

South Asian patients have worse experiences of GP interactions, study suggests

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Stethoscope. Credit: Jasleen Kaur

Communication between doctors and South Asian patients is poor, according to national GP surveys, but a question has been raised about whether this reflects genuinely worse experiences or differences in responding to questionnaires. Now, a new study led by researchers at the University of Cambridge has shown that it is in fact the former – South Asian patients do experience poorer communication with their GP than the White British majority.

Patients' evaluations of doctors' interpersonal skills are used to assess quality of care. In both the UK and the US, certain minority ethnic groups report lower patient experience scores compared to the majority population. For example, the English General Practice Patient Survey found that South Asian groups report particularly low scores compared to the White British majority, with Bangladeshi and Pakistani groups providing the lowest scores.

Several potential explanations have been proposed for these lower ratings. These mainly relate to whether South Asian patients receive lower quality care, or whether they receive similar care, but rate this more negatively.

To explore whether the low scores reflect a genuinely poor experience, researchers at the Centre for Health Services Research, University of Cambridge, showed 564 White British and 564 Pakistani adults a series of films showing typical clinical scenarios. They were asked to rate how good the GP was at various measures: giving sufficient time and listening to the patient in the the film, explaining the tests and treatment, involving the patients in decisions about care and treating them with care and concern.

Based on the participants' responses, the researchers then gave a score out of 100 for how positively the participants had judged the GP's performance in the vignettes. The results of the study, funded by the National Institute for Health Research, are published in the journal *BMJ Open*.

The scores from Pakistani participants were typically higher than those from White British participants when they'd seen the same video. The mean communication score from Pakistani participants was 67 of 100, ten points higher than the mean score from White British participants. When adjusted for age, gender, deprivation, self-rated health, and video,

the difference increased to 11 points. The largest differences were seen when [participants](#) were over 55 years old.

"Given that Pakistani adults tend to have a more positive take on the same vignettes viewed by their White British counterparts, we can only conclude that the low scores they give in national surveys do genuinely reflect worse care," says Dr Jenni Burt from the Cambridge Centre for Health Services Research at the University of Cambridge.

"To some extent, this may reflect challenges arising from language barriers and poorer health literacy, but this is unlikely to explain all of the variations in care. These findings very clearly show that there are major inequalities in care for minority ethnic groups."

Professor Martin Roland, Emeritus Professor of Health Services Research at the University of Cambridge, adds: "Understanding why minority ethnic groups often give poorer evaluations of care is critical to helping [health services](#) improve the services they offer to their patients. We need more research now that focuses on how factors such as language barriers, health literacy, discrimination and system-level failures that combine to create inequalities that affect South Asian people."

More information: Jenni Burt et al. Understanding negative feedback from South Asian patients: an experimental vignette study, *BMJ Open* (2016). [DOI: 10.1136/bmjopen-2016-011256](https://doi.org/10.1136/bmjopen-2016-011256)

Provided by University of Cambridge

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