Culture Diversity



What is Culture?

A person's culture describes his or her learned values, beliefs, customs, and behaviors. Culture refers to the way a particular group of people view the world and the set of traditions that are passed on from generation to generation. Culture enforces the standards and rules established by a particular group and is based on the predominant values and beliefs. Cultural differences among ethnic groups include beliefs about:

- Family organization
- Personal space
- Communication
- Health, illness, and healthcare practices
- Religion
- Traditions

Your patients' ethnicity and culture contribute to their sense of self-identity, especially when it comes to relating to other cultures.

Cultural Competence-

To achieve optimal patient outcomes, healthcare professionals must provide care that meets each patient's needs by incorporating aspects of the patient's culture into the plan of care.

Cultural Competence: Work Practices Healthcare workers are responsible for developing cultural competence and practicing cultural sensitivity. Learn about the values, beliefs, and healthcare practices of the culturally diverse populations that your organization serves.

Incorporating Cultural Sensitivity-

To incorporate cultural sensitivity into your work practices:

- Review your own belief systems.
- Consider how your own influences your behavior.
- Always view patients as individuals within a culture.
- Recognize that patients are a combination of heritage, culture, and community.
- Understand that culture influences how people behave and interact with others.
- Remember that factors such as method of communication, the use of eye contact, and the need
 for personal space are often culturally related. Therefore, some patients will have specific
 preferences related to these factors and others may not.
- Politely ask patients about practices that are unfamiliar to you.
- Use a library or the internet to learn about the practices, beliefs, and cultural heritage of the people who are most likely to be your patients.

 Attend staff development classes designed to promote cultural sensitivity.



Values

Values -

Members of a particular culture generally have a value system that determines acceptable behavior. Individuals often use values to assess themselves and others. In these instances, judgment is made about the superiority of one's own set of values and how those values prevail over others.

Health beliefs and practices usually reflect the value system of individuals within a certain culture. Therefore, take measures to understand a patient's value system in order to promote proper healthcare practices and improve patient outcomes.

Race and Ethnicity-

The terms race and ethnicity are used to describe different groups of people. Race refers to a classification of people based on distinctive physical characteristics such as skin color. Ethnicity refers to special groups within a race who are defined by national origin. Members of an ethnic group may have the following in common: heritage, national origin, social customs, and language.

Since communication is the foundation for safe patient care, it is important to assess the patient's preferred language to receive information. It is the patient's right to receive information in a way he or she understands. Because of these differences, healthcare workers will also need to assess the patient for their learning needs and how they learn best (verbal, demonstration, video, etc.)

Limited English Proficient (LEP)

CMS and TJC require healthcare workers to assess and provide language assistance services to those who need them in order to communicate effectively.

Examples are:

- Employed interpreters
- Staff members being certified in a particular language
- Special interpretive phones that connect you and the patient to an interpreter. Multiple languages available.

Some of the newest research shows that patients with limited English-speaking ability are more likely to experience an adverse event and be harmed as a result. Communication error is the most commonly identified cause.



Stereotypes

When members of different groups live and work together in a community, it is easy for those in each group to form specific beliefs about other groups. A belief about an individual based solely on his or her affiliation with a particular group is a stereotype. Healthcare workers must guard against stereotyping patients by not making assumptions based on the cultural group to which the patient belongs.

Family Organization

Families form the basis for cultural groups, but the structure of a family varies from culture to culture. The family organization determines who makes decisions for the family and who takes responsibility for ensuring that they receive health care. In some cultures, the father or oldest male is the authority figure. In others, both the mother and father have the responsibility for decision making.

Beliefs

Beliefs are based on commonly held opinions, knowledge, and attitudes about the world and life. A patient's beliefs influence his or her thoughts about health and illness. Members of a culture share beliefs about:

- The nature and cause of illness
- Types of healthcare practices
- Their relationship to a higher power

Religious Practices

For many individuals, spirituality is expressed through religious practices. Religion is an organized system of belief in a higher power. Spirituality and religion are products of an individual's cultural background and experience. Spiritual values and religious beliefs form the rules of how a person determines right from wrong. A patient's religious beliefs provide guidelines for moral behavior.

The major religions of the United States include:

- Protestantism
- Roman Catholicism
- Judaism
- Islam
- Hinduism

If a patient requests a visit from clergy or pastoral staff, initiate the request promptly and ensure the patient's privacy when a spiritual advisor is visiting the patient. Also ensure privacy when patients are engaged in a religious act such as praying.

Religious Preferences

Religious preferences are highly personal and can vary within a given culture. For example, Hispanics are

traditionally Roman Catholic. However, you may also find Hispanics attending Protestant churches within their communities.



Religious items and rituals may have significant importance to patients. For example, the crucifix, Bible,

and religious medals are usually important to Roman Catholics. The prayer rug is significant to those of the Islamic religion who prays five times each day facing in the direction of their holy city, Mecca. Amulets and special charms are important to Native Americans and to some cultures in the Middle East.

Talismans are engraved stones, rings, or other objects that are used to ward off evil.

Respect religious items when they are in your patient's room. Do not touch these items unless you have been given permission to do so. You can, however, ask a patient to explain what the items are and how they relate to their health beliefs. In addition, schedule tasks to avoid interrupting religious rituals or clergy

visits, including times of prayer and meditation.

Supporting Patients' Spirituality

Certain foods are important in some cultures. For example, many Orthodox Jews will only eat specially prepared, or kosher food, and some Muslims will only eat halal, or permissible foods. In addition, some Roman Catholics restrict food intake on specific dates. During Ramadan, most Muslims fast from sunrise to sunset. Be sure to ask patients about their food preferences.

