Applying Cultural Competence for Effective Social Interactions in the Fields of Education and Communication and Medicine

Hannah Mettias, Pre-Medical student in Psychology (BS)

Introduction

As a pre-medical student majoring in psychology and looking at becoming a physician among a rural population in multicultural Hawaii, I am interested in the role of cultural competence in the health field. Cultural competence, which psychologist Laura Brown defines as being aware of the realities of cultural differences in order to prevent stereotypes (and in my opinion, to dismantle them as well) is important especially in multicultural settings. The multiculturalism that is associated with Hawaii, which is home to the largest portion of multiracial Americans in the nation (Krogstad 2015), is rooted in the historical sugar industry’s importation of laborers from various places such as China, Japan, and the Philippines to work in the plantations (Fox 2017). The Europeans involved in the colonialism of the Pacific of indigenous Native Hawaiians and the growing population of Micronesians due to immigration also contribute to the multiculturalism in Hawaii. This multiculturalism influences the culture and communication in Hawaii present today. However, with this multiculturalism comes cultural stereotypes--fixed, overgeneralized beliefs about a particular group or class of people (Cardwell, 1996). Cultural competence works to prevent these stereotypes in various settings. A study done by CM Abdou et al showed that overall, patients who felt that physicians who held certain stereotypes about them were more likely to put off treatment for their health problems (2016). Perhaps this is because stereotypes can create a sense of threat that generates frustration and distrust, thus putting less value on the physician’s suggestions for care. This shows the
importance of being aware of the realities of cultural differences in order to allow for effective responses. In the case of Abdou, this can literally be a life or death issue. With such a multicultural population in Hawaii, physicians need to be aware of and sensitive to the culture of their patients in order for their methods of treatment to be implemented effectively in a way that ensures the best treatment and outcome for the patient.

**Background**

In the current literature, the health field has acknowledged the importance of cultural competence in the health field, much of the scholarship and research on cultural competence originated in the field of education. Research on cultural competence in the classroom has shown that children from ethnically diverse backgrounds can sense when cultural stereotypes are present and they can easily develop a negative view of their own cultures when these stereotypes toward their culture are expressed. Teachers play a pivotal role in shaping the attitudes of the student towards their culture and developing a sense of citizenship in the world, which ultimately is the goal of teaching (Gomez 1991). If individual cultural differences are not addressed and positive views of one’s cultures are not fostered, children can feel excluded and misrepresented, which affects their learning. Therefore, teachers must find and utilize skills that effectively combat this and instead foster acceptance of one’s culture.

Juan Carlos Garibay (2015), a professor and researcher in diversity and social justice in education, created a handbook focused on creating an inclusive classroom environment that values diversity and fosters success. The booklet is built to be applicable to all classroom settings and pulls from an educational framework that incorporates specific skills to use when communicating with students from marginalized populations-- using inclusive language, being
aware of your responses, and giving feedback that includes praise, among other things. Psychology gives insight into some of these skills, explaining that sociocultural factors and levels of assimilation impact children’s learning styles and abilities (Garza 1991). According to Garza, teachers must get to “know” these populations in order to motivate and instruct them in an efficient manner (1991). Therefore, teachers must be aware of the learning needs of students from diverse backgrounds in order to motivate and instruct students in an effective manner (1991). Similar to teachers’ roles as educators, physicians can be seen as educators in the health field. According to McCann and Blossom, physicians can and are even encouraged to use educational/communication strategies as a means of enhancing patient decision-making skills (1990). This can bring about positive outcomes by allowing more successful patient-physician collaboration in the decision-making process (Institute of Medicine 2013).

My portfolio will showcase how the research that was done in the education and communication field is applicable to the health field as well. Research on cultural competence in the health field has given similar results as that of the education and communication field. For example, Sanchez and Gaw explains the necessity for healthcare providers to effectively communicate with patients in order to account for mental aspects of healthcare such as the interpretations and perceptions of the receiver (2007). This can be done by understanding and accommodating the ways of thinking behind the culture. For example, there is a strong sense of family among Filipinos, which plays a part in their views and responses to healthcare. Likewise, culturally sensitive physician-patient communication is important for the effectiveness of treatment, and lack of cultural sensitivity or competency can result in unconscious bias or projection of stereotypes onto patients from ethnically diverse populations (Geiger 2001).
Overall, just as in the classroom setting, taking culturally sensitive approaches such as what Kamaka et al. describes as respect for persons and interpersonal skills (2011) promotes effective delivery of information in medical settings.

