

The nursing profession - a study of cultural diversity and spirituality issues

[Art & Culture](#), [Cultural Diversity](#)



Cultural diversity and spirituality is a growing phenomenon that has riddled the health care system. “ Culture is now identified as one of the twelve determinants of health, which include employment, social environment, income, genetic endowment, gender, coping skills and personal health practices, social support networks, employment, health services, physical and social environments, education, healthy child development, and culture”. (Arieli, Friedman & Hirschfeld, 2012) This essay will discuss cultural diversity and spirituality issues as related to the given scenario: a nurse who is working on the oncology unit has received a patient, Mrs. Chen, who is a Chinese immigrant. She has with her two children, a daughter and a son who seem to be overwhelmed with their mother’s situation. There is a language barrier between the nurse and Mrs. Chen due to the fact that she is only fluent in Chinese and the nurse cannot assess Mrs. Chen properly when she starts showing signs of unresolved pain. The patient denies of pain when the nurse confronts her. In addition, she is also taking unfamiliar Chinese herbal concoctions. The son is perplexed as to why then nurse is not treating his mom for pain and the nurse finds herself challenged by the unfamiliar situation that has been thrust upon her. This scenario highlights the importance of being aware of cultural diversity and spirituality and its application into patient care. Cultural diversity and spiritual competency in nursing, pain assessment, and health perception and management based on culture, the application of those concepts in communicating, providing care, and working with interdisciplinary teams will be examined as well as a registered nurses point of view, relevance to the California Nurse Practice Act and application of these concepts to future practices.

Issues and concerns related to culture and diversity and Question 1 and 2

Nurses face cultural diversity on a regular bases and when a patient's traditions and beliefs do not coincide with the nurse's, issues may arise. There are multiple issues and concerns raised in this scenario. Foremost, the patient's culture diversity and spirituality poses a barrier between the patient and the nurse. The nurse may not understand the traditions and behaviors practiced by a certain individual due to its unfamiliarity to the nurse and this can interfere with the care plan for the patient. In addition, the language barrier between a nurse and a second language patient inhibits the nurse to do her job and provide the necessary care to treat the patient's problems. The nurse must take into consideration that to be able to effectively carter to the patient's needs and resolve these issues, the communication and language barrier must first be addressed. Once communication is established, important issues and concerns can be voiced and resolved. Another issue that raises concerns is the unfamiliar and possibly dangerous traditional medications that varying cultured patients may use over modern western medicine. Family dynamics should also be a focus of the nurse but not the priority. According to Maslow's Hierarchy of Needs, a patient's physiological needs, such as pain, must resolved first before attending to the higher levels. (Paris & Terhaar, 2011) Safety then precedes physiological needs and should be tended to next. An issue that poses a big concern in this scenario is the traditional Chinese medicines that the patient has been self administering. Unfamiliar herbals and alternative treatments can pose a harm to a patient's condition until deemed safe by the physician or doctor. Assessment and education should be provided

promptly before continuing with these types of medicines. (American Holistic Nurses Association, 2014)

Cultural Diversity, Spirituality, and Questions 3, 7, and 8

Cultural considerations should always be taken when caring for a patient with values and beliefs that do not follow western “ norms”. Traditional beliefs and culture can affect a patient’s perception and management of health and illness. (Arieli et al., 2012) In the scenario, the traditional Chinese perception and management of health and illness stems from the concept of ying and yang. Yin and yang addresses the importance of balance between, spirit, mind, and body and once this balance is lost, illness emerges.

Traditional Chinese practices often entails the use of specific herbs and foods to treat illness before resorting to Western medicine. (Center for Disease Control and Prevention, 2014) The nurse must also be aware that many cultures may emphasize the value of family members playing an active role in taking care of their elders. It is important to allow the family members to be an active participant in the patient’s care if the patient so chooses. In addition, the nurse must be mindful of what can and cannot be discussed around the patient or family. For example Chinese patients are often shielded from bad medical news by family members due to the belief that telling the patient will only worsen their condition. (Advocacy Unlimited, 2016) The nurse must be an active advocate for the patient and their rights to be informed about their health. (NCSBN, 2016) This right is one among many that complies with the Patient’s Bill of Rights. “ Typically, a patient’s bill of rights guarantees patients information, fair treatment, and autonomy over medical decisions.” (CMS, 2016)

Pain Assessment and Question 4

Pain is known as the “ fifth vital sign” and should be assessed and treated promptly. Pain is perceived and expressed differently for every culture and pain experiences can be related to varying cultural factors including pain language, pain expression, social roles, remedies for pain, and perceptions and expectations of the health care system. (Shipton, 2013) The nurse must take into consideration the patient’s culture, and in this scenario, according to the Chinese culture, pain is not a “ disease” that generally needs to be medically treated and one must try to persevere through it. (Carroll, 2012) Knowing what to look for and what to ask is key to accurately assess pain. The most accurate way to assess pain is through a patient’s self-report. This is regarded as the gold standard of pain assessment measurement as it provides the most accurate measurement of the patient’s pain. (Brooker, 2015) No matter the patient’s race or culture, a nurse must treat the patient’s pain based on how the patient perceives and handles that pain. The verbal descriptor scale can also be used to assess the patient’s pain. Effective communication is needed for both of these methods and an interpreter should be brought in to break any language barriers that might be apparent. If an interpreter cannot be reached, a useful pain tool that would circumvent the language barrier would be the Wong-Baker Facial Grimace Scale and the Activity Tolerance Scale. Vital signs are also a useful indicator of pain. Changes in patients’ vital signs including an increase in blood pressure, respiratory rate, and heart rate are strong indicators of unresolved pain but should not be used solely as a definitive determinate of pain. (Brooker, 2015)

