

Cultural Competency Training for Healthcare Providers: Connecting with your patients

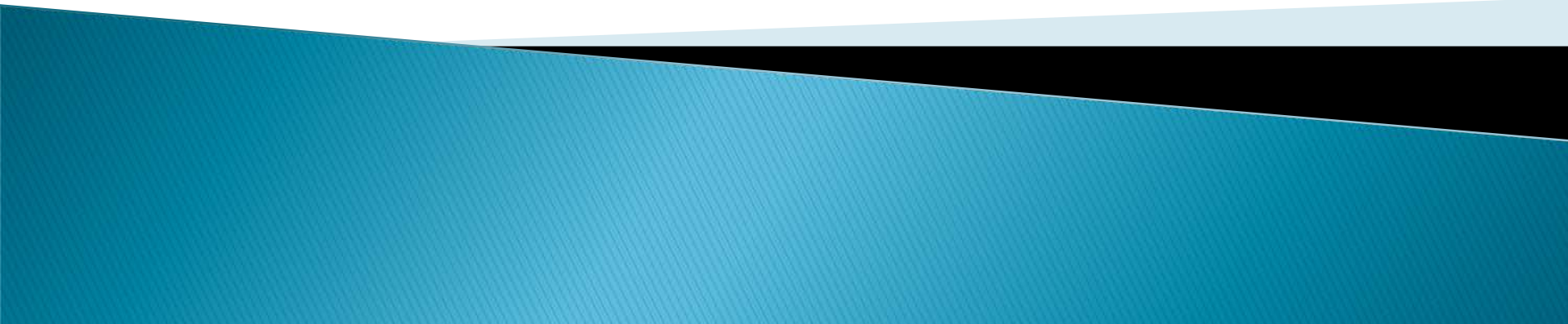


Developed By:
Industry Collaboration Effort (ICE)
Cultural and Linguistic Services Main Team
Cultural Competency Training Workgroup
Approved on January 18, 2013 by ICE Leadership

Training Goals

- ▶ Define culture and cultural competence
- ▶ Explain the three benefits of clear communication
- ▶ Explore and understand LGBT (lesbian, gay, bisexual, and transgender) communities
- ▶ Address health care for refugees and immigrants
- ▶ Reflect on strategies when working with seniors and people with disabilities

Culture and Cultural Competence



Defining culture and cultural competence



- ▶ **Culture** refers to integrated patterns of human behavior that include the language, thoughts, actions, customs, beliefs, values, and institutions that unite a group of people.

Adapted from <http://minorityhealth.hhs.gov>

- ▶ **Cultural competence** is the capability of effectively dealing with people from different cultures.

<http://minorityhealth.hhs.gov>



How does culture impact the care that is given to my patients?



- ▶ Culture informs:
 - concepts of health, healing
 - how illness, disease, and their causes are perceived
 - the behaviors of patients who are seeking health care
 - attitudes toward health care providers

Adapted from: <http://minorityhealth.hhs.gov>

Culture impacts every health care encounter



- ▶ Culture **defines** health care expectations:
 - who provides treatment
 - what is considered a health problem
 - what type of treatment
 - where care is sought
 - how symptoms are expressed
 - how rights and protections are understood



Because **health care is a cultural construct** based in beliefs about the nature of disease and the human body, **cultural issues are actually central in the delivery of health services.**

