Embracing Diversity in Person-Centered Practices
Reminders

1. Participants will be muted during this webinar. You can use the chat feature in Zoom to post questions and communicate with the hosts (chat “To Everyone” for all to see).

2. Toward the end of the webinar, our speakers will have an opportunity to respond to questions that have been entered into chat.

3. The webinar is being live captioned in English.

4. Attendees may receive 1.5 Continuing Education Credits. To confirm attendance, please login to the webinar via your Zoom account.

5. The live webinar includes polls and evaluation questions. Please be prepared to interact during these times.

6. This webinar is being recorded. The recorded webinar will be available at www.hsri.org/nd-pcp within two weeks, along with a PDF version of the slides, and questions and responses.
Agenda

2:00 – 2:10  Welcome
             Teresa Larsen, Protection and Advocacy

2:10 – 2:40  Presentation + Panel of Individuals with Shared Experiences
             Tawara Goode, M. Angel Moniz, Ganesh Suryawanshi, Leslee Williams

2:40 – 2:45  Break

2:45 – 2:50  Welcome Back

2:50 – 3:15  Presentation + Panel of Individuals with Shared Experiences
             Tawara Goode, M. Angel Moniz, Ganesh Suryawanshi, Leslee Williams

3:15 – 3:25  Questions + Answers

3:25 – 3:30  Closing + Next Steps
Statewide + Systemwide Initiative

Person-Centered Practices (PCP) assist individuals in having control over the life they desire, and fully engaging in their communities.

North Dakota is developing a strong and consistent statewide vision and universal understanding of person-centeredness across all North Dakota Department of Human Services entities and community partners.
How to Implement

- Bring diverse voices to the table
- Support individuals participating in services and statewide system change efforts
- Transform policies to reflect statewide person-centered values and culture
- Ensure communication is accessible and relatable
Materials

www.hsri.org/nd-pcp
A public website with updates on North Dakota’s PCP system change initiative.

Asset Map
A working tool to:
• document existing stakeholder engagement opportunities
• encourage systematic and strategic thinking about next steps
• save time and resources
• reference when brainstorming potential groups to engage
• expand and improve on current systems and processes

Technical Assistance Plan
NCAPPS, HSRI, a cross-division workgroup and subject-matter experts are managing North Dakota’s plan and related activities to ensure system change.

Person-Centered Practices Summit
Webinar recordings and PDF of presentation slides from the three-part webinar series.

How to Engage Individuals Who Receive Services
North Dakota’s Guide of Best Practices outlines proven strategies on how to consistently involve individuals in workgroups and teams, so they are at the table when decisions are being made.
What We’re Continuing to Work On

Technical Assistance Goals

1. Participant Engagement and Communications
   • Develop guidance document on how to use materials
   • Create communications plan to ensure ongoing awareness and promotion of resources
   • Implement engagement sustainability plan to ensure ongoing participant engagement

2. Systemwide Assessment
   • Conduct the Self-Assessment process with remaining divisions

3. Measuring Service User Experience
   • Convene service user and family groups to understand outcomes of importance and how to best measure their experience of PCP
   • Develop recommended criteria for measuring of PCP

4. Establishing Train-the-Trainer Program
   • Develop training methods and materials, with the help of service users and family groups
   • Establish and implement quality monitoring, improvement and sustainability plan
Recap of Second Webinar

Putting People at the Center of the Practices

Jennifer Turner

• Described how Charting the LifeCourse was created and shared tools to help individuals and families of all abilities and all ages:
  • develop a vision for a good life
  • think about what they need to know and do
  • identify how to find or develop supports
  • discover what it takes to live the lives they want to live
Tawara D. Goode  
cultural@georgetown.edu / http://nccc.georgetown.edu

- Director, Georgetown University National Center for Cultural Competence (NCCC)
- Director, Georgetown University Center for Excellence in Developmental Disabilities, Georgetown University Center for Child & Human Development
- Assistant Professor, Department of Pediatrics, Georgetown University Medical Center

- Responsible for short-term and ongoing programs for individuals at-risk for and with developmental and other disabilities and their families.
- Duties include program development, administration, and teaching within the University and community settings.
- Focuses on national level efforts to advance and sustain cultural and linguistic competence within an array of settings including but not limited to institutions of higher education, health, mental health, and other human service systems.
- As director of the NCCC, Professor Goode carries out the mission to increase the capacity of health care and mental health care programs to design, implement, and evaluate culturally and linguistically competent service delivery systems to address growing diversity, persistent disparities, and to promote health and mental health equity.
- Publications include peer reviewed articles, book chapters, policy papers, guides and instruments that support cultural and linguistic competence in a variety of human service and academic settings.
Panelists Sharing Lived Experiences

