Understanding the Importance of Cultural Competency in Migrant Youth with the Help of a Case Presentation

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Case Presentation

- 11-year-old girl who presented to the hospital with a two-week history of RLQ pain. Upon evaluation, she was 6 weeks pregnant. She disclosed having intercourse with two of her teenage maternal uncles. Gynecology provided information regarding maintaining vs terminating the pregnancy. Child psychiatry was consulted for a determination of capacity regarding her decision to maintain her pregnancy. She was unable to explain the responsibilities of raising a child. She was rather surprised by the team’s questions about her pregnancy and commented that “usually in Honduras, girls my age are pregnant.” Our consult team faced various cultural and language barriers in providing care which included the patient’s lack of participation due to lack of familiarity with US healthcare systems and public resources, lack of English language fluency, lack of measures available in her native language, and getting collateral from family members were difficult due to language/cultural barriers.

Introduction:

• Developing cultural competence is important for everyone, but it is especially vital for providers and collaborators who work with immigrant youth to better understand the cultural norms of their child and adolescent patients. Cultural competence means thinking critically about how psychiatric services are offered to youth. Providers often ask about how they can understand these migrant youth better so that they can provide them with better care (dealing with the cultural distance between the provider and youth).

Objectives:

With the help of this case report poster, we would be able to:
• To highlight the importance and better understanding of cultural competency when providing care for migrant youth from Central America.
• To highlight the barriers families/children face when accessing care for mental health.
• To emphasize the role of cultural competence in improving patient care among migrant youth from Central America.
• To highlight the importance that providers need to develop partnerships and collaboration with other system partners to improve overall patient care for migrant youth.

Case Report:

• We would discuss the case of an 11-year-old migrant female from central America. And, through this case discussion and review of current literature, we would present information about various barriers to care plus healthcare-related factors while treating these migrant youth and alert other child psychiatrists to be aware of these barriers and healthcare factors. We would provide recommendations for clinicians on how to better understand cultural competency and how to overcome these barriers to effectively treat migrant youth patients.

We performed a literature review of common databases including Cochrane, PubMed, Embase, Clinical Key, Medline, and Web of Science.

Conclusion:

• This case presented an opportunity to review the perspective of the central American cultural barrier. We will explore and discuss the role of cultural competency in migrant youth’s mental health. Clinicians need to think about culture broadly, beyond race and ethnicity. As clinicians taking care of immigrant youth from Central America, we need to explore our patients’ cultures in detail and provide easily understandable information.

Discussion

Barriers to care:

- Patient factors
  • Lack of English language fluency
  • Reduced Knowledge of the US healthcare system, and public resources
  • Lack of familiarity and comfort with the healthcare system.
  • Deficits in knowledge about their psychiatric illness.
  • Concerns about deportation, and interaction with the legal system.

- Healthcare/systems-related factors
  • Lack of health insurance
  • Long waiting list to see providers
  • Instruments in different languages
  • Lack of best practices guidelines
  • Lack of diverse representatives on the health care teams to deliver comprehensive services and supports
  • Lack of ethically culturally sensitive treatment teams

Recommendations for Clinicians:

- Clinicians need to think about culture broadly, beyond race and ethnicity. Do not make assumptions or stereotype patients based on their racial or ethnic identities.
- Clinicians should continuously explore their own biases, and develop cultural competence. They need to think critically about how psychiatric services are offered to youth.
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References

I declare I have no financial or other conflict of Interest.