Clear Communication: The Foundation of Culturally Competent Care

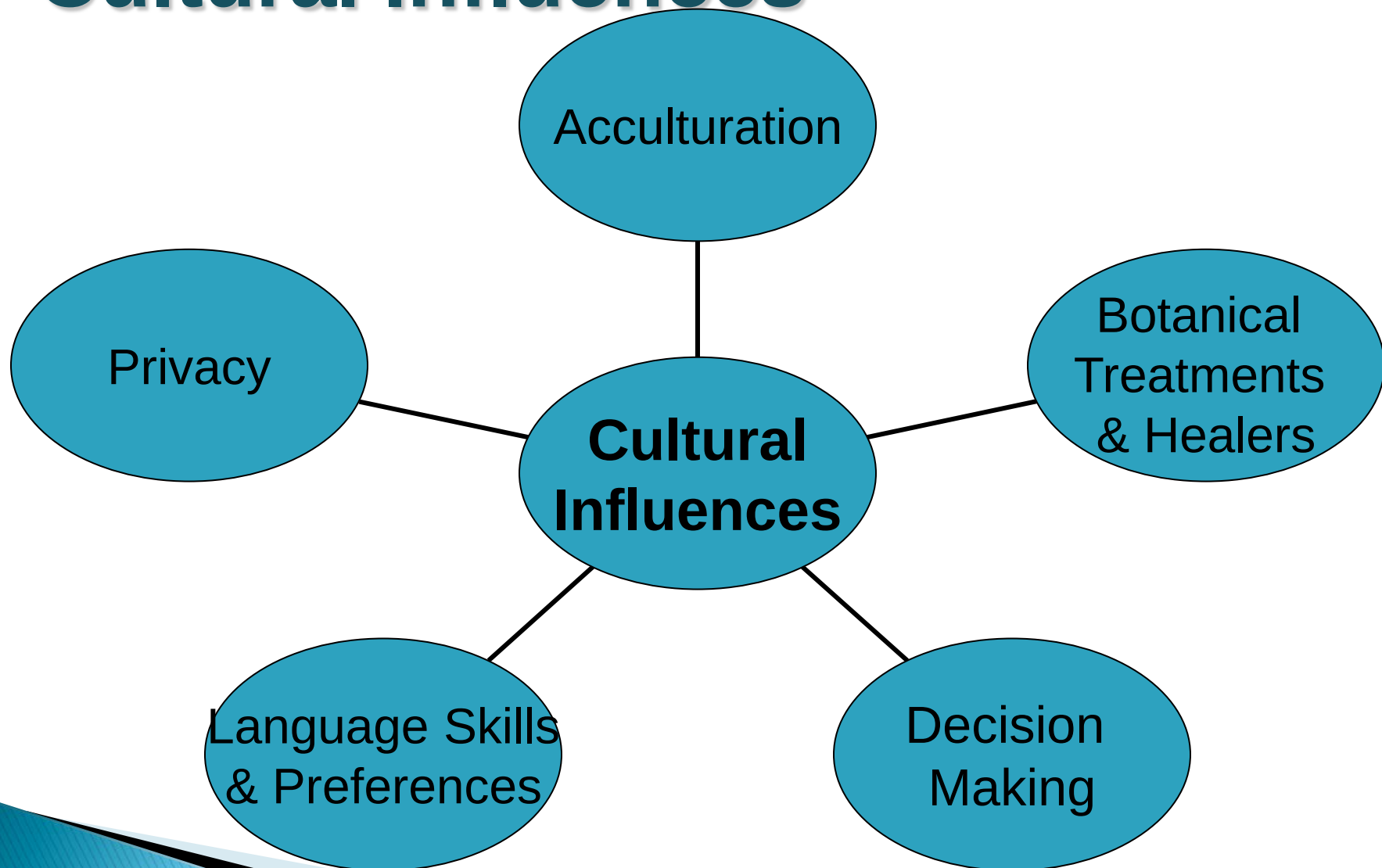
Did you know?

- ▶ 20% of people living in the U.S. speak a language other than English at home
- ▶ The Hispanic population has grown by 43% in the U.S. has grown between 2000 and 2010
- ▶ 17% of the foreign born population in the U.S. are classified as newly arrived (arriving in 2005 or later)
- ▶ 1 out of 2 adult patients has a hard time understanding basic health information
- ▶ Average physician interrupts a patient within the first 20 seconds

Clear Communication Benefits



Cultural Influences



Clear Communication

- ▶ I tell you I forgot my glasses because I am ashamed to admit I don't read very well
- ▶ I don't know what to ask and am hesitant to ask you
- ▶ When I leave your office I often don't know what I should do next
- ▶ Use a variety of instruction methods
- ▶ Encourage questions & use Ask Me 3™
- ▶ Use Teach Back



Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Clear Communication

- ▶ I put medication into my ear instead of my mouth to treat an ear infection.
- ▶ I am confused about risk and information given in numbers like % or ratios - how do I decide what I should do.
- ▶ Use specific, plain language on prescriptions
- ▶ Use qualitative plain language to describe risks and benefits, avoid using just numbers.

