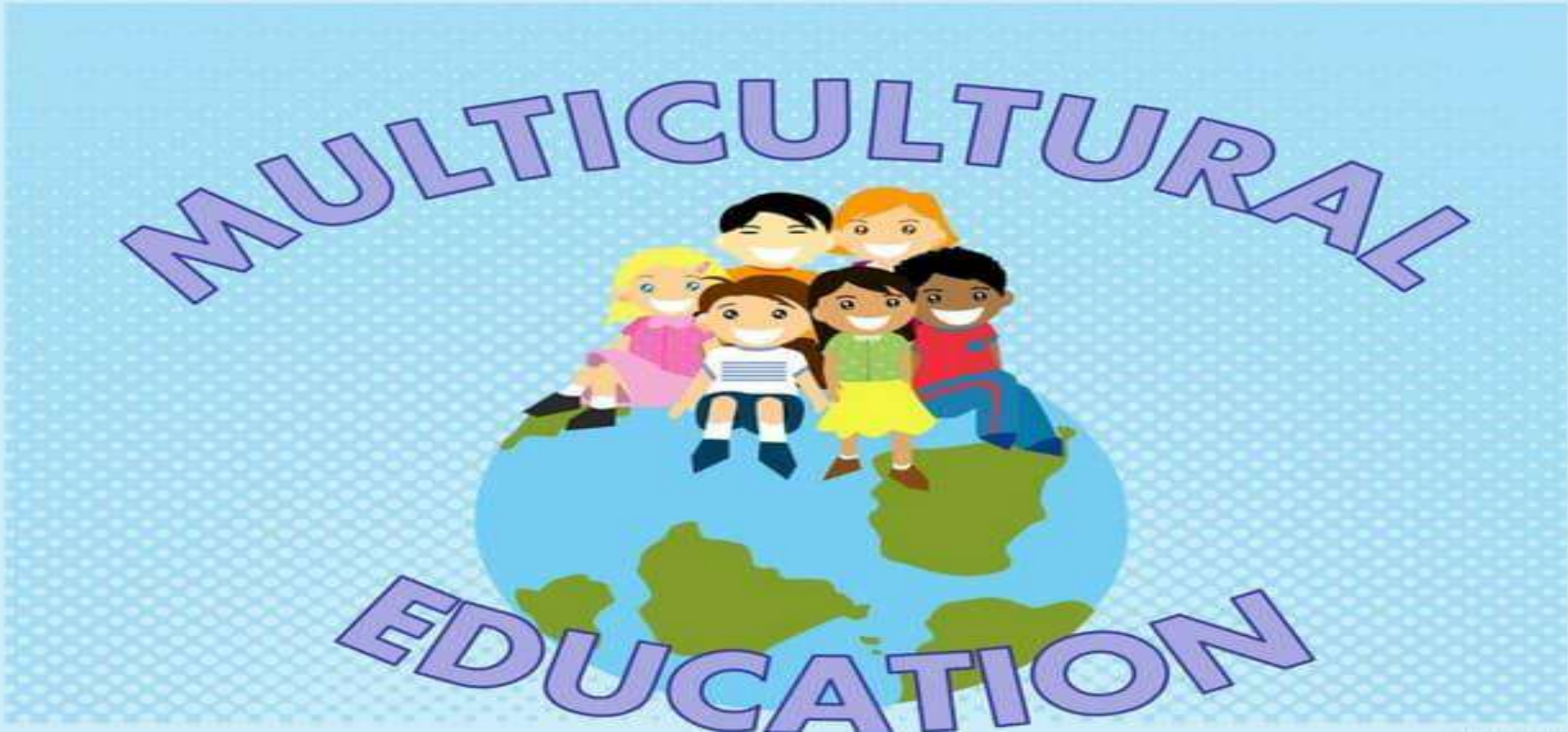

MULTICULTURAL
EDUCATION

Erasmus+ Capacity Building in Higher Education Project
Supporting development of Trans Cultural Competence for healthcare professionals in the Western Balkans (TCCWB)

GENERAL KNOWLEDGE AND INTRODUCTION TO MULTICULTURAL COMPETENCES

ETHICAL CONSIDERATIONS IN TRANSCULTURAL NURSING

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GENERAL KNOWLEDGE AND INTRODUCTION TO MULTICULTURAL COMPETENCES

- **Goals:**
- Learn the general concept of transcultural care
- Learn to evaluate patients with different cultures
- Learn how to identify transcultural needs in nursing practice
- Key competencies: understanding cultural diversity, cultural assessment, awareness of prejudices and stereotypes, wants and needs, emotional awareness, cultural empathy, adaptability, stress tolerance, conflict resolution, communication competencies.



