

ETHNIC: Culturally Sensitive History Taking

CULTURALLY SENSITIVE HISTORY TAKING: ETHNIC

Obtaining a complete and accurate history of patients from different cultures can be a challenge. Utilize techniques that elicit patient perspective regarding their illness. Information on this card taken from <http://erc.msh.org/aapi/tt3.html> (Levin et al, 2000)

E: EXPLANATION

Potential questions include:

- What do you think is your medical problem?
- What do you think may be the reason you have these symptoms?
- What do friends, family, or others say about these symptoms?
- Do you know anyone else who has had or who has this kind of problem?
- Have you heard about / read / seen it on TV / radio / newspaper / internet? (if no explanation, ask what most concerns them about the problem)
- How much do you use of the following: salt, sugar, caffeine (coffee, tea, soda, chocolate), tobacco, alcohol, additives (MSG, sugar substitutes)? *Ask about each separately*
- What is your occupation? *may clue you to occupational exposures*

T: TREATMENT

Potential questions include:

- What kinds of medicines, home remedies, or other treatments have you tried for this illness?
- Is there anything you eat, drink, or do (or avoid) on a regular basis to stay healthy?
- Have they helped and what do you hope to get out of these treatments?
- What kind of treatment are you seeking from me?
- When performing the physical exam, ask the patient's permission before touching them; ask if there is anything you should not do and make sure to maintain the patient's modesty (eg - use of drapes to cover exposed areas)

H: HEALERS

Have you sought any advice from alternative/traditional or folk healers or other people (non-doctors) for help with your problems? Tell me about it. You may want to ask about the patient's spiritual background.

N: NEGOTIATE

Negotiate options that will be mutually acceptable to you and your patient and that do not contradict, but rather incorporate, your patient's beliefs.

I: INTERVENTION

Determine an intervention with your patient. This may include incorporation of alternative treatments, spirituality, and healers as well as other cultural practices (eg - foods eaten/avoided both in general and when sick).

C: COLLABORATION

Collaborate with the patient, family members, other health care team members, healers, and community resources.

Effective Use of Interpreters

TIPS FOR WORKING WITH AN INTERPRETER

Simply having an interpreter present or using the phone service (eg - language line) does not ensure that you and the interpreter will work effectively as a team. Information taken from: <http://www.hcin.org>

INTRODUCE YOURSELF TO THE INTERPRETER

- Explain your role to the interpreter and give a brief background when possible (eg - explain if this is a follow-up appt or acute visit)
- Establish expectations for the appointment
- Do not use family members, especially children, as interpreters, if possible
- Seat yourself, the patient, and the interpreter in a triangular arrangement with the interpreter at the apex, behind the doctor and patient, who are facing each other
- Ask the interpreter to exactly interpret the words of both you and the patient
- Ask the interpreter to let you know if s/he is stepping out of the role as interpreter to add his/her own commentary to explain a cultural concept to help you understand the patient's perspective

MAINTAIN THE DOCTOR-PATIENT RELATIONSHIP

- Introduce yourself and the interpreter to the patient and how the session will proceed
- Explain that both you and the interpreter are bound to maintain confidentiality about the session by a code of ethics
- Speak directly to your patient in the *first person* and ask the patient to also speak directly to you and not to the interpreter
- Maintain eye contact with your patient if it is not considered rude in your patient's culture
- Do not allow the interpreter and patient to have private conversations during the appointment
- Try not to leave the interpreter and patient alone in the exam room
- Remember that the interpreter is there to support your communication with your patient but that *you're in control*

SPEAK IN LANGUAGE THAT IS EASY TO INTERPRET

- Pause after 2-3 sentences to allow interpreter to remember and repeat your message in the patient's language; use *active* voice
- Avoid slang and medical jargon. If the interpreter has difficulty or asks you to clarify, help the interpreter by rephrasing your question or statement; use *specific* rather than general terms
- Do not say anything that you would not like interpreted
- Speak slowly and ask the patient if s/he understood everything or has questions or concerns; use diagrams and translated material
- Allow time as these appointments may take longer

CULTURAL LIAISON

- Ask questions if you are unsure whether there is a cultural barrier
- Ask the interpreter to help clarify if they have insight into cultural barriers that may play into the patient's care
- Ask patient's permission before engaging the interpreter to clarify