

Assessing Intercultural Competence in Health contexts

Fe Amalia García Santiago

Carmen Merino

Carmen Pena Díaz





AIM OF THE PRESENTATION



- To give an account of barriers created by intercultural and interlinguistic asymmetries in communication between healthcare providers and female patients, to contribute to identifying cultural and linguistic discordance and help deal with the challenge of migrant integration and, thus, migrant social justice rights, and their access to health.
- To review different assessment models of intercultural competence as there are no health context specific models. We propose a model to measure interculturality in the context of health care for immigrant women, both by professionals, dealing with immigrant women in the field of gynaecology and obstetrics, and also to measure perceived interculturality in healthcare by foreign users.

We believe that joint efforts between health, language, and communication disciplines is necessary to explore, develop and improve the ways in which healthcare professionals and patients communicate and to achieve an equal society in which migrants have equal access to healthcare.



ACCESS TO INFORMATION

Everyone has the right to seek, receive and impart information and ideas through any media and regardless of frontiers.

(Article 19 of the Universal Declaration of Human Rights (UDHR)).



**United
Nations**

Peace, dignity and equality
on a healthy planet



SPANISH LEGAL FRAMEWORK

- Spain lacks clear policies regarding language provision in healthcare settings, leading to ambiguity and potential misunderstandings.
- ***Law 41/2002 of 14 November on the regulation of the autonomy of the patient and their rights and obligations regarding information and clinical documentation***

Information will be communicated to the patient in a way that they will understand and will be adapted to their needs.

No reference to the language in which this information will be rendered.

MIGRANT/FOREIGNERS RIGHTS WHEN ACCESSING HEALTHCARE IN SPAIN



*Right to **universal** public health care*

Royal Decree Law 7/2018, passed in July 2018, recognises access to the National Health System as a fundamental right of every person in Spain

- *Universal for whom?*
 - *Spanish nationals*
 - *EU citizens*
 - *Foreign nationals with permanent residence*
 - *+90 days of residence*
 - *registered in a municipality*

➡ *Non-permanent residents need a favorable report where this right is acknowledged*

- *Exceptions:*
 - *pregnant women*
 - *underaged*
 - *victims of human trafficking*
 - *people in serious condition (humanitarian reasons)*



SPANISH LEGAL FRAMEWORK

NO REFERENCE IS MADE TO THE LANGUAGE IN WHICH THIS INFORMATION WILL BE RENDERED DESPITE...



LANGUAGE BEING KEY FOR
UNDERSTANDING.



THE LEGAL CONSEQUENCES
THIS MAY HAVR GOT
HEALTHCATE PROVIDERS.

COMMUNICATION IN HEALTHCARE IN SPAIN



METHODOLOGY

- Study of intercultural and interlinguistic asymmetries
- Study of intercultural competence models

