Cultural Competency for the Health Professional

LEARNING ACTIVITY

Description
This activity based on Patti Rose’s text: Cultural Competency for the Health Professional presents the student with an overview of cultural and linguistic competence and its relevance to healthcare professionals. Cultural understanding is the foundation for professional engagement and collaborative patient-provider interaction, trust, and compliance. Enhance the students’ ability to provide culturally sensitive care through chapter readings, questions/problems and case study application,

Competencies
C1. Health Equity and Cultural Competency

- C1.2 Diversity, Culture and Linguistic Knowledge
  - Define the following terms: race, ethnicity, and culture.
  - Discuss how race, ethnicity, and culture relate to health.
  - Recognize diverse religious and cultural beliefs and practices and how they can affect health and health behavior.
  - Understand that within diverse populations individual religious, cultural, and social beliefs and practices and language may vary.
  - Identify basic theories of health and illness and how it influences health seeking and treatment behavior.
  - Describe diverse worldviews in the context of oral health education and communication (e.g. personal experience, culture, religion, health beliefs, time, space, and social organization).
  - Describe various models of cultural competence.
  - Define the following terms: cultural desire, cultural awareness, cultural knowledge, cultural skills, and cultural encounters.
  - Explain how sex, gender identity, age, race/ethnicity, culture, religion, language, disability, socioeconomic status, and other factors may affect communication and oral health service delivery.
  - Recognize that cultural and linguistic differences between patients and oral health providers can magnify health literacy issues.
  - Describe best practices in verbal and written communications with and providing oral health care services to young children, children, adolescents, older adults, and people with mental illness and other disabilities.
o State ethical and legal importance of using bilingual staff and professional medical interpreters instead of patient’s family members and friends to communicate health information.
o Contrast interpreter and translation (language assistance) services and their scope of practice.
o Summarize effective strategies for working/collaborating with an interpreter or translator.
o Describe best practices in verbal and written communications that incorporates diverse patient cultural and religious beliefs and practices and preferred language.

Learning Outcomes

- Support the perspective that every patient encounter can be considered a cross-cultural experience.
- Appreciate diversity and the need for culturally competent health professionals to confront health disparities and achieve positive health outcomes.
- Develop a strong knowledge base to empower the practice of culturally competent patient care.
- Value interprofessional healthcare approaches and practices.

Activity

Use of the entire text is recommended. Specific chapters can be assigned or chunked to aid in comprehension and application. Chapter Problems can be selected for engaging class discussion (on-line or face-to-face). Content from specific chapters can be formalized into quiz and exam avenues to reinforce student learning. Chapter Nine’s Case Studies encourage application of concepts with an emphasis on interprofessional approaches to culturally competent healthcare.

Student Assessment

Chapter Problems and Case Study responses presented by the student as written answers or discussion thoughts can serve as indicators of the student’s level of knowledge.

Quiz and exam formats can objectively assess student learning.

Student understanding of concepts and ability to transpose knowledge into clinical application will require educator observation and assessment during role-plays or actual patient-provider experiences.
Resources

Suggested Placement within Curriculum
Use of the Rose text, Cultural Competency for the Health Professional, can be integrated throughout clinic theory course content. When placed within first year curriculum coursework, the content covered will enable clinical application and encourage professional growth. Another approach is to use the text in a stand-alone course designated to the study of cultural competence in healthcare delivery. Follow up either didactic approach with clinical application opportunities to reinforce knowledge and practices throughout the academic program.