Table 3 - 2 CULTURAL CHARACTERISTICS RELATED TO HEALTH CARE OF CHILDREN					
Cultural Group	Health Beliefs	Health Practices	Family Relationships	Communication	Comments
Asian- Americans Chinese	A healthy body viewed as gifts from parents and ancestors and must be cared for.	 Goal of therapy is to restore balance of yin and yang. Acupuncturist applies needles to appropriate meridians identified in terms of yin and yang. Acupuncture and tai chi replacing acupuncture in some areas. Mexibustion is application of heat to skin over specific meridians. Wide use of medicinal herbs procured and applied in prescribed ways. Folk healers are herbalist, spiritual healer, temple healer, fortune healer. Meal may or may not be planned to balance hot and cold. Milk intolerance relatively common. Use of condiments (e.g. monosodium glutamate and soy sauce) may create difficulty with some diet regimes (e.g. low salt diets.) 	 Extended family pattern common. Strong concept of loyalty of young to old. Respect for elders taught at early age. Acceptance without questioning or talking back. Children's behavior a reflection on family and individual honor and "face" important. Self-reliance and self-restrain highly valued; self-expression repressed. Male valued more highly than females; women submissive to men in family. 	 Open expression of emotions unacceptable. Often smile when do not comprehend. 	 Do not react well to painful diagnostic workup; are especially upset by drawing of blood. Deep respect for their bodies and believe it best to die with bodies intact; therefore may refuse surgery. Believe in reincarnation. Older members fear hospital; often believe hospital is place to go to die. Children sometimes breast for up to four or five years.
Japanese	Three major belief systems: 1. Shinto religious influence. a. Humans inherently good. b. Evil Caused by outside spirits. c. Illness caused by contact with polluting agents (e.g. blood,	 Believe evil removed by purification. Energy restore by means of acupuncture along affected meridians. Kampo medicine – use of nature herbs. Believe in removal of 	 Close intergenerational relationships. Family provides anchor. Family tends to keep problems to self. Value self-control 	 Issei – born in Japan; usually speak Japanese only. Nisei, Sansei, and Yonsei have few language difficulties. New immigrants able to read and write English 	 Generational categories: Issie – 1st generation to live in US. Nisei – 2nd generation Sansei – 3rd generation Yonsei – 4th generation Issie and Nissei – tolerant and permissive childrearing until 5 or 6, then emphasis on emotional reserve and control.

	corpses, skin diseases). 2. Chinese and Korean influence. a. Health achieved though harmony and balance between self and society. b. Disease caused by disharmony and society and not caring for body. 3. Portuguese influence: a. Upholds germ theory of disease.	 diseased parts. Trend is to use both Western and Oriental healing methods. Care for disabled viewed as family's responsibility. Take pride in child's good health. Seek preventative care, medical care for illness. May avoid some food combinations (e.g. milk and cherries, watermelon and crab) and believe pickled plums to have special properties. 	 and self-sufficiency. Concept of haji (shame) imposes strong control; unacceptable behavior of children reflect on family. Many adopt practice of contemporary middle class. Concern for child's missing school may result in sending to school before fully recovered from illness. 	 better than able to speak or understand it. Make significant use of nonverbal communication with subtle gesture and facial expression. Tend to suppress emotions. Will often wait silently. Cleanliness highly valued. Time considered valuable and used wisely. Tendency to practice emotional control may make assessment of pain more difficult.
Vietnamese	 Good health considered balance between yin (cold) and yang (hot). Believe person's life has been predisposed toward certain phenomena by cosmic forces. Health believed to be result of harmony with existing universal order; harmony attained by pleasing good spirits and avoiding evil ones. 	 Family uses all means possible before using outside agencies for health care. Fortune tellers determine event that caused disturbance. Use astrologer to calculate cyclical changes and forces. Regard health as family responsibility; outside aid sought when resources run out. Certain illnesses considered only temporary (such as pustules, open wounds). Seek generalists' health healers. May use special diets to prevent illness and promote health. Lactose intolerance prevalent. 	 Family is revered institution. Multigenerational families. Family is chief social network. Children highly valued. Individual needs and interests are subordinate to those of family group. Father is main decision maker. Women taught submission to men. Parents expect respect and obedience from children. 	 Many immigrants are not proficient in speaking and understanding English. May hesitate to ask questions. Questioning authority is sign of disrespect; asking questions considered impolite. Use indirectness rather than forthrightness in expressing disagreement. May avoid eye contact with health professionals as a sign of respect. Consider status more important than money. Children taught emotional control. Time concept more relaxed – consider punctuality less significant than other values (e.g. propriety). Place high value on social harmony.

