Meeting People Where They Are:
A STRATEGIC APPROACH TO ORGANIZATIONAL CULTURAL COMPETENCE

Garrett Lee Smith
Campus Suicide Prevention Grantee Meeting
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...The delivery of health care services in a manner that is respectful and appropriate to an individual’s language and culture is more than simply a patient’s right, but is, in fact a key factor in the safety and quality of patient care.”

Schyve, 2002

What is Cultural Competence (CC)?

“...The delivery of health care services in a manner that is respectful and appropriate to an individual’s language and culture is more than simply a patient’s right, but is, in fact a key factor in the safety and quality of patient care.”

Schyve, 2002

What is Cultural Competence?

We continue to learn about people...
...and the factors that influence their health status.

Mark Lalonde, Canadian Health Ministry

What is Cultural Competence?

'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.

Cross et al., 1989

What is Cultural Competence?

One definition...
"A set of congruent behaviors, attitudes, and policies that come together in a system or agency or among professionals that enables effective interactions in a cross-cultural framework."

Cross et al., 1989

What is Cultural Competence?

Cultural Competence is not:
• Possessing the knowledge of every individual’s cultural uniqueness, values, or practices.

Cultural Competence is:
• The ability to obtain the above information within an appreciative inquiry approach.
What is Cultural Competence?

Health Care (Individual):
The ongoing process in which the health care professional continuously strive to achieve the ability and availability to effectively work within the cultural context of the client (family, individual, community).
Campinha-Bacote, 2003

What is Cultural Competence?

Healthcare (Organizational):
The ongoing capacity of healthcare systems, organizations and professionals to provide for diverse patient populations high quality care that is safe, patient and family-centered, evidence-based, and equitable.
National Quality Forum, 2009

What is Cultural Competence?

What does CC look like in an organization...
- Values diversity
- Conducts self-assessment
- Manages the dynamics of difference
- Acquires and institutionalizes cultural knowledge
- Adapts to diversity and the cultural contexts of the communities they serve
National Center for Cultural Competence, 2010

What is Cultural Competence?

Organizational Cultural Competence

<table>
<thead>
<tr>
<th>Values</th>
<th>Speak</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diversity</td>
<td>Show</td>
</tr>
<tr>
<td>Competency</td>
<td>Perform</td>
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</tbody>
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Organizational Cultural Competence

CULTURAL COMPETENCE

VALUES

- Policy Development
- Internal Communication
- Diversity in Hiring Practices
- Patient Centered Care
- Community Education
- Performance Measurements
- External Communication

It needs to be infused throughout...
...for equitable accountability

Paul T. Doyle & Associates, LLC
Why do we need CC?

**DRIVERS:**
- Address health care disparities
- Patient Safety
- Access to Quality Care
- Consumer Empowerment
- General Education/Awareness
- Public Policy/Environmental Change

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**Institute of Medicine Reports:**

To Err is Human: Building a Safer Health System (1999)
Crossing the Quality Chasm: A New Health System for the 21st Century (2001)
In the Nation’s Compelling Interest: Ensuring Diversity in the Health Care Workforce (2003)

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**Why do we need CC?**

- While the rates of overall mental illness among African Americans are similar to that among whites, some researchers estimate that less than 50% of African Americans with major depressive disorder receive treatment for severe symptoms.

SPARC, 2007

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**Why do we need CC?**

- Research indicates that, among individuals of Hispanic origin with mental health problems, fewer than 1 in 11 contacts a mental health provider, and fewer than 1 in 5 contacts a general health care provider.

SPARC, 2007

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**Why do we need CC?**

Communicating effectively across cultural and linguistic boundaries is an important quality and risk management issue for primary care providers.
- The IOM reports that 51% of providers surveyed believe patients do not adhere to treatment because of culture or language barriers.
- At the same time, 56% of these providers reported having no language or cultural competency training.

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**How is CC being addressed?**

- Joint Commission on Accreditation of Health Care Organizations
- National Committee on Quality Assurance
- Liaison Committee on Medical Education
- Accreditation Council for Graduate Medical Education
- American College Health Association

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Cultural and Linguistic Appropriate Services (CLAS)

Background...
- Based on decades of research
- Title VI Civil Rights Act
- Health & Human Services (HHS)
- Office of Minority Health (OMH)

Purpose...
- To be inclusive of all cultures and groups
- Designed to address needs of racial, ethnic, and linguistic population groups that experience unequal access to health services.

Culturally Competent Care (1–3)
- Language Access Services (4–7)
- Organizational Supports (8–14)

What does this mean for campus mental health?

