

To advance the discussion of cultural competence and its meaning, the BHP Division of Health Professions Diversity has compiled a representation of definitions of cultural competence.

From the [President's Initiative on Race and Health](#) Town Hall Meeting

July 10, 1998: Cultural competence is the ability to deliver effective medical care to people from different cultures. By understanding, valuing and incorporating the cultural differences of America's diverse population and examining one's own health-related values and beliefs, health providers deliver more effective and cost-efficient care.

U.S. Department of Health and Human Services workgroups say:

Cultural competence comprises behaviours, attitudes, and policies that can come together on a continuum: that will ensure that a system, agency, program, or individual can function effectively and appropriately in diverse cultural interaction and settings. It ensures an understanding, appreciation, and respect of cultural differences and similarities within, among and between groups. Cultural competency is a goal that a system, agency, program or individual continually aspires to achieve.

Health Resources and Services Administration Bureau of Health Professions Division of Nursing:

Cultural competence is a set of academic and interpersonal skills that allow an individual to increase their understanding and appreciation of cultural differences and similarities within, among and between groups. This requires a willingness and ability to draw on community-based values, traditions, and customs and to work with knowledgeable persons of both and from the community in developing targeted interventions, communications, and other supports.

Health Resources and Services Administration Bureau of Primary Health Care:

Cultural competence is a set of attitudes, skills, behaviours, and policies that enable organizations and staff to work effectively in cross-cultural situations. It reflects the ability to acquire and use knowledge of the health-related beliefs, attitudes, practices and communication patterns of clients and their families to improve services, strengthen programs, increase community participation, and close the gaps in health status among diverse population groups. Cultural competence also focuses its attention on population-specific issues including health-related beliefs and cultural values (the socioeconomic perspective), disease prevalence (the epidemiologic perspective), and treatment efficacy (the outcome perspective).

Health Resources and Services Administration Bureau of Primary Health Care Office of Women and Minority Health:

Cultural and linguistic competence is a set of congruent behaviours, attitudes and policies that come together in a system, agency or among professionals that enables effective work in cross-cultural situations. "Culture" refers to integrated patterns of human behaviour that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious or social groups. "Competence" implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviours and needs presented by consumers and their communities.

Substance Abuse and Mental Health Services Administration Center for Mental Health Services:

Cultural Competence includes: Attaining the knowledge, skills, and attitudes to enable administrators and practitioners within system of care to provide effective care for diverse populations, i.e., to work within the person's values and reality conditions. Recovery and rehabilitation are more likely to occur where managed care systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers from the four underserved/underrepresented racial/ethnic groups, their families, and communities. Cultural competence acknowledges and incorporates variance

in normative acceptable behaviours, beliefs and values in determining an individual's mental wellness/illness, and incorporating those variables into assessment and treatment.

National Center of Cultural Competence:

Cultural Competence is a set of congruent behaviours, attitudes, and policies that come together in a system, agency, or among professionals and enables that system, agency, or those professionals to work effectively in cross-cultural situations. (Cross, T., Bazron, B., Dennis, K., & Isaacs (1989). *Towards A Culturally Competent System of Care Volume 1*. Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center).

American Medical Association:

Any group of people who share experiences, language, and values that permit them to communicate knowledge not shared by those outside the culture. Culturally competent physicians are able to provide patient-centered care by adjusting their attitudes and behaviors to account for the impact of emotional, cultural, social and psychological issues on the main biomedical ailment. *Cultural Competence Compendium*, 1999.

American Medical Association:

The knowledge and interpersonal skills that allow providers to understand, appreciate, and work with individuals from cultures other than their own. It involves an awareness and acceptance of cultural differences; self-awareness; knowledge of patient's culture; and adaptation of skills. *Culturally Competent Health Care for Adolescents*, 1994.

Appendix E: Definitions of Cultural Competence

Many have offered definitions of cultural competence. That literature posits so many definitions indicates that the answer still is evolving. We thought that the interested reader might benefit by an opportunity to compare thinking. However, it is crucial that no agency or professional wait for any conclusive definition of cultural competence before embarking on the necessary work nor use the absence of a universally recognized definition as an excuse not to act.

From Terry Cross, et al. (1989)

Toward a Culturally Competent System of Care: Vol.1, Washington, DC, National Technical Assistance Center for Children's Mental Health, Georgetown University Child Development Center.

"Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or amongst professionals and enables that system, agency, or those professionals to work effectively in cross-cultural situations. The word culture is used because it implies the integrated pattern of human behavior that includes thoughts, communications, actions, customs, beliefs, values, and institutions of a racial, ethnic, or religious group. The word competence is used because it implies having the capacity to function effectively. A culturally

competent system of care acknowledges and incorporates—at all levels—the importance of culture, the assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural difference, the expansion of cultural knowledge, and the adaptation of services to meet culturally-unique needs. (pp. iv. and v.)

"Five essential elements contribute to a system's, institution's, or agency's ability to become more culturally competent. The culturally competent system would: (1) value diversity; (2) have the capacity for cultural self-assessment; (3) be conscious of the dynamics inherent when cultures interact; (4) have institutionalized cultural knowledge; and (5) have developed adaptations to diversity. Further, each of these five elements must function at every levels of the system. Practice must be based on accurate perceptions of behavior, policies must be impartial, and attitudes must be unbiased." (p. v.)

From the National Association of Social Workers (NASW)

Standards for Cultural Competence in Social Work Practice.

"Cultural competence is never fully realized, achieved, or completed, but rather cultural competence is a lifelong process for social workers who will always encounter diverse clients and new situations in their practice. Supervisors and workers must have the expectation that cultural competence is an ongoing learning process integral and central to daily supervision.

