

Culture, Health & Healthcare

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In This Presentation

- Define and discuss culture and health
- Explain different perspectives in viewing the world
- Define Cultural Congruent Care
- Patient/health professional cultural encounters



Definitions of Culture

- ‘Culture ... is that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society.’ Tyler (British anthropologist) 1870: 1; cited by Avruch 1998: 6
- ‘[Culture] is the collective programming of the mind which distinguishes the members of one group or category of people from another.’ Hofstede 1994: 5
- ‘... the set of attitudes, values, beliefs, and behaviors shared by a group of people, but different for each individual, communicated from one generation to the next.’ Matsumoto 1996: 16



Culture is notoriously difficult to define

- Culture is acquired throughout lifetime
- Constantly developing
- Centered on personal and collective experiences in the course of social interactions
- Culture is both an individual and a social construct
- Ethnic identity is shaped in the context of social relations



Culture and perceptions of the world

- Particular cultures share a worldview
- Worldviews create health worlds
- The healthworld is constituted by a:
culturally transmitted and linguistically organized stock of interpretive patterns which govern the conceptions of health and health seeking behaviours of person (Germond, Molapo, & Reilly, 2007)



Culture & Health

- Culture influences expectations and perceptions about health, illness, and disease. Gauteng's Public Hospitals treat patients that come from across the continent:
- Racial, ethnic, language differences
- Religious diversity and corresponding rituals



Influences of culture on health

- An individual's perception of health and illness
- Their health behaviour
- Beliefs of what is a health problem
- Why they have the illness and
- How they talk about the illness



