



**School Practitioner
Listserv**

**A Weekly Community of Practice Network
for Sharing and Interchange**



May 24, 2017

Request from a Colleague
>Any guidelines for evaluating a program’s focus on cultural competence?

- Center Response
- California DMH Cultural Competence Plan Requirements

Invitation to Listserv Participants to Share Perspectives

Featured Set of Center Resources on
>Understanding and enhancing cultural competence

**Please forward this to a few colleagues you think might be interested.
The more who join, the more we are likely to receive to share.**

**For those who have been forwarded this and want to be part of
the weekly exchange, send an email to Ltaylor@ucla.edu**

**For previous recent postings of this community of practice, see
<http://smhp.psych.ucla.edu/practitioner.htm>
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May is Mental Health Month – This year's theme is Risky Business.

Note: In keeping with the *National Initiative for Transforming Student & Learning Supports*,* this is being sent to and forwarded by over 114,000 school and community stakeholders concerned about (1) daily matters confronting schools, (2) promoting whole child development and positive school climate, and (3) the transformation of student and learning supports.

Request from a Colleague:

“We are tasked with reviewing current means of measuring cultural competency of school mental health services. I thought that your TA Center might be able to offer some suggestions or point us in the right direction.”

Center Response: There are many resources for understanding and strengthening cultural competence related to student and family support in schools. Many provide a basis for evaluation. Here are few to start with.

In 2003, the California Board of Psychology decided to take another step in enhancing its focus on diversity competence. They established a volunteer work group of psychologists with relevant expertise. Our Center at UCLA provided support for the process and, in doing so, drew on the expertise of its various networks. We subsequently included the work group’s product in our discussion of

>*Diversity and professional competence in schools* – online at
<http://smhp.psych.ucla.edu/pdfdocs/newsletter/spring04.pdf>

Here is a brief excerpt from the Center’s article:

“Those who work in schools are a diverse group. So are the students and families who attend. Examples of diversity concerns identified in research include: age, gender, race, ethnicity, national origin, migration and refugee status and experiences, religion, spirituality, sexual orientation, disability, language, socioeconomic status, education, group identity, communication modality, developmental stages, level of acculturation/ assimilation, stages of ethnic development, workplace culture, family and lifestyle, and popular culture.... All interventions to address barriers to learning and promote healthy development must consider significant individual and group differences. In this respect, discussions of diversity competence offer some useful concerns to consider and explore....”

The outline on pages 3-4 of the article provides an overview for developing measures. Here is a brief excerpt:

Diversity Competence Relevant to Mental Health in Schools: Eliminating Disparities in School Practices

“The following outline is meant to provide an overview of general arenas relevant to mental health practitioner competence in understanding and addressing human diversity among school populations. One way to think about the outline is in terms of a broad-focused, introductory course designed to provide a ‘big picture’ perspective related to human diversity and daily practice for individuals whose previous courses may not have provided a broad, foundational introduction. The emphasis is on enhancing general awareness and knowledge and introducing foundational skills through a continuing education experience. In-depth learning related to any of the main points is seen as a focus for subsequent continuing education. For example, practitioners working with a specific ethnic or socioeconomic group might pursue continuing education focused specifically on enhancing knowledge, skills, and attitudes/values related to that group....”

The major categories of the outline are:

- I. Toward an Informed, Functional Understanding of the Impact of Diversity on Human Behavior and a Respect for Differences – in the Context of Professional Practice
- II. Ethical and Legal Considerations
- III. Enhancing General Competence Related to Diversity Considerations
- IV. Implications of Diversity for Assessing and Diagnosing Psychosocial Problems and Psychopathology

V. Implications of Diversity for Intervention

VI. Implications for Supervision/Mentoring

See the article for the items listed under each category.

Also see the *Diversity Toolkit: Cultural Competence for Educators* – from the National Education Association – <http://www.nea.org/tools/30402.htm>

For a MH agency perspective, see the

>California Department of Mental Health Cultural Competence Plan Requirements
<http://www.dhcs.ca.gov/services/MH/Documents/CCPR10-17Enclosure1.pdf>

Excerpt:

“Criterion I: Commitment to Cultural Competence

Rationale: An organizational and service provider assessment is necessary to determine the readiness of the service delivery system to meet the cultural and linguistic needs of the target population. Individuals from racial, ethnic, cultural, and linguistically diverse backgrounds frequently require different and individual responses. ...

