Respecting Diversity:
The Culture of Poverty

Moderator
- John D. Mahan, MD

Panelists:
- Mark Bechtel, MD
- Sandra Cornett, RN, Ph.D.,
- Jane Goleman, MD,
- Diane Petersen, LISW-S

Objectives:

- Participants will be able to recognize how the culture of poverty effects the quality of care for our patients.
- Participants will be able to describe several approaches to effectively interact with impoverished patients.
- Participants will be able to locate web pages and the resources available at the medical center for dealing with impoverished patients including health literacy resources.
Background

Tammy’s Story
http://www.youtube.com/watch?v=Q8VXrHeLqBA

Video Clip from PBS Documentary,
People Like Us:
Social Class in America
About a working mother in Waverly, Ohio

Mental Model of Poverty

- Relationships are essential for survival.
- Time is spent solving immediate problems
  - Food
  - Housing
  - Transportation
  - Job
  - Agency Time
  - Family
### Mental Model of the Middle Class

- Achievement is the focus
- Time is spent planning for stability
  - Education
  - Career
  - Retirement
  - Health
  - Family and friends

### Differences in Mental Models: Concept of Time

<table>
<thead>
<tr>
<th>Mental Model of Poverty</th>
<th>Mental Model of Middle Class</th>
</tr>
</thead>
<tbody>
<tr>
<td>Present - Focused</td>
<td>Future - Focused</td>
</tr>
<tr>
<td>Solving immediate</td>
<td>Environment is stable</td>
</tr>
<tr>
<td>problems all day</td>
<td>Decision making and planning</td>
</tr>
<tr>
<td>for increased</td>
<td>for increased</td>
</tr>
<tr>
<td>stability</td>
<td>stability</td>
</tr>
<tr>
<td>Time horizon is TODAY</td>
<td>Time horizon is 2-4 years</td>
</tr>
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Mental Model of Poverty

- Relationships are essential for survival.
- Time is spent solving immediate problems
  - Food
  - Housing
  - Transportation
  - Job
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Driving Forces

<table>
<thead>
<tr>
<th>Poverty Mental Model</th>
<th>Middle Class Mental Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Relationship-based</td>
<td>1. Education / Achievement</td>
</tr>
<tr>
<td>2. Present focused</td>
<td>2. Future focused</td>
</tr>
<tr>
<td>3. Problems interlocking</td>
<td>3. Problems contained</td>
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</tbody>
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What does it mean to be at the bottom -- culturally, socially, politically, and economically?

Mark Bechtel MD

The Doctor’s Story
Health Care Provider

If you could ask Tammy’s or one of Dr Bechtel’s patients….

What would they say is the most important thing to them about their health care provider?
Poverty and ill health are inexorably linked in a bi-directional cycle of cause and effect.*

Poverty affects health principally through its adverse affects on nutrition; family planning; prenatal, obstetric, and postnatal care; infectious disease; mental health problems; and medical care delivery.

Barriers exist as a result of the difficulties in navigating between and among complex service delivery systems and entitlements.

Accessibility to preventive, palliative, and curative health care depends largely on the client’s ability to pay, and often, people cannot afford existing fees.

http://poverty.osu.edu/
Low-income families often face multiple barriers to employment such as domestic violence, mental illness, and substance abuse, lack of transportation resources, childcare, etc.

Many women in poverty may have been victims of childhood physical or sexual abuse, are victims of domestic violence, or are struggling with serious health problems all of which can cause symptoms which are barriers to good health.

Many families with barriers have gone unrecognized and untreated.

Poverty is a social problem that is the result of multiple and complex issues.

There are clearly no easy answers to the challenges, but it will be beneficial to look at both the immediate needs as well as to ensure that appropriate information is available.
Resources to Help Your Low-Income Patients

GENERAL TIPS

There are resources available.
(Resources for low-income patients on OneSource)


Problems include:
- lack of familiarity with the resources
- difficulties in applying
- all the barriers already identified

Be careful not to make promises that cannot be met!

Based on your experiences and what you have heard and seen here today, what would you identify as the most important things to keep in mind when working with a person in poverty?
Based on your experiences and what you have heard and seen here today, what would you identify as the most important things to keep in mind when working with a person in poverty?

- If we are not aware of the culture of poverty, we miss the opportunity to personalize healthcare and meet the patients' needs.
- Without understanding the culture of poverty, we risk making assumptions about a person's circumstances which could lead to frustrating interactions and miscommunication.
- Without an understanding of the poverty mental model, our education to the patient in poverty may be missing major elements which could mean the difference between their ability to improve their health or not.
- Although barriers will continue to exist, provide patient with information about available resources.

Literacy Levels Associated with Poverty
Literacy Levels Associated with Poverty
Nat’l Assessment of Adult Literacy Study - 2003

- **Below Basic Literacy Skills** - Most simple/concrete skills (below 5th grade reading level)
  - Adults with incomes below 125% of poverty guidelines
  - 30 percent of adults on Medicaid
  - 27% of adults on Medicare
  - 49% of adults who never attended or completed HS
  - Hispanic adults had lowest average health literacy of all racial/ethnic groups
  - Adults who spoke other languages alone or with English before starting school. Those who spoke only Spanish had the lowest average health literacy.

Six Basic Methods to Improving Communication with Patients

- Universal Precautions for Health Literacy
  - [http://www.ahrq.gov/qual/literacy/](http://www.ahrq.gov/qual/literacy/)

- Methods for improving patient-centered communication
  - March 2011 *Putting Professionalism into Practice*
Take Home Points

- People in poverty are resilient!
- Respect their abilities
  - To survive
  - Solve problems
  - Move forward

Thank You

Next Putting Professionalism into Practice Session

Methods for Improving Patient-Centered Communication: Putting Professionalism into Practice
March 11, 2011
Noon 170 DHLRI