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Clear Communication

- ▶ My English is pretty good but at times I need an interpreter
- ▶ When I don't seem to understand, talking louder in English intimidates me
- ▶ If I look surprised, confused or upset I may have misinterpreted your nonverbal cues
- ▶ Office staff should confirm interpreter needs during scheduling
- ▶ Match the volume and speed of the patient's speech
- ▶ Mirror body language, position, eye contact
- ▶ Ask the patient if you are unsure

Here's What We Wish Our
Health Care Team Knew...

Here's What Your Team
Can Do....

Clear Communication

- ▶ I am not able to make important decisions by myself
- ▶ I am more comfortable with a female doctor
- ▶ Its important for me to have a relationship with my doctor
- ▶ I use botanicals and home remedies but don't think to tell you
- ▶ Confirm decision making preferences
- ▶ Office staff should confirm preferences during scheduling
- ▶ Spend a few minutes building rapport
- ▶ Ask about the use of home remedies & healers

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Interpreter Tips

- ▶ Inform the interpreter of specific patient needs
- ▶ Hold a brief introductory discussion
 - Your name, organization and nature of the call/visit
 - Reassure the patient about confidentiality
- ▶ Allow enough time for the interpreted sessions
- ▶ Avoid interrupting during interpretation

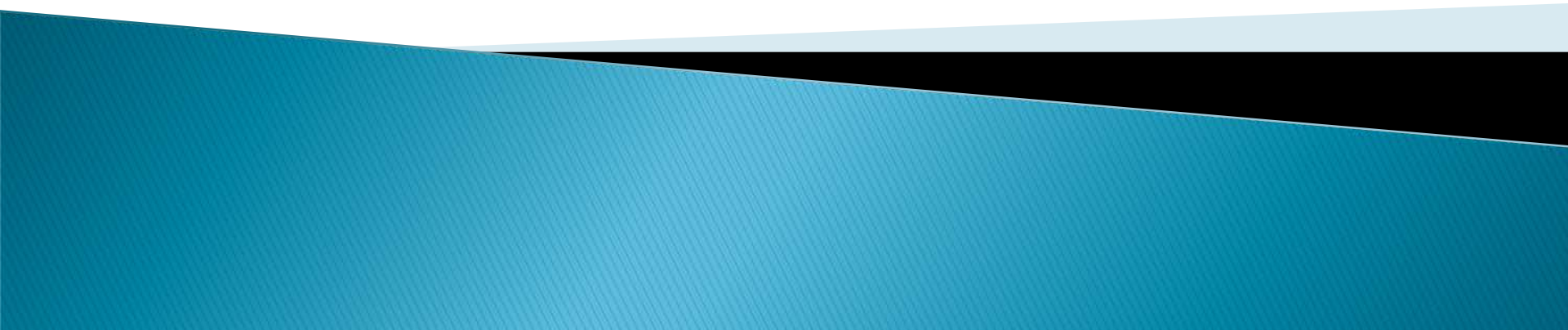


Interpreter Tips Continued

- ▶ Speak in the first person
- ▶ Speak in a normal voice, try not to speak fast or too loudly
- ▶ Speak in short sentences
- ▶ Avoid acronyms, medical jargon and technical terms
- ▶ Face and talk to the patient directly
- ▶ Be aware of body language in the cultural context

Cultural Competence & the LGBT* Communities

* (lesbian, gay, bisexual, and transgender)



Some LGBT Terminology

Orientation

- ▶ **Sexual Orientation:** A person's emotional, sexual, and/or relational **attraction** to others. Usually classified as heterosexual, bisexual, and homosexual (i.e. lesbian and gay).
 - Describes how people locate themselves on the spectrum of attraction and identity
 - It is distinct from gender identity or gender expression
 - Transgender people exhibit the full range of sexual orientations, from homosexual to bisexual and heterosexual

Some LGBT Terminology (cont'd)

Orientation (cont'd)

- ▶ **Bisexual:** One whose sexual or romantic attractions and behaviors are directed at both sexes to a significant degree. Bisexuality is a distinct sexual orientation
- ▶ **MSM:** Men who have sex with men. Usually identify as gay.
- ▶ **WSW:** Women who have sex with women. Usually identify as lesbian.

