



## (10) Professionalism in Different Cultural Contexts

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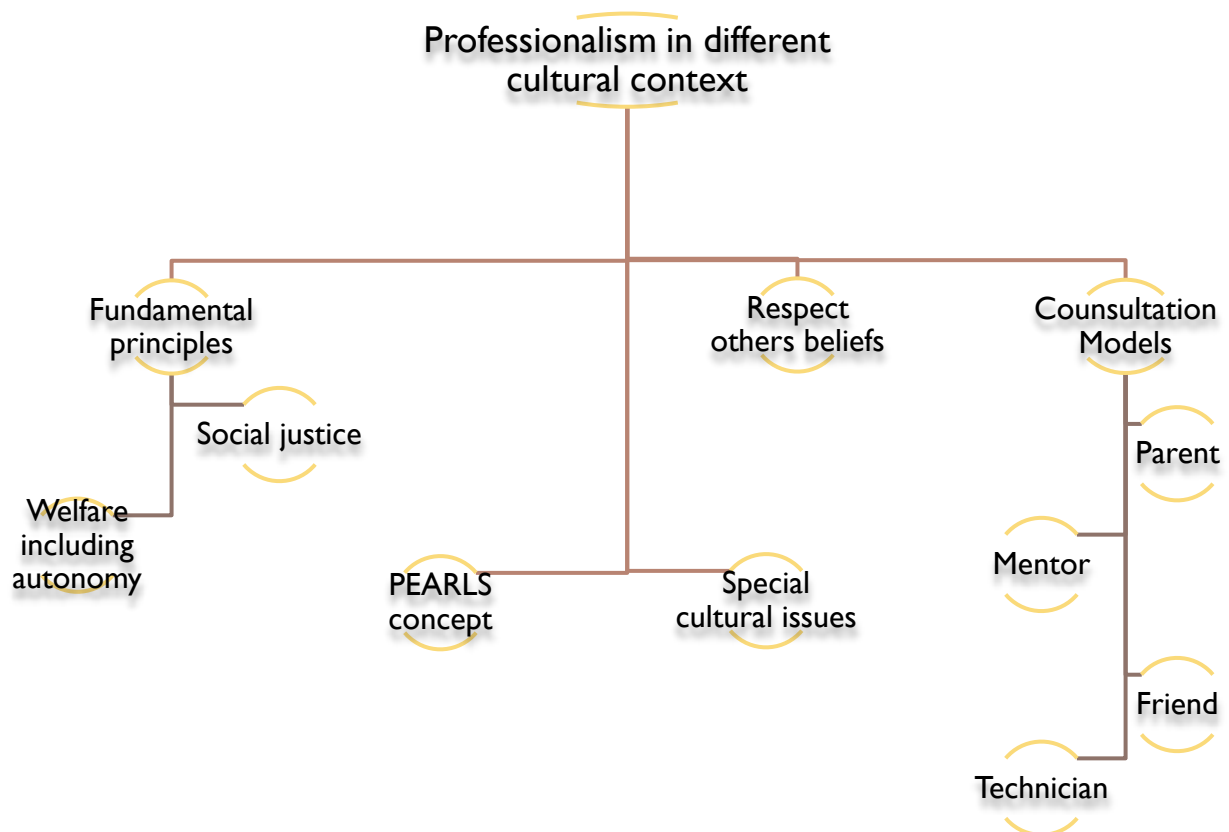
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## Objectives and Mind Map

### Objectives:

- Recognize the environment.
- Welfare, autonomy, justice.
- Different models of Physicians (Consultation Models).
- Importance of respect others beliefs.
- PEARLS Concept.

### Mind Map:



Strong and Positive self-image is the best possible preparation for Success.



## Professionalism in Different Cultural Contexts

### Characteristics of Professionalism:

- Competency
- Responsibility
- Attitude
- Conduct on the job

### Attitudes central to medical professionalism in cultural context:

- Humility
- Empathy
- Respect
- Sensitivity
- Curiosity
- Awareness of all outside influences including cultural on patients health

### Focusing on:

#### Knowledge in cultural context

1. It is important for a medical student or postgraduate trainee to **learn** about the surrounding community in which he/she practices or trains.

E.g. Socio economic status, patterns of housing nutritional habits, healing practices and disease incidence and prevalence.

2. The knowledge taught has specific evidence based impact on health care delivery.

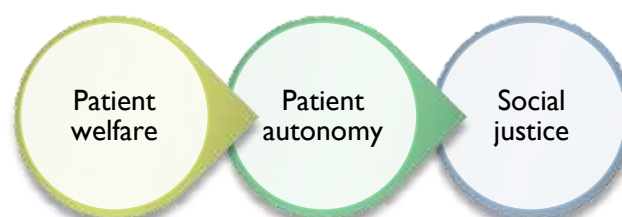
E.g. How Ramadan fasting affects Muslims who are diabetic.

