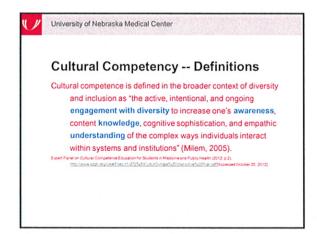


Outline

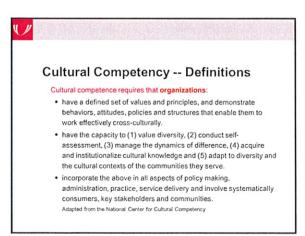
Definitions of cultural competence
Challenges of cultural competence
Integrating Two Frameworks
Cultural Humility
Public Health Critical Race Praxis
Cultural Competence Questions



Cultural Competency -- Definitions

Cultural and linguistic competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.

Office of Minority Health, US Department of Health and Human Services.





Both individuals and organizations are at various levels of awareness, knowledge and skills along the cultural competence continuum.



What is culture?

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

"Culture is the ways of thinking, the ways of acting and the material objects that together form a people's way of life." (Macionis, Society the Basics, 2008)



What is competence?

'Competence' implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities. (Adapted from Cross, 1989).



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CULTURAL COMPETENCE – CHALLENGES?



Culture Competence - Challenges

Culture relates to race/ethnicity?

Dominant groups are the norm

- 1. The locus of normalcy is white, Western, Christian
 - "White" is excluded from the concept of cultural diversity
- The "other" is problematic, challenging and confounding and "competence" in working with the "other" requires a mastery of a finite body of knowledge



Culture Competence - Challenges

Culture is something that the "other" has

Dominant groups do not have "culture" and they are the "norm," "neutral," "real," "less racial" and no critical insight into "normative unearned privileges"

Culture Competence – Challenges

"Deficit approach": Inequality is due to the disadvantages in the subordinate groups and not the advantages in the dominant group?

Cultural competence requires a tolerant and confident attitude, celebrating diversity and supporting the status quo

Culture Competence – Challenges

Increase in knowledge of or exposure to the "other" is sufficient and such knowledge is finite

Cultural competence is the mastery of a checklist of dos and don't about the "other"

Culture Competence – Challenges

Structural inequities are ignored

- White privilege and power inequality are not examined
- 2. Acts of commission vs. acts of omission

Culture Competence – Challenges

Does not consider the impact of the intersection of multiple structural inequities including racism on health disparities.

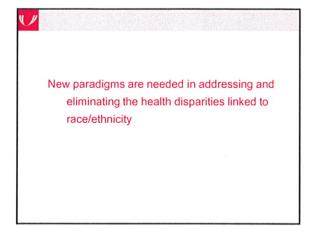
Cultural humility is not considered

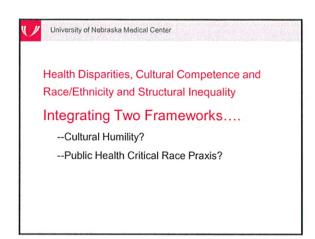
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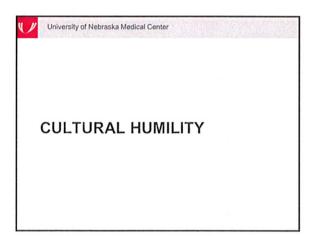
Cultural competence is conceptualized as **one of the keys ways** to address
racial/ethnic disparities in public health and
health care

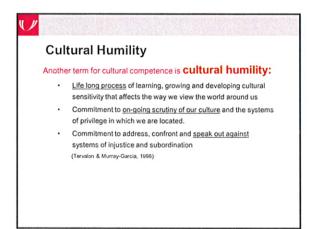
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For cultural competence to better address racial/ethnic health disparities....requires an incorporation of a broader discourse that reflects a critical understanding of the underlying socio-political and economic processes of power, privilege and institutional racism that create, support and maintain existing health disparities

