

The California Brief Multicultural Competence Scale (CBMCS) Report

February 2014



Prepared by Behavioral Health Services Quality Improvement, Performance Improvement Team

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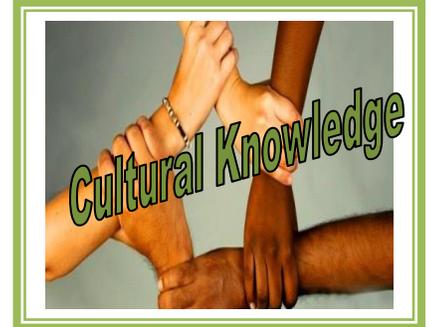
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BACKGROUND

Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among consumer providers, family member providers, and professionals that enables that system, agency or those professionals, consumers, and family members to work effectively in cross-cultural situations.

In alignment with "Live Well, San Diego!", the Health and Human Services Agency Behavioral Health Services (BHS) Division continually works toward the complete integration of mental health and alcohol and other drug services. Within this integration, BHS is working to fully incorporate the recognition and value of racial, ethnic, and cultural diversity, and sees the creation of a truly culturally competent and



trauma-informed Behavioral Health system as a developmental process. These efforts are demonstrated through BHS' commitment to cultural competence and the trauma-informed systems' efforts to continuously enhance strategies in: reducing racial, ethnic, cultural, and linguistic disparities; strengthening cultural competence evaluation and training activities; developing a multi-cultural workforce; and integrating BHS. To support the needs of our diverse populations, San Diego County Behavioral Health Services (SDCBHS) recommends that all providers be committed to prioritizing cultural competence by: incorporating cultural competence throughout the providers' mission statements, guiding principles, and policies and procedures;

developing or enhancing the Cultural Competence Plan; periodically evaluating staff and programs; and ensuring that clinical practice is based on cultural awareness, knowledge, and skills.



To assist programs with developing a plan to enhance the cultural competence of their staff and their current capability for providing culturally competent services, the SDCBHS has developed a Cultural Competence Handbook. The Handbook contains resources, tools and assessments to assist the programs with the efforts to enhance cultural competence levels among staff. The CBMCS survey is one of the tools in the Handbook and was developed in response to the request of the California Mental Health Directors Association for a standardized cultural competency assessment tool. The evidence-based, replicable 21-item scale measures individual, self-reported multi-cultural competency and training

needs of behavioral health staff in the following four areas: cultural knowledge; awareness of cultural barriers; sensitivity and responsiveness to consumers; and socio-cultural diversities. This report analyzes data from the CBMCS survey that was distributed to BHS' Children, Youth, and Families (CYF) and Adult/Older Adult (A/OA) program staff in the fall of fiscal year 2013-2014.

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KEY FINDINGS

Findings Systemwide

- ❖ While the survey results show a large number of culturally competent BHS staff, a closer look at the distribution of individual responses reveals that a large proportion of the respondents' scores fall in the middle of the possible range and is closer to the threshold between a training need and proficiency.
- ❖ Awareness of Cultural Barriers and Socio-cultural Diversities have been identified as the greatest areas of training need.
- ❖ The largest proportion of respondents who indicated need for training in cultural competence have been working in the field of behavioral health for more than five years.

CYF Programs

- ❖ 112 CYF programs, 871 staff, responded to the CBMCS survey. The response rate ranged from one to 51 respondents per program. The majority of respondents provide direct services to the clients, and the greatest proportion of all respondents has been in the behavioral health field between two and five years.
- ❖ Nearly half of respondents indicated proficiency in all four areas of cultural competence; however, if broken down to individual areas, a large number of respondents indicated a training need in all areas except Sensitivity and Responsiveness to Consumers.
- ❖ Among the respondents who indicated a training need in the cultural competence areas, Awareness of Cultural Barriers was the area with the greatest need.
- ❖ The analysis of the programs where all respondents from each program scored the same in all or individual areas indicates the greatest proficiency in Sensitivity and Responsiveness to Consumers, while the area of Socio-cultural Diversities shows the greatest need for training.

