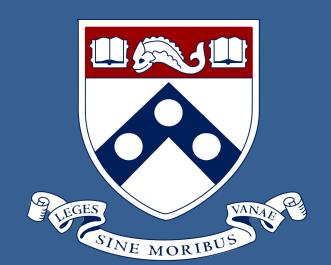


The Impact of Culturally Concordant Care on African Immigrants

A Community Health Needs Assessment of African Immigrants in West and Southwest Philadelphia Authors: Cristle Ike, Gabriela Montes de Oca, Thomas Statchen, Kent Bream, MD



Purpose

- Explore health resources in the area as well as how they are utilized, possible barriers, and the opinions from the community of these resources
- Understand the impact of culturally concordant care on African immigrants, their healthcare, and their health seeking behaviors
- Develop recommendations for the creation of novel resources or the coordination of existing resources to address challenges and support this population

Background

- In Philadelphia, the number of Black immigrants has increased by 121% since the year 2000, majority from African countries
- Making up over 20% of the population, Southwest Philadelphia, particularly between 60th and 70th Street from Chester Ave to Elmwood Ave has the largest percentage of African-born residents according to the U.S. Census
- Previous research has shown that in many cities across the country, the African immigrant population suffer from disproportionate rates of chronic diseases (ex: Hepatitis B, hypertension, and diabetes) and high rates of stress
- High morbidity rates that have been observed by HUP providers:
 - Increased utilization of emergency services for care of chronic diseases
 - Increased utilization of emergency services late in progression of disease
- Previous research has shown that patient-centered communication may be effective in improving a patient's satisfaction of care, but not much research focuses on the impact of concordance on African immigrants' care

Methods

- Conducted semi-structured interviews with over 40 community leaders and members
- Questions pertained to healthcare experiences, opinions on the community, healthcare accessibility and more.
- Used snowball sampling to reach out to more community members
- Conducted additional outreach by connecting with community organizations such as churches and mosques, as well as healthcare organizations such as African Cultural Alliance of North America (ACANA) and African Family Health Organization (AFAHO) in order to reach more of the population
- NVivo was used to code the interviews for patterns and common themes. Codes such as Resource Availability, Access to Care, Health Beliefs, Health Insurance, and more were used

Preliminary Results

- A common theme found was the sentiment that having a provider who identifies with a part of a patient's culture allows for cultural understanding that can be applied towards one's care
- However, universally there is a strong value placed on patientcentered communication, whether or not the provider has a shared identity to the patient.
 - Being able to have needs listened to, medical information explained in terms understandable by the patient, and plans for future treatment that can be feasibly incorporated into the patient's existing lifestyle proved to be more important than a shared identity between a patient and their provider.

"So I presented to [a white provider] my medical history. I told her 'My tuberculosis test is gonna come back positive'...she called me and she was hounding me over it. And I told her, '[I] took this vaccine when we were children [the BCG vaccine], and it comes up as positive every time we do this test, just please do an X-ray.' She said 'No, no, no.' And I said 'We had this same test done in New York: my doctor was Jamaican and he said 'Oh this definitely happens, that's how the results come back.' And this woman proceeded to tell me she was gonna report me to Philadelphia Health that I had tuberculosis and was going to spread it.

So that's the type of pressures that come in when you're dealing with **people who are not culturally aware**...That deters [immigrants] from ever going to see the doctor again. So now I advocate for Africans to get a doctor that is knowledgeable about where you're from."

Conclusions

- Next steps include continuing focus groups in order to further prioritize the patterns and themes (such as patient-provider interactions) in order to implement into novel resources for the African Immigrant population in Southwest Philadelphia
- Implement programming with the community and Penn Medicine to develop resources that prioritizes navigation and access

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