CULTURE AND DIVERSITY

TIP SHEET

When implementing prevention programs, it is important to consider culture and diversity, such as socioeconomic status, sexuality, spirituality, ethnicity, and other aspects. Culture involves every aspect of an individual's external and internal life. Many definitions of culture exist. One way to define culture is the knowledge, experience, values, ideas, attitudes, skills, tastes, and techniques that are passed on from more experienced members of a community to new members. Carriers of culture include families, religious organizations, peer groups, neighbors, social groups, and professional organizations. Some cultural experiences are related to biological factors, such as physical stature and skin color, while others are related more to sociological factors, such as socioeconomic status and religious affiliation. Drawing conclusions about a person based on their external appearance can be detrimental. There are many elements of culture and diversity (Hogan, Gabrielsen, Luna, & Grothaus, 2002).

Some elements include:

> Aesthetics (attitudes and behaviors related to literature, music, dance, art, architecture, etc.)
> Ceremony (what a person is to say and do on particular occasions)
> Ethics (attitudes and behaviors related to honesty, fairness, principles, etc.)
> Health and Medicine (attitudes and behaviors related to wellness, sickness, death, etc.)
> Folk Myths (attitudes and behaviors related to heroes, traditions, legendary characters, superstitions, etc.) Exercise care in regard to what is a myth, what is a superstition.
> Gender Roles (attitudes and behaviors related to expectations of people because of their gender)
> Gestures and Kinetics (forms of nonverbal communication or reinforced speech, such as the use of the eyes, the hands and the body)
> Grooming and Presence (attitudes and behaviors related to physical appearance, such as hairstyle, cosmetics, dress, etc.)
> Ownership (attitudes and behaviors related to property, individual rights, etc.)
> Recreation (attitudes and behaviors related to how people spend their leisure time)
> Relationships (attitudes and behaviors related to family and friends)
> Religion and Spirituality (attitudes and behaviors related to spirituality, prayer, purpose in life, the possibility and type of afterlife, etc.)
> Rewards and Privileges (attitudes and behaviors related to motivation, merit, achievement, service, etc.)

- Rights and Duties (attitudes and behaviors related to personal obligations, voting, taxes, military service, legal rights, etc.)
- Sex and Romance (attitudes and behaviors related to courtship and marriage)
- Sexuality (sexual behaviors and sexual relationships)
- Space (the accepted distances between individuals, depending on their relationship)
- Status (attitudes and behaviors related to people of different rank (e.g. age, wealth, office or fame)
- Subsistence (attitudes and behaviors related to providing for oneself, the young and the old, and who protects whom)
- Taboos (attitudes and behaviors related to doing things against accepted norms)
- Time (attitudes and behaviors related to being early, on time or late)
- Values (attitudes and behaviors related to freedom, security, education, aggressiveness, intellect, cleanliness, cruelty, crime, etc.) .

A useful exercise is to survey "core beliefs." What are the 3 or 5 or 10 most important ideas about the nature of the world and the group's place in it that characterize the culture?

All aspects of culture should be considered, understood, and accepted when working with individuals and communities. Therefore, this section will discuss various ways to learn about cultures that may be different from our own so that we can come to understand the relevance of cultural competence and understanding diversity in prevention program planning.

When planning and implementing prevention programs, thoroughly understanding the community served and involving community members is critical. In order to be effective, prevention professionals must understand the community's perception of the problems that exist. Then, professionals must work with community members to address these identified problems in ways that "make sense" to the community members (Hogan et. al, 2002). The following worksheets provide a list of places to search for information on communities and questions to consider in your search (Gonzalez, Freeman, & Howard-Pitney, 1991)

Where to Go to Find Information about Communities

Start with a Library Search
Although you should spend most of your time in the community, it is important to devote some time to library research so that your approach into the community is an informed one. The following are the types of literature you will want to review.

Census data, maps and other government documents, reports and statistics
Such information identifies who and where the target community is, as well as what problems and needs exist in comparison to the general population.

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<u>Medical and public health references, specifically epidemiological and health intervention articles related to the health problem(s) you want to address in a program.</u> These provide the latest information on the scope of the problem, on trends in different populations and on previous approaches taken to mediate the problem. This type of information can give you ideas on how you might approach the problem in your target community.

<u>Behavioral and social science literature</u>
Review intercultural and ethnic studies literature because this often includes a collection of psychological, sociological and anthropological references specific to different racial, ethnic or cultural groups. Such information can be extremely useful in providing you with a general understanding of different cultures' values, beliefs, practices and historical experiences in the United States.

