

OBJECTIVES

At the end of this unit, participants will be able to:

- Identify and define the four pillars of cultural humility
- Describe how a cultural value/belief related to their identity can impact their work with a client
- Describe how cultural humility is a pathway to employing empathy in their interpersonal relationships



INSTRUCTIONS

- 1. Prior to the session, review slides, handouts and test video to be sure it plays.
- **2.** Set the tone for the session by reviewing the group agreements and expectations (slides 2–4).
- **3.** Lead the group in a mindfulness activity (slide 5).
- **4.** Discuss the history of cultural humility, definitions of culture, and cultural humility (slides 5–9).
- **5.** Show cultural humility video (6 minutes): https://www.youtube.com/watch?v=16dSeyLSOKw
- **6.** Review the four pillars of cultural humility and the difference between cultural competence and cultural humility (slides 11–13).
- 7. Personal reflection activity. Ask participants to consider how they bring their identity, power, and privilege to their work. Distribute personal reflection handout. Allow time for participants to complete the handout individually, then ask them to form pairs to share insights with their partner. Reconvene the group to discuss (slides 13–15).
- **8.** Explain the connection between empathy and cultural humility and facilitate discussion (slide 16).
- **9.** Wrap up: Review the four pillars of cultural humility. Ask participants to share a lesson learned from today's session that they will use in their work (slide 17).



Related C3 Roles

Cultural mediation among individuals, communities, and health and social systems

Related C3 Skills

Communication skills, ability to communicate with empathy, interpersonal and relationship-building skills, ability to practice cultural humility



Method(s) of Instruction

Lecture, dyads, dialogue

Facilitator's note: This session should be conducted by a trainer experienced in cultural humility and/or a similar approach.



Estimated time

60 minutes



Key Concepts

Cultural humility, empathy



Materials

- Computer with internet access and projector
- PowerPoint slides
- Video: Cultural Humility https://www. youtube.com/watch?v=16dSeyLSOKw

Handouts

Personal Reflection Activity



Resources

Tervalon, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, *9*(2), 117–125.

https://melanietervalon.com/wp-content/ uploads/2013/08/CulturalHumility_ Tervalon-and-Murray-Garcia-Article.pdf



SLIDE 1



SLIDE 2

Set the tone for the session by reviewing the group agreements. This is an important step for establishing a context for safe exploration and dialogue. Take a few minutes to review and encourage feedback from participants. Probe for meaning and clarify statements. Invite participants to agree to uphold the group agreements to establish and maintain a learning environment that is respectful and safe for everyone.



SLIDE 3

After reviewing, ask participants to raise their hands to demonstrate their commitment to the group agreements.



SLIDE 4

Review the slide.

In addition to the group agreements, aligning ourselves with these shared expectations will help us explore the content together and invite us to be conscious and courageous.



SLIDE 5

Lead the group in a mindfulness activity. This can be a simple exercise of deep breathing to center participants in the present moment (approximate time: 5 minutes).

Mindfulness is how we ground ourselves for the work of cultural humility. It is the desired disposition for creating an environment within oneself that is patient, present, and accepting of things as they are without judgment.

Example of a guided meditation: (Read the meditation at a comfortable, unrushed pace. Allow space between statements to aid the experience.)

- Make yourself comfortable and take a few deep breaths. Close your eyes if you'd like or fix them on a object of your choosing.
- With the ease of each breath, inhale peace, compassion, and acceptance and exhale tension, worry or concerns. Rest in the calm of the present moment.
- Continue to breath deeply as peace comforts you.
- Now, imagine your heart is the sun. It shines brightly within you. Its warmth and light radiates throughout your being and into the world around you. Imagine each beam of light extends acceptance, forgiveness, patience and love to all of humanity including yourself. Acceptance, forgiveness, patience, and love fills you and extends to those you love and to those you find difficult. You allow this light of love to evoke peace—peace for all people and all situations. You simply flow in the energy of this moment. You trust that life supports all beings. You rest in your wholeness and offer wholeness for all others.
- Take a few more deep breaths. When you are ready we can move forward together.

