

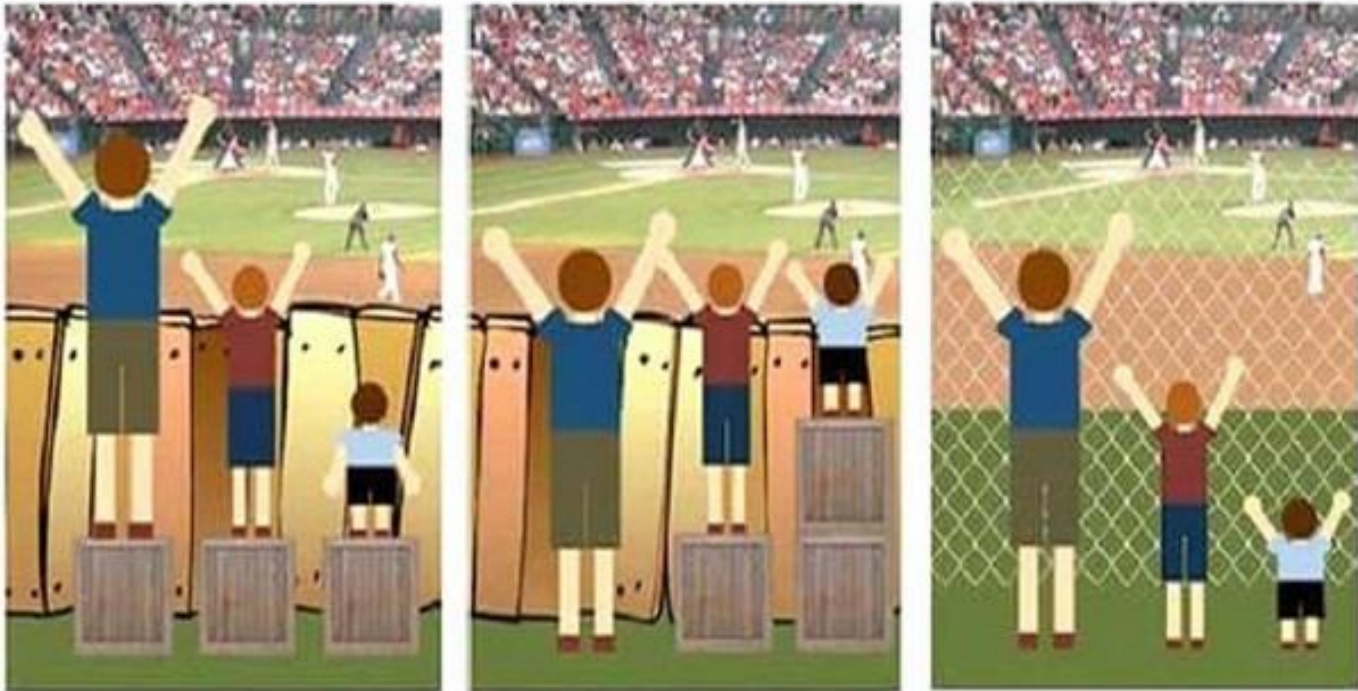
Promoting Health Equity in Healthcare through Cultural Humility

