

# Provider Cultural Competency Training

## Expected Beneficial Outcomes



1. Increased cultural understanding and skills
2. The importance and need for cultural understanding

Cultural Competency requires a commitment from health care providers to be responsive to the different attitudes, verbal cues, and body language from the patient they are caring for



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# Cultural Competency and Healthcare

In healthcare, cultural competency describes the ability to provide care to patients with diverse values, beliefs and behaviors, including tailoring healthcare delivery to meet patients' social, cultural and linguistic needs.



# Cultural Competency and Healthcare

Cultural competence can be defined as the willingness and ability of a provider to value the importance of culture and to display that value in the delivery of care and services.

There are many different cultural influences that may impact the way our members:

1. Define, evaluate and communicate their problems.
2. Seek help for their problems.
3. Present their problems to a provider.
4. Respond to their care plans.



# Importance of Cultural Competence in Health Care

Cultural competence significantly benefits healthcare providers and patients alike. It results in greater patient participation and engagement, creating increased respect and improved understanding, which can lead to:

- ✓ Increased patient safety
- ✓ Reduced inefficiencies
- ✓ Reduced care disparities
- ✓ Decreased costs

Culture and language may influence:

- Belief systems about health, healing, and wellness.
- Perceptions of illness and disease as well as their causes.
- Attitudes toward health-care providers; attitudes toward patients.
- Health status and health outcomes.



# Importance of Cultural Competence in Health Care

Being culturally effective implies having the ability to function competently and respectfully as an individual and as an organization within the context of the cultural beliefs, behaviors, and needs presented by patients and their communities.

Components of culturally Competency:

1. Self-Awareness: Awareness of our own cultural worldview and it affects our decision making.
2. Openness: Acknowledging cultural differences exists.
3. Knowledge: Acquiring knowledge of different cultural practices and worldviews.
4. Compassion: Accepting and respecting different cultural backgrounds, customs, values and ways of communicating.
5. Humility: Cultural competency is a lifelong process. We will fail at times. Our commitment to self-improvement and understanding is vital.

As you go through this presentation, think about your own patients and how their culture and language may influence their perception of illness and diseases, as well as their causes. What are your patient's belief systems about health, healing and wellness? And how may their attitudes toward health-care providers impact care as well as your own attitudes towards patients?





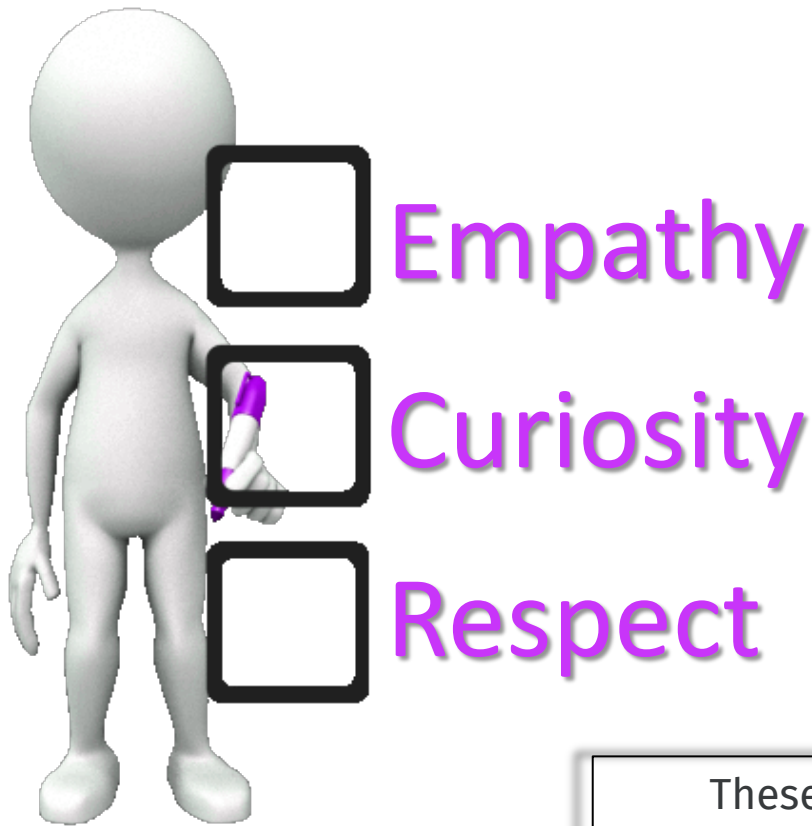
# 3 Guiding Principles of Culturally Effective Health Care

Health-care providers are challenged to think broadly and recognize differences across various economic levels and factors such as language, race, ethnicity, gender, sexual orientation, religious belief, disability, and education.

