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<p>Medical anthropology provides an excellent resource for nursing research that is relevant to clinical nursing. By expanding the understanding of ethnographic research beyond ethnicity, nurses can conduct research that explores patient's constructions and explanatory models of health and healing and how they make meaning out of chronic conditions and negotiate daily life. These findings can have applicability to culturally competent care at both the organizational or systems level, as well as in the patient/provider encounter. Individual patient care can be improved by applying ethnographic research findings to build provider expertise and then using a cultural negotiation process for individualized patient care.</p>	
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<p>This article reviews the culture of biomedicine and current practices in pain management education, which often merge to create a hostile environment for effective chronic pain care. Areas of cultural tensions in chronic pain frequently involve the struggle to achieve credibility regarding one's complaints of pain (or being believed that the pain is real) and complying with pain medication protocols. The clinically relevant continuum model is presented as a framework allowing providers to approach care from an evidence-based, culturally appropriate (patient centered) perspective that takes into account the highest level of evidence available, provider expertise, and patient preferences and values.</p>	
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this article. Culturally competent care for persons who share a common illness, such as Parkinson disease, is facilitated when the findings are incorporated into the Clinically Relevant Continuum Model. Use of this model allows providers to evaluate and use appropriate published evidence in addition to provider expertise and patient preferences and values.

How do Rural Health Care Providers and Patients View Barriers to Colorectal Cancer Screening? Insights from Appalachian Kentucky 181

Jennifer Hatcher, Mark B. Dignan, and Nancy Schoenberg

This article reports findings from a qualitative study that explored the attitudes and beliefs concerning colorectal cancer (CRC) screening among patients and health care providers in Appalachian Kentucky. Results from 5 focus groups are discussed here: 3 with primary care providers and 2 with patients. Although there are some areas of agreement, there are marked differences between the perceptions of Appalachian health care providers and participants regarding CRC screening. This article compares and contrasts those perceptions and provides suggestions for culturally competent practice and culturally relevant research to improve CRC screening in this vulnerable population.

Acculturation, Depression, and Function in Individuals Seeking Pain Management in a Predominantly Hispanic Southwestern Border Community 193

Kristynia M. Robinson and Jose J. Monsivais

Acculturation does not inform practice in the acute or primary care setting; nor does it explain ethnic disparities in the recognition and treatment of chronic diseases, particularly chronic pain. As clinicians, it is imperative that we recognize contributing factors, comorbid conditions, and the impact of chronic pain on individuals and families. The purposes of this article are to present evidence that exemplifies the nonsignificant role acculturation plays in expression of pain and function of a predominantly Hispanic population on the United States border; and to identify more meaningful perspectives of culture that may lessen health disparities and improve pain management.

Continuing the Cultural Competency Journey Through Exploration of Knowledge, Attitudes, and Skills with Advanced Practice Psychiatric Nursing Students: An Exemplar 201

Mary M. Hoke and Leslie K. Robbins

Numerous training and education programs have evolved to address culturally competent health care delivery. This article describes an exemplar educational approach used to teach cultural competency to beginning graduate psychiatric mental health nursing students. Using interactive strategies delivered within the 4 phases of the curriculum, the approach has been shown to facilitate students' ongoing journey to cultural competence. Building on baccalaureate nursing competencies, the course addresses attitudes, knowledge, skills, and cultural humility to strengthen cultural self-assessment, cross-cultural clinical practice expertise, and the use of culturally appropriate research for graduate students.

Translation of Family Health History Questions on Cardiovascular Disease and Type 2 Diabetes with Implications for Latina Health and Nursing Practice 207

Gia T. Mudd and Maria C. Martinez

Cardiovascular disease (CVD) and type 2 diabetes (T2D) are leading causes of morbidity and mortality among US Latinas. Family history is increasingly used to determine risk for these chronic, multifactorial diseases and to direct prevention interventions. This article provides a brief review on family history screening for CVD and T2D risk identification and presents the results of a pilot study to translate and evaluate the use of a family history tool for Spanish-speaking Latinas. Implications for the use of family history screening to guide CVD and T2D prevention interventions with Latinas are discussed.

Cultural Competency: Beyond the Vital Signs. Delivering Holistic Care to African Americans 219

Linda D. Wilson

Specific knowledge of African American communities, culture, and history is crucial to achieving culturally competent care. The unique and complex relationship that belief systems have to health care outcomes must be considered for all patients. This is even more apparent in the connection between religion and health outcomes for African Americans. However, as with all ethnic groups, nothing is absolute. Therefore, one must avoid stereotyping and recognize there are differences within each cultural group.

Using Structural Equation Modeling to Identify Predictors of Sexual Behaviors Among Hispanic Men Who Have Sex with Men 233

Joseph P. De Santis, Adriana Arcia, Amber Vermeesch, and Karina A. Gattamorta

Hispanic men who have sex with men (MSM) are at risk for HIV and other sexually transmitted infections related to high-risk sexual behaviors. The aim of this study was to test a model that predicts the sexual behaviors of Hispanic MSM that is based on an epidemiologic framework. The results of this study provide some important new information regarding the predictors of sexual behaviors among Hispanic MSM. The final model suggests that mental health is a significant predictor of sexual behaviors in this sample. Major implications for the development of interventions to address high-risk sexual behaviors highlight the need for health care providers and researchers to be cognizant of the influence of mental health issues on sexual behaviors.