Some LGBT Terminology (cont'd)

Gender Identity

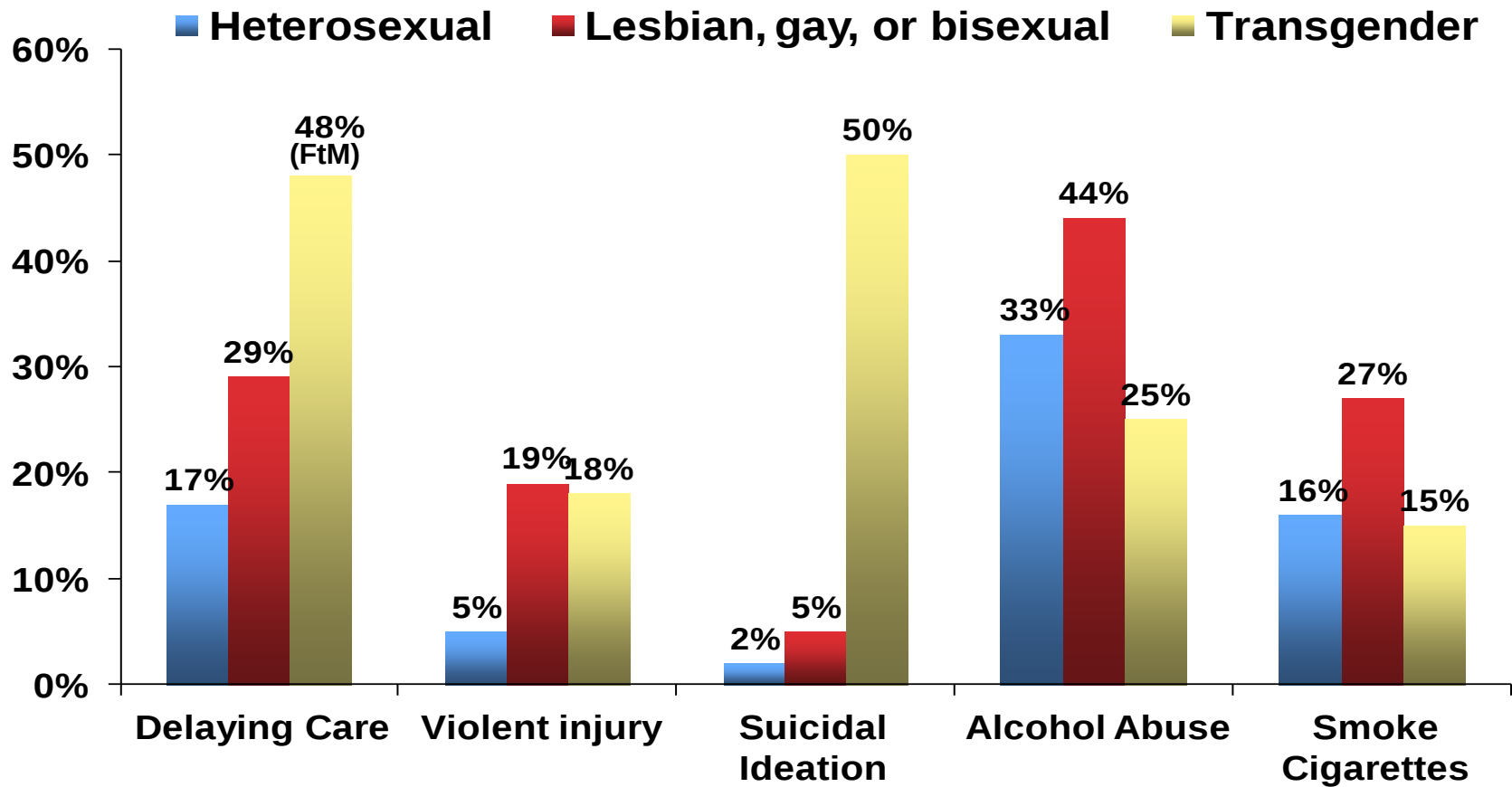
- ▶ **Transgender:** Describes people whose gender identity and/or expression is different from that typically associated with their assigned sex at birth.
- ▶ **Genderqueer:** Describes people who sees themselves as outside the usual binary man/woman definitions.
 - Having elements of many genders, being androgynous or having no gender.
 - Also **Gender Non-Conforming (GNC)**
- ▶ **Bigender:** Describes people whose gender identity encompasses both male and female genders. Some may feel that one identity is stronger, but both are present.