Debrief:

Ask participants to briefly share any reflections or comments.

Summarize

Thank participants for individually committing to co-create quality in our learning environment. As we move forward, we will come to understand the work of cultural humility is anchored in many of the practices we've just completed. It is an ongoing practice of curious inquiry by interrupting our tendencies make assumptions.



SLIDE 6

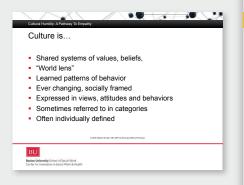
Before we define cultural humility, let's become acquainted with the two women who founded this framework—Dr. Melanie Tervalon and Dr. Jann Murray-Garcia.

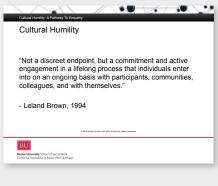
In 1992, while working at Children's Hospital Oakland, Dr. Tervalon and Dr. Murray-Garcia were providing services to a community that was reeling from rioting and racial divisions resulting from the acquittal of four Los Angeles, police officers who were charged with brutally beating Rodney King after a high-speed chase.

The Rodney King verdict and riots fueled racial tensions and fostered divisions that impacted the quality of care patients received and relationships among the ethnically diverse hospital staff. In response, hospital staff and community members engaged in ongoing dialogues and processes to address the issues, ultimately leading to the formation of The Children's Hospital Multicultural Curriculum Program between 1992 and 1997.

As a result of those efforts, the Cultural Humility framework was formed and the journal article "Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes multicultural education" written by Dr. Tervalon and Dr. Murray-Garcia was published in 1998.









SLIDE 7

Let's take a moment to reflect on the meaning of culture.

Ask a participant to read the excerpt on the slide that describes culture.

Invite participants to share their thoughts about this passage and how it relates to their understanding of culture.

Facilitator's Note: Octavio Paz wrote the original quote in Spanish. This translation may not fully capture the original meaning. Octavio Paz was referring to civilization, though we believe this is applicable to what we mean and how we talk about culture certainly in the United States.

Reference: Adapted from *Mexico and the United States*, The *New Yorker*, September 17, 1979 Translated by Rachel Phillips Belash

SLIDE 8

Share these defining points for culture.

SLIDE 9

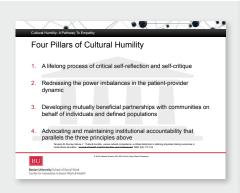
Share information on the slide.

The important point to make about this statement is that cultural humility is an ongoing, lifelong commitment and process.

SLIDE 10

Video: Cultural Humility Edited https://www.youtube.com/watch?v=16dSeyLSOKw (Time: 6 minutes)

This video provides a brief introduction of Cultural Humility and makes distinctions between cultural humility and cultural competence. It features the founders Dr. Melanie Tervalon and Dr. Murray-Garcia.



SLIDE 11

Let's briefly review what we heard in the video and add more dimension.

Pillar 1

A lifelong process of critical self-reflection and self-critique.

The idea behind this pillar is that individuals will gain ongoing awareness of and critique their own cultural lens, biases, power, privileges, and identities. This insight is to be used on an ongoing basis to ensure that service delivery is respectful and equitable; thereby avoiding stereotyping, erroneous assumptions, and biased behaviors.

Pillar 2

Redressing the power imbalances in the patient-provider dynamic

This pillar recognizes that people are experts of their own lives. In the CHW context, this pillar acknowledges that a client-centered approach is best as clients set their own priorities. The voice of the patient is centered in the client/provider dynamic; thus, stripping away power differentials and creating equitable exchanges. Humility is evidenced in the CHWs intention to listen and learn.

