



Cultural Communication with Native Americans

IN HEALTHCARE SETTINGS

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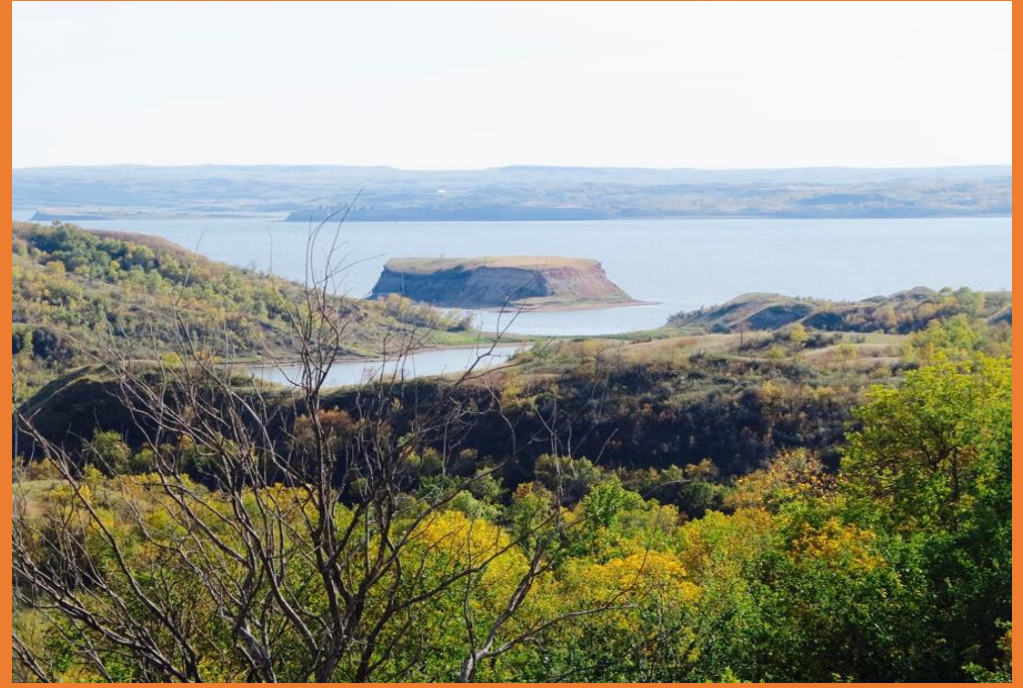


OBJECTIVES

- **Begin to understand cultural sensitivity to Native Americans in the health care setting**
 - **Open the discussion of respectful strategies for the development of culturally appropriate communication skills with Native American patients**
 - **Discuss the importance of being mindful of the values and beliefs of Native American patients**
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RESERVATION




MHA Nation

- **Segments:**
 - **White Shield**
 - **Parshall**
 - **New Town**
 - **Four Bears**
 - **Mandaree**
 - **Twin Buttes**





Native Core Values

- **Deep respect for Elder's**
 - **Kinship/Extended Families**
 - **Shared Responsibilities, Benefits**
 - **Respect for all living things, environment**
 - **Spirituality**
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Some common beliefs, misconceptions, miscommunications, and taboo's of Healthcare with Native Americans

- **Untrusting of the non-native providers and other clinical staff**
 - **Past experiences of mistreatment with family members**
 - **Not respecting Native Patients treatment less than**
- 




Beliefs About Medical Care

- **Distrust**
 - **Not getting the full story**
 - **Stories that they have heard from others**
 - **Past medical experiences**
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Misconceptions of Medical treatment

- **Make sure your Native American patients understand what information he/she is being told, take away the mistrust**
 - **Most patients will agree they understand what they are being told, shaking head, or looking confused, make sure and have them repeat back or tell you they understand**
 - **Misconception of what is the diagnosis?**
 - **Misconception of why patient is in hospital?**
 - **Misconception of language/use of language.**
- 




Miscommunications

- **Miscommunications by patient**
 - **Miscommunications by family**
 - **Miscommunication by Provider**
 - **Miscommunication by other healthcare staff**
- 



Taboos

- **Non Verbal**
 - **No emotion**
 - **Very emotional**
 - **Loss of self**
 - **Loss of body part**
 - **Loss of Spirit**
- 



Native American Families

- **Native families are:**
 - **Traditional**
 - **Extended**
 - **Non traditional**



