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Adjusting to A Foreign Culture:

A Personal Experience

Leah G. Flautt

I lug my bulging suitcase through the crowded, noisy Fiumicino Airport in Rome, Italy. I have a splitting headache and attribute it to lack of sleep on the overnight plane. It is 8:00 a.m. in the morning – 2:00 p.m. my time – but it feels like midnight. I realize I have not eaten anything in almost sixteen hours, but I am not the slightest bit hungry. I attribute this to nerves. I exit baggage claim following a large mass of people, all of them speaking the completely foreign Italian language. I have never been so relieved to see two men in white shirts holding a green sign that reads “UMBRA.” I made it. Finally, I can relax. Despite my headache and my knotted stomach, I plaster a smile on my face and greet and chat with my future classmates as I wait to be taken to the bus that will drive us the three hours to Perugia. About an hour later, I am walking down the aisle of the bus, and I spot a row of open seats. “Score!” I thought. “Now I can spread out and take a short nap.” I didn’t want to take too long of a nap for fear of becoming jet lagged, but I could tell from my headache how much I needed to sleep at least a little bit. I drift off to sleep... I awake from a dreamless sleep after what feels like a second with my headache somehow worse than before. Though I have thought a lot about this day since it happened, I still cannot remember the sequence of events that follow. On my first day in a foreign country in the middle of my nap I had a seizure, which put me in the hospital for my first five days abroad. While I was there, I felt I was missing out on the Italian culture of Perugia. Little did I know, while the Umbra staff was preparing my classmates for the new Italian culture, I was actually confronted by it even more directly in the hospital.

Hofstede’s Six Dimensions of Culture

In this essay, I will describe several experiences I have had in re-

gard to my unforeseen hospitalization while studying abroad in Perugia. I will use these experiences to compare some aspects of American culture to Italian culture according to Geert Hofstede's theories. At first, Hofstede stated at first that culture had *four* dimensions: power distance, individualism vs. collectivism, masculinity vs. femininity, and uncertainty avoidance. Later additions to this theory are long-term orientation vs. short-term orientation, and indulgence vs. restraint (Hartmann, 2012). I will focus on some of the above-mentioned dimensions and then define culture shock and describe my experience of it upon arriving in Italy. I will conclude by describing the effect I predict reverse culture shock will have on me when I return to America and am thrown back into my family, friends, and a very different culture from the one to which I have been adjusting for the past four months.

Power Distance

Power distance refers to how close the people of a society feel to their governing power, or how easily they become a part of the governing power (Hofstede 2011). Italy has a lower power distance than America (Hofstede Insights), which I saw reflected on a smaller scale in the culture of the hospital. I had several nurses and doctors of different rank take care of me while I was there. When the doctor arrived in my room to phone my father and give him a full report on my status, all of the nurses and doctors under him who cared for me in any way were also present, even though most of them could not speak or understand English very well. At Ospedale di Perugia, it is clear that the head doctor is in charge, but more so than in American hospitals, the subordinate doctors are included in important deliberations and meetings. Thus, there is less of a power difference in Italian hospitals than in American hospitals.

Individualism versus Collectivism. Individualism refers to the societal value of an individual standing out, in contrast to collectivism, which places value on blending into the crowd and working together accomplish things (Hofstede, 2011). America and Italy are both individualistic cultures, but America scores much more highly on individualism than Italy does

(Hofstede Insights). On my second day in the hospital, my roommate was admitted: an average Italian woman who seemed to be no worse off than I was. However, for the entirety of visiting hours from 8:30 a.m. to 6:30 p.m., she had constant visitors. By the end of her third day, I could tell that it was the same five or six people over and over again, spending hours at a time with the woman. The first two days, I felt happy for her that she seemed to be so popular with her friends and family but sad for me, because the constant company reminded me that I came here alone and would have no one in Italy who loves me to visit me in the hospital. My family would definitely visit me in an American hospital but probably would not stay longer than a few hours, as they would have their everyday lives to keep up with as well. As I became familiar with all of her visitors, I realized how much time each visitor spent and how often each visitor came. *Don't these people have lives or jobs?* I thought. *How can they take this much time out of their schedules to sit around and do nothing?* I realize now that this is not because they have nothing better to do. They have jobs, but they are far less interested in standing out in their workplace as they are in pulling together as a group to do whatever they can to make a person feel better.