Pillar 3

Developing mutually beneficial partnerships with communities on behalf of individuals and defined populations

This pillar recognizes the provider/client relationship occurs within the community's context, which includes it's history, politics, economics etc. Mindful consideration and critique of those contextual elements is important in forming meaningful and equitable partnerships. Additionally, organizations develop policies and ways to center community voices and work in partnership to provide quality services.

Pillar 4

Advocating and maintaining institutional accountability that parallels the three principles above

The fourth and final pillar of cultural humility recognizes that individual work is important, AND institutions must engage in the same work of critical self-reflection and self-critique, mitigating power imbalances and developing mutually beneficial partnerships to transform inequity, discrimination and biased organizational policies and cultures. Organizations are encouraged to face the mirror, look at their own reflections and respond with curious inquiry to develop fair, accessible, respectful, inclusive policies and workplace environments.

Facilitator's note: This is intended to be an introduction/overview of cultural humility. Cultural humility is a multilayered and nuanced framework where ongoing learning and development is encouraged.

Read more about cultural humility

Resources:

Tervalon, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, *9*(2), 117–125.

https://melanietervalon.com/wp-content/uploads/2013/08/CulturalHumility_Tervalonand-Murray-Garcia-Article.pdf



SLIDE 12

People often use cultural competence and cultural humility interchangeably, but there are distinctions that make them different.

Ask participants share their ideas on the differences between the two frameworks as they view the bulleted lists.

Share key distinctions:

Cultural competency is defined as having an ability to interact effectively with people of different cultures. Cultural competency comprises four components: a) awareness of one's own cultural worldview, b) Attitude towards cultural differences, c) knowledge of different cultures and worldviews, and d) cross-cultural skills. (Wikipedia, 2011.)

Cultural competence implies that people can gain mastery or become experts on a community or cultural group. The implication of gaining mastery is that people assume they know all there is to know about a group and they stop noticing distinctions and learning. This disposition can lead them to approach interactions with cultural arrogance and separatism; thereby, invoking a position of privilege. Essentially, practicing cultural competence can place emphasis on gaining knowledge about a cultural group and applying that information to all members who belong to that group. In this way, that knowledge becomes the status quo and there is no recognition of the impact of one's own biases, values, power and privilege. Invite participants to recall the example regarding the Latino patient from the video.

In contrast, cultural humility recognizes the importance of being a lifelong learner who is ever curious about cultural groups and the unique experiences of individuals who are members of those groups. According to Dr. Teravalon and Dr. Murray-Garcia, "The cultural humility framework deliberately focuses learning on interactions between people within their context, recognition of power imbalances between those interacting, and the realization that individual experience and expression, for institution, provider, and client redefine what culture means in each interaction." There is no end point. Thus, a culturally humble practice is fluid, flexible, dynamic, and an evolving path to equity.

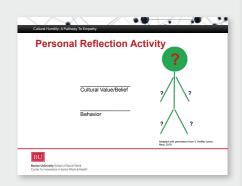


SLIDE 13

As we discussed, a key distinction for cultural humility is having knowledge of your own identity and what you are bringing to an interaction.

Ask participants, "In what ways are your bringing your identity, power, and privilege to the work?"

Invite responses and explain that the next activity will help us gain further insight on how our identities, cultural values, and beliefs impact our behaviors.



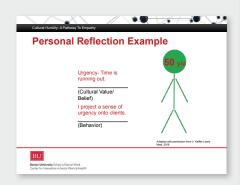
SLIDE 14

Explain that for our next activity, we will spend time considering our own identities.

We all have multiple identities that include our gender, race, ethnicity, sexual orientation, socioeconomic status, and religious/spiritual affiliation. Some additional examples of identities are parent, education level, disability, care-giver, and others. Our identities are always evolving and they shape how we view and interpret the world around us. They inform how we show up and interact in spaces and with people because of our associated values and beliefs. Many of us are not aware of these values and beliefs and how they influence our perceptions, judgments, and interactions. This activity will help illuminate a personal example as we practice the first pillar of cultural humility by engaging in a moment of critical self-reflection.