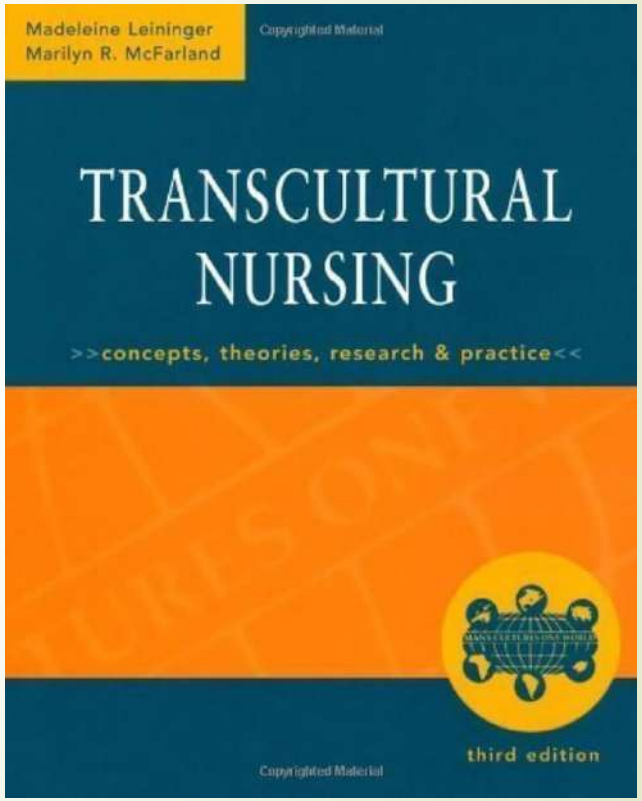
A historical reflection on transcultural nursing

- Madeleine Linginger is the founder of the theory of transcultural nursing, the International Association for Transcultural Nursing. International Transcultural Nursing Society and the journal Transcultural Nursing.
- She was the initiator of the first master's and doctoral studies in nursing in the United States.
- She developed the first nursing research method called The Ethnonursing Research Method, which has been studied in nursing schools.



Application of nursing theory Madeleine M. Leininger – Theory of the Culture of Diversity and the Universality of Care

- Healthcare provided by healthcare professionals should be in line with the cultural values of the caregiver.
- Madelaine Leininger's theory is applied all over the world today and serves as a foundation for the nurses to complement and develop complementary theories through it.
- The basic idea is the promotion of health care based on benevolence and safety adapted to cultural differences.



Definition of transcultural nursing

- Transcultural nursing can be defined as an approach to providing culturally sensitive health care to all health care users.
- It is important to point out that transcultural nursing is a professional discipline that has laid the foundations of health care based on culture and cultural differences.
- The main purpose and main goal of transcultural nursing is oriented towards health promotion and preservation of culturally oriented care and needs of individuals.
- Despite this, transcultural health care is not a routine part of health practice, but health policy is based on the prevention of health inequalities and discrimination, especially on the basis of ethnic characteristics.

- Nurses need to become familiar with different cultures in their environment and around the world due to the accelerating trend of migratory change, so that they can provide users with adequate, culturally sensitive health care, accompanied by compassion and understanding in different life circumstances.
- Transcultural nursing shifts the way health care is delivered from traditional (monocultural) to contemporary (multicultural) oriented, aimed at individuals from different cultural backgrounds, respecting their values, beliefs and health patterns.
- The increased number of migrants, refugees and other people of different cultures has made transcultural nursing imperative for nurses today and in the future.
- Without it, nurses would be deeply constrained, regressed and limited in noticing the needs of people with different cultural patterns.

Equity in health and health care

- In order to achieve equality in the provision of health care, inequality must first be understood, i.e. Diversity between races, cultures, and social groups, leading to the avoidance of discriminatory behavior and the provision of culturally consistent health care.
- Nurses should treat people with respect for their dignity, avoiding generalizations and making assumptions about others, recognizing diversity, and respecting individual choices.

- The American Nursing Organization looks at the phenomenon of transcultural care from three angles: patient culture, nurse culture, and environment culture.
- A nurse should identify the needs of the individual and the family and provide health care without disrupting the cultural milieu of the family.
- A patient's beliefs, values, and behaviors are an integral part of holistic health care.
- Nurses need to discover new ways of providing culturally acceptable care in multicultural societies.

- **Emotional literacy is necessary, which contains 5 elements:**

1. Self-awareness (recognizing one's own emotions and understanding how they affect thoughts and behaviors)
2. Self-regulation (constructive management of one's own emotions)
3. Intrinsic motivation (motivates individuals to pursue goals with perseverance)
4. Empathy (the most important element for transcultural care)
5. Social skills (necessary for coordinating with different groups)

Education and transcultural nursing

- All members of the healthcare team should be competent and have certain knowledge and skills to provide satisfactory health care services to all persons of other cultures.
- A significant role in this is played by the education of nurses, the assessment of their knowledge, attitudes and prejudices, and thus the protection and promotion of public health.
- Healthcare users of different cultures positively value the moments when health workers have shown that they have the skills to communicate, listen and respond appropriately to their needs.
- Global trends in terms of migratory changes imply the necessity of changing the current practice in the education and application of transcultural nursing among nurses, in order to improve health care and thus achieve equality in the provision of culturally harmonized health care.

