



# Developing Intercultural Competence in Health Care

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# Why Cultural Competence?

- ▶ Cultural competence is the key to providing quality care to patients of all cultural backgrounds.

# What is Cultural Competence?

## ► Definition:

“**Culture**” refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups.

“**Competence**” implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.

*Source: Based on Cross, Bazron, Dennis, & Issacs, 1989*

# Importance of Cultural Competence in Health Care

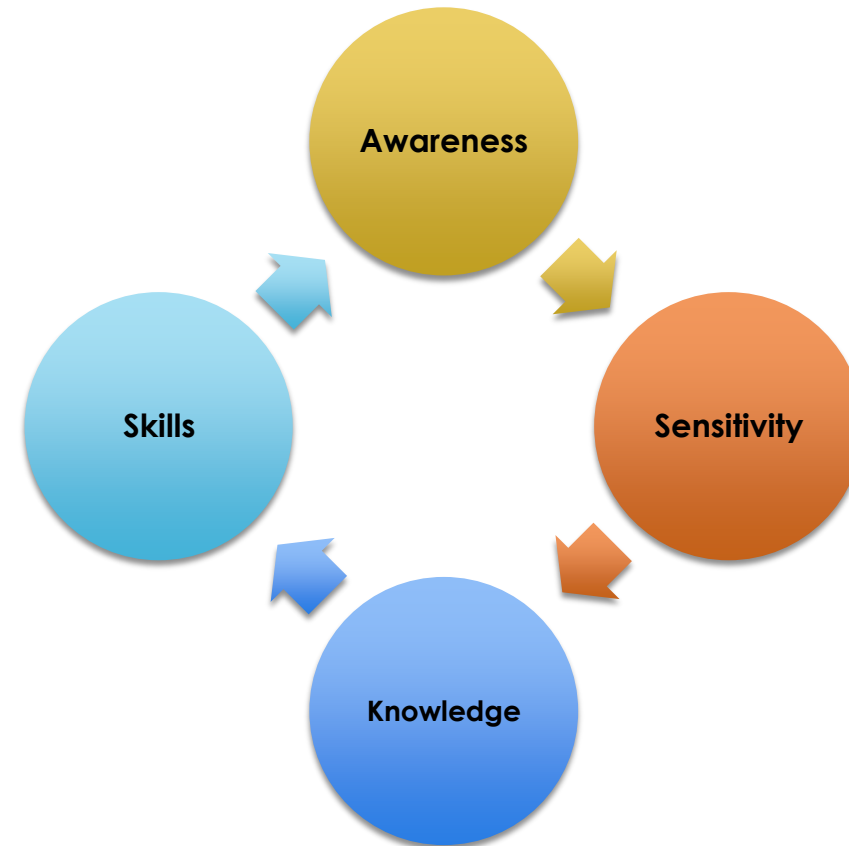
- ▶ Ethnocentrism
  - ▶ Inaccurate diagnosis and treatment
  - ▶ Exacerbated illnesses
  - ▶ Noncompliance
- ▶ Impact of culture on provider-patient relationships
  - ▶ Lead to lack of trust, understanding, and loyalty in the patient-physician relationship.

# Cultural Barriers in Patient Care

- ▶ Economic, geographic, social and cultural
- ▶ Cultural and linguistic
- ▶ Fear
- ▶ History
- ▶ Level of comfort

# Acquisition of Cultural Competence

- ▶ Cultural competence is:
  - ▶ Developmental
  - ▶ Learned
- ▶ Four components:
  - ▶ Cultural awareness
  - ▶ Sensitivity
  - ▶ Knowledge
  - ▶ Skills



