Cultural Competence Training
About The Autism Program of Illinois

- 12 centers
- 4 university partners
- More than 30 collaborative partners
- Impacts more than 16,000 families annually
- Largest statewide network in the country for Autism services
About The Autism Program of Illinois

- Diagnosis, treatment and support of children with ASDs and their families
- Training for parents, providers and educators
- Community Planning
- Policy development
- Resource support through Family and Community Resource Rooms at centers statewide, providing items for loan and clinical support
- Lifespan support through involvement in the national initiative, *Advancing Futures for Adults with Autism*
- Accessibility support through *Community Avenues for Autism*, an initiative providing tools for using community resources like museums, airports and libraries

For more information: 217.525.8332 or www.theautismprogram.org
Cultural Competence Training

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Statement of Intent

1. Increase TAP staff’s knowledge and understanding of the experiences and needs of various cultural groups served by their agency
2. Increase staff’s awareness of their own cultural background, worldview, and biases
3. Increase the staff’s ability to develop appropriate intervention strategies.
Questions

- What is your favorite foreign place you have visited or dream of visiting?

- What makes this place special? Is it the people, the culture, the food, the language, the architecture, the scenery?
Activity:

- Definition of Key Terms
Culture

A set of shared attitudes, values, goals, and practices that characterizes the members of a cultural group, while also distinguishing those of another group. These shared patterns of behaviors and interactions are learned through the process of socialization.
What is Culture?

- Personal Space
- Importance of education or definition of education
- Living arrangements
- Degree of parental involvement in education
- Role of parents and ideas about childrearing
- Beliefs (about respect, competition, incentives, etc.)
- Language
- Teacher/student relationships (or adults)
- Concept of self
- Concept of time
- Religion
Race

- The concept of race is socially constructed and not biologically determined.

- Race is the category to which others assign individuals on the basis of physical characteristics, such as skin color or hair type, and the generalizations and stereotypes made as a result.
The acceptance of the group mores and practices of one’s culture of origin and the concomitant sense of belonging. Individuals may have multiple ethnic identities that operate with different salience at different times.

APA, 2003
Racial & Ethnic Identity

- An individual’s awareness and experience of being a member of a racial and ethnic group; racial and ethnic categories with which an individual chooses to describe him or herself based on such factors as biological heritage, physical appearance, cultural affiliation, early socialization, and personal experience.
Diversity

“Diversity refers to a situation that includes representation of multiple (ideally all) groups within a prescribed environment, such as a university or workplace.

This word most commonly refers to differences between cultural groups, although it is also used to describe differences within groups,

- e.g., diversity within the Asian-American culture includes Korean Americans and Japanese Americans.”
  (University of Maryland’s diversity data base)
Multiculturalism

- Recognizes the broad scope of dimensions of race, ethnicity, language, sexual orientation, gender, age, disability, class status, education, religious/spiritual orientation, and other cultural dimensions
Worldview

- Refers to the framework of ideas and attitudes through which an individual interprets the world and interacts in it

- Our worldview is shaped by many factors:
  - Our inherited characteristics, background experiences, and life situations,
  - The values, attitudes, and habits we have developed, and more

- Some aspects of a worldview may be shared by many people in a community, while other parts may differ from each individual
Individualism

- U.S. culture and society is based on the concept of individualism.
- The individual is the psychosocial unit of operation.
- Competition between individuals for status, recognition, achievement, and so forth, forms the basis for Western culture.
- Individualism, autonomy, and the ability to become your own person are perceived as healthy and desirable goals.
Other Characteristics of U.S. Culture

- “Protestant work ethic”
- “Working hard brings success”
- Progress and Future Orientation
- Plan for future
- Delayed gratification
- Value continual improvement and progress
- Status and Power
- Measured by economic possessions, credentials, titles and positions
- Owning goods, space, property
- Time
- Adherence to rigid time

- Time is viewed as a commodity
- Communication
- Standard English
- Direct eye contact
- Limited physical contact
- Control of emotions
- Religion
- Belief in Christianity
- Single God concept (monotheism)
- Holidays
- Based on Christian religion
- Based on White history and male leaders
Collectivism

- Not all cultures see individualism as a positive orientation
- In many non-Western cultures, identity is not seen apart from the group orientation
- Many societies do not define the psychosocial unit of operation as the individual. This unit tends to be the family, group, or collective society
Individualism vs. Collectivism

Discussion

- It is important for culturally competent providers to recognize the importance of defining this difference between individualism and collectivism.

