Cultivating Cultural competency: A pathway to equity in healthcare

Student name

Chamberlain University

ENGL148

Professor McAmazing

June 14th, 2023

Cultivating Cultural Competency: A Pathway to Equity in Healthcare

Discrimination in healthcare is not just an abstract concept; it has tangible and farreaching consequences for individuals and communities. It undermines the principles of fairness and justice that should underpin healthcare systems, leading to disparities in access to care, misdiagnoses, and suboptimal health outcomes. Imagine being a patient whose symptoms are dismissed because of their cultural background or language barrier, leading to a delayed diagnosis and worsening health outcomes. Over the past decade, a rapidly expanding body of literature has demonstrated the existence of disparities in health and healthcare. The need for change is clear, and one proposed solution that could gain lots of traction is mandatory cultural competency training for healthcare providers. Cultural competence in healthcare is defined as the ability of providers and organizations to effectively deliver healthcare services that meet the social, cultural, and linguistic needs of patients (García-Izquierdo, I., & Montalt, V. 2022). By equipping providers with the skills and knowledge to understand and respect the diverse needs and beliefs of their patients, it is possible to bridge the gap between healthcare disparities and ensure equitable and inclusive care for all. Through exploration of the significance of this mandatory training, visibility will be increased on the pivotal role cultural competency plays in fostering a healthcare system that truly values and meets the needs of every patient.

To effectively implement mandatory cultural competency training in healthcare in the United States, it is essential to examine the compelling evidence that supports its effectiveness in improving patient outcomes and reducing healthcare disparities. Research consistently demonstrates the positive impact of cultural competency training on healthcare providers and their ability to deliver patient-centered care. Evidence from a recent study examining the impact of a cultural competence educational course on nurses' self-assessment of their cultural competence indicates that an educational program effectively improved cultural competence in clinical nurses. These findings offer valuable insights that healthcare providers can design inservice cultural competence education programs aimed at enhancing the quality of care. (Lin, M. H., & Hsu, H. C., 2020).

Mandatory cultural competency training not only benefits healthcare providers but also has a positive impact on patient satisfaction and equitable care. By understanding and respecting the unique needs and beliefs of diverse patient populations, providers can establish trust and rapport, leading to improved patient satisfaction (Saha et al., 2019). In a Japanese study, patient outcomes were reported in three studies. One study reported a significant effect on patient satisfaction (d = 0.94) and trust (d = 0.71). There was however no significant effect on patient physiological outcomes. (Chae D. et al., 2020). Although the evidence on the ability of interventions to directly influence patient outcomes is limited, the existing body of research provides some indications that this possibility can be realized.

Additionally, cultural competency among health workers has the potential to reduce healthcare disparities by addressing bias and promoting equitable access to care. A study aimed to explore the associations between race, ethnicity, and mental health status with the patientreported importance of provider cultural competence. The findings of this study indicate the existence of racial and ethnic disparities in how patients perceive the cultural competence of their healthcare providers. Notably, ethnic disparities are particularly pronounced among patients with depression, which represents a significant burden in contemporary times. These results highlight the importance of fostering a culturally competent and humble approach to care, especially within the field of mental health. (Eken et al., 2021). Enhancing cultural awareness and understanding empowers healthcare providers to recognize and confront their personal biases, leading to more equitable treatment decisions and enhanced healthcare outcomes.

Various methods are employed to assess the effectiveness of cultural competency training in the United States and evaluate its impact on healthcare outcomes and disparities. For instance, to address the need for identifying and organizing the key aspects of cultural competence, the Association of American Medical Colleges (AAMC) developed the "Tool for Assessing Cultural Competence Training" (TACCT) specifically for medical school curricula. The primary purpose of this tool was to assist medical schools in creating cultural competence curricula that align with the standards set by the Liaison Committee on Medical Education (LCME) (Holyfield, L. J., & Miller, B. H. 2013). The TACCT is a comprehensive self-administered assessment tool comprising two main components: Domains, which enable the monitoring of overall curricular offerings and teaching locations, and Specific Components, which provide a framework for identifying detailed knowledge, skills, and attitudes associated with specific learning objectives. By utilizing the TACCT, medical school leaders are empowered to thoroughly evaluate all components of their cultural competence curricula, identify any gaps or redundancies, and optimize the utilization of available opportunities and resources.

In another study in Iran, the effectiveness of a curriculum was assessed by researchers using the Cultural Care Inventory. Before the intervention, the average scores for cultural competence in the intervention group (151.89 ± 26.88) and the control group (151.8 ± 25.12) were at a moderate level and did not differ significantly (t = 0.01, p = 0.99). However, after the intervention, there was a significant increase in the mean score of cultural competence in the intervention group (184.37 ± 22.43) compared to the control group (153.19 ± 20.14) (t = 6.24, p = 0.001). This improvement led to the cultural competence level in the intervention group

transitioning from "moderate" to "high" (Farokhzadian., et al. 2022). This tool could be implemented in the U.S. as an assessment tool. However, further investigation is warranted to explore alternative approaches for assessing cultural competency among healthcare professionals, including the inclusion of patient satisfaction measures, before implementing a mandatory training plan.

