

# Cultural Competence and Spiritual Assessment

 Questions

1. The United States is becoming more of a nation of diverse culture. Which factor contributes to cultural diversity in the US?
  - (a) Medical tourism
  - (b) Decreased acceptance of lifestyle choices that are out of the norm
  - (c) Globalization
  - (d) Racial discrimination
  
2. When caring for a client of a different culture, understanding cultural diversity is important. What is the key to understanding diversity of culture in the practice of nursing?
  - (a) Some knowledge of different health practices of various cultures
  - (b) Being assertive of evidence-based practice
  - (c) Self-awareness and knowledge of one's own culture
  - (d) Prioritization of client's health beliefs and practices over established protocols and guidelines
  
3. The nurse wants to be aware of poverty issues when providing care for a multicultural set of clients. Which of the following ethnic and racial group has the LEAST poverty rate?
  - (a) Alaska natives
  - (b) Non-Hispanic whites
  - (c) African Americans
  - (d) Hispanics
  
4. The nurse should understand that the largest percentage of immigrants presently coming to the US come from
  - (a) Asia
  - (b) Mexico
  - (c) Latin America
  - (d) Europe
  
5. Of all factors considered to be 'determinants of health', which has the greatest influence on health?
  - (a) Quality of neighborhood
  - (b) Culture
  - (c) Genetics
  - (d) Poverty

6. Health disparities exist in our society. This means that certain health problems are particularly high in a given 'vulnerable population.' Which racial/ethnic group has the highest cases of the following: gonorrhea, congenital syphilis, AIDS, nonfatal firearm-related injuries, new cases of tuberculosis, homicides, and drug-induced deaths?
  - (a) Asians
  - (b) African Americans
  - (c) Hispanics
  - (d) Alaskan Natives.
  
7. The National Standards for Culturally and Linguistically Appropriate Services in Health Care determines standards designed to help meet the health needs of immigrants. Which detail of the first standard refers to a set of behaviors, attitude, and policies related to language and culture that enables effective multicultural care?
  - (a) Respectful care
  - (b) Effective care
  - (c) Cultural and linguistic competence
  - (d) Critical thinking
  
8. Religion has a big impact on how a person reacts to and thinks about health and illness. Which of the following indicates positive religious coping?
  - (a) A person feels a strong connection to God or a supreme being
  - (b) There is constant struggle to do good to others
  - (c) Illness is viewed as a form of punishment
  - (d) Recovery from illness depends totally on God
  
9. A nurse is caring for a client who appears melancholic. When interviewed by the nurse, she states that she has problems of the heart. The nurse clarifies if she meant she was sad. Her reply in broken English was, "I don't know. I don't know what sad means in our language." To which cultural group does the client most probably belong?
  - (a) Mediterranean
  - (b) Chinese
  - (c) Ugandan
  - (d) Mexican American
  
10. The nurse is reviewing her concepts on cultural diversity to further improve her competency. Which of the following characterize the biomedical theory of illness causation?
  - (a) The body can be understood by reducing it to smaller components, such as understanding bodily systems or a particular organ.

- (b) Health exists when there is perfect balance of all factors of health in an individual
- (c) Human life is only a part of the big universe
- (d) Foods are transformed into yin and yang energy after being metabolized

## 3

11. A Filipino client is a professed Christian Baptist. He firmly believes that evil spirits have caused his undiagnosed abdominal pain. This is an example of which causation of illness?
- (a) Biomedical
  - (b) Naturalistic
  - (c) Magicoreligious
  - (d) Hot and cold theory
12. A female client is experiencing dystocia and insists on seeing a braucher who has the right potion to help progress her labor. To which cultural/ethnic/racial group does the client belong?
- (a) European
  - (b) Amish
  - (c) Hispanics
  - (d) Blacks
13. An American Indian client scheduled for an operation requests blessings from their medicine woman. The nurse is correct when she requests visitation from the
- (a) Curandero
  - (b) Espiritista
  - (c) Acupuncturist
  - (d) Shaman
14. The nurse knows that understanding culture is pertinent to nursing practice. Which of the following is a characteristic of culture?
- (a) It is naturally learnt from birth through the learning of language, and through experiencing the life of which a person is born to
  - (b) It is having a unique experience, lifestyle and point of view that are shared with the ethnic group to which the person belongs
  - (c) Its adaptation is primarily dependent on the environment, natural resources, and technology
  - (d) It persists to influence the cultural group for long periods of time with no or little change
15. Choi is a Korean national who immigrated to the US eight years ago. He was once a conservative teenager who wore checkered shirts and slacks. After three years, he is seen wearing what kids his age also wear. He also has picked up some expressions that he hears from his peers. When