M. Angel Moniz (Butterfly Woman)
Nueta, Hidatsa, and Sahnish of the MHA Nation

Ganesh Suryawanshi
Parent

Leslee Williams
Founder, There is a Solution, Inc.
The Role of Cultural and Linguistic Competence in Person-Centered Practices and Systems

Tawara D. Goode
Georgetown University National Center for Cultural Competence
Georgetown University Center for Excellence in Developmental Disabilities
Center for Child and Human Development
Georgetown University Medical Center

November 18, 2020
OBJECTIVES

Participants will:
1. Define culture, multiple cultural identities, and intersectionality.
2. Describe a framework for cultural competence.
3. Define linguistic competence and differentiate it from language access and implementation.
4. Listen to the lived experiences of persons from the perspectives of aging, mental health, and disability.
5. Examine these concepts and practices within the contexts of person-centered thinking, practices, and systems.
We can’t really talk about cultural competence and linguistic competence without first having a solid understanding of ...
Enter one thing, *just one*, about your culture(s) to share with webinar participants.
Culture is the learned and shared knowledge that specific groups use to generate their behavior and interpret their experience of the world. It includes but is not limited to:

- communication
- rituals
- courtesies
- languages
- relationships
- thought
- ceremonies
- beliefs
- expected behaviors
- values
- practices
- roles
- manners of interacting
- customs

Culture applies to racial, ethnic, religious, political, professional, and other social groups. It is transmitted through social and institutional traditions and norms to succeeding generations. Culture is a paradox, while many aspects remain the same, it is also dynamic, constantly changing.

Slide Source: © 2020 - Georgetown University National Center for Cultural Competence
CULTURE IS …

Comprised of beliefs about reality, how people should interact with each other, what they know about the world, and how they should respond to the social and material environments in which they find themselves.

Reflected in religion, morals, customs, politics, technologies, and survival strategies of a given group. It affects how groups work, parent, love, marry, and understand health, mental health, wellness, illness, disability, and end of life.

Culture

Culture is akin to being the person observed through a one-way mirror; everything we see is from our own perspective.

It is only when we join the observed on the other side that it is possible to see ourselves and others clearly – but getting to the other side of the glass presents many challenges.

(Lynch & Hanson 1992 Developing Cross Cultural Competence)
An Iceberg Concept of Culture

dress • age
gender • language • race or ethnicity
• physical characteristics •

• eye behavior •
• facial expressions •
body language • sense of self •

• notions of modesty • concept of cleanliness
• emotional response patterns •
• rules for social interaction •
• child rearing practices •
• decision-making processes •
• approaches to problem solving •

• concept of justice • value individual vs. group •
• perceptions of & beliefs about of mental health, health, illness, disability •

• patterns of superior and subordinate roles in relation to status by age, gender, class • sexual orientation • gender identity & expression

and much more…

Adapted by the NCCC

Slide Source: © 2020 - Georgetown University National Center for Cultural Competence
<table>
<thead>
<tr>
<th>A</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td>Disability (congenital)</td>
</tr>
<tr>
<td>D</td>
<td>Disability (acquired)</td>
</tr>
<tr>
<td>R</td>
<td>Religion (spirituality or no affiliation)</td>
</tr>
<tr>
<td>E</td>
<td>Ethnicity (or race)</td>
</tr>
<tr>
<td>S</td>
<td>Socio-economic status/class</td>
</tr>
<tr>
<td>S</td>
<td>Sexual orientation</td>
</tr>
<tr>
<td>I</td>
<td>Indigenous heritage</td>
</tr>
<tr>
<td>N</td>
<td>National origin</td>
</tr>
<tr>
<td>G</td>
<td>Gender (gender identity &amp; expression)</td>
</tr>
</tbody>
</table>

**THE HAYS ADDRESSING Model**

Addressing cultural complexities in practice: A framework for clinicians and counselors

&

Addressing the complexities of culture and gender in counseling

In your role or capacity, which elements of **ADDRESSING** do you **consistently** consider as diversity factors for the persons and families to whom you provides supports and services? Which do you tend to overlook?

