

# **A Guide for Using the Cultural and Linguistic Competence Assessment for Disability Organizations**



DEVELOPED BY

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Cultural Competence**

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# Introduction

The National Center for Cultural Competence (NCCC) embraces two different, yet related conceptual frameworks for cultural competence and linguistic competence. The NCCC views cultural competence as a developmental process that evolves over an extended period. At any given time, both organizations and individuals are at various stages along the cultural competence continuum. Specifically, the continuum gauges (1) the extent to which organizations have clearly defined values and developed policies, structures, practices, and procedures; and (2) the level of awareness, knowledge, skills, attitudes, and behaviors demonstrated by individuals. The NCCC views linguistic competence as a set of policies, structures, and practices that are implemented and evaluated within organizations. Dedicated resources (i.e., fiscal, personnel, technology) are required to support this capacity on an ongoing basis. See key definitions in Appendix 1.

Organizational self-assessment is a necessary, effective, and systematic way to plan for and incorporate cultural and linguistic competence. An assessment should address the attitudes, behaviors, policies, structures, and practices of an organization, including but not limited to, those of its board, staff, faculty, consultants, contractors, advisory groups, and volunteers. The process should also elicit the experiences and opinions of the individuals and communities served. Self-assessment can involve the administration of a formal instrument or tool. It can also involve conducting:

- focus groups;
- structured interviews;
- an analysis of relevant community, regional, state, territorial, tribal, and organizational demographic data; and
- a critical review of the organization's values, mission, policies, procedures, practices, budget, research portfolio, Web site, publications/print documents, and multimedia resources.

While there are many tools and instruments to assess organizational cultural and linguistic competence, few have been developed to address the cross-section of organizations concerned with disability. The *Cultural and Linguistic Competence Assessment for Disability Organizations* (CLCADO) was developed specifically for this purpose. The CLCADO is intended to support organizations to (1) plan for and incorporate culturally and linguistically competent values, policies, structures, and practices in all aspects of their work; (2) enhance the quality of services, supports, and advocacy provided to diverse and underserved communities; (3) effect change in education, training, technical assistance, research, and public policy; and (4) advance cultural and linguistic competence as an essential approach to address racial and ethnic disparities and promote equity for people who experience disabilities and their families.

## The Benefits

There are many benefits for disability organizations to engage in cultural and linguistic competence self-assessment. Such processes can lead to the development of a strategic or action plan with short-term and long-term goals, measurable objectives, and identified fiscal and personnel resources to advance and sustain cultural and linguistic competence within the organization. Other benefits include, but are not limited to:

- gauging the degree to which organizations are effectively addressing the preferences and needs of culturally and linguistically diverse populations;
- determining the knowledge, skills, interests, and needs of staff, faculty, students, board members, and organizational membership;
- improving access, utilization, outcomes, and satisfaction with services and activities conducted;
- establishing partnerships that will meaningfully involve individuals who experience disabilities, their families and/or friends, community partners, and key allies; and
- determining strengths and areas for growth for individuals employed by or affiliated with the organization.

## Values and Guiding Principles for Self-Assessment

The NCCC uses the following set of values and principles to guide all self-assessment processes.

- **Self-assessment is a strengths-based model.**  
The purpose of self-assessment is to identify and promote growth among individuals and within organizations that enhances their ability to deliver services and supports and conduct activities that are culturally and linguistically competent. Self-assessment emphasizes the identification of strengths, as well as areas of growth, at all levels of an organization. The process also allows organizations to identify and acknowledge the internal assets that may be inadvertently overlooked.
- **A safe and non-judgmental environment is essential to the self-assessment process.**  
Self-assessment is most productive when conducted in an environment that (1) offers participants an opportunity to give honest statements of their level of awareness, knowledge, and skills related to cultural and linguistic competence; (2) provides an opportunity for participants to share their individual perspectives in a candid manner; (3) makes certain that there are no negative consequences and repercussions for participants; and (4) ensures that information derived will be used to effect meaningful change within the organization and the communities and constituencies it serves. The NCCC embraces the concept that cultural competence is developmental and occurs along a continuum (Cross et al., 1989). It matters not where an individual or organization starts, as long as there is continued progression toward the positive end of the continuum.
- **A fundamental aspect of self-assessment ensures the meaningful involvement of the recipients of services and supports or participants in the activities conducted.**  
Principles of self-determination and cultural competence ensure that participants and service recipients are integrally involved in planning, implementation, and evaluation processes. These principles extend beyond the individual to the community as a whole. Self-assessment must seek and value the experiences and opinions, both historical and current, of diverse groups, audiences, and populations with which the organization has served or collaborated. The organization should also seek the opinions of those with which it has not yet formed alliances. An inclusive self-assessment process can strengthen existing and forge new alliances and partnerships that have long-lasting benefits for the organization and for the community or region as a whole.



- **The results of self-assessment are used to enhance and build capacity.**

The intent of the self-assessment process is neither to render a score/rating nor to label an individual or an organization. Rather, it is intended to provide a snapshot of where an individual or organization is at a particular point in time. Results should be used at (1) the individual level to identify specific areas of knowledge and skills for continued growth; and (2) the organizational level for strategic and action planning, quality improvement, and organizational change processes. The NCCC's experiences with self-assessment have demonstrated that comparisons between individuals and among organizations are of little benefit. Greater benefit is gained from individual and organizational self-comparison over extended periods to determine the extent to which growth has occurred.

- **Diverse dissemination strategies are essential to the self-assessment process.**

Self-assessment results should be shared with participants, partners, and allies in a manner that meets their unique needs. The NCCC employs a variety of dissemination strategies that are tailored to the specific interests of the organization and its constituency groups. This approach to dissemination involves (1) identification of the audiences, (2) presentation of data and assessment results in formats that are most useful and accessible to diverse audiences, and (3) convening of forums to discuss the implications and respond to questions or concerns of audiences and constituency groups. This approach recognizes that the need for information and methods of dissemination will vary for individuals who experience disabilities, their families and friends, policy makers, educators, researchers, students, advocates, service providers, and community-based organizations.

