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Cultural congruency in evidence-based practice

The PICO (population, intervention, comparison and outcome) model is widely accepted for framing evidence-based practice questions. The results of a database search to answer the PICO question are analyzed using a critical appraisal skill set for evidence-based practice. The PICO model offers an applied context for synthesizing nursing knowledge with the best available evidence to make decision for practice. However, in reality the clinical interventions based on this evidence may not be available in practice settings around the globe and furthermore may not be the best fit culturally with the patient population. Individual values, beliefs and behaviors about health and well-being are shaped by factors such as ethnicity, gender, language, nationality, occupation, physical and mental ability, race, sexual orientation and socioeconomic status. Cultural competence is defined as the ability of healthcare providers to integrate these factors into interventions. The goal of culturally competent healthcare services, just like evidence-based practice, is to provide the highest quality of care to every patient. Strategies including culturally congruent practice standards reflecting cultural background, language proficiency and literacy in the critical appraisal comparison of nursing interventions for best practice are suggested.

Biography

Janet H Davis holds a BSN degree from Georgetown University, MSN degree in Maternal Child Nursing from Boston University, an MBA from the University of Illinois at Chicago and the PhD degree in Education from Loyola University, Chicago. She has accumulated numerous accomplishments during her career in higher education and has held the roles of Faculty and Dean. Her research includes approximately \$200,000 of funding in training grants and studies on nursing education. She is the Author and Co-author of published research abstracts, 32 articles, a book and chapters in two additional books.

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