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Cultural Competence Module 14
Diet and Food

Rosanna Balistreri, B.A., M.A.
Cultural & Linguistic Subject Matter Expert & Consultant
REACH - reaching diversity
www.reach-diversity.com
Rosanna@reach-diversity.com

Rosanna Balistreri is a trilingual speaker of Spanish, Italian & English. She has dedicated her professional and academic background to foreign languages and applied linguistics and holds a B.A. in Applied Linguistics with a Certificate of Teaching English as a Second Language (TESL), an M.A. in Spanish Linguistics, and has undergone extensive training in Healthcare Interpreting, Cultural Diversity, and Leadership Skills.
Ms. Balistreri has served as President of the California Healthcare Interpreting Association (CHIA) for 2010 and 2011, and currently serves in several Advisory Boards as Cross-Cultural Communication & Language Access Expert. In 2007 she founded REACH - reaching diversity to provide Cultural & Linguistic Consulting Services and Solutions to the Health Care and Hospital sectors to enhance quality of care, increase patient safety and maximize customer satisfaction.

Module 14: Diet and Foods

Module Estimated Time: 40-45 minutes

Statement of Purpose:

The purpose of this module is to prepare nursing and allied health students and professionals to become more effective promoters of Healthy Nutrition to patients from diverse cultural backgrounds. By addressing and understanding the cultural values that surround access to food, eating habits and food choices, participants will become better equipped to more effectively communicate health strategies to maintain a healthier diet.

Objectives:

Upon the completion of this module, the learner will:

1. Be able to practice self-assessment and discover individual food bias
2. Learn specific steps to cultural competence that incorporate cultural values around nutrition & food choices
3. Elicit information from culturally diverse clients that will help determine relevant suggestions for them

Terminology

Food bias
Cultural Awareness
Healthcare Culture
Acculturation
Assimilation
Calories
Good fats
Bad fats
Carbohydrates
Recommended Daily Values
Basic Food Categories
Food pyramid
Food plate
Super foods
Glycemic Index
Saturated and Trans Fats
Polyunsaturated fats
Malnutrition
Proteins
Nutrition Goals
Cooking Methods
Food Identity

1. **Diversity and Nutrition (Introductory Lecture)**
   Discuss the difference of Foods and Diet Patterns and how bias affects how we promote healthy nutrition

Time: 2 minutes

Materials: None

Developing cultural awareness by admitting personal biases, stereotypes and prejudices is the first step in the journey toward a more culturally sensitive healthcare system. It starts with the willingness to extend oneself psychologically and physically to the client in order to understand nuances that exist outside of our comfort level.

The journey to cultural competence continues with acquiring knowledge, that is, inquiring and learning about the different ways and views that people may have around the world. Finally, once one acknowledges that there are multiple worldviews and learns what some of these entail, it is possible to develop cross-cultural skills and apply all this knowledge to assess how to best cater to the individual needs of patients in a relevant and most effective way.

Eating is universal, but the foods we choose to eat are not. People all over the world tend to regard their own diet as sensible and the diets of other cultures as bizarre or strange. Amazingly, many common foods of the American diet, from hamburgers to corn dogs, are disliked by non-Westerners. Once people understand their own cultural foods are not widely accepted by other cultures, it's easier to view other cultural food choices with less suspicion.

2. Likes, Dislikes and Food Taboos (Food Self-Assessment)

Time: 10 minutes

Materials: Laptop/Computer
LCD Projector/Screen
PowerPoint of Module 14

Preparation: Before class, prepare laptop, screen and LCD projector. Have remote control at hand to advance PowerPoint Slides.

Slide 1 – 15

Show Slides 1- 15 and ask people to note if the slide shows a type of food that they like or dislike.

At the end of slide 15, ask students to review major dislikes and likes and encourage students to share their personal views.

Slide 16

End the activity by asking these three open-ended question to your whole class and elicit information from 3 volunteers to share with the whole class.

- What are your food taboos?
- Have you ever had a strange or different food placed before you to eat?
- How did you feel about trying the food?

3. Healthy Nutrition Starts with Us! (Lecture/Activity)

Students will have an opportunity to assess their own nutrition patterns and understand what eating habits they may have to change in order to model an example of Healthy Nutrition

Time: 10 minutes
Materials: Handout for Module 14

Introduce the activity by using these lecture points:

- How and why we eat can be driven by several factors: to meet physical needs; to satisfy hunger; to satisfy the senses; to meet psychological needs; or to meet social needs.
- However, in addition to these reasons why we may choose to eat at any time of the day, we are also conditioned on our food choices by external factors. Some of these are the result of marketing, advertisement and mass media pressure; others are linked to an ever-faster lifestyle and the need of prompt solutions.
- Whatever the reason *why we eat what we eat* may be, promoting healthy habits of nutrition starts with each of us. If we have a thorough understanding of what healthy eating is, we will be much more effective at promoting healthy food choices within our community.