- he is home, he speaks Korean, and still enjoys home-cooked Korean meals. What correctly describes this situation?
- (a) Establishing ethnic identity
  - (b) Acculturation
  - (c) Assimilation
  - (d) Biculturalism
16. Sarai is a 5-year girl of Mediterranean race who has come to the US with her family. She tells her mother that she is having a hard time talking and playing with friends, and she refuses to go to school. What is Sarai most likely experiencing?
- (a) Assimilation
  - (b) Biculturalism
  - (c) Multiculturalism
  - (d) Acculturative stress
17. Nurse Kaye has been a health nurse in a community whose residents are mostly Muslims. When one of her clients died, she was careful not to touch the body. She also notified the family immediately. Being in that community for ten years, she has understood their culture, and has attended to her patients' needs. Her clients have expressed their satisfaction of her service. What did Nurse Kaye demonstrated?
- (a) Cultural sensitivity
  - (b) Cultural awareness
  - (c) Cultural competence
  - (d) Cultural assimilation
18. A client of African culture is being seen by the nurse. Which of the following would the nurse allow the client to take for health restoration that will reflect culturally competent provision of care?
- (a) Ginseng
  - (b) Asafoetida, herbs and roots
  - (c) Swamp root and Olbas
  - (d) Manzanilla
19. Which of the following groups believes that disharmony with nature can have negative effects on health?
- (a) Native Americans
  - (b) Asians
  - (c) Hispanics

- (d) Europeans
20. A patient is for surgery and the nurse requests that the client remove his bracelet. The client refused and said that the bracelet is an amulet against the Mano Negro. To which ethnic/racial group does the client most probably belong?
- (a) European
  - (b) African
  - (c) Spanish
  - (d) American Indian
21. Which of the following is true of a cultural assessment? Select all that apply.
- (a) It looks into the patient's social and personal details
  - (b) It primarily aims to establish short-term and long-term goals
  - (c) It is systematic
  - (d) It is comprehensive
  - (e) It aims to gather data about the patient's health beliefs, values, and practices
22. Which of the following is the primary cause of a growing culturally diverse population?
- (a) Rapid improvements in technology
  - (b) Increasing number of religions
  - (c) Global migration
  - (d) Increasing number of communication modes
23. Which of the following is NOT true about culture?
- (a) It is about patterns of behavior that are socially transmitted
  - (b) It is a set of the products of human work and thought that is common to a population
  - (c) It is a system of shared ideas, rules and meanings
  - (d) It is a manner of dividing people into groups based on various sets of physical attributes
24. A male Caucasian patient walks in an emergency department because of sudden blurred vision. He believes that the new medication he had been taking since a few days before is causing the blurry vision. He is Roman Catholic and lives with a roommate. Which of the following is the information about the patient's *race*?
- (a) The belief that the new medication he took caused the health problem
  - (b) Caucasian
  - (c) Roman Catholic
  - (d) Lives with a roommate