Learning Objectives

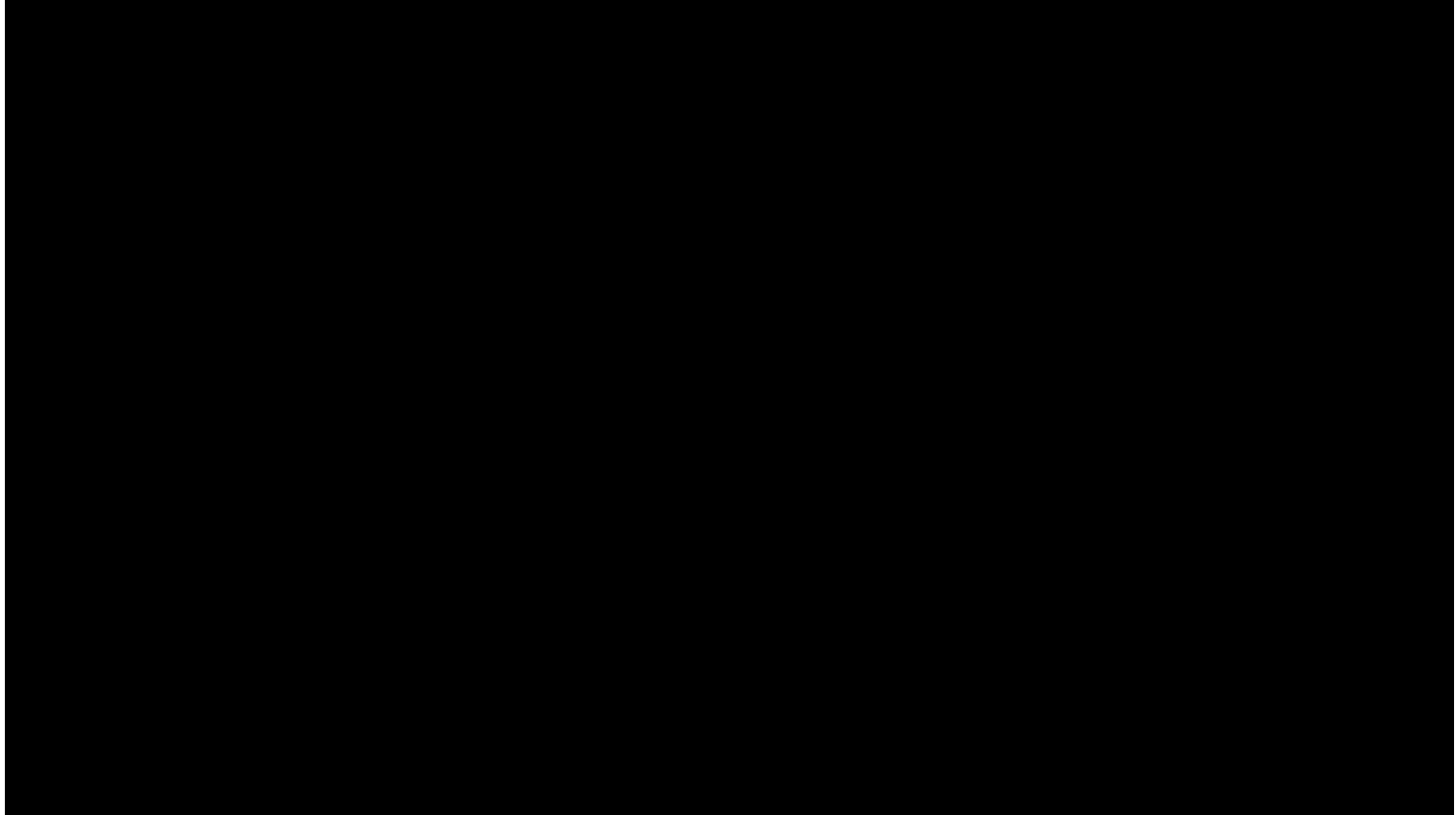
1. Define health equity.
2. Explain how social determinants affect health in communities.
3. Understand the concept of Unconscious Bias and its effect in healthcare.
4. Apply the concepts of cultural humility by identifying tools to create a welcoming environment for diverse communities.

What is Health Equity?

- **Health equity** means that everyone has a fair and just opportunity to be as healthy as possible.



Suburban Color Lines video



The Path to Achieving Health Equity

What social and economic factors must be addressed on the continued path to achieving Health Equity?

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.



