Cultural competence refers to an ability to interact effectively with people of different cultures. Cultural competence comprises four components: (a) Awareness of one's own cultural worldview, (b) Attitude towards cultural differences, (c) Knowledge of different cultural practices and worldviews, and (d) cross-cultural skills. Developing cultural competence results in an ability to understand, communicate with, and effectively interact with people across cultures.

To understand cultural competence, it is important to grasp the full meaning of the word culture first. According to Chamberlain (2005), culture represents “the values, norms, and traditions that affect how individuals of a particular group perceive, think, interact, behave, and make judgments about their world”.

While a few individuals seem to be born with cultural competence, the rest of us have had to put considerable effort into developing it. This means examining our biases and prejudices, developing cross-cultural skills, searching for role models, and spending as much time as possible with other people who share a passion for cultural competence. The term multicultural competence surfaced in a mental health publication by psychologist Paul Pedersen at least a decade before the term cultural competence became popular. Most of the definitions of cultural competence shared among diversity professionals come from the healthcare industry. Their perspective is useful in the broader context of diversity work.

Consider the following definitions:

- A set of congruent behaviors, attitudes and policies that come together as a system, agency or among professionals and enable that system, agency or those professionals to work effectively in cross-cultural situations.
- Cultural competence requires that organizations have a defined set of values and principles, and demonstrate behaviors, attitudes, policies, and structures that enable them to work effectively cross-culturally.
- Cultural competence is defined simply as the level of knowledge-based skills required to provide effective clinical care to patients from a particular ethnic or racial group.
- Cultural competence is a developmental process that evolves over an extended period. Both individuals and organizations are at various levels of awareness, knowledge and skills along the cultural competence continuum.

It is not surprising that the healthcare profession was the first to promote cultural competence. A poor diagnosis due to lack of cultural understanding, for example, can have fatal consequences, especially in medical service delivery. Cultural incompetence in the business community can damage an individual’s self esteem and career, but the unobservable psychological impact on the victims can go largely unnoticed until the threat of a class action suit brings them to light.

Notice that some definitions emphasize the knowledge and skills needed to interact with people of different cultures, while others focus on attitudes. A few definitions attribute
cultural competence or a lack thereof to policies and organizations. It’s easy to see how working with terms that vary in definition can be tricky.

Can you even measure something like cultural competence? In an attempt to offer solutions for developing cultural competence, Diversity Training University International (DTUI) isolated four cognitive components: (a) Awareness, (b) Attitude, (c) Knowledge, and (d) Skills.

- **Awareness.** Awareness is consciousness of one's personal reactions to people who are different. A police officer who recognizes that he profiles people who look like they are from Mexico as “illegal aliens” has cultural awareness of his reactions to this group of people.

- **Attitude.** Paul Pedersen’s multicultural competence model emphasized three components: awareness, knowledge and skills. DTUI added the attitude component in order to emphasize the difference between training that increases awareness of cultural bias and beliefs in general and training that has participants carefully examine their own beliefs and values about cultural differences.

- **Knowledge.** Social science research indicates that our values and beliefs about equality may be inconsistent with our behaviors, and we ironically may be unaware of it. Social psychologist Patricia Devine and her colleagues, for example, showed in their research that many people who score low on a prejudice test tend to do things in cross cultural encounters that exemplify prejudice (e.g., using out-dated labels such as “illegal aliens”, “colored”, and “homosexual”). This makes the Knowledge component an important part of cultural competence development.

Regardless of whether our attitude towards cultural differences matches our behaviors, we can all benefit by improving our cross-cultural effectiveness. One common goal of diversity professionals is to create inclusive systems that allow members to work at maximum productivity levels