ETHICAL CONSIDERATIONS IN TRANSCULTURAL NURSING

- **Goal:** To learn the general concept of ethical dilemmas in transcultural nursing
- **Competencies:** Understand the ethical and legal implications of cultural competencies, including issues related to informed consent, confidentiality, and patient rights.



- Transcultural ethics is concerned with the way people should live when they subjectively share a common world.
- Ethics is defined as a system of moral standards and values.
- Nurses face multiple ethical dilemmas in their daily practice.
- There are four principles that help make decisions about ethical dilemmas and also facilitate the resolution of ethical conflict.
- These four principles are: respect for autonomy, benevolence, justice, and do no harm.

The four important ethical systems are:

- Deontology – ethics of duty/human moral sense (what is right and what is wrong)
- Utilitarianism – the ethics of utility (good for most people/patients)
- Social/cultural relativism – society's opinion of what is useful and good and what is not
- Emotivism – the theory that ethics has nothing to do with the world we live in

Does it shape us as people, as health professionals?

- Values are principles and standards that are important and have meaning and value for an individual, family, group, or community. For example, the dominant culture of the United States gives great value to youth, technology and money. The degree to which one's cultural values are internalized influences the tendency towards ethnocentris.
- The breed is of genetic origin and includes physical characteristics that are similar among the members of the group (skin color, blood type, hair color, eye color.
- People from a given racial group can, but are not required to share a common culture.
- According to humanism, all human beings are equal in value, that they have common resources and problems, and that they are similar in fundamental ways.

Religion

- Religion is a form of social consciousness, a system of attitudes, rules, norms and values, a determinant of behavior, an understanding of the highest being
- Morality is usually an unwritten system of customs, rules of conduct, a system of values, norms
- Today, psychotherapy has won its place in theory, science, practice, and the results achieved in patients are undoubted

Altruism – value orientation

- Multiple levels: personality attribute, adopted social norm, situationally induced behavior, important social and personal value
- Humanism and ethics are the highest values that underlie altruistic and prosocial behavior
- Altruism – taking care of the interests of others without taking care of one's own behavior
- Empathy – caring for someone, or participating in another person's pain or grief

To see with the eyes of another man, to hear with the ears of another man, and to feel as the heart of another man feels!

Problems on a global scale

- Identity crisis
- A broken value system
- Humanism on the Temptation
- Endangered satisfaction of personal, social and biological motives

=> The disintegration of the personality?

Four important principles:

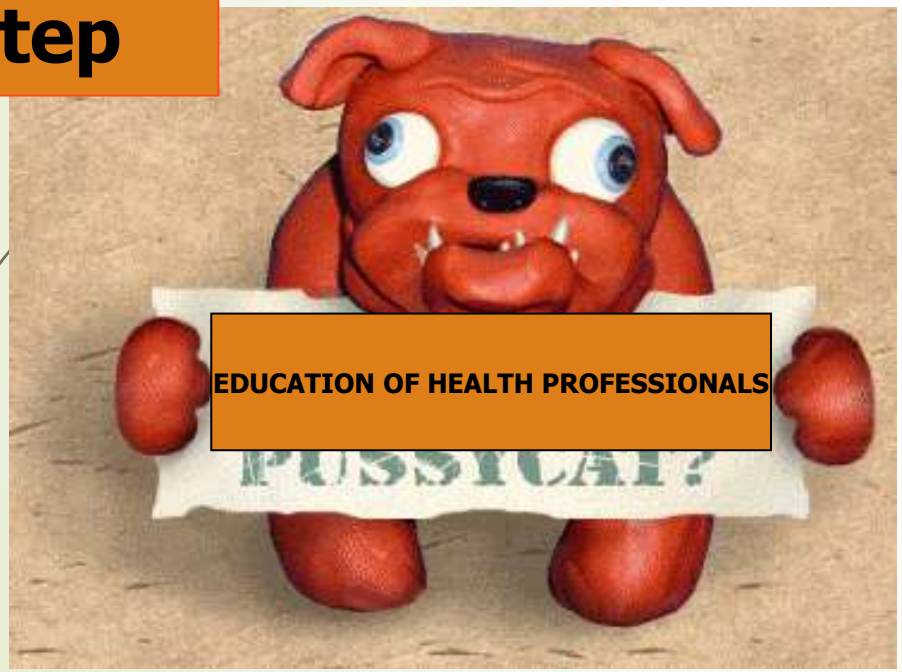
- The principle of autonomy (respect for the wishes of patients this principle gives the patient a certain strength and power, his right to make a decision in his own favor).
- The principle of fairness (we must not have any prejudice in our professional work, including on the issue of age, race, sex, religion, political engagement or sexual orientation of patients).
- The principle of charity (love and responsibility not only for the individual, but also for the community as well as the environment).
- The principle of harmlessness (everything should be done and all available means should be used so as not to harm the patient: by wrong diagnosis, treatment, negligence... In this context, it is also the safeguarding of medical secrecy, especially the preservation of the dignity and integrity of each individual).

