

# Cultural Competency



What is cultural competency?

Why is it important?

Is my organization culturally competent?

How do we develop cultural competency?

What tools are available?



The rich diversity that typifies many communities in the United States contributes to the vitality and strength of the nation as a whole. At the same time, it presents a number of challenges for individuals and organizations committed to addressing the health care and support service needs of local residents. In this context, this tool offers a discussion of cultural competence and a set of helpful resources designed for Board members, staff, and other stakeholders of community-based organizations (CBOs) engaged in the design and delivery of health services.

In light of the strong roots of many CBOs in their communities and the nature of the services they offer, responsiveness to a wide range of racial, ethnic, linguistic, age, and gender groups is essential to their success. As a result, careful consideration of the cultural diversity within their service areas and its importance in the design and operation of community-based health programs is often central to the work of CBOs.

In adapting to the strengths and challenges presented by cultural diversity, CBOs understand that migration, new arrivals, fluctuating birth rates, aging populations, and

social change can transform the communities they serve over time. Therefore, ongoing assessment and analysis are vital to maintaining and enhancing the contribution of CBOs to the attainment of positive health outcomes for local residents.

### **Cultural Competence Defined**

During the Cultural Competency Institute sponsored by the Annie E. Casey Foundation (AECF) and hosted by the Academy for Educational Development (AED) as part of the 2002 Community Health Summit, culture was defined as the structure of behaviors, ideas, attitudes, values, habits, beliefs, customs, language, rituals, ceremonies, and practices of a particular group of people that provides them with a general design for living and patterns for interpreting behavior. In viewing this definition at the community level, culture is an important determinant of how individuals perceive and respond to the world around them.

In addition to offering this conceptual framework for discussions of culture, the Institute provided a general definition of competence as having the knowledge, skills, and abilities to be effective in a particular area.



Further, competence was defined as the attainment of a level of mastery.

Building on these two definitions, cultural competence is an understanding of differences among groups, accompanied by the knowledge, skills, and abilities to translate these differences into appropriate attitudes and behaviors. By applying this framework to the work of CBOs in their communities, cultural competency enhances their organizational capacity to respond effectively to the needs of those they exist to serve.

### **The Importance of Cultural Competence**

There are a number of reasons why a focus on cultural competency is important for CBOs and other service organizations. It is undeniable that the population of the nation has undergone and continues to experience significant change. As evidenced by the Census 2000, many racial, ethnic, and linguistic minority groups have grown significantly.

Continuing a trend established over the last several decades, some groups in the United States, such as African Americans, Asians, and Latinos, have maintained rates of growth greater than that for the country as a whole. As a result, the composition and nature of a number of communities has been gradually, and in some cases rapidly, transformed.

Given this ongoing change at the community level, perhaps the most important reason for enhancing the capacity of CBOs in terms of cultural competency is rooted in their purposes and goals. As community institutions

committed to responding to the health needs of local residents within their target areas, they have a mandate to adapt to the changing social fabric to remain true to their missions.

At the level of program operations, developing cultural competence is often a matter of necessity for CBOs. For example, to the extent that the number of non-English speakers increases, CBOs are hard pressed to understand and appropriately respond to the health issues of these community residents if staff members are unable to communicate with them. Beyond language, there are vast differences among cultures regarding attitudes and openness related to health concerns, and an awareness of these differences can be essential to the success of health professionals. Similarly, efforts to reach out to community residents and inform them about available programs and services may be ineffective when the messages are not shaped in language and tone appropriate to the intended audiences.

Aside from the organizational commitment to cultural competency and its programmatic importance, there are also practical business reasons for developing and enhancing the capacity to work effectively with diverse communities. Increasingly, federal, state, and local agencies require that potential and current grantees demonstrate their cultural competency as a condition of funding. Similarly, many private foundations and corporate giving programs are often most interested in supporting CBOs that are reflective of and responsive to the diverse groups within their communities.

## **Culturally Competent Organizations**

What makes a CBO culturally competent? There is no single response to this question. Cultural competence at the organizational level is not solely a program or initiative. Instead, it is a commitment that is widely shared among CBO Board members and staff, and reinforced in all aspects of policy development, program management, and service delivery.