# What do you think?

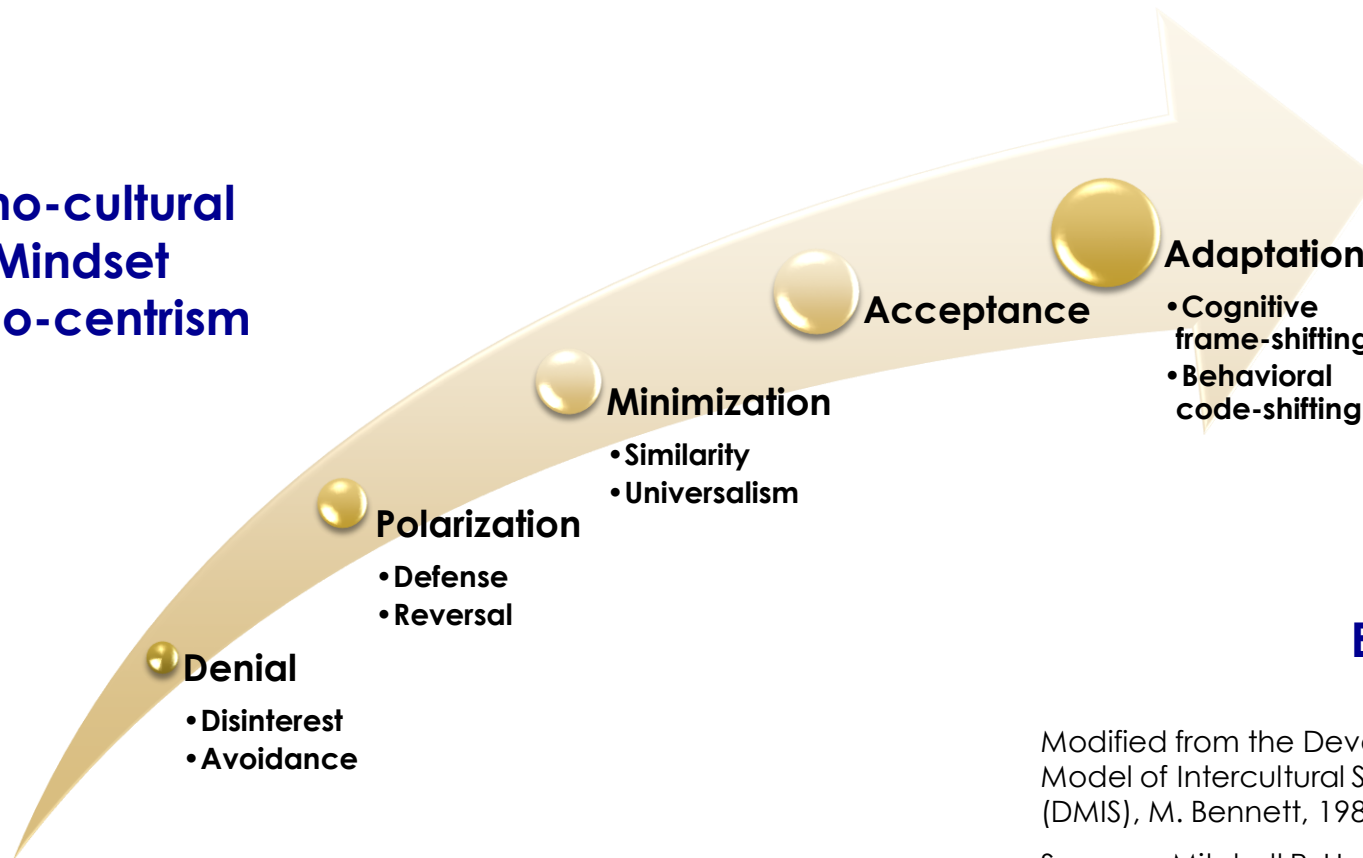
***Mr. Sanchez, a 65-year-old Mexican-American man, is admitted for evaluation of bright red rectal bleeding. The son draws you aside and requests that, if something serious is found, you not tell his father either the diagnosis or prognosis. The son explains that in the Mexican culture, it is proper to inform the family of a serious diagnosis and let them handle it as a group. As the gastroenterologist, you perform colonoscopy and discover that he has colon cancer.***

- ❖ How do you respond to the son's request?
- ❖ Is it your professional obligation to tell Mr. Sanchez the diagnosis? The prognosis?
- ❖ What will happen if you do so?

