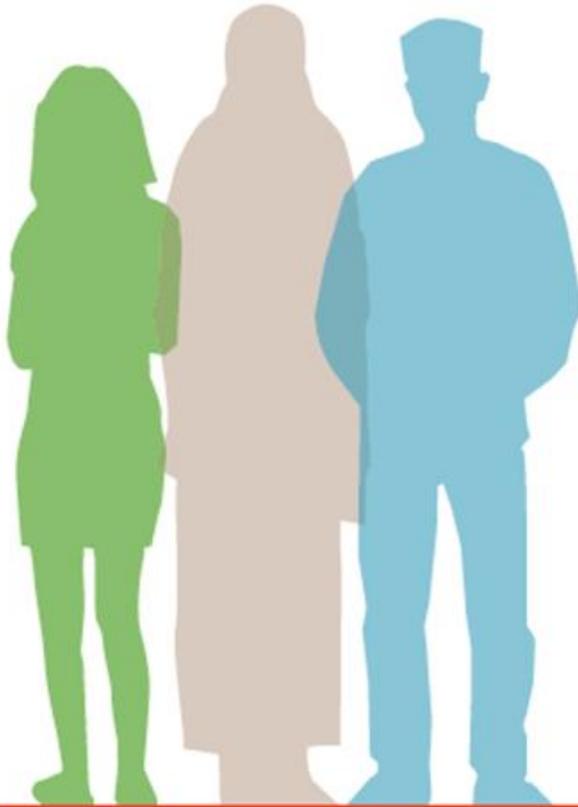




MICE

Multicultural Care in European
Intensive Care Units

8/2017



Intercultural Nursing Care on ICU's Online Course Frame



Erasmus+

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Project number: 2016-1-PL01-KA202-026615

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ENTRY TEST OF KNOWLEDGE

MODULE I: Cultural awareness and sensitivity

Topics covered	Objectives	Content	Learning outcomes	Activity
Philosophical, ethical, legal and professional basis justifying non-discrimination principle regarding culturally diverse patients;	To explain philosophical concepts and ethical, legal and professional principles regarding respect for diversity	Human dignity concept, ICN code of ethics and codes of ethics of country participants in the scope of respect of cultural diversity, Basic legal and universal principles regarding respect for cultural diversity, Nursing professional documents – examples (position statements, scope of practice) regarding care for diverse culturally patients	Participant understands concept of human dignity and its impact on respect for diversity; Participant knows ethical, legal and professional documents which relate to respect to cultural diversity; Participant understands principles regarding respect for diversity when caring for patients with different cultural roots.	Reading/ documents/ Quiz

Explanation and differentiation of concepts: culture and ethnic minority	To explain and differentiate concept: culture.	What is culture? Three different culture models;	Participant understands intercultural concepts and principles; Participant knows about three culture models and their differences.	Short theoretical introduction, Quiz
	To understand different culture-models	Iceberg of culture, Understanding culture by visualization - Graphics	Participant knows about visible and invisible elements of culture	
	To understand term of ethnic minority	Ethnic minority, Definition 'ethnic minority'; Examples of statistics minorities in partners' countries.	Participant knows and understands the definition; Participant knows about presence of ethnic minorities in partner countries.	Reading, Quiz
	To understand elements that are particular for certain cultures. To raise awareness for differences in values, attitudes etc. between cultures.	Culture in comparison; Culture Dimensions (Hofstede, Trompenaars, Hall); Characteristics of patients.	Participant knows about elements that are characteristic for certain cultures and minorities. Participant is aware about differences and appreciates of other 'normalities'.	Reading, Quiz
	To raise awareness of crosscultural misunderstandings	Stumbling blocks in cross-cultural communication - Stumbling blocks (Laray M. Barna)	Participant knows about causes for misunderstandings Participant has increased awareness for elements that lead to misunderstandings in cross-cultural communication.	Reading, Quiz, Short films,

MODULE II: Culturally diverse patients in health care environment				
Topics covered	Objectives	Content	Learning outcomes	Activity
Differences in cultures in approach to health and sickness;	To raise awareness of different cultural conceptions of health, illness and disease	The cultural implications of topics as health, disease, illness, death, sexuality, childbirth, and women's health in different societies	Participant knows the patient's degree of cultural embeddedness about health, illness and disease	Theoretical explanation/reading/discussion
Patterns of interpersonal (verbal and non-verbal) communication (smile, silence, eye contact, language barrier);	To gain knowledge about the effects of culture on patterns of interpersonal communication	List of specific transcultural communication techniques and their description Examples of different meaning of non-verbal communication due to culture (silence, smile, touch, distance) Description of transcultural communication barriers Working with medical interpreter - guidelines	Participant explain the effect of culture on patterns of interpersonal communication Participant understands the significance of non-verbal communication and its use into transcultural care; Participant applies the culturally sensitive patterns of interpersonal verbal and nonverbal communication	Short theoretical description/examples, Discussion