**SURVEY:
Professionals and
patients**





HEALTHCARE PROFESSIONALS SURVEY

- *65 RESPONDENTS*
- *ONLINE QUESTIONNAIRE SENT TO PROFESSIONALS
AT A PUBLIC HOSPITAL IN MADRID*
- *INTERVIEWS*

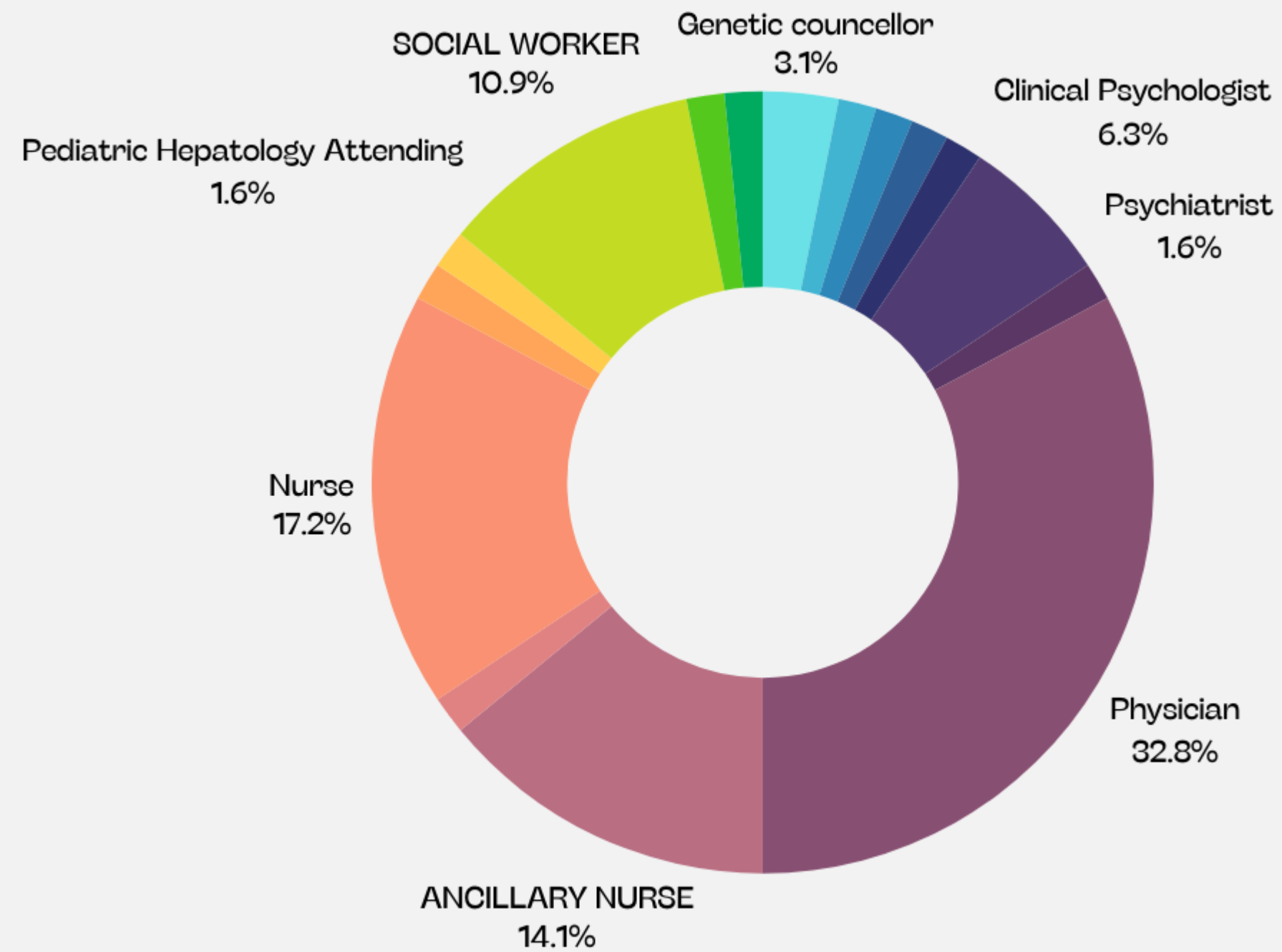


QUESTIONS

- Professional category.
- How do you feel when you have a foreign non-Spanish speaking patient?
- To what extent does the fact that the patient is foreign affect healthcare communication?
- Do you think communication is only affected by language or are there other issues (for example, Latin American patients in Spain)?
- When you have a patient who does not speak Spanish, what do you do?
- Do you have any strategies for this?
- If you have used a common language with a patient (not necessarily patient or professional's main language), did you communicate effectively?
- Have you ever had any linguistic misunderstandings with foreign patients?
- Have you ever had any cultural misunderstandings with foreign patients?
- Do you try to adapt your language to be understood by foreign patients? If so, how?
- Do you try to understand the other culture (for example, distance, eye contact...)?
- How do you think communication with non-Spanish speaking patients could be improved?



