

Health Care Issues for Somali Women

by Sabra Omer Hashi

L'auteure discute des problèmes particuliers qui se posent aux femmes somaliennes lorsqu'elles essaient d'avoir recours au système de santé canadien.

Somali women who come to Canada as refugees have significant health care needs, but use health services less than other women. This contradiction is partly because of practices and attitudes they encounter in a health care system that discriminates against their language, culture, race, gender, status, and class.

Language differences between Somali women and their doctors, nurses, and other health care workers is their biggest obstacle.

A Somali woman may not be able to express or describe her illness, and may, as a result, be wrongly diagnosed or given the wrong medication. She may feel a lack of privacy when using interpreters (particularly male interpreters), especially when dealing with issues like birth control, sexuality, sexual assault, and wife abuse. She may be talked down to or discouraged by the doctor or health professional who chooses to use words that are very technical. She may not be given the time she needs to describe her illness and as a result, she might be discouraged from seeking treatment until it is too late.

Doctors and other professional health care workers spend less time with refugee Somali women compared to other women who may not have the same obstacles facing them.

Somali women feel discouraged by the "medical model." In the medical model, doctors are always right and decisions are always made for women without their consent. As a result, women are treated like children, humiliated, and not given any options about their own lives. She has to follow the doctor's orders.

I remember one time I asked my family doctor to do a breast examination for me. Her response was: "You are a Somali woman and you don't have any problems with breast cancer, therefore, relax and forget about it." I was in shock. She was placing in danger the lives of many women who have faith and trust in her position as a doctor.

I am a Somali woman who challenges and fights against the medical model and demands to be treated with respect and dignity. This is not the case for every woman. I think doctors and medical professionals should treat all woman with respect and dignity regardless of their background.

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MARGARET WALLER

Growing Pain

Between shoulder blade and spine
prodding, poking pain.

Pain
the surgeon dismisses,
not cancer, can't cut it;
Pain
the gp shrugs,
so common, many have it.
Pain
The nurse listens,
rubs but can't explain it.
Pain
the analyst interprets,
stressed—repressed it.

I wonder—why?
Recall the ache
of budding breasts.
Imagine the torque
of bound feet,
Feel the prod
of wisdom teeth,
and know:
Wings might grow!

Wings that might
Hover hummingbird fashion,
Glide a thousand gull-miles,
Soar and dive at osprey speed
If nurtured, let go.

Would they be wings others have seen:
Translucent tiny Tinkerbelle wings,
Heavy-feathered Pre-Raphaelite arches,
Iridescent raiment of Amazon butterflies?

Men build wings
of bolts, cable, steel.
Mine choose to grow.

Margaret Waller is a founding member of Breast Cancer Action Montreal and composes poetry on the 211 bus to/from John Abbott College in St. Anne de Bellview, Québec where she teaches sociology.