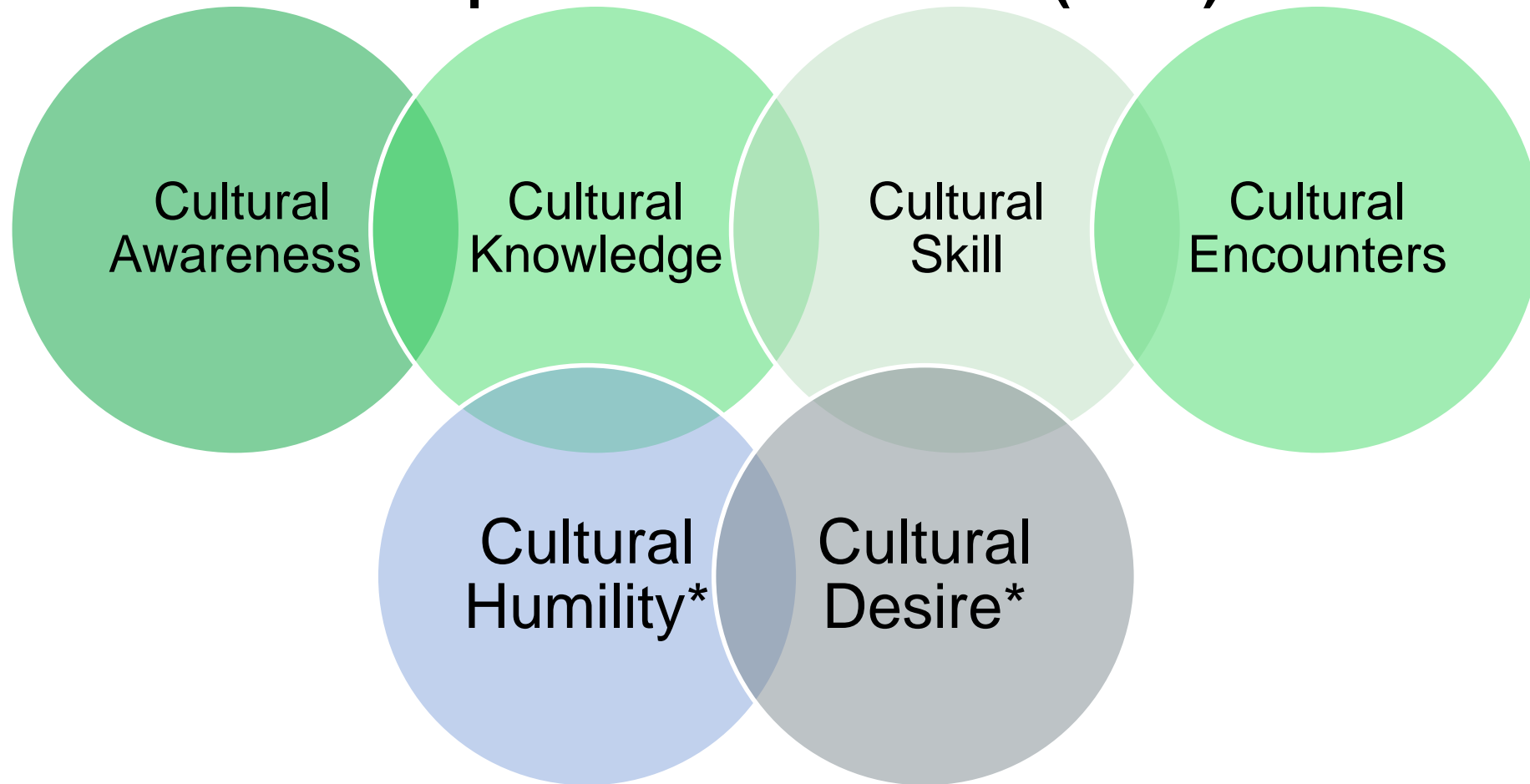




Components of Cultural Competence

Campinha-Bacote model (1991)*



*Cultural Humility and Cultural Desire added in 2018





Campinha Bacote Components of Cultural Competence

- Cultural awareness - process of conducting a self-examination of one's own biases towards other cultures and the in-depth exploration of one's cultural and professional background.
- Cultural knowledge - process in which the healthcare professional seeks and obtains a sound educational base about culturally diverse groups.





Campinha Bacote Components of Cultural Competence

- Cultural skill - ability to collect culturally relevant data regarding the patient's presenting problem, as well as accurately performing culturally-based physical, spiritual, psychological, and medication assessments in a culturally sensitive manner.
- Cultural encounters - the process which encourages the healthcare professional to directly engage in face-to-face cultural interactions and other types of encounters with clients from culturally diverse backgrounds in order to modify existing beliefs about a cultural group and to prevent possible stereotyping. This is the pivotal construct of cultural competence that provides the energy source and foundation for one's journey towards cultural competence





Campinha Bacote Components of Cultural Competence

- 2018 Update includes the inclusion of cultural humility and cultural desire into the previous constructs of cultural competence.
 - Cultural humility is defined as a dynamic and lifelong process focusing on self-reflection and personal critique,
 - Cultural desire is the motivation of the healthcare professional to “want to” engage in the process of becoming culturally aware, culturally knowledgeable, culturally skillful and seeking cultural encounters

