

Inter-professional Education for HIV Professionals Focused on the Four Cs:

**CULTURE, CARE,
COMMUNICATION, AND
COLLABORATION**

LYNN DEITRICK, RN, PH.D. AND
DEBBIE CESTARO-SEIFER, RN, MS

The 4 C's

- Culture
- Care
- Communication
- Collaboration

GOAL of 4C Program

Learn to create a healthcare environment in which the best medical practices can be safely accessed and people feel

Καλώς ήρθατε



Dobro došli

WELCOME



ยินดีต้อนรับ

Part 1: Cultural Awareness Basics

LYNN DEITRICK, RN, PHD
CLINICAL EDUCATOR



Part 1: Learning Objectives

After participating in this webinar, the learner will be able to:

- ▶ Define *culture*
- ▶ Explain complementary and alternative medicine (CAM)
- ▶ Describe how an understanding of CAM practices can enhance cultural awareness
- ▶ Discuss how cultural practices can impact a patient's HIV treatment adherence

The Journey Begins...



dreamstime.com



Cultural Awareness



Cultural Awareness

Cultural competence



Cultural Awareness

Cultural competence

Cultural sensitivity



Diversity training

Cultural Awareness

Cultural sensitivity

Cultural competence

Polling Question #1

What setting do you work in?

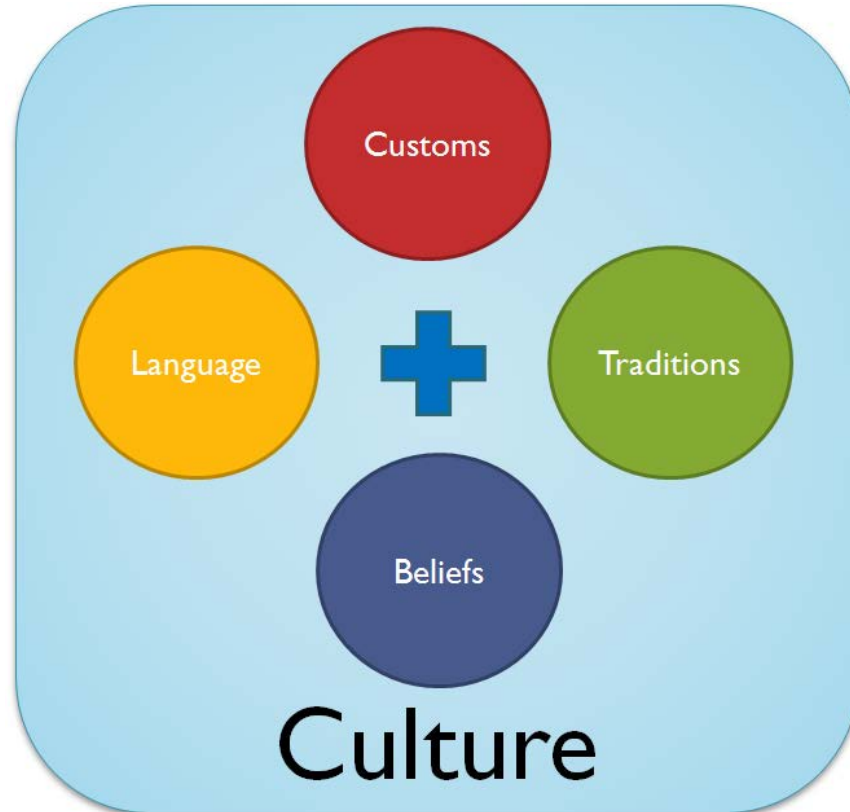
- A. Department of Health
- B. Community Health Center
- C. Private Practice
- D. Federally Qualified Health Center
- E. Hospital/Emergency Department
- F. Community Based Organization
- G. Other

Polling Question #2

What are some of the issues you may have in providing healthcare to HIV patients from diverse backgrounds in your community?

Culture

Culture binds a group of people together



Adults and Children Estimated to be Living With HIV 2013



Total: 35.0 million [33.2 million – 37.2 million]



Culture Can Influence...

