Cultural Competence

Cultural competence, the ability to interact effectively with people of different cultures, helps to ensure the needs of all community members are addressed.

Cultural competence is the ability to interact effectively with people of different cultures. In practice, both individuals and organizations can be culturally competent. Culture must be considered at every step of the Strategic Prevention Framework (SPF). “Culture” is a term that goes beyond just race or ethnicity. It can also refer to such characteristics as age, gender, sexual orientation, disability, religion, income level, education, geographical location, or profession.

Cultural competence means to [be respectful and responsive](http://www.samhsa.gov/capt/applying-strategic-prevention-framework/cultural-competence/cultural-competence-spf#be-respectful-and-responsive) to the health beliefs and practices—and cultural and linguistic needs—of diverse population groups. Developing cultural competence is also an evolving, dynamic process that takes time and [occurs along a continuum](http://www.samhsa.gov/capt/applying-strategic-prevention-framework/cultural-competence/cultural-competence-spf#cultural-competence-continuum).

Building a Culturally Competent Workforce

To produce positive change, prevention practitioners and other members of the behavioral health [workforce](http://www.samhsa.gov/workforce) must understand the cultural context of their target community. They must also have the willingness and skills to work within this context. This means drawing on community-based values and customs and working with knowledgeable people from the community in all prevention efforts.

Practicing cultural competence throughout the program planning process ensures that all members of a community are represented and included. It can also prevent wasteful spending on programs and services that a community can’t or won’t use. This is why understanding the needs, [risk and protective factors](http://www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/risk-protective-factors), and potential obstacles of a community or specific population is crucial.

Culturally Competent organizations

Cultural competence applies to organizations and health systems, just as it does to professionals. A culturally competent organization:

* Continually assesses organizational diversity:  Organizations should conduct a regular assessment of its members’ experiences working with diverse communities and focus populations. It also regularly assesses the range of values, beliefs, knowledge, and experiences within the organization that would allow for working with focus communities.
* Invests in building capacity for cultural competency and inclusion: Organizations should have policies, procedures, and resources in place that make ongoing development of cultural competence and inclusion possible. It must also be willing to commit the resources necessary to build or strengthen relationships with groups and communities. Including representatives of the focus population within the organization’s ranks is especially useful.
* Practices strategic planning that incorporates community culture and diversity: Organizations are urged to collaborate with other community groups. Its members are also encouraged to develop supportive relationships with other community groups. When these steps are taken, the organization is seen as a partner by other groups and their members.
* Implements prevention strategies using culture and diversity as a resource: Community members and organizations must have an opportunity to create and/or review audiovisual materials, public service announcements, training guides, printed resources, and other materials to ensure they are accessible to, and attuned to their community or focus population.
* Evaluates the incorporation of cultural competence: Community members must have a forum to provide both formal and informal feedback on the impact of all prevention interventions.

CSAP Principles of Cultural Competence

[SAMHSA’s Center for Substance Abuse Prevention (CSAP)](http://www.samhsa.gov/about-us/who-we-are/offices-centers/csap) has identified the following principles of cultural competence:

* Ensure community involvement in all areas
* Use a population-based definition of community (let the community define itself)
* Stress the importance of relevant, culturally-appropriate prevention approaches
* Employ culturally-competent evaluators
* Promote cultural competence among program staff that reflect the community they serve
* Include the target population in all aspects of prevention planning

Learn more about the Department of Health and Human Services (HHS) Office of Minority Health’s [National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care: A Blueprint for Advancing and Sustaining CLAS Policy and Practice](https://www.thinkculturalhealth.hhs.gov/Content/clas.asp).