# Instrument Description

The CLCADO is designed as a self-assessment instrument and requires approximately 30-45 minutes to complete. It consists of four sections—**Our World View**, **Who We Are**, **What We Do**, and **How We Work**. The instrument requires responses to detailed statements based on the participant’s knowledge, opinions, and experiences. It may be difficult for participants to rate their organization based on the categories given. However, it is important for participants to answer every item to the best of their knowledge. There are different kinds of items on the CLCADO. Items in some sections use response fields such as “yes,” “no,” “don't know,” or “in progress.” Other items use a four-point Likert scale with a “don’t know” option. Participants should check the box that reflects the best option available. *Remember, there are no right or wrong answers.*

**Our World View.** This section asks for perspectives about (1) the organization’s world view of cultural diversity and approaches to inclusion and equity, (2) the extent to which this world view guides organizational behavior and is established in policy, and (3) the organization’s philosophy, values, and commitment to cultural and linguistic competence.

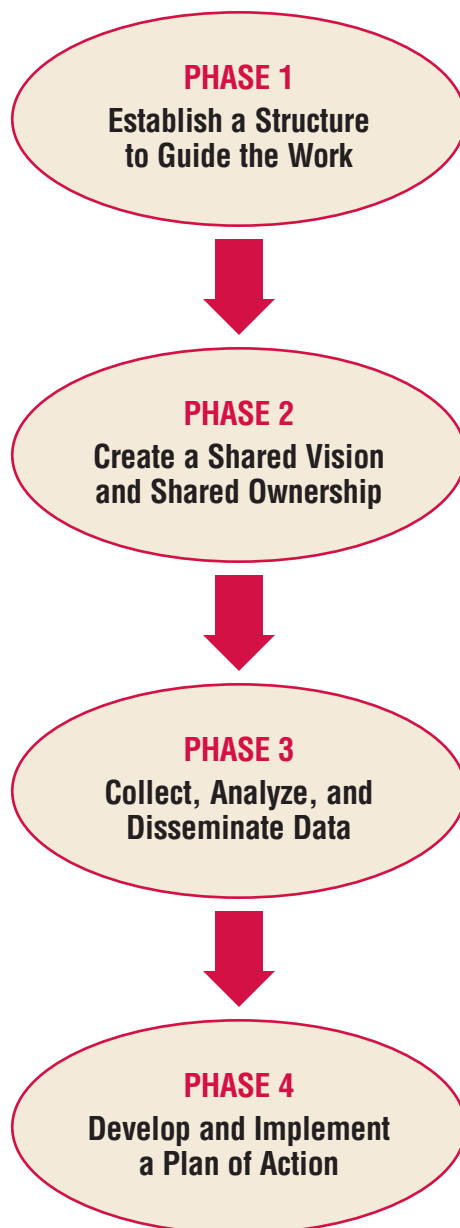
**Who We Are.** This section examines the cultural diversity of staff, board members, and others who do the work of the organization. It also probes training and ongoing professional development needed to support cultural and linguistic competence. The items in this section apply to people with and without disabilities.

**What We Do.** This section examines how cultural and linguistic competence applies to the core functions of the organization, including (1) Conferences, Education, and Training; (2) Public Policy, Legislation, and Advocacy; (3) Community Engagement, Partnership, and Collaboration; (4) Publications and Information Dissemination; (5) Fundraising and Grant Writing; (6) Supporting a Research Agenda; and (7) Direct Services and Supports.

**How We Work.** This section probes how cultural and linguistic competency is applied to the structure, funding, and leadership activities of your organization.

# A Four-Phase Approach to Self-Assessment

A four-step process for organizational self-assessment is described below. The NCCC encourages the use of this process and has used it successfully with many organizations (Goode, Brown, Mason, & Sockalingam, 2006). However, considerable flexibility is also encouraged to make needed adaptations to the process based on the unique considerations of your organization (Goode, 2010).



## Phases to Conduct an Organizational Self-Assessment

- **Establish a structure to guide the work**  
Assemble a work group with the responsibility of coordinating the organizational self-assessment. The group can serve as the primary entity to plan, implement, and provide oversight to the process. Be inclusive. The group should have representation from all levels of the organization, including but not limited to, board members, staff, and faculty. It can also include individuals who experience disabilities and their families, community partners, and key allies.
- **Create a shared vision and shared ownership**  
Convene groups to define cultural competence and linguistic competence. Explore the rationale, value, and meaning of these concepts for your organization. Groups may meet face-to-face or via teleconference and Webinar. Ensure broad participation and a diversity of perspectives. Groups may include, but are not limited to, individuals who experience disabilities and their families, board members, staff, faculty, consultants, interns/fellows, volunteers, community-based organizations, partners, and key allies.
- **Collect, analyze, and disseminate data**  
Many data sources can be tapped for the self-assessment process, such as those from the CLCADO, focus groups, interviews, U.S. Census, national and state data sets on the incidence of racial and ethnic disparities and disproportionality, and your organization's own records. Carefully review and analyze these data. Use findings to create a comprehensive report that can be adapted for dissemination to diverse audiences and constituents.
- **Develop and implement a plan of action**  
Create a plan of action using the results of the organizational self-assessment. Identify priorities. Determine the strategies, activities, partners, resources, timetables, and responsible parties to achieve desired goals. Establish benchmarks to monitor and assess progress.

# Useful Steps: Making the Self-Assessment Process Work for Your Organization

The process of self-assessment is just as important as the outcomes. There is no one method for conducting organizational self-assessment. The NCCC, however, has found the following steps to be useful based on years of experience in planning and conducting self-assessment processes for a broad range of human service organizations (Goode, Jones, & Mason, 2002).

