

Culturally Appropriate Care

Paul Ambrose Scholars Program
Student Leadership Symposium

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Learning Objectives

- After attending this session, the participant will be able to:
 - Describe why culturally appropriate care is important
 - Describe basic strategies to achieve culturally appropriate care
 - Discuss respectful approaches to any patient
 - Describe the importance of the patient's illness narrative and illness models
 - Identify approaches to elicit health beliefs and traditional medical practices
 - Explain the use of the LEARN model to acknowledge the patients perspective and how to negotiate diagnostic and treatment plans

Why Culturally Appropriate Care?

- Increasing diversity of U.S. population
- Importance of culturally appropriate care
 - Gathering Information
 - Assessing Patient and Significant Other's Needs
 - Shared Decision Making
 - Traditional Health Beliefs
 - Traditional Healing Practices
 - Adherence

Respectful Approach to the Patient

- Greeting
 - Respectful
 - Addresses formally (Mr., Mrs.)
- Why did the come to see you
- Health beliefs regarding the illness
 - Kleinman's questions

Respectful Approach to the Patient

- Inquire about medical decision making authority
- Use lay terms
- Show empathy
- Ask final question: “Is there anything else I can help you with or any other questions that you have?”

Respectful Approach to the Patient

- Avoid showing reaction or making judgments about patient's beliefs
 - Avoid judgmental or condescending statements
 - Neutral facial expression
 - Avoid making assumptions
 - Avoid alienating or emotionally laden terms

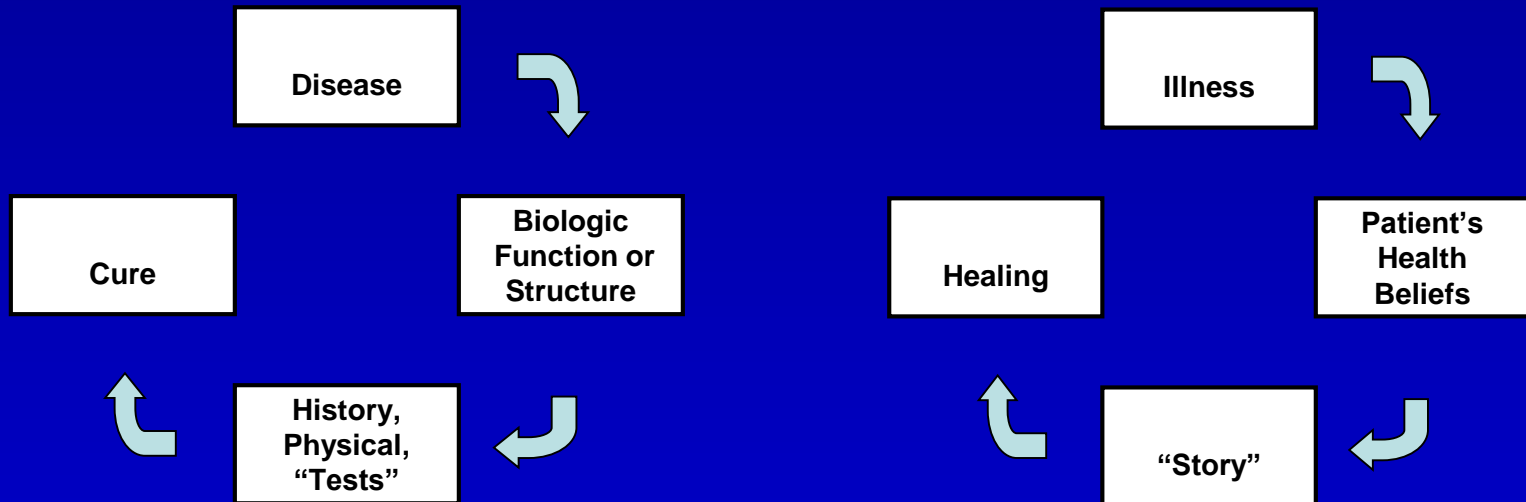
Illness

- “Illness refers to how the sick person and the members of the family or wider social network perceive, live with, and respond to symptoms and disability”¹

“Thus, patients order their experience of illness – what it means to them and to significant others – as personal narratives. The illness narrative is the story the patient tells, and significant others retell, to give coherence to distinctive events and long-term course of suffering....The personal narrative does not merely reflect illness experience but rather contributes to the experience of suffering.”

Kleinman, A., *The illness narratives*, 1988, p 49.

Comparison of Disease and Illness Models



Learn Model

- Listen to what patients say
 - Sympathy and understanding
 - Without imposing values
- Explain/Empathize
 - Your perceptions
 - Empathize with other perceptions
- Acknowledge and discuss
 - Differences
 - Similarities
 - Cultural influences on health care

Learn Model

- Recommend
 - Respect preferences
 - Integrate models
- Negotiate/Navigate
 - Shared decision making
 - Complex health care systems

Kleinman's Questions

1. What do you think caused your problem?
2. Why do you think it started when it did?
3. What do you think your sickness does to you? How does it work?
4. How severe is your sickness? Will I have a short or a long course?

Kleinman's Questions

5. What kind of treatment do you think that you should receive?
6. What are the most important results you hope to receive from this treatment?
7. What are the chief problems your sickness has caused you?
8. What do you fear most about your sickness?

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