

# Cultural Competency Training for Healthcare Providers:

Connecting with your patients



Adapted from :  
**Cultural Competency Training for  
Healthcare Providers**

by:  
**Industry Collaboration Effort (ICE)  
Leadership**



# Training Goals

- Define culture and cultural competence
- Explain the 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.
- **Cultural competence** is the capability of effectively dealing with people from different cultures.
- <http://minorityhealth.hhs.gov>
- Adapted from <http://minorityhealth.hhs.gov>



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

- Culture influences:
  - 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



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

**Next Section**

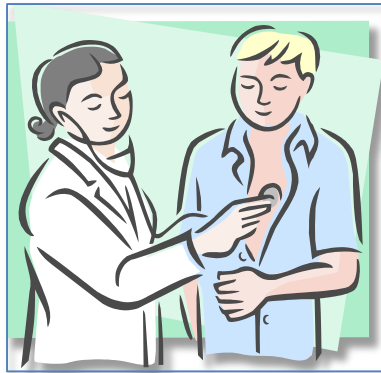


**Clear Communication**

# Clear Communication:

THE FOUNDATION OF CULTURALLY COMPETENT

CARE

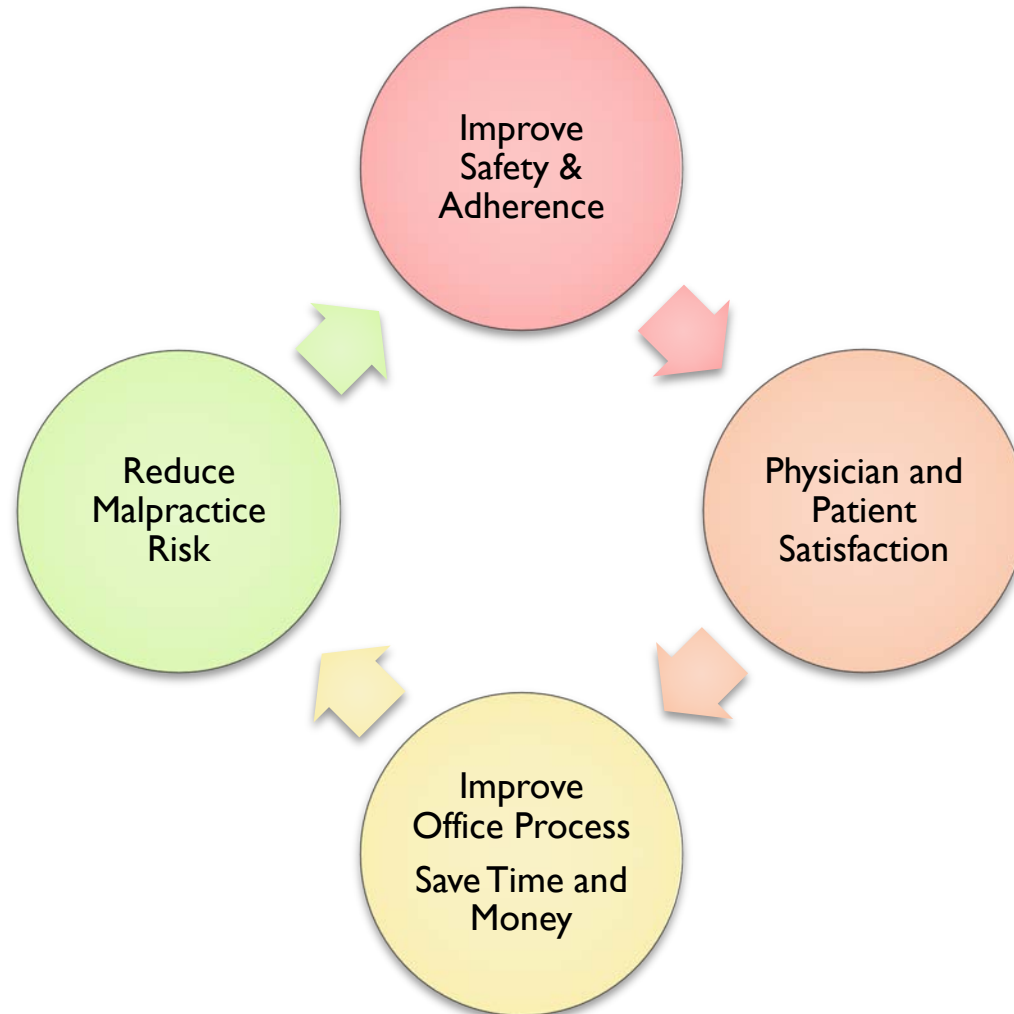




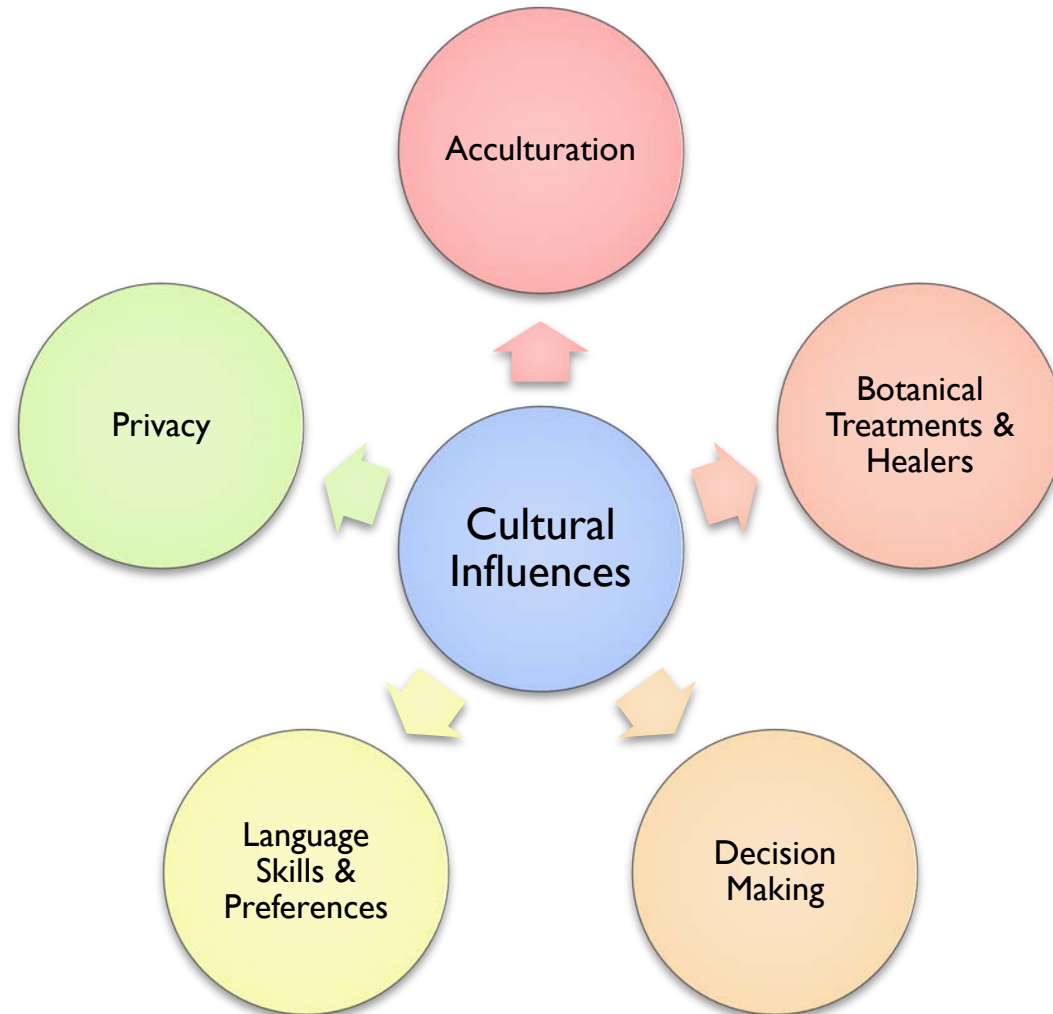
# Did you know?

- 20% of people living in the U.S. speak a language other than English at home
- The Hispanic population in the U.S. grew by 43% from 2000 to 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
- The average physician interrupts a patient within the first 20 seconds

# Clear Communication Benefits



# Cultural Influences



# Clear Communication

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

- 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 I'm hesitant to ask you.
- When I leave your office I often don't know what I should do next.

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

- Use a variety of instruction methods.
- Encourage questions & use Ask Me 3™.
- Use Teach Back.



# Clear Communication

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

- 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?

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

- Use specific, plain instructions on prescriptions.
- Use descriptive language, in layperson's terms, to describe risks and benefits. Avoid using just numbers.

# Clear Communication

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

- 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.

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

- Confirm interpreter needs during scheduling.
- Match the volume and speed of the patient's speech.
- Mirror body language, position, eye contact.

# Clear Communication

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

- 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.

