

# **Toward a Better Understanding of Culturally Competent Practice**

Miu Ha Kwong, Ph.D.  
New York University  
New York, NY

## **Statement of the Research Problem**

The rapidly changing ratio of minority to majority cultural populations and enhancing the cultural diversity of the population raises two crucial implications:

1. The social work profession needs to train more culturally competent practitioners.
2. The clinical assessment and treatment of the population has become more challenging and complex.

## **Research Background and Hypotheses**

A review of the current literature on cultural competency yields numerous definitions, concepts, and constructs. But a gap has been found to exist between the educational goal of training culturally competent practitioners and the ability to measure such competency. The underlying problems that lead to this gap include nonspecific definitions of cultural competency; the complexity of identifying core skills and learning objectives (Csiernik, Vitali, & Gordon, 2000); the difficulty in developing an evaluation scale without raters' bias (Bogo, Regehr, Hughes, Power, & Globerman, 2002); and the lack of culture-specific training and measurement techniques (Boyle & Springer, 2001). As a result, the problem of how to best train for and evaluate cultural competency in a multicultural field requires much effort from educators. They must further study and refine its definition, from broad to specific; its constructs, from conceptualization to operationalization; and its evaluation measurement, from subjective to objective. Those are the important areas educators and other health and mental health professionals need to explore in order to improve proficiency to better serve all potential clients.

In this study, the primary research question was formulated as follows: What do experts consider to be the most important dimensions of cultural competency in practice? In order to explore experts' views on that and other issues, this study used a qualitative methodology, namely grounded theory, with a structured, in-depth interview format. The interview questions include exploring and clarifying the cultural concepts, multicultural theories and approaches, and clinical practice and evaluation.

**Opening Question:**

1. How did you become interested in multicultural education? Why do you want to study or teach in the multicultural field?
2. What was your own experience with multicultural training in your education?

**Identification**

3. How do you define culture?
4. What is cultural competency to you?
5. What kind of knowledge is necessary for achieving cultural competency, and what skills must be developed?
6. Are there certain effective theoretical orientations when assessing and counseling multicultural clients? Are there certain effective practical approaches when assessing and counseling multicultural clients?
7. What are the core components or elements of cultural competency?

**Training**

8. How can educators effectively ensure students' practical application of cultural competency?
9. What practice knowledge and skills you would like to include in teaching and training a culturally competent clinician?

**Evaluation**

10. How can we measure those cultural competency components or elements?
11. When evaluating students' or practitioners' cultural competency in practice, which behavioral indicators should guide the evaluation of their culturally competent performance? Or, what are the behavioral indicators to evaluate students' or practitioners' culturally competent performance?
12. What will be the best ways to evaluate how well practitioners or students have learned these practices?

**Research**

13. What future directions in research do you recommend for cultural competency education?

**Methodology**

This study selected participants who are identified as experts in multicultural research, teaching, and practice in the United States. Experts were chosen as subjects for the study because of their vast experience and knowledge of multiculturalism, their conceptual and analytic skills, and their ability to articulate in depth about the topic. The nonprobability sampling methods, snowball and purposive sampling, were employed to recruit 10 participants. So, it employs a qualitative method, namely grounded theory, with

a structured, in-depth interview format to gather the data and investigate the groundwork of cultural competency concepts.

The interviews, which were conducted and transcribed by the researcher, and then, as a second step, the data were coded and categorized. Qualitative analysis began with line-by-line coding (Padgett, 1998) to develop an analytical system with multilevel data categories. The process of coding was complex; it required data reduction and organization into semantic categories. In this study, data were analyzed using the three-level coding method recommended by Strauss and Corbin (1990): open coding, axial coding, and selective coding.

## Results

Based on the interviews, three overarching themes are identified from subjects' views of cultural competency. The first theme (Figure 1), spectrum of cultural competency development, provides a fundamental framework for understanding subjects' experiences of how to develop their cultural sensitivity and awareness, as well as to move toward cultural competency. Subjects were speaking from their own personal and professional experiences, as well as noting the importance of attitudinal and cultural development. These intersecting points of learning influenced subjects' motivation for cultural competency acquisition and contributed to their learning and understanding in the field. Personal development includes bicultural experiences, developmental processes, and subjects' exposure to other cultures. Subjects started acquaintance with and attainment of cultural understanding through their own growth experiences and bicultural background and settings. Subjects built on their own experiences and further developed cultural competency concepts and applications through practice, teaching, and research. Attitudinal development is considered an important experience in shaping attitudes toward culture. In this development, four main attitudes should be developed in order to accomplish cultural competency: cultural appreciation, willingness to learn, being respectful, and not making assumptions. Finally, cultural development refers to learning and understanding cultural diversity through a cultural lens, especially the differences in language, background, geography, and worldview.