- Age
- Disability (congenital)
- Disability (acquired)
- Religion (or spirituality)
- Ethnicity (or race)
- Socio-economic Status/Class
- Sexual Orientation
- Indigenous Heritage
- National Origin
- Gender (gender identity or expression)


The extant literature indicates that we as human beings have multiple cultural identities that can be grouped as follows.

- **Categorization** – people identify with one of their cultural groups over others

- **Compartmentalization** – individuals maintain multiple, separate identities within themselves

- **Integration** – people link their multiple cultural identities

**Sources:**


Kimberlé Crenshaw, a lawyer and civil rights advocate, introduced us to the term **intersectionality** in 1991.

She wrote about how a person who because of their membership in multiple social groups may experience discrimination, oppression, and marginalization. Her work focused on Black women.

Since 1991, the term intersectionality is used in many ways, by many people, including those in health and human services.

Sometimes those who use the term intersectionality confuse it with multiple cultural identities and they leave out the important issues of discrimination, marginalization, and oppression.

Polling Question 3

How much attention do we pay to these concepts in our work in mental health, aging, and disability?

Multiple cultural identities
☐ Always  ☐ Very Often  ☐ Sometimes  ☐ Rarely  ☐ Never

Intersectionality
☐ Always  ☐ Very Often  ☐ Sometimes  ☐ Rarely  ☐ Never
Let’s hear from our panelists.

Share with us your views on culture or cultural identities.
What do these concepts mean to you?
What is cultural diversity?
The term *cultural diversity* is used to describe differences in ethnic or racial classification & self-identification, tribal or clan affiliation, nationality, language, age, gender, sexual orientation, gender identity or expression, socioeconomic status, education, religion, spirituality, physical and intellectual abilities, personal appearance, and other factors that distinguish one group or individual from another.
What does cultural and linguistic diversity look like in

North Dakota?
# Top 10 Countries of Birth of Lawful Permanent Residents in North Dakota in 2019

<table>
<thead>
<tr>
<th>Country</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Philippines</td>
<td>147</td>
</tr>
<tr>
<td>Liberia</td>
<td>130</td>
</tr>
<tr>
<td>Nepal</td>
<td>93</td>
</tr>
<tr>
<td>Mexico</td>
<td>73</td>
</tr>
<tr>
<td>Bhutan</td>
<td>70</td>
</tr>
<tr>
<td>Kenya</td>
<td>66</td>
</tr>
<tr>
<td>Somalia</td>
<td>56</td>
</tr>
<tr>
<td>Ghana &amp; Nigeria</td>
<td>53</td>
</tr>
<tr>
<td>Canada</td>
<td>49</td>
</tr>
<tr>
<td>Vietnam</td>
<td>47</td>
</tr>
</tbody>
</table>

Total: 1,494

Data Source: U.S. Department of Homeland Security, Yearbook of Immigration Statistics: 2018 Legal Permanent Residents, Supplemental Table 1 – Persons Obtaining Legal Permanent Resident Status by State or Territory of Residence and Region or Country of Birth: Fiscal Year 2019
ACS 2019 North Dakota Demographic Estimates

Total Population = 762,062

One Race or Latino or Hispanic and Race

<table>
<thead>
<tr>
<th>RACE</th>
<th>NUMBER</th>
<th>% of POPULATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>653,910</td>
<td>85.8</td>
</tr>
<tr>
<td>Black or African American</td>
<td>22,256</td>
<td>2.9</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>40,970</td>
<td>5.4</td>
</tr>
<tr>
<td>Asian</td>
<td>10,669</td>
<td>1.4</td>
</tr>
<tr>
<td>Native Hawaiian &amp; Other Pacific Islander</td>
<td>2,792</td>
<td>0.4</td>
</tr>
<tr>
<td>Some Other Race</td>
<td>6,320</td>
<td>0.8</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>25,145</td>
<td>3.3</td>
</tr>
<tr>
<td><strong>HISPANIC OR LATINO AND RACE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic or Latino of any Race</td>
<td>30,486</td>
<td>4.0</td>
</tr>
</tbody>
</table>

Data Source: Source: U.S. Census Bureau, 2019 American Community Survey (ACS), Demographic & Housing Estimates, Year 1 Estimates Table DP05

Slide Source:© 2020 - Georgetown University National Center for Cultural Competence
## ACS 2019 North Dakota Demographic Estimates

