Healthcare providers as cultural guests of patients and their loved ones during the COVID-19 pandemic: Establishing trust in the ICU



Haripriya Dukkipati¹, Amie Koch, DNP, FNP-C, RN, ACHPN², Remi Misiewicz, BSN, RN, CPHON², Kimberlee Grier, BSN RN, CHPPN², Bonnie Hepler, BSN, RN, MSW, MSPH², Christopher Cox, MD, MHA, MPH ³, Sharron Docherty, PhD, PNP, RN, FAAN ²

¹Trinity College of Arts & Sciences, Duke University, ² Duke University School of Nursing, ³ Duke University School of Medicine

BACKGROUND

- In the unfamiliar stressful environment of the Intensive Care Unit (ICU), patients and loved ones rely on the healthcare team to guide them.
- Patients and loved ones may utilize **culture as a mechanism to maintain a sense of comfort and familiarity** when navigating the
 foreign environment of the ICU.
- Healthcare providers can establish trust with patients by acting as cultural guests (Leslie et al., 2021) to bring together the cultural spheres of home and the ICU.

CULTURAL GUEST

The mindset of assessing for, and prioritizing, the incorporation of a patient's defined culture, and valuing a patient's personal cultural practices as an important aspect of their healthcare experience.

METHODS

- Qualitative descriptive study with family caregivers (n=22) whose family member had been in the ICU between May 2019 and August 2020.
- Semi-structured, audio-recorded phone interviews were conducted between Feb 2021 and Oct 2021.
- The research team employed a conventional and directed qualitative content analysis to code transcribed interviews, followed by the development of a formative categorization matrix, and theoretical labeling of the main categories and subcategories.

RESULTS

Four Key Pillars	Themes in Context
Genuine Connection	 Providers simplify medical jargon to speak to patients and loved ones Perceived provider desire to ensure that loved ones are regularly updated on patient's condition
	 Providers demonstrate empathy and concern for loved ones' wellbeing Healthcare provider team is cohesive and does not exhibit conflict
Establish Expectations	 Providers assess the loved ones' culture, without using stereotypes Providers establish expectations with patients and loved ones about bringing in aspects of their culture to ICU (food, music, art, comfort items)
•	 Providers respect cultural practices and comfort items loved ones bring into ICU Providers offer culturally congruent services

"She has children too and she would talk to me and relate to me with her children" (Mother)

"I did trust them because they seemed to care ... I really appreciated being kept in the loop" (Sibling)

"It's all about the beliefs and what people feel or their loved ones because we know our loved ones more than you" (Sibling)

"It would be on... whoever was taking care of her wanted to hear, but that's not what I brought the radio for" (Daughter)

CONCLUSION & CLINICAL IMPLICATIONS

- We identify four key pillars which assist the healthcare team to act as cultural guests: genuine connection, build trust, establish expectations, and respect of culture.
- It is essential to continually assess the patient and loved one's cultural values and practices.
- Acting as cultural guests, the healthcare team can provide medical services in a way that
 complements patients' culture, supporting them physically, mentally, and socially, with the goal
 of enhancing communication, experience, and trust.

REFERENCES

- Leslie, P., Xia, B., & Yoo, J. (2021). It's Not Such a Small World After All: The Intersection of Food, Identity, and the Speech-Language Pathologist. Perspectives of the ASHA Special Interest Groups, 6(4), 876–884. https://doi.org/10.1044/2021 PERSP-20-00276
- Larsen, R., Mangrio, E., & Persson, K. (2021). Interpersonal Communication in Transcultural Nursing Care in India: A Descriptive Qualitative Study. Journal of Transcultural Nursing, 32(4), 310–317. https://doi.org/10.1177/1043659620920693
- Degrie, L., Gastmans, C., Mahieu, L., Dierckx de Casterlé, B., & Denier, Y. (2017). How do ethnic minority patients experience the intercultural care encounter in hospitals? A systematic review of qualitative research. BMC Medical Ethics, 18(1). https://doi.org/10.1186/s12910-016-0163-8