The second theme (Figure 2), essential components of culturally competent practice, explores core cultural competency components in forming a practice framework. This theme serves an organizing function for comprehension of the key practice components. Subjects indicated that the tripartite model cannot fully explain cultural competency in practice. Therefore, they expanded the scope into four subcategories: emotional knowledge, cultural knowledge, community networking, and practice processes. Emotional knowledge is a newly added component that all subjects proclaimed as the most important knowledge practitioners should acquire. Cultural knowledge helps highlight what cultural issues should be given attention when working with a culturally different client. Community networking offers an outreaching concept with the client's community in order to support the client with a joint effort. Finally, practice processes present the whole counseling and intervention process of how to work with clients of color effectively and efficiently.

The third theme (Figure 3), culturally competent practice evaluation, discusses

subjects' views on outcome evaluation. Several critical issues relating to outcome evaluation were raised and discussed: multiple levels, aspects of cultural change, conceptual problems, and outcome evaluation. Subjects indicated that cultural competency could be effectively implemented from top to bottom (from the educational system to individuals). Therefore, research on various levels independently or co-dependently should be further investigated. In the study of cultural issues, according to this study, changes in various perspectives should be noted: behavioral, attitude, terminology, and world. Variation makes cultural competency harder to measure scientifically. Regarding the definition of culture, as well as cultural competency, their views on emic and etic approaches to multicultural counseling and different evaluative or research tools are explored. The subjects' description of cultural competency evaluation is not only intended to help clarify a term plagued by ambiguous usage but also to serve to broaden and deepen understanding of this topic.

### **Utility for Social Work Practice**

The significance of this study can be expressed in its adding to the research regarding culturally competent practice and measurement by using grounded theory. Even though the study finally did not get to the point of operationalizing all cultural concepts and components or finding a new and scientific evaluative method, at least it contributes to concretizing the core cultural components in practice and curriculum standardization. At present, the findings are inconclusive and imprecise, but themes 1 and 2 can provide an organized framework for understanding cultural competency development in order to generate a more concrete picture of cultural practice components. For example, Theme 1 provides a clear picture of the importance of cultural competency development through four aspects. Even though all practitioners are not bicultural, they can develop their cultural senses through personal and professional experiences. Furthermore, this study has theoretical, clinical, and educational implications.

From a theoretical perspective, the data contribute to the research literature by helping to clarify cultural competency concepts, constructs, and theoretical frameworks. The study suggests an integrated cultural theoretical framework that incorporates ethnography, narratology, intersubjectivity, social constructivism, and the sociopolitical approach to confirm the vitality of cultural framework development, as well as to further build cultural elements and contexts within clinical theoretical frameworks.

From a clinical perspective, the study contributes to suggesting an integrative process, i.e., integrating clinical processes with cultural-specific elements in practice—a culture-centered approach (Pederson & Ivey, 1994). The integrative counseling process, which is mentioned in the study's findings, contributes to having more concrete practical processes for practitioners to think and use. The process includes:

- 1) Creating a safe, open, and trusting environment for building relationships with cultural clients;
- 2) Cultural assessment using client knowledge, cultural knowledge, and clinical knowledge to assess clients' needs for counseling, or problems to be treated; at

the same time, the clinician should assess his or her emotional knowledge or be aware of his or her cultural countertransference, which he or she can work through in supervision;

- 3) Problem conceptualization should be based on clinical-cultural assessment to formulate a cultural sensitive direction for intervention;
- 4) Cultural skills including observation, interviewing skills, and problem-solving skills, which should be used to explore and examine the presenting challenge in the context of the client's life; and
- 5) Engaging client's family and community as a resource of help and support.

Although the study's finding of the integrative processes did not further emerge with the behavioral indicators for assessing practitioners' cultural competency, the study concretizes the integration of emic-etic frameworks, as well as the clinical-cultural practice processes to work with culturally different clients.

