

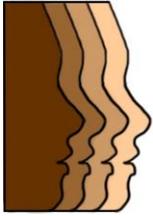
Center
for Cultural
Competence, Inc.

Appreciating our Similarities and Differences

Courses in Cultural Competence and Diversity



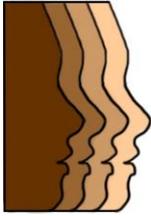
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Table of Contents

Recognizing and Managing Personal Biases	3
Communicating Across Cultures	4
Verbal and Non-Verbal Language Barriers	4
Understanding Cultural Beliefs and Practices	5
Cultural Competence in Healthcare	7
Child and Family Services	10
Working With Immigrant and Refugee Youth and Their Families	11
Law Enforcement	12
Interpreter Training and Testing	12



Recognizing and Managing Personal Biases

A good place to start on the journey to becoming more culturally competent is to look within. Everyone experiences automatic thoughts and feeling about others based on race, ethnicity, accents, socio-economic level, sexual orientation, gender, physical presentation (body weight, grooming, dress, tattoos, piercings, hair) etc. When you have an immediate reaction to someone, it's often because that person reminds you of someone you have known in the past, someone you've seen on TV, or someone your mother told you about. Your reaction may have nothing to do with the individual sitting in front of you. Many people may unconsciously generalize, thinking "Those people are all alike".

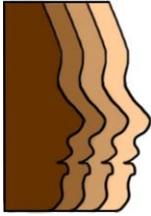
Unconscious bias is closely related to the many stereotypes that are widely shared: one group might be associated with street crime; another with stealing money on Wall Street; a third with alcoholism. If you meet someone who fits the stereotype, it is easy to think, "Aha! See..... They really are that way." In reality, stereotypes are true of some people within a group and untrue of others in that same group. "Those people" are not all the same. Each is a unique individual. Eliminating such thoughts and feelings may be impossible, but as responsible human beings, we can learn to *manage our prejudices* so that they do not affect the way we treat others or sway the decisions we make on behalf of the people we serve.



Within any cultural group there are great differences among people. Level of education, growing up in a rural area or the city, socio-economic class, traveling, and the values instilled by their parents will make someone similar to or different from others in their cultural group. "Those people" are not all the same.

Course participants will:

- Become aware of their personal cultural identity. Each participant will examine and describe his or her own cultural background, social identity, and cultural heritage to increase self-awareness of assumptions, values, beliefs, and biases.
- Learn to beware of stereotypes. Participants will learn that stereotypes are true of some individuals within a group and not true of others within that same group.



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Appreciating our Similarities and Differences

- Recognize that having biases are a natural part of being human. Participants will acknowledge their personal biases with respect to race, ethnicity, religion, language, socio-economic class, sexual orientation, body weight, physical presentation (clothing, tattoos, piercings, etc.), and other factors.
- Gain skill in managing personal biases. Participants will become familiar with ways to reduce the effect of personal biases on relationships.
- Learn to avoid and respond to micro-aggressions. A micro-aggression is a subtle and often unintentional offense (e.g. “You are very smart for someone of your race/ethnicity.”) Participants will learn to avoid committing micro-aggressions against others and will gain ideas about how to respond when they are the object of a micro-aggression.



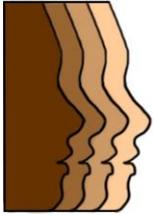
Communicating Across Cultures

Communication has many purposes including creating or deepening relationships, giving and receiving information, expressing feelings, altering someone’s opinion, and causing someone to take an action. Course participants will consider ways to communicate most effectively with people of diverse backgrounds. Participants will enhance their skills in answering these questions:

- What can I say or do to generate trust?
- What is the other person thinking and feeling?
- What message do I need to convey?
- What information do I need from the other person?
- How do I demonstrate that I am listening?
- What words should I use to make it more likely that the person will understand me, give me the information I need, allow me to help them, and follow instructions?

