Cultural Safety and its principles in social work practice

INTRODUCTION

Implicit and explicit cultural bias is of great concern across the helping professions, including social work, because it is so strongly associated with inequitable and harmful service provision (Fook, 2016). Rendering cultural bias explicit and changing it through developing cultural awareness and cultural humility are meta-competencies necessary to provide culturally safe services with members of equity-seeking communities who experience frequent harmful (traumatogenic) and oppressive care in service systems (Fisher-Borne et al., 2015). Eradicating cultural bias is a central feature of trauma-informed , anti-oppressive, and justice-focused social work education and training , specifically because reproducing bias reproduces individual and community intergenerational trauma. Cultural safety is a concept developed in Indigenous communities by the nursing field comprised of a set of principles by which the degree of cultural bias and oppressive practices experienced by all people seeking help and care in healthcare and social service systems can be evaluated (Johnson & Sutherland, 2022).

OBJECTIVES



THE OBJECTIVES OF THIS ARIA INTERSHIP WAS TO DEVELOP A BETTER UNDERSTANDING OF WHAT IS CULTURAL SAFETY IN SOCIAL WORK PRACTICE AND WHAT DOES THE LITTERATURE SAY ABOUT THE CORNERSTONE PRINCIPLES OF THE CONCEPT. WE WERE ALSO INTERESTED IN SEEING IF THE MODEL DEVELOPED BY BALL (2019) FOR CULTURALLY SAFE CARE WAS CONCORDANT WITH OTHER PRINCIPLES NOF THE CONEPT IDENTIFIED IN THE LITERATURE.

RELATED LITERATURE

- Ball, J. (2019). Promoting experiences of cultural safety in services for Indigenous children and families: Expanding Horizons for the Early Years. National Institute on Infant Mental Health. <u>https://ecdip.org/wp-</u> <u>content/uploads/2022/02/Promoting-cultural-safety-in-supports-to-Indigenous-families-Keynote.pdf</u>
- Browne, A. J., Varcoe, C., Smye, V., Reimer-Kirkham, S., Lynam, M. J., & Wong, S. (2009). Cultural safety and the challenges of translating critically oriented knowledge in practice. Nursing Philosophy, 10(3), 167–179. https://doi.org/10.1111/j.1466-769X.2009.00406.x
- Fisher-Borne, M., Cain, J. M., & Martin, S. L. (2015). From mastery to accountability: Cultural humility as an alternative to cultural competence. Social Work Education, 34(2), 165–181.
- Fook, J. (2016). Social work: A critical approach to practice. SAGE Publications.
- Gerlach, A. J. (2012). A Critical Reflection on the Concept of Cultural Safety. *Canadian Journal of Occupational Therapy*, *79*(3), 151–158. <u>https://doi.org/10.2182/cjot.2012.79.3.4</u>
- Government of Canada. (2023, June 20). Common definitions on cultural safety: Chief public health officer health professional forum. www.canada.ca. https://www.canada.ca/en/health-canada/services/publications/healthsystem-services/chief-public-health-officer-health-professional-forum-common-definitions-cultural-safety.html

• Johnson, H. & Sutherland, J. (2022). A conceptual framework for indigenous cultural safety measurement. National Collaborating Centre for Indigenous Health. https://www.nccih.ca/Publications/Lists/Publications/Attachments/10375/Cultural Safety Measurement EN Web

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BALL'S (2019) 5 PRINCIPLES OF CULTURALLY SAFE CARE Cultural 5 Principles

Protocols

Demonstrate reciprovity - Learning goes both ways

Partnershi

Personal knowledg

Engage community accompaniment -Find allies, mentors in community of practice

Hone-critical consciousness of social location/powe Who are you? Cultural affiliations, professional persona troduce yourself in terms of your cultural identities

Partnersh

Engage in relational practice founded on authentic encounters Share knowledge vs. 'telling' Collaborative problem solving vs. expert/authority trenathen mutual capacity vs. one-way 'delivery' Co-construct ways to move supports into place

METHODOLOGY

A literature review on measures and principles of cultural safety used in practice was conducted. The literature review was based on pre-selected articles organized in a Zotero folder. A foward-backward search of who cited Ball(2019) and who she cited was also condcuted. I also searched relevant data bases for recent literature on cultural safety. Each article was then read and analysed and catalogued in an excel litterature review grid to highlight the key points. the range of principles of cultural safety were organized in a grid in which they were compared to the five principles of cultural safe care design by Ball (2019). A final summary was then written describing the similarities and differences accross difinition and disciplines.

RESULTS/FINDINGS

Overall, the concept of cultural safety is more developed in the nursing field. There is a significant amount of the literature on cultural safety published in medical journals which was still relevant to our study. However, we realized that some of the challenges faced by the nursing field are not representative of the reality of social workers. The definition that was the most representaive of the collective cultural safety literature is from Ramsden (2002) which states that cultural safety intents to decolonize and transform care, meaning that it brings the focus back to the recipient of care rather than the provider which challenges the power structures. When comparing Ball's (2019) 5 principles of cultural safety, we found them to be congruent with those identified by Ramsden(2002) and the Public Health Agency of Canada ([PHAC], 2023). Other scholars such as Gerlach (2012), Brown et al., (2009), and Johnson and Shurterland (2012) have also strongly impacted our understanding of cultural safety and the radical shift that it represents in terms of providing care and adopting a client-centred approach. Cultual safety is still an emerging concept in social work that is often misinterpreted as cultural humility. A lot of work has been done in the conceptualisation of the term, yet we are still lacking a measure for evaluation of culturally safe care that focuses on the service recipients rather than the perspective of the service provider which does not honour the fundamental principles of cultural safety.

Process Positive

insure equity and dignity for all partie Negotiate goals and activities Talk less, listen more

Positive purpose **Build on strengths**

Avoid negative labelling Ensure confidentiality Be accountable Do no harm Make it matter: Ensure real benefits

AUTHORS

CONCLUSION

The integration of cultural safety in social work education is challenging educators and students to shift their focus from self-assed cultural humility as the outcome of care, to focus on service user determined cultural safety. The paradigm shift that this represents is that the service users determine if the services were delivered in a culturally safe manner rather than the service providers. This represents a radical change in repositioning the power dynamics because now the service user is the one who evaluates the outcome of service provision. Our litterature review has emphasized the importance of teaching cultural safety and its fondamental framworks such as critical consciousness, post-colonial theory, and critical race theory. Cultural safety is an outcome of a client-centered approach in which people's cultural identity and humanity are prioritized and respected by promoting rights for self-determination and holistic care (Johnson & Sutherland, 2022, p. 4; Bozorgzad et al., 2016)



Cultural Awareness

- Acknowledgement of differences
- Focus on "other" and "other culture"

Anti-racism Reducing power differences between minority and dominant groups



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CONTINUUM OF CULTURAL SAFETY AND HUMILITY

Cultural

- Competence Skills and behaviours that help a practitioner provide "quality care to diverse populations"
- Can build upon self-awareness • Limited by reducing culture into a set of skills that practitioners can master and overemphasizing culture difference

Cultural Sensitivity

- Recognize the need to respect cultural differences
- Focus on "other"
- and "other culture"

CULTURAL SAFETY

- Determined from the patient/ community's perspective
- Considers the social, political and historical contexts
- Requires practitioners to be self-reflective

Cultural Humility

Process of self-reflection to understand persona and systemic biases and privilege

Traumaand violence-

informed care Recognize the impacts and root causes of historical intergenerational trauma