

Working With Families From Different Ethnic and Cultural Backgrounds

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Video Link: <http://www.brainline.org/content/multimedia.php?id=1423>

Caron Gan: Almost 50% of our population in Toronto are from different ethnocultural communities so it as service providers and as clinicians we really have to look at creative ways of working with families who have, who may have very different and divergent beliefs around health and illness around what caused the brain injury and around ways of seeking help around that.

So, for example, our biological model around brain injury is that we know is caused by damage to the brain, there has been a blow that has caused some bruising to different parts of the brain, which may account for behavioral, emotional, or changes in thinking.

Families from other cultures may not subscribe to that biological scientific model. Some families may experience it as this is predestined, it's fate, it's meant to be, and in families who do see things in that fatalistic way it is hard to engage them in rehabilitation because when things happen due to fate it's beyond the control of man.

Similarly, when families have supernatural beliefs or beliefs that are more spiritually oriented that the cause of the injury is due to supernatural forces or it's God's will then how can we as human beings have more power over divine intervention. So families who have those kinds of beliefs may gravitate more towards prayer, towards spiritual healers, towards divine intervention, and it doesn't mean they won't necessarily buy into rehabilitation. I think what that means is we have to look at ways of bridging their cultural belief systems and incorporating different ways that families might want to access help.

So they may want to access rehabilitation but at the same time they may also want to, you know, engage in the use of prayer and their natural healers and that's something we should be respecting and incorporating as part of the rehab plan.