There is substantial variation from one CBO to the next in terms of history, mission, organizational structure, and programming. However, those that are culturally competent generally share a common set of values that includes:

- Understanding and accepting the diverse cultures represented in the community;
  - Recognizing the social, political, and economic climates of the community within cultural contexts;
  - Honoring the inherent ability of communities to recognize their own problems and intervene appropriately on their own behalf;
  - Sharing limited resources effectively and equitably among competing needs;
  - Sharing power with the community and ensuring that the contributions of community residents are valued and respected; and
  - Providing community residents with full and timely access to information.
- Integrating awareness of and sensitivity to diverse community residents in organizational policies and procedures;
  - Involving representative groups of community residents in a meaningful way in the planning and program development processes;
  - Conducting organizational self-assessments of the level of cultural competency among Board members and staff;
  - Developing performance objectives for outreach and service to diverse community groups, and measuring progress towards their attainment;

How these values are embedded in the policies and programs of culturally competent CBOs is based on their unique communities, strengths, and organizational structures.

## **Attaining Cultural Competence**

CBOs are as diverse as the communities they serve. Therefore, each CBO undertaking efforts to enhance its level of cultural competency should use strategies that are best matched to its own organizational context. In short, as is so often the case, one size does not fit all.

While there is not an approach that is universally best, there are a number of strategies that have been used successfully by CBOs to develop their capacities to work effectively with diverse groups within their communities. Some examples include:



- Recruiting and retaining Board members that are representative of the population of the organization's target area;
- Employing program and management staff throughout the organization that are reflective of the diversity within the community; and
- Offering staff and Board members opportunities for participation in professional development activities related to diversity and cultural competence.

These, among other strategies, have proven effective in helping to shape culturally competent organizations, particularly when applied as part of a sustained effort engaging CBO Board members, staff, and community residents.

### **Cultural Competency Tools**

Cultural competency and diversity have been regular topics of discussion during the AECF Community Health Summits. Over the last five years, AED has adapted and created new tools designed to support individuals and organizations in exploring their own levels of cultural competence. Three of these tools, including a survey instrument and two worksheets, are described in the following paragraphs.

**Cultural Competency Survey.** To inform the discussions during the Cultural Competency Institute and 2002 Summit, AED worked in collaboration with AECF in the development

and administration of a survey instrument designed to yield insights related to the cross-cultural strengths and weaknesses of the CBOs represented by the respondents. Based on the lively discussion during the Institute and Summit, the survey was successful in engaging participants in the process of assessing the cultural competency of their organizations.

As presented below, the survey consists of 37 questions organized in six primary categories. These categories include:

- Knowing your community
- Agency resources and community connections
- Organizational staffing
- Organizational policies and procedures
- Community outreach
- Service provision and culture

“...cultural competence is an understanding of differences among groups, accompanied by the knowledge, skills, and abilities to translate these differences into appropriate attitudes and behaviors.”

Within each category, participants are asked to provide a scaled rating or Yes/No response, as appropriate to the question.

The survey form is designed for completion by both Board members and organizational staff. To administer the survey, it is recommended that responsibility for distribution, collection, and summation of results be assigned to a small committee consisting of Board and staff representatives.

In terms of distribution, one effective approach is to share the form at a meeting scheduled for this purpose. This will provide an opportunity to discuss the purpose of the survey and respond to any questions that may arise.

Alternatively, the survey can be mailed (either by regular or electronic mail) to targeted respondents, accompanied by an explanatory letter. Ideally, all Board members and staff should be encouraged to participate.

Regardless of the method used to distribute the survey, respondents should be asked to return the form to the committee responsible for managing the process by the most appropriate means (in person, by regular mail, or via electronic mail). Upon receipt of the full set of forms, responses to each of the 37 questions can then be summarized by adding the number provided to each possible response and calculating the percentages that these responses represent of the total.

Once summary statistics are calculated, the results of the survey can be shared across the organization for analysis and discussion. To provide a forum for open exchange, it is recommended that one or more meetings be scheduled with participation by Board members and CBO staff. The agenda can include an initial presentation of the findings by the committee assigned responsibility for administration of the survey. The presentation can then be followed by a discussion of insights drawn from the responses, with a particular emphasis on identification of organizational strengths and weaknesses within each category and in the area of cultural competency in general.

This survey process can be very helpful to a CBO in revealing the perceptions of organizational leaders and staff as to their shared performance in effectively working with the diverse groups in the community. Additionally, it can be a valuable point of departure for planning and implementation of efforts to enhance the level of cultural competency of the CBO as a whole.

# Cultural Competency Survey

**Goal:** To identify agency cross-cultural strengths and weaknesses and identify ways to address those by tapping into both the staff and the community to increase cultural competency of the institution and its individual staff members.

