

The following section is an important example of a curriculum developed by Scott Williams, MD for use in training residents to work with a specific ethnic population. Preceptors may wish to develop similar curricula to facilitate training their own residents to work with patients they see most frequently in their own clinical programs, e.g., Puerto Rican patients or Mexican patients. The curriculum below may be used as an outline for developing other such curricula.

Native American Children

This section was authorized by Scott Williams, MD

A. Knowledge

Demographics

- Predominant local & regional tribes

- Tribal eligibility requirements (vary widely among tribes)

- Languages

- Local reservations, tribal lands, boundaries

- Socioeconomic status

Culture

Characteristics

- Family-centered

- Matriarchal

- Non-materialistic

- Humor-loving

- Non time-regimented

Parenting norms

- Role of mother, father, and siblings

- Definition and role of extended family

- Discipline & supervision of children

- Co-sleeping

- Pre-chewing

- Unique milestones

- Laughing

- Traditional health providers

- Herbalists

- Medicine men and women

- Few questions asked of patient

- Usually provide specific & certain diagnosis and treatment

- Ceremonies

- Indications

- Length

Use of sweating, ingested solutions
Traditional health beliefs

Attitudes about spiritual harmony = health

Attitudes concerning

Pregnancy

Breastfeeding

Illness

Death

Autopsy

Handling of placenta, umbilical stump, body

Parts

Physical malformations

Mental retardation

Mental illness

Sensory impairments

Bureaucracies

Indian Health Service (IHS)

Regional IHS facilities

Indian Health Service

Eligibility for services

Residency requirements

Contract care with non-IHS providers

Authorization of non-IHS care

Physician employment opportunities

Socialization of families to a health care system

No personal financial responsibility

Little experience with insurance industry
procedures

Tribal governments

Sovereignty

Tribal-operated health services

Social services

Local, State, and Federal

Indian Child Welfare Act

Child abuse reporting

Department of Interior

Bureau of Indian Affairs

State and local Indian offices

Variations of growth

Weight

Height

Occipital-frontal circumference

Increased incidence of infectious diseases

HIB meningitis
Otitis media
Tuberculosis
Increased incidence of
Autoimmune diseases
Arthritis
Endocrine disorders
Diabetes type II
Gastrointestinal disorders
Lactose intolerance
Psychosocial disorders
Substance abuse
Depression & suicide
Violence
IDM (Infant of Diabetic Mother)
Mongolian spots
Accidental injuries and death
Meaning of congenital disorders
Polydactyly
Oral-facial clefts
Natal teeth
Congenital hip disease
Fetal Alcohol Syndrome

B. Skills

Communication

Inappropriate eye contact

Inappropriate interrogation-style history taking

Patience

Takes time to develop trusting relationships

Practice management

Appointments, cancellations, no-shows

Walk-in policies

Using episodic encounters to promote health maintenance

C. Attitudes

Nonethnocentric

Openness to alternate health system practices facilitating
use of traditional system during hospitalization

Openness to alternate child rearing practices

Nonjudgmental about culturally-based behaviors

D. Barriers

Cross-cultural
Linguistic variations
Educational attainment/experience outside reservation
Facilitative
Telephone
Transportation

E. Advocacy

Supporting education to promote understanding of cultural-based differences among:

Health and social service providers
Hospital and clinic nursing and ancillary staff
Social services agencies
Subspecialty referral sources
Cross covering colleagues

Political

Support of maternal & child health programs for Native Americans

Reservation-based IHS or tribal services
Non-reservation transitional services
Urban Indian Health programs
IHS coverage of non-reservation dwelling Native Americans

Community services

Improved transitional services for non-reservation dwelling Native Americans

Technical support for community-based Native American organizations

References

U.S. Department of Health and Human Services, Regional Differences in Indian Health, 1991.

Honigfeld LS, Kaplan DW. Native American Postneonatal Mortality, *Pediatrics* 80 (4 1987) 575-578.

Sievers ML, Fisher JR. Diseases of North American Indians, in *Biocultural Aspects of Disease*, ed Henry Rothschild 191-252, Orlando, Fl. Academic Press, Inc., 1981.