Some LGBT Terminology (cont'd)

Gender Identity (cont'd)

- ▶ **MtF:** Male-to-female; a person who was assigned the male sex at birth but identifies and lives as a female. Also trans woman.
 - MtF persons will still need to have prostate exams according to standard guidelines
- ▶ **FtM:** Female-to-male; a person who was assigned the female sex at birth but identifies and lives as a male. Also trans man or trans male.
 - FtM persons will need to have breast exams and Pap tests according to standard guidelines
- ▶ **Transsexual:** Medical term for people who have used surgery or hormones to modify their bodies. Some trans people find this term offensive.

Health Disparities of LGBT Populations



Cultural Competence & LGBT Communities



- ▶ We come to you with an extra layer of anxiety
 - Verbally or physically abused
 - Rejected by families due to our sexual and gender identity
 - Discriminated against within the health care setting
- ▶ We've experienced harshness such as with rough blood draws, rude "orders," or ridicule
- ▶ A little warmth can make all the difference!
 - Signage or intake form verbiage that is safe, judgment-free, and non-discriminatory
 - Policies indicating non-discrimination for sexual and gender identity displayed in common areas
- ▶ Listen to how patients refer to themselves and loved ones (pronouns, names)
 - Use the same language they use
 - If you're unsure, ask questions

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Cultural Competence & LGBT Communities



- ▶ That heteronormative assumptions and attitudes dissuade our future care-seeking
- ▶ Discrimination in healthcare may delay or defer treatment
- ▶ Anticipate that all patients are not heterosexual
 - Use “partner” instead of “spouse” or “boy/girlfriend”
 - Replace marital status with relationship status on forms



Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Cultural Competence & LGBT Communities



- ▶ We feel our HIPAA rights to privacy are not honored
 - Amazingly, some personnel...
 - Openly discuss our sexual orientation or gender identity with coworkers
 - Don't realize or care that we can see or hear them making fun of us with coworkers
- ▶ Protect the patient's rights
 - Sharing personal health information, including sexual orientation or gender identity, is a violation of HIPAA
 - Confirm that the patient's rights are protected under the HIPAA Privacy Rule

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Cultural Competence & LGBT Communities



- ▶ Check your surprise, embarrassment, or confusion
 - Many do not disclose our sexual orientation or gender identity because we don't feel comfortable or we fear receiving substandard care
 - Your "gaydar" might be off when determining whether we might be LGBT – most of us don't fit the stereotypes
- ▶ Recognize that "coming **out**" to you does not mean we are "coming **on**" to you
- ▶ Identify your own LGBT perceptions and biases as a first step in providing the best quality care
- ▶ Practice some helpful phrases:
 - "Do you have sex with men, women, or both?"
 - "What pronoun do you prefer I use when referring to you?"
 - "I'm glad you shared that with me. I know that might have been difficult to tell me. Is there anything else in connection with your health care that I should know about?"

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Cultural Competence & LGBT Communities



- ▶ Transgender patients have specific health concerns
 - 19% have been refused treatment
 - May experience more trauma during removal of clothing or pelvic examinations
 - Not all transgender people want to use hormones or surgery to align with their confirmed gender
- ▶ Always use preferred name and pronouns, even when we are not in the room
- ▶ The topic of body modification activities should be approached with care
 - Do not let curiosity lead you to examine body parts that are not involved with the medical issue at hand



