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Proponent Testimony

Senate Bill 33 - Health Care Professionals- Instruction in Cultural Competency

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Chairman Jones, Vice Chair Lehner, Ranking Member Tavares and members of the Senate Medicaid Committee, I appreciate the opportunity to provide proponent testimony on Senate Bill 33, which would require certain health professionals to have instruction in cultural competence. Thank you for the opportunity to testify in support of Senate Bill 33. My name is Deborah Nixon-Hughes, interim director of the Multi Ethnic Advocates for Culture Competence, fondly referred to as MACC. Our organization is committed to enhancing the quality of care in Ohio's health care system and to incorporate culturally competent models of practice into the systems and organizations that provide services to Ohio's diverse populations. As such, MACC understands the benefit of a culturally competent healthcare workforce towards its contribution to the elimination of healthcare disparities while improving health outcomes and promoting health equity.

The Why:

Racial, cultural, and ethnic populations unfortunately are burden with higher rates of disease, disability and death and tend to receive a lower quality of health care according to an article entitled "Cultural Competence Healthcare System; A Systematic Review. HRSA writes that effective communication is as important to health care as clinical skills. Health care providers need to recognize and address the unique culture, language, and health literacy of diverse consumers and communities.

As a license behavioral health care professional with over 38 years of experience in health care, I have witness firsthand the tragic outcomes to patients/consumers of healthcare as well as the negative financial impact on systems that can occur due to culturally incompetent health care professionals. From a consumer of health care perspective, one of the sadness consequence is early death due to health care professionals not understanding the custom, beliefs, and values of diverse populations. As a result health care professionals can unintentionally diminish or ignore the opinions and healthcare needs of these populations in order to provide the most appropriate service thus achieving optimal health outcomes and contributing to the elimination of racial and ethnic disparities. The Industry Collaboration Efforts (ICE) committee informs us that one's culture informs healthcare professionals their concept of health and healing; how illness, disease and their causes are perceived; and the behaviors of individuals within the population that are seeking care and their attitudes toward health care providers. Thus cultural competency educational classes are critical to high quality service delivery that is respectful of and responsive to the needs of diverse consumers.

Changing Demographics:

According to an article in the Columbus Dispatch, Ohio in general has become more diverse. Nationally according to the ICE, 20% of people living in the US speak a language other than English at home; The Hispanic population has grown by 43% in the US has grown between 200 and 2010 and Ohio has seen similar growth. In addition, 17% of foreign born population in the US are classified as newly arrived (arriving in 2005 or later; and 1 out of 2 adults consumers has a hard time understanding basic health information.

Consider the consumer of healthcare who does not understand what their healthcare professional is saying to them and/or vice versa the healthcare professional who is insensitive to the needs of their consumer due to a lack of training resulting in compromised quality healthcare and thus creating racial and ethnic disparities and poor health outcomes.

According to the Office of Minority Health of the US Department of Health and Human Services, cultural competence training is essential to the provision of quality services.

Financial Impact:

The financial impact occurs with longer hospital stays, more emergency room usage, and due to late access and/or misdiagnosing results in healthcare conditions worsening.

Solution:

The passage of Senate Bill 33 is essential and an opportunity to begin to improve health care outcomes for diverse populations and begin the process to reduce healthcare disparities while also managing health care cost. This bill is a win, win for consumers as well as health care systems of care. Many discuss the cost associated with training requirements but it does not compare to cost of a lost life or cost associated to misdiagnosing. Our state cannot afford to not act this time.

Chairman Jones, Vice Chair Lehner, Ranking Member Tavares and members of the Senate Health and Human Services Committee, thank you for your time and consideration of my testimony today. It is my hope that you understand the benefit to passage of this bill for all Ohioans to live long, healthy, and productive lives. I am happy to answer any questions at this time.

MACC MISSION:

To enhance the quality of care, in Ohio's health care system and to incorporate culturally competent models of practice into the systems and organizations that provide services to Ohio's diverse populations.