

# [Cultural sensitivity and mental health clients nursing essay](https://assignbuster.com/cultural-sensitivity-and-mental-health-clients-nursing-essay/)

Every country, race, ethnic group or society has its own culture. As it is, every culture is different from the other; this difference is reflected in the way day to day activities are carried out and in the way the society expects people to live their lives. Since the world over is becoming global, we should know how cultural sensitivity and competence affects those who we interact with. Basing on my cultural assessment, this paper clearly shows how cultural sensitivity and competence impacts the care of mental health clients and the possible risks or protective factors arising from my cultural assessment. All the results presented here are based on the cultural assessment which entails history of my cultural group, values orientation, cultural sanctions and restrictions, health related believes and practices and my religious affiliation.

According to Flaskerud (2007) Cultural sensitivity means respecting the practices, the norms and the beliefs of other people. It is defined by; as an individual knowing your own cultural practices and beliefs and by not judging other people whose culture is different from yours and by treating them with respect. As professionals in the health industry, we should have flexibility and skill when dealing with those who have different cultural backgrounds so as to be effective in carrying out our duties in our profession.

Also according to Flaskerud (2007) Cultural competence is defined as the policies, behaviors and attitudes that are in an organization or among people who are of the same profession and make them work together in cross cultural environment. To an individual, it is the ability to work with competence in an environment of diverse cultures.

The two: cultural competence and cultural sensitivity are very vital in mental health; to a mental health and or a psychiatric nurse it will help them be successful in caring and treating mental ill patients regardless of their cultural background. According to Bowl (2007) good communication between the nurses and the mentally ill patients is enhanced by having cultural competence and cultural sensitivity. This is so because, in most cases the patients might not understand the language spoken by the nurses and this hinders the success of psychiatric assessment where it is important to understand what is being communicated. Being a culturally sensitive nurse, you will see the importance of having an interpreter who will make things easy for both parties as all needed will be communicated and got.

Having cultural competence and cultural sensitivity, helps in determining the right kind of approach to the patients. According to Bowl (2007) during a psychiatric assessment, the nurse or a doctor prepares a set of questions or tasks to be administered to the patient. It will be inappropriate to ask someone to do a simple subtracting and adding test and yet there are from background that does not go to school.

As a mental health/psychiatric nurse, having cultural competence and cultural sensitivity helps one understand and respect the patients’ needs. According to Bowl (2007) there is a very big need to understand and appreciate the patients’ religion. It will be in appropriate to tell all patients to go to the hospital chapel and pray. It will sound well to Christians but to the Muslim or Hindus will be like an insult. The nurses should also know and respect the patients need to pray many times a day. Bowl (2007) also noted that some nurses interpreted such as obsession and in the real sense it’s what their religion calls for.

Hygiene is important to everyone. Having cultural competence and cultural sensitivity, helps nurses understand the needs of hygiene for different patients. According to Bowl (2007) in some cultural backgrounds, it is a norm to use bowls or containers to clean themselves either after visiting the toilets or just as a mode of bathing, in some hospital it was noted that, this was seen as unacceptable and it was discouraged, this made them feel offended and some choose not to cooperate.

Having cultural competence and cultural sensitivity, enables nurses provide enough care and love to the patients and help them bridge a gap left by the patients’ loved ones or family. According to Bowl (2007) in some cultures mentally ill people are neglected by their families and they lack emotional support. As a nurse or medical personnel, being aware of how the patients are treated by their people will enable you give them the care they are missing and this makes them feel important and makes them willing to cooperate.

The findings from my cultural assessment may impact the way I care for my clients in mental health setting in the following ways: being an urban Filipino, I will find it hard to perform a full psychiatric assessment without the help of an interpreter when am faced with patients whose dialect I don’t understand. I grew up in the city I am exposed to Filipino and English which I know and understand.

In my culture, the mentally ill are seen as a shame to the whole family and they are not highly valued. With this mentality, it might not be easy for me to freely interact with the patients as I will not be expecting anything serious in terms of talk with them.

My cultural restrictions and sanctions might also influence the way I view and care for the mentally ill; since most of them have emotional distress, if they withdraw from other people I might fail to make them interact with people since my culture has made me view this as a normal reaction for people in such situation.

Most people in my culture associate mental illness with spirits and supernatural acts; during my interaction with the patients, I will say prayers to shun the spirits from attacking me during my care for the patients. But since I have learned that mental illness has a cause which can be scientifically explained I will try as much as I can not to be bound by any other mode of treatment apart from medical methods.

My findings from my cultural assessment are protective factors. From the assessment, I have summarized my cultural expectations and norms and this has enabled me appreciate other cultures. I am now aware that people are different and as I want my culture to be respected I now know that others also want theirs to be respected. For example being an urban Filipino, I will know I am different from those from rural areas and I will expect them to behave and talk differently, I won’t let the diversity put a bias on the way we are going to relate to each other.

From the assessment I have learned that mentally ill people behave differently and are seen as shame to the society, as a care giver, this should make me step in and give them the care they lack, and this might cement my relationship with them and protect us from conflicting or miss understanding each other.

Expectations of my religion are different from another religion’s; this will make me appreciate beliefs of patients from a different religious affiliation and this will protect us from engaging in unnecessary disagreements concerning either: times or places of prayer in a hospital premises. In my culture it’s largely expected that medical personnel should take care and really help those who have been brought to the hospital for medical care. In order to guard and protect the name of my profession, I will try to help the patients so that a notable change will be seen.

In conclusion, there are so many cultures, and each culture is different; cultural sensitivity and competence are skills that should be acquired and practiced by those in the health setting and especially, mental/psychiatric setting. As noted, mental ill patients should be viewed with respect and given the care they need. Their way of life should be respected and maintained. As health workers, we should learn from our cultures; how we want to be treated and seen regarding our cultures, should be the same way we view and think about other people’s cultures.