I CARE

INTERCULTURAL CARE
IN THE SOCIAL AND HEALTHCARE SECTOR
(I-CARE)

MODULE 5: GENDER, SEX, BODY, INTIMACY

www.i-care-project.net

BUPNET apricot blinc ENAIP die Berater SOSU Østjylland KMOP

Project Information

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Contents

KEY TO SYMBOLS

	ACTIVITY		**TRAINER'S NOTES**		**SUMMARY**
	TRAINER INPUT		**ACTION PLANI**		

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Introduction

This module explores intercultural communication regarding body, gender, sex and intimacy.

Module Aims and Objectives

The purpose of this module is for learners to explore:

- the different attitudes regarding sex, gender, body and intimacy
- the association between culture and gender
- the different gender roles that women and men are assigned to in different cultures

Learning Outcomes

After studying this module you will be able to:

♦   Understand the difference between sex and gender

♦   Understand different attitudes associated with sex and sexuality

♦   Understand the relationship between culture and gender/bodies

♦   Detect gender roles across cultures

♦   Apply effective tools to overlap the cultural gap when caring for persons from another culture

♦   Engage critically with cultural differences regarding gender and sex

♦   Reflect on our personal cultural identities

Understanding, Skills and Competences developed:

♦   Increased intercultural awareness.

♦   Enhancement of life skills

♦   Better developed social skills when working across cultures

♦   Personal skills in working across cultures.

♦   Increased level of competence in working in multi-cultural environments.

Training method applied/ What you have to do

This module is available as e-learning and also can be delivered face-to-face in a classroom, or with a class via a virtual platform.

It involves

♦ Reading background information on the subject of the module

♦ Completion of exercises and activities either by e-learning or attending a face-face course, or via a virtual platform.

♦ Self-assessments for reflection and checking understanding

Duration: 2 hours

Further Reading

You will also find a range of supporting resource materials available in the **I-CARE Toolbox** and on the **I-CARE App.**

Section 1: Sex and Gender

Trainer Input (slide 3)

Trainer's notes (slides 3, 4, 5, 6)

emphasize the common terms.

Trainer input (slides 8,9,10,11)

- ■ **Sex:** set of biological and physiological features that define masculine and feminine

- ■ **Gender:** socially and culturally constructed identities/roles regarding male and female

- ■ **Gender identity:** how someone perceives themselves regarding gender. Gender identity is not binary or static.

- ■ **Sexual orientation:** to which gender one person is attracted to
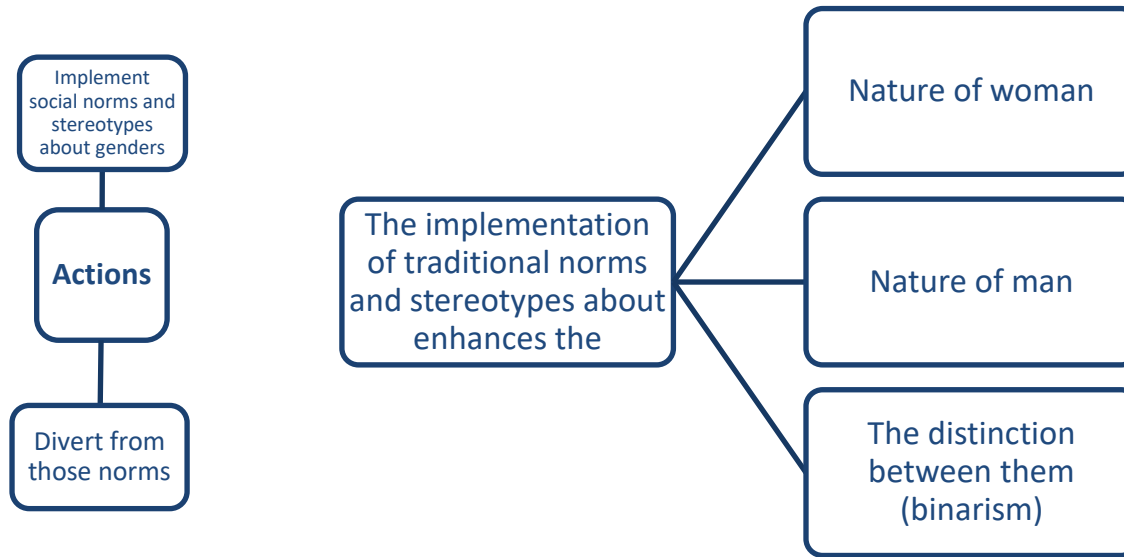
Social constructionism

- ■ Everything we see and know is **partially socially constructed**. Meaning does not exist out of social circumstances and is dependent upon them. Gender theorists draw from this theory to analyse gender issues.