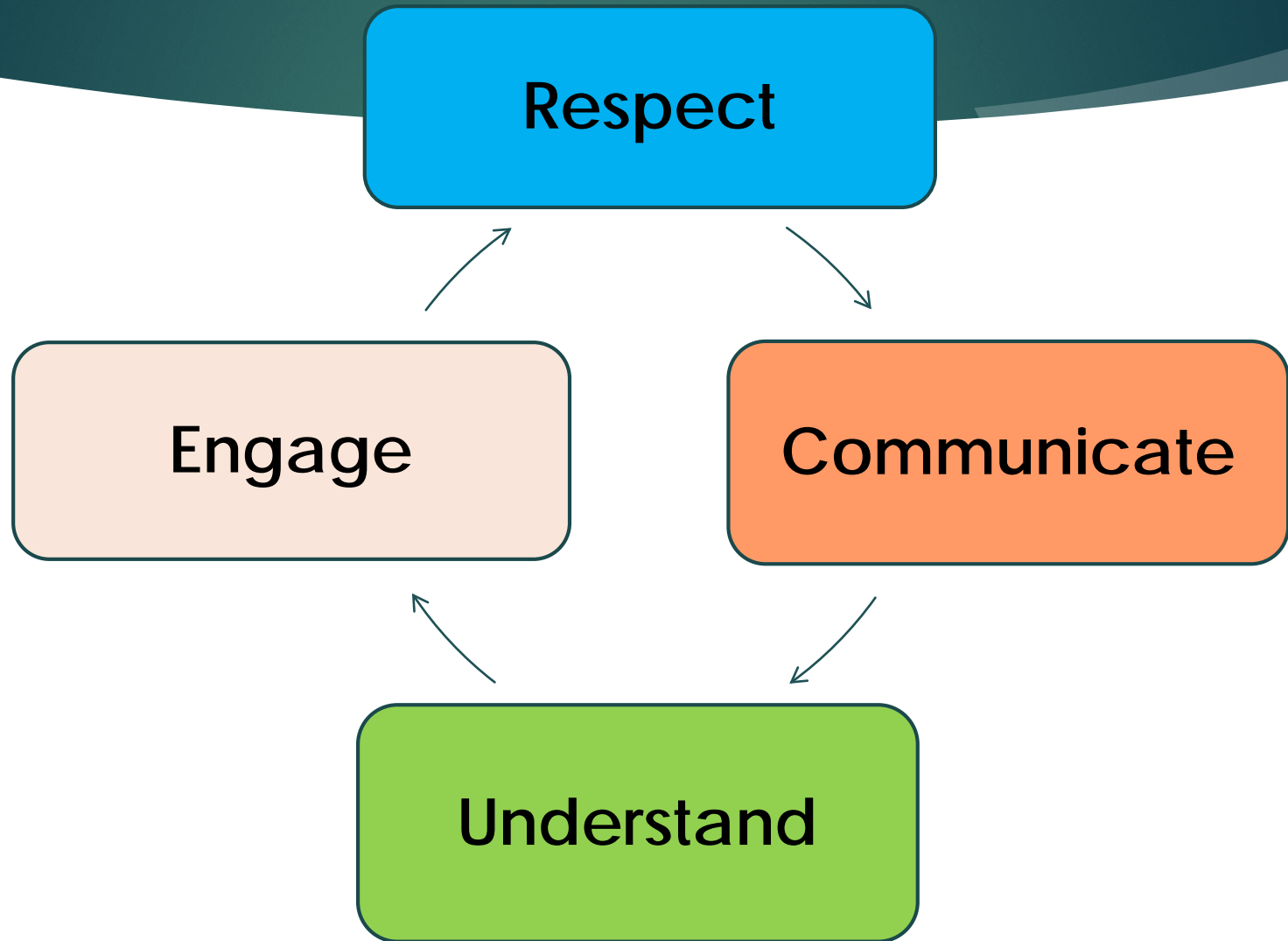
Understanding
of and
priorities about
health and
illness

The way
people
interact with a
health care
system

Decisions
about seeking
medical help
and
adherence to
treatment

Individual
participation
in prevention
and health
promotion
programs

Cultural Awareness





Rationale for Cultural Awareness

Respond to current and projected demographic changes in US

Reduce long-standing disparities in the health status of people of diverse racial, ethnic and cultural background

Improve quality of services & outcomes

Meet legislative, regulatory and accreditation mandates

Cultural Knowledge of Patient Populations Should Include:

- ▶ Effects of migration, racism and discrimination & poverty
- ▶ Incidence/prevalence of HIV/AIDS in the population
- ▶ Concerns relative to disclosure of HIV status
- ▶ Perceptions of trustworthiness of providers





Who Are Your Patients?

- ▶ Culture
- ▶ Language
- ▶ Gender
- ▶ Socioeconomic variables
 - ▶ Education
 - ▶ Insurance
 - ▶ Housing
 - ▶ Employment status
- ▶ Health status
 - ▶ Chronic conditions
 - ▶ Health beliefs
 - ▶ Access to care issues



Worldview



Ethnocentrism

Belief that our **OWN** native culture and language are the best; every other culture and language is **inferior** to our own.



