
Peculiarities Of The Mexican Culture

The topic discussed in this paper includes information on the beliefs and characteristics of people within Mexican Culture as well as how this information affects healthcare in America. Within the past several years, it has been determined that the Hispanic population of America is roughly 55.4 million, and the majority of this population (68%) originated from Mexico. The states with the largest populations of people with Mexican heritage include California, Arizona, New Mexico, Texas (each borders Mexico). Within these states, the vast majority (91%) live in urbanized areas, which are more often crowded and polluted. These living conditions contribute to health issues within this people group such as acute and chronic illnesses.

Traditionally, people in Mexican Culture place a high value on Familism, which is defined as placing the needs of the family over any individual family member. Because of this, it can be expected that many families of this culture avoid seeking necessary healthcare if it is not financially or at a time convenient. Also, jobs that people in this culture possess can sometimes be grueling and dangerous, but they keep them to maintain a source of income. These jobs can lead to health problems that need to be addressed but often are not.

People of Mexican culture predominantly speak Spanish and English. It is important to know that people of Mexican culture prefer to communicate verbally rather than through reading and writing. Although when communicating verbally, they would prefer health care professionals to not use too much eye contact and to limit hand gestures. Using those two tools of non-verbal communication can be seen as disrespectful and intimidating. When communicating with someone who cannot speak English, it would be a good idea to refer to a translator even if the children of the patient can speak English. Many people of Mexican culture value respect, and having a child communicate to an elder about their illness could be considered disrespectful and disrupt the patriarchal dynamic of the family.

People of Mexican culture obtain many different health beliefs and practices that have been passed down through generations. Many different terms are used to describe illnesses, but they can often be heard describing illnesses using physical properties such as “hot” or “cold”. People of Mexican culture believe that their body has an imbalance when they are ill and to correct that balance, a hot illness needs to be treated by “cold” medicine and vice versa. People of Mexican culture also believe in folk illnesses and remedies as well, such as Empacho and Mal de Ojo. With these illnesses, many would prefer to use home remedies such as garlic, eucalyptus, and aloe vera. Because of this, many people of Mexican culture tend to wait until the last minute to receive medical care in a hospital and can often be known to see a curandero (folk healer) or a santero (person who uses the power of saints), before seeing a doctor.

People of Mexican culture tend to rely heavily on God for health improvement. Some religious customs include: use of herbs, burning of incense, pilgrimages, and offering prayers, and making promises to worship certain saints in exchange for health miracles (Lujan & Campbell, 2006, p. 186). Religion has a strong influence on health practices when it comes to childbirth, mental health illness, chronic illness, and end of life. Health professionals must respect the wishes or requests that people of this culture may have when it comes to treatment plans and options. This will lead to extensive clinical benefits that will result in the best possible care for

the client.

Nurses will need to be prepared to communicate with multiple family members due to the interconnectedness of this culture. When caring for infants, school-aged children, and adolescents; the nurse must evaluate and listen actively to the religious needs of the family and client if possible. Clinicians that focus on the inner importance of the person, and that have respect for the person's spirituality and religious beliefs are of major importance to dying Mexican elders (Lujan & Campbell, 2006, p. 188). This will result in a trusting clinician-client relationship.

Traditionally, the diet of Mexico is rich in corn and beans and offers a wide array of preparation techniques. The growing population of people in poverty limits access to a variety of nutritious food items and often results in malnutrition. It has also led to increased production and consumption of processed foods causing occurrences of obesity and diabetes in Mexico. When treating a client of Mexican descent, it is important to factor in these common dietary practices amongst people of this area. Clients from low-income groups are more likely to have iron, zinc, and vitamin A deficiencies due to limited access to animal products and is an important factor to consider when diagnosing and treating a client.

Immigrants from Mexico face several obstacles when receiving healthcare in the United States. Most significant is language barriers between client and healthcare providers. This problem is worsened by the lack of trained translators in hospitals and medical offices, which leads to a sense of client distrust in healthcare providers. Due to this mistrust and the inability to afford health insurance, clients often delay seeking professional treatment and instead opt for self-treatment and seeking alternative forms of healthcare, such as curanderos or traditional native healers (Juckett, 2013). Mexican natives are not accustomed to healthcare in the United States and healthcare providers need to consider this to help make them comfortable during their time in a healthcare facility.