

Multicultural Awareness & Cultural Competency

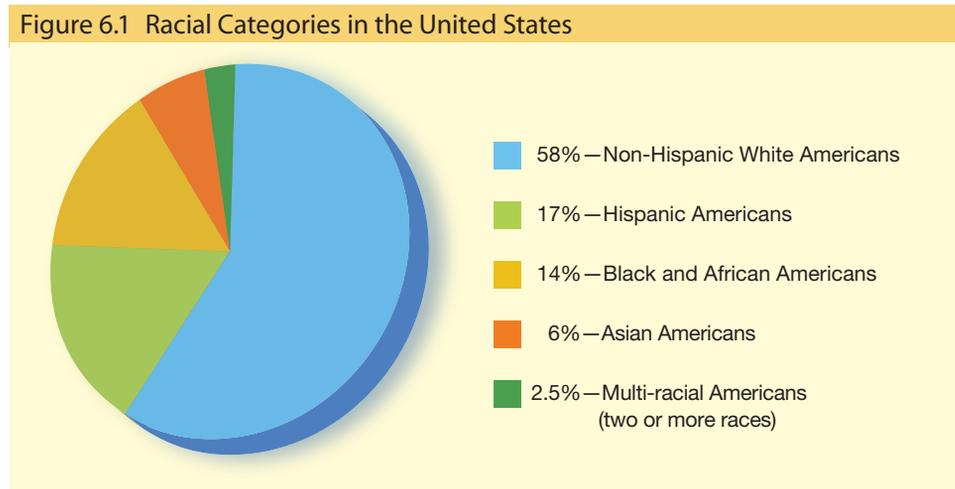
LEARNING OBJECTIVES

- 1 Become familiar with stereotypes and how to manage their influence on interactions. (Section 6.1)
- 2 Describe the importance of multicultural awareness and cultural competency in the pharmacy setting. (Section 6.1)
- 3 Become familiar with the cultural considerations for different ethnic groups and coworkers. (Section 6.2)
- 4 Identify Eastern vs. Western medicine and the influence they have on each other. (Section 6.2)
- 5 Describe the cultural considerations for different religions. (Section 6.3)
- 6 Identify the roles of the pharmacy professional with transgender and other sexual orientation and gender identity demographics. (Section 6.4)
- 7 Identify best practices for communicating in a culturally competent way. (Section 6.5)

In today's pharmacy workplace, you will encounter people from a wide range of backgrounds. In the community setting, the patients you interact with will be of many different demographics. In the institutional setting, your coworkers, physicians, and other healthcare professionals will also have many different ethnic, religious, and cultural backgrounds.

The United States is becoming more ethnically and racially diverse, which poses increased challenges to interacting competently with individuals whose backgrounds may differ.

According to 2016 US Census Bureau estimates, the US population was composed of the racial categories seen in Figure 6.1.

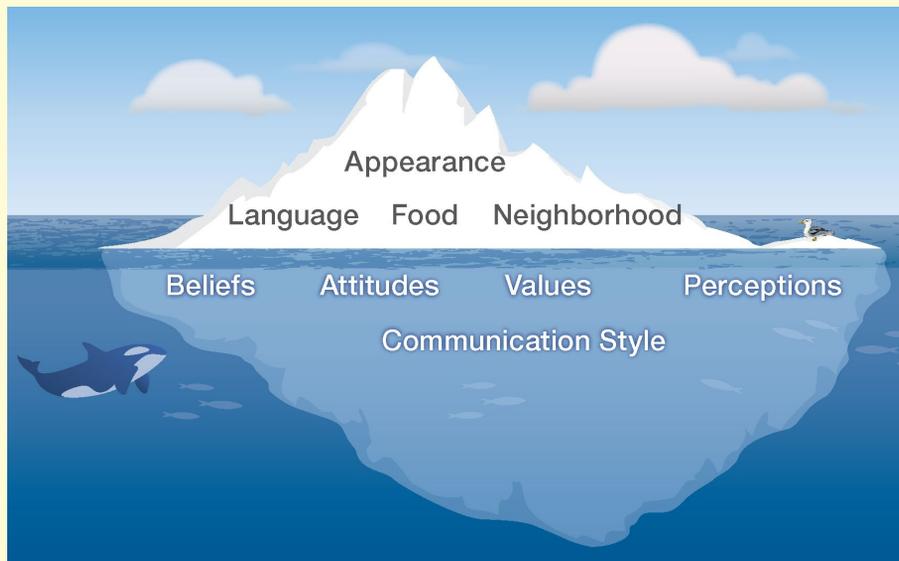


You must be sensitive to and respectful of differences in culture, religion, language, age, abilities, sexual orientation, and other backgrounds. To provide the best care to all your patients, as well as to cooperate with colleagues in the workplace, you will need to acquire the skills of cultural competence.

6.1 Multicultural Awareness and Cultural Competency

To understand what is meant by multicultural awareness and cultural competency, it is important to have a clear definition of culture itself. The term **culture** is defined by the United Nations Educational, Scientific, and Cultural Organization (UNESCO) as “a set of distinctive spiritual, material, intellectual and emotional features of society or a social group and that it encompasses, in addition to art and literature, lifestyles, ways of living together, value systems, traditions and beliefs.” Although many consider race or ethnicity when they think about culture, it can also include age, religion, disability status, socioeconomics, gender, and sexual orientation.

