



Cross Cultural  
Competency TRAINING

‘Culture’ refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups.

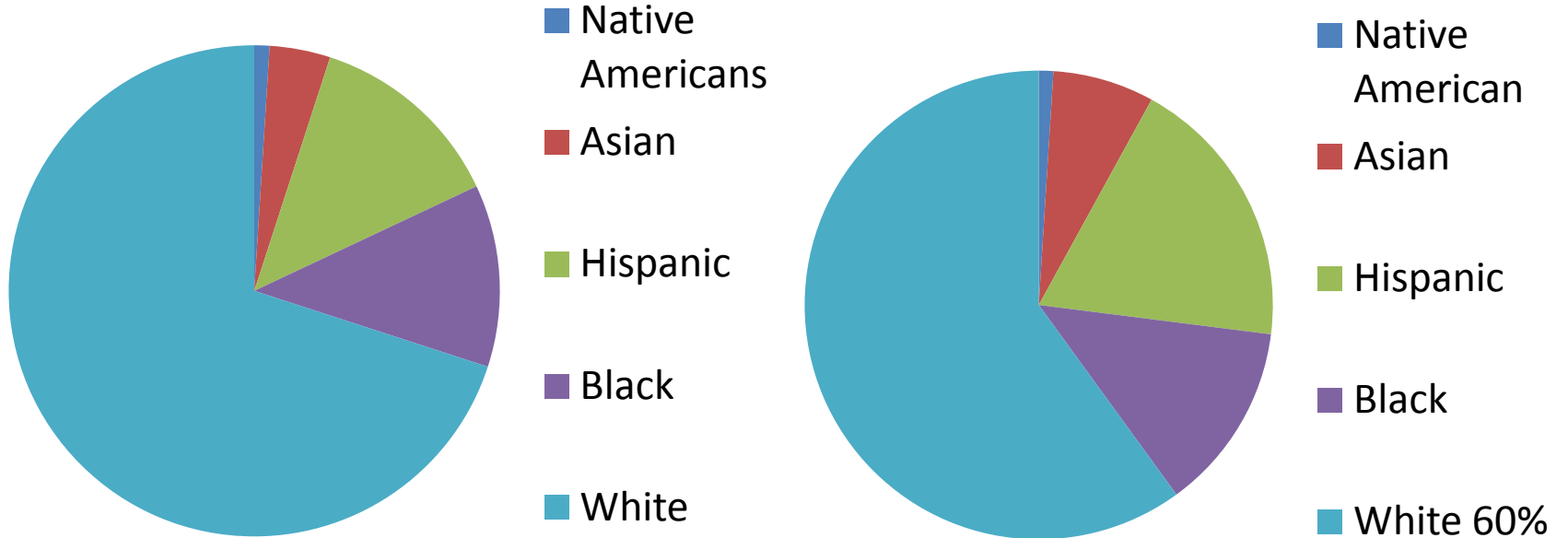
‘Competence’ implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities”