- Providers who fail to recognize these differences will engage in categorizing clients with a collectivistic orientation as being “dependent,” “unable to make decisions on their own,” and “lacking maturity.”
Acculturation results when there is continuous, prolonged contact between two culturally distinct groups, and individuals within the groups must adapt to the new cultural contact situation (Berry, 2003)

Acculturation is derived from “simultaneous membership and participation in a multiplicity of contexts, such as rural, urban or suburban setting, language, age, gender, cohort, family configuration, race, ethnicity, religion, nationality, economic status, employment, education, occupation, sexual orientation, political ideology, migration, and age of acculturation” (Falicov, 1995)
Levels of Acculturation: Video Clip
It is possible for an individual to know two languages and two cultures, using both appropriately in different contexts (Falicov, 2005)
Considerations in Working with African American Clients

**Values, Beliefs and Life Ways:**
- Strong kinship bonds
- Strong religious orientation
- Large percentages of African American families are headed by single parents
- Adaptable family roles
- Use informal support network – church or community
- Distrust of government & social services
- Most are assimilated to the Anglo-American culture
- Take care of their own
- May not like to admit they need help – strong sense of pride
- May lack knowledge about available services and how the system works
- Natural remedies used frequently – i.e. prayers used to heal
- Poverty impacts level of education, self-esteem, quality of life and lifestyle across the lifespan
- Seniors are highly respected – aging represents respect, authority, and wisdom
- May tend to keep things hidden within the family system – difficulty reaching out
Considerations in Working with African American Clients (cont.)

**Intervention Tips:**

- Familiar with Anglo-American communication patterns
- Show respect at all times - history of racism and sense of powerlessness impacts interactions
- Prolonged eye contact may be perceived as staring - interpreted as confrontational/aggressive
- Use community and/or religious leaders if assistance is needed
- Do not use “street slang” – this may be interpreted as ridicule
- Do not address by first name unless they request that you do so – interpreted as disrespect
- May not like to be asked questions about finances and past relationships, whether married or not - important to gain trust in the first place
Considerations in Working with Latino/a Clients

Values, Beliefs and Life Ways:

- Group has more importance than self (collectivistic)
- Strong family unity - respect for and loyalty to the family
- Strong spiritual and religious orientation
- Distrust/fear of “government” – immigration status may impact interactions
- Male dominant – father/husband may be the primary authority figure
- Age dominant – respect for hierarchy
- Live for the present/today – fatalistic – feel powerless to control the future
- Take care of their own
- Negative view on asking for help – can take time before an agency is trusted
- Modesty is important
- Majority are Catholic – church is seen as a source for services and information
- Strong belief in the importance of prayer
- Very proud of heritage – never forget where they came from
- Comfortable with physical contact (hand shaking and hugging)
Intervention Tips:

- Respect is basic for all communication
- Like to be approached first – do not easily initiate conversation
- Eye contact is perceived as a more confrontational body language than a sign of respect
- Being ignored is a sign of disrespect and can be perceived as offensive
- Being personal, warm, trustworthy, and respectful is valued
- Avoid too much gesturing
- Encourage the individual to ask questions
- Make sure your questions have been understood - afraid to ask questions
- Maintain an accepting attitude
- Let them know their ideas/thoughts/etc. are valued
- Personal space viewed as being closer than Anglo-Americans view it
- Very expressive in their communication - seek physical contact
  - i.e. hand shaking and hugging
- Determine level of fluency in English – use interpreter if necessary
- Do not like to be asked about immigration status, religion, or financial sources
Considerations in Working with Asian Clients

Values, Beliefs, and Life Ways:

- Need to maintain harmony within the group
- Group has more importance than self (collectivistic)
- Respect for hierarchy
- Age dominant
- Male dominant
- Pressure to avoid embarrassment and mistakes, or “keep face”
- Overt displays of emotion are considered shameful
- May tend to keep things hidden within the family system - difficulty seeking services.
Considerations in Working with Asian Clients (cont.)

**Intervention Tips:**

- Gather information regarding specific families’ ethnic backgrounds, languages, immigration, and refugee experiences, acculturation levels, and community support systems
- Develop trust by establishing and adhering to rules of social conduct and proper social interaction
- Attempt to maintain and, if appropriate, reestablish traditional family structures according to cultural norms; respect the family hierarchy
- Use extended family members for support systems; lines between nuclear families and extended families are not as rigid in Asian families as they are in Western culture
Considerations in Working with Asian Clients (cont.)

