Cultural Competency in Prevention Programs

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Training Objectives

- Define cultural competence
- Appreciate the importance of self-awareness when working with people from other cultures
- Describe how cultural and social factors can affect a client’s/families approach and experience of care
- Work effectively with clients/families from other cultures
- Know and understand the diversity of culture
- Build an understanding of the cultural factors of the different Hispanic communities providers serve

Our Goals

- To help health prevention professionals respond effectively to the growing needs of millions of racial and ethnic minorities in the state of Arizona
- To improve provider-client interactions with diverse communities through training and education
Hispanics are the Fastest-Growing Minority Group

Between 2000 and 2005, the Hispanic population increased by 20.9% in the US.

Source: U.S. Census Bureau. Population estimates program. April 1, 2000; July 1, 2001; July 1, 2002; July 1, 2003; July 1, 2004; and July 1, 2005.

Persons of Hispanic Origin in Arizona

Hispanics in the state of Arizona constitute 30.1% of the nation's total Hispanic population.


The Compelling Need for Cultural Competence Demographics
**Introduction**

- Cultural Competence: Definition
- Client's Perspective: Help-Seeking Behaviors and Attitudes Toward Providers
- Culturally Competent Systems
- Cultural Competence at the Individual Level
- Self-Awareness: Recognize Provider's Own Potential for Bias

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**Cultural Competence: Definition**

A set of values, behaviors, attitudes and practices within a system, organization, program or among individuals which enables them to work effectively cross-culturally.

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**Client’s Perspective**

- Fear of Contacting Provider
- Confusion
- Feeling Uncomfortable
- Feeling Unwelcomed
- Delayed Service

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Help-Seeking Behaviors and Attitudes Toward Providers

Language Barriers
- English-speaking Hispanics/Latinos are afforded more benefits when seeking health care as compared to non-English-speaking Hispanics/Latinos (Solis, Marks, Garcia, & Shelton, 1990)

Lack of Health Insurance- Economics/Social Class
- African Americans
- Teen Parents
- Single Parents

Challenges
- The influence of culture on help-seeking behaviors and attitudes toward providers
- Providers from culturally and linguistically diverse groups are under-represented
- Social Norms are created by majority populations
- Develop culturally competent systems

Culturally Competent Systems
- Value differences and similarities among all people
- Understand and effectively respond to cultural differences
- Engage in cultural self-assessment at the individual and organizational level
- Make adaptations to the delivery of services
- Institutionalize cultural knowledge
**Cultural Competence at the Individual Level**

An examination of one’s own attitude and values and the acquisition of the values, knowledge, skills and attributes that will allow an individual to work appropriately in cross-cultural situations.

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**How to Proceed**

- Build a Relationship
- Identify Social Factors and Cultural Beliefs
- Develop Self-Awareness

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**Build a Relationship**

- Respect
- Empathy
- Interest in psychosocial environment
- Ability to listen

"Tell me more, I'd like to understand"

- No offense, but…
Identify Social Factors

- Be an advocate
- Identify community resources
- Assist with accessing support systems
- Enlist help from school nurses and social workers
- Consider referral for individual and/or family counseling

Self-Awareness: Recognize Provider’s Own Potential for Bias

- What client behaviors make me uncomfortable?
- How do I respond when I am uncomfortable?
- What are my biases?
- What keeps me from truly putting myself in other's shoes?

- Do I really believe that other ideas are valued?
- What are my own cultural beliefs?
- When I judge others, what am I feeling?
- How do I feel when clients don’t do what I say?

Provider’s Own Potential for Bias Continued

- Previous research has shown that Hispanics/Latinos are less likely than Whites to receive adequate treatment even when controlling for variables such as age, insurance coverage, and education (Kaiser Family Foundation, 1999).
- Hispanic/Latino individuals may perceive English-only written materials and a lack of Spanish-speaking personnel as unwelcoming or discriminatory (Collins, Hall, & Neuhaus, 1999).
- Hispanics and African Americans are more likely than Whites to perceive that 1) they would have received better medical care if they belonged to a different race/ethnic group; and 2) medical staff judged them unfairly or treated them with disrespectful based on race/ethnicity and how well they speak English (Johnson, Saha, Arbelaez, Beach, & Cooper, 2004).
Examples...

