

Cultural Competence Standards in Managed Mental Health Care FOR FOUR UNDERSERVED/UNDERREPRESENTED RACIAL/ETHNIC GROUPS

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Disclaimer: The set of guidelines that are included in this document are general suggestions made by the panel for consideration by clinicians, who must continue to rely on their own professional judgment and training and the individualized assessment and needs of their patients. There is no representation here that these guidelines are appropriate for any particular patient. The panel that developed these guidelines disclaim all liability and cannot be held responsible for problems that may arise from their use.

Abstract

This document was developed as a result of the separate and joint work of four national panels that were formed to develop cultural competency standards in mental health services for four racial/ethnic groups. A national panel had been created of Latino mental health professionals, families and consumers to develop cultural competence standards for Latino populations. This panel was sponsored by the Western Interstate Commission for Higher Education (WICHE) Mental Health Program and funded by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration. Similarly, panels to develop standards for African Americans, Native American/Alaskan Natives and Asian/Pacific Islander Americans were formed. Each panel reviewed the literature about mental health research and services pertaining to their particular racial/ethnic group. Ethnic-specific standards were developed for all four groups. During this process the four national panels began sharing ideas and materials. They met together in Washington, DC in June 1997 to reach a consensus about core cultural standards applicable to all four groups. The eventual result was the "*Cultural Competence Standards in Managed Mental Health Care for Four Underserved/ Underrepresented Racial/Ethnic Groups*".

These standards present demographic and health profiles for each of the four major racial/ethnic groups. They also identify 16 "Guiding Principles" including those of cultural competence, consumer-driven system of care, community-based system of care, managed care, and natural support, etc. Specific standards of systems functioning and quality care are identified along with associated implementation guidelines. Appropriate performance indicators also are identified along with recommended outcomes. The document also includes a glossary.

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