<u>Local newspapers</u>
Both the major dailies and smaller neighborhood newspapers, including the various ethnic papers, are a good source of information about a target community. The local news and editorial sections often provide some specifics about a community's or group's controversies (i.e. their most pressing issues, concerns or problems). These newspapers also provide listings of current or upcoming community events. Such information not only gives you some insight into the social and political "climate" in that community, but can also help you identify people, places and events to visit when you begin exploring the community.

If time is short, gather only that information which will provide you with answers to the following:

⬦   What are the major historical issues?
⬦   What are the current economic and political concerns of the groups or community?
⬦   What are some of the major cultural beliefs, values and practices, especially those related to the health problems you are addressing?

Consult with the Experts
In addition to doing preliminary library work, you will also want to consult experts who can provide you with a valuable, yet different perspective on the community. Be sure to talk to people from each of these categories (Gonzalez, Freeman, & Howard-Pitney, 1991).

<u>Academicians</u>
These are the people in academic, research institutions or government agencies who have done research in your areas of interest or have personal, sociological or historical knowledge and experience with specific ethnic groups. They can help you interpret and/or clarify the findings from your library search, or direct you to the most recent and relevant research.

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<u>Health professionals or other persons working in similar communities or with similar problems</u>
These people may be found in local, regional or national organizations (e.g. major minority health organizations or voluntary health agencies). These organizations often have accumulated relevant information based on their experience with various diverse communities throughout the country. Such people can provide you with more specific information about the problem as it is experienced by the different cultural groups. People in local organizations can also give you pointers on how to work in and with the community, sharing with you some of their own experiences (i.e. what is appropriate, what does or doesn't work well and who you might contact in the community to begin your planning).

<u>Individuals and/or groups from the target community</u>
These people will often be your first contacts in the community. Through them you will learn more about the culture(s) of the target community in a more direct way than just by reading or hearing about it. These people can also work with you as partners and consultants to create or adapt the program to the various cultural groups within the community. However, it is imperative that you seek out community contacts carefully, as poorly or hastily selected people can cost you the accuracy of your information, as well as the trust of the community in later program building efforts. Be aware of factions within the community. Use Key Informant interviews to assist you in formulating a strategy. Use focus groups to get the input / feedback of the target population.

Assess Your Own Organization
The last step of your information gathering (one that is important but often forgotten) is assessing your own organization and its ability to work with other agencies and individuals already established in the target community. To do this, you may want to consider the following:

‣ What is the range of cultural values and beliefs within your staff? How are they different from the target community's?
‣ How do these beliefs influence your staff's attitudes about different cultural groups?
‣ Have members of your staff had experience working with diverse communities?
‣ What were those experiences like and how do they feel about working in and with other groups in this target community?
‣ How are different cultural groups likely to react to the cultural make-up of your staff?

Questions to Consider in Your Search for Information about Communities

Answering these questions may help you understand a particular culture (Gonzalez, Freeman, & Howard-Pitney, 1991).

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Historical Issues

- What is the history of the community?
- What name or names do the cultural group(s) use to refer to themselves?
- What is the significance of the different names?
- What are the major differences between cultural groups in your target community, particularly across generational, educational, socio-economic and geographical lines?
- What are the major historical events which describe the target group's experiences in the United States?
- What were and are the major conflicts between or among the cultural groups in the target community? What were the outcomes?
- What were and are the major conflicts within each group? What were the outcomes?
- What have been and are now the major social, economic and political concerns of the target community; in particular, the effects of discrimination which impede their access to employment, education, housing, health care and other vital human services?

Economic and Political Issues

- What are the different socio-economic levels of groups within the community (i.e. are they upper, middle and/or lower income)? What accounts for the differences within each cultural group?
- What is the political status of each group within your target community (e.g. undocumented, refugee, legal immigrant, citizen, political party affiliation and/or membership, etc.)?
- What are the different literacy levels within groups? Are they literate/illiterate in their own language, English or both?
- What are the different educational levels within the groups?
- How is their health status affected by their economic and political status? What are the predominate health problems?
- How often is medical care used by these different groups? What types of care?
- What are the organizations that successfully serve the different groups within the target community? Are they governmental, religious, community or social service, political or ethnic in nature?

Traditional or Culture-Specific Issues

<u>General</u>

- What are the values of the different groups within the community?
- How do various members of each cultural group define health and illness?
- What are some of the more common health beliefs and practices of various members of different groups in the community, both in general and with respect to the specific problem?
- What are the predominant family structures within the community's different cultural groups? Are they hierarchical, patriarchal, two household, single parent household, female head of household, extended, nuclear, etc.?
- What are some of the traditional roles of different family members in these different groups, particularly where health care is concerned?

