

Ethnic, gender stereotypes bias treatment of Parkinson's disease

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Cultural, ethnic and gender stereotypes can significantly distort clinical judgments about "facially masked" patients with Parkinson's disease, according to a newly published study from researchers at Tufts University, Brandeis University and the National Cheng Kung University in Taiwan.

This can lead to inappropriate and inequitable <u>health care</u> for those suffering from Parkinson's, a common <u>nervous system disorder</u>, particularly in the elderly, with some 50,000 new cases reported in the U.S. each year.

"Practitioners need to better understand the <u>complexities</u> of this disease, and ensure that their own personal cultural biases do not impact their treatment of patients," said lead author Linda Tickle-Degnen, Ph.D., chair of the Department of <u>Occupational Therapy</u> in the Graduate School of Arts and Sciences at Tufts.

In research published in the July issue of the journal of <u>Social Science</u> & *Medicine*, 284 American and Taiwanese healthcare practitioners were evaluated on their responses to videotaped interviews of 24 American and Taiwanese women and men with Parkinson's disease.

The patients had varying degrees of "facial masking," a condition in which the face loses the ability to change expression, creating an appearance of apathy or social disengagement. Practitioners judged the patients on four psychological attributes: sociability, cognitive



competence, depression and social supportiveness.

"We know from previous research that facial masking is stigmatizing, but those findings were limited by being conducted in western cultures with mostly whites. Very little investigation has been done on the effect of socio-cultural assumptions and the impact on health care," said Tickle-Degnen.

"Our research found that despite their neurological expertise, practitioners had negatively biased impressions of people with higher masking and those biases were notably more pronounced when facial masking clashed with cultural, ethnic and gender expectations," Tickle-Degnen continued. "Health care professionals need to let go of their reliance on the unresponsive face and pay greater attention to what patients and family members tell them as well as to other cues."

Assumptions Differ for Asians and Westerners

The researchers chose to study Taiwanese and American cultures because of their markedly differing views of the social self in the world. East Asians are expected to strive more for intellectual achievement, and to be less extroverted and less expressive, while Americans are expected to be more outgoing and socially expressive.

While practitioners in both countries judged patients with higher masking to be more depressed and less sociable overall, the same health symptom yielded varying health care judgments depending on the ethnicity and gender of the patients.

Practitioners were more biased by facial masking when judging the sociability of the American patients. Similarly, American practitioners' judgments of patient sociability were more negatively biased in response to masking than were those of Taiwanese practitioners.



In contrast, practitioners were more biased by masking when judging the cognitive competence and social supportiveness of the Taiwanese patients. Taiwanese practitioners' judgments of patient cognitive competence were more negatively biased in response to masking than were those of American practitioners.

Gender stereotypes also played a role in the practitioners' judgments. The stigmatizing effect of facial masking was more pronounced in response to women, particularly Americans, than to men in both countries.

Additional paper authors are Leslie A. Zebrowitz, Ph.D., professor in the Department of Psychology at Brandeis University, and Hui-ing Ma, Sc.D., associate professor in the Department of Occupational Therapy, College of Medicine, at National Cheng Kung University in Taiwan.

The study, which was funded by the National Institutes of Health, continues the efforts of Tickle-Degnen's research group at Tufts to better understand and promote positive social functioning and wellness in individuals with Parkinson's disease and other chronic conditions. Tickle-Degnen and members of her lab are also applying their research to help train practitioners to look beyond the mask of Parkinson's to more valid cues to a person's emotional and cognitive competence.

More information: Tickle-Degnen, L., Zebrowitz, L.A., Ma, H.-. Culture, Gender and Health Care Stigma: Practitioners' Response to Facial Masking Experienced by People with Parkinson's Disease, *Social Science & Medicine* (2011), doi: 10.1016/j.socscimed.2011.05.008

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