

Chapter 2: Health Disparities and Culturally Competent Care

Test Bank

MULTIPLE CHOICE

1. The nurse obtains information about all these areas during the health interview for a new patient. Which area will be the focus of patient teaching?
 - a. Age and gender
 - b. Hispanic/Latino ethnicity
 - c. Family history of diabetes
 - d. Refined carbohydrate intake

ANS: D

Behaviors are strongly linked to many health care problems. The patient's carbohydrate intake is a behavior that the patient can change. The other information will be useful as the nurse develops an individualized plan for improving the patient's health, but will not be the focus of patient education.

DIF: Cognitive Level: Application TOP: Nursing Process: Planning
MSC: NCLEX: Health Promotion and Maintenance

2. When developing strategies to decrease health care disparities, the nurse working in a clinic located in a neighborhood with many Vietnamese individuals will include
 - a. improving public transportation.
 - b. obtaining low-cost medications.
 - c. updating equipment and supplies for the clinic.
 - d. educating staff about Vietnamese health beliefs.

ANS: D

Health care disparities are due to stereotyping, biases, and prejudice of health care providers; the nurse can decrease these through staff education. The other strategies also may be addressed by the nurse but will not impact health disparities.

DIF: Cognitive Level: Application TOP: Nursing Process: Planning
MSC: NCLEX: Health Promotion and Maintenance

3. Which information will the nurse need to collect when assessing the health status of a community?
 - a. Average income of community members
 - b. Morning traffic patterns in the community
 - c. Median life expectancy for the community
 - d. Occupations of individuals in the community

ANS: C

Health status is the aggregate of all health measures for individuals in a community and includes data such as life expectancy, birth and death rates, and mortality from various diseases. Although income, traffic patterns, and occupations are factors that impact a community's health status, they are not health measures.

DIF: Cognitive Level: Comprehension TOP: Nursing Process: Assessment
MSC: NCLEX: Health Promotion and Maintenance

4. A family member of an elderly Hispanic patient admitted to the hospital tells the nurse that the patient has traditional beliefs about health and illness. The best action by the nurse is to
- avoid asking any questions unless the patient initiates conversation.
 - ask the patient whether it is important that cultural healers are contacted.
 - explain the usual hospital routines for meal times, care, and family visits.
 - obtain further information about the patient's cultural beliefs from the daughter.

ANS: B

Because the patient has traditional health care beliefs, it is appropriate for the nurse to ask whether the patient would like a visit by a *curandero(a)* or other cultural healers. There is no cultural reason for the nurse to avoid asking the patient questions, and questions may be necessary to obtain necessary health information. The patient (rather than the daughter) should be consulted about personal cultural beliefs. The hospital routines for meals, care, and visits should be adapted to the patient's preferences rather than expecting the patient to adapt to the hospital schedule.

DIF: Cognitive Level: Application
MSC: NCLEX: Psychosocial Integrity

TOP: Nursing Process: Implementation

5. When caring for a patient who is Native American, the best initial action by the nurse is to
- avoid all eye contact with the patient.
 - observe the patient's use of eye contact.
 - look directly at the patient when interacting.
 - ask the family about the patient's cultural beliefs.

ANS: B

Observation of the patient's use of eye contact will be most useful in determining the best way to communicate effectively with the patient. Looking directly at the patient or avoiding eye contact may be appropriate, depending on the patient's individual cultural beliefs. The nurse should assess the patient, rather than asking family members about the patient's beliefs.

DIF: Cognitive Level: Application
MSC: NCLEX: Psychosocial Integrity

TOP: Nursing Process: Implementation

6. A new RN graduate is assessing a newly admitted non-English-speaking Chinese patient who complains of severe headaches. The charge nurse should intervene if the new RN's first action is to
- sit down at the bedside.
 - palpate the patient's scalp.
 - call for a medical interpreter.
 - avoid eye contact with the patient.

ANS: B

Many people of Asian ethnicity believe that touching a person's head is disrespectful; the RN should ask permission before touching the patient's head. The other actions are appropriate.