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

- Confirm decision making preferences.
- Identify preferences during scheduling.
- Spend a few minutes building rapport.
- Ask about the use of home remedies & healers.

# 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 session
- Avoid interrupting during interpretation



# Interpreter Tips

- Speak in the first person
- Speak in a normal voice, not too fast or loud
- 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

**Next Section**



**LGBT Communities**

# Cultural Competence & the LGBT\* Communities

\* LESBIAN, GAY, BISEXUAL, AND TRANSGENDER



# LGBT Terminology: Sexual Orientation

- A person's emotional, sexual, and/or relational attraction to others. It describes how people locate themselves on the spectrum of attraction and identity.
- It is distinct from gender identity or gender expression.
  - **Heterosexual:** One who is attracted to others of the opposite sex, often identified as straight.
  - **Homosexual:** One who is attracted to others of the same sex, often identified as gay or lesbian.
  - **Bisexual:** One who is attracted to others of both sexes to a significant degree. It is considered a distinct sexual orientation.
- Transgender people exhibit the full range of sexual orientations.

# LGBT Terminology:

## Gender Identity

- A person's private sense and subjective experience of their own gender.
  - **Transgender:** Describes people whose gender identity is different from that typically associated with their physical anatomy. Routine exams and tests are conducted according to their anatomic condition.
  - **Transsexual:** Medical term for people who have used surgery or hormones to modify their bodies. This term may be considered offensive by some.
  - **Bigender:** Individuals whose identity encompasses both male and female genders. Some may experience a dominant identity, but both are present.
  - **Genderqueer:** Describes people who see themselves as outside the usual binary male/female definitions. They may have elements of many genders, being androgynous or having no gender.

# Cultural Competence & LGBT Communities

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

- Your assumptions and attitudes can dissuade our future care-seeking
  - Discrimination in healthcare may delay or defer treatment
- We feel our HIPAA rights to privacy are not honored. We have experienced:
  - Employees openly discussing our sexual orientation or gender identity with coworkers
- We come to you with an extra layer of anxiety
  - Verbally or physically abused
  - Rejected by families due to our sexual and gender identity

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

- Anticipate that not all patients are heterosexual
  - Post non-discrimination policies in common areas
  - Use judgment-free signage and forms
- Protect the patient's rights
  - Sharing personal health information, including sexual orientation or gender identity is a violation of HIPAA
- A little warmth can make all the difference!
  - Mirror how patients refer to themselves and loved ones.
  - Use "partner" instead of "spouse" or "boy/girlfriend"

# Cultural Competence & LGBT Communities

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

- Many do not disclose sexual orientation or gender identity for fear of receiving substandard care.
- Your “gaydar” might be off. Most of us don't fit a stereotype.
- Recognize that “coming out” to you does not mean we are “coming on” to you.



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

- Identify your own LGBT perceptions and biases as a first step in providing the best quality care.
- Check your surprise, embarrassment, or confusion.
- Practice neutral language
  - Replace marital status with relationship status on forms
  - “How would you like me to address and/or refer to you?”
  - “I'm glad you shared that with me; it might have been difficult. Is there anything else regarding your health care that I should know?”

# Cultural Competence & LGBT Communities

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

- Transgender patients have specific health concerns.
- May experience more trauma during removal of clothing or physical examination.
- Not all transgender people want to use hormones or surgery to align with their affirmed gender.

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

- Learn about the unique health care needs of LGBT individuals.
- Perform physical exam only when medically appropriate.
- Approach the topic of body modification with care and sensitivity.



# Cultural Competence & LGBT Communities

The California Department of Public Health maintains a list of helpful LGBT-related resources

- Affordable Care Act
- Census and LGBT Demographic Studies
- Drug and Alcohol Abuse
- Gender Identity
- Health Disparities
- HIV/AIDS
- Homelessness
- Legal
- LGBT Health Resources
- LGBT Health Organizations
- LGBT Curriculum in Schools
- Mental Health
- Teen Health

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

Next Section



Refugees and Immigrants

# Cultural Competence:

## REFUGEES AND IMMIGRANTS



# Healthcare for Refugees and Immigrants

## **Refugees and Immigrants:**

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

## **Open Communication with Recent Arrivals**

Builds trust and results in fuller disclosure of patient's understanding and behavior

# Healthcare for Refugees and Immigrants

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

- My expectations do not align with U.S. managed care
- I'm bewildered because I have to visit multiple doctors
- I wonder why I have diagnostic testing before a prescription is written

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

- Assist patient in connecting with the health plan
- Explain why a patient may need to be seen by another doctor
- Emphasize the importance of determining the correct medication



# Common Office Expectations

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

- I have different expectations about time.
- I prefer to have a practitioner of the same gender.
- I'm going to bring friends or family. They want to help make decisions.