As Health-care providers we strive to be respectful of and responsive to the health beliefs and practices, cultural needs, and linguistic and other communication requirements of diverse patient populations.

There are three fundamentals to the delivery of culturally effective health care. These three principles are:

1. Empathy: Understanding a person from his or her frame of reference rather than one's own. In psychotherapy, therapist empathy for the client can be a path to comprehension of the client's cognitions, affects, motivations, or behaviors (American Psychological Association).
2. Curiosity: The interest in another individual and the motivation to learn more.
3. Respect: An attitude or behavior demonstrating esteem, honor, regard, concern, and other such positive qualities toward an individual or entity. Respect can serve an important purpose in interpersonal and intergroup relations by aiding in communication (American Psychological Association).



These principles contribute to *"a heightened understanding and appreciation of the social context of the patient"*



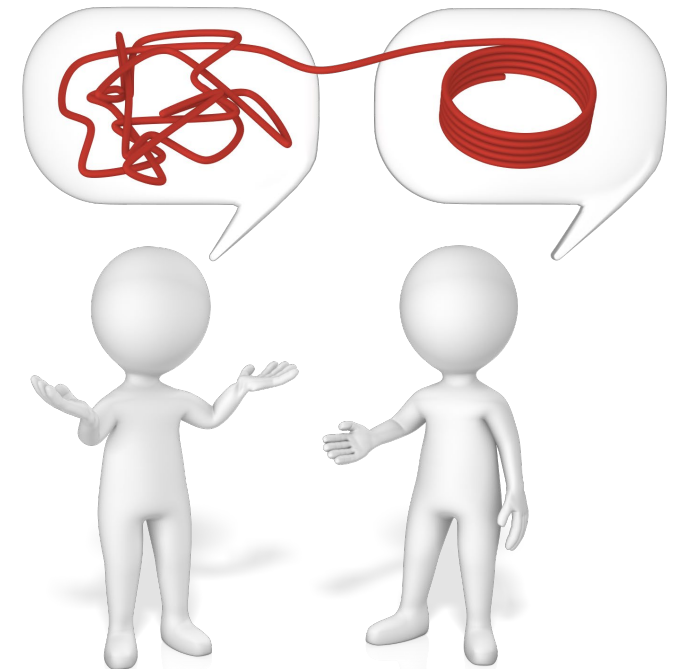
A photograph of a woman and a young child. The woman, with long dark hair and a warm smile, is wearing a pink long-sleeved shirt. She is holding the child, who is laughing heartily with their mouth wide open. The child is wearing a white shirt with a blue and red geometric pattern. The background is slightly blurred, showing what appears to be an outdoor setting with trees and a fence. The entire image is overlaid with a semi-transparent purple filter. The text "Cross-Cultural Communication" is centered in a white, serif font.

# Cross-Cultural Communication



# Good Communication

- Good communication skills are fundamental to providing culturally effective health care, but barriers between health-care providers and their patients and families may lead to ineffective communication. Explaining complex medical problems, for example, even in a preferred language can prove challenging for any health-care provider.
- Health literacy describes an individual's ability to obtain, process, and understand basic health information and services needed to make appropriate health decisions and follow treatment instructions. Current estimates show that more than one-third of U.S. adults have limited health literacy skills (Hersh, 2015).
- Limited health literacy can affect patients' ability to:
  - Locate health-care providers and services.
  - Fill out complex forms.
  - Share personal information such as health history.
  - Ask questions.
  - Understand how to take medications correctly.
  - Understand medical procedures and surgeries that they will undergo.
  - Follow preventive health-care guidelines.
  - Manage a chronic disease.



## Good Communication

- Have good communication skills – both verbally and non-verbally – it not only important but required when communicating with patients and their families. Explaining complex medical problems, for example, even in a preferred language can prove challenging for any health-care provider. Does the member understand their care plan? Do they understand their medication and the importance of adhering to taking it?
- Educational attainment and literacy are critical factors that determine an individual's ability to understand and participate in their healthcare planning. Several of the Community Health Assessments (CHNAs) for Dallas County specifically noted that community members' ability to actively participate in their own health was severely limited by their health literacy among other factors such as language challenges.