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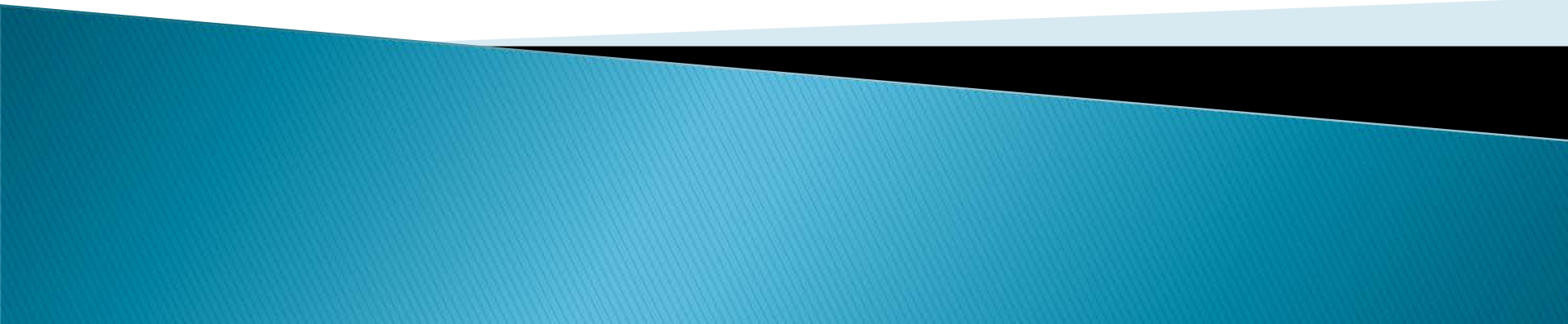
Cultural Competence & LGBT Communities



- ▶ The California Department of Public Health maintains a list of very helpful LGBT-related resources for:
 - Affordable Care Act
 - Census and LGBT Demographic Studies
 - Drug and Alcohol Abuse
 - Gender Identity
 - Health Disparities
 - HIV/AIDS
 - Homelessness
 - LGBT Health Resources
 - LGBT Health Organizations
 - LGBT Curriculum in Schools
 - Mental Health
 - Legal
 - Teen Health

<http://www.cdph.ca.gov/programs/OMH/Pages/LGBTResources.aspx>

Cultural Competence: Refugees and Immigrants

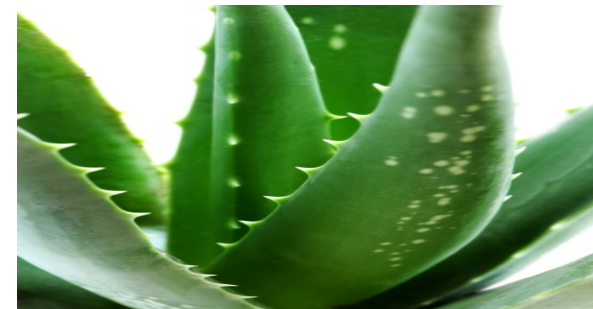


Health Care for Refugees and Immigrants



Refugees and Immigrants may:

- ▶ not be familiar with the U.S. health care system.
- ▶ experience illness related to life changes.
- ▶ practice spiritual and botanic healing or treatments before seeking U.S. medical advice.



Benefits of Open Communication for Recent Arrivals =



- ▶ Builds trust
- ▶ Results in fuller disclosure of patient knowledge and behavior



Addressing the U.S. Healthcare System

- ▶ My expectations do not align with U.S. managed care
- ▶ I'm bewildered by requirements to visit multiple doctors
- ▶ I wonder why I have diagnostic testing before a prescription is written
- ▶ Inform patients they may need follow up care
- ▶ Explain why a patient may need to be seen by another doctor
- ▶ Emphasize the importance of medication adherence

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Common Office Expectations

- ▶ I have different expectations about time
- ▶ I prefer to have someone of the same gender
- ▶ I'm going to bring friends or family. They want to help make decisions
- ▶ Upon arrival, inform patient about the wait time
- ▶ Accommodate a doctor or interpreter of same gender
- ▶ Confirm decision makers at each visit

