Layers of Diversity: Part I

A Knowledge to Practice Program
Learning Objectives

By the end of this tutorial, you will:

• Understand the first two layers of diversity

• Have the skills to promote health behavior change while remaining sensitive to cultural differences
Outline

Throughout this tutorial, you will cover the following topics:

• The first two layers of the Four Layers of Diversity Model
• How diversity and culture affect breastfeeding
• Methods of promoting health behavior change while remaining sensitive to cultural differences
So what is diversity?

Diversity is more than just differences in gender, class, race, and religion. It encompasses all potential differences in how we interpret and behave.

Key phrase...

“all potential differences”
And what is culture?

“Culture can be thought of as having multiple dimensions that reflect ‘worldview,’ how people see the world: their shared attitudes, beliefs, categorizations, expectations, norms, roles, self-definitions, and values.”

Key phrase...

“how people see the world”
We are going to learn more about diversity and culture by examining different “layers.”
There are four layers of diversity:

- Organizational Dimension
- External Dimension
- Internal Dimension
- Personality
This is a more detailed version of the model.

Let’s start by looking at the personality layer.
Personality

- Includes an individual’s likes and dislikes, values, and beliefs

- Is shaped early in life and is both influenced by, and influences, the other three layers throughout one’s lifetime
Let’s take a closer look at values and beliefs and how they affect health behavior, such as breastfeeding.
Values

- Refer to the ideologies that specific individuals and communities feel are most important

Beliefs

- Are convictions that are held as true by an individual or group, and these convictions often influence the actions of the person that holds them
Think about how the following values might affect one’s beliefs regarding breastfeeding.
If someone has the following values...

- Health (doing what is healthiest)
- Money (doing what is most cost-efficient)
- Time (following a schedule)
- Family (following your family’s advice)
Then they might have the following beliefs regarding breastfeeding:

**Health (doing what is healthiest)**

- Breastfeeding reduces my chances of ovarian cancer, so I’ll breastfeed.
- I am worried that my baby isn’t getting enough breast-milk, so I’ll switch to formula.

**Money (doing what is most cost-efficient)**

- Breastfeeding is free, so I’ll do it!
- I can get free formula from WIC, so I’ll just use formula.

**Time (following a schedule)**

- I can breastfeed whenever I want and don’t have to worry about preparing a bottle, so I’ll just breastfeed.
- I have to return to work in a few weeks and won’t have time to pump, so I’ll just use formula.

**Family (following your family’s advice)**

- My mom breastfed, so I want to breastfeed also.
- My husband thinks breastfeeding is gross, so I’ll use formula.
What values and beliefs do you see playing a role in the following video?
https://www.youtube.com/watch?v=06kpOC5v2x8
<table>
<thead>
<tr>
<th>Values</th>
<th>Health</th>
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<tr>
<td></td>
<td>Careers</td>
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<td></td>
<td>Pride</td>
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<tr>
<td></td>
<td>Family/Friend Support</td>
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</tbody>
</table>
Beliefs

“We would have lost our jobs, quite frankly, immediately if we had said, you know, I need to make arrangements so that I can pump.”

“Originally my plan was to get to that one-year mark because that is where all the doctors say... and I always thought if I could get to that year, I would feel like a champion.”

“It’s hard for me to think of a friend of mine who did not breastfeed their child... the one thing that did surprise me was the level of pride I felt in it.”

“I was shocked when I saw how chubby she was getting and how much weight she was putting on because of breastfeeding.” (talking about the child)
Here are some other women’s beliefs about breastfeeding.
https://www.youtube.com/watch?v=axUEYbf_K8k
Now, let’s move on to the internal dimension.
The Internal Dimension

- Includes aspects of diversity over which we have no control (age, gender, race, ethnicity, physical ability, sexual orientation, etc.)

- Creates many divisions between and among people

- Forms the core of many diversity efforts
How do aspects of the internal dimension affect one’s decision to breastfeed?
According to the Centers for Disease Control and Prevention...

As maternal age goes up, breastfeeding rates increase.

As maternal age goes down, breastfeeding rates decrease.
Similarly, a study that looked at factors associated with breastfeeding initiation in adolescent mothers found that of mothers aged 19-years-old and younger, 44% initiated breastfeeding compared to 65% of older mothers.
Race and ethnicity also play a huge role in one’s likelihood to breastfeed.
These percentages are from the National Immunization Survey that looked at children born in 2007.

<table>
<thead>
<tr>
<th></th>
<th>Ever Breastfed</th>
<th>Breastfed at 6 Months</th>
<th>Breastfed at 12 Months</th>
</tr>
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<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>73.8</td>
<td>42.4</td>
<td>20.7</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>83.0</td>
<td>56.4</td>
<td>32.8</td>
</tr>
<tr>
<td>Black or African American</td>
<td>59.7</td>
<td>27.9</td>
<td>12.9</td>
</tr>
<tr>
<td>White</td>
<td>77.7</td>
<td>45.1</td>
<td>23.6</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>80.6</td>
<td>46.0</td>
<td>24.7</td>
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</table>
As you can see, black mothers were the least likely to breastfeed their children.

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So differences in personality and the aspects of the internal dimension clearly affect health behavior. But how can you use this knowledge when promoting health behavior change?
Here are a few methods to use when trying to influence health behavior change but still remain sensitive to cultural differences:

1. Validating
   - Listen to your patient or client and help them vent emotion. This will make them feel understood and valued. This is particularly important when culturally-based health beliefs differ between you and your patient.
2. Normalizing

- After you make your patient feel understood and valued, you should normalize their experience. Normalizing – after validating – helps lessen pressures for the individual to conform to any biologically incompatible cultural norms of the health behavior.
3. Respecting cultural distress

- For individuals who are very distressed by the challenges that a health behavior poses to their cultural beliefs, small changes may be more comfortable than large ones. Smaller suggestions respect cultural beliefs and distress of the mother while still yielding an improved health behavior.

- Ask your doctor or nurse for more information about breastfeeding.
- Try breastfeeding your child within an hour of giving birth.
- Use a breast pump so you can continue breastfeeding when you return to work.
4. Addressing overriding beliefs

- Understanding your patients’ beliefs and values is so important. By focusing your message for change on the most prominent belief, you are more likely to have an impact than if you focus on a less important belief.

I want to do what is healthiest for my baby.
I want to follow my mother’s advice.
I want to do what is considered normal.
5. Creating community

- Some people’s worldview might not match that of the dominant society’s worldview. The reassurance and information that you provide them can help them feel secure in their decisions. Being a role model and providing others with a sense of belonging is important when creating a community of support.
6. Accommodating coping style

Culture can affect coping style – the way in which people deal with the challenges in their lives. Be aware of their coping styles and adjust your efforts to match their needs.

- Individualistic
- Collectivistic
7. Letting go

- It can be helpful to remember that your responsibility is to provide information and support. It is not up to you to change the beliefs or values of everyone. In some situations, your patients’ cultural beliefs might be dramatically different than your own. Recognize when this happens and respect their decisions regardless.
Conclusion

• The personality is made up of values and beliefs
• The internal dimension is made up of aspects about ourselves that we cannot control, such as age and race
• Both of these layers affect the way we make decisions about our health behavior
• Being sensitive to cultural differences is important when trying to promote health behavior change
References