"Cultural competence refers to the process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, religions, and other diversity factors in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each.

"Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system or agency or among professionals and enable the system, agency, or professionals to work effectively in cross-cultural situations.

"Operationally defined, *cultural competence* is the integration and transformation of knowledge about individuals and groups of people into specific standards, policies, practices, and attitudes used in appropriate cultural settings to increase the quality of services, thereby producing better outcomes (Davis & Donald, 1997). Competence in cross-cultural functioning means learning new patterns of behavior and effectively applying them in appropriate settings.

"Gallegos (1982) provided one of the first conceptualizations of ethnic competence as "a set of procedures and activities to be used in acquiring

culturally relevant insights into the problems of minority clients and the means of applying such insights to the development of intervention strategies that are culturally appropriate for these client." (p. 4). This kind of sophisticated cultural competence does not come naturally to any social worker and requires a high level of professionalism and knowledge.

From the CLAS health care standards

"Cultural competence includes being able to recognize and respond to health-related beliefs and cultural values, disease incidence and prevalence, and treatment efficacy. Examples of culturally competent care include striving to overcome cultural, language, and communications barriers; providing an environment in which patients/ consumers from diverse cultural backgrounds feel comfortable discussing their cultural health beliefs and practices in the context of negotiating treatment options; using community workers as a check on the effectiveness of communication and care; encouraging patients/ consumers to express their spiritual beliefs and cultural practices; and being familiar with and respectful of various traditional healing systems and beliefs and, where appropriate, integrating these approaches into treatment plans. When individuals need additional assistance, it may be appropriate to involve a patient advocate, case manager, or ombudsperson with special expertise in cross-cultural issues."

From the WICHE mental health standards

"Cultural competence includes attaining the knowledge, skills, and attitudes to enable administrators and practitioners within systems of care to provide effective care for diverse populations, i.e., to work within the person's values and reality conditions. Recovery and rehabilitation are more likely to occur where managed care systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers from the four underserved/underrepresented racial/ethnic groups, their families, and communities. Cultural competence acknowledges and incorporates variance in normative acceptable behaviors, beliefs, and values in:

- determining an individual's mental wellness/illness, and
- incorporating those variables into assessment and treatment."

From Elizabeth Vonk, Operational Definition of Cultural Competence for Transracial Adoptive Parents (2001)

Social Work, Vol. 46, No. 3, p. 247. The author calls this a detailed operationalized definition of cultural competence for transracial adoptive parents with concrete "I know..." and "I do..." statements defining what it means to be a culturally

competent parent of a child of a different race.

"Knowledge is needed to understand the client's life experiences and life patterns. Skills are tailored to meet the needs of a client from a different culture, including cross-cultural communications skills. Attitude is related to social workers' awareness of assumptions, values, and biases that are a part of their own culture and worldview and understanding the worldview of the client who is a member of a different culture. It includes principles such as understanding ethnocentric thinking and learning to appreciate differences."

From the Child Welfare League of America

"Cultural Competence is the ability of individuals and systems to respond respectfully and effectively to people of all cultures, classes, races, ethnic backgrounds, and religions in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each. The knowledge and skill set necessary to identify and address the issues facing your organization, that have cultural implications, and the ability to operationalize this knowledge into the routine functioning of the agency."

<http://www.cwla.org/programs/culturalcompetence/>

From A.R. McPhatter (1997)

Child Welfare, Vol.76, Child Welfare League of America

"*Cultural competence* means an ability to provide services that are perceived as legitimate for problems experienced by culturally diverse persons." [p. 261]

"Cultural competence denotes the ability to transform knowledge and cultural awareness into health and psychosocial interventions that support and sustain healthy client system functioning within the appropriate cultural context." [p. 261]

"The *culturally skilled counselor* is one who is in the process of actively developing and practicing appropriate, relevant, and sensitive intervention strategies and skills in working with his or her culturally different clients. Thus, any serious initiative to work effectively with diverse client populations begins with this premise." [p. 260]

"*Culturally competent practitioner* means one who is able to conduct his or her professional work in a way that is congruent with the behavior and expectations that members of a distinctive culture recognizes as appropriate among themselves." [p. 261]

Federal Medicaid Managed Care Rule (a.k.a. "BBA rules")

The proposed federal Medicaid managed care rules, require that managed care

organizations ensure that services are provided in a culturally appropriate manner. However, the proposed rule does not define cultural or linguistic competence.

See: *Federal Register*, Vol. 66, No. 161, Monday, August 20, 2001, Page 6414, Section 438.206(e)(2)

Federal Bureau of Primary Health Care (1997) This uses the Terry Cross definition in its second part. The definition was adopted by Thomas D. Lonner in *Constructing the Middle Ground: Cultural Competence in Medicaid Managed Care*.

"Cultural competence within the public health system refers to the development and provision of systems of care for diverse populations with a demonstrated awareness and integration of health related beliefs and cultural values, disease incidence and prevalence, and the appropriate management and prevention of disease as it relates to the populations seeking care. Staff within a culturally competent health-care system honor and respect beliefs, interpersonal styles, attitudes, and behaviors of individuals, families and communities they serve. Cultural competence is a lifelong process which includes the examination of one's own attitudes and values, and the acquisition of knowledge and appreciation of cultural differences and similarities within, among, and between groups. A culturally competent system of care reflects and responds to the communities it serves through its administrative policies and procedures, hiring practices, training and professional development, and the active participation of community members and consumers. Self-assessment, culturally based needs assessments, and the active incorporation of findings from these assessments into practice are essential elements of culturally competent systems.