

Integrating Race Conversations into Healthy Patient-Provider Interactions

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STORIES OF BIPOC EXPERIENCES WITH HEALTHCARE PROVIDERS

- Invalidating and undermining symptoms
- Unawareness of specific needs of BIPOC population
- Lack of differentiation of Latinx, African, and Asian communities

STORIES OF BIPOC EXPERIENCES WITH PROVIDERS

- Lack of knowledge
- Lack of openness and curiosity
- Lack of engagement with BIPOC population concerns
- Generalization of diagnosis, treatments, and prognosis

BIPOC HEALTHCARE PROVIDER SHORTAGE

- Not enough health providers
- Most BIPOC communities see White providers
- Detrimental for BIPOC communities because there is a lack of cultural awareness and humility
- Textbook knowledge: Outdated/Falsified information
- Perpetuate stereotypes

NEED FOR CULTURAL COMPETENCE AND CULTURAL HUMILITY IN PROVIDERS

- Awareness & accepting patients lived experiences
- Knowledge/lack of knowledge
- Skills
- Openness and curiosity
- Open discussions about race with patients

CERTAIN ISSUES IN THE BIPOC COMMUNITY HEALTH TREATMENT

- Culture/Ethnicity
- SES issues
- Race
- Language

Diversified Mindset

- Interact with your patient with a diversified mindset
- Come in with an open/eager mind to learn from the patient's perspective/experience
- Ongoing attitude of “room to grow”
 - Prevent a “one size fits all” approach
- Fosters conversation around race & diversity
- Ongoing assessment of your stage of cultural development

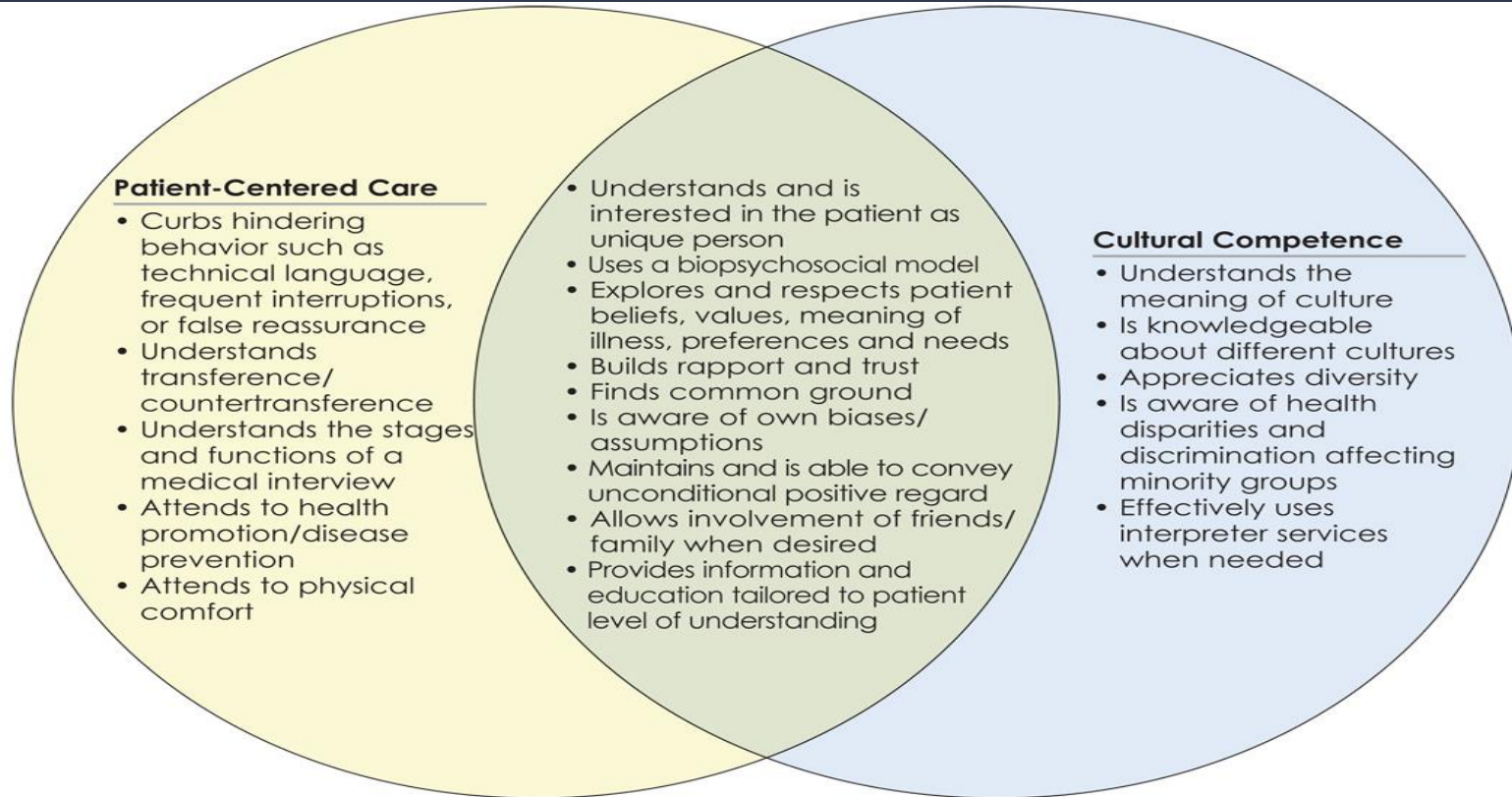
Diversified Mindset

- Learn about the BIPOC community
 - medical need
 - psychological needs from them
 - Untangling race and past medical traumas in certain BIPOC communities
- Textbook knowledge vs. interactive conversations with patients

REASONS FOR LACK OF APPLICATION OF THE DIVERSIFIED MIND

- Blame the system (i.e. I don't have time)
- Fear of offending the patient
- Fear of being misunderstood
- Unsure of what to say/how to start the conversation
- What is your reason?

INTERPERSONAL INTERACTIONS IN HEALTHCARE



Patient centeredness, cultural competence and healthcare quality. *J Natl Med Assoc.* <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2824588>. Published November 2018. Accessed March 16, 2021.

WHAT DOES THE DIVERSIFIED MINDSET LOOK LIKE ON A DAILY BASIS?

- What have you noticed are the needs of BIPOC community in healthcare provision?
- Have you ever asked a patient or are you just reading materials?
- Have you ever had a conversation with your patient about other topics outside of their clinical presentation?

PROVIDER RESPONSIBILITY

- Take the risk to bring up conversation around backgrounds, ethnicities, language, religion, and values
- Don't expect conversation to be initiated by patient
- Talking about race has become a taboo
 - Discuss with mindfulness
- Accept that you may make a mistake
- Acknowledge when you have offended patients and take ownership over mistake
- Initiate the conversation of race from the beginning of the interaction

THANK YOU