Factors impacting on health care

Religious and spiritual

Dietary and food requirements

Medication requirements

Birthing /end of life and death rituals

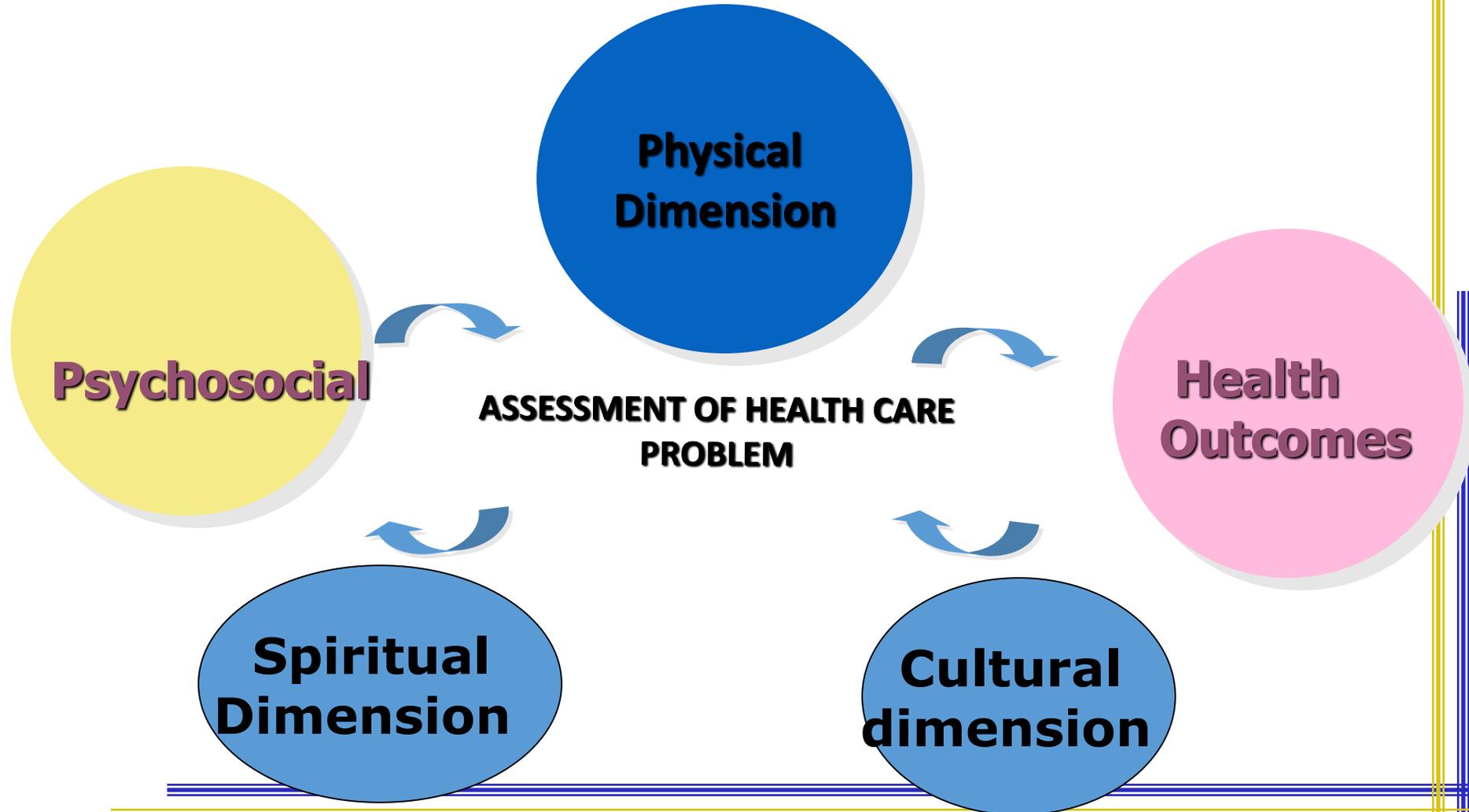
Access to and knowledge of services

Client support knowledge

Staff knowledge / competence/ support



FRAMEWORK FOR WHOLE CARE ASSESSMENT



Western and Traditional Perspective

- Modern/western is dominant and rooted in scientific paradigm
- Its institutionalized and preparations of practitioners is formal

Main aim is to heal and alleviate suffering

- Traditional medicine operates within an indigenous spiritual realm. Individuals are “called”

Aims to restore balance focusing in cause and effect

- Largely in the community and coexist with formal western referral system

(Tjale & de Villiers, 2004; Bruce,2002)



Cultural Competence in the Delivery of Healthcare Services: A Model of Care”

Cultural competence is a process, not an event

Five constructs:

- Cultural awareness
- Cultural knowledge
- Cultural skills
- Cultural encounters
- Cultural desires

(Henderson, 2018; Campinha- Bacote, 2002; Koponen, 2019)



Patient- Health Professional Communication

- All communication occurs in the context of space“
- Communication is described as "the entire world of human interaction and behaviours.
- Communication is the means by which a culture is transmitted and preserved“
(Giger & Davidhizar, 2002, p. 185)
- Communicating with individuals from another culture can be one of the most challenging aspects of providing care: language barrier
 - body gestures and underlying meanings of words and phrases
 - Cultural groups have different time orientations: past, present, and future
 - Communication barriers are reflected in dissonance between patients and health care providers
 - Impaired exchange of information results in loss of language that is necessary for cues to aid diagnosis – may result in:
 - Incomplete patient education
 - lack of informed consent
 - Reduced access to services
 - Distrust toward health care providers

(Serizawa, 2007; Balboni, 2019)



Model of culturally congruent care

- Cognitively psychologically culturally and spiritually
- Good Care is personal, professional and humane

(Tjale & Bruce, 2007; Henderson, 2019)



So Why Do We Bother?

Aim of educating health professionals is to render clinically effective care. We believe that:

- Cultural Congruent Competent care is good care
 - good communication
 - level of trust between provider and patient
 - Equality of service
 - Holistic oriented and respectful care
- We need to have a spiritual awareness
- A sense of responsibility for others well being
- A sense of compassion
- A sense of empathy

(Low, et al, 2006; Henderson, 2018; Koponen,2019)

We need to find empirical evidence on what is good “doctoring and bad doctoring”?
In nursing: good care is: **GOOD HANDS**



WHOLISTIC ASSESSMENT

(Tjale & de Villiers, 2004 adapted Nina Lewin 2011)

Cultural Assessment Guide	Questions to ask
Cultural identity Sexual Identity Social organisation Socio-economic status	Where were you born? What is your ethnic background? Who lives with you? How would you describe yourself sexually? Who do you consider your members of your family? Who makes decisions in your family? Do you consult anyone before making a decision? What do you do for a living? Do you find your work stressful & in what way



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