Activity Part 1 – Instruct students to complete the Nutrition Self-Assessment questionnaire. Once you have completed your assessment, you might want to sum your score to understand if your eating habits may need a change. Answers on the right column are worth 1 point each; the central column 2 points each; and the left column 3 points each.

Activity Part 2 – Conduct a whole-class discussion by eliciting results from students and encouraging them to share healthy habits or non-healthy habits identified as a result of this activity, and discuss how the students may develop healthier habits.

5. **Food, Identity & Daily Values (Lecture & Video)**
   Discuss how food habits are a big part of culturally learned behaviors and differ across cultures.

Time: 15 minutes

Materials: Internet Connection
Computer/Laptop
Screen
Speakers for audio

Part 1 – Start with Lecture points below:

Slide 17

Food is about more than feeding the body. It is embedded in family life, culture and religious rituals

Slide 18

Food has always been the most direct or intimate tie to a nurturing earth and a primary means of bonding with each other.

Slide 19

Food has helped us to know where and who we are. Some cultural groups have many rituals around certain type of foods and how or when to eat them. Take Thanksgiving, for example, and the types of food selected based on how people celebrate this holiday in the U.S.

Slide 20

Some groups kneel, or sit in a circle. In Ethiopia, for example, it is very common to eat from the same dish in the center of the table with a group of people. Others eat with their hands to convey respect or to welcome a person in the family such as in Bangladesh, India, Nepal and Pakistan. They feel more comfortable eating with their hands. It is the way they feel satisfied eating food. Some cultural groups need to follow rituals like hand-washing or praying prior to eating based on religious beliefs.

Slide 21

What we choose to eat, where we choose to eat and how we choose to eat is often determined by our own cultural preference. With whom we share our meals reveals more about us than almost anything else. From cherished memories of Sunday family dinners to longings for our grandmother's special dish, food is at the center of our lives. It symbolizes life, joy, hope, love and home. Food is how we define ourselves as members of a particular culture or community. There's great power in the kitchen — to celebrate, to unite, to nurture and to heal.

Part 2: Show Video

Use the Internet Access to Play Video using this link http://vimeo.com/12054736

6. Final Thoughts on Eliciting Information from Culturally Diverse Clients (Closing Lecture)

Time: 3 minutes

Materials: Easel, Flip Chart and Marker

Close this lesson with these points and write key words on Flip Chart:

- It is important to recognize and understand the dominant American cultural paradigm, which is derived largely from an Anglo-American heritage that has shaped our laws and administrative organization. The "culture" of healthcare in the US reflects Anglo-American values, hence, many times the efforts around health promotion and education are futile because they are based on a paradigm that is irrelevant to our clients because it does not align with their dietary customs, values and beliefs.

- However, no matter what race, color or national origin, the basic food categories and the notion of a nutritious diet across cultures are the same. Adequacy, Balance, Calorie Control, Moderation, Nutrient Density, and Variety apply across all cultures.

- By applying these basics notions and advising a balanced diet with all the basic foods that are part of a cultural dietary preference is the key to promoting healthy nutrition in a culturally competent way. The effort requires that we learn about the food choices and dietary preferences of the cultural groups to which our patients belong. For example, Traditional Ethiopian cuisine utilizes no pork or shellfish of any kind as it is forbidden in the Islamic, Jewish and Ethiopian Orthodox Christian faiths. Having knowledge of this preference will therefore help to avoid including these forbidden foods in a healthy nutrition plan.

- In the end, elicit information by assessing and not assuming; be aware of your own bias and knowledge; verify generalizations; do not stereotype; negotiate.

- Identify potential nutritional problems that may be linked to:

  –Lack of budgetary, environmental and personal resources
  –Diet Trends
  –Personal preferences, cultural or religious dietary practices
  –Anorexia, diminished appetite
  –Difficulty eating/swallowing/altered texture diets
  –Tube feedings
  –Medications
  –Fluid intake
  –Appropriate use of supplements

Nutrition Assessment

Instructions

To learn more about your current eating habits, we invite you to complete the Nutrition Self-Assessment questionnaire. Once you have completed your assessment, you might want to add your score to understand if your eating habits may need a change. Answers on the right column are worth 1 point each; the center column 2 points each; and the left column 3 points each.

