ADDRESSING HEALTH CARE DISPARITIES WITH NATIONAL CLAS STANDARDS

ISSUE BRIEFING

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Of all the forms of inequality, injustice in health care is the most shocking and inhumane.
— Dr. Martin Luther King, Jr.

Cultural Competency

Culture is understood as the way an individual interprets and perceives the world. In behavioral health care settings, culture impacts how the presenting concern is displayed, discussed, and coped with. It is crucial that clinicians seek education and resources in the pursuit of cultural competency to better attune to the unique needs of the individuals they provide care for. Cultural competency is defined as “a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.” ¹ In practice, cultural competency consists of providing culturally and linguistically appropriate services (CLAS) that are essential for the bio-psycho-social wellness of individuals who identify as Black, Indigenous, and/or people of color (BIPOC). Cultural competency is a dynamic process that involves awareness and commitment; it goes beyond avoiding microaggressions or acknowledging stereotypes. Cultural competency requires understanding others’ beliefs, values, and worldviews. Furthermore, it requires adapting services to fit the values and needs of others. ²

¹ https://npin.cdc.gov/pages/cultural-competence
² https://thinkculturalhealth.hhs.gov/behavioral-health/Content/Course1/Module4/Module1_4_1.asp
Historically, the privileged few are afforded respectful and responsive clinical/medical outcomes. The reality for BIPOC is that health inequity is embedded in racism and social violence. Health inequity is systemic and a significant component of a cycle of injustice that BIPOC experience. Negative health consequences that occur as a result of cultural incompetence include missed screening opportunities; lack of familiarity with the prevalence of conditions among certain groups; failure to take into account differing responses to medications; lack of knowledge about traditional remedies, leading to harmful drug interactions; and diagnostic errors resulting from miscommunication.⁵

**National CLAS Standards**

Think Cultural Health is a platform committed to advancing health equity, launched in 2004 and sponsored by the Office of Minority Health. Think Cultural Health provides education, resources, and accredited training opportunities for health care professionals pursuing cultural competency. Most notably, Think Cultural Health outlines National CLAS Standards, which are intended to advance health equity and eliminate health disparities.⁴ Concrete policy, system, and environmental (PSE) changes require complete integration and implementation of recommendations from communities and research organizations that consider bias towards specific cultures, tools, and protocols (e.g. treatment protocols).

National CLAS Standards honor the HSS Action Plan to Reduce Racial and Ethnic Health Disparities and the National Stakeholder Strategy for Achieving Health Equity.⁵ Through the utilization of 15 action steps, National CLAS Standards support an organization’s ability to address cultural and communication barriers.⁶ The Principle Standard demands that organizations “provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.” The subsequent standards are organized into three themes: governance, leadership, and workforce; communication and language assistance; and engagement, continuous improvement, and accountability.

An Implementation Checklist for the National CLAS Standards, which includes a CLAS Action Worksheet, is an accessible tool that individuals, communities, and/or organizations can use to track their progress towards cultural competency. The checklist is divided into practices, each of which are numbered according to their corresponding theme and standard.⁷ The checklist facilitates accountability and space for reflection as the audience evaluates whether the practice is currently implemented, in the process of implementation, or

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⁴ [https://thinkculturalhealth.hhs.gov/assets/pdfs/AnImplementationChecklistfortheNationalCLASStandards.pdf](https://thinkculturalhealth.hhs.gov/assets/pdfs/AnImplementationChecklistfortheNationalCLASStandards.pdf)
⁵ [https://thinkculturalhealth.hhs.gov/behavioral-health/Content/Course1/Module3/Module1_3_1.asp](https://thinkculturalhealth.hhs.gov/behavioral-health/Content/Course1/Module3/Module1_3_1.asp)
⁶ [https://thinkculturalhealth.hhs.gov/assets/pdfs/AnImplementationChecklistfortheNationalCLASStandards.pdf](https://thinkculturalhealth.hhs.gov/assets/pdfs/AnImplementationChecklistfortheNationalCLASStandards.pdf)
⁷ Ibid.
not in the process of being implemented at this time. The World is Watching calls on health care professionals to adopt National CLAS Standards and engage in necessary discourse regarding health disparities for BIPOC.

**National CLAS Standards Action Steps**

**Principle Standard**

1. Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

**Governance, Leadership, and Workforce**

2. Advance and sustain organizational governance and leadership that promotes CLAS and health quality through policy, practices, and allocated resources.

3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.

4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

**Communication and Language Assistance**

5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.

6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.

7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.

8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the population in the service area.

**Engagement, Continuous Improvement, and Accountability**

9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization’s planning and operations.

10. Conduct ongoing assessments of the organization’s CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.
11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identity, prevent, and resolve conflicts or complaints.

15. Communicate the organization’s progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

ABOUT THE WORLD IS WATCHING

The World Is Watching is a global coalition demanding concrete actions to end police brutality and systemic racism in the US.

We are leaders, foreign and domestic professionals, organizations, grassroots activists, and allies. We are creating a unified international front calling for policy, system, and environmental changes. Our inspiration stems from the critical role that international pressure had in advancing the Civil Rights Movement of the 1960s. We are now in the largest civil rights movement in history and we are strategically mobilizing the global community in the fight for justice.

www.theworldiswatchingBLM.org

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