Cultural Relativism

Belief that other cultures and ways of doing things are different but equally valid



Language



Communication Variations

Conversational
Style
and Pacing

Time
Orientation
and Personal
space

Gender and
Gender Identity

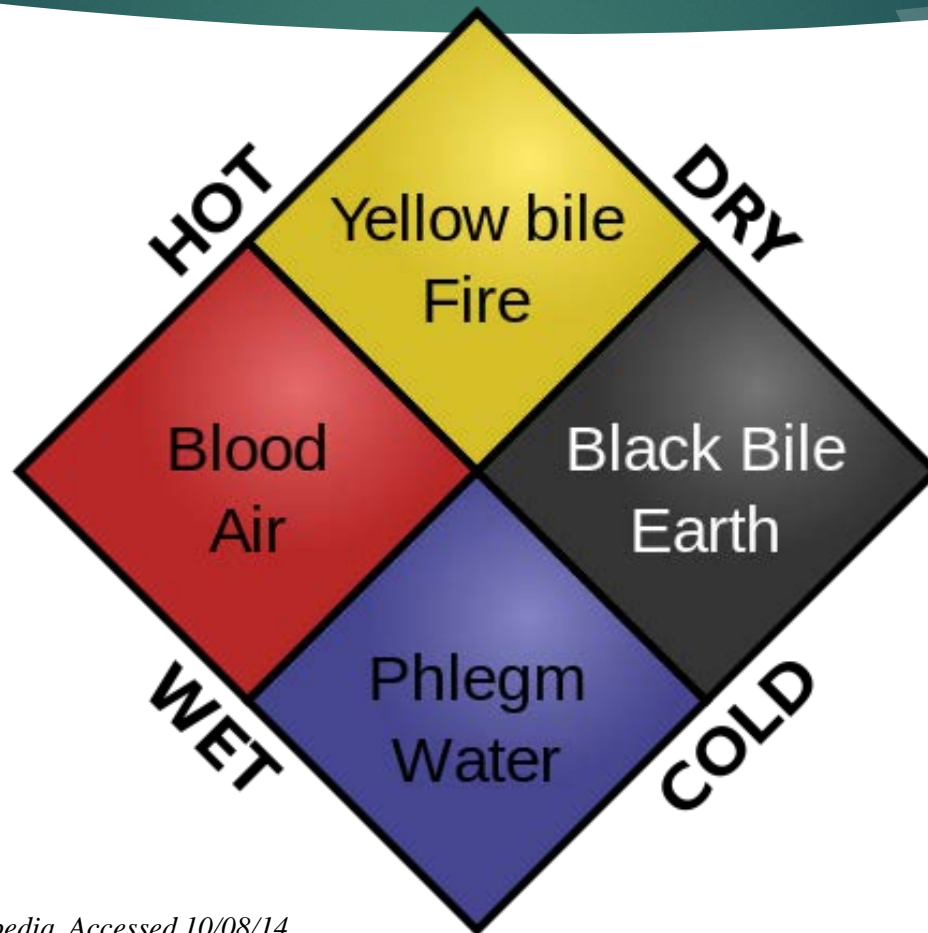
Touch and
Gestures

Chicken Soup



Humoral Medicine

Hot/Cold Framework





Cultural Construct

Many ideas about life, health, and spiritual matters are shaped and explained by the culture we grew up in.

Examples:

- ▶ Definitions of health and illness
- ▶ Disease causality
- ▶ Gender roles
- ▶ Culture-bound syndromes
- ▶ The supernatural/ spirit world





Explanatory Model

Rain Example:

Scientific model

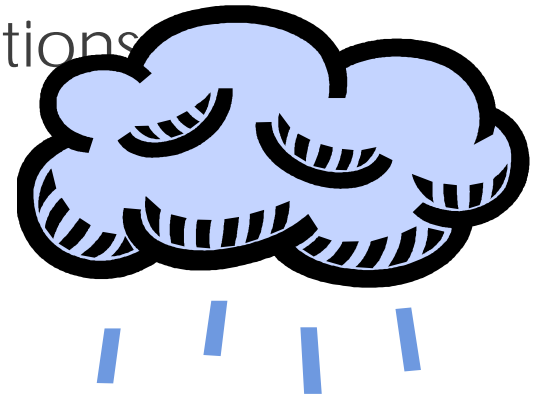
- ▶ Rain caused by atmospheric conditions

Religious perspective

- ▶ Pray for rain- God makes it rain

Navajo perspective

- ▶ Spirits of ancestors who died live in the clouds. They make it rain.