Figure 6.2 Iceberg Metaphor of Cultural Identity



Source: *What Language Does Your Patient Hurt In?* 3e

Social scientist Edward T. Hall compared culture to an iceberg (as seen in Figure 6.2). On the top of a person's cultural iceberg are physical features, manner of dress, native language, accent in speaking English, traditional foods, and neighborhood composition and location. Underneath the visible level are the beliefs, attitudes, values, and perceptions of the person.

Diversity means a broad range of things and can refer to differences in types of people, foods, toys, tools, books, etc.

Multicultural means many cultural groups, whereas **multicultural awareness** refers to the understanding of, appreciation of, and sensitivity to the experiences, values, and lifestyles of people from different backgrounds. A keener understanding of the dimensions that make up another individual or group's diversity will allow you to develop a sense of value and appreciation for a wider subset of cultural values, whether or not you personally identify with them. This multicultural awareness allows you to interact more skillfully in both personal and professional areas of your life, as you interact with friends, family members, acquaintances, patients, and customers.

Cultural competence is defined as the ability of healthcare providers to recognize the social, cultural, and linguistic needs of patients, then deliver the appropriate services that meet those needs. Possessing cultural competence skills will serve you as you begin your career as a pharmacy technician.

Knowing more about a patient's culture will help you provide higher-quality service and shows a customer that you care. When you work to overcome cultural barriers you make every patient and coworker feel at ease.

Managing Stereotypes

We all subconsciously carry stereotypes in our head. A **stereotype** is an oversimplified characteristic of a group of people. It is a generic image of a group of people based on patterns, word-of-mouth stories, prejudiced attitudes, culture assumptions, opinions, or uncritical judgments about isolated incidents blown into sweeping generalizations.



Self-Reflection:

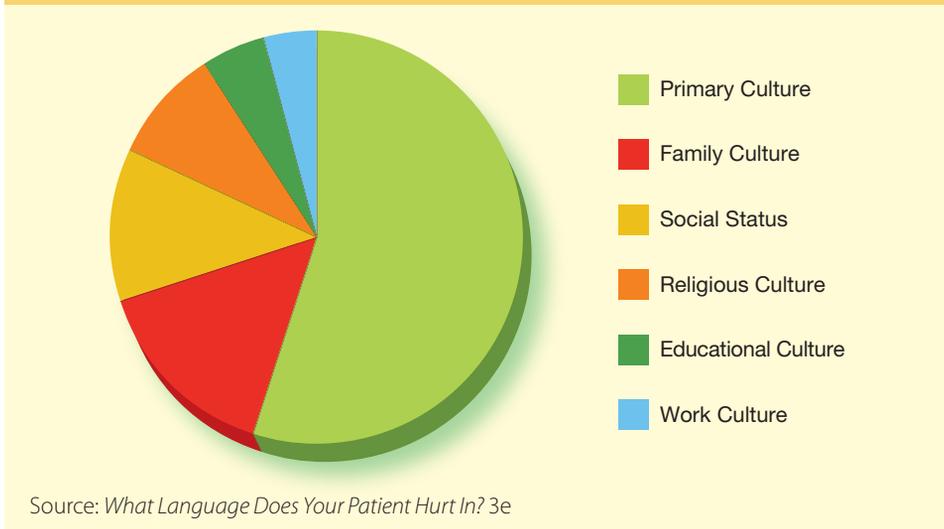
What Stereotypes Do You Have?

The first step in developing cultural competence is to develop self-awareness of your own beliefs, values, stereotypes, and biases. Consider your answers to the following questions.

- Are you religious?
 - If you are religious, what are your feelings about the beliefs and practices of other religions?
 - If you are not religious, what are your feelings about those who are?
- What are your thoughts about alternative forms of health care, such as homeopathic practitioners, herbalists, and shamans?
- How do you express your gender identity?
- How would you respond to a patient whose gender identity was not immediately apparent?
- How would you respond to a patient who refused to look you in the eye?
- How would you react to a colleague who frequently spoke a language other than English in the workplace?

Everyone has biases, but everyone is entitled to respect. A conscious awareness of your own personal stereotypes and biases allows you to challenge the basis and validity of those assumptions, which may lead to greater self-awareness and capacity to accept, recognize, and even embrace the value of the differences that exist in those around you. Equally important is that awareness will help drive your behaviors as you try to keep them from negatively influencing how you treat those with whom you serve and work.

Figure 6.3 The Multicomponent Cultural Identities of Individuals



Individuals are a complex mix, which is why stereotypes are so inaccurate. People are as individualized as their fingerprint. We each have a family of origin with its own history, traditions, and beliefs that exists within a larger community culture, neighborhood, or identity group (such as high school teenagers or seniors). There are layers of socioeconomic status, gender identity, religious identity, politics, educational influences, and work. Figure 6.3 illustrates the various components that make up cultural identity.

When working in the pharmacy, never assume that because someone belongs to an ethnic, racial, or cultural group, that person will necessarily believe or follow the practices generally attributed to that primary group.

Conflict between prescribed medication therapy and a patient's beliefs should be addressed with the prescriber. For example, if an emergency room doctor prescribed a discharge medication for a patient without knowing the specific cultural or religious affiliation, the physician might be unaware of any beliefs or traditions that would influence the types of treatment that the patient may accept or refuse.

Ask questions to better determine the degree of influence that membership in an ethnic, racial, or cultural group has on the individual patient's health—and illness—beliefs and practices. However, proceed with some degree of caution. No one wants to feel interrogated, and many patients may not want to answer personal questions.



