



Culture and Communication in Health Care:

# Effective Health Communication



**Target Audience:**

Staff who interact with patients, families, significant others or caregivers

People may not remember exactly what you did or what you said, but they will always remember how you made them feel.

*-Anonymous*

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Date Written: 3/08  
Date Reviewed: 6/10  
Date Revised: 1/12, 8/12

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## Course Goals

**At the end of this module you will be able to:**

- Identify barriers and strategies to effective health communication, including health literacy and culture.
- Use tools and resources for improving health communication.

Second review of content accuracy was provided by:

Kelly Near, MSN, WHNP-BC, MLS – Outreach Librarian, Claude Moore Health Sciences Library

Module and accompanying website created collaboratively with Claude Moore Health Sciences Library staff



## Menu

- [Introduction to Effective Health Communication](#)
- [Cultural Diversity in Healthcare](#)
- [Taking Actions](#)
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  - [Competency Exercises](#)

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## Directions

- Review the module to learn more about effective health communication with patients and families. Click **NEXT** above to proceed.
- This basic module contains 26 slides.
- There are many opportunities to learn more through the links in the module. You may want to bookmark the Health Sciences Library's page on [Culture, Communication and Ethics in Healthcare](#) for future reference.
- A grade of 80% is required to successfully complete the module.

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## Introduction to Effective Health Communication

Chapter Objective – Describe the relationship between health communication and care of patients and families.

**Effective health communication is a shared responsibility between patients, families and the health care team.**

[The Joint Commission Roadmap for Hospitals](#) states that “Every patient that enters the hospital has a unique set of needs—clinical symptoms that require medical attention and issues specific to the individual that can affect his or her care.

As patients move along the care continuum, it is important for hospitals to be prepared to identify and address not just the clinical aspects of care, but also the spectrum of each patient’s demographic and personal characteristics.”



## Introduction to Effective Health Communication

Patients are responsible for:

- Providing honest and complete information
- Speaking up with any concerns or questions.

Health care providers are responsible for:

- Creating a welcoming environment
- Maintaining an awareness of issues, laws and regulations that impact communication including:
  - Culture and Diversity
  - Language and Health Literacy
- Adapting communication for:
  - Patient and Family condition and needs
  - Situation and Environment



## Introduction to Effective Health Communication

Poor health communication contributes to:

- Negative patient outcomes
- Longer visits, delays in care, poor communication and incomplete consents
- Decreased patient satisfaction and compliance
- Ethical dilemmas and moral distress.

Effective health communication contributes to:

- Increased preventive health visits
- Patients who are involved in their care and more likely to follow instructions
- Increased trust, satisfaction, and comfort for patients, families and coworkers.



## Introduction to Effective Health Communication

### Health Literacy

- Poor health literacy is a common barrier to effective health communication
- Nearly 90 million American adults have difficulty understanding and using health information
- Literacy may affect your patient in:
  - Reading forms and handouts
  - Reading prescription bottles or measuring medications
  - Writing down instructions given over the phone
- **Limited ability to read is a stronger predictor of a person's health status than age, income, employment status, education level, and racial or ethnic group.**



## Introduction to Effective Health Communication

Patients and families are different in:

- Values, beliefs and goals
- Use of nonverbal communication
- How much information they want directly versus through others
- Ways they make decisions
- How they express emotions or show pain visibly
- The way they view their relationship with the health care team.



## Think about it:

Which of the following statements about health communication is NOT true?



- A. Effective health communication can help address health disparities.
- B. Health literacy is a common communication barrier.
- C. Ensuring effective health communication is only the responsibility of providers.
- D. Patients differ in the way they express pain or emotions.



## Think about it: (continued)

What communication strategies do you use to educate patients, and facilitate behavior change?



How do you adapt these strategies under different circumstances?

How do you adapt these strategies for families of patients?



## Cultural Diversity in Healthcare

Chapter Objective – demonstrate your understanding of diversity, culture, and cultural competency.

**Culture refers to the diverse values, beliefs, and behaviors of individuals and groups. Culture can change over time based on life experience.**



Diverse characteristics of people include:

- **Ability** (issues with mobility, vision, hearing, speech, cognition)
- **Age** (different approaches for children, young adults, older adults)
- **Education/Literacy** (health issues make the years of schooling less important than providing everyone with information using clear, [plain language](#)).