# Patient Satisfaction

- If providers and health plans are not working together to provide culturally competent care, patients are at higher risk of having negative health consequences, receiving poor quality care, or being dissatisfied with their care.
- Studies show language barriers make both providers and patients uneasy in their interactions, with both questioning whether they are communicating in an understandable way. This discomfort can make patients hesitant to seek care or engage deeply with a provider.
- When patient-provider do not speak the same language, studies show patient trust decreases, and providers may struggle to elicit patient activation.
- African Americans and other ethnic minorities report less partnership with physicians, less participation in medical decisions, and lower levels of satisfaction with care. The quality of patient-physician interactions is lower among non-White patients, particularly Latinos and Asian Americans. Lower quality patient-physician interactions are associated with lower overall satisfaction with health care.



# Communication and Language Assistance

## Interpreter Services for PCHP Members

PCHP provides special language services including interpreters for any member who needs assistance during their healthcare experience.

Members and Providers can request interpreter service by contacting the PCHP Provider and Members Services.

PCHP Members who are deaf or hearing impaired can call the TTY line at 1-800-735-2989.

**Question:** How can a PCHP Member get face-to-face interpreter in the provider's office? How far in advance does a member need to call?

**Answer:** PCHP can assist members who need help for an interpreter to go with the member to their doctor's office.

A 72 hours advance notice of a need for an interpreter

### Use of professional interpreters:

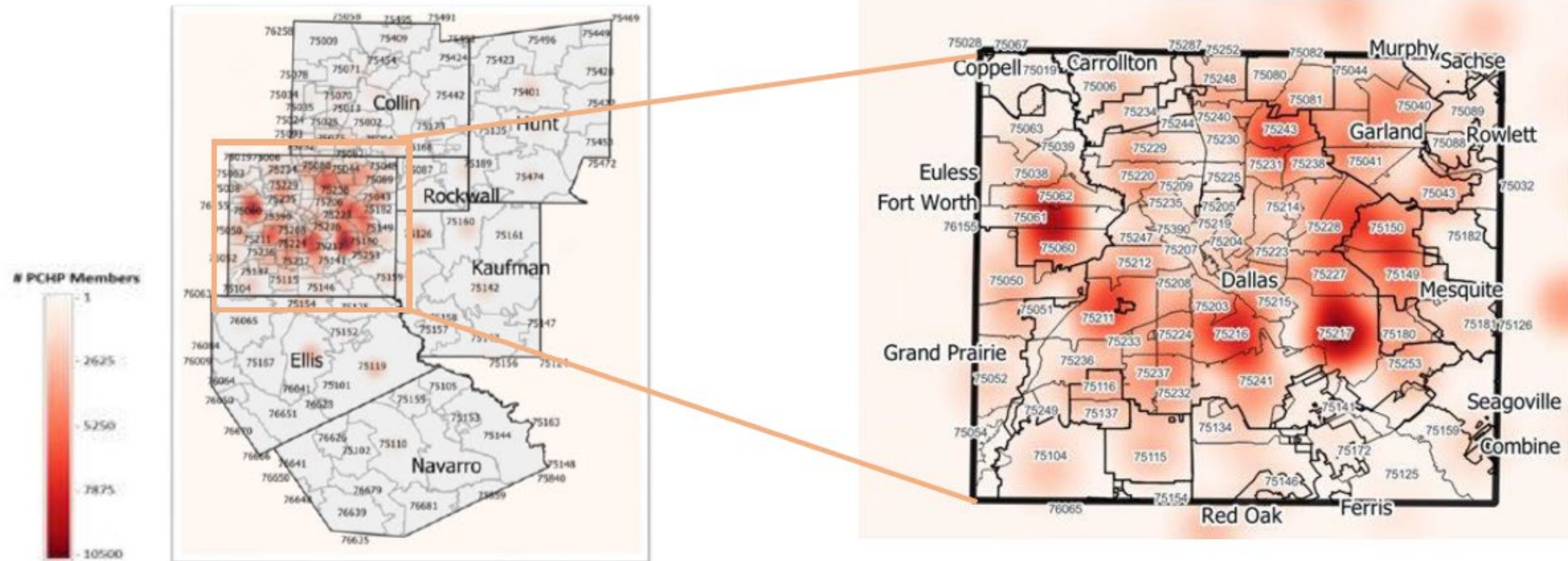
- Improves patient safety and health outcomes.
- Complies with language access requirements.
- Increases patient satisfaction.

- Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
- Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
- Provide professional language assistance at no cost to patients, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

## PCHP Membership

Currently more than three-quarters of PCHP members reside in Dallas County.

- The highest concentrations of membership are seen in the southeast and northwest areas of the county. ZIP codes in the southeast, as we have seen, have some of the most social needs (75216, 75217 and 75228).



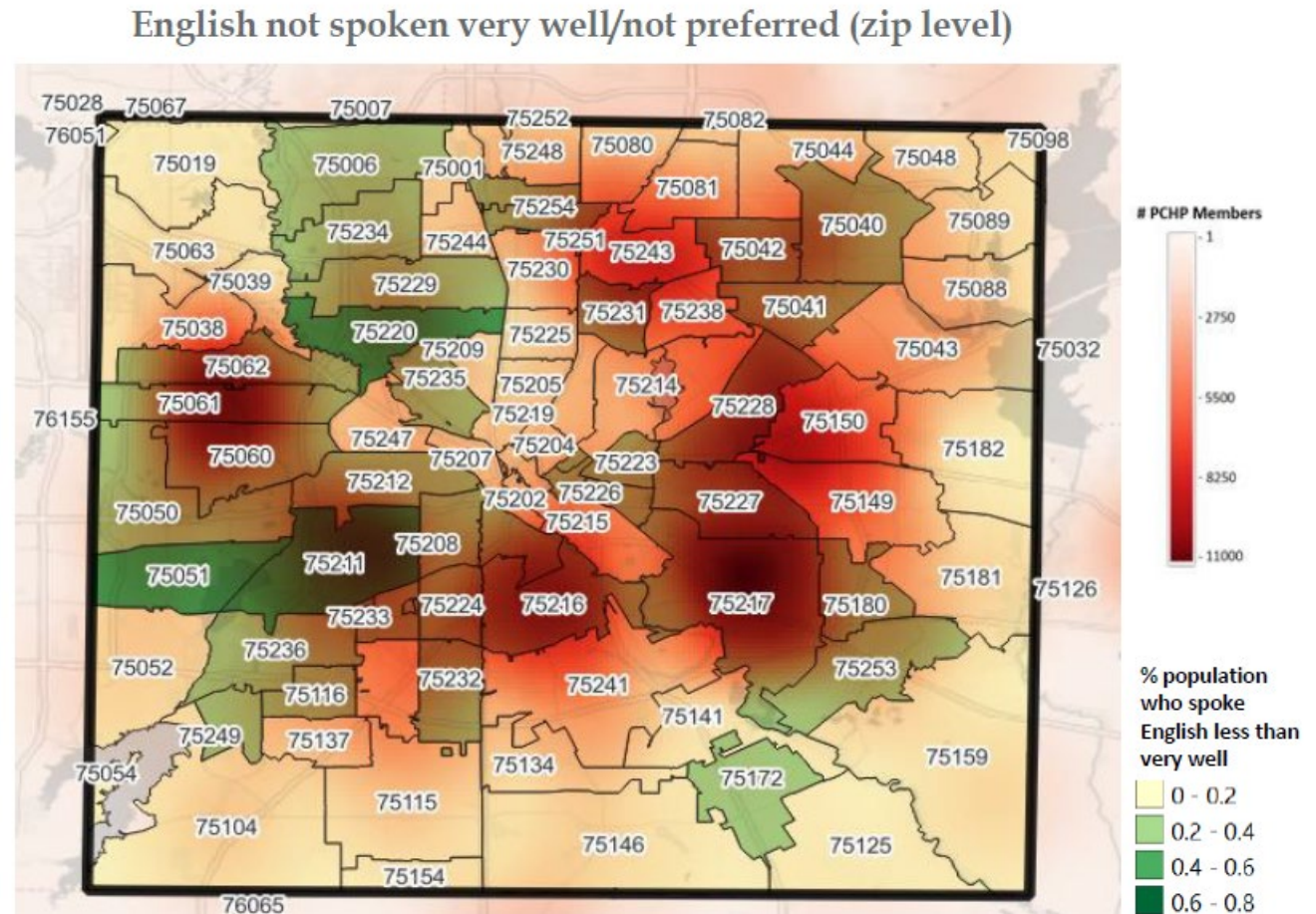


## PCHP Membership

Next, we looked at what percentage of the populations within Dallas county do not speak English well or is not a preferred language and how this overlays with our population.