The following example illustrates the ethical dilemmas faced by healthcare professionals:

- An 80-year-old patient, with a history of ischemic heart disease and diabetes, was admitted to the ward with acute heart failure and acute heart attack.
- Her mental status was preserved so that she could make valid decisions.
- After therapy and recovery, her right leg became ischemic, so the surgeon suggested amputation to the knee to prevent a life-threatening infection, but with an explanation to the patient that there was a possibility of risk during anesthesia due to the underlying heart disease, and a long rehabilitation afterwards.
- After consulting with close family members, the patient decided on conservative treatment and soon after died of sepsis due to progressive gangrene.
- The case has sparked widespread debate among health professionals, from whether to go with local anesthesia or take the risks of general anesthesia to prevent death.
- Others discussed a long postoperative recovery that, with good care and pain control, could prolong life, but with a loss of movement and the resulting dependence on others.
    - *"Whatever you think is best"!*
- *In this case, all ethical dilemmas for pro et contra were resolved by the patient herself using her own*
    - *the right to make your own decision!*

Patients' rights

First step



- *The Patient's Right to Informed Consent*
- *Privacy refers to the confidentiality of the relationship between the doctor and the patient, but also to some other aspects such as the protection of data about the patient and his health condition.*
- *Secrecy is a patient's right that has been regulated since ancient times, most often in criminal law.*
- *Some countries do not have a law in this area, so the protection of the confidentiality of the patient is left to the codes of professional conduct.*
- *Complaints are the right of the patient who in case of injury, under certain legal conditions.*

The concept of informed consent of patients -

There are three dimensions:

1. Legal
2. Ethics
3. Clinical dimension

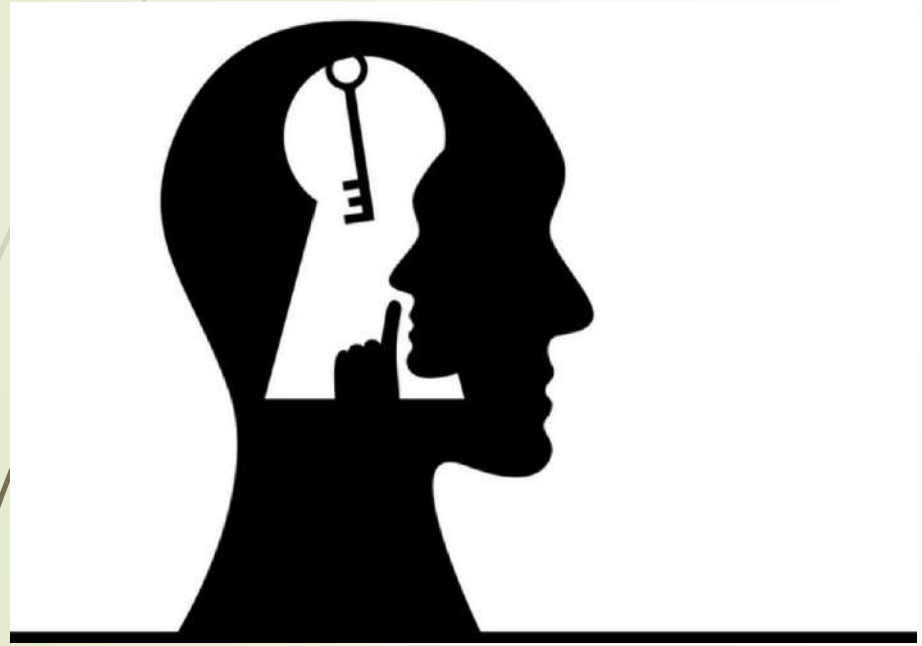
To be valid, consent must be:

- From a person who is capable of giving consent
-Free
-Informed
- In written form.

PROFESSIONAL SECRET SPECIAL LAWS?

Explain!

Everything that is said must be true
Everything that is true does not have to be said!