Social Determinants of Health

Economic Stability

- Employment
- Poverty
- Food Insecurity
- Housing Instability

Education

- Early Childhood Development and Education
- High School Graduation
- Enrollment in Higher Education
- Language and Literacy

Social Determinants of Health

Health and Health Care

- Access to Health Services
- Access to Primary Care
- Health Literacy

Neighborhood and Built Environment

- Access to Foods that Support Healthy Eating Patterns
- Quality of Housing
- Crime and Violence
- Environmental Condition

Social and Community Context

- Social Cohesion
- Civic Participation
- Incarceration
- Discrimination

Limited English Proficient (LEP) Americans

States with the largest LEP populations:

- California (6.8 million)
- Texas (3.4 million)
- New York (2.5 million)
- Florida (2.1 million)
- Illinois (1.1 million)

60 Million

Americans speak more than one language

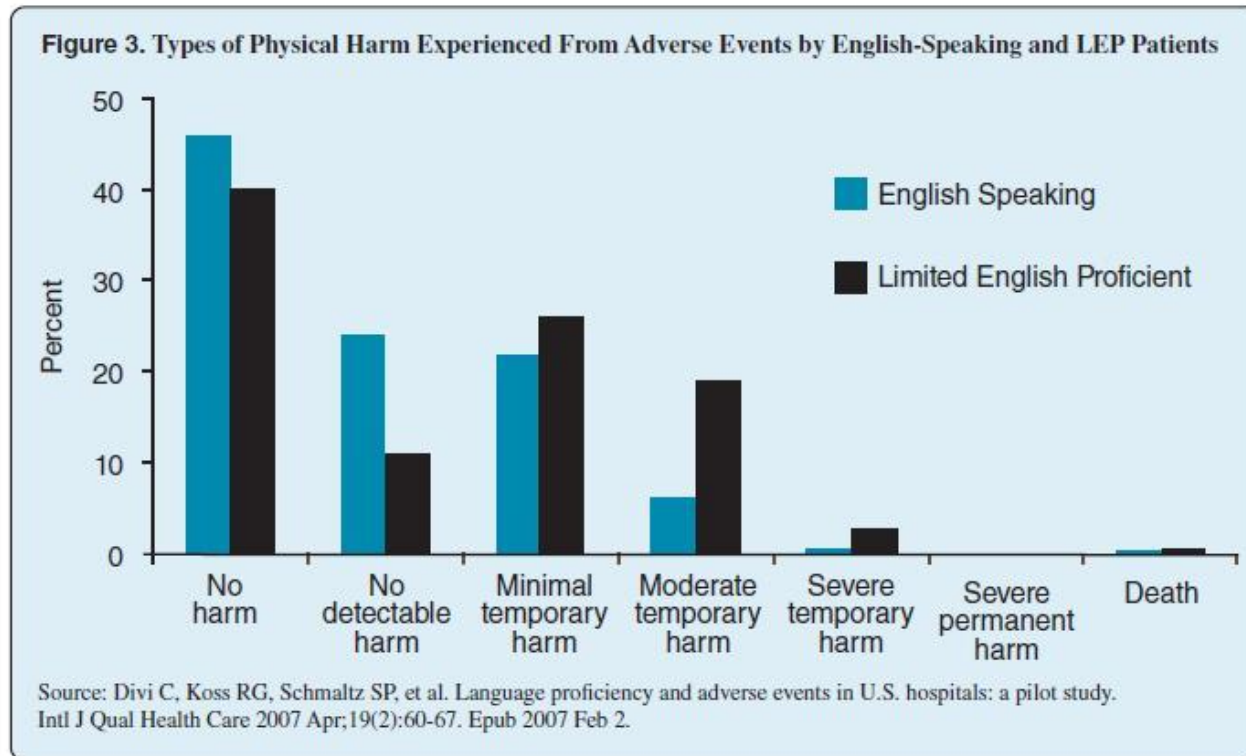
350 Languages

25 Million

require language assistance

What We Know About Patient Safety and LEP

- Research demonstrates that language barriers can have significant impact on multiple aspects of health care and contribute to disparities in patient safety between English speaking patients and LEP patients.
- Communication problems are the most frequent root cause of serious patient safety events reported to the Joint Commission's Sentinel Event database.



Common Causes of Adverse Events for LEP and Culturally Diverse Patients

Use of Ad Hoc Interpreters

- Research confirms that untrained hospital staff who serve as interpreters are more likely to make clinically significant mistakes than qualified interpreters.

Use of Basic Language Skills to “Get By”

- Clinicians with basic foreign language skills often attempt to “make do” or “get by” without the use of a competent interpreter, increasing patient risk.