## A. Knowing Your Community

1. How well are you able to describe the different cultural/racial/ethnic groups in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
2. How well are you able to describe within-group differences?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
3. How well are you able to describe the strengths of the different cultural/racial/ethnic groups in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
4. How well do you know the prevailing beliefs, customs, norms, and values of the different cultural/racial/ethnic groups in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
5. How well do you know the social service needs within different cultural/racial/ethnic communities in your service area that go unaddressed by the formal social service system?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
6. How well do you know of social service needs that can be addressed by internal social networks of support within different cultural/racial/ethnic communities in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
7. How well do you know the cultural-specific perspectives of physical health/mental health as viewed by the different cultural/racial/ethnic groups in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
8. How well are you able to describe the common needs of all of the different cultural/racial/ethnic groups in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA

## A. Knowing Your Community *(continued)*

9. How well do you know the following resources regarding the different cultural/racial/ethnic groups in your service area?

*(Circle the number for your response in each area.)*

	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
<i>Social historians</i>	1	2	3	4	8
<i>Traditional practitioners</i>	1	2	3	4	8
<i>Formal social service agencies</i>	1	2	3	4	8
<i>Formal social leaders</i>	1	2	3	4	8
<i>Informal social leaders</i>	1	2	3	4	8
<i>Business alliances</i>	1	2	3	4	8
<i>Advocates</i>	1	2	3	4	8
<i>Clergy or spiritual leaders</i>	1	2	3	4	8

10. How well do you know the following demographic characteristics within the different cultural/racial/ethnic groups in your service area? *(Circle the number for your response in each area.)*

	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
<i>Unemployment rates</i>	1	2	3	4	8
<i>Geographic locations</i>	1	2	3	4	8
<i>Income differentials</i>	1	2	3	4	8
<i>Educational attainment</i>	1	2	3	4	8
<i>Birth/death rates</i>	1	2	3	4	8
<i>Crime rates</i>	1	2	3	4	8
<i>Homicide rates</i>	1	2	3	4	8
<i>Owner/occupancy rates</i>	1	2	3	4	8

## B. Agency Resources and Community Connections

11. Does your agency provide or work collaboratively with other programs that provide...

	YES	NO	NA
<i>Employment training?</i>	1	0	8
<i>Educational training?</i>	1	0	8
<i>Housing placement services?</i>	1	0	8
<i>Alcohol/substance abuse treatment?</i>	1	0	8
<i>Maternal and child health services?</i>	1	0	8
<i>Public health services?</i>	1	0	8
<i>Juvenile justice services?</i>	1	0	8
<i>Recreation services?</i>	1	0	8
<i>Child welfare services?</i>	1	0	8
<i>Youth development services?</i>	1	0	8
<i>HIV prevention/testing/treatment services?</i>	1	0	8

12. Has your agency conducted or participated in a needs assessment utilizing providers from different cultural/racial/ethnic groups as respondents in the past five years?	YES	NO	NA		
13. Has your agency conducted or participated in a needs assessment utilizing clients or family members as respondents in the past five years?	YES	NO	NA		
14. Does your agency have linkages with advocates for the different cultural/racial/ethnic groups in your service area who can provide reliable information regarding community opinions about diverse and important issues?	YES	NO	NA		
15. Does your agency staff have access to culturally-relevant and topically sensitive materials (books, videos, etc.)?	YES	NO	NA		
16. Does your agency incorporate cultural competency into your performance evaluation?	YES	NO	NA		
17. How often does your agency utilize cultural consultants to help you work more effectively within various cultural contexts?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
18. How often does your agency use interpreters to work with non-English speaking clients?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
19. How often does agency staff attend cross-cultural workshops?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
20. Is information on rights and grievances available to clients in languages other than English?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA

## C. Organizational Staffing

21. How well has your agency been able to actively recruit members from different cultural/racial/ethnic groups from your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
22. How well has your agency been able to retain members from different cultural/racial/ethnic groups from your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA
23. How well does your staff represent the different cultural/racial/ethnic groups in your service area?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA

## C. Organizational Staffing *(continued)*

24. What is the representation of different cultural/ racial/ethnic groups in...	NONE	A FEW	SOME	MANY	NA
<i>Administrative positions?</i>	1	2	3	4	8
<i>Direct service positions?</i>	1	2	3	4	8
<i>Administrative support positions?</i>	1	2	3	4	8
<i>Operational support positions?</i>	1	2	3	4	8
<i>Board positions?</i>	1	2	3	4	8
<i>Agency consultants?</i>	1	2	3	4	8
<i>Case consultants?</i>	1	2	3	4	8
<i>Subcontractors?</i>	1	2	3	4	8
25. How often does your agency...	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
<i>Hire natural helpers or traditional practitioners from different cultural/racial/ethnic groups?</i>	1	2	3	4	8
<i>Hire practicum students or interns from different cultural/racial/ethnic groups?</i>	1	2	3	4	8
<i>Station staff in different cultural/racial/ethnic communities?</i>	1	2	3	4	8
<i>Hire bilingual staff?</i>	1	2	3	4	8
26. How often does your agency staff routinely discuss barriers to working across different cultural/racial/ ethnic groups?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
27. How often does your agency staff routinely discuss their feelings about working with clients or coworkers from different cultural/racial/ethnic groups?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
28. How often does your agency staff routinely share agency or practice-based "success stories" about working with different cultural/racial/ethnic groups?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
29. How often does your agency convene activities and/ or promote staff learning new languages relevant to the different cultural/racial/ethnic groups that the agency serves?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA

## D. Organizational Policies and Procedures

30. As a matter of formal policy, does your policy presently...	NO, WE HAVE NO SUCH POLICY	NO, BUT WE ARE CONSIDERING SUCH A POLICY	NO, BUT WE ARE WRITING A FORMAL POLICY	YES, WE HAVE A POLICY IN PLACE	NA
<i>Use culture-specific assessment instruments for diagnosis?</i>	1	2	3	4	8
<i>Use culture-specific treatment approaches?</i>	1	2	3	4	8
<i>Envision community empowerment as a treatment goal?</i>	1	2	3	4	8
<i>Review case practice on a regular basis to determine relevancy to different cultural/racial/ethnic groups?</i>	1	2	3	4	8
<i>Provide or facilitate child care?</i>	1	2	3	4	8
<i>Provide or facilitate transportation (bus tickets, ride-sharing)?</i>	1	2	3	4	8
<i>Specifically consider culture in service plans?</i>	1	2	3	4	8
<i>Conduct outreach to community-based organizations, social service agencies, traditional practitioners, or extended families?</i>	1	2	3	4	8
<i>Take referrals from non-traditional sources?</i>	1	2	3	4	8
<i>Translate agency materials into languages that reflect the linguistic diversity in your service?</i>	1	2	3	4	8
<i>Solicit input from different cultural/racial/ethnic groups with respect to physical plant location and interior design?</i>	1	2	3	4	8
<i>Advocate for a better quality of life for persons of color in addition to providing services?</i>	1	2	3	4	8

  

31. How often is information on the ethnicity or culture of clients specifically recorded in your organization's management information system?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA

## E. Community Outreach

32. How well do you assure that different cultural/racial/ethnic groups are aware of your program and the services and resources you offer?	NOT WELL AT ALL	SOMEWHAT WELL	WELL	VERY WELL	NA

## E. Community Outreach *(continued)*

33. How often does your organization or agency reach out to...	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
<i>Churches and other places of worship, clergy persons, ministerial alliances, or indigenous religious leaders in different cultural/racial/ethnic groups?</i>	1	2	3	4	8
<i>Medicine people, health clinics, chiropractors, naturopaths, herbalists, or midwives that provide services in or to different cultural/racial/ethnic groups?</i>	1	2	3	4	8
<i>Publishers, broadcast, or other media sources within cultural/racial/ethnic groups?</i>	1	2	3	4	8
<i>Formal entities that provide services?</i>	1	2	3	4	8
<i>Organizations where different cultural/racial/ethnic groups are likely to voice complaints or issues?</i>	1	2	3	4	8
<i>Business alliances or organizations in different cultural/racial/ethnic groups?</i>	1	2	3	4	8

34. How often are different cultural/racial/ethnic groups depicted on agency brochures or other print media?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA
35. How often does your agency participate in cultural, political, religious, or other events or festivals sponsored by different cultural/racial/ethnic groups in your service area?	NEVER	SELDOM	SOMETIMES	REGULARLY	NA