#### Skills in cultural context

With individual patients as teachers, learners should be encouraged to **adjust their practice styles** accordingly to meet their specific needs.

It is crucial to understand health beliefs of those who come from different cultures or have different health care experiences.

### Three fundamental principles:



○ **Patient welfare including autonomy:**

1. Professional competence
2. Honesty with patients -- integrity
3. Patient confidentiality
4. Caring attitude
5. Scientific knowledge
6. Maintaining trust
7. Setting and maintaining professional standards.

○ **Social Justice:**

1. A just distribution of finite resources
2. Managing conflict of interest
3. Improving quality and access to care
4. Respect for colleagues

**Four Possible Consultation Models:**



As a <b>parent</b> paternalistic model	As a <b>mentor</b> deliberative model	As <b>technicians</b> informative engineering model	As <b>friends or counsellors</b> interpretive/collegial model
<p>-Physicians are in the best position to judge what is best for their patients. In a strong form of this, physicians authoritatively order patients to assent (with coercion if necessary).</p> <p>-Culturally applicable in <b>Chinese culture</b> and partially in other Far East and South Asian cultures.</p>	<p><b>-Physician objectively knows and prioritizes patient's personal and medical values.</b></p> <p>-The physician mentor's grip on decision making is more relaxed than the physician / parent model but autonomy-conscious patients find it unsatisfactory.</p> <p>-Culturally this is an option for some of the patients in <b>Eastern countries.</b></p>	<p>-Physicians only provide value neutral medical information and leaving patients to make decisions independently based on personal values (total patient autonomy).</p> <p><b>-Physicians treat diseases rather than patients and sick persons are "Consumers".</b></p> <p>-Culturally applicable To certain sections of <b>Western and relatively less eastern population.</b></p>	<p>-Physician's medical facts and patients personal values contribute to balanced medical decision-making.</p> <p><b>-This approach upholds patient autonomy</b> without undermining the physician's duty of beneficence.</p> <p>-Shared decision making culturally popular in the <b>West, increasingly accepted in the East.</b></p>



## Importance of respect others beliefs:

- While providing professional care physician must not impose his / her view on a patient's:
  - Life style, culture, beliefs, race
  - Sex, age / sexuality
  - Social status / economic worth
- Physicians must be prepared to explain and justify his / her actions and decisions.

## Confidentiality:

- Confidentiality concept may not be the same in the East as in the West. However its principles are applicable in most settings.
- Physicians must be honest and trustworthy.

## Essential components of culturally competent health care:

### CRASH:

- The goal of the CRASH-Course in Cultural Competency is to build confidence and competence in the clinician's ability to communicate effectively with diverse patient populations.
- It helps students and others to incorporate elements of cultural competence into their practice.

Components	Explanation
<b>Cultural Competency</b>	The importance of shared values, perceptions, and connections in the experience of health, health care, and the interaction between patient and professional
<b>Respect</b>	Understanding that demonstrations of respect are more important than gestures of affection or shallow intimacy, and finding ways to learn how to demonstrate respect in various cultural contexts
<b>Assess/Affirm</b>	<ul style="list-style-type: none"><li>• Assess: Understanding that there are tremendous "within-group differences," ask about cultural identity, health preferences, beliefs, and understanding of health conditions. Assess language competency, acculturation-level, and health literacy to meet the individual's needs.</li><li>• Affirm: Recognizing each individual as the world's expert on his or her own experience, being ready to listen and to affirm that experience. Reframing cultural differences, by identifying the positive values behind behaviors we perceive as "different."</li></ul>
<b>Sensitivity/ Self Awareness</b>	<ul style="list-style-type: none"><li>• Sensitivity: Developing an awareness of specific issues within each culture that might cause offence, or lead to a breakdown in trust and communication between patient and professional.</li><li>• Self-Awareness: Becoming aware of our own cultural norms, values, and "hot button" issues that lead us to misjudge or miscommunicate with others.</li></ul>
<b>Humility</b>	Recognizing that none of us ever fully attains "cultural competence," but instead making a commitment to a lifetime of learning, of peeling back layers of the onion of our own perceptions and biases, being quick to apologize and accept responsibility for cultural missteps, and embracing the adventure of learning from others' first-hand accounts of their own experience.

## LEARN:

- A framework for teaching cultural skills to medical students and residents.

