Teaching Cultural Humility and Competence

Lessons Learned from Developing and Teaching a Multi-Disciplinary Online Hybrid Course

Elaine Yuen, PhD
Nancy L. Chernet, MPH
Susan Toth-Cohen, PhD, OTL/R
Rob Simmons DrPH, MPH, CHES, CPH

Thomas Jefferson University
Schools of Population Health & Health Professions
Philadelphia, PA

DiversityRX, Baltimore, MD, October 21, 2010
What is Culture?

Integrated patterns of human behavior that include language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, social or work groups.

Adapted from Cross, T., et al. (1989)
Cultural Competence and Humility

- Having the knowledge, understanding, and skills to provide acceptable and relevant care
  - Includes having general as well as specific information

- Cultural Humility -- an ongoing process of self reflection & self-critique as a life long learner & reflective practitioner\(^1\)
  - Aware of personal beliefs; not letting them get in the way
  - Mutual respect and partnerships with patients
  - Recognition of inherent power imbalances in communication by using patient focused care

\(^1\) Adapted from Tervalon, M, et. al. (1998)
Why a Dedicated Inter-professional Course on Cultural Humility and Competence?

- To ensure that students develop prerequisite areas of awareness, knowledge, and skills in cultural and linguistic competence for application in practice.

- To provide students with an in-depth opportunity to identify and reflect on their own cultures, values and preferences and how this impacts health care delivery and administration.

- To give students opportunities to interact across disciplines and facilitate their understanding of the “culture of health care”
Why a Dedicated Inter-Professional Course on Cultural Humility and Competence?

- To facilitate workforce diversity, both for its reflection of the population served and for its inherent strengths.

- To prepare the future workforce to lead, teach and develop culturally competent health organizations in a multicultural environment.

- To respond to legislative, regulatory, and accreditation mandates (e.g. LEP, CLAS, NBPHE, CHES).
Course Development Process: An Interdisciplinary Faculty Collaboration
Our Journey...

Research Training Module:
In-Touch, Mind, Body, Spirit (NIMH)

Could this be a course??
Yes, let’s discuss!
We expand our group & further develop the course
We pilot the course with 10 students (6 OT, 3 MPH, 1 PT)
Offered in 2 TJU schools (6 MPH, 2 MD/MPH, 4 OT)

Fall, 2006  Spring 2007  Summer, 2007  Fall, 2008  Fall, 2009
Overall Course Aim

- An in-depth and advanced understanding of cultural diversity, health inequities and cultural competence in *inter-professional* health and human service delivery and administration.

- Facilitate development of cultural competence and humility in one’s self, colleagues and the work environment and its application to practice.
Hybrid Online Course

- Course structure addresses the time and logistical constraints of students across professional disciplines and schools

- 14 week 3 credit course (2010)
  - 4 in-person classes held on Saturdays
  - 3 synchronous online sessions (small group)
  - 7 asynchronous sessions which utilize discussion board and personal blog interactions
Enrollment Profile

- **Fall 2008:** 10 Students
  - OT (MSOT & OTD), DPT, MPH

- **Fall 2009:** 12 Students
  - OT (MSOT & OTD), MPH & MD/MPH

- **Fall 2010:** 21 Students
  - OT (OTD), Pharmacy (PharmD) and MPH & MD/MPH
## 200901.OT.797.01: SAP: Cultural Humanity & Comp - Nancy L Chernett (Instructor)

### Content Areas
- **Course Information**
- **Course Documents**
- **Assignments**
- **External Links**

### User Management
- **List / Modify Users**
- **Create User**
- **Batch Create Users**
- **Enroll User**
- **Remove Users from Course**
- **Manage Groups**

### Course Tools
- **Announcements**
- **Course Calendar**
- **Staff Information**
- **Tasks**
- **Send Email**
- **Discussion Board**
- **Collaboration**
- **Digital Dropbox**
- **Glossary Manager**
- **Messages**
- **Course Objectives**
- **Blackboard Scholar®**
- **SafeAssign**
- **Configure Blog Tool**
- **Recycle Blogs**
- **Configure Wiki Tool**
- **Assess Wikis**
- **Recycle Wikis**
- **Manage Podcast**

### Assessment
- **Test Manager**
- **Survey Manager**
- **Pool Manager**
- **Course Statistics**
- **Grade Center**
- **Performance Dashboard**
- **Early Warning System**

