Enhancing Cultural Competence in Clinical Settings (4C)

Wednesday, January 13, 2016
Desired Outcomes

Participants will:

- Be able to identify themselves as cultural beings on up to 12 variables
- Be able to identify up to 10 ways that racism may impact their practice unintentionally
- Practice identifying dysfunctional cross cultural behaviors within themselves and/or among others that they work with
- Learn up to 10 alternative behaviors for enhancing their mental health practice
- Be able to link modern ism/internalized oppression theory to "Getting to the Green Zone"
Session Agenda

- Review of desired curriculum outcomes
- Define goal for today: Introducing the model and defining the importance of “self as a cultural being” (looking at 3 dimensions: cognitive, behavioral, affective)
- Tool 1: Guidelines for effective cross cultural dialogue
- Overview of a multicultural process of change at 4 interlocking levels
- Tool 2: Understanding self as a cultural being – Overview including application exercise
- Overview of what is reflective practice?
- Next steps and closure
Guidelines For Effective Cross-Cultural Dialogue

- “Try on”
- It’s okay to disagree
- It is not okay to blame, shame, or attack, self or others
- Practice “self-focus”
- Practice “both/and” thinking
- Notice both process and content
- Be aware of intent and impact
- Confidentiality
Multicultural Process of Change (at all levels)

**Monoculturalism**
- Rejection of differences and a belief in the superiority of the dominant group at the following levels:
  - Personal
  - Interpersonal
  - Institutional/Systemic
  - Cultural

**Monoculturalism**
- (“Melting Pot”)
- Assimilation
- Exclusion

**Pluralism**
- Acceptance, appreciation, utilization and celebration of similarities and differences at these levels:
  - Personal
  - Interpersonal
  - Institutional/Systemic
  - Cultural

- (“Salad Bowl/Fruit Salad”)
- Diversity
- Inclusion

(“Emancipatory Consciousness”)
Social/Economic Justice

*Designed by: Valerie A. Batts, Ph.D.; John Capitman, Ph.D.; and Joycelyn Landrum-Brown, Ph.D.*
Levels of Oppression and Change

**Personal**
- Values
- Beliefs
- Feelings
- Attitudes
- Opinions

**Institutional**
- Policies
- Practices
- Rules
- Procedures
- Systems

**Interpersonal**
- Treatment
- Relationships
- Behaviors
- Communications

**Cultural**
- Worldview
- Stories
- Climate
- Shared Values
- Unwritten Rules
- Media
- Public Opinion
- Symbolic/Ritual
- Group Dynamics
- Norms

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Focus of Change Strategies

**Personal:**
Aim is to change thoughts and feelings; increase awareness & openness to learning.

**Interpersonal:**
Aim is to enhance skills, communication patterns; impact behavior and relationships.

**Institutional:**
Aim is to identify structural barriers and create policies, practices, programs & processes that support equitable outcomes.

**Cultural:**
Aim is to create environments representative of & welcoming to the organization’s diversity; celebrate & utilize differences.

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Definition of Culture

Culture is the sum total ways of living, including:

- Values
- Beliefs
- Aesthetic Standards
- Linguistic Expression
- Patterns of Thinking
- Behavioral Norms
- Styles of Communication

...which a group of people has developed to assure its survival in a particular environment (Pusch, 1981).

We are socialized through “cultural conditioning” to adopt the ways of thinking of our own group.
HOW CULTURE IS LIKE AN ICEBERG

Communicating Across Cultures
Just as nine-tenths of an iceberg is below the surface of the water, most of culture is outside of conscious awareness and can be termed “deep culture.”

Architecture * Music * Dress * Food * Visual Art * Drama * Crafts * Dance * Literature * Language * Celebration

Ethics: definitions of obscenity and sin, rules of decency, conception of justice, notions of modesty, ideals governing child raising, attitude toward dependency and social responsibility

Aesthetics: conception of beauty, humor, patterns of visual perception

Social relationships: nature of friendship, preference for competition/cooperation, physical expression, relationship with animals, patterns of superiority/inferiority, social interaction rate, courtship practices. Roles/status by sex, race, class, occupation, kinship, age, etc.

Communication: expression of emotions, facial expressions, body language, conversational patterns in various social contexts, transfer of knowledge

Worldview: cosmolology, conception of past and future, ordering of time, notions of logic and validity, tempo of work, conception of “self”, notions of adolescence

Health: tolerance of physical pain, definition of insanity, theory of disease

Necessities: concepts of food, incentives to work, forms of shelter

Authority: patterns of group decision making, approaches to problem-solving, who/what conveys power

..and much, much MORE!
Multiple Identities

**Universal**
Human nature: “Like all other people”

**Group**
“Like some other people”

**Individual**
“Like no other person”

- Personality, style, looks, etc.
- Religion
- Culture
- Ethnicity
- Gender

The primary basis for inclusion and exclusion.

Inherited and learned (caught and taught).

- Privilege
- “Unearned” privileges
- Oppression, as flip side
- All “isms”
- Power: systems and structures that keep above in place
- Liberatory approach – making justice, freedom, equality, fairness realities

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J.P. Sonn, 2009
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Three Dimensions of Change
Individual and Organizational

What: Concept
Why: Linkage
How: Strategies

Cognitive

Affective
- Process
- Emotions
- Environment

Behavioral
- Expectations
- Actions
- Results
Linking Three Dimensions of Change & Getting to Green

- Feeling------heart
- Thinking------head
- Behavior------hand
What is Reflective Practice?

“reflective practice ...encourages staff members to...slow down, filter their thoughts, and more wisely choose actions and words; deepen their under-standing of the contextual forces that affect their work...”

(Heffron, M.C. and Murch, T. “Reflective Supervision and Leadership in Infant and Early Childhood Programs”, 2010)
One of the Roles of Reflective Practice

• Create a safe space for conversations about bias, racism and other isms...

One of the Roles of the RP Supervisor

– Facilitate these difficult conversations!
Reflective Practice Supervisor

• “A (RP) supervisor must find the skill and sometimes the courage to bring up the differential treatment of clients or colleagues based on race, gender or sexual preference; unintended slights; or unexamined negative assumptions about another person’s background. **Self-awareness** and a stance of respect and inclusion will assist the reflective supervisor to work with staff members from many different backgrounds and perspectives.”

(Heffron, M.C. and Murch, T. “Reflective Supervision and Leadership in Infant and Early Childhood Programs”, 2010)
Diversity-Informed IMH Tenets

Self Awareness Leads to Better Services for Families:

Professionals in the field of infant mental health must reflect on their own culture, personal values, and beliefs, and on the impact racism, classism, sexism, able-ism, homophobia, xenophobia, and other systems of oppressions had on their lives in order to provide diversity-informed, culturally attuned services...

(Ghosh Ippen, Norona, and Thomas, “From Tenet to Practice”, Zero to Three, November 2012.)
Other Diversity-Informed IMH Tenets (continued)

- Champion Children’s Rights Globally
- Work to Acknowledge Privilege and Combat Discrimination
- Recognize and Respect Non-dominant Bodies of Knowledge
- Honor Diverse Family Structures
Other Diversity-Informed IMH Tenets (continued)

- Understand That Language Can Be Used to Hurt or Heal
- Support Families in Their Preferred Language
- Allocate Resources to Systems Change
- Make Space and Open Pathways for Diverse Professionals
- Advance Policy that Supports All Families