

Because culture affects virtually every aspect of life, including health beliefs, customs, and practices, it is imperative that nursing students recognize and value its critical importance to the people whom they will care for as clients/patients. Hence, the notion of culture must be introduced early on in nursing programs and threaded throughout the entire curriculum.

Keywords: culture; cultural self-assessment; cultural meaning; cultural uniqueness; cultural manifestations

Oulture can be viewed as the learned, shared, and transmitted values, beliefs, norms, and life practices of a particular group (ethnic, religious, or social) that guide thinking, decisions, and actions in patterned ways (Leininger, 1988). Culture may be transmitted to succeeding generations; though some cultural elements may remain the same from generation to generation, details often vary because culture is dynamic and constantly adapting. In addition, though some cultural components are related to those of family members or the overarching culture, each person's culture is unique to that individual.

Because culture is pervasive, it affects virtually every aspect of life, including health beliefs, customs, and practices, so it is imperative that nursing students recognize and value the critical importance of their own culture as well as the cultures of clients/patients and families they will care for as registered nurses. Hence, the concept of culture must be integrated throughout the nursing curriculum, starting early and reiterated throughout the entire curriculum.



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CULTURAL SELF-ASSESSMENT

Our university's Bachelor of Science in Nursing (BSN) program highlights culture and its infinite considerations in the BSN philosophy, curriculum, assignments, care plans, and evaluations. One of the first assignments is a cultural self-assessment that all students complete based on select demographics and Leininger's (1978) original domains (see Figure 1). When completed properly, this holistic, interrelated mind–body–spirit assignment facilitates the realization of culture's

Cultural Self-Assessment & Analysis Guidelines			
Name	Gender	Religion	
Race(s) Ethnicity(ies)/Tribe(s)			
Age _	Birthplace	Generation in U.S.A.	
Where	Raised	Marital Status	
Langua	ges Spoken Primary Lan	Primary Language	
Education Occupation			
1.	General Cultural Life Patterns or Lifestyle		
2.	Cultural Values, Norms, and Expressions of an Individual or Cultural Group		
3.	Cultural Taboos and Myths		
4.	Worldview and Ethnocentric Tendencies		
5.	Life-Caring Rituals and Rites of Passage		
6.	Lay/Popular, Folk, and Professional Wellness-Illness Cultural Systems		
7.	Specific Caring Behaviors and Health Care Values, Beliefs, and Practices		
8.	Cultural Diversities, Similarities, and Variations [nonfamily]		
9.	Cultural Changes and Acculturation Aspects [family]		
Adapted from Leininger, M. (1978). Transcultural Nursing: Concepts, Theories, and Practices.			
New York: John Wiley & Sons. (classic reference)			
Your paper will also be graded for neatness, coherence, grammar, spelling, and punctuation.			

Figure 1. Cultural Self-Assessment and Analysis Guidelines.

impact on each student's own life, sometimes for the first time. Because most of the students are adolescents or young adults, they may not yet have been exposed to the transience of life and the reality that their loved ones may not always be around. Thus, a serendipitous outcome of this assignment is the students' recognition of the rich cultural ancestry in their own lives.

This cultural self-assessment encourages the students to interact with and learn from their older family members. The students are encouraged to take the time to visit their relatives, listen to family stories, study pictures, collect or prepare recipes, and so forth, so they can learn the cultural significance of each. The intended professional outcomes of this assignment are to personally acknowledge the multifaceted ramifications of culture in the students' own lives and to develop cultural competence that will ultimately help them to serve as client advocates and to provide culturally congruent, holistic care.

Prior to the introduction of the cultural self-assessment, the students' own unique cultures are introduced as the nurturing mind-body-spirit environment in which they were raised, a dynamic process that influences their beliefs, and the lens that brings their reality into focus. Even without consciously thinking about it, the students have become manifestations of their own unique cultures, influenced by the people around them but ultimately choosing what fits best into their lives.

HOW CULTURE IS INTEGRATED INTO THE NURSING CURRICULUM

Prelicensure BSN students are first introduced to cultural self-assessment in their prerequisite Wellness course that is actually a self-discovery course; RN-to-BSN students are introduced to it in a Mobility course. From the inception of our BSN program, our faculty believed that students should know themselves before learning about others, including future clients. To that end, this course was designed

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to present various common concepts; though students were familiar with most of the concepts, they had rarely been asked to reflect on how these concepts pertained to their own lives, and their self-discovery was often noteworthy. Perhaps the most striking realization for many students was the multifaceted aspects of culture, and how those aspects are intricately integrated throughout the students' lives in unique, unanticipated ways.

