Culturally Diverse Beliefs Concerning Dying, Death, and Bereavement: A School Psychologist's Intervention Challenge.

School psychologists need to employ a multicultural perspective in the areas of death, dying, and bereavement. To develop multicultural sensitivity and competency requires setting aside one's personal beliefs in an attempt to adopt another's perspective. Consequently, school psychologists first need to explore their own attitudes about death and grief as well as the basic assumptions that prevail in their local culture and subculture. Ross' (1994) eight factors to consider in providing services to multicultural students, parents, and communities are discussed. They are: (1) communication; (2) values; (3) concept of the family; (4) religious beliefs; (5) attitudes toward the body; (6) attitudes toward death; (7) bereavement, grief, and mourning practices; and (8) funereal practices. In reviewing dying, death, and bereavement practices throughout many cultures, some commonalties can be found. The community provides group support, while funeral rites provide a sense of closure. Professionalism of "death and dying" is found more in urban rather than rural areas. Fatalism regarding life and death can be found among the poor, and immortality beliefs among the oppressed. Children in rural areas directly observe and participate in death and grief rituals while urban children are more sheltered.

Appendices are: (1) Death Awareness Questionnaire; (2) Grief Awareness Questionnaire; and (3) Multicultural Awareness Questionnaire. Contains 33 references. (JBJ)
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Culturally Diverse Beliefs Concerning Dying, Death, and Bereavement:
A School Psychologist's Intervention Challenge

by

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INTRODUCTION

Culture is akin to being the observer through the one-way mirror; everything we see is from our own perspective. It is only when we join the observed on the other side that it is possible to see ourselves and others clearly—but getting to the other side of the glass represents many challenges. (Lynch, 1992, p. 35)

Death is a universal human experience, yet the response it elicits is shaped by the attitudes and beliefs present in a particular culture (DeSpelder & Strickland, 1995, p. 1).

Cultural diversity is the topic du jour. In our American schools today, children come from different cultures and backgrounds. Traditionally, in the United States, a cultural homogenization “melting pot” conception was widely accepted for newcomers to the American society. People from other lands were expected to give up their cultures and become “American.” Today, however, America, a multicultural society, is conceptualized as a “tossed salad” where each ethnic group maintains its own identity while adding a new ingredient to the whole (Boutte & McCormick, 1995). No longer do our students and parents represent only “Eurocentric values,” but today many also subscribe to “the values of cultures descended from the Third World” (Manoles, 1994, p. 46). It is in this pluralistic micro-world of the larger “unity in diversity” world that school psychologists provide their services (Axelson, 1993).

Consequently, school psychologists need to be aware of and decide which of the following three paradigms of multicultural counseling they will embrace to deliver their prevention, intervention, and postvention services:

1. The culture-specific or emic model where school psychologists are taught about a particular nationality, ethnicity, or cultural group in terms of its special perspective (Pedersen, 1988). Differences are emphasized.

2. The universal or etic design where school psychologists need to base their assumptions on unifying themes that bind people of different cultures together (Patterson, 1986). Similarities are stressed.

3. The genetic pattern which combines the culture-specific and universalistic perspectives. School psychologists need to be cognizant of “the complex diversity of a plural society while, at the same time, suggesting bridges of shared concern that bind culturally different persons to one another” (Pedersen, 1991, p. 7). Both differences and similarities are considered, and this model is a more comprehensive paradigm than the other two. This approach would attend to both the common and culture-specific concerns of intervening with multicultural groups and individuals in the areas of dying, death, and bereavement.

In addition to the three approaches, school psychologists need to determine if they will employ the cultural compatibility hypothesis or the universalistic argument in providing therapeutic services to multicultural individuals. According to Paniagua (1994), “The cultural compatibility hypothesis suggests that the assessment and treatment of multicultural groups are enhanced if racial and ethnic barriers between the client and the therapist are minimized... For example, this hypothesis suggests that the assessment and treatment of an African American client is enhanced if the therapist is also African American” (p. 6).
In the second method, the universalistic argument, "effective assessment and treatment are the same across all multicultural groups independently of the issue of client-therapist racial/ethnic differences or similarities. This hypothesis probably explains the current emphasis on the training of Anglo American therapists in the assessment and treatment of the major multicultural groups" (Paniagua, 1994, p. 7). What is important in this second approach is the cultural sensitivity and cultural competence displayed by the clinician.

