

**University of Hawaii at Manoa
John A. Burns School of Medicine**

Course Number: BIOM

Course Title: Cultural Competence in Biomedical Research I

Course Credit: 3 credits

Prerequisite:

Placement in Curriculum:

Cultural Competence in Biomedical Research I is the introductory course in the application of cultural awareness to biomedical research in the Clinical Research curriculum.

Catalogue Description:

Introductory lecture-seminar course on the conduct of multidisciplinary research from a culturally competent perspective.

Course Description:

Cultural competence is a developmental process that evolves over an extended period and individuals and systems are at varying levels of awareness, knowledge and skills along this continuum of cultural competence. The emphasis in this first course will be on understanding the effect of culture on the research process and knowledge development and developing effective skills to assess and interpret cultural competence. There is an important emphasis on linguistic competence in a multicultural health care environment within the context of developing clinical research. This course will assist students to communicate in a culturally competent manner with persons from diverse cultural, socioeconomic, educational, and professional backgrounds and with persons of all ages and lifestyle preferences.

Learning Outcomes:

At the conclusion of the course student will be able to:

- Critique reported research for the inclusion of culturally sensitive and appropriate methods
- Analyze selected acculturation scales for their usefulness in clinical research

- Analyze literature related to linguistic competence within the context of one aspect of clinical research (i.e., informed consent, instrument development, treatment regimens, etc.)
- Analyze literature related to culturally appropriate communication and collaboration within the research agenda
- Synthesize the literature on the issues relevant to obtaining informed consent in clinical research in a culturally competent manner
- Synthesize the literature on selected issues relevant to designing or selecting culturally appropriate instruments in clinical research

Topical Outline:

Culture and health disparities
 Culture and acculturation
 Measuring acculturation
 Linguistic competence
 Measuring linguistic competence
 Communication in clinical research settings
 Collaboration in multicultural environments
 Social construction of knowledge
 Informed consent
 Measurement issues in multicultural research
 Cultural competence to cultural proficiency

Required Texts:

There is no required text. In order to cover the variety of topics in this course, a reading list of current literature for required and elective reading will be provided. Students are also expected to share current literature relevant to their own areas of expertise. A few examples are attached under Resources.

Learning Experiences:

Lecture, discussion, presentations

Evaluation

Written paper	50%
Oral Presentation	50%

Students will be evaluated on written and oral work. Topics for the written paper will apply concepts of informed consent, linguistic competence, measurement issues, or self-assessment of cultural competence to the student's own research or area of interest. Each student will be responsible for an oral presentation on a related topic. Oral and written presentations will be evidence-based and

appropriate for publication as either part of a larger research endeavor or as a single paper.

Resources (*=required reading)

* Abe-Kim, J., S. Okazaki, et al. (2001). "Unidimensional versus multidimensional approaches to the assessment of acculturation for Asian American populations." Cultural Diversity and Ethnic Minority Psychology 7(3): 232-246.

* Burchard EG, Ziv E, Coyle N, et al. The importance of race and ethnic background in biomedical research and clinical practice. *N Engl J Med.* 2003;348:1170-1175.

Burroughs VM, Maxey RW, Levy RA. Racial and ethnic differences in response to medicines: towards individualized pharmaceutical treatment. *J Nat Med Assoc.* 2002;94 (SUPP):1-26.

Caldwell, C. H., Jackson, J. S., Tucker, M. B., & Bowman, P. J. (1999). Culturally-competent research methods in African American communities: An update. In R. Jones (Ed.), *Advances in African American Psychology* (pp. 101–127). Hampton, VA: Cobb & Henry Publishers.

* Goode, T., & Harrison, S. (2000). Policy Brief 3: Cultural competence in primary health care: Partnerships for a research agenda. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

* Goode, T., & Jones, W. (2003). Definition of linguistic competence. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Goode, T., Jones, W., & Mason, J. (2002). A guide to planning and implementing cultural competence organizational self-assessment. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Goode, T. D. (2002). Self-Assessment Checklist for Personnel Providing Services and Supports to Children and Youth with Special Health Needs and their Families. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Goodman, A. H. (2000). "Why genes don't count (for racial differences in health)." American Journal of Public Health 90(11): 1699-1702.

Graves, A., R. Lakshminarayan, et al. (1999). "Cognitive decline and Japanese culture in a cohort of older Japanese Americans in King County, WA: The Kame

Project." Journal of Gerontology: SOCIAL SCIENCES **54B**(3): S154-S161.

Healthcare narratives from diverse communities—a self-assessment tool for healthcare providers. (2001). *Bioethics Forum*, 17(3–4), SS1–18.

Heath, C., Luff, P. (1991). "Collaborative activity and technological design: Task coordination in London underground control rooms." Proceedings of the 2nd European Conference on Computer-Supported Cooperative Work. Amsterdam.

Institute of Medicine of the National Academies (2002). *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*. Washington, DC: The National Academies Press.

Iwamasa, G. Y., S. M. Pai, et al. (1998). "Acculturation of Japanese Americans: Use of the SL-ASIA with a community sample." Asian American and Pacific Islander Journal of Health **6**(1): 25-34.

Kehoe, K. A., Melkus, G. D., & Newlin, K. (2003). Culture within the context of care: An integrative review. *Ethnicity & Disease*, 13(3), 344–353.

Marino, R., G. Stuart, et al. (2000). "Acculturation of values and behavior: A study of Vietnamese immigrants." Measurement and Evaluation in Counseling and Development: 21-.

Rissel, C. (1997). "The development and application of a scale of acculturation." Australian and New Zealand Journal of Public Health **21**(6): 606-613.

Robillard, A., White, G., & Marezki, T. (1983). "Doctor talk and Hawaiian 'talk story': The conversational organization of a clinical encounter." In S. Fisher and A. Todd (eds). *The Social Organization of Doctor-Patient Communication*. Center for Applied Linguistics: Washington, DC.

Ryder, A. G., L. E. Alden, et al. (2000). "Is acculturation unidimensional or bidimensional? A head-to-head comparison in the prediction of personality, self identity, and adjustment." Journal of Personality and Social Psychology **79**(1): 49-65.

Shen, B.-j. and D. T. Takeuchi (2001). "A structural model of acculturation and mental health status among Chinese Americans." American Journal of Community Psychology **29**(3): 387-.

Stephenson, M. (2000). "Development and validation of the Stephenson multigroup acculturation scale (SMAS)." Psychological Assessment **12**(1): 77-88

* U. S. Department of Health and Human Services, Office of Minority Health. (2001). National standard for culturally and linguistically appropriate services in health care (Final Report). Washington DC: Author.

* van Ryn M. Research on the provider contribution to race/ethnicity disparities in medical care. *Med Care*. 2002;40 (suppl):140-51.

van Ryn M, Burke J. The effect of patient race and socio-economic status on physicians' perceptions of patients. *Soc Sci Med*. 2000;50:813-828.

Zick, A., U. Wagner, et al. (2001). "Acculturation and prejudice in Germany: majority and minority perspectives." Journal of Social Issues **57**(3): 541-558.