


Addressing the Socio-cultural Complexity in Cultural Competence: Applying Public Health Critical Race Praxis (PHCR) and Cultural Humility.

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**Presenter Disclosures**

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"No relationships to disclose"



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**Outline**

- Definitions of cultural competence
- Challenges of cultural competence
- Integrating Two Frameworks
  - Cultural Humility
  - Public Health Critical Race Praxis
- Cultural Competence Questions




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**Cultural Competency -- Definitions**

Cultural competence is defined in the broader context of diversity and inclusion as "the active, intentional, and ongoing engagement with diversity to increase one's awareness, content knowledge, cognitive sophistication, and empathic understanding of the complex ways individuals interact within systems and institutions" (Milem, 2005).


Expert Panel on Cultural Competence Education for Students in Medicine and Public Health (2012, p.2).  
<http://www.aaph.org/Assets/11-2712/CulturalCompetenceEducation%20Final.pdf> (Accessed October 20, 2012)



**Cultural Competency -- Definitions**

Cultural and linguistic competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.

Office of Minority Health, US Department of Health and Human Services.




**Cultural Competency -- Definitions**


Cultural competence requires that **organizations:**

- have a defined set of values and principles, and demonstrate behaviors, attitudes, policies and structures that enable them to work effectively cross-culturally.
- have the capacity to (1) value diversity, (2) conduct self-assessment, (3) manage the dynamics of difference, (4) acquire and institutionalize cultural knowledge and (5) adapt to diversity and the cultural contexts of the communities they serve.
- incorporate the above in all aspects of policy making, administration, practice, service delivery and involve systematically consumers, key stakeholders and communities.

Adapted from the National Center for Cultural Competency




**Both individuals and organizations** are at various levels of awareness, knowledge and skills along the cultural competence continuum.



### What is culture?


'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.

"Culture is the ways of thinking, the ways of acting and the material objects that together form a people's way of life." (Macionis, *Society the Basics*, 2008)



### What is competence?

'Competence' implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities. (Adapted from Cross, 1989).



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## CULTURAL COMPETENCE – CHALLENGES?



### Culture Competence – Challenges

Culture relates to race/ethnicity?  
 Dominant groups are the norm


1. The locus of normalcy is white, Western, Christian
  - "White" is excluded from the concept of cultural diversity
2. The "other" is problematic, challenging and confounding and "competence" in working with the "other" requires a mastery of a finite body of knowledge



### Culture Competence – Challenges


Culture is something that the "other" has

Dominant groups do not have "culture" and they are the "norm," "neutral," "real," "less racial" and no critical insight into "normative unearned privileges"

 **Culture Competence – Challenges**

“Deficit approach”: Inequality is due to the disadvantages in the subordinate groups and not the advantages in the dominant group?

Cultural competence requires a tolerant and confident attitude, celebrating diversity and supporting the status quo

 **Culture Competence – Challenges**

Increase in knowledge of or exposure to the “other” is sufficient and such knowledge is finite

Cultural competence is the mastery of a checklist of dos and don’t about the “other”

 **Culture Competence – Challenges**

Structural inequities are ignored

1. White privilege and power inequality are not examined
2. Acts of commission vs. acts of omission


 **Culture Competence – Challenges**

Does not consider the impact of the intersection of multiple structural inequities including racism on health disparities.

Cultural humility is not considered

 **Culture Competence – Challenges**

Cultural competence is conceptualized as **one of the keys ways** to address racial/ethnic disparities in public health and health care

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For cultural competence to better address racial/ethnic health disparities....requires an incorporation of a broader discourse that reflects a critical understanding of the underlying socio-political and economic processes of power, privilege and institutional racism that create, support and maintain existing health disparities



New paradigms are needed in addressing and eliminating the health disparities linked to race/ethnicity

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Health Disparities, Cultural Competence and Race/Ethnicity and Structural Inequality

**Integrating Two Frameworks....**

- Cultural Humility?
- Public Health Critical Race Praxis?

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**CULTURAL HUMILITY**

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**Cultural Humility**

Another term for cultural competence is **cultural humility**:


- Life long process of learning, growing and developing cultural sensitivity that affects the way we view the world around us
- Commitment to on-going scrutiny of our culture and the systems of privilege in which we are located.
- Commitment to address, confront and speak out against systems of injustice and subordination  
(Tervalon & Murray-Garcia, 1998)

Cultural competence is a **journey**.  
It is a developmental process that evolves over an extended period.

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**Cultural Humility**


- *"If you can't see that your own culture has its own set of interests, emotions, and biases, how can you expect to deal successfully with someone else's culture."*  
Dr. Kleinman p. 281 (A. Fadiman. *Spril catches you and you fall down*)
- **allows for analyzing and redressing structural power imbalances**

 **Critical Race Theory**


Critical race theory is a transdisciplinary, race-equity methodology that originated in the legal field and is grounded in social justice.