Regardless which one of the three paradigms and which one of the two hypotheses are chosen, monolingual school psychologists and others need to employ a multicultural perspective in their service deliveries in the areas of dying, death, and bereavement. Since understanding cultural multiethnicity is a challenge for school psychologists, the purposes of this March 14, 1996, workshop are (1) to introspect and to become aware of one’s own personal beliefs, thoughts, feelings, and biases about death, grief, and multiculturalism; and (2) to understand the factors relevant to providing grief intervention to children, adolescents, parents, and communities of different cultures in the United States, a polyethnic society. Those purposes can assist school psychologists to explore the way they grieve as well as the way bilingual students, parents, and communities mourn a death through an accident, disaster, homicide, suicide, acute natural cause, or chronic and/or terminal illness.

INTROSPECTING ABOUT ONE’S OWN BELIEFS ABOUT DEATH, GRIEF, AND MULTICULTURALISM

School psychologists need to develop multicultural sensitivity and competency. To do so requires that they set aside their own beliefs in an attempt to adopt another’s perspective. Encounters with culturally different individuals may be uncomfortable for some school psychologists who find it difficult to change their thoughts, feelings, and behaviors. Flanagan and Miranda (1995) address the conflicts within school psychologists and others:

For most people, including Americans, the distinguishing mark of cross-cultural interaction is the disappearance of the familiar guideposts that allow them to act without thinking in their own culture. Routine matters become problems that require planning or conscious decisions. They may not know when to shake hands, nod their heads, ask a question, express an opinion, or maintain silence. They may have to question the effectiveness of their techniques for giving advice and may need to search for proper channels of communication (p. 1054).

Consequently, not only do school psychologists need to understand the way members of other cultures view death and grief, they also need to explore their own attitudes about death and grief as well as the basic assumptions that prevail in their local culture and subculture. In other words, knowledge of self is the first step to understanding others, and self-knowledge is a prerequisite to effective interpersonal intervention. The psychologists’ introspection can be stimulated by responding to five culture types as well as to five questions originally shared at a 1995 Loss and Transition workshop by Lorraine Holden, a social worker. The types are “the Stoic, the Expressive, the Pious, the Helper, and the Partier.” They are just a starting point as there may be more kinds. However, the five provide an opportunity for reflection about one’s cultural beliefs. The queries include:
(1) "How does your family and culture act when someone dies?"
(2) "What would be considered inappropriate behavior or responses for your family and cultural type?"
(3) "Are there any movie, books, or TV characters that exemplify your type?"
(4) "What strengths and weaknesses do your family and culture bring to the mourning process?"
(5) "What should people never say or do to you if they are going to respect your culture in the mourning process?"

Besides introspecting about one's cultural type, school psychologists need to examine their attitudes toward death, grief, and cultural diversity. This second self-reflection exercise will help them gain personal insight into themselves, recognize the limitations of their belief systems in their work, and guide them in providing more effective services to multicultural individuals. Irish, Lundquist, and Nelsen (1993) identify three kinds of awareness needed for "professionals in the field of death and dying who must be sensitive to the needs of people with cultural patterns that are different from theirs: (1) Death Awareness; (2) Grief Awareness; and (3) Multi-Cultural Awareness" (pp. 30 & 227). A few questions from each category were selected and somewhat modified, and others were constructed by this school psychologist. Because of a time limitation, only a few queries will be presented as an experiential exercise to school psychologists at the workshop:

Death Awareness (See Appendix A)
Grief Awareness (See Appendix B)
Cultural Diversity Awareness (See Appendix C)

EIGHT FACTORS TO CONSIDER IN PROVIDING SERVICES TO MULTICULTURAL STUDENTS, PARENTS, AND COMMUNITIES

It is not the purpose of this workshop to present an overview of the major minority groups in the United States. It is impossible for school psychologists to be thoroughly knowledgeable about all of the cultural groups they are likely to encounter. Instead, it is imperative that school psychologists adopt a cultural competence approach to school psychology practice and training. In providing services to a particular group, school psychologists need to be careful about making generalizations. Generalities create stereotypes and prevent school psychologists from seeing differences within the group and within each individual in the group. Knowing information about a particular group may be helpful, but the limitations of such an approach also need to be understood. However, with the knowledge of that restriction, DeSpelder and Strickland (1995) state that "different cultures and religions are lenses through which reality is viewed" (p. 94).