Students are asked to ponder each piece of their own demographic information for its cultural relevance. positive or negative, in hopes that they will also consider the cultural meaning of their future clients'/patients' demographic information.

The cultural self-assessment assignment includes select demographics and Leininger's (1978) adapted domains, on which the students must elaborate. In addition, students submit at least one photo of themselves, and this particular inclusion has become a favorite, with students submitting photos not just of themselves but also of their special occasions and loved ones. One faculty member has her students prepare a collage of favorite photos. Overall, students describe this cultural assignment as an enjoyable experience. Not only do they learn more about themselves and their peers, but this cultural sharing offers potential long-term appreciation of life's precious connections that should be savored and honored. That awareness and appreciation can enhance their future culturally congruent client care.

DEMOGRAPHICS

Though students have often filled out forms with their own demographic information, they may never have considered the cultural nature of this information. In this portion of the cultural self-assessment, students are asked to ponder each piece of information for its cultural relevance, positive or negative. By so doing, the BSN faculty hope that students will also consider the cultural meaning of their future clients'/patients' demographic information.

CULTURAL DOMAINS

Leininger's (1978) original domains were slightly modified to provide a framework for this cultural assignment (see Figure 1). Her adapted domains serve as guidelines that are presented as a holistic, interrelated inventory of cultural prompts. Students can redistribute or reiterate content as they see fit, as long as all requested content is provided in the completed document. This flexibility facilitates incorporation of pertinent cultural data into a cohesive, logical, and meaningful document. If students' cultural beliefs, customs, or behaviors stray from those of their family, they are encouraged to cite their family's views and then describe how and why theirs are different.

Though not specifically listed within any one domain, students are asked to include typical and special-occasion foods and to describe cultural celebrations, such as holidays, anniversaries, birthdays, rites of passage, and other events. Students are also asked with whom they celebrate these special events. Foods and celebrations are expressions of love, comfort, happiness, joy, traditions, customs, rites, and rituals, so a cultural assessment is incomplete without the inclusion of foods and celebrations.

During class and in small lab groups, potential responses to these domains are openly discussed, with students often seeking clarification, volunteering cultural information, or exploring potential examples. These open discussions provide in-

valuable cultural learning experiences as students not only share their information but also learn from each other. They find connections and bridges where before they may have only seen walls, and they bond with peers who were previously strangers, possibly recognizing that everybody offers potential connections, including classmates, clients, and coworkers.

General Cultural Life Patterns or Lifestyle

Students are asked to describe a typical day or days in their lives, so they can readily see how many different routines, rituals, foods, and so forth, are already parts of their lives.

Cultural Values, Norms, and Expressions of an Individual or Cultural Group

Students offer examples of each self-selected value, norm, and expression within their own unique culture. For example, if education is highly valued, is its accompanying norm evident in family members' attending school? Does the expression of this value include behaviors such as regularly attending class, getting good grades, and being successful in the pursuit of education?

In reality, just about everything that people do is an expression of their culture. Examples include language choices, attire, hairstyles, makeup, greetings (smiles, handshakes, hugs, kisses), eye contact, manners, gifts, foods, recipes, cars, homes, furnishings, decorations, religious artifacts, laughter, crying, singing, dancing, and exercising. Examples of various other expressions of culture will be included in subsequent domains.

Cultural Taboos and Myths

Taboos and myths can also be expressions of culture, and students offer examples of each, especially within their own unique cultures. Students are cautioned that one person's myth or taboo may be another person's belief system, including beliefs about health. Students are urged to be respectful, to listen with an open mind, and to factor their clients'/patients' taboos and/or myths into the plan of care whenever possible.

Worldview and Ethnocentric Tendencies

The goal of exploring this domain is to make students aware of their own views and ways of life while also acknowledging that there may be a fine line between cultural pride and ethnocentrism. Awareness of such tendencies benefits developing nurses, so that inadvertent offensive comments or actions can be avoided.

