

Provider perspectives on patients' culture and how culture impacts communication

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Purpose of the study

The purpose of the study was to:

1. Understand the experiences of health care providers giving care to refugee and immigrant patients
2. Identify policies and procedures that help and/or hinder the provider's ability to give care to refugee and immigrant patients



Methods

- Adult practicing health care providers and staff (N=35)
- Providers from Missouri
- Semi-structured interview guide and waiver of documentation of consent
- Interviews transcribed
- Content analysis

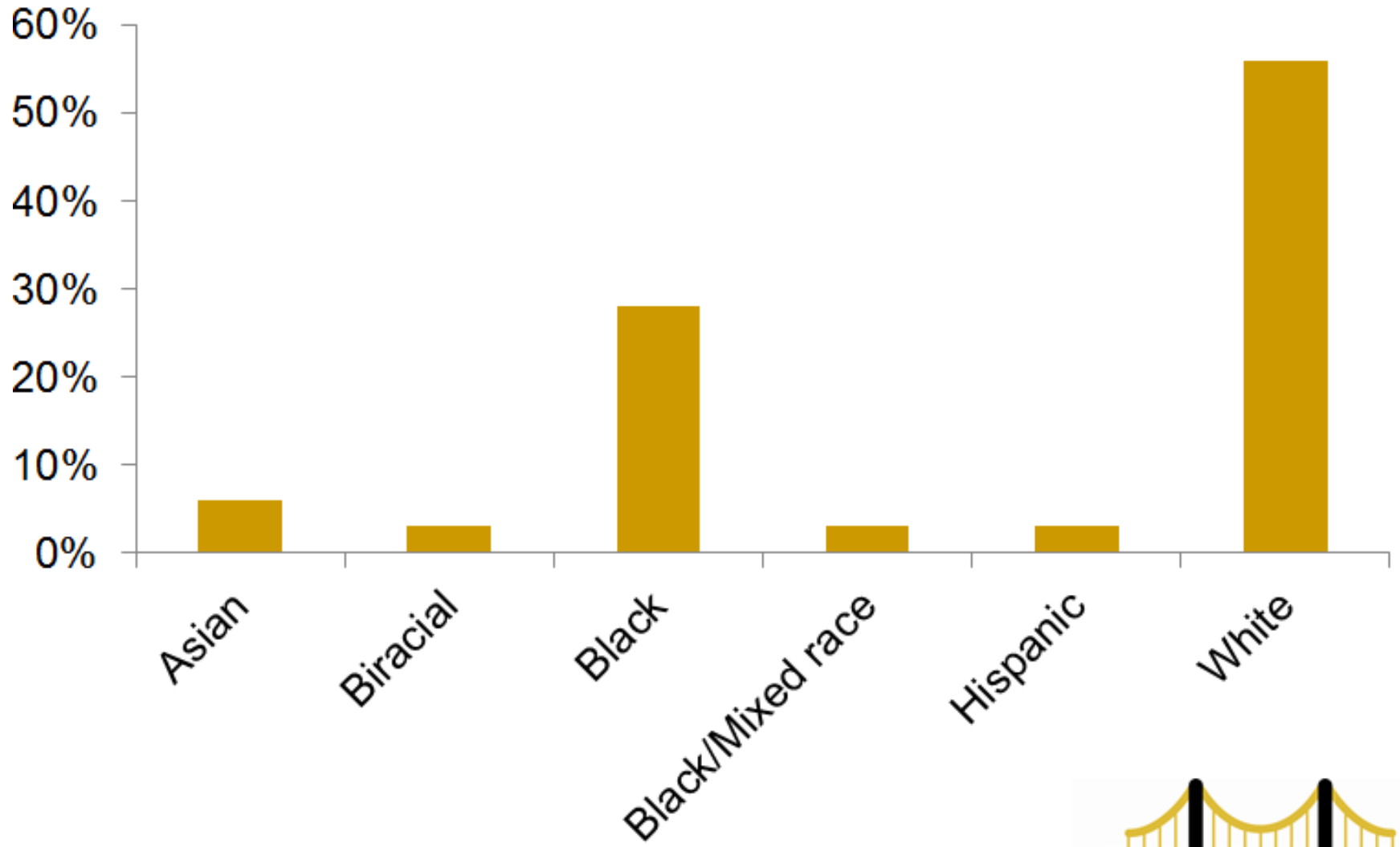


Demographics

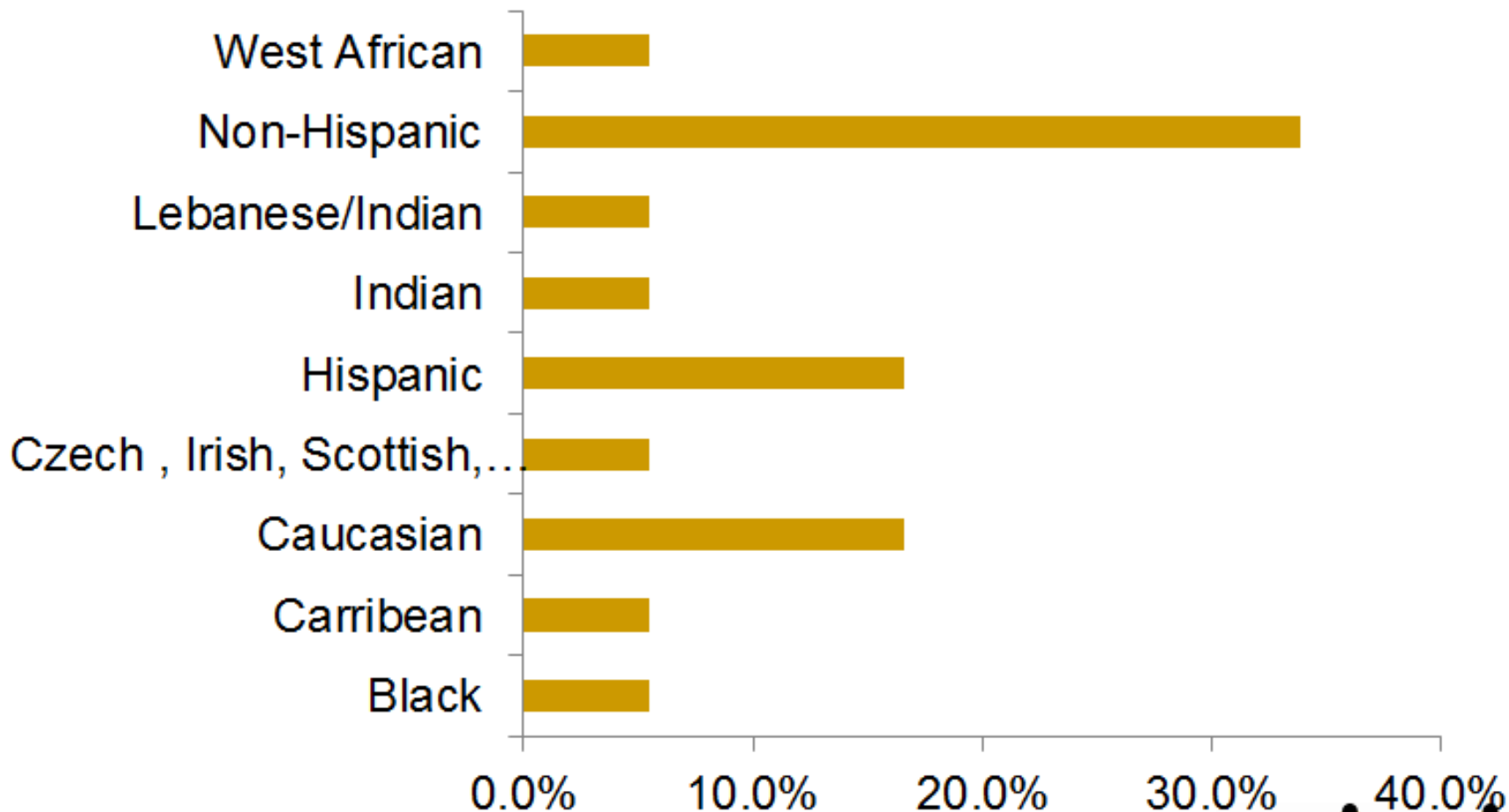
	Categories	N
Gender	Women	26
	Men	9
Age	20 to 29	5
	30 to 39	12
	40 to 49	8
	50 to 64	8
	65 and Older	1



Race



Ethnicity



	Categories	N
Health professions	Physician	7
	Resident	5
	Nurse provider	11
	Dental Assistant	1
	Medical Assistant	2
	Social Worker	2
	Behavioral Health Assistant	2
	Resource Financial Counselor	2
	Patient Access	2
	Perinatal/Ultrasound Technician	1
Health care setting	Hospital	8
	Outpatient clinic	15
	Hospital+Outpatient	7
	Other	5
Geographic setting	Urban	23
	Rural	12

Main themes

1. Communication and language
2. Patients' ability to access health care services
3. Policy recommendations to improve health care for immigrant and refugee patients



Culture

Patient's culture was identified as one of the main factors impacting the patient-provider communication.