<p>Patterns of informing the patient/family about health condition;</p> <p>Patterns of obtaining consent for nursing care</p>	<p>To gain knowledge about the ways of informing patients and their family</p> <p>To raise awareness about different patterns of obtaining consent from culturally diverse patient for nursing care</p>	<p>Examples of different patterns of informing patient and/or family with regard to different culture</p> <p>The ways of building trust of patient/ family in health care</p> <p>Patterns of obtaining consent</p> <p>Providing information for a complete understanding of the nursing activities</p>	<p>Participant applies the culturally adequate communicative patterns.</p> <p>Participant chooses the appropriate sample of informing patient/ family about health condition for nursing care</p> <p>Participant understands the meaning of obtaining consent</p>	<p>Theoretical explanation/ cases of good practice/discussion</p> <p>Theoretical description/ discussion</p>
<p>Physical examination</p>	<p>To gain knowledge about physical examination in different cultures</p>	<p>Techniques used in physical examination of each specific area of the body in different cultures.</p> <p>Limits in physical examination form the perspective of culture differences</p>	<p>Participant understands cultural factors that can influence the physical examination</p>	
<p>Meaning and limits of touch</p>	<p>To gain knowledge about meaning and limits of touch in different cultures</p>	<p>Description of personal spaces in different cultures; meaning of touch in different cultures; gender, parts of body, age and limits of touch in different cultures</p>	<p>Participant demonstrates the knowledge and understanding of the culturally specific meaning of touch</p>	<p>Short theoretical descriptions/examples</p>

Spiritual and religious expectations/practices	To gain knowledge about spiritual and religious expectations/practices	Assessment of spiritual needs in culturally diverse clients Beliefs and religious practices Controversial issues related to health care (medication, amputation, organ transplant, blood and blood products, euthanasia, autopsy, organ donation, burial) Religious support system for the sick (visitors, religious representative, church organizations to assist the sick)	Participant understands the meaning of spirituality and religion in the lives of clients from different cultures. Participant discusses the ways in which spiritual and religious beliefs can be incorporated into the nursing care of clients from diverse cultures. Participant accepts and respects cultural differences in spiritual and religious practices	Reading/examples/Cases descriptions
Hygienic procedures	To gain knowledge about hygienic procedures in different cultures	Hygienic procedures in different cultures (frequency, body odour, habits, oral hygiene, importance of hand hygiene in different cultures...)	Participant adapts care to be congruent with the client's culture	
Dietary habits	To gain knowledge about dietary habits in different cultures	Dietary habits in different cultures	Participant understands differences in dietary habits of clients from different cultures Participant accepts and respects cultural differences in dietary habits	Short theoretical descriptions/examples
Visits and family support	To gain knowledge about family relationships in different cultures	Patterns of family relationships in main cultures - examples	Participant understands differences in patterns of family relationships in different cultures	Reading/examples/case analysis

Elements of cultural assessment in nurses' work	To gain knowledge about elements which should be taken into account when making cultural assessment of patient	Questions which should be answered when making cultural assessment of patient for nursing care	Participant knows what aspects should be tackled in cultural assessment in nurses' work, especially in ICU environment	Reading/examples/diagrams
<u>MODULE III: Specifics when caring for culturally diverse patients on ICU wards</u>				
Topics covered	Objectives	Content	Learning outcomes	Activity
Intercultural care in specific boundary situations on ICU ward: <i>dying and death</i>	To gain knowledge about cultural rituals and customs regarding death and dying in different cultures	Questions which should be answered when making cultural assessment of patients and families facing death and dying	Participant knows cultural differences in end of life care	Short theoretical introductions combined with illustrative cases. Every case ends with a short audit
Intercultural care in specific boundary situations on ICU ward: <i>resuscitation</i>	To gain knowledge about cultural rituals and customs regarding desires and boundaries regarding resuscitation in different cultures	Questions which should be answered when making cultural assessment of patients and families facing the question of resuscitation and the long-term outcomes	Participant understands the importance of allowing the nearest to be present	Recommending literature and good examples of implementing a new standard
Intercultural care in specific boundary situations on ICU ward: <i>blood therapy</i>	To gain knowledge about cultural rituals and customs regarding blood therapy in different cultures	Questions which should be answered when making cultural assessment of patients and families facing provision of blood therapy and the possible religious implications	Participant is aware about religious conviction of prohibition of blood transfusion	Short theoretical introductions combined with illustrative cases. Every case ends with a short audit

