Pledge to Diversity:
We believe that the differences among us enrich our human encounters and our lives. Throughout the hospital, with this as our premise, we embrace:

- The DIFFERENCES among us and the COMMONALITIES that bind us.
- We do not merely tolerate diversity, we welcome it.

We are committed to be aware, knowledgeable, skillful, and competent in our encounters with our culturally diverse patients and with each other.

Cultural Diversity:
Cultural diversity is embedded in the relationships we have with our patients, with our co-workers, and with society.

Culture is an integrated system of learned beliefs, values, and customs common to a particular group of people.

Culture Influences: (Refer to table of “Cultural & Religious Considerations”)
- The ways individuals think about health
- The ways in which they express pain
- What they consider to be symptoms
- How they seek and accept help and care
- Who they consider to be healers
Cultural Diversity in Nursing Practice:
- Knowledge about cultures and their impact on interactions within health care is essential for nurses, whether they are practicing in a clinical setting, education, research or administration.
- Knowledge and skills related to cultural diversity can strengthen and broaden healthcare delivery systems.
- Concepts of illness, wellness, and treatment modalities evolve from a cultural perspective or world view.

Nurses Need to Understand!!!(Refer to table of “Cultural & Religious Considerations”)
- How cultural groups understand life processes
- How cultural groups define health and illness
- What cultural groups do to maintain wellness
- What cultural groups believe to be the cause of illness
- How healers cure and care for members of cultural groups
- How the cultural background of the nurse influences the way in which care is delivered.

Nurse Patient Encounters include the interaction of three Cultural systems:
- The culture of the:
  - Nurse
  - Patient
  - Setting
- Nurses in clinical practice must use their knowledge of cultural diversity to develop and implement culturally sensitive care.
- Cultural beliefs and practices are as integral to the nursing process as are physical and psycho-social factors.

Pain (example of cultural influences):
- Not all social or cultural groups respond to pain in exactly the same way.
- How people perceive, experience and respond to pain is influenced by their social and cultural background.
- Whether and how people communicate their pain to health professionals and others is also influenced by social and cultural background.
- Pain relievers are often seen as incomplete and unsatisfying treatment.
**KEYPOINT:** The following are basic considerations for a variety of cultures. It is imperative to recognize that not all cultures or faiths will follow all parameters exactly the same. When it comes to considerations of a patient’s beliefs and values, it is always best to ask the patient. Do NOT ever assume.

