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Somali CARES: Listening to the Voices of the Other

Joyce P. Miller

Submitted in partial fulfillment of
the requirement for the degree of
Doctorate of Nursing Practice

AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

2011

Augsburg College
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Minneapolis, MN 55454

Presentations

Prenatal Care Delivery Model for Somali Women
May 2, 2011
Maternal Child Health Advisory Committee
Olmsted County Public Health Office, Rochester, MN

New Models in Delivering Prenatal Care: Centering Pregnancy and Somali CARES
November 12, 2010
Mayo Clinic OB/GYN Clinical Reviews
Phillips Hall, Mayo Clinic, Rochester, MN

Somali CARES: Listening to the Voices of the Other
October 22, 2010
Transcultural Nursing Conference
Atlanta, Georgia

Somali CARES: Prenatal Care Delivery Model for Somali Women
April 28, 2010
Mayo Medical School
Rochester, MN

Somali CARES: A Prenatal Approach to Improving Health Literacy in a Prenatal Care Program
for Somali Women
April 22, 2010
Geffen Auditorium, Mayo Clinic, Rochester, MN

Abstract submitted:
Somali CARES: An Innovative Approach to Provide Prenatal Care to Somali Women
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November 7-8, 2011
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ABSTRACT

Somali CARES: Listening to the Voices of the Other

Joyce P. Miller

June 26, 2011

Care during pregnancy is an important preventative health intervention for women and their unborn baby in all cultures. Healthcare inequities exist among some ethnic minority groups and contribute to racial disparities in birth outcomes. Pregnant Somali women, newly immigrated to the United States, are forced to seek prenatal care within a cultural context that can be very different from their own experiences and expectations. This refugee population is expected to fit into a medical system that is not only unfamiliar to them, but at times unable to meet their needs during pregnancy. As Somali women seek access to western healthcare systems, practitioners need to understand, facilitate, and integrate traditional cultural practices into prenatal care encounters. Somali Culturally Appropriate and Respectful Education and Support (CARES) Program for Pregnancy is a clinic-based, group prenatal care program for Somali refugees that advances healthcare delivery. A creative approach of providing prenatal care, the Somali CARES program was developed and implemented at Mayo Clinic, Rochester, MN in 2009 to support the cultural and social contexts of Somali women through the use of a cross-cultural pedagogy. Incorporating storytelling, role playing, and facilitative discussion created an atmosphere of respect for cultural differences and built trust between the Somali women and their healthcare practitioners. The use of learning through cultural ways of expression was a very effective method of bring traditional African education alive for the learners and enabled active participation as teachers involved the learners in uncovering the meaning of their stories. Through a both ways educational approach, an equal power status was created between the

healthcare practitioners and the Somali women, because both learned from the other. When healthcare practitioners listened and partnered with the Somali women, a new paradigm for advancing participatory healthcare practice transformed. The Somali women indicated a high level of satisfaction with the program and recommended it to other Somali women. Entering into the world of the Somali culture, while listening to the voices of the women, while honoring their ways of knowing and doing, new insights unfolded for healthcare practitioners. Listening to the voices of the other help to dismantle barriers of providing culturally appropriate prenatal care for the Somali women created an atmosphere of a caring, teaching-learning environment that lead to improved health outcomes of the mother and baby.

**Augsburg College
Department of Nursing
Doctor of Nursing Practice Program
Final Scholarly Project Approval Form**

This is to certify that Joyce P. Miller has successfully Defended her Final Scholarly Project entitled "Somali CARES: Listening to the Voices of the Other" and fulfilled the requirements for the Doctor of Nursing Practice degree.

Date of Oral Presentation: April 28, 2011.

Committee members signatures:

Advisor: _____ Date: _____

DNP Faculty: Beth C. Ernest Date: April 28, 2011

DNP Faculty: _____ Date: _____

DNP Faculty: _____ Date: _____

SomaliCARES : Listening to the Voices of the Other



Joyce Miller, RN, MAN
In partial fulfillment of the requirement for the degree
of Doctorate in Nursing Practice
Augsburg College, Minneapolis, Minnesota
2011

SomaliC.A.R.E.S.

