



Taking Diversity and Inclusion to the Next Level

Enhancing Cultural Competence in Clinical Settings (4C)

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Desired Outcomes

Participants will:

- Be able to identify themselves as cultural beings on up to 12 variables
- Be able to identify up to 10 ways that racism may impact their practice unintentionally
- Practice identifying dysfunctional cross cultural behaviors within themselves and/or among others that they work with
- Learn up to 10 alternative behaviors for enhancing their mental health practice
- Be able to link modernism/internalized oppression theory to "Getting to the Green Zone"

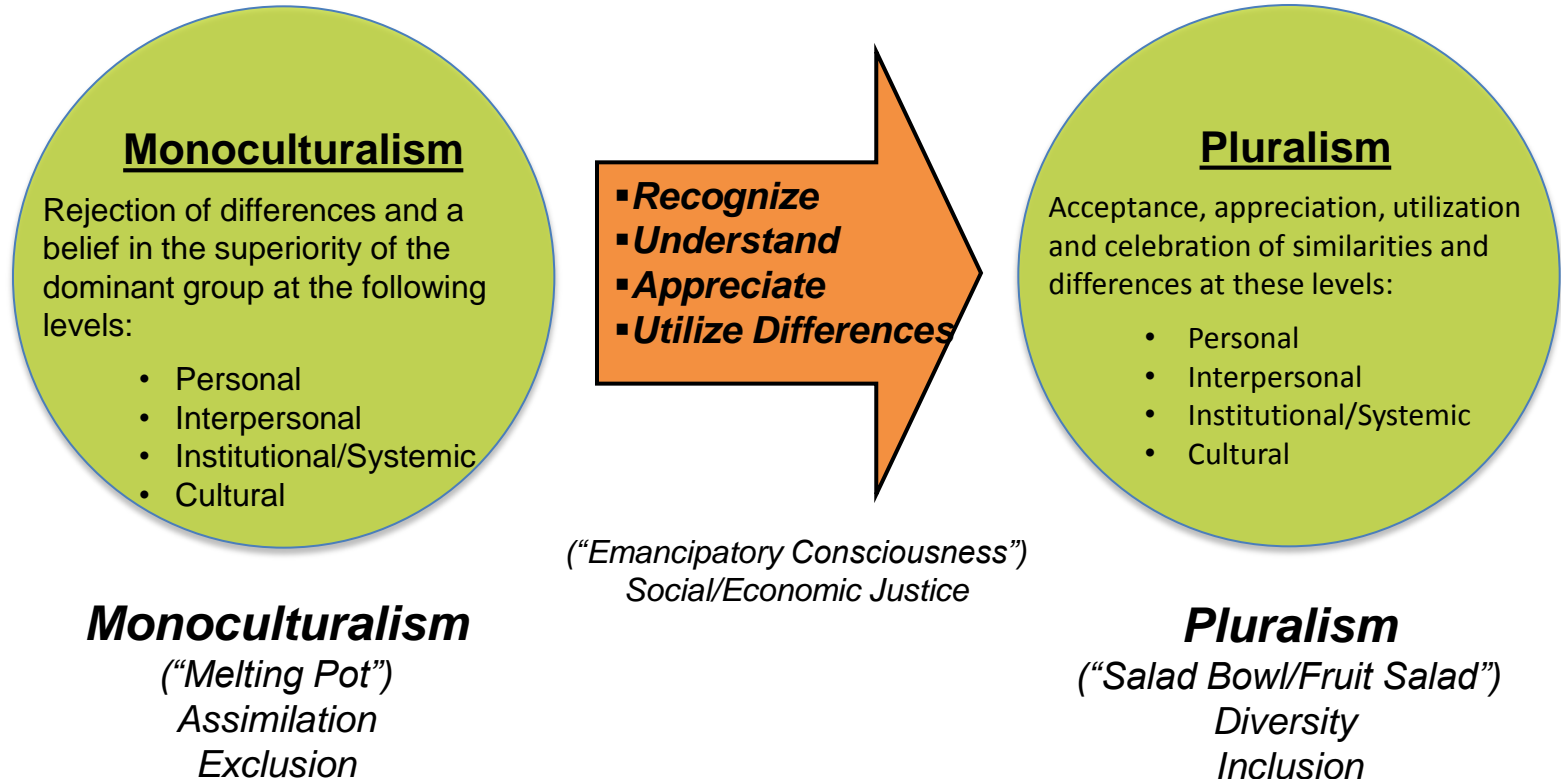
Session Agenda

- Review of desired curriculum outcomes
- Define goal for today: Introducing the model and defining the importance of “self as a cultural being” (looking at 3 dimensions: cognitive, behavioral, affective)
- Tool 1: Guidelines for effective cross cultural dialogue
- Overview of a multicultural process of change at 4 interlocking levels
- Tool 2: Understanding self as a cultural being – Overview including application exercise
- Overview of what is reflective practice?
- Next steps and closure