25. Which of the following identify themselves with the culture of their group?
- (a) Muslims
  - (b) Mexican
  - (c) White
  - (d) Africans
26. Which of the following goals of *Healthy People 2020* targets health equity for all regardless of cultural background?
- (a) Achieve high-quality and long life free of diseases that could be prevented
  - (b) Eliminate health disparities
  - (c) Create healthy social and physical environments
  - (d) Promote quality of life
27. Which of the following are the characteristics of the care and services that would be provided to patients in accordance with the principal standards in the *National CLAS Standards*? Select all that apply.
- (a) Special
  - (b) Just
  - (c) Effective
  - (d) Honest
  - (e) Equitable
28. Which of the following nurses demonstrates cultural competence?
- (a) The nurse who starts an IV line on the patient's non-dominant hand
  - (b) The nurse who allows a religious relic to be held by a Roman Catholic patient
  - (c) The nurse who puts on a colorful coat when talking to a 2-year-old patient
  - (d) The nurse who voiced an opinion to the doctor
29. Which of the following can help make a nurse culturally competent?
- (a) Genuinely seeking cultural encounters
  - (b) Requesting a different assignment when dealing with Asian patients
  - (c) Starting an IV line in an African American teen
  - (d) Providing information to a Muslim couple
30. Which of the following strategy should be used to analyze situations to develop cultural awareness?
- (a) Theoretical framework

- (b) Statistical analysis
- (c) Stereotyped thinking
- (d) Reflective thinking

3

31. Which of the following nurses demonstrates *cultural humility*?
- (a) The nurse who approaches a patient with respect
  - (b) The nurse who non-judgmentally interacts with the parents of a 5-year-old girl who just underwent female circumcision
  - (c) The nurse who greeted a patient 'Happy birthday'
  - (d) The nurse who gave health teaching to a childless couple
32. A nurse shows that she prefers interacting with a patient who is neatly dressed and looking very professional than with the patient who is wearing black lipstick and short skirts. Which of the following does the nurse reflect?
- (a) Stereotype
  - (b) Prejudice
  - (c) Bias
  - (d) Insensitivity
33. A nurse begins to provide health teachings regarding proper dieting to an obese male patient. The patient has not undergone any assessments to determine the cause of his obesity. Which of the following did the nurse reflect?
- (a) Stereotype
  - (b) Dishonesty
  - (c) Prejudice
  - (d) Incompetence
34. A nurse is telling a male patient that he should get a job, because he is the father, and that having a job is expected of him as the head of the family. Which of the following did the nurse demonstrate?
- (a) Bias
  - (b) Incompetence
  - (c) Stereotype
  - (d) Prejudice
35. Which of the following questions can be used for self-reflection to become culturally competent?
- (a) Should I do volunteer jobs at the nearest home care facility?

- (b) Do I know how to ask for the services of an interpreter should the need arise?
  - (c) Do I keep my patient's information confidential at all times?
  - (d) Am I being honest to my patient?
36. Which of the following dimensions of cultural humility refers to *identifying one's own biases*?
- (a) Self-awareness
  - (b) Respectful communication
  - (c) Competent care
  - (d) Collaborative partnerships
37. A nurse has asked for the services of a certified interpreter to be able to develop a nursing care plan with the patient. Which dimension of cultural humility did the nurse demonstrate?
- (a) Competent care
  - (b) Collaborative partnerships
  - (c) Self-awareness
  - (d) Respectful communication
38. A patient has recently died, and the nurse sees the patient's wife crying. The nurse says, "This is a difficult situation for you. It is ok to cry." Which of the following components of the RESPECT model did the nurse exemplify?
- (a) Rapport
  - (b) Empathy
  - (c) Support
  - (d) Partnership
39. Which of the following shows *Support* to the patient according to the RESPECT model?
- (a) Using verbal clarification techniques
  - (b) Conveying one's presence and availability when help is needed
  - (c) Respecting cultural practices
  - (d) Avoiding making assumptions
40. Which of the following situations describes a *culturally bound syndrome*?
- (a) The nurse is telling an African American patient their right as a patient
  - (b) The husband of a Korean patient tells the nurse his wife is experiencing *Hwabyung*
  - (c) The nurse asks a teen patient what a '*bling*' is
  - (d) The nurse asks for Kosher diet for a Jewish patient
41. A patient who believes that there is a God who is all good suddenly lost his wife to murder. The nurse must prepare to care for a patient with:

