Christine Dudek

You have a new job in a new town. It is an unfamiliar culture for you and you are a beginner with the language that most of the families speak, but you are confident knowing that your education prepared you well to work with children and families from a variety of social classes with differing belief systems.

You job is an early childhood interventionist at the state-funded Regional Center. One of the young children on your caseload has a visual disability. Your supervisor lets you know that the physician has determined that the child’s eyes are not functional and has spoken to the family about her recommendation to remove the child’s eyes and to replace them with prostheses in order to eliminate the constant discharge. This will allow her to attend school more regularly because she will be healthier and other children in the classroom will not be at a health risk. The family has missed several appointments with the doctor and they would like you to do a home visit to get a handle on what’s going on.

So, you go to the home. You are feeling positive; you have bonded with this child and feel like you have a good relationship with the family. During the home visit, you bring up the topic of the family missing appointments with the doctor and the doctor’s recommendations. The mom responds, “Oh, we’re not going to have an operation like that. Our whole church is praying for a miracle. How could God do a miracle and restore her eyesight if her eyes aren’t even there?”

My immediate response is, well, okay then I guess we will not be doing the procedure. I feel this way because to people who are very religious telling them to do something otherwise is very difficult. Especially since she has said that the whole church is involved I feel that there is no way that she will listen to other suggestions.

I think the first thing that I would say to the mother is that I respect her religion and that I am not trying to make her do anything that she does not want to do, but that I am here to help make the best out of this situation. I would then tell the mother that without the operation her daughter would fall very behind in school because she would be ill and that she is putting other children and families at risk without it.

When I am ready to leave the home visit I would tell the family that I really want them to consider it one more time and go to the doctor appointments because they may be able to come up with another solution if they knew about your religious views. If doctors knew that the operation was out of the question then they could maybe come up with a solution that will work temporarily that does not involve removing her eyes.

I imagine that the physician and supervisor will not be very satisfied when I return. They have a plan already in mind and I am going to come and tell them that they need to consider changing that plan because the family does not want the operation done because of their religion. I also suspect that this is not the first time they have had to change their plan of action because of a religion conflict.

I think the most important thing to consider here is the girl’s health and safety. If she has a problem and needs medical attention then her health needs to be addressed. However, I also think that a family’s religion and beliefs are very important as well. So I think a compromise should be met where the family seeks medical attention, but the physicians respect their religious beliefs. I think that if the family and doctors worked together they could figure out a way to help the little girl, while still making the family happy.

My final suggestion is that both the family and the physician give it another shot and stay open and honest with each other about what they are thinking. I think that the most important thing for them both to remember is to get the girl healthy so she can go to school and live her life to its fullest.

I have never had any experiences in real life that relate to this scenario. I have not been in a direct situation where there was a strong clash of cultural values; however, I have been interning in a hospital where there are a lot of different cultures. They do not clash with each other, but they make for a very diverse environment. The staff and physicians encounter different cultures on a regular basis to which they need to be open. I can also relate this information back to a class that I took my first year in college at Chico State. It was a diversity class that I gained an immense amount of knowledge from.