

Culturally Responsive Services

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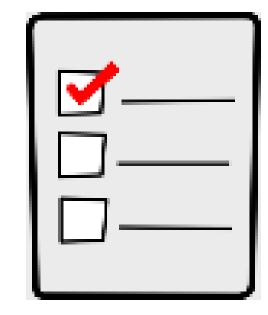
Housekeeping

- We invite you to be present with us!
- Questions and comments welcome throughout
- We will take a 5 minute break around mid-way through the session
- Let us know about any accessibility accommodations you may need
- If you are seeking CEUs...
 - Stay for the duration of the training
 - Participate in discussion
 - Cameras on!
- Course evaluation is required to receive a certificate



Today's Agenda

- ✓ Welcome, introductions & check-in activity
- ✓ Culture & identity
- √ Barriers to care
- √ Implicit bias
- ✓ Cultural competence & cultural humility
- √ Key strategies
- √ Case study
- √ Summary, closing remarks, & Q&A





Learning Objectives

- Define the need to implement culturally responsive services
- Define cultural humility and contrast it with cultural competence
- Identify at least 3 ways to adjust current practice to align with a cultural humility framework



Who Are We?

Let us know in the chat...

A few words to describe your cultural identity

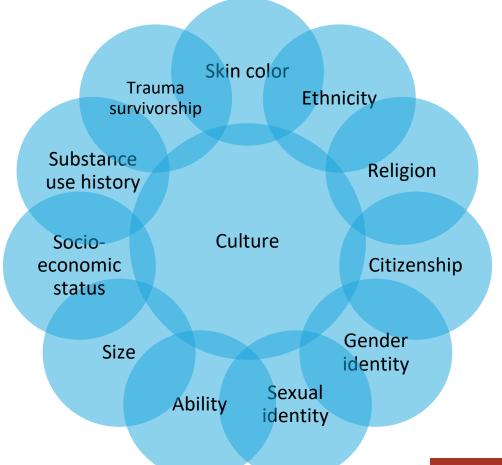




Culture



Defining Culture





Any identity that holds a common set of values, beliefs or practices

Expanding the Definition of Culture

Outside of my family, who do I associate myself with & why?

Do the people I spend the most time with share similar values?

What do I wish people understood more about me?

Who do I find it challenging to associate with?

What am I passionate about?



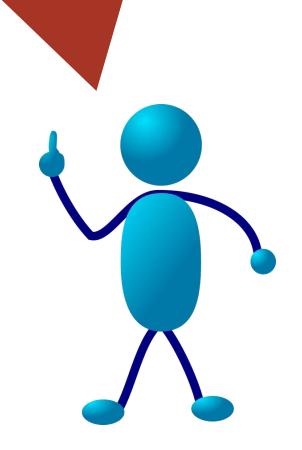
Cultural Identity

- Constantly shifting understanding
- Exists in relation to others
- Sense of belonging to a group
- Self-determined





"Intersectionality explores
the power dynamics present at the
connection between two or more
oppressed identities"







Barriers to care



Ingroups & Outgroups

- People tend to favor people who exist in similar groups as them
- Ingroup favoritism plays a bigger role in discrimination than outgroup hostility
- Dominant culture





Barriers to care

- Prejudice
- Stereotype
- Discrimination
- Assimilation vs Acculturation
- Marginalization
- Microaggression





Expressing Power

- What ways might a service provider represent dominant culture?
- What examples of power dynamics exist in your agency?





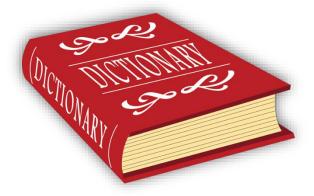
Implicit Bias



Defining Implicit Bias

- im•plic•it bi•as /im `plisit `bīas/: Attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.
 - Positive or negative
 - Activated involuntarily
 - Without awareness or intentional control
 - Everyone is susceptible





Implicit Bias Across Domains

- Criminal legal system
 - Police, Courtrooms
- Education
- Employment
- Housing
- Healthcare





It is probably not possible for us to get rid of all our biases, nor is it desirable. Our brain's way of sorting through lots of stimuli quickly is what allows us to move through the world and survive. What we need to learn is how to slow down the biases that betray our values long enough for us to act in a way that is more aligned with what we believe.