## USEFUL STEPS FOR PHASE 1: Establish a Structure to Guide the Work

### **Identify an individual or consultant to coordinate the self-assessment process.**

Some organizations choose to use a consultant, whereas others identify a staff or faculty member to lead or coordinate the self-assessment process. You should make this decision based on (1) the resources available to your organization and (2) the knowledge and skills of identified staff or faculty member(s).

- **If you select a staff or faculty member, make sure that she/he is interested and has the time to devote to this effort.**  
Often, staff or faculty who have a reputation for getting things done are frequently selected or “volunteered” for yet additional tasks. Before selecting your organization’s “go to” person find out whether he/she is really interested in coordinating a self-assessment process. If your “go to” person is indeed selected, it may be necessary to decrease assigned workloads or reassign tasks until the self-assessment process is completed.
- **If you choose to use a consultant, make sure you get the right one.**  
Many consultants market their skills in the areas of diversity, cultural competence, or linguistic competence. Make sure the consultant/consulting firm you select is the right match for your organization, for the communities and constituency groups served, and for the tasks to be conducted. The consultant/consulting firm should have knowledge of conducting cultural and linguistic competence assessment processes and experience working with organizations whose primary focus is disability. Conduct interviews and inquire about the consultant’s/consulting firm’s values, philosophy, definitions, and frame of reference for cultural competence and linguistic competence. Determine whether these views are consistent with those of your organization; if not, you know what to do.
- **Attend to the dynamics of difference.**  
Other factors to consider in the selection process include, but are not limited to, the consultant’s/consulting firm’s: (1) experience with underserved and underrepresented cultural groups in addition to those defined solely by disability;

(2) capacity to address the dynamics of difference that may occur based on such factors as race, ethnicity, language, religiosity/spirituality, gender, sexual orientation, gender identity or expression, and disability status; and (3) understanding of the cultural contexts of your organization and the socio-political environment in which it operates.

### **Put a structure in place to guide the process.**

- **If you already have a committee...use it. If not, create one.**

Some organizations use an existing committee structure, and others find it beneficial to create a task force or work group devoted to this function. Decide which works best for your organization. The work group should serve as the primary entity to plan, implement, and guide the self-assessment process.

- **Be inclusive!**

The group should have representation from all levels of the organization and include other key constituents. Extend invitations to staff, faculty, board members, individuals who experience disabilities and their families, volunteers, community partners, and key allies. The work group should have ready access to the organization's decision makers, or a work group member should have authority to make routine decisions during the process.

- **Determine what to do when work group members disagree.**

Many work groups are plagued by differences in opinion on how to get the work done. This situation may be further aggravated when cultural expressions of opinions are misinterpreted and misunderstood. For example, some group members may want to move quickly through an agenda because saving time is an important value. For others, who value relationships or need additional time to process complex information, moving quickly may impede their full participation. Addressing these diverse perspectives and group dynamics will require skilled leadership. Careful consideration should be given to selecting a leader or leaders who can meet the challenges of guiding a diverse group of people who may or may not have previously worked together, who may or may not have shared values, and who subscribe to differing world views.

- **Make the work group work.**

Some individuals may or may not have previous work group experience. Additionally, some may have never participated in an organizational process to assess cultural and linguistic competence. Leaders must make sure that all are familiar and comfortable with participating in a work group charged with an organizational assessment. It is incumbent upon leadership to create an environment that prepares all work group members to participate fully and effectively. Consider providing meeting summary notes, agendas, and written or audio-recorded materials in advance. Some members may benefit from being paired with another who has more experience in group processes.

The following “words from the wise” are offered in anticipation of and to assist with group dynamics.

#### **WORDS FROM THE WISE**

- Ensure a safe environment for work group members to share their thoughts, perspectives, and feelings.
- Let the group “be” before it “does.” All groups go through a process of “storming, forming, and norming.”
- Attend to members’ cultural practices—different experiences and preferences for getting work done.
- Reach agreement on approaches for communication, conflict resolution, and decision-making to help the group do its work.
- Attend to and address literacy and language access preferences and needs of all group members.
- Acknowledge and address issues associated with power (i.e., historical, perceived, actual) among group members.

## Dedicate the necessary time and resources to get the job done.

### ■ Make sure you have the time, people, money, and effort.

Conducting self-assessment is time and resource intensive. Determine the scope of the self-assessment process for your disability organization. You may only choose to administer and use the data from the CLCADO. You may decide that it would be beneficial to convene focus groups and conduct structured interviews. See Appendix 2 for suggested focus group protocol and sample structured interview questions. You may also decide to conduct an in-depth analysis of your disability organization's written policies, procedures, budget, Web site, publications/print documents, and multimedia resources. The success of the self-assessment process, in part, depends on allowing ample time to complete each phase. It also depends on having the necessary staffing and funding. The following "tips" are provided to help your organization think through the time, people, money, and effort.

### TIPS: TIME, PEOPLE, MONEY, AND EFFORT

#### Funding

- Determine the amount of funding that your organization can devote to conducting a self-assessment.
- Remember that some resources may be in-kind or donated from community partners. One-time grants from local/national foundations may be a source of funding as well.
- Develop a realistic budget. Line items may include, but are not limited to:
  - consultant fees;
  - stipends or reimbursement for individuals with disabilities and their families to participate in work group activities;
  - foreign language interpretation and translation services;
  - sign language interpretation services or other accommodations for people who experience disabilities;
  - costs associated with convening focus groups;
  - telephone/conference calls;
  - copying, mailing, and related dissemination activities; and
  - refreshments (appropriate to the time of day of meetings or focus groups and food choices that reflect community preferences).

#### Staffing

- Determine the responsibilities and the amount of time that staff and/or faculty will devote to the self-assessment process. *Protect this time.*
- Develop realistic timelines for meeting all tasks associated with the self-assessment process (e.g., routine meetings or teleconferences, administration of the instrument and analysis of resulting data, collection and analysis of other data, focus groups, interviews, dissemination of findings).
- Make judicious use of time devoted by partners, key allies, and other constituents.