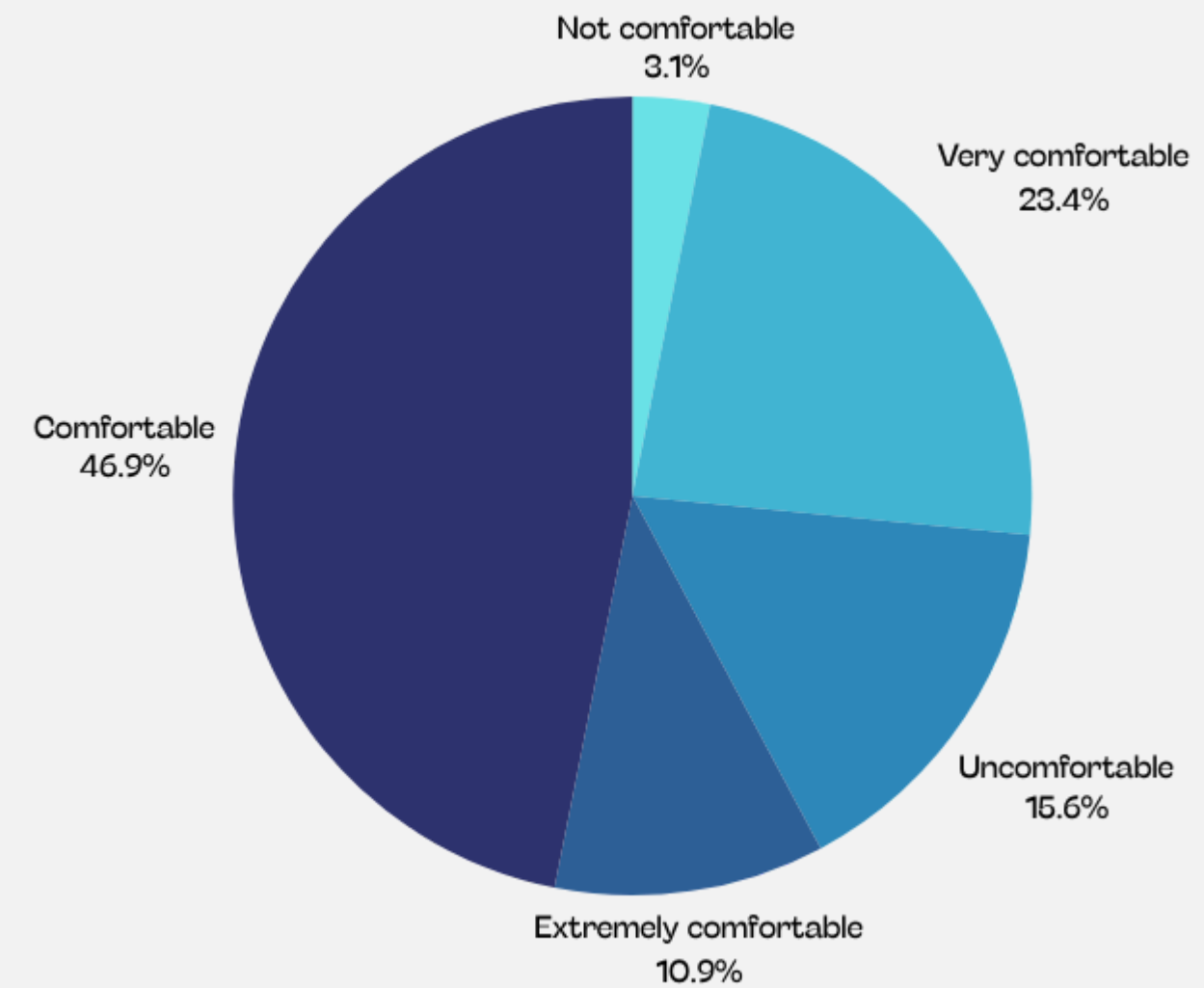
PROFESSIONAL CATEGORY



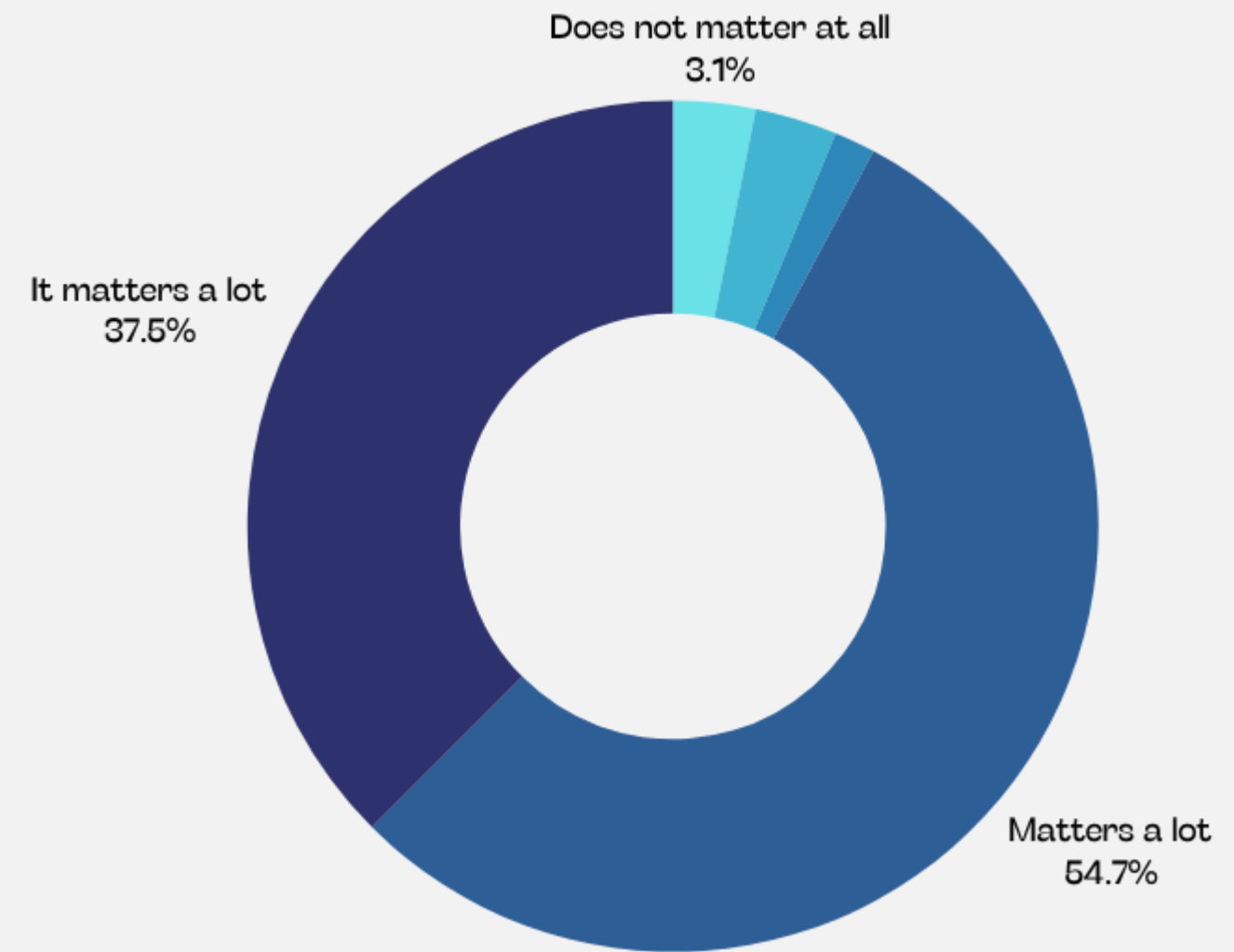
EXPERIENCES



How do you feel when you have a foreign non-Spanish speaking patient?



To what extent does the fact that the patient is foreign affect healthcare communication?





FACTORS THAT AFFECT COMMUNICATION

Do you think communication is only affected by language or