

Cultural Competency on PLC

Think about patients/friends you have known from other cultures and try to reflect on how you have felt in those experiences and consider what you learned from them.

Case Study of Lanesha Johnson:

This case highlights how important it is for providers to be aware of the social, emotional and cultural factors that may affect a family's ability to follow through on treatment recommendations. The centerpiece for this lesson is a case study involving a 12 year old African American girl, named Lanesha Johnson, who has poorly controlled asthma.

This case focuses on a family living in an urban community. As you read through this story, pay special attention to the various social, cultural and emotional factors that influence the child's treatment.

Lanesha Johnson is a 12-year-old firestorm—teetering on that edge between childhood and adolescence. Her temper, much like her asthma, is persistent. When Lanesha blows into clinic, it's like she's dragging her Grandma Marietta along, even though it's the other way around. Marietta tries her best as Lanesha's legal guardian, but she's got a lot on her hands: she's also raising her 10-year-old grandson Marcus and caring for her aging mother, Lillian.

Lanesha is a fourth grader in a predominately African-American school where her desk often sits empty. She's been out of school for asthma complications 14 days this year, many of which coincide with Lanesha's serious seasonal allergy problems. She spends at least one night a week awake with a nighttime cough and has wheezing and coughing fits about 4 days out of the week. All this distraction probably doesn't help with Lanesha's grades - she's failing half of her classes.

Lanesha shows up in clinic regularly with empty medicines (her daily controller and quick relief asthma meds) and complains about her Grandma Marietta's lack of responsibility in refilling them. Marietta doesn't have a financial problem buying medicine—all costs are paid by Medicaid—but she never can explain why she doesn't get refills. She just says that it's Lanesha's responsibility anyway.

Pre-Talking Points:

1. Is it unusual that Grandmother Marietta is the primary caregiver?
2. What responsibilities do health care providers have in this situation?
3. How does Lanesha's temperament affect the situation?

Real Thoughts:

1. Lanesha – “Here we go again, another visit to the doctor - a different doctor each time! Same questions every time, so I answer them again and again, what do they want to hear from me? I just save the medication for when I really need it. I haven't been in the hospital for a couple of years, so what's the big deal? I know I should take my medications everyday, but I don't want to upset Nanny - again. Nanny just wants me to stay quiet and act like everything is just fine, she doesn't know me anyway! Sometimes I wish I was a normal kid in a normal family – I just want to run away!

2. Marietta – “I have to take Lanesha to the doctor again? Seems like I just took time off from work for this.

I'm tired - my hip is bothering me and I have my hands full with work, Marcus and Mama! It's tough being a parent at my age. I take good care of these 2 children. They have food on their plates, a roof over their heads and clothes to wear, but instead of being grateful, Lanesha is so angry. Why can't Lanesha follow the instructions and do as they say to control her Asthma better so we don't have to keep running to the doctor all the time? Buying more medicine isn't going to help if she doesn't maintain her puffer. I can't fight with Lanesha, I don't have the energy. I have too many other things I need to be worrying about. Lanesha is doing fine, she hasn't been to the ER in a long while and sure, she has missed school, but some of that is just adolescence. The bigger problem with Lanesha is not her Asthma, but that she is failing in school and is getting into trouble. Everyone thinks I should be able to control her, but I just want her to stay quiet to get through this appointment so I can get onto the next thing I have to do today!"

3. Clinic & Doctor – “Oh dear, this patient is back in the clinic again – maybe they won't show? Not sure why they bother to come, they don't seem to follow the treatment outlined for them. This is very frustrating! They are nice people, but we can't help them if they can't help themselves. Our feelings are that Marietta feels Lanesha is old enough to be responsible to take her medications, but Lanesha is only 12. She is still a child and still needs to be reminded. Lanesha states that when she runs out of her medicine it takes a while for Marietta to fill it again. How can we help this family?

Post-Talking Points:

1. Assume you are the physician meeting with Marietta & Lanesha, can you see the bigger picture?
2. What are some of the conditions that have impacts on both Marietta & Lanesha?
3. What steps would you take to help this family?

Key Concepts

Culture

Definition: **Culture** is defined as the sum of one's beliefs, rituals, customs and practices that guide thinking, decisions and actions in a patterned way. They are *learned* throughout a lifetime and passed on through generations.

Examples: Examine **Culture** in the following examples:

Example 1: Different cultures have different beliefs about what may cause illness. Some Hispanic and Asian cultures believe that illness is caused by an imbalance of hot and cold in the body.

Example 2: Different cultures have different beliefs about which family member makes decisions. In much of American culture the parent makes the decision. In some cultures, it is always the father who makes the decisions. In other cultures, it is one of the older family members (e.g. grandfather or grandmother).

Application: When meeting a patient or family for the first time, be aware that their beliefs and practices may differ from your own. Try to learn as much as you can about the family's life and how they view the world.

Social Factors

Definition: **Social Factors** refer to environmental factors which affect how the family functions. These include (but are not limited to) financial factors (such as socioeconomic status or type of - or lack of - insurance), logistical factors (such as transportation or juggling many demands), housing, childcare and accessible health care. Social factors sometimes include family relationships or family dynamics which affect a child or family member. This often, in turn, influences emotional factors.

Examples: Examples of some **Social Factors** are:

Example 1: Sometimes families do not buy medications that they need because they do not have insurance or cannot afford the co-pay.

Example 2: A child may come to clinic dirty, not because the mother doesn't care about cleanliness but because the water has been off and the landlord refuses to return her phone calls.

Example 3: A child's divorced parents may be angry at each other, causing tension in the family and interfering with the consistency of his care as he moves between their homes.

Application: It is always important to learn as much as you can about the social context in which a family lives. This will help you understand the choices they make and the constraints they are under.

Emotional Factors

Definition: **Emotional Factors** often influence how an individual behaves. Sometimes what the person is feeling is very evident. Sometimes a person's behavior is an attempt to manage, or cover up, painful feelings. When a person acts in a way that "doesn't make sense" it is always advisable to consider that the person may be experiencing emotions that influence how he or she is perceiving or reacting to a situation. Sadness, worry, guilt, futility, joy, hope and many other feelings can all affect behavior.

Examples: Examples of some **Emotional Factors** are:

Example 1: If a father becomes very angry when told his son will have to have another diagnostic procedure, his anger may be masking underlying feelings. The father may be worried about how he will manage getting his son to the procedure without missing work, he may be scared about his son's illness, he may be disappointed that the father-son outing he had planned will have to be delayed.

Example 2: If a mother bursts into tears upon learning that her child has mild asthma, she may have strong underlying emotions. It may be that her own mother died of Emphysema earlier that year and that she cannot bear having her own child have lung problems as well. She may feel guilty, feeling that she has passed on lung problems to her child.

Application: When you observe an individual acting in a way that confuses or concerns you, try to learn a little more about what he or she is feeling, and the meaning of the current situation to the person. This may help you understand how he or she is behaving.