## F. Service Provision and Culture

36. Does your agency distribute written information on the following services specifically developed for the different cultural/racial/ethnic groups represented in your service area?	YES	NO	NA
<i>Youth health services</i>	1	0	8
<i>Maternal health services</i>	1	0	8
<i>Child health services</i>	1	0	8
<i>Male health services</i>	1	0	8
<i>Mental health services</i>	1	0	8
<i>Substance abuse services</i>	1	0	8
<i>Immigrant health services</i>	1	0	8
<i>Refugee health services</i>	1	0	8
<i>HIV/STD services</i>	1	0	8

## F. Service Provision and Culture *(continued)*

37. How significant of an obstacle do you think cultural/racial/ethnic factors are to your staff in providing the following health services effectively?	NOT SIGNIFICANT AT ALL	NOT VERY SIGNIFICANT	SOMEWHAT SIGNIFICANT	VERY SIGNIFICANT	NA
<i>Youth health services</i>	1	2	3	4	8
<i>Maternal health services</i>	1	2	3	4	8
<i>Child health services</i>	1	2	3	4	8
<i>Male health services</i>	1	2	3	4	8
<i>Mental health services</i>	1	2	3	4	8
<i>Substance abuse services</i>	1	2	3	4	8
<i>Immigrant health services</i>	1	2	3	4	8
<i>Refugee health services</i>	1	2	3	4	8
<i>HIV/STD services</i>	1	2	3	4	8

**Thank you for taking the time to complete this survey.**

## 2002 Cultural Competency Workshop

Participants at the AECF 2002 Cultural Competency Institute attended a workshop titled *In-Depth Diversity Awareness*, which included facilitated discussion and structured activities to address obstacles related to diversity and culture. The workshop focused on identifying the impact of diversity on the participants' professional lives, increasing understanding of the influence of the participants' cultural programming, and building awareness that others have different cultural programming, which affects their work. A modified version of the facilitation guide used for the activities conducted during the workshop is included on pages 17–21. It has been adapted to be more appropriate for sessions engaging the members of a single organization.

**What You Will Need.** To conduct the workshop, an individual external to the group, if possible, should be identified to serve as facilitator. However, a Board member or staff member may serve in this capacity, if needed. The primary role of the facilitator is to engage participants in the discussion and ensure that everyone is heard.

In terms of other requirements, sufficient space should be available for the full group and smaller breakout groups to meet. Additionally, newsprint, markers, masking tape, and sufficient copies of handouts will be needed. The required handouts are included in this tool following each of the facilitation guides.

**Instructions.** The workshop begins with the facilitator stating the ground rules that will guide the discussion. These should be recorded on newsprint and displayed prominently on the wall with masking tape for ready reference by participants throughout the session. In general, the rules are designed to encourage open exchange of shared and differing points of view. The facilitator should also ask the group whether there are additional rules that should be established, and these should be added to the list. Following the presentation of the rules, the facilitator describes his or her role in the process, and concludes this introductory segment by reviewing the core objectives of the session.

As stated in the facilitation guide for the workshop, the session is structured to be roughly 125 minutes in length. However, timing should be flexible to ensure that all group members have the opportunity to contribute to the session.

Following the introductory segment described above, the next part of the workshop moves into a discussion about the group members' individual experiences of feeling marginalized. To begin, the facilitator asks the participants to discuss situations in their lives when they have been outsiders, stressing that these experiences can be used to further develop cultural competency. The facilitator provides different possible scenarios while giving participants a few minutes to consider what to contribute to the discussion. The facilitator should ensure that each participant has the opportunity to respond, while limiting each participant's response time to 1-2 minutes.



### **“Behaviors of an Effective Health Care Employee in a Pluralistic Environment”**

#### **Worksheet**

- During the next activity, the facilitator divides the participants into groups of roughly six to seven participants each.
- The facilitator explains that the exercise is to stimulate discussion and thought about essential behaviors necessary for all employees working in cross-cultural and diverse settings.
- Each participant is then given the worksheet entitled *Behaviors of an Effective Health Care Employee in a Pluralistic Environment*. As a resource designed to stimulate discussion related to appropriate professional behaviors in culturally diverse health care settings, AED adapted a worksheet drawn from *Managing Diversity in Health Care*, by Lee Gardenswatz and Anita Rowe (Copyright © 1999, Jossey-Bass, San Francisco). This instrument was used successfully with workshop participants.
- The worksheet is designed for individual completion, followed by small group discussion. It is appropriate for use with a variety of internal audiences, such as senior managers, supervisors, and program staff. The format and directions for its use are included on page 22.
- The groups are then instructed to read all 10 behaviors that are listed on the sheet and individually determine their order of importance.