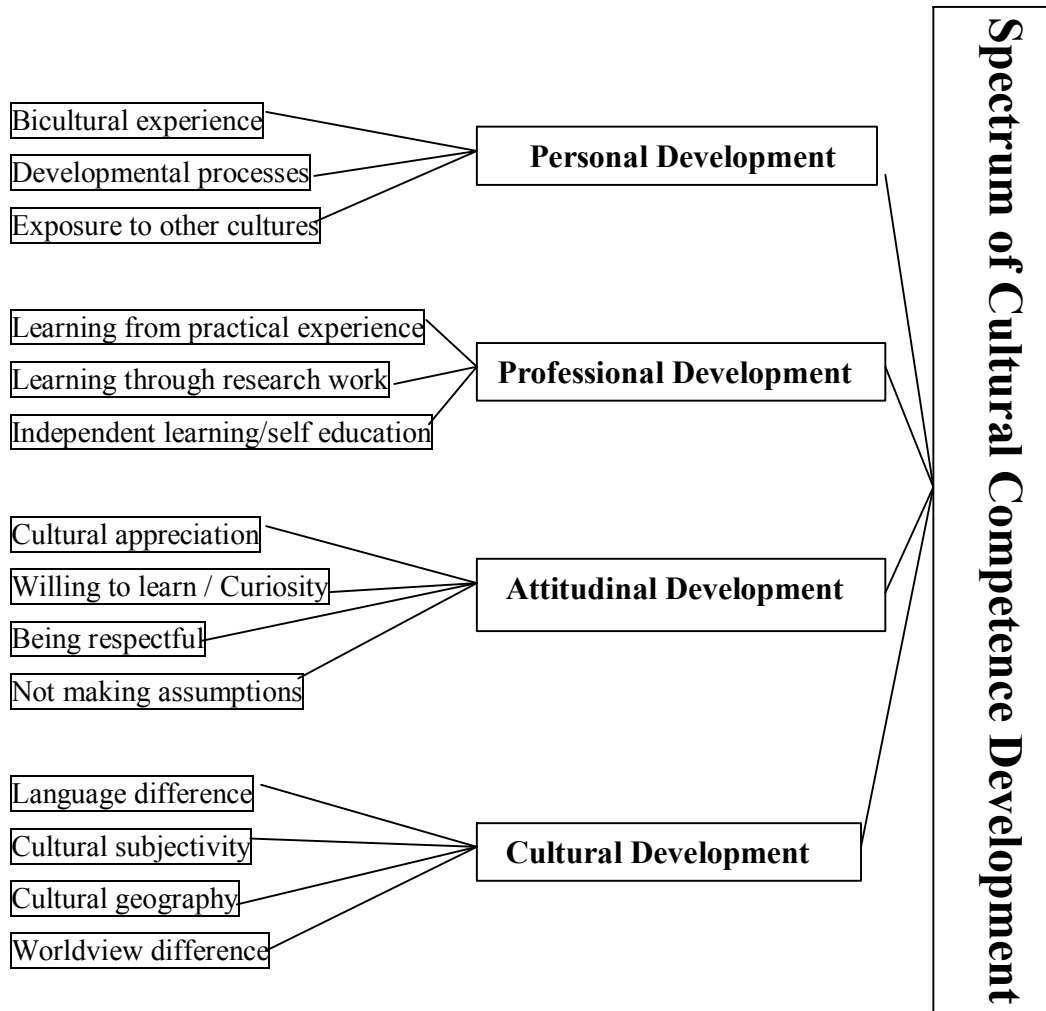
From a training/educational perspective, this study offers development of a level-based cultural competency educational curriculum in order to achieve curriculum standardization. Two subjects highly recommended specifying cultural curricula into levels and adding group processes about differences in class, so as to advance teaching and learning more systematically. The findings of the first two themes, beyond their application in culturally competent practice, can be combined to present a frame for moving from a content approach to a process approach. Given the multicultural reality and the increasing demand for multicultural courses, standardizing the curriculum is required so that students can experience systematic and progressive training and learning in multiculturalism, for example:

1. Level one: cultural competency development—cultural knowledge development and emotional knowledge development through process learning e.g., supervision or peer supervision.
2. Level two: learning about the key culturally competent practice skills—integrate clinical skills into cultural context.
3. Level three: practical experience with supervision—practice integration with clinical/cultural worldview, attitudes, and values, knowledge, and skills.

