CULTURAL BELIEFS AND HEALTH PRACTICES

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Introduction

• Make no assumptions
• Similar principles, not rules
• As health care providers, we work to relieve suffering and promote healing
• We are not here to judge
2000 US Census

Figure 2.

Fifteen Largest Ancestries: 2000

(In millions. Percent of total population in parentheses. Data based on sample. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see www.census.gov/prod/cen2000/doc/sf3.pdf)

- German (15.2%) 42.8
- Irish (10.8%) 30.5
- African American (8.8%) 24.9
- English (8.7%) 24.5
- American (7.2%) 20.2
- Mexican (6.5%) 18.4
- Italian (5.6%) 15.6
- Polish (3.2%) 9.0
- French (3.0%) 8.3
- American Indian (2.8%) 7.9
- Scottish (1.7%) 4.9
- Dutch (1.6%) 4.5
- Norwegian (1.6%) 4.5
- Scotch-Irish (1.5%) 4.3
- Swedish (1.4%) 4.0

Source: U.S. Census Bureau, Census 2000 special tabulation.
Cultural Competence in Health Systems

- 9 techniques most frequently described in literature
  1) Interpreter services
  2) Recruitment and retention of minority employees
  3) Training cultural competency
  4) Coordination with traditional healers
  5) Use of community health workers
  6) Culturally competent health workers
  7) Inclusion of family and/or community members
  8) Immersion into another culture
  9) Administrative and organizational accommodations

Brach & Fraser, 2000
Interpreter services

• Many limited English-speaking people wait for an emergency to seek medical care. Why?

• Because they fear a situation where they cannot clearly communicate and be understood.

• Solutions:
  – Dual-handset phone system
  – On-site live interpreter bank

• Be aware of dialects and idioms

• Be mindful of gender differences for particularly sensitive topics

• Medical terminology may be difficult to translate

• Avoid using family members
Recruitment and Retention of Minority Employees

• Establishing a set of principles for respectful treatment of all people
• Track staff satisfaction by racial and ethnic groups
• Change the culture of the work environment so that all employees feel valued and given the opportunity to advance in their field
• If your employees at all levels don’t feel respected by the administrators, how can your patients from similar ethnic backgrounds feel respected?
Cultural Competency Training Programs

- Conferences and training programs increase cultural awareness, knowledge, and skills
- Promotes changes in staff behavior and patient-staff interactions
- Orientation of all staff or frequent in-services
- Workplace bias, whether subtle or blatant, takes an emotional toll.
- You just can’t say it, you must live it.
Coordination with Traditional Healers

• Many Americans use traditional healers and religious leaders to guide their medical care

• Clinicians need to coordinate care with those healers to increase compliance

• In NYC, when caring for Orthodox Jewish patients
  – Call Rabbi to get permission for C-section
  – Call Rabbi to get permission for hysterectomy
  – Rabbi will refer whole congregations to you
  – Rabbi arranges genetic testing (for matchmaking)
Use of Community Health Workers

• Members of minority communities can be used to reach out and provide direct services and health education

• Can act as liaisons
  – Bring patients in for care
  – Provide cultural link
  – Overcome distrust
  – Enhance communication
  – Increase access to care
Culturally Competent Health Promotion

• Culture-specific attitudes and values must be incorporated into messages such as screening tools and public information campaigns
Include family and community members

• May be crucial in obtaining consent and adherence to treatment

• In Asian cultures, the oldest male relative needs to make decisions

• In Muslim cultures, try to obtain a female interpreter for a female patient; after a certain age, women are not allowed to serve as interpreter
Immersion into Another Culture

- Enables participants to overcome ethnocentrism
- Increase cultural awareness
- Integrates cultural beliefs into health care practices
  - Hot and Cold theory in Hispanic and Asians
  - Ancestor Worship in Asians
  - Jehovah’s Witness and blood products
  - Bereavement and pregnancy loss in all cultures
  - Vaginal bleeding in Jewish culture
Asians in Indiana

- Indianapolis is home to more than 2,000 Burmese from two ethnic groups:
  - the Chin tribe
    - 1300 Chin live in Perry Township
  - the Karen tribe
    - 700 Karen are in Washington Township.
- Fort Wayne has over 3,500 Burmese refugee residents
- Language is different
Orthodox Jews in New York

- Largest Jewish population outside of Israel
- Consult with Rabbi regarding medical decisions
- Grand multiparity; avoid C-sections at all costs
- Avoid discharge to home during Sabbath
- Sabbath elevators
- Kosher diet and medications
- Avoid causing vaginal bleeding
- Men stay outside of delivery room
- Men do not shake hands with women
- Women wear wigs; otherwise headcovers in labor
- Multiple holy holidays and celebrations to observe
Organizational Accommodations

• Improving access to and use of health care
  – Clinic locations (access to transportation)
  – Hours of operation (weekends, holy holidays)
  – Physical environment (locked units, elevators, buzzers)
  – Written materials, signage, consideration for illiteracy
  – Special diet menus (Kosher, Halal, Asian, etc.)

• Health care systems can make themselves more welcoming and accessible to patients
Role of the Health Care Provider

• The basic concepts of treating patients with respect, compassion, and honesty are still what are most important to patients, regardless of cultural/ethnic background.

• It is not our place to judge, but understanding a person’s cultural beliefs will help to improve patient compliance and well-being.
Thank you!