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

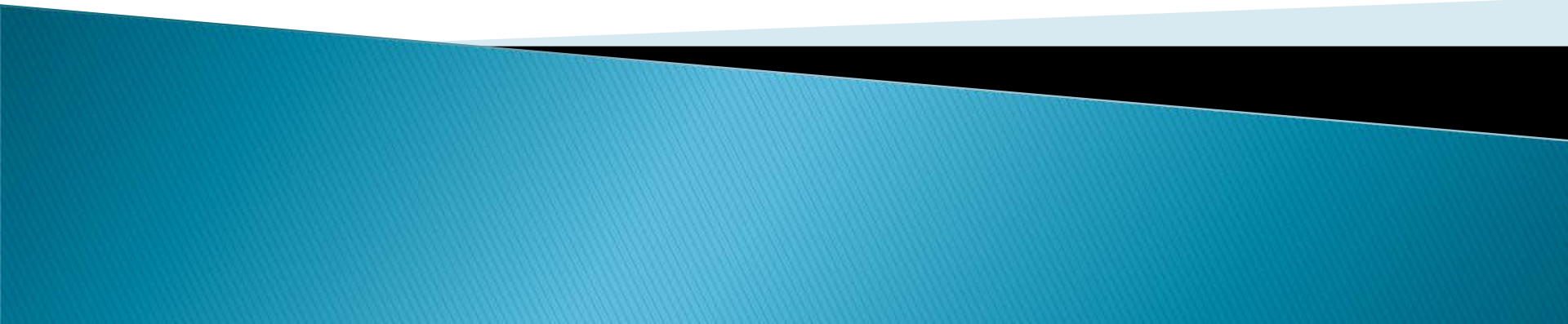
How to Address Confidentiality

- ▶ I've had different experiences in refugee camps
- ▶ My experiences have caused me to be suspicious
- ▶ I fear my health information will be released to the community
- ▶ Explain confidentiality
- ▶ Ensure that staff adhere to your policies
- ▶ Make HIPAA forms easy to understand, in preferred languages

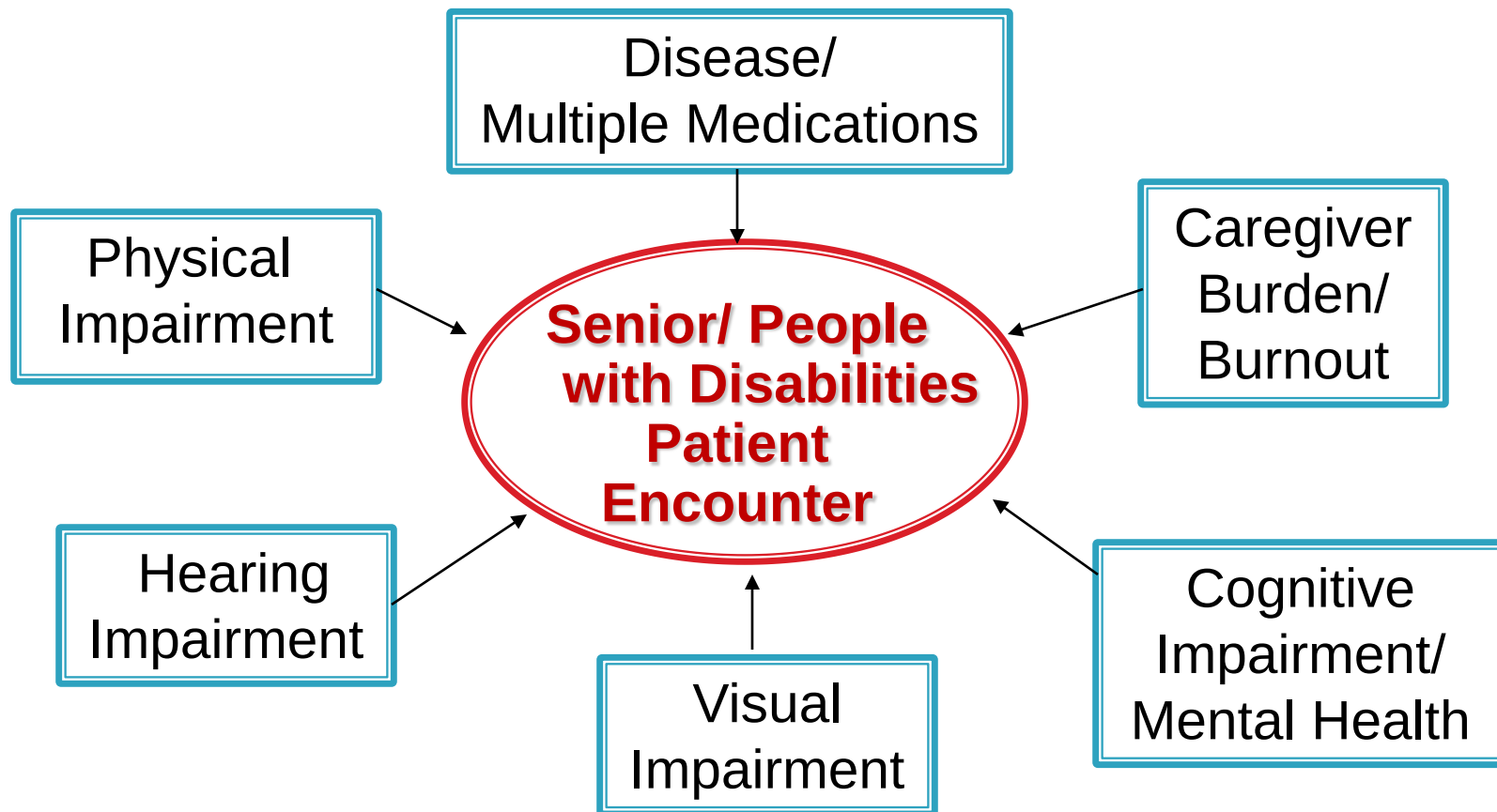
Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Cultural Competence: Seniors and People with Disabilities



