

Cultural Sensitivity in Patient Health Education

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- Social determinants • Patient relationship building

Changing demographics, economy, and political factors affecting health care delivery in a multicultural environment have complicated the clinician's ability to provide comprehensive patient care—especially in providing education to empower patients in their health care decisions. In addition, the new health care reform platforms are reflective of a shift in thinking toward disease prevention and health promotion. To be an effective health care provider and to achieve optimal outcomes, it is imperative that we are cognizant of the social (critical) determinants of health and their influence on individual health of patients. Differences in health can be attributed to socioeconomic, political, cultural, educational, and geographic dimensions.

A comprehensive assessment focusing on these determinants must be completed to facilitate creation of an educational plan that is individualized and tailored to each patient. All of these determinants must be viewed within the culture of the provider and recipients. Today's health care providers are not only caring for a diverse population, but are diverse themselves. Providers are held responsible to give culturally sensitive care. Sensitivity to the valuing of health care technology, treatments, practices, and beliefs by health care providers is important in assessing patient's behaviors in relation to their health care practices. Self awareness of one's beliefs, biases, and personal health practices as a health care provider is essential to the ability to plan culturally sensitive patient care that is individualized to the needs of the patient, with less chance of bias. Often, health care providers assume a superior bias and values that may not be in alignment with the patient's health beliefs and practices. This can cause mistrust, miscommunication, or conflict in the patient-provider relationship.

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This represents, within itself, an ethnocentric culture in which the beliefs and practices of health care providers are valued above those of the individual patient's. It is, therefore, imperative to thoroughly assess the culture of each patient as well as the culture of the health care provider.

Providing culturally sensitive care during patient education is paramount. The term patient education is normally used to describe a series of planned teaching-learning activities designed for individuals, families, or groups who have an identified alteration in health.¹ *Developing Healthy People 2020*² and the recent health care reform platform³ require us to use a new lens to focus on preventive care. This concept dictates a shift to health education that focuses on health promotion and disease prevention instead of a focus on alterations in health. This upstream preventive approach encompasses assessment and understanding of health behaviors influenced by the health determinants seen through a cultural lens.

Various definitions and expectations abound with the term culture. Culture itself encompasses "beliefs and behaviors that are learned and shared by members of a group."⁴ The California Endowment⁵ defines cultural competence as the attitudes, knowledge, and skills necessary for providing quality care to diverse populations. This competency is an ongoing process and not an end state. Campinha-Bacote⁶ describes five constructs within cultural competence as awareness, knowledge, skills, encounters, and desire. An additional concept that should be incorporated is cultural sensitivity, which is defined as the knowledge that cultural differences as well as similarities exist.^{7(p58)}

A second model that is appropriate to apply to patient education and includes cultural sensitivity is ACCESS.⁸ This model is practical and "action-centered to facilitate the planning and implementation of culturally congruent care that is sensitive and compassionate in nature."^{8(p644)} Application of the ACCESS model offers the health care provider a framework to consciously focus on the cultural factors that influence a patient's health beliefs and behavior, as well as their own, so he or she can implement culturally sensitive care.

Narayanasamy⁸ identified six aspects that should be applied to the health care provider–health care recipient encounter:

- Assessment of the cultural norms of the patient's lifestyle, health beliefs, and health practices
- Communication with awareness of the many variations in verbal and nonverbal responses
- Cultural negotiation and compromise that encourages awareness of various characteristics of the patient's culture and awareness of one's own biases
- Establishment of respect for client's cultural beliefs and values; establishment of a caring rapport as the basis of a therapeutic relationship
- Sensitivity of how diverse cultures perceive their care needs and of the various patterns of communications (terms, concepts, tone, and style of communication)
- Safety that enables clients to feel culturally secure and avoids disempowerment of their cultural identity—respecting and nurturing the unique cultural identity of the individuals is necessary.

Attention to these six aspects is essential when planning educational sessions with patients so that a trusting relationship is achieved and to assure that the material presented is relevant within the context of the patient's life view. Success will occur during the educational meetings if the provider's verbal and nonverbal messages convey, "I want to know who you are, what is important to you, and to respect you without

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