<p>Intercultural care in specific boundary situations on ICU ward: <i>Withdrawal/withholding ICU treatment</i></p>	<p>To explain and understand different cultural and religious influences on end of life decisions, in particular on withdrawing/ withholding of ICU treatment</p>	<p>End of life decisions futile treatment religious and cultural perception of withdrawing/withholding of the ICU treatment</p>	<p>Participant understands different cultural and religious aspects with influence on end of life decisions in patients and relatives.</p>	<p>Short theoretical introductions combined with illustrative cases. Every case ends with a short audit</p>
<p>Intercultural care in specific boundary situations on ICU ward: <i>transplantation</i></p>	<p>To explain and understand different cultural and religious attitudes of organ donation and reception.</p>	<p>Organ transplantation Organ donors and receptors Cultural and religious aspects</p>	<p>Participant understands different cultural and religious aspects of organ transplantation in patients and relatives</p>	<p>Short theoretical introductions combined with illustrative cases. Every case ends with a short audit</p>
<p>Intercultural care in specific boundary situations on ICU ward: <i>analgesic therapy</i></p>	<p>To explain cultural differences in attitudes towards pain perception and analgesic therapy</p>	<p>Pain and its perception analgesic therapy cultural differences in attitude towards pain and analgesic therapy</p>	<p>Participant understands different cultural and religious aspects of analgesic therapy in patients and relatives</p>	<p>Short theoretical introductions combined with illustrative cases. Every case ends with a short audit</p>
<p>Conflicts of values and decision-making process when caring for culturally diverse patients</p>	<p>To explain and understand conflicts of values when caring for culturally diverse patients. To understand element of decision-making process in care of diverse patients.</p>	<p>Conflicts of values – examples; patient and nurse situation; Sara Fry model of ethical decisionmaking process</p>	<p>Participant is aware of conflicts of values that may happen when caring for the diverse patients</p> <p>Participant understands stages of decision-making process when caring for culturally diverse patients</p>	<p>Reading, discussion, cases analysis</p>

ENDING TEST OF KNOWLEDGE (THE SAME AS ENTRY TEST IN ORDER TO MAKE EVALUATION OF PROGRESS)

CHOSEN PROPOSITIONS OF THE LITERATURE:

1. ANDREWS, M. M., BOYLE, J. S. *Transcultural concepts in nursing care*. 4th ed. Philadelphia: Lippincott Williams and Wilkins, 2003. 577 p. ISBN 0-7817-3680-3.
2. ANTAI-OTONG, D. *Nurse-Client Communication: A Life Span Approach*. 1st ed. Sudbury: Jones and Bartlett, 2007. 251 p. ISBN-13: 978-0-7637-3588-3. ISBN-10: 0-76373588-4.
3. GIGER, J. N., DAVIDHIZAR, R. E. *Transcultural nursing: assessment and intervention*. 4th ed. St. Louis: Mosby, 2004. 666 p. ISBN 0-323-02295-2.
4. LEININGER, M. M., McFARLAND, M. R. *Transcultural Nursing: Concept, Theories, Research and Practice*. 3rd ed. New York: The McGraw-Hill Companies, 2002. 621 p. ISBN 0-07-135397-6.
5. LIPSON, J. G., DIBBIE, S. L. *Culture and clinical care*. 1st ed. California: Regents, 2006. 487 p. ISBN 0-943671-22-1.
6. MUNOZ, C., LUCKMANN, J. *Transcultural communication in nursing*. 2nd ed. New York: Thomson Delmar learning, 2005. 356 p. ISBN 0-7668-4877-9.
7. PURNELL, L. D., PAULANKA, B. J. *Transcultural health care: A culturally competent approach*. 3rd ed. Philadelphia: F. A. Davis company, 2008. 427 p. ISBN-13: 978-08036-1865-7. ISBN-10: 0-8036-1865-4.
8. RAY, M. A. *Transcultural caring dynamics in nursing and health care*. 1st ed. Philadelphia: F. A. Davis Company, 2010. 320 p. ISBN-13: 978-0-8036-0809-2. ISBN-10: 08036-0809-8.
9. SPECTOR, R. E. *Cultural diversity in Health and Illness*. 7th ed. New Jersey: Pearson, 2010. 401 p. ISBN-13:978-0-12-511107-9. ISBN-10: 0-13-51107-2.
10. Thomas, A., „Kultur und Kulturstandards“, in: Alexander Thomas/Eva-Ulrike Kinast/Sylvia Schroll-Machl (eds.), *Handbuch Interkulturelle Kommunikation und Kooperation*, vol. 1, 2nd Ed., Göttingen: Vandenhoeck & Ruprecht, 2005. 462 p. ISBN: 3525461720, 9783525461860, 9783647461861.
11. Triandis, H. C. „Intercultural Education and Training“, in: Funke, P. (ed.), *Understanding the USA: Across Culture Prospective*, Tübingen: Narr, 1989. 324 p. ISBN 387808336X.
12. Trompenaars, F. *Riding the waves of culture*, 2nd ed., London: Brealey, 2012. 265 p. ISBN: 9781857881769, 1857881761
13. Fry S., Johnstone M. *Ethics in nursing practice: A guide to ethical decision making*, 3rd edition. 2008, ISBN: 978-1-4051-6052-0
- 14.

