

Cultural diversity in the healthcare field

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Cultural Diversity in the Healthcare field The Many Faces of Healthcare
Cultural Diversity in the Healthcare Field Carl Hooks Rasmussen College
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Vicky Philips English class at Rasmussen College by Carl Hooks Cultural
diversity in the medical field is, at times, greatly hindered because of
religious beliefs, language barriers, and the hierarchies of diverse cultures
and these have the propensity to affect the continuity of care for the
patients. " Every person has different aspects that constitute their identities,
according to how they see themselves....

This means that seeing an individual in terms of their identity can be
unproductive. " (Weaver, 2009). Nursing personnel, in particular, have to take
into consideration any and all cultural differences between the patient and
the nursing staff. These differences vary in as many ways as there are
different ethnic groups in any particular area. Religious beliefs can hinder the
nursing care of patients. There are many different religious beliefs in as
many different religions. The religious belief most common in the United
States, of course, is the Jehovah Witness who refuses transfusions.

This religion has a strong belief in preserving the soul before the body. Other
religions have other beliefs that we may not understand, but need
to respect and try to work around to care for the patient. " If people believe it
is God who confers both health and illness, it may be very difficult to get them
to take their medication or change their behavior.... they would see no point
worrying about high blood pressure or bacteria when moral behavior is the
key to good health. " (Galanti, 2001). This kind of belief will impede the
medical staff and their approach to a medical cure.

Whenever possible, staff should attempt to incorporate both religious beliefs and medicine to care for the patient. For the most part (miracles do happen), religious beliefs can delay the care and health of the patient, and leaves the health professionals with a huge dilemma about what to do, and greatly delays the healing process. To understand how religion plays a role in the care given to the patient is to give better care for our patients. Consequently, the vast majority of people do believe in some sort of religion, whether it is God or some other higher power. Cultural factors stemming from religious beliefs and practices can have an intense impact on health. ” (Abdoul and Abdoul, 2010). There may come a time when the medical staff has to provide a towel (prayer matt) and a quiet place to pray to a culture that does not consider the common hospital chapel an appropriate place to pray.

In some religions, “ It is commonly believed that illness is sent from God as retribution for sins since God is viewed as the afflicter as well as healer. ” (Abdoul and Abloul, 2010). Food also plays a big part in some religions which go beyond the traditional Jewish mother’s chicken soup. it is important to know that religious beliefs and practices can influence food choice, as there may be individuals within a group that observe strict dietary requirements. ” (Black, 2010). All religious backgrounds should be taken into consideration and, whenever possible, be provided for, and this will aid in promoting effective health care. Language barriers pose great difficulties when communicating with patients. It is imperative that both patient and nursing staff understand exactly what is being said. For this reason an appropriate trained or certified interpreter should be utilized whenever possible.

Health care workers are experiencing more language difficulties than ever before. “ Fully 54 million Americans.... roughly 20 percent of the population.... do not speak English at home. ” (Armand and Hubbard, 2010). With the exception of California, Texas, and Florida, which have over 43 percent of the population, that are classified LEP (limited English proficient). The interpreter should be trained to interpret on the patients behalf. Familymembers, at times, can be of great assistance, but then HIPPA comes into play.

The patient may not want a particular family member to know about their health problems. The language barrier does inhibit sufficient care, and this should be addressed with the utmost of care and consideration for both the medical staff and patient. Insuring that the patient fully understands what is being done to them is of great importance. As patients, they have the right to understand what is being done and why. Informed consent must be given; the patient should be able to repeat what they have been informed of before the procedure is done. Currently “ only 33 percent of U.

S. hospitals have quality improvement efforts underway to improve the quality of their language access programs. ” (Armand and Hubbard, 2010). The goal of the interpreter is to assure that the LEP patient has no doubts or concerns and totally understands what is going to happen, why, and any options they may have. Understanding the hierarchy of the family is imperative in understanding the functions of the family unit. With some familiarity with the different cultures in a given community, a medical professional will be able to ascertain who the head of the household is.

The head of the household differs from culture to culture, as such, “ misunderstandings which include but are not limited to the involvement of the male in all aspects of health care for his wife and children; the assimilation of children into all aspects of life; female humility; the subordinate status of women; and the strong emphasis on traditional female role. (Abdoul and Abdoul, 2010). By defining who the head of the household is and giving them the respect they deserve will be paramount in a speedy recovery for the patient.

As the head of the household is identified, it is very important that they are included in all of the decisions made on behalf of the patient. If and when the controlling person is not readily available, all efforts should be exercised to contact that person. In rare life threatening conditions should medical personnel proceed without that persons consent, the head of the household should be given adequate time to discuss procedures with the patient should they require this. His/her decision should be respected when they decide what is appropriate for their family member.

Given the most pertinent information and options, the family can then make an informed decision and the respect of the hierarchy of the family has not been compromised. All diversities should be taken into consideration when caring for a patient. By understanding what importance the patient puts on their culture, the medical staff can better serve the patient. “ Hospitals can be a source of stress and frustration for patients and their families, since they are most vulnerable when they are there and are placed at the mercy of values and beliefs not of their own. ” (Galanti, 2001).

Making a patient aware that medical staff understands and will do all that is possible to adhere to their cultural differences can only aid in providing the best health care possible. A care plan is always done for patients when they are admitted to the hospital. While formulating a care plan, the nurse should always consider and provide for the cultural differences of the individual. The care plan should be reviewed by all staff that participates in the care of the patient. The care plan should be discussed with the patient and family to assure that all aspects of their cultural practices have been addressed.

If this is not done, then the patient's outcome can be greatly hampered. Cultural diversity in the medical field, at times, can be greatly hindered because of religious beliefs, language barriers, and the hierarchy of diverse cultures, and these have the propensity to affect the continuity of care for the patient. All aspects need to be considered to assure that the most efficient care be given on behalf of the patient.

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