Cultural Beliefs Affecting Patient Care

- Cultural beliefs, i.e. minimizing pain, deferring to authority figures, and following certain gender roles, can influence the medical encounter and increase risk.

Common Disparities Experienced by LEP and Culturally Diverse Patients

Risk Management

These may include situations relating to:

- Complications and lack of follow-up
- Improper use of medication
- Improper prep for tests and procedures
- Poor and adequate informed consent

Common Disparities Experienced by LEP and Culturally Diverse Patients

Patient Safety, Quality and Cost Drivers

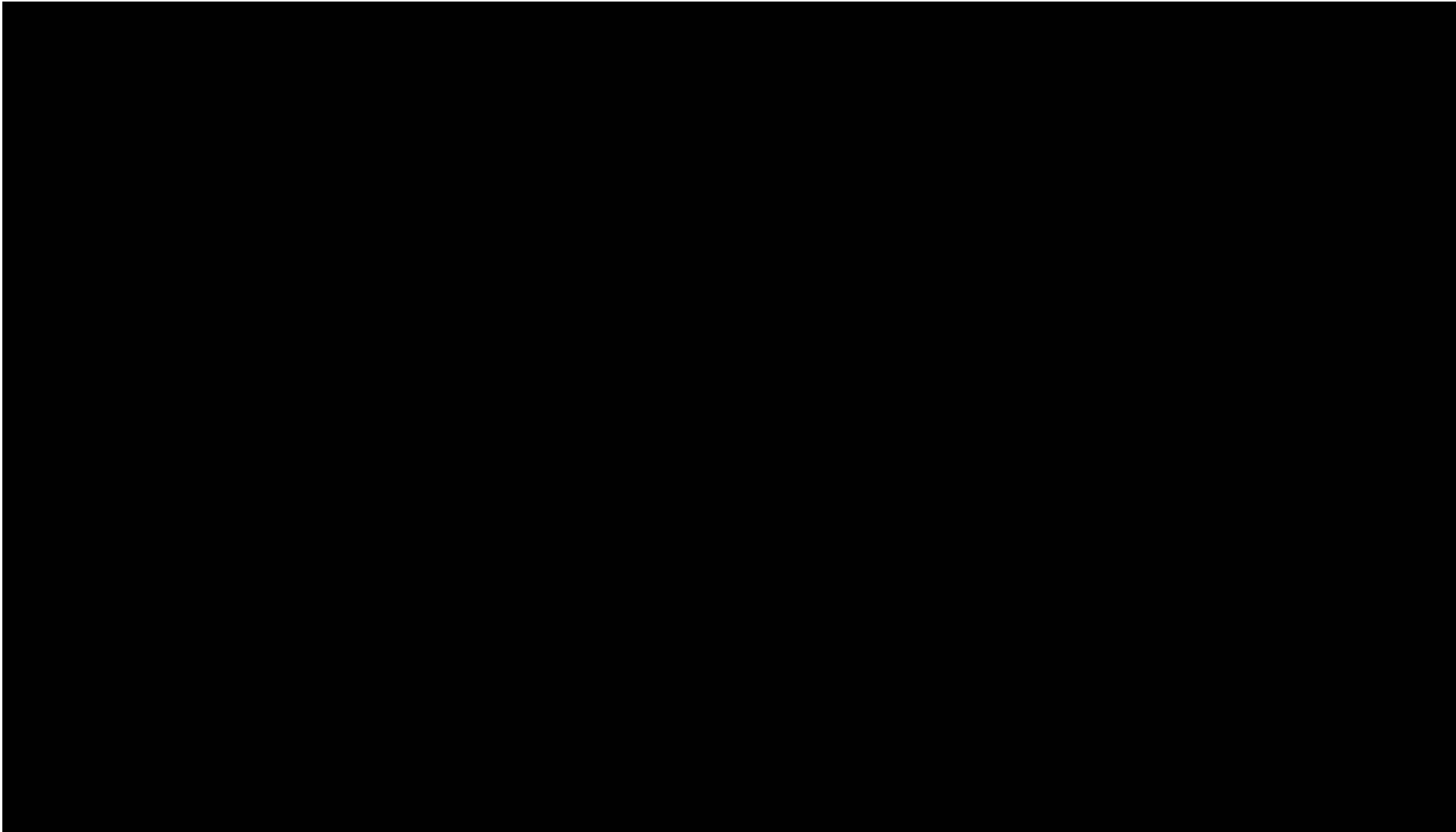
- Longer hospital stays.
- Greater risk of surgical delays and risk of readmissions.
- Less likely to understand their diagnoses, medications, and follow-up instructions.