<table>
<thead>
<tr>
<th>Culture/Religion</th>
<th>Cultural and Religious Considerations with Nursing Care</th>
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| **Asian-American** | • Male Dominated household  
• Male children are highly valued  
• Elderly highly respected  
• Health is viewed as a harmony between social and spiritual worlds  
• Avoid conflict in groups or direct confrontation  
• May eat or drink special herbs  
• May use coining techniques for removing illness |
| **Baptist** | • Some believe in the “laying on of hands”  
• God functions through the physician  
• Some believe in predestination  
• Resist some procedures (e.g. abortion)  
• May respond passively to care |
| **African-American** | • Highly heterogeneous (referred to as black, colored, Negro, African-American)  
• Considerable variations in health attitudes and behaviors  
• Family is oriented around women  
• Frequently strong religious orientation  
• Caution in labeling patients; may prefer a term to which dignity is attached  
• Illness may be perceived as punishment/sin, requiring use of prayer to remove illness  
• Many seek medical care because of the control of medicines, not because they feel the physician is superior in knowledge or training |
| **Black Muslim** | • Prohibit alcohol, pork, and foods traditional among African-Americans (e.g. corn bread, collard greens)  
• Faith healing unacceptable  
• Maintain personal habits of cleanliness  
• Do not engage in certain activities, such as sleeping more than is necessary |
| **Buddhist** | • Some sects are strict vegetarians  
• Alcohol and drug use are discouraged  
• Illness possibly due to Karmic causes  
• May show reluctance for procedures on holy days  
• Cleanliness of great importance  
• May request Buddhist priest for counseling |
| **Christian Scientist** | • See illness and sin as errors of the mind that can be altered by prayer  
• Disease is a human mental concept that can be dispelled by “spiritual truth”  
• May refuse emergency treatment until a reader is consulted  
• Oppose human intervention with drugs or other therapies  
• Unlikely to donate organs for transplant |
| **Church of Jesus Christ** | • Prohibit tea, coffee, and  
• Medical therapy not |
<table>
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<tr>
<th>Religion</th>
<th>Practices</th>
<th>Medical Practices</th>
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| of Latter Day Saints (Mormon)  | • Anointments and “laying on of hands”  
• Encourage sparing use of meats  
• May ask for “elders” to participate in call | • May wear undergarments that should not be removed if at all possible  
• Have strong family/religious network and support |
| Eastern Orthodox               | • Restrictions depend on specific sect  
• In general, rely on family support | • Medical therapy not prohibited  
• Include family in care |
| Episcopal (Anglican)          | • Some believe in spiritual healing | • Religious icons very important |
| Greek Orthodox                | • Health crisis handled by ordained priests  
• Discourage autopsies | • Believe every reasonable effort should be made to preserve life |
| Hindu                         | • Many dietary restrictions: no beef/veal, some are strict vegetarians  
• Illness/injury represent sins committed in previous life | • Accept most modern medical practices  
• Multi deity-society, with various rituals |
| Islam(Muslim/Moslem)          | • Prohibit all pork products  
• Ritual washing before prayer (3-5 times daily)  
• Strong family influence | • May delay treatment before consulting family  
• May oppose autopsy  
• Family may not desire for deceased to go to morgue  
• Family may require to stay with body until placed in funeral home |
| Jehovah’s Witness             | • Eat nothing to which blood has been added (can eat drained animal flesh) | • Oppose blood transfusions  
• May be opposed to albumin, globulin, factor, and vaccines  
• Autopsy approved if required by law |
| Judaism                       | • Numerous dietary kosher laws  
• May allow only meat from animals that are vegetable eaters, cloven hooved, chew their cud, and are ritually slaughtered, or fish with scales and fins | • Illness is grounds for violating dietary laws  
• May resist some procedures during Sabbath (Saturday)  
• Oppose all forms of mutilation, including autopsies, amputations, donation of body parts |
| Lutheran                      | • Anointments important | • Medical therapy not prohibited |
| Methodist                     | • Communion important | • Encourage donation of body (parts) |
| Mexican American              | • Highly variable population (rural, villager, agricultural laborer, low income resident, urban lower class)  
• Close-knit kinship; usually turns to family first for needs  
• Health is viewed as | • Seeking Medical help is usually at the expense of pride and dignity  
• Solicit opinions of other family members with medical information or teaching  
• Many are Roman catholic, |
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<th>Culture/Religion</th>
<th>Characteristics</th>
<th>Health Care Considerations</th>
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<tr>
<td>Middle Eastern (Arab-American)</td>
<td>Male-dominated culture, Usually Arabic language and Islamic religious preference, Tend to give little information about self or family to strangers, Females may or may not wear hijab (head dress), Certain times of year require fasting from sunrise to sunset; with medical conditions and pregnancy exempt, Islamic religious leader is known as Imam</td>
<td>May shave children’s heads to treat respiratory illness, Caution in involving wife in discussion without the husband present, Females commonly request female physician or RN to preserve modesty during specific procedures, Usually do not seek advice, but feel help should be offered without requesting it, Western medicine is usually highly valued for its cure; personal care is preferred from a family member, not staff, Visiting during illness is a social obligation, Some questions may be perceived as too personal</td>
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<td>Native American (American Indian)</td>
<td>Each nation or tribe has its own language, religion and belief system, Family usually includes extended family of several households, Other individuals, through a religious ceremony, can become the same as parents in the family network, Respect for elderly, grandparents are family leaders, Usually health is viewed as harmony between social and spiritual worlds</td>
<td>Health beliefs are usually a combination of Western medicine and traditional religious practices, Include family members in care, Important to explain how to give the treatment (e.g., medication) and why the prescribed regiment (e.g., 10 days of antibiotics) so as not to disrupt “harmony”), Children are extremely autonomous; parents may not be aware of child’s recent behaviors</td>
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<td>Pentecostal (Assembly of God, Four Square)</td>
<td>Abstain from alcohol, eating blood, strangled animals, or anything to which blood has been added; some do not eat pork, Illness may be perceived as divine punishment</td>
<td>Medical therapy not prohibited</td>
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<tr>
<td>Orthodox Presbyterian</td>
<td>Believe science should be used to relieve suffering</td>
<td>Medical therapy not prohibited, Pastor or elder should be called for ill person</td>
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<tr>
<td>Roman Catholic</td>
<td>Anointments important, Church does not approve of contraception or abortion</td>
<td>Religious articles important, Amputated limb for burial; transplants accepted</td>
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<tr>
<td>Russian Orthodox</td>
<td>Believe in divine healing.</td>
<td>Cross necklace is important;</td>
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Assess the Needs of the Patient:

- Determine the level of fluency in English.
- Ask how the patient prefers to be addressed.
- Be aware of personal space & eye contact.
- Avoid body language that may be offensive.
- Speak directly to the patient, even if an interpreter is present.
- Choose a speech rate and style that promotes understanding and demonstrates respect for the patient.
- Use open-ended questions.
- Determine the patient’s reading ability before using written materials for teaching.

Many Hand Gestures Mean Different Things in Different Cultures:

- **OK sign**: zero, threat, never used.
- **Peace sign**: Victory, peace, sexual insult, horns.
- **The fingers crossed**: protection, OK, break friendship, swear oath.
- **The thumbs up**: OK, one, sexual insult, hitch hiker, directional.
We could learn a lot
From crayons:

Some are sharp,
Some are pretty,
Some are dull,
Some have weird names,
And all are different colors…

But they all have to learn
To live in the same box

References