



# Understanding difficult cross-cultural clinical situations and how they impact on clinicians

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# Objectives

- Evaluation of a **transcultural consultation service**, recently implemented in an urban, ethnically diverse, university hospital
- Implications of these results **for future service implementation and training of clinicians** working in multicultural environments

# Local context

- Geneva, Switzerland
  - City of 470'000
  - 40% non Swiss nationals (+ 16% binationals)
  - 188 countries
  - **Multicultural**
  - **Multiple migratory contexts**
- Geneva University Hospitals
  - 51% of patients and employees are non Swiss nationals = ***double diversity***
  - Patients:
    - 56% fluent in French
    - 31% « some » French
    - 13% no French

Hudelson, Dominicé Dao, Durieux-Paillard. Int J Qual Health Care. 2013



# HUG resources for migrant patients

- General:
  - **Interpreter services** (50+ languages)  
<http://consult-transculturelle-interpretariat.hug-ge.ch>
  - **Chaplaincy** (all religions) <http://aumoneries.hug-ge.ch>
- Consultations for specific patient populations:
  - **Asylum seekers** (insured) <http://migrantcare.hug-ge.ch/>
  - **Illegal immigrants** (mostly uninsured, free or small participation) <http://casmsco.hug-ge.ch>
  - **Migrant children & teenagers**
  - **Mental health clinic for refugees and migrants**

# 2007: Introducing the transcultural consultation at the HUG

HUG - Consultation transculturelle et interprétariat - Genève - Microsoft Internet Explorer

Fichier Edition Affichage Favoris Outils ?

Précédente Recherche Favoris

Adresse <http://consultation-transculturelle-interpretariat.hug-ge.ch/> OK Liens

**HUG**  
Hôpitaux Universitaires de Genève

## Consultation transculturelle et Interprétariat

Introduction Consultation transculturelle Service d'interprétariat Informations pratiques

Recherche  OK

**Consultation transculturelle et Interprétariat**  
24 rue Micheli-du-Crest  
1211 Genève 14



Selam Hola  
Zdravstvuyte  
Bună ziua Zdravo Al salaam a'alaykum  
Nabat Hello Tungjatjeta  
Roj Bas Bom dia Vanakkam Bun di Mbote  
Bonjour Ciao Merhaba  
Zdravo  
Grüzi

**LIENS PRATIQUES**

- [Demander une consultation transculturelle](#)
- [Liste des interprètes](#)
- [Liste des langues par pays](#)
- [Dites-nous si vous rencontrez un problème avec le service d'interprétariat](#)
- [Décomptes pour l'interprétariat](#)

<http://www.hug-ge.ch/> Intranet local

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# Transcultural consultation

- GP trained in transcultural psychiatry & a medical anthropologist
- **The TC client = the referring clinician**
- Triage of calls (phone advice vs full consultation)
- Evaluation using the « **Cultural Formulation Outline** »
- Case conference with referring clinician (Ø patient)
- Written report issued, included in EHR

Dominicé Dao & Kirmayer. In *Cultural Consultation* (Eds Kirmayer, Guzder, Rousseau), Springer 2014.  
Kirmayer, Groleau, Guzder, Blake & Jarvis. *Canadian Journal of Psychiatry* 2003.  
Lewis-Fernandez, Diaz. *Psychiatry Quarterly* 2002. Mezzich et al. *Transcultural Psychiatry* 2009.

# Objectives of the evaluation

- Document the types of difficult cross-cultural situations for which consultations were requested
- Examine the transcultural consultation activity in terms of **process** and **content**
- Evaluate the intervention in terms of **satisfaction** and **usefulness** of referring clinicians
- Improve the service to answer clinicians' needs

# Methods

- Intake form recording data about the patient, the requesting physician and the resources needed
- Post hoc 3-way coding of consultation reports:
  - difficulties expressed by the clinician
  - problems identified by the cultural formulation
  - recommendations made
- Interview of referring clinician by research assistant (quantitative and qualitative)



# Results

- Sorry! Results not presented on website version. Article is under writing to be published in the near future. Thank you for your understanding.