## References

- Bogo, M., Regehr, C., Hughes, J., Power, R., & Globerman, J. (2002). Evaluating a measure of student field performance in direct service: Testing reliability and validity of explicit criteria. *Journal of Social Work Education, 38*(3), 385-400.
- Boyle, D. P., & Springer, A. (2001). Toward a cultural competence measure for social work with specific populations. *Journal of Ethnic & Cultural Diversity in Social Work, 9*(3/4), 53-71.
- Csiernik, R., Vitali, S., & Gordon, K. (2000). Student and field instructor perceptions of a child welfare competency-based education and training project. *Canadian Social Work, 2*(2), 53-64.
- Padgett, D. K. (1998). *Qualitative methods in social work research*. Sage Publications, Inc.
- Pedersen, P. B., & Ivey, A. (1994). *Culture-centered counseling and interviewing skills: A practical guide*. NY: Praeger.
- Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park, CA: Sage.

Figure 1 *Codes and code clusters for Theme 1*

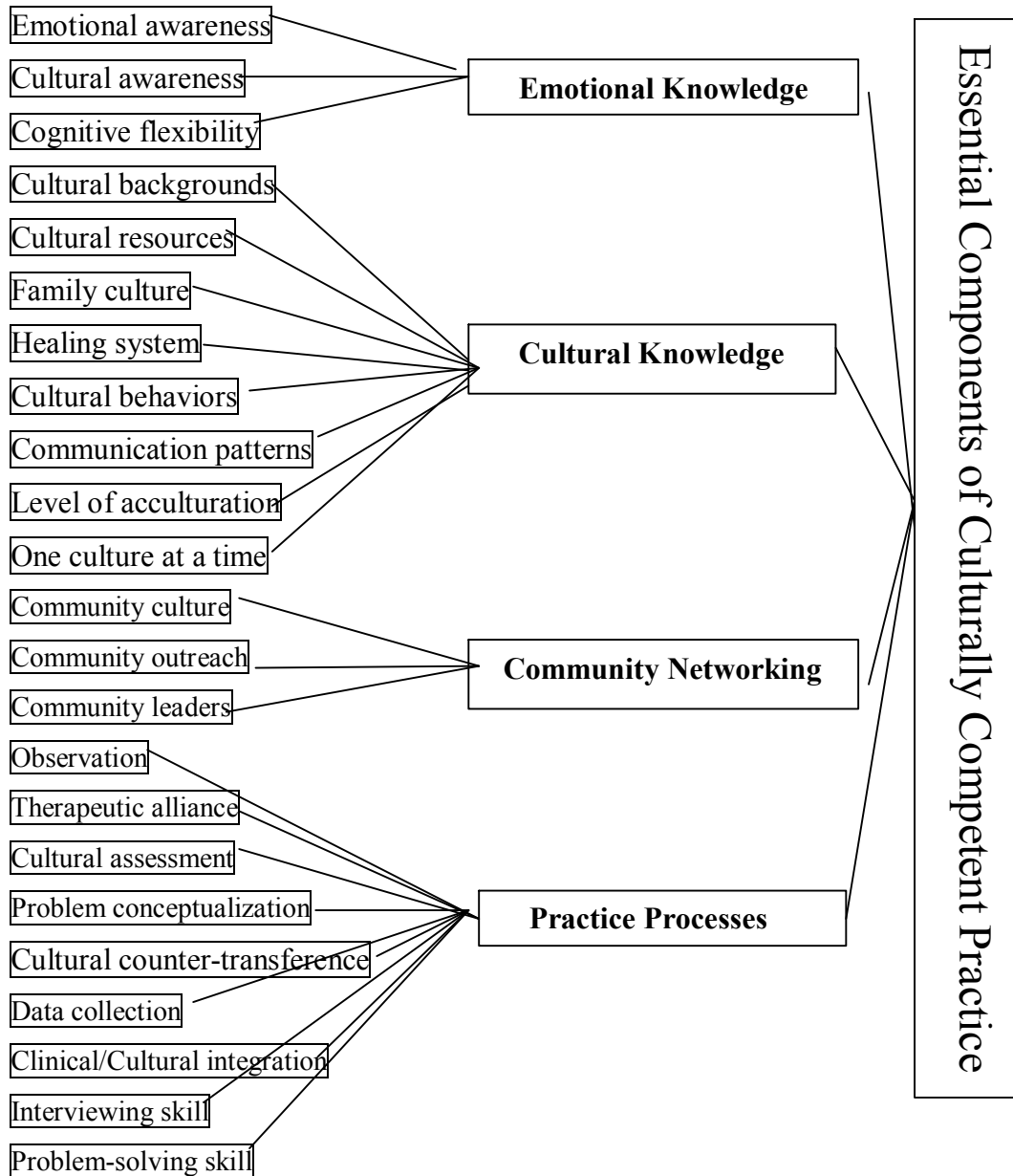


Level 1: Codes  
(Open Codes)