Illness Explanatory Model

Epilepsy Example:

Scientific/Biomedical model

- ▶ Problem with electrical functioning in the brain

Religious perspective

- ▶ God is challenging you
- ▶ Spirit possession

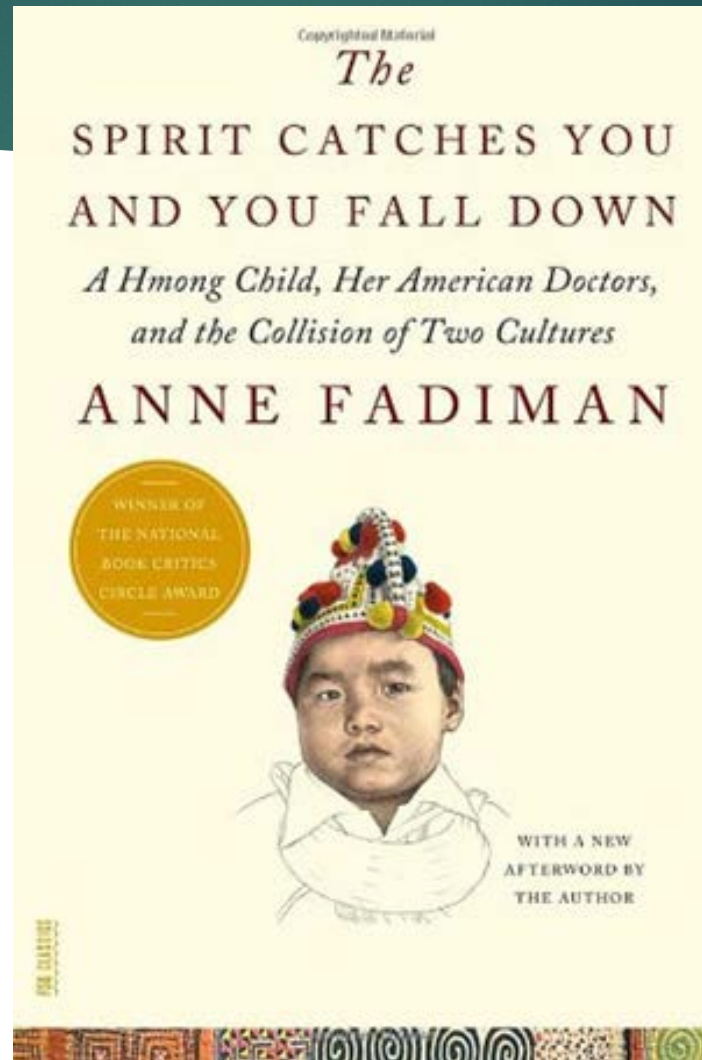
Hmong perspective

- ▶ The spirit catches you and you fall down.





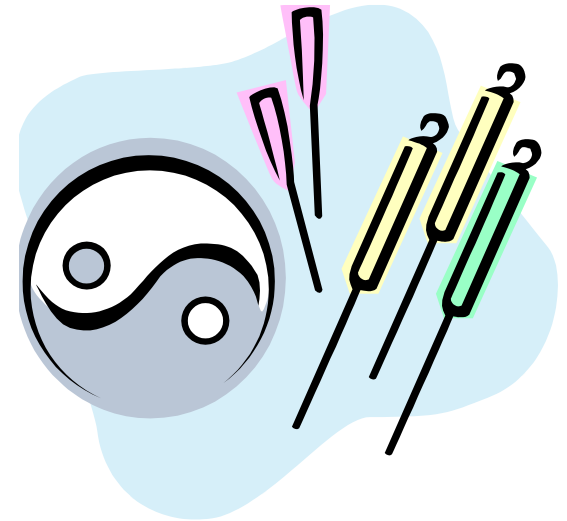
The Spirit Catches You...





C A M

Complementary and Alternative Medicine



CAM Knowledge is Important Because...

People *choose* to use **CAM**
practices because they believe
in them





Folk or Traditional Medicine

Many cultures have folk medicine traditions that may **co-exist** alongside biomedicine

- ▶ Medicinal plants
- ▶ Spiritual cures
- ▶ Teas, potions, lotions, aromatics
- ▶ Poultices
- ▶ Food





Traditional Healers



- ▶ Most cultures have people designated as healers
- ▶ Healer is often first point of contact when person gets sick
- ▶ Can be called many things: *Curandero*, *Spiritista*, *Hougan*, *Granny*, etc.