Guidelines For Effective Cross-Cultural Dialogue

- ◆ “Try on”
- ◆ It’s okay to disagree
- ◆ It is not okay to blame, shame, or attack, self or others
- ◆ Practice “self-focus”
- ◆ Practice “both/and” thinking
- ◆ Notice both process and content
- ◆ Be aware of intent and impact
- ◆ Confidentiality

Multicultural Process of Change (at all levels)



*Designed by: Valerie A. Batts, Ph.D.; John Capitman, Ph.D.; and Joycelyn Landrum-Brown, Ph.D. .

Levels of Oppression and Change

Personal

- ◆ Values
- ◆ Beliefs
- ◆ Feelings
- ◆ Attitudes
- ◆ Opinions

Institutional

- ◆ Policies
- ◆ Practices
- ◆ Rules
- ◆ Procedures
- ◆ Systems

Interpersonal

- ◆ Treatment
- ◆ Relationships
- ◆ Behaviors
- ◆ Communications

Cultural

- | | |
|-------------------|-------------------|
| ◆ Worldview | ◆ Media |
| ◆ Stories | ◆ Public Opinion |
| ◆ Climate | ◆ Symbolic/Ritual |
| ◆ Shared Values | ◆ Group Dynamics |
| ◆ Unwritten Rules | ◆ Norms |

Focus of Change Strategies

Personal:

→ Aim is to change thoughts and feelings; increase awareness & openness to learning.

Interpersonal:

→ Aim is to enhance skills, communication patterns; impact behavior and relationships.

Institutional:

→ Aim is to identify structural barriers and create policies, practices, programs & processes that support equitable outcomes.

Cultural:

→ Aim is to create environments representative of & welcoming to the organization's diversity; celebrate & utilize differences.

Definition of Culture

Culture is the sum total ways of living, including:

- ◆ Values
- ◆ Beliefs
- ◆ Aesthetic Standards
- ◆ Linguistic Expression
- ◆ Patterns of Thinking
- ◆ Behavioral Norms
- ◆ Styles of Communication

...which a group of people has developed to assure it's survival in a particular environment (Pusch, 1981).

We are socialized through “cultural conditioning” to adopt the ways of thinking of our own group.

HOW CULTURE IS LIKE AN ICEBERG



Communicating Across Cultures

Just as nine-tenths of an iceberg is below the surface of the water, most of culture is outside of conscious awareness and can be termed “deep culture.”

architecture * music *
dress food * visual art *
drama crafts * dance *
literature language *
celebration

Ethics: definitions of obscenity and sin, rules of decency, conception of justice, notions of modesty, ideals governing child raising, attitude toward dependency and social responsibility

Aesthetics: conception of beauty, humor, patterns of visual perception

Social relationships: nature of friendship, preference for competition/cooperation, physical expression, relationship with animals, patterns of superiority/inferiority, social interaction rate, courtship practices. Roles/status by sex, race, class, occupation, kinship, age, etc.

Communication: expression of emotions, facial expressions, body language, conversational patterns in various social contexts, transfer of knowledge

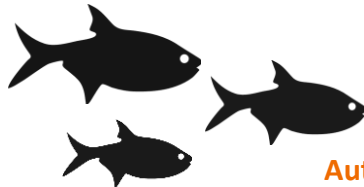
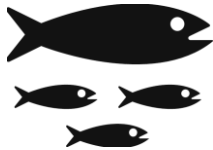
Worldview: cosmology, conception of past and future, ordering of time, notions of logic and validity, tempo of work, conception of “self”, notions of adolescence