- (a) Religious affiliation
  - (b) Somatization disorder
  - (c) Culturally-bound syndrome
  - (d) Spiritual distress
42. Which of the following is an example of a developmental loss?
- (a) Retirement
  - (b) Loss of the ability to have a child due to advanced age
  - (c) Death of a child
  - (d) Being fired from work
43. Which of the following patient responses signal spiritual distress?
- (a) "Why do I have cancer?"
  - (b) "What caused my disease?"
  - (c) "Who should I talk to regarding my diagnosis?"
  - (d) "I would like the tests to be repeated."
44. A nurse is making a spiritual assessment and is asking a patient if they have any unmet hopes and dreams. What type of loss does the nurse want to determine?
- (a) Loss of self
  - (b) Loss of other people
  - (c) Concrete losses
  - (d) Abstract losses
45. Which of the following questions assesses for the patient's source of hope and strength?
- (a) "Are there any religious practices that are important to you?"
  - (b) "Who helps the most when you are afraid?"
  - (c) "Has being sick changed anything in your faith?"
  - (d) "Do you believe in a God?"

**ANSWERS**

1. C  
Immigration and globalization are the major factors that contribute to cultural diversity in the US.
2. C  
Self-awareness and knowledge of one's own culture is the key to understanding the diversity of culture in nursing practice because one's own culture and beliefs can influence the nurse's own practices, behavior and coping mechanisms.
3. B  
The national average of poverty rate is least for non-Hispanic whites at 13% while Alaska natives, African Americans and Hispanics have the greatest poverty rates.
4. C  
The current wave of immigrants mostly comes from Latin America, followed by Asia.
5. D  
Among the determinants of health, poverty exerts the greatest influence on health. This is according to results of evidence-based research.
6. B  
African Americans have the largest health disparities in relation to cases of gonorrhea, congenital syphilis, AIDS, nonfatal firearm-related injuries, new cases of tuberculosis, homicides, and drug-induced deaths.
7. C  
Cultural and linguistic competence refers to a set of behaviors, attitude, and policies related to language and culture that enables effective multicultural care.
8. A  
Signs of positive religious coping are a strong connection to God or a supreme being, a strong connection towards others, and having a peaceful and kind outlook in life.
9. B  
The Chinese have no local term equivalent to 'sad', and to express themselves, they usually refer to their melancholic feelings as problems of the heart.

10. A  
The biomedical theory of illness causation states that the body can be understood by reducing it to smaller components, such as understanding bodily systems or a particular organ. Another concept that pertains to the biomedical theory of illness causation is the germ theory, wherein bacteria, viruses, fungi and other microorganisms cause illness.
11. C  
Magicoreligious theory of illness causation states that supernatural forces, such as black and white magic, good and evil spirits, angels and demons, voodoo and witchcraft, cause health and illness.
12. B  
A brauche is the Amish' traditional healing practice and a braucher is the healer. A braucher prepares tonics, potions and herbs to treat different ailments and diseases.
13. D  
The American Indian healer or medicine person is referred to as the Shaman.
14. A  
Culture is naturally learnt from birth through the learning of language, and through experiencing the life of which a person is born to. It is having commonness that is shared by the group. Its adaptation is related to the environment, natural resources, and technology but it does not rely primarily on them. Culture is also non-stagnant and undergoes constant change.
15. D  
Biculturalism is picking up from the culture of the majority while maintaining one's original culture in his own ethnicity.
16. D  
Acculturative stress refers to the difficulties that a person of a different culture is experiencing in adjusting and adapting to a new culture.
17. C  
A nurse is culturally competent when she demonstrates understanding the total context of a culture including factors that cause stress, social factors, and similarities and difference in culture.