Program for Pregnancy at Mayo Clinic, Rochester, MN

Culturally
Appropriate &
Respectful
Education &
Support
for
Somali Women
During Pregnancy
(Dynes, 2008)



OBJECTIVES

- Uncover health inequities of Somali women during pregnancy
- Explore cross-cultural ways of knowing
- Discuss the process of “becoming” and ways of “being” with the other
- Examine the synchronistic happenings of our encounters

Journey of Uncovering the Mētis



Somalia



- Country located in East Africa
- No central government since the Civil War – 1991
- 1 million people left country
- Relocated to United States in 1993

Somali Population in MN

- Third largest population in United States
 - 24,877 +/- 2349 Somali live in MN (majority in Minneapolis-St Paul) (American Community Survey, U.S. Census, 05-09)
 - Approximately 1635 +/- 586 Somali residents in Rochester, MN (American Community Survey, U.S. Census, 05-09)



Care During Pregnancy

Important cornerstone of public health

- Early initiation of prenatal care
 - Timely diagnosis & treatment of pregnancy related problems
- Associated with an increased birth weight

(Quelopana, Dimmitt-Champion & Salazar, 2009)

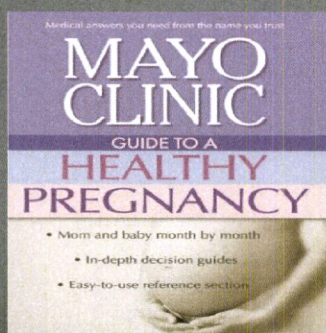


In Somalia
pregnancy considered a normal process not
requiring medical intervention (Essen, et al., 2000)



When Somali women first encounter Western healthcare during pregnancy, they are often hesitant to accept prenatal interventions

(Blair Johnson, Reed, Hitti & Batra, 2005)



Health Inequities

Somali born women compared to U.S. born black and white women

Somali women :

- Anemic
- Gestational diabetes
- Deliver postdate (>42 weeks)
- Cesarean delivery



(Washington State study – Blair Johnson, Reed, Hitti, Batra, 2005)

MN Prenatal Healthcare Observations of Somali women (2002)



- Perception of late, intermittent or no prenatal care
 - Prenatal care in 2nd trimester
 - Emergency Room in late-stage labor with no record of prenatal care
 - Several cases of court-ordered Caesarean Sections
- Despite access to state-funded healthcare (Medicaid)

Background

Focus Groups in Rochester (2003-4)

Key concerns:

- Mistrust of Caesarean birth
- Dislike of labor induction
- Dissatisfaction with birthing practices
- Lack of modesty
- Wanted female providers



Somali Women's Nights (2003-5)

- Culturally appropriate health education and screening to the community

DVD "A Somali Pregnancy in America" (2008)

- Focus was on increasing cultural understanding & communication between patient and provider

Data from Mayo Clinic

Preliminary Data on preterm birth:

Somali at RMH (1997-2003) = 8.5%

All others RMH = 12.3%

Nationally = 12.5%

Study comparing 584 Somali women deliveries

Group 1: 1993-1999 compared to Group 2: 2000-2006

Gestational diabetes - 5.2% to 15.1%

Preterm births - 4.3% to 9.9%

(Flynn, Brost, & Foster, 2009)

SomaliCARES Program developed because...

- Current prenatal care did NOT work for our Somali patients:
 - Lacked educational component for population-specific information
 - Questioned if current system provided culturally appropriate care



Program conceptual design by Michelle Dynes, MSN, MPH, CNM
Former CNM at Mayo Clinic 2002-2009 & Current PhD student at Emory University

Not an Easy Recipe

Ingredients for Sambusa – a Somali appetizer

- 1 (14 ounce) package spring roll wrappers
- 2 tablespoons olive oil
- 2 pounds ground beef
- 1 leek, chopped
- 2 teaspoons ground cumin
- 2 teaspoons ground cardamom
- 1 teaspoon salt
- 1 teaspoon pepper
- 1 small onion, finely chopped
- 1 clove garlic, minced
- 1 tablespoon all-purpose flour
- 1 tablespoon water, or as needed
- 1 quart oil for frying



Language is Key Ingredient

- Somali Language - formal written script in 1972
- Oral tradition - Learn by word of mouth
- Art of storytelling
 - Stories used to amuse, express feelings, teach behavior and morality

(Omolewa, 2007)