Level 2: Code Clusters  
(Axial Codes)

Level 3: Theme 1  
(Selective Codes)

Figure 2 Codes and code clusters for Theme 2



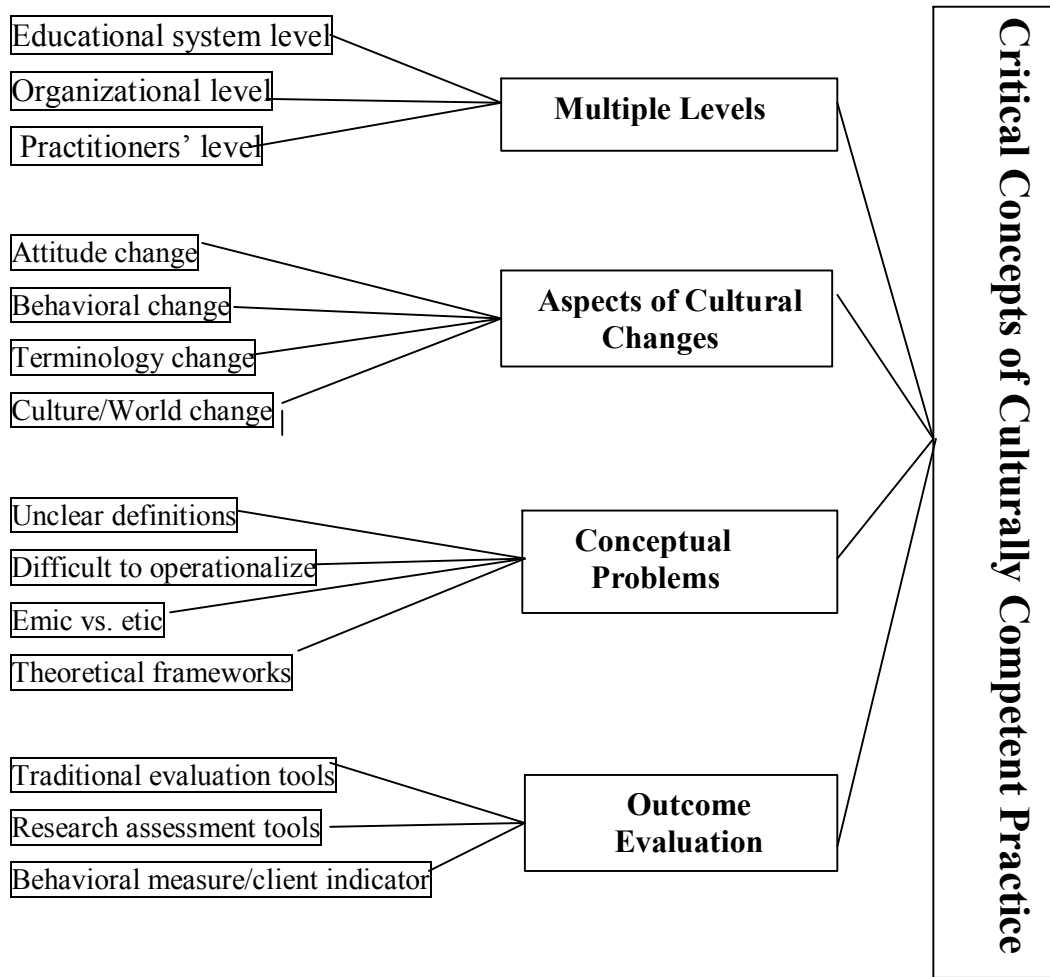
Level 1: Codes  
(Open Codes)

Level 2: Code Clusters  
(Axial Codes)

Level 3: Theme 2  
(Selective Codes)



Figure 3 *Codes and code clusters for Theme 3*



Level 1: Codes  
(Open Codes)

Level 2: Code Clusters  
(Axial Codes)

Level 3: Theme 3  
(Selective Codes)