A/OA Programs

- ❖ 138 A/OA programs, 1,064 staff, responded to the CBMCS survey. The response rate ranged from one to 51 respondents per program. The majority of respondents provide direct services to the clients, and the greatest proportion of all respondents has been in the behavioral health field between two and five years.
- ❖ Nearly half of respondents indicated proficiency in all four areas of cultural competence; however, if broken down to individual areas, a large number of respondents indicated a training need in all areas except Sensitivity and Responsiveness to Consumers.
- ❖ Among the respondents who indicated a training need in the cultural competence areas, Awareness of Cultural Barriers was the area with the greatest need.
- ❖ The analysis of the programs where all respondents from each program scored the same in all or individual areas indicates the greatest proficiency in Sensitivity and Responsiveness to Consumers, while the area of Awareness of Cultural Barriers shows the greatest need for training.

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SURVEY METHOD

The areas of the CBMCS survey measure the following aspects of cultural competence:

Cultural Knowledge	Includes recognizing deficiencies in research conducted on minorities; psychosocial factors to consider when providing services to a culturally diverse consumer population; providing a culturally competent mental health assessment; diagnosis and understanding; and evaluating wellness, recovery, and resilience.
Awareness of Cultural Barriers	Includes awareness of self (cultural self-awareness, worldview, racial/ethnic identity) and awareness of others (oppression, racism, privilege, gender differences, sexual orientation).
Sensitivity & Responsiveness to Consumers	Includes acknowledgement and understanding of divergent social values; communication styles; and ability to understand consumers' experiences of racism, oppression and discrimination.
Socio-cultural Diversities	Includes knowledge of socio-cultural groups in which ethnicity may not be the major or immediate focus of professional attention (i.e., age, gender, sexual orientation, social class, physical-mental intactness, and disability status); awareness of bias, oppression and discrimination experienced by members of socio-cultural groups; and knowledge about best practices and treatment considerations for members of socio-cultural groups.

SCORING

The answers to each of the 21 survey questions were assigned a number and totaled according to the pre-determined areas of cultural competence. The scores were then analyzed based on thresholds to identify proficiency levels and training needs among the respondents.

Area of Cultural Competence	Rating Scale	Score Range	Result Thresholds
<i>Cultural Knowledge</i>	4-point Likert Scale: 1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree	5 – 20	5-11 = in need of training 12-20 = proficient
<i>Awareness of Cultural Barriers</i>		6 – 24	6-17 = in need of training 18-24 = proficient
<i>Sensitivity & Responsiveness to Consumers</i>		3 – 12	2-8 = in need of training 9-12 = proficient
<i>Socio-cultural Diversities</i>		7 – 28	7-19 = in need of training 20-28 = proficient

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GENERAL RESPONDENT INFORMATION