Differences in cultures in approach to health and sickness and Patterns of informing the patients/family about health condition)

- *Mc Laughlin, L., & Braun, K. (1998). „Asian and Pacific Islander cultural values: Considerations for health care decision-making.“ Health and Social Work, 23 (2), 116-126.*
- *Rankin, S.H., & Stallings, K.D. (1996). Patient Education: Issues, Principles, Practices, 3rd ed. Philadelphia: Lippincot-Raven, 70-72.*
- *Villarruel, A.M., Portillo, C.J., & Kane, P. (1999). „Communicating with limited English proficiency persons: implications for nursing practice.“ Nursing Outlook, 47(6), 262-270.*
- *Jia, L., Hawley, S.R., Paschal, A.M., Frederickson, D.D., St. Romain, T.L., Cherven, P.L. (2009). Immigrants vs. Non-Immigrants: Attitudes Toward and Practices of Non-Therapeutic Male Circumcision in the United States, of America. 92 – 98.*
- *Olavarria, M., Beaulac, J., Belanger, A., Young, M., & Aubry, T. (2009). Organizational Cultural Competence in Community Health and Social Services Organizations: How to Conduct a Self-Assessment. 140-150.*
- *Westbrook, M., Legge, V. & Pennay, M. (1994). Causal attributions for deafness in a multicultural society. Psychology and Health, 10, 17-31.*
- *Pincus, J. (2014). How to address cultural conceptions of illness, health and wellness. Quirk's Marketing Research review.*
- *Uskul, Ayse K. (2010) Socio-cultural aspects of health and illness. In: French, David and Kaptein, Ad A. and Vedhara, Kavita and Weinman, John, eds. Health psychology (2nd edition). Wiley-Blackwell, pp. 347-359.*
- *Uskul, A. K., Sherman, D., & Fitzgibbon, J. (2009). The cultural congruency effect: Culture, regulatory focus, and the effectiveness of gain- vs. loss-framed health messages. Journal of Experimental Social Psychology, 45, 535-541.*
- *Zola, I. K. (1966). Culture and symptoms: An analysis of patient's presenting complaints. American Sociological Review, 31, 615-630.*
- *Mental Health: Culture, Race, and Ethnicity. Mental Health: A Report of the Surgeon General Office of the Surgeon General (US); Center for Mental Health Services (US); National Institute of Mental Health (US). Rockville (MD): [Substance Abuse and Mental Health Services Administration \(US\)](#); 2001 Aug.*
- *Updegraff, J. A., Sherman, D. K., Luyster, F. S., & Mann, T. L. (2007). Understanding how tailored communications work: The effects of message quality and congruency on perceptions of health messages. Journal of Experimental Social Psychology, 43, 249-257.*