- Draw participants' attention to the handout "Personal Reflection." Give instructions for completing the handout and provide an example (an example is provided on the next slide.)
- Ask, "What are some examples of your identities?" Tell participants to list four examples, one next to each arm and each leg of the stick figure on the handout.
- Next, choose an identity that is most prominent or pressing for you at the moment. It can be one of the identities you've just written or a different one. Write that identity in the head of the stick figure.
- Now consider, "What is a cultural value or belief associated with that identity?"
 Write the value or belief in the space provided on the handout.
- Then, identify how that cultural value or belief impacts your work/behavior with your clients.
- Proceed to the next slide to illustrate an example.

Facilitator's note: Complete the handout "Personal Reflection" prior to this session to use as an example in addition to the one provided on the next slide.



SLIDE 15

Example:

4 identities (not shown on slide, but should be written to the arms and legs of the stick figure.)

- Woman
- Married
- Christian
- College educated

Prominent identity is 50 year-old person (written in the head of the stick figure)

The cultural value or belief that is significant to this identity is urgency and the belief that time is running out to get things accomplished. The sense of urgency is very pressing for this person who realizes at the age of 50 they may have lived more life than they have left ahead of them.

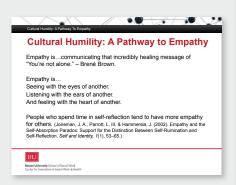
This cultural value/belief in urgency shows up in this person's work as a CHW through projecting a sense of urgency onto their clients.

For example, a client might be contemplating quitting smoking. The client is undecided and has not determined for themselves the benefits of stopping smoking. Instead of helping the client weigh the pros and cons of quitting smoking, the CHW's belief in urgency hijacks the interaction. The CHW (unconsciously) places pressure on the client to make the decision to stop smoking NOW and pushes the client to make an action plan. Since the client has not decided that they are ready to quit, the efforts by the CHW to push forward will likely fail. In this example, we can see how our own cultural values/beliefs inform how we view and interpret the world around us. Many times, we are unaware of these cultural and value based lenses, but they impact how we behave.

Allow time for participants to complete their handout individually. Then ask participants to form pairs to share their insights with their partner. (Approximately 10 minutes)

After sharing, reconvene the group and ask:

- What insight(s) did you gain as a result of this activity?
- What value does critical self-reflection and self-examination bring to the work of a CHW?



SLIDE 16

How is empathy connected to cultural humility?

Before we explore that question, let's define empathy.

According to social scientist, Brené Brown, empathy is communicating that incredibly healing message of "You're not alone."

Empathy is...

- Seeing with the eyes of another.
- Listening with the ears of another.
- And feeling with the heart of another.

Empathy is the capacity to understand or feel what another person is experiencing from within their frame of reference, that is, the capacity to place oneself in another's position. (Wikipedia, 2019)

These definitions of empathy coupled with what we understand about cultural humility allow us to make the assertion that cultural humility is a pathway to empathy. Empathy is a necessary skill for CHWs working with clients and within institutions because it encourages us to see and feel from another's perspective. Information derived from empathic connection can help to broaden our perspectives and gain insight necessary for mitigating power imbalances, working in partnership with others, and holding institutions accountable to the work of cultural humility.

In fact, the first pillar of cultural humility, engaging in a lifelong process of critical self-reflection and self-critique, is particularly useful in developing empathy skills.

Invite participants to work with their partner from the Personal Reflection activity and dialogue about the following question: List at least two reasons why engaging in a lifelong process of critical self-reflection and self-critique is particularly useful in developing empathy skills (approximately 3–5 minutes).

Reconvene the group and invite participants to share their responses with the large group.

Summarize the group's responses and share the final point on the slide: "People who spend time in self-reflection tend to have more empathy for others."