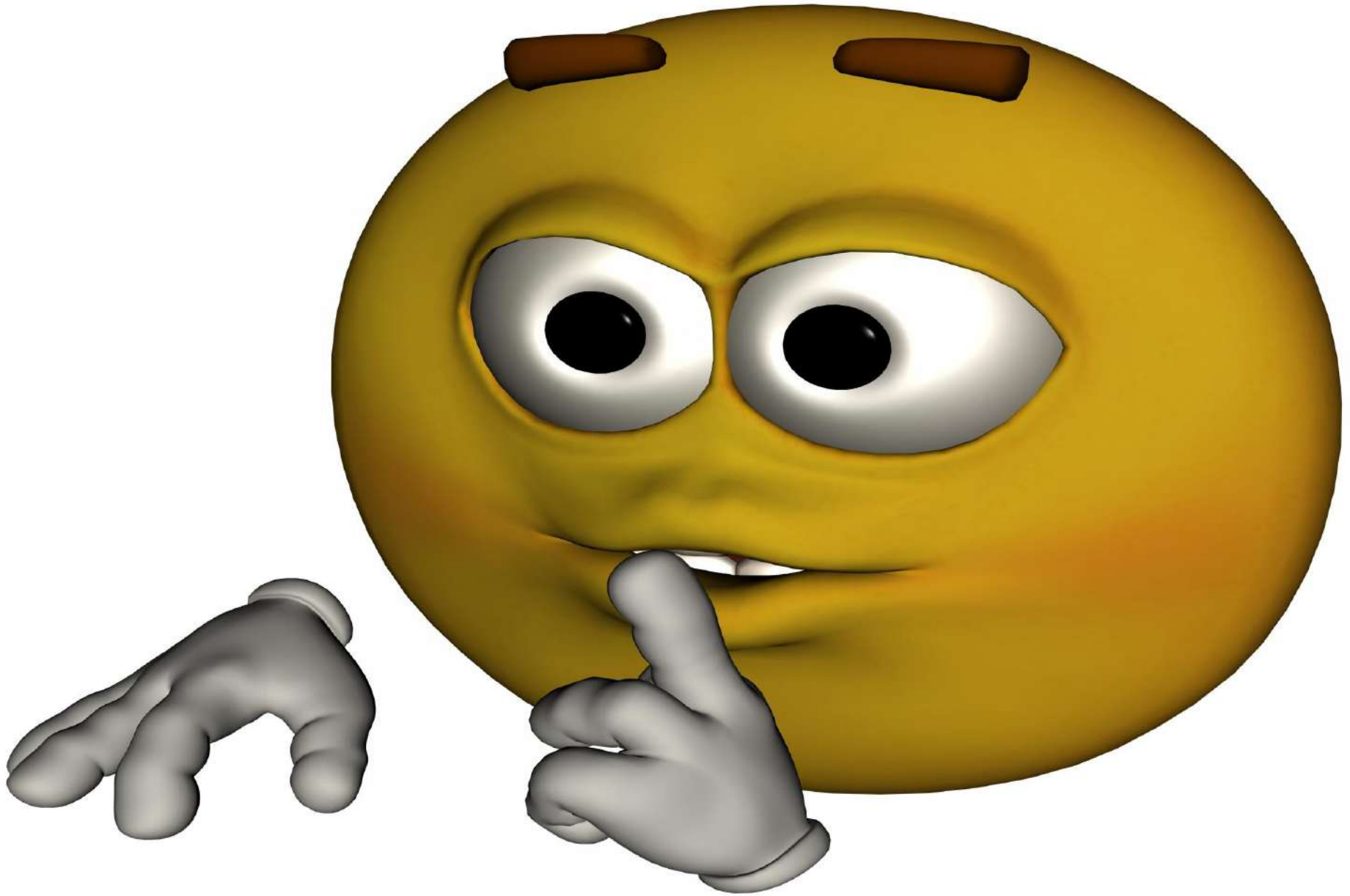
The principle of professional secrecy for all patients of various cultures

It is one of the most basic duties of healthcare personnel

A secret is a piece of information that is a law. other regulation, ethical principles, general act or other act of the competent authority adopted on the basis of the law.



WHAT INFORMATION IS CONSIDERED SECRET?





Personal: identity, residential address, phone number, e-mail...

Family: number of children, parenting ...

Social: social and economic status...

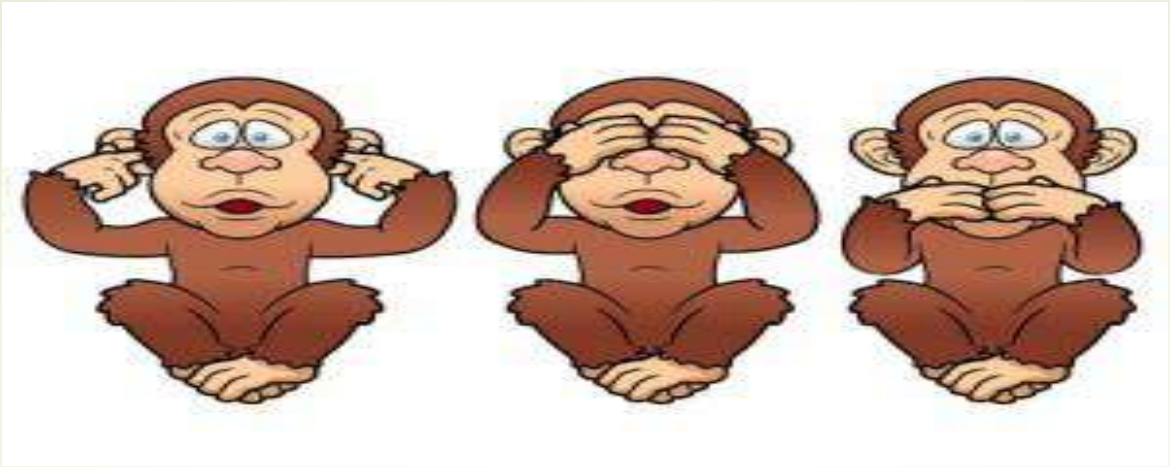
What information does a nurse have to keep?