### ■ All aboard! Get your partners and allies onboard.

A self-assessment process that is inclusive of community partners and key allies provides an opportunity to obtain a rich variety of information. Consider the following tips if your organization chooses this path:

- Extend an invitation to involve community partners and allies from the "get go."
- Encourage individuals and organizations to choose different ways to be involved in the self-assessment process, including but not limited to:
  - providing advice in preliminary planning activities;
  - serving as work group members;
  - participating in focus groups;
  - helping to identify or donate resources; and
  - providing services or staff assistance.
- Demonstrate that contributions of each community partner and ally are valued and respected.

## USEFUL STEPS FOR PHASE 2: Create a Shared Vision and Shared Ownership

### Get “buy-in” and group members on the same page.

Many organizations move forward with conducting an organizational self-assessment without first going through an important step—creating a shared vision and fostering shared ownership for cultural and linguistic competence. Creating a shared vision and fostering shared ownership are most effective when rooted in (1) a shared vocabulary and understanding of the concepts, (2) inclusive processes, and (3) buy-in strategies tailored to meet individual interests and needs. The following insights are offered based on the NCCC’s past experiences in leading and conducting these efforts.

#### 1. Shared vocabulary, shared understanding

There are many conceptual frameworks and definitions for cultural competence and linguistic competence. Moreover, these terms are often used interchangeably with others—as if they have the same meaning (e.g., cultural sensitivity, cultural awareness, culturally appropriate, culturally effective, culturally relevant, linguistically appropriate). Many mistakenly think that cultural competence and linguistic competence are solely for and about people of color or members of racial groups other than non-Hispanic White. These concepts are relevant for and applicable to all people since we are all cultural beings. It is important to have a shared vocabulary and shared understanding of key concepts and terms, which helps to move the process forward.

Culture is a system of collectively held values, beliefs and practices of a particular group that guides thinking and actions in patterned ways. (WENGER, 1993)

- Review the definitions of key terms in Appendix 1 of this guide. Engage staff, faculty, individuals with disabilities and their families, fellows/interns, volunteers, partners, and key allies in discussions about their meaning.
- Identify frameworks and definitions for cultural competence and linguistic competence from existing literature. Explore and discuss their meaning and relevance to the work of your organization.

#### 2. An inclusive process

Without a shared understanding and inclusive processes, those involved in self-assessment (e.g., board members, staff, faculty, individuals with disabilities and their families, partners) may not be “on the same page.” There is little documented in the literature that describes how organizations use inclusive processes to reach consensus on (1) definitions of cultural competence and linguistic competence, and (2) what these concepts mean to their mission and work.

- Compile a list of board members, staff, faculty, individuals with disabilities and their families, community partners, and key allies to participate in a consensus process.
- Review the list with an eye toward who is not at the table. Strive to ensure diverse representation across racial, ethnic, linguistic, and cultural groups within the area or geographic locale served by your organization.
- Reach consensus on a definition and framework for cultural competence and linguistic competence. Consider these definitions and frameworks and how they relate to your organization and the communities and constituency groups it serves and supports.

### 3. Buy-in strategies tailored to meet individual interests and needs

You can learn a lot when you pose and answer the following questions:

- Why is cultural and linguistic competence important to our organization?
- How will a self-assessment process help our organization in the journey toward cultural and linguistic competence?
- What's in it for our organization? What's in it for me?
- How will this self-assessment help with our efforts to address disparities in services and supports for individuals who experience disabilities and their families?
- How will this self-assessment assist our organization in addressing disproportionality in educational settings?

Being able to respond positively and with confidence to these questions will assist your organization in developing buy-in strategies that are tailored for different constituency groups. What is meaningful for one group or segment of the community may not be same for others. For example, individuals who experience disabilities and their families may want assurance that their cultural beliefs and practices will be honored and respected when they seek guidance and support. Staff may want to improve the quality of services and supports they deliver or increase the diversity of the families they serve. Faculty may want to address cultural and linguistic competence in curricula, teaching methodologies, supervision, and research efforts. Community partners and key allies may see the benefit of increasing your organization's capacity to reach and serve individuals who experience disabilities and their families in a certain geographic area or those with limited English proficiency or other language barriers. Last, board members may be invested in the how cultural and linguistic competence strengthens the organization and positions it for the future.

Efforts to get buy-in should be planned, deliberate, and strategic.

- Clearly state your organization's reason for self-assessment.
- Generate a list of expected benefits that can come from the self-assessment process.
- Enlist the assistance of "champions" or those who have credibility and influence among their peers and/or within their respective communities.
- Ask other organizations that have engaged in self-assessment to share their stories—both challenges and successes.
- Invite "naysayers" or the "opposition" to the table. Opposing opinions should be represented at the table; they can help shape strategies and approaches to better address and counter resistance. It is particularly beneficial when a naysayer is "converted" and becomes a credible voice within the opposition.

### 4. Shared Vision

Creating a vision for cultural and linguistic competence is a powerful process that enables all to have a stake in the benefits and outcomes.

- Engage staff, faculty, board members, individuals with disabilities and their families, fellows/interns, community partners, and key allies in a process to create a shared vision.
- Pose the questions: If our organization were culturally and linguistically competent in five years, what would it look like? What would be different?
- Review responses to the questions, and reach a group consensus on a vision statement.



## USEFUL STEPS FOR PHASE 3: Collect, Analyze, and Disseminate Data

The scope of the self-assessment process your organization chooses to conduct will have a direct bearing on the types of data to be collected and analyzed. Data sets may include, but are not limited to (1) the completed CLCADO instrument; (2) focus groups; (3) structured interviews; (4) community, local, regional, and state demographic data; and (5) organizational records. The following guidance is provided to assist your organization with administering and scoring the CLCADO.

### Administer the CLCADO

#### This is how you do it.

A successful self-assessment, in part, depends on how much the participants understand, embrace, and are enthusiastic about the process. Your buy-in strategies should have helped pave the way for this phase.

