Exploring Culture in Dementia Care

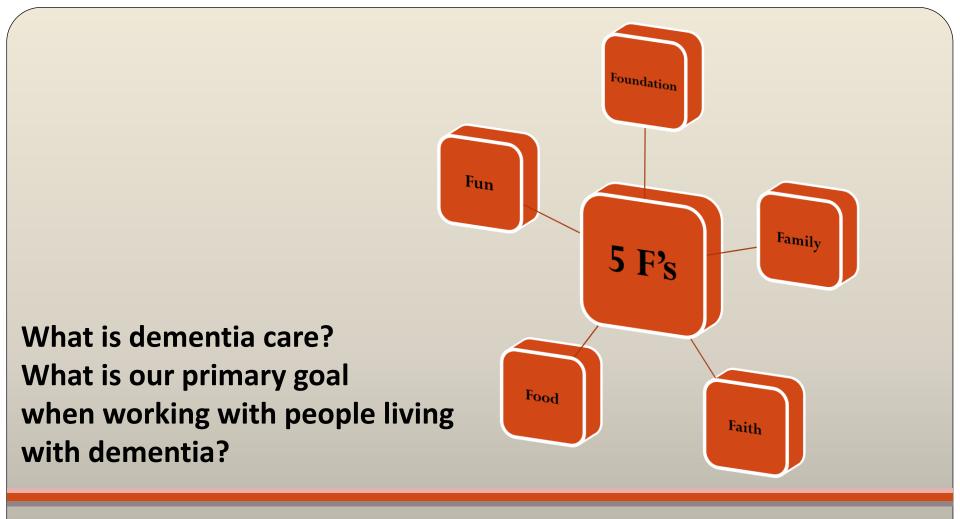
Presented by Jazz Browne & Andrea Lemard



Dynamics of Dementia Care

- Should/do we focus on the diagnosis or the person?
- If we focus on the person does the diagnosis matter?
- Is culture more important that the diagnosis?
- Should we focus on the person or their culture?
- Who should decide?





Aims and Objectives of this session:

Exploration of culture in dementia care

Merits of person centred care and anti-racist practice

Consider which model of practice creates better outcomes for an individual

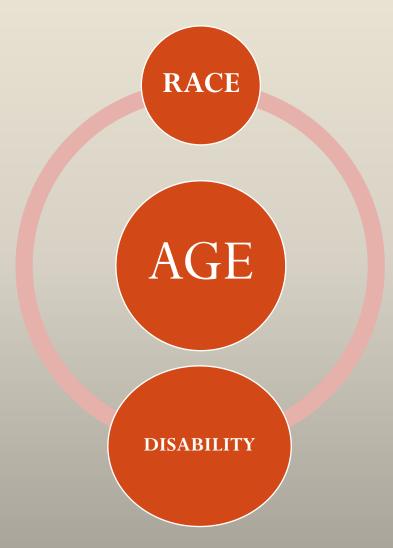
Faith Based Approach to Dementia Care Case Study







Dementia and Intersectionality



Creating Safe Spaces for Healing & Cultural Expression









Developing Culturally Specific Activities



Reflective Practice & Learning

Person Centered Care

Cultural Competency



Effective communication that is sensitive to cross cultural differences and the ability to adapt to other cultural environments

Anti-Racist Practice



The system works for me, it listens to me, understands and knows me; it can meet my needs irrespective of my background and location

Merits of Person Centred Care Models

Cultural Competency

- Experience and knowledge of different cultural practices that allows for appropriate adaptation
- Adoption of a cross cultural attitude to implement strategies that will help to develop and enhance the ability to adapt to other cultural environments
- A level of understanding another person's pattern of thinking, feeling, reactions and problem solving:
 - Language
 - Style of communication
 - Customs
 - Views on roles and relationships
- The acquisition and maintenance of culturespecific skills for very practical reasons (Wilson, Ward & Fischer, 2013)
- Williams (2001) defined cultural competency as 'the ability of individuals and systems to work or respond effectively across cultures in a way that acknowledges and respects the culture of the person or organisation being served

Anti-Racist Practice

- Partnership working across professional and community organisations
- Acknowledging and dispelling unconscious bias
- Dismantling the tendency to stereotype
- Building a workforce that is reflective of the community and environment of operation (positive action)
- Education and training from external professionals
- Going beyond the legal requirement, meaningful listening sessions for staff and beneficiaries with actionable strategies
- Assessing the make up of decision makers, are they representative of the people benefitting from the service or product?
- Embed anti-racist practice in to operational delivery
- Transparency in operational delivery, evaluation and appropriate actions through external scrutiny
- Calliste and Dei define it as: "action-oriented, educational and/or political strategy for systemic and political change that addresses issues of racism and interlocking systems of social oppression

Round Table

Consider which model of practice creates better outcomes for an individual (each group to discuss and feedback as a round table activity)

- Are both models of practice mutually exclusive?
- Reflective learning and practical delivery in reality What happens? What do you do?
- Do we integrate the concept of Intersectionality in to our assessments?
- Crenshaw provided the following definition of intersectionality: "Intersectionality is a metaphor for understanding the ways that multiple forms of inequality or disadvantage sometimes compound themselves and create obstacles that are not often understood among conventional ways of thinking."
- E.g. think of the earlier case study where the person was Black, female, over 65+ and disabled so may face layers of discriminatory practice that puts them at further disadvantage due to the number of protected characteristics (Equality Act 2010)

What do we think culture in dementia care is currently?

What do we think culture in dementia care could be?

What practical steps can we take to employ equitable practice?

REFLECTIONS

Thank you!



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