18. B  
Patients with African culture believe that Asafoetida, herbs and roots would restore health.
19. A  
Native Americans and Africans believe that disharmony with nature can have negative effects on health.
20. C  
People with Spanish heritage believe that the amulet bracelet will protect them from the Mano Negro, the evil one.
21. C, D, E  
Cultural assessment is an important part of nursing care. It is a systematic and comprehensive process that aims to gather data about the patient's health beliefs, values, and practices. The patient may be an individual, a family, a group or community.
22. C  
Increasing global migration has made the US population more culturally diverse. Cultural diversity has posed a big challenge to providers who have beliefs and practices that are very different from their patients.
23. D  
Culture is the collection of all patterns of behavior, arts, beliefs, values, customs, way of life and all the products of human work and thought put together that a group of people uses to view the world and make decisions. It is a system of viewpoints and meanings.
24. B  
*Race* refers to a concept of differentiating people according to various sets of physical attributes that are usually related to ancestry. Caucasian, Asian, and African are examples of a race.
25. A  
Some people identify themselves with the culture of their groups, such as those belonging to a particular age group or religion.
26. B  
*Healthy People 2020* aims to eliminate disparities among ethnic and cultural groups in the US by providing quality care that is responsive to diverse cultural backgrounds.

27. C, E

The Principal Standard of the *National CLAS Standards* is: “Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs”. (source)

28. B

Cultural competence is the ability to understand and respect people across cultures. A culturally competent nurse is able to communicate and interact with patients who have set of beliefs and practices different from their own. An example is allowing religious items that do not pose any health risks in the patient’s room.

29. A

Nurses become culturally competent by actively seeking cultural encounters and information. They can also do this by becoming sensitive to cultural needs, and by being aware of cultural diversity.

30. D

To analyze actions and events, and develop cultural awareness, the nurse needs to use reflective thinking. The nurse can do this by identifying their own biases and prejudices about other cultures.

31. B

*Cultural humility* is the practice of humility while doing self-reflection and self-critique in the care of patients with a different cultural background.

32. C

*Bias* is a preference or a tendency to give impartial judgment to a person or group with a different culture. In the case scenario, the nurse showed preference to the patient who is well-groomed over the other patient who is not.

33. C

Prejudice is a negative reaction toward a person or situation without any factual basis. In the case scenario, the nurse has a prejudice that the patient became obese due to overeating.

34. C

A *stereotype* is a fixed, often overgeneralized view of a particular group of people. In this case, the nurse has a stereotype that the patient, as the father, has to be the head of the family and the parent who has to have a job.

35. B

Self-reflection is an important part of being culturally competent. To do self-reflection, the nurse may ask themselves several questions on how they would pursue competence when dealing with people with different set of beliefs and practices. An example of the questions to ask oneself is “Do I know how to ask for the services of an interpreter should the need arise?”

36. A

To practice cultural humility, the nurse must be able to identify their own biases. This process of learning personal biases is called *self-awareness*.

37. B

To practice cultural humility, the nurse must build collaborative partnerships, which is all about having the nurse-patient relationship built on respect and having mutually agreeable plans.

38. B

One way of showing respect to the patient is by demonstrating empathy. Empathy can be exemplified by acknowledging and legitimizing the feelings of the patient.

39. B

In the *Support* component of the RESPECT model, nurses are encouraged to convey their presence and their availability to the patient in their times of need.

40. B

A culturally-bound syndrome is a recognized disease among people of a cultural group. In this case scenario, *Hwabyung* is recognized by Koreans as a malady that is caused by anger and depression.

41. D

*Spiritual distress* is experienced when one loses their ability to find meaning in life through their relationship with others or a supreme being. A cause of spiritual distress is a loss of a significant other.

42. B  
Developmental losses are experienced as part of the natural developmental process, such as aging.
43. A  
Nurses must be alert for patient responses that signal spiritual distress. When patients ask why they have acquired a certain disease, or when they tell the nurse that they are at a loss on what to do, they are experiencing spiritual distress.
44. D  
Abstract losses are those that cannot be measured or observed because they had not been visible. Examples of abstract losses are the loss of dreams, hopes, and childhood, among others.
45. B  
When the nurse assesses a patient's source of hope and strength, the nurse may ask the patient who helps them when they are in distress or in need. The nurse may also ask what kind of help is available to them and who the most important person is to them.