## Cultural Diversity in Healthcare

Diverse characteristics (continued)

- **Gender/Sexual orientation** (sense of being male or female regardless of one's biological sex)
- **Language** (immigrants, refugees, migration within the US)
- **Race/Ethnicity** (skin color; social, cultural, and politically constructed groups)
- **Religion** (formal expression of spirituality)
- **Socioeconomic status** (related to income, education, occupation)
- **Weight** (including anorexia [low body weight and body image distortion]; bulimia [recurrent binge eating]; obesity [life-long, progressive, life-threatening, multi-factorial disease of excess fat storage])



## Cultural Diversity in Healthcare



**Cultural Competence is a lifelong personal process that:**

- Recognizes that diversity has an influence in healthcare
- Looks at one's personal attitudes, practices, and biases and works to overcome negative attitudes, practices, and biases
- Strives to understand about different groups and individuals
- Develops skills to approach patients and families effectively.



## Cultural Diversity in Healthcare

Elements of a [culturally competent organization](#):

- Openness and respect for diverse staff and patients
- Access to a diverse variety of professional interpreters
- Signs and written materials in the languages of its patients
- Cultural competence orientation and training
- Services and programs to address the unique needs of patients and populations.

Examples at [UVA Health System](#) include:

- Spanish language materials and signs
- Language Assistance Services for translation and interpreters
- Family Medicine offers special services for refugees and Spanish speaking patients
- Chaplaincy Services providing support & religious materials such as Bible, Koran, etc.



## Cultural Diversity in Healthcare

Healthcare providers also have cultures, beliefs, and biases.

**Bias is unconscious judgment - positive or negative.**

- We do not always see ourselves and those around us accurately and objectively
- Our perceptions can be biased by our beliefs, past experiences and circumstances
- Such biases can impact our decision making and can cause misunderstanding and conflict amongst patients and providers
- [Addressing bias](#) helps to reduce racial and ethnic disparities in health care.



## Cultural Diversity in Healthcare

### Think about it



Which of the following statements about culture is NOT true?

- ▶ A. A person's culture can affect how symptoms and concerns about a health problem are expressed.
- ▶ B. Culture is different for each individual patient and provider.
- ▶ C. Characteristics such as age and gender can affect a person's culture.
- ▶ D. A person's culture remains the same throughout his or her lifetime.



## Actions to Take

Chapter Objective – learn to use techniques for effective health communication.

How do I approach my patient?

- Establish rapport and encourage questions:
  - Seek out [UVa Health System resources and support](#)
  - Use general information to start, but approach each patient as an individual
- Identify the patient and family's decision making process:
  - Include spiritual leaders, support groups as appropriate
- Determine language skills and the language in which patients wish to receive information
  - Only use a trained, proficient interpreter not family.
  - Use translated materials from UVA or other trusted sources (not a generic internet search)



### Actions to Take

How do I approach my patient? (continued)

- “Correct” non-verbal communication is very culture dependent. Pay attention to all non-verbal behavior including:
  - Use of silence and head movements
  - Awareness of time (appointments, meal times, able to read the clock)
  - Overall body language - posture, gestures, eye contact, personal distance, facial expressions
  - Use of gestures and touch, which can be misinterpreted
  - Way of speaking – tone of voice, volume and speed of speech
  - Use of religious objects or other potentially unfamiliar items.

**93% of communication is nonverbal**

Category	Percentage
Body Language	55%
Tone of Voice	38%
Verbal	7%

Effective Health Communication


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### Actions to Take

Techniques to improve communication:

- Speak clearly, slowly and not too loudly:
- Ask what the patient already knows about the subject
- Listen to the patient with an awareness of cultural implications and literacy level
- Talk to the patient using everyday words (as if having a conversation). Do not use jargon, slang, abbreviations or acronyms
- Use silence to allow for questions. Encourage patients and family to ask questions
- Consider your patient's cultural norms and personal lifestyle when developing a plan with the patient

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## Actions to Take

### Techniques to improve communication (continued)

- Use clear, plain language when speaking or writing:
  - Many people, even those with higher education, have trouble understanding health care jargon.
  - Use simple pictures in context (i.e. a picture of an organ related to where it is in the body).
- Verify understanding:
  - Repeat basic ideas, encourage questions and ask open ended questions (questions that require more than a “yes” or “no” response)
  - Ask the person to tell you what he understands in his own words. “Let me see if I have explained this well – how will you. . . .”  
[\(Teach-back Method\)](#)
  - Do not assume that a nod or smile equals understanding.