Verbal and Non-Verbal Language Barriers

Course participants will:

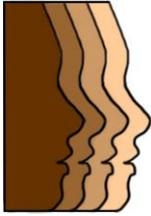


- Learn techniques for communicating through trained interpreters. Participants will learn to maintain eye contact with the patient, pace their speaking to make it easier for the interpreter, and ask for clarification to ensure everyone has understood one another.
- Become familiar with laws and regulations associated with using a trained interpreter.
- Learn to guide untrained interpreters to increase accuracy. It is always preferable to work with a qualified interpreter, but sometimes it is not possible. Untrained interpreters often distort what was said. They leave out important details and add their own opinions. They may not know medical terms. Participants will learn to direct untrained interpreters to interpret everything that was said, without adding, omitting, or changing any part of the message.
- Discuss fair and realistic policies for employees who wish to speak foreign languages in the workplace.
- Improve communication with people who speak English with an accent.
- Become familiar with the diversity in non-verbal communication. Participants will gain awareness of how easy it is to misinterpret the non-verbal cues of people from other cultures, including eye contact, facial expressions, physical space, gestures, and physical contact.

Understanding Cultural Beliefs and Practices

There are great differences in beliefs and practices among racial and ethnic groups. At the same time, there is great diversity within groups based on factors such as: socio-economic level, whether someone is from a rural or urban area, the degree of exposure to different ideas, and each individual's personal life experiences. The best way to understand someone else's cultural beliefs and practices is to ask them.

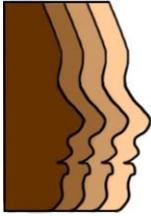
Participants will practice talking with others about cultural beliefs and practices based on these elements of culture:



Elements of Culture

- History
 - Why are they in the U.S. and how did they get here?
 - What trauma has the group suffered?
 - What is the group proud of?
 - What is the group ashamed of?
- Self-determined race / ethnicity – immigrants and refugees may be confused / surprised by how they are categorized in the U.S.
- Language
- Holidays
- Food
- Music
- Dress
- Responsibility to the family or community vs. individual orientation
- Religious and spiritual beliefs
- Gender roles
- Morality – What is right and wrong?
- Obedience and respect for authority vs. self-expression and self-determination
- Dating and Marriage
- Sexual behavior
- Role of extended family
- Privacy
- Taboo subjects that are typically not discussed
- Cleanliness and Hygiene
- Attitudes about time
- Health beliefs and practices
 - Belief in non-biomedical causes of disease
 - Reliance on folk/traditional healers and remedies
 - Attitudes toward doctors and drugs
 - Norms about having a provider of the other gender
 - Beliefs and practices regarding pregnancy, child birth, and child care
 - Who makes health-related decisions?
- Child-rearing practices
 - Feeding





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Appreciating our Similarities and Differences

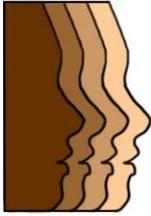
- Sleeping
- Bathing
- Toilet training
- Discipline and Rewards
- Education
- Independence vs. Supervision

Cultural Competence in Healthcare

In order for patients to be healthy, patients and providers must do the following:

1. Patients of all cultural backgrounds must be willing and able to come for preventive and therapeutic services. Both clinical and non-clinical staff have a role in creating a comfortable environment for patients of diverse cultural backgrounds. Patients who are uncomfortable vote with their feet by simply not returning.
2. Clinical and non-clinical staff who have contact with patients must recognize how conscious and unconscious prejudices may affect their ability to put the patient at ease.
3. The provider must help the patient to give a complete and accurate history so that she can make an accurate diagnosis. Diagnostic errors are made more frequently when the provider has failed to get a full history.
4. The provider must recognize how conscious and unconscious prejudices can influence the diagnostic and treatment plan. Providers who believe in equality may unconsciously make decisions based on the patient's race, ethnicity, religion, gender, sexual orientation, socio-economic class, and physical presentation (clothing, grooming, tattoos, etc.)
5. The provider and patient must negotiate a treatment plan that the patient understands and is motivated to follow. The provider must set the tone for open communication so that the patient can express any concern or confusion regarding the treatment plan. The patient's cultural beliefs and practices must be accommodated in the plan.