- Determine who will complete the CLCADO and how it will be disseminated. You know your organization best and the preferred ways of receiving the CLCADO (e.g., individually or group, face-to-face meeting, e-mail, U.S. mail).
- Emphasize why your organization is invested in conducting a self-assessment, including the potential benefits.
- Review the instrument with participants and answer any questions.
- Establish timelines for the return of all mail-in CLCADO instruments.
- Discuss the structure of the instrument with participants. The CLCADO instructs participants to answer *all* questions to the best of their knowledge. The section entitled *What We Do* lists a broad range of activities conducted by disability organizations. Respond to only those activities conducted by your organization.

### Score the CLCADO

#### This is how you score it.

The CLCADO is not designed to give a “grade” to your organization. The CLCADO is intended to help identify areas of strength and growth within your organization, and to provide guidance for the next stage of your journey toward achieving cultural and linguistic competence. Detailed guidance on how to score the CLCADO follows.

1. Set up a way to record the scores on each item for each person completing the CLCADO. You can use any of the following tools to record CLCADO scores—an electronic spreadsheet, such as Excel, a paper grid or spreadsheet, or computer statistical software. Set up this tool so that you can enter each response and then can easily count how many people completing the instrument chose each response option. For example, in the first section, “Our World View,” you should have a place for the four response options in the Likert scale for each item, as well as yes, no, or don’t know about policy for each of these items.
2. After entering the data from all of the completed CLCADO instruments, calculate the number of each type of response. Next, calculate percentages for each response. It may be useful to total the number for each response across an entire section or subsection. This step will provide you with an overview of which are areas of strength or areas for growth for your disability organization.

3. Choose criteria for a definition of areas of strength and areas for growth for your organization. Consider the following options. There are several different types of response sets on the CLCADO.
  - For items or bulleted sub-items with a response option of **“Yes/No/In progress/Don't know”**:
    - If at least 75% of respondents choose “yes,” the item or sub-item would qualify as an area of strength.
    - Areas for growth are those below that level.
    - Items on which a large percentage reported that the activity is “in progress” can be considered opportunities for more immediate success.
    - Any areas where fewer than 25% of those completing the CLCADO choose “yes,” might be considered as particularly challenging areas for your organization.
  - For items or bulleted sub-items with response options of **“Never/Seldom/Sometimes/Routinely”** or **“Not at All/A Little/Somewhat/Very Much,”** the NCCC suggests that:
    - Strengths are items on which 75% or more choose “Routinely” or “Very Much.”
    - Items for which 75% or more choose “Sometimes” or “Somewhat” are considered relative strengths and opportunities for immediate development.
    - Items with percentages of response lower than 75% are considered areas for growth.
    - Items that had fewer than 25% choosing “Routinely” or “Sometimes” for the relevant response set might be considered particularly challenging areas for your organization. Similarly, items that had fewer than 25% choosing “Very Much” or “Somewhat” might be considered challenging areas.

### Analyze and Report Data from the CLCADO

After you have completed the scoring, your organization can look at each of the four sections or particular items to identify areas of strength and growth. If your organization chooses a statistical approach, treat the information as frequency data. The NCCC does not recommend calculating or reporting mean scores on items or the instrument as a whole. Questions to consider in analyzing the data follow:

1. What are the specific areas of strength or areas for growth?
2. Are policies in place to support our work? If so, are members of our organization aware of them?
3. Are different segments of our organization (e.g., board, staff, volunteers, consultants) aware of our policies and practices related to cultural and linguistic competency?
4. Are there areas in which we are “almost” there and could quickly make progress?
5. How might our areas of strength help us make progress on our areas for growth?

## USEFUL STEPS FOR PHASE 4: Develop and Implement a Plan of Action

The process of self-assessment yields a wealth of information. Now that all of the data analysis is completed, you can begin Phase 4. This phase of the process involves using all of the information you have collected and analyzed to develop an action plan. The action plan should clearly state the priorities and goals that your organization establishes for cultural and linguistic competence. A well-developed plan helps ensure that your organization has a fully detailed road map for the journey it is undertaking and that all involved will be knowledgeable about their roles and responsibilities. The following tips are offered to assist in developing and implementing a plan of action.

**Strategic planning, action planning. What’s the difference?**

Many disability organizations have strategic plans that set forth broad directions for an established period, typically five years or more. An action plan is not a substitute for your organization’s strategic plan. As presented in this guide, an action plan is an effective tool for using the self-assessment results to plan for organizational change specifically related to cultural and linguistic competence. The action planning process should be used to:

- clarify and delineate tasks;
- align the creativity, actions, roles, and responsibilities of work group members;
- determine necessary actions, roles, and responsibilities;
- build trust, support, enthusiasm, and consensus;
- create an implementation timeline to accomplish tasks; and
- coordinate actions and assignments.

An action plan is a tool for moving forward on a strategy or project that has already been agreed upon or about which there is already consensus. (INSTITUTE OF CULTURAL AFFAIRS, 2002)

**Tips for developing an action plan**

The following are tips for developing and implementing an action plan for your organization:

- Establish a process for developing an action plan, and select someone who is knowledgeable and skilled to lead the process.
- Be inclusive. Invite a diverse array of constituents to be active participants in the process. They may include, but are not limited to, staff, faculty, board members, individuals who experience disabilities and their families, volunteers, fellows/interns, community partners, and allies to be part of the process. They will enrich and bring valuable resources to the action planning process.
- Develop an action plan that consists of the elements listed in template below.
- Establish benchmarks to monitor and assess progress at regular intervals.

Strategy/Activity	Organization	Resources	Timetable	Responsible Parties

# Conclusion

If you have reached this point in the guide, congratulations!! Your organization is well on its way to exploring the benefits of cultural and linguistic competence organizational self-assessment. The energy and drive to continue this momentum will require focused leadership, partnerships, and dedicated resources. As stated previously, the process of organizational self-assessment is not a one-time occurrence. You will be able to use this process, on a regular basis, to both gauge and guide your efforts to incorporate cultural and linguistic competency within all aspects of your organization.