Safety Alert

Understanding potential reasons why a patient may not want to fill a prescription may prevent you from asking the wrong questions and accidentally offending the patient. Understanding these reasons will prepare you to offer suggestions of alternative therapies to the patient.

Understanding the Importance of Multicultural Awareness and Cultural Competency in the Pharmacy

Differences in age, gender, sexual orientation, ethnicity, language, culture, economic status, educational background, and disability will be part of your everyday practice in the pharmacy. You will work with coworkers and managers who come from diverse backgrounds different from your own. You will also have patients and customers with various social, ethnic, and other cultural backgrounds. It is important to be aware of how these differences may affect the way you work in the pharmacy, as well as the safety of your patients. One of the keys to being multiculturally aware and culturally competent is to treat everyone with respect and courtesy.

Provide Respect and Courtesy **Respect** means to admire people for their abilities, qualities, or achievements. **Courtesy** is showing politeness toward others. Fostering a sense of respect and courtesy will help you achieve a more culturally competent workplace, for both the patients and customers you serve and the people you work with.

However, there are challenges to behaving respectfully and courteously when dealing with others who have a different background from yours. You may think that you are behaving courteously, but you may accidentally be exhibiting behavior that is seen as disrespectful in a different culture. For example, in most Western countries, maintaining direct eye contact when interacting with others shows that you are paying attention to what they are saying. However, in Asian and Middle Eastern countries, direct eye contact is seen as disrespectful.

Shaking hands is acceptable and seen as a professional practice in most countries, but some cultures have certain guidelines that differ. For example, using the left hand to shake hands in the Middle East is taboo. Rather than a handshake, in some parts of Europe people greet one another with a kiss in the air near both cheeks.

Being aware and respectful of differences in cultures demonstrates a courtesy to the person and fosters better communication and goodwill. This exemplifies good customer service and carries over to feelings of goodwill for the company you work for.

Consider Safety Failure to consider a patient's cultural identity could lead to safety issues. For example, if you are unable to speak a patient's language, you may not be able to effectively explain a medication, leading to poor adherence by the patient. It may even pose a problem with correctly identifying a patient, which could lead to a misfilled prescription. If patients believe in alternative therapy as part of their cultural traditions, and you are dismissive of these beliefs, they may withhold important information from you and



**Work
Wise**

Be prepared to modify your cultural norms to accommodate a patient's standards of interactions when possible.



WORKPLACE WISDOM

Safety Issues and Language

There are many examples of when a language barrier or cultural misunderstanding can lead to grave safety errors. A patient who spoke only Spanish read a label for methotrexate that was once a week. The only word the patient recognized was “once,” which is the number 11 in Spanish. The patient took 11 doses each day and died from an overdose. A patient from Central America had

experienced only homeopathic medicine (which says to treat where the issue is). Her daughter had an ear infection and was prescribed tablets to treat it. The mother came to the pharmacy to ask the pharmacist for help because there was no more room for the medicine—she had been placing the tablets into the daughter’s ear.

—Anne LaVance, BS, CPhT

other care providers. Some patients may not ask questions about their therapy due to a cultural belief that healthcare providers know what is best, even if that may not always be the case. Some individuals act upon cultural traditions and norms in which women may not be part of decision-making processes related to their care or the care of family members. Caregivers should respect those traditions and norms and interact with a patient’s husband, father, or significant other as requested.

According to the American College of Clinical Pharmacy, developing cultural competence in pharmacy practice can increase effectiveness of drug therapy and favorably affect health outcomes.

Understanding Pharmacy Policies

The pharmacy you work for will address diversity issues in your policies and procedures manual. Many pharmacies will also provide you with training on how to be multiculturally aware. Often there is a protocol or procedures to follow when encountering a language barrier, for example.

One of the best ways to promote diversity and awareness of different cultures is for a pharmacy to engage in the predominant demographics that make up its patient base. For example, Walgreens devotes funding and energy toward inclusion of different groups based on location. One of its stores is located in the Castro district of San Francisco, a predominately LGBTQ (lesbian, gay, bisexual, transgender, queer) area of the city. The store worked to include displays and products that celebrated those groups. As a result, the staff was more inclusive—and mutual understanding and acceptance were promoted. In New York, one Walgreens pharmacist addressed the needs of one of its predominant patient populations by working extensively with older HIV-positive patients regarding their therapy.



Safety Alert

When in doubt, ask a pharmacist for assistance. If you think that a language barrier may lead to miscommunication about a medication, telling a pharmacist can help you get the resources you need—whether it is an interpreter, materials printed in another language, or something else to assist the patient.

Another area in which to increase your knowledge and cultural competency is with continuing education courses. Continuing education credits are required for national certification and for many state registrations. These courses typically include written or video materials to review and an assessment. Continuing education is covered further in Module 9.

All workplaces are required to follow antidiscrimination laws. Title VII of the Civil Rights Act of 1964 prohibits discrimination in employment on the basis of race, color, sex, or ethnic origin; the Age Discrimination in the Employment Act prohibits discrimination against employees 40 years of age and older; and the Americans with Disabilities Act prohibits discrimination in employment on the basis of disabilities and requires that employers reasonably accommodate individuals with disabilities who can otherwise perform a job.