## Actions to Take

### Think about it

Strategies to improve health communication include:

- ▶ A. “Teach-back” method to verify understanding.
- ▶ B. Use of a trained interpreter when the patient speaks another language.
- ▶ C. Speaking slowly and clearly.
- ▶ D. Providing privacy and being sensitive to cultural differences.
- ▶ E. All of the above.



## Actions to Take

### Think about it (continued)

The following passage simulates what a reader with low general literacy sees on the printed page. Try reading the following out loud. (*Here's a hint: The words are written backwards and the first word is "cleaning"*)

**GNINAE LC—Ot erussa hgi h ecmarfrep, yllacidoirep  
naelc eht epat sdaeh dna natpac revenehw uoy  
eciton na noitalumucca fo tsud dna nworb-der edixo selcitrp.**

1. What was it like to read this?
2. Did you find that you focused more on figuring out each word rather than the meaning of the sentence?
3. What signals might a patient who doesn't read well give?

This exercise gives you some idea about how it is for people with limited literacy to follow directions.



## Tools and Resources

Use the "**Teach-back**" method to find out if your patient understands you. Ask your patient to

- Restate what you've taught
  - How would you explain this to a family member?
- Demonstrate what you've taught
  - Will you show me how you draw up that insulin?

**Review** the written materials you have given

- What are the warning signs listed in the brochure I gave you?

**Ask your patient questions** with hypothetical "real world" situations:

- What if the pain got worse? What if the bandage loosened?
- What would you do if you felt short of breath?
- What if you weren't sure about your diet restrictions?

**Listen to what the patient tells a visitor** to ensure that he correctly understands information. Follow up privately afterwards if needed.



## Tools and Resources

[UVa Policy 156](#) discourages the use of untrained medical interpreters (including family members).

**Use trained, proficient interpreters** even if your patient speaks another language because:

- An average of 70% clinically important errors were made by untrained interpreters
- Ethical and confidentiality issues occurred from using family members, especially children as interpreters.

**Be sure to document either the name of the Interpreter or the Cyacom® phone interpreter Identification Number.**

To learn more see [UVA Language Assistance Services website](#).

### When using a trained interpreter:

- Briefly check in ahead of the visit about any cultural issues
- Assure the patient that we are ALL bound by confidentiality
- Speak directly to the patient, all communication is interpreted
- Ask one question at a time, avoiding the use of medical jargon
- Check in afterwards with the interpreter.



## Tools and Resources

To learn more, visit the Health Services Library website:

[Culture, Communication and Ethics in Healthcare](#)

You will find:

- Tools, Background readings, Organizational resources related to:
  - Cultural Competence
  - Health Literacy
  - Ethics and Moral Distress
  - Patient Safety
- Links to other continuing education and training opportunities like:
  - ["Unified Health Communication 101: Addressing Health Literacy, Cultural Competency, and Limited English Proficiency."](#) It is sponsored by the Health and Human Resources Administration (HRSA). It contains five modules with the option of taking the test to receive contact hours.



## Exit

You have completed the information portion of this module.

- Select **Take Test**.

After testing you may:

- Select the **My Reports** tab to print your transcript.
- To view the certificate, click the icon to the left of the CBL title in the **My Completions** widget.

Select **Exit** to close.

For questions regarding the content, please contact Cindy Westley at [cjw2s@virginia.edu](mailto:cjw2s@virginia.edu)  
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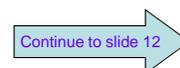
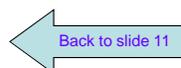
You selected:

A. Effective health communication can help address health disparities.

The statement NOT true about health communication is:

C. Ensuring effective health communication is only the responsibility of providers.

To review this topic, refer to the section titled [Introduction to Effective Health Communication](#).