Source: Li, Caniano, & Comer, 1998

# Intercultural Development Continuum

**Mono-cultural  
Mindset  
Ethno-centrism**



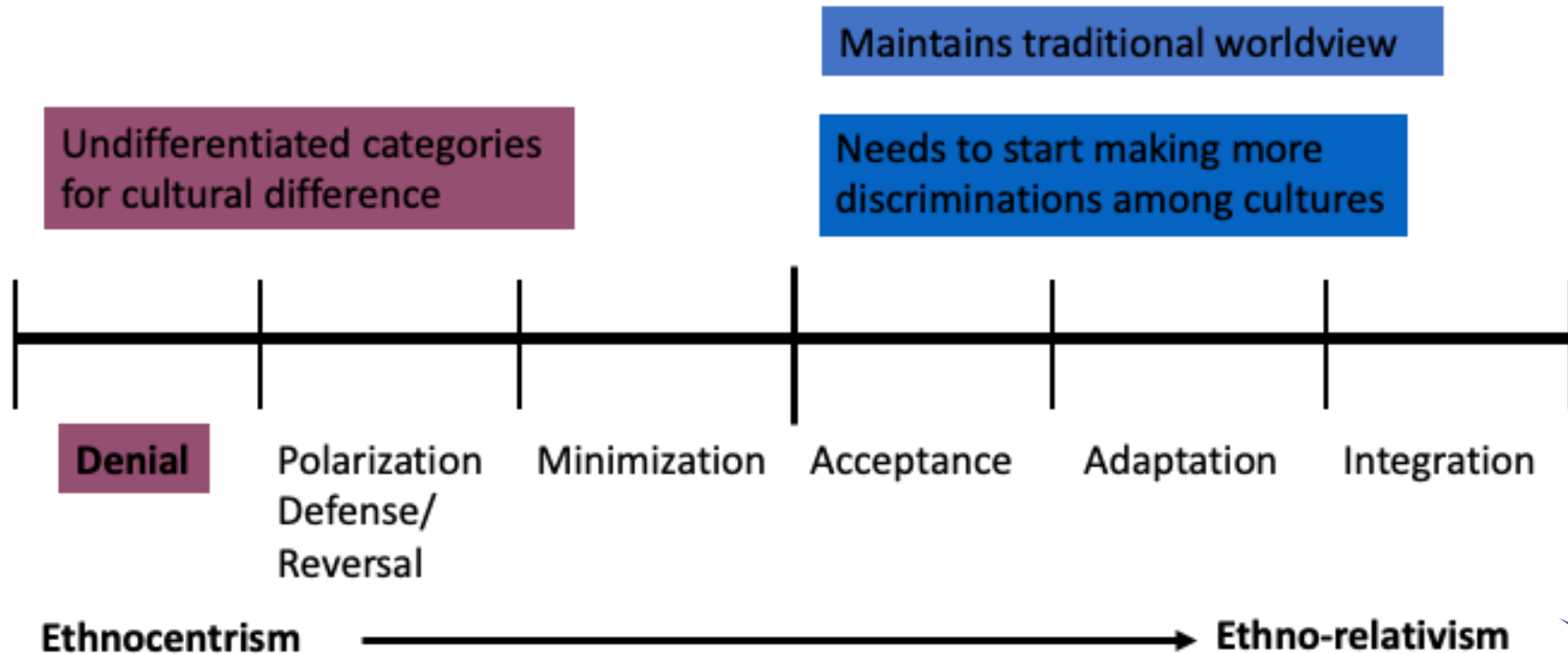
**Intercultural  
Mindset  
Ethno-relativism**

Modified from the Developmental Model of Intercultural Sensitivity (DMIS), M. Bennett, 1986