### ONE RACE – AMERICAN INDIAN OR ALASKA NATIVE

Total Population = 40,970

<table>
<thead>
<tr>
<th>GROUPING</th>
<th>NUMBER</th>
<th>% OF POPULATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cherokee tribal grouping</td>
<td>575</td>
<td>0.1</td>
</tr>
<tr>
<td>Chippewa tribal grouping</td>
<td>15,955</td>
<td>2.1</td>
</tr>
<tr>
<td>Navajo tribal grouping</td>
<td>140</td>
<td>0.0</td>
</tr>
<tr>
<td>Sioux tribal grouping</td>
<td>12,723</td>
<td>1.7</td>
</tr>
</tbody>
</table>

Data Source: Source: U.S. Census Bureau, 2019 American Community Survey (ACS), Demographic & Housing Estimates, Table DP05
North Dakota Tribal Nations

- Turtle Mountain Band of Chippewa
- Standing Rock Sioux
- Spirit Lake Nation
- Sisseton-Wahpeton Oyate Nation
- Mandan, Hidatsa & Arikara Nation

Data Source: https://www.nd.gov/government/tribal-governments

Slide Source: © 2020 - Georgetown University National Center for Cultural Competence
## Disability defined as:
- Hearing difficulty
- Vision difficulty
- Cognitive difficulty
- Ambulatory difficulty
- Self-care difficulty
- Living Independent difficulty

## Varies by Age Grouping

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 5 years</td>
<td>0.4%</td>
</tr>
<tr>
<td>5-17 years</td>
<td>4.2%</td>
</tr>
<tr>
<td>18-34 years</td>
<td>6.1%</td>
</tr>
<tr>
<td>35-64 years</td>
<td>11.4%</td>
</tr>
<tr>
<td>65-74 years</td>
<td>25.6%</td>
</tr>
<tr>
<td>&gt; 75 years</td>
<td>43.9%</td>
</tr>
</tbody>
</table>

## Total North Dakota Population = 744,172

Estimated Population with a Disability = 84,947 (11.4%)  
[Margin of error = +/- 4,552]

### RACE

<table>
<thead>
<tr>
<th>Race</th>
<th>Number</th>
<th>Percent of Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>72,049</td>
<td>11.3%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>1,699</td>
<td>8.0%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>6,580</td>
<td>16.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>1,029</td>
<td>10.4%</td>
</tr>
<tr>
<td>Native Hawaiian &amp; Other Pacific Islander</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>Some Other Race</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>2,919</td>
<td>11.8%</td>
</tr>
<tr>
<td><strong>HISPANIC OR LATINO AND RACE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic or Latino of any Race</td>
<td>3,500</td>
<td>11.9%</td>
</tr>
</tbody>
</table>

Data Source: U.S. Census Bureau, 2019 American Community Survey Disability Characteristics, Table S1810

Slide Source: © 2020 - Georgetown University National Center for Cultural Competence
Disability defined as:
- Hearing difficulty
- Vision difficulty
- Cognitive difficulty
- Ambulatory difficulty
- Self-care difficulty
- Living Independent difficulty

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>ESTIMATED NUMBER LIVING BELOW POVERTY LEVEL</th>
</tr>
</thead>
<tbody>
<tr>
<td>All age groups</td>
<td>14,943</td>
</tr>
<tr>
<td>&lt; 5 years</td>
<td>88</td>
</tr>
<tr>
<td>5 – 17 years</td>
<td>1,256</td>
</tr>
<tr>
<td>18 – 34 years</td>
<td>3,305</td>
</tr>
<tr>
<td>35 – 64 years</td>
<td>6,710</td>
</tr>
<tr>
<td>65 – 74 years</td>
<td>1,900</td>
</tr>
<tr>
<td>&gt; 75 years</td>
<td>1,684</td>
</tr>
</tbody>
</table>
### Languages Spoken at Home in North Dakota in 2019

#### Estimated Total Population 5 years and over: 711,495

<table>
<thead>
<tr>
<th>Language Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speak only English</td>
<td>94.9%</td>
</tr>
<tr>
<td>Speak a language other than English</td>
<td>5.1%</td>
</tr>
<tr>
<td>Speak Spanish</td>
<td>11,134 (1.6%)</td>
</tr>
<tr>
<td>Speak Indo European languages</td>
<td>11,728 (1.6%)</td>
</tr>
<tr>
<td>Speak Asian and Pacific Island languages</td>
<td>5,864 (0.8%)</td>
</tr>
<tr>
<td>Other Languages</td>
<td>7,534 (1.1%)</td>
</tr>
</tbody>
</table>

