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Cultural Diversity



TEACHING PLAN

To use this lesson for self-study, the learner should read the material, do the activity and take the test. For group study, the leader may give each learner a copy of the learning guide and follow this teaching plan to conduct the lesson.



LEARNING OBJECTIVES

A participant in this lesson will be able to:

- Define cultural diversity.
- Avoid stereotyping.
- Communicate with patients of different cultures respectfully and effectively.



LESSON ACTIVITY

1. Engage members of your team in a discussion about their own cultural backgrounds. Invite clinicians and management to share in the discussion as well.
2. Encourage participants to discuss some past patients with different cultural backgrounds that they have worked with and how this may have affected their roles in the home.
3. Obtain information about the makeup of your agency's patient population and provide tailored information on specific cultures to your agency.



THE LESSON

Review the material in the lesson with participants. Allow for discussion.



CONCLUSION

Have participants take the test. Review the answers together. Award certificates to those who answer at least seven (70%) of the test questions correctly.

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TEST ANSWERS

1. d
2. a
3. c
4. a
5. b
6. d
7. b
8. a
9. b
10. b

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Defining Cultural Diversity

Culture is a social pattern of behaviors, beliefs and characteristics of a group of people that are passed on from generation to generation. It is very important to understand that cultural characteristics are very different from physical characteristics. Many people who have similar physical characteristics do not always have similar cultural characteristics.

Cultural diversity is the variety of human societies or cultures in a specific region or in the world as a whole. There are also more obvious cultural differences that exist between people, such as language, dress and traditions.

Geographic culture

Some culture originates from the area of the world that the person is from. This is called geographic culture. There are many geographic cultures that greatly influence a patient's views on diet and medical care.

The following are some types of geographic cultures. They are listed here to give you a better idea of the variety within these cultures and not to provide specific information about an individual patient or family. Keep in mind that these are very general and will not apply to all patients.

Eastern Asian and Pacific Islanders

Eastern Asian and Pacific Islanders contain many different ethnic groups. These groups include, but are not limited to, Chinese, Korean, Japanese, Vietnamese, Hmong, Indonesian, Filipino and Samoan people. Dietary habits are varied, based on the culture, and there are often special diets to be taken into consideration during illness. Fish, fruits, vegetables and rice are the primary diet, along with small amounts of chicken, pork or beef. In most of these cultures, a meal is almost like a ceremony and should not be interrupted. There are several religions practiced, including Confucianism, Buddhism, Taoism, Islam, Shintoism (Japan) and Roman Catholic. Medicinal herbs and folk remedies and rituals are commonly used to prevent or treat illness. Most believe that good health is a result of harmony and may use health healers and spiritual healers before seeking standard medical care. Drawing of blood is especially upsetting to many. There is a tendency to hide outward signs of pain, so it may be difficult to determine how much pain a patient is having. Many believe in some type of reincarnation.

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Haitian, Puerto Rican, Cuban

Generally, diet is very important for maintaining good health for people of Haitian, Puerto Rican or Cuban culture. Many believe foods have “hot/cold” properties and they must be in harmony. Some believe illness is supernatural and caused by evil spirits or enemies of deceased relatives. They may wear amulets to protect against evil spirits. Most consult folk healers or spiritualists before seeking standard medical care. Use of herbs and rituals for healing is common. Many are suspicious and fearful of hospitals. Cuban-Americans are most likely to use the standard medical practices in combination with religious or home remedies.

Religious culture

In addition to cultures passed on from different geographic areas, there are many general religious cultural beliefs you may find among your patients. Keep in mind that not all members of a particular religious group will hold the same beliefs. These are generally held beliefs and may not be those of each and every member.

Baptist

Almost all Baptist groups prohibit alcohol as a beverage. Many groups strongly believe in faith healing or “laying on of hands” by preachers or others empowered by God to heal. Many believe that when medical treatment cures them, it is because God is functioning through the doctors and nurses. They may refuse ventilators or resuscitation, believing it interferes with God’s will. Mission work is very much part of most Baptist churches because many of them believe that only Christians will go to heaven.

Church of Jesus Christ of Latter Day Saints

People who practice at the Church of Jesus Christ of Latter Day Saints are commonly referred to as Mormons. While meat is not forbidden, members are encouraged to eat meat “infrequently.” They generally do not drink tea, coffee or alcohol. Most will fast for 24 hours on the first Sunday of the month. They are strong believers in divine healing with anointing and “laying on of hands” by church elders but do not prohibit standard medical care. Special “garments” or underwear are worn by Mormons as a symbolic gesture of promises that they have made to God. They begin wearing the garment during their first visit to temple. The garment is made of a top and bottom piece and is worn both during the day and night. Never remove these undergarments without discussing the process with the patient or family. The church headquarters is in Salt Lake City.

