

From: Michigan Chapter of the American College of Cardiology <accmi@wildapricot.org>
Sent: Wednesday, August 25, 2021 5:26 PM
To: Alice Betz
Subject: President's Message: D&I and the Platinum Rule

PRESIDENT'S MESSAGE



Dear Colleagues,

Our nation and our professional society have elevated and prioritized inclusion and diversity more than ever. We have recognized our societal shortcomings, from systemic racism to a lack of diversity in many sectors of our lives. The time is now to better understand and address these challenges.

I recently had the opportunity to participate in a **Cultural Intelligence (CQ)** training program that included an assessment of my ability to function effectively in a variety of cultural contexts. I thought I would share some of the insights I gained from this experience in hopes that we can all use the lessons learned as we strive to promote diversity and inclusion. The ability to recognize and understand our own biases is an important step towards managing these biases as we work with others across a spectrum of cultural contexts.

Just as Apple's 1997 "think different" motto came to permeate much of our culture, it is important to cultivate the notion of "thinking differently" about our personal competencies and how we work and relate to people who are different from us.

What is CQ? It is simply an individual's capability to work effectively in a variety of cultural contexts (national, ethnic, organizational, generational, etc) CQ is important for leadership and relationships, but the same principles apply to the care of culturally diverse patient populations.

The skill sets for CQ includes four primary capabilities: Drive, Knowledge, Action, and Strategy. These capabilities help us to manage unconscious bias.

- CQ Drive is the extent to which an individual is energized and persistent in their approach to multicultural situations. Individuals with a high CQ drive are motivated to learn and adapt to new and diverse cultural settings.
- CQ Knowledge is the degree to which individuals understand how culture influences thinking and behavior and are familiar with multiple cultures. Those with high CQ Knowledge understand how culture can shape behavior.

- CQ Strategy recognizes the skills to plan, recognize and adapt to cultural differences for effectiveness.
- CQ Action requires the ability to modify manner and content of communication, (e.g. direct and indirect), verbal behaviors, and nonverbal behaviors appropriate to different cultures and settings.

Two characteristics serve as examples to highlight why CQ is important in health care.

- One is how we communicate. Communication style can be characterized from low context/direct (explicit verbal communication) to high context/indirect (emphasis on tone and context). I am on the direct side of this continuum and occasionally get “constructive feedback” about tone and context. It is a trait of mine that garners both compliments and criticism. Understanding both my style and that of my colleagues and patients is essential for effective communication.
- A second characteristic relates to emotions in communication which range from a neutral non-emotional approach vs an affective/expressive approach where feelings are readily shared. Some cultures and individuals may strongly favor one or the other extreme. I’m sure you can identify these characteristics in yourself, your colleagues and co-workers. Recognizing and understanding these differences in ourselves and others brings us closer to harmony, acceptance, and understanding of others.

This program had me thinking about the overly simple golden rule we all learned as children, “do unto others as you have them do unto you “; a rule supplanted by the platinum rule of “doing unto others as they would want done to them”. Indeed, the platinum rule should prevail, respecting and understanding our differences. Thinking about your cultural intelligence is just one step in this direction.

David

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