**BACHELOR OF SCIENCE IN NURSING: COMMUNITY HEALTH NURSING**

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| **COURSE MODULE** | **COURSE UNIT** | **WEEK** |
| **CM3** | **CM3-CT3** | **15** |
| **PHILIPPINE CULTURE, VALUES AND PRACTICES IN RELATION TO HEALTHCARE OF INDIVIDUALS AND FAMILIES** | | |



* Read course and unit objectives
* Read study guide prior to class attendance
* Read required learning resources; refer to unit terminologies for jargons
* Proactively participate in classroom discussions
* Participate in weekly discussion board (Canvas) Answer and submit course unit tasks



At the end of this unit, the students are expected to:

Cognitive:

1. Understand the Values and Beliefs of Filipino when it comes to health.
2. Define the difference between culture, beliefs and practices

3. Recognize the role Nurses in the Culture and Beliefs of patients.

Affective:

1. Listen attentively during discussion.

Psychomotor:

1. Take part in discussion and group activities.

2. Apply health evaluation appropriate for health care needs of the patient.

3. Use appropriate strategies/ approaches to plan in dealing with the practices of patient’s care.



Nursing Care of the Community “A comprehensive text on community and public health nursing in the Philippines” 1st Edition Zenaida Famorca

Nursing Practice in the Community 4th Edition Araceli Maglaya

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**VALUES OF FILIPINO NURSES**

**Work Ethic**

As a group, Filipino nurses are well liked because they are hardworking. They place high value on responsibility and seldom complain. “Many [Filipino nurses] work nights, holidays and/or overtime. So, during this time of nursing shortage, one can rely on a Filipino nurse to volunteer to cover the shift”. It is not unusual to find Filipino nurses who work two jobs. The financial rewards, job security, and personal advancement that U.S. jobs provide to Filipino nurses are valued.

**Spirituality**

Filipino nurses are very religious people. There is a deep faith in God that is reflected in the expression of bahala na “it is up to God” or “leave it to God.” This tends to be incorrectly equated with an expression of fatalism and a passive acceptance of or resignation to fate. Bahala na may also apply to acceptance of illness or malady.

**Sensitivity**

Unmarried Filipino nurses recoil at the question, “Are you pregnant?” when they go for a medical checkup. Because the Philippine society considers sexual relationships not to occur outside of marriage, it seems odd to them that they would be questioned, although they are aware that this is part of a routine health assessment. Filipinos are generally sensitive and equally sensitive to the feelings of others, so they try to find a way to say things diplomatically.

**Interpersonal Relationships**

Filipinos are generally quiet. Very conservative families do not allow their younger members to join the conversation of adults without an invitation. They are sometimes hesitant to articulate their views, especially if it is different from the majority, as it might indicate discordance with the team or group. Engaging in arguments, especially with someone who is older or holds an authority position, is considered uncivilized. Filipinos also have difficulty turning down requests from supervisors to whom they feel obligated.

**Respect and Reverence**

One’s position in society, professional achievements, and age carry a lot of weight in the Philippine society. Physicians, lawyers, priests, engineers, teachers, and nurses are among the well-respected professionals in the Philippines. Hence, their opinion is generally accepted without question. Filipino values and traditions provide a framework for conduct and mode of communication.

Because of a high regard for the elderly and authority, Filipinos tend not to oppose or contradict other views for fear of embarrassing the other party. “Filipinos generally are neither assertive nor aggressive and may often appear guarded or reticent. Nurses often misunderstand this need for passivity and do not appreciate the culturally induced motivation to maintain harmonious balance between man and nature”

**Modesty**

Filipino nurses find it uncomfortable to accept even a well-deserved compliment. For example, if someone gives a complement like, “Your dress is beautiful!” the answer might be, “Not really. I bought it cheap.” Or if someone says, “You are so knowledgeable,” the answer might be, “Not really, I just happen to know it.” Yet they are proud of their accomplishments in a sort of quiet way. As a result, many have culture-based barriers to marketing themselves

**Language**

Respect is integrated in the Filipino language. Reference to the elderly is the use of the third person. Hence, when spoken to assertively in a direct way, Filipinos feel offended. There is no gender differentiation in the Filipino language. Although they are fully aware of the male and female genders, their native language is what hinders them from precisely using he or she in spoken English. Frequently, this leads to confusion.

**Close Family Ties**

Filipino nurses have strong family ties. While in the United States, their close friends become their family members. As a result, they perpetuate the cultural burden (as a downside) thus making it more difficult and taking them longer to assimilate into the mainstream culture of their adopted country. They tend to eat the same food and mingle with individuals of the same ethnic background.

**HEALTH BELIEFS, BEHAVIORS, AND PRACTICES**

**Preventive Health**

Because most of their time is devoted to work, going for preventive health checkups takes a backseat. Yet, one may hear a Filipino extolling the importance of preventive health to her patients or clients. Filipino nurses have a tendency to self-diagnose, self-medicate, and seek alternative therapies. In rural areas in the Philippines, people go for Hilot for relief of pain and aches instead of seeking medical attention. In an alternative context, Hilot may refer to a practitioner or the practice of chiropractic manipulation and massage for the diagnosis and treatment of musculoligamentous and musculoskeletal ailments.

**Home Remedies**

Three concepts underlie Filipino American health beliefs and practices: flushing, heating, and protection. Each identifies a basic process used to promote good health. Flushing keeps the body free from debris, heating maintains a balanced internal temperature, and protection guards the body from outside influences. Although Western and scientific concepts are similar, Filipino theories are founded on different premises. Flushing is based on the notion that the body is a container that collects impurities, heating means that hot and cold qualities must be balanced in the body, and protection involves safeguarding the body’s boundaries from supernatural as well as natural forces.