Assessment

Meat and Alternatives

1.	How often do you eat hot dogs, sausages, salami, bologna?			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ 1-3 times per week	<INPUT NAME=\ 4 times or more per week
2.	How often do you eat red meat: beef, pork, ham, lamb?			
		<INPUT NAME=\ 3 times or less per week	<INPUT NAME=\ 4-5 times per week	<INPUT NAME=\ 6 times or more per week
3.	How often do you trim the fat from red meat?			
		<INPUT NAME=\ Usually or always	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Rarely or never
4.	How often do you eat turkey, chicken, fish (excluding deep fried)?			
		<INPUT NAME=\ 3 times or more per week	<INPUT NAME=\ 2 times or less per week	<INPUT NAME=\ Rarely or never
5.	How often do you remove the skin from chicken/turkey before eating it?			
		<INPUT NAME=\ Usually or always	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Rarely or never
6.	What is your typical serving size of meat?			
		<INPUT NAME=\ 4 oz. or less	<INPUT NAME=\ 5-7 oz.	<INPUT NAME=\ 8 oz. or more
7.	How often do you eat eggs?			
		<INPUT NAME=\ 3 or less per week	<INPUT NAME=\ 4-6 per week	<INPUT NAME=\ 7 or more per week
8.	How often do you eat dried peas, beans, and/or lentils in chili, soup, baked beans, etc?			
		<INPUT NAME=\ At least once per week	<INPUT NAME=\ Every other week	<INPUT NAME=\ Rarely or never

Milk Products

9.	What type of milk do you drink?			
		<INPUT NAME=\ 1% or skim	<INPUT NAME=\ 2%	<INPUT NAME=\ Homogenized (whole)
10	How often do you eat cheese (excluding cottage, skim or part skim cheese)?			
		<INPUT NAME=\ 3 times or less per week	<INPUT NAME=\ 4-6 times per week	<INPUT NAME=\ 7 times or more per week

11.	How often do you eat other dairy products, such as ice cream, cream, sour cream, cream cheese?			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ 1-3 times per week	<INPUT NAME=\ 4 times or more per week

Grain Products

12.	How often do you eat breads, cereals, pasta, and/or rice?			
		<INPUT NAME=\ 6 times or more **per day**	<INPUT NAME=\ 5 times or less **per day**	<INPUT NAME=\ Rarely or never
13.	How often do you eat whole grains breads and/or cereals?			
		<INPUT NAME=\ Usually choose	<INPUT NAME=\ Sometimes choose	<INPUT NAME=\ Rarely or never choose

Vegetables and Fruits

14.	How often do you eat vegetables and/or fruits?			
		<INPUT NAME=\ 6 times or more **per day**	<INPUT NAME=\ 5 times or less **per day**	<INPUT NAME=\ Rarely or never

Fats and Oils

15.	How often do you use soft or light margarine?			
		<INPUT NAME=\ Usually or always	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Rarely or never
16.	How often do you use butter or hard margarine?			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Usually or always
17.	How often do you put butter/margarine on cooked vegetables.			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Usually or always
18.	How often do you use low-calorie salad dressing?			
		<INPUT NAME=\ Usually or always	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Rarely or never

Breakfast

19.	How often do you eat breakfast (excluding coffee/tea only)?			
		<INPUT NAME=\ 5 times or more per week	<INPUT NAME=\ 3 - 4 times per week	<INPUT NAME=\ 2 times or less per week
20.	How often do you eat hot or cold cereal, bread, bagels, or fruit for breakfast?			
		<INPUT NAME=\ 5 times or more per week	<INPUT NAME=\ 3 - 4 times per week	<INPUT NAME=\ 2 times or less per week

Snacks and Desserts

21.	How often do you snack on fruit, vegetables, and/or plain popcorn?			
		<INPUT NAME=\ Usually or always	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Rarely or never
22.	How often do you snack on chips, nuts, and/or chocolate?			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Usually or never
23.	How often do you eat fruit for dessert?			
		<INPUT NAME=\ Usually or always	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Rarely or never
24.	How often do you eat foods such as cookies, cake, and/or pie for dessert?			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ Sometimes	<INPUT NAME=\ Usually or always

Fast Foods

25.	How often do you eat fast foods such as hamburgers, fried chicken/fish, hot dogs, tacos, french fries, milkshakes, etc.?			
		<INPUT NAME=\ Rarely or never	<INPUT NAME=\ 1 - 3 times per week	<INPUT NAME=\ 4 times or more per week

Now add all your points and find out your score!

39 or less

There are multiple ways you can modify your eating habits for better health. Changing eating habits **does not** usually happen overnight. If the right column best describes your eating habits, gradually select make more choices from the center column and finally from the left column. Gradual change is more likely to become **permanent** change.

40 – 59

There is still room to change your food choices for better health. Changing eating habits **does not** usually happen overnight. If the middle column best describes your eating habits, gradually make more choices from the left column. Gradual change is more likely to become **permanent** change.

60 – 75

Great job! Keep up your healthy eating habits!