

Cultural Competency in Prevention Practice

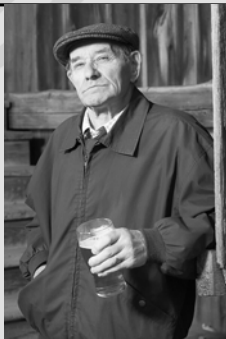
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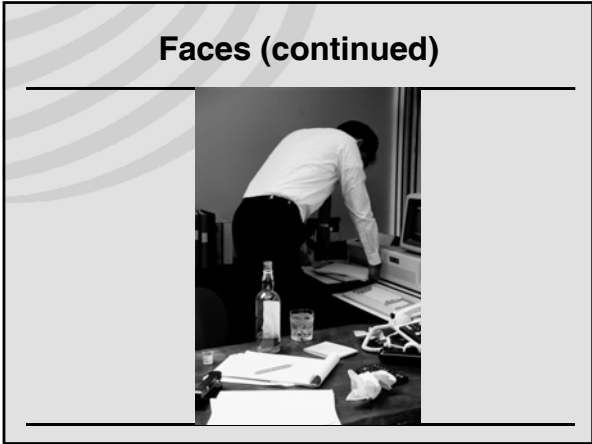


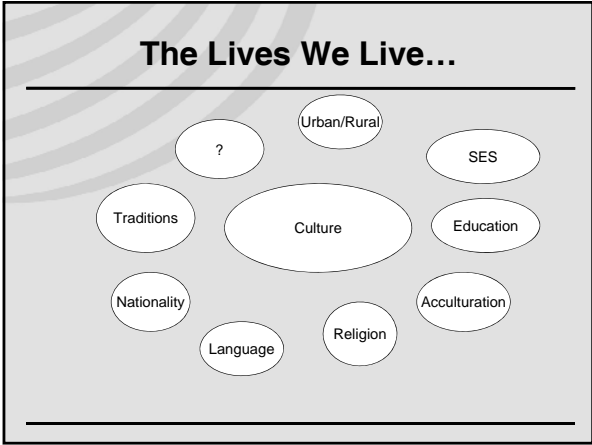
Faces of Prevention...



Faces (continued)







- ### Workshop Objectives
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- By the end of this session, participants will....
- Be able to define culture, cultural competency and related terms
 - Become familiar with cultural competency and describe its relevance in prevention planning designed to positively impact mental, emotional, and behavioral health
 - Understand both individual and organizational competency, and bring ideas for improving competency back to their agencies.
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Cultural Competency

- What Is Culture?
- What does it mean to be "Culturally Competent" ?



Culture...

- **Cultural competence** refers to an ability to interact effectively with people of different cultures. Cultural competence comprises four components: (a) Awareness of one's own cultural worldview, (b) Attitude towards cultural differences, (c) Knowledge of different cultural practices and worldviews, and (d) Cross-cultural skills. Developing cultural competence results in an ability to understand, communicate with, and effectively interact with people across cultures"

Martin & Vaughn (2007). "Strategic Diversity & Inclusion Management" magazine, pp. 31-36. DTUI Publications Division: San Francisco, CA

Themes of Individual Cultural Competence

- Awareness and Attitudes
- Knowledge
- Skills
- Desire

Awareness and Attitudes are . . .

- the process of conducting a self examination of one's own biases toward other cultures
 - an in- depth exploration of one's own culture.
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Knowledge is . . .

- the process in which the professional seeks and obtains a worldview of different cultural and ethnic groups.
 - recognizing different values
 - understanding what is important in your own culture and what's it is like in your native country.
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Skills involve . . .

- the ability to effectively apply awareness and knowledge to interactions and relationships with people from different cultures.
 - the ability to be aware of your own culture and values while at the same time recognizing that other's values are different
 - the ability to change your pattern of interactions with others
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Desire is . . .

- the motivation to engage in the process to become culturally aware, knowledgeable, skillful, and seek cultural encounters.
- the initiative to make cross-cultural connections or move outside of your comfort zone
- the fun part!

Cultural and Linguistic Competency

At all levels, a culturally and linguistically competent system of care acknowledges and incorporates:

- the importance of culture and language
- the cultural strengths associated with people and communities
- the assessment of cross-cultural relations
- vigilance of cultural and linguistic differences
- the expansion of cultural and linguistic knowledge
- the adaptation of services to meet unique cultural and linguistic needs.

Source: Cross, T. L., et al. (1989). *Toward a culturally competent system of care: A monograph on effective services for minority children who are severely emotionally disabled*. Washington, DC: CASSP Technical Assistance Center at Georgetown University Child Development Center. 7-13,18

Cultural Relevance in Prevention Planning

Is the prevention activity culturally relevant and applicable across sub-populations?