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

- Upon arrival, inform patient about the wait time.
- Schedule with a practitioner or interpreter of same gender.
- Confirm decision makers at each visit.



# Addressing Confidentiality

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

- 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

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

- Explain confidentiality
- Ensure that staff adhere to your policies
- Make HIPAA forms easy to understand, in preferred languages



Next Section



Seniors and Persons with Disabilities



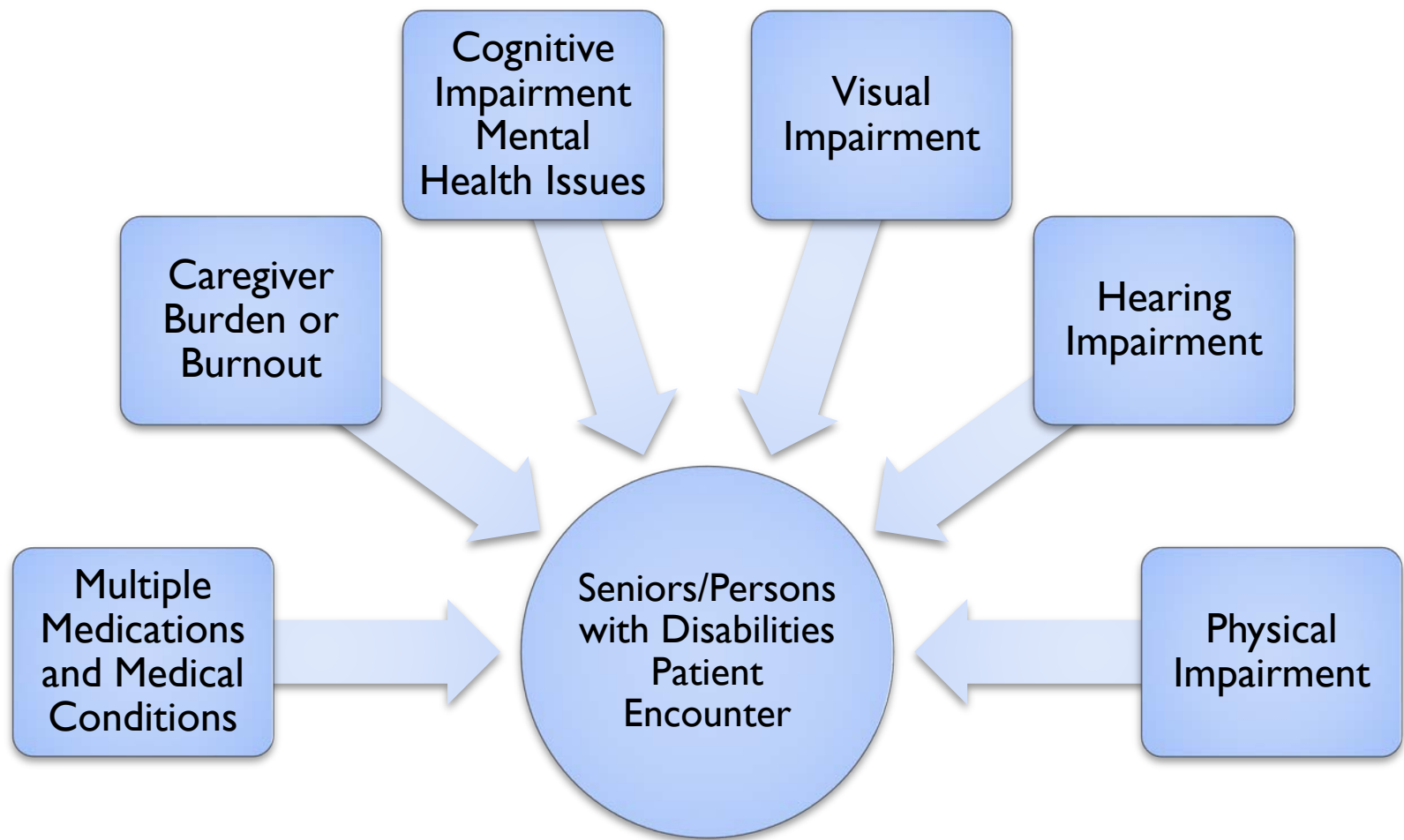
# **Cultural Competence:**

## **SENIORS AND PEOPLE WITH**

### **DISABILITIES**



# Working with Seniors and Persons with Disabilities



# Information Processing

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

- Information processing may be impaired
  - Pain, Stroke
  - Hypertension, Diabetes
- Medications can affect cognition
  - Pain medication, Anti-depressants
  - Drug Interactions
- Older adults have suffered losses
  - May be less willing to discuss feelings
- Patients with dementia may need caregiver

