CULTURAL HUMILITY

How well do you know your clients? Facilitator: Staci Hirsch, Psy.D. Program Supervisor – Bridges Supportive Housing NEIGHBORHOOD SERVICE ORGANIZATION – Detroit, Michigan

Introduction & Learning Objectives

- Who am I, What is NSO, and what is Bridges Supportive Housing?
- Learning objectives
 - Clearly define the terms cultural competency, cultural literacy, and cultural humility
 - Effectively apply the concepts to your population
 - Have an improvement plan to enhance your work



NSO's Bell Building Single Site Housing & Central Office

What is culture?

- Culture is a set of learned beliefs, traditions, principles and guides for individual and collective behaviors that members of a particular group commonly share with each other.
- Culture serves as a road map for perceiving and interacting with the world
- Culture can include any of the aspects of what makes us who we are—ethnicity, where we grew up, our age, our career, religion.



How does culture influence care?



Culture and language also influence:

- health, healing, and wellness belief systems;
- how illness, disease, and their causes are perceived; both by the patient/consumer and
- the behaviors of patients/consumers who are seeking health care and their attitudes toward health care providers;
- delivery of services by the provider who looks at the world through his or her own limited set of values, which can compromise access for patients from other cultures

Social Factors Creating Health Disparities

- There is a significant difference in mortality and morbidity between Caucasian and minority persons even when economics are taken into account.
- Minorities have higher instances of many "quality of life" diseases than their Caucasian counterparts.
- Minorities have a poorer access to care than their Caucasian counterparts.
- Historically, there has been negative encounters between minorities and the healthcare system:
 - Denying access to physician and hospital services
 - Illegal experiments leading to suspicions and caution when interacting w/health care providers
 - Dismissal of "home remedies" commonly found in other cultures
 - Don't see "familiar faces" when accessing healthcare services

Cultural Competency

- "I know there is a world outside my own that may or may not share my views and values."
- It is not:
 - Tolerance
 - Assuming one is better than another
 - Belief that this is sufficient for a healthcare professional

The Worst Distance Between Two People is Misunderstanding

Cultural competency

The sign of intelligence is that you are constantly wondering.

Idiots are always dead sure about every damn thing they are doing in their life.

-Vasudev

Requires that you:

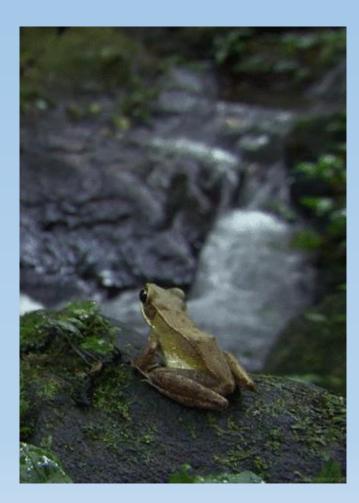
- 1. Identify basic demographics
- Identify your population's immediate environment and supports
- 3. Identify what helps and hinders tenancy



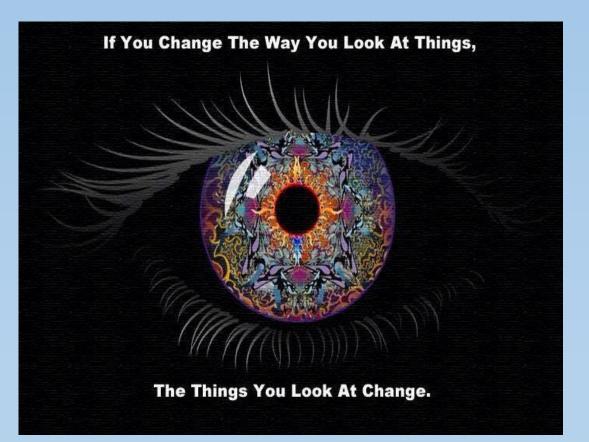
Cultural literacy

- "I can identify the values and accompanying supportive customs of groups other than mine, many of which may or may not be similar to my culture."
- It isn't:
 - Cultural blindness
 - Joining another culture because it is fashionable
 - Denying cultural dynamism

You say I'm messy. I say my things are arranged in an abstract manner intentionally as a part of my unquenchable thirst for creative expression.