Unconscious Bias

- Everyone has unconscious bias. Most of the time its super functional and help us get through the day by making thousands of quick decisions without us having to think about them.
- Our brain is perfectly suited for quickly filtering huge amounts of information, prioritizing, categorizing, and summarizing our surroundings for us unconsciously.
- Bias that happens automatically, is outside of our control and is triggered by our brain making quick judgments/assessments of people and situations, influenced by our cultural background and experiences.

Unconscious Bias and Self Awareness



What is the impact of unconscious bias on health?

White male physicians are less likely to prescribe pain medication to black patients than to white patients.

Pregnant women face discrimination from healthcare providers on the basis of their ethnicity and socioeconomic background.

Women presenting with cardiac heart disease (CHD) symptoms are significantly less likely than men to receive diagnosis, referral and treatment, due to misdiagnosis of stress/anxiety.

*Certain biases are essentially invisible to institutions and providers unless they constantly gather and analyze data about treatments and ethnicity of the patients.

Quick Tips to Mitigate Unconscious Bias

Develop the capacity to use a flashlight on yourself

Take an honest look at how you are, who you are, and which messages and biases govern your everyday life – do this without self-judgment.

Recognize stereotypical thinking.

Check your assumptions and truths you have about others and ask questions from a non-judgmental place.

Take a pause , check your reaction and explore a new perspective.

Pay attention to what's happening beneath the judgments and assumptions.

Explore awkwardness and discomfort.

It's okay to feel unsure what to feel, do or say.

Engage with people outside your comfort zone.

Socialize with diverse groups.

Get feedback from others.

People can help you see your patterns, blind spots and biases and their impact.

Cultural Humility

Rather than seeking to be an expert in others' cultural norms or beliefs, cultural humility invites us to admit that there is much we don't know and can't know.

The cultural humility is an approach that emphasizes recognizing the need to learn about the client's experience, values, beliefs and behaviors by asking and listening deeply to what they tell us.

This framework encourages each of us to study and learn about the history and traditions of other communities and remind us that we cannot become experts in the culture or cultural identity of another. Only the clients and communities we work with are the true experts in their own experience, culture, values, and beliefs.

The National CLAS Standards

Now that we understand the challenges of improving population health, what do we do about it? How do we approach these complex issues that started way before we were born and will likely take many years to undo?



National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to:

Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs. (Principal standard)

Recruit, promote and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.

Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.

Strategies to Create a Welcoming Environment for Diverse Communities

Avoid making assumptions based solely on the patient's country of origin. Cultures and beliefs vary according to regional or demographic differences.

Gather resources needed to educate yourself. From local the bookstore to web-based programs, there are many resources aimed at cultural competency.

If there is something you don't understand about the patient's culture, ask about it. As long as questions are posed in a respectful way, patients most likely will appreciate the fact you want to understand their culture.

At all times, treat the patient and family with respect, and show that you care about them. You don't need to be an expert to communicate effectively. By demonstrating your interest in their beliefs you will build a relationship based on mutual respect and trust.

PAVING THE ROAD TO HEALTH EQUITY

Health Equity
is when everyone has the opportunity
to be as healthy as possible



Programs

Successful health equity strategies



Measurement

Data practices to support the advancement of health equity



Policy

Laws, regulations, and rules to improve population health



Infrastructure

Organizational structures and functions that support health equity

Thank you!

Samantha Rosario

Program Director, Diversity and Health Equity
Center for Equity of Care
Office of Diversity, Inclusion and Health Equity

Srosario3@northwell.edu