- Ms. L. has a Hispanic surname and speaks with an accent
- She is insulted when she goes in for a visit and staff assume she does not speak or understand English

Model for Cultural Competence

- Personal values and attitudes
- Communication styles
- Community participation
- Learning environments
- Client-sensitive practice
- Policies and procedures
- Training and professional development

Summary

- Cultural Competence: Definition
- Client’s Perspective: Help-Seeking Behaviors and Attitudes Toward Providers
- Culturally Competent Systems
- Cultural Competence at the Individual Level
- Self-Awareness: Recognize Provider’s Own Potential for Bias
Overview: Health Disparities

- Hispanic Cultural Values
- The Client-Provider Interaction
- Practice Exercise
- Verbal and Nonverbal Communication
- Culturally-Based Assessments and Treatment Plans
- Relating to the Client’s Family

Hispanic Cultural Values

- Spending time with Family
- Cakes and Sweets
- Friendship
- Extended Families
- Education
- Eye Contact
- Friendly Physical Contact
- Respect
- Education
African American Cultural Values
- Cultural Language
- Equality
- Respect
- Education
- Status
- History
- Strong Female Head
- Extended Families

Native American Cultural Values
- No Eye Contact
- Limited Physical Contact
- Respect for Elders
- History
- Language
- Land
- Children
- Extended Families

The Client-Provider Interaction
- Do not allow biases to keep you from treating every person equally
  - Stereotyping
  - Prejudices
Avoid Stereotyping
- People from rural areas vs. urban areas
- Economic status and education can vary greatly
- Different reasons for migration to the US
- Cultural variations may be different among generations
- Single Parent Women

Prior Assumptions and Prejudice
- Unfounded assumptions that lead to prejudicial thoughts
- Often untested and unexamined, yet they shape how we act
- Bring these assumptions and prejudices to the surface and examine them

Health Disparities Continued
- Awareness of positive and negative assumptions about others
- Cultural competence takes consistent practice over time
- Impact of the quality of the client-provider interaction
  - Client’s ability to communicate with their provider and to adhere to recommended treatment
Verbal and Nonverbal Communication

- Facial expressions
- Personal space
- Touching
- Eye contact
- Voice Intonation

Facial Expressions

- A smile sometimes reflects feelings of being uncomfortable
- Winking can be considered as a romantic or sexual invitation
- Some individuals will point to an object by shifting their eyes toward it because pointing with a finger is impolite
Facial Expressions

From the Provider’s Perspective
- A provider’s facial expression has the power to express respect and warmth.
- A provider can attempt to find common ground through a facial expression, such as one that might acknowledge the long wait time in the clinic or another factor in the immediate environment.

Gestures

From the Provider’s Perspective
- Gestures are as important as words.
- It is important for a provider to stand up, walk over to, and greet the client when he or she first enters the provider’s office.
- The provider can also gesture for the client to sit down to make the client feel more welcome.

Personal Space

- Hispanics are accustomed to standing and sitting close to people who are not well known to them.
Touching

A strong, warm handshake is the traditional greeting between Hispanic men.

Light touching of the arm or a light kiss to the cheek is very common, even among people who have just met.

Eye Contact

- Making eye contact is critical and refusing to make direct eye contact may be considered a sign of disrespect.
- In some traditional families, young children are taught not to look adults in the eye because to do so would be considered an act of defiance.

Eye Contact

From the Provider’s Perspective

- Demonstrates respect for the client
- Concern regarding what the client has to say, and to convey a sense of caring
- Providers must find a balance of the right amount and appropriate timing of eye contact
Voice Intonation

From the Provider's Perspective
- When addressing clients with limited English proficiency, it is important to speak in a warm, friendly and moderate tone of voice.
- Speaking loudly is not likely to increase the client's ability to comprehend English.

Verbal and Nonverbal Communication: Important Points to Remember
- A handshake is expected at the initial encounter and at the end by both male and female clients.
- Making eye contact is critical; however, gender differences between client and provider help define appropriate eye contact.
- ALL clients appreciate providers who greet them with a warm, friendly, and moderate tone of voice.

Important Points to Remember Continued
- Unless a provider is fluent in the client's language, a trained interpreter should always be utilized.
- Being aware of cultural practices can improve a provider's ability to communicate and effectively treat racial and ethnic minority clients.
How to Improve Client-Provider Interaction

- Adopt Culturally-Based Assessments and Treatment Plans

Culturally-Based Assessments and Treatment Plans

Cultural assessment is a systematic appraisal or examination of individuals, groups, and communities as to their cultural beliefs, values, and practices to determine explicit needs and intervention practices within the cultural context of the people being evaluated.