DIF: Cognitive Level: Application
MSC: NCLEX: Psychosocial Integrity

TOP: Nursing Process: Implementation

7. If an interpreter is not available when a patient speaks a language different from the nurse's language, it is appropriate for the nurse to

- a. use specific medical terms in the Latin form.
- b. talk slowly so that each word is clearly heard.
- c. repeat important words so that the patient recognizes their importance.
- d. use simple gestures to demonstrate meaning while talking to the patient.

ANS: D

The use of gestures will enable some information to be communicated to the patient. The other actions will not improve communication with the patient.

DIF: Cognitive Level: Comprehension TOP: Nursing Process: Implementation
MSC: NCLEX: Psychosocial Integrity

8. When planning care for a hospitalized patient who uses culturally based treatments, the most appropriate action by the nurse is to
- a. coordinate the use of folk treatments with ordered medical therapies.
 - b. discourage the use of culturally based treatments for Western diseases.
 - c. teach the patient that folk remedies will interfere with Western treatments.
 - d. ask the patient to discontinue the cultural treatments during hospitalization.

ANS: A

Many culturally based therapies can be accommodated along with the use of Western treatments and medications. The nurse should attempt to use both traditional folk treatments and the ordered Western therapies as much as possible. Some culturally based treatments can be effective in treating “Western” diseases. Not all folk remedies interfere with Western therapies. It may be appropriate for the patient to continue some culturally based treatments while he or she is hospitalized.

DIF: Cognitive Level: Comprehension TOP: Nursing Process: Planning
MSC: NCLEX: Psychosocial Integrity

9. The best example of culturally appropriate nursing care when caring for a newly admitted patient is
- a. having family members provide most of the patient’s personal care.
 - b. maintaining a personal space of at least 2 feet when assessing the patient.
 - c. asking permission before touching a patient during the physical assessment.
 - d. considering the patient’s ethnicity as the most important factor in planning care.

ANS: C

Many cultures consider it disrespectful to touch a patient without asking permission, so asking a patient for permission is always culturally appropriate. The other actions may be appropriate for some patients but are not appropriate across all cultural groups or for all individual patients.

DIF: Cognitive Level: Comprehension TOP: Nursing Process: Implementation
MSC: NCLEX: Psychosocial Integrity

10. While talking with the nursing supervisor, a staff nurse expresses frustration that a Native American patient always has several family members at the bedside. The most appropriate action by the nursing supervisor is to
- a. remind the nurse that family support is important to this family and patient.
 - b. have the nurse explain to the family that too many visitors will tire the patient.
 - c. suggest that the nurse ask family members to leave the room during patient care.

d. ask about the nurse's personal beliefs about family support during hospitalization.

ANS: D

The first step in providing culturally competent care is to understand one's own beliefs and values related to health and health care. Asking the nurse about personal beliefs will help to achieve this step. Reminding the nurse that this cultural practice is important to the family and patient will not decrease the nurse's frustration. The remaining responses (suggest that the nurse ask family members to leave the room, and have the nurse explain to family that too many visitors will tire the patient) are not culturally appropriate for this patient.

DIF: Cognitive Level: Application
MSC: NCLEX: Psychosocial Integrity

TOP: Nursing Process: Implementation

11. An 82-year-old Asian American patient tells the nurse that she has lived in the United States for 50 years. The patient speaks English but lives in a predominantly Asian neighborhood. The nurse will need to
- include a folk healer when planning the patient's care.
 - ask the patient about any special cultural beliefs or practices.
 - avoid making direct eye contact with the patient during care.
 - involve the patient's oldest son in making health care decisions.

ANS: B

Further assessment of the patient's health care preferences is needed before making further plans for culturally appropriate care. The other responses indicate stereotyping of the patient, based on ethnicity, and would not be appropriate initial actions.

DIF: Cognitive Level: Application
MSC: NCLEX: Psychosocial Integrity

TOP: Nursing Process: Planning

12. When planning health care for a community with a large number of recent immigrants from China, the most important intervention for the nurse to include is
- pregnancy testing.
 - tuberculosis screening.
 - contraceptive teaching.
 - colonoscopy information.