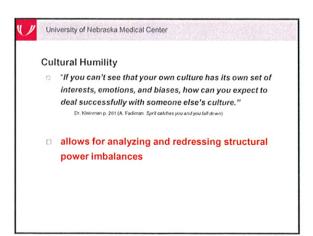


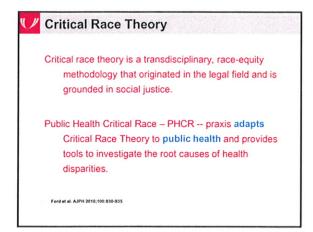


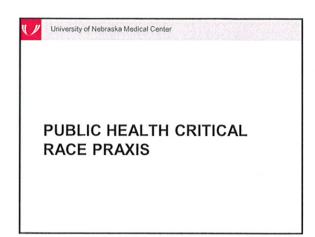


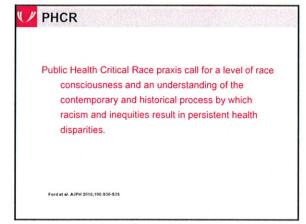


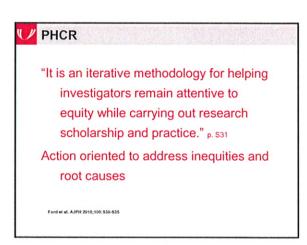
Cultural competence is a journey.
It is a developmental process that evolves over an extended period.

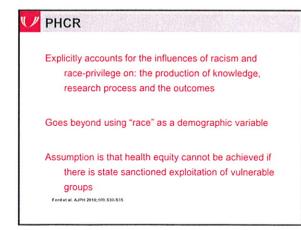
















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Racism...

An organized system rooted in an ideology of white supremacy and inferiority of racial/ethnic groups and is linked to sociocultural and political power to categorize, stereotype, marginalize, rank, and allocate societal resources unequally across groups of people



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Racism...

Influences a persons life chances and access to valued resources in society that are critical to ones health, social well-being and the ability to live ones life with dignity and grace.



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Racism and Health

Health consequences of race, racism and racial classifications are very real

Over a century ago, W.E.B. Du Bois, a sociologist underscored the primacy of social factors in explaining the stark disparities between blacks and whites

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Given the primacy of race and racialization in structural inequities, an understanding of the underlying socio-political process of racialization and racism is essential in tackling health disparities.

These racial inequities that are embedded in social institutions or the social determinant of health cause systematic differences between groups that ultimately lead to health disparities at the population level.

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PHCR Concepts and Cultural Competence

Centering in the margins

Making the perspectives of socially marginalized groups, rather than those of people belonging to dominant race or culture, the central axis around which discourse on a topic revolves

Ford et al. AJPH 2010;100:S30-S35; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8

PHCR Concepts and Cultural Competence

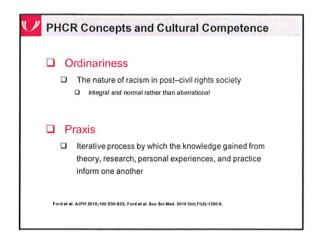
☐ Critical consciousness

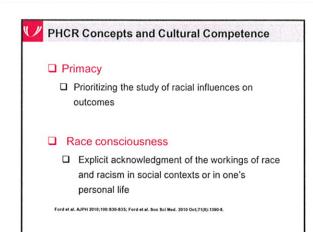
 Digging beneath the surface for information to develop deeper understandings of concepts, relationships, and personal biases

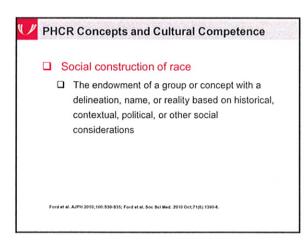
Experiential knowledge

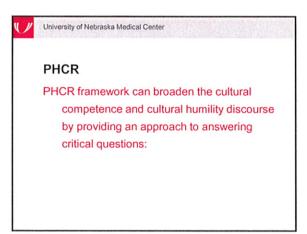
Ways of knowing that result from critical analysis of one's personal experiences

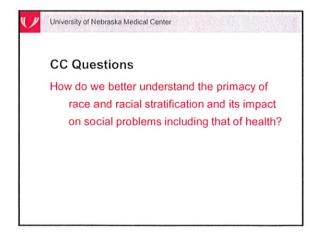
Ford et al. AJPH 2010;100:S30-S35; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8.

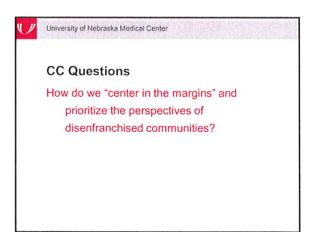


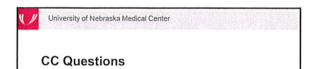






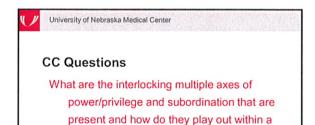






What are the aspects of contemporary everyday racism that might undergird a persons experience and their health?

CC Questions How does both the structural and socio-cultural process of racialization and possible disciplinary biases influence the definition of "culture" and the "other" and what methodologies can we use to give voice to the marginalized?



practice or research environment?