6. The provider and patient must have an honest conversation about the use of traditional or alternative remedies. Some of these substances are helpful; others contain toxic metals or pharmacological agents that interact with prescribed medication. Some patients will not adhere to medical advice that conflicts with recommendations of traditional healers or family members. Providers can learn to encourage an open discussion about these matters.

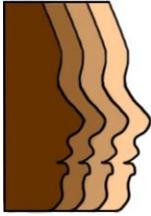
7. The provider must ensure the patient fully understands the treatment plan by asking the patient to explain it in his or her own words or by having the patient actually demonstrate what must be done at home. Patients across all racial and ethnic groups often fail to take medications correctly or otherwise follow a treatment plan, but adherence is especially poor among patients with language barriers and those with limited health literacy. Further, patients who do not trust their providers are less likely to adhere to medical advice.



8. Patients with limited English proficiency must have qualified interpreters. Patients and family members who speak *some* English as well as providers with a limited ability to speak the patient's language can be dangerously overconfident. They may appear to be communicating adequately but they often make communication errors about the patient's medical history or the treatment plan, potentially endangering the patient.

9. Clinical and non-clinical personnel must ensure that the patient receives the necessary support at home to make health-related changes in behavior. Medical advice regarding changes in diet, exercise, smoking, sexual behavior, and substance abuse is often ignored. In many cultures, extended family plays an important role in facilitating or inhibiting healthy life style changes. It may be essential to enlist their help.

10. Clinical and non-clinical personnel must establish policies and procedures to meet the needs of patients of diverse cultural backgrounds, and those with limited English proficiency and health literacy.

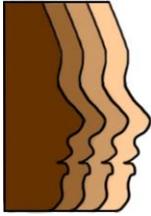


Further it is essential for clinical and non-clinical staff to work together as a team, in a congenial and mutually-supportive environment that celebrates the cultural diversity of the staff. Poor teamwork and low employee morale reduces the quality of services.

Course participants will:

- Recognize that cultural competent patient-centered care is essential for the work they do. Participants will become familiar with studies that demonstrate how culturally competent patient-centered care affects health outcomes and costs.
- Deliver more effective patient education. Providers will learn to explain medical information in a way that is more understandable to the patient. Providers will ask themselves, “What must the patient know in order to make informed medical decisions?” and “What must the patient know in order to care for themselves safely at home?” and “What could go wrong at home – and what should the patient do to prevent or respond to a problem?”
- Interview patients about their personal goals, health beliefs and concerns. It requires skill for the provider to engage the patient in negotiating a treatment plan that incorporates the patient’s beliefs and addresses personal priorities and fears. Providers will learn techniques for engaging patients in that conversation.
- Learn to use the “teach back” and “show me” methods to improve adherence. Many people nod in agreement when providers ask if they have understood medical instructions. Providers will learn to have patients describe the instructions in their own words and to ask the patient to demonstrate skills like changing a surgical dressing or using an inhaler.
- Enlisting the support of family members. Family members and others in the patient’s support system play a large role in whether or not the patient adheres to medical advice. Providers will learn to encourage the help of family members and to uncover any concerns that family members may have about the treatment plan.





Florida
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Appreciating our Similarities and Differences

- Become familiar with traditional or folk medicine. Participants receive information about remedies made from herbs and natural elements and will become aware that some patients prefer traditional methods to prescribed medicine; other patients may use both with the potential for adverse interactions.
- Receive a tool for engaging clients about their health beliefs and practices, and use of alternative healing methods in order to improve adherence to medical advice. Participants will be introduced to a tool for negotiating good health practices, based on asking questions and formulating a plan that is consistent with the patient's beliefs.
- Be aware of different expressions of physical and mental pain. Some people suffer pain quietly; others are very emotive. Providers should not judge pain levels only by the patient's affect, but rather, should ask the patient.

