

"The challenges facing the modern medicine – communication between different occupational groups und patients"

Let me briefly introduce myself: My name is Hubert Zahnweh and I have been working as a doctor for 40 years, the last 25 years of which, I was the head of the internal medicine department at the Cham hospital which is located just opposite the VHS Cham building.

During this period, I was involved in the rapid progress of the technological development which took place for example

- in the fields of endoscopy,
- in medical imaging such as ultrasound examination, computer tomography and nuclear magnetic resonance spectroscopy,
- in the minimally invasive surgery
- and last but not least in the implementation of IT systems in the medical sector.

All these developments have contributed to a substantial progress of medical diagnostic and therapeutic methods. However, these developments also caused a speed up of medical procedures.

The more we face this technological progress in medicine, I am convinced, the more communication between medical doctors, nurses and patients becomes essential.

It is important that we keep in mind that a patient is not a collection of diagnostic findings but an individual. We have to respect him or her in a holistic way. This means, that apart from the medical issues, we also have to recognize the individual troubles and needs.

1. What will be future developments in the medical sector?

Basically, over the coming years the modern medicine will be more rapid, more effective, more technically oriented such as for the already mentioned medical imaging procedures or also for telemedicine. With view to the developments in science and technology, the modern medicine first of all will become more business-oriented. This is to be seen in the development of the so-called DRGs, the "Diagnosis-Related Groups", a system that classifies hospital cases into specific groups. This system is used in health care financing in many countries. In most cases this means that a certain diagnosis implies a specific number of days at hospital that will be covered by the health insurance system. Doctors, nurses and patients more and more face economic challenges besides the medical diagnosis and care.

Secondly, it is to be stated that there will be more patients at high ages and many of them single persons. This development is caused by the demographic change and will be a challenge, in particular in Germany.

Thirdly, the work in modern medicine will become more multicultural: With view to the patients but also in regards to the medical staff.

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2. What are the future challenges for medical staff?

They will have to process more information in a shorter period of time, they will have to deal with people having different cultural background and/or different native languages and at the same time they will have to provide high-level and quality-assured medicine and medical care.

What kind of support is available to face these challenges?

• There is good vocational training and further training in the field of medicine and medical care

- All kind of IT technologies are available
- People have good foreign language skills

• They are also willing to understand people from other countries and other cultural backgrounds

3. What are the requirements for future communication?

Three groups should (learn how to) communicate with each other, intensively and without any prejudices. These are: patients, nursery staff and doctors.

All of the three groups in the medical field have their own interests, perceptions and awareness. However, for the good of the patients, it is necessary to develop clear processes and procedures.

It is difficult for the nursery staff and the doctors to influence how patients interact among each other, in case there are different nationalities, different beliefs or different opinions on priorities. However, it is important in order to run the daily procedures at hospital smoothly. At present, we can see for example that major conflicts can appear at the emergency rooms in hospitals or in the transit camps for refugees. If there are staff members among nurses and doctors that have the foreign language skills and that are able to communicate in mother language or English with the patients – this is a big advantage.

It is really necessary that nursery staff and doctors are trained in intercultural competences. Nowadays, in many cases they themselves are multicultural teams with different migrant backgrounds. It is necessary to prepare them in their occupational contexts in order to visualize possible conflicts and to develop appropriate strategies for conflict avoidance. Common problems in the daily practice at hospital are for example:

- who can share the hospital room with whom
- problems related to the food offered
- availability of a translator for the specific language
- detailed information of the patient prior to surgery invention
- diversity problems between men and women and/or different hierarchy levels

For successful communication not only language skills but also cultural understanding is required, especially in our growing Europe where we face at present the big challenge of integrating the refugees from the Middle East and Africa.

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The so-called acute medicine, when sudden action is requested, is quite easy to handle with patients from foreign countries. This means for example: assistance for giving birth or treating a broken leg.

The situation gets more difficult for any treatments that involves language:

Some specific topics are for example

- Dealing with psychological trauma patients
- Dealing with children and adolescents without parental care
- Dealing with chronically sick persons, who need continuous support
- Dealing with dying persons and their relatives, dealing with death rituals of different cultures

Additionally, doctors and nursery staff have to deal with unrealistic expectations - not every request can be met. Often the medical and financial possibilities of the hosting countries are overestimated by migrants.

Another critical issue is the topic of hierarchy in healthcare. Here there are completely different ideas of the roles of men and women in medicine, for example who is able to treat whom, who gives instructions to whom.

In order to address all these problems it requires a high level of the language skills and cultural understanding from all the professionals in medical care: doctors and nursery staff.

Both, language skills and intercultural competences are more important in the current political situation than ever before and for this reason they should be continuously trained.

The project "TLC Pack" which will be presented today offers such a kind of training. The free online resources will support the development of foreign language skills and cultural understanding in healthcare. In this way the project will contribute to face the multicultural challenges in modern medicine in Europe.

As a concluding remark I would like to introduce you my personal idea for the future:

It would be worth, developing a special training for so-called "Guides" in the medical sector. These guides would be professionals in the medical sector who themselves have a migrant background.

So they would know about language and intercultural problems. In this way they could guide and train other medical doctors and nursery staff concerning medical questions and intercultural competences.

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