6.2 Cultural Considerations in Pharmacy Practice

When you begin your job in a community or institutional pharmacy, you will encounter new cultural scenarios that you have not experienced before. As a student who has chosen to study pharmacy, you may hold certain beliefs regarding the efficacy of Western medications as a preferred treatment for diseases and conditions. However, being culturally aware also means understanding that many patients also hold different beliefs and may be distrustful of doctors and pharmaceutical treatments. To be culturally competent, you need to understand these beliefs and respect those who hold them.

Identifying Cultural Issues Affecting Hispanic Patients

The Hispanic population is growing in the United States, at a rate of 50% since 2000, according to a Pew Research study. Hispanic patients may be more likely to seek treatment at a healthcare clinic located in a pharmacy and value affordable pharmaceuticals.

A large issue you may encounter are patients who speak only Spanish. Having high-quality educational materials printed in both English and Spanish can be very helpful in making your patients feel more comfortable. Having Spanish-speaking pharmacy personnel on staff, or high-quality interpretation mechanisms available, will also assist this patient population.

A factor to consider, especially with Hispanic patients from Mexico who are very new to the United States, is that pharmacies are less regulated in Mexico than in the United States. Mexican laws allow stores to open with only a business license, and pharmacists can work without prior training in dispensing prescriptions. The *farmacia* (pharmacy) in Mexico operates much like an American convenience store, and many medications are available for sale over the counter. Immigrants from Mexico may be unfamiliar with

US regulations regarding controlled substances, refills, etc. Take the time to explain these regulations when possible.

Identifying Cultural Issues Affecting Black and African American Patients

African American and black patients often face discrimination in the health-care system, which leads to health disparities, including equitable quality of care and access to health care. Economic issues also affect many African American and black patients. Nearly one-third of African Americans do not have a regular doctor, and close to 1.8 million African American children do not have health insurance.

As a pharmacy technician, you can help customers who do not have health insurance seek ways to make their medications more affordable, such as prescription discount programs and asking their providers for generic vs. brand-name drugs when appropriate. It is also important to be empathetic to any economic hardships that you may encounter. By saying something like, “I understand the prices of these medications is high; let me see what options are available that can help lower the cost,” you are expressing empathy with the patient’s hardship and demonstrating a desire to help. A technician can offer any discount cards or plans that the patient can qualify for to assist them. Sometimes the patient is simply unaware of the options available. Plans and discounts can vary from location to location, so you will need to learn what your setting offers.

Understanding Traditional Chinese Medicine

The history of medicine has roots in several cultures, including ancient Asian (predominantly Chinese), Middle Eastern, European, and African cultures. Traditional Chinese medicine, also sometimes known as *Eastern medicine* or *traditional medicine*, has had a significant influence on most cultures in Asia. Eastern medicine was built on more than 2,500 years of Chinese medical practice, including herbal medicine, acupuncture, massage, and dietary therapy. It is based on the concept of having a balanced qi, energy that flows through the body.

Many aspects of traditional Chinese medicine, including acupuncture/acupressure, herbal medicine, and reflexology, are widely accepted categorically as complementary and alternative medicine by caregivers across the United States. Some services, like acupuncture, are also covered by US health insurance companies.

Western medicine is defined as a system in which doctors and other healthcare professionals treat symptoms and diseases using drugs, radiation, or therapy. It may also be referred to as *conventional medicine* or *mainstream medicine*.

Recognize Alternative Medicine Practices In pharmacy practice, you may encounter those who believe primarily in alternative medicine practices. If patients do not disclose the use of traditional care and remedies to their health-care provider or pharmacist, adverse interactions with prescribed medications are possible. It is important to ask patients if they are taking any medication, including herbal and homeopathic remedies.

Recognize Homeopathy A common alternative therapy you may encounter as a pharmacy technician is homeopathy. **Homeopathy** is a system of alternative medicine created in the 1800s based on the belief that a substance that causes the symptoms of disease in healthy people will cure that disease in sick people. A toxic substance will be greatly diluted (such as one part in 1 trillion) and used to treat illness. For example, Belladonna (a deadly nightshade plant) is diluted and used to treat migraines.

Homeopathy is controversial as some preparations contain substances that may be toxic in humans. In general, the substances are diluted enough that they do not cause adverse effects. However, there have been cases in which the concentration strength of the active ingredient was found to be at toxic levels due to improper dilution. In 2016, the FDA issued a safety alert to consumers warning against the use of homeopathic teething gels and tablets due to the sensitivity of pediatric patients and the fact that these products had not been evaluated or approved by the FDA for safety or efficacy.

While there are considerations with the use of homeopathy, many Americans and individuals from other cultures abroad increasingly value complementary and alternative medicine options and have incorporated them into their wellness and preventive medicine practices. India has more than 100 million people who practice homeopathy as their primary source of health care.

Other countries that include homeopathic remedies in their national health systems are Brazil, Chile, Mexico, Pakistan, Switzerland, and the United Kingdom.

Ask your patients if they are taking homeopathic remedies and respect their answers without judgment. It is crucial to patient safety to understand everything the patient may be taking and how the remedies could interact with their medications.

“Many Americans and individuals from other cultures abroad increasingly value complementary and alternative medicine options and have incorporated them into their wellness and preventive medicine practices.”



Think It Through: Customers and Homeopathy

If your pharmacy sells homeopathic remedies, what would you do if a customer came to the pharmacy window and asked your advice about the product?