The implementation of mandatory cultural competency training in healthcare settings may face several barriers and challenges. One potential challenge is the skepticism surrounding the necessity and effectiveness of such training. Critics may argue that healthcare providers already receive adequate education and training, making additional cultural competency training redundant. Moreover, concerns about the logistical and financial implications of implementing widespread training programs may arise, particularly in resource-constrained healthcare systems. To overcome these challenges, it is crucial to emphasize the empirical evidence supporting the effectiveness of cultural competency training as numerous studies; some illustrated among many others have shown that cultural competency training improves healthcare providers' ability to deliver patient-centered care and reduces healthcare disparities. By showcasing these positive impacts on patient outcomes and healthcare quality, healthcare professionals and policymakers can build a stronger case for its implementation.

Effective strategies for overcoming logistical barriers and ensuring successful implementation of mandatory cultural competency training include integrating cultural competency training into the healthcare system as a core component of healthcare curricula. This approach ensures that future healthcare professionals can develop the necessary skills and knowledge from the outset of their training. Additionally, ongoing professional development opportunities can be provided to healthcare providers to reinforce cultural competency skills and address any evolving challenges in healthcare delivery; in an ever-changing world, you can never learn it all, even if you keep growing into your 90s (John P. Kotter)

Furthermore, collaboration between healthcare organizations, academic institutions, and professional associations can play a crucial role in implementing and supporting cultural competency training initiatives. By working together, these stakeholders can share resources, expertise, and best practices to optimize the design and delivery of cultural competency training programs. Additionally, the involvement of diverse community representatives and patient advocacy groups can ensure that training programs address the specific needs and concerns of various patient populations. These are concrete solutions that could be strongly advocated for, particularly by the political class in the country.

To ensure the widespread adoption of cultural competency training, policy changes, and strong leadership are essential. Government agencies and healthcare organizations can play a pivotal role in promoting cultural competency through policy initiatives and funding support. By making cultural competency training a mandatory requirement and allocating resources for its implementation, policy efforts can drive the necessary change in healthcare systems. Moreover, leaders in healthcare organizations can champion cultural competency, create a supportive environment, and foster a culture of inclusivity, thereby ensuring that equity in healthcare becomes a priority (Kaprielian et al., 2020).

In conclusion, cultivating cultural competency through mandatory training for healthcare providers is a crucial pathway to achieving equity in healthcare. Discrimination in healthcare has significant and lasting consequences, perpetuating disparities in access to care and compromising patient outcomes. The evidence presented from the research highlights the urgent need for change and supports the effectiveness of cultural competency training in addressing these challenges. By equipping healthcare providers with the skills and knowledge to understand and respect the diverse needs and beliefs of their patients, healthcare disparities can be bridged, and equitable and inclusive care for all can be ensured. In the same manner, a healthcare system that values and meets the needs of every patient is an achievable goal. Government agencies, healthcare organizations, and leaders must take proactive steps to prioritize equity, foster inclusivity, and ensure that cultural competency becomes an integral part of healthcare delivery. By cultivating cultural competency, the barriers that perpetuate discrimination can be dismantled, leading to the achievement of equitable healthcare outcomes and the fostering of a healthcare system that genuinely embraces diversity and promotes the well-being of all individuals and communities.

References

- Chae, D., Kim, J., Kim, S., Lee, J., & Park, S. (2020). Effectiveness of cultural competence educational interventions on health professionals and patient outcomes: A systematic review. *Japan Journal of Nursing Science*, 17(3), e12326
- Eken, H. N., Dee, E. C., Powers, A. R., & Jordan, A. (2021). Racial and ethnic differences in perception of provider cultural competence among patients with depression and anxiety symptoms: a retrospective, population-based, cross-sectional analysis. *The Lancet Psychiatry*, 8(11), 957-968.
- Farokhzadian, J., Nematollahi, M., Dehghan Nayeri, N., & Faramarzpour, M. (2022). Using a model to design, implement, and evaluate a training program for improving cultural competence among undergraduate nursing students: a mixed methods study. *BMC nursing*, 21(1), 85.
- García-Izquierdo, I., & Montalt, V. (2022). Cultural Competence and the Role of the Patient's Mother Tongue: An Exploratory Study of Health Professionals Perceptions. *Societies*, 12(2), 53.
- Holyfield, L. J., & Miller, B. H. (2013). A tool for assessing cultural competence training in dental education. *Journal of Dental Education*, 77(8), 990-997
- Kaprielian, V. S., Matalon, A., & Tadros, A. (2020). Cultural competency education and training in health care: The missing link in reducing racial and ethnic disparities in health

outcomes in an increasingly diverse patient population. Mount Sinai Journal of Medicine: A Journal of Translational and Personalized Medicine, 87(3), 353-358.

- Lin, M. H., & Hsu, H. C. (2020). Effects of a cultural competence education programme on clinical nurses: A randomized controlled trial. *Nurse education today*, 88, 104385.
- Saha, S., Beach, M. C., & Cooper, L. A. (2019). Patient centeredness, cultural competence and healthcare quality. Journal of the National Medical Association, 105(2), 173-175