familiar with the structure of the health service system or how to access various services. Clients may not be familiar with health system processes (eg waiting lists for hospitals, Medicare support, etc)
<p>Family and social support</p>	<ul style="list-style-type: none"> The responsibility for care may not lie only with the client: other people, including extended family, may assume responsibility for care <p>Remember that:</p> <ul style="list-style-type: none"> <i>In some cultures, 'family' may include non-related individuals.</i> <i>A client's social support networks may be limited.</i> <i>A client may be able to access support through community organisations.</i>
<p>Religious practices</p>	<ul style="list-style-type: none"> Clients may wish to access spiritual or religious leaders Particular times for prayer may be important Religious practices may occasionally conflict with treatment plans. Particular customs may need to be followed during birth, illness and death and dying
<p>Dietary practices</p>	<ul style="list-style-type: none"> There may be religious restrictions on food consumption Some foods may have cultural meanings for clients (eg the belief that certain foods are beneficial or harmful to health)

Further information

The Centre for Culture, Ethnicity & Health runs workshops on conducting health assessments and understanding health beliefs. Visit www.ceh.org.au to view our training calendar or book a workshop for your organisation.