GROUP ACTIVITY 1
- Review the scenario handout
- Discuss the included questions
- Report out
ORGANIZATIONAL CULTURAL COMPETENCE

FRAMEWORK

DOMAINS:
- Identified seven domains for assessing cultural competence. These are critical spheres in which cultural competence should be evident or manifest in an organization.
- They reflect the underlying construct of cultural competence in health care delivery organizations.

Domains | Focus Areas
--- | ---
Organizational Values | Perspectives and attitudes
Governance | Goal setting, policy-making
Planning/Monitoring | Data collection and tracking
Communication | Information exchange
Staff Development | Attitudes, knowledge, and skills
Organizational Infrastructure | Resources
Services/Interventions | Delivery or facilitation of services

Domain: Organizational Values
- CC is integrated into the mission of your department/program/higher education institution.
- Your efforts are aligned with the CC initiatives of the larger institution.

Domain: Governance
- CC is integrated into the goals you have defined for your suicide prevention program.
- CC is integrated into hiring practices.

Domain: Planning and Monitoring
- Data collection instruments ask about campus-specific priority audiences.
- Data collection considers how students define key issues and terminology.
Domain: Communication
- Reduce “silos”: communication lines are built across campus departments and organizations that serve/are composed of priority audiences.
- Data is reported back to priority audiences.

Domain: Staff Development
- Staff across campus are trained and equipped to address CC in programs/services.
- Gatekeeper training products and formats reflect the needs of individual campuses and their priority audiences.

Domain: Organizational Infrastructure
- Staff across campus have training and experience working with the priority audiences represented on campus.
- Support resources include “natural helpers” and members of the priority audiences.

Domain: Services & Interventions
- Priority audiences are included in the design, delivery, and evaluation of programs and services.
- Program components address the specific needs (including structural barriers), values, and behavioral norms of the priority audiences.

ORGANIZATIONAL CULTURAL COMPETENCE ASSESSMENT

INDICATORS

Domain Indicators
Structural
To assess an organization's capability to support cultural competence through adequate and appropriate settings, instrumentalities, and infrastructure, including staffing, facilities and equipment, financial resources, and administrative structures etc.
Process
To assess the content and quality of activities, procedures, methods, and interventions in the practice of culturally competent care and in support of such care.

Outputs
Used to assess immediate results of culturally competent policies, procedures, and services that can lead to achieving positive outcomes.

Organizational Cultural Competence

GROUP ACTIVITY 2

- Review the scenario from activity 1
- Consider how each domain might relate to Anna’s narrative
- Fill in one issue for each domain using the provided table
- Report out

Appreciative Inquiry (AI)
Appreciative Inquiry (AI)

- “Invented” by David Cooperrider & colleagues at Case Western Reserve University
- In practice 20+ years
- Used globally by businesses and not-for-profit organizations

Appreciative Inquiry Experience

“... It feels just right... Like “coming home”. Only for most of us, it’s more like what we wish our home of origin could have been like.

Imagine a group where every person is valued for their own unique strengths and has a voice that is always heard. And everyone is working together toward a common vision.”

Willis, 2008

Appreciative Inquiry Experience

What is the Powerful Question?

A powerful question:
- Generates curiosity - invites creativity
- Focuses the inquiry - stimulates reflective conversation
- Is thought provoking - surfaces underlying assumptions
- Touches a deeper meaning - stays with participants
- Travels well - positive word of mouth

What is Appreciative Question?

An appreciative question:
- Tackles a problem end over end
- Assumes we will find the solution together

Asks:
- What’s right about where we are, now?
  - Tell me about a time when...
- What makes today’s small wins possible?
  - How can we do more of that in the future?
- What’s possible?
  - Imagine a year from now, when we got it right...

Tips for Appreciative Questions

- Ask about high points, most valued qualities
- Use positive questions that build on positive assumptions
- Provide a thought provoking, appealing definition of the topic
- Focus on personal experiences; storytelling
- Expect to learn something surprising, wonderful
- Value the experience of the person you are interviewing
WARNING:
Unless a why question is carefully crafted, it can evoke a defensive response, as people try to justify their answer rather than proceed in a spirit of inquiry (e.g., Why does our coalition fail to reach the larger community?)

SCOPE
The Scope of the question must match the need we are addressing. Note the impact of scope below:

- How can we best share information as a team?
- How can we best share information as a coalition?
- How can we best share information with our community?

The questions above progressively broaden the domains of inquiry. Sometimes questions are interesting, but are outside the scope of our capacity (e.g., How can we change the health behavior of our nation?)

“Adding wings to caterpillars does not create butterflies—it creates awkward and dysfunctional caterpillars. Butterflies are created through transformation.”

Stephanie Pace Marshall

Progressive improvement…
…not postponed perfection!!!!