Leininger (1978)

The LEARN Approach

- Listen
- Explain
- Acknowledge
- Recommend
- Negotiate

(Berlin & Fowkes, 1983)
Relating to the Client’s Family

- A client's problems are also considered the family's problems
- Providers must address the client’s problem in the context of his or her family
- Family members can provide valuable information regarding the client's behavior and daily activities

Relating to the Client’s Family Continued

Pregnancy and Childbirth

- A provider needs to be ready to involve the mother or mother-in-law in the development of the client’s care plan during the pregnancy and after childbirth

Relating to the Client’s Family Continued

Gender and Taboos

- If a client does not speak English and an interpreter is not available, be careful about using a family member to interpret for the client
Family’s Concerns About Respect

- Tendency to avoid disagreeing or expressing doubts to the provider
- Reluctant to ask questions or admit confusion about instructions or treatment
- Cultural taboo against expressing negative feelings directly
- A client may withhold information, not follow treatment orders, or terminate care

Relating to the Client’s Family: Points to Remember

- Maintain open lines of communication with family members
- Discuss with the client the patterns of decision-making in the family
- Understand the complex and delicate interactions that may exist between family members
- Work with family members as a valuable resource, rather than an intrusion into the provider-client relationship

Summary

- Cultural Values
- The Client-Provider Interaction
- Practice Exercise
- Verbal and Nonverbal Communication
- Culturally-Based Assessments and Treatment Plans
- Relating to the Client’s Family
Group Activity
What would I want to say?

Understanding Cultural Influences

Overview

- Strengths and Protective Factors in diverse Families and Communities
- Challenges to Well-Being of racial and ethnic minority Communities
- Principles for Culturally Competent Services for racial and ethnic minority Families and Communities
Strengths and Protective Factors in Diverse Families and Communities

**The Family**
- Family involvement and family support is critical in the care of the client
- Emphasis on interdependence over independence, and cooperation over competition

**The Community**
- Community-based organizations within diverse neighborhoods, provide a significant point of entry and opportunity to expand or any outreach effort
Challenges to Well-Being of Diverse Communities

- Distance from family and inter-generational family conflict
- Stressors
- Alcohol and substance abuse
- Domestic violence
Distance from family and inter-generational family conflict

- Migration, single parent families and separation from family may cause stress
- The values of young and old may clash with those of other family members

Stressors

- Acculturative Stress
  Ex: Immigrants who are faced with the turmoil of leaving their homeland and adapting to a new society

- Socioeconomic Stress
  Ex: Ethnic minorities who feel disempowered because of inadequate financial resources and limited social class standing

Alcohol and Substance Abuse

- Extensive variation in the prevalence of substance abuse, alcohol dependence, and need for illicit drug abuse treatment among African American and Native American groups

Mexicans and Puerto Ricans have high prevalence of illicit drug use, heavy alcohol use, alcohol dependence, and need for illicit drug abuse treatment

Source: Substance Abuse and Mental Health Services Administration (SAMHSA)
Domestic Violence

- Hispanic couples are two to three times more likely to report male-to-female and female-to-male partner violence than White couples, even after controlling for socio-demographic and psychosocial variables, including alcohol consumption (Field & Caetano, 2003).

Principles for Culturally Competent Services

- Culture plays a key role in our ability to influence the client’s behavior.
- Do not let cultural barriers limit your ability to meet the needs of your clients.
- By deepening our understanding of culture we can strengthen the promise of high-quality care and services that are accessible, effective, and cost efficient.

Culturally Competent Prevention Services

- Involve Family Members
- Reach out to the Community
- Get Personal
- Show Respect
Culturally Competent Systems

- Value differences and similarities among all people
- Understand and effectively respond to cultural differences
- Engage in cultural self-assessment at the individual and organizational level
- Make adaptations to the delivery of services
- Institutionalize cultural knowledge

Summary

- Strengths and Protective Factors in Diverse and Communities
- Challenges to Well-Being of Racial and Ethnic Minority Communities
- Principles for Culturally Competent Services for Racial and Ethnic Minority Families and Communities

Summary and Conclusions

- Learning about cultural competence is an ongoing process
- Have a good knowledge and understanding of your own cultural beliefs and values
- Understand the different nuances of the Hispanic communities with which you work
- Be committed to developing the skills and knowledge needed to work with culturally diverse groups of Hispanics
Contact Information

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