

Cultural Interview

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### Cultural Interview

Being a resident in America has exposed so many people to different ways of life. Because this country is considered a melting pot, several different ideas and beliefs are seen in every day life. With the numerous cultures, it is important that health care providers are culturally competent. To increase cultural competency and take a look at a culture in depth, an interview was conducted on the culture of my choice. The author decided to interview was David Rojas, my college classmate (D. Rojas, personal communication, June 14, 2015). The interview was held over FaceTime due to distance issues and he was more than pleased to share his culture and have it written about. His way of life and the ideas of his family will be compared and contrasted throughout this paper. In addition, interventions and practices will be created based on his cultural needs.

### **Purnell's 12 Domains**

In order to be culturally competent in the scope of nursing it is important to touch on things like communication, family, administrative and organizational theories. By looking at multiple dimensions of a culture, it provides a well rounded knowledge. The *Purnell Model for Cultural Competence* (2005) is a tool that is used to get a grasp on a culture as a whole. It focuses on the primary and secondary characteristics of a culture, which determine their beliefs, values and practices in every day life (Purnell, 2005). Below, Purnell's 12 domains will be discussed in terms of the Mexican American culture.

### **Overview**

In the Mexican culture, family is one of their most prized possessions. There is nothing stronger than family and no one will support you better than they can. Aside from family the practice of religion, typically Catholic is highly emphasized. By way of your family, God, hard

work and dedication, you will pursue a successful life. A huge theme within their culture is collective achievement as a unit (Giger, 2013).

### **Communication**

The primary language within the Mexican culture is Spanish, with 90% being fluent (Giger, 2013). When speaking to those who are older than you, especially parents and grandparents, you treat them with utmost respect. The youth should always make eye contact when speaking to an elder, use proper grammar, and greet them with a hug or kiss on the cheek. Failure to treat elders with respect can result in great disappointment and sometimes punishment. Overall, they are very tactile when it comes to relationships, women more than men (Giger, 2013). In terms of males in the Mexican culture, being strong and tough is extremely important. The act of expressing feelings, it is seen as a weakness.

### **Family Roles**

In a Mexican household, the man of the house is in charge, whether it be the father or oldest son. It is believed that the men are dominant and strong and the women therefore, should be submissive and compassionate. The father will essentially teach his son how to manage a household and the mother will teach the daughter how to maintain it. The concept of family is one of their core beliefs and the term family can branch out to numerous amounts of people. In David's family, family is not only those blood related, but also consists of his friends. Everyone is invited to his family gatherings, events and celebrations. They believe the more people involved the better the celebration.

In a family where a marriage is failing, it is seen as a failure to get a divorce. "In 2009, 53.4% of Mexican American families were married couple families, 11.7% were single male household families, and 17.5% were female-headed households," (Giger, 2013). It is believed

that you stay in that marriage and fix it. To give up is not an option, even if it is something that you don't want anymore. Love and marriage are something that occurs between a man and woman. To be romantically involved with someone of the same sex is looked down upon, not accepted, and a terrible sin.

### **Workforce Issues**

Males participate in more manual labor, while the females do more delicate work. Of the jobs that Hispanic males obtain, approximately 50% are in the category of manual labor (Giger, 2013). In terms of salary and annual income, Mexican Americans make on average, \$22,000 less than all other races (Giger, 2013). In the healthcare aspect, being a doctor is most respected. The doctors are viewed as having more of the male dictator role, while nurses obtain the female role of taking care of others. The professions that his parents encouraged him to work toward were a doctor, lawyer or teacher.

### **Biocultural Ecology**

According to Giger (2013), in terms of ethnic variations, most Mexican Americans are either a natural tan to a dark brown skin complexion with dark hair. At birth many children of Mexican descent have Mongolian spots, darker pigmented spots, on the sacral area. As far as disease is concerned, they are also at a high risk. Diabetes is the most prevalent disease seen in Mexican Americans, with 10.2% being diagnosed with diabetes in 2007. It is said that this culture is 1.9 times more likely to have diabetes than non-Hispanic Whites. Along with diabetes, Mexican Americans are also at risk for hypertension, pernicious anemia, HIV/AIDS and childhood obesity (Giger, 2013).

### **High-Risk Behaviors**

Tobacco and drug use is looked down upon and viewed as a very negative act. It is believed that when you participate in activities like these, you lose grasp of your family and success. As far as alcohol is concerned, there are no ill thoughts. It is actually, for the most part encouraged, especially at family gatherings.

### **Nutrition**

Food is the center of everything. It is the glue that keeps the family together. The head female of the household is responsible for making sure there is food on the table for every meal. For the most part, tortillas, rice and beans are present at the table daily. David explained that food is even considered a healer. When he is sick his mom makes him chicken soup and tea. It is said that these two things can cure anything, even cancer.

### **Pregnancy**

Creating bigger families is particularly important in David's culture. In the United States, Mexican American households have approximately one more person compared to non-hispanic (Giger, 2013). David believes that birth control isn't widely used because all their parents' want is grandchildren. He believes that's why Mexicans typically have such large families. To give birth is a blessing and to abort would be a sin.

