

Sigma's 30th International Nursing Research Congress

Transcultural Perspective on Urinary Incontinence in China and the United States

Nicole Zhang, PhD, RN

Department of Nursing, Hartwick College, Oneonta, NY, USA

Purpose:

Urinary incontinence (UI) is both a common and costly condition confronted in nursing and indeed the healthcare system worldwide. While UI is often considered a natural consequence of aging, there are physiological, psychological, and quality-of-life implications for all of those individuals living with UI. Sadly, UI often is ignored or stigmatized and becomes a taboo issue within most cultures.

Urinary incontinence is an issue present in all cultures. Moreover, in the literature UI is characterized as a problem that is situated within and influenced by culture (Kang, 2015; Karlowicz, 2010; Wilson, 2004). Conceptualizing UI is integral for the profession of nursing so that improvements can be made in nursing education and practice for this pervasive issue. Examining UI in many cultures is necessary for nurses to provide

culturally congruent care and facilitate health among patients. Moreover, UI is an issue that is important for patient outcomes, but it is also important from a health care systems perspective. Staffing and resources are intricately linked to UI and toileting practices (Gorina, Schappert, Bercovitz, Elgaddal, & Kramarow, 2014). The direct cost for UI and overactive bladder (OAB) in the US in the year 2000 was estimated at 19.5 billion dollars. Most of this cost came from direct UI management such as pads and briefs (Gorina, et al. 2014). If there is consideration of indirect costs, the statistic would be even more staggering. Proper management of UI in healthcare systems is important and has the potential to reshape the way that care is provided.

Care inquiries as described by Leininger (1991a) are modes of knowledge inquiry that examine caring phenomenon. Care inquiry regarding the nurse-patient management and perception of UI within cultures provides an in-depth point of analysis to understand gaps in knowledge and ways to improve patient outcomes for those with UI. This transcultural and transnational perspective provided through the American examination and Chinese examination is a novel way to conceptualize UI. This dissertation is therefore transnational and transcultural, because the broad worldview in areas of politics, health, etc., is addressed in order to contextualize the perceptions, experiences, and information that the nurse participants share.

The is to provide a better understanding of UI through exploration of the influences of culture. Grounding the research in data from the nurses' perspective gives information regarding the caring relationships of nurses with patients who have UI. Broadly, these studies allow for care inquiry within the context of the culture in which they are situated. Finally, these studies were conducted from the theoretical perspective posited by Leininger (1991a), Culture Care Diversity and Universality.

Methods:

The study uses Corbin and Strauss' (2008, 2015) grounded theory methods to examine hospital nurses' perceptions as well as the management of UI in China (n=6) and the U.S (n=11). Semi-structured interview format was used to collect data and apply the methods. A theory and theoretical model were developed.

Results:

In China Several key themes emerged including the demedicalization of UI, the novice-to-expert trajectory of nurse's in UI care skill acquisition, and general lack of formal education. The study also highlighted the fact that UI is a multifarious issue (core category); there are many etiologies, management modalities, and treatment options. Chinese nurses saw the family as an integral participant in the management of UI, creating a triadic core of management. The Chinese nurses' process of managing the patient with UI involved two broad processes: taking-action and making sense.

In the United States, as a result of the interviews and grounded theory methodology, a grounded theory of the nursing process for managing UI was developed. Additionally, several themes were elucidated regarding the nurse's management of and perceptions of UI in the hospital setting. In total seven themes were derived. The themes: new -onset UI and age, 'passing the baton' to the family, demedicalization of UI, novice- to-expert trajectory with experience, and minimal education regarding UI. The core category is the multifarious nature of UI.

Conclusion:

The study identified diversities and universalities between Chinese and American hospital nurses regarding the perceptions and manage of UI. The processes of taking-action and making sense were elucidated. Finally, individual and comprehensive models of the nurse's management of patients with UI are proposed. This study highlights the important of considering the cultural context of health issues. There were numerous universal themes include the multifarious nature of UI, novice-to-expert trajectory, insufficient education, a presence of stigma around the issue of UI, and negative psychological impacts of UI. There were also number diversities which include, differences in the key players, differences in beliefs of the relationships between age and gender and UI and the perception of having a standardized assessment.

Title:

Transcultural Perspective on Urinary Incontinence in China and the United States

Keywords:

Qualitative research, Transcultural/cultural context and Urinary incontinence

References:

Corbin, J., & Strauss, A. (2008). Basics of qualitative research: techniques and procedures for developing grounded theory. 2008. Sage Publications, Inc.

Corbin, J., & Strauss, A. (2015). Basics of qualitative research: Techniques and procedures for developing grounded theory. SAGE Publications Inc.

Gorina, Y., Schappert, S., Bercovitz, A., Elgaddal, N., & Kramarow, E. (2014). Prevalence of incontinence among older Americans. *Vital and Health Statistics (36)*, 1–33.

Kang, Y. (2015). Cultural perspective of urinary incontinence: similarities and differences between white elderly and Korean immigrant women. *International Journal of Urological Nursing*, 9(3), 125–130.

Karlowicz, K. A. (2010). The effect of culture on urinary incontinence: do we really understand? *Urologic nursing*, 30(6), 318–326.

Leininger, M. (1991a). *Culture care universality and diversity: A theory of nursing*. National League for Nursing Press.

Wilson, M. M. (2004). Urinary incontinence: a treatise on gender, sexuality, and culture. *Clinics in geriatric medicine*, 20(3), 565-570.

Abstract Summary:

Urinary incontinence (UI) has been identified as a global health issue with varying prevalence rates, perceptions, and management modalities present within and across cultures. A transcultural study was conducted examining the way nurses manage and perceive patients with UI. The study demonstrated that cultural context strongly influences management of UI.

Content Outline:

I. Introduction A. Significance of urinary incontinence (UI) B. UI as global health issue: prevalence, cost, etc. C. Introduction to the transcultural study: Purpose, methods etc. II. Body A. UI in the United States 1. Major Themes 2. Theoretical Model of UI Management Among US nurses B. UI in China 1. Major Themes 2. Theoretical Model of UI Management Among Chinese nurses C. Universalities and Diversities in Perceptions and Management 1. Universalities 2. Diversities 3. A comprehensive theoretical model III. Conclusion A. Cultural context strongly influences the management of culturally-situated healthcare issues B. Highlights the importance of cultural competence in practice C. Highlights the importance of global collaborations in research and knowledge development

First Primary Presenting Author

Primary Presenting Author

Nicole Zhang, PhD, RN
Hartwick College
Department of Nursing
Assistant Professor
Oneonta NY
USA

Author Summary: Dr. Zhang is an assistant professor of nursing at Hartwick College and has been working in healthcare for nearly a decade in multiple capacities. Dr. Zhang grew up in rural NY encountering systemic health care disparities and inequities. Interested in improving patient outcomes and nursing education, her research focuses on transcultural nursing, urologic nursing, rural nursing, geriatric nursing, and community health nursing.