Medical Xpress

Health workers 'inadequately' trained to treat minority ethnic groups

March 28 2014

Health professionals are suffering from severe professional anxiety because they are being inadequately trained to treat minority ethnic groups – with their treatment often based on cultural stereotypes, research has found.

Researchers have urged an overhaul of the system so health visitors are taught about different cultures. They have warned the current system could result in patients being treated incorrectly and increase the likelihood of inequality within society because of the lack of dialogue or understanding of different cultures.

Many health visitors are being taught a one-size-fits all system for each

ethnic group during their training. However, when they enter the workplace they are struggling with anxiety and are unsure as to what do with individuals.

The study, Understanding the ways in which health visitors manage anxiety in cross-cultural work, involved in-depth interviews with white health visitors in the North East with up to 35 years of experience and who had frequently worked with patients from minority ethnic groups.

The research found that because healthcare workers are educated about many different cultures in a rigid way, it is resulting in people being treated based on stereotypes. In some cases, workers believe some patients wouldn't suffer from certain illnesses such as depression because of their background and the "fact" that their culture does not believe in it.

The research also showed those working in the health sector are keen to learn about different cultures and to become more competent when dealing with separate groups of people, but the training isn't available. Some workers are so desperate to learn they have to ask colleagues who originate from for advice and to discuss the differences in culture.

Dr Fiona Cuthill, a public health senior lecturer at the University of Sunderland, who led the research, said: "The current training available for health visitors is far too rigid for a country with so many different cultures in it. The training available should recognise the complexities of culture differences and not pretend there is the same cultural solution for everyone of the same background.

"The training available needs to recognise the changes and differences in cultures. Health visitors in this study were not culturally competent, but had become culturally anxious. They are finding in the real world people are mixed and different and they need help before they are thrown into

the world of work."

The report added: "Health care policy needs to balance the knowledge of the cultural 'other' with an understanding of the fluid, changing and dynamic change of culture. Health care practitioners should recognise that the strategies they use to manage anxiety across cultures have the potential to not only contribute to culturally unsafe care but also to perpetuate inequalities in health."

Provided by University of Sunderland

Citation: Health workers 'inadequately' trained to treat minority ethnic groups (2014, March 28) retrieved 23 April 2024 from
https://medicalxpress.com/news/2014-03-health-workers-inadequately-minority-ethnic.html

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