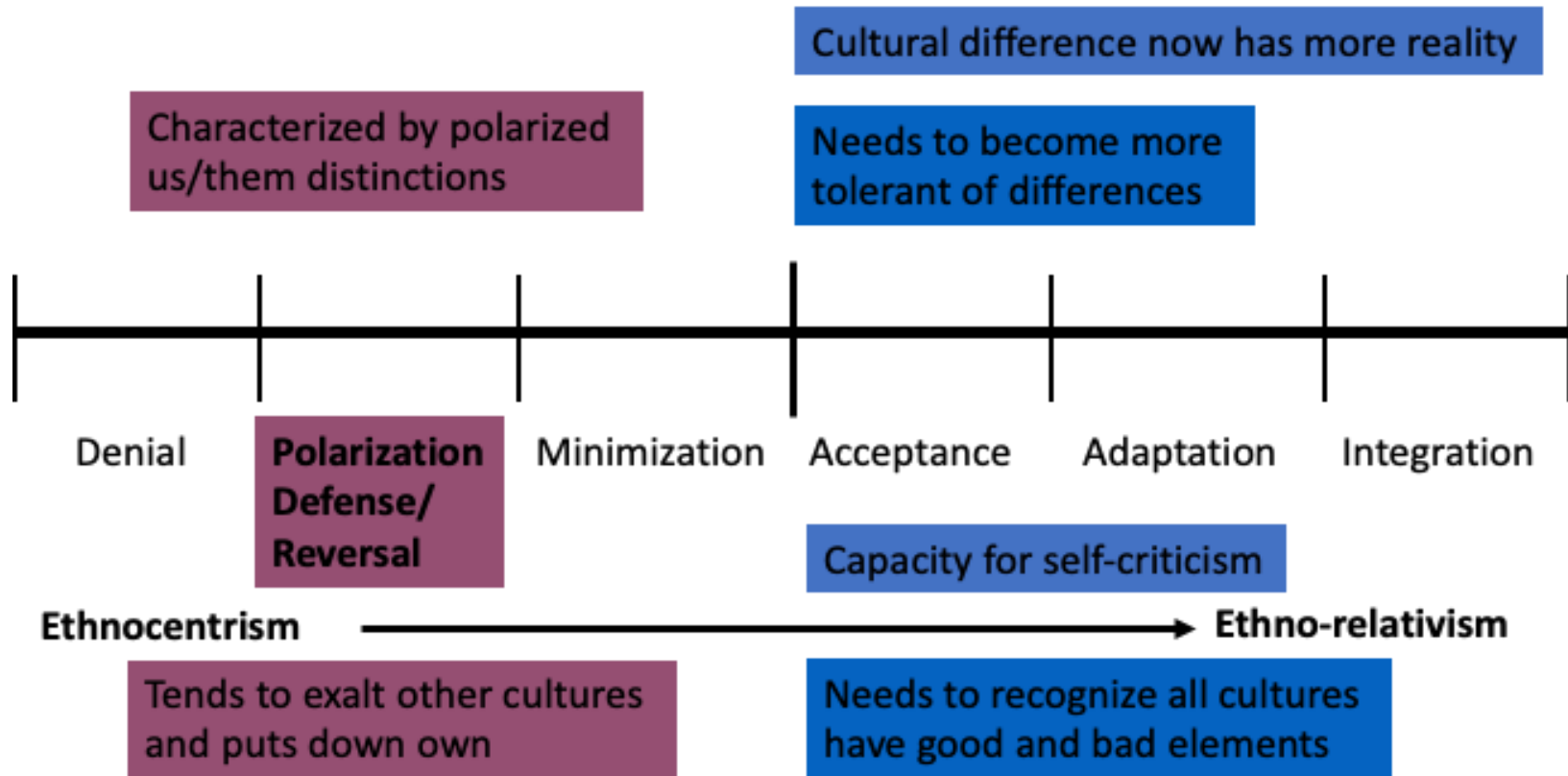
Source: Mitchell R. Hammer, Ph.D.