<http://minorityhealth.hhs.gov/assets/pdf/checked/finalreport.pdf>

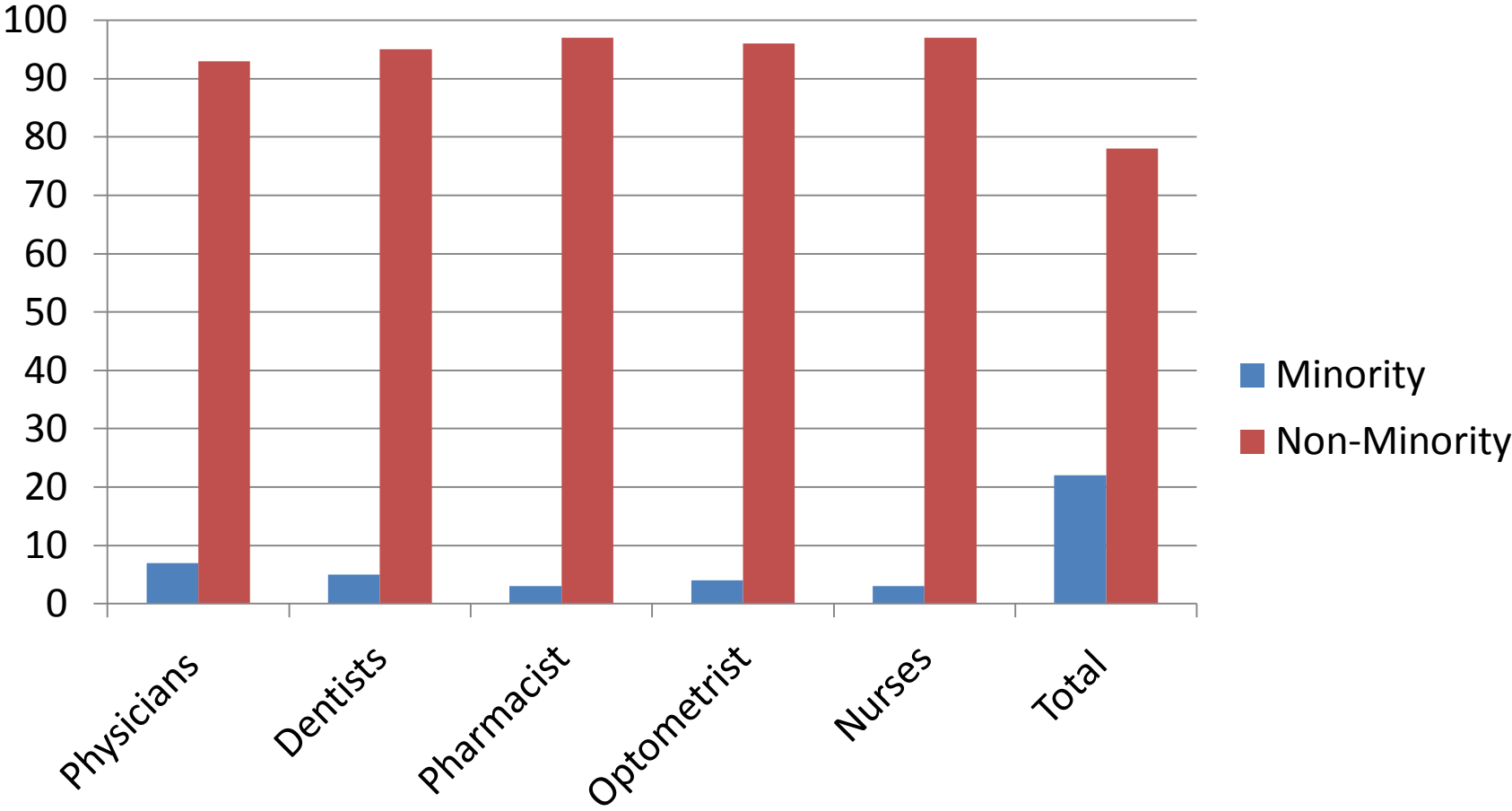
# Demographic Projections: Growing Demographics

