

Council Statement Cultural Competence

March 2008

Primarily based on the MCNZ Statement on cultural competence (August 2006)

Introduction

The code of practice on cultural competence outlines the attitudes, knowledge and skills expected of oral health practitioners in their dealings with all patients.

Oral health practitioners in New Zealand work with a population that is culturally diverse. The many ethnic groups within our population, and also in other groupings that patients may identify with, such as disability culture, gay culture or a particular religious group reflects this. The oral health workforce itself includes many international practitioners and a variety of ethnic groups. Cross-cultural practitioner-patient interactions are therefore common and practitioners need to be competent in dealing with patients whose cultures differ from their own.

Individual cultures affect the way people understand health and illness, the choices people make regarding their health care, how they access health care services and how they respond to health care interventions. Cultural competence will improve the quality of oral health care services and outcomes for patients.

There are a number of benefits of appreciating and understanding cultural issues in the practitioner-patient relationship. These include:

- developing a trusting relationship
- gaining increased information from patients
- improving communication with patients
- helping negotiate differences
- increasing compliance with treatment
- contributing to greater willingness and acceptance of the need to consult with oral health practitioners
- ensuring better patient outcomes and increased patient satisfaction
- improving the efficiency and cost-effectiveness of oral health care delivery.

Statutory responsibilities

The Dental Council has a statutory obligation to ensure the cultural competence of oral health practitioners under section 118(i) of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

In addition to the HPCAA the Code of Health and Disability Services Consumers' Rights also imposes a statutory duty upon health professionals. The obligation under the Code is "*to take reasonable actions in the circumstances to give effect to the rights, and comply with the duties in the Code*"¹. The onus is on providers to show that such action has been taken.

The Consumer Rights are:

Right 1 – right to be treated with respect

- Every consumer has the right to be treated with respect.
- Every consumer has the right to have his or her privacy respected.

¹ Code of Health and Disability Services Consumers' Rights, Health and Disability Commissioner

- Every consumer has the right to be provided with services that take into account the needs, values and beliefs of different cultural, religious, social and ethnic groups, including the needs, values and beliefs of Māori.

Right 2 – right to freedom from discrimination, coercion, harassment and exploitation

- Every consumer has the right to be free from discrimination, coercion, harassment and sexual, financial or other exploitation.

Right 3 – right to dignity and independence

- Every consumer has the right to have services provided in a manner that respects the dignity and independence of the individual.

Definition

For the purposes of this code, cultural competence is defined as “an awareness of cultural diversity and the ability to function effectively and respectfully when working with and treating people of different cultural backgrounds”. A culturally competent oral health practitioner will acknowledge:

- that New Zealand has a culturally diverse population
- that a practitioner’s culture and belief systems influence his or her interactions with patients and accepts that this may impact on the practitioner-patient relationship
- that a patient’s culture and belief system will also influence his or her approach to the oral health practitioner
- that a positive patient outcome is achieved when a practitioner and patient have a mutual respect and understanding
- that culture is not restricted to ethnicity, but also includes (and is not limited to) gender, spiritual beliefs, sexual orientation, lifestyle, beliefs, age, social status or perceived economic worth
- that practitioners need to be able to recognise and respect differing cultural perspective of patients for the purpose of effective clinical functioning in order to improve health outcomes for patients.

Cultural competence indicators

Cultural competence is a development process. As such, oral health practitioners should demonstrate the appropriate attitudes, awareness, knowledge and skills of cultural competence including:

Attitudes

- A willingness to understand your own cultural values and the influence these have on your interactions with patients and colleagues.
- A commitment to the ongoing development of your own cultural awareness and practices and those of your colleagues and staff.
- A preparedness not to impose your own values on patients.
- A willingness to appropriately question the attitudes of individual colleagues where this will have a negative impact on the patients.

- A willingness to acknowledge and learn from those who demonstrate strong skills and understanding in other cultures.

Awareness and knowledge

- An awareness of the limitations of your knowledge and an openness to ongoing learning and development in partnership with patients.
- An awareness that general cultural information may not apply to specific patients and that individual patients should not be thought of as stereotypes.
- A respect for and an understanding of the cultural beliefs, values and practices of your patients.
- An understanding that patients' cultural beliefs, values and practices influence their perceptions of health, illness and disease; their health care practices; their interactions with medical professionals and the health care system; and treatment preferences.
- An understanding that the concept of culture extends beyond ethnicity, and that patients may identify with several cultural groupings.
- An awareness of the general beliefs, values, behaviours and health practices of particular cultural groups most often encountered by the practitioner, and knowledge of how this can be applied to the oral health care situation.

Skills

- The ability to establish a rapport with patients of other cultures.
- The ability to draw out a patient's cultural issues which might impact on the practitioner-patient relationship.
- The ability to recognise when your actions might not be acceptable, might be misunderstood, or might be offensive to patients.
- The ability to work with the patient's cultural beliefs, values and practices in developing a relevant treatment plan.
- The ability to include a patient's family in their oral health care when appropriate.
- The ability to work cooperatively with others in a patient's culture (both professionals and other community resource people) where this is desired by the patient and does not conflict with other clinical or ethical requirements.
- The ability to communicate effectively cross culturally.

Other resources

- Practising as an Oral Health Practitioner in New Zealand (2007)
- The Health and Disability Commissioner (HDC) – www.hdc.org.nz
- Code of Health and Disability Services Consumer's Rights (<http://www.hdc.org.nz/theact/theact-thecodedetail>)
- Dental Council of New Zealand statement of ethics – refer to the DCNZ website (http://www.dcnz.org.nz/Documents/Codes/Statement_OralHealthPractitioners_PrinciplesEthicalConduct.pdf)