Culturally and language barriers, along with disability, may result in unequal health care. Treating disabled women from diverse racial and ethnic backgrounds, especially when different from the provider’s, may require extra time to establish an effective, trusting relationship.

Providers need to:

• Focus on the context of the patient’s social circumstances, not just on specific symptoms related to illness or impairment.
• Check assumptions and stereotypes about race, ethnicity, and disability.
• Consult with colleagues more familiar with the patient’s life situation and culture and how they impact attitudes and practices about disability.
• Seek resources for full access regarding all aspects of the patient’s needs, including disability access, language translation, and cultural information. Getting informed takes extra time and may seem difficult, but this investment is well worth it in health outcomes.
• Address concerns such as sexuality, reproductive health, mental health, and substance abuse. Avoiding taboo issues is a disservice to patients.
• Assume that disabled individuals can be knowledgeable about their own conditions. Listen to their strategies.
• Treat disabled patients as partners in their own health care through sharing of information and decision-making.
• Patience, respect, and genuine friendliness communicate well in any language.

Learn more:
• Multicultural Issues in Rehabilitation and Allied Health
  www.aspenprofessionalservices.com/7128/17502.html
• Spotlight on Minority Health and Health Care Disparities
  www.kff.org/minorityhealth/index.cfm
• Cultural Competency in Working with Latino Family Caregivers
  www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=1095
• Project Empowerment: Webcasts about Minority Disability Issues
  www.vcu-projectempowerment.org/training/archivedWebcasts.cfm
• Proyecto Visión Resources for Minorities with Disabilities
  www.proyectovision.net
• Access to Medical Care DVDs
  www.wid.org/amc

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