are there other issues (for example, Latin American patients in Spain)?

On the one hand, some of the healthcare professionals argued that:

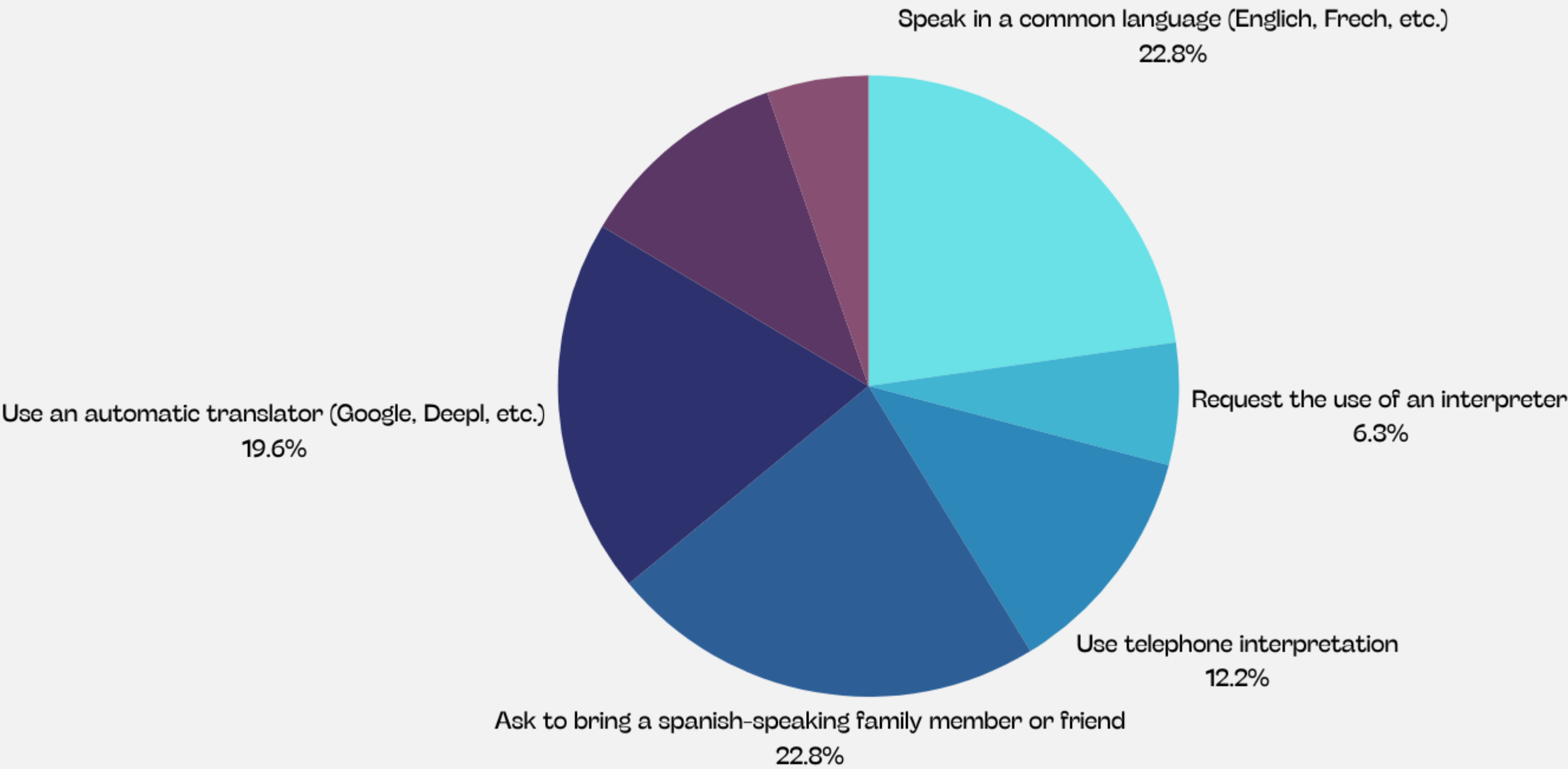
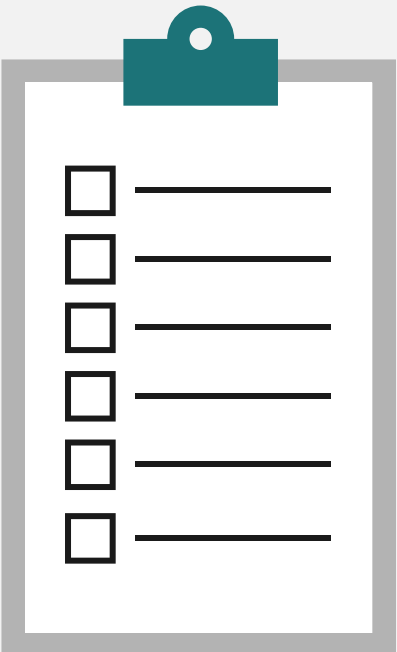
- Language interpretation can pose problems.
- Culture needs to be taken into account.
- Some words can have different meanings.
- Religion can be an obstacle.