- Allow families and their individual members opportunities to avoid embarrassment whenever possible.
- Avoid creating situations that may lead to conflict and confrontation. Rather, use indirect methods of communication, when appropriate, to make a point.
- Due to cultural pressures and standards, maintaining confidentiality with Asian clients is critical. Families must be assured that their problems will not become public knowledge.
- Service providers must be active and offer tangible interventions for Asian American clients. Passivity in the worker may be viewed as lack of expertise and authority. Many Asian American families are seeking concrete, tangible solutions to their problems and are uncomfortable with process- and insight-oriented strategies.
For All Clients Regardless of Ethnic Background

- Consider educational level – written and spoken words should be adapted to level of understanding
- No cultural group is homogeneous – consider within-group and individual differences
- Individual and subgroup differences exist in every culture
Gaining Awareness and Challenging Assumptions

Activity: BINGO
ETHNOCENTRISM

- Inability to accept another culture's world view
- ("My way is best.")
DISCRIMINATION

- Differential treatment of an individual due to minority status, actual and perceived

- "We just aren't equipped to serve people like that."
STEREOTYPING

- Generalizing about a person while ignoring the presence of individual differences

- ("She's like that because she's Asian -- all Asians are quiet.")
Differences are ignored and one proceeds as though differences do not exist

("There's no need to worry about a person's culture -- if you're sensitive you'll do OK.")
CULTURAL IMPOSITION

- Belief that everyone should conform to the majority
  
  ("We know what's best for you. If you don't like it you can go elsewhere.")
The systematic subordination of members of targeted racial groups who have relatively little social power (i.e. in the United States: Blacks, Latinos/as, Native Americans, Asians, etc.), by the members of the agent racial group who have relatively more social power (i.e. Whites).

This subordination is supported by the actions of individuals, cultural norms and values, and the institutional structures and practices of society.
INDIVIDUAL RACISM

- The beliefs, attitudes, and actions of individuals that support or perpetuate racism. Individual racism can occur at both an unconscious and conscious level. Examples include telling racist jokes, using a racial epithet, or believing in the inherent superiority of a particular ethnic group or race.
OPPRESSION

The arbitrary and unjust exercise of power. Imbalance of power and injustices that some groups suffer as a consequence of gender, class, nationality that can lead to conditions of alienation, inequality, and exploitation.
A set of perceived advantages enjoyed by a few beyond those commonly experienced by others in those same social, political, and economic spaces (nation, community, workplace, income, etc.). At times, the privileged individual benefiting does not necessarily hold racist beliefs or prejudices him/herself and can be, as is often the case, unaware of his/her privilege.
Working with Individuals with Disabilities

- Causes ascribed to a disability by a given culture will influence the: labels, values, and treatment of those with a disability.

- Different definitions:
  - Possession of “the evil spirit”
  - Reincarnation
  - Divine intervention
  - Genetics

- Meaning of a disability can be viewed in three ways:
  - A) by its cause
  - B) by its effects on valued attributes, and
  - C) by the status of the disability as an adult

(Groce, 1999)
Utilization of Health Services by Minority Parents

Parental Factors
- SES
- Mental health
- Language issues
- Perception of illness
- Perception of severity
- Perception of access to care
- Treatment adherence
- Attitudes and beliefs

Provider Factors
- Clinical experience
- Training
- Sex
- Age
- Language
- Values
- Practice setting
- Acculturation

System Factors
- Cultural beliefs
- Behaviors
- Values
- Resources

Adapted from Alexander Ortega’s model for understanding disparities in pediatric care (2002)
Explanatory Model for Illness

The Family’s Culture

System’s Culture

The Provider’s Culture

Cultural Beliefs
Behaviors
Values
How do people from other cultures view autism?

International studies show that autism affects individuals of all nationalities (Manghi, 2006)

What varies is the knowledge and services available in different cultures

Expectations may be different for individuals of different ethnic backgrounds

There may be differences in the behavioral symptoms of individuals with autism

Differences on the use of medication

Differences on the age of diagnosis - Second Language Issues

Differences on access to services
Consider the following:

- Lack of knowledge about autism
- Cost of treatment
- Less likely to know anyone diagnosed with autism
- Less likely to have received information about autism
- Less likely to know where they would get help
- Adherence to traditional beliefs and practices
- Educational level of information
- Language of presentation
- Social supports (or lack thereof)
- Behavior and practices of health care professionals
Autism and Ethnic Minorities

