Extending cultural competence through critical praxis: What does this mean in the curriculum?

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What will we cover?

- Draw from our Chapter on culturally competent mental health practitioner in *Working together, Aboriginal and Torres Strait Islander Principles and Practice*

- We will focus on:
  - Positioning
  - Broader context for professions
  - Cultural competence, cultural safety
  - Assumptions and problematisation
  - Critical pedagogy and reflexivity
  - Resources for interculturality
Broader context

- Education and training initiatives
  - 5 professions
- National Practice Standards for Mental Health Workforce
  - Guidelines, protocols, & principles,
  - Standards provide core competencies
  - Cultural competence
- Knowledge, Skills, Attitudes
- Cultural competence and cultural safety
### Table 1: Twelve Practice Standards for the Mental Health Workforce

1. **Rights, Responsibilities, Safety and Privacy** - of family members, carers, rights of clients, privacy, confidentiality and safety guidelines.
2. **Consumer and carer participation** - mental health professionals are supposed to know about supporting bodies and consumers.
3. **Awareness of diversity** – *this is explored within this session*
4. **Knowledge of mental health problems, mental disorders** and applying this to our practice.
5. **Promotion and prevention**—adopting a preventative approach and educating others in order to promote optimal well-being.
6. **Early detection and intervention**—looking for early signs and symptoms of mental health problems; assessment, treatment, relapse prevention and support.
7. **Evidence-based assessment, treatment, relapse prevention and support services** which could prevent relapse.
8. **Integration and partnership**—mental health professionals to provide continuity of care through working with other organisations and services.
9. **Service planning, development and management** - developing skills for the planning, development, implementation and evaluation of management of mental health services.
10. **Documentation and information systems**
11. **Evaluation and research**
12. **Ethical practice and professional responsibilities**
Personal positionings

Vantage point of looking in from outside

- “those constructed as other have perspective advantage. The advantage does not speak to the economic, social and political disadvantage that subordinate groups may experience, but rather the way that not being positioned in the centre allows for “wide-angle” vision. (Winter in Ladson-Billings, 2000)
The discourse of cultural competence

- ‘cultural safety developed from the experience of colonisation and recognizes that the social, historical, political diversity of a culture impacts on their contemporary health experience’ (Ramsden 2002 p.112).

- Cultural competence
  - the knowledge, awareness, and skills aimed at providing service that promotes and advances cultural diversity and recognises the uniqueness of self and others in communities.
  - a response to ongoing health inequalities and related disparities in access to health services and experiences in health for different communities.
Growing currency of Cultural Competence

- Has strong currency in policy and practice
  - E.g., Issues regarding cultural competence in mental health professions and organisations including: lack of awareness amongst professionals about Indigenous clients, cultures and contexts (Ranzijn, McConnochie & Nolan, 2007)
- Potentially becoming a dominant discourse
- Kessaris (2006, p.358) argues: “‘cultural awareness’ and ‘anti-racism’ type training can no longer focus primarily on seeking to ‘understand’ the ‘other’. Emphasis must be placed on understanding the self in the midst of unbalanced power relationships.”
Extending Cultural Competence through critical praxis

- Interrogate ‘expert’ role involves critical reflection and recognition of unequal power relations, and the various ways these are reproduced including through disciplinary practices.

- What are our ongoing commitments to addressing racialised inequalities?

- Social ecological approaches that recognises power and historical and contemporary relations of colonisation.

- Developing a standpoint of decolonisation:
  - Responsive to local and global indigenous knowledges (e.g. Oxenham, 1999; Rigney, Smith, Nakata, Martin);
  - Unpacking notions of whiteness (history, knowledge, identity and belonging and practice);
  - Both standpoints are at some level concerned with the task of social change and to reveal normativity and dominance is reproduced.
In combination this interdisciplinary work offers resources, standpoints, and frames of reference that can be used to ask pertinent questions about race relations, histories of oppression, and constructions of health and mental health and wellbeing, which ultimately are critical understandings and activities which impact on health and mental health service delivery. (Walker & Sonn, 2010)
What does this mean in teaching and practice?