During pregnancies, Mexican Americans have certain beliefs to maintain good health of the fetus. For example, David's mother was encouraged not to wear anything around her neck to decrease the risk of cord complications with the baby. In addition, mal ojo (evil eye) is an old folk tale that causes the child to cry, get a fever, vomiting and loss of appetite (Giger, 2013). Mal ojo is caused when you look at or admire a child without physically touching him or her.

### **Death Rituals**

A death in a family is a big event. The reasoning for death is never questioned and is instead seen as God's plan or *will*. It's a very emotional time for everyone involved. There's usually a pre-burial viewing, prayer service and followed by a big church ceremony. Following the ceremony, a big burial is put together to pay respects and put the deceased to rest. Although they are laying the deceased to rest, it is not seen as the end of life, but instead a start of a new life (Giger, 2013).

### **Spirituality**

The religion that is most commonly practiced by Mexican Americans is Roman Catholicism. David's family believes that prayer can essentially fix everything. It is imperative to go to church every Sunday to be forgiven of your sins. "Common religious practices are baptism, confirmation, communion, weddings, and funerals," (Giger, 2013). During any struggles or triumphs God is either praised or looked toward for answers and guidance. According to David, "God is life".

### **Health-Care Practices**

David states that typically Mexicans are very stubborn and don't go to the doctor unless someone is really sick. According to Gonzales and Gutierrez (1983), they only seek professional healthcare as a last resort, after self-treatment and folk medicine practices have failed. They do not participate in prophylactic healthcare, but rather acute. One of the reasons that the use of prophylactic healthcare is so minimal is due to economic status and lack of health insurance. "Explanations for lack of insurance are partly related to communication difficulties and to lack of understanding that insurance is needed," (Giger, 2013). The use of prayer is utilized before the healthcare system and is thought to cure you. And again, as stated previously, home remedies like chicken soup and tea, prepared by an elder, pretty much cure everything.

### **Health Care Practitioners**

When healthcare is finally sought out by individuals, they view these medical professionals as superior. Doctors in particular are seen as all knowing and are highly respected. As far as gender preference, most people prefer male doctors because the male gender is seen as better and knows more. But when exposed body parts are involved, especially during things like delivery, Mexican Americans prefer same sex care. It is believed that those areas are only something her husband should see, but as long as her physician is sensitive to her modesty needs, male physicians are accepted (Giger, 2013).

### **Nursing Interventions**

When caring for a patient of Hispanic descent, communication is key. As previously stated earlier in this paper, 90% of Mexican Americans speak Spanish. To properly provide adequate healthcare it is important to apply the second mode of nursing care, which is accommodation (Nursing Theory, 2015). In order to effectively communicate with someone whose primary language isn't English, it is important to emphasize good verbal and nonverbal communication. Stepping in to a healthcare system that is predominantly English speaking can be very intimidating and scary. To make your patient more comfortable it is important to have an interpreter near by, accompanied by friendly facial expressions, facing the client and talking directly to the client and not the interpreter (Giger, 2013). Being open and welcoming to your patient will create a better relationship and openness to disclose certain information.

After making your patient more comfortable, it is very important to involve the family. Mexican Americans value the physical presence of their loved ones. So opening up and encouraging visits from family and friends can put your patient more at ease. It is important for Mexican Americans to see relatives face to face, embrace, touch, and just be with each other

(Giger, 2013). Allowing the family to participate in the client's care builds trust and respect and encourages compliance and support for discharge planning and teaching (Giger, 2013). This intervention would fall under cultural care preservation (Nursing Theory, 2015).

Due to the fact that Mexican Americans are sometimes sensitive to being taken care of by male health care providers, it is imperative that you are sensitive to their needs. Creating open lines of communication and understanding your patients preferences, will make their overall experience better. Make sure that you ask them what they prefer and that you respect their wishes. The healthcare scene is already an uncomfortable place, it is the health care providers job to make it as comfortable as possible.

### **Standard of Care**

One of the Transcultural Standards of Care that these interventions apply to is the knowledge of cultures. The knowledge of cultures standard states, "Nurses shall gain an understanding of the perspectives, traditions, values, practices, and family systems of culturally diverse individuals, families, communities, and populations they care for, as well as a knowledge of the complex variables that affect the achievement of health and well-being," (Douglas et al., 2011). Without knowledge of the various cultures, it is impossible to adequately care for the patient. Knowledge is the base of care, whether it be cultural or not, without knowledge very little can be achieved.

### **Analysis of Experience**

After interviewing my friend David, it was really eye opening. It's amazing to me how many different beliefs a culture can have. While interviewing him, I found myself constantly comparing my Filipino American and Western culture. At times when I was interviewing him, he would ask his mother for clarification and if she didn't understand what he meant in English,



he would revert back to Spanish and she would understand better. Even simple acts like switching back to someone's primary language, show how important it is to culturally understand your patient. The only thing that I would have changed about my interview is for it to be done in person and possibly observe his family without interaction. I would have liked to watch how they went about their daily lives by simply just observing.

It is interviews like these that show how important it is to understand your patient's culture and beliefs. To provide the best quality care, it is imperative that you are sensitive, respectful and knowledgeable of their wishes and desires. Although one may not agree with a culture's way of life, it is not their job to judge, but instead create a comfortable environment while providing adequate healthcare.

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