Latino Traditional Medicine

Health consists of both physical and spiritual elements



Fatalismo

Respeto

Personalismo

Downer, G. , Editor (2011) *HIV in Communities of Color : The Compendium of Culturally Competent Promising Practices: The Role of Traditional Healing in HIV Clinical Management*. National Minority AIDS Education and Training Center. Washington, DC; Howard University College of Medicine.

Curanderos



Curanderos serve as influential source of medical advice for some people from Latin America

- ▶ Emphasis on *holistic* treatment
- ▶ Physical health linked to *spiritual, emotional* and *social* factors

Photo by Baltimore
Bob



Botanicas



Botanicas often are focal points in the Latino community for health treatment and information

Botanicas and associated traditional medicine practices also serve as a treatment source when other conventional Western health treatments are unwanted or unavailable



Vodou

Nature and its relationship to living elements is sacred and spirit world is powerful.

- ▶ Vodou priest is **Hougan**, priestess is **Mambo**
- ▶ Soul loss=illness
- ▶ Magic & sorcery believed to bring good fortune and healing



Santeria



In spiritual world there are forces and entities that can lend their support to healing

- ▶ Need for internal balance and personal and social well-being
- ▶ Priest is a *Santeros*, Priestess is a *Santera*
- ▶ Use ritual dancing and songs (*membe*), herbs, prayer & *trance* to address physical issues associated with illness



Muslim Patients

- ▶ Islam is a religion practiced by people from many different countries.
- ▶ Key tenants of Islam:
 - ▶ Monogamous relations
 - ▶ Abstinence from sex outside marriage
 - ▶ Ritual washing after intercourse
 - ▶ Abstinence from alcohol consumption
 - ▶ Fatalistic view of health—it is all in Allah's hands
- ▶ Tend to see very low rates of HIV due to these practices



LBGTQ Patients

- ▶ Gender preference vs genetics
- ▶ Disclosure of gender identity
- ▶ Risk of HIV
- ▶ Stigma
- ▶ Respect





Traditional Chinese Medicine

- ▶ Balance of ***Yin*** and ***Yang*** inside the body to maintain health
- ▶ Illness due to ***internal imbalances***
 - ▶ Correct imbalances to allow body to heal itself
 - ▶ Harmony and avoidance of conflict
 - ▶ Use of herbal remedies common



Zen

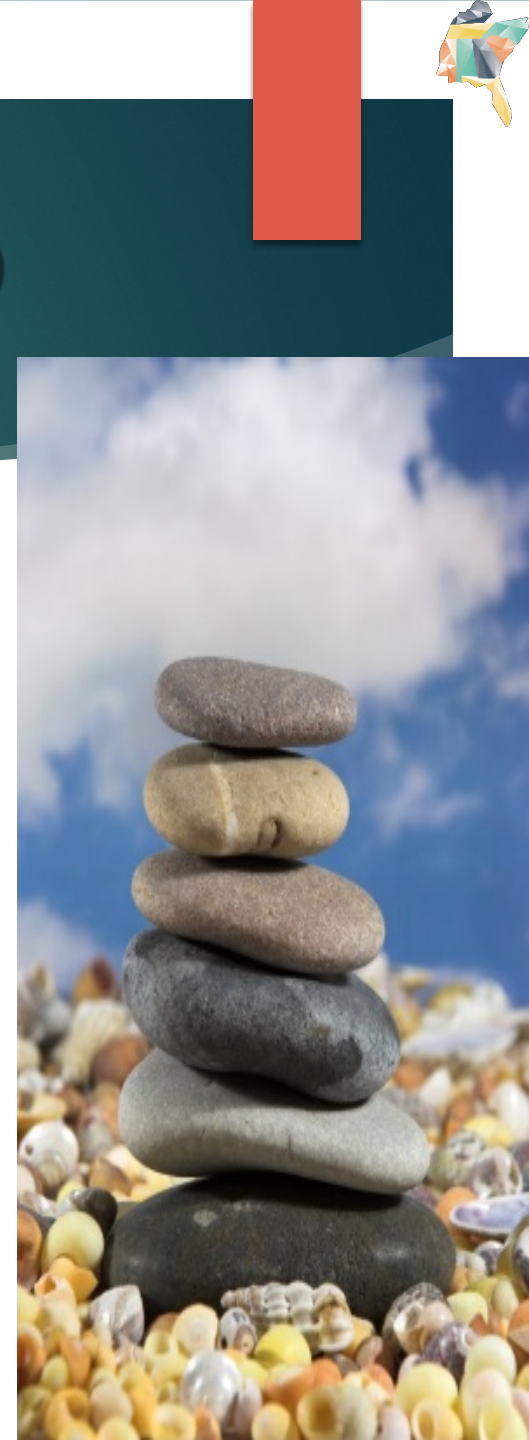
Includes meditation practices of classic Ch'an (Zen) Buddhism and T'ai Chi movement meditation.