Cultural humility

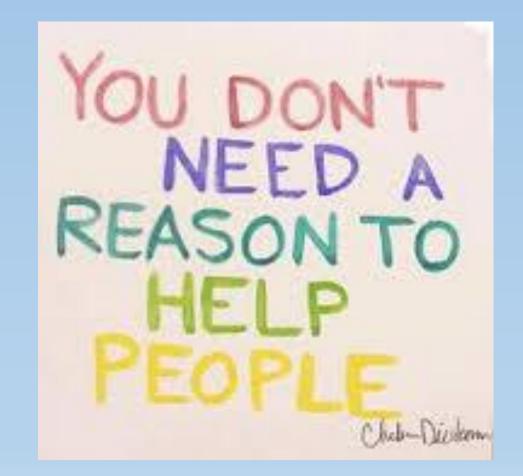


- "I accept my ignorance, discomfort, as well as resulting negative reactions to the actions of others who don't share my values and pledge to identify and celebrate them while refusing to allow my values to dominate my relationships with those I work with or serve."
- It's the next step.....

Cultural humility

• Key principles:

- Life-long learning & critical self-reflection
- Recognize and challenge power imbalances
- Accepting institutional accountability
- Developing respectful partnerships



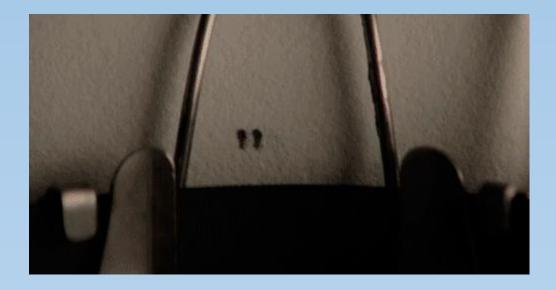


I KNOW I MESS THINGS UP SOMETIMES BUT I'M REALLY TRYING

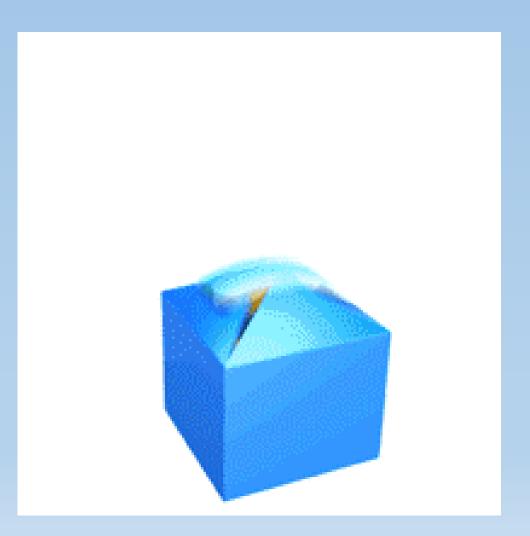
Summary

- There are three stages to cultural understanding cultural competency, cultural literacy, and cultural humility
- Each allow for a richer understanding of the client that will move your care beyond housing placement to improvement in someone's quality of life
- This self (and organizational) evaluation is simple but not easy and both need to be constantly evaluated

- Circle three aspects you think need addressing urgently
- Then rate your readiness from 1-10 to address them
- Take the highest ranking item and set up a plan realistic and deadline for that plan – choose low hanging fruit!



Questions/Discussion/Final Thoughts



What do these have in common?

- Poverty
- Human Trafficking
- Global Warming/Pollution
- Terrorism
- Bigotry
- Violence Against Women



HINT: "There is nothing noble in being superior to your fellow man; true nobility is being superior to your former self"- Hemingway