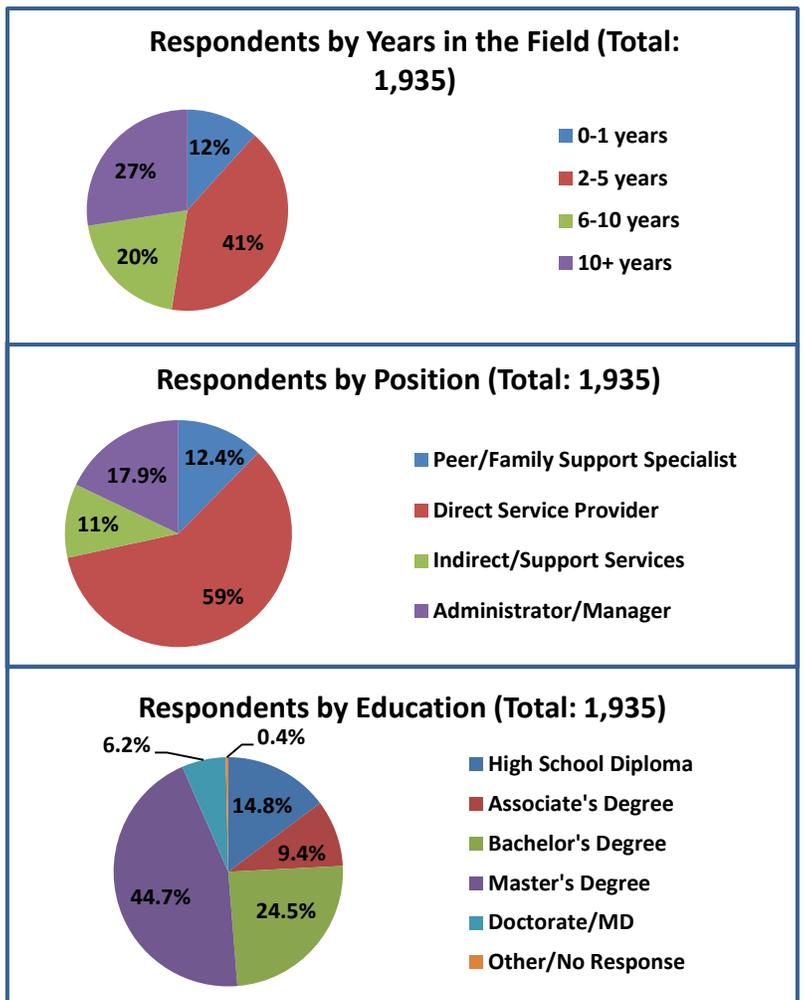
There were 1,935 surveys completed by behavioral health providers and staff from 250 programs (58 individuals did not indicate a program name).

While a large proportion of the respondents were born in the United States or Mexico, the staff indicated 62 additional countries of origin on the survey. Additionally, a total of 14 languages were indicated in the responses, with a large number of respondents indicating that they speak between two and six languages (including Spanish). The majority of the respondents (63.7 percent or 1,233) indicated that English is the only language they speak.

A large proportion of the respondents have between two and five years of experience working in the behavioral health field (790 or 40.8 percent), followed by the respondents with 10 or more years of experience (532 or 27.5 percent).

Direct service providers represent the majority of the respondents (59 percent).

Additionally, individuals with a Master's degree represent the largest proportion of respondents (44.7 percent).



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PROFICIENCY AMONG RESPONDENTS

A total of 932 respondents' scores indicate proficiency in all four areas of cultural competence. The majority of those respondents (57 percent) hold a Master's degree, followed by the respondents with a Bachelor's degree.

Nearly half of CYF program respondents and A/OA program respondents (48.6 percent and 47.8 percent, respectively) indicated proficiency in all four areas of cultural competence.

The columns to the right break down the respondents based on their proficiency in individual areas. The respondents in each category are mutually exclusive. In other words, the respondents' scores in each category are different based on whether their scores indicate proficiency in all four cultural competence areas or whether their scores indicate proficiency in a single area while indicating a need for training in other three areas.

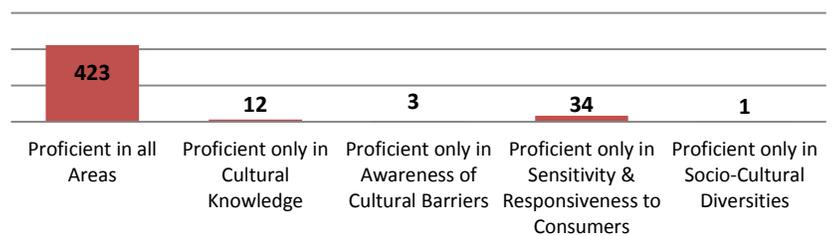
Respondents Proficient in ALL Areas by Number of Years in the Field (Total: 932)