Components	Explanation
<b>Listen</b>	Listen with sympathy and understanding to the patient's perception of the problem.
<b>Explain</b>	Explain your perceptions of the problem.
<b>Acknowledge</b>	Acknowledge and discuss the differences and similarities.
<b>Recommend</b>	Recommend treatment.
<b>Negotiate</b>	Negotiate agreement.

## PEARLS:

Components	Explanation
<b>Partnership</b>	Working with the patient to accomplish a shared outcome.
<b>Empathy</b>	Recognizing and comprehending another's feelings or experience
<b>Apology</b>	Being willing to acknowledge or express regret for contributing to a patient's discomfort, distress, or ill feelings.
<b>Respect</b>	Non-judgmental acceptance of each patient as a unique individual; treating others as you would have them treat you.
<b>Legitimization</b>	Accepting patient's feelings or reactions regardless of whether or not you agree with those perceptions.
<b>Support</b>	Expressing willingness to care and be helpful to the patient however you can.

## Special Cultural Issues in professional care in different parts of the world:

- **CONSULTATION / CONFIDENTIALITY “in Pakistan”:**
  - Insistence on eye contact.
  - Uncovering of face in some females.
  - Undressing of female patients.
  - Sharing of confidential information with spouses, relatives.
  - History taking of female adults from parents or husbands.
  - Giving information to patients in a way they can understand.
- **CONFLICT OF INTEREST:**
  - Patients' best interest—lack of appropriate referral system may have adverse effects on patient care.
  - Inducements / incentives for referrals.
  - The way you prescribe for, refer or follow-up patients should not be affected if you have financial or commercial interests in organizations providing health care.
  - Honesty is a must in financial and commercial matters relating to physician's work.

- **ACCEPTING GIFTS OR OTHER INDUCEMENTS**

- You should not ask for or accept any material rewards, **except** those of insignificant value from representatives of pharmaceutical companies.
- Help with conferences and educational activities may be acceptable.

- **SIGNING CERTIFICATES AND OTHER DOCUMENTS:**

- One must not sign certificates or documents which one believes to be false or misleading.
- Same principles apply with references.

- **ADVERTISING:**

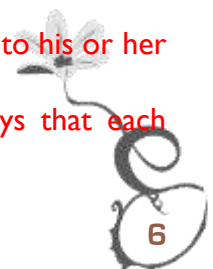
- Physicians must not exploit patient's vulnerability or lack of medical knowledge.
- Only factual information should be provided.

- **RESEARCH**

- Research should not be contrary to the patient's interest e.g. exploitation of developing countries patients.
- Research protocol should be approved by a research ethics committee.
- This committee may be non-existent in many settings.
- Your conduct in the research must not be influenced by payments or gifts.
- Record your research results truthfully.

## Take Home Messages

- Patients are entitled to good standards of professional practice and care in all cultural settings.
- The essential elements of this medical professionalism are:
  - 1- Professional competence.
  - 2- Good relationship with patients and colleagues.
  - 3- Observance of professional ethical obligations.
- Medical teachers should be a role model' in application of these essentials.
- An integrated pattern of learned core values, beliefs, norms, behaviors and customs that are shared and transmitted by a specific group of people.
- Some aspects of culture, such as food, clothing, modes of production and behaviors, are visible.
- Major aspects of culture, such as values, gender role definitions, health beliefs and worldview, are not visible
- Recognizing the role of culture in health means an acknowledgment of the importance of shared values, perceptions, and beliefs related to health
- Culture is directly related to health promotion, disease prevention, early detection, access to health care, trust and compliance
- Respect implies that each individual has a right to receive respect according to his or her own personal, individual, family, and socio-historical perspective.
- We must learn to demonstrate our respect to individual patients in ways that each person will receive or perceive as being respectful.



## Questions

Q1: Regarding PEARLS concept, L stand for:

- A- Learn
- B- Listen
- C- Legitimization

Q2: Which of the following models applied to this statement (Physicians only provide value neutral medical information and leaving patients to make decisions independently based on personal values (total patient autonomy):

- A- Physician as parent
- B- Physician as a technician
- C- Physician as a mentor

Q3: who are the ones their gifts are allowed to be accepted by physicians:

- A- Rich patients
- B- Commercial companies
- C- Educational activates officials

Q4: While providing professional care physician must not impose his / her view on a patient's:

- A- Life style
- B- Social status
- C- A&B

Answers: 1- C 2- B 3- C 4- C



### Quiz:

- 1- Why Medical professionalism differs in different parts of the world?
- 2- Write one example about how the medical professionalism is different in context with two different cultures?
- 3- In the future, What consultation model you will adapt and Why?
- 4- What does the expression PEARLS stand for?

