

Cultural Awareness Guidance for Surgeons
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FURTHER ANALYSIS

Cultural Competence of Consultant in Video 2

In Video 2, the consultant shows considerable cultural competence both at the start and during all his interactions with the trainee. He senses, upon entering the coffee room that the trainee is in a distressed state. Instead of reacting negatively to the mistakes the trainee has just made in the appendicectomy and pointing out those mistakes, the consultant brings forth his cultural knowledge and in particular how *not* to worsen an already difficult situation. At the same time, however, the consultant also wants to assist the trainee in improving his surgical skills for the next time he does this procedure.

The consultant, being culturally competent, knows that to transform a potentially difficult interaction around to a more positive one, he has to pay attention to the two universal components of politeness. He knows that if he focusses on these two components and embeds them into his language, both verbally and non-verbally, the trainee will more likely respond and therefore learn from his mistakes. The first component of politeness is the ability to make the other in any interaction feel included, understood and appreciated (Inclusivity or *positive politeness*). The consultant accomplishes this in many ways, as seen below. The consultant also knows about the second component of politeness which is the ability to give consideration to the time and space of the other in any interaction with no or minimal imposition on them (Respect for Non-Imposition or *negative politeness*). The consultant also succeeds in this area, as seen below. Importantly, the consultant is also aware that different cultures place different emphases on each of these components. Each culture considers one more important over the other.

The consultant understands that if he neglects either of those two components of politeness, he risks a negative outcome, or worse, the trainee may not cooperate, he may not learn from his mistakes, or he may remain silent throughout, or he may even become hostile. The consultant therefore skilfully uses both verbal and non-verbal language to demonstrate adequately both components of politeness to try to make positive a potentially negative interaction. Here are some examples of how he accomplishes this:

Consultant's Culturally Competent Strategies:

A: Inclusivity (*Positive Politeness*) - (making the other feel included, understood, and appreciated)

1: Using Inclusive and Friendly Language

Inclusive language includes language which displays frequent use of the first person pronouns e.g. *we*, *our*, *us*, and so on, to give the impression of inclusivity. It is important to use this language to denote togetherness and to reduce feelings of separation. In Video 2, the consultant uses a lot of inclusive and friendly language. He knows that if the trainee feels as if he is working with him, rather than demanding the trainee to work 'for him,' the trainee is more likely to take notice of his instruction. Even the use of the slang word, e.g. 'Yep', indicates a desire to speak a common language with trainee. Here are some examples of the consultant's use of inclusive and friendly language in the dialogue:

Examples in dialogue:

- *'...once we slowly go through the steps of this procedure' and 'Let's discuss those reasons together when we meet to go through the steps of the procedure, the one from my teaching session. Would you like to do that? We could look at the errors, how they occurred and together work out a way for a more successful appendicectomy.'*
- *'I could go through the notes with you if you like?'*
- *'Let's see.... but I'm sure we can find a time'*
- *'How do you think we can improve on some of the mistakes that happened today in the operation just now?How can we get it right, do you think?'*
- *'OK,good',*
- *'Yep..... The 15th?.....I don't see why not. (Here the consultant is willing to fit in with trainee's timetable)*

2: Showing Understanding and Empathy

Language which shows understanding and empathy of the other's situation in any interaction is so important, as it fosters closeness and also lowers anxiety levels. In this scenario, the consultant knows that if he sensitively conveys understanding of why the trainee has made those mistakes in the procedure, and even better if he empathises with him, the trainee is more likely to want to improve his skills for the next time. To further reinforce his understanding and empathy, the consultant communicates his belief in the trainee's innate surgical ability, despite his recent mistakes. This is so reassuring for an under-confident trainee. Here are some examples of how the consultant accomplishes these important skills:

Examples in dialogue:

- *'Sometimes, when I'm giving demonstrations, it's easy to forget that some trainees have only just begun their training and it may be hard for them to take in everything in one go' (Shows empathy and understanding)*
- *'I'd like to see you do a good appendicectomy next time, as I know you're capable of it.'* (Shows belief in trainee's ability)
- *'It's a lot to take in, I know.'* (Shows understanding)
- *'Do you want to go over it later on, when you've had a chance to recover?'* (Shows giving trainee option to choose time to discuss)

- *'When he realises trainee's response is not forthcoming, he fills the gap by continuing in a friendly way'* (Shows consultant taking control and steering the conversation when he realises it is necessary and at the right time)
- *'Taking him into a private room so others cannot overhear trainee's admissions of errors subsequent discussion of his errors'*. (Shows consultant giving consideration of trainee and an understanding of his delicate situation)

