

Throughout your perusal of this cultural report, you'll gain a further understanding of cultural and ethnic characteristics, determinants, and culturally sensitive care in maternal and childbearing in the Indian culture. In further detail, this encompasses both family life and communication of the Indian culture and its substituents. The preceding entails the typical structure of the family, roles, lifestyle, and the act of respect, communication standards, gender and communication, and lastly, verbal and nonverbal communication.

Researchers Young-Oak Wells, and Elaine Dietsch, collaboratively conducted a methodological study starting in 2012 and ceasing in 2014, which examined the childbearing traditions of Indian Women at home and abroad. The researchers stated that Cultural awareness and cultural sensitivity are critical steps toward cultural safety (Wells & Dietsch, 2014). Cultural awareness means that one becomes aware of differences between one's own culture and that of others, and cultural sensitivity by respecting others' cultural values (Wells & Dietsch, 2014). Both cultural awareness and sensitivity couple into cultural safety, which is the outcome of nursing and midwifery education that enables safe service to be defined by those who receive the service and incorporate the client's cultural requirements in her care (Wells & Dietsch, 2014).

They are examining Indian Family life, childbirth, and marriage. Ideally, arranged marriages are prominent in Indian culture, and upon marriage, the bride and groom are expected to start their family (Wells & Dietsch, 2014). Arranged marriages and pregnancy are status elevators for Indian women and provide a sense of security (Wells & Dietsch, 2014). Pregnancy is celebrated by the couple's extended family and neighbors (Wells & Dietsch, 2014). The culture believes sternly follows the belief, becoming a mother elevated her status in the community and is considered crucial for leading a fulfilling life (Wells & Dietsch, 2014). Furthermore, childbearing reflects community beliefs concerning what is beneficial for the pregnant woman and her unborn baby (Wells & Dietsch, 2014). The elderly females are tasked with knowing diet, conduct, and taboos during pregnancy and are the chief mothers after birth, taking over household responsibilities and baby care so that the new mother can rest (Wells & Dietsch, 2014).

Indian food and diet is a branch of Hinduism, called Ayurvedic medicine, and is over 2500 years old (Wells & Dietsch, 2014). Childbirth is seen as a life event that interrupts the balance of *dosha* (energy). Furthermore, ayurvedic medicine recommends certain herbs, diet, and yoga to restore the imbalance caused by pregnancy (Wells & Dietsch, 2014). Many taboos on the diet believe that the mother's dietary indiscretions would negatively affect the newborn or cause sickness (Wells & Dietschokay, 2014). Indian maternal guidelines are distinguished by hot and cold foods, which does not correlate with temperature, instead of pregnancy is seen as "hot," and "hot" foods should be avoided, however towards the end of pregnancy, "hot" foods are encouraged to help with birth (Wells & Dietsch, 2014).

Lastly, respect in the Indian Culture, women in rural areas access healthcare less than those in urban areas (Wells & Dietsch, 2014). Despite pregnancy, childbirth, and gender roles that coincide with all three, Women of India are likely to experience mistreatment and disadvantages, being that India is a male-dominated society (Wells & Dietsch, 2014). With this male-dominated society, male-child preference is favored in Hinduism, with this belief puts a significant amount of stress on pregnant mothers and mothers to be (Wells & Dietsch, 2014). Indian culture's morals, values, and beliefs are of utmost importance to the nation and their

practiced religion. Despite the minute amount of Indians in Coles County and the surrounding area, it is pertinent that nursing students, nurses, and providers are aware of one's own biases when caring for clients. However, I intend on pursuing travel nursing after some years of experience, the geographical population will change from hospital to hospital. I enjoy experiencing different cultures, environments, and lifestyles, which is another reason I cannot wait to work as a travel nurse. I would suggest that my cohort and other nursing students remain open-minded because there are many different ways of life. Second, being a life-long learner, which is essential because medicine and nursing is such a dynamic profession that things will change daily, and with that, one must be adaptable. Lastly, gratitude, when a client teaches you about their customs, lifestyle, perspective, and rationale, show thanks because it is a privilege for someone of a different culture to share their lifestyle with you.

Reference List

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