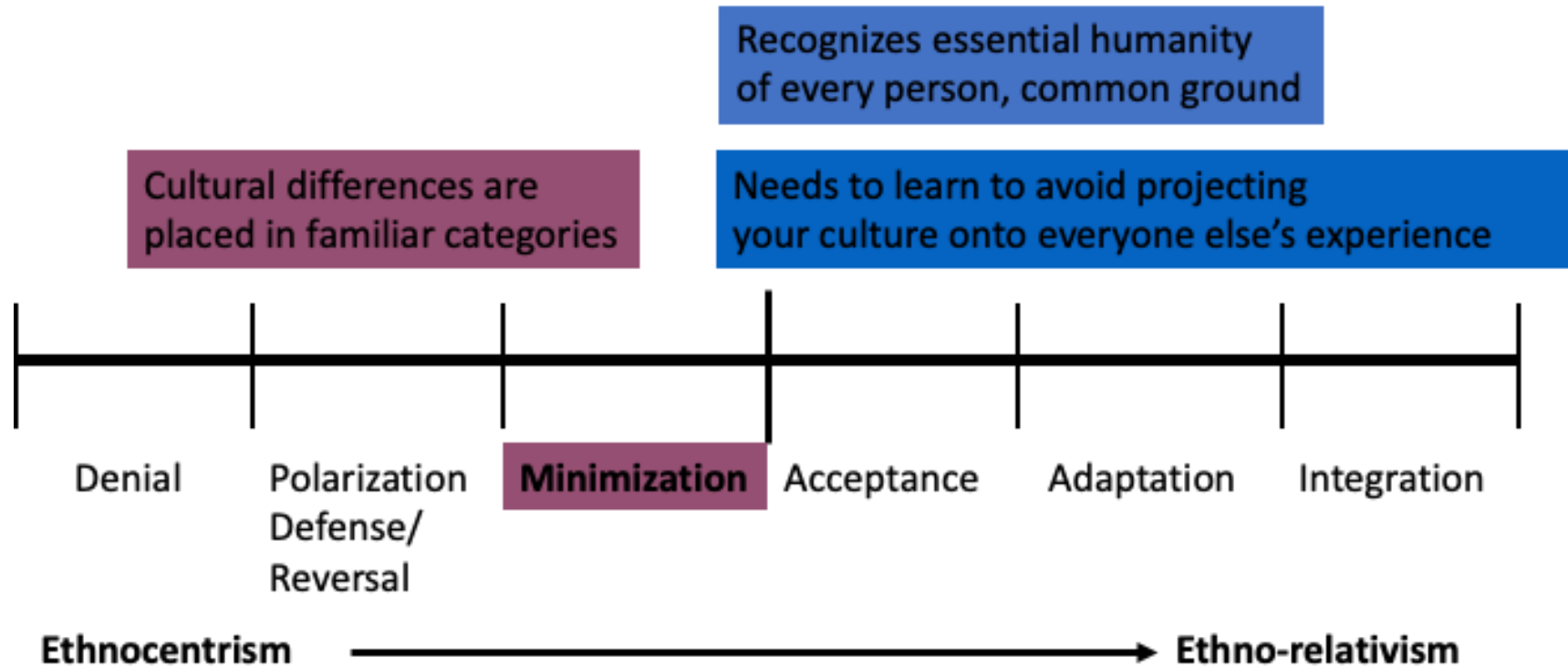
# Denial



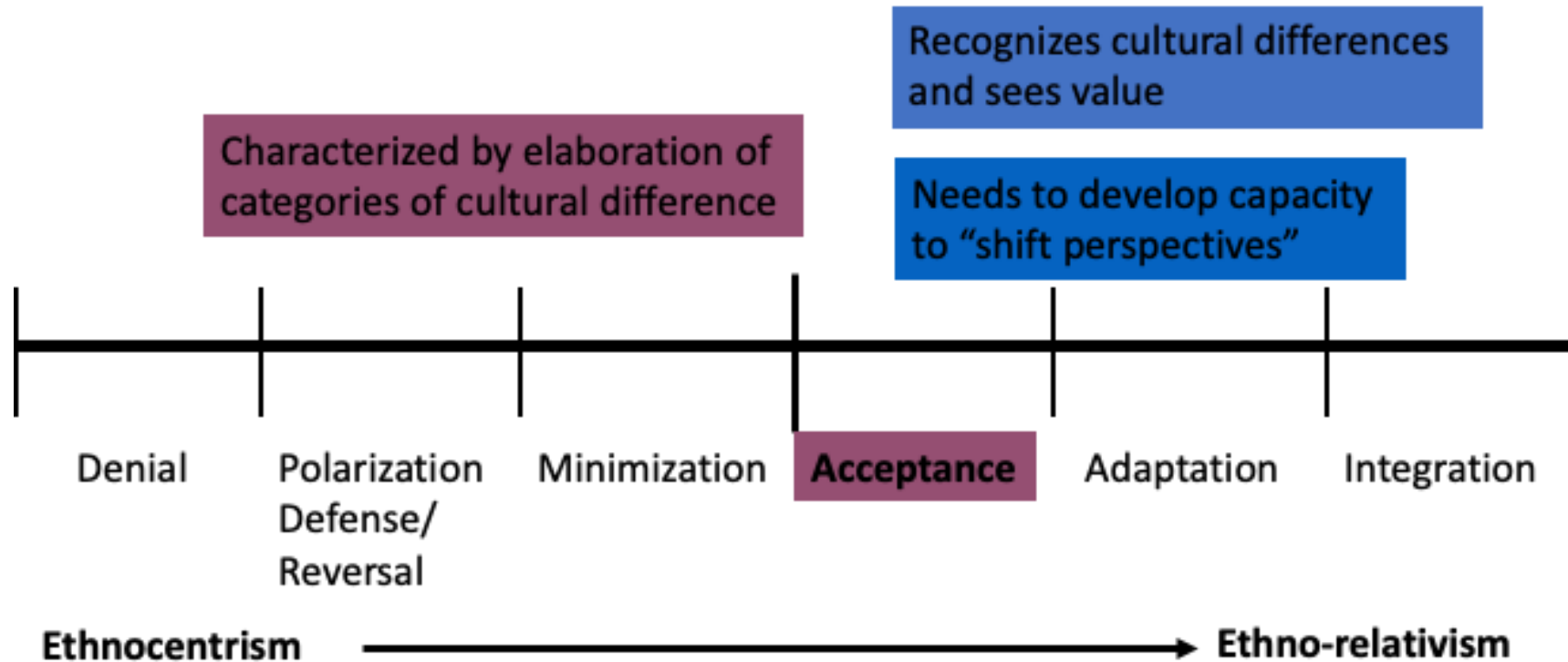
# Polarization



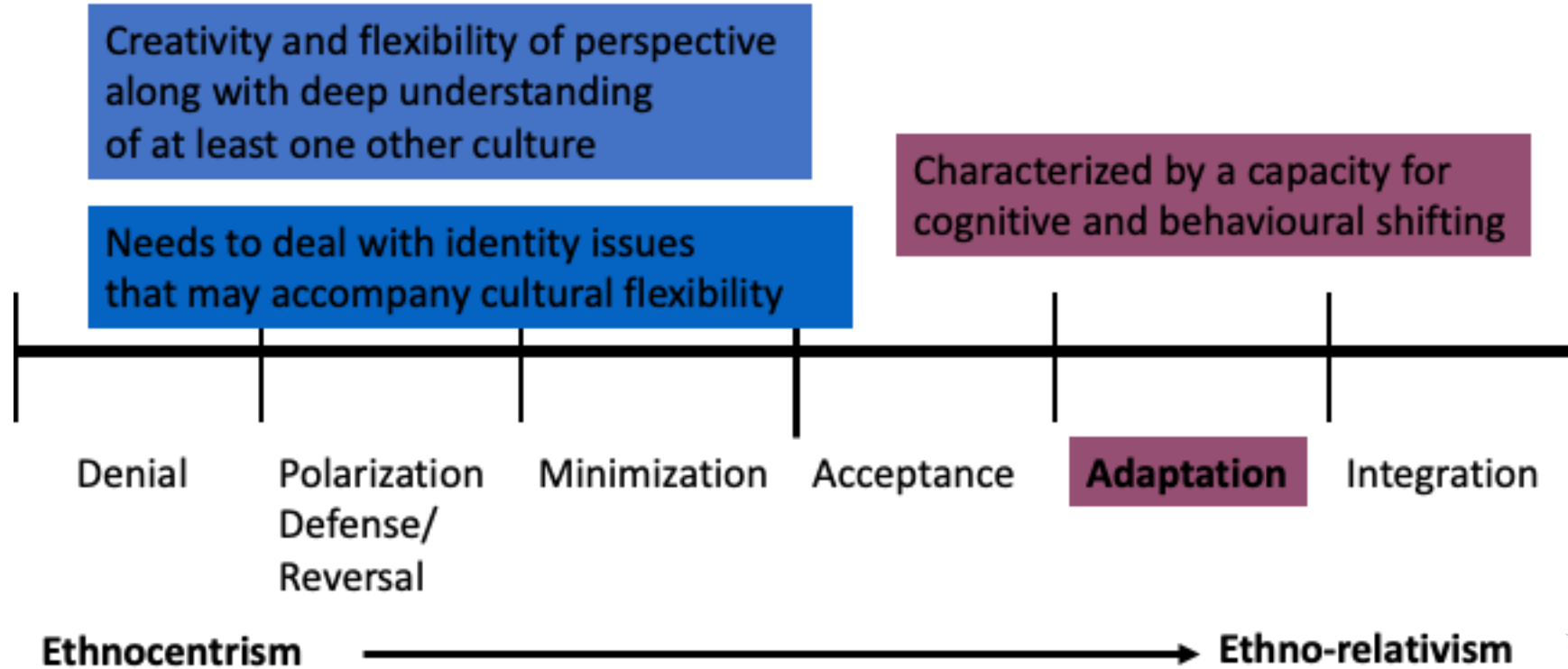
# Minimization



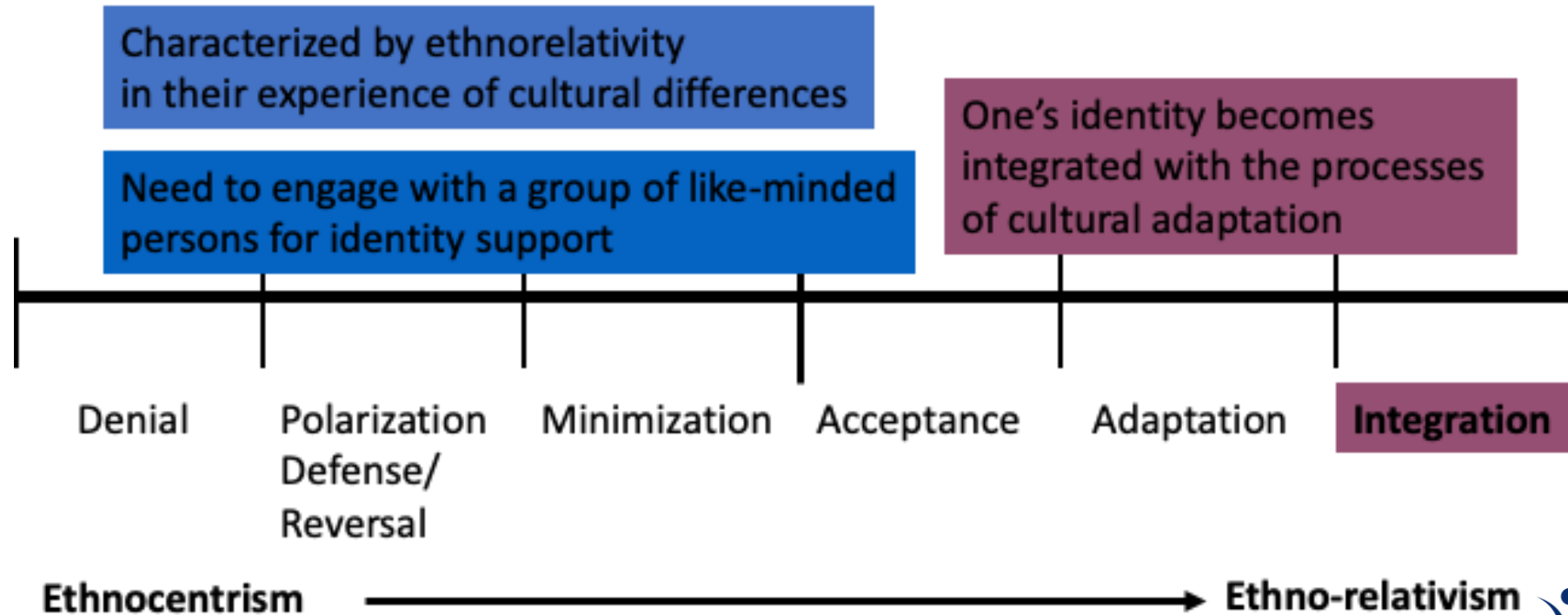
# Acceptance



# Adaptation



# Integration



# Delivering Culturally Competent Care

- ▶ Patient-centered focus
- ▶ Effective physician-patient communication
- ▶ Fact-centered and attitude/skill-centered approaches to acquiring cultural competence
- ▶ Acquisition of cultural competence as a developmental process
- ▶ Understanding alternative sources of care
  - ▶ Other health information and resources – traditional or folk health practices or remedies
