

TOWARDS A CULTURALLY COMPETENT SYSTEM OF CARE

***A Monograph on Effective Services for Minority Children
Who Are Severely Emotionally Disturbed***

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EXECUTIVE SUMMARY

This monograph, "Towards a Culturally Competent System of Care: A Monograph on Effective Services for Minority Children Who Are Severely Emotionally Disturbed," was developed in order to assist states and communities in addressing one of the primary goals of the Child and Adolescent Service System Program (CASSP)--that of appropriateness of care. CASSP seeks to assure that system service development takes place in a culturally appropriate way in order to meet the needs of culturally and racially diverse groups. As such, this document, which is being developed in two-phases, should be particularly useful to service providers, policymakers, and administrators of public and private child-serving agencies without regard to race, culture, or ethnicity. The first phase, which is a seminal piece, was developed by a subcommittee of the Minority Initiative Resource Committee of the CASSP Technical Assistance Center at Georgetown University Child Development Center (see preface for a list of Committee members). The second phase, which focuses on program examples, is currently in the planning and design phase and will be completed at a later time.

This first phase of the monograph provides a philosophical framework and practical ideas for improving service delivery to children of color who are severely emotionally disturbed. Consistent with the focus of the CASSP Minority Initiative, this monograph targets America's four sociocultural groups of color: African Americans, Asian Americans, Hispanic Americans, and Native Americans. These groups were targeted because historically they have had limited access to economic or political power, and have, for the most part, been unable or not allowed to influence the structures that plan and administer children's mental health service systems. This monograph is not a "How To" document, and, as such, is not a compendium of specific intervention strategies or approaches. It does, however, emphasize the cultural strengths inherent in all cultures and examines how the system of care can more effectively deal with cultural differences and related treatment issues.

Recognizing the cultural complexity and rich diversity that exists among minority populations, it is felt this document should be used in conjunction with training and technical assistance, if the desired results are to be achieved. In reviewing background material for this monograph, identified issues emerged with consistent frequency. For example, there is a need to clarify policy, training, resource, practice, and research issues

as they affect the provision of mental health services to minority children/families. It is recognized, however, that neither the questions raised nor the solutions suggested in response to these issues are simple ones. Nevertheless, these issues must be addressed, especially when one considers the shift in population predicted by the year 2000. Just as the overall minority population will be increasing disproportionately, in juxtaposition to the majority population, so too will the percentage of minority clients in the service delivery system increase at a disproportionate rate. Therefore, it is projected that nearly 40 percent of the clients in the service delivery system will be minority group members by the year 2000.

In an attempt to shed some light on culturally competent systems of care for minority youth, adolescents, and their families, as conceptualized by the CASSP Minority Initiative Resource Committee, this monograph:

- provides a definition for cultural competence;
- sets forth a cultural competence continuum along a six-point continuum;
- outlines the five essential elements that contribute to a system's or agency's ability to become more culturally competent;
- identifies a set of underlying values and principles of a culturally competent system of care;
- provides some practical ideas for improving service delivery to children of color who are severely emotionally disturbed at the policymaking, administrative, practitioner, and consumer level;
- describes service adaptation as a way of delivering effective services cross-culturally; and
- outlines strategies for implementation.

The cultural competence model explored in this monograph is defined as 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, religious, or social 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 differences, the expansion of cultural knowledge, and the adaptation of services to meet culturally-unique needs.

It is the thesis of this monograph that actions can be taken at the practitioner, agency, and system level which could greatly impact on improved services to minority children, youth, and families.

Cultural competence may be viewed as a goal toward which professionals, agencies, and systems can strive; thus, becoming culturally competent is a developmental process. One might envision responding to cultural differences by imaging a continuum that ranges from cultural destructiveness to cultural proficiency. There are at least six possibilities between these two extremes along the continuum, including:

- Cultural Destructiveness;
- Cultural Incapacity;
- Cultural Blindness;
- Cultural Pre-Competence;
- Cultural Competence; and
- Cultural Proficiency.

The culturally competent system of care is made up of culturally competent institutions, agencies, and professionals. 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 level of the system. Attitudes, policies, and practices must be congruent within all levels of the system. Practice must be based on accurate perceptions of behavior, policies must be impartial, and attitudes should be unbiased.

A culturally competent system of care serving children of color who are emotionally handicapped must be based on a set of underlying values and principles, such as:

- The family as defined by each culture is the primary system of support and preferred point of intervention;

- The system must recognize that minority populations have to be at least bicultural and that this status creates a unique set of mental health issues to which the system must be equipped to respond;
- Individuals and families make different choices based on cultural forces; these choices must be considered if services are to be helpful;
- Inherent in cross-cultural interactions are dynamics that must be acknowledged, adjusted to, and accepted;
- The system must sanction and in some cases mandate the incorporation of cultural knowledge into practice and policymaking;
- Cultural competence involves working in conjunction with natural, informal support and helping networks within the minority community, e.g., neighborhoods, churches, spiritual leaders, healers, etc.;
- Cultural competence extends the concept of self-determination to the community. Only when a community recognizes and owns a problem does it take responsibility for creating solutions that fit the context of the culture;
- Community control of service delivery through minority participation on boards of directors, administrative teams, and program planning and evaluation committees is essential to the development of effective services;
- An agency staffing pattern that reflects the makeup of the potential client population, adjusted for the degree of community need, helps ensure the delivery of effective services; and
- Culturally competent services incorporate the concept of equal and nondiscriminatory services, but go beyond that to include the concept of responsive services matched to the client population.

In reviewing the delivery of effective services cross-culturally, it is clear that four models frequently appear:

- 1) mainstream agencies providing outreach services to minorities;
- 2) mainstream agencies supporting services by minorities within minority communities;
- 3) agencies providing bilingual/bicultural services; and
- 4) minority agencies providing services to minority people.

Three of these four service models emphasize cultural values and helping systems: mainstream-supported minority services within minority communities, bilingual/bicultural agencies, and minority agencies providing services to minority clients.

In designing services to meet the needs of minority clients in the context of their culture, the following should be considered:

- the concept of least restrictive alternatives;
- community-based approaches with strong outreach components;
- strong interagency collaboration, including natural helpers and community systems;
- early intervention and prevention;
- intake and client identification to reduce differential treatment of minority youth;
- assessment and treatment processes that define "normal" in the context of the client's culture;
- developing adequate cross-cultural communication skills;
- the case management approach as a primary service modality; and
- the use of home-based services.

Planning for cultural competence, which assures appropriateness of care for minority populations, involves assessment, support building, facilitating leadership, including the minority family and community, developing resources, training and technical assistance, setting goals, and outlining action steps. While this process is not unique to the

development of cultural competence, it is particularly well-suited to the effort because of the scope and complexity of the issues. Such planning must be approached with the developmental nature of the acquisition of cultural competence in mind. Not all agencies will approach the issue in the same way and each will have a different timeline for development. Through the use of this or similar planning approaches, organizations can avoid feeling that the task is unmanageable and each can develop at its own pace in ways that make sense in the context of the organization.

Finally, it is felt that the theoretical knowledge base and practical ideas contained in this monograph, together with training and technical assistance, could go a long way toward improving the service delivery system for minority youth, adolescents, and their families.