Cross-Cultural Pedagogy Another Important Ingredient

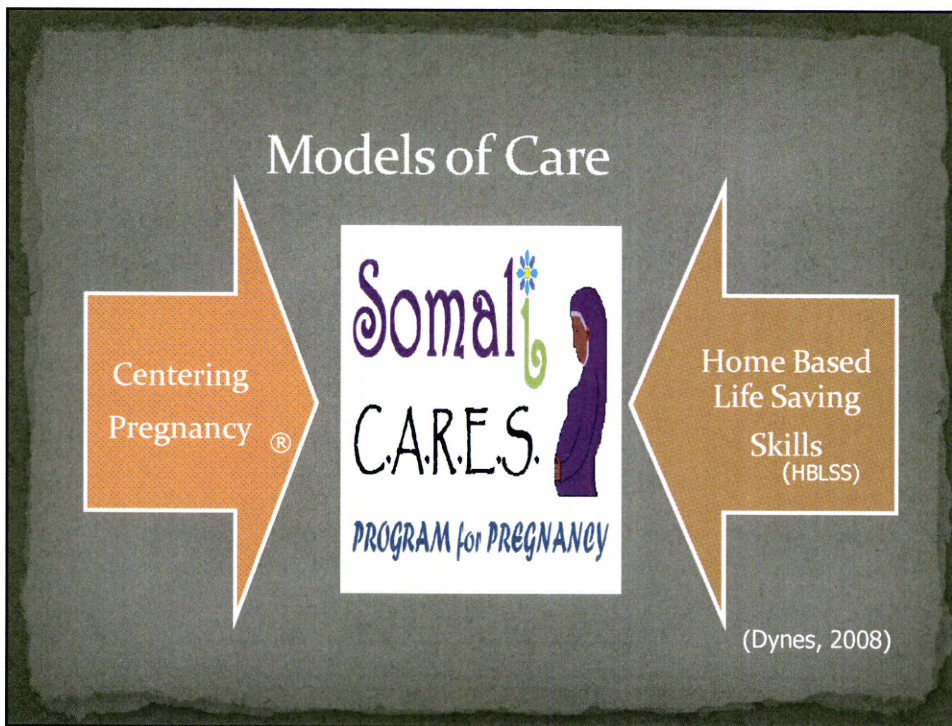
- Incorporates the concept of
 "Both Ways Education" (Harrison, 2005)
- Two-way exchange between
 teacher - learner & learner - teacher
 - *Listen to the stories of the other and acknowledge
 others ways of knowing*

Healthcare providers become facilitators of learning,
rather than transmitters of knowledge

Essential Ingredient

- Approach to develop a critical consciousness & self
 awareness
- Challenge dominate beliefs and practices in society
 that create oppression
- Sense of humility to relearn though interaction with
 the learner

(Pedagogy of Oppressed, Freire, 1997)



Somali C.A.R.E.S. Program Curriculum

- Prenatal Care Component
(Fetal heart tone, growth, etc)
- Somali Specific Topics
 - presented through story-telling and role-playing
- Discussion of cultural norms
- Socialization: food, prayer
- Demonstration, DVDs
- Stress & Coping Strategies
- Closing

A photograph of three women wearing hijabs (pink, green, and blue) standing in a room. On the wall behind them are several framed certificates or diplomas. A whiteboard is visible in the background to the right.

SomaliC.A.R.E.S. Implementation

- Grant awarded to the OB/GYN Dept from the March of Dimes for \$50,000 over two years in March 2009
- Provide group prenatal care to pregnant Somali women (4 groups – July 2009 to Feb 2011)
- Each group meets for six sessions and reunion