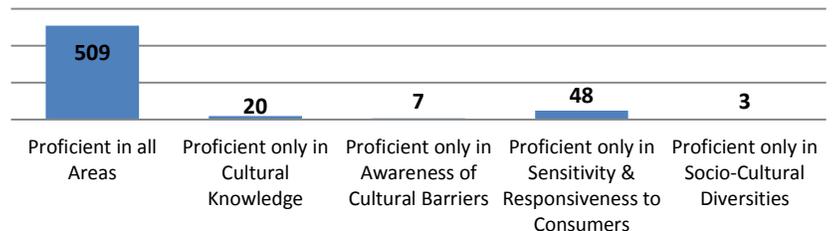
Respondents Proficient in ALL Areas by Level of Education (Total: 932)



CYF Program Respondents - Cultural Competence Proficiency



A/OA Program Respondents - Cultural Competence Proficiency



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TRAINING NEEDS AMONG RESPONDENTS

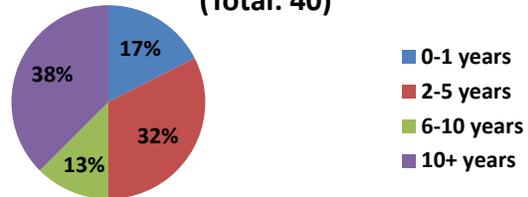
A large proportion (38 percent or 15 respondents) of 40 respondents (17 CYF and 23 A/OA program respondents) whose scores indicate a need for training in all four areas have worked in the behavioral health field for more than 10 years. Furthermore, nearly one third of the respondents (32 percent) hold a Bachelor's degree.

The results show the greatest need for training in Awareness of Cultural Barriers for both CYF and A/OA programs, followed by Socio-cultural Diversities.

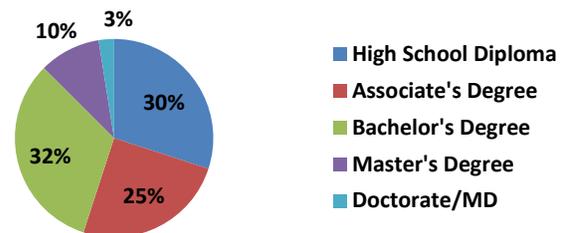
Out of 871 CYF program respondents, under two percent of respondents indicated a need for training in all four areas.

Out of 1,064 A/OA program respondents, slightly over two percent of respondents indicated a need for training in all four areas.

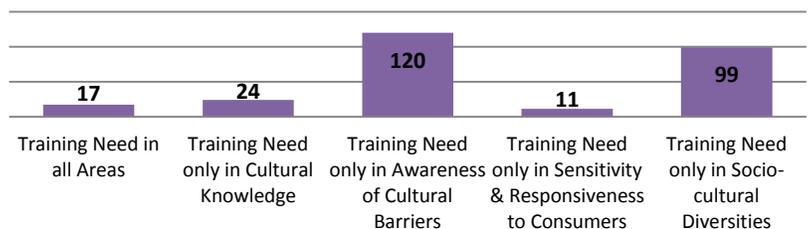
Respondents in Need of Training in ALL Areas by Number of Years in the Field (Total: 40)



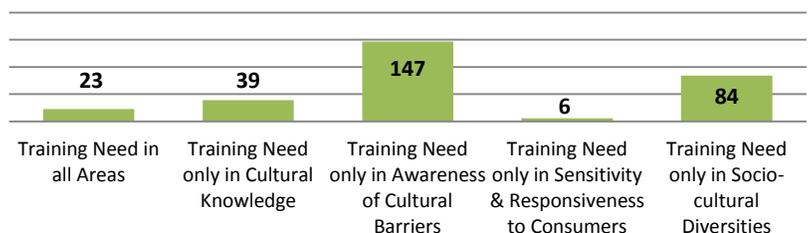
Respondents in Need of Training in ALL Areas by Level of Education (Total: 40)



