Cross-Cultural Health Care
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Asian, African, and Hispanic
- Asian—mostly Southeast Asia
  - China, Thailand, Vietnam, Lao, Cambodia etc..
- African—mostly East African
  - Somali, Ethiopia, Eritrea, Sudan and Kenya
- Hispanic
  - Mexican, Cuban, and Puerto Rican

Cultural Considerations
- Hand gestures
- Birthdays
- Time
- Names

Hand Gestures
- In the U.S.- the middle finger is disrespectful
  - Asia: this finger is used to make a point while talking
- Outside of the U.S.- the left hand is disrespectful
  - Africa and Asia: writing with the left hand is forbidden
  - Africa uses the right hand to eat and greet. Giving the prescription to African pts with left hand is inappropriate
  - Using the index finger to point or to call an African pt is considered inappropriate and a put-down
  - Asia and Africa: hand holding with the same sex is normal
- Hand gestures—waving a patient to come
  - Palm facing down is a way of communicating with Mien pts
Birthdays
- Important in the U.S. but not in Asia or Africa
  - Asia: it is flattering to be considered older than you look—status driven
  - Asia: 1 year old at birth
  - America: it is flattering to be considered younger than you look
- Popularity of January 1 birthdays
  - Most foreign patients do not know their real age or birthday
  - Africa: born on or after birth
  - INS will designate them January 1 of the estimated year
  - Lack of knowledge in age affects calculating creatinine clearance and timing of pneumococcal injection
- Memorial dates
  - U.S.: a national holiday to celebrate a significant person’s birthday
  - Asia and Africa: memorial of ancestors—day to remember a person’s death
  - Need to tell them when the pharmacy is closing since they do not celebrate
- Baby showers: before birth or after birth?
  - Asia and Africa: celebrate birth after baby is born due to high mortality

Time and Year
- In the U.S.: Time differences based on location
  - Ethiopia: time is based on sunrise—6 hrs different
  - When the appointment slip states 10 AM, they call it 4 AM
- Understanding medication and insulin use
  - Important in timing of antibiotics or medications that are time sensitive—interpreters may need to give them both times
- Calendar
  - Lunar in Asia: 12 lunar animals
  - Julian in Ethiopia: now 1997 and New Year = September 11th
  - Gregorian in the U.S.: 12 months and now 2005
- US: month/day/year Vs. outside of US: day/month/year
  - They may interpret refill or expiration date as: day/month/year
  - Example: “May refill until 2/10/04” = October 2nd, 2004

Names
- First name and last name
  - Asia: prefer last name, first name in spoken and written language
  - Cambodia: there is no comma between the two in written language
  - Asia and Africa: names could be interchanged first, last or both
  - Africa: they do not use last name—called by first name (Mr. First name)
  - In the pharmacy, it is okay to address African patients by their first name
- Addressing an Hispanic and Asian female patient
- Name change after marriage: not in Asia or Africa
- Children’s last name
  - Africa: from father’s last name and they do not have a middle name
  - Cambodia: majority are from father’s first name, some from last name
- Names based on seasons, date, year, and rank

Asian, African, and Hispanic
- Communication Style
- Health Beliefs
- Medication Use
Asian: Communication Style

- Direct expression of feelings are considered rude
- Formal relationship with healthcare providers
- Quiet, polite, and lack of eye contact are signs of respect to healthcare providers
- They often give gifts to thank providers or as "favors"

Asian: Health Beliefs

- Barter culture—believe in barter healthcare
  - May barter for time the prescription will be ready
  - May negotiate on the number of medications taken
- First come first serve—constant drop-ins
  - They do not understand that clinics are not urgent care centers
- Like injections
  - Feel injection is better than oral medications for major illnesses

Asian: Health Beliefs

- Believe in balance
  - Chinese: yin/yang
  - Vietnamese: differentiate food into hot versus cold groups (they will say the medication is either too hot or too cold when expressing side effects)
  - Feel that food has side effects and not medicine (since herbal is from a natural source)
- The fatter, the healthier
  - Encouraging weight lost for health reasons are not accepted
  - Educate pt on the relationship of fat and heart disease

Asian: Medication Use

- Like to mix Western medicine with traditional remedies
  - Use Western medicine for acute problems (i.e. antibiotics)—believe it is too potent to use long-term. When providers reduce the dose, it confirms this thought
  - Use traditional remedies for long-term problem (chronic disease)
  - Herbal medicines are boiled—they may boil prescription medications to "get the real medicine"