### Help
- **Support**
- **Manual**
- **Contact System Administrator**
- **Quick Tutorials**

### Course Options
- **Manage Course Menu**
- **Course Design**
- **Manage Tools**
- **Course Copy**
- **Import Course Cartridge**
- **Import Package**
<table>
<thead>
<tr>
<th>Diversity, Health Disparities and Cultural Competence</th>
<th>Self-Reflection Values, Beliefs &amp; Behaviors</th>
<th>Application to Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Influence of:</strong></td>
<td><strong>Awareness of:</strong></td>
<td><strong>Facilitating skills in:</strong></td>
</tr>
<tr>
<td>- Race, ethnicity, acculturation and socio-economic status on health access &amp; status</td>
<td>- Own cultural beliefs &amp; practices and their relationship to others</td>
<td>- Communication and building trust</td>
</tr>
<tr>
<td>- Historical events, current &amp; future demographics</td>
<td>- The influences of culture, ethnicity, age, socio-demographic characteristics on illness perspectives, health behavior and health care practice</td>
<td>- Influencing organizational cultural competence</td>
</tr>
<tr>
<td>- Health beliefs, social networks, religious and spiritual preferences</td>
<td>- Impact on interpersonal &amp; professional understanding and behavior</td>
<td>- Building partnerships with diverse communities</td>
</tr>
<tr>
<td>- Culture on health literacy and relationship to health behaviors and outcomes</td>
<td></td>
<td>- Promotes growth in personal and organizational cultural competence</td>
</tr>
</tbody>
</table>
Cultural Competence

- Permits individuals to respond with respect to people of all culture, classes, races, religions and ethnic backgrounds in a manner that recognizes, affirms and values the worth of individuals, families and communities.

- Requires practice skills, attitudes, policies and structures that work together to enable professionals/agencies to work effectively in cross cultural situations.
Cultural Humility

- Humility—giving up one’s power and humbly recognizing the need to continually engage in self-reflection and self-critique as lifelong learners and reflective practitioners

- Brings into check power imbalances in communication by using client-focused interviewing and care

- “Enhances patient care by effectively weaving an attitude of learning about cultural differences into patient encounters.”

Learning through Reflection and Interaction

- Observation and interaction in diverse communities
- Reflection “diaries”—BLOGS
- Discussion board assignments -- reflecting on readings and responding to classmates’
- Synchronous sessions—allow for personal interaction
- Ongoing development of professional and goals as a cultural competence practitioner and change agent
Cultural Identity Pie Chart

- American: 9%
- Ukrainian: 12%
- Male: 9%
- MPH Student: 17%
- Premed: 24%
- Violinist: 12%
- Minnesotan: 17%
- MPH Student: 17%
What Students Have to Say:

MPH student

When I first signed up for this court, I naturally assumed I was learning about two types of the same concept in cultural humility and competence, a la an ‘anatomy and physiology’ course. I was not necessarily wrong, but I was certainly not totally right. Cultural humility is the driving force behind learning; it allows us to strip away our preconceived notions and ideals in order to take in a different kind of information. We must allow ourselves to competently put into practice those things we take in from our humble understanding. Through a gradual process of practice and analysis, we eventually reach a level of proficiency in this regard. The building blocks—humility and competence—cannot technically be taught, but they can be outlined in a way that makes it easy to appreciate their importance. As a public health practitioner, this may be the ultimate tool that we bring to any interaction. Humility allows us to recognize our shortcomings and be aware of the steps we need to take in order to become competent practitioners.
What Students Have to Say:
MD/MPH student

Something that hit me was many of the cognitive heuristics that we’re trained to use, in order to simplify and look at people and identify trends... a take home message was identifying that I need to learn how to use this tool appropriately, yet put it aside and demonstrate humanness and just question where other people are coming from.

So some of the target areas for me... Humility: knowing what the right questions are to ask, not just being blind, but knowing to the fullest the information. And constantly inquiring, having a thirst for people. Growth: I think it’s important to have experiences. Many physicians or students who come into medical school having had a wealth of experiences in the past really can demonstrate a higher level of empathy and humility regarding their interactions with others. And just committing to a constant process of reflection and critique.
In terms of my awareness, I was really unaware about the personal aspects of myself that came up in the cultural pie. But also unaware of my professional organization’s positions on cultural competency and health disparities. I was really unaware of the extent of health care disparities in our country and in the world. I was unaware of the far-reaching influence of culture on myself, my clients and my organization, governments and systems.

So right now my belief includes that each individual is influenced by the culture that he identifies [with] – that openness to including cultural factors involves becoming self-aware and cultivating cultural humility – that including cultural issues in relationships with my clients involves increasing my own awareness of diverse populations and coming to know what and how to act – and becoming aware of resources to support my own cultural competence.
Future Opportunities and Challenges

Your Thoughts?

- Marketing the course across University schools and programs — recognizing “value”/skills learned to take course as an elective

- Administrative, registration, course scheduling differences across different schools in the university.

- University’s new global health task force
  - Incorporating cultural competency education into our graduate health education programs is one of the priority initiatives.

- Modularizing course components so that concepts and applications can be integrated and disseminated into a wider range of programs at the University
Selected References and Resources


- The National Center for Cultural Competence (NCCC) [http://www11.georgetown.edu/research/gucchd/nccc/](http://www11.georgetown.edu/research/gucchd/nccc/)
