

EMS Protocol–Friendly Cultural Reference

Patients from Cabo Verde (Cape Verde)

Purpose: Support effective communication, informed consent, and safe decision-making while maintaining EMS protocol and medical control requirements.

Communication Guidance

- Use **calm, respectful, professional language**.
- Speak slowly; avoid jargon and idioms.
- Ask early about preferred language (Portuguese, Kriolu, English).
- Use interpreter services when understanding is uncertain.

Example:

“I want to explain what we recommend and the risks. Please tell me what you understand.”

Assessment Considerations

- Pain and symptoms may be understated.
 - Emotional distress may be communicated through family members.
 - Use objective findings and reassess as needed.
 - Do not rely solely on patient demeanor to determine acuity.
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Transport & Refusal Considerations

- Patients may defer decisions to family or clinicians.
 - Ensure:
 - Patient capacity is assessed
 - Risks and benefits are clearly explained
 - Patient understanding is confirmed using teach-back
 - Obtain consent from the patient whenever possible.
 - Document per protocol.
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Treatment Expectations

- Patients often expect **clear guidance** from EMS providers.
 - Explain:
 - Why interventions are needed
 - What sensations or side effects to expect
 - Provide factual reassurance.
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Family & Bystanders

- Family involvement is common and culturally appropriate.
 - Families may advocate strongly.
 - Maintain patient autonomy and scene safety.
 - Set boundaries if family involvement interferes with care.
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EMS Best Practices

- ✓ Maintain respectful, confident demeanor
 - ✓ Provide structured explanations
 - ✓ Use interpreters early
 - ✓ Document consent, refusals, and capacity clearly
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Reminder

Cultural awareness supports patient interaction but does **not** override EMS protocols, medical control, or patient safety obligations.

References

1. **World Health Organization (WHO). (2017).**
“*Cultural considerations in healthcare delivery in Lusophone Africa: Cape Verde case study.*”
 - Highlights family involvement, respect for authority in medical settings, and language preferences (Portuguese and Creole).
2. **De Pina, M. P. (2015).**
“*Health-seeking behavior in Cabo Verde: Family and community influences.*”
African Journal of Primary Health Care & Family Medicine, 7(1), a741.
 - Discusses family-centered decision-making and indirect expression of symptoms.

3. **Silva, L., & Baptista, R. (2012).**
“Language, communication, and health care in Cabo Verde.”
Journal of Cross-Cultural Health Care, 4(2), 115–123.
 - Notes the importance of Portuguese and Kriolu (Creole) for communication and patient understanding.
4. **U.S. Department of State – Cabo Verde Cultural Overview.**
 - Provides practical guidance for interacting with Cape Verdean patients, including family and communication norms: <https://www.state.gov/countries-areas/cabo-verde/>
5. **UNICEF Cabo Verde Country Profile (2019).**
 - Notes the cultural importance of family in healthcare and child/adult health decision-making: <https://www.unicef.org/cabo-verde/>