In Dallas County PCHP membership hot spot areas of zip codes 75216, 75217, 75227, 75228 and 75211 also overlap with areas where English is not preferred or not spoken well

Zips codes with high PCHP membership are also areas where English is not the preferred language at home.



A photograph of a Black family outdoors, featuring a man, a pregnant woman, and a young child. The man is on the left, smiling and looking down at the woman. The woman is in the center, wearing a striped shirt, smiling and looking down at her belly. The child is on the right, looking up at the woman. The entire image is overlaid with a semi-transparent blue filter.

# Cultural Competency & Health Disparities



# Implicit Bias & Health Disparities

**Implicit bias** refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.

These biases, which encompass both favorable and unfavorable assessments, are **activated involuntarily and without an individual's awareness or intentional control.**

**Health disparities** refers to the differences in health outcomes among groups of people and closely linked with social, economic, and/or environmental disadvantages.

Race or ethnicity, gender, sexual identity, age, disability, socioeconomic status, mental health and geographic location all contribute to an individual's ability to achieve good health.



## Example of Health Disparities

**Deaths from diabetes** are **75% percent higher for Blacks/African Americans**, at 20.1 deaths per 100,000 people for Whites and 35.1 deaths per 100,000 people for Blacks.

**Deaths from cancer** are also **higher for Blacks/African Americans**, with 180.5 deaths per 100,000 people for Whites, 142.4 deaths per 100,000 for Hispanics, and 217 deaths per 100,000 people for Blacks in Texas.

**Deaths from cardiovascular disease** are **higher for Blacks/African Americans** in Texas, at rates of 264.1 deaths per 100,000 people for Whites and 214.7 per 100,000 for Hispanics, compared to 352 per 100,000 for Blacks in Texas.



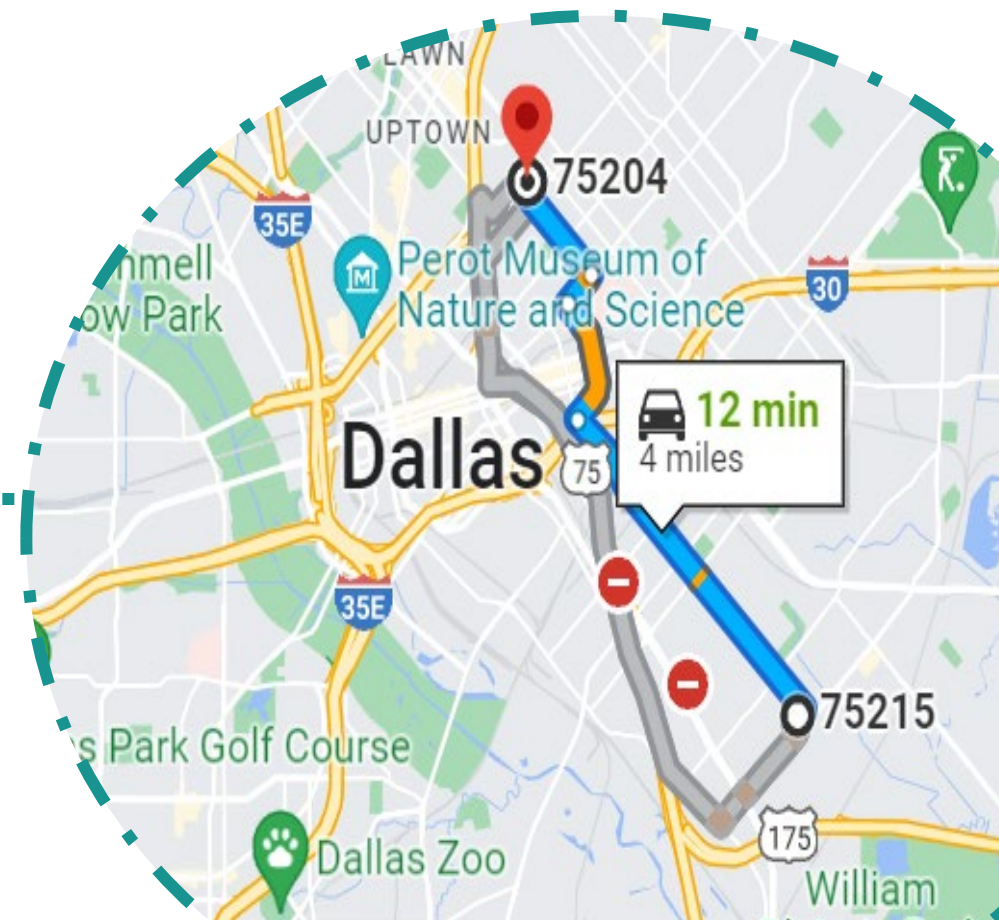
# Health Disparities Impact Life Expectancy

In Dallas County, children born less than four miles apart from one another have a difference in life expectancy of 27 years.

