

# Cultural Competency Perceptions of Physician Assistant Students

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**Abstract.** Introduction: Cultural competency education has become increasingly important in health care education in order to treat patients in a nation of diversity. A standardized way of introducing cultural competency material and testing its effectiveness has not yet been formalized. Methodology: The purpose of this study was to analyze whether cultural competency attitudes of physician assistant students changed after completing a cultural competency curriculum based on a federally funded diversity workforce grant. A pre and post intervention survey of 15 questions was completed by a class of 42 physician assistant students. Results were analyzed using the Chi-Square statistic. Results: Attitudes regarding cultural competency were primarily unchanged from before and after completing the cultural competency curriculum. However, one item was statistically significant in terms of a relationship between pre and post intervention. Students initially believed that PAs cannot give excellent health care without knowing the patients' understanding of their illness. However, after completing the cultural competency curriculum, students believed that PAs could do so. Conclusion: This preliminary study of PA students' attitudes of cultural competency represents the attitudes of one class of PA students, where no significant changes were seen. Further studies are recommended in order to assess a variety of PA programs and cultural competency curricula.

## 1. Introduction

The diversity of cultures in the United States is continuing to rise [1]. Because of this, there is an increasing importance of cultural competency in health care. This project was selected to measure the effectiveness of a cultural competency curriculum in the PA program at Wichita State University. A study done by Crosson, Deng, Braqueau, Boyd and Soto-Greene measured the effectiveness of cultural competency content in a medical program and found the students to be positively affected by cultural competence education [2]. Their survey was adapted and used to measure cultural competency content in WSU's PA program.

## 2. Experiment, Results, Discussion, and Significance

### *Experiment*

This study was administered through the Department of Physician Assistant at Wichita State University. A fifteen question survey was administered to 42 students of WSU's PA program before they began their cultural competence education and again afterwards. The cultural competence education consisted of a didactic component in the classroom and a clinical component as they completed rotations in rural/underserved, metropolitan and urban clinics and hospitals.

### *Results*

The survey results were compared from before and after the cultural competence education to measure a change in attitudes. One question of the fifteen showed a significant relationship, which asked whether PAs can give excellent health care without knowing the patients' understanding of their illness. On the pretest, 30% agreed, while 64.3% agreed on the posttest ( $p < .05$ ).

*Discussion*

Overall, a significant change in cultural competency was not observed in this study, except for the question in relation to providing appropriate care to patients without them having a good understanding of their illness. This may indicate that students became more confident in their own care giving skills after completing PA school. In regard to the overall lack of change in attitudes, one explanation may be the cultural competency curricula in the WSU PA Program was not adequate for this class of students and may need to be reevaluated. Several methods for teaching cultural competency are available, and the hope is to institute a program that leads to a better understanding of different cultures, which will likely lead to improved health care for culturally diverse individuals.

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[2] Crosson JC, Deng W, Brazeau C, Boyd L, Soto-Greene M. Evaluating the Effect of Cultural Competency Training on Medical Student Attitudes. *Family Medicine*. 2004;36(3):199-203