Working with Seniors and Persons with Disabilities



Disease & Multiple Medications

- ▶ Neuro-cognitive processing ability impaired
 - Pain
 - Stroke
 - Hypertension, Diabetes
 - UTI, Pneumonia
- ▶ Meds: can affect cognition
 - Pain medication
 - Anti-depressants
 - Interactions
- ▶ Be aware
 - Slow down
 - Speak clearly
 - Use plain language
 - Recommend assistive listening devices
- ▶ Obtain thorough health history

Here's What We Wish Our
Health Care Team Knew...

Here's What Your Team
Can Do....

Caregiver Burden/Burnout

- **12% of active caregivers may have their own limitations**
- **16% of working seniors are also caregivers**
- ▶ Caregivers report more stress, higher likelihood of depression
- ▶ Ask about caregiver responsibilities and stress levels
- ▶ Offer caregiver support services

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Cognitive Impairment & Mental Health



- ▶ Patients with dementia may need caregiver
- ▶ Older adults suffer more losses
 - May be less willing to discuss feelings
 - High suicide rates for 65+
- ▶ Communicate with patient & caregiver
- ▶ Assess for depression, dementia/ cognitive ability

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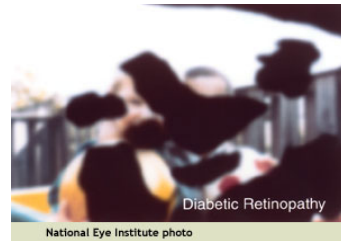
Here's What Your Team Can Do....

Visual Impairment

Macular
degeneration:



Diabetic
retinopathy:



Cataract:



Glaucoma:



Problems

- reading, depth perception, contrast, glare, loss of independence

Solutions

- decrease glare
- bright indirect lighting
- bright, contrasting colors
- LARGE, non-serif fonts



Hearing Impairment

Presbycusis: Gradual, bilateral, high-frequency hearing loss

- Consonant sounds are high frequency
- Word distinction difficult
- Speaking louder does NOT help

- ▶ Face patient at all times
- ▶ Speak slowly and enunciate clearly
 - Do not use contractions
- ▶ Rephrase if necessary
- ▶ Do not cover your mouth
- ▶ Reduce background noise
 - Air conditioner, TV, hallway noise etc.
 - Audible Solutions- offer listening devices

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Physical Impairment

Pain & reduced mobility is common due to:

- Osteoarthritis
- Changes in feet, ligaments and cushioning
- Osteoporosis
- Stroke

- ▶ Keep hallways clear
- ▶ Lower exam tables
- ▶ Add grab bars/railings
- ▶ Use exam rooms nearest waiting area
- ▶ Offer assistance – transfers, opening sample bottles, etc.
- ▶ Recommend in home accessibility assessment

Here's What We Wish Our Health Care Team Knew...

Here's What Your Team Can Do....

Thank you for participating

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Option for CMEs

- ▶ This training module will be made available on the SCAN Health Plan website with the opportunity for healthcare providers to obtain CME credits.
- ▶ Please check back during 2nd Quarter 2013 when additional information will be available on how to access the training through SCAN Health Plan's website.