The nurse is obliged to keep all the information about the patient that she has received as a professional secret



In the course of health care



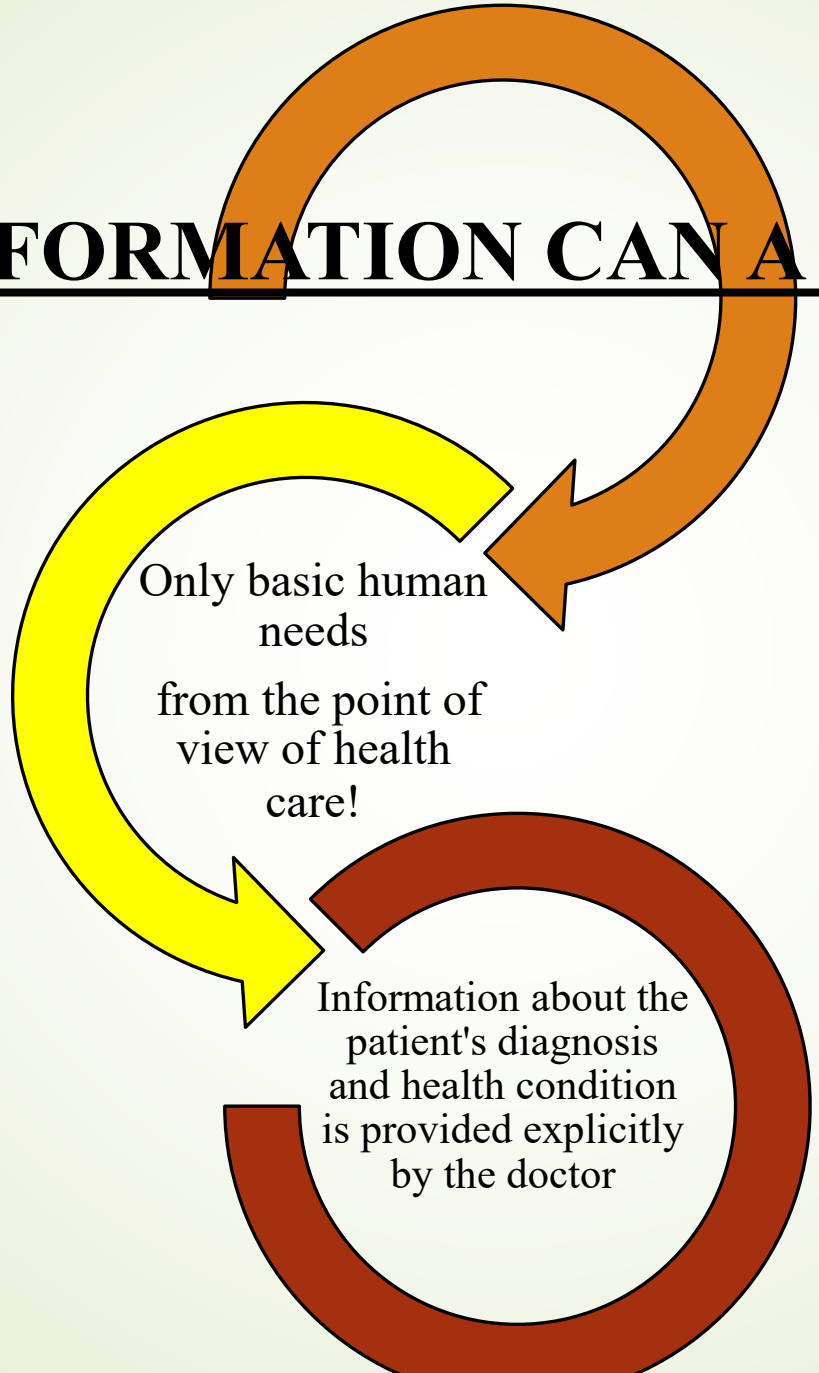
Who has the right to information?

Only the patient has the right to information

And then there's his family

(the patient determines which of the MEMBERS we can give the information to)

WHAT INFORMATION CAN A NURSE GIVE?



