



CULTURE CARE CONNECTION

www.culturecareconnection.org

Increasing the cultural competence of health care providers serving culturally diverse populations
Spring 2012

Funded by 

Minnesota Clinics and Public Health Agencies Get Started on Culture Care Connection II

Minnesota clinics and public health agencies participating in the Culture Care Connection II initiative are already beginning to implement the program in their organizations. The program's goal is to advance cultural knowledge and skills for working effectively with multicultural patient populations, improving care provided to all patients.

In March, Stratis Health staff visited each clinic and public health agency to review program requirements and share resources and recommendations for improvements based on the results of their pre-CLAS assessment and gap analysis of current performance.

Next steps involve participants reviewing their individual gap analysis reports and choosing one or two issues to work on, followed by development of an action plan for improvement based on identified best practices.

The program requires participants to complete online educational curriculums from the Office of Minority Health or public health training center. They also will conduct an additional educational training program, such as a health literacy session, communication training, lunch and learn video training on a specific racial or ethnic population, or may develop their own training program. ○



This Issue

- ♦ Does Where We Live Determine How Rich or Poor We Are?
- ♦ Updated Materials on Culture Care Connection Website
- ♦ News
- ♦ Cultural Cuisine
- ♦ Multicultural Resources
- ♦ Multicultural Events
- ♦ Stratis Health Contacts



Stratis Health Releases Profile of Medicare in Minnesota Report

Stratis Health just released its Profile of Medicare in Minnesota report, which gathers information and resources about the Medicare program in the state. It provides a picture of who is receiving medical services through Medicare, what the 65 and older population in Minnesota looks like, health status and quality of care information, and information on the major types of Medicare health care providers in Minnesota.

Hepatitis C Virus (HCV) Tribal Summit

May 9, 2012
Mahnomen, MN

This program is open to all tribal health staff, providers, and community members concerned about the impact of Hepatitis C in Native American communities. Topics include harm reduction, HCV basics, enhanced risk assessment, prescription drug abuse, and HCV treatment options.

[More >](#)

Does Where We Live Determine How Rich or Poor We Are?

In 2010, 46 million people in the U.S. were living in poverty. The official poverty rate increased from 14 percent in 2009 to 15 percent in 2010, the highest rate since 1993. In spite of this increase, today's poverty rate is 7 percent lower than in 1959 when the poverty rate was first recorded. According to the 2010 U.S. Census, the South was the only region in the U.S. to show a statistically significant increase in poverty. Mississippi, New Mexico, Alabama, and West Virginia rank among the top states with the highest poverty levels.



In Minnesota, the poverty rate is 11 percent, which translates to 563,006 Minnesotans, or over one in 10 living in poverty. The poverty rate for children is higher, at 14 percent. Minnesota ranks fourth among states for the lowest poverty rate. Although Minnesota's overall poverty rate is below the national average, its poverty rate for people of color is higher—26 percent compared with only 8 percent for non-Hispanic whites. Minnesota has the highest poverty rate in the nation among Asian American children, at 22 percent, and the fifth highest poverty rate in the nation among African American children, at 47 percent.



The federally-defined 2012 poverty threshold for a family of four living in Minnesota is \$23,050; for a family of three with one adult and two children, \$18,530; and for an individual, \$11,344. Studies suggest that doubling

the poverty threshold would be needed to cover basic needs, such as food, clothing, transportation, and child care adequately. According to Welcome to a Minnesota Without Poverty, one fourth of Minnesota's population is defined as "near poor" (people living with incomes less than 200 percent of the poverty threshold), and 9,000 people in Minnesota are homeless. Minnesota receives funds from the federal government to help pay for basic needs and families can earn up to 115 percent of the poverty guideline and still receive public assistance.

The United Nations and the World Bank define poverty as the denial of choices and opportunities—not having enough money to feed and clothe a family or acquire basic goods and services necessary to survive with dignity. Poverty is not having access to clean water and



sanitation, health care, or education. It is not having a job to earn a living or not having land for growing food. Poverty puts people in a position that makes them vulnerable to disease, violence, and death. Poverty excludes individuals and communities, denying them a voice in the policies and decisions that shape their lives and situations. It makes them powerless and denies them the capacity to improve their lives.

Geography of poverty

Where we live plays a critical role in shaping our wealth or poverty. As far back as 1776, economist Adam Smith in *The Wealth of Nations* proposed that physical geography and climate of a region can shape its economic success. For example, almost all countries located in temperate zones, such as countries in North America, and Western Europe have high-income economies. Coastal regions with access to sea trade performed better economically than inland regions, and nations in tropical zones had higher rates of infectious diseases and deaths, which had a direct effect on economic productivity. In fact, life expectancy in some countries is 80 years, compared with other countries with a life expectancy of 45 years.