- ▶ Body comprised of 3 aspects that together constitute health when in balance and harmony and illness when out of balance

3 body aspects are:

1. **Jing**=essence
2. **Chi**=energy
3. **Shen**=spirit

Promote *overall sense of well being* with quantifiable benefits in pain management, neuropathy, high blood pressure and immunity strength.



Spirituality

Spirituality and faith influence health practices and behavior and promote quality of life for many people with HIV/AIDS

Spirituality is an important component of many cultures

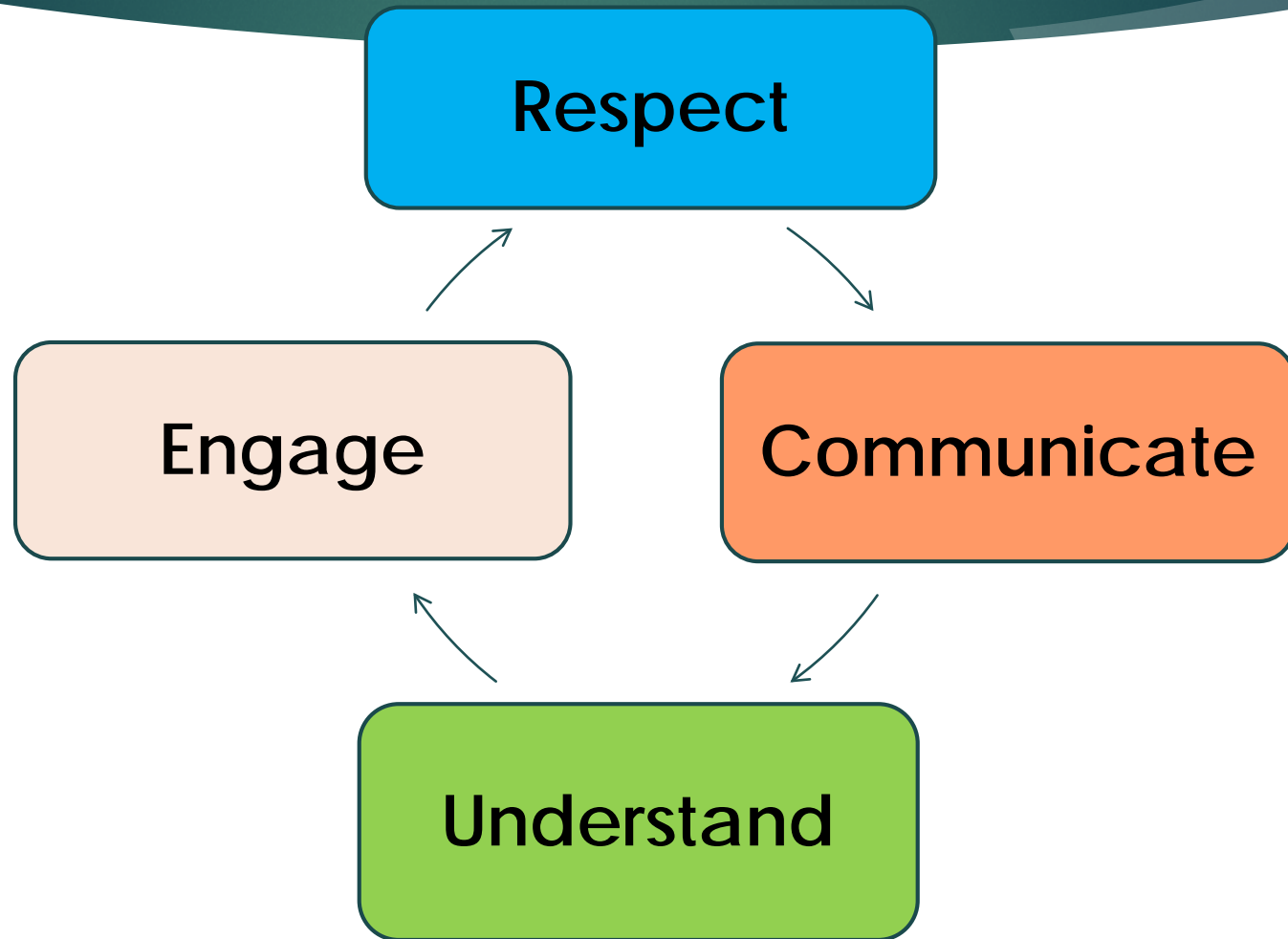
Spiritual/faith practitioners can be important sources of guidance and comfort during illness.