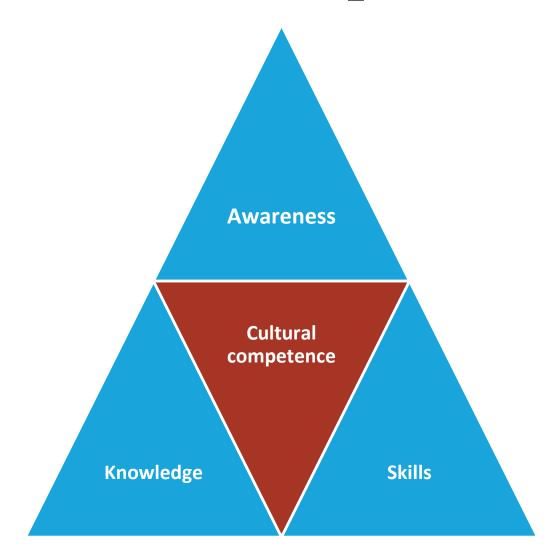
Vernā Myers

Author, Inclusion Strategist, and Social Commentator

Multicultural Competence



Cultural competence





Limitations of CC

- A narrow definition of culture
- Can promote stereotypes and assumptions
- Focuses heavily on effectiveness
- Self-awareness exclusively about one's comfort
- Is it possible to really "know" and become "competent" in another, especially marginalized culture? Multiple cultures?





Multicultural Orientation



Cultural Humility

Institutional & individual accountability

Lifelong learning & critical self-reflection

Recognize & challenge power imbalances



A Humble Call to Action

- Resist the allure of "knowing"
- Be flexible and humble enough to assess anew the cultural dimensions of the experiences of a participant
- Approach clients with respectful openness and explore collaboratively the client's cultural identities
- Identify and remove power imbalances



"We cannot know the outcome of our work together, only that it will transform both us"
- Mara Gottlieb

Cultural opportunities

- Moment to directly attend to cultural identity
- Purposeful dialogue about client's identity
- No abrupt transitions naturally unfolding process
- High cultural humility = fewer missed cultural opportunities + clients are more forgiving





What's the difference?

Cultural humility

- Flexible
- Ongoing
- A mindset
- Diminishing power dynamics
- Co-learning

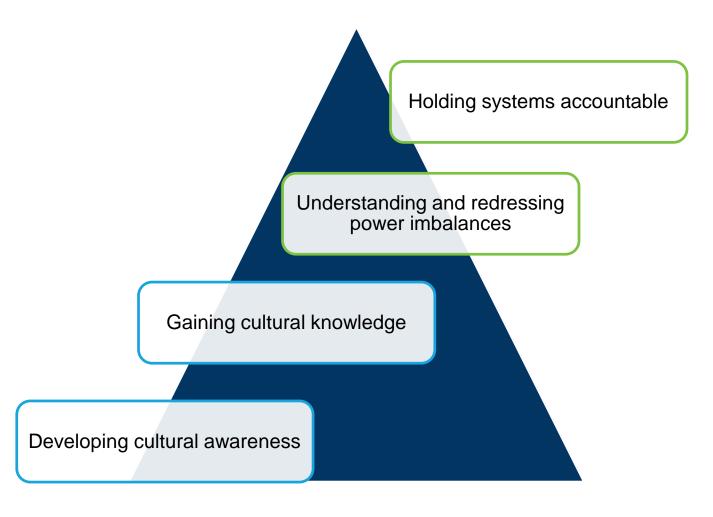
Overlap

- Working with difference
- Addressing inequalities
- Working collaboratively
- Bringing our own stories to the situation

