



Communication Guide: All Cultures

Establishing Trust • Respecting Differences • Providing Culturally Acceptable Care

Clinicians who understand their patients' cultural values, beliefs, and practices are more likely to have positive interactions with their patients and provide culturally acceptable care. This improves opportunities for health promotion and wellness; illness, disease, and injury prevention; and health maintenance and restoration.

This *Culture Clue™* is offered to increase awareness about preferences of patients from the many cultures UWMC serves, whether they are from a different ethnic or religious background, socioeconomic level, race, gender, or sexual orientation. Use this *Culture Clue™* and information from your patients and their families to guide your communication and the care you provide.

Every person is unique. Put yourself in your patients' shoes and consider their beliefs, needs, and concerns as you interact with them. Treat your patients as *they* would like to be treated.

Help Your Patients Feel Comfortable at UWMC

- Ask your patients if this is their first visit to UWMC. **If it is their first visit**, take a few moments to orient them. Patients who are new to the system may not know the roles of their health care team, how to get a referral to a specialist, and other health care matters that patients already in the system may know.
- If English is the patient's second language, or the patient is deaf/hard of hearing or has vision impairment, make sure to involve an interpreter in all of your care discussions. **Do NOT rely on family members to translate health information.** Call UWMC Interpreter Services at 598-4425 to arrange for an interpreter.
- Your patients may include many family members in their care and care decisions. Some may be related, while others may be friends whom your patients consider to be family and part of their support network.
- When appropriate, use the terms "partner" or "spouse" rather than "husband" or "wife" to avoid making assumptions about sexual orientation.

Establish a Relationship with Your Patients

Treat your patients as *they* want to be treated instead of how *you* would want to be treated. This means asking about preferences before acting. Pay attention to patient cues and follow their lead. If they do not establish eye contact or refuse to shake your hand, a cultural custom or spiritual belief may be guiding their behavior. Set the tone for your patient visits by asking questions. Here are some examples:

- Ask your patients how they would like to be addressed, and remember to continue calling them by their preferred name.
- Tell your patients why *you* think they are here, but ask them why *they* think they are here.
- Ask your patients what their goals are for their visit. Remind them they are an active partner in their care plan.

Provide Health Information in Ways Your Patients Accept

Asking your patients these questions will help you provide health care information and treatment recommendations that your patients will accept:

- **What cultural, religious, spiritual, or lifestyle beliefs may impact the kind of health care you want to receive?** – Remember to document these preferences so other providers can honor them. Continuity of cultural appropriateness within the care team is essential.
- **Who else in your life needs to be involved in making medical decisions about your care?** – An example of this could be having a clergy member present.
- **Would you like to receive your test results and diagnosis information, or do you prefer this information be given to someone else?** – If they answer "someone else," find out who that is.

- **Would you like the information written, in pictures, or both?** – Remember to ask the patient to “teach back” the information you give them and then document their understanding.
- **How does the care plan I’m recommending fit with your lifestyle and beliefs? Will you be able to follow this plan?** – Offer choices for treatment options. Determine if your explanation of the causes and likely course of the illness matches your patients’ perceptions and understanding of their illness. If there is a mismatch, some patients may rely on their own explanations before those of medical professionals.
- **Can a family member, friend, or someone else help you follow your plan of care?** – If yes, ask who.

Maintain Good Communication with Your Patients

Good communication helps you and your patients build trusting relationships. These tips may help foster those relationships:

- Acknowledge and respect your patients’ interpretations of their illnesses.
- Listen carefully. When you talk with your patients, let them know you are listening by:
 - Nodding your head that you understand.
 - **Maintaining eye contact** if that is their norm, **or avoiding eye contact** if that is their norm.
 - Remaining on the same physical level as much as possible with your patient. For example, avoid standing over the patient, which may be seen as condescending.
- Use open-ended questions (instead of yes/no questions) to make sure you and your patients share a common meaning.
- Tell your patients what you are writing as you take notes. After you are done taking their medical history, give your patients another opportunity to bring up something they may have omitted or did not feel comfortable talking about at first (especially if this is their first visit with you). They may feel more comfortable discussing something further into the visit.
- Tell your patients what you are doing and what they will feel if you are doing an exam, procedure, or other care that involves physically touching them.

Show Your Patients Respect

Many cultural norms may influence your patients’ behavior and appearance. Understanding, accepting, and respecting differences in lifestyle, beliefs, and customs is essential for building trusting interactions with your patients. These are some norms that may be determined by your patients’ culture and beliefs:

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| • Beliefs about causes of illness, effects of treatment | • Physical distance to maintain | • Decision making | • Food |
| | • Eye contact | • Birth customs | • Being alone |
| | • Touching | • Religious customs | • Clothing |

Some Culturally Appropriate Health Care Resources

- **Cultural Competence in Health Education and Health Promotion**, Perez, M.A and Luquis, R.R., 2008
- **Cultural Sensitivity, A Pocket Guide for Health Professionals**, Galanti, G. G. and Woods, M.S., 2007
- **Culture and Health: Applying Medical Anthropology**, Winkelman, M., 2009
- **Culture and Nursing Care, A Pocket Guide**, J.G. Lipson, S.L. Sibble, P.A. Minarik, 1997, pp. 280-290
- **Ethnomed**, www.ethnomed.org, for information to help integrate cultural information into clinical practice
- **Explaining Illness Research, Theory, and Strategies**, Whaley, Bryan B., Lawrence Erlbaum Associates, 2000, pp. 299-316
- **Guide to Culturally Competent Health Care**, Purnell, L.E., 2nd Ed., 2009
- **Culture Clues and End-of-Life Care Sheets**, <http://depts.washington.edu/pfes/cultureclues.html>