# References

Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). *Towards a culturally competent system of care: A monograph on effective services for minority children who are severely emotionally disturbed* (Vol. 1). Washington, DC: Georgetown University Child Development Center.

Goode, T., Brown, M., Mason, J., & Sockalingam, S. (2006). *A guide for using the cultural and linguistic competence policy assessment instrument*. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. Retrieved May 11, 2010, from <http://www.clcpa.info>

Goode, T., Jones, W., & Mason, J. (2002). *A guide to planning and implementing cultural competence organizational self-assessment*. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child Development. Retrieved May 11, 2010, from <http://www11.georgetown.edu/research/gucchd/nccc/documents/ncccorgselfassess.pdf>

Goode, T. D. (2010). *A guide for using the cultural and linguistic competence family organizational assessment instrument*. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. Retrieved September 12, 2010, from <http://www.gucchdgeorgetown.net/nccc/clcfoa>

The Institute of Cultural Affairs. (2000). *ToP® group facilitation methods: Action planning*. Phoenix, AZ: Author.

Wenger, A. F. Z. (1993). The cultural meaning of symptoms. *Holistic Nursing Practice*, 7(2), 22.

# APPENDIX 1

## Definitions and Key Concepts

### **Cultural Competence**

The NCCC embraces a conceptual framework and model of achieving cultural competence adopted from the Cross et al. definition. Cultural competence requires that organizations:

- have a defined set of values and principles, and demonstrate behaviors, attitudes, policies, and structures that enable them to work effectively cross-culturally.
- have the capacity to (1) value diversity, (2) conduct self-assessment, (3) manage the dynamics of difference, (4) acquire and institutionalize cultural knowledge, and (5) adapt to the diversity and cultural contexts of the individuals, families, and communities they serve.
- incorporate the above in all aspects of policy making, administration, practice, service delivery and systematically involve consumers, families, and communities.<sup>1</sup>

Cultural competence is a developmental process that evolves over an extended period. Both individuals and organizations are at various levels of awareness, knowledge, and skills along the cultural competence continuum.

### **Linguistic Competence**

Definitions of linguistic competence vary considerably. Such definitions have evolved from diverse perspectives, interests, and needs and are incorporated into state legislation, federal statutes and programs, private sector organizations, and academic settings. The following definition, developed by the NCCC, provides a foundation for determining linguistic competence in health care, mental health, and other human service delivery systems. It encompasses a broad spectrum of constituency groups that could require language assistance or other supports from an organization, agency, or provider.

Linguistic competence is the capacity of an organization and its personnel to communicate effectively, and convey information in a manner that is easily understood by diverse groups including persons of limited English proficiency, those who have low literacy skills or are not literate, individuals experiencing disabilities, and those who are deaf or hard of hearing. Linguistic competence requires organizational and provider capacity to respond effectively to the health and mental health literacy needs of populations served. The organization must have policies, structures, practices, procedures, and dedicated resources to support this capacity. These requirements may include, but are not limited to:

- bilingual/bicultural or multilingual/multicultural staff;
- cross-cultural communication approaches;
- cultural brokers;
- foreign language interpretation services including distance technologies;
- sign language interpretation services;

- multilingual telecommunication systems;
- videoconferencing and telehealth technologies;
- TTY and other assistive technology devices;
- computer assisted real time translation (CART) or viable real time transcriptions (VRT);
- print materials in easy to read, low literacy, picture and symbol formats;
- materials in alternative formats (e.g., audiotape, Braille, enlarged print);
- varied approaches to share information with individuals who experience cognitive disabilities;
- materials developed and tested for specific cultural, ethnic, and linguistic groups;
- translation services including those of:
  - legally binding documents (e.g., consent forms, confidentiality and patient rights statements, release of information, applications)
  - signage
  - health education materials
  - public awareness materials and campaigns; and
  - ethnic media in languages other than English (e.g., television, radio, Internet, newspapers, periodicals).<sup>2</sup>

### **Culturally Appropriate**

Denotes an approach that considers multiple cultural factors (e.g., beliefs, values, norms, language, experiences, gender, sexual orientation, gender identity or expression, age, class, education) in the design and delivery of services, training, research, collaboration/partnerships, and community engagement.<sup>3</sup>

### **Cultural Brokering**

Is the act of bridging, linking, or mediating between groups or persons of different cultural backgrounds for the purpose of reducing conflict or producing change. Retrieved September 10, 2010, from <http://www11.georgetown.edu/research/gucchd/nccc/resources/brokering.html>

### **Cultural Brokers**

A go-between, one who advocates on behalf of another individual or group. Retrieved September 14, 2010, from <http://www11.georgetown.edu/research/gucchd/nccc/resources/brokering.html>

### **Culture**

There are many definitions of culture. For the purposes of the CLCADO instrument and guide, culture is defined as a system of collectively held values, beliefs, and practices of a group which guides thinking and actions in patterned ways.<sup>4</sup>

### **Disability**

New definitions of disability are emerging that are intended to “create a society in which all people are valued and included.” Retrieved September 14, 2010, from <http://www.disabilityisnatural.com>. For example, NIDRR, National Center for Medical Rehabilitation Research’s definition is: “Disability arises at the interface between a person’s functional abilities and the environment’s accessibility.” The Web site also has information on disability etiquette and tips on communication with individuals experiencing disabilities. One of the best take-home tips is, “When you see, meet, or think about a person experiencing a disability, presume competence.” Retrieved September 14, 2010, from <http://www.disabilityisnatural.com>

## **Disparity**

For the purposes of the CLCADO, disparity is defined as inequality of outcome or condition between cultural groups or differences in outcomes or conditions between cultural groups that are not predictable based on the number of group members present in the general population. Retrieved August 23, 2010, from [http://calswec.berkeley.edu/CalSWEC/05\\_AAF\\_Glossary.doc](http://calswec.berkeley.edu/CalSWEC/05_AAF_Glossary.doc)

## **Disproportionality**

Disproportionality refers to the underrepresentation or overrepresentation of a particular group in a program or system. Disproportionality is often defined in terms of racial or ethnic backgrounds, but population categories of interest in determining whether disproportionality exists can also include socioeconomic status, national origin, English proficiency, gender, and sexual orientation.<sup>5</sup>

Disproportionality has been documented for many decades in systems such as special education, juvenile justice, and criminal justice. For example, researchers have found that historically, a student's race and ethnicity can significantly influence the probability of misidentification, misclassification, or inappropriate placement in special education.