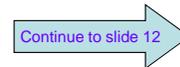
You selected:

B. Health literacy is a common communication barrier.

The statement NOT true about health communication is:

C. Ensuring effective health communication is only the responsibility of providers.

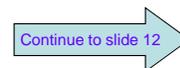
To review this topic, refer to the section titled [Introduction to Effective Health Communication](#).



You selected:

C. Ensuring effective health communication is only the responsibility of providers.

This answer is correct. Effective health communication is a shared responsibility among patient, family and health care team.



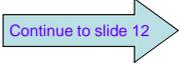
You selected:

D. Patients differ in the way they express pain or emotions

The statement NOT true about health communication is:

C. Ensuring effective health communication is only the responsibility of providers.

To review this topic, refer to the section titled [Introduction to Effective Health Communication](#).

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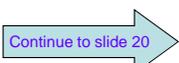
You selected:

A. A person's culture can affect how symptoms and concerns about a health problem are expressed.

The statement NOT true about culture is:

D. A person's culture remains the same throughout his or her lifetime.

To review this topic, refer to the section titled [Cultural Diversity in Healthcare](#).

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You selected:

B. Culture is different for each individual patient and provider.

The statement NOT true about culture is:

D. A person's culture remains the same throughout his or her lifetime.

To review this topic, refer to the section titled [Cultural Diversity in Healthcare](#).

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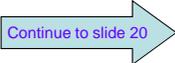
You selected:

C. Characteristics such as age and gender can affect a person's culture.

The statement NOT true about culture is:

D. A person's culture remains the same throughout his or her lifetime.

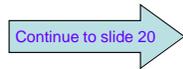
To review this topic, refer to the section titled [Cultural Diversity in Healthcare](#).

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You selected:

D. A person's culture remains the same throughout his or her lifetime.

This answer is correct. A person's culture does not remain the same over his/her lifetime; instead, it changes and adjusts over time based on life experience.



Continue to slide 20

You selected:

A. "Teach-back" method to verify understanding.

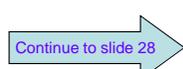
This answer is partially correct. All of the strategies listed improve health communication:

- A. "Teach-back" method to verify understanding.
- B. Use of a trained interpreter when the patient speaks another language.
- C. Speaking slowly and clearly.
- D. Providing privacy and being sensitive to cultural differences.

To review this topic, refer to the section titled [Actions to Take](#).



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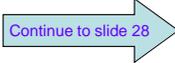
You selected:

B. Use of a trained interpreter when the patient speaks another language.

This answer is partially correct. All of the strategies listed improve health communication:

- A. "Teach-back" method to verify understanding.
- B. Use of a trained interpreter when the patient speaks another language.
- C. Speaking slowly and clearly.
- D. Providing privacy and being sensitive to cultural differences.

To review this topic, refer to the section titled [Actions to Take](#).

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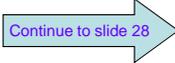
You selected:

C. Speak slowly and clearly.

This answer is partially correct. All of the strategies listed improve health communication:

- A. "Teach-back" method to verify understanding.
- B. Use of a trained interpreter when the patient speaks another language.
- C. Speaking slowly and clearly.
- D. Providing privacy and being sensitive to cultural differences.

To review this topic, refer to the section titled [Actions to Take](#).

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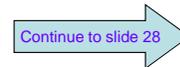
You selected:

D. Provide privacy and be sensitive to cultural difference.

This answer is partially correct. All of the strategies listed improve health communication:

- A. "Teach-back" method to verify understanding.
- B. Use of a trained interpreter when the patient speaks another language.
- C. Speaking slowly and clearly.
- D. Providing privacy and being sensitive to cultural differences.

To review this topic, refer to the section titled [Actions to Take](#).



You selected:

E. All of the above.

This answer is correct. All of the strategies listed improve health communication:

- A. "Teach-back" method to verify understanding.
- B. Use of a trained interpreter when the patient speaks another language.
- C. Speaking slowly and clearly.
- D. Providing privacy and being sensitive to cultural differences.

