

Key Point
Summary

Module 3—Cultural Competency

The key points to take away from this module are:

-  Culture refers to a group or community with which we share common experiences that shape the way we understand the world
-  Culture includes groups that we are born into, such as gender, race, national origin, class, or religion; and the social groups that influence our self-identity, including sexual orientation, age, disability, and socioeconomic status
-  We all belong to many cultures at once
-  Culture is a central issue in people's lives. It influences their views, their values, their humor, their hopes, their loyalties, and their worries and fears
-  A person's culture can affect:
 - ◆ How health care information is received
 - ◆ How rights and protections are exercised
 - ◆ What is considered to be a health problem
 - ◆ How symptoms and concerns about the problem are expressed
 - ◆ Who should provide treatment for the problem
 - ◆ What type of treatment should be given
-  Culture can have a real impact on health communication
 - ◆ Patients may choose not to access needed services for fear of being misunderstood or disrespected
 - ◆ Providers may make diagnostic errors resulting from miscommunication
 - ◆ Patients may not adhere to medical advice because they do not understand or do not trust the provider
 - ◆ Providers may order fewer or more diagnostic tests for patients of different cultural backgrounds because they may not understand or believe the patient's description of symptoms

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-  Culture is expressed through individuals
-  Culture is impacted by the following personal factors:
 - ◆ Personality
 - ◆ Gender
 - ◆ Age
 - ◆ Sexual orientation
 - ◆ Experience/time
 - ◆ Level of ability (physical and mental ability)
-  Culture changes—A person’s culture is not a static trait; it changes and adjusts over time
-  Cultural competency is —set of attitudes, skills, behaviors, and policies that enable organizations and staff to work effectively in cross-cultural situations. It reflects the ability to acquire and use knowledge of the health- related beliefs, attitudes, practices, and communication patterns of clients and their families to improve services, strengthen programs, increase community participation, and close the gaps in health status among diverse population groups”
-  Culturally competent providers consistently and systematically:
 - ◆ Understand and respect their patients’ values, beliefs, and expectations
 - ◆ Understand the cause and control of specific diseases and the effectiveness of treatments in different population groups
 - ◆ Adapt the way they deliver care to each patient's needs and expectations
-  Every patient-provider encounter is a cross-cultural encounter.
-  The benefits of culturally competent care include:
 - ◆ Reduced health disparities
 - ◆ Improved health communication and health outcomes
-  The cultural factors that can influence the quality of patient-provider communication include:
 - ◆ Personal biases
 - ◆ Non-verbal communication
 - ◆ Patients’ families
 - ◆ Cultural values and beliefs

Key Point Summary

- 🔑 Approaches to developing cultural competency fall into two categories
 - ◆ Fact-centered
 - ◆ Attitude/skill-centered

- 🔑 Models used to help promote culturally competent communication between you and your patients include:
 - ◆ BATHE Model
 - ◆ CRASH Model
 - ◆ ESFT Model
 - ◆ ETHNIC Model
 - ◆ Kleinman's Nine Questions
 - ◆ LEARN Model

- 🔑 Cultural competency is a state, not an end point

- 🔑 Two frameworks to help you assess your cultural competency development are:
 - ◆ Cultural Competency Framework
 - ◆ Seven Stages of a Developmental Model of Ethno sensitivity for Family Practice

- 🔑 The Cultural Competency Framework focuses on four areas important for cultural competency development:
 - ◆ Intercultural concepts
 - ◆ Intercultural knowledge
 - ◆ Intercultural skills
 - ◆ Intercultural attitudes

- 🔑 Seven Stages of a Developmental Model of Ethno sensitivity for Family Practice Training provides a progressive, seven-stage model of cultural competency development:
 - ◆ Stage 1: Fear
 - ◆ Stage 2: Denial
 - ◆ Stage 3: Superiority
 - ◆ Stage 4: Minimization
 - ◆ Stage 5: Relativism
 - ◆ Stage 6: Empathy
 - ◆ Stage 7: Integration