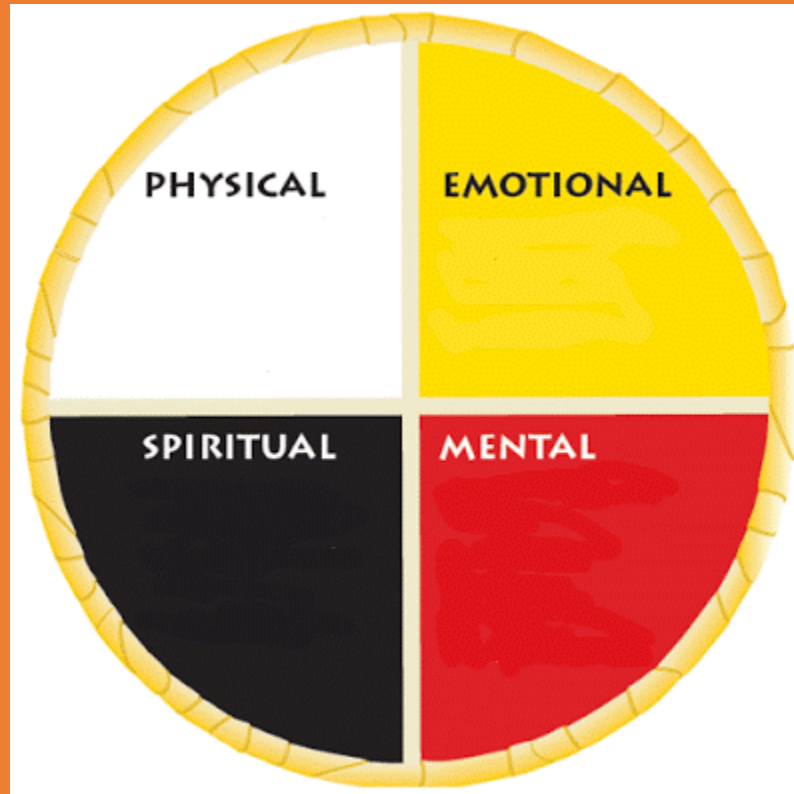


Religions

- **Traditional**
- **Spiritual**



Medicine Wheel



Ceremonies

- **Medicine Man**
- **Elder**
- **Priest/Minister**



Ceremonial Items

- **Sage**
- **Tobacco**
- **Sweet Grass**
- **Blankets or other gifts**




Fort Berthold Earth Lodges





Case Study #1

Your family has arrived to the ICU waiting room. You were told your Father is in some type of failure, and on the respirator. The doctor will be out to talk to the family soon. When the doctor comes out to talk to the family, he explains the diagnosis is Multisystem failure. His English is far from clear, and he talks for 5 minutes in provider language with medical terminology and his accent. He is eager to leave because he is very busy. The family is devastated, confused, and unclear of what they have been told and what to make the of the situation. Frustration of the family grows and they come to you, the charge nurse with questions. They want you to help them, where do you begin?





Discussion


- **Case Study #1**





Case Study #2

Your Mother is in the hospital. She has been in the hospital now for 3 days and she is 86 years old. She is Native American and has 8 children who are all there with her, along with the extended family for a total of 36 people waiting for word on their loved one. Every time the doctor comes in, everyone is asking questions. All the family wants to be a part of the process of the care of their loved one. The family has also taken over the waiting room, for the floor of the ICU. There is starting to be louder and louder conversations that are turning into arguments. Hospital security has been called to help settle everyone down and makes the comment of 'why don't these "Damn Indians" just go home' under his breath that causes more discord. How would you help this family in a culturally sensitive way with all their concerns? Along with all the congestion, the loud struggles, and voices of the family?





Discussion


- **Case Study #2**





Case Study #3

A 17 year old Native American male has been in a MVC. You have arrived in the ER waiting area. He is in surgery and all other family has started to arrive. He is young so a lot of friends are also arriving. The waiting room is filling up fast and is very emotional. A security guard of the hospital walks by, then stops and states you Indian people need to quiet down. Everyone is shocked by his comment and dismiss it. It's been a hour or so, and a nurse comes around and makes a very rude comment about the native family members, the family is astonished. The 1st security guard comes around again, and starts to be confrontational with a very distraught family member and makes another racial comment. He states that all the family will have to leave now. The family is becoming angry and feels disrespected, so they ask who is in charge. How would you resolve this situation. Who would you direct the family to? How would you make this family feel alright and comfortable in your facility?





Discussion

- **Case Study #3**





Conclusion

FINAL THOUGHT:

Remember, we are all made the same, just lots of different sizes and colors. All patients should be treated the same no matter what you might feel personally or have been taught. Comfort, Care, Compassion and Kindness come from within us all. Always remember LOVE.

THANK YOU