This provides us awareness of health disparities and the impact that this has within our own community and patient population.

Boys born in the 75204-zip code (average household income \$105,000) can expect to live to age 90;

Boys born in the nearby 75215 zip code (average household income \$41,000) have a life expectancy of only 63 years.







# Cultural Competency & SDOH

# Social Determinants of Health

Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

SDOH can be grouped into 5 domains:

- Economic Stability
- Education Access and Quality
- Health Care Access and Quality
- Neighborhood and Built Environment
- Social and Community Context

## Social Determinants of Health



# Social Determinants of Health – Examples:

## Economic Stability

In the United States, 1 in 10 people live in poverty. Many people living in poverty have steady work but still don't earn enough to afford the things they need to stay healthy. People living in poverty are less likely to have access to health care, healthy food, stable housing, and opportunities for physical activity. These disparities mean people living in poverty are more likely to die from preventable diseases. Programs and policies that make food, housing, health care, and education more affordable can help reduce poverty.

## Education Access and Quality

People with higher levels of education are more likely to be healthier and live longer. The stress of living in poverty can affect children's brain development. In addition, children from low-income families, children with disabilities, and children who routinely experience forms of social discrimination — like bullying — are more likely to struggle with math and reading. They're also less likely to graduate from high school or go to college. This means they're less likely to get safe, high-paying jobs and more likely to have health problems like heart disease, diabetes, and depression. Interventions to help children and adolescents do well in school and help families pay for college can have long-term health benefits.



# Culturally Effective Health Care in Practice



## Culturally Effective Health Care in Practice

Below are 12 topics to be aware of when improving delivery of culturally effective health care. You can glean most of the information early in your relationship with the patient and parent, such as during an initial interview and by reviewing the information on a patient profile form filled out by the patient or parent.

1. **Place of Origin:** Find out where your patient was born and the implications of this birthplace for the prevention, diagnosis, treatment, and follow-up of health and mental health conditions. In addition, the birthplace of the patient's parents or other important family members can have an influence on the patient's health behaviors, including securing health care, particularly if the birthplace is another country.
2. **Language:** Know what language(s) the patient and family speak at home. If English is a second language, find out the level of actual, rather than assumed, language comprehension. Be prepared to make accommodations for a professional interpreter at all checkups.
3. **Health Literacy:** Determine the family members' comprehension of medical information, regardless of what language they speak. Individuals with limited health literacy may be less aware of the need for preventive health measures and less likely to ask questions of their health-care providers. Use nonmedical terms when possible and include descriptions of procedures, using pictures or examples to facilitate understanding.
4. **Nutrition:** Ask whether patients and their families have specific dietary customs, practices, or patterns based on their culture. These may include the use of complementary and alternative medicine practices or supplements.
5. **Religion:** Inquire about the patient's religion and learn what treatments may be prohibited because of its teachings. In addition, the level of faith and spirituality a child and family bring to the health-care setting may influence your approach to treatment.
6. **Sexual Orientation/Gender Identity:** Encourage adolescents to feel comfortable talking about their emerging sexual and gender identities and sexual activities. Offer confidential care that will not expose the youth to harm from others. Use of gender-neutral terms can encourage adolescents to ask questions and be willing to discuss their sexual behaviors or sexual orientation. Stigma from homophobia and heterosexism often leads to psychological distress and a possible increase in risk behaviors (AAP, 2013).
7. **Self-sufficiency:** Learn how independent and self-sufficient a child was before becoming ill or injured. That is particularly important for an older child. Know whether the child's culture regards independence or self-sufficiency as a welcome asset to the quality of the child's life.
8. **Support Systems:** Ask about the support systems in a child's life and what cultural issues exist in those support systems, including neighborhoods, clubs, social networks, online groups and social media, peer groups, and extended families.
9. **Disability:** Acquire up-to-date knowledge about disabilities and chronic health conditions presented by your patients. Offer anticipatory guidance, growth and developmental screening, and evaluation for acute conditions, and coordinate subspecialty and community services. Ask about issues adapting at home or school or in the community.
10. **Role of Family:** Learn about the role of family in the patient's culture by asking the patient and parent to describe how health issues are handled at home. Assess the presence of protective factors that may increase the patient's resiliency.
11. **Emotions:** Assess the patient's emotional state and try to determine the cultural dimensions that support or affect that state.
12. **Vocabulary:** Ask the patient and parent to assist you in learning vocabulary that describes the patient's illness, health status, and situation.