The work of cultural humility is an invitation to gain awareness of and be accountable for our own culturally-informed lenses and what we bring to the relationship dynamic. A robust practice in self-awareness can foster the mindfulness and humility needed to extend empathy to individuals, circumstances, events, and institutions. We can engage in the work responsibly, with authenticity and respect for differing views.

Facilitator's note: If time allows, explore the value of having empathy when mitigating power imbalances, working in partnership with others, and holding institutions accountable to the work of cultural humility.



SLIDE 17

Summarize:

Ask participants to share a meaningful insight from this session. Encourage participants to note the relevance of cultural humility in their work as CHWs.

Summarize and close with the following points. Add other insights that are worth revisiting from today's session.

The four pillars of cultural humility are:

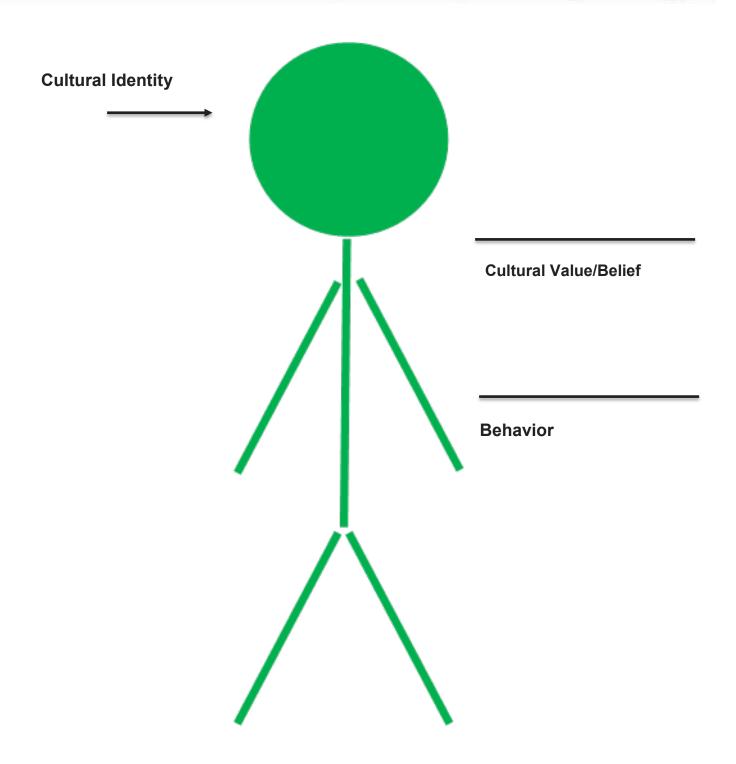
- 1. A lifelong process of critical self-reflection and self-critique.
- 2. Redressing the power imbalances in the patient-provider dynamic.
- 3. Developing mutually beneficial partnerships with communities on behalf of individuals and defined populations.
- 4. Advocating and maintaining institutional accountability that parallels the three principles above.

Cultural humility is different from cultural competency.

Cultural humility is a lifelong process and is a pathway to developing empathy skills.

Cultural humility is a conscious lifelong transformative practice.

Personal Reflection Activity



Adapted with permission from V. Keiffer-Lewis Neal's "An Introduction to Cultural Humility" (2018)

Acknowlegements

This curricula draws from and is adapted from other training curricula for peer educators and community health workers, such as the Building Blocks to Peer Success (https://ciswh.org/resources/HIV-peer-training-toolkit) and the Community Capacitation Center, Multnomah County Health Department (https://multco.us/health/community-health/community-capacitation-center)

Team

Serena Rajabiun Simone Phillips
Alicia Downes Maurice Evans
LaTrischa Miles Jodi Davich

Beth Poteet Rosalia Guerrero
Precious Jackson Maria Campos Rojo

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Boston University School of Social Work Center for Innovation in Social Work & Health