This is "The World.” I’m Tony Kahn. You and your doctor probably have trouble communicating from time to time. After all, doctors use a terminology all their own. But imagine how difficult it would be if you and your doctor didn’t speak the same language, or came from completely different cultures. That’s the case for millions of immigrants. The medical community is trying to make physicians culturally sensitive to the needs of their diverse patients. As WGBH’s Madge Kaplan reports, one training tool is a series of documentary films aimed at medical students.

Madge Kaplan: Most cultural misunderstandings go unnoticed at first. If a patient is seriously ill, though, time can be everything. That’s why several short documentary films for medical students, now in production in California, deliberately focus on patients with life-threatening diseases. The man in this film is a case in point. He’s an elderly Afghan who was diagnosed with stomach cancer in the fall of 2000. He and his doctors were rarely on the same page, starting with the removal of a tumor. When surgeons reported they’d gotten it all, family members, acting as translators, incorrectly thought their father was cured. Confusion over chemotherapy followed, causing a several-month delay. In a clip from the film, one of his daughters, who alternated with other siblings at medical appointments, questions how that could be:

Noorzia Kochi: So you’re telling me like every time my dad visit you, you have told him about chemotherapy.

George Fisher, MD: Right.

Nurse Margreet Love: Yeah. Mm-hmm. We do. We offered it, and we had it all set up, and then your dad didn’t want it because of Ramadan last year.

Dr. Fisher: Yeah.

Nurse Love: And then he decided that he felt well enough the second time that he didn’t quite want it yet.

Dr. Fisher: Yeah, which is fine.

Nurse Love: And now he wants it.

Kaplan: It’s actually not that simple. As the story unfolds, it seems that the patient always welcomed chemo, but rejected the use of around-the-clock infusion pump to deliver the drugs. Wearing something that was piercing his skin would have made him unclean for daily prayers. When he was finally offered chemo in a form he could manage, eight months had gone by and the cancer had spread. The producer of these films, Maren Monsen, is also a doctor, based at Stanford Center for Biomedical Ethics. She says there is no single explanation for patient and
provider talking past one another, but when there’s no common language, family members can at times make things worse.

**Maren Monsen, MD**: The family members, as they get sort of more and more involved with the patient’s care, start to develop their own agenda and their own interest in acquiring medical knowledge about the disease, to the point where they often stop translating and the patient sort of withdraws and eventually really stops asking very many questions at all, and it really becomes just the family members that are carrying on most of the dialogue with the health care providers.

**Kaplan**: Message to medical students: Use professional translators whenever possible. There aren’t nearly enough now, but that’s destined to change. Respecting cultural beliefs can establish doctor-patient trust. In the case of a Laotian family in another film, they went to their temple to see if Buddhist prayers and medicine might heal their little girl, who was born with a hole in her heart. The child’s doctor accepted the need to turn to religion first, and then was able to make a convincing case for surgery, persuading the grandmother that surgical incisions would not mutilate the child and interfere with her next life. This helped reassure the mother, too:

**Bouphet Chitsena**: I’m afraid to see my own child cut open like a chicken. I’m afraid when Justine grows up, her wounds won’t heal and she’ll have a big scar. That’s my biggest fear.

**Kaplan**: Monsen hopes when medical students see her films, they’ll be humbled into some new ways of thinking.

**Monsen**: Part of cultural competency is really the idea of cultural humility, where you understand that there’s different ways of viewing the world, different values.

**Kaplan**: Cultural stereotypes, though, can be problematic. Dr. Joseph Betancourt is the director of multicultural education for Massachusetts General Hospital and Harvard Medical School.

**Joseph Betancourt, MD**: One thing that was commonly taught about the Hispanic patient was that they were fatalistic. They put their fate in the hands only of God. It was more a *que sera, que sera* mentality, when in fact we understand that fatalism is more a function of disempowerment and perhaps poverty than the domain of any one cultural group, so people who are disenfranchised across the board from any culture could be fatalistic.

**Kaplan**: Betancourt says Monsen’s films encourage providers to ask more questions and make fewer assumptions, no matter where someone is from.

**Betancourt**: If you do the best technical care and have nobody to care for because people don’t believe you, or trust you, or understand you, then it’s sort of a pointless endeavor.

**Kaplan**: Dr. Thomas Stern is the medical director of a community health center in Chelsea, a poor city just north of Boston. Chelsea is often a gateway for new arrivals from places such as Central America, Southeast Asia, Afghanistan, Bosnia, and Somalia. Dr. Stern welcomes
Monsen’s efforts on film, but he thinks the key is making the entire health system more culturally sensitive, especially for preventive medicine.

**Thomas Stern, MD:** There are trillions of people who don’t get their measles shots, mammograms, who don’t get cared for for their diabetes or their high blood pressure well over twenty years. If they could approach a health system in a way that made sense to them, lives would be dramatically affected for the better.

**Kaplan:** Pressure is mounting to take the “if” out of this idea. One significant step: As of last year, schools must demonstrate they teach cultural competency in order to be accredited. Maren Monsen’s films may help, once they’re released next summer. For “The World,” I’m Madge Kaplan in Boston.