

## Abstract “Intercultural Practice Training”

in the context of the program „Operation Team – Interprofessional Learning“

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### **Short description:**

After the arrival of many refugees, our healthcare system faces major challenge in integrating this group of patients into the system. Training on interculturality in the health system only exists to a very limited extent. For this reason, Hamburg offers an interactive, team-oriented and interprofessional training as part of the “Intercultural Practice” project. The workshop for physicians, medical assistants, social workers and students consists of two modules. After successful evaluation, the training may also be adopted by other German cities.

### **Detailed project description:**

In the past two years, Europe has experienced a significant increase in the number of refugees and received well over one million people from the Middle East and Africa. After the successful accommodation in reception centres (*EAs*) and the provision of primary medical care, integrating these people into the German statutory health system (*Kassenärztliches System*) is crucial in the coming months and years. Unlike the initial care of newly arrived refugees provided by medical volunteers in outpatient clinics of the reception centres, the step of integrating this population into the standard system affects all medical staff.

In the reception centres, patient coordination, scheduling, referral, diagnosis and therapy is supported by social workers and interpreters. After a transfer to subsequent accommodation or apartments, however, this help is often no longer available. Missed appointments or multiple appointments in the same or wrong specialist facility result in

incomprehension on both sides and lead to widespread frustration and demotivation in the long term, apart from medical risks and the waste of resources. Studies show that the quality of medical care for migrants and people with a different cultural background is usually lower than that of the general population. The prevalence of diseases in migrants is often lower than in the local population, but vulnerability to the former is higher due to traumatic experiences and lower socio-economic status [1-3].

Numerous uncertainties and reservations towards this group of patients already exist in the practice of the statutory healthcare system. From making appointments to registration, to the communication between patients and doctors: many situations can be interculturally challenging for both sides. In addition to mere language barriers, mental illnesses without adequate psychotherapeutic care option and different notions of disease occurrence and salutogenesis may further complicate communication.

While there is already an approach in Hamburg to train patients to find their way through the health system (e.g., the *Refugium* and the *Casablanca* projects), this approach would need to be greatly expanded in quantity and intensity as only a fraction of patients is currently being reached.

The experiences gained so far from our work in the refugee outpatient clinics of the reception centres show the importance of cooperation between the different professional groups involved. In addition, another important factor is the strengthening of intercultural education in the healthcare sector, which is currently rarely offered in training formats. Some training aspects have now found their way into university education [4], but they do not reach all staff. For these, we offer a forum in the context of our project. An interactive and interdisciplinary workshop consisting of two modules for physicians, medical assistants, social workers and students will bring noticeable and measurable benefits to both the newly arrived and the established migrate population through advanced training of medical teams.

At present, surveys are being conducted among the general practitioners of Hamburg (GPs and paediatricians) to integrate important topics into the training from the viewpoint of practicing doctors and to adjust the priorities accordingly.

There will be an interval of several months between both two-day modules to allow an internalization of the contents of the first module and to apply what has been learned. An accompanying evaluation of the training in the form of a scientific study is part of the

project. Depending on further needs, evaluation outcomes and interests, a second round is possible within the project period.

**References:**

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- 2) Razum, O, Geiger, I.: Gesundheitsversorgung von Migranten, Dtsch Arztebl 2004; 101(43): A-2882 / B-2439 / C-2326
- 3) Reeves S. Shaping Interprofessional Education: Where to from here? Keynote symposium of the Faculty of Medicine, University of Heidelberg. "Der Patient im Mittelpunkt: Interprofessionelle Ausbildung und Zusammenarbeit gestalten und entwickeln". Heidelberg: University of Heidelberg; 2014.
- 4) Knipper, M, Akinci, A, Wahlfach "Migrantenmedizin"- Interdisziplinäre Aspekte der medizinischen Versorgung von Patienten mit Migrationshintergrund, GMS Zeitschrift für Medizinische Ausbildung ISSN1860-3572

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