6.3 Religious Considerations in Pharmacy Practice

In addition to working with colleagues and serving patients of different cultural backgrounds, you will also encounter patients and colleagues who hold religious beliefs that differ from your own. Many religious beliefs, such as Christian Science, Amish, Islam, Christianity, and Jehovah's Witnesses, may have a direct effect on the way you care for your patient. It is important to keep in mind these different beliefs and treat them respectfully.

Many individuals around the world believe there is a link between religion and health and that prayer influences recovery from an illness. Many religions prohibit some treatments and encourage others.

In addition to considering the religious values, beliefs, and traditions of your patients, you also will need to navigate the challenges of working with colleagues who have religious beliefs that are different from your own, and even some that you may not agree with. Some of these beliefs have an effect on the pharmacy operations, such as the recent news stories of pharmacists and pharmacy technicians refusing to dispense prescription contraceptives based on religious or personal beliefs. Pharmacy staff should be aware of their workplace policies related to exercising religious freedom in the performance of the job. It is important to ensure that a company's values do not conflict with yours or require you to do things that may conflict with religious values, beliefs, or traditions.

Identifying Religious Issues Affecting Patients

Working as a pharmacy technician, you may not ever know about your patient's religion, but other times, it may surface as a potential issue or even a barrier to providing patient care. This is not a comprehensive list of existing religious beliefs, merely some examples of the common religions that pharmacy technicians may serve.

Christian Science is a set of beliefs developed in 19th-century New England with the book *Science and Health*. This text argued that sickness is an illusion and can be cured by prayer alone. Therefore, many Christian Science members rely solely on faith healing, and often no medication is given to treat illness. However, the church does not require that Christian Scientists avoid all health care and may make exceptions for services, such as dentistry, optometry, obstetrics, and vaccination, when required by law. It is important not to assume that just because someone is a Christian Scientist that person does not believe in medicine. Respect a Christian Scientist's request to decline some aspects of care.

The Amish religion is known for simple living and the reluctance to adopt technology. Regions with a high Amish population include Pennsylvania, Ohio, Wisconsin, and Indiana. The Amish are open to alternative forms of



**Work
Wise**

The key to respectfully communicating with patients and colleagues is to be aware of differences, avoid stereotypes, and practice the communication skills you learned in Module 5.

therapy but are receptive to healthcare information and conventional care when necessary. One consideration when serving Amish customers in the pharmacy is understanding unique English language dialects (Amish individuals speak a dialect called Pennsylvania Dutch or Pennsylvania German, which is a German dialect that often incorporates English words in its everyday usage). There may also be prescription affordability issues, as many Amish customers pay entirely in cash.

Islam is the world's second-largest religion and has over 1.8 billion followers, known as Muslims. In the Islamic religion, many followers believe that physicians have the power to heal, and Muslims believe every illness has a cure and multiple treatment options should be explored. Religious holidays and customs can have an influence on healthcare practices. For Muslims, the month-long fast of Ramadan may interfere with the ability to take prescribed medications on their usual schedules. During this holy month, Muslims do not eat or drink until after sundown.

Christianity is the world's largest religion, with over 2.4 billion followers. There are a multitude of denominations within the Christian faith, each with different traditions and views of the roles of both faith and health care. Because there are so many different branches and denominations of the Christian church, it is important to avoid broad generalizations. Pharmacy technicians should listen to patients' concerns and preferences and respect their decisions related to accepting or declining various forms of health care.

Jehovah's Witness is a religion of around 8.5 million people, headquartered in Warwick, New York. It is against their religious beliefs, values, and traditions to receive blood transfusions. They will accept nonblood alternatives and other medical procedures and treatments. As a pharmacy technician, it is important to be sensitive to the beliefs of a Jehovah's Witness patient and why they may turn down medications in a hospital.

Because there are so many different religious traditions and practices across our diverse nation, you may feel challenged as a pharmacy technician to provide culturally competent care. However, it is important to know that a universal value across most religious beliefs and practices is to encourage followers to take care of and respect their bodies. While you may not necessarily believe the same things, it can be helpful to keep in mind that most people have the same goal—to live a healthful and happy life. A pharmacy technician should avoid making assumptions about a patient's health based on religious affiliation. Often enough, if you are unaware of a particular belief or practice, open and honest communication with the patient will reveal any issues you need to be aware of.

“If you are unaware of a particular belief or practice, open and honest communication with the patient will reveal any issues you need to be aware of.”

Identifying Religious Issues Affecting Pharmacy Personnel

Religion is often seen as a topic that most people try to avoid discussing in the workplace. It is often seen as taboo or impolite. However, there are times when a colleague's religion may directly affect the workplace, particularly in a pharmacy.

You may have heard news stories over the last few years detailing pharmacy technicians and pharmacists refusing to fill prescriptions for birth control or sell emergency contraception due to personal or religious beliefs. If a colleague refuses to fill certain prescriptions due to their beliefs, your workload can increase, possibly making you feel resentful.

The laws governing pharmacies vary from state to state, and most states' pharmacy practice acts do not specifically address the issue of refusal to perform a required job task based on personal or religious beliefs. The American Pharmacists Association has issued best practice guidelines that stress the importance of patients having access to legally prescribed medications and a process whereby pharmacies may transfer refused prescriptions to an alternative pharmacy that can fill the patient's prescription. These guidelines place an emphasis on patient care and pharmacies' commitment to meeting customers' needs.