What is unacceptable about providing information?



We don't give information on the phone because we don't know who's on the other side.

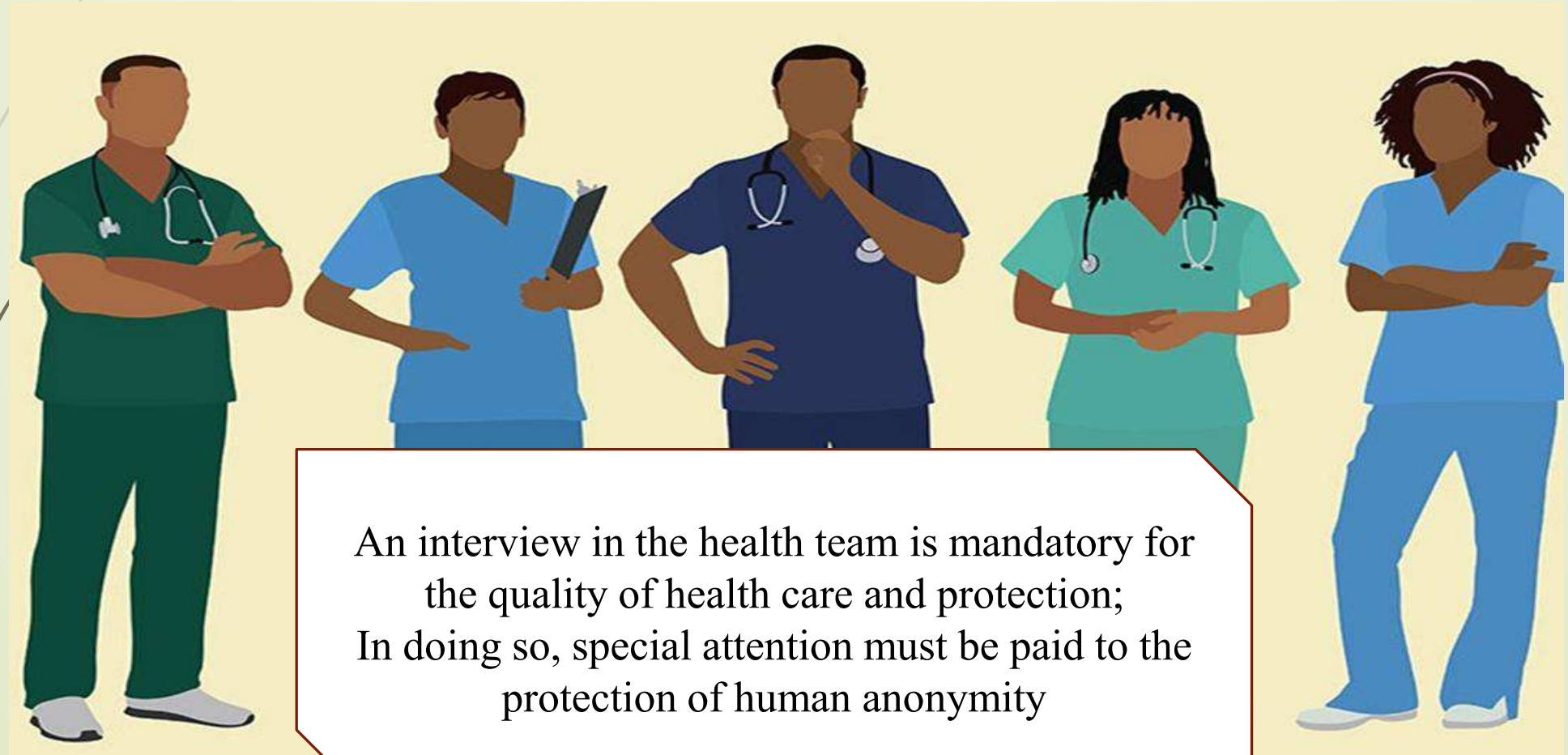
Are we allowed to retell?



It is unacceptable for a nurse to tell professional secrets outside the medical team



WHO ARE THE MEMBERS OF THE MEDICAL TEAM?



An interview in the health team is mandatory for the quality of health care and protection;
In doing so, special attention must be paid to the protection of human anonymity

A professional secret that is shared within the healthcare team that cares for the patient is called a **SHARED SECRET**



When is it our duty to intervene?



A nurse is obliged to intervene if other members of the health team do not comply with the obligation of professional secrecy

Allowed disclosure of professional secrets:

1. **A patient dangerous to himself and the environment!**
2. **Patient's consent!**

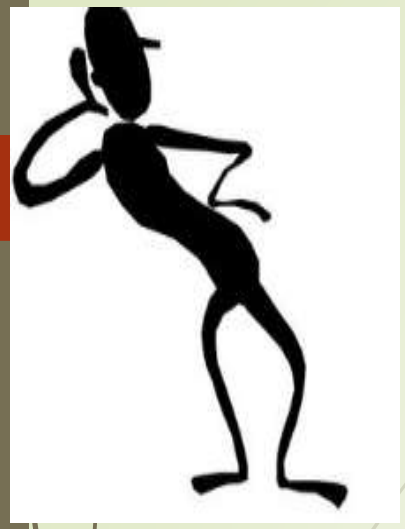


The duration of professional secrecy?