Downer, G. , Editor (2011) *HIV in Communities of Color : The Compendium of Culturally Competent Promising Practices: The Role of Traditional Healing in HIV Clinical Management*. National Minority AIDS Education and Training Center. Washington, DC; Howard University College of Medicine.





Cultural Awareness





Individual Cultural Awareness Elements

- Acknowledge & respect cultural differences
- Understand your own culture
- Engage in self-assessment
- Acquire cultural knowledge & skills
- View behavior within a cultural context



How do others see *YOU*?



Person- Centered Care

CULTURE
CARE
COMMUNICATION
COLLABORATION





Communication: Know your patients

- ▶ **Explore both the disease and the illness experience:** differential diagnoses, dimensions of illness, including feelings and expectations
- ▶ **Understand the whole person:** the whole person includes life story, personal and developmental issues; the context includes anyone else affected by the patient's illness



Opportunities to Assist Patients Living with HIV in Managing their Health

Talk about:

- ▶ Sex
- ▶ HIV testing
- ▶ Prevention
- ▶ Self-care
- ▶ Taking ARVs
- ▶ Healthy living
- ▶ Behavioral health



Create Partnerships with Patients Exploring Culturally Relevant Health Practices & Ideas

Direct

Guide

Follow

Teach

Draw out

Listen

Instruct

Encourage

Understand

Lead

Motivate

Go along with



#1 Communication Skill



Listening



The Art of Listening

- ▶ Focusing all of one's purpose, attention, and energy on understanding what the SPEAKER'S message means to the SPEAKER
- ▶ Focus on what the SPEAKER is experiencing right now as well as hearing what the SPEAKER is NOT saying

Next Week: Person- Centered Care

CULTURE
CARE
COMMUNICATION
COLLABORATION



Culturally Appropriate Care Means...