3: Joking

Making light of an interaction, especially if there is potential loss of face as in this scenario, helps to lower anxiety and increase comfort levels. Learning will more easily take place if anxiety levels are lowered and comfort levels increased. A closer and more positive relationship between trainer and trainee will also occur, if there is joking and laughing between them. In this scenario, the consultant makes a definite effort to lighten the load, and make the trainee feel more relaxed. Here are some examples of how he manages to do this:

Examples in dialogue:

- *'your head is probably swimming now!'* (shows consultant attempting to lighten the interaction with understanding and empathy)
- *'.... But, that's my job as a trainer' (laughs).*

4: Giving compliments

Giving compliments in any interaction immediately demonstrates inclusivity and appreciation of the other. Compliments can also foster good working relationships between trainer and trainee, especially if those compliments are directed towards the surgical skills of the trainee. The trainee is more likely to learn from his mistakes if the trainer compliments him on parts he did well. In this scenario in Video 2, the consultant succeeds in finding out the good in a lot of bad and makes sure he communicates that to trainee. Here is an example:

Examples in dialogue:

- *'don't forget you also did a couple of things during the procedure today that were good.' And I was impressed with that. And, ... as well.... you mobilised the appendix safely.....that was good and 'your post op notes were honest and comprehensive. Good work!' and 'Yes, you did well in certain parts' (shows consultant pointing out good points of trainee's work)*

5: Reducing Power Distance

Learning can more effectively take place when there is a reduction or even an absence of power and status differences between teacher and learner. Sometimes, such differences between trainer and trainee, if not addressed, actually inhibit learning and positive interactions. This consultant, being culturally competent, knows that if he is seen by the trainee to be reducing those power differences by his body language and verbal language, the trainee will respond accordingly. Learning will more easily take place and the interaction will be improved. Below are

some of the many examples in the scenario in Video 2 of how the consultant skilfully achieves this:

Examples in dialogue:

- The consultant finds another empty room to talk in private with trainee.
- The consultant pulls two chairs together to signify that they are both on same status level, making trainee feel comfortable in this potentially awkward interaction.
- The consultant also offers the trainee some coffee and as well, he gets it from the machine and gives it to him.
- The consultant only takes out his mobile phone at the end of the interaction when they need to make another time to meet up. He does not speak to trainee while simultaneously looking at/speaking into a phone while only half concentrating on the dialogue between them.
 - Consultant's voice is non-threatening, warm and enquiring and his speech is clear and slow.
 - Consultant makes a conscious effort to use simple terminologies and expressions so that the trainee, from another culture, will be more likely to understand
 - The consultant does not give lectures, or issue orders or demand answers or explanations of trainee. The consultant does not display any bullying behaviour.
 - Use of smiling by consultant engenders feelings of friendliness and approachability.

Having succeeded in achieving the right circumstances in which the trainee now feels as if he is understood, included with the consultant, as part of a surgical team and even appreciated, the consultant must now also address another important area of politeness: respecting the trainee's time and space and world. The consultant knows that this is necessary to fully enable an awkward and potentially negative interaction to be transformed into a more positive one for both of them.

B: Respect for Non-Imposition (*Negative Politeness*) – (consideration of the other's time and space with minimal imposition)

1: Considering/Respecting trainee's work and world

Consideration of the work, world and time of the other in any interaction is vital for good relationships, especially between trainee and trainer. It shows an understanding of how busy the other may be, and of other pressures/jobs/considerations he may currently have and to not impose on those pressures. In this scenario, the consultant shows consideration of the trainee's time and world by consulting him in several ways for his approval, thereby minimising imposition. Here are some examples:

Examples in dialogue:

- *'he chooses his words carefully to avoid any misunderstanding'.*
- *'OK....if you'd rather wait for another time, I'll make a note of that'.*
- *'Only looking at his phone to organise a mutual time for follow up e.g. Consultant smiles as he looks at trainee and then gets out his phone for the first time and checks his online diary'*
- *'Is that OK for you?'*

2: Giving Choice to trainee including Offering

Giving choice is one of the three main rules of politeness. It demonstrates a consideration and respect of the world, preference and time of the other. The act of offering demonstrates the reluctance of the consultant to impose on trainee's person or time. In this scenario in Video 2, the consultant offers so much: some coffee, a private room, a chair, a smile, understanding, a chance to explain, a date to meet up, a private lesson, and a willingness to fit into trainee's timetable. Here are some examples from the dialogue:

Examples in dialogue:

- *'Well, do you want to talk about what happened in the theatre just now? Or, do you want to go over it later on, when you've had a chance to recover?'*
- Offering and making trainee cup of coffee himself– trying to improve his emotional state, respecting his world and person, and trying to make trainee comfortable as much as possible.
- Offering a date to meet up and checking availability with trainee.
- Fitting in with trainee's alternative date.

