SIM CAB Listening Session Review Questions

Key Findings Key Messages & Next Steps for CAB discussion.

1. Event Name: Muslim Listening Session

a. Location: Berlin Mosque, Berlin CT

b. Date: April 4, 2018

2. Goals of the Event:

The goals of the joint sponsored forum were to meet with the Muslim community to discuss healthcare access, learn about their health concerns, and understand how they connect with local resources

3. Key Findings:

- Language issues can make it difficult to talk to doctors
 - People with visitor's visas struggle with getting healthcare
- Muslims felt that some doctors try to explain as quickly as possible to get them out the door
- Time limit issues also inhibited people's ability to trust doctors. Many doctors had backto-back patients and did not spend enough time listening to patients. People felt like doctors lacked empathy because they didn't listen.
- Women who continued working with non-Muslim doctors did so because they appreciated the practitioner's kindness and ability to be thoughtful and listen.
- Muslim men talked about how much they feel welcome depending on the person at the front counter in the office. How the front office treats them matters a lot in how they will trust and connect with the doctor.
- Muslims are not supposed to ingest anything with gelatin or alcohol in them, so if they
 are prescribed medicines with these ingredients, they would like to find alternatives.

4. <u>Based on the Key Findings, what Recommendations do you have?</u> Please connect your recommendations with 2017 CAB Plan Focus Area 1,2,3:

1) **INFLUENCE SYSTEMS CHANGE**:

 Doctors should first and foremost be a public servant, and avoid working with a profit motive

2) **PROMOTE PROVIDER-CONSUMER PARTNERSHIPS:**

- Offer Urdu-speaking providers, or at least have someone in the office who speaks Urdu.
 Calling a language line or outside translators provides some barriers which make it difficult for Urdu-speaking Muslims to connect with providers, especially if time limitations already present a barrier.
- Cultural competency suggestions:

- Women wanted to offer advice to doctors to be aware that Muslim women have modesty concerns.
- Women think doctors should know about Muslim diets and Ramadan restrictions
 this will help a lot
 - Doctors should advise patients regarding diet: some Muslim ethnic diets have a lot oil and are unhealthy
 - Doctors should know about fasting during Ramadan
 - Muslims cannot drink alcohol or ingest gelatin doctors should be aware of this to prescribe appropriate medicine
- Muslim women do not shake hands with men
- To keep Muslim men healthy, talk with them about desserts, or diet in general.
 - The Muslim men's group says the average Muslim male thinks they just need more insulin if they want more dessert.
 - Muslim men in this group also felt that Muslims think medications will cure everything, so they need a more holistic education that encourages a healthy, balanced lifestyle.

3) **ENGAGE AND EMPOWER CONSUMERS**:

- Offer health education about why it's important to take medication as prescribed.
 Explain why it's important to return for follow up visits. Explain next steps in treatment and care. Take the time to educate Urdu-speaking Muslim patients because they need to understand the reasons behind the doctor's recommendations.
- Offer health fairs at mosques to offer free screenings and health education for new immigrants and their families. Also offer advice about language specific physicians. A lot of households have parents who come visit from abroad and don't have insurance.
 Need free fairs for this.
- 5. Do you have any Recommendations that Connect with the CAB Health Equity Priority? Health equity involves the promotion of equal opportunities for all people to be healthy and to seek the highest level of health possible.
- Doctors and patients need to be able to talk to and trust each other
 - Doctors must leave their bias at the door. They should not make snap judgments, and be culturally sensitive. Doctors should not make assumptions about people's backgrounds based on how they dress.

6. Key Messages:

XXX

7.	Activit	ies and Next Steps:
	a.	With whom should we share this report?
	b.	How can we disseminate the report? Which CAB members will email whom?
	c.	Next Steps to Implement?
	d.	Do we need additional information? If so what and how to obtain it?

e. Resources Required?

f. Next Deadline?