Asian: Medication Use

- Depression
  - Prescriptions for anti-depressants are written without indication since treatment is culturally unaccepted
  - Believe in physical treatments to release "wind"
    - Coin rubbing, cupping and therapeutic burning—concerning with warfarin therapy
African: Health Beliefs
- There is a cure to everything
  - They would stop their HTN or diabetes medications if you tell them their disease state is controlled
- Herbal use in the country
- Tablets versus capsules: pork content
- Lack of sweating can cause illnesses

African: Communication Style
- Verbally expressive—will not hesitate to tell you about medication side effects
- Females patients are not forthcoming in women’s health issues when they see male providers—may seek female pharmacists
- Muslim females usually refuse a female exam by a male provider
- Male patients may not like young female pharmacists counseling or young providers
- Often guarded with mistrust; respect is earned not given

African: Medication Use
- Believe honey has medicinal properties
  - It’s considered “the urine of the bee that eats flowers and plants”
  - Education needed with diabetic patients
- Fasting for religious purposes is a conflict with medication compliance
  - Education during Ramadan—the holy fast for 1 month
- Side effects are associated with color, shape, or form of the medications
  - Ferrous sulfate is too strong since it is red in color
- Constipation is common—often complain of abdominal pain
  - Use milk of magnesium or camel milk (in Somalia)
  - Encouraging water and fiber intake are difficult—would only consume water if they are hot

African: Medication Use
- Obesity is considered healthy
  - Cook with a lot of oil when preparing a meal for someone special
  - Eat more meat since it is readily available in the U.S
  - Exercise is a foreign concept since they walk everywhere in Africa and now they take bus or drive a car
- Believe only rich people have diabetes, HTN, or hyperlipidemia
Hispanic: Communication Style

- Mexican: Reluctant to speak about their illness and side effects as respect to healthcare providers
- Mexican: men are macho and will not complaint or report side effects of medications
- Cuban: Outspoken and may be confrontational in conversation

Hispanic: Health Beliefs

- Believe that “susto” (which means bad spirit) causes illnesses such as diabetes
- Uses “curanderos” (spiritual healers) to treat
- Seldom question physicians due to respect
  - May not tell pharmacists they are confused about their medications
  - May need disease state education from pharmacists
- Often use aloe and cactus as treatment—cactus juice in DM
- Expect cure and quick relief with treatment

Hispanics: Medication Use

- Similar to Asian and African
  - Similar to Vietnamese: hot and cold balance
  - If you don’t feel or see the problem—there is no problem
- Hot illness (fever and rash) are treated with cold food
  - Cold foods: fruits and vegetables
- Cold illness (cough) are treated with hot food
  - Hot foods: chili peppers and herbal teas
Asian, African, and Hispanic
Similarities

- Family values
  - Oldest male or family member makes health decision: cancer treatment
  - Hispanics: extended family members are included in treatment decision

- Class society
  - Believe the level of healthcare services provided are directly correlated to their wealth

- Religion
  - Asian: temples in Southeast Asia—i.e. Thailand and Cambodia
  - Africa: no control over the future since “Allah” (God) dictates outcome
  - Mexican: Cause of illness may be punishment from God, evil eye

Asian, African, and Hispanic: Lack of Preventive Care

- Do not understand routine check-up and chronic disease states

- Do not believe diagnosis of chronic disease state (hyperlipidemia or hypertension) unless they feel sick or have symptoms—leads to noncompliance with meds

- Difficult to explain the need for preventive medicine such as ASA for cardiovascular protection

Asian, African, and Hispanic: Healthcare Misconceptions

- Chronic disease state misunderstandings:
  - Diabetes (with rich people), Hypertension (too much blood), Hyperlipidemia (only in over-weight patients)

- Blood draws:
  - Fear of blood selling
  - Education to encourage lab monitoring
  - Patients with anemia believe they do not have blood to spare—difficulty in lab monitoring with ferrous sulfate

Asian, African, and Hispanic: Healthcare Misconceptions

- Color and size of meds make a difference

- Disclosure of information during generic switching

- Fear of addiction to chronic medications

- If you cannot see or feel the problem, there is no problem: Antibiotic and cholesterol medication counseling

References

- www.ethnomed.org

- CCM (Case managers and Cultural Mediators) at Harborview Medical Center in Seattle, WA

- The Provider’s Guide to Quality and Culture: www.erc.msh.org

- National Center for Minority Health and Health Disparities: www.ncmhd.nih.gov

- Center for Disease Control: www.cdc.gov