Year 2000

Year 2030



# Minorities in the Healthcare Setting

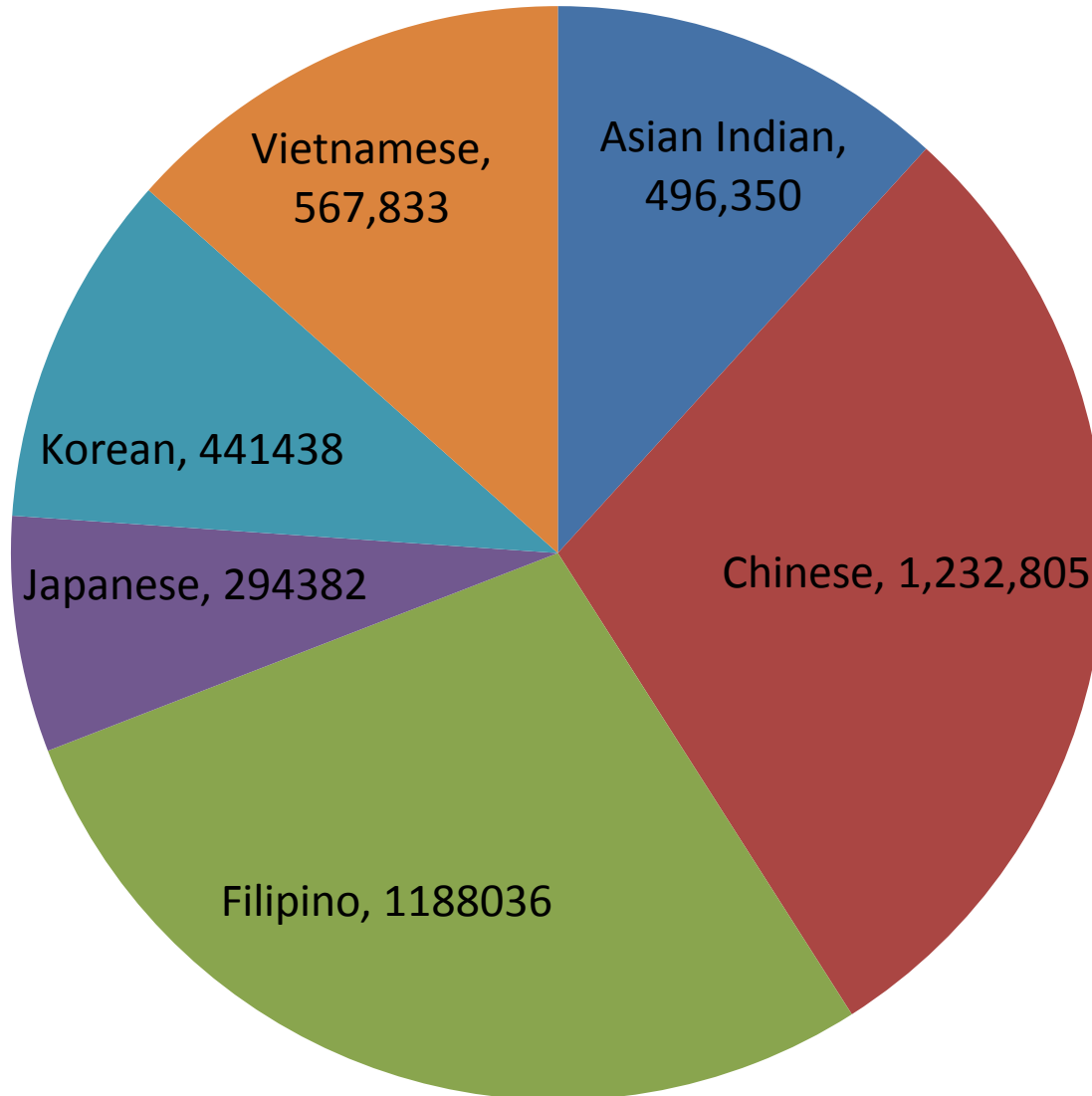


# Message to Health Care Team

- Provide equitable and effective health care within the context of the cultural beliefs, behaviors, and needs of consumers and their communities.
- Racial and ethnic minorities tend to receive lower quality health care than non-minorities even when access to insurance and income is provided (2002 Institute of Medicine).



# 13% of California's Population is of Asian Decent



# What Asian Food Culture?

- Oysters are believed to bring good fortune and have become a traditional food for dinners celebrating the New Year.
- \_\_\_\_\_ follow the spiritual teaching of balance signified by yin ("cool") and yang ("hot") to find balance in their lives by the food they eat
- Scallions, bean sprouts, cabbage, and gingerroot are other traditional foods

# China



# Tradition Chinese Medicine

4 Food Groups – Hot, warm, cool, and cold

- 5 Tastes – Sweet, Salty, pungent, bitter, and sour
- Certain foods associated with specific symptoms and remedies
- Acupuncture and Chinese herbology
- Tai Chi
- Chinese Therapeutic Massage

# Hmong



Hmong Communities



[www.epodunk.com](http://www.epodunk.com)

# Hmong

- Food staples: rice, noodle, fish, meats (specific), green vegetables, and hot chili sauces.
- Very little fruit and dairy.
- Traditionally, sick and expecting mothers eat only hot or warm food.

# Hmong Post-partum Diet

- Post-partum diet consists of only chicken soup and warm water for a maximum of 30 days.
- The soup contains a few pieces of chopped chicken, special herbs boiled in water with steamed rice.
- This is believed to neutralize the body and skim down a women's weight after pregnancy.
- Enloe has Hmong an Post-partum Diet.

# Hmong Religion

- Animistic religion
- Shaman acts as a intermediary between our world and the spirit world
- Shaman heals through herbal remedies and entering trances to call back sick persons spirit.

# Japan



# Japanese

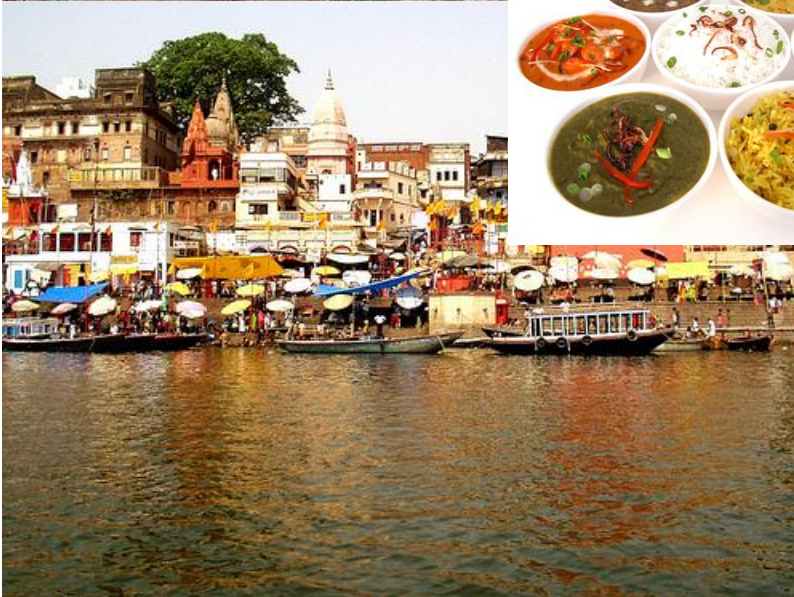
## Religion

- Shinto or Buddhist

## Health

- 3<sup>rd</sup> best life expectancy rate (83.9 years)
- Lower risk of CVD and some cancers
- Higher risk of Type 2 Diabetes and Dementia