Masculinity versus Femininity. A masculine culture values strength and power, whereas a feminine culture values nurturing and caring for other people (Hofstede Insights). While both America and Italy have masculine cultures, the data show that Italy is more masculine than America (Hofstede, 2011), which surprises me because in the hospital, I found Italy to be much more feminine than America. My first day at lunchtime, they dropped off my meal: some sort of chicken and an apple, which tasted a lot better than it sounds. I realized that the nurse had forgotten my utensils with which to eat my chicken. I could not type into Google translate fast enough what the word “fork” was in Italian and did not want to be a bother to someone else, so I just ate it with my hands, partially feeling like a barbarian and partially grateful that lunch did not involve soup or rice. At dinnertime, my translator from Umbra was there, and this time I was quick to notice that they had forgotten my silverware again. A bit annoyed, I pointed this out to her and she asked the nurse for a fork and knife. The nurse looked a little bit

confused as he left to get my silverware. When I asked what the deal was about remembering the silverware, my translator explained to me that Italy, on the whole, is very aware of its resources. Having to wash lots of reusable utensils after each meal would waste water and using disposable utensils would waste plastic. Though the hospital has some to spare, it only gives utensils to patients who specifically ask for them because they figure that most patients will have a visitor every meal to bring them their own utensils. In America, most hospital patients do not have visitors for every meal, because people are not as nurturing and do not spend near as much time with their hospitalized friends as Italians do. Americans are more occupied with being the best at their jobs and standing out in whatever group they are involved. Although I learned the Italian expression "*forchetta, per favore*" from the experience, I still thought it strange for the hospital to make such a big assumption about all of its patients.

Culture Shock

Culture shock is defined as the ways that people react to strange or unfamiliar places (Bochner, 2003). My experiences with culture shock come from between-society contact. I traveled as an individual to a different country and was surrounded by the foreign culture of Italy. The most current theory of responding to culture shock is the ABC theory, which includes affect, behavior, and cognition.

Affective Approach. The affective approach to culture shock is that when one comes into contact with a foreign culture and responds with a "negative affect, such as confusion, anxiety, disorientation, suspicion, even grief and bereavement due to a sense of loss of familiar physical objects and social relationships" (Bochner, 2003). I believe that I was more anxious and more easily agitated by things than I needed to be in the hospital because I knew my father could not be there with me quickly if something went terribly wrong. I could not make it home if I needed to. In the beginning, I had none of my familiar clothes or books or computer to make me feel comfortable and at home. My translator ended up having to bring me some of her own clothes. Some of the best ways to reduce the affective aspect of

culture shock are reducing anxiety and surrounding oneself with some familiar items. It predictably helped when I was able to wear my own clothes and call my father from my own cell phone.

Behavior Approach. The behavioral approach says that certain behaviors of an individual tend to go unnoticed until the individual is in a strange place where people behave differently (Bochner, 2003). For example, in America I have no problem talking to anyone I meet on the street or anywhere, but by the time my roommate arrived at the hospital, I had already had several strange and foreign encounters, so I was subconsciously self-conscious about talking to her because I did not know how she would respond or what the proper etiquette was in Italian hospitals. I was so self-conscious that we sat there for what seemed like hours in silence until she finally said *"Ciao."* Then I felt like an unfriendly idiot for not saying something sooner.

Cognitive Approach. The cognition aspect of culture shock has to do with different people's interpretations of events that have happened (Bochner, 2003). When I was surrounded by the different Italian hospital culture, I was frustrated and annoyed at things that would not bother most Italian people, like not receiving a fork or not knowing how long I would have to stay in the hospital. Once my translator described the logic behind things that happened, I was able to accept it, adapt and move on from the differences.

The Similarity-Attraction Hypothesis. On my third day in the hospital, my translator brought a redheaded American girl into my room whom I had never seen before but, nonetheless, I jumped out of my bed to give her a big hug in greeting. Emily Townley and I were at first attracted to be friends at the hospital because we were the only two *ragazze americane*, as the Italian doctors would always refer to us. Though we slept in different wings of the hospital, it was still a comfort knowing that there was someone in a very similar circumstance to me, an American girl who had just arrived in Italy to study abroad and was unexpectedly taken into the hospital. It provided me a sort of comfort knowing that there was someone who understood exactly what I was going through, from the language barrier

with the doctors, to the inability to express myself accurately, even to the constant lack of forks at every meal. From the first day she arrived at the hospital, we were constantly in each other's rooms and walking around and outside the hospital together. Obviously, neither of us had any visitors besides the translators, so we were each other's visitors. My increase in feelings of comfort around someone I just met supports the similarity-attraction hypothesis, which says that says people with similar backgrounds will be attracted to each other (Bochner, 2013). Even after we had both returned to Umbra, we remained friends because we shared the common experience of being in the hospital during the first week of our time in Italy.

Returning to America

Though my time spent at the hospital was a difficult time for me, I have come to adapt and love Italian culture. Though I am not fluent in Italian, when I return to taking French at my home university, I will say "sì" instead of "oui" often. My sisters will ask me to drive them to *Chick-fil-A* and *Subway*, and I will struggle to say yes, having been exposed to such fresh food here in Italy. When people in my dorm leave the heat or lights on or forget to take the trash out, I may become frustrated. I am taking some time to prepare for the reverse culture shock that is to come when I return to America. Hopefully, the transition will be smoother than it was when I arrived in Italy and, hopefully, I will keep some of the best aspects of Italian culture in my heart and will not lose them in the hustle and bustle of American culture.

Editorial Note:

This contribution, originally named *Culture, From America To Italy and Back*, was written by Umbra Institute student Leah G. Flautt in the Fall Semester 2019 for the course PYHD 430: Human Development in Culture. This published version has been partially reduced and modified for editorial purposes.

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