STATE OF TENNESSEE

Cultural Competency and Diversity
Sheila Peters, Ph.D., Associate Professor, Fisk University
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Sheila Peters, Ph.D., is a licensed clinical psychologist with expertise in working with diverse populations including vulnerable children and youth and their families. Within the Fisk community, she has served as Associate Provost, Chair of Psychology, Faculty Assembly Chair and as a member of the Board of Trustees for Fisk University. She served as Interim Director of the Fisk Race Relations Institute and continues to provide training for cultural competence in communities, institutions and systems of care. She is the Discipline Coordinator for Psychology, Director of Graduate Studies in Psychology, and Director of the Fisk Counseling Center. As Director of the Fisk Counseling Center, she coordinates prevention and intervention programs focused on sexual assault and domestic violence with a focus on bystander intervention and commitment to victims’ assistance.

Dr. Peters earned a B.A. in psychology with honors from the University of North Carolina- Chapel Hill and the M.S. and Ph.D. in Clinical Psychology from Vanderbilt University.
Interactive Webinar

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• Select “Everyone” and enter your question or comment.

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Cultural competence is essential in decreasing disparities in behavioral health

- Can have far-reaching effects for members, providers, and communities
- Improves organizational sustainability by reinforcing the value of diversity, flexibility, and responsiveness in addressing the current and changing needs of members, communities, and the healthcare environment

Culturally responsive skills improve member engagement in services, therapeutic relationships, and treatment retention and outcomes

- Helps mitigate organizational risk and provide cost-effective treatment by matching services to member needs
- Culturally responsive organizational policies and procedures establish access to training, supervision, and policies and procedures that enable staff to respond in a culturally appropriate manner
Process of Becoming Culturally Competent as a Counselor or Culturally Responsive as an Organization

Developing cultural competence is an ongoing process that begins with cultural awareness and a commitment to understanding the role that culture plays in behavioral health services.

- Understand one's own culture as a basis for understanding others
- Cultivate willingness and ability to acquire knowledge of the culture of members
- Understand and respect members’ worldviews, beliefs, values, and attitudes toward behavioral health services
- Incorporate culturally appropriate knowledge, understanding, and attitudes within organizations that are reflected during assessment, treatment planning, and treatment process

SAMHSA’s TIP 59: Improving Cultural Competence
Culture

- The conceptual system developed by a community or society to structure the way people view the world, involving a particular set of beliefs, norms, and values that influence ideas about relationships, how people live their lives, and the way people organize the world.

Race

- Often referred to as a biological category based on genetic traits, but there are no reliable means of identifying race through biological criteria. It has social significance when defined as a social construct to describe people with shared physical characteristics.

Ethnicity

- Often used interchangeably with race. Implies a sense of belonging, based on shared values, beliefs, and origins.
What is Diversity?
Diversity is the mosaic of people who bring a variety of backgrounds, styles, perspectives, values, and beliefs as assets to the groups and organizations with which they interact.
How Does Diversity Influence Our Interactions?
Benefits of Diversity Among Teams

• Increased retention rates
• Boosts morale of team members
• Improves member service
• Reduces complaints and grievances

(adapted from Georgia Coffee)
Role of Managers in Diversity

- Lead employees by example; respect people and differences in the workplace.
- Create a welcoming, inclusive environment in which to conduct business.
- Incorporate diversity in policies, strategic plans, operational procedures.
- Learn and practice early conflict resolution strategies.
- Practice regular, effective, and open communication; empower your employees; requires trust.
- Demonstrate executive commitment to diversity on an ongoing and regular basis.
- Walk the talk.
Workplace Diversity

• Practice positive, constructive work habits in the workplace; work cooperatively towards a common goal.
• Live up to the social contract; contribute to your fullest potential; strive for excellence.
• Recognize and respect others and their individuality.
• Think before you speak and be sensitive to others.
• Talk about your differences and ask tactful questions about how people want to be treated.
• Eliminate stereotypes and generalizations
Diversity Enhances Performance But Requires Attention

- Workforce diversity is *positively* associated with higher business performance outcome measures.
- Racial diversity is *positively* associated with higher performance in organizations that integrate and leverage diverse perspectives as resources for product delivery.
- Gender diversity is *positively* associated with more effective group processes and performance in organizations with people-oriented performance cultures.


Challenges with Diversity

- Ethnocentricism
- Bias and prejudice
- Stereotyping
- Cultural elitism
- Cultural ignorance
- Cultural whitewashing
Working with THL Members

Cultural competence is the ability to respond effectively and appropriately to different cultural/generational contexts.
Potential Triggers of Cultural Conflict: Microaggression

- Verbal and nonverbal behavior that can be conscious or unconscious in a dehumanizing manner
Impact of Microaggressions in Serving THL Members

• Apathy
• Lack of progress on treatment goals
• “Auto pilot”
• Passive/aggressive behavior
• Canceling or missing appointments
• Resentment
Potential triggers of cultural conflict: Microassaults

Conscious, overt behavior or verbal communication
Potential triggers of cultural conflict: Microinsults

Verbal expressions meant to be supportive but can be insulting to the targeted individual.
Potential triggers of cultural conflict: Microinvalidations

Minimizing concern raised by others; feeling of being invisible
PRIVILEGE

• Advantage; higher position over others
• Greater meaning or value given to you and your ideas
• Freedom to make mistakes and not be fully accountable
Privilege Can Be Dehumanizing

• When we act toward others with less privilege as if they are invisible

• Ignoring the concerns of a member
Communication

“Are you going to be able to get to your appointment on time?”

