Metasynthesis of Cultural Care Expressions, Beliefs, and Practices of African Americans

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Introduction

Leininger’s Theory of Culture Care Diversity and Universality guided this metasynthesis to discover new transcultural knowledge for the discipline and practice of nursing as it relates to care provided to the African American community.

Purpose / Goal

Purpose: To discover culture care meanings, expressions, and practices that promote health, well being, and beneficial lifeways for African Americans.

Goal: To provide culturally congruent care decisions and actions for African Americans to promote their health, well being and healthy lifeways.

Research Questions

- What social and structural factors affect African American health and assist to promote well being?
- How do African Americans describe health and well-being?
- What are the African American similarities and differences in beliefs and practices regarding health and well-being?
- What are the cultural care nursing decisions and actions that promote health and well-being for African Americans?

Research Method

The Meta-Ethnounsuring Qualitative Research Method (McFarland, Wehbe-Alamah, & MSN students, 2010) was used to study African American culture care expressions, beliefs, and practices. Leininger’s Phases of Ethnounsuring Analysis for Qualitative Data were used to discover study findings (Leininger & McFarland, 2002).

The sample included 14 peer reviewed research studies (from 1985 to 2009) that focused on African American care and health. The studies were guided by the Culture Care Theory and used the ethnounsuring or ethnonursing and ethnographic research methods.

The Coding Data System based on the Leininger, Templin, and Thompson Field Research Ethnoscript was used with the NVivo qualitative data analysis software.

Leininger’s six criteria of qualitative data analysis were used to establish credibility, confirmability, meaning-in-context, recurrent patterning, saturation, and transferability.

Findings

1. Health and well-being was viewed by African Americans as the absence of physical symptoms and an ability to carry out daily activities.

“I grew up, if I wasn’t physically half way dead, I had to go to school. If you are physically able to walk move or function then you are in good health.”

2. Socio-structural factors of spirituality, kinship, family and technology influence care, health, and well-being.

“I got me thinking. He has a reason for this. That reason is to be there for my sisters who are going through what I went through and need me to help them.”

3. African Americans expressed both similarities and differences in professional and generic care which influenced their beliefs and practices regarding health, well-being, and beneficial lifeways.

“…physician-patient race concordance not only increased acceptance of preventive health services but also improved satisfaction with health care”.

“I feel myself (pause) I won’t say depressed, but a little dark creep in. I go back to these words where He said “you know whatever you ask in my name without a doubt I shall do it.” (John 14:13), you know. It doesn’t matter about my problem—He (pause) has (pause) promised us”. (female informant)

Implications for Nursing

Cultural care preservation and/or maintenance: Facilitating spiritual expression within the context of professional caring assists African Americans to maintain beneficial care beliefs and values during times of illness or death and promotes a sense of well-being. Religious icons, bibles, and prayer books need to be available in healthcare settings and time must be provided for prayer and religious expression.

Culture care accommodation and/or negotiation: Accommodate African American families who seek help from family and friends when a health problem or crisis arises. Negotiate for care within the African American community to promote healthy lifeways. Accommodate lay persons from within the African American community to assist in developing care support groups and health care initiatives.

Culture care repatterning and/or restructuring: A culturally congruent educational approach should be used to repattern the functional definition of health within the African American community by promoting health screening and early treatment. Social networks, the media and churches at the grass roots level can be used by African Americans and their health care providers to restructure health care practices for beneficial and healthy outcomes.

Future Direction

The findings of this study offer direction as well as give insight into care decisions and actions for the provision culturally competent care to African Americans.

Proactive implementation of these care strategies will assist in promoting ongoing health screening and early treatment to eliminate the current health disparities experienced by African Americans.

The researchers are interested in further exploration of care similarities and differences between African American men and women. Additionally, further research among African American groups in broader geographical regions may assist in transferability of the findings to more African Americans and other cultural groups.