The varying religious traditions, beliefs, and values of pharmacy employees may have an effect on work flow and scheduling as well. Many religious traditions entail holy (special or ceremonial) days that a coworker may have to take off to observe. Your coworker may have to take breaks at certain times during the day for prayer. If lunch is brought in for the pharmacy staff and a coworker doesn't eat it, it may be because of dietary restriction. If you are unsure, an honest and respectful question usually solves this problem.

To effectively navigate various situations with coworkers in the pharmacy, it is important to use the communication tools you learned in Module 5. Avoid placing blame and speak about the issue in a calm tone. Use active listening and speaking skills and restate what you think you heard to the speaker to confirm that you understand what you are being told. Working to understand those with different beliefs is important to a healthy and functioning workplace.



Think It Through: Religious Holidays

If a coworker was absent due to a religious holiday, how would that make you feel? What would you do if other colleagues were upset or feeling overburdened when another had the day off to observe a religious holiday?

6.4 Gender and Sexuality Considerations in Pharmacy Practice

To understand the complex issues surrounding gender and sexuality and how they relate to your practice in pharmacy, it is first important to understand common terms. **Biological sex** includes the anatomy of an individual's reproductive system and secondary sex characteristics. **Gender** is defined as the range of characteristics pertaining to masculinity and femininity. These characteristics can include biological sex, social structures, such as gender roles, and gender identity. One's **gender identity** refers to personal identification and what pronouns are preferred. Sexual orientation refers to a person's sexual identity in terms of the gender to whom the person is attracted. **LGBTQ** is the acronym used to refer to people who are lesbian (women who are attracted to women), gay (men or women attracted to people of the same gender; more commonly used to describe men), bisexual (people who are attracted to those of the same gender and opposite gender), transgender (those whose gender identity is different from the sex they were assigned at birth), or queer (a term people use to express fluid identities and orientations).

The pharmacy technician should be understanding of the unique health concerns and needs of the LGBTQ populations in the communities they serve. By establishing a comfortable, nonjudgmental environment for the discussion of gender and sexuality issues as they relate to healthcare needs, pharmacy personnel can establish rapport and provide effective treatments for all patients.

Identifying Gender and Sexuality Issues Affecting Patients

Often people prefer to discuss personal medical information with pharmacists or technicians of the same gender. For example, some male customers may feel more comfortable discussing questions on condom use or erectile dysfunction drugs with a male technician or pharmacist. Similar issues may arise in the case of a female customer with issues regarding menstruation or menopause.

You should proceed with caution when addressing patients by a particular pronoun. Some pharmacies and healthcare providers are beginning to ask patients on intake forms which pronoun they prefer. When in doubt, stick to neutral language, such as the singular form of "they," unless corrected. If you make a mistake with a pronoun, a simple apology can help.

Pharmacy technicians should be aware of the history of anti-LGBTQ bias in health care and how that can affect LGBTQ individuals in seeking and receiving culturally competent care. Until 1973, homosexuality was listed as a disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM), and transgender is still listed in the DSM-5. While attitudes are improving, LGBTQ patients still report reluctance to reveal their sexual orientations or

gender identities to their healthcare providers, fearing discrimination or poor treatment. This leads to disparities in the quality and access of appropriate health care for these patients.

LGBTQ people are less likely to have health insurance than heterosexual people, and transgender people have the lowest insurance rates of these groups. As a pharmacy technician, you should be aware of the economic disparity this may cause for these patients and suggest prescription assistance programs they could qualify for.

When serving a transgender patient, you may see that the insurance and identification do not reflect the patient's current name or gender identity. Use caution to make sure you find out the patient's preferred name and use that when filling the prescription.

Transgender patients on hormone therapy are at risk for several complications and side effects. When taking hormones, such as estradiol for gender reassignment, patients are at a higher risk for such diseases as type 2 diabetes, blood clots, cardiovascular disease, and osteoporosis. Smoking enhances these risks, very similar to birth control medications, which also contain hormones. Patients may be reluctant to talk about their medications with the pharmacist, as it would involve discussing their transgender identities. While the transgender community is becoming more accepted, many physicians and caregivers may not be well versed in the nuances of care for this demographic. As a technician communicating with a transgender patient, be sure to suggest talking to the pharmacist regarding therapy, encouraging it as a means to ensure the best care for the patient.

Identifying Gender and Sexuality Issues Affecting Pharmacy Personnel

All pharmacies have antidiscrimination policies stating that employees cannot be discriminated against for their gender or sexual orientation. However, if you encounter or witness discrimination at your workplace, alert a supervisor or the human resources department right away.

If you hear a coworker making a derogatory comment about a patient with regard to the patient's gender or sexual orientation, follow the skills you have learned to be an effective communicator. Clearly and calmly state your position and alert a supervisor about the situation.



Think It Through: Confronting Discrimination

Have you ever witnessed discrimination, either in the workplace, at school, or in your social life? If so, how did you handle it? Were you a bystander, or did you speak up? What are ways you can speak up if it happens again in the future?

6.5 Culturally Competent Interactions and Communications

There are times when a patient's cultural identity, religious values/beliefs, gender, or sexual orientation may directly or indirectly influence your interactions. Some common issues you may encounter include language issues, differences in the level of eye contact, and titles of address. The same is true for working with pharmacy personnel and other colleagues. The key is to learn about the potential barriers you may encounter; respect others' cultural values, beliefs, and traditions; and work toward effective and empathetic communication that is built upon mutual respect and consideration. To communicate effectively with patients and colleagues of a cultural identity different than your own, it is important to remember the communication skills you learned in Module 5. Using verbal and nonverbal skills, active listening, and speaking skills will assist you in communicating with all patients, regardless of their cultural values, beliefs and traditions, religious background, or gender/sexual identities.