## **Equity**

For the purposes of this instrument, equity is defined as the equal opportunity to be healthy for all population groups. Equity is the absence of socially unjust or unfair disparities in access to services, quality of services, and health and mental health outcomes.<sup>6</sup>

## **Ethnicity**

How one sees oneself and how one is “‘seen by others as part of a group on the basis of presumed ancestry and sharing a common destiny....’ (Zenner, 1996, page 393). Common threads that may tie one to an ethnic group include skin color, religion, language, customs, ancestry, and occupational or regional features.”<sup>7</sup> In addition, persons belonging to the same ethnic group share a unique history different from that of other ethnic groups. Usually a combination of these features identifies an ethnic group. For example, physical appearance alone does not consistently identify one as belonging to a particular ethnic group.

## **Health Disparity**

A health disparity is a particular type of health difference that is closely linked with social or economic disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic status, gender, mental health, cognitive, sensory or physical disability, sexual orientation, geographic location, or other characteristics historically linked to discrimination or exclusion.<sup>8</sup>

## **Institutional Review Board**

An Institutional Review Board (IRB) is an entity established by organizations that conduct research. It has the authority and responsibility to protect the welfare and rights of all people who are involved in the conduct of research. IRBs perform a comprehensive review of all research plans that involve human subjects. They ensure the ethics of studies and their scientific efficacy. IRB members may include, but are not limited to, researchers, educators, scientists, community members, clergy, consumers, and advocates. Those institutions funded by the federal government and which conduct research must have an IRB.



## Policy

Policy is defined, for the purposes of this instrument, as a high-level overall plan embracing the philosophy, general goals, and acceptable procedures within an organization or governing body.<sup>9</sup>

## Race

There is an array of different beliefs about the definition of race and what race means within social, political, and biological contexts. The following definitions represent these perspectives:

- Race is a social construct used to separate the world's peoples. There is only one race, the human race, comprising individuals with characteristics that are more or less similar to others.<sup>10</sup>
- Evidence from the Human Genome Project indicates that the genetic code for all human beings is 99.9% identical; there are more differences within groups (or races) than across groups.
- The Institute of Medicine (IOM) states that in all instances race is a social and cultural construct. Specifically a "construct of human variability based on perceived differences in biology, physical appearance, and behavior."<sup>11</sup> The IOM states that the traditional conception of race rests on the false premise that natural distinctions grounded in significant biological and behavioral differences can be drawn between groups.<sup>12</sup>
- A tribe, people, or nation belonging to the same stock; a division of humankind possessing traits that are transmissible by descent and sufficient to characterize it as a distinctive human type.

## Resiliency

For the purposes of the CLCADO instrument and guide, definitions of resiliency are the ability to:

- recover readily from illness, depression, or adversity;<sup>13</sup> and
- recover from or adjust easily to misfortune, change, or stress.<sup>14</sup>

## CITATIONS FOR DEFINITIONS AND KEY CONCEPTS

<sup>1</sup>Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). *Towards a culturally competent system of care: A monograph on effective services for minority children who are severely emotionally disturbed* (Vol. 1). Washington, DC: Georgetown University Child Development Center.

<sup>2</sup>Goode, T. D., & Jones, W. A. (2006). Definition of linguistic competence. National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

<sup>3</sup>Goode, T. D., & Jones, W. (2007). *Planning and implementing culturally and linguistically competent primary health care: A guide for health ministries*. Washington, DC: Pan American Health Organization.

<sup>4</sup>Wenger, A. F. Z. (1993). The cultural meaning of symptoms. *Holistic Nursing Practice*, 7(2), 22-35.

<sup>5</sup>Elementary & Middle Schools Technical Assistance Center. (n.d.). Disproportionality. Retrieved August 23, 2010, from <http://www.emstac.org/registered/topics/disproportionality/faqs.htm>

<sup>6</sup>Byrd, M., & Clayton, L. (2003). Racial and ethnic disparities in health care: A background and history. In B. D. Smedley, A. Stith, & A. Nelson (Eds.), *Unequal treatment: Confronting racial and ethnic disparities in health care*. Washington, DC: Institute of Medicine, National Academies Press.

<sup>7</sup>Haynes, M. A., & Smedley, B. D. (Eds.). (1999). *The unequal burden of cancer: An assessment of NIH research and programs for ethnic minorities and the medically underserved*. Washington, DC: National Academy Press.

<sup>8</sup>Haynes, M. A., & Smedley, B. D. (Eds.). (1999). *The unequal burden of cancer: An assessment of NIH research and programs for ethnic minorities and the medically underserved*. Washington, DC: National Academy Press.

<sup>9</sup>Merriam-Webster Online Dictionary. Definition of policy. Retrieved May 17, 2010, from <http://www.merriam-webster.com/dictionary/Policy>

<sup>10</sup>Haynes, M. A., & Smedley, B. D. (Eds.). (1999). The burden of cancer among ethnic minorities and medically underserved populations, in *The unequal burden of cancer: An assessment of NIH research and programs for ethnic minorities and the medically underserved*. Washington, DC: National Academy Press.

