Cultural Competence: from awareness to empowerment

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Let's think about culture

- 1. Think of a friend or acquaintance. Describe the individual's culture.
- 2. Describe your cultural identity with one term or statement.
- 3. Describe your cultural identity with 5 statements.





What is culture?

The integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups.

-Office of Minority Health, U.S. Department of Minority Health

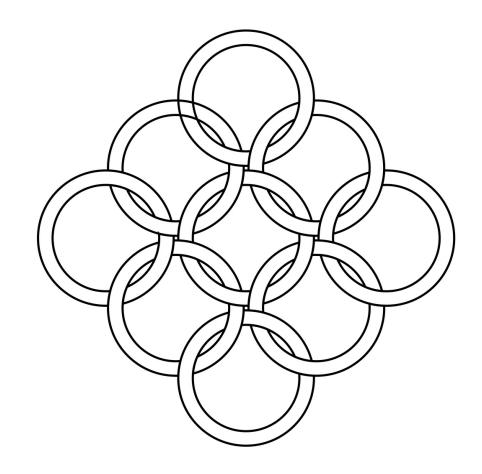




Cultural Identity

The combination of multiple, interlocking social identities, such as race, ethnicity, religion, socioeconomic status, sexual orientation, and more.

--Office of Minority Health, U.S. Department of Minority Health





The rich complexity of cultural identity



- Cultural identity is dynamic
- Some aspects are more salient than others.
- One's cultural identity structures the way we see the world.
- We don't see things as they are, we see them as we are.
 - Anais Nin



Cultural Competence

Cultural competence entails the awareness, attitude, knowledge and skills that allow clinicians to understand, appreciate and work with culturally diverse individuals.

(Betancourt, Green, Carrillo, & Ananch-Firempong, 2003)



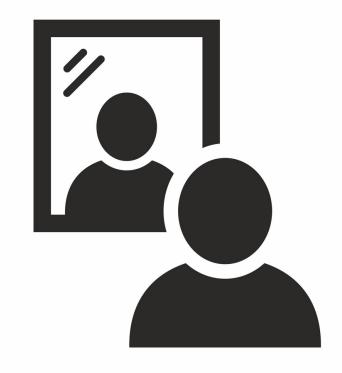
Awareness

An ongoing self-reflection about one's worldview and cultural identity.



Why Awareness?

- We all approach human interactions within the limits of our worldview
- Differences can lead to
 - Communication problems
 - Misdiagnosis
 - Premature treatment termination by the client
- U.S. Surgeon General's Report on Culture & Mental Health





Cross-cutting Factors of Culture



- What is the role of an aunt or uncle in your family?
- What does wellness look like to you?
- What is the role of women in your family?
- What does a successful life look like?
- What does spirituality mean to you?
- How comfortable are you with silence?
- What is your degree of acculturation?
- Who do you go to for life advice?



Models of Identity Development

Opportunities for Awareness

SAMHSA & Comas-Diaz

- Racial Cultural Identity Development Model
- White Racial Identity Development Model
- Kluckholn & Strodtbeck Cultural Framework
- Individualism-Collectivism Orientation Continuum
- Multicultural Sensitivity Development Model





Attitude

Involves developing sensitivity, respect, humility, empathy and awareness of clients' contextual issues.



An important aspect about attitude

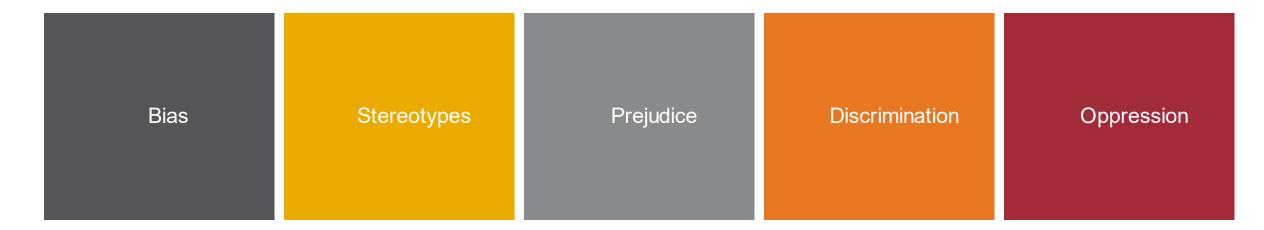
We must be intentional about developing a culturally competent attitude

- Our beliefs do not always coincide with our behavior
- Cognitive psychology studies have shown that individuals who in self-report measures appear nonprejudiced generally have negative attitudes toward African Americans and perhaps toward other people of color.
 - Many of the people who are part of the 85%–90% of the white population who say and probably believe that they are not prejudiced may nonetheless be practicing modern, subtle form of bias.