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- Who are the formal and informal leaders of the groups of community and what role do they have in the area of health education/promotion?
- How many and which languages or dialects are spoken? Is there a common language understood by all? Is there a written language?
- What are the formal and informal channels of communication within and between different groups?

Medical Orientation
- What are the group's general beliefs about the cause, prevention, diagnosis and treatment of disease?
- Does the group have any theories that explain specific illness or health problems?
- What are the group's attitudes toward Western medicine?
- To what extent is there use of Western medicine? If it is used, where does the group seek such care (i.e. hospitals, clinics, private physicians, etc.)?
- In general, what have been the experiences of different groups when trying to access the health care system?
- To what extent is there use of traditional medicine or healers? If so, for whom is it popular? What types are used and for which health problems?
- Where do people in these different groups go for health information?

Diet
- What are the traditional foods and what role do these different foods play in health, religion and school activities?
- How has the diet here in the U.S. changed over time as compared to that of the country of origin?
- Is there access to those foods that constitute the traditional diet? If so, are they affordable and accessible to this particular community? If not, are there acceptable and affordable substitutes?

Religion and Spirituality
- What are the different religious/spiritual practices within the different cultural groups in this community? Are they segregated from others of the same faith? Do any practice their religion in secret?
- How is their practice of a specific religion influenced by their culture? Is it practiced differently from that of a different culture within the same faith?
- What is the size of membership and who are they?
- Who are the religious leaders and what is their role in the larger community?
- Are there conflicts within or among the various religious groups?
- What involvement do various religious groups have in the area of health education/promotion?
- Do any of the religious beliefs or practices conflict with the philosophy of health promotion? Can these beliefs and practices somehow be incorporated into your program?

Be sure to add your own questions that are specific to the problem being addressed. The answers to these questions will not only give you more insight into the culture, they may help discover ways to make contact with the community, plan and adapt your program culturally and generate support for it.

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Some Elements of a Culturally Competent Prevention Professional

As stated above, prevention professionals must also be aware of their own personal attitudes and beliefs. The following elements may help a preventionist become more aware of diversity issues and competent in working with various cultures.

1. Understand how one's cultural perspective and its limits affect the ongoing teaching/learning relationship and understand that the exploration of these cultural limits is an ongoing process.
2. Provide and promote an atmosphere in which cultural differences can be explored and understand that this process is not only cognitive, but attitudinal and affective as well.
3. Draw upon the cultural experience of students and parents in order to include authentic cultural perspectives in the curriculum or activity.
4. Adjust and accommodate to varied learning styles, building on participants' strengths and avoiding hasty judgments and culturally inappropriate labels that might be placed on students.
5. Be skeptical when using diagnostic tools so that questions are constantly raised regarding the validity of all assessment instruments when they are applied to people who are culturally different from those on whom the norms were calculated.
6. Understand, believe and convey that there are no culturally deprived or culture-free individuals and that all cultures have their own integrity, validity and coherence.
7. Expand students' knowledge of their culture and their capacity to appreciate and deal with differences in others, helping to see themselves in a multicultural perspective by first legitimizing the students' own cultural perspectives and then by addressing the cultural perspectives of others immediately around them, using this as a base to move toward an international or global perspective.
(Whealdon and Cuevas, 1995)

Characteristics of a Culturally Appropriate Prevention Program
(adapted from Banks, 1995)

Organizations and institutions can facilitate or thwart an atmosphere of acceptance toward others. The following list provides examples of characteristics of a culturally appropriate prevention program.

▹ The program staff, administrators and board members have high expectations and positive attitudes toward all students, regardless of their culture.
▹ The formalized curriculum and activities reflect the experiences, culture and perspectives of a range of cultural and ethnic groups.
▹ The teaching styles used by the facilitators match the learning styles of the students.
▹ The organization (board, facilitators, evaluators, etc.) shows respect for the student's first language and dialects.
▹ The instructional materials used in the program show events, situations and concepts from the various perspectives being proportionately represented.
▹ The assessment and evaluation procedures used in the program are culturally sensitive.

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- The organizational culture—as evidenced by the ethnic, gender, age, religious etc. composition of the staff, as well as Discussion Forums, etc.—reflects diversity.
- The program staff has high expectations for all students, regardless of their culture and helps them to set career goals.
- The organization has an effective plan for the involvement of parents.
- The board has a policy on culturally appropriate education that it effectively communicates to all staff.

References

Adapted from Substance Abuse Specialist Training

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