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Original Article

Culturally Responsive Health Services at Banjang Community Health Center

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ABSTRACT

Background: This study describes health workers' perceptions, readiness, and experiences in providing culturally diverse-based services at Banjang Community Health Center. Such services are essential for inclusive and equitable healthcare that respects patients' differences in ethnicity, religion, culture, language, and personal habits.

Method: A descriptive quantitative method was used with open-ended questionnaires completed by 21 health workers, including medical staff, midwives, nurses, and administrative personnel. Data were analyzed descriptively by categorizing responses and identifying themes from six main questions.

Result: Results indicate that health workers understand the importance of cultural diversity, are prepared to serve patients from various backgrounds, and demonstrate empathy, effective communication, patience, and professionalism. Support from leadership and colleagues strengthens an inclusive work environment, although challenges such as language differences and local customs remain.

Conclusion: Recommendations include cross-cultural communication training, facility improvements, dissemination of diversity policies, and regular evaluations.

INTRODUCTION

Indonesia is a country with a high level of cultural diversity, including in the health service sector. Community Health Centers (Puskesmas) as primary healthcare facilities hold a strategic role in ensuring that every patient receives fair and dignified services regardless of ethnicity, religion, language, customs, or social status [1]. In the context of Puskesmas Banjang, which serves communities from various backgrounds, culturally responsive healthcare services are essential to ensure an approach that is safe, humane, and attentive to patients' values [2].

This study aims to describe the perceptions, readiness, and experiences of healthcare workers in providing culturally responsive services, as well as organizational support and challenges encountered in practice. The focus of this activity is related to previous educational and capacity-building efforts conducted by the

Puskesmas to improve service quality, but it specifically emphasizes mapping the cultural competence of healthcare worke[3]. Therefore, this study contributes significantly to formulating future strategies for culturally inclusive service improvement.

The novelty of this study lies in the direct mapping of perceptions, readiness, unique experiences, and training needs of healthcare workers using a comprehensive open-ended questionnaire. This approach provides contextual insights into service practices within a multicultural setting . As a conceptual foundation, the cultural competence frameworks described by Leininger and Campinha-Bacote are relevant in supporting the analysis, emphasizing cultural awareness, cultural knowledge, and cultural skills in delivering inclusive care [4].

METHOD

This activity employed a qualitative descriptive approach to explore healthcare workers' perceptions and readiness in providing culturally responsive healthcare services at Puskesmas Banjang. Data collection was conducted using an open-ended questionnaire designed to obtain in-depth information regarding participants' experiences, attitudes, and perspectives toward inclusive healthcare practices.

The questionnaire consisted of six key questions that focused on healthcare workers' perceptions of culturally responsive services, readiness to serve patients from different cultural or religious backgrounds, unique cross-cultural experiences encountered during healthcare delivery, important attitudes and skills required for inclusive services, support received from leadership and colleagues, and suggestions for improving healthcare services.

The participants in this activity were 21 healthcare workers at Puskesmas Banjang, including medical personnel, midwives, nurses, and administrative staff. Respondents were selected using a total sampling approach to ensure representation from various professional backgrounds within the healthcare facility. Prior to data collection, coordination was carried out with the management of Puskesmas Banjang to obtain permission and facilitate the implementation process.

The implementation stages began with the preparation and validation of the open-ended questionnaire according to the objectives of the activity. After coordination with the healthcare center, the questionnaires were distributed directly to all respondents. Participants were given sufficient time to complete the questionnaire independently and voluntarily. The completed questionnaires were then collected and compiled for further analysis.

Data analysis was conducted using descriptive thematic analysis. The responses obtained from participants were reduced, categorized, and identified based on recurring themes relevant to the objectives of the study. The analysis process involved reviewing all responses, grouping similar statements, identifying major themes, and interpreting the findings descriptively. The final stage of the activity involved the preparation of a comprehensive activity report summarizing the findings and recommendations for improving culturally responsive healthcare services.

This activity did not involve laboratory procedures or special technical equipment. The primary tools used were the open-ended questionnaire, writing materials, and a laptop for data compilation and analysis..

RESULT AND DISCUSSION

A total of 21 healthcare workers at Puskesmas Banjang participated in this activity, consisting of medical personnel, nurses, midwives, and administrative staff. The thematic analysis identified several major themes related to culturally responsive healthcare services.

Most respondents demonstrated a good understanding of culturally responsive healthcare services. Participants emphasized that healthcare services should be delivered without discrimination and

should respect patients' cultural backgrounds, including ethnicity, religion, language, and customs. Respondents highlighted the importance of creating an inclusive healthcare environment that values respect, empathy, and tolerance.

Several participants stated that healthcare workers should adapt communication styles and service approaches according to patients' cultural needs. Respondents also expressed that respecting cultural diversity is not only a professional obligation but also an important aspect of humane and ethical healthcare practice.