Filipinos	 Believe God's will and supernatural forces govern universe. Illness, accidents, and other misfortunes are God's punishment for violations of His will. Widely accept "hot" and "cold" balance and imbalance as cause of health and illness. 	 Some use amulets as shield from witchcraft or as good luck pieces. Catholics substitute religious medals and other items. 	 Family is highly valued, with strong family ties. Multigenerational family structure common, often with collateral members as well. Personal interests are subordinated to family interests and needs. Members avoid any behavior that would bring shame on the family. 	Immigrants and older persons may not be able to speak or understand English.	Tend to have a fatalist outlook on life. Believe time and providence will solve all.
American Blacks	 Illness classified at: Natural – affected by forces of nature without adequate protection (e.g. cold air, pollution, food and water). Unnatural – evil influences (e.g. witchcraft, voodoo-hoodoo, hex, fix, rootwork); symptoms often associated with eating. Believe serious illness sent by God as punishment (e.g. parents punished by illness or death of child). Believe serious illness can be avoided. May resist health care because illness is "will of God". 	 Self-care and folk medicine very prevalent. Folk therapies usually religious in origin. Attempt home remedies first; poorer people do not seek help until illness serious. Usually seek help from: "Old Lady" – woman in community with a common knowledge of herbs consulted regarding pediatric care. Spiritualists – has received gift from God for healing incurable diseases or solving personal problems; strongly based in Christianity. 	 Strong kingship bonds in extended family; members come to aid of others in crisis. Less likely to view illness s a burden. Augmented families common (unrelated persons living in same household). Place strong emphasis on work and ambition. Sex-role sharing among parents. Elderly members respected. 	 Alert to any evidence of discrimination. Place importance on nonverbal behavior. Many use nonstandard English or "Black English". Use "testing" behaviors to assess personnel in healthcare situations before seeking active care. Best to use simple, direct, but caring approach. 	 High level of caution and distrust of majority group. Social anxiety related to tradition of humiliation, oppression, and loss of dignity. Will elect to retain dignity rather than seek care of values are compromised. Strong sense of peoplehood. High incidence of poverty. Black minister a strong influence in black community. Visits by family minister are sought, expected and valued in helping to cope with illness and suffering.

Haitians	 Illness has supernatural or natural origin. Supernatural illnesses are caused by angry voodoo spirits, enemies, or the dead, especially deceased ancestors. Natural illnesses are based on conceptions of natural causation; irregularities of blood volume, flow, purity, viscosity, color and/or temperature (hot/cold). Gas (gez). Movement and consistency of mother's milk. Hot/cold imbalance in the body. Bone displacement. Movement of diseases. Health is maintained by good dietary and hygienic habits. 	 Priest (Voodoo Priest/priestess) – most powerful healer. Root Doctor – meets need for herbs, oil, candles, and ointments. Prayer is common means for prevention and treatment. Health is a personal responsibility. Food has properties of "hot/cold" and "light/heavy" and must be in harmony with one's life cycle and bodily status. Natural illnesses are treated by home remedies first. Supernatural illness treated by healers, voodoo priest (houngan) or priestess (mambo), mid-wife (fam saj), and herbalist or leaf doctor (dokte fey). Amulets and prayer used to protect against illness due to curses or willed by evil people. 	 Maintenance of family reputation is paramount. Lineal authority supreme; children in subordinate position in family hierarchy. Children valued for parental social security in old age and expected to contribute to family welfare at an early age. Children viewed as "gifts from God" and treated with indulgence and affection. 	 Recent immigrants and older persons may speak only Haitian Creole. May prefer family/friends to act as translators and confidants. Often smile and nod in agreement when do not understand. Quiet and gentle communication style and lack of assertiveness lead health care providers to falsely believe they comprehend health teaching and are compliant. Will not ask questions if health care provider is busy or rushed. 	Will use biomedical and ethnomedical (folk) systems simultaneously. Resistant to dietary and work restrictions. Adherence to prescribed treatments directly related to perceived severity of illness.
Hispanic Americans Mexican Americans Latinos,	 Health beliefs as strong religious association. Believe in body imbalance as a cause of illness, especially imbalance 	 Seek help from curandero or curandera, especially in rural areas. Curandero(a) receives his/her position by birth, 	Traditionally men considered breadwinners and key decision makers in matters outside the	 May use nonstandard English. Most bilingual, many only speak Spanish. May have a strong 	 High degree of modesty – often a deterrent to seeking medical care and open discussion of sex. Youngsters often reluctant to share communal showers in school.

