



# Shifting Paradigms of Cultural Competency

By G. Rumay Alexander

In many ways we are living in an unprecedented era in this country. We are grappling with emotionally charged issues that most people care deeply about; issues, such as health care, education, and immigration.

And then there's globalization. Every 22 seconds someone from another country immigrates to the United States (U.S. Census Bureau, 2003). People coming into this country will increase in number as will their demands on the healthcare system to have patient care that respects and factors in the difference that differences in people demand. The political scene is forcing us to struggle with our biases about age, gender, race and what it means to be a leader. The economic climate has four generations working side-by-side and not necessarily in a harmonious way. The definition of family is getting an extreme makeover. The environment

is reminding us of the major role it plays in matters of health.

Nursing education is experiencing an unprecedented era as well. Never that I can remember has there been more attention apaid to creating welcoming environments for all nursing students, making the case for a diverse workforce, revising curriculums to prepare future nurses for the demographic changes that will challenge them, and recognizing that safe patient care is culturally sensitive. Several professional journals devoted entire editions to cultural competency (see *Nursing Education Perspectives*, *Minority Nurse*, *Journal of Professional Nursing*). They showcase the tremendous thought and energy that creative

nurses are devoting to this complex issue. At this very moment the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) is putting together an advisory panel to revise and develop accreditation standards for culturally competent patient-centered care in hospitals across America. Many nurses will no doubt play a major role in this effort. The initiative, under a grant from the Commonwealth Fund, will explore how diversity, culture, language, and health literacy issues can be better incorporated into current JCAHO standards or drafted into new requirements.

This celebration of diversity in nursing has brought tremendous new leaders on the scene in practice, service, and research. We are acknowledging through our active stance that there is no instance where limiting human rights is a sustainable model. The implicit is being made explicit so that the necessary courageous dialogues are occurring, the taboo questions that have lingered are being aired and asked, the policies and

# Sources of Data on Vulnerable Populations

**Agency for Healthcare Research and Quality (AHRQ),**  
[www.ahrq.gov](http://www.ahrq.gov)

**Cinahl Information Systems,** [www.cinahl.com](http://www.cinahl.com)

**National Minority Quality forum,** [www.nmqf.org](http://www.nmqf.org)

**Health Disparities Collaboratives,**  
[www.healthdisparities.net/hdc/html/home.aspx](http://www.healthdisparities.net/hdc/html/home.aspx)

**American Public Health Association Health Disparities  
Community Solutions Database,**  
[www.apha.org/programs/disparitiesdb](http://www.apha.org/programs/disparitiesdb)

practices that advantage some and disadvantage others are being altered, and the assaults on myths, stereotypes, biases and prejudices are happening by design and not by default.

Achievement, happiness, joy and success are not race-, gender-, generation-specific goals. In fact psychologists tell us that there are basically four fundamental motives that drive all of us.

- **Acquisition.** Obtain scarce goods, including intangibles like social status;
- **Bond.** Form connections with individuals and/or groups;
- **Comprehend.** Satisfy your curiosity and master the world around you; and
- **Defend.** Protect against external threats.

We must keep on keeping on and here are several suggestions to do so.

- Data can make the case and metrics spur performance. We have great resources available (see box above) but we must continue to pursue them with vigor.
- Designated champions of diversity can make the transition from talk to action. Chief Diversity Officer or distinguished chair positions are emerging in schools of nursing across the country. (See Sidebar).
- Strategic diversity plans give direction to your actions. Learning and

work environments need to be welcoming and inclusive so that the multiple missions can be achieved. They should be established and made public.

- Keep making the implicit explicit. Surface your assumptions, truly examine them and ask questions. Dialogue is the currency of organizations and a good hallmark of professional and responsible nursing care. Hold conversations that are courageous and difficult. Examine traditions, policies and procedures established five or more years ago, let go of old paradigms and embrace change. The structures we create are not immutable. Manage your processes and structures, and don't let them manage you. Remember, all of our

## Sample of Nursing Schools with a Chief Diversity Officer

1. **The University of North Carolina - Chapel Hill**
2. **The University of Pennsylvania**
3. **Indiana University**
4. **Vanderbilt University**
5. **University of California, Los Angeles**

knowledge is about the past, and all of our decisions are about the future.

- Remember, difference matters. It situates us always in a survival mode. Practice acceptance of difference without judgment. And be generous with your spirit and give benefit of the doubt.
- Open up to new experiences... grow! Revolt at your own level whether that is through teaching, research, writing for publication, patient care, decision-making, traveling, etc. Use your opportunities to bring equity and prevent attacks on anyone's self-esteem.
- Work on yourself both as an individual and as an organizational entity. Confront your own biases. You are a work in progress and, like excellence, cultural awareness is a lifelong pursuit.
- Choose your words carefully. Language defines us as human beings. There is a story about Mother Teresa that bears repeating. The rumor is that a few years before she died, she was asked to attend an anti-war demonstration. She replied that she would not, but would attend a peace rally instead. Persian poet Hafiz once said that the language we speak becomes the house we live in. There is a difference between assisting a disabled person versus assisting a person with a disability.
- We need each other, so practice acts of forgiveness, respect, dignity and affirmation. Saying *thank you, please, and I'm sorry* goes a long way these days.
- *And finally...* Collaborate! Collaborate! Collaborate! ©



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Recently, Dr. Alexander was appointed to the Board of Trustees for the Foundation of the National Student Nurses' Association. She is renowned for her expertise on cultural diversity issues.