**Pain Tolerance**

Generally speaking, Filipino nurses have a high tolerance to pain. For example, one of the author’s sisters has severe arthritis, yet she continues to do housework regardless of her pain. Filipino nurses normally use home remedies such as liniments and topical ointments and manage pain before seeking medical care or while under medical treatment. Health care providers need to probe more into the cause and degree of pain from Filipino patients to elicit more information. The elderly group, in particular, is unlikely to complain about their pain because they do not want to have extra burdens being imposed on caregivers.

**Privacy**

Filipinos are mostly reserved and private people. As patients, they may not readily reveal their personal and health information. Women in particular are sensitive to touching another individual as well as being touched. “Young female service providers should practice discretion with regard to touching older Filipino male patients such as laying one’s hand on the patient’s hand or shoulder to reassure comfort in moments of distress”

**HEALTH BELIEFS AND PRACTICES ARE ORIENTED TOWARDS PROTECTION OF THE BODY.**

**Flushing**

The body is thought to be a vessel or container that collects and eliminates impurities through physiological processes such as sweating, vomiting, expelling gas, or having an appropriate volume of menstrual bleeding.

**Heating**

Adapts the concept of balanced between “hot” and “cold” to prevent occurrence of illness and disorders.

**Protection**

Safeguards the body’s boundaries from outside influences such as supernatural and natural forces.

**Coping Styles**

Coping styles common among elderly Filipino Americans in times of illness or crisis include:

Patience and Endurance (Tiyaga): the ability to tolerate uncertain situations

Flexibility (Lakas ng Loob): being respectful and honest with oneself

Humor (Tatawanan ang problema): the capacity to laugh at oneself in times of adversity

Fatalistic Resignation (Bahala Na): the view that illness and suffering are the unavoidable and predestined will of God, in which the patient, family members and even the physician should not interfere

Conceding to the wishes of the collective (Pakikisama) to maintain group harmony

**Responses to Mental Ilness**

Indigenous traits common among elderly Filipino Americans when faced with illness related to mental conditions:

**Devastating shame (Hiya)**

Sensitivity to criticism (Amor Propio)

Common Perceptions of Filipinos about Mental Illness

Unwillingness to accept having mental illness, which leads to the avoidance of needed mental health services due to fear of being ridiculed

Involvement of other coping resources such as reliance on family and friends or indigenous healers, and dependence on religion which can diminish the need for mental health services

Prioritizing of financial and environmental needs which preclude the need for mental health services

Limited awareness of mental health services resulting in limiting access

Difficulty in utilizing mental health services during usual hours because of the unavailability of working adult family members

Mental illness connotes a weak spirit, and may be attributed to divine retribution as a consequence of personal and ancestral transgression

Lack of culturally oriented mental health services

Health Beliefs and Behaviors: Indigenous Health Beliefs

**Concept of Balance (Timbang)**

This concept is central to Filipino self-care practices and is applied to all social relationships and encounters. According to this principle, health is thought to be a result of balance, while illness due to humoral pathology and stress is usually the result of some imbalance. Rapid shifts from “hot” to “cold” cause illness and disorder. Illustrated below are a range of humoral balances that influence Filipino health perceptions:

Rapid shifts from “hot” to “cold” lead to illness

“Warm” environment is essential for maintaining optimal health

Cold drinks or cooling foods should be avoided in the morning

An overheated body is vulnerable to disease; a heated body can get “shocked”

When cooled quickly, it can cause illness

A layer of fat maintains warmth, protecting the body’s vital energy

Imbalance from worry and overwork create stress and illness

Emotional restraint is a key element in restoring balance

A sense of balance imparts increased body awareness

Health Beliefs and Behaviors: Theories of Illness

Physical and mental health and illness are viewed holistically as an equilibrium model. In contrast, other explanatory models may include mystical, personalistic and naturalistic causes of illness or disease (Anderson, 1983; Tan, 1987; Tompar-Tiu & Sustento-Seneriches, 1995).

**Mystical Causes**

Mystical causes are often attributed to experiences or behaviors such as ancestral retribution for unfinished tasks or obligations. Some believe that the soul goes out from the body and wanders, a phenomenon known as Bangungot, or that having nightmares after a heavy meal may result in death.

**Personalistic Causes**

Personalistic causes are associated with social punishment or retribution from supernatural forces such as evil spirit, witch (Manga ga mud) or sorcerer (mangkukulam). The forces cast these spells on people if they are jealous or feel disliked. Witch doctors (Herbularyo) or priests are asked to counteract and cast out these evil forces through the use of prayers, incantations, medicinal herbs and plants. For protection the healer may recommend using holy oils, or wearing religious objects, amulets or talismans (anting anting).

**Naturalistic Causes**

Naturalistic causes include a host of factors ranging from natural forces (thunder, lightning, drafts, etc.) to excessive stress, food and drug incompatibility, infection, or familial susceptibility.



Website: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4159471/>

Website: https://pubmed.ncbi.nlm.nih.gov/21888580/

https://www.doh.gov.ph

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**Behaviors -** the way in which one acts or conducts oneself, especially toward others.

**Beliefs -** an acceptance that a statement is true or that something exists

**Culture -** the arts and other manifestations of human intellectual achievement regarded collectively

**Practices -** the actual application or use of an idea, belief, or method, as opposed to theories relating to it.

**Values-** the regard that something is held to deserve; the importance, worth, or usefulness of something.



Download a research article from internet related to Filipino Culture, Values and Practices in relation to Health Care of Individual and Family conducted in the Philippines. Make a reflection paper on it into 200-300 words.



*Books*

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*Websites*

EBSCOhost.com

<http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.829.9397&rep=rep1&type=pdf>

<https://geriatrics.stanford.edu/ethnomed/filipino/fund/health_beliefs/health_behaviors.html>