American medical culture is "clock-time" driven. Though time is money for nearly every business in our society, U.S. health care is especially appointment-driven. Statistically, there are more no-shows for appointments among lower income (Medicaid and CHP+) patients. While there is no doubt that cultural differences often contribute to the problem, socio-economic realities for families are a crucial co-factor. The way hospitals and clinics communicate with their patients may not eliminate no-shows, but can make a difference in reducing the rate of missed appointments. Better communication begins, as always, with understanding the values and beliefs that drive people's behavior. In this article we look at the relevant cultural values and beliefs as well as the kinds of life circumstances that often underlie a pattern of missed appointments.

**Contributing Factors and Related Dimensions of Culture**

**Contributing Factor 1: Preventive Medicine is an Unfamiliar Concept**
In many societies around the world, there are immediate treatments for illness and injury, but
Contributing Factor 2: Who Controls Our Well-Being?

It is also important to remember the dimension of culture "control over destiny." For people who have a strong belief in fate and karma, what happens to them in life - good or bad luck, health or illness - is in the hands of their higher power. Therefore, self-management of one's health for a better future outcome won't drive behavior in significant ways. (Even Americans who, by comparison, believe that control over destiny lies with themselves, are slow to make appointments for routine physical exams. And how many of us keep putting off that visit to the dentist for a routine cleaning?) It is useful to keep in mind that culture and religion are two sides of the same coin; many beliefs associated with fate and karma are based on religious principles and, for that reason especially, can not be effectively dismissed by outsiders. It is important to show respect for people's beliefs, but also to explain that perhaps a "higher power" has also made western medicine available. Western medicine's focus on prevention should also be explained. In what way is prevention important and effective?

Contributing Factor 3: Status of Health Care Professionals

Consider another cultural component in the case of the mother who keeps missing her well-child checks. This mom probably nods in agreement when her doctor tells her to schedule the next check-up. She does not ask the doctor why she should bring her healthy child back in two months' time unless the baby gets sick. She doesn't want to waste any more of her doctor's time. She follows his instructions and makes the next appointment at the front desk. She does not write down the appointment. When the receptionist hands her a card with the appointment time written on it, she tucks it in her pocket. She nods and smiles pleasantly but not really looking forward to the next visit in a committed way. She is going through the motions to please people; she feels she needs to do this if she wants to remain a patient of the doctor she likes. A day before the appointment, she has forgotten about it until a reminder call comes from the doctor's office. Her child is healthy and happy. She thinks it will be a waste of the doctor's time to take the boy in. She also thinks that if she doesn't show up, the line of patients waiting for the doctor will be shorter. Where she came from in Mexico, there was a daily sign-up sheet at the clinic.

Contributing Factor 4: Time Control/Management

As stated at the very beginning of this article, Americans have a very specific attitude about time. We manage time down to the minute. Our healthcare appointments are based on absolute time, whereas in many societies healthcare is much more informal. Appointments work like general admission. People who are more relaxed about managing time often do not keep calendars - on paper or electronic devices. They certainly don't track their personal/family time which is typically the most important aspect of their lives. Often, a parent isn't prepared to write down the next appointment in a calendar when she is standing in the doctor's office. When a practice calls the day before an appointment as a reminder, the person may have forgotten all about it and simply can't arrange transportation with only a day's notice.

Why wouldn't a person in this situation explain their predicament and ask to re-schedule? A parent’s explanation might sound something like this: "Well I hoped somehow I would find someone to take me. I was still trying to get my cousin to help me even when I was already late to the appointment. But when I knew I couldn't go, I was afraid to call the doctor. They would be angry with me."

An added note: We all know people who just don't check their messages frequently, don't return calls, don't read their email and respond. Individuals vary greatly with respect to these behaviors - no matter what culture they come from. There may be important messages from a
doctor's office lost in a long backlog of voice-mail messages on someone's phone. Their phone service may even be cut off. When patients/families have low English proficiency, low literacy and low health literacy, relying on voice mail messages can be very problematic.

Contributing Factor 5: Money Problems
Recently, I overheard an exchange between the front office staff at a practice in Denver where a father had shown up with his son for an appointment only to discover there was an outstanding balance of $800 that needed to be paid before the doctor would see his child. I worried. In these economic times, what if the dad is out of work? How humiliating it would be if he couldn't pay. But this is the way our system works in the U.S. In many other places in the world, "condition" determines care, not money or proof of insurance. In some cultures, the doctor can establish a more personal relationship with patients/families over time. Everything is much more informal. A physician or community healer may allow patients to pay in increments and will still continue care. And of course the economic reality in our own system is that people who have credit cards can pay incrementally over very long periods of time. Those who struggle to establish credit and those who have exceeded their credit limits do not have this option.

IMPORTANT NOTE: Even with Medicaid, families can have outstanding balances that will prevent them from showing up for an appointment. Medicaid is retroactive only three months. Any bills pre-dating the three month period are the responsibility of the patient. CHP+ does not have any retroactive period at all. The shame of owing money to an authority figure like a doctor would be significant for many people.

Contributing Factor 6: Transportation Problems
Finally, transportation challenges contribute to no-shows. Imagine not owning a car or sharing a car among numerous family members. Imagine if you are a woman and your culture dictates that women can't drive themselves. Perhaps you can't get a male family member to take you. What if you can't afford gas? If you have no choice but public transportation, it won't be as convenient as a taxi. Imagine walking to a bus stop, pushing a stroller in summer heat or winter snow. Imagine waiting for a bus that is late or never comes. Imagine having to navigate the bus with a baby in a stroller and one or more toddlers in tow. It isn't likely patients will call the doctor's office to explain their problems. They may want to avoid a conversation with a busy front office receptionist. Or, perhaps their situation produces shameful feelings in them. Too often, people will avoid a situation entirely by not calling, not showing up, not rescheduling.

Summary
While there is no doubt that cultural differences may contribute to the problem of missed medical appointments, socio-economic realities for families are a crucial co-factor. The way providers and staff communicate with patients may not eliminate no-shows, but can make a difference in reducing the rate of missed appointments.

In pediatric care, well-child checks are key to the prevention of many health problems, but parents from different cultural backgrounds may not understand the concept of preventive medicine at all. They may assume that if their child appears healthy, there is no reason to visit a doctor. They will miss an opportunity to gain important information about their child’s nutrition, sleep, safety, infectious diseases that are going around, etc. Culturally-based beliefs and behaviors about a person's control over their own destiny, the status of doctors versus
patients, and individual time control may also contribute to missed appointments. In helping families understand the concept of “preventive care” practices and clinics can help raise health literacy and ultimately reduce health disparities.

**Note:** We offer a **Well-Child Check handout** in English and Spanish designed to help parents understand the importance of scheduling and meeting important preventive care appointments.

Go to www.dimensionsofculture.com and click on publications on the main page. Then select Handouts for Patients.

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