The duration of professional secrecy is not limited in time and lasts even after the patient's death



PROFESSIONAL SECRET

Case report 1.

The patient M.H. confided in the nurse K.K. in the patient's room that she had been diagnosed. When confiding in the nurse, she asked her not to pass on the information about her diagnosis. After her shift, the nurse told a friend that Marija Horvat was lying in the ward with a newly discovered diagnosis of liver cirrhosis.

Case report 3.

The nurses were having coffee and were discussing the patient T.K. They talked about how the patient at home lives in untidy conditions, poverty and very poor economic status. They do not understand how a patient can live in this way. The conversation was overheard by people sitting nearby.

WHERE'S THE ETHICAL PRINCIPLES???



Conclusion

- Everything that has been said and written about ethical norms in medicine is not final or definitive, because the achievements in this field are in great progress and often catch us by surprise with their progress.
- Regardless of the fact that the new time will bring new ethical dilemmas, such as the issue of cloning, as well as many others, the basic values of the Sister Oath and the Hippocratic Oath still retain their value.
- No matter what individual approach we have to the patient as individuals, no healthcare professional must ever forget that the patient and the patient's well-being is the center around which everything begins and ends, that each patient has their own wishes and needs.
- Altruistic behavior in nursing is necessary and can be encouraged by evoking empathy and respecting ethical principles, all for the benefit of patients of different cultures.

- WORKSHOP -



Workshop 1. European Train

- I'm not a racist, but... This activity addresses prejudices in everyday life, e.g. when traveling by train.
- Aim of the workshop:
- - To confront the participants with their prejudices and stereotypes about other people and minorities and with the representations and associations that this text evokes
- Let's take a look at the participants' views on minorities
- Be aware of the limits of your own tolerance.
- To challenge the different values and stereotypes of the participants
- **Ask each person to choose three people with whom they would like to travel together and three people with whom they do not want to travel**
- **In small groups, exchange information about desirable and undesirable companions, as well as the reasons for a personal decision.**
- **Try to agree in groups which three companions are acceptable for all members of the group, and which three are unacceptable.**
- **Let each group present its choice in the plenum (discuss).**

Who wouldn't you want to travel with?

1. Fat stock market expert from Switzerland
2. An Italian disc jockey who obviously has a lot of money
3. A young artist who is HIV-positive
4. Foreign soldier
5. A young Palestinian studying in Foca
6. A French farmer who speaks exclusively French and carries a basket of cheese with a very characteristic smell
7. A Liverpool fan going to a football match
8. Roma
9. A Dutch professor who is an aggressive feminist
10. Ukrainian student who does not want to return home
11. Blind pianist from Austria
12. A Romanian woman who does not have an entry visa and holds a one-year-old child in her arms
13. Cigarette smuggler who is afraid of customs officers
14. The wife of a newly rich man from Eastern Europe, who travels to Paris to renew her wardrobe.

Workshop 2. My backpack

- If you had to flee your place, your country, what are the most important things you would put in your backpack?
- Since the backpack is small, the maximum number of items is 10.
- This exercise is a good introduction to talk about the topic of refugees and migration.
- Continuation of the exercise:
- If the boat you're fleeing got caught in a storm and one object (out of ten) needs to be thrown out of the backpack, which object would it be?
- The number of items in the backpack can be reduced during the exercise, until there is only one thing left in it.
- Why did you decide on this particular thing?
- This exercise contributes to the development of empathy and helps participants to immerse themselves in the situation of migrants.



Workshop 3. Wishes and needs

- The goal – for the participants to gain an understanding of the differences between the things they want or would like and what they really need, i.e. desire and need.



DO OUR DESIRES ALWAYS REFLECT OUR NEEDS?

Instructions:

Imagine that you are in an unknown city surrounded by unknown people who do not speak Serbian, you are a refugee. You have your own needs and desires (several of them), but you don't know how to achieve/get them in such circumstances

BINGO! I've got a goldfish in my hand

Like any goldfish, it will grant us a wish if we let it go

Make this wish when the fish is in your hands and add it to the person next to you

In addition to that one wish, draw up to 5 things you think you need.

Divide into groups and each group chooses one drawing for everyone to see.

In the end, you only have to choose one drawing, wish or thing that the whole group of participants really needs

Workshop 4. What kind of person am I?

- ASSESSMENT OF ALTRUISM AND RELIGIOSITY (standardized scales)







THANK YOU FOR YOUR ATTENTION!