SomaliCARES Team



CNMs - perform assessments & facilitate group discussion



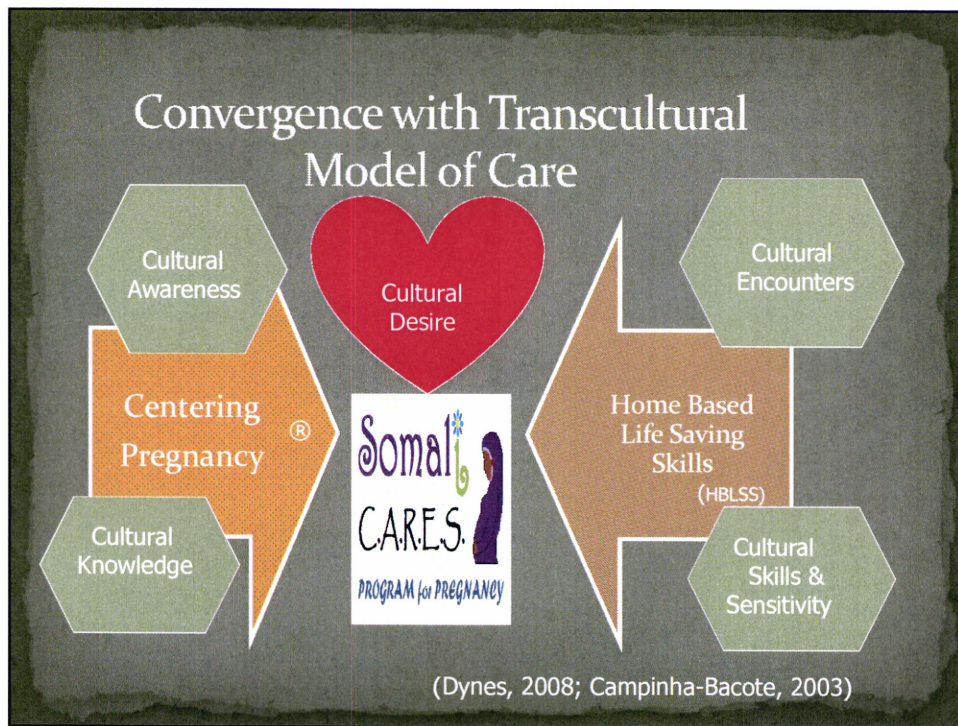
Program facilitator & Somali facilitator



Somali Interpreters



RNs- assist with BP & weights



SomaliC.A.R.E.S. Cultural Components

Integrates culturally appropriate educational strategies:

- Story-telling
- Role-playing
- *Both Ways* learning
- Sense of humility

Integrates appropriate culture care:

- Somali interpreters
- Somali facilitator
- Female healthcare providers



Storytelling.....

Asha is in her 6th month of pregnancy. She begins to feel pain in her belly and lower back that gets worse as the day goes on. Asha keeps doing her housework because she does not know that pain can be a problem in pregnancy.

The next day Asha wakes up with strong pain and bleeding. She is very afraid. She tells her husband Abdi and they go to the hospital.

Discussion following Storytelling

- Have you ever heard about or seen a woman with pain or bleeding in pregnancy?
- What was done to help the woman?
- What happened to her? (outcome)



Drama



Discussion Following Drama

- What did you see in the drama?
- What did Asha & Abdi do?
- Are these actions acceptable to you?
- Are there other actions you would take that have not been discussed?



Discussion of Stress & Coping Strategies

- How are you feeling today?
- Do you have worry?
- What is causing your worry?
- What do you do to help your worry?
- Are there any other ideas on helping with worry?



Closing for Each Session

- What was helpful for your learning today?
- What was not helpful ?
- Do you have suggestions for making our next meeting better?



Closing Circle

Somali C.A.R.E.S. Participation

Group 1 - 8 / 13

Group 2 - 4 / 10

Group 3 - 5 / 9

Group 4 - 6 / 9

- Reasons for non participation - lack of transportation, childcare, work schedule, incomplete contact information

Health Outcomes

Somali Cares Women

N = 23

- Care by 1st trimester = 17
- Care by 2nd trimester = 6
- Anemia = 1 (Twins)
- Diabetes = 2
- Pre-term birth = 1 @ 37 wks (Twins)
- Intra-uterine fetal death = 0

Cohort of Somali Women

N = 42

- Care by 2nd trimester = 30
- Care by 3rd trimester = 4
- Unknown = 7
- Anemia = 3
- Diabetes = 7
- Pre-term birth = 5
- Intra-uterine fetal death = 2

* Data from 11/2009 through 10/2010

Process of “*Becoming*”

Cultural Desire:

- Passion to enter into journey with other
- Requires respect for differences & commitment to build on similarities
- Willingness to learn from others
- Caring and Love
- Social justice (equality in health outcomes)
- Cultural humility (Campinha-Bacote, 2003)



Somali Values & Beliefs

Cultural
Awareness



- Religious beliefs (Muslim)
- Pregnancy & Childbirth
- Female circumcision
- No pork products

Transcended to Deeper Awareness



- Willingness to be open
- Suspend judgment
- Engage in learning from the other
- Negotiate cultural practices
- Recognize one's biases, prejudices & assumptions



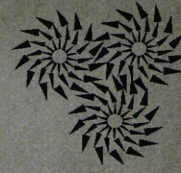
SomaliCARES sessions

Cultural
Encounters



- Time together
- Provide prenatal education

Became Sacred Encounters



- Making a connection
- Learning from other
- Developing cultural humility
- Listening attentively
- Being present
- Understanding cultural context