# Cultural Competency Summary

- Good communication between members and providers contributes directly to patient satisfaction and positive outcomes
- A culturally competent provider effectively communicates with patients and understands their individual concerns. It's incumbent on providers to make sure patients understand their care regimen.
- To improve individual health and build healthy communities, providers need to recognize and address the unique culture, language, and health literacy of diverse consumers and communities. The Cultural Competency program is geared toward the following:
  - Improving healthcare access and utilization
  - Enhancing the quality of services within culturally diverse and underserved communities
  - Promoting cultural and linguistic competence as essential approaches in the elimination of health disparities.
- Additional provider-focused cultural competency resources can be found with [U.S. Department of Health and Human Services' Health Resources and Services Administration \(HRSA\)](#).
- Culture is a major factor in how people respond to health services. It affects their approach to:
  - Coping with illness
  - Accessing care
  - Working toward recovery
- Providers receive education about such important topics as:
  - The reluctance of certain cultures to discuss mental health issues and of the need to proactively encourage members from such backgrounds to seek needed treatment
  - The impact that a member's religious and/or cultural beliefs can have on health outcomes (e.g., belief in non-traditional healing practices)
  - The problem of health illiteracy and the need to provide patients with understandable health information (e.g., simple diagrams, communicating in the vernacular, etc.)
  - History of the disability rights movement and the progression of civil rights for people with disabilities
  - Physical and programmatic barriers that impact people with disabilities accessing meaningful care
- As part of our cultural competency program, we encourage our providers to access information on the Office of Minority Health's web-based [A Physician's Guide to Culturally Competent Care](#). The American Medical Association, American Academy of Family Physicians and the American College of Physicians endorse this program, which provides up to 9.0 hours of category 1 AMA credits at no cost.



# Resources:

PCHP: Cultural Competency Plan for Provider \_ January 2023 Provider Lunch-in-Learn

- Becoming a Culturally Competent Health Care Organization. *American Hospital Association*. <https://www.aha.org/ahahret-guides/2013-06-18-becoming-culturally-competent-health-care-organization>
  - Slide 4, 5
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2719963/>
  - Slide 8
- <https://wallethub.com/edu/most-diverse-cities/12690> b
  - Slide 9
- <https://spectrumlocalnews.com/tx/south-texas-el-paso/news/2021/09/22/u-s--2020-census-study-ranks-texas-2nd-most-diverse-state-in-country>
  - Slide 9
- <https://spectrumlocalnews.com/tx/south-texas-el-paso/news/2021/09/22/u-s--2020-census-study-ranks-texas-2nd-most-diverse-state-in-country>
  - Slide 10
- <https://wallethub.com/edu/most-diverse-cities/12690>
  - Slide 10
- Training on *Culturally Effective Health Care* provided by the Texas Health and Human Services Commission (HHSC) and the Texas Department of State Health Services (DSHS). <https://www.txhealthsteps.com/500-culturally-effective-health-care>
  - Slide 8, 13, 14, 16, 26, 27
- <https://hpi.georgetown.edu/cultural/>
  - Slide 15
- <https://patientengagementhit.com/news/what-does-cultural-competence-mean-for-healthcare-providers>
  - Slide 15
- <https://patientengagementhit.com/news/how-cultural-language-barriers-impact-positive-patient-experience>
  - Slide 15
- Institute of Medicine, Committee on Quality of Health Care in America. *Crossing the Quality Chasm: A New Health System for the 21st Century*. Washington, DC: National Academy Press. 2001.
  - Slide 20
- Economic Impacts of Health Disparities in Texas 2020. <https://altarum.org/sites/default/files/uploaded-publication-files/Econ-Impacts-of-Health-Disparities-Texas-2020-FINAL-002.pdf>
  - Slide 21