- Upon completion of this assignment, the facilitator requests that the groups discuss their individual rankings with the other members of their group. The facilitator explains that the goal is to reach consensus on the group’s top five ranked behaviors.
- The facilitator then brings everyone together to compare and discuss the rankings between the different groups.

### **“Analyzing Your Own Cultural Software”**

#### **Worksheet**

- For the next activity, the facilitator initiates discussion with participants about the analogy of culture being like a “software program” that directs behavior. The facilitator solicits reactions to this from participants and asks for examples that would support this analogy.
- Participants are asked to brainstorm sources of their own cultural software. Their responses should be recorded on newsprint pages by the facilitator.
- Each participant is then given the worksheet entitled *Analyzing Your Own Cultural “Software”*. This worksheet was adapted by AED from *Managing Diversity in Health Care* which uses the analogy of “hardware” and “software” to frame discussion of cultural diversity. In the context of the worksheet, cultural hardware is defined as including those things about ourselves that we cannot change, such as our genes and internal organs. Generally, these are fixed and are necessary to our lives. In contrast, cultural software consists

of the input we receive from our environment, family, friends, countries, religions, and schools. From these and other influences, we draw learned behaviors, such as mannerisms, feelings, beliefs, values, and preferences. Together, these behavioral aspects of our beings are software. Unlike hardware, they are changeable.

- As adapted by AED, the worksheet is most appropriate for use with managers and supervisors overseeing the work of culturally diverse teams and program staff serving diverse groups of community residents. In terms of process, the instrument is designed to serve as the focus of individual assessment and group discussion regarding the sources of cultural software and how it has contributed to shaping the behaviors and attitudes of the participants. The format and instructions for its use are included on page 23.
- The groups are instructed to complete the worksheet individually by identifying their own influences. The facilitator should inform participants that they will be sharing their responses with other participants.
- Participants will then pair up with people they do not know well to share their responses.
- Upon completion of this assignment, the facilitator brings everyone together to debrief and focus on insights using a set of three questions.
- In the final segment, the facilitator asks each participant to share his or her reactions and views as to how the activities were helpful in developing a better understanding of cultural competency. The comments offered should be summarized on newsprint pages by the facilitator for review by all participants. This concludes the Cultural Competency Workshop.

## Facilitation Guide

# In-depth Diversity Awareness Cultural Competency Workshop

\* Please note: Due to the sensitive and potentially emotional nature of the topic, the facilitator should stress throughout the whole session the importance of creating a supportive and caring environment. In addition, participants should be urged to share their emotional reactions in a constructive fashion.

Time	Activity	Materials
15 minutes	<p><b>Review of Ground Rules and Objectives</b></p> <p><b>Ground Rules</b> – Summarize them on the newsprint in the front of the room</p> <ul style="list-style-type: none"><li>• We will be taking notes on newsprint today.</li><li>• Please speak loudly, clearly, and one at a time.</li><li>• There are no right or wrong answers. We are interested in your opinions and we do not expect everyone to agree with one another on all issues. We are very interested in hearing different opinions.</li><li>• Solicit other ground rules from participants.</li></ul> <p><b>Explain the Role of the Facilitator</b></p> <p>Participants are the experts on these issues and the facilitator is here to guide them through this exchange and process. This session is highly participatory and we hope to hear from everyone in the room.</p> <p><b>Workshop Purpose</b></p> <p>This workshop provides an opportunity to address obstacles related to diversity and culture in a more intimate and personal setting. Participants should be prepared to share responses with their fellow group members to various activities.</p> <p><b>Workshop Objectives</b></p> <ol style="list-style-type: none"><li>1. To identify the impact of diversity on one’s professional life.</li><li>2. To increase understanding of the influence of one’s own cultural programming.</li><li>3. To build awareness that others have different cultural programming and how that affects their work.</li></ol>	Newsprint Markers