Islam

People who practice Islam are referred to often as Muslims or Nation of Islam. Muslims do not eat pork and pork products and generally do not use alcohol. During Ramadan (the last month of the Mohammedan year), they do not eat during daylight hours. They accept standard medical care and generally oppose faith

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healing. Muslims perform prayers five times daily. There is usually ritual washing before prayers. There are several different sects of Islam, and each is somewhat different.

Jewish

Dietary habits depend upon whether members of this faith are Orthodox, Reformed or Conservative. The most common dietary habit for most Jews is the avoidance of pork. Some Jewish people keep kosher, which means only eating only meat that comes from animals that eat vegetables, have cloven hooves or chew their cud. Meat must be slaughtered in a specific way to make it kosher. Some Jewish people do not eat seafood unless it has scales and fins (no shellfish). Jews who strictly observe kosher laws don't eat or store meat and dairy products together. Since kosher meats are often brined and therefore high in sodium, patients on low-salt diets do not have to use kosher meats. Jewish people may have two sets of dishes, utensils and cooking equipment — one for meat and one for dairy.

During Passover, many Jewish people don't eat leavened bread (bread containing yeast or other ingredients to cause it to ferment and rise). Some Jews may refuse surgery during the Sabbath. Members of the Jewish faith generally oppose prolonging life after life support. Many Jews will not withhold food or fluid for patients who can no longer swallow. They will request feeding tubes, intravenous fluids or continue to offer fluids even when the patient can not swallow. There is no single Jewish authority over all Jewish synagogues. All congregations are independent and control their own activities. The Sabbath is observed by many Jews in different ways. It's a day of rest and worship. Like all Jewish holidays, it begins and ends at sundown. The Jewish Sabbath begins on Friday at sundown and lasts until sundown on Saturday. During this time, some Jews do not use cars, do not cook or do work of any kind.

Roman Catholic

The Catholic church is the largest Christian church worldwide. The authority over all Roman Catholics is the Pope. Catholics fast during Lent, 46 days prior to Easter, by not eating meat on Ash Wednesday, the beginning of Lent or on any Friday until Easter. Some Catholics still follow the old practice of no meat on any Friday of the year. The church does not approve of contraceptives, abortion or fertility treatments. Two rituals Catholics practice include communion and anointing of the sick. Communion is a sacred practice in which wine and bread is taken by the patient along with prayer. Anointing of the sick is a prayer performed by a priest or lay person as a spiritual healing. Most people request anointing of the sick during major illness. Home care patients may refuse to eat or drink for an hour before someone is bringing them communion.

Stereotypes

All information in this lesson reflects general beliefs of many geographic and religious cultures. That said, it is important to understand that not every person, even if that person is of a particular culture, practices that way. For example, someone may be Roman Catholic but not go to church or take communion. Someone from Puerto Rico may never eat the types of food from his or her region. Every person is different.

We must be careful never stereotype people based on physical features. Just because someone is from the Middle East does not mean that person is Muslim. Just because someone is Mormon does not mean that person never drinks alcohol. There are many stereotypes in the world, and they are often reflected on TV, the internet and more. It is important to never assume. Always make sure you listen and communicate with the patient so that you understand what cultural beliefs he or she holds.

Communication and Active Listening

Patients from different cultures will communicate in different ways. It is hard to know what is appropriate for patients of different cultural backgrounds. Observation between family members and nonverbal reactions to communication can be clues to aid you. Always address a person from a different culture by his or her formal name. In some cultures, direct eye contact may be considered disrespectful and communicating with eyes downcast is a sign of respect. Be aware of personal body space. Some cultures may see a close body space as threatening, while others may maintain a close body space. Cultures vary with regard to comfort with physical contact, particularly if it involves someone of the opposite sex. When providing personal care for someone from a different culture, ask permission to touch or uncover areas of the body and expose only one area at a time.

It is so important for home health staff to listen to their patients. Many patients may not share their culture with you right away. But if they do, it is important to listen and retain that knowledge. An important part of effective communication is the art of active listening.

All of us are distracted by our personal lives and work responsibilities. This can interfere with our ability to be active listeners. Active listening doesn't always come easy. It is a technique that takes practice and a dedicated effort to maintain. But once you learn how to become an active listener, there is so much more information that can be gained from patients or caregivers, and there is much more that we can do for them.

