

CULTURAL COMPETENCY INTRODUCTION

INTRODUCTION

A person's culture is composed of a constellation of beliefs, values, traditions, language, and environment that shape aspects of social groups that may be defined by geography, socioeconomic status, religion, etc.¹ Cultural competency is a concept that includes knowledge and action: both cultural awareness and sensitivity are components of cultural competency.² True cultural competence is not a mere superficial knowledge of stereotypical artifacts of a person's native culture, but rather a thorough understanding of the culturally-specific determinants of health and the context within which a person lives and the ability to act appropriately on that understanding.³

Agricultural workers in the U.S. come from many different socioeconomic, national, ethnic, and religious backgrounds. For an overview of the demographics of U.S. agricultural workers, see the findings from the National Agricultural Workers Survey (<http://bit.ly/19LGexD>) or the National Center for Farmworker Health's fact sheet on agricultural workers (<http://bit.ly/2NAwvXj>).

ISSUE

Cultural incompetence can be either obvious or more subtle; as it may take the form of blatant discrimination or it may manifest as a simple lack of awareness. Both can be combated through increasing awareness and fostering interactions among people of different cultures, languages, and beliefs in positive settings. Cultural incompetence can lead to distrust of health care providers, misunderstandings and miscommunication, and ultimately to the widening of health disparities and worsening of health outcomes in marginalized minority populations.

Implicit biases and prejudices are far more common among health care providers than explicit ones, such as blatant racism. Implicit biases can affect one's nonverbal behaviors and underlying attitudes, and may include actions such as stereotyping and hostile or unwelcoming body language.⁴ Providers and staff of Migrant Health Centers may serve highly diverse groups of agricultural worker patients with differing beliefs, faiths, languages, and countries of origin. Service providers and staff must ensure that cultural awareness, sensitivity, and competency are prioritized in order to provide high-quality and equitable care to all populations.

SOLUTIONS/STRATEGIES

¹ National Institutes of Health. (2013). Cultural competency. Retrieved from <http://www.nih.gov/clearcommunication/culturalcompetency.htm>

² Doyle, E., Ward, S., & Oomen-Early, J. (2010). Communicating health information in *The process of community health education and promotion*. Long Grove, IL: Waveland Press.

³ Clingerman, E. (2011). Social justice: A framework for culturally competent care. *Journal of Transcultural Nursing*, 22. Doi: 10.1177/1043659611414185

⁴ Dovidio, J., Kawakami, K., & Gaertner, S. (2001). Implicit and explicit prejudice and interracial interaction. *Journal of Personality and Social Psychology*, 82(1). Retrieved from http://www.atkinson.yorku.ca/~jsteele/PDF/Dovidio_Kawakami_Gaertner_JPSP_2002.pdf

The American Academy of Family Physicians recommends five ways individual medical practices can improve cultural competence:⁵

1. Value diversity
2. Conduct a cultural competence self-assessment
3. Be conscious of the dynamics when people from different cultures interact
4. Institutionalize cultural knowledge
5. Adapt service delivery to reflect an understanding of cultural diversity

LINKS

American Academy of Family Physicians (include cultural competence self-assessment tool):

<http://www.aafp.org/fpm/2000/1000/p58.html>

CultureMed: <http://culturedmed.binghamton.edu/>

Diversity Rx: <http://www.diversityrx.org/>

Harvard Clinical and Translational Science Center's *Cultural Competence in Research*:

http://www.mfdp.med.harvard.edu/catalyst/publications/cultural_competence_annotated_bibliography.pdf

Harvard's Project Implicit allows providers to assess their underlying biases and prejudices concerning racial groups, age, religion, etc.: <https://implicit.harvard.edu/implicit/>

Health Resources and Services Administration's webpage with extensive resources on cultural competence, including resources for working with agricultural workers: <http://www.hrsa.gov/culturalcompetence/index.html>

Health Resources and Services Administration's *Quality Health Services for Hispanics: The Cultural Competency Component*: <http://www.hrsa.gov/culturalcompetence/servicesforhispanics.pdf>

Kansas University's Community Tool Box: Building Culturally Competent Organizations: <http://ctb.ku.edu/en/table-of-contents/culture/cultural-competence/culturally-competent-organizations/main>

Migrant Clinician's Network presentation on cultural competency and migration health:

<http://www.migrantclinician.org/files/cxprofMCN2013.pdf>

National Center for Cultural Competence: <http://nccc.georgetown.edu/foundations/index.html>

National Library of Medicine's Multi-cultural resources page:

<http://sis.nlm.nih.gov/outreach/multicultural.html#a0>

Northeastern Regional Training and Medical Consultation Consortium article on tuberculosis, cultural competency, and migrant farm workers: <http://globaltb.njms.rutgers.edu/downloads/products/Newsletter-8.pdf>

Office of Minority Health: <https://www.thinkculturalhealth.hhs.gov/>

The Southern Poverty Law Center's "Teaching Tolerance" website: <http://www.tolerance.org/>

⁵ American Academy of Family Physicians. (2000). Improving patient care: Cultural competence. Retrieved from <http://www.aafp.org/fpm/2000/1000/p58.html>