Cultural competence

- Static
- Discrete mastery
- A goal
- Expertise
- Knowledge
- Skill-building

A solid foundation





Putting it into Practice



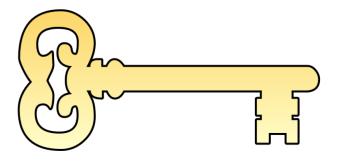
3 Key Strategies

Compassionate self-awareness and inquiry

Be open and teachable

Bear in mind the social structures





Compassionate self-awareness & inquiry

- Identify stereotypes and biases we hold
 - Perspective taking
 - Mindfulness
 - Building new associations
- Peer supervision groups with people from different cultural backgrounds

"Any assessment of the self that is based on self-awareness is made by the same self who is being assessed."
- Miu Chung Yan & Yuk-Lin Renita Wong



Be open and teachable

- Assessment
 - CFI (A. Sanchez, personal communication, August, 2021).
 - Informed consent includes acknowledgement of cultural differences
 - Ecomaps, Culturagrams
 - Kleinman's 8 questions
- Unconditional positive regard
- Culture of feedback





Bear in mind the social structures

- Being attuned to recognizing power dynamics
 - Power Over vs Power To
 - Client led goals and documentation
- Trauma-informed approach
- Own our cultural biases





- Emma is a homeless 35 year-old African American mother of 4 children between the age of 4 10, diagnosed with HIV three months ago. Her HIV last test was five years ago, and she did not return for the results.
- Emma has a 15 year history of intravenous drug use. She stated that her last use of drugs was 12 hours ago. The highest grade Emma achieved in school was the 10th and she has a history of Schizophrenia.
- Emma has had several close friends die of AIDS. She receives care at an urban community clinic where all her providers are of European descent. She is very cautious about starting any drug therapy for HIV because of the stories she has heard of other African Americans being used in an experimental way without their consent. She has not expressed her concerns to her provider.



1. What barriers might Emma face in receiving services?

- Emma is a homeless 35 year-old African American mother of 4 children between the age of 4 10, diagnosed with HIV three months ago. Her HIV last test was five years ago, and she did not return for the results.
- Emma has a 15 year history of intravenous drug use. She stated that her last use of drugs was 12 hours ago. The highest grade Emma achieved in school was the 10th and she has a history of Schizophrenia.
- Emma has had several close friends die of AIDS. She receives care at an urban community clinic where all her providers are of European descent. She is very cautious about starting any drug therapy for HIV because of the stories she has heard of other African Americans being used in an experimental way without their consent. She has not expressed her concerns to her provider.



2. Are there any assumptions the case manager might have about Emma?

- Emma is a homeless 35 year-old African American mother of 4 children between the age of 4 10, diagnosed with HIV three months ago. Her HIV last test was five years ago, and she did not return for the results.
- Emma has a 15 year history of intravenous drug use. She stated that her last use of drugs was 12 hours ago. The highest grade Emma achieved in school was the 10th and she has a history of Schizophrenia.
- Emma has had several close friends die of AIDS. She receives care at an urban community clinic where all her providers are of European descent. She is very cautious about starting any drug therapy for HIV because of the stories she has heard of other African Americans being used in an experimental way without their consent. She has not expressed her concerns to her provider.



3. What themes of dominant culture are present here?

- Emma is a homeless 35 year-old African American mother of 4 children between the age of 4 10, diagnosed with HIV three months ago. Her HIV last test was five years ago, and she did not return for the results.
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4. What responsibilities does the clinic have in regard to cultural humility?

Incorporating Cultural Responsiveness

- Culturally-modified Trauma-Focused Treatment
- Womanist and Mujerista Psychologies
- Emotional Emancipation Circles
- Culturally Modified Mindfulness Cognitive Therapy









Review

- People with marginalized identities face dire outcomes in mental health treatment and homelessness
- Cultural competence is a useful concept that has key limitations that cultural humility can move us past
- Cultural opportunities are key moments to explore and affirm client's cultural identities
- Cultural humility is an approach that requires lifelong learning and self-awareness, being open and teachable, and keeping in mind social structures



What's one new idea or concept you learned today?

What's one thing you are excited to try or share with your colleagues?



Course Evaluation





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