Gaining Insights into Your Patient’s Perspective

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“Country Guides”

Cultural Competency and Tuberculosis Control: A Practical Guide for Health Professionals Working with Foreign-born Clients

- The SNTC, in collaboration with the Lung Health Center at the University of Alabama at Birmingham, developed a series of TB-specific cultural competency guides.
- Original content developed by Joan M. Mangan, PhD, MST
  - Centers for Disease Control and Prevention, Division of TB Elimination
  - Formerly of the University of Florida and the University of Alabama at Birmingham
Gain Insight

- Regarding patient’s attitudes, beliefs and perspectives – and how these may influence what the patient may or may not do.
- Patient-centered care focus
- Country Guides can guide the manner in which you approach, interact, educate and provide support to patients, their family or caregivers, and their contacts.
The Aim

• Assist healthcare professionals working with foreign-born persons to employ a more *culturally relativistic* approach to:
  • Client interviews
  • TB contact investigations
  • Diagnostic procedures
  • Client and family education and counseling
The Guides Are Divided Into 7 Sections:

1. Country Background
2. Epidemiology (TB and HIV)
3. Common Misperceptions, Beliefs, Attitudes, and Stigmatizing Practices Related to TB
5. General Practices and Cultural Courtesies
   • Polite greetings to use when meeting a person from the country, verbal and non-verbal communication, naming customs, cultural values, nicknames for TB
6. Translated Educational Materials
7. References
Information for each Guide gathered from:

- Existing databases compiled by:
  - Central Intelligence Agency (CIA The World Factbook)
  - U.S. State Department
  - WHO
  - CDC

- Peer-reviewed journal articles
- Ethnographic studies conducted by the CDC
Information for each Guide gathered from:

- TB and HIV related reports for individual countries published by:
  - WHO
  - Pan American Health Organization
  - US Agency for International Development
  - The United Nations Development Program
  - National Tuberculosis Programs and Ministries of Health

- Information has also been collected/reviewed through personal communications with staff working with:
  - Non-governmental organizations (NGOs)
  - The United Nations Development Program
  - WHO
  - National Tuberculosis Programs (NTP) who oversee TB control activities within individual countries
A Starting Point

• The information provided may or may not pertain to your client.
• The Guides are meant to be a starting point only to help you begin to establish a rapport with a client.
### Common Misperceptions: Etiology of Tuberculosis

<table>
<thead>
<tr>
<th>Mexico, India, Vietnam, Philippines</th>
<th>India, Vietnam, Philippines</th>
<th>Mexico, Philippines</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Smoking</td>
<td>▪ Excessive Stress / Worry / Anxiety</td>
<td>▪ A cough (due to a cold or bronchitis) that was not treated and developed into a serious disease</td>
</tr>
<tr>
<td>• Drinking alcohol</td>
<td>▪ Genetic inheritance / passed through generations of families</td>
<td></td>
</tr>
<tr>
<td>• Not eating nutritious foods / malnutrition</td>
<td>▪ Poor sanitation or hygiene / dirty housing</td>
<td></td>
</tr>
<tr>
<td>• Physical exertion or hard work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Disruptions in the body’s hot / cold balance (causes vary)</td>
<td></td>
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**Note:** While TB is associated with malnutrition, poverty/overcrowded living conditions, individuals view these factors as the direct cause (or etiological agent) of TB disease.

<table>
<thead>
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<th>Vietnam</th>
<th>The Philippines</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Inhaling ashes, dust or smoke</td>
<td>• Sexual promiscuity</td>
<td>• Polluted / dusty environments</td>
<td>• Frequent pregnancies</td>
</tr>
<tr>
<td>• Bewitchment</td>
<td>• Fate or karma</td>
<td>• Supernatural causes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• God’s curse</td>
<td>• Contaminated water</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• An evil soul or evil spirit</td>
<td>• Lack of sleep/fatigue</td>
<td></td>
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<tr>
<td></td>
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<td>• God’s Decision</td>
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</tbody>
</table>
### Common Misperceptions: Transmission of Tuberculosis

**Mexico, India, Vietnam, Philippines**
- Sharing items with a TB patient.

**Examples:** Eating utensils, blankets, bed sheets, towels or drinking from the same bottle or glass.

<table>
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</thead>
</table>
| Shaking hands with a TB patient.  
Sexual relations with an infected person. | Social contact  
Heredity | Spitting  
From mother to child during pregnancy  
Bad genes | Touching a person with TB  
Sexual Intercourse  
Blood Transfusion  
Drinking Water  
Children cannot have TB, the illness only affects adults. |
## Common Misperceptions: Diagnostic Testing

<table>
<thead>
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</thead>
<tbody>
<tr>
<td>• Routine blood draws can drain a person of energy</td>
<td>No misperceptions found in the literature (yet)</td>
<td>• X-rays kill blood cells and causes a patient to become tired or turns the skin yellow.</td>
<td>• X-rays will cause a person to become sterile or develop cancer.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The body has a finite amount of blood, and the withdrawal of blood causes an irreversible decrease in the body’s supply.</td>
<td>• The results of an x-ray can be affected by a person’s diet.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Examples:</td>
<td>Examples:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Drinking a cup of milk will result in a “negative” chest x-ray</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>• Drinking vinegar will cause an x-ray to be blurry.</td>
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</table>
There’s more...

Quick Reference Guides – 7 Countries

- Mexico
- Philippines
- India
- Vietnam
- China
- Guatemala
- Haiti
“Country Snapshots” for 7 countries

- Two-page guide
- Essential background information, epidemiology, common misperceptions and beliefs about TB and HIV/AIDS, general practices and cultural courtesies
Available:
- Online
- SNTC’s Mobile App
- Mail paper guides

http://sntc.medicine.ufl.edu/Products.aspx
Generalizations

• The Guides attempt to provide generalizations
  • A common trend that can explain beliefs and behaviors that may be shared by a group

• When generalizations might not apply:
  • Length of time in the United States
  • Age at the time a person entered the U.S.
  • Desire to assimilate
  • Live in an ethnic community or an “American” community
  • Level of education
Some Country Guides are more detailed than others

- Data availability about the country
  - Countries with stronger TB control activities may have more published technical reports, journal articles, data that can be included in the guides.
  - Published literature and data also influenced by incidence of TB, a history of political instability or war, weaker MOH or NTP infrastructures, etc.

**Note:** Reviewers help us overcome this limitation.
Country populations are diverse with respect to education, socio-economic status, culture and language.

Misperceptions, beliefs, practices listed in a Guide may be restricted to a particular region or among special populations.

- Studies that have been done and reported in the literature tend to focus on disadvantaged communities.
• Your comments and suggestions for enhancing these guides are welcome!

• If you are aware of potential reviewers, resources, or information we encourage you to share this information.