On the other hand, others were of the opinion it is only affected when patients do not speak the language.

HOW DO THEY DEAL WITH THIS PROBLEM?



When you have a patient that does not speak Spanish, what do you do?





LINGUISTIC AND CULTURAL MISUNDERSTANDINGS WITH FOREIGN PATIENTS

LINGUISTIC MISUNDERSTANDINGS

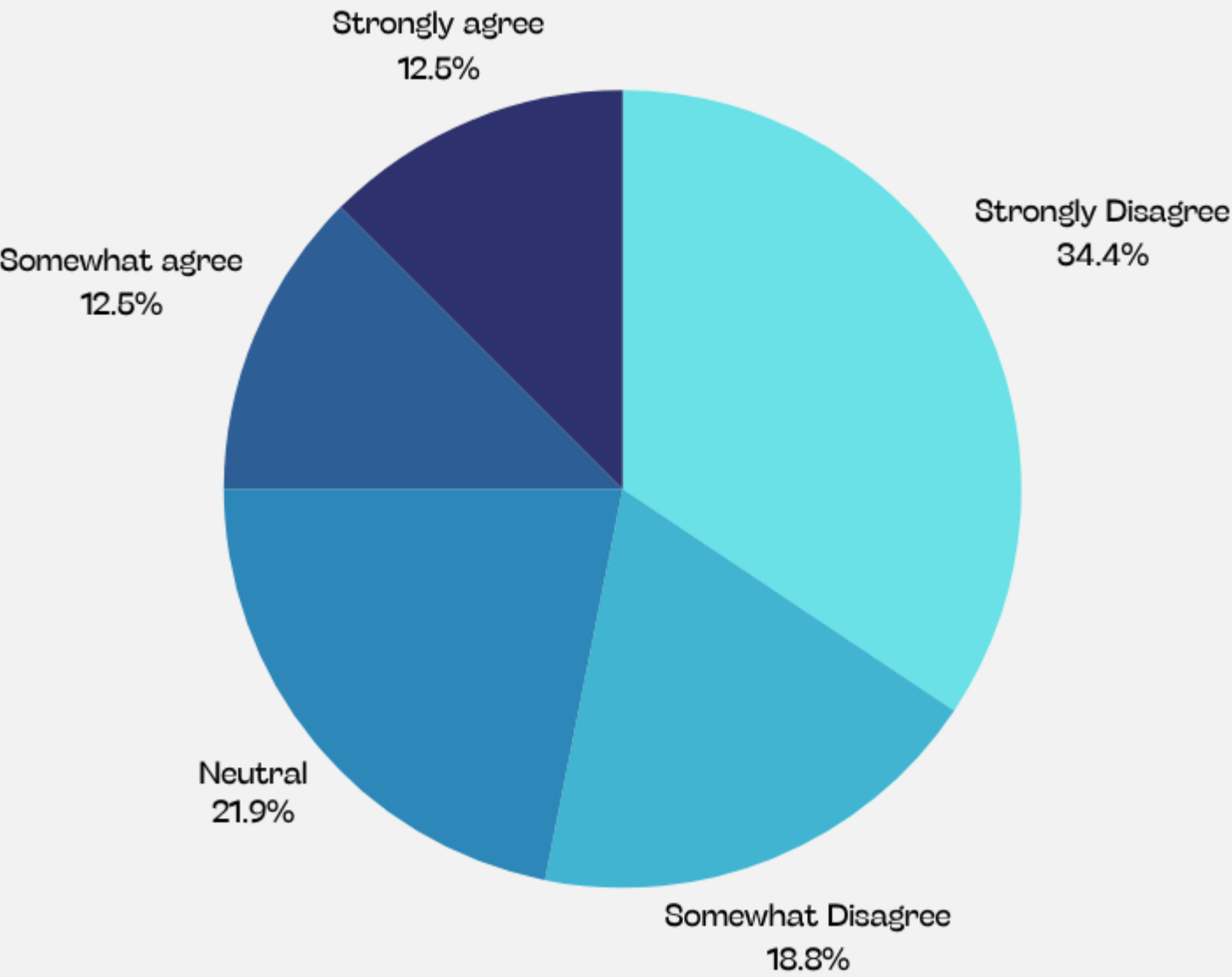
- Patients don't understand the meaning of the information about treatments or medication.
- Trouble understanding dosages.
- Patients wrongly believe they are taking a specific type of medication.
- Not being able to work with a translator.