In order to understand persons of different cultures, Ross (1994) identifies eight factors that need to be considered: (1) Communication; (2) Values; (3) Concept of the Family; (4) Religious Beliefs; (5) Attitudes Toward the Body; (6) Attitudes Toward Death; (7) Bereavement, Grief, and Mourning Practices; and (8) Funeral Practices. Knowledge of each of these will aid school psychologists to enhance their multicultural direct and indirect prevention, intervention, and postvention service delivery skills. The eight categories will be briefly discussed:
The first factor is Communication. As a form of language, both verbal and nonverbal, it can cause conflict and misunderstanding in intercultural situations. For example, culture can affect a person's conversational response. In reply to a question about a death, a Hispanic individual may give a lengthy response while an Asian person may simply answer "yes" or "no." Culture may socialize its members to be silent in conversation and in grief while others may condition their members to be expressive. According to Brislin & Yoshida (1994), "most researchers would agree that a substantial part of the social meaning of a message is carried via nonverbal channels. For example, Japanese are more comfortable with silence than Americans" (p. 275). Culture also affects what conversational topics are considered appropriate or not.

The second factor is Values. People in a culture adopt social value orientations in harmony with the basic tenets of their group. McGoldrick et al (1982) identify five common human problems that all societies must solve:

1. **Time** - Is the temporal focus of human life on the past, present, or future?
2. **Activity** - Is action in interpersonal relationships one of Doing, Being, or Being-in-Becoming?
3. **Relational Orientation** - Is the preferred way of relating to others Individual, Collateral, or Lineal?
5. **The Basic Nature of Humankind** - Is human behavior innately Neutral, Mixed, Good, or Evil?

One example of values is found in Judaism. According to Irish et al (1993), "As one surveys the Jewish tradition, one discovers that there are two overriding values at the heart of its orientation to death and mourning. One is kavod hamet, the requirement to 'honor the dead.' The second is nichum avelim, the obligation to 'comfort the mourners'" (p. 115). Nuttall, De Leon, & Valle (1990) provide a helpful table comparison of Hispanic, Asian, Black, Native American, and Mainstream U.S. Values.

The third factor is the Concept of the Family which is defined differently across cultures. For example in the mobile American pluralistic family, members often live far away from relatives, while among Blacks and Hispanics, the family is extended to include many relatives. Among the mobile Americans, there might be little family support of a family member during and after a death while in the latter, there is a lot of support. Some families want a loved one to die at home and not at a hospital which may be looked upon with suspicion. Culture determines whether death will be impersonal as care is transferred from the home to a hospital or funeral parlor. Some families shield their children from contact with death of a loved one whereas others do not. For example, Americans have been slow to encourage children to attend and participate in the mourning rituals whereas "Native American children attend wakes and funerals from early childhood onward, and they know how to behave" (Irish et al, 1993, p. 105).

The fourth factor is Religious Beliefs which give people a meaning for life and death. According to Smith (1994), religion answers the following life's ultimate questions: "Where are we? Why are we here? What does it all mean? What, if anything, are we supposed to do?" (p. 10). Eerdman (1994) defines religion as "a system of belief and worship, held by a community who may express their religion through shared MYTHS, DOCTRINES, ethical teachings, RITUALS, or the remembrance of special experiences" (p. 442). Religion can be understood anthropologically, sociologically, historically, and theologically. One illustration of religious beliefs is found in Buddhism. Irish et al (1993) reported, "Attaining a clear, calm state of mind, undisturbed by worldly events, full
of compassion, is the central focus of most Buddhist practice” (p. 127). “The state of mind of the dying person at the moment of death is thought to influence the rebirth process. Thus, the better the state of mind, the better the chances of a favorable rebirth” (p. 130). Some cultures believe in supernaturalism, demonology, and/or spiritualism.