  - ▶ Herbal remedies, acupuncture, massage, prayer rituals, traditional healers etc.
  - ▶ Not to be confused with alternative medicine which is based on traditional beliefs and practices that are integral to a person's culture

# Patient-Centered Focus

- ▶ Traditional western medical model focuses on treating a disease rather than the whole patient
- ▶ Focus on the patient rather than the person's cultural group characteristic or the disease.
- ▶ Interview to elicit patient's explanatory model



# Effective Physician-Patient Communication

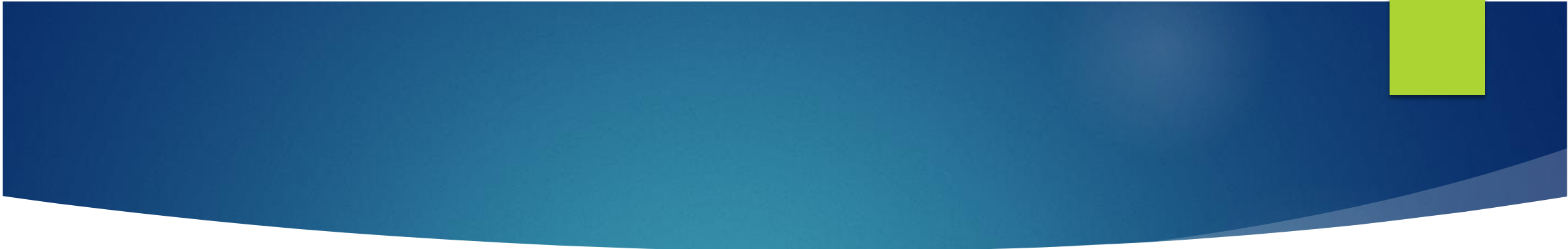
- ▶ **LEARN** Model (Berlin & Fowkes, 1983)
  - ▶ **Listen** with sympathy and understanding to the patient's perception of the problem
  - ▶ **Explain** your perceptions of the problem
  - ▶ **Acknowledge** and discuss the differences and similarities
  - ▶ **Recommend** treatment
  - ▶ **Negotiate** agreement

# Organizational Support

- ▶ Interpreter services
- ▶ Organizational training
- ▶ Use of community health workers
- ▶ Culturally competent health promotion
- ▶ Include family and/community members
- ▶ Immersion into another culture
- ▶ Administrative and organizational accommodations

# Summary

- ▶ Being inter-culturally sensitive
  - ▶ Developing it requires systematic and intentional training for a processing of experiences.
  - ▶ Lack of orientation and processing may produce little to no increase or has the potential to undermine the pre-experience developmental orientation.
- ▶ Cultural differences when misunderstood can lead to lack of trust and engagement
- ▶ Attention to cross cultural issues
- ▶ Use explanatory models- understand patient's perspective
- ▶ Patient based approach – assess core cross cultural issues, patient's explanatory model and understanding the social context and negotiate for a mutually acceptable approach



Thank You!  
&  
Questions?