Cultural Competency Plan helps align provider’s highly diverse staff and client populations

By Carmen Sarafa, director of behavioral health, Arab-American and Chaldean Council

Since its inception in 1979, the Arab-American and Chaldean Council (ACC), a community-based human services organization in Southeast Michigan, has been providing a broad range of services to facilitate the adjustment and adaptation of Arab-American and Chaldean immigrants and refugees into the United States. ACC serves Muslim and Christian individuals and families from Middle Eastern countries such as Iraq, Jordan, Lebanon, Syria, Yemen, Morocco, Egypt, and Tunisia. Many of our clients come from war-torn areas and are experiencing posttraumatic stress disorder, severe depression, or anxiety.

Because ACC serves people from so many different ethnic and religious backgrounds, we need to be very sensitive to bridging the cultural gap and promoting cross-cultural understanding. For example, when we have events, we need to make sure food is appropriate to the different religions of our clients. Our clubhouse makes sure to rotate meals that everyone can enjoy, and it plans events to be sensitive to different ethnic holidays. We also have to be mindful of things such as how our staff members dress and how they respond to offers of hospitality during home-based services. This focus on sensitivity even extends to our literature, signage, and logo, which all use both Arabic and English.

Because ACC staff members represent many of the different Middle Eastern countries, we had always assumed we were naturally culturally competent. However, during a 2004 CARF Regional trainings

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survey we were asked about our current Cultural Competency Plan. At that time, ACC had pieces of cultural competency woven throughout many of the organization’s operations but nothing consolidated into one comprehensive plan. We realized that, although we were conscious of many of the principles and activities of culturally and linguistically appropriate services, there is always room for improvement. We took many of our existing culturally competent practices and created one central Cultural Competency Plan.

Examples of the practices and strategies defined in the plan include requirements for recruitment and retention of culturally diverse staff, ongoing maintenance of a client data system to track cultural and linguistic needs, and use of culturally diverse media contacts. The elements of the plan are continually reviewed by staff members throughout the organization to determine effectiveness. One way we evaluate our performance is through the use of surveys. Our customer services survey, for instance, gauges whether customers feel comfortable when they come to our clinics and receive our services.

Administratively, creating the consolidated plan has helped to ensure that all the different elements of cultural competency are consistently executed by different departments and throughout ACC’s 40 outreach centers. We have to maintain a balance so that all consumers receive services in a manner compatible with their cultural beliefs and practices, preferred language, physical ability, and gender.

The plan has also helped us address the cultural dynamics of our staff. Our cultural competency efforts encourage staff members to participate in annual overview trainings and discuss things openly with each other. For example, not all staff members speak Arabic. The open dialogue has helped those who do speak Arabic understand that staff members who speak another language, or who have different levels of articulation, are not being insensitive. We also limit discussions related to religion because we do not want to inadvertently offend someone.

The best result of implementing the Cultural Competency Plan was validation of what we were doing right. When I actually put together the plan, almost everything had already been implemented and only a few things had areas for improvement. Now we want to ensure that we maintain what we are doing, and the Cultural Competency Plan ensures that we can do that.

A recent CARF International survey report recognized ACC for its exemplary conformance related to cultural competency stating, “In its efforts to best meet the needs of the highly ethnically diverse communities served, the leadership has historically and
continues to focus its efforts on cultural competency.” For more information on cultural competency, please contact Carmen Sarafa, director of behavioral health, Arab-American and Chaldean Council at carmens@myacc.org. The ACC website is: www.myacc.org.