At a local level, the geography of poverty is played out in lack of access to economical choices of food, shelter, health care, education, and other

basic needs that affect how well people survive and thrive in a community. For example, in lower income neighborhoods, people often lack access to healthy, nutritional foods and basic services. Stores that offer healthy options in affluent neighborhoods are often replaced in lower income neighborhoods with fast food restaurants, convenience stores, and stores that sell tobacco and liquor. These stores are targeted to low-income residents and often charge higher prices because corporations and proprietors know they can—they know that residents

Poverty, continued

lack the resources to go outside the immediate community to shop for better prices.

The majority of people in the U.S. and the world live in urban settings. In Minnesota and throughout the U.S., poverty has been spreading from the central cities to the older, blue collar suburbs over the last 20 years. In Minnesota, more than 197,000 people live below the poverty line in the suburbs, in communities such as Brooklyn Center, Brooklyn Park, Crystal, east Bloomington, Maplewood, and Richfield. Since the last census, Brooklyn Center's poverty rate rose from 7.4 percent to 14.1 percent and Maplewood's poverty rate rose from 4.8 percent to 11.4 percent. Brooklyn Center has the highest numbers of mortgage foreclosures in the state.

Local and national governments, policy makers, and social service organizations continue to look at the reasons for concentrations of poverty in certain regions and neighborhoods, and continue to work to find solutions while providing access to jobs, transportation, and basic services. Changing overarching policy choices related to the geography of poverty, such as distribution of money, power, and resources at global, national, and local levels will determine the future of those living in poverty today. ○

Updated Materials on Stratis Health's Culture Care Connection Website www.CultureCareConnection.org

Updated Diversity Information Sheets

Check out the newly updated diversity information sheets on over fifteen racial and ethnic groups living in Minnesota today. The profiles have been updated with data from the 2010 U.S. Census.



Know Your Community: Updated County Profiles and New! City Profiles

Stratis Health has developed the Culture Care Connection County Profiles and City Profiles to assist health care organizations to learn more about the characteristics of the communities they serve so they can develop culturally sensitive services and processes to deliver equitable and effective health care. Review your county and city profiles for quantitative data describing the following:

- ✦ Demographics: age, gender, race, foreign born
- ✦ Socio-economic status: income, education, and occupation
- ✦ Health status data: birth rate and morbidity



News

Comparative Study of Epilepsy in Native Americans and Non-Native Americans

The University of Minnesota Department of Neurology and School of Public Health are conducting a study to explore whether attitudes and experiences with epilepsy vary in Minnesota Native American and Non-Native American communities and how that may impact quality of care and well-being.

The University is currently seeking Native American participants with epilepsy. Participation is simple, namely completing a questionnaire. Participants will receive a \$20 gift card from Target. If you are interested in participating, know someone who would be interested, or would like more information about the study, please contact Dr. Miguel Fiol, University of Minnesota Department of Neurology, 612-626-7044, fiolx001@umn.edu.

Karen New Year Celebration a Success

On December 31 and January 1, Minnesota's Karen community celebrated the Karen (pronounced kuh REN) new year and thanked sponsors and partners for their contributions to the community throughout the year: Ta Blut Doe Mah!

Nearly 4,000 Karen refugees from Myanmar in Southeast Asia and from refugee camps in Thailand live in Minnesota. Formerly Burma, Myanmar is still referred to as Burma by the Karen people. According to the Karen Organization of Minnesota, St. Paul is home to the largest population of Karen outside Southeast Asia.

More than 2,000 people attended the Karen New Year celebration, which was held at Washington Technology Magnet Schools in St. Paul. The event was sponsored by the Karen Cultural Organization and the Karen Organization of Minnesota. Attendees enjoyed dance performances, volleyball and caneball tournaments, a formal New Year ceremony, and a traditional Karen meal. Throughout the year, the Karen community and partners have helped over 1,000 refugees from Burma get jobs, find housing, health care, enroll in school, and learn English.

Cultural Cuisine



Po Cha: Tibetan Butter Tea

Ingredients

Water, black tea, ¼ tsp. salt, 2 tbsp. butter, ½ cup milk

Directions

Boil five cups of water. Turn down heat, add 2 tea bags, boil again. Add salt, butter, and milk. Blend well in blender or shaker. Serve very hot.



Mohinga: Fish Curry Soup from Burma

Ingredients

- ♦ 1 lb. catfish or any firm fish
- ♦ 1 lb. fine rice noodle
- ♦ 3 tbsp. oil, 1 grated onion, 4 crushed garlic cloves, 1 tbsp. grated root ginger, 1 stalk finely chopped lemon grass, 1 tsp. chili powder, 1 tsp. turmeric
- ♦ 1 cup water, ½ cup fish sauce, 4 tbsp. rice flour mixed with a little water

Directions

- ♦ Heat oil in large saucepan. Add onion, garlic, ginger, lemon grass, chili powder, and turmeric. Stir and cook over medium heat until fragrant. Add water, fish sauce, quartered onions, and rice flour mixture. Mix well. Bring to a boil, stirring thoroughly. Reduce heat and simmer for 20 minutes.
- ♦ Add chunks of fish to soup and cook for another 10 minutes. Boil rice noodles and cook for 5 minutes.
- ♦ Serve soup over rice noodles in individual bowls. Garnish with one or more of the following: scallions, shredded green beans, sliced fried gourd or squash, chopped hard boiled eggs, and fresh coriander leaves.