The pathway of oppression

The significance of implicit bias





Bias

Conscious or unconscious mental shortcuts

- We all have bias
- Types of bias
 - Implicit and Explicit
 - Personal and professional
 - Positive and negative
- Unawareness of bias can result in microaggressions during the therapeutic process

- Bias can affect all aspects of service delivery
- Implicit Association Test
- Blind Spot



Microaggressions

Brief and commonplace daily verbal, behavioral, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights and insults, especially toward people of color.

Impact:

- Weaker therapeutic bond
- Lower satisfaction with therapy





Intersectionality

- The multiple social identities that intersect at the individual level to reflect interlocking systems of privilege and oppression at the societal level
- Intersectionality & behavioral health care





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Power & Privilege

- Client experiences
- We are put in a position of power from the beginning of every session
- What can we do?
 - Awareness of which dominant and nondominant groups we belong to
 - Be mindful of your privilege
 - Power-differential analysis
 - Learn more about intersectionality





Commitment to cultural humility

- Acknowledging one's limitations
- A continuous process of self-reflection examining one's biases and stereotypes
- An openness to learning more about clients' cultures, perspectives, beliefs, values and worldview
- Prioritizing the client's culture, perspective, beliefs, values and worldview
- Continued growth and development over time



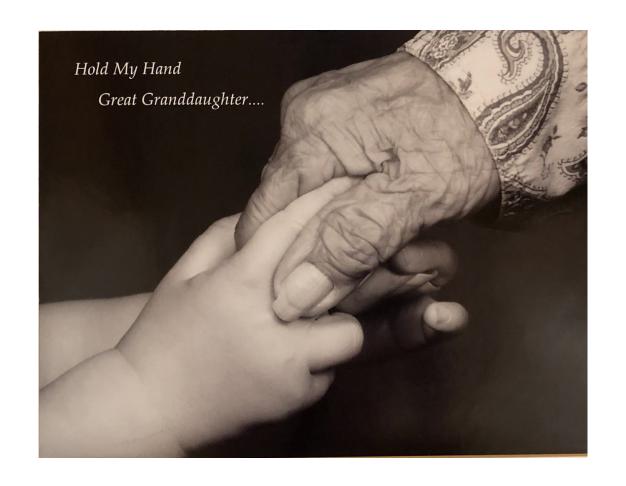
Knowledge

Helps clinicians understand how cultural, sociopolitical, historical influences shape individuals' worldviews and related health behaviors.



The effects of cultural, sociopolitical, historical influences

- How does culture affect health behaviors?
- How do sociopolitical issues affect health behaviors?
- How have historical events influenced health behaviors?





Cultural Concepts of Distress

Ways that cultural groups experience, understand, and communicate suffering, behavioral problems, or troubling thoughts and emotions

Knowing the common cultural concepts of distress can help you:

- Build a stronger rapport with your clients
- Improve your diagnoses
- Improve the effectiveness of your treatments and interventions





Cultural Concepts of Distress

- Cultural explanations
- Cultural idioms of distress
- Cultural syndromes





Skills

Involves being able to effectively communicate and interact, as well as to negotiate differences and similarities in multicultural situations.



Cultural competence throughout service delivery

Engagement

Assessment

Diagnosis

Treatment





Engagement

Important steps

- 1. Build rapport
- 2. Familiarize clients with treatment and evaluation processes
- 3. Endorse collaboration

Communication Differences

- Tone, volume, speed
- Eye contact
- Uses of pause and silence
- Facial expressions
- Emotional expressiveness
- Self-disclosure
- Formality
- Directness



Assessment

Potential for bias



- 1. Physiological Assessment
- 2. Direct behavioral observations
- 3. Self-monitoring
- 4. Behavioral self-reporting scales
- 5. Clinical interview
- 6. Trait measures
- 7. Self-report of psychopathology measures
- 8. Projective tests with structured stimuli
- 9. Projected tests with ambiguous stimuli



Assessment with individuals from non-dominant groups

- 1. Use methods with low potential for bias or that are cross-culturally validated
- 2. If not possible, move forward with awareness of potential for bias
- 3. Use multiple methods if concerned about crosscultural validity
- Choose and interpret with awareness with potential for bias
- APA PsycTEST resource



Diagnosis

- Bias awareness
- Explanatory Model
- Cultural concepts of distress





Treatment

- Cultural adaptations
- Cultural adaptations can happen to:
 - Engagement
 - Treatment delivery
 - Core components