## Facilitation Guide

### In-depth Diversity Awareness Cultural Competency Workshop *(continued)*

Time	Activity	Materials
15 minutes	<p><b>Warm-up</b></p> <p>Open the discussion by addressing how we have all been outsiders at some point of our lives. Emphasize how important it is to remember that everyone has been an outsider at one time or many times in his/her life and that these experiences can be used to further develop cultural competency. <i>This should not be an exercise that discusses OTHER people as outsiders (i.e., immigrants, minorities, etc.) but rather prompt people to reflect on their own individual experiences of feeling marginalized.</i></p> <p>Ask participants to consider the following situation:</p> <ul style="list-style-type: none"><li>• <i>Think of a situation when you were an outsider. Describe how you felt and what helped you feel more included.</i></li></ul> <p>Provide them with a few minutes to think of a response while you provide different possible scenarios. Then the answers should be solicited for a large group discussion.</p> <p>Possible scenarios: As a child, in a new school, at a new job, traveling, with family, in a new city, among people who were different than you in some way...</p> <p>Ensure that each participant has the opportunity to answer the question but limit the time that they have to respond to 1-2 minutes. The facilitator can provide a "Round Robin" structure allowing each participant to respond according to the allotted time.</p>	
45 minutes	<p><b>Organizational Focus Activity:</b> <i>Behaviors of an Effective Health Care Employee in a Pluralistic Environment</i></p> <p>This exercise is used to stimulate discussion and thought about essential behaviors necessary for all employees who are working in a cross-cultural and diverse setting.</p>	

<b>Time</b>	<b>Activity</b>	<b>Materials</b>
(5 minutes)	<p>Divide participants into small groups of 6-7 people each. Distribute the handout to all participants.</p> <p>Begin by explaining that, as they already know, health care employees who work in a diverse environment need a refined set of skills different from those of people who work in homogenous environments.</p>	<p><i>Copies of the "Behaviors of an Effective Health Care Employee in a Pluralistic Environment" worksheet for each participant</i></p>
(5 minutes)	<p>Once the groups have formed, hand out the worksheet titled "Behaviors of an Effective Health Care Employee in a Pluralistic Environment." Explain that each person is to read all 10 behaviors that are listed and <b>individually</b> determine their order of importance with <b>1 being the most important and 10 being the least important</b>. After they have had time to think of their rankings, tell people to record their answers in the "Individual Ranking" column.</p> <p>The following guidelines for achieving consensus should be written on newsprint while the participants are doing their individual ranking:</p> <ol style="list-style-type: none"> <li>1. <i>Consensus is defined as "something we can support for at least some period of time." It doesn't have to be permanent.</i></li> <li>2. <i>Each person is responsible for presenting his or her own viewpoint, but not arguing it.</i></li> <li>3. <i>There should be no voting.</i></li> <li>4. <i>Keep focusing on common ground and working toward agreement.</i></li> </ol>	<p><i>Newsprint Markers</i></p>
(25 minutes)	<p>Then, tell groups to discuss their individual rankings with other members of their group. Their goal is to reach consensus on <b>the group's top 5 ranking behaviors</b>. Tell them to record their group answers in the column marked "Group Ranking."</p> <p>Quickly review the displayed rules of consensus and give the groups 25 minutes to select their group list.</p>	

## Facilitation Guide

### In-depth Diversity Awareness Cultural Competency Workshop *(continued)*

Time	Activity	Materials
<p><i>(10 minutes)</i></p>	<p>Draw a grid on the newsprint pad to record the groups' rankings while the small groups are working.</p> <p>Once they have completed the worksheet, record all of the groups' rankings and compare between the different groups.</p> <p>Lead a discussion with the remaining time with the following questions:</p> <ol style="list-style-type: none"><li><i>1. Look at the different responses from each group. What story do the rankings tell? What are your reactions?</i></li><li><i>2. What principles or values guided your choices? Share some of the discussion points that influenced the ranking within your group.</i></li><li><i>3. Did people change their minds during group discussions? If so, what made that possible? What are the implications of an openness to change on a daily basis?</i></li></ol> <p><i>Transition note:</i> Explain that the next activity is going to look more at the participants on the individual level and what cultural experiences drive each of us to make the decisions and choices that we make in our lives both in and out of work—such as the ones we just made in the last activity. This next activity will be more personal (maybe even emotional) in nature and all participants should be aware that they will have to share their responses with some of their colleagues.</p>	
<p><i>45 minutes</i></p>	<p><b>Individual Cultural Process Activity:</b> <i>Analyzing Your Own Cultural "Software"</i></p> <p>Discuss the analogy of culture being like a "software program" that directs our behavior. Solicit reactions to this from participants and ask them for examples that would support this analogy. You should also refer to the worksheet titled "Analyzing Your Own Cultural 'Software'" and present examples of answers to the worksheet.</p>	<p><i>Copies of the "Analyzing Your Own Cultural 'Software'" worksheet for each participant</i></p> <p><i>Newsprint</i> <i>Markers</i></p>