CYF Program Respondents - Cultural Competence Training Needs



A/OA Program Respondents - Cultural Competence Training Needs



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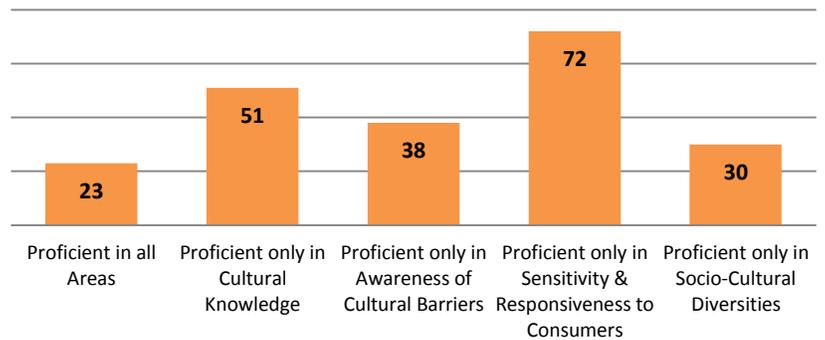
PROICIENCY AMONG PROGRAMS

This section summarizes data on the proficiency levels only among programs where all respondents from each program scored in proficiency in one or all four cultural competence areas. These numbers exclude other programs due to variability in response rate by program. It is also important to note that the individual response rate within each program was not 100 percent, thus some respondents included in the analysis might be the only individuals who responded from their program.

A total of 36 BHS programs that responded had all of their respondents indicate proficiency in all four cultural competence areas (out of a total of 250). Among 112 CYF programs, more than half of the programs (64.3 percent) had all of their respondents indicate proficiency in Sensitivity and Responsiveness to Consumers while indicating a need for training in other areas.

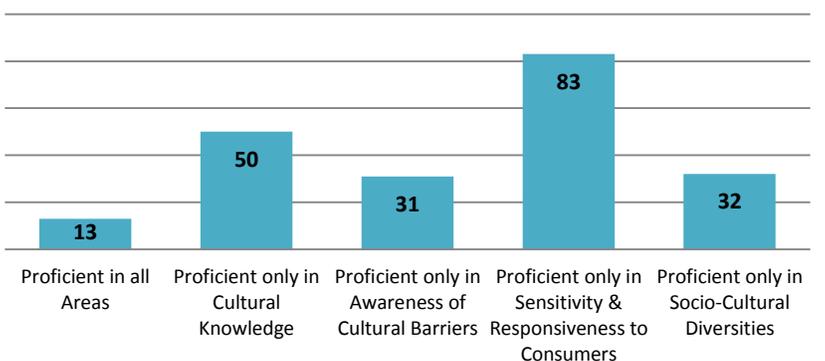
Similarly, among 138 A/OA programs, 60 percent of programs had all of their respondents indicate proficiency in Sensitivity and Responsiveness to Consumers while indicating a need for training in other areas.

CYF Programs - Cultural Competence Proficiency



Please note that 58 individuals did not indicate their respective program; therefore, they were excluded from the program results. They are included in the individual respondent results.

A/OA Programs - Cultural Competence Proficiency



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TRAINING NEEDS AMONG PROGRAMS

This section summarizes data on the training needs only among programs where all respondents from each program indicated a need for training in one or all four cultural competence areas. These numbers exclude other programs due to variability in response rate by program. It is also important to note that the individual response rate within each program was not 100 percent, thus some respondents in the analysis might be the only individuals who responded from their program.

There were no CYF programs where all respondents indicated a training need in all four areas. The only A/OA program where all respondents indicated a training need in all four areas only had one respondent.

Among 112 CYF programs, 11.6 percent of the programs had all of the respondents indicate a training need in Socio-cultural Diversities; however, this was the largest proportion of programs out of all categories in the graph.

Among 138 A/OA programs, 12.3 percent of the programs had all of the respondents indicate a training need in Awareness of Cultural Barriers; however, this was the largest proportion of programs.

