

EVIDENCE-BASED CARE SHEET

Leininger's Theory of Culture Care Diversity and Universality: Integration into Practice

What We Know

- › Increased globalization has resulted in ever-growing ethnic and cultural diversity in populations around the world^(4,7,10,13)
- In 2010, over 40 million foreign-born individuals were living in the U.S.⁽¹¹⁾
 - Asians comprised 40% of foreign-born individuals living in the U.S. from 2008–2010, while individuals from Central America comprised 25%
 - Prior to 2005, Africans comprised 3.5% of the foreign born population of the U.S.; by 2008, this percentage had nearly doubled to 6.6%
- From 2000–2007, the populations of Japan, Australia, and 10 out of 12 surveyed European countries experienced an increase in the percentage comprised by foreign-born individuals⁽³⁾
- With increased global diversity comes increased diversity in patient populations around the world⁽¹³⁾
- › Leininger's theory of culture care diversity and universality, first conceptualized in the 1950s and published in its entirety in the 1980s, is credited as the first nursing theory to introduce the concept of transcultural nursing and to explicitly address the impact of cultural context on health practices^(4,6,7)
- The development of Madeleine Leininger's theory resulted from an integration of her background as an anthropologist with her experience and observations as a nurse; the theorist recognized that culturally congruent care is necessary for the health promotion of individuals, family units, and entire communities
- Fundamental concepts in Leininger's theory are defined as follows:
 - Transcultural nursing: An "area of study and practice focused on cultural care differences and similarities of the beliefs, values, and lifeways of people and... use [of] this knowledge to provide culturally specific and/or culturally congruent nursing care to clients."⁽⁵⁾
 - Culturally congruent care: Nursing care that acknowledges each patient's unique cultural life context and integrates individualized cultural values into the delivery of patient care^(6,7,12)
- › In Leininger's theory, information about what is universal and what is diverse about care beliefs, practices, and patterns among cultures is gained from a careful comparison of emic knowledge (i.e., "folk" knowledge provided by cultural "insiders") and etic knowledge (i.e., knowledge gained by the observation of a culture's practices by "outsiders"); identifying these similarities and differences can help clinicians understand the rationale behind their patients' health-related practices and decisions^(1,7)
- Leininger's Sunrise Model, a visual depiction of the theory, can be used as a tool for completing individualized "culturalogical" assessments of patients⁽¹²⁾
 - The model presents seven social structure domains (i.e., technological factors; religious and philosophical factors; kinship and social factors; cultural values, beliefs, and lifeways; political and legal factors; economic factors; and educational factors) that must be considered when assessing patients' needs within a cultural context

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- According to Leininger's theory, culturally congruent care is delivered to patients via three caring modes:^(6,7)
 - Culture care preservation or maintenance (i.e., care that assists or supports patients to retain or preserve their cultural beliefs and values)
 - Culture care accommodation and/or negotiation (i.e., care that assists or supports patients to negotiate or adapt to a new set of cultural beliefs and values for safe, effective, culturally congruent care)
 - Culture care repatterning and restructuring (i.e., care that assists or supports patients to modify or restructure their way of life for improved healthcare outcomes)
- Use of these modes encourages the delivery of culturally congruent care. The delivery of culturally congruent care requires that the nurse develop self-awareness his or her own culture, acknowledge and accept the cultural differences between himself or herself and the patient, and, and develop evidence-based healthcare interventions that address the patient's culturally-specific needs^(1,6,7,13)
 - Allowing for long silences when obtaining a patient history from a Native American patient is an example of culture care preservation/maintenance⁽⁶⁾
 - Making special arrangements to have a female chaperone present when a traditional, female Muslim patient receives care from a male clinician is an example of culture care accommodation/negotiation⁽¹³⁾
 - Counseling women against the use of potentially dangerous methods to induce abortion is an example of culture care repatterning/restructuring⁽¹³⁾
- › Leininger's theory is widely accepted and regarded as fundamental to modern, culturally competent nursing; it is commonly taught in nurse education programs and has been incorporated into healthcare systems around the world^(4,6)