<sup>11</sup>Haynes, M. A., & Smedley, B. D. (Eds.). (1999). The burden of cancer among ethnic minorities and medically underserved populations, in *The unequal burden of cancer: An assessment of NIH research and programs for ethnic minorities and the medically underserved*. Washington, DC: National Academy Press.

<sup>12</sup>Haynes, M. A., & Smedley, B. D. (Eds.). (1999). *The unequal burden of cancer: An assessment of NIH research and programs for ethnic minorities and the medically underserved*. Washington, DC: National Academy Press.

<sup>13</sup>Online Dictionary Reference. Definition of resilience. Retrieved May 17, 2010, from <http://dictionary.reference.com/browse/resilience>

<sup>14</sup>Merriam-Webster Online Dictionary. Definition of resilience. Retrieved May 17, 2010, from <http://www.merriam-webster.com/dictionary/resilience>

## APPENDIX 2

# Suggested Structured Interview Questions

Your disability organization may choose to augment data collected from the CLCADO by conducting structured interviews with board members, staff, faculty, individuals who experience disabilities and their families, fellows/interns, volunteers, community partners, and key allies. The following questions are offered for your consideration, use, and/or adaptation.

- How well known is our organization:
  - In your community?
  - In the culturally diverse communities that you serve or represent?
  - Within your constituency groups?
- In which ways do you think our organization demonstrates that it values diversity?
- What do you believe are our organization's greatest strengths in addressing the needs, preferences, and concerns of individuals who experience disabilities and their families from culturally and linguistically diverse groups? What do you see as areas for improvement?
- Our organization is engaged in a process to enhance its cultural and linguistic competence. What approaches do you recommend to help us in our journey?

## Suggestions for Conducting Focus Groups

In addition to the CLCADO, your organization may decide to conduct focus groups with individuals who experience disabilities and their families and other constituency groups to gather additional data. The following tips are provided to assist with the process.

<b>Tips for Conducting Focus Groups</b>	
<b>Selecting a Facilitator</b>	<ul style="list-style-type: none"> <li>• Choose a facilitator who is knowledgeable in conducting focus group processes and who is not a member of your organization’s board, staff, faculty, or pool of volunteers.</li> <li>• Decide on goals and outcomes and desired approaches to reach them.</li> </ul>
<b>Recruitment</b>	<ul style="list-style-type: none"> <li>• Include a diverse pool of participants that reflect the demographics of the community, service area, state, or region.</li> <li>• Include representatives of demographic groups new to the geographic area or groups that your organization has not been effective in engaging.</li> </ul>
<b>Compensation for Participants</b>	<ul style="list-style-type: none"> <li>• Decide whether or not your organizations will offer compensation for participation. If so, find out about and adhere to local or cultural norms for compensation.</li> <li>• Be aware that some individuals may have cultural beliefs that equate the acceptance of monetary compensation as a pay off or bribe for making positive statements. Use cultural brokers and key informants to assist you in obtaining this kind of information.</li> <li>• Some participants may require reimbursement for expenses incurred to participate in the focus group (transportation, child care, respite, etc.).</li> </ul>
<b>Language Access Services and Accommodations</b>	<ul style="list-style-type: none"> <li>• Some individuals may need or prefer foreign language interpretation and translation services in order to participate. Determine participants’ level of need in advance, and secure the appropriate language access services.</li> <li>• Ensure that accommodations are made for focus group members who have disabilities and those who are deaf and hard of hearing (e.g., Braille, large print, sign language, computer assisted real time translation—CART).</li> </ul>
<b>Getting Started</b>	<ul style="list-style-type: none"> <li>• While representatives from the organization may give the welcome (initial greetings and acknowledgments), the focus group should not include staff, faculty or board members. This environment encourages and allows participants to share opinions and ideas freely and candidly.</li> <li>• The facilitator should:             <ul style="list-style-type: none"> <li>– welcome participants and conduct introductions;</li> <li>– explain what a focus group is (i.e., similar to an opinion survey, a process that uses general, broad questions and emphasizes that there are no right or wrong, or good or bad, answers); and</li> <li>– provide background information and purpose of the group discussion.</li> </ul> </li> <li>• Participants should receive assurances that their comments will be confidential or that no one will trace their comments back to them. However, some participants may want comments attributed to them, and this request should be honored.</li> <li>• All participants should sign a consent form that is available in the language of their preference. Consent should be explained orally if participants have difficulty or are unable to read in either English or their language of origin.</li> </ul>

### Tips for Conducting Focus Groups Continued

<b>Logistics</b>	<ul style="list-style-type: none"> <li>• It may be necessary to convene multiple focus groups. Keep the groups small with 8-12 participants.</li> <li>• Convene focus groups at times and in settings that are convenient for participants.</li> <li>• For a variety of reasons, some organizations opt to convene focus groups via teleconference. This option will require a facilitator who is comfortable with this format; a specific protocol for teleconferences; and other logistics, such as toll-free telephone service and audio-recording. Careful consideration should be given because this format may not be the best option for some participants.</li> <li>• Offer refreshments or meals depending upon what time of the day the focus group is conducted.</li> </ul>
<b>Other Considerations</b>	<ul style="list-style-type: none"> <li>• Ensure that participants understand that the focus group is not a forum to debate ideas and that a diversity of ideas is highly valued and important to the data gathering process.</li> <li>• Pay particular attention to tension that may arise based on race, ethnicity, culture, language, immigration status, sexual orientation, gender identity or expression, class, or other factors.</li> <li>• Approval by an Institutional Review Board may be required to conduct focus groups depending on organizational policy.</li> </ul>

### Resources for Conducting Focus Groups

#### The Community Tool Box—Conducting Focus Groups

[http://ctb.ku.edu/tools/en/section\\_1018.htm](http://ctb.ku.edu/tools/en/section_1018.htm)

#### Conducting Focus Groups

<http://www.cse.lehigh.edu/~glennb/mm/FocusGroups.htm>