Culture Related to Health Management and Questions 5 and 6

A nurse should approach healthcare for every patient based on safe practice while preserving the patient's beliefs and traditions. (Arieli et al., 2012) In this scenario, the nurse should approach the patient's care from a holistic standpoint while looking for any underlying disharmonies and behind the illness that might affect yin and yang. (UNH Health Services, 2016) Certain medications and foods as well as physical and verbal contact should also be taken into consideration when interacting the patient and their family. A patient may refuse to take a certain type of treatment or medication for their illness and instead, rely on traditional medicine, however, the effects of these medicines and its unknown origin can pose a harm to the patient. "Herb-drug interactions have been often been dismissed because herbal medicines are wrongly perceived as safe by the general public and/or devoid of any significant pharmacological activity by most healthcare professionals". (Prieto-Garcia, 2013) Medication given in the hospital must be checked for adverse interaction with other medications before administering, the nurse must be aware that risk for drug-herb interaction can increase and the patient must be made aware of this. Some herbal medications have been reported to be contaminated with heavy metals, toxins, drugs, or not containing the listed ingredients. Some of the ingredients used in Chinese medicine can interact with other drugs, cause serious side effects, or may be unsafe for people with certain medical conditions. (NIH, 2013) A physician should be notified of the herbals. The nurse should educate patients on the importance of potential herbal-drug interactions. This must be carried in a non-judgmental and open and non discussion with patients and the

physician. The physician should be notified of the situation and the nurse must bring to light the circumstance of the patient with consideration to their culture, the language barrier, and any alternative medication preferred by the patient. (NIH, 2013) In this scenario, discussion with the physician should focus on the treatment of the patient's pain, both pharmacological and alternative, and whether the physician deems that patient's alternative medicine to be safe.

Solution and Questions 9, 10, and 11

The nurse will look at the whole picture and try to treat the patient, instead of just the disease. The nurse should consider that cultural traditions related to perception and management of health, such as alternative medicine and herbals, may take precedence over western medicine or recommend treatments by the physician. Treatment and care should be discussed with both the family and the healthcare team to preserve the patient's cultural beliefs. Physicians should also be involved in the care of the patient and notified of the patient's use of traditional medications. Pharmacists can be consulted for any medication concerns. Language barriers should also be broken down to provided accurately and effective communication between patient and nurse. To circumvent these barriers, an interpreter should be utilized. " The US Department of Health and Human Services Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons describes various options available for providing oral language assistance including the use of bilingual staff, staff interpreters, or contract interpreters. Limited English Proficient (LEP) patients and disabled patients have language

access rights under the law". (NCIHC, 2016) Family members should also be included in the care and can play an active role in communication concerns and information between staff and patient. Chaplains can also be brought into care for the spiritual well-being of the patient. In addition, encouraging words, a sympathetic ear, and patience can make a difference in the hospital experience for any patient and family member no matter the race or culture. The nurse should also be thorough when providing patient care while still respecting the patient's cultural beliefs and values. All of these actions can reassure the patient that they are receiving quality care that is fair and non-discriminatory.

Registered Nurse Interview

Ralene Brooks, a nurse for over twenty years, stresses the importance of culture in nursing and claims that culture should be looked at as one of the factors upon which nursing care should be based and defined. Brooks states that in her twenty plus years of nursing she has worked with hundred of culturally and spiritually diverse patients that has challenged her profession and expand her knowledge in her nursing practice. She believes that it is imperative that the nursing profession consider the significance of culture in nursing care so that nurses can cater to care and needs for a variety of culturally and ethnically diverse patients. She states that all health care professionals should understand the importance of culture and its relationship to the community, families and, individuals in regards to health care and management so that every patient is provided the greatest quality care.

California Practice Act

According to the California Nurse Practice Act, Article 1 Section 2708, “Protection of the public shall be the highest priority for the Board of Registered Nursing in performing its regulatory, licensing,, and disciplinary functions. (BRN, 2016) This section protects the public against any unethical, dishonorable, and incompetent health care members which can include members of the health care team that does not follow patient rights to un-discriminatory care. Culture and spirituality as well as age, gender, background, and ethnicity should not determine quality of care for patients. Any member of the health care team that provides insufficient care under the basis of discrimination is going against the practice of safe and competent care of a patient, which violates protection of the public. In my future practice, I will adhere to all rules and regulation under the Nurse Practice act as well as other law governing the nursing occupation to prevent unprofessional practice, misconduct, and unlawful care of my patients. I will be considerate of cultural diversity, spirituality, age, gender, race, and I will provide non-discriminatory care to all of my patients.

Conclusion

With the increase in global movement, many countries today have become multicultural. Nurses work with groups, families, and/or individuals where practices are challenged and enriched by cultural diversity. High quality care is now high in demand with the ever-growing multicultural society and culture can define the way health care is perceived and managed by the patient, thus it is imperative that we as future nurses provide care in a safe and fair manner while still preserving the cultural diversity and spirituality of

our patient's. We must be culturally competent nurses that thrive to combat and prevent stereotypes and prejudice through culturally inclusive and holistic practices by complying with guidelines and policies regarding prevention of prejudice , inequalities, and stereotypes.