



UW PACC

Psychiatry and Addictions Case Conference

UW Medicine | Psychiatry and Behavioral Sciences

CULTURAL HUMILITY IN PATIENT CARE

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GENERAL DISCLOSURES

The University of Washington School of Medicine also gratefully acknowledges receipt of educational grant support for this activity from the Washington State Legislature through the Safety-Net Hospital Assessment, working to expand access to psychiatric services throughout Washington State.

SPEAKER DISCLOSURES

- ✓ Any conflicts of interest?
 - ✓ None

PLANNER DISCLOSURES

The following series planners have no relevant conflicts of interest to disclose:

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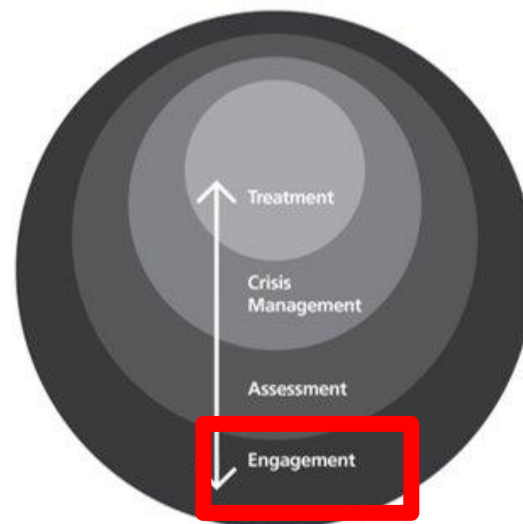
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Anna Ratzliff MD PHD has received book royalties from John Wiley & Sons (publishers).

OBJECTIVES

1. To describe the importance of cultural humility in patient-centered care
2. To understand how to apply cultural humility in improving patient engagement



CULTURAL HUMILITY

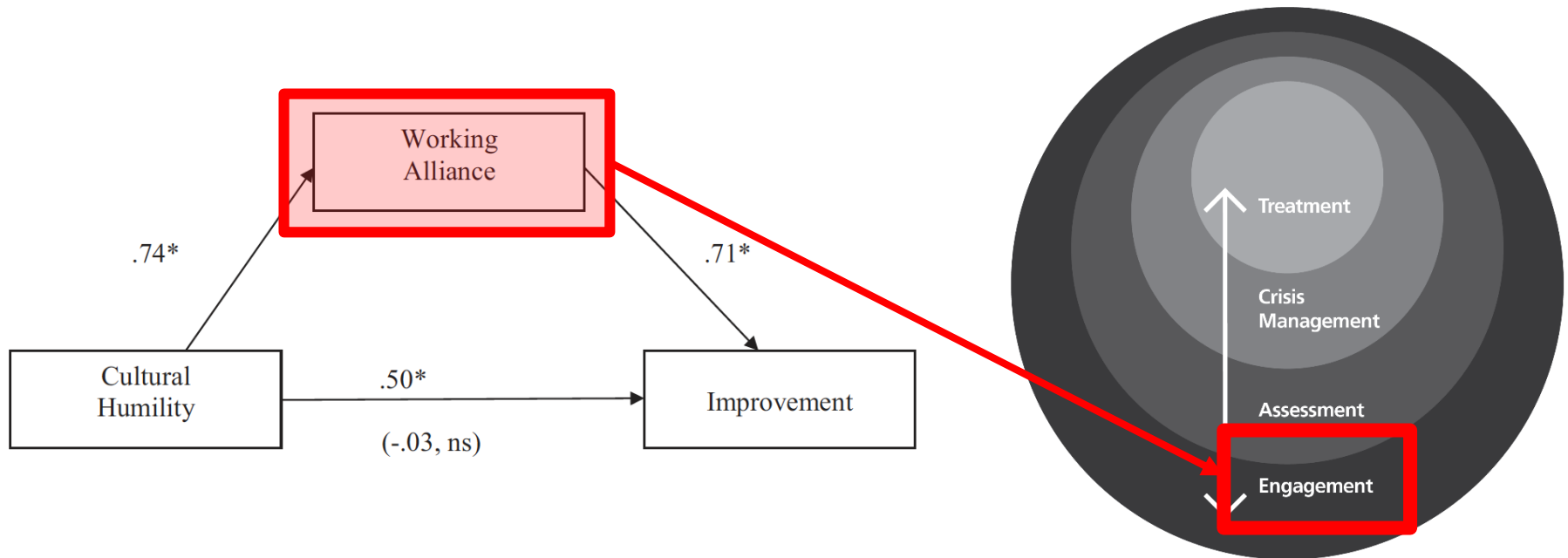
- "the ability to maintain an interpersonal stance that is ***other oriented*** (or open to the other) in relation to aspects of ***cultural identity that are most important to the client***"
- Humility = ***other orientation*** (focus on the patient) + ***egalitarian belief*** (patient as a partner in the care process)

CULTURAL HUMILITY

- **Cultural competence**
 - "demonstrable mastery of a finite body of knowledge"
 - "a discrete endpoint"
- **Cultural humility**
 - "a commitment and active engagement in a lifelong process that individuals enter into on an ongoing basis with patients, communities, colleagues and with themselves"
 - "Individuals continually engage in self-reflection and self-critique as lifelong learners and reflective practitioners"

IMPORTANCE OF CULTURAL HUMILITY IN PATIENT ENGAGEMENT AND PATIENT CENTERED CARE

- Cultural humility >>> similarity, experience, knowledge, & skills



(CULTURAL) HUMILITY IMPACTS PATIENT CARE

- **Patient perception of clinician humility** significantly predicted **greater patient satisfaction, trust, & current health** above and beyond patient & clinician characteristics, and visit features
- **PCP humility** predicted **greater patient's perceived PCP's communication effectiveness & better health**
 - Even after accounting for patient demographics, PCP/patient satisfaction, and **PCP's frustration with their patient**

❖ What are your reactions?

CULTURAL HUMILITY IN PRACTICE: FIVE A

- **Assess**
 - Assess patients' cultural values and beliefs
- **Advise**
 - Consider the role of patients' cultural values and beliefs when providing feedback and direction
- **Agree**
 - Work collaboratively to find a treatment or intervention that not only suits patients' health and wellness goals, but also their cultural values
- **Assist**
 - Apply culturally sensitive knowledge and skills to help patients succeed. If patients struggle with the intervention or engaging in treatment, re-assess the treatment plan and review how congruent the intervention is with patients' cultural values
- **Arrange**
 - Consider the cultural practices and beliefs of the patients' families and communities when determining how to support patients as they maintain any improvements once treatment has ended

PITFALLS TO AVOID

- Not checking your own assumptions and biases
- Not considering systemic oppression and privilege that a patient is embedded in
- Only focusing on individual level factors
- Disregarding individual differences within a cultural group
- Opting to not ask a question as a fear of offending a patient

**** DON'T STOP LEARNING! 😊 ****

THANK YOU!

UW PACC REGISTRATION

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