CULTURAL MISUNDERSTANDINGS

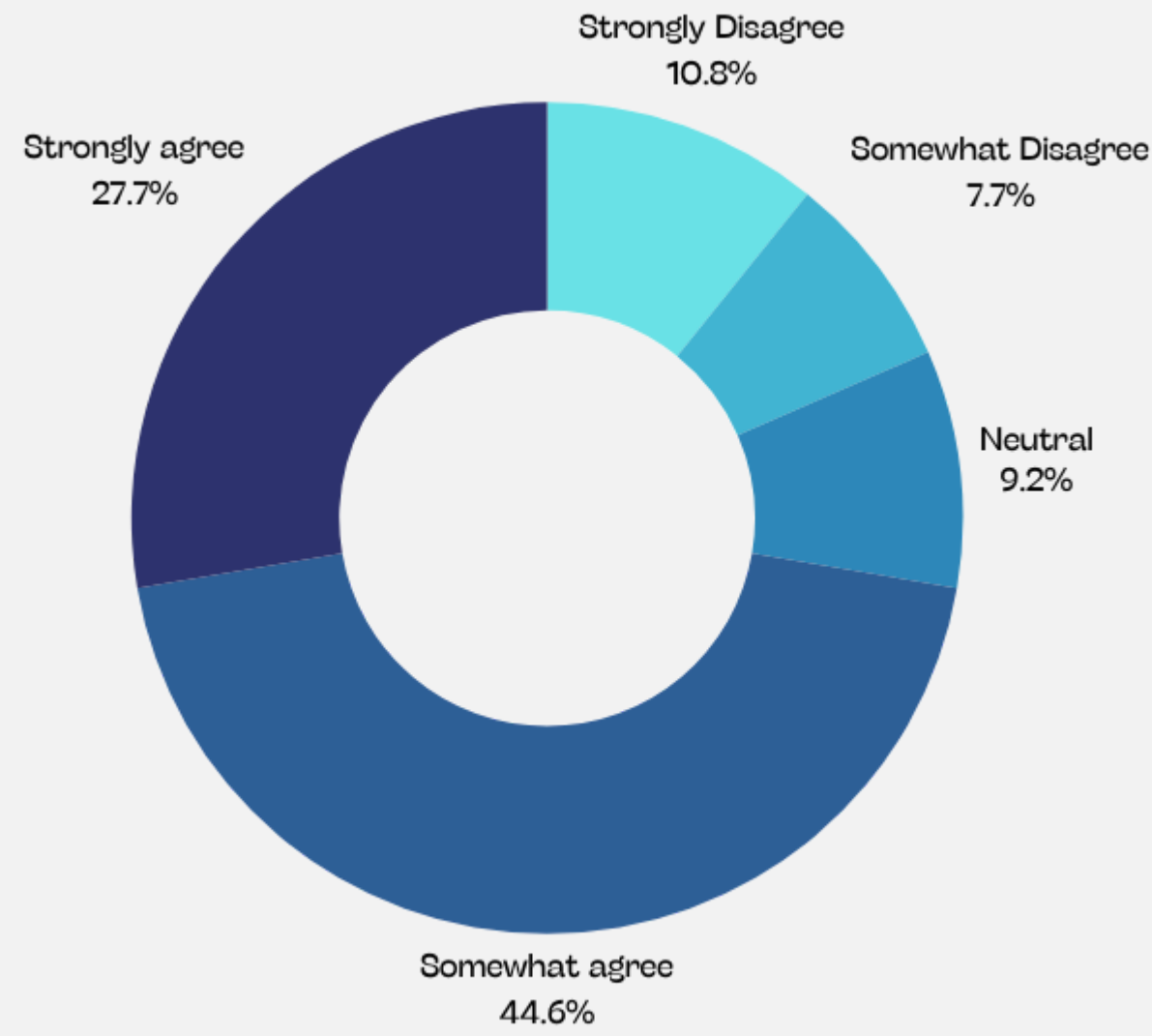
- Some patients prefer natural remedies.
- They get the meals of the day confused.
- Problems understanding how the healthcare system works.
- They do not understand some concepts such as brain death.