Public Health Critical Race – PHCR -- praxis adapts Critical Race Theory to public health and provides tools to investigate the root causes of health disparities.

Ford et al. AJPH 2010;100:530-535


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**PUBLIC HEALTH CRITICAL RACE PRAXIS**

 **PHCR**

Public Health Critical Race praxis call for a level of race consciousness and an understanding of the contemporary and historical process by which racism and inequities result in persistent health disparities.


Ford et al. AJPH 2010;100:530-535

 **PHCR**

“It is an iterative methodology for helping investigators remain attentive to equity while carrying out research scholarship and practice.” p. 531

Action oriented to address inequities and root causes

Ford et al. AJPH 2010;100:530-535


 **PHCR**

Explicitly accounts for the influences of racism and race-privilege on: the production of knowledge, research process and the outcomes

Goes beyond using “race” as a demographic variable

Assumption is that health equity cannot be achieved if there is state sanctioned exploitation of vulnerable groups

Ford et al. AJPH 2010;100:530-535

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**Race...**

Race is a socio-political construct and systems of racial classification

Lacks a scientific basis, are arbitrary, and are embedded in systems of politics, power, stratification, and ideology

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### Racism...

An organized system rooted in an ideology of white supremacy and inferiority of racial/ethnic groups and is linked to socio-cultural and political power to categorize, stereotype, marginalize, rank, and allocate societal resources unequally across groups of people

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### Racism...

Influences a persons life chances and access to valued resources in society that are critical to ones health, social well-being and the ability to live ones life with dignity and grace.

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### Racism and Health

Health consequences of race, racism and racial classifications are very real

Over a century ago, W.E.B. Du Bois, a sociologist underscored the primacy of social factors in explaining the stark disparities between blacks and whites

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Given the primacy of race and racialization in structural inequities, an understanding of the underlying socio-political process of racialization and racism is essential in tackling health disparities.

These racial inequities that are embedded in social institutions or the social determinant of health cause systematic differences between groups that ultimately lead to health disparities at the population level.

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### PHCR Concepts and Cultural Competence

- ❑ Centering in the margins
  - ❑ Making the perspectives of socially marginalized groups, rather than those of people belonging to dominant race or culture, the central axis around which discourse on a topic revolves


Ford et al. AJPH 2010;100:530-535; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8.

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### PHCR Concepts and Cultural Competence


- ❑ Critical consciousness
  - ❑ Digging beneath the surface for information to develop deeper understandings of concepts, relationships, and personal biases
- ❑ Experiential knowledge
  - ❑ Ways of knowing that result from critical analysis of one's personal experiences

Ford et al. AJPH 2010;100:530-535; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8.

 **PHCR Concepts and Cultural Competence**

- ❑ **Ordinariness**
  - ❑ The nature of racism in post-civil rights society
    - ❑ integral and normal rather than aberrational
- ❑ **Praxis**
  - ❑ Iterative process by which the knowledge gained from theory, research, personal experiences, and practice inform one another

Ford et al. AJPH 2010;100:830-835; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8.

 **PHCR Concepts and Cultural Competence**


- ❑ **Primacy**
  - ❑ Prioritizing the study of racial influences on outcomes
- ❑ **Race consciousness**
  - ❑ Explicit acknowledgment of the workings of race and racism in social contexts or in one's personal life

Ford et al. AJPH 2010;100:830-835; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8.

 **PHCR Concepts and Cultural Competence**


- ❑ **Social construction of race**
  - ❑ The endowment of a group or concept with a delineation, name, or reality based on historical, contextual, political, or other social considerations

Ford et al. AJPH 2010;100:830-835; Ford et al. Soc Sci Med. 2010 Oct;71(8):1390-8.

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**PHCR**

PHCR framework can broaden the cultural competence and cultural humility discourse by providing an approach to answering critical questions:

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**CC Questions**

How do we better understand the primacy of race and racial stratification and its impact on social problems including that of health?

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**CC Questions**

How do we “center in the margins” and prioritize the perspectives of disenfranchised communities?



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**CC Questions**

What are the aspects of contemporary everyday racism that might undergird a persons experience and their health?

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**CC Questions**

How does both the structural and socio-cultural process of racialization and possible disciplinary biases influence the definition of "culture" and the "other" and what methodologies can we use to give voice to the marginalized?

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**CC Questions**

What are the interlocking multiple axes of power/privilege and subordination that are present and how do they play out within a practice or research environment?

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**CC Questions**

Through critical consciousness and social action how can imbalances in power be minimized or redressed....despite being embedded within an intractable structural context?

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**Conclusion**

Key concepts in CULTURAL HUMILITY AND PUBLIC HEALTH CRITICAL RACE praxis can be integrated to produce a robust cultural competence, public health approach that effectively addresses the impact of structural inequities on health disparities.

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**Questions?**