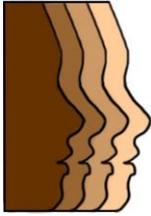
Child and Family Services

People of all cultural backgrounds have strongly held beliefs about raising children. Social services should be responsive to the cultural beliefs and practices of each family. This can be accomplished through conducting an assessment including such topics as: how decisions are made, concepts of right and wrong, religious beliefs, gender roles, fears and hopes that parents have for their children, disciplining children, family co-sleeping, use of traditional or folkloric healing methods, beliefs about appropriate child behavior, and relying on children to be English language interpreters. The purpose of the assessment is to learn about each family in order to provide services that make sense to them.

Course participants will:

- Review the elements of culture and apply these concepts to their own cultural groups. Participants will practice interviewing one another about their own cultural backgrounds.
- Learn about the cultural beliefs and practices of selected ethnic groups. Participants will become familiar with traditional beliefs and practices of selected populations, while





recognizing that there is great diversity within cultural groups based on factors such as: socio-economic level, whether someone is from a rural or urban area, the degree of exposure to different ideas, and each individual's personal life experiences.

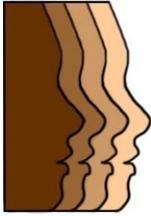
- Be introduced to the effects of racism and other forms of prejudice on the health and social development of children. Participants will discuss ways to help families cope with prejudice.
- Recognize the specific challenges of LGBTQ youth and same sex parents. Participants will receive a brief introduction to research demonstrating that alternative sexual orientation and identity should not be treated as a pathology, but rather a normal variation in human behavior. They will address their own biases and recognize the psychological trauma experienced by many people in LGBTQ community.

Working With Immigrant and Refugee Youth and Their Families

Children of immigrants must learn to navigate between the culture of their parents and the dominant U.S. culture. This frequently leads to intergenerational conflict, as young people and their parents struggle to establish norms of behavior that they each can tolerate. Children of immigrants are often asked to assume adult responsibilities in their families, especially if their parents don't speak English. This disrupts normal family roles, with children and youth becoming "parentified". Further, many immigrant families have experienced trauma in their home countries, from which they may not have recovered psychologically.



- Course participants will gain familiarity with the challenges of immigrant families. They will:
 - Recognize and address the trauma immigrant families may have experienced in the home country.
 - Identify strategies for helping immigrant families to retain appropriate parent-child/adolescent roles particularly when parents don't speak English.
 - Develop approaches to help immigrant parents and youth negotiate helpful solutions to intercultural conflicts.
 - Learn ways to help immigrant youth develop a positive cultural identity.



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Appreciating our Similarities and Differences

Law Enforcement

All human beings have biases associated with race, ethnicity, physical appearance, socio-economic level, etc. Police officers must frequently respond to potentially dangerous situations. It is important for them to acknowledge that they, like every other human being, have unconscious biases. Police officers can learn to acknowledge and manage their biases so they can fairly assess each individual they encounter in the line of duty.



At the same time, police officers must contend with stereotypes about *them*. People in the community have automatic thoughts and feelings about police officers, based on what they have seen in the news, or in movies, or what they have been told. In order to establish trust, police officers must distinguish themselves as individual human beings, whom people in the community can relate to.

Course participants will:

- Learn to recognize and manage their biases.
- Discuss strategies for managing the biases of the community regarding police officers. Participants will discuss ways to challenge stereotypes about police officers and change the automatic thoughts and feelings that people have about them.
- Become aware of research on unconscious bias in the criminal justice system. Participants will receive a brief overview of how race and ethnicity affect rates of arrest and conviction.

Interpreter Training and Testing

Untrained bilingual employees are often called upon to interpret, even in organizations that have policies requiring the use of qualified interpreters. Untrained interpreters make errors that alter important decisions. They may not have enough vocabulary to interpret accurately. They often leave out important details, add their own opinions, and change the meaning of what people intended to say to each other. Participants will learn proper interpreting techniques and ethics and will be given an oral exam.