

Communicating with Your American Indian Patient

Adapted from *Culture Clues™*, University of Washington Medical Center, November 1, 2007;
<http://depts.washington.edu/pfes/cultureclues.html>.

Culture Clues™ was designed by the University of Washington Medical Center to help increase awareness about concepts and preferences of patients from diverse cultures. *Culture Clues™* is to be used along with information from the patient and family to guide your communication and your patient care.

Remember — every person is unique; always consider the individual's beliefs, needs, and concerns.

American Indian is a term identifying the indigenous peoples of North America. In the 2000 Census, four million people identified themselves as American Indians. About $\frac{3}{4}$ of this population live near urban areas; about $\frac{1}{4}$ live in non-urban areas, including reservations. There are more than 500 federally-recognized tribes and over 245 tribes without this federal designation, which may have state recognition. Be aware that there is variability between tribes in their health care seeking and health promotion behaviors. The American Indian culture varies considerably by age, place, or residence (urban, rural, reservation), education, socioeconomic factors, and awareness and utilization of community resources.

In the American Indian culture, there is historical mistrust of mainstream institutions due to centuries of abuses such as broken treaties and forced relocations. In addition, only the small percent of American Indians who are affiliated with registered tribes receive treaty-granted health care benefits.

Acknowledging this history is an important step in building trust with your patient and their family and understanding that at times this lack of access to health care can lead to frustration.

While it is important to have a basic knowledge and respect for this culture, remember that all, some, or none of these beliefs may be associated with each patient and their family.



How does the American Indian culture deal with illness?

Cause of illness

- Your patient may have a holistic view in which people, community, nature, and spirituality are interconnected and interrelated. This perspective views physical, spiritual, mental, and emotional health in unity, instead of in discrete categories. Sickness may be viewed as the result of disharmony between the sources of life.
- Your patient may seek western medicine for treatment of symptoms of illness. However, patients may also seek traditional healers to address the disharmony that caused the illness. Traditional practices may include different rituals and ceremonies as well as herbal remedies. The sweat lodge is an example of a health practice American Indian patients may apply.

Understanding time orientation

- Time orientation may be perceived as cyclical, present-oriented, and “in-the-moment” as compared to linear, future-oriented, and “time-by-the-clock” in western culture. As a result, patients may be late or miss appointments.
- Transportation issues and unfamiliarity with the city and the medical center neighborhood may also impact your patient’s time of arrival for their appointment.



How are medical decisions made in the American Indian culture?

Concepts of family/community

- The concept of family may include immediate family, extended family, and community and tribal members.
- Your patient’s medical decisions may depend on how the family is affected because of the importance of group orientation. As a result, your patient may include the entire family when making important medical decisions.
- Urban American Indians may not have family living nearby, and American Indians who live on reservations may be receiving care far away from home. Lack of family support during medical decision making may be a source of stress for your patient.

Informed consent

- Due to a history of misuse of signed documents, some patients may be unwilling to sign informed consent, advance directives, and durable power of attorney forms. Your patient may perceive verbal agreement as sufficient.



How can I reduce communication barriers with my American Indian patient?

Nonverbal communication

- Direct eye contact may be avoided out of respect or concern for soul loss or theft.
- Traditionally, American Indians have been taught to resist any expression of pain. Your patient may not express pain directly and instead report feeling uncomfortable or use storytelling.
- Time and silence may be used to maintain harmony, be non-confrontational, and as a way to prepare to listen to your patient.

Verbal communication

- Storytelling and circular conversation may be used to build trust or describe symptoms. For example, a personal story about an ill neighbor may be a metaphor for the patient having the same symptoms.

Explaining touch

- Touch may be very personal for your patient. The head and hair may be considered particularly sacred.
- Hair, jewelry, ornaments, or other regalia may have a spiritual meaning.