“How are you able to manage getting to our sessions?”

“Are you keeping up with your treatment plan?”

“How is the treatment plan working for you?”

“Why is your child acting out so much?”

“How do you deal with your child’s misbehavior?”

“How long has this been a problem?”

“When did you recognize this was a problem?”
Fear of CHANGE freezes our opportunity

“I think we have to own the fears that we have of each other, and then, in some practical way, some daily way, figure out how to see people differently than the way we were brought up to.”

--Alice Walker
Promising Practices for THL Providers
Cultural competence is a lifelong process in which one works to develop the ability to engage in actions or create conditions that maximize the optimal development of members and member systems.
Eight Core Competencies for Counselors and Other THL Staff

1. Frame issues in culturally relevant ways.
2. Allow for complexity of issues based on cultural context.
3. Make allowances for variations in the use of personal space.
4. Be respectful of culturally specific meanings of touch (e.g., hugging).
5. Explore culturally based experiences of power and powerlessness.
6. Adjust communication styles to the member’s culture.
7. Interpret emotional expressions in light of the member’s culture.
8. Expand roles and practices as needed.
Culturally Responsive Evaluation and Treatment Planning

1. Engage members
2. Familiarize members and families with the evaluation and treatment process
3. Endorse a collaborative approach in facilitating interviews, conducting assessments, and planning treatment
4. Obtain and integrate culturally relevant information and themes
5. Gather culturally relevant collateral information
6. Select culturally appropriate screening and assessment tools
7. Determine readiness and motivation for change
8. Provide culturally responsive case management
9. Integrate cultural factors into treatment planning

SAMHSA’s TIP 59: Improving Cultural Competence
Family-centered Approach

• Inclusion
To support and promote the involvement of members, families, and advocacy groups in the planning and development of care.
Diversity Within Families

- Region of the Country
- Age
- Sexual Orientation
- Immigration
- Level of Acculturation
- Political Views
- Class
- Education
- Spiritual Orientation
- Reputation in the Community
- Race / Ethnicity
- Perceptions of Power / Privilege
- Psychological Issues
- Neighborhood
- Family Boundaries
- Disability
Diversity impacts...

- Parenting and child rearing
- Communication
- Body language
- Perception of time
- Help-seeking behaviors; help-giving behaviors; stigma
- Use of services and social supports
- How we see the world

- Attitudes and beliefs about
  - The law
  - Services
  - Social support
  - Kinship support
  - What constitutes successful services

- Understanding of government systems

(Lazear, 2003)
Cultural Differences

- Family is defined differently by different cultures.
- The concept of an exact time is not used or reinforced in some cultures.
- Eye contact varies by culture.
- Physical distance during social interactions varies by culture.
- Culture greatly influences attitudes about physical contact.
- Different cultures regulate the display of emotion differently.
- Some cultures may use different standards for loudness, speed of delivery, silence, attentiveness, and time to respond to another's point.
Culturally Diverse Individuals and Communities

- Are over-represented in the criminal justice system
- Have less access to, and availability of, health and mental health services
- Are less likely to receive needed services
- Are under-represented in human services research
- Are over-represented in special education classes
- Are over-represented in restrictive levels of care (foster care, residential, juvenile detention)

(Lazear, 2003)
Working with Culturally Diverse Populations

• Learn culturally specific information
• Know some words and phrases in the family’s language
• Use trained interpreters who can interpret language as well as cultural cues
• Limit the number of forms and other paperwork
Working with Families with Limited English Skills

- Make your statements as specific as possible
- Let the person see your lips as you speak
- Be aware of your assumptions
- Don’t rush—be patient
- Speak a little more slowly but not more loudly
- Be careful with your pronunciation
- Stick to the main points
- Avoid jargon

(Jule – Mental Health Transformation Project)
Promote Philosophy of Cultural Competence

Respecting and Accepting Different Viewpoints and Life Experiences

- Is an ongoing process and not a destination
- Includes involvement of different voices within the process
- Is valued from the bottom to the top within the organization

Diversity training is a tool and not a solution
No one is born hating another person because of the color of his skin, or his background, or his religion. People must learn to hate, and if they can learn to hate, they can be taught to love, for love comes more naturally to the human heart than its opposite.

Nelson Mandela
Long Walk to Freedom
I may shine alone, but I can soar with you.

SPETERS@FISK.EDU
Questions
References


- Georgia Coffee, Veteran’s Affairs