Access to services:
- Minorities have lower rates of utilization of health services
- Language problems
- Cultural differences
- Poverty
- Lack of health insurance
- Transportation difficulties
- Long waiting lists
- Behavior & practices of health care providers
- Immigration status
- Stigma regarding mental health issues
Evidence of the Impact of Culture in the Clients You Serve

- Personal Space
- Living Arrangements
- Concept of self
- Concept of time
- Degree of parental involvement in education
- Role of parents and ideas about childrearing
- Beliefs (respect, competition, incentives, etc.)
- Teacher - student relationship (or adults)
- Language
Linguistic Competence

The ability of an organization and its personnel to communicate effectively and convey information in a manner that is easily understood

- by diverse audiences including persons of limited English proficiency,
- those who have low literacy skills or are not literate, and
- individuals with disabilities.

Linguistic competency requires organizational and provider capacity to respond successfully to the health literacy needs of populations served.

The organization must have policy, structures, practices, procedures and dedicated resources to support this capacity.

Guiding Values & Principles for Language Access

- Services are delivered in the preferred language and/or mode of delivery of the clients served.
- Written materials are translated, adapted, and/or provided in alternative formats based on the needs and preferences of the clients served.
- Interpretation and translation services comply with all relevant federal, state, and local mandates governing language access.
- Clients are engaged in evaluation of language access and other communication services.
- Consider that some diagnostic tools have not been standardized for individuals of different cultures or non-English speakers. Therefore, describe the strengths and limitations of test results and interpretation.
Considerations in Working with Individuals with Disabilities

- Avoiding infantilizing speech when communicating with clients who have deficits in verbal communication
- Develop and understand values and needs of persons with disabilities
- Encourage self-advocacy skills with clients and families
- Acknowledge the core values of disability culture including the emphasis on interdependence rather than independence
- Develop comfort when working with patients with complex disabilities

Eddey & Robey (2005)
Considerations in Working with Individuals with Autism and their Families

- Develop interventions such as visual systems that are culturally appropriate
- Gain an understanding of the family’s definition of autism and if necessary, offer a different way of looking at the disorder
- Educate families about autism, its diagnosis, and its treatment
- Expand the family’s support
- Engage community support (i.e. church, school, park district, etc.)
- Encourage independence within the family’s cultural comfort
- Future planning: if appropriate, engage extended family, community support, and/or encourage communication between the family and other service providers
- Provider may act as the bridge between cultural beliefs
Example of Culturally Sensitive Dolls
http://shop4woodendollhouses.com/dollhouse-people.htm
Symbols of Acceptance

- Demonstrate your center embraces diversity
  - By displaying symbols that recognize diversity
The international symbol of acceptance
Cultural Competence in Organizations

www.theautismprogram.org
Culturally Competent Organizations

- Have a defined set of values and principles and demonstrate behaviors, attitudes, policies and structures that enable them to work effectively cross-culturally
- Are in the process of working on a vision that reflects multiculturalism
- Value diversity (and not simply tolerate it)
- Have the capacity to: conduct self-assessment, manage the dynamics of difference, acquire and institutionalize cultural knowledge, and 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 systematically involve consumers, key stakeholders, and communities
- It is important to note that cultural competence is a developmental process that evolves over an extended period. Individuals and organizations can be at various levels of awareness, knowledge, and skills along the continuum of cultural competence (adapted from Cross et al., 1989)
Culturally Competent Practice & Service Design

- Identifying and understanding the needs and help-seeking behaviors of individuals and families
- Designing and implementing services that are tailored to the unique needs of individuals, families, and communities served
- Practice is driven in service delivery systems by client-preferred choices, not by culturally-blind or culturally-free interventions
Community Engagement

- Cultural competence extends the concept of self-determination to the community.
- Cultural competence involves working in conjunction with natural, informal support and helping networks within culturally diverse communities (e.g. neighborhood, civic and advocacy associations; local/neighborhood merchants and alliance groups; ethnic, social, and religious organizations; and spiritual leaders and healers).
- Communities determine their own needs.
- Community members are full partners in decision making.
- Community engagement should result in the reciprocal transfer of knowledge and skills among all collaborators and partners.
Family and Clients

- Family, as defined by each culture, is usually the primary system of support and preferred intervention
- Family/clients are the ultimate decision makers for services and supports for their children and/or themselves
Your Homework Assignment

- If you could affect one cultural change within your organization, what would that be?
- How willing would you be to change your practices in order to become more culturally competent?
Post-Training Questions 13-36
We appreciate your participation in completing an assessment about your experience today. Please fill out the form and return at the designated area.

Thank you!
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