**Discussion response**

**Student’s Name**

**Institution affiliated**

**Discussion response**

**STUDENT 1**

***ASHLEY ENG***

*Analyzing  and reviewing the discussion responses on cultural practices has left a positive impression on me. In a country that is becoming more and more divers, the health-care profession has addressed cultural differences by ensuring that nurses and Doctors are culturally competent. When I started this journey it was clear to me that what I learned in class I could apply at work.  Applying  these practices personally gives me the tools to respect those I interact with daily, understanding that everyone does not have the same beliefs about health care as I do. Being aware of the cultural differences to me shows that I understand and respect  a persons culture and their beliefs. Currently these practices help me on the job with my  multicultural patients. It's rewarding to offer patients an alternative approach to medicine and treatment. In the future I may work in an emergency room or a doctor's office in a diverse neighborhood. Knowing and applying cultural practices and being competent and confident  will ease tension and in many cases break down walls between nurses and patients. If I put myself in the shoes of a patient that comes from a different cultural, how comforting is it to have a health care professional that understands and respects your culture and beliefs. Having the chance to offer an alternative approach to treatment should be rewarding for both patient and health care professional.*

MY RESPONSE

Ashley Eng, I agree with your response to the importance of understanding cultural practices in the healthcare profession since it not only increases nurses' and doctors' competence but also provides a better understanding of the patients and alternative treatments. I believe that cultural awareness offers flexibility and efficiency when serving people in diverse communities. Cultural competency plays an integral role in shaping the nature of interactions and experiences between the patients and healthcare professionals (Jongen, McCalman, & Bainbridge, 2018). I believe being aware of cultural differences improves communication between nurses and patients hence aiding patient care and administration.

STUDENT2

***CHINONSO ON***

*One position from my responses that left an impression on me that I will incorporate in my personal, current or future, practice is that I will make sure that my values align with whatever organization/ hospital I join. I honestly believe that organizational culture makes a big difference with job satisfaction. Nursing is already a demanding job. So picking a place to work can either tire you out or excite you. "Mission, strategy, structure, leadership and human resource practices are important determinants of organizational culture. An organization with a strong culture helps employees to accomplish their goals and tasks and be satisfied in their job. Organizational culture is an important explanatory variable for behavior and performance in the workplace and influences teamwork and treatment outcomes. Moreover, organizational culture predicts job satisfaction. Existing studies focus on the impact of organizational culture on implementing interventions, quality improvement , patient safety, or performance, or focus only on one professional group such as nurses." (Korner et al., 2015). This shows that when you align with the values of the organization, teamwork is established, and job satisfaction is increased. When you love where you work it shows in the quality of care that you give to patients. Treatment outcomes are then increased because you have a want to be at your place of work and a want to give the best care that you can. Overall I will make sure that I throughly research the places I want to work at so that I can fully enjoy being an employee of that organization.*

MY RESPONSE

I concur with your opinion that organizational culture plays a significant role in employee job satisfaction, performance, and outcomes. I also share the same views that organizations that have a strong mission, strategy, human resource, and leadership create a friendly environment for workers hence encouraging teamwork, cooperation, and better delivery of services. According to Banaszak-Holl et al. (2015), organizational culture in hospitals and nursing homes influences staff turnover since it creates a satisfactory environment for workers promoting job fulfillment.

STUDENT 3

*JEAN PAUL*

*According to Miller (2019) pain as a “biopsychosocial phenomenon with multiple dimensions, including sensory, cognitive, emotional, developmental, behavioral, spiritual, and cultural influences” (p. 582). Pain does not come with age, however there are several factors that can lead to pain or the sensation and expression of it. The type of pain the patient is experiencing can be nociceptive, neuropathic, or cancer pain. The duration of the pain can be acute or chronic. The cause of the pain, the patient’s cultural background and several other factors*

*My most recent patient, Mr. LJ, was admitted with acute chest pain. His health history indicates that Mr. LJ has received cardiac surgery as a child to replace a “leaky valve.” He described the pain as sharp and rated it as a 5 on a scale of 1 to 10. The pain also radiate to his left shoulder and is able to recreated upon activity. These symptoms are also accompanied by bradycardia and murmurs. Though unclear, it is assumed that this pain is nociceptive that radiates to his left side. Assumptions often lead to ineffective interventions and may cause the pain that the older adult is dealing with to be untreated.*

MY RESPONSE

As you have indicated, pain has a role in the patient's emotional and physical wellbeing. I have interacted with people undergoing painful situations, and I understand the feeling they face. I have learned from your response that pain can be neuropathic, nociceptive, or cancer pain. As Linton (2011) noted, when managing pain, it is important to understand the patient's background, cause of pain, and psychological factors. I think it is important to treat emotional pain in the same way we deal with physical.

STUDENT 4

*LINDA*

*Chronic pain is not a natural part of aging. Most people in this population suffer from pains as a result of various disorders(Miller, 2009). This has resulted in the development of a notion that pain is normal aging. Mrs. Smith came to the hospital with complaints on persistent pain on her joints. She was seventy-two years old with a history of arthritis in the family. During the physical investigation, Mrs. Smith indicated that she is a Jew, who believes that pain verbalization is acceptable. As I engaged the patient, I realized that she has a unique perspective of viewing pain in aging. The woman concluded that pain in aging is normal according to the Jews.*

*Mrs. Smith assumed that all older people experience pain. She maintained that in the Jewish culture, it is an essential part of aging. According to her, every individual must prepare for it during old age. Pain assessment must often be conducted in a systematic manner that must be documented. This is critical in ensuring that proper interventions are instituted for effective treatment outcomes(Kaye, Baluch, & Scott, 2010).*

*My final assumption was that patients, as well as healthcare workers,  have prior experiences that affect the management of pain. I did not let my beliefs jeopardize the evaluation of Mrs. Smith's pain. Additionally, her views regarding the susceptibility of Jews to pain during aging did not play any significant role in my decision. Evidence shows that pain is not a normal part of aging(Molton & Terrill, 2014). It is caused by other factors that can be prevented by simple and less costly interventions. Therefore, it is critical for people to understand that pain in aging should be treated or managed to improve quality of life for the elderly individuals*.

My response

I agree with your opinion that pain is a manageable aspect if patients and healthcare providers follow simple and less costly intervention measures. I believe that pain susceptibility does not support age and cultural beliefs; it affects everyone equally. As you noted, the patient's cultural beliefs should not influence doctors' or nurses' decision making and evaluation of the patient. Peacock notes that culture influences people's response to pain and compliance with treatment measures (Peacock, 2008), and this should not affect the healthcare provider's judgment and decisions.

**References**

Jongen, C., McCalman, J., & Bainbridge, R. (2018). Health workforce cultural competency interventions: a systematic scoping review. BMC health services research, 18(1), 232.

Linton, S. J., & Shaw, W. S. (2011). Impact of psychological factors in the experience of pain. *Physical therapy*, *91*(5), 700-711.

Banaszak-Holl, J., Castle, N. G., Lin, M. K., Shrivastwa, N., & Spreitzer, G. (2013). The role of organizational culture in retaining nursing workforce. *The Gerontologist*, *55*(3), 462-471.

Peacock, S., & Patel, S. (2008). Cultural influences on pain. *Reviews in pain*, *1*(2), 6-9.