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Consultant, Institutional
Preparation for Cultural
Competence

Visiting Distinguished Scholar,
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Place of Employment:
Self-employed

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Expertise Areas:

Transcultural Topics

- Immigration/Migration
- Religion and HEALTH¹
- Socialization/Acculturation
- Heritage Consistency and HEALTH Traditions Model
- Traditional HEALTH, ILLNESS, and HEALING Beliefs and Practices
- Preparation for CULTURAL COMPETENCE
- CULTURALCARE: the Other Side of HEALTH Care

Cultural Groups

- American Indian
- Asian American
- Black or African American
- Hispanic
- White or European American

Clinical Topics

- Community Health
- Public Health
- Health Disparities
- Hospice
- Holistic HEALTH

Research Methodology

- Qualitative

Languages spoken, read/write*

- English *
- Spanish*

Select Publications

Book

Spector, R. E. (2013). Cultural diversity in health and illness, (8th ed). Upper Saddle River, NJ: Pearson.

Book Chapter

Spector, R. E. (2010). Spector's model of cultural diversity in health and illness. In M.K. Douglas & D.F. Pacquiao (eds.), Core curriculum for Transcultural Nursing and health care. *Journal of Transcultural Nursing*, 21(Supp1):112S-116S. ISSN:1043-6596.

¹The use of capital letters denotes a holistic definition of the terms HEALTH, ILLNESS, HEALING, and CULTURALCARE. HEALTH is the **balance** of the person, both within one's being—physical, mental, and spiritual—and in the outside world—natural, communal, and metaphysical; ILLNESS the loss of this balance; HEALING, the restoration of balance; and, CULTURALCARE., the care needed to assist people to restore their HEALTH.

1. What Sparked my Interest in Transcultural Nursing

My primary nursing education was at the Mount Sinai Hospital School of Nursing, New York City, 1958-1961. The patients I cared for were not only from New York, but also from all over the world. My passion for Transcultural Nursing was conceived and born at that time albeit, the term, Transcultural Nursing, did not yet exist. At that time, I had many questions, such as “what do people *really* do to maintain, protect, and restore their health?” It was a given that countless people had few economic resources and many neither spoke nor understood English. Answers were few and simplistic; there was little knowledge about the health beliefs and practices of people who were not members of the dominant modern society. In 1973 in graduate school, I studied medical sociology and taught an epidemiology course to African, Asian, and Hispanic American students. I taught about immunization, bacteria, risk factors and so forth – the students told me that this was “hog wash.” They went on to teach me what their parents and grandparents believed to be the causes of illness and how the illnesses were to be prevented and cared for. It was a time of confrontation; but I did not give into temptation and walk away. When the course was completed, the students made me make a *promesa* (deep promise) – that I would teach what they taught me to others. I have followed through with this *promesa*. When I began my academic career in 1974 I immediately developed a course “Culture and Health Care.” The course changed titles and some content over time, but I have taught something in this genre since 1975. It led to my book, *Cultural Diversity in Health and Illness*, which is now on its 8th edition and translated to Spanish and Chinese, in addition to an international edition. There is also a web page for the book and a virtual CULTURALCARE Museum (http://media.pearsoncmg.com/ph/chet/chet_spector_cultural_8/cultural_care_museum/spector_html/chapters/spector_museum_ch01.html).

2. Present/Future Directions

I retired from full time academic teaching in 2002, but continue to teach a course, “Holistic Living,” at Boston College. It is a university elective course with students from all disciplines. It has been an interesting way to bring the values of Transcultural Nursing to a wide student audience. I also do consulting on “The Path to CULTURALCOMPETENCY” and “CULTURALCARE: The Other Side of HEALTH Care.” with schools of nursing and health care institutions.

3. Favorite Transcultural Story

I taught students in Israel; the class was comprised of Jewish, Christian, Moslem, and Druze student nurses who lived parallel lives and never interacted socially with one another. In the course, students were asked to describe their familial health practices. At the end of the session, students realized how much they had in common with each other. The differences that existed evaporated and they started to interact with each other!

