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Intersectionality, a concept introduced by Kimberlé Crenshaw in 1989, describes the way in which different aspects of an individual's identity (such as race, ethnicity, gender, sexual orientation, ability status, class, etc.) "intersect" to create unique experiences and effects. Its application in patient care is crucial, as it encompasses how diverse identities impact health care delivery and outcomes. A provider informed by intersectionality can better understand and meet patients' needs, mitigating fears of discrimination and malpractice.

The "Big 8" of diverse identities highlights the most discussed aspects: ability/disability, race, ethnicity, nationality, sexual orientation, gender, socioeconomic status, age, and religion. These identities often intersect, leading to varied health care experiences. Individuals with intersecting identities may receive varying levels of care as a result of biases of health care staff. These biases can lead to individuals receiving poor treatment and inaccurate / delayed diagnoses.

Various Identities and Their Impact in Health Care

Although the quality and access to care is improving, there are still disparities. One of the reasons for these disparities is that underrepresented populations often have limited access to health care. In addition, provider biases also affect the quality of care. For example, some providers are more likely to recommend surgery for White patients over people of color due to assumptions or biases about the latter's ability to follow post-surgery care.

These biases also extend across socioeconomic status. According to a study, some health care providers exhibit biases such as thinking that a person with a low socioeconomic background is less intelligent, or less likely to comply with medical advice. The same study found that providers are



also more likely to postpone testing and referrals due to the same bias.

Many patients also face linguistic and cultural barriers. Patients who are not fluent in the dominant language face miscommunication issues regarding their health conditions, treatment plans, and medication instructions, which leads to poorer health outcomes. Another study reported that the use of tools like Google Translate increased patient care and satisfaction by 92%.

Cultural and religious beliefs can also influence willingness to seek care, acceptance of certain treatments, and participation in preventive health measures. Some individuals may be hesitant to take certain medications due to cultural or religious concerns about their ingredients or effects. For example, although blood transfusions are a common practice in life threatening cases, Jehovah's Witnesses refuse blood transfusions which might be necessary because of their religious beliefs. This may cause a gap in their care.

LGBTQIA+ individuals often face discrimination and bias in health care settings. This may affect their willingness to seek care. In addition, providers with limited understanding of LGBTQIA+ patients may not be able to provide appropriate support. Transgender patients, in particular, may encounter health care professionals who lack understanding of their specific health needs, leading to inadequate or even harmful care. According to a study, more than 80% of medical students had bias against lesbian and gay people.

Patients with disabilities frequently encounter physical barriers to accessing health care facilities, as well as attitudinal barriers from health care professionals who may not fully understand how to accommodate their needs. This can result in substandard care and neglect of their broader health issues. A study published in 2020 found that around 84% of providers were biased towards people with disabilities because they viewed them as having a low quality of life due to their disability.

Enhancing Health Care Quality and Outcomes

How can health care providers address the diverse needs of patients? Research has shown that enhancing cultural competence is key to better serving the needs of diverse patients. Cultural competence involves health care professionals acknowledging, respecting, and integrating the diverse cultural backgrounds, beliefs, and practices of their patients into their care approaches. Recognizing the significance of cultural competence is essential for reducing health disparities and ensuring that health care services are tailored to meet the unique needs of individuals from various cultural, ethnic, and social backgrounds.

Promoting Culturally Competent Strategies

Best practices in achieving cultural competence involve (I) training and education, (II) the implementation of inclusive policies and practices, and (III) a commitment to patient-centered care. Training and education play a pivotal role, with cultural competency programs providing health care professionals the necessary tools to navigate diverse cultural needs effectively. Continuous education regarding various identities ensures that health care providers stay informed about evolving cultural perspectives, reinforcing their ability to offer sensitive and inclusive care. Inclusive policies and practices at institutional levels further support cultural competence by creating frameworks that prioritize inclusivity and reflect the diverse backgrounds of both health care providers and patients. Moreover, patient-centered care (i.e., empowering patients in their health care journey, building trust, and fostering collaborative decision-making) is integral in ensuring that the health care experience is respectful, responsive, and tailored to the unique needs of each individual, ultimately leading to improved health outcomes.



Understanding Intersectionality is Key in Patient Care

Indeed, intersectionality's relevance in health care highlights the need for understanding diverse patient backgrounds—encompassing race, gender, socioeconomic status, and more—to deliver effective care. Recognizing and addressing biases and promoting culturally competent strategies are important in reducing health care disparities and ensuring inclusive care. By adopting these practices, health care providers can achieve equitable, respectful, and improved patient outcomes.

Sources

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