

## Cultural Competence Resources

Below is a list of resources, as developed by the Multicultural Issues Board of the American Speech-Language-Hearing Association (ASHA), that may be useful for programs when designing course curriculum and clinical training approaches that address competencies referenced below and in the *Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology (2017)*. Please note that these examples, tools and resources are not intended to be all-inclusive or prescriptive, but serve as examples of some of the ways in which a program may choose to address cultural competence. Every program is unique and may meet the Standards in any way that is consistent with their specific mission and goals.

### **3.1.1A Professional Practice Competencies**

*The program must provide content and opportunities for students to learn so that each student can demonstrate the following attributes and abilities and demonstrate those attributes and abilities in the manners identified.*

#### Cultural Competence

- *Understand the impact of his or her own set of cultural and linguistic variables on delivery of effective care (these include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation).*
- *Understand the impact of the cultural and linguistic variables of the individuals served on delivery of effective care (these include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation).*
- *Understand the interaction of cultural and linguistic variables between the caregivers and the individual served in order to maximize service delivery.*
- *Understand the characteristics of the individuals served (e.g., age, demographics, cultural and linguistic diversity, educational history and status, medical history and status, cognitive status, physical and sensory abilities) and how they relate to clinical services.*
- *Understand the role of manual and other communication systems and the use of sign and spoken interpreters/transliterators and assistive technology to deliver the highest quality care.*

### **3.1.1B Professional Practice Competencies**

*The program must provide content and opportunities for students to learn so that each student can demonstrate the following attributes and abilities and demonstrate those attributes and abilities in the manners identified.*

#### Cultural Competence

- *Understand the impact of his or her own set of cultural and linguistic variables on delivery of effective care. These include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation.*
- *Understand the impact of the cultural and linguistic variables of the individuals served on delivery of care. These include but are not limited to variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation.*
- *Understand the interaction of cultural and linguistic variables between the caregivers and the individuals served in order to maximize service delivery.*

- *Understand the characteristics of the individuals served (e.g., age, demographics, cultural and linguistic diversity, educational history and status, medical history and status, cognitive status, and physical and sensory abilities) and how these characteristics relate to clinical services.*

**3.4A An effective audiology program is organized and delivered in such a manner that the diversity of society is reflected in the program.**

*Requirement for Review:*

- *The program must provide evidence that issues related to diversity are infused throughout the academic and clinical program.*

**3.4B An effective speech-language pathology program is organized and delivered in such a manner that the diversity of society is reflected in the program.**

*Requirement for Review:*

- *The program must provide evidence that issues related to diversity are infused throughout the academic and clinical program.*

**A. Examples of Student Learning Outcomes/Activities within Courses**

Upon successful completion of the course, the students will be able to

1. Explain how one's own biases and beliefs may influence the provision of services.
2. Recognize how different cultural views and beliefs about disability may influence client/student/patient or family participation in services.
3. Understand second language development and typical patterns seen in English language learners and linguistically diverse populations.
4. Identify culturally-biased assessments and how misdiagnosis may be made due to lack of cultural sensitivity.
5. Describe ways to modify assessments to better identify and address client/student/patient or family needs and consider cultural and linguistic variables.
6. Develop culturally and linguistically appropriate treatment plans to enhance services by taking client/student/patient or family background and preferences into account.
7. Articulate the importance of and barriers to effective communication in providing culturally and linguistically appropriate services.
8. Understand how cultural competence is integral to ethical decision making.
9. Describe ways to modify counseling and educational training approaches to the client/caregiver/family based on cultural differences.

**B. Examples of Class Activities**

1. Case Studies. Case studies with individuals from a different culture background (either assessment or treatment)
2. Self-Assessment/ Reflection Tools. Utilize self-assessment tools to self-evaluate and self-monitor the development of cultural competence (beginning and end of semester)
3. Simulation/Role Play. Role play a scenario with a client/student/patient who speaks a language that the clinician does not speak, or a scenario with a client from a cultural background that differs from that of the clinician. Demonstrate how you would you complete clinical tasks (interview/assesses/plan intervention).

### C. Examples of Self-Assessment/ Reflection Tools

The following are self-assessment/ reflection tools that could be used by students, faculty, and program administrators to reflect on cultural competence. Contexts, such as guided group discussions in class or in clinical training, may provide a useful opportunity to review, discuss and learn from the self-assessment results.

#### *Self-Assessment and Reflection Tools from ASHA:*

##### 1. ASHA Cultural Competence Awareness Tool

- Developed by the American Speech-Language-Hearing Association
- An interactive web-based tool: <http://www.asha.org/practice/multicultural/self.htm>
- Designed to help evaluate an individual's cultural competence
  - The scores can be used to determine which areas may need some further development

##### 2. ASHA Cultural Competence Checklist: Personal Reflection

- Developed by the American Speech-Language-Hearing Association
- A pen-and-paper tool: <http://www.asha.org/uploadedFiles/Cultural-Competence-Checklist-Personal-Reflection.pdf>
- Designed to heighten awareness of cultural and linguistic variables and their impact on clinical services.

#### *Self-Assessment and Reflection Tools from Other National Sources:*

##### 3. Cultural and Linguistic Competence Health Practitioner Assessment (CLCHPA)

- Developed by the National Center for Cultural Competence, Georgetown University Center for Child and Human Development
- A comprehensive interactive web-based tool for health care providers: <https://www.clchpa.org/#welcome>
- Designed to assess three main areas: 1) Knowledge of culturally and linguistically diverse populations, 2) Adapting practice for culturally and linguistically diverse patient populations, and 3) Promoting the health of culturally and linguistically diverse communities

##### 4. Cultural Competence Self-Evaluation Form (CCSE)

- Developed by: Anthony J Marsella. © AJM (2009) Atlanta, Georgia. Free use with acknowledgement and citation. Based on Marsella, Kaplan, & Suarez, 2000; Yamada, Marsella, & Yamada, 1998; Yamada, Marsella, & Atuel, 2002; Hanson, Pepitone, Green (2000). Contact: marsella@hawaii.edu
- A pen and paper 20-item tool: [http://www.multiculturalmentalhealth.ca/wp-content/uploads/2013/10/Cultural\\_Compentence\\_Self\\_Evaluation.doc](http://www.multiculturalmentalhealth.ca/wp-content/uploads/2013/10/Cultural_Compentence_Self_Evaluation.doc)
- Intended for related service providers working with adults, including psychology and counseling disciplines.

##### 5. Cultural Competence Self-Assessment Checklist for Practitioners Providing Behavioral Health Services to Children, Youth and their Families

- Developed by Tawara D. Goode at the National Center for Cultural Competence, Georgetown University Center for Child and Human Development

- A pen and paper 40-item tool:  
<http://nccc.georgetown.edu/documents/ChecklistBehavioralHealth.pdf>
  - Intended for providers serving school-age children and youth to self-assess awareness and sensitivity to the importance of cultural diversity and cultural competence surrounding behavioral health issues for children, youth and their families.
6. Cultural Competence Self-Assessment Checklist for Practitioners Providing Early Childhood Intervention
- Developed by Tawara D. Goode at the National Center for Cultural Competence, Georgetown University Center for Child and Human Development
  - A pen and paper 49-item tool: <http://nccc.georgetown.edu/documents/ChecklistEIEC.pdf>
  - Intended for providers serving families in early childhood to self-assess awareness and sensitivity to the importance of cultural diversity and cultural competence surrounding early childhood intervention.