Cultural Competence Generalities
This is general information designed to provide information about common traditions, traits and experiences of a group. This information is not intended to nor should it be used to stereotype an individual. Personal experiences will vary.

Generation gaps exist along with educational & economic differences. It is always best to ask.

Remember the “Platinum Rule”- treat others as they want to be treated

Overview:
In the United States, there are more than 500 nations of Native Americans, each having their own separate customs, language, culture, set of beliefs and religious practices. According to the 2000 U.S. Census there are nearly 4.1 million American Indians, which accounts for 1.5 % of the U.S population. The designation of all tribes as “American Indians” or “Alaskan Natives” is sometimes more preferred than “Indians,” “Native American,” or “Eskimos”

Religion and Spirituality
There is no central figure like Moses, Jesus, Muhammad or Buddha, nor is there a central holy book in Native American Religious tradition. It is an oral tradition that is passed down from generation to generation, based on certain guiding principles that are internalized from childhood and are an integrated part of each person’s life.

- Some American Indians has Christian ties, although they also may hold traditional beliefs. As patients, some American Indians choose not to disclose traditional practices
- May use sweet grass, cedar, sage or tobacco smoke along with prayers, blessings, cleaning and healing.
- Many Native Americans have items that they consider sacred. They may be stones, feathers, antlers, fur, claws, or pouches of cloth or leather. Do not touch sacred items. In an emergency, keep sacred items with the patient when at all possible.

Concept of Health
There is an orientation towards holistic health and wellness. American Indians align mind, body and spirit with personal beliefs about nature, God, and the universe to enhance an individual’s harmony

Language & Communication
English is the most commonly spoken language, for American Indians. A light handshake is culturally appropriate and respectful when initiating a greeting

Family
Cultures vary in kinship structures. In matriarchal clans, the family may live near the wife’s family (and land). In patriarchal clans, the family may live near the husband’s family (and land). Kinship roles are extensive; they often include friends of the family and cousins

- Family decisions are can be made by an individual as well as by a group consensus
- Elders highly value caring for themselves, although in times of need, families usually take the initiative to care for them. Elders are respected and listened to when decisions are being made.
- Children cultivate independence by fulfilling responsibilities to family, community and tribe

Dietary Norms
Generally, three meals per day are consumed. Sharing food often reflects hospitality and respect. For American Indians, traditional diets are low in fat

- Fasting is a traditional part of preparation for rite of passage ceremonies and for spiritual discernment. Although a person who is ill should be encouraged to eat, family members and others may be fasting on behalf of the person. Sometimes fasting is a part of body healing, as a cleansing of toxins.

Traditional foods
These include “fry bread”, pudding, and foods that are high in fat. Additionally, particular herbal teas are preferred.

- Native Americans have preference for certain traditional foods during ceremonial times. These may be requested, especially particular teas.

Gender Roles
Each gender may have specific roles that vary depending on age and cultural structure. Some of these gender roles are limited to particular situations or times.
In matriarchal clans, women (and sometimes their brothers) make the important decisions, while men are to protect the family’s and community’s well-being.

It is the opposite way around for patriarchal clans. When a family member is ill, women may be caregivers.

**Personal Appearance**

American Indians are a modest people. Try to be sure their bodies are not exposed to others. Hair care and treatment may be associated with health or mourning practices.

An American Indian patient might be wearing a medicine bag or have special items with them such as feathers or herb bundles nearby. It is preferred by American Indians that only close family remove these items, if a procedure necessitates removal of these special items.

**Treatment Issues**

Some American Indians relate physical illness to violations of taboos or being out of harmony. Due to the fact that American Indians focus on the present, they may not consider the future consequences of current habits. Additionally, American Indians may not seek care until symptoms are advanced.

- Some American Indians may refuse to accept donated organs or be reluctant to give up body parts because of their personal beliefs.
- Some American Indians are skeptical about taking medicines; they think that use of medicines can become habit forming and prolong an illness if used over an extended amount of time.

**Labor, Birth & After Care**

American Indian women have the lowest prenatal care rates of all population groups due to a history of imposed sterilization, women may fear cesarean birth. For some tribes, women expect a female attendant to be present during birth. Analgesics may be used minimally for a normal delivery.

**Death, Dying & Bereavement**

Maintaining a terminal patient on artificial life support for a prolonged period in a vegetative state is not encouraged. American Indians take care to honor the body, regarding to the body as the “spirit’s home”. It is believed that upon death, the spirit reunites with the creator, while other tribes believe in reincarnation. Still others believe in a Christian based philosophy that the soul goes to heaven. Some American Indians prefer that the deceased rest in peace (and are buried) with other relatives and friends who have died.

**End of Life**

At the end of life, prayers may be said and family is encouraged to be present. Reactions can range for acceptance to denial within a family. Traditional persons do not generally desire embalming, and may require significant lengths of time to be with the body. Traditional families may wish to have the body near them for as long as 4 days. The body should not be moved until the family has been consulted about their particular tradition. Special clothing may be brought to dress the body in before it leaves the hospital, or the family may request that their loved one be covered at the time of death by a blanket. Particular ceremonial objects may be placed on the body. It is often customary for a family member or the spiritual leader to cut a piece of hair from the deceased. This is for some tribes especially important at the death of a child.

**Pain**

American Indian patients may be unwilling to express pain, so a clinician must frequently ask about it, to be safe. In the American Indian culture pain is very undertreated. American Indian patients are more willing to express pain to a family member.

**Health Disparities**

American Indian populations have the highest rates of depression (especially in teenagers), suicide and diabetes.

**Traditional Home Remedies**

American Indians prefer to use herbs and roots for helping to cure common maladies such as cough or headaches. When prescribing medication, changing a patient’s diet or preparing for a medical procedure, a clinician should ask if the patient uses any home remedies.

**SOURCES**

*Culture and Clinical Care* Juliene G. Lipson, Suzanne L. Dibble, 2006

http://www.cdc.gov

www.msh.org

www.heart.org

MCHC Metropolitan Chicago Healthcare Council

Wheaton Franciscan Healthcare