The fifth factor is Attitudes Toward the Body. Although pain is universal, its interpretation and response are culturally prescribed. Concepts of modesty are also culturally influenced. For example, Muslims modestly care for the body after death. Culture determines practices relating to transfusions, transplants, amputations, and autopsies. In addition, some societies are opposed to embalming and cremation.

The sixth factor is Attitudes Toward Death. Some cultures believe in omens that warn of approaching death. Illustrations include dreams or the appearance of an owl. Voodoo beliefs which trigger sudden death are practiced in some societies. In the black community, “death is perceived as a celebration of life; a testament to the fact that a life has been lived, that the earthly journey is completed” (Irish et al., 1993, p. 54). When Hindus die, they go to a heaven or a hell, depending on whether they have led a good or a bad life. There, they will await reincarnation. Suicide is viewed differently in cultures and religions. For example, under Islamic law, suicide is forbidden. Also, among Catholics, it is prohibited. However, without judging the deceased’s personal immortal soul, a Catholic burial is allowed. In addition, for Catholics, the explanation of death is found in the frame of reference that is “the life, death, and resurrection of Jesus Christ as it is realized and celebrated in the Church” (McLaughlin, 1995, p. 129).

The seventh factor is Bereavement, Grief, and Mourning Practices. In the decreasing nuclear family, death of one member leaves a large void. However, among Samoan immigrants to the United States, households are multigenerational which make it easier to fill the social role of the deceased. Among Lakota Native Americans, “Cutting the hair, cutting or scratching the forearms and face, tearing clothing, and wearing black are common and appropriate outward displays of grief” (Irish et al., 1993, p. 108). Among the African Americans, funerals are referred to as “home-going services, as celebrations” (Irish et al., 1993, p. 201). Comer (1995) reports that some cultures, “such as adherents of the Shinto and Buddhist religions in Japan, encourage lifelong ties to the deceased while the Hopi Indians forget the deceased as quickly as possible” (pp. 280-281). Because the “religious faith” of Quakers and Unitarians “is less creedal and minimal in ritual,” they hold memorial services instead of funerals (Irish et al., 1993, p. 150).

In the Hmong ethnic community, a picture of a person, hair, or some other thing from the body may not be buried with a deceased person for fear that the living whom the object represents may “be susceptible to later misfortunes and an early death because the pictures separated them from their spirits” (Irish et al., 1993, p. 79). Widespread in Puerto Rico and the Caribbean countries is “the practice of santeria (espiritismo), a religious syncretism consisting of African, Indian, and Catholic rituals in which the santero, or espiritista, known as a “medium,” contacts dead spirits for advice” (Irish et al., 1993, pp. 67-68).

The eighth factor is Funeral Practices. Regardless of the cultural beliefs, the funeral meets the religious, social, and psychological needs of the mourners. It attempts to deal with grief, support the mourners, and bring meaning to the death and life of the deceased individual. Final disposition of the body is made by either earth burial, cremation, or entombment.
In reviewing dying, death, and bereavement practices throughout many cultures, some commonalities can be found. The community is a group support “through mutual aid with tasks, emotional support, and sharing of ritual” (Irish et al., 1993, p. 184). The funeral rites and ceremonies provide a sense of closure. Each culture also has its own frame of reference for what it believes about death and how it deals with it. Professionalism of “death and dying” is found more in urban rather than rural areas. Fatalism regarding life and death can be found among the poor, and immortality beliefs can be found among the oppressed. Children in rural areas directly observe and participate in death and grief rituals while urban children are more sheltered. To some extent, each of the groups that has migrated to the United States has had to modify its ways of dealing with dying, death, and grief. According to Irish et al. (1993), individuals from culturally diverse groups may be dealing with multiple losses: “They may be dealing simultaneously with the loss of their homeland, personal belongings, family members, economic status, professional identity, cultural traditions, language, and sense of self” (p. 188).