**Speak Spanish**
- [French (Patois, Cajun), French Creole, Italian, Portuguese, Portuguese Creole, German, Yiddish, Other West Germanic languages, Scandinavian languages, Greek, Russian, Polish, Serbo-Croatian, Other Slavic languages, Armenian, Persian, Gujarathi, Hindi, Urdu, Other Indic languages]

**Speak Asian and Pacific Island languages**
- [Chinese, Japanese, Korean, Mon-Khmer, Cambodian, Miao, Hmong, Thai, Laotian, Vietnamese, Tagalog, other Pacific Island languages]

**Other Languages**
- [Navajo, Other Native American languages, Hungarian, Arabic, Hebrew, African languages, other unspecified languages]
Tribal languages Spoken in North Dakota

Selected Tribal Languages

- Lakota
- Objibwe – Chippewa
- Winnebago
- Dakota
- Nakota
Limited English Speaking Households

Limited English Speaking Households formerly (linguistic isolation) refers to households in which no member 14 years old and over: (1) speaks only English or (2) speaks a non-English language and speaks English “very well.”

Limited English Speaking Households in North Dakota in 2019

<table>
<thead>
<tr>
<th>Households speaking --</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>All households</td>
<td>1.1%</td>
</tr>
<tr>
<td>Spanish</td>
<td>14.7%</td>
</tr>
<tr>
<td>Other Indo-European languages</td>
<td>22.3%</td>
</tr>
<tr>
<td>Asian and Pacific Island languages</td>
<td>6.3%</td>
</tr>
<tr>
<td>Other languages</td>
<td>17.4%</td>
</tr>
</tbody>
</table>

Data Source: U.S. Census Bureau, American FactFinder, 2019 American Community Survey- 1 Year Estimates, Table S1602
Can you share with the audience your experiences with cultural beliefs, practices, or barriers related to disability, mental health, or aging supports and services?
Definitions and Conceptual Frameworks
Cultural Competence

Definition

for what is thought
relation or from any
point of view.

signification of a word
essential to the con
an explanation of
for what is thought
Cultural competence requires that organizations have a clearly defined, congruent set of values and principles, and demonstrate behaviors, attitudes, policies, structures, and practices that enable them to work effectively cross-culturally.

(adapted from Cross, Bazron, Dennis & Isaacs, 1989.)
Five Elements of Cultural Competence

INDIVIDUAL LEVEL

1. acknowledge cultural differences
2. understand your own culture
3. engage in self-assessment
4. acquire cultural knowledge & skills
5. view behavior within a cultural context

(Cross, Bazron, Dennis and Isaacs, 1989)

Source: © 2020 - Georgetown University National Center for Cultural Competence
Five Elements of Cultural Competence

ORGANIZATIONAL LEVEL

1. • value diversity

2. • conduct self-assessment

3. • manage the dynamics of difference

4. • embed/institutionalize cultural knowledge

5. • adapt to diversity (values, polices, structures & services)

(Cross, Bazron, Dennis and Isaacs, 1989)
ESSENTIAL ELEMENTS IN A CULTURALLY COMPETENT SYSTEM

These five elements must be manifested at every level of an organization or system including:

- policy making
- administration
- practice & service delivery
- individuals & families
- community

and reflected in its attitudes, structures, policies, practices, and services.

Adapted from Cross, Bazron, Dennis, & Isaacs, 1989
Definitions and Conceptual Frameworks

Linguistic Competence
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 are not literate or have low literacy skills, individuals with disabilities, or those who are deaf or hard of hearing.

requires organizational and provider capacity to respond effectively to the health literacy and mental health literacy needs of populations served.

ensures policy, structures, practices, procedures and dedicated resources to support this capacity.
Title VI of the Civil Rights Act of 1964- Sec. 601 ensures nondiscrimination in Federally Assisted programs and states that “No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance”.

http://www.hhs.gov/ocr/civilrights/resources/laws/index.html
Who Does Title VI Protect?

EVERYONE!

Title VI states that:
“no person shall be discriminated against on the basis of race, color, or national origin.
Section 601 and 42 USC 2000d et. Seq.

- Title VI protects persons of all colors, races, and national origins.

- Title VI protects against national origin discrimination and is **not** limited to U.S. citizens.
Who is Covered Under Title VI?