Time	Activity	Materials
	<p>Because this activity requires one to look into the past it may evoke unpleasant memories as well as pleasant ones and they should be prepared for this. Also, explain that not all influences are positive and that negative ones also play a role in the development of our cultural “software.”</p> <p>Then ask participants to brainstorm sources of their own cultural software, charting their responses. Also ask them what values or social norms they learned from these sources and record that on the newsprint.</p> <p>Have participants complete the worksheet and identify their own influences. <b>Make sure to explain that they will be sharing their responses with other participants.</b></p> <p>Encourage participants to pair-up with people they do not know well. Tell them to share information with their partners about the development of their own cultural software and its impact on their lives.</p> <p>After they complete the work in pairs, lead a total group debriefing focusing on insights and applications using the following questions:</p> <ol style="list-style-type: none"> <li><i>1. What were the most important influences you had on your beliefs and values?</i></li> <li><i>2. What changes have you seen in your beliefs and values over the years?</i></li> <li><i>3. Where do beliefs and values from one source conflict with those from another? How do you resolve those differences?</i></li> </ol>	
5 minutes	<p><b>Workshop Closing</b></p> <ul style="list-style-type: none"> <li>• Did participants learn something new in this workshop?</li> <li>• Has the workshop raised new issues that need to be addressed?</li> <li>• Who can they talk to or what mechanisms are there for them to clarify issues regarding cultural competency?</li> </ul>	

# Behaviors of an Effective Health Care Employee in a Pluralistic Environment

*Directions:* Rank order your responses from 1 to 10, 1 being the most important behavior for a health care employee and 10 being the least important behavior for a health care employee. Then reach consensus as a group on the order of importance from 1 to 10.

Your Ranking		Group Ranking
	Works through religious and various community groups to create ties to the community.	
	Understands the different cultural norms and preferences of patients and coworkers.	
	Takes the initiative to offer information to make patients feel comfortable.	
	Is flexible and creative in finding alternate ways of informing and communicating with patients and families.	
	Cultivates productive relationships with fellow employees.	
	Treats all patients and family members with dignity and respect.	
	Gives necessary information in ways that people of various backgrounds and education levels can understand.	
	Knows how to work within the system to make the process as user friendly as possible.	
	Takes pride in helping patients feel secure.	
	Solicits and uses feedback to improve interactions with patients and families.	

# Analyzing Your Own Cultural “Software”

*Directions:* Think of the most important influences on the development of your individual cultural “software program.” Using those already listed that pertain and adding others, list the most significant values, norms, rules, and beliefs you have adopted from each source. Then indicate what impact each has made on your life and work.

*For example, if your parents taught you the value of a strong work ethic, does that make you a responsible and conscientious employee? Does it also make you impatient with coworkers who do not work as hard or frustrated with patients who receive public assistance?*

SOURCE	VALUES, NORMS, RULES, BELIEFS ADOPTED	IMPACT ON LIFE AND WORK
<b>Family:</b>		
Parents		
Siblings		
Grandparents		
Extended family		
Spouse		
Children		
<b>Geographic Location:</b>		
Country		
Neighborhood		
Childhood residence		
Present residence		
<b>Religion:</b>		
Early years		
Currently		
<b>Education:</b>		
School		
College/University		
Continuing		
<b>Friends:</b>		
Childhood		
Current		
Colleagues/coworkers		
<b>Professional Life:</b>		
Field of work		

## **Additional Resources**

A wide range of organizations and resources are available that offer CBO Board members and staff information related to the theory and practice of cultural competence at the organizational and individual levels.

Examples include:

### **Association of University Centers on Disabilities**

Telephone: (301) 588-8252

Web Address: [www.aucd.org](http://www.aucd.org)

### **CEO Services: Cultural Competence Online**

Telephone: (510) 769-1471

Web Address: [www.culturalcompetence2.com](http://www.culturalcompetence2.com)

### **The Cross Cultural Health Care Program**

Telephone: (206) 860-0329

Web Address: [www.xculture.org](http://www.xculture.org)

### **Diversity Rx**

Web Address: [www.diversityrx.org](http://www.diversityrx.org)

### **National Center for Cultural Competence**

Telephone: (202) 687-5387

Web Address: [www.georgetown.edu/gucdc/nccc](http://www.georgetown.edu/gucdc/nccc)

### **National MultiCultural Institute**

Telephone: (202) 483-0700

Web Address: [www.nmci.org](http://www.nmci.org)