Tools used in active listening are not complicated. They just take consistent use become second nature.

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The following are guidelines to use in active listening:

- Pay attention to what the patient or caregiver is saying.
- Maintain eye contact.
- Face the patient or caregiver directly.
- Acknowledge that you are listening to the patient.
- Don't interrupt the patient or caregiver when he or she is talking.
- Don't talk when the patient is talking.
- Ask questions to clarify what the patient or caregiver said if you did not understand him or her.
- Paraphrase back to the patient or caregiver what you thought you heard.
- Be aware of the patient or caregiver's nonverbal communication.
- Be honest in your response.
- Treat patients as you would want to be treated.

Home health's role

A person's culture is a part of that person. As someone who cares for people in their homes, you may witness different cultures you have never encountered before.

Your role may include:

- **Respecting the patient's beliefs.** You may not always agree with a patient's values or lifestyle, but you must respect his or her beliefs, lifestyle choices, culture, attitudes and other preferences. You must not be judgmental, and you must honor the patient's choices.
- **Observing, reporting and documenting.** Keen observation skills are important for anyone who works with patients in health care. Observation can be important to notice cultural practices. Patients may not always be open to communicate with you about their beliefs and rituals. But by observing patients, you may be able to understand them better. Sometimes patients will expect you to understand without communicating with you at all. Although this is unrealistic, you can get a head start to understanding by observing the patient. Report anything out of the ordinary to your supervisor. Do this even if you don't think it's important. Document anything that can improve care (types of food a patient doesn't eat, prayer schedule, etc.), as this is important information. An example of when cultural diversity may need to be observed, documented and reported is as follows:

A patient always prays at certain times during the day. Although he has not mentioned his prayers to the home health staff, he gets upset if he is busy during his prayer times.

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Once he even tried to get out of the bath in the middle of bathing to prepare to pray. The home health staff member tries to talk to the patient about it, but he does not want to talk about his religion. There is a slight communication gap because of a language barrier.

Home health employees first need to respect this patient's choice to not discuss religious practices. Since the patient doesn't communicate, you must observe the patient and help base his care on the observations. By observing the times that the patient prays, the home health staff can document and let the clinician know when the patient prefers to be visited and cared for. If there is a routine in the patient's prayer schedule, as there often is, make sure you document it. This information can make it easier for you to schedule care and also make the patient happier.

TEST

Cultural Diversity

Name _____ Date _____ Score _____

Directions: Fill in the blank or circle the correct answer. (Seven correct answers required.)

1. Which of the following is a technique of active listening?
 - a. Maintaining eye contact.
 - b. Acknowledging that you are listening to the patient.
 - c. Being aware of the patient or caregiver's nonverbal communication.
 - d. All of the above.

2. Which of the following groups of people would make up a type of culture?
 - a. Muslims.
 - b. Women.
 - c. Californians.
 - d. Nurses.

3. How might the cultural beliefs of a patient affect a frontline staff member's job?
 - a. If the patient's beliefs are wrong, then the staff member needs to correct them.
 - b. They won't.
 - c. The staff member may need to change meal preparation to respect the patient's cultural beliefs.
 - d. The staff member may need to pretend to follow the same beliefs.

4. Which of the following cultures is generally opposed to taking medications?
 - a. Christian Scientists.
 - b. Muslims.
 - c. Eastern Asians.
 - d. Mormons.

TEST

Cultural Diversity (cont.)

5. Which of the following is *not* true about cultures?
- a. The beliefs are passed from generation to generation.
 - b. Everyone within the culture is the same and will believe and practice exactly the same things.
 - c. Members of the same race often have great cultural differences.
 - d. Cultural characteristics are different from physical differences.
6. Which of the following help define a culture?
- a. A social pattern of beliefs shared by a group of people.
 - b. A pattern of social characteristics shared by a group of people.
 - c. Beliefs that are passed on from one generation to another.
 - d. All of the above
7. As soon as you know a patient's cultural background, you will know all about his or her beliefs, since everyone from that same background will have those beliefs.
- a. True
 - b. False
8. One of your most important obligations as a home health caregiver is to respect the rights of patients, including their cultural beliefs.
- a. True
 - b. False
9. What is a stereotype?
- a. An accurate description of a person's cultural beliefs.
 - b. A widely held but fixed and oversimplified image or idea of a particular type of person or thing.
 - c. A type of culture.
 - d. A type of stereo system.
10. Observing a patient's cultural rituals is always a waste of time, and you shouldn't bother to pay attention, as it's important to mind your own business.
- a. True
 - b. False