Chicanos Raza-Latinos	between caliente (hot) and frio (cold) or "wet" and "dry". Some maintain good health is a result of "good luck" – a reward for good behavior. Illness prevented by performing properly, eating proper foods, and working proper amount of time; accomplished through prayer, wearing religious medals or amulets, and sleeping with relics at home. Illness is a punishment from God for wrongdoing, forces of nature and the supernatural.	 apprenticeship, or "calling" via a dream or vision. Treatments involve use to herbs, rituals, and religious artifacts. Practice for severe illness-make promises, visit shrines: offer medals and candles, offer prayers. Adhere to "hot" and "cold" food prescriptions and prohibitions for prevention and treatment of illness. 	home; women considered homemakers. Males considered big and strong (macho). Strong kinship; extended families include compardres (godparents) established by ritual kinship. Children valued highly and desired, taken everywhere with family. Many homes contain shrines with status and pictures of saints. Elderly treated with respect.	preference for native language and revert to it in time of stress. May shack hands of engage in introductory embrace. Interpret prolonged eye contact as disrespectful.	 Relaxed concept of time – may be late for appointments. More concerned with present than with future and therefore may focus on immediate solutions rather than long-term goals. Magicoreligous practice common. May view hospital as place to go to die.
Puerto Ricans	 Subscribed to the "hot-cold" theory of causation of illness. Believe some illness caused by evil spirits and forces. 	 Infrequent use of health care systems. Seek folk healers-use of herbs, rituals. Consults spiritualist medium for mental disorders. Santeria is system and practitioners are called santeros. Treatments classified as "hot" or "cold". 	 Family usually large and home centered – the core of existence. Father has complete authority in family – family provider and decision maker. Wife and children subordinate to father. Children valued – seen as a gift from God. Children taught to obey and respect parents; corporal punishment to ensure obedience. 	 May use nonstandard English Spanish speaking or bilingual. Strong sense of family privacy – may view questions regarding family as impudent. 	 Relaxed sense of time. Pay little attention to exact time of day. Suspicious and fearful of hospital.
Cuban Americans	Prevention and good nutrition are related to good health.	Diligent users of the medical model, in part because of aggressive	Strong family ties with mother and father kinships.	Most are bilingual (English/Spanish) except for segments of the	In less than 30 years Cubans have been able to obtain a high standard of living then other Hispanic groups in US.

		public health practices on the island before and after the revolution. • Eclectic health-seeking practices, including preventive measures, extensive use of the medical model, and, in some instances folk medicine of both religious and nonreligious origins; home remedies; in many instances seek assistance of santeros (Afro-Cuban healers) and spiritualists to complement medical treatment. • Nutrition is important; parents show over concern with eating habits of their children and spend a considerable part of the budget on food; traditional Cuban diet is rich in meat and starch; consumption of fresh vegetables added in the	 Children supported and assisted by parents long after becoming adults. Elderly cared for at home. 	senior population.	 Have been able to retain many of their former social institutions: bilingual and private schools, clinics, social clubs, the family as an extended network of support, etc. Many do not feel discriminated against nor harbor feelings of inferiority with respect to Anglo-Americans or "main-stream" population.
Native American (Numerous Tribes)	 Believe health is a state of harmony with nature and universe Respect of bodies through proper management. All disorders believed to have aspects of supernatural. Violation of a restriction or prohibition thought to cause illness. Fear of witchcraft. Many carry objects believed to guard against 	Medicine persons:	Extended family structure – usually includes relatives from both sides of family. Elder members assume leadership roles.	 Most continue to speak their Indian language, as well as English. Nonverbal communication. 	 Time orientation present. Respect for age. Going to hospital associated with illness or disease; therefore may not seek prenatal care, since pregnancy viewed as natural process. Tend to take time to form an opinion of professional.

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KEY POINTS

- A culture is composed of individuals with a set of values, beliefs, practices and information that is learned, integrative, social and satisfying.
- Nurses have a responsibility to understand the influence of culture, race and ethnicity on the development of social and emotional relationships, childrearing practices and attitudes toward health.
- Socialization is the process by which children acquire the beliefs, values and behaviors considered desirable or appropriate by the culture.
- A child's self-concept evolves from ideas about his or her social roles.
- Guilt and shame are two behaviors commonly conditioned in children to control social behavior.
- Important sub-cultural influence on children include ethnicity, social class, poverty, affluence, occupation, religion, schools, peers and bi-culture.
- Membership in a minority group presents special challenges for children, although changes in societal attitudes are slowly taking place.
- Cultural shock refers to a person's feeling of helplessness and disorientation while trying to adapt to a different cultural group and its practices, values and beliefs.
- A child's physical characteristics and susceptibility to health problems are strongly related to ethnic and cultural variations of hereditary and socioeconomic forces.
- Cultural beliefs related to the course of illness and maintenance of health may focus on natural forces, supernatural forces or imbalance of forces.
- In planning and implementing patient care, nurses need to strive to adapt ethnic practices to the family's health needs rather than attempt to change long-standing beliefs.
- No cultural group is homogeneous, and every racial and ethnic group contains great diversity.