Multicultural Resources

Latest AHRQ Disparities Report Released

The latest [National Healthcare Disparities Report](#) released by the Agency for Healthcare Research and Quality shows that access to health care did not improve for most racial and ethnic groups in the years 2002 through 2008.

Minnesota Hospice Multicultural Resources

Review the [Minnesota Network of Hospice and Palliative Care website](#) for a variety of resources on cultural competency, religions, and racial and ethnic populations.

Migration Facts, Statistics, Maps

Learn about the settlement patterns and concentration of immigrant populations in the U.S. [The Migration Policy Institute](#) provides a variety of statistics, national and state-level demographic, social, and economic facts, as well as information on historical immigration trends and which cities have the largest immigrant populations.

Videonovela Helps Spanish-Speaking Patients Compare Diabetes Treatments

A new online Spanish-language videonovela series, 'Aprende a vivir' (Learn to Live), being distributed by AHRQ features messages to help diabetes patients compare their treatment options to find a regimen that works best for them.

[More >](#)

African American Heritage Corridor

Learn more about [Minnesota's African American history](#), which began with free African Americans who trapped

furs with French and British traders and developed relationships with Indian nations. The Points of Entry brochure and guided tours highlight the places and institutions where African Americans established new beginnings in St. Paul. For more information, contact Lisa Tabor, lisa@culturebrokers.com

**"You tell me: I forget.
You teach me; I remember.
You involve me; I learn."
– Benjamin Franklin**

Minnesota International Center

Get involved in the [Minnesota International Center](#) (MIC). MIC provides opportunities for individuals to gain a deeper understanding of their place in the world community by encouraging the exchange of ideas and experiences among the people of Minnesota and visitors from around the world. Working with local, national, and international partners, MIC engages the community in discussions about the complexities of key global issues and the impact of the world on our lives, and promotes face-to-face exchanges as the most powerful means of connecting and communicating across cultures on a personal level.

Resources from The Exchange

Based in Minnesota, the [Exchange](#) partnership is a forum for exchanging information and resources about health communication and multi-lingual health materials. Find a new tip each week on the Exchange home page, such as the following:

♦ Do You Know Your Title VI Obligations?

Are you a health care institution that receives federal money? Then you have special obligations to provide language services to limited English speakers under Title VI of the Civil Rights Act of 1964. Are you confident that you know what you're required to do? Get a detailed [summary](#) in this 24-minute video from the U.S. Office of Refugee Resettlement. The video, narrated by Paul Cushing of the Office for Civil Rights, offers guidance to laws and regulations on subjects such as interpreter competence, using family members as interpreters, translation of vital documents, and much more.

♦ Diabetes Education Video in Khmer

EthnoMed offers a new resource to help clinicians discuss diabetes and diet with Khmer-speaking (Cambodian) patients. *Cambodian Foods that Affect Blood Sugar: A Guide for Cambodian Patients* is a 10-minute [video slideshow](#) presentation, narrated in the Khmer-language, that is tailored to reflect foods commonly consumed by Cambodian Americans. It is intended for patients to learn how these foods raise, lower, or have little effect on a person's blood sugar. The presentation is also viewable as a [PDF](#) with 59 slides that can be used for color printing/laminating.

Multicultural Events

Cancer in Your Community Workshop

May 15, 2012, St. Paul, MN

This workshop is for persons working in communities that experience disparities in cancer diagnosis and treatment. Learn about cancer and cancer screening for breast, cervical, colon, and lung cancer. Develop skills to teach others about cancer and learn about community resources. Another Cancer in Your Community Workshop occurs on June 20, 2012.

[More >](#)

Achieving Universal Health Care for Kids (& Adults):

**The Minnesota Health Plan
May 16, 2012, St. Paul, MN**

Ann Settgest, MD, Assistant Professor of Medicine at the University of Minnesota and Internist at HealthPartners Center for International Health, will discuss uninsured and underinsured U.S. children, and explain the difference between single-payer health care reform and other models.

[More >](#)

Enter a World of the Deaf, Deaf-Blind, and Hard of Hearing

**June 6, 2012
St. Paul, MN**

Deaf and Hard of Hearing Services Metro office invites you to partake in a fun, unique, and experiential training opportunity where you will enter a world where the larger culture is Deaf, DeafBlind, and hard of hearing. As a hearing person, you will be in the smaller culture. You will depart this training with a greater understanding of the world of hearing loss and a desire to share your personal experience with others.

