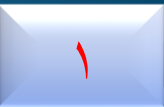


# Trans culture health care

## Health care system as a subculture-

### Culture shock



## Sub Cultures

- ❑ It refers to a smaller group within a larger cultural group that has its own particular set of cultural values, beliefs and practices.
- ❑ A subculture is usually composed of people who have a distinct identity and yet are also related to a larger cultural group
- ❑ Nurses might be considered a sub-culture of the health care system because the profession is associated with a certain set of values, behavioral norms and language. Although these patterns share some commonalities with health care workers in general, they have some differences that are unique to nursing

- ❑ Many countries have people from different subcultures. Subcultures group members may have varying relationships with the dominant culture.
- ❑ So, nurses need to be aware of the subculture groups that are served by their health care agency. It is important that nurses not assume that a client is a member of a particular set of beliefs.
- ❑ For example: A person of Japanese descent who has lived in the United States for 50 years may have different beliefs and behaviors than a person who has recently relocated from Japan, although they share a common ethnicity.

□ Nurses should remember that the health care system is also a subculture

□ this system has rules, customs and a language of its own

□ Health workers when obtaining an education in health care, they become “acculturated” into the system (i.e. when an individual losses his culture characteristics & adapts to another culture pattern)

□ Nurses should recognize that they have been acculturated into the health care system & should identify the values of the system they have adopted. This will make easier for them to recognize how the client's values differ from those of the system. These differing values may be a source of anxiety or frustration to client and their support persons



# Culture shock

□ Is a state of anxiety that results from cross-cultural misunderstanding and an inability to interact appropriately in the new context" (Spradley & McCurdy, 2000, p. 16).

□ Immigrants and refugees find themselves in a strange setting with people who act in unfamiliar ways. Speaking their own language in their homes and retaining values and familiar practices all help to promote some sense of security in the new environment

The same is true for nurses and others working overseas in unfamiliar countries.

No longer are the small but important cues available that orient a stranger to appropriate behavior.

Instead, a person in a different culture may feel isolated and anxious and even become dysfunctional or ill. Immersion in the culture over time and learning the new culture are the major remedies. As adjustment occurs, old beliefs and practices that are still functional in the new setting can be retained, whereas others that are not functional must be replaced



❑ Hospitalization is a form of culture shock. This is because patients are isolated from society and their lives are organized according to rules and regulation of a hospital.

❑ However, culture shock upon a hospitalized patient simply adds to the patient's problems





# The phases of culture shock

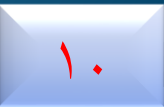
## Phase one:1

□ The initial phase is identified as one of excitement and is called the honeymoon phase. People are stimulated by being in a new environment. Behavior that indicates this feeling varies with the ethnic origin of the person and the individual personality

## Phase two - 2

☐ Once the individual feels some what comfortable in the new environment, phase two begins. Phase two is the realization of having to exist in the new environment this awareness is often accompanied by feelings of:

- a- Feeling of inadequacy, which can diminish the individual's self concept and self-esteem
- b- Feeling of frustration and embarrassment because of errors the individual makes.
- c- Feeling of loneliness.
- d- Feeling of anxiety and inadequacy may be expressed through periods of withdrawal or anger



### Phase three:3

- During the third stage, the individual seeks new patterns behavior appropriate to the environment. The individual makes friends can often give new comes advice
- This phase seems to be characterized by the reestablishment of a sense of humor.
- The host culture no longer is considered all badly and  
At this time ties to the old culture become weaker



## Phase four-:4

-In the fourth phase, the individual functions comfortably and effectively. A person who returns to the former culture during this phase may experience reverse culture shock



# Categories of stressor which creates culture shock during hospitalization

## 1. Communication:

The primary stressor appears to be changed system of communication both verbal and non-verbal. Hospitals have their own communication system, so the patient must learn a new "Language"

- Nurses continue to withhold information when patient ask about the medication they are receiving, saying either, "It will make you feel better" or "The doctor ordered it for you"



## 2. Mechanical environment:

- A person must become familiar with new mechanical device and forms of transportation must learn to use bed-pans and call buttons & be transported in wheelchairs or on stretchers.
- In psychiatric restraints. In psychiatric hospitals, a patient may encounter with physical restraints, he may also have to become accustomed to various types of surveillance systems. Such as grating on windows and locked units

### 3. Customs

-All patients must learn a new life-style to fit into hospital routine. e-g. Patients are expected to wear hospital gowns or pajamas day& night. Patients in psychiatric hospital often are not permitted to wear belts or to have access to sharp objects as razors & mirrors. Patients are also needs to be accustomed to hospital routine e-g. Sleeping & awaking time, times and types of food

## 4. Isolation

-Hospital isolates patients from their families and communities. Visiting hours are often brief & may schedule at times when many people are at work. Children often are not allowed in hospital units. In some hospitals, patients do not have private telephones and may only have to a telephone in the hall

## 5. Attitudes and Beliefs

- Every one in the hospital, except the patient, knows what is going on.
- The doctor or nurse is always right regardless of how the patient feels about the situation doctor leaves little decision making to the patient.
- The patient is a low status subordinate in the hospital hierarchy.

## 5. Attitudes and Beliefs cont...

- Some health personnel are acting on the belief that it is to the patient's advantage to be uninformed or on the assumption that he does not have the right to know about himself or his disease process

N.B:

If culture shock were understood better, then hospital personnel could intervene in all five of the common stressors in hospitalization.

- Nurses can assist client and their families who are experiencing culture shock in a number of ways



## If there is a language barrier

An interpreter can help with explanation and provide the nurse with information to help in the clients care plan.

The interpreter should be a trained professional.

The nurse should avoid having children or other family members translate for the client because the client may not wish the family to know about the health problems..

-Nurse must convey respect for client's values, beliefs, and custom- Nurse can support client's customs, for example; The nurse can encourage the client to wear her turban in the hospital unless this is contraindication to health reasons. In addition, nurse can offer explanation to other health personnel about values, beliefs, and customs important to the client.