Cultural Knowledge

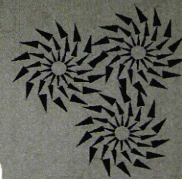
Caregiver Knowledge

Cultural Skills & Sensitivity

- Somali health beliefs during pregnancy
- Importance of female healthcare providers



Transformed into Cultivating Compassion

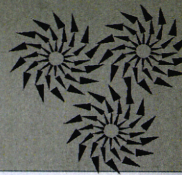


Listening to the voices of the other
Understanding the other



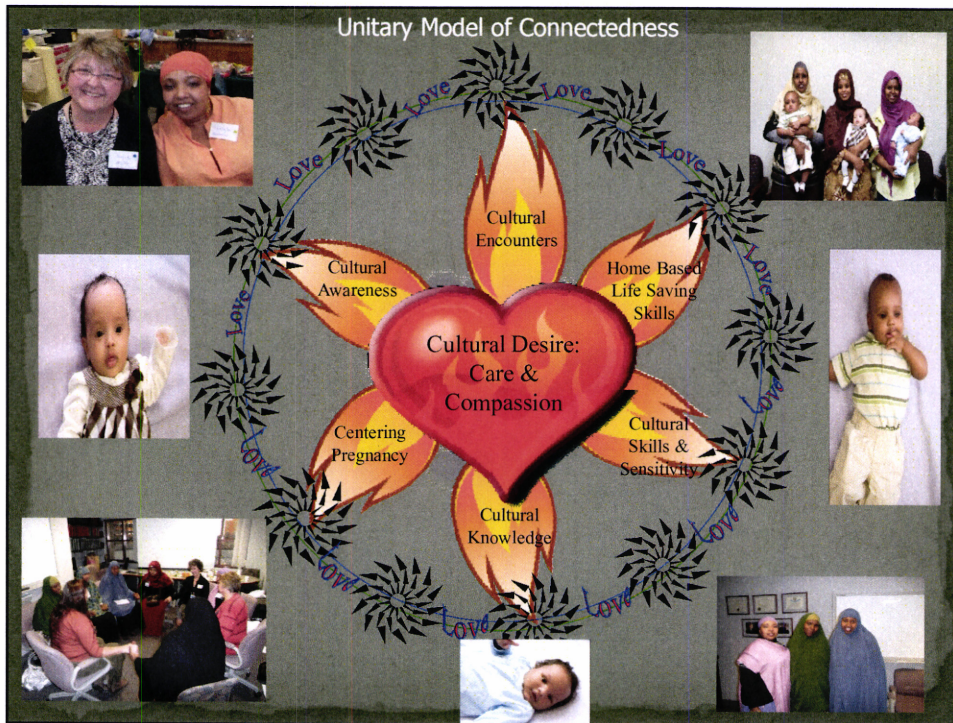
- Discussion on worries
- Cesarean deliveries
- Female circumcision

Conscious Intentionality




Inherent Consciousness of
intentionality of care
Fostered a sense of connection
to create community
Community provided an
opportunity to share the
journey





Pandimensional Awareness in Context of Human Relating

- **Manifesting intentions of care**
 - Created environment that potentiated change of each other
- **Pattern interaction**
 - Shifting of field patterns
 - Created a heightened sensitivity of knowing
- **Special connections**
 - Provided mutual understanding
 - Lead to an environment of trust



Closing Circle

Unintentional Incompetence



Somali music
selection
1st or 2nd song?

Development of Mētis in Practice

- **Take small steps**
We cannot know the consequences of our interventions in advance
- **Favor reversibility**
Prefer interventions that can easily be undone if they turn out to be mistakes
- **Plan on surprises**
Chose plans that allow the largest accommodations to the unforeseen
- **Plan on human inventiveness**
Plan on those who become involved to improve the plan

(Scott, 1998)

Metaphor
Planting a Flower Garden



Prenatal Period is Important
as Tilling of the Soil



Uncovering cultural beliefs



Innovative Strategies



“Sowing seeds” as a metaphor to provide culturally appropriate care for pregnant Somali women has been a great opportunity for personal growth



Na Ba Dey
Goodbye

In Sha Allah
if God willing

Afi Mat Ayaan Edeen Rageynia iyo isgar dambe
Health & Luck for all, hoping see you next time

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