Gender Performativity

- ■ Identity is constructed and reconstructed through repetitive acts. People tend to conform because of social pressure, but there is also the possibility to resist. This is how different gender identities are formed.

Gender *"is a performative accomplishment compelled by social sanction and taboo…. Gender is… an identity **instituted through a repetition of acts**."*- Judith Butler

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Implement social norms and stereotypes about genders

Actions

Divert from those norms

The implementation of traditional norms and stereotypes about enhances the

Nature of woman

Nature of man

The distinction between them (binarism)

Trainer's notes (slide 11)

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Activity – Nursery rhyme (slide 12-13)

What are little boys made of?

Snips and snails,
And puppy dog tails,
That's what little boys are made of.
What are little girls made of?
Sugar and spice,
And everything nice,
That's what little girls are made of

- What message to we get from this rhyme in relation to gender?
- How do we view these perceptions today, in the West?
- Think about how gender roles vary over time and in different parts of the world

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Section 2: Body

Trainer Input (slides 15, 16, 17, 18)

- ➢ Life stages
- ➢ Everyday life of the body
- ➢ Fashion
- ➢ Non-verbal communication
- ➢ Functions of the body
- ➢ Pain
- ➢ Health

Trainer's notes (slide 19)

Divide the learners into small groups and ask them to discuss the questions. Then take feedback on their reflections.

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Activity (slide 19)

Reflect on the situation in your country:

■ Would it be accepted for a teacher in a school or a university to have lots of tattoos?

■ Do people with many piercings face any discrimination in the work environment?

Summary (slide 20)

Section 3: Culture and Gender Roles

 Trainer Input (slides 22, 23, 24, 25)

Normative Heterosexuality: *defines what sexual identity, orientation and behaviour is acceptable inside the borders of a nation and a culture. Deviations from the rules are not only unacceptable but also fought against because they disturb the cultural, national or ethnic ideological construct.*

Each culture determines the gender roles inside its boundaries. These roles are produced through communication because communication influences and shapes our ideologies and mentalities. It also affects the differences regarding gender roles. The differences between gender roles and gender manifestations are expressions of specific values and norms (Neculaesei, 2015).

Different cultures view gender expressions and gender roles differently. The power distribution between genders should not be considered as "normal" in any culture, because it is time and space related. The established power relations are not stable, but rather dynamic. What people from one culture see as restriction, others see it as normality.

- **Masculine societies** gender emotional roles are clear and very different- men are expected to be authoritarian and tough, while women should be gentle and soft

- **Feminine societies** boundaries between genders are more fluid and less clear

 Trainer's notes (slide 26)

Module 5: Body, Gender, Sex & Intimacy   9

Ask learners to reflect on the questions about the kind of culture they live in and give examples of things that make them think this.

Activity (slide 26)

Which kind of culture do you live in?

What are the potentials for a change in power relations between the genders?

Reflect on recent cases and debates that have arisen in your country regarding gender, gender equality and gender roles.

Summary (slide 27)

Section 4: Intimacy

Trainer's input (slide 29)

Individualism verbal, explicit, direct and expressive communication styles place greater emphasis on self-disclosure for enhancing intimacy. Belonging to a greater number of in-groups has potential for risky self-disclosures but may have fewer social consequences

Collectivism indirect, nonverbal, ambiguous, contextual and less expressive communication styles place less emphasis on self-disclosure, tightly knit networks increase the likelihood that inappropriate disclosures will be criticized very negatively

Familiarise the students with the concept of intimacy and the differences that exist across cultures through a short quiz: Ask the learners to choose which answer they think is correct. Reveal the answer on the next slide!! Actually, there is not really a right answer, this is to get learners thinking about their reactions to the questions.

 Activity (slide 30.31)

Imagine you are a young girl in ancient Hindu culture. What kind of kiss would you use?
a. French kiss: an amorous kiss in which the participants' tongues extend to touch each other's lips or tongue
b. Throbbing kiss: when our lower lip moves our lover's lower lip but not the upper.
c. Pressed kiss: when we press our lover's lower lip with much force
d. Touching kiss: when our tongue touches our lover's lip and, closing our eyes, our hands touch our beloved's

Intimacy is different in different cultures (collectivism v. individualism). Individualism cultures enhance intimacy and individuals adopt expressive communication styles. Collectivism cultures prefer indirect, nonverbal, non-expressive communications styles.

