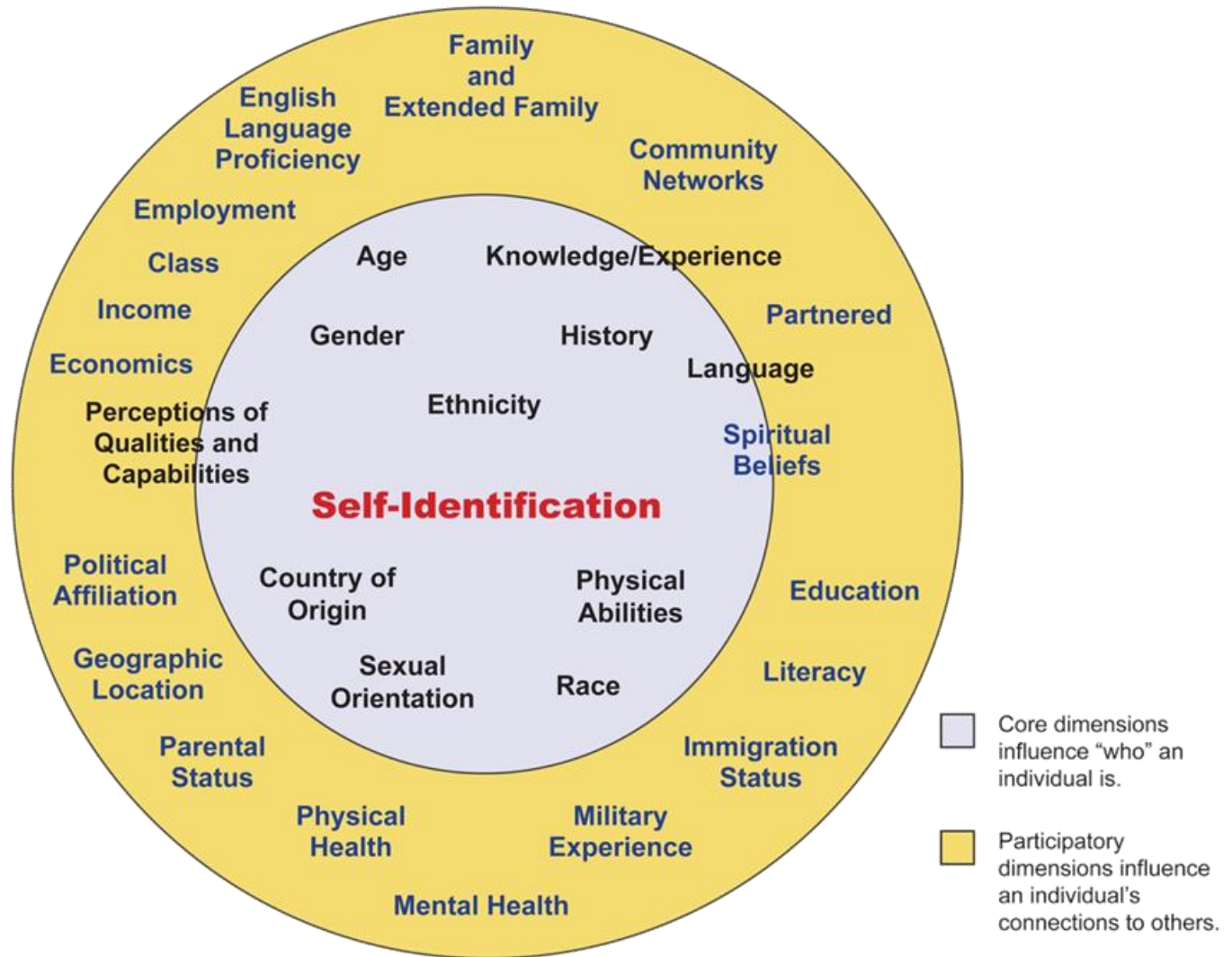


We don't see things as they are,
we see things as we are.

Anais Nin

Cultural Considerations



Who Am I? ... Cultural Pie






Different Perspectives

I am an individual. **I am my family.** My community is my family. **I make my family.** **My elders are the authority.** My church is my family.

Spirituality, language, immigration, country of origin, economics, where you live, who lives with you, sexual orientation, incarceration, military life, and age all determine beliefs about family, belonging, and authority.

Experiences can either shore up or challenge the foundation.



Disparities: Inadequate Access to Quality Care

- Barriers to care can result from Economic, Geographic, Linguistic, Cultural and Insurance issues.
- Even when minorities have similar levels of access to care, health insurance and education, the quality and intensity of health care they receive are often poor.
- In healthcare, patient-provider miscommunication, provider discrimination, stereotyping or prejudice are factors.

(Office of Minority Health)



Misunderstandings: What Shades My View?

- Helpers often take behavior personally and/or fail to address the needs represented within the behavior.
- Helper reactions may be based on their own experiences.
- Stigma clouds cultural understanding



Nurturing Profound Curiosity

- Role for Cultural Inquiry
- Assume nothing
- Knowledge, information, and data from and about individuals and groups is integrated and transforms our practice


King Davis

- Everything we do changes
- Willingness to be a beginner
- Building comfort, not experts



Borrowing Concepts From Trauma Informed Practice

- Nearly 100% of the people served in some systems are likely to be survivors.
- Mindset: Universal expectation that violence has occurred, trauma is the outcome and that prevention, education, and understanding are necessary
- Take care of staff, hurt people hurt people



Community Involvement

- The concepts employed to engage communities in trauma-informed services and supports include:
 - Self-determination;
 - Informed decision-making; and
 - Reciprocity.
- Meaningful collaborations are formed:
 - In anticipation of what is expected; and
 - In response to a particular individual need.
- There is intent to capitalize on every opportunity to build relationships that promote healing.



Effective Community Engagement

- Work within culturally diverse communities
 - Various health providers;
 - Neighborhood associations;
 - Businesses, and ethnic, social, and religious organizations; and
 - Spiritual leaders and healers?

These are your teachers and key informants



The Asking Stance

- With people who have health challenges
- With people who have disabilities
- With people who have mental health and/or substance use disorders
- With people who have lived experience with trauma



Supporting Staff Through Change

- Empowering participation in change processes
- Physical and emotional safety
- Balance: uncomfortable does not equal unsafe
- Strength based supervision
- Situational Leadership Model
- Support for self care



Self Care: An Organizational Responsibility

Belonging

I am loved/valued

Achieving

I can succeed

Relying

I believe in others

Believing


I have power

Giving

I have purpose

Seeing

I know myself



“If you have come here to help me, then you are wasting your time. But if you have come because your liberation is bound up with mine, then let us work together.”

– *Lila Watson*

Vision

What will you

stop,

start

or continue?





**May you move all of your mountains,
and disturb the peace by adding to it.** Carol Horos

cathycave@verizon.net