

## **Recommendation #: 3 Cultural Competence**

To help ensure equitable processes and outcomes, advocates would benefit from engaging in non-stigmatizing cultural competence training that emphasizes cultural humility (i.e. consistent self-reflection and assessment for equitable behavior). The proactive pursuit of cultural humility ensures input from affected communities will be consciously prioritized. Specific activities might include, without limitation:

- 1) Promoting implicit bias testing. Encourage personnel involved in public-facing engagements with the dementia community to take implicit bias assessments.
- 2) Promoting listening sessions. Before developing campaigns, entities conducting outreach should engage dementia community members to gauge impressions on aging services and healthcare experienced by its culturally diverse and marginalized members; and
- 3) Promoting development and use of culturally competent ‘toolkits’ as a resource to support entities providing awareness and outreach campaigns for the dementia community.
- 4) Employing Choice Point Thinking that requires the deliberate consideration of impacts on marginalized communities at all points of major decision making.

These activities align with the understanding that person and relationship centered care involves non-stigmatizing, customized outreach approaches to address a multicultural population (i.e., reflecting differences in ability, generation, ethnicity/race, and sexual orientation/gender identity and all their potential intersections). Adopting this approach has been shown to increase a person’s receptiveness to outreach efforts, improve the quality of their care and minimize their experienced health disparities.

### **Indicators**

- Monitor number of created, adopted, and disseminated cultural competence training programs and toolkits, including progress and implementation of Nevada SB 364 and SB 470 (2019).
- Monitor number of service providers that report having participated in cultural competence training.

### **Potential Funding**

Grants, donations and/or gifts Specific sources may include:

- National Resource Center on LGBT Aging.
- US Department of Health and Human Services (US DHHS) Office of Minority Health
- Nevada Department of Health and Human Services (NV DHHS) – ADSD Collaboration with different cultural and ethnic focused organizations.