# Uses and misuses of culture

- Lack of knowledge (migration issues, local resources, framework to ask a about culture) and skills (working with interpreters, basic communication skills) of referring clinicians
- Uncertainty , « paralyzes » clinician’s behaviours and skills
- Very complex clinical situations, no easy fix
  
- Use of “culture” to **protect** one’s professional identity
- “Culture” = convenient blanket term for other difficulties (social, communication, clinical complexity, etc.): **risk of “overculturalizing” the patient**

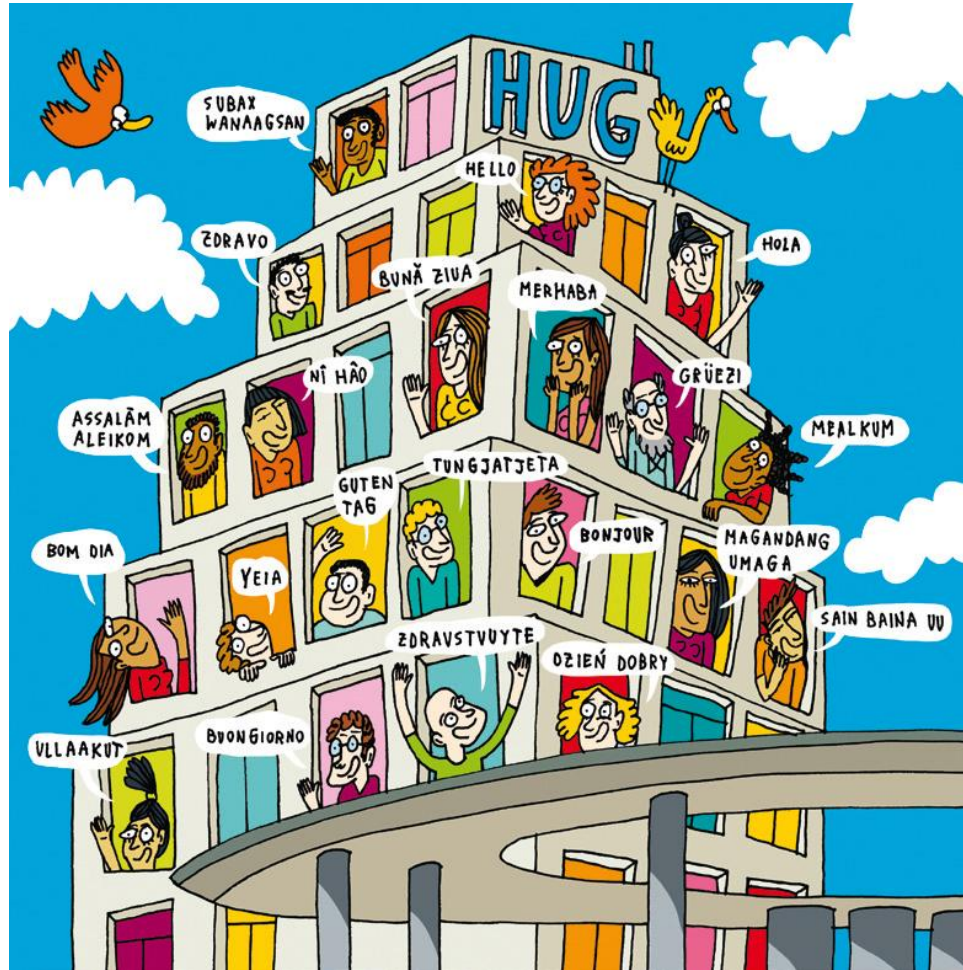
Grove & Zwi, Social Science and Medicine, 2006. Cohen-Emerique & Hohl, Cahiers Internationaux de Psychologie Sociale, 2004

# Practice implications

- CT level
  - Deconstruct the elements of complexity & redefine role of culture
  - Make the link with existing resources/local network
  - Offer reassurance/validation to the referring clinician
  - Pedagogical function of the cultural consultation!
- Institutional level: *Health for all network*
  - Better identification of language barrier in EHR
  - Increased availability of information about resources
  - Nurse case manager « migration and precariousness »
  - Increase training opportunities for clinicians (pregrad, postgrad, continuous education)

# Conclusion

- Initiation of a cultural consultation service designed to contribute to improving care for culturally diverse patients also offers :
  - Opportunities to improve referring clinicians' cultural competence
  - A privileged viewpoint to identify institutional gaps in provision of culturally competent healthcare and to propose new strategies



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