- Taylor, S. E., Welch, W., Kim, H. S., & Sherman, D. K. (2007). Cultural differences in the impact of social support on psychological and biological stress responses. *Psychological Science*, 18, 831-837.
- Suls, J., & Wallston, K. A. (2003). Introduction. In J. Suls and K. A. Wallston (Eds.) *Social psychological foundations of health and illness* (pp. x - xx). Oxford: Blackwell: Blackwell Publishing.
- R. Masi, L. Mensah & K. A. McLeod (Eds.) (1993). *Health and cultures: Policies, professional practice and education*. New York: Mosaic Press.
- Oyserman, D. & Sorensen, N. (2009). Understanding cultural syndrome effects on what and how we think: A situated cognition model. In C. Chiu, R. Jr. Wyer, and Y. Hong (Eds), *Problems and solutions in cross-cultural theory, research and application* (pp. 23-50). New York: Psychology Press.
- Landrine, H., & Klonoff, E. A. (2001). Cultural diversity and health psychology. In A. Baum, T. A. Reverson, and J. E. Singer (Eds.), *Handbook of health psychology* (pp. 851-892). Mahwah, NJ: Lawrence Erlbaum.
- Inglehart, R. (1997). *Modernization and post-modernization: Cultural, economic and political change in 43 societies*. Princeton: Princeton University Press.
- World Conference on Social Determinants of Health. *Rio political declaration on social determinants of health*. Rio de Janeiro: World Health Organization, 2011.
- WHO Regional Office for Europe. *Health 2020: a European policy framework and strategy for the 21st century*. Copenhagen: World Health Organization Regional Office for Europe, 2013.
- Purnell, Larry. *Culturally Competent Health Care*. PA: F.A. Davis Company, 2005.
- Huff, R., and Kline, M. (1999). *Promoting Health in Multicultural Populations: A Handbook for Practitioners*. Thousand Oaks, CA: Sage Publications.
- Lewis, R.D. (2000). *When Cultures Collide. Managing Successfully Across Cultures*. London: Nicholas Breley Publishing.
- Varvin, S. (2008) *Flyktningspasienten [The Refugee Patient. Norwegian]*. Oslo: Universitetsforlaget.
- Connor, Denis M., et al., "The Unbefriended Patient: An Exercise in Ethical Clinical Reasoning" *Journal of General Internal Medicine* 2016; 31(1): 128-132.

WITHDRAWAL

- <https://www.uptodate.com/contents/withholding-and-withdrawing-ventilatory-support-in-adults-in-the-intensive-care-unit>
- Romain M, Sprung CL. Approaches to patients and families with strong religious beliefs regarding end-of-life care. *Curr Opin Crit Care* 2014, 20:668–672.
- Myburgh J, Abillama F, Chiumello D et al. on behalf of the Council of the World Federation of Societies of Intensive and Critical Care Medicine. End-of-life care in the intensive care unit: Report from the Task Force of World Federation of Societies of Intensive and Critical Care Medicine. *Journal of Critical Care* 34 (2016) 125–130.
- Bülow HH, Sprung CL, Reinhart, K et al. The world's major religions' points of view on end-of-life decisions in the intensive care unit. *Intensive Care Med* 2008; 34:423–430.
- Jensen HI, Ammentorp J, Ørding H.. Guidelines for withholding and withdrawing therapy in the ICU: impact on decision-making process and interdisciplinary collaboration. *Heart, Lung and Vessels* 2013; 5: 158-167.
- Vincent JL. Ethical principles in end-of-life decisions in different European countries. *Swiss Med Wkly* 2004; 134: 65-8.
- Van McCrary S, Green HC, Combs A, Mintzer JP, Quirkd JG. A delicate subject: The impact of cultural factors on neonatal and perinatal decision making. *Journal of Neonatal-Perinatal Medicine* 2014; 7: 1–12.

TRANSPLANTATION

- David Talbot, Anthony D'Alessandro, Paolo Muiesan. *Organ Donation and Transplantation After Cardiac Death*. OUP Oxford, 2009 European Committee on organ Transplantation. *Guide to the Quality and safety of organ transplantation*. Council of Europe 2016.
- Lopez JS, Valentin MO, Scandroglio B, Coll E, Martin MJ, Sagredo E, Martinez JM, Serna E, Matesanz R. Factors related to attitudes toward organ donation after death in the immigrant population in Spain. *Clin Transplant* 2012; 26: E200–E212.

PAIN

- Edwards CL, Fillingim RB, Keefe F. Race, ethnicity and pain. *Pain* 2001; 94: 133–137.
- Arif-Rahua M, Grapa MJ. Facial expression and pain in the critically ill noncommunicative patient: State of science review. *Intensive Crit Care Nurs* 2010; 26: 343–352.
- Sessler CN, Wilhelm W. Analgesia and sedation in the intensive care unit: an overview of the issues. *Critical Care* 2008; 12:S1 Peacock S, Patel S. Cultural influences on pain. *Reviews in pain* 2008; 1: 6 – 9.
- Fricker J. Pain in Europe: a report. [Online] 2003. Available from: http://www.paineurope.com/files/PainInEuropeSurvey_2.pdf