COMMUNICATION MISUNDERSTANDINGS

They seemed to understand but then it turned out that they did not

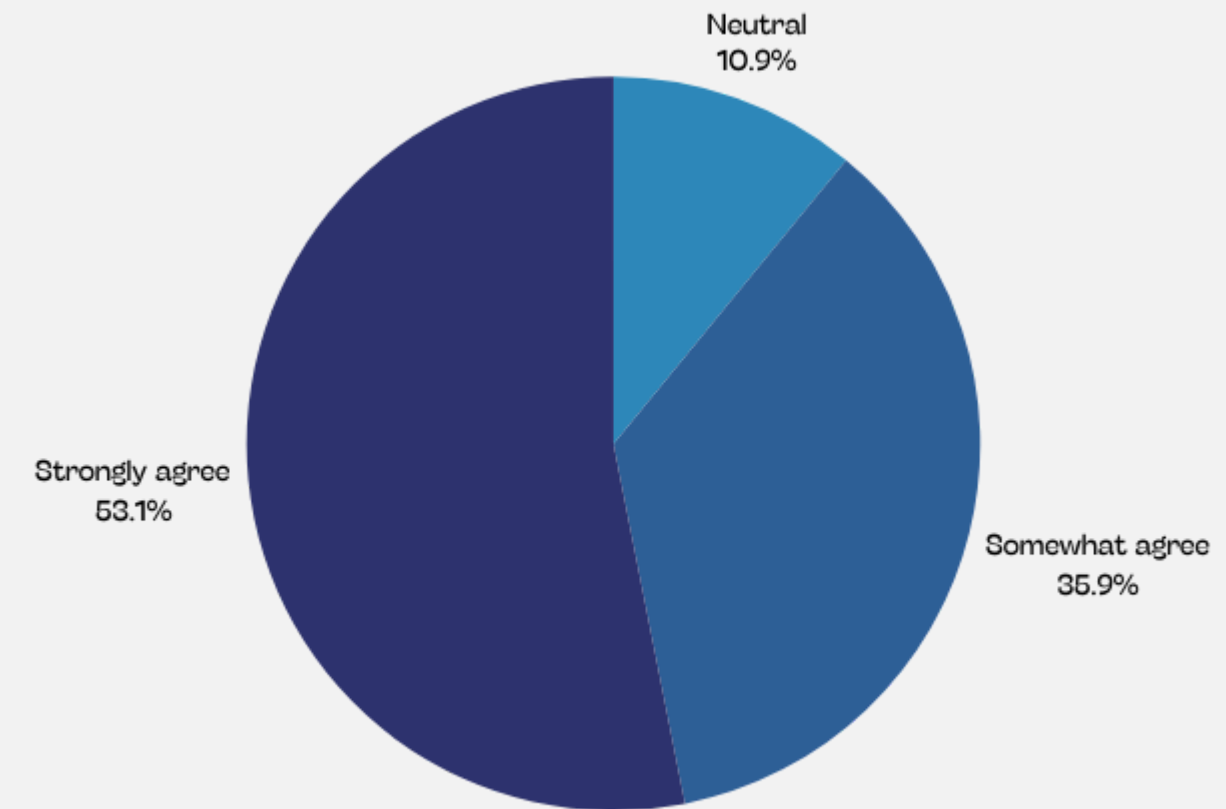


They pretended not to understand





Do you try to adapt your language to be understood by foreign patients?



Do you think you should adapt to the other culture (for example, distance, eye contact...)?

Adaptation to different cultures is crucial to facilitate communication

Patients and their families should make an effort to adapt to the norms and practices of the healthcare system.

Limited time in the practice makes it difficult



How do you think communication with non-Spanish speaking patients could be improved?

- ✓ Adequate resources + specific training
- ✓ Accessible interpreters (face-to-face and remote)
- ✓ Technological tools (pictograms and common phrases)
- ✓ Training of administrative staff
- ✓ Clear protocols
- ✓ Training on patients' cultural traditions



PATIENT SURVEY

- *65 RESPONDENTS*
- *ONLINE QUESTIONNAIRE SENT TO PROFESSIONALS
AT A PUBLIC HOSPITAL IN MADRID*
- *INTERVIEWS*



loading...