Health: tolerance of physical pain, definition of insanity, theory of disease

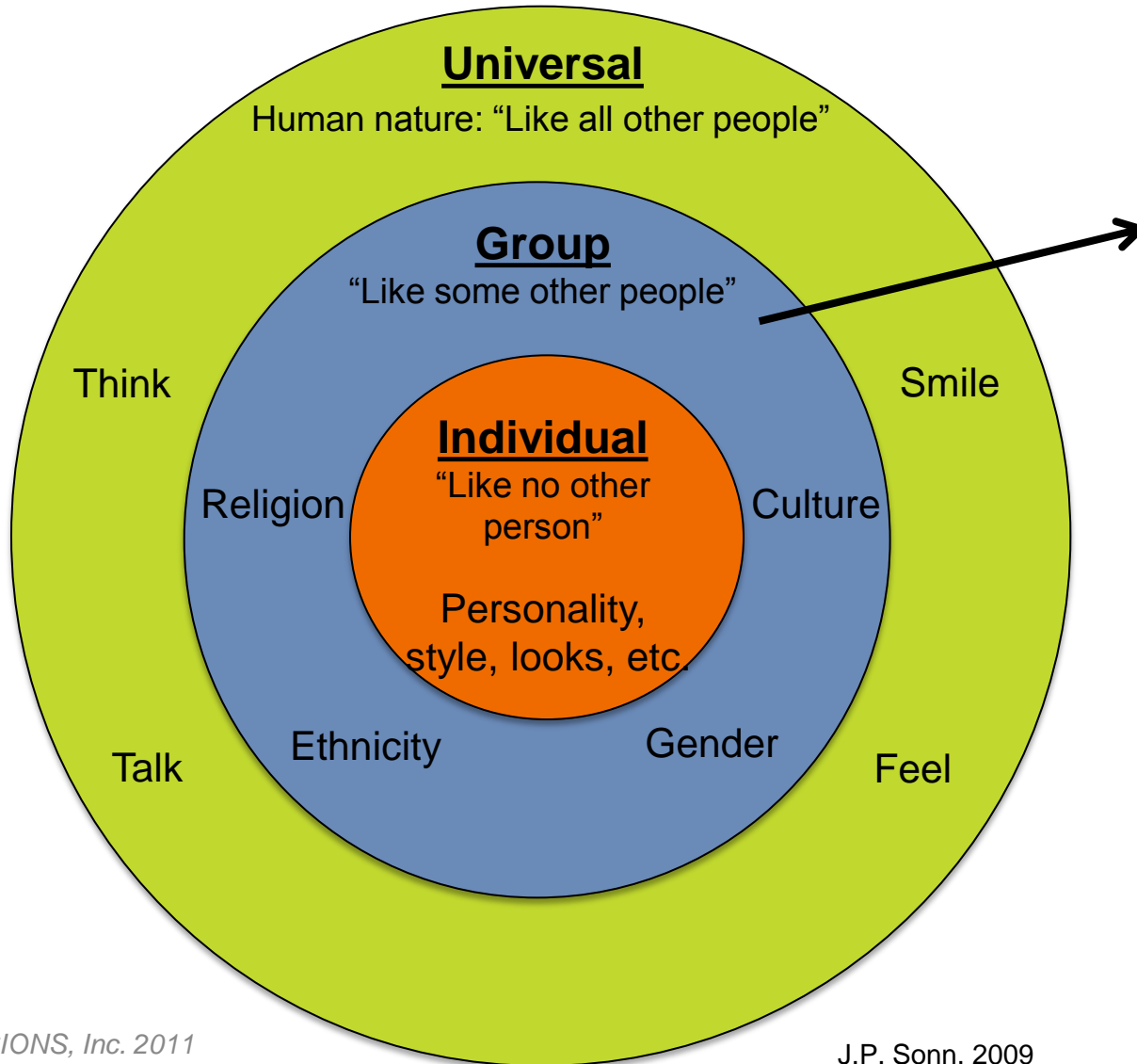
Necessities: concepts of food, incentives to work, forms of shelter

Authority: patterns of group decision making, approaches to problem-solving, who/what conveys power

..and much, much MORE!



Multiple Identities



The primary basis for inclusion and exclusion.

Inherited and learned (caught and taught).