- Will the activity work with the focus populations you have identified, as well as with the population as a whole?
- What cultural elements such as language, attitudes, values, norms and customs do you need to consider in planning for implementation of the activity?
- How might you involve the focus populations in looking at the appropriateness of an activity?

Planning for Cultural Relevance Using the IOM Continuum of Care

Universal Prevention:

- Targeted to the general public or a whole population that has not been identified on the basis of individual risk.
- The intervention is desirable for everyone in that group.
- Universal interventions have advantages when their costs per individual are low, the intervention is effective and acceptable to the population, and there is a low risk from the intervention.
- Provide individuals with information and skills.

All prevention programs aim to prevent new cases, or delay the onset of disorder, or reduce the duration of disorder

Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities, 2009

Planning for Cultural Relevance Using the IOM Continuum of Care

Selective Prevention

- Targeted to individuals or a population subgroup whose risk of developing mental disorders is significantly higher than average.
- The risk may be imminent or it may be a lifetime risk.
- Selective interventions are most appropriate if their cost is moderate and if the risk of negative effects is minimal or nonexistent.
- Aimed at increasing protective factors and reducing risk factors

Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities, 2009

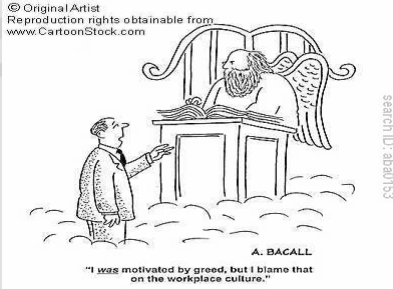
Planning for Cultural Relevance Using the IOM Continuum of Care

Indicated Prevention

- Targeted to high-risk individuals who are identified as having minimal but detectable signs or symptoms foreshadowing mental, emotional, or behavioral disorder, or biological markers indicating predisposition for such a disorder, but who do not meet diagnostic levels at the current time.
- Indicated interventions might be reasonable even if intervention costs are high and even if the intervention entails some risk.
- Aimed at delaying onset, reducing duration and severity; addressing cluster of risk factors.

Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities, 2009

Organizational Culture



Seven Domains

- **Organizational Values** - perspective/attitudes
- **Governance** - goal-setting, policy-making
- **Planning & Evaluation** - tracking and data
- **Communication** - within and outside the organization
- **Staff Development** - adequate resources to deliver services
- **Organizational Infrastructure** - resources
- **Services/Interventions** - delivery in a competent manner.

Organizational Values

Leadership, Investment & Documentation

- Investment of the organization
- Mission statement incorporates culture
- Strategic Plan includes CC.
- Staff are aware and invested in CC.
- Materials address CC and are appropriate to audience.

GUIDING QUESTIONS:

- In what ways is (or isn't!) the management structure culturally competent? How do we "know" it?
- Can we see cultural competence in our Strategic Plan?

Organizational Values (cont.)

- Information/Data Relevant to CC
 - Do we collect data on the culture of our communities?
 - Do we have mechanisms for disseminating data related to community culture?
 - Do we collect and *understand* client level data related to CC?
 - Does this data help us adapt our strategic plan and implementation of programs?
- Organizational Flexibility

GUIDING QUESTION:

- What are some barriers to collecting data in a culturally relevant way?

Governance

- Community Involvement
 - Is the community on our board? Does it represent the diversity of the community serviced?
- Board Development
 - Is there ongoing training for the board on CC?
- Policies
 - Are there formal policies in place related to CC, especially those regarding personnel recruitment, training, grievance processes, and community input?

Planning & Monitoring/Evaluation

- Client/Community & Staff Input
 - Is there membership on relevant committees?
 - Is there a process for obtaining staff input on CC and plans for improving CC?
 - Is there a process for obtaining staff/community input on evaluation processes?
- Plans & Implementation
 - Do the Strategic Plan and other documents incorporate CC?

Planning (cont.)

- Collecting/Using Culturally Competent information
 - Do our data sources support CC?
 - Does our evaluation plan support CC?
 - Do we use CC data when planning for programs?

Communication

- Different styles of client population
- Oral Communication
- Written Communication
- Communication with the Community
- Intra-organizational communication

GUIDING QUESTION:

- How do we accept feedback from the community on the usefulness of our work?

Staff Development

- Training Commitment
- Training Content
- Staff Performance

GUIDING QUESTION:

- How does the organization “value” training related to culture and competence? Is this integrated into our ongoing training efforts?

Organizational Infrastructure

- Financial
- Staffing
- Technology
- Physical facility
- Linkages

Services / Interventions

- Client/Family input
- Screening/Assessment
- Treatment/Follow-up

GUIDING QUESTIONS:

- Do we seek community input on what services we offer?
- How are programs tailored to the communities we serve?

Phew!



Questions or Comments?

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After many years of marital bliss,
tension enters the Kent household.