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

- Be aware; slow down
  - Speak clearly
  - Use plain language
- Obtain thorough health history
- Assess for depression, dementia, cognitive ability
- Communicate with patient & caregiver

# Visual Impairment

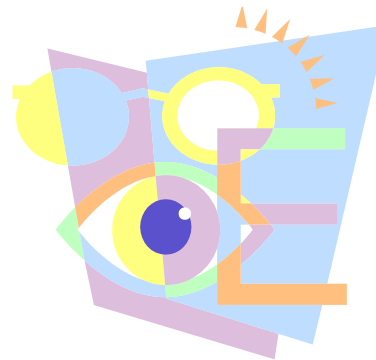
Here's What We Wish Our Health Care Team Knew...

Macular degeneration, Diabetic Retinopathy, Cataract, and Glaucoma other issues can cause problems with:

- Reading
- Depth perception
- Glare
- Loss of independence

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

- Decrease glare
- Use bright, indirect lighting, bright contrasting colors
- Large, non-Serif fonts on forms and documents



# Hearing Impairment

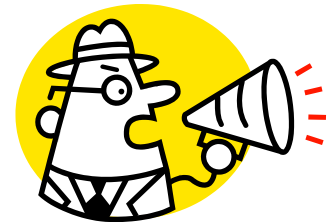
## Here's What We Wish Our Health Care Team Knew...

- Presbycusis: Gradual, bilateral, high-frequency hearing loss
- Consonant sounds are high frequency
- Word distinction is difficult

**SPEAKING LOUDER DOES NOT HELP!**

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

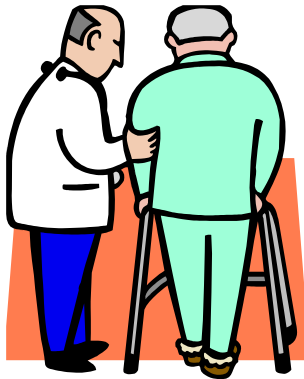
- Face patient at all times
- Speak slowly and enunciate clearly
- Do not use contractions
- Rephrase if necessary
- Do not cover your mouth
- Reduce background noise
- Recommend listening devices if appropriate



# Physical Impairment

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

- Pain & reduced mobility is common due to:
  - Osteoarthritis, Osteoporosis
  - Changes in feet, ligaments and cushioning
  - Stroke



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

- 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

# Caregiver Burden/Burnout

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

- 12% of active caregivers may have their own limitations
- 16% of working seniors are also caregivers
- Caregivers report more stress, higher likelihood of depression

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

- Ask about caregiver responsibilities and stress levels
- Offer caregiver support services



# REFERENCES



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## **Cultural Competence: Seniors and People with Disabilities**

- California Caregiver Resource Centers (2005). *California Caregiver Resource Centers*. Retrieved from <http://www.cacrc.org>
- Family Caregiver Alliance (FCA) Retrieved from <https://caregiver.org>

## **Option for CMEs**

The original version of this presentation was developed by the Industry Collaboration Effort (ICE) leadership. It is available with the opportunity for healthcare providers to obtain CME credits.

Visit <http://www.scancme.com> for more information.

# Acknowledgements

The ICE Cultural and Linguistic Cultural Competency Training Work Group would like to acknowledge the individuals listed below for the knowledge they shared in the creation of the materials for the training. Each member contributed their time, experience and skills to the process of developing and testing the resources contained in this training.

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# Attestation

- Providers are expected to ensure employees receive training to increase their cultural competency and improve communications with patients.
- Documentation of participation should be retained in a designated location at the practice site.
- Use one of your own choosing or the one on the PHC website: [http://www.partnershiphp.org/Provider/MC\\_ProviderHealthED.htm](http://www.partnershiphp.org/Provider/MC_ProviderHealthED.htm)
- It is to be shared upon request of PHC or DHCS employees during Facility Site Review.

# Questions?

- Contact PHC's Health Educator if you have questions related to this topic.
- (707) 863-4256
- [www.partnershiphp.org](http://www.partnershiphp.org)

Thank you for attending!