

Health Care & World Religions Series
South Asian Hindu and Health Care
Tuesday, October 10, 2006 (8:30a.m. - 12:30)

ACHIEVEMENT OF PROGRAM GOALS

1. I have a better understanding of how the religions and cultural traditions of South Asian Hindu immigrants affect how they perceive and access health care.

0 Rated 1 0 Rated 2 0 Rated 3 4 Rated 4 13 Rated 5

Mean 4.76

2. I have expanded my current biomedical paradigm(s) of health and healing, especially mental health, to include wellness and health beliefs and practices from diverse faiths into a holistic model of health care delivery.

0 Rated 1 0 Rated 2 3 Rated 3 3 Rated 4 11 Rated 5

Mean 4.47

3. I believe today's session provides a useful educational model for introducing health care practitioners around the state to the gifts and challenges associated with religious and cultural diversity.

0 Rated 1 0 Rated 2 0 Rated 3 2 Rated 4 15 Rated 5

Mean 4.88

ACHIEVEMENT OF LEARNER OBJECTIVES

4. I can approach patients with confidence that "difference as a potential barrier" can be turned into a "stepping stone toward cultural competency" for the purpose of effective health care delivery.

0 Rated 1 0 Rated 2 1 Rated 3 5 Rated 4 11 Rated 5

Mean 4.59

5. I can approach patients of minority populations with greater understanding of their uniqueness as new immigrants in the St. Cloud area.

0 Rated 1 0 Rated 2 0 Rated 3 6 Rated 4 11 Rated 5

Mean 4.65

6. I acquired knowledge of South Asian Hindu immigrants' historical geographic and demographic specificities with respect to health care.

0 Rated 1 0 Rated 2 0 Rated 3 6 Rated 4 11 Rated 5

Mean 4.65

7. I can articulate three to five key specifics of the religion and culture of South Asian Hindu immigrants as they relate to health care concerns.

0 Rated 1 0 Rated 2 1 Rated 3 5 Rated 4 11 Rated 5

Mean 4.59

8. I met at least two resource persons from Central Minnesota belong to the South Asiaan Hindu community.

0 Rated 1 0 Rated 2 0 Rated 3 8 Rated 4 9 Rated 5

Mean 4.53

9. I am more aware of cultural competency best practices for health care professionals based on what i learned about the South Asian Hindu religion and culture.

0 Rated 1 0 Rated 2 0 Rated 3 7 Rated 4 10 Rated 5

Mean 4.59

OVERALL PROGRAM EFFECTIVENESS

10. The information/activities helped me learn.

0 Rated 1 0 Rated 2 1 Rated 3 3 Rated 4 13 Rated 5

Mean 4.71

11. The program was well organized.

0 Rated 1 0 Rated 2 0 Rated 3 3 Rated 4 14 Rated 5

Mean 4.82

12. The material was appropriate

0 Rated 1 0 Rated 2 0 Rated 3 4 Rated 4 13 Rated 5

Mean 4.76

13. The amount of information met my needs.

0 Rated 1 0 Rated 2 1 Rated 3 5 Rated 4 10 Rated 5

Mean 4.56

14. My attendance at this program was beneficial to me

0 Rated 1 0 Rated 2 0 Rated 3 4 Rated 4 13 Rated 5

Mean 4.76

15. I will be able to implement the ideas I learned.

0 Rated 1 0 Rated 2 1 Rated 3 3 Rated 4 13 Rated 5

Mean 4.71

RATING OF SPEAKERS (Teaching effectiveness, knowledge of subject matter)

16. Kusum Saxena, MD

0 Rated 1 0 Rated 2 0 Rated 3 4 Rated 4 13 Rated 5

Mean 4.76

17. Rupesh Modi

0 Rated 1 1 Rated 2 0 Rated 3 2 Rated 4 14 Rated 5

Mean 4.71

18. Krishna Saxena, MD

0 Rated 1 0 Rated 2 1 Rated 3 3 Rated 4 12 Rated 5

Mean 4.69

Surendra Chaudhary, DVM, MS

0 Rated 1 0 Rated 2 1 Rated 3 5 Rated 4 11 Rated 5

Mean 4.59

SETTING

19. The room set-up was appropriate.

0 Rated 1 0 Rated 2 2 Rated 3 3 Rated 4 12 Rated 5

Mean 4.59

OVERALL PROGRAM RATING

20. Overall rating of this session.

0 Rated 1 0 Rated 2 1 Rated 3 2 Rated 4 14 Rated 5

Mean 4.76

Comments/Suggestions:

- Did not find the role play helpful. The older members of the panel seemed far more knowledgeable than Mr. Modi. Dancing and music were wonderful. I find myself a bit confused by Mr. Reuter's rather casual attitude about the removal of the crucifix from the wall of a Catholic hospital. Certainly the care rendered proclaims the Catholic faith but that care is not Catholic unless it is rooted in the love represented by Christ's sacrifice on the cross. I am not opposed to making accommodations to make a sick person more comfortable and there may be times when it is appropriate to remove a religious symbol but one would hope that such removal would not be a

casual or trivial thing. In removing the crucifix would you then forbid staff to wear a cross when approaching the patient? Isn't this somewhat like the recent move by the French government to forbid Muslim girls wearing head scarves in public schools? It just seems like a more complex issue and I don't think it was treated that way.

- Thank you wonderful program!
- Well done! Very helpful
- It's cold in the room
- Suggest- each culture a list of contacts what that person can help with, phone numbers. For snack offer protein- cheese, yogurt, peanut butter, bagels, cream cheese.
- Thank You!
- Thank you for sharing dance of life and showing dresses

Please indicate future topics/speakers that would be of interest to you.

- [none]

Bar Graph

