La Crosse Medical Health Science Consortium

Amish Culture

for Clinical Providers



Special thanks to...

- Gundersen Health System
- La Crosse Medical Health Science Consortium (LMHSC)
- LMHSC Cultural Competency Committee

for their assistance in developing this cultural competency module







- The material in this program is generalized and is not intended to perpetuate stereotypes of diverse individuals or groups of people
- Cultural traits may vary based on individual preference and level of acculturation – someone may have physical attributes of a specific heritage, but it does not mean he/she practices the traits of that culture
- Bottom line: Never Assume, Always Ask!
 - Never assume that every member of any culture holds the same beliefs and ideals
 - Use this background information to ask culturally sensitive, informed questions



Traditional Medical Practices: Overview

- In the Amish culture, a healthy person:
 - Has a good appetite
 - Looks physically well
 - Can do rigorous physical labor
- Illness = the inability to perform daily chores
 - Physical and mental illness accepted equally



Traditional Medical Practices: Who Administers Care?

- The Amish utilize a variety of healthcare providers:
 - Chiropractor
 - Massage Therapist
 - Reflexologist
 - Lay Midwife
 - Herbalist
 - "Pow-wow" (thought to be used rarely)
- A "Pow-wow" is a traditional folk practitioner
 - Uses words, charms, or physical manipulation for healing
 - Pow-wowing is learned orally from a person of opposite gender



Traditional Medical Practices: Treatment/Procedures

- Typical "cure-alls":
 - Oils, salves, minerals, herbs, compounds, lotion, poultices, and health foods
- 5 week formula (sometimes used in last 5 weeks of pregnancy)
 - Red Raspberry Leaves (relieves nausea and pain)
 - Butcher's Broom Root (diuretic, anti-inflammatory, promotes circulation)
 - Black Cohoch Root (reduce pain and cramping)
 - Dong Quai Root (anti-inflammatory, diuretic, sedative)
 - Squaw Vine Root (speeds delivery, encourages contractions)



Interaction 1 of 3

- Amish view illness as the inability to perform chores or other daily work.
 - True
 - False



Interaction 1 of 3 (Answer)

• Amish view illness as the inability to perform chores or other daily work.

– True

– False



Traditional Medical Practices: Pain Management

• Amish traditionally have a high pain tolerance

 Could be because the need to finish chores is viewed as more important than slight discomfort

- As a result, they may wait for a very long time before going to a Western doctor
 - Usually last straw
 - Often very sick once they reach hospital/clinic



Traditional Medical Practices: Views on Western Medicine

- Western medicine is usually valued and accepted & respected by Amish
 - Often used when nothing else will work
- Usually supportive of what needs to be done to restore health
- May assume that providers do not want to hear about folk remedies
 - Always ask about home remedies for possible drug interactions



Biological Variation: Disease Trends

- Amish tend to be generally healthy
 - Get adequate exercise
 - Do not usually use alcohol, tobacco, or other drugs
- Preventative medicine is not always embraced
 - Communicable diseases (measles, whooping cough) may occur due to lack of immunization
- Limited gene pool may result in an increase of hereditary diseases:
 - Hemophilia, cystic fibrosis, dwarfism, neurological disorders, Down syndrome



Interaction 2 of 3

- Amish tend to have a very high pain tolerance.
 - True
 - False



Interaction 2 of 3 (Answer)

- Amish tend to have a very high pain tolerance.
 - True
 - False



Preferred End of Life Care: Death and Dying

- Death is usually accepted as a natural occurrence
- Father/husband will probably be the main decision maker
 - A bishop or other community leader may have input as well
- Expect large numbers of visiting family
- Care is traditionally provided by family members



Preferred End of Life Care: Death and Dying

- The family may want to change the clothes of the dying person
- Prolongation of life may be seen as "against God's will"
- Autopsy is generally not favored, but may be accepted if the necessity is explained
- Organ donation usually not preferred
- Some families may wish to take the body home to personally prepare it for burial



Preferred End of Life Care: Grief and Loss

- The Amish tend to be stoic
 - May dislike public displays of emotion
 - Death (even sudden or death of child) could be met with calm acceptance



Interaction 3 of 3

- For decisions, look to the male head of the household.
 - True
 - False



Interaction 3 of 3 (Answer)

- For decisions, look to the male head of the household.
 - True
 - False



Question 1 of 4: Identify the correct choice to complete each of the bulleted statements below:

- A traditional Amish folk practitioner is called a:
- Among Amish, Western Medicine is usually:
- Death is commonly viewed as:

Choices:

a. Valued and accepted

b. Pow-wow

c. A part of life



Question 1 of 4: Identify the correct choice to complete each of the bulleted statements below: (Answers)

- A traditional Amish folk practitioner is called a Powwow.
- Among Amish, Western Medicine is usually valued and accepted.
- Death is commonly viewed as a part of life.

- Choices:
 - a. Valued and accepted
 - b. Pow-wow
 - c. A part of life



Question 2 of 4

- Which of these is a common home remedy for illness?
 - (Select all that apply)
 - Herbs
 - Salves
 - Poultices



Question 2 of 4 (Answer)

- Which of these is a common home remedy for illness?
 - (Select all that apply)
 - Herbs
 - Salves
 - Poultices



Question 3 of 4

- Amish tend to be generally healthy due to their daily lifestyle.
 - True
 - False



Question 3 of 4 (Answer)

- Amish tend to be generally healthy due to their daily lifestyle.
 - True
 - False



Question 4 of 4

- Expect loud, public, emotional responses to death within the Amish community.
 - True
 - False



Question 4 of 4 (Answer)

- Expect loud, public, emotional responses to death within the Amish community.
 - True
 - False



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We hope you had a good experience using this module. If you have any comments or ideas you would like to share about this module, or future modules, please contact the LMHSC Cultural Competence Committee at:

hscinformation@westerntc.edu

Thank you!



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For additional cultural competency resources, please visit the <u>website</u>.

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