- Privilege
- "Unearned" privileges
- Oppression, as flip side
- All "isms"
- Power: systems and structures that keep above in place
- Liberatory approach – making justice, freedom, equality, fairness realities

A Working Conceptualization of Historically Excluded (Target) and Historically Included (Non-Target) Groups

Types of Oppression	Variable	Historically Included Groups	Historically Excluded Groups
Racism	Race/Color/Ethnicity	White	People of Color (African, Asian, Native, Latino/a Americans)
Sexism	Gender	Men	Women/Transgender
Classism	Socio-Economic Class	Middle, Upper Class	Poor, Working Class
Elitism	Education Level	Formally Educated	Informally Educated
	Place in Hierarchy	Managers, Exempt, Faculty	Clerical, Non-Exempt, Students
Religious Oppression	Religion	Christians, Protestants	Muslims/Catholics, and Others
Anti-Semitism		Christians	Jew
Militarism	Military Status	WW I&II, Korean, Gulf War Veterans	Vietnam Veterans
Ageism	Age	Young Adults	Elders
Adultism		Adults	Children/Youth
Heterosexism	Sexual Orientation	Heterosexuals	Gay, Lesbian, Bisexual
Ableism	Physical or Mental Ability	Temporarily Able-Bodied	Physically or Mentally Challenged
Xenophobia	Immigrant Status	US Born	Immigrant
Linguistic Oppression	Language	English	English as a Second Language Non-English

Three Dimensions of Change

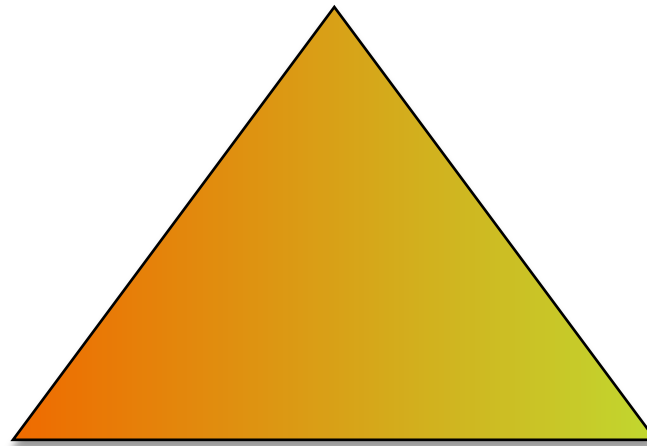
Individual and Organizational

What: Concept

Why: Linkage

How: Strategies

Cognitive



Affective

Process

Emotions

Environment

Behavioral

Expectations

Actions

Results

Linking Three Dimensions of Change & Getting to Green

- Feeling-----heart
- Thinking-----head
- Behavior-----hand

What is Reflective Practice?

“reflective practice ...encourages staff members to...slow down, filter their thoughts, and more wisely choose actions and words; deepen their understanding of the contextual forces that affect their work...”

(Heffron, M.C. and Murch, T. “Reflective Supervision and Leadership in Infant and Early Childhood Programs”, 2010)

One of the Roles of Reflective Practice

- Create a safe space for conversations about bias, racism and other isms...

One of the Roles of the RP Supervisor

- Facilitate these difficult conversations!

Reflective Practice Supervisor

- “A (RP) supervisor must find the skill and sometimes the *courage* to bring up the differential treatment of clients or colleagues based on race, gender or sexual preference; unintended slights; or unexamined negative assumptions about another person’s background. **Self-awareness** and a stance of respect and inclusion will assist the reflective supervisor to work with staff members from many different backgrounds and perspectives.”

(Heffron, M.C. and Murch, T. “Reflective Supervision and Leadership in Infant and Early Childhood Programs”, 2010)

Diversity-Informed IMH Tenets

Self Awareness Leads to Better Services for Families:

Professionals in the field of infant mental health must reflect on their own culture, personal values, and beliefs, and on the impact racism, classism, sexism, able-ism, homophobia, xenophobia, and other systems of oppressions had had on their lives in order to provide diversity-informed, culturally attuned services...

(Ghosh Ippen, Norona, and Thomas, “From Tenet to Practice”, *Zero to Three*, November 2012.)

Other Diversity-Informed IMH Tenets (continued)

- Champion Children's Rights Globally
- Work to Acknowledge Privilege and Combat Discrimination
- Recognize and Respect Non-dominant Bodies of Knowledge
- Honor Diverse Family Structures

Other Diversity-Informed IMH Tenets (continued)

- Understand That Language Can Be Used to Hurt or Heal
- Support Families in Their Preferred Language
- Allocate Resources to Systems Change
- Make Space and Open Pathways for Diverse Professionals
- Advance Policy that Supports All Families