ASSESSING AND ADDRESSING CULTURAL COMPETENCE IN SYSTEMS OF CARE

In 1988, and again in 1994, Focal Point examined cultural competence in children’s mental health. In the intervening years, much has changed, yet much also remains the same. For example, in the lead article in the Fall, 1988 issue, Terry Cross outlined the “cultural competence continuum.” Cross’ definition of the continuum continues to be influential, as does his description of cultural competence as an ongoing developmental process during which organizations and individuals are continually challenged to do more. The articles in the current issue clearly build from this theoretical foundation, and demonstrate the extent to which these ideas have permeated discussions of systems of care for children and their families.

Articles in earlier Focal Point issues cited a variety of indicators pointing to a lack of cultural competence in child-serving systems. The current issue cites similar indicators; in fact, research from the last few years has provided us with much better data regarding populations served and the extent of disparities for racial and ethnic minorities as compared to Whites. At the same time, the articles of the current issue demonstrate how we have been challenged to increase our sophistication in interpreting this data, and in using it as a means to help us target our efforts for change.

Another recurring theme in the earlier issues was the need for the meaningful involvement of family and community members in efforts to increase cultural competence. This theme too is reiterated throughout the current issue. The current articles go beyond simply calling for involvement, however. The articles describe a variety of strategies communities have used to systematically engage the perspectives of family and community members. With these strategies in place, family and community members have the opportunity to play a central role in making and monitoring concrete action plans for increasing cultural competence.

Yet with all that is shared across these issues, there is nevertheless a very different feel to each of them. The articles in Focal Point in 1988 were primarily concerned with developing definitions and theory. The 1994 issue contained more discussion about how to apply the theory in real life, but there was a sense that this was all still prospective: initiatives were being planned, efforts were preliminary, research was proposed. What makes the current issue different is the energy that flows from discussions of the wide variety of specific approaches and strategies for increasing cultural competence that have been implemented by our contributors. The authors fully acknowledge that experience has not simplified the process—if anything, additional knowledge and information reconfirm the magnitude of the need, as well as the complexity of assessing and addressing cultural competence in systems of care. But responses to these challenges have also grown in their sophistication. We now have a record of efforts that have produced improvements that are not only measurable but also palpable to the people who receive services from systems of care and the people who work in them.

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