Other ways that you can support your patients' spiritual or religious practices include respecting the patient's belief system and avoiding the tendency to push your beliefs and values onto your patients. Listen attentively to patients and try to understand the relationship between their beliefs and their health practices.

Cultural, religious, and spiritual considerations at the end-of-life are important. Staff should identify and respect the patient's needs.

Traditions

Traditions are customs and practices followed by members of a culture and passed on from generation to generation. Traditions may be related to religious rituals or holiday celebrations. Special foods are often prepared to observe traditions at holidays. Think about the preparation of turkey for Thanksgiving, corned beef and cabbage on St. Patrick's Day, challah (braided bread) on the Sabbath or for Jewish holidays, and traditional tacos, tamales, and enchiladas on Cinco de Mayo. Specific holidays for different cultures occur throughout the year.

Some traditions relate to reaching maturity and may be tied to religious beliefs too. For example, many Jewish adolescents have a bar mitzvah to celebrate their coming of age at 13. Honoring and practicing traditions gives people a sense of stability and continuity. Traditions help to bind the people of a culture closer together.

Healthcare workers have a unique opportunity to learn about other cultures directly from patients. It is important to remember, however, that even though a person is part of an identifiable culture, he or she is an individual within the culture and may not follow all customs or hold all beliefs of that culture.



At-Risk Population

The acronym LGBT(Q) stands for "lesbian, gay, bisexual and transgender". Sometimes Q is also used, which stands for questioning orientation or queer. Like many other populations identified as at-risk, research has demonstrated that LGBT individuals sometimes face disparities in care because of their sexual orientation. To ensure quality care, all patients should be treated with respect and dignity. LGBT individuals should be assured access to support person of their choice.

To better serve LGBT individuals who are limited English proficient, policies and procedures need to be in compliant with Title IV of the Civil Rights Act of 1964. Staff should be sensitive to concerns about privacy and confidentiality.

Forty-one percent of LGBT age 50 and older have a disability. Hospitals must ensure their rehabilitation policies comply with caring these LGBT individuals.

Summary

America is a nation made up of individuals with various cultural backgrounds. Many of these individuals will need healthcare at some point in their lives. The Joint Commission requires accredited healthcare organizations to provide medical care to all individuals without compromising or dismissing their cultural background.

Culturally competent medical personnel play an essential role in providing safe, quality healthcare for everyone in our growing population. Each patient is a unique individual whose development is the result of his or her own culture, community, lifestyle, and personal experiences.

Discuss any questions that you may have about the populations you serve and cultural diversity with your educator or supervisor

Sign	Date
•	



References

- 1. Office of Minority Health (OMH). What is cultural competency. OMH Web site. http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvID=11. Accessed October 6, 2016.
- 2. Mosby's Dictionary of Medicine, Nursing & Health Professions. 9th ed. St. Louis, MO: Mosby; 2013.
- 3. The Joint Commission (TJC). Advancing Effective Communication, Cultural Competence, and

Patient- and Family-Centered Care. Oakbrook Terrace, IL: Joint Commission Resources; 2010.

https://www.jointcommission.org/assets/1/6/ARoadmapforHospitalsfinalversion727.pdf. Accessed

October 6, 2016.

- 4. Merrian-Webster Online. http://www.merriam-webster.com/dictionary. Accessed October 6, 2016..
- 5. The Joint Commission (TJC). Hospital Accreditation Standards. Oakbrook Terrace, IL: Joint

Commission Resources; 2016.

- 6. Office of Minority Health (OMH). https://www.thinkculturalhealth.hhs.gov/content/clas.asp.
 Accessed October 6, 2016.
- 7. Wasserman M, Renfrew MR, Green AR, et al. Identifying and preventing medical errors in

patients with limited English proficiency: key findings and tools for the field. 2014. J Health Qual.

2014;36(3):5-16.

8. Touhy TA, Jett KF. Ebersole & Hess' Toward Healthy Aging: Human Needs and Nursing

Response. 9th ed. St Louis, MO: Elsevier; 2016.

9. The Joint Commission (TJC). Advancing Effective Communication, Cultural Competence, and

Patient- and Family-Centered Care for the Lesbian,

Gay, Bisexual, and Transgender (LGBT)

Community: A Field Guide. Oakbrook Terrace, IL: Joint Commission Resources; 2011.

https://www.jointcommission.org/assets/1/18/LGBTFieldGuide_WEB_LINKED_ VER.pdf.

Accessed October 6, 2016.

10. Lesbian, Gay, Bisexual & Transgender Elder Initiative (LGBTEI). Facts. Lgbtei.org Web site.

http://www.lgbtei.org/p/facts.html. Accessed October 6, 2016.

Bibliography

Centers for Medicare & Medicaid Services (CMS). Conditions for coverage (CfCs) & conditions of

participations (CoPs). CMS.gov Web site. Last modified November 6, 2013.

http://www.cms.gov/Regulations-and-

Guidance/Legislation/CFCsAndCoPs/index.html. Accessed October 6, 2016.

Office of Minority Health (OMH). National Standards for Culturally and Linguistically Appropriate Services

(CLAS) in Health and Health Care. OMH Web site. Last modified November 6, 2013.

https://www.thinkculturalhealth.hhs.gov/pdfs/EnhancedNationalCLASStandard s.pdf. Accessed October 6,

2016