We are carrying out the field study at



RECORDING OF CONSULTATIONS

- Agreement with professionals
- Informed Consent for patients
- Protocol for interpreters
- Field Diary

PATIENT SURVEY

- 3 sections of questions for each dimension
- Know about the reality of intercultural competence of professionals

INTERCULTURAL COMPETENCE MODELS



CATEGORIES

- **Compositional model:** attitudes, skills, knowledge and behaviours relevant to the skills involved in interaction in diverse cultural contexts.
- **Co-oriented model:** interactions and in the construction of self and other. They are governed by a particular criterion, such as linguistic, which relates the shared meanings of intercultural competence.
- **Developmental model:** acquisition of intercultural competences.
- **Adaptation model:** adjustment and adaptation of people involved in interactions occurring in intercultural encounters.
- **Causal process model:** mutual relationships between the components of intercultural competence from a quantitative methodological approach through multivariate techniques.



Intercultural
Development
Inventory (IDI)

Multicultural
Personality
Questionnaire (MPQ)

Intercultural
Sensitivity
Inventory (ICSI)

MODELS

Intercultural
Sensitivity Scale
(ISS)

Intercultural
Adjustment
Potential Scale
(ICAPS)

Integrated Model of
Intercultural
Communication
Competence (IMICC)



Denial
Defence
Minimisation
Acceptance
Adaptation
Integration

Cultural Empathy
Openness to the
new
Social initiative
Emotional stability
Flexibility

Colectivism -
Individualism
Flexibility -
Openness

ANALYSIS DIMENSIONS

Self-concept
Self-regulation
Empathy
Open-mindedness
Not judge
Implication

Emotional regulation
Openness
Flexibility
Creativity

Empathy
Intercultural training
Motivation
Listening skills
Positive attitude
towards other
cultures

INTERCULTURAL COMPETENCE MEASUREMENT TOOL



1 Analysis of supporting tools

2 Establish the factors of
these special
communicative situations

3 Items that responded to
the existence of these
components



ANALYSIS DIMENSIONS

ANALYSIS DIMENSIONS

intercultural awareness

COGNITIVE DIMENSION

- Controlling uncertainty
- Open interpretation of other cultures
- Awareness of cultural similarities and differences

intercultural sensitivity

AFFECTIVE DIMENSION

- Involvement in intercultural interaction
- Respect for cultural differences
- Confidence conveyed in the interaction
- Enjoyment of the interaction
- Attention during the interaction

intercultural skill

BEHAVIOURAL DIMENSION

- Message skills
- Appropriate self-disclosure
- Behavioral flexibility
- Interaction management

MAIN OBJECTIVES

- Incorporate into the study of interculturality in doctor-patient encounters the factors that we considered to be of interest in these special communicative situations
- Consider the views of both health professionals and patients on the reality of these encounters.
- Identify communication problems in order to create a specific training course for health professionals in intercultural settings.
- Demonstrate the need for the use of interpretation in consultations with foreign patients



Encuesta dirigida a Mujeres Inmigrantes En el ámbito de ginecología y obstetricia

	TOTALMENTE EN DESACUERDO	EN DESACUERDO	NI DE ACUERDO NI EN DESACUERDO	DE ACUERDO	TOTALMENTE DE ACUERDO
¿Le han ofrecido alguna vez la asistencia de un intérprete en urgencias y/o consultas en el mismo momento que acudió al centro sanitario?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
¿Le han ofrecido alguna vez la ayuda con el idioma de un trabajador sanitario que hable su idioma?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
En caso negativo, ¿cómo pudo comunicarse con el profesional sanitario? (por ejemplo, familia, acompañantes)					
¿Alguna vez le han ofrecido infografías, vídeos o imágenes para ayudarle a comprender la información?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
¿Le ofrecieron el mismo intérprete durante todo el procedimiento, en diferentes días o en diferentes consultas?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
¿Asistió también el intérprete a los familiares y acompañantes?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
¿Cree que el profesional sanitario o el equipo que le atendió tiene conocimientos sobre interculturalidad y sobre cómo ponerlos en práctica?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
¿Siente que el profesional sanitario o el equipo han establecido un clima de confianza con usted?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
¿Cree que el personal sanitario respetó sus valores, sentimientos y preferencias en cuanto al tratamiento (dieta, medicación, tratamientos, etc.)?	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>

EU POLICIES

Directive 2011/24/EU mandates patient comprehension of healthcare information but allows Member States to use non-official languages, creating inconsistencies.





National research project: INTERCULTURAL COMPETENCE IN FEMALE HEALTH INTERLINGUISTIC COMMUNICATION



@intercomsalud

dialogos

THANK YOU

Questions?