# Asian Indian



# Asian Indian

- Large Hindu and Sikh populations that are largely vegetarian though not all
- Common genetic predisposition to Cardio Vascular Disease and Type 2 Diabetes

## Health Beliefs

- Traditional Medicine called Ayurvedic Medicine

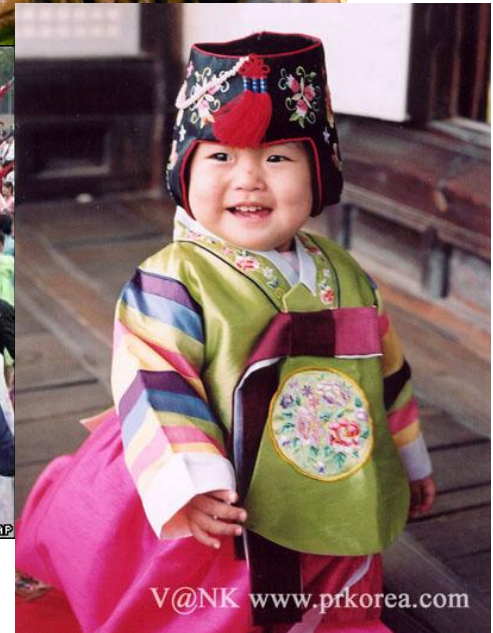
# Vietnamese



# Vietnamese

- Traditional Vietnamese diet consists of rice, vegetable, and fish dishes
- Large portion are Hmong
- High prevalence of depression in U.S.
- Highest health risk is cancer for both men and women followed by heart disease

# Korean



V@NK [www.prkorea.com](http://www.prkorea.com)

# Korean

- Traditional food items include rice, vegetables and meats.
- Meals often served as several side dishes accompanied by rice.
- Large Buddhist population

# Name this Asian Culture

- This country consist of over 7,100 islands.
- Population of this country is about 80% Roman Catholic

# The Republic of the Philippines



# Filipino

- Average per capita income is slightly below national average
- 75% of households have pooled incomes of 3 or more family members.
- Prevalence rate of CVD for men and women over the age of 50 is 60% and 65% respectively.

## Indigenous Health Beliefs

- Principle of Balance (Timbang)
- Theories of illness
- Health Treatment concepts

# Title VI of the Civil Rights Act and the Culturally and Linguistically Appropriate Services (CLAS) Standards.

- staff understand and respond with sensitivity to the needs and preferences that culturally and linguistically diverse patients/consumer
- Providing culturally and linguistically appropriate service
- correct inequities that currently exist in the provision of health services

- ensure that staff and other personnel receive crosscultural education and training, and that their skills in providing culturally competent care are assessed through testing, direct observation, and monitoring of patient/consumer satisfaction with individual staff/personnel encounters.
- Building staff that adequately mirrors the diversity of the patient/consumer population should be based on continual assessment of staff demographics
- Staff receive ongoing education and training in culturally and linguistically appropriate service delivery
- effects of cultural differences on health promotion and disease prevention, diagnosis and treatment, and supportive, re h a b i l i t a t i v e, and end-of-life care
- bilingual staff and interpreter services, at no cost to each patient/consumer (family friends should not be used)
- integrate cultural and linguistic competence-related measures into their internal audits, performance improvement programs, patient satisfaction assessments, and outcomes-based evaluations.
- Health care organizations should maintain a current demographic, cultural, and epidemiological profile of the community

# Asian Population

In the early 1990s, studies showed that Asian populations were the least satisfied with their health care within Kaiser Permanente's Northern California Region.

# Implementation of Cultural Competence in the Health Care Setting

- Department of multicultural services that provides on site interpreters for patients in all languages, with internal staffing in many different languages and dialects.
- modifying hospital culture to keep up with the changing demographics of the community

- Employ multicultural managers to reflect the diversity of the staff and patients and to emphasize diversity throughout the organization.
- Form partnerships with community-based organizations to help establish culturally competent, community-oriented primary care
- integrate cultural competence into all levels of the organization
- Include training programs for all medical team education
- identify the impact of race, ethnicity, culture, and class on clinical decision making
- develop tools to assess the community members' health beliefs and behavior