Considering Language Issues

According to the US Census Bureau, English is spoken by 229 million US residents. The next most common language is Spanish, spoken by 40 million US residents, followed by Chinese, spoken by 3 million US residents.

Interpreters are an important part of overcoming language barriers that may affect patients and pharmacy staff members' ability to communicate and interact effectively in the care of the patient. Interpreters should be used



EXPAND YOUR KNOWLEDGE

Family Names in Hispanic Culture

Various dimensions of cultural identity may even affect record keeping. For example, the terms *first name*, *middle name*, and *last name* as used by many Americans (and most pharmacies) cannot be easily used for many Hispanics and Latinos. Many Latinos have as many as four given names (one or more first names and one or more middle name) and two family names. Thus, American healthcare workers can often misunderstand what the true "last" name is,

causing Latinos to be listed multiple times in electronic health record systems or other pharmacy software. As a pharmacy technician, you may need to search in your system for a Latino patient in multiple ways to find the correct record. To learn more about how children are named in Spanish-speaking countries, read the genealogy article at <https://SSPharm.ParadigmEducation.com/Genealogy>.

to assist patients who speak little to no English, as opposed to deferring that important responsibility to family members or friends. While their intention may be good, family and friends may have low healthcare literacy or could withhold or misinterpret information in translation to the patient. Using family members and friends to interpret could also violate patient confidentiality.

Bilingual pharmacy technicians are always in high demand in the community setting, as they can easily translate for the pharmacist and do not violate HIPAA regulations. When not available, there are subscription-based translation phone services that can be used. To use a translation service, the technician calls the service and identifies the language needed for translation, and then the phone is passed back and forth between the patient and the pharmacy staff, with the translator being the third party. Pharmacies are also more frequently using mobile devices and software, such as Google Translate. In the institutional setting, with its larger staff, a common practice is to have a “translator bank” of various staff members in the facility. The department that needs translation will call the operator, who then identifies those onsite who speak the requested language.

In terms of printed materials, pharmacy database software has the option to print drug monographs and labels in a patient’s primary language. The technician chooses the correct language option when entering the patient into the system for the first time, but it may be edited at any time.



WORKPLACE WISDOM

Avoiding Language Assumptions

Being a Hispanic person working in Texas, I have observed a lot of Spanish-speaking customers who come to the pharmacy. I’ve encountered Spanish speakers who would rather try to speak English than to be humiliated, even if a Spanish speaker is available to translate. They prefer to speak to the person directly rather than having to speak to someone and have them translate. In this case one must be sensitive to the situation. Be sure to remove the customer from an environment filled with other people to prevent distraction. If a translator is needed, explain that to the customer and ask for consent to communicate through a translator. In addition, be sure

whoever is translating is actually fluent in the language. Some people get upset if the person translating isn’t able to translate properly. Make sure your pharmacy has a trusted method for translating, and also print the instructions in the customer’s language.

Also, do not assume that all individuals know how to read. If you ask them, “Do you understand how to read?” they will say yes just to avoid embarrassment. Instead, make sure you point out the important information. All of this can be time consuming, but preventing a medication error is far more important.

—Irene Villatoro, BS, CPhT, RPhT

A common error that individuals make in situations regarding language barriers is to raise the volume of their voice as a means of increasing understanding. This error should be avoided. Do not speak louder when you are speaking to a patient who has limited English-speaking ability. This will not help the patient to hear you better—instead, it may call too much attention to the communication barrier you are facing and embarrass the patient. In fact, some patients may pretend that they understand you rather than admit they are experiencing a language barrier. Instead, approach patients quietly, respecting their right to a confidential conversation, and if necessary, bring in an interpreter to assist.

When communicating with patients who have limited English proficiency, face the patient and make liberal use of common gestures and facial expressions. Observe the patient's face, eyes, and body language carefully, as they may provide clues to help you understand more clearly what they are attempting to communicate. Avoid slang or lingo and speak with as many straightforward terms as possible. Rephrase and restate what you are saying often to confirm understanding between you and the patient. For example, you might rephrase a patient's comment by saying, "You said that you are taking some herbal medicines. What are the names of these herbs?"

Considering Eye Contact Issues

Another area in which cultural traditions and behaviors vary is in the amount of eye contact used during conversations. Americans tend to use direct eye contact and associate it with honesty. Likewise, in some Latin countries, eye contact is important when conveying equality among individuals. However, in some Asian countries, it is considered impolite or disrespectful to establish eye contact with those who hold high positions. Avoiding eye contact is seen as a demonstration of respect.

To communicate well with your colleagues who may have different cultural norms than yours, make sure you are respectful, and do not make assumptions. Watch others' behavior and respond accordingly. For example, if you are speaking and notice a colleague doesn't hold your gaze, respect that and look away more frequently than you might otherwise.



“Watch others’ behavior and respond accordingly.”

Considering Titles of Address

People from different cultures may have specific ways of addressing and greeting others, and it can be a challenge to determine how a patient or colleague wishes to be formally addressed. In some cultures, it is inappropriate to address someone by first name.