ANS: B

Tuberculosis (TB) is endemic in many parts of Asia, and the incidence of TB is much higher in immigrants from China than in the general U.S. population. Teaching about contraceptive use, colonoscopy, and testing for pregnancy also may be appropriate for some patients but is not generally indicated for all members of this community.

DIF: Cognitive Level: Application
MSC: NCLEX: Physiological Integrity

TOP: Nursing Process: Planning

13. When doing an admission assessment for a patient, the nurse notices that the patient pauses before answering questions about the health history. The most appropriate action by the nurse is to
- stop doing the assessment and return later.
 - wait for the patient to answer the questions.
 - ask the patient why the questions require so much time to answer.
 - give the patient an assessment form listing the questions and a pen.

ANS: B

Patients from some cultures take time to consider a question carefully before answering. The nurse will show respect for the patient and help develop a trusting relationship by allowing the patient time to give a thoughtful answer. Asking the patient why the answers are taking so much time, stopping the assessment, and handing the patient a form indicate that the nurse does not have time for the patient.

DIF: Cognitive Level: Application
MSC: NCLEX: Psychosocial Integrity

TOP: Nursing Process: Assessment

14. Which of these strategies should be a priority when the nurse is planning care for a hypertensive patient who is uninsured?
- Follow evidence-based national guidelines.
 - Assist with dietary changes as the first action.
 - Teach about the impact of exercise on hypertension.
 - Obtain less expensive antihypertensive medications.

ANS: A

The use of standardized evidence-based guidelines will reduce the incidence of health care disparities among various socioeconomic groups. The other strategies also may be appropriate, but the priority concern should be that the patient receives care that meets the accepted standard.

DIF: Cognitive Level: Application
TOP: Nursing Process: Planning

OBJ: Special Questions: Prioritization
MSC: NCLEX: Health Promotion and Maintenance

15. A Hispanic patient complains of abdominal cramping caused by *empacho*. The nurse's first action should be to
- ask the patient what treatments are likely to help.
 - give the patient medication to decrease the cramping.
 - massage the patient's abdomen until the pain is gone.
 - offer to contact a *curandero(a)* to make a visit to the patient.

ANS: A

Further assessment of the patient's cultural beliefs is appropriate before implementing any interventions for a culture-bound syndrome such as *empacho*. Although medication, a visit by a *curandero(a)*, or massage may be helpful, more information about the patient's beliefs is needed to determine which intervention(s) will be most helpful.

DIF: Cognitive Level: Application
TOP: Nursing Process: Assessment

OBJ: Special Questions: Prioritization
MSC: NCLEX: Psychosocial Integrity

16. When performing a cultural assessment with a patient of a different culture, the nurse's first action should be to
- wait until a cultural healer is available to help with the assessment.
 - obtain a list of any cultural remedies that the patient currently uses.
 - ask the patient about any affiliation with a particular cultural group.
 - tell the patient what the nurse already knows about the patient's culture.

ANS: C

An early step in performing a cultural assessment is to determine whether the patient feels an affiliation with any cultural group. The other actions may be appropriate if the patient does identify with a particular culture.

DIF: Cognitive Level: Application
TOP: Nursing Process: Assessment

OBJ: Special Questions: Prioritization
MSC: NCLEX: Psychosocial Integrity

17. The nurse working in a clinic in a primarily African American community notes a higher incidence of uncontrolled hypertension in clinic patients than the national average. To correct this health disparity, which action should the nurse take first?
- Initiate a regular home-visit program by nurses working at the clinic.
 - Schedule teaching sessions about hypertension at community events.
 - Assess the perceptions of community members about the care at the clinic.
 - Obtain low-cost antihypertensive drugs using funding from government grants.

ANS: C

Before other actions are taken, additional assessment data are needed to determine the reason for the disparity. The other actions also may be appropriate, but additional assessment is needed before the next action is selected.

DIF: Cognitive Level: Application
TOP: Nursing Process: Assessment

OBJ: Special Questions: Prioritization
MSC: NCLEX: Health Promotion and Maintenance