Module 5: Body, Gender, Sex & Intimacy   11

Section 5: Intercultural Competence in Healthcare

Trainer input **(**slide 34.35,36,37))

These terms relate to intercultural communication and gender. They are often interconnected.

Common Terms Stereotypes, Discrimination, Tolerance, Equality, Socialization, Minorities

Gender Terms. Sexuality, Feminism, Sexism, Gender, Sex,

Intercultural terms. Multicultural, Racism, Intercultural, Immigrant, Culture

Intercultural competence and gender. It is not necessary to have expert knowledge and understanding of every aspect of gender and sexual identity. It is however important to understand and be open to the diversity and fluidity that exists in this area, to be aware of and reflect upon our own and others cultural norms and be able demonstrate an ethical and tolerant approach.

Intercultural competence in healthcare. Intercultural competence in the healthcare sector is a very important element of care. Intercultural competence regarding gender/body; Ability to engage in effective dialogue and tackle difficult topics; Understand the patient and provide high quality treatment. How to overlap the cultural gap. Have understanding, establish trust. Put aside stabilized beliefs.

to read and then discuss the chosen case study. Using the questions to promote and guide their discussions. Take feedback from each group and move onto a general discussion about the best ways to respond to the situation.

Activity (slides 38, 39, 40, 41)

Case Study 1

Lamar Johnson, a thirty-three-year-old African American patient had been deemed a "frequent flyer" (a term used to describe those who keep coming to the hospital for the same reason, often assumed to be drug seekers) by the nurses and doctors in the emergency department. Each time he came in complaining of extreme headaches he was given pain medication and sent home. On this last admission, he was admitted to the ICU, where Courtney, a nurse, had just begun working. When she heard him described as a frequent flyer, she asked another nurse why he was thought to be a drug seeker. She was told, "He has nothing else better to do; I'm not sure why he thinks we can supply his drug habits."

Case Study Questions

- ■ What are your thoughts after reading this story?

- ■ How would you describe the behavior of the health personnel?

- ■ What would you do if a person like Lamar Johnson appeared at the hospital/facility where you work and had the same symptoms?

Although Courtney says her instincts told her that something else was going on, she saw his tattoos, observed his rough demeanour, and went along with what everyone else was saying. While she was wheeling him to get a CT scan, Mr. Johnson herniated and died. It turned out that he had a rare form of meningitis and truly was suffering from severe headaches. If some of the staff had not stereotyped him as a drug seeker on one of his earlier visits, perhaps his life could have been saved. This incident left a lasting impression on Courtney, who vowed not ever to judge a patient on his looks, and to trust her instincts, rather than let others influence her nursing care.

- ■ Would you do anything differently now that you have read the ending of this story?

- ■ Do you believe that his tattoos affected the behavior of the health personnel?

Case Study 2

Amiya Nidhi was a young woman in her twenties who had recently immigrated to the United States from India. She was in the hospital to give birth. Her

support person was her sister, Marala. Marala kept telling her to get an epidural, but Amiya said that even though she would like one, she could not get one; her husband would not allow it.

Case Study Questions

- ■ What do you think about the relationship between Amiya and her husband?

- ■ How do you feel about Amiya?

- ■ How would you manage this situation as a health care provider?

What Amiya's nurse actually did:

 Summary (slide 42)

 General Summary (slide 43)

Gender identities are formed through repetitive acts that tend to conform to social pressure. Body is the vessel through which identities, cultural or individual, are expressed. Perceptions of the body differ across cultures and over time. Each culture determines its own the gender roles. The power

distribution between genders is also dependent on time and culture. Differences regarding intimacy are connected with the notions of individualism and collectivism. Intercultural competence in the healthcare sector requires and understanding of and respect for the diversity of sexual and gender norms.

Finish the session off by asking each learner to reflect upon their learning by giving 3 examples of a past situation in which they would have benefited from increased understanding and cultural competence with regards to gender and the body. Then ask them to identify 3 things they are going to do in the future as a result of their learning. These can be things like finding out more or changes to their behaviour.

Reflection and Action Plan (slide 44)

Consider 3 examples from the past when you would have benefited from increased understanding and cultural competence with regards to gender/body:

1.

2.

3.

What will you do differently now, as a result of your learning?