Criterion II: Updated Assessment of Service Needs

Rationale: A population assessment is necessary to identify the cultural and linguistic needs of the target population and is critical in designing, and planning for, the provision of appropriate and effective mental health services

Criterion III: Strategies and Efforts for Reducing Racial, Ethnic, Cultural, and Linguistic Mental Health Disparities

Rationale: “Striking disparities in mental health care are found for racial and ethnic populations. Racial and ethnic populations have less access to and availability of mental health services, these communities are less likely to receive needed mental health services, and when they get treatment they often receive poorer quality of mental health care. Although they have similar mental health needs as other populations they continue to experience significant disparities, if these disparities go unchecked they will continue to grow and their needs continue to be unmet...” (U.S. Dept. of Health and Human Services, Surgeon General Report, 2001).

Criterion IV: Client/Family Member/Community Committee: Integration of the Committee Within The County Mental Health System

Rationale: A culturally competent organization views responsive service delivery to a community as a collaborative process that is informed and influenced by community interests, expertise, and needs. Services that are designed and improved with attention to community needs and desires are more likely to be used by patients/consumers, thus leading to more acceptable, responsive, efficient, and effective care

Criterion V: Culturally Competent Training Activities

Rationale: Staff education and training are crucial to ensuring culturally and linguistically appropriate services. All staff will interact with clients representing different countries or origins, acculturation levels, and social and economic standing. Staff refers not only to personnel employed by the organization but also its subcontracted and affiliated personnel

Criterion VI: Commitment To Growing a Multicultural Workforce: Hiring and Retaining Culturally and Linguistically Competent Staff

Rationale: The diversity of an organization’s staff is necessary, but not a sufficient condition for providing culturally and linguistically appropriate health care services. Although hiring bilingual individuals from different cultures does not in itself ensure that the staff is culturally competent and sensitive, this practice is a critical component to the delivery of relevant and effective services for all clients. Staff diversity at all levels of an organization can play an important role in considering the needs of clients from various cultural and linguistic backgrounds in the decisions and structures of the organization.

Criterion VII: Language Capacity

Rationale: Accurate and effective communication between clients, providers, staff, and administration is the most essential component of the mental health encounter. Bilingual providers and other staff who communicate directly with clients must demonstrate a command of both English and the threshold language that includes knowledge and facility with the terms and concepts relevant to the type of encounter.

Criterion VIII: Adaptation of Services

Rationale: Organizations should ensure that clients/consumers receive from all staff members, effective, understandable, and respectful care, provided in a manner compatible with their cultural health beliefs and practices and preferred language.

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Invitation to Listserv Participants to Share Perspectives:

Thoughts about evaluating programs related to cultural competence?

Send your responses to Ltaylor@ucla.edu

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Featured Set of Center Resources on

>Understanding and enhancing cultural competence

For easy links to relevant resources from our Center and from others, see our online clearinghouse Quick Find on **Cultural Competence** – <http://smhp.psych.ucla.edu/qf/culturecomp.htm>

Examples of Center resources indicated on that Quick Find are:

- >Cultural Concerns in Addressing Barriers to Learning
- >Diversity Competence for Psychological Practitioners:
Eliminating Disparities in Psychological Practices
- >Immigrant Children and Youth: Enabling Their Success at School
- >International Students: Addressing Barriers to Successful Transition
- >Diversity and Professional Competence in Schools... a mental health perspective
- >Underrepresented Minorities: Making it to and Staying in Postsecondary Education
- >Addressing the Language Barrier: English Language Learners, Bilingual Education, and Learning Supports
- >Sexual Minority Students

ANNOUNCING!

The Center has developed two new major resources to aid school improvement planning for addressing barriers to learning and teaching and re-engaging disconnected students.

>Addressing Barriers to Learning: In the Classroom and Schoolwide

**>Transforming Student and Learning Supports:
Developing a Unified, Comprehensive, and Equitable System**

Access these and other free resources from the Center's homepage at

<http://smhp.psych.ucla.edu/>

THE MORE FOLKS SHARE, THE MORE USEFUL AND INTERESTING THIS RESOURCE BECOMES!

For new sign-ups – email Ltaylor@ucla.edu

Also send resources ideas, requests, comments, and experiences for sharing.
We post a broad range of issues and responses to the *Net Exchange* on our website at <http://smhp.psych.ucla.edu/newnetexchange.htm> and on *Facebook* (access from the Center’s home page <http://smhp.psych.ucla.edu/>)

*Information is online about the

National Initiative for Transforming Student and Learning Supports
<http://smhp.psych.ucla.edu/newinitiative.html>

Also online is the report from the National Summit on the

Every Student Succeeds Act and Learning Supports: Addressing Barriers to Learning and Teaching to Enhance Equity of Opportunity –

<http://smhp.psych.ucla.edu/pdfdocs/summitreport.pdf>

