



Cultural Insights

A bi-yearly publication of RMHP designed to increase understanding of cultural differences and improve patient outcomes.

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ROCKY MOUNTAIN
HEALTH PLANS®

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Spatial Behavior — Cultural Variances

Spatial Behavior is one way in which cultural dynamics are expressed in a patient-provider interaction. The book *Transcultural Nursing* describes spatial behavior to usually be spontaneous and unintentional actions that may be a more true reflection of an individual's feelings than the words communicated. These patterned behavior responses are often learned and largely influenced by one's cultural and ethnic background. An increasing awareness of one's own spatial behavior as well as reactions to another's may greatly improve provider-patient communication and, in-turn, improve clinical outcomes.

The term Spatial Behavior refers to a vast assortment of human behaviors such as proximity to others, body movement, eye contact, and touch all of which may occur during a conversation between a provider and patient. Depending on the cultural and ethnic background of each individual interacting with one another there could be very different perceptions of spatial behavior.

According to the text *The Hidden Dimension*, there are primarily three dimensions of space in Western culture during human interaction:

- **The Intimate Zone** (0 to 18 inches),
- **The Personal Zone** (18 inches to 3 feet), and
- **The Social or Public Zone** (3 to 6 feet).

These "zones" are obviously widely influenced by one's own cultural background. For most occurrences, business interactions are almost always conducted in the public zone. The intimate zone is many times used for comforting, counseling, healing, etc., and there generally must be a level of trust established for individuals to be open to interacting that close.

An awareness of these behaviors and even general characteristics prevalent in different cultures can be beneficial in helping promote positive and desired outcomes when interacting with patients.

Remember cultural competency is something that is a continuous learning process of not only other cultures, but also developing an awareness of your own self. Knowledge about cultural differences and their impact on attitudes and behaviors may help to develop an awareness of the ethnocentric views that many people may hold. The Office of Minority Affairs defines cultural competency as a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.

Additional training on the importance of Cultural Competency is offered through the Office of Minority Health by going to the following website: minorityhealth.hhs.gov

Did You Know

- African Americans are 1.5 times as likely as non-Hispanic whites to have high blood pressure.
- American Indian/Alaska Native adults are 1.3 times as likely as White adults to have high blood pressure.
- Overall, Asian/Pacific Islander adults are less likely than white adults to have heart disease and they are less likely to die from heart disease.
- Mexican American women are 1.2 times more likely than non-Hispanic white women to have high blood pressure.

(Office of Minority Health, 11/2011)

As a Rocky Mountain Health Plans (RMHP) participating physician or provider, it is your responsibility to provide interpretive services for RMHP Members enrolled in federally funded programs, at no cost to the Member. The interpretive services are not billable to RMHP. If your office is unable to accommodate interpretive requests, RMHP provides access to a language line for providers seeing RMHP Members. Translators representing multiple languages are available and can be arranged by calling RMHP Customer Service at 970-243-7050 or 800-346-4643.

Please note: Information given about a particular culture is intended to provide only a general idea of belief systems. It is important not to stereotype or categorize a patient based on his or her culture or country of origin. Beliefs depend upon many factors, including the degree of acculturation and assimilation. Use the information as a guide, but individualize for each patient.

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PO Box 10600
Grand Junction, CO 81506