If you notice that a colleague always addresses you as Mr. Smith, do not continually correct your colleague and insist on being called Joe. Your colleague may hold a cultural belief that requires more formal greetings to be used in the workplace or with superiors. It is appropriate to ask the first time if your colleagues would mind calling you by your first name, but if they continue to use a more formal greeting, let them do so. Also, consider asking them how they prefer to be addressed in the workplace.

Patients may prefer to address you with a formal title because they hold a cultural belief that healthcare personnel should be addressed respectfully and formally. You can ask patients how they prefer to be addressed as you are serving them in the pharmacy. Doing this can also help you navigate serving a transgender patient. Ask patients their preferred names and pronouns to avoid calling them by the wrong pronouns, potentially making them feel poorly about the interaction and your pharmacy.

Communicating with Pharmacy Personnel

Both the National Standards for Culturally and Linguistically appropriate Services (CLAS) and the Joint Commission encourage the continued diversification of healthcare professionals so that their numbers become proportional to the ethnic composition of the communities they serve. A typical pharmacy workplace will continue to diversify, and while this is a positive movement, this diversity of languages and cultures can sometimes pose communication challenges in the workplace.

Various cultural traditions and beliefs inform individuals' ideas concerning the definition of work ethic. In general, **work ethic** may be defined as a set of ideals that drives one's commitment to work hard and produce quality results. How that definition is applied in one's work performance may vary based on an employee's cultural identity. Employees who were raised in an individualistic society, like the United States, may consider self-starting or showing initiative as an ideal demonstration of good work ethic. Conversely, employees who were raised in a collective society, like many Asian nations, may view hard work as being done for the good of all, rather than the individual. Standing out as a harder worker than others could be perceived as causing a superior to "lose face" and might be frowned upon.

Many American workplaces prefer directness in communication style. However, some employees may have been raised with ethnic or family cultural values that dictate that it is impolite to express one's opinion or criticize a colleague. This can pose unique challenges in a pharmacy. As a pharmacy technician, you may find that colleagues have made a mistake and you need to inform them of that mistake. If your colleague's cultural norm says that criticism is considered rude, do your best to frame the problem as an issue to

be solved, not something the person has done wrong. Taking a collaborative, team-based approach that focuses on the issue rather than the individual can help soften criticism. There are many tips in Module 5 that can be helpful in difficult situations.

Many pharmacy workplaces provide cultural competence training, or you may take courses on cultural competence in your continuing education throughout your career. Cultural-competence training empowers employees to provide better care to patients from different cultural backgrounds and may also improve communication in the culturally diverse workplace. Improved communication can increase trust among coworkers, improve teamwork, reduce incidents of miscommunication and errors, improve the overall treatment of patients, and increase employees' job satisfaction.



Think It Through: Culture and Misunderstandings

Perceived rudeness by a colleague may reflect the differences that exist among various cultural values and norms related to social interaction. Consider a time when you may have been misunderstood; how could you have used multicultural awareness to reframe the interaction?

Refrain from Judgment Once you have ascertained how patients' culture influences their healthcare decisions, some culturally competent ways to treat patients and avoid stereotyping include refraining from judgment and honoring a patient's decision-making.



Self-Reflection: Check How Judgmental You Are

Consider your level of judgment for others. Respond as honestly as possible.

- Do you often judge people for how they dress, speak, or behave?
- How would you rate yourself on a scale of 1 to 5, with 1 being the least judgmental and 5 being the most judgmental? If you rate yourself highly on judgment, consider ways to keep an open mind and honor others' decisions and life choices.

To establish a trusting relationship between a healthcare provider and patient, it is essential to acknowledge the patient's beliefs without criticism. Should a patient disclose use of an intervention or practice that is contraindicative, ask if the patient can speak with the pharmacist about it to ensure proper medication therapy outcomes. Inform the pharmacist of the situation and allow the pharmacist to counsel the patient.

Honor the Patient’s Decision-Making Process If the patient’s replies to your questions indicate that other people, such as family members, religious leaders, or traditional healers, are involved in the patient’s healthcare decisions, it is strongly recommended that these persons be included or acknowledged in any decisions that the patient is being asked to make. Although the American model of health care is based upon the autonomy of patient decisions, this may not be appropriate for patients who view decision-making as a collective endeavor.

Review the Recommended Treatment Plan Patients who view the caregiver or caregiving institution with great deference and authority may appear to agree with treatment plans that they cannot or do not intend to follow. This is because they feel it is more polite to pretend to agree rather than to argue with authority. Therefore, when reviewing a patient’s medications that may require following a daily diet plan or changing activities, ascertain the patient’s typical diet and daily habits. With this knowledge, ask the pharmacist to make suggestions for possible alternatives that may work better for the patient, without criticizing the patient’s present habits.

6.6 Module Summary

As a pharmacy technician, your goal should be to provide culturally competent care to all patients—regardless of their race, ethnicity, gender, sexual orientation, or any other group with whom they identify. The key is to keep an open mind and learn more about people’s beliefs, cultural traditions and values, and life experiences and to treat them with respect. Keep in mind that you may make mistakes, but if you put your patient’s satisfaction, dignity, and right to receive quality care above all else, that commitment will positively influence how you interact with them. Patients who sense empathy on the part of their caregivers will feel safe and open to helping you learn how they would like to be treated in your pharmacy. Being receptive, tolerant, and respectful of other beliefs is the foundation of cultural competency.



The online course includes additional review and assessment resources.