Hopefully, this paper and workshop will serve as a catalyst for further research, education, training, and personal death, grief, and cultural awareness that will enhance the school psychologists’ interaction and intervention with multicultural individuals, families, and communities. In developing cultural competence (sensitivity, knowledge, skill, and values) of different ethnic groups and individuals within those groups, school psychologists can reflect upon the famous quotation of a renowned anthropologist, Clyde Kluckhohn (1962):

Every person is, in certain respects, like all other persons
Every person is, in certain respects, like some other persons;
Every person is, in certain respects, like no other person (p. 26).
APPENDIX A

DEATH AWARENESS QUESTIONNAIRE

Directions: Read each item in this questionnaire and answer it on a sheet of paper:

1. How many people who were dying have you visited or talked to in the past year?

2. How many people whom you knew personally have died in the past year?

3. How many funerals have you attended in the past year?

4. How often have you visited someone’s grave, other than during a burial service, during the past year?

5. How often do you think about your own death?

6. When you die, would you want your body to be buried, cremated, donated, or disposed of in another way?

7. If you choose burial, would you want an open or closed casket?

8. Have you witnessed someone die? If yes, explain.
9. Has anyone you personally know died tragically of an accident, disaster, homicide, suicide, or war; and if so, would this affect your psychological service delivery in a school setting where a similar or other violent death has occurred?

10. Has anyone you personally know died of a chronic illness; and if so, would this affect your psychological service delivery in a school setting where an individual died of a terminal illness?

11. In dealing with a school death, would you feel more internal stress if the death occurred suddenly or gradually?

12. What is your belief about death?

13. Do you consider death as opening the door to a continued existence or as closing the door forever?

14. If your obituary were to describe you in a few words, what would you want it to say?
APPENDIX B

GRIEF AWARENESS QUESTIONNAIRE

Directions: Read each item in this questionnaire and answer it on a sheet of paper.

1. Do you believe that children and others grieve through linear, sequential stages?

2. Would you encourage or allow a child under eight to attend a memorial service for someone who died?

3. Do children grieve like adults?

4. When a school age child dies, should you remove his/her school desk from class?

5. Should children be shielded from grief and death?

6. Does a death result in multiple losses for the past, present, and the future?

7. In your own grief, to whom would you turn for support?

8. Would you be likely to touch the body at a funeral service?
9. After providing delivery services during a school tragedy, would you, as a school psychologist participate in a defusing or debriefing?

10. If a loved one has died, have you experienced his/her presence after the death; if so, was it for a few months, or was it a for a year or more?

11. When you grieved for a loved one, did you generally internalize or externalize your feelings?

12. When you grieved for a loved one, what psychological effects did you experience?

13. When you grieved for a loved one, what social effects did you experience?

14. When you grieved for a loved one, what physical effects did you experience?
APPENDIX C

MULTI CULTURAL AWARENESS QUESTIONNAIRE

Directions: Read each item in this questionnaire and answer it on your paper.

1. How many people from cultural, racial or religious backgrounds very different from your own have you known personally who have died within the past year?

2. How many funerals of people from cultural, racial, or religious backgrounds very different from your own have you attended in the past year?

3. As a school psychologist, how many people from cultural, racial, or religious backgrounds very different from your own have you serviced?

4. As a school psychologist, how many people from cultural, racial, or religious backgrounds very different from your own have you interacted with who were dying?

5. As a school psychologist, are you careful of not applying Western concepts to other cultures?

6. As a school psychologist, do you approach an individual in terms of his/her social and cultural context?
7. As a school psychologist, do you refrain from using the DSM-IV as rigid rules, and instead employ it in the light of a person's social and cultural milieu?

8. In relating to an individual from another culture, are you aware of how your expectations and biases may affect the relationship?

9. Do you avoid generalizations and stereotypes about ethnic groups and realize that there exists a tremendous variation within each group and within each individual in the group?

10. Do you prevent yourself from lumping together individuals from different ethnic minority groups, and are you aware of the important individual differences within each group and within each person within the group?

11. In the past year, how many personal holiday greetings or other written communications have you conveyed to individuals or families whose cultural, racial, or religious backgrounds were very different from your own?

12. In the past year, how many events (such as conferences, concerts, and exhibits) have you attended that highlighted multicultural diversity?
13. In the immediate neighborhood in which you live, how many families are from cultures, races, or religions very different from your own?

14. If there are some culturally diverse families living in your neighborhood, how well do you know some of them?
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