3: Protecting face – trainee's and registrar's

A culturally competent surgeon always considers how the trainee will react to potentially damaging news or negative situations and make allowances for that. He/she will show an understanding that failures or what are perceived as failures could have devastating effects on some trainees from other cultures. The culturally competent surgeon, in those situations, allows the trainee to escape metaphorically, from those potentially disastrous reactions. In Video 2, the consultant shows such an understanding by for example, making excuses for trainee, respecting an absent colleague (*Registrar*), and canvassing together how they both could improve on the mistakes made in the surgical procedure, almost as if the consultant were partially responsible for the mistakes himself. Here are some examples:

Examples in dialogue:

- *'Or was there too much to absorb in one session?'* – (Gives trainee option to opt out)
- *'Not criticising the Registrar in front of trainee, instead, supporting a professional colleague in his absence when there may be doubt cast about some of his actions.'* (Shows professional respect)
- *'Well, yes, that's true'* (Showing agreement with trainee)
- *'There's probably lots of reasons why these errors occurred'* (Makes allowances for the mistakes of trainee)
- *Did you manage to understand my demonstration? Or was there too much to absorb in one session?* (Consultant gives trainee a line of escape, to save face).

- *'How do you think we can improve on some of the mistakes that happened today in the operation just now?How can we get it right, do you think?'* (Shows inclusivity)
- The consultant realises that some trainees from other cultures may not be comfortable giving presentations/teaching sessions, as those skills are not prized, and therefore not developed in those cultures. He therefore waits till a more appropriate moment to broach again this subject with trainee: *'.....OK.....if you'd rather wait for another time, I'll make a note of that.'*

4: Showing Patience

Showing patience and tolerance for trainee's behaviour is another way of respecting/considering the trainee's work, time and person. The culturally competent consultant understands this and makes allowances for the extra time needed by the trainee to accomplish surgical procedures and even to express his own version of events. In Video 2, the consultant shows patience and tolerance by these examples:

Examples in dialogue:

- *'waits till trainee finishes 'his confession' – (consultant shows patience)*
- Consultant speaks respectfully about the Registrar to trainee and does not jump to conclusions hastily about his teaching of this procedure. The consultant is therefore respecting the Registrar's work and person. The consultant is also tolerant of the Registrar's actions for the time being, and demonstrates patience in getting to the bottom of the story.
- Asking questions to give a choice to trainee of whether to talk about his mistakes now or later.
- The consultant is patient with trainee and waits for him to finish his sentences without cutting in, for example, *'waits till trainee finishes 'his confession''*

5: Use of Indirect Language

Indirect language is used to protect and save face. The culturally competent surgeon knows that and uses indirect language to avoid any potential confrontations or unpleasantness. He/She also uses indirect language to respect/consider the other's time and space, as fewer impositions are made. Indirect language is characterised by such linguistic methods as hinting, suggestion and concerns for non-imposition, to convey messages. In Video 2, the consultant uses indirect language to convey his messages at just the right places. Here are some examples:

Examples in dialogue:

- Consultant indirectly proposes suggestion for trainee that he believes would be good for trainee's development e.g. *'I've got an idea'.... What do you think about giving a small teaching session on the parts you did well to the other trainees in your placement at our main class in General Surgery on Friday?*
- Consultant indirectly asks of trainee: *'Did you manage to understand my demonstration? Or was there too much to absorb in one session? And also 'What do you think about giving a small*

teaching session on the parts you did well to the other trainees in your placement at our main class in General Surgery on Friday?’

Conclusion

As evidenced by the final thought of both the consultant and the trainee, this interaction has been successful. The consultant has managed to steer this difficult interaction into a positive and productive exchange. He has achieved this by his skilful use of language, both verbal and non-verbal, to embed the two universal components of politeness. He understands if the trainee, even after such disastrous beginnings as in Video 2, feels included, understood and even appreciated, that he will learn from his mistakes. The consultant also knows that he must not impose too much on the trainee’s time and world especially at this delicate time – either by requesting, and certainly by not demanding: time, knowledge, teaching sessions or sudden surgical improvement.

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