

不同社會及文化環境的糖尿病照護能力建構

Diabetes care competency construction in different social and cultural settings

黃玉珠

輔大護理系副教授

網路的快速發展讓地球村的概念在世界各處逐漸成形，而現代社會更是集聚融合各式多元文化的人群，因此醫療照護專業人員須有能力面對日益增加不同文化照護需求的挑戰。台灣照護情境常使醫(護)病互動的時間有限，故照護服務提供者對生物醫療以外其他因素的認識與實踐較少。此外，很少有醫療機構落實文化為導向的計劃，但這類計劃往往才能使來自不同文化與社群的心聲真正被聽到與理解。故作者以糖尿病為例，佐以不同社會文化環境為經緯，建構多元照護能力為核心；建議未來相關照護者對糖尿病預防和治療計劃的製定過程中考慮這些因素與能力的建置，期許有助於改善文化差異群眾與糖尿病相關的結果，並減少醫療照護的差距。

Internet has gradually formed the concept of a global village, in addition, the modern society gathering diverse cultures of people, therefore medical care professionals must face the challenges of increasing care needs of different cultures. However, the care situation in Taiwan often limits the time for doctor(nurse)-patient interaction, so care providers have less knowledge and practice of other factors besides biomedicine. Nevertheless, few medical institutions implement culturally-oriented plans, but such plans often enable the voices of different cultures to be truly heard and understood. The author takes Diabetes as an example, combined with different social and cultural environments as the latitude, and the construction of diverse care capabilities as the core; it is recommended that relevant caregivers in the future consider these factors and ability to build in the process of formulating diabetes prevention and treatment plans, and hope it will be helpful reduce the gap in quality of medical care.