CYF Programs - Cultural Competence Training Needs



Please note that 58 individuals did not indicate their respective program; therefore, they were excluded from the program results. They are included in the individual respondent results.

A/OA Programs - Cultural Competence Training Needs



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ASSESSMENT OF RESPONSE DISTRIBUTION

Assessment of Response Distribution

The charts show the distribution of individual responses for each of the areas of cultural competence. The shaded area highlights the scores that fall below the threshold (see page 3) and indicate a training need.

Cultural Knowledge: a large proportion of respondents scored between 12 and 16.

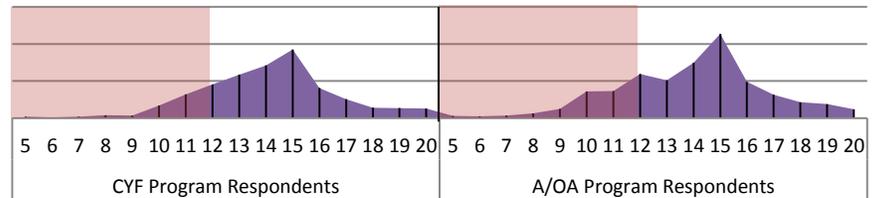
Awareness of Cultural Barriers: a large proportion of respondents scored 18—the cut-off score between proficiency and training need.

Sensitivity & Responsiveness to Consumers: a large proportion of respondents scored 9.

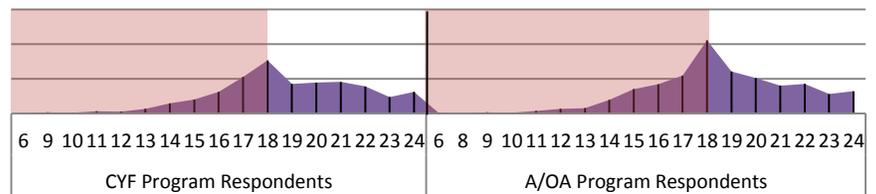
Socio-cultural Diversities: a large proportion of respondents scored 21, which is one point away from the cut-off score.

The scores definitively labeled respondents either as proficient or in need for training; however, the distribution curves in the charts show that many respondents scored closer to the cut-off number between proficiency and training need (excluding Cultural Knowledge area). This demonstrates that the results of the survey might not be as conclusive as they appear from aggregate data, indicating a greater need for training in all areas of cultural competence regardless of the individual respondent results.

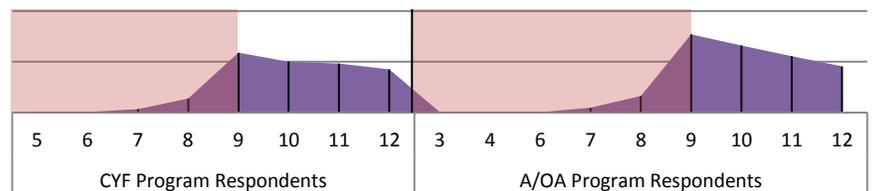
Assessment of Cultural Knowledge - Response Distribution



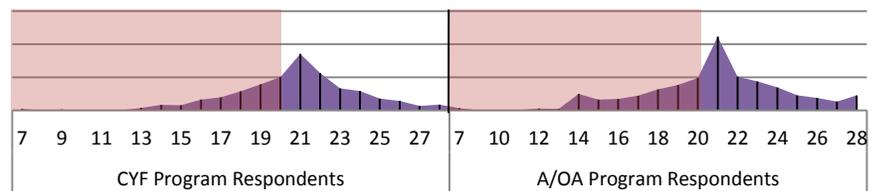
Assessment of Awareness of Cultural Barriers - Response Distribution



Assessment of Sensitivity and Responsiveness to Consumers - Response Distribution



Assessment of Socio-cultural Diversities - Response Distribution



Please see page 3 of the report for the breakdown of the scores.