

Culture Counts!

Enhancing the Shared Decision Making Process

*Creating Dialogue
Promoting Choice
Supporting Recovery*

Providers can understand and bridge the cultural differences that influence clinical relationships and decision making.

*— Anna Napoles-Springer
Health Expectations, 2005
vol. 8, p. 4-17*

Cultural factors influence how people come to view, understand, and experience the world. Likewise, a person's cultural beliefs, values, and preferences play an important role in health and mental health care decision making. For shared decision making to be truly effective, an individual's cultural background and relevant beliefs must be considered throughout the decision making process.

Factors to consider include the following:

- The role of culture in health and mental health care decision making.
- The impact of cultural beliefs on treatment and service decisions.
- Strategies for incorporating culture in the shared decision making process.

Shared decision making is an emerging best practice in health care and has been specifically recommended by the Institute of Medicine (IOM, 2005). It helps improve communication between service providers and people who use their services. Incorporating full information and decision making tools, it helps balance information about mental health conditions and treatment options with an individual's preferences, goals, and cultural values and beliefs. Used effectively, shared decision making can make communication more productive, efficient, and empowering for both the person using services and those providing them.

The Federal Substance Abuse and Mental Health Services Administration (SAMHSA) supports the use of shared decision making as a routine part of mental health services. This issue brief is part of a set of materials designed to help make this possible.

Culture is defined as “an integrated pattern of behavior that includes language, thoughts, communications, customs, beliefs, values, and institutions of racial, ethnic, and cultural groups” (DHHS, 2001).



Shared Decision Making
in Mental Health



The Role of Culture in Health and Mental Health Care Decision Making

People from some cultural groups are less likely to choose formal mental health services and instead seek support from family and community.

Contributing factors include:

- Lack of trust in formal health services,
- Past experiences of bias or discrimination,
- Concern about being misunderstood because of cultural differences,
- Language barriers, and
- Fear of stigma (DHHS, 2001).

Individual decision making styles vary. Some people prefer to think through options before making a decision, while others rely on their feelings or hunches to make an important choice.

Some differences in decision making styles are influenced by a person's culture. People from cultures that value individuality and independence tend to rely on their own values and preferences when making important decisions. Individuals from cultures that view themselves as mutually dependent on others may rely on authority figures such as doctors, elders, or the values of their community when making certain choices (Charles, Gafni, Whelan, & O'Brien, 2006).

Beliefs about illness, health, and treatment are strongly affected by culture. Many cultural groups view health and illness differently from Western beliefs. For example, individuals from traditional Chinese cultures may understand and label mental health problems in physical health terms such as problems with sleep, appetite, or pain (Kleinman, Isenburg, & Good, 2006). These views can influence how individuals seek help to address problems.

Furthermore, culturally determined attitudes may affect how individuals view the use of psychiatric medication. Some cultures see suffering and illness as unavoidable and not something that can be helped by medication (Kleinman et al., 2006). Others may mix medications with herbal remedies. Treatment plans that do not take these beliefs into account may not be followed. Both research and practice suggest that individual and cultural differences and values are important to consider during the shared decision making process (Whitley, 2009).

The Impact of Cultural Beliefs on Treatment Decisions

A provider's cultural background, especially if it differs from the person using services, may affect how the provider interacts and communicates with the person, as well as how he or she perceives the person's concerns. Different styles of relating or use of language unfamiliar to the clinician may be considered symptoms of illness rather than cultural variations (DHHS, 2001).

In addition, when providers are pressed for time or have limited information about an individual, they may rely on social stereotypes. For example, studies have found that some physicians perceive African Americans and individuals of lower socioeconomic status as less intelligent, more likely to engage in risky behavior, and less likely to adhere to medical advice (Van Ryn & Burke, 2000).

Lack of understanding of a person's cultural beliefs may result in misdiagnosis and/or inappropriate treatment (Opolka, Rascati, Brown, & Gibson, 2005). Studies show that African Americans are more likely to be diagnosed with schizophrenia and less likely to be diagnosed with depression. This occurs despite national statistics suggesting no difference in the prevalence of schizophrenia across racial and ethnic groups (DHHS, 2001). Additionally, research suggests that many racial and ethnic groups respond to lower doses of psychiatric medication and may have greater side effects at lower doses. As a result, overmedication may be common (Chaudhry, Neelam, Duddu, & Hasain, 2008).

Strategies for Incorporating Culture in the Shared Decision Making Process

A shared decision making process may provide new opportunities to explore and discuss cultural beliefs about health and healing. Alegria and colleagues (2008) found that a shared decision making approach can help increase participation in mental health services by people from non-white cultures. When people who use services discuss what is important to them, it may lead to increased trust, engagement, and decisions that fit their beliefs, values, and preferences. Further, provider awareness of an individual’s cultural values and other information can help minimize bias and stereotypic beliefs.

Here are some key strategies for incorporating culture in the shared decision making process.

Strategy	Why Important
1. Take extra time to explain the value of shared decision making for individuals who often rely on authority, narrative talk, or negotiation to make decisions.	Such discussions can help individuals feel comfortable about becoming more involved in decisions and with using shared decision making materials.
2. Ask how decisions are made in a person’s life and family. Are particular family or community members typically consulted on key decisions? Is the person interested in using shared decision making tools with this person?	If desired, a family member or other important person participating in the decision making process can help increase engagement into care. This may help a person make a more culturally informed decision.
3. Ask about how the person thinks about his or her problem or situation. Is there a particular name or term used within their family, community or cultural group to describe what he or she is going through?	This discussion can increase a provider’s understanding of culturally specific beliefs about health, illness, and healing. It can help providers find treatment approaches that respect cultural beliefs and preferences.
4. Ask about spiritual, religious, family, or other cultural beliefs associated with the use of medication and other Western medicine treatments. Also ask about the use of herbs, roots, or other complementary or alternative medicine.	Individual spiritual or cultural beliefs may not support the use of medication. Talking about this may yield information about treatment practices that are culturally acceptable.
5. Ask about customs or rituals the person is using or would like to use to promote health and healing.	Discussion and use of culturally specific customs and rituals, along with formal treatment recommendations, can lead to increased trust, engagement, and treatment follow-through.
6. Ask about family or community beliefs associated with the decision the individual is trying to make.	Understanding influences on decision making can help a person place his or her own beliefs and values into a broader social and cultural context.
7. Ask about whether activities included as part of shared decision making resources address culturally relevant values. Should other values clarification areas be explored?	This communicates respect, cultural sensitivity, and the understanding that there may be culturally specific values impacting a person’s preferences.
8. Facilitate translation of shared decision making materials and discussions into the person’s preferred language.	Reading and speaking one’s primary language allows for more complete understanding of information and processing of emotions or ideas that do not translate directly to English.
9. Examine your own beliefs, values, and assumptions. Training in cultural competency can help with this process.	Personal beliefs and bias can affect how you view options and make recommendations. Awareness and training can help reduce their impact in shared decision making.



Learn More

American Psychological Association Guidelines on Multicultural Education Training, Research, Practice, and Organizational Change for Psychology, <http://www.apa.org/pi>

The Provider's Guide to Quality and Culture, <http://erc.msh.org>

NAMI Multicultural Action Center Resources, <http://www.nami.org/multicultural>

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