Recipients of HHS assistance may include, for example:

- Hospitals, nursing homes, home health agencies, and managed care organizations
- Universities and other entities with health or social service research programs
- State, county, and local health agencies
- State Medicaid agencies
- State, county and local welfare agencies
- Programs for families, youth, and children
- Head Start programs
- Public and private contractors, subcontractors and vendors
- Physicians and other providers who receive Federal financial assistance from HHS
Linguistic Competence:
LEGAL MANDATES & GUIDANCE

Guidance to Federal Financial Assistance Recipients Regarding
Title VI Prohibition Against National Origin Discrimination
Affecting Limited English Proficient Persons

Polling Question 4

How familiar are you with the requirements of Title VI, Section 601, Civil Rights Act of 1964 to ensure language access to persons seeking or in need of mental health, aging, and disability services?

- Not at all familiar
- Slightly familiar
- Somewhat familiar
- Moderately familiar
- Extremely familiar
CLC KEY CONSIDERATIONS

CORE FUNCTIONS:
What we do

HUMAN RESOURCES & STAFF DEVELOPMENT:
Who we are

COLLABORATION & COMMUNITY ENGAGEMENT:
Who are partners are

FISCAL RESOURCES & ALLOCATION:
Where the money goes

CONTRACTS:
Whom we trust to deliver supports and services
Perspectives from our Panelists

You have heard how cultural competence and linguistic competence are defined.

How do you see them applying to you and or your family?
“Person-centered thinking is a foundational principle—requiring consistency in language, values and actions—that reveals respect, views the person and their loved ones as experts in their own lives, and equally emphasizes quality of life, wellbeing, and informed choice.

**Person-centered planning** is a methodology that identifies and addresses the preferences and interests that make up a desired life and the supports (paid and unpaid) needed to achieve it. It is directed by the person, and it is supported by others selected by the person.

**Person-centered practices** are the alignment of services and systems to ensure the person has access to the full benefits of community living and to deliver services in a way that facilitates the achievement of the person’s desired outcomes.”

Retrieved on 11/9/20 from [https://ncapps.acl.gov/about-ncapps.html](https://ncapps.acl.gov/about-ncapps.html)
Major Missing Pieces of the Puzzle

Culture

Linguistic Competence

Cultural Competence
Differing World Views

*Person-centered as a concept and practice may be viewed by some as uniquely Western because the emphasis is on the individual.*

Cultures that are individualistic tend to value and stress the needs of individuals over the needs of the group as a whole. Selected characteristics include:

- Individual rights take center stage
- Independence and autonomy are highly valued.
- People tend to be self-reliant
- Being dependent on others is frowned upon
- The rights of individuals take a higher precedence.

Collectivist cultures emphasize the needs and goals of the group as a whole over the needs and desires of each individual. Selected characteristics include:

- Social rules focus on promoting selflessness and putting the community needs above individual needs.
- People are encouraged to do what is best for society.
- Working as a group and supporting others is essential.
- Families and communities have a central role.
Differing World Views

Some individuals, families, and cultural groups that reside in the United States, territories, and tribal nations may embrace either individualism or collectivism or a combination of both characterize their values and behaviors.

- Have you or your organization/agency explored these concepts with the people to whom you provide supports and services?

- What are their implications for person-centered thinking, planning, and practice?
Person-Centered Thinking

It is not just the culture of the person receiving supports and services, it is also the culture of the person delivering services and supports.

Person Centered Planning

It is: (1) having the knowledge and willingness to embed the multiple dimensions of culture in all aspects of the planning process; and (2) revisiting and revising extant tools and approaches that do not or minimally emphasize culture.

Person-Centered Practice

It is ensuring that the values, structures, practices, attitudes, and behaviors of the organization and its staff are aligned with principles and practices of cultural and linguistic competence.
What’s Tina Got To Do With It?
It is not person-centered if culture and language are not fully embedded.
I made the statement "it is not person-centered if culture and language are not fully embedded."

What personal insights do you want to leave with the audience?
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Questions + Answers
Visit www.hsri.org/nd-pcp to view and use the materials currently available. The recording and slides from today’s webinar will be available within two weeks.

Responses from the word cloud exercise in the first webinar will be used to develop a North Dakota definition of Person-Centered Practices.

Complete the polling questions to help inform future webinars.

Advocate and incorporate person-centered thinking, planning and practice into daily practices.
Thank You