Table 1. Summary of Key Findings

Theme	Main Findings	Example
Perceptions of Culture-Based Religious Services	Healthcare workers understand inclusive care as service delivery without discrimination and respect for differences in culture, religion, language, and customs.	Service provision for patients with diverse conditions in terms of ethnicity, culture, customs, language, and religion
eadiness to Provide Care for Patients from Diverse Cultural and Religious Backgrounds	Most respondents reported being prepared and accustomed; the main barriers were language and certain specific cultural practices.	They are always prepared due to prior experience in serving patients. If patients speak Javanese, it is advisable to have staff who are proficient in the Javanese language.
Unique Cross-Cultural Care Services	Experiences related to traditional practices, language barriers, family involvement in decision-making, and other cultural variations	A child experiencing seizures was treated with shrimp paste; patients with speech impairments require companions; medical decisions are made by family members.
Essential Attitudes and Skills	Empathy, effective communication, patience, politeness, professionalism, and non-discriminatory attitudes toward patients.	Service delivery characterized by patience and sincerity, with respect for differences.
Leadership and Peer Support	The majority perceived strong support from leadership and colleagues; however, diversity socialization needs to be strengthened.	Leaders provide positive role models, and staff members support one another.
Recommendations for Service Improvement	Competency training, facility improvement, discipline,evaluation, and the strengthening of a culture that values diversity.	Communication training, adequate facilities, professionalism, and the principle of equal treatment without favoritism

Readiness to Serve Patients from Different Cultural or Religious Backgrounds

Most respondents reported feeling ready and comfortable serving patients from diverse cultural and religious backgrounds. Common responses included statements

such as "normal," "no problem," and "stay friendly," indicating positive attitudes toward inclusive service delivery. Some healthcare workers mentioned that communication barriers and differences in local customs occasionally required additional patience and adaptation.

Several respondents emphasized the importance of professional ethics and respectful communication regardless of patients' backgrounds. Others noted that familiarity with local languages and previous cross-cultural experiences helped improve

their confidence in interacting with patients from different communities.

Unique Cross-Cultural Experiences

Participants shared several unique experiences encountered while serving patients from diverse cultural backgrounds. Some healthcare workers reported situations involving traditional healing practices or local beliefs, such as elderly patients requesting traditional remedies or families asking for culturally specific practices during patient care.

Language barriers were also frequently mentioned, particularly when patients had limited proficiency in Indonesian and required the assistance of family members or interpreters. In several cases, healthcare workers described how healthcare decisions were strongly influenced by family leaders or community elders rather than by individual patients [5,6].

Other respondents described encounters with patients who requested treatment according to certain cultural or religious preferences. These experiences highlighted the need for flexibility, patience, and culturally sensitive communication in healthcare services.

DISCUSSION

The findings of this activity indicate that healthcare workers at Puskesmas Banjang generally possess positive perceptions and readiness toward culturally responsive healthcare services. Most respondents demonstrated awareness of the importance of respecting cultural diversity and providing healthcare services without discrimination. This finding suggests that healthcare workers recognize cultural sensitivity as an essential component of quality healthcare delivery [7–9].

The positive attitudes shown by participants may contribute to better patient-provider relationships, improved communication, and increased patient satisfaction. Respect for patients' cultural and religious backgrounds can help create trust between healthcare providers and the community, particularly in multicultural settings. Similar findings have been reported in previous studies, which emphasize that culturally responsive healthcare improves patient engagement and healthcare outcomes [10–12].

Despite the generally positive perceptions, several challenges were identified, particularly regarding language barriers and differences in cultural practices. Communication difficulties may affect the accuracy of information exchange and potentially influence patient understanding of medical advice. This finding highlights the importance of developing communication skills and providing additional support, such as interpreters or culturally adapted health education materials [13–15].

The experiences shared by respondents also demonstrate that cultural beliefs and family involvement continue to play an important role in healthcare decision-making. [16] In many communities, family members and local traditions strongly influence patients' choices regarding treatment and care [17]. Healthcare workers therefore need not only clinical competence but also cultural competence to negotiate healthcare decisions respectfully while maintaining professional standards [18].

Furthermore, support from leadership and colleagues was considered important in strengthening healthcare workers' confidence in delivering inclusive services. Institutional support, training opportunities, and a respectful workplace environment may enhance healthcare workers' ability to provide culturally sensitive care effectively [19–21].

Overall, the findings suggest that culturally responsive healthcare services at Puskesmas Banjang have been implemented positively, although continuous improvement is still needed[22–25]. Regular training on cultural competence, communication skills, and patient-centered care may further strengthen healthcare

workers' ability to address the diverse needs of the community [26-31]

CONCLUSION

This activity demonstrates that healthcare workers at Puskesmas Banjang possess good understanding, high readiness, and adaptive experiences in providing culturally responsive healthcare services. Challenges such as language barriers, traditional practices, and differences in communication patterns are still encountered; however, these can be addressed through empathy, effective communication, and professionalism. Support from leadership and colleagues also strengthens the culture of inclusive service. For future community service activities, it is recommended to conduct cultural competence training, improve facilities, and reinforce organizational-level diversity policies.

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