Καλώς ήρθατε

WELCOME



Dobro došli

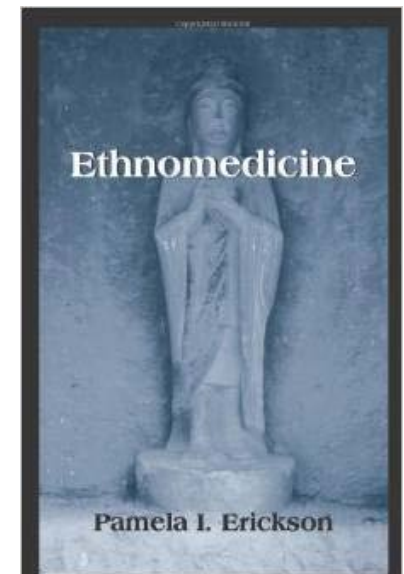
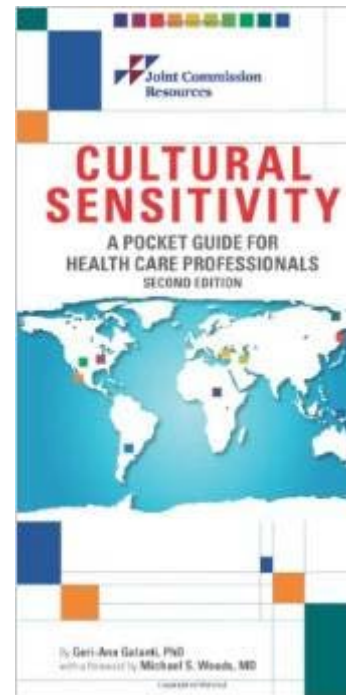
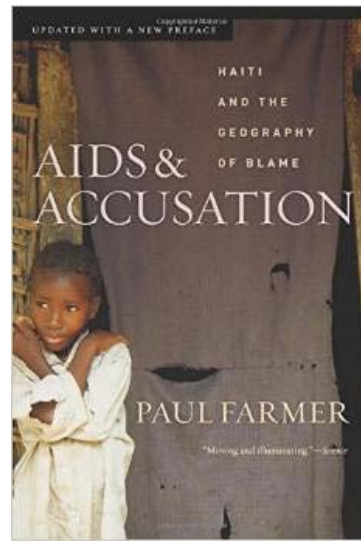
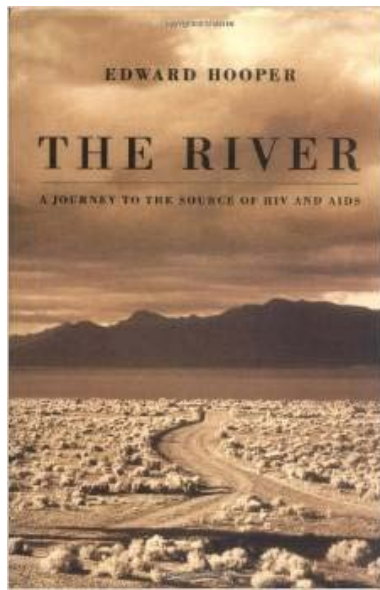
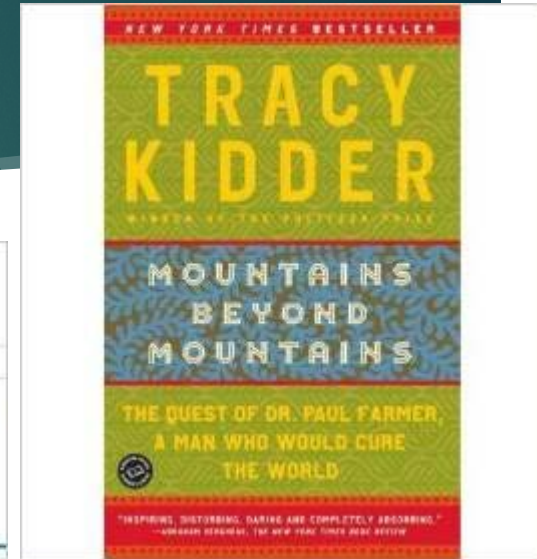
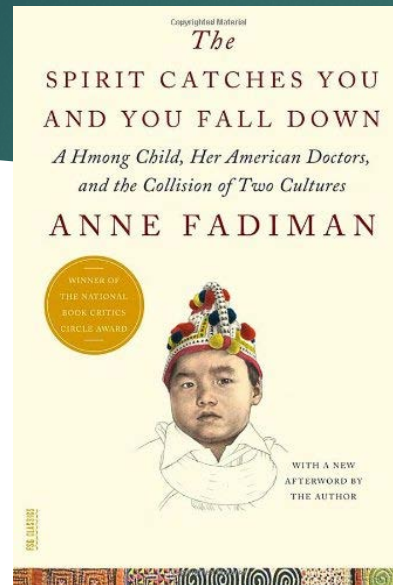
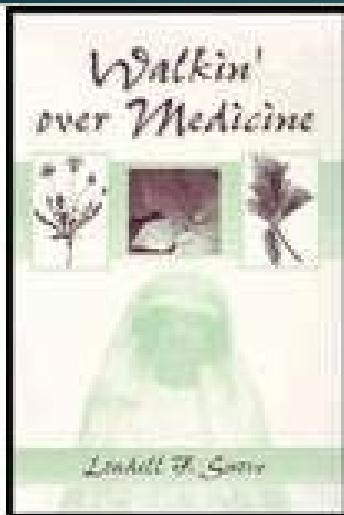


ยินดีต้อนรับ

WELCOME



Suggested Readings





HIV and Culture

Suggested Reading List

Erickson, P I. 2008. *Ethnomedicine*. Waveland Press, Oak Park, Illinois

Fadiman, A. 1997. *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures*. Farrar, Straus and Giroux, New York, New York.

Farmer, P. 1992. *AIDS and Accusation; Haiti and the Geography of Blame*. University of California Press, Berkley, California.

Galanti, G. 2012 *Cultural Sensitivity: A Pocket Guide for Health Care Professionals*, Second Edition. Joint Commission Resources, Oakbrook Terrace, Illinois

Hooper, E. 1999. *The River: A Journey to the Source of HIV and AIDS*. Little, Brown & Co. New York, New York.

Kidder, T. 2004. *Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, A Man Who Would Cure the World*. Random House Trade Paperbacks, New York, New York.

Snow, L F. 1993. *Walkin' Over Medicine*. Wayne State University Press, Detroit, Michigan

Questions & Answers



Speaker contact information

Lynn M. Deitrick, RN, PhD
lmdeitrick@outlook.com
(610) 762-0369