Life-Caring Rituals and Rites of Passage

Students offer many spiritual, religious, and personal examples that spring from their belief systems. Rites of passage can involve rituals and vice versa, and many

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of these can occur within health-care arenas. Even professional health providers have their own rituals and rites of passage, of which students must be aware. Rituals and rites of passage also reflect cultural expressions, often involving celebrations and food. Students must be aware of their future clients' rituals and rites of passage that may involve health approaches or that may be thwarted while in a health-care facility or due to a specific treatment.

Lay/Popular, Folk, and Professional Wellness-Illness Cultural Systems

Much time is spent discussing each of these three arenas and its vital contribution to a given person or group of people, so that students will know to value each. In general, these overlapping arenas are where people stay well or get well again, although the lay/popular arena is the largest and most utilized. Students are asked to comment on their own utilization of health providers within the various arenas. It is critically important for the students to realize that they or their future clients may use all three arenas simultaneously in a complementary, holistic, integrative approach to mind-body-spirit wellness or wellness restoration.

Specific Caring Behaviors and Health-Care Values, Beliefs, and Practices

Students are asked to define what health means to them and describe its importance. They are also asked about their own explanatory models for wellness or illness, such as what keeps them well and what makes them ill. They are then asked to ponder their health status and health behaviors. For example, what are some caring practices they use (complementary, integrative, holistic) and by whom is this care provided? What do they do to stay well or get well again? Who takes care of whom? Where is that care provided? Health practices are also cultural expressions. When the students become aware of their own varied health-care beliefs and practices, they will extend that courteous exploration to their future clients.

Cultural Diversities, Similarities, and Variations (Nonfamily)

Information solicited in this domain may indicate the extent of cultural assimilation, so students are asked to compare themselves to their friends, classmates, neighbors, coworkers, and nonfamily others. Areas to be compared include lifestyle, language, food, attire/clothing, music, religion/spirituality, celebrations, rituals, rites, physical/biological characteristics, and hygiene practices.

Cultural Changes and Acculturation Aspects (Family)

Information solicited in this domain may indicate the extent of acculturation, so students are asked to compare themselves to their family: grandparents, parents, siblings, children, grandchildren, and other relatives, regarding the same areas as addressed in the nonfamily domain.

CULTURAL CELEBRATIONS

As part of this curriculum, festive cultural celebrations are held in each Wellness lab. Students bring meaningful cultural artifacts, such as family photo albums, music, recipes, memorabilia, and favorite foods and/or beverages. Students explain the cultural significance of these items to their peers, and literally partake of each other's cultures in an enjoyable—and tasty—fashion. During the cultural celebrations, similarities between and among cultures are identified, and these serve to unite the students, highlighting the fact that we are all, indeed, connected. Nonetheless, while they are encouraged to appreciate the similarities, they are repeatedly reminded to honor the manifestations of their own multicultural uniqueness that they have honed from their many cultural influences. They are urged to continue their cultural self-awareness, enhance their own dynamic cultural expressions, and be proud of their multicultural nature, because their culture has contributed to their uniqueness.

SUMMARY

Our BSN Program emphasizes culture and its myriad considerations. Students expressed positive feedback regarding the integration of culture into our nursing program:

I really enjoyed this assignment more than I thought I would. It brought me back so many memories about my childhood. Also, it made me think how my culture is unique, and I shouldn't be ashamed of it or feel inferior to anyone. Culture is one of the most basic elements that makes up the identity and personality of each individual.

The most important thing that I want for both of my kids to take away from us is being respectful individuals, loving towards each other, being kind towards people, and being polite to others. If they manage to do these 4 things in life I will be able to say that I raised my children with our values and beliefs.

From doing this self-assessment on my culture, I have learned that my culture is unique. I understand the importance of how much value my culture has and keeping the traditions alive. Every time I gather with my elders I will try to find out more about my family traditions and make sure I write them down, because culture is what made me the person I am today. After this assignment I believe I will value my culture more than before.

The BSN faculty believe that students who are culturally self-aware are better prepared to honor each future client's unique culture, ask how the client's cultural health needs can be facilitated, and address those needs. While students can never know everything there is to know about all cultures, they can be aware that each person has unique cultural considerations that should be addressed, especially about health and health care. By building cultural bridges, our BSN students will become safe, holistic (mind-body-spirit), culturally competent client advocates to help people maximize their wellness across the lifespan.

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