[More >](#)

Minnesota Cancer Summit 2012:

The Landscape of Change

June 6-7, 2012

Brooklyn Center, MN

Attendees will learn about changes occurring with health care reform that impact chronic disease prevention and management; how to advocate for and participate in health system changes; and recognize and act on approaches to disease prevention and management that cut across chronic diseases and their associated risk factors.

[More >](#)

Ongoing Programs

**Hmong Elder Program
Every Monday 9:30 a.m.-noon
First Lutheran Church 463
North Maria Avenue
St. Paul, MN 55106**

Hmong elders meet to socialize, exercise, learn about health issues, and share a culturally appropriate meal. Transportation is provided. seam-stpaul@hotmail.com

Southeast Asian Ministry

**Cambodian Elder Program
Every Thursday 10 a.m.-noon
Christ Lutheran Church gathering space - Southeast Asian Ministry (SeAM)
105 W. University Avenue
St. Paul, MN 55103**

Cambodian elders gather to socialize, exercise, learn about relevant health issues, and share a culturally appropriate meal. Transportation is provided. seam-stpaul@hotmail.com
Southeast Asian Ministry

Chinese Senior Program

**Last Saturday of every month
11 a.m.-2 p.m.**

**Hospitality Center for Chinese
China Place Building
1407 Cleveland Avenue N.
St Paul, MN 55423**

This program provides an opportunity for Chinese seniors to socialize, listen to seminars given by Chinese physicians or other speakers. Seniors play chess and mahjiang and enjoy a potluck lunch. yiliyou@msn.com
Chinese Social Services Center

Minnesota Community Health Worker Alliance

**First Wednesday of every
month, with exception of July
1:00-3:00 p.m.**

Monthly Twin Cities meeting rotates among member sites with teleconference access for those in Greater Minnesota. For community health workers and representatives of stakeholder organizations such as mutual assistance associations and other community nonprofits, tribes, community clinics, hospitals, clinic systems, health plans, voluntary health organizations, state and local public health and human services agencies, health plans, post-secondary schools, funders, and others.

Members of the Alliance work together to advance the community health worker field in order to reduce health disparities, expand and diversify the health care workforce, and foster healthier communities. joanlcleary@gmail.com

Events

2012 Minnesota e-Health Summit

June 13-14, 2012
Brooklyn Park, MN

Minnesota's eighth annual e-Health Summit will focus on priority health information technology topics, including maximizing effective use of electronic health records, accountable care, quality reporting, privacy and security, population health, and more. The Summit's theme this year is e-Health: Maximizing Value for Individuals and Communities.

[More >](#)

Cancer in Your Community Workshop

June 20, 2012, St. Paul, MN

This workshop is for persons working in communities that experience disparities in cancer diagnosis and treatment. Learn about cancer and cancer screening for breast, cervical, colon, and lung cancer. Develop skills to teach others about cancer and learn about community resources.

[More >](#)

2012 Minnesota Rural Health Conference: Bringing It All Together

June 25-26, 2012, Duluth, MN

This year's conference will take an in-depth look at federal and state health reform, health information technology, quality, workforce, finance, and reimbursement. The first day focuses on critical access hospitals and their communities. The second day takes a broader look at rural health in Minnesota, showcasing creative solutions to challenges and encouraging leadership for the future.

[More >](#)

Contacts

Mary Beth Dahl, RN, CPC,
CPHQ, Program Manager
mdahl@stratishealth.org
952-853-8546

Mary Montury
Program Coordinator
mmontury@stratishealth.org
952-853-8541

Margaret LeDuc
Editor
mleduc@stratishealth.org
952-853-8578

Katharine Holden
kholden@stratishealth.org
952-853-8549

Culture Care Connection is
produced with support from



Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.

Stratis Health works toward its mission through initiatives funded by federal and state government contracts, and community and foundation grants, including serving as Minnesota's Medicare Quality Improvement Organization.

Stratis Health

2901 Metro Drive, Suite 400
Bloomington, MN 55425-1525

952-854-3306 +952-853-8503 (fax)

Email: info@stratishealth.org

www.stratishealth.org



President and CEO

Jennifer P. Lundblad, PhD, MBA

Director, Medical Affairs

Jane Pederson, MD, MS

Board of Directors

Kathleen D. Brooks, MD, MBA
Connie Delaney, PhD, RN
Huda Farah, MSc
William E. Jacott, MD, board chair
Dee H. Kemnitz
Michele Kimball
Clint MacKinney, MD, MS
Beth Monsrud, CPA
Alison H. Page, MHA
Michael Spilane, MD
Ruth Stryker-Gordon, MA, RN
Dale Thompson
Gary Wingrove