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Cultural and Religious Influences in Healthcare

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4 Cultural and Religious Influences in Healthcare

Health care culture ^{is} a term enclosing the softer and less visible elements of healthcare services and firms and their integration in the delivery of care. For an organization to create and maintain a culture of safety and excellence, it is critical that they improve in quality and safety measures. One essential element of significance for a culture of excellence is in clarity and effectiveness of the communication that ensures the treatment and behaviours of all stakeholders have traits of respect, dignity, and compassion (Allen-Duck, Robinson, & Stewart, 2017). A culture of safety takes account of the core values and behaviours that are the consequences of collective and continuous commitment by workers, leaders, and managers to create emphasis on safety above all other competing objectives (de Castro et al., 2017).

Any form of change to organizational culture is a gradual process, and the critical role of implementation of the proposed transformation falls on the leadership structure. It is impossible to replace an existing and deeply appreciated arrangement with another. Tremendous efforts and easy upgrades are also not as influential. There is no instance that an entire culture cannot be adopted. There is, therefore, a need to highlight the aspects that would promote or hinder change, and also identify consistent characteristics. Change requires addressing the same in mind-sets, beliefs, and behaviours of individuals, which is not possible through mere communication of new values. There is a tendency of people to believe through actions as opposed to acting through believing. Therefore, a critical measure of adopting change is the introduction of tangible, measurable, actionable, and physical changes from the onset. Such a move could take the form of interpersonal relationships, empowerment, and collaboration.

Stakeholders have highly influential duties in ensuring that the process of forming objectives and priorities are relevant and appropriate. Therefore, involvement in an establishment must incorporate all of them, as opposed to only reaping the benefits from such

⁷ initiatives. The principal stakeholders in a healthcare organization include patients, doctors, employers, insurance agencies, pharmaceutical organizations, and the government. Proper planning and strategy dictate earlier determination of which stakeholders to communicate and decide on the culture. It is also conducive to investigate their cultural beliefs and personal traits.

The knowledge is critical in the assignment of various roles to each stakeholder, and also promotes success in the implementation of cultural transition. Consideration also takes account of the authority of stakeholders to positively influence cultural change. Once you have completed the evaluation, it is important to prioritize stakeholders that show traits of deep investment for the application. Further investigation warranted could provide information on identifying the capability of the stakeholders to act, and their capacity to contribute. The most crucial aspect pertains to establishing the ability that a stakeholder could negatively influence the healthcare culture spread.

Ethics, based on Christianity, has a fundamental influence on culture. It is vital to comprehend to what extent religious ethics define and shape an organization. That knowledge presents the first step that leads to the understanding of the influence religion has on growth and development. When analysing religion against the eradication of poverty, both Christian-based and non-Christian organizations share the objective, distinct only in dedication and motivation. Organizations that take up the Christian World View, faith is the foundation of their value system. Logic work development dictates how to accomplish all operations. CWV motivates the staff through religious inclinations that they continue to fulfil the tasks of Christ, which influences work growth and development through a sense of duty.

Throughout recent history, religion is a highly critical element in the provision of motivation necessary to achieve development. A significant example is in most rural areas in Africa, whereby there were a wide gap and scarcity in public welfare. Religious organizations came to provide these services. Missionaries ingrained in these religious organizations endured

harsh conditions in their duty to provide healthcare services to those communities. The aspects only got worse after the countries had to reduce social provisions to a stipulated rate following IMF structural adjustment policies. Nevertheless, missionaries remained on task. One critical example is the efforts to induce FBOs targeted at fighting dictatorship and fighting for human rights by the Catholic Church in the '70s and '80s.

Compared to Europe, global south is subject more increased development, which also aligns with the latter's integration of religion. CWV proved more and highly effective in contrast to secular approaches on influencing daily activities and culture since it improved comprehension (Lindemann, 2016). Haiti serves as an excellent example recording high mortality rate of new-borns from tetanus. The culture dictated the need for midwives to use mud in cutting the umbilical cord which protected the baby from evil spirits. Secular approaches sought to increase awareness of infection through such practices. CWV recorded more success by teaching about the Lord. A Christian organization member in the community highlighted that secular people did not consult the community in their awareness while CWV approach took a more sensitive approach to their traditions. Traditional religion could also significantly impact the design of non-Christian organizations. There is no need for secular organizations to shift dynamic into overtly religious practices for them to benefit from ethical sensitivity.

In the Grand Canyon University, faith is integral and part of every community element, such as learning, service, and work. The mission at GCU stems from a Christian perspective of educating student as a form of preparation for roles that honour God and serve others (Critchfield, 2018). Healthcare organizations can also implement the same into their culture that spans all avenues of such institutions. Such a structure supports a mission focused on provision of its services that align to culture of safety and excellence to the community. The common perception through the organization is adequate in directing all to execute the mission.

Additional incorporation of the CWV in healthcare organizations consequently will improve cultural embrace, just as it has for GCU. The critical influence regions include human dignity, vocation, decision-making, and value of all fraternity.

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