Subthemes:

- Presence of a cultural gap between providers and their patients,
- Difficulty bridging the cultural gap
- Importance of cultural competency trainings in health professions schools and throughout



Presence of a cultural gap

- Missing language nuances and cultural aspects
- Patients are private about health care even with providers
- Awareness of tribal or ethnic conflicts
- Behavior & beliefs about accessing healthcare- different in other countries



Presence of a cultural gap

- Cultural norms
 - Respectful behavior
 - Family has an important role
 - Superstition about treatment
 - Use of traditional or herbal treatment
 - Working with lifestyle choices resulting in poor health outcomes



Presence of a cultural gap

- Impact treatment plan acceptance
 - Providers' understanding of cultural nuances promotes communication and can improve treatment adherence
 - Less gap as patient lives in US longer
 - Perception of distrust in western medicine for some patients
 - Expressed frustration when patients reject treatment plans.
 - Some are working with patients to look at ways to accommodate traditional practices and acknowledge it can build trust.



“ the gender dynamic that is different in other cultures too, where [it] is expected that...I’m a pediatric resident, so oftentimes, even though you’re communicating with the mother for information since she is generally the one who knows the information, oftentimes is left to the husband or the male individual in the family to make the decision which is interesting to me,

Sometimes I feel like I do impose my own culture on the families somewhat in that I encourage [decision making] to be a dialogue rather than a unilateral decision “



“What we have found in some of our immigrant populations is that, our Somali population as an example, we have a lot of difficulty with interventions where babies were having distress during labor, because they believe that in the US we do far too many [cesarean] sections, which is in fact absolutely true.

But, over the years, we found that the degree of cooperation has increased dramatically because we are no longer perceived as an institution that is going to do that [cesarean section], because of the experience with the community, our perception is that we take their concerns into account, that we respect their culture, and as a consequence, our cooperation has become much greater, and we rarely have confrontations.”

Challenges to exploring the cultural dimensions of the patient-provider relationships



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Cultural competency training

- Community involvement in medical education
- Reinforcement of cultural awareness trainings in practice
- Integrate culture in medical curriculum
- Resident rotations limit effectiveness of cultural awareness/humility trainings
- Steps to integrate cultural competency into the Medical School curriculum



“I think Missouri’s been really good to supply a lot of their information in English and Spanish. I think the biggest thing is just understanding the differences in culture. I still learn. Every meeting I attend, I still learn about different cultures and why they’re so different from the way we are.”



“I would need better information about their culture, I would like someone to tell me, not to tell me stereotypes but just give me some descriptive characteristics of that culture in that patient population. It is useful to know a few things, it is useful to know how people think about health, it is useful to know what other pieces of their world that they think about that relate to health we should be asking about to gain their trust.”



“I think one, having ample interpreter services I think is key. Two I think it would be helpful to have more education on cross cultural competence and I think also is helpful to have providers who are diverse themselves who can educate each other on different cultures and communities and how those navigate the health care system. Not only in communicating with these patients, but also educating their colleagues.”



Conclusions

- Inconsistent perspectives on providers need to understand the patient
 - Some put responsibility on patient
 - Others work to understand patient's needs
- Culturally competent care takes a lot of time.
 - Competing pressures—patient needs versus efficiency.
 - Need for institutional response



Conclusions

- Patients' attitudes about health care, their ability and willingness to understand, and make appropriate medical decisions are influenced by variety of factors, with culture being one of them.
- What is cultural competency?
 - Competing ideas in the literature have a direct impact on training and practice.



Conclusions

- ❑ Patients and their families bring cultural values and norms that will influence their understanding of health, symptoms, concerns about treatment and their expectations about health care.
- ❑ Understanding the culture of patients has the potential to improve patient-provider communication, which will improve patient understanding.



Acknowledgements

- Missouri Foundation for Health
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Thank you!
Questions?



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