

Essay on Social Institutions And Socialization

Cultural competence refers to a set of **similar policies, attitudes and behaviors** that are found in an agency, system or organization and enables that particular agency, organization or system to work proficiently in cross-cultural states of affairs. The term culture is always used since it implies an integrated outline of human behavior which includes values, customs, beliefs, actions, communications, thoughts, as well as institutions of ethnic, social, religious or racial group. Conversely, the term competence is used since it means having the aptitude to function proficiently. In the book, "The Practical Skeptic", by Lisa J. McIntyre, it is evident that the socialization entails having cultural competency.

In the article, "Cadaver Stories and the Emotional Socialization of Medical Students" by Frederic W. Hafferty, medical student protagonists play jokes on emotionally vulnerable and unsuspecting victims. These students physically control given cadaver parts or whole cadavers for the dual intention of deriving humor from the distress of their victims as well as shocking them. These victims are either medical students who are emotionally vulnerable or lay people. Hafferty asserts that the cadaver stories mostly circulate amongst medical student initiates and aspirants and are told as factual accounts of real events. This article shows that most people view cadaver stories part of medical training's oral culture. It is clear that this article shows the role of cadaver stories in medical students' socialization. Therefore, the most important kind of cultural competence that must be acquired by the students studied by Hafferty is playing jokes on other medical students who are emotionally vulnerable. The reason is because the cadaver stories in this article show that this behavior is common among protagonist medical students (Hafferty, 2013).

In the article, "Anybody's Son Will Do" by Gwynne Dyer, all soldiers have the same profession **regardless of the country they serve**. They are different from other citizens since their job entails killing, dying as well as things which are not natural vocation for other people. It requires basic training to turn young men into people who kill and are exposed to death. In essence, it is the same globally since young men are much alike everywhere. Young people are somewhat malleable, and all young men have attitudes that armies work with. Transforming boys into soldiers varies over time and from nation to nation. In modern nations, it is a conversion method in a nearly religious sense and the emotions are more imperative than the explicit ideas. Soldiers are ordinary human beings who have personal and national loyalties, and most of them feel that what they do is ideologically justified and patriotic. Armies always have a long time in working out best ways to get young men to fight. Most soldiers believe in the slogans and particular symbols of their nations. What makes them kill and risk their lives are self respect and an extraordinary kind of love which has nothing to do with idealism or sex (Gwynne, 2013).

Armies produce such brotherhood through basic training that involves psychological manipulation in order to change the loyalties and values of the soldiers. Most armies prefer young recruits to older ones since it is hard for the army to get the older soldiers to have the conviction that they like the job. The most important qualities which young recruits have are naivety and enthusiasm. Most of them want the closely structured environment and discipline which armed forces provide. Through basic training, the soldiers are able to do things which they would not have dreamt of. Therefore, the most important kind of cultural competence that must be acquired by the soldiers studied by Gwynne Dyer includes enthusiasm and naivety. These qualities are required by armies to transform ordinary civilians into men who are ready to kill and die in the battlefield. The armies have a preference for young men since these qualities are common among them (Gwynne, 2013).

In the article, "How Women Reshape the Prison Guard Role" by Lynn Zimmer, women use job performance strategies that are innovative to work in men's prisons as guards. This article suggests that the female guards do the job in a different way from male guards. The reason is because the women guards face discriminatory and structural obstacles on the work. Most of them also bring to work skills, abilities and experiences that are different from those of male guards. The women guards are assessed on the grounds of how well the skills they possess match those of the male guards. This is one of the reasons why they may fail to get positive performance assessments in the jobs that **men traditionally hold**. Zimmer argues in this article that expecting women to do jobs in a similar way to men is gender unfairness and that there are many ways of performing jobs. It is therefore, imperative to judge women on the basis of their effectiveness and not whether they approach work in a similar way

to men. Therefore, the most important form of cultural competence that must be acquired by the prison guards studied by Zimmer is judging women on whether they approach work the same way as men. This cultural competence is common among the male guards in this article and forms the basis of gender bias (Zimmer, 2013).

In the article "Not Just Bodies: Strategies for Desexualizing the Physical Examination of Patients" by Patti A. Giuffre and Christine L. Williams, professionals in the health care sector use given strategies during a physical examination so as to control their feelings, their patients' actions and to avoid sexual transgression allegations. The two authors conducted several interviews with nurses and physicians in order to look into ways in which practitioners in the health care sector desexualize physical exams. They found out three general desexualizing strategies which are used by both female and male health care practitioners. These strategies were used regardless of the patients' characteristics. The following strategies were used; using medical terms and avoiding colloquial terms, meeting patients clothed before examination and engaging in nonsexual joking and conversation. They also found out six strategies that were used mostly used by women or men or only used in **particular contexts**. These strategies include objectifying patients, looking professional, threatening the patients, using chaperone, telling jokes about jokes and empathizing with the patients. The two authors assert that desexualizing physical examination is gendered. It is also sexualized in various contexts. Using particular strategies boosts stereotypes about heterosexual relationships and stereotypes in the hospital. Therefore, the most important form of cultural competence that must be acquired by the health care practitioners studied by Giuffre and Williams is the use of various strategies to control their feelings (Giuffre & Williams, 2013).

In conclusion, cultural competence entails developmental process that advances with time. Both organizations and individuals are at given levels of knowledge, skills and awareness along the scale of cultural competence.

References

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