

# UH Med Now



## "Why I'll be attending the next Cross-Cultural Health Care Conference"

Date: March 18th, 2015 in [External News](#), [JABSOM News](#), [Research](#)



**Editor's Note:** The fourth Cross-Cultural Health Care Conference welcomed 244 participants from Hawai`i, the U.S. Mainland, and countries including Australia, Canada, New Zealand, and the United Kingdom. Making a welcome return were renowned Harvard scholar Joseph Betancourt, M.D., MPH, who spoke on the role of culture in patient-centered care, and the Deans' panel, comprised of Dean Jerris Hedges (JABSOM), Dean Mary Boland (Nursing), Dean Noreen Mokuau (Social Work), Dean Maenette Benham (School of Hawaiian Knowledge), and Director Kathryn Braun (Public Health), who presented their collaborative efforts to eliminate health disparities and promote interdisciplinary learning and research. First-time speakers included Tawara Goode from the Georgetown University who intrigued the audience with the video vignettes incorporated in her presentation on training and mentoring minority students.

See photos from the conference on-line at [UH Med Flickr](#)

Afternoon breakout sessions allowed attendees the opportunity to learn more about regulatory updates regarding culturally and linguistically appropriate services, tools being developed to measure the efficacy of cultural competency, and the great community-based work of organizations such as Kōkua Kalihi Valley.

Due in part to a generous grant from The Doctor's Company Foundation, 120 students from medicine, nursing, psychology, and public health attended the conference at no cost. Many of them came away excited, feeling that what they learned will enhance their developing skills. Below is a reflection from one of

our second-year medical students, Christina Wu, who first attended the conference in 2011 as a premedical student in the UHM Honors Program. – Maria Chun, Ph.D.



*Questions from the audience at the 2015 Cross-Cultural Health Care Conference in Waikīkī.*

### **Reflection, by Christina Wu, 2nd Year Medical Student**

“Do you have any questions or concerns?” I asked. The interpreter, a young woman sitting next to the patient, transformed my English into a flowing stream of Chuukese.

The patient began to speak. His words were foreign to my ears, but I could hear the fatigue and hesitancy in his voice.

The interpreter looked at me with concern. “He doesn’t think dialysis will help. He’s considering just going back to Chuuk.”

We are taught many things in medical school: anatomy, physiology, pharmacology, and other basic sciences critical for making sound clinical decisions. Yet, it is these moments where I see that medicine is not merely about formulating assessments and plans; medicine is also about working with patients whose beliefs don’t align with Western medicine, or caring for those that distrust our healthcare system, or helping patients with a diagnosis that is stigmatized in their culture. As medical students, we are exposed to some of these topics during our preclinical years, but our experiences outside of the classrooms and textbook reinforce the idea that patients’ personal and cultural values shape their views on illness, well-being, and treatment.

Hoping to improve my communication skills in cross-cultural situations, I attended the 2015 Cross-Cultural Healthcare Conference (CCHC) hosted by the John A. Burns School of Medicine (JABSOM) Department of Surgery, which I have regularly attended since learning of its existence a few years ago. Each time, I am armed with a pen and pad, scribbling down notes as speakers outline steps for building patient-centered relationships, questions to ask to gauge patient understanding of their conditions, and ways to increase health literacy amongst culturally diverse patients. When I’m not attending presentations, I enjoy meeting physicians and other healthcare providers to hear their personal experiences with delivering cross-cultural care.

**For me, the CCHC is part of the “informal curriculum” that complements and reinforces the cultural competency training we receive in medical school.**

The CCHC always leaves me feeling refreshed and inspired to interact with patients using the new skills I’ve learned. But this year, I noticed something else: I left with a greater awareness of local efforts to improve access to culturally sensitive healthcare. During coffee breaks, my classmates and I browsed through research posters that analyzed minority health disparities in Hawai`i. We listened as JABSOM faculty proudly spoke of pipeline programs – many of which we currently volunteer with, or were even a past member of – that focus on increasing underrepresented minorities in medicine. Seeing the community come together to address these issues gave me a sense of connectedness and excitement for the future of healthcare in our state.

As a medical student, I look forward to the CCHC because it encourages me to reflect on how my cultural background has influenced my communication with patients and personal goals as a future physician. It provides us with a deeper understanding of cross-cultural healthcare issues we have encountered in our curriculum, but also introduces challenges and obstacles that may not have crossed our minds until we practice medicine on our own. And it is for all these reasons that I know I will be attending the next CCHC as well.

*Christina Wu, MD Class of 2017, is pictured receiving her White Coat in a JABSOM ceremony in July 2013.*

Note: The next conference (CCHC 2017) is scheduled for February 17-18, 2017.



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