Goal

Many conversations in psychology center on cultural competence and multiculturalism. I am interested in following these conversations in psychology with the goal of drawing from extensive research done in the education and communication fields and applying it to the health field. I want my portfolio to showcase how my learning in other fields can be applicable to the other in order to ultimately display my future career goals as a physician who is culturally sensitive in order to increase their chances of positive health outcomes.

My goal for the honors portfolio is to draw on some of my experiences and connect them in a way that develops and implements the skills needed when interacting with people from diverse cultures in various settings—both academic-related and health-related. As someone who is Filipino, which is an ethnic group that is at higher risk for certain diseases, I also need skills in cultural competency in dealing with students who are also from ethnic backgrounds. Hawaii is so multicultural that even as someone from an ethnic background, my awareness of other cultures is necessary to succeeding in effective communication. As teachers and physicians, the ways we interact socially and our attitudes towards people of diverse cultures greatly influence the effectiveness of the message we are trying to communicate. According to McCracken, educators who are able to be sensitive to and well informed on cultural differences are able to teach effectively (1993).
I am going to need skills in cultural competence in order to effectively pass on information to patients in ways which they can best receive it, especially if I am planning on becoming a physician in the future. Through my component involvements of tutoring (which includes delivering academic information) and the National Kidney Foundation of Hawaii (which includes delivering information about health), I hope to apply the knowledge I gain from the literature review on cultural competence in education and communication to the health field when interacting with individuals from minority populations.

**Components/Methods**

Since research on the academic classroom is well developed in regards to cultural competence in teaching ethnically diverse students, it would be useful to draw from education and communication fields and apply it to the healthcare field. The similarity of these fields lies in the fact that both involve passing on information. Furthermore, the success of the transmitted information lies in the effectiveness of the communication in education. Cultural competence influences this effectiveness of communication in both educational and healthcare settings.

The first component of my portfolio project will be a focused systematic literature review on research done on cultural competence in education and communication. Doing a literature review will allow me to draw from the extensive research done on cultural competence in classroom settings and to think about its application to healthcare. I will first begin my literature review training by meeting with a librarian from Hamilton Library in order to learn how to develop a systematic process in which to do my literature review. I will take the knowledge gained from this literature review and apply it to the other components by using it as a foundation for the artifacts that will be produced from those components. By doing a literature
review, I will be able to expand on what I know so far about cultural competence and see its
effectiveness when played out in education and communication settings. Since the components
were not developed specifically to address the topic of cultural competence, doing a literature
review will allow me to take the research that has been done and introduce it to the component
settings.

The second component of my portfolio draws on my experience of tutoring at Kuhio Park
Terrace on O’ahu. This tutoring program is a part of the Lawakua Charitable Fund, which
recruits children from public housing projects in order to guide them to a more hopeful future. In
addition to the martial arts club where the students learn discipline, respect, and hard work,
Lawakua also provides educational assistance to the students through scholarships and the
tutoring program. This after-school program takes place twice a week, where about 20-30
students from ethnically diverse backgrounds come in to work on their school work. There is a
wide range of students based on ages and abilities. As one of two tutors, it is my role to motivate
the students to stay focused in order to complete as much school work as they can in the allotted
tutoring time. We keep up with them in their school involvements, check up on their grades, and
help them with any questions they may have regarding their homework. For some who were not
able to learn a topic well in school, it is our role to re-teach these topics to them in a way more
applicable and relevant to their learning styles-- whether this means giving them practice
problems or drawing out visuals. While some of the students are motivated on their own, others
find it hard to set time aside to work on school.

Therefore this tutoring program fills the need of providing a time purely devoted to
studying along with resources needed to clarify certain subjects for the students. From this
component, I will produce a handbook tailored to teaching students from ethnically diverse backgrounds. This handbook will elaborate on skills drawn from the literature review and gathered from observational notes regarding cultural competence needed to effectively pass on culturally competent teaching and learning strategies to these students at Kuhio Park Terrace on O’ahu.

To complete this handbook, I will incorporate and take from research done in the literature review and speak with the tutoring program director about the demographics and specific needs of the program. This handbook will be available for future student volunteers/tutors in order for them to engage in culturally competent teaching and learning strategies when tutoring. Furthermore, this handbook will be a way of providing information about the tutoring program to outsiders who are curious about what the program entails. Throughout this process, I will be occasionally meeting with my supervisor to obtain feedback on the development of the handbook.

The third component of my portfolio project will draw on participation in the Shaping Healthy Individuals for Tomorrow (SHIFT) program throughout the Fall 2019 semester. This program is a part of the National Kidney Foundation of Hawaii, which was started in the 1950’s, aimed at raising awareness about the danger of kidney disease and educating the public on its prevention. Throughout its development, the National Kidney Foundation was able to expand its efforts in order to further its goal of providing educational tools to the public in order to reach school-age children. Programs like the SHIFT program allow for the education of school-age children to learn more about kidney disease. My involvement with this program will consist of preparing to teach the lesson and going through the script that is established in the curriculum.
Next, throughout the Fall 2019 semester I will be going with the SHIFT program leaders to three different public schools with students on Oahu to present the SHIFT curriculum to ethnically diverse students. I will be following their established curriculum to teach them about various health related subjects—how the kidneys function, healthy habits and their importance, prevention of diseases, and other topics. Since I am not a physician, this component gives me a similar opportunity to that of a physician in the sense that I will be delivering information about health. This is a perfect middle ground between the two settings, in which health information is provided in a classroom setting.

The curriculum that they have is very well-made, and it will be interesting to look at the level of cultural competency it incorporates. It will also be important to observe if/how the curriculum accounts for the the multiculturalism that is specific to Hawaii and if/how it is integrated in both the training prior to going to the classroom and the actual implementation of the curriculum in the classroom. From this component, I will keep a journal throughout the preparation and implementation that analyzes how the information from the literature review is apparent in these settings as well as note my observations on aspects of cultural competency in the settings. This journal will be an opportunity to include skills of cultural competency that I observe and to note their perceived effectiveness. Furthermore, upon completing the visits to the schools, I will produce a feedback document for the NKFH discussing my observations on cultural competence in the program and the levels of success in its integration in the program. Hopefully, this will be able to highlight the cultural competence aspect of the program and help to bring awareness to its role in the effectiveness in the program.
Why a Portfolio?

Because of the applied psychology nature of my project, the portfolio format is a ‘good fit’ to obtaining my project goals. By completing a portfolio project, I will be able to apply the information taken from literature reviews in practical ways to classroom settings. Since the theme of my project is looking at skills in cultural competence and in observing cultural competence played out in actual situations in various settings, it requires taking the research that has already been done and applying it to actual practice situations. The portfolio format allows me to incorporate multiple settings and experiences in order to take steps towards furthering my own knowledge on cultural competence in order to put it into practice in the future. Likewise, through this format, I will be able to demonstrate my learning on specific cultural competent skills that are useful through the artifacts that will be produced. The artifacts allow me to add something to the cultural competence of the settings that I will be involved in as well as demonstrate my learning through the production of the literature review, handbook, feedback paper, and journal artifacts. Additionally, rather than creating a hypothesis and proving it, the portfolio format will give me the opportunity to observe the cultural competence that already exists in the classroom settings. Finally, as a pre-med psychology major, I would rarely get the exposure to the educational and communication field which so much of the research on cultural competence stems from otherwise. The portfolio format provides me with the opportunity to participate in this field of education in order to get a firsthand view on the settings in which much research has been done. Doing a portfolio would allow me to make a better connection between my learning in my major of psychology and my future career goal as a physician. It will
help to make the education and communication concepts relevant to me in a way that they can be used in the future.

**Timetable**

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<th>To Accomplish:</th>
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<tr>
<td><strong>Spring 2019</strong></td>
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<tr>
<td>- Finalize components</td>
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<td>- Complete/submit proposal</td>
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<td>- Continue tutoring component</td>
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<td>- Orient with librarian how to do systematic literature review</td>
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<td>- Prepare/plan out SHIFT component with National Kidney Foundation of Hawaii</td>
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<td>- Turn in mentor form</td>
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<td><strong>Summer 2019</strong></td>
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<td>- Continue involvements</td>
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<td>- Continue literature review</td>
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<td>- Make observations</td>
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<td>- Continue meetings with mentor</td>
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<td>- Begin to create artifacts (tutoring handbook)</td>
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<td>- Volunteer NKFH</td>
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<td><strong>Fall 2019</strong></td>
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<td>- Continue involvements</td>
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<td>- Begin reflection paper</td>
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<td>- Continue to create artifacts (tutoring handbook, NKFH journal,</td>
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<td>Feedback Paper</td>
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<td>Spring 2020</td>
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Works Cited:


H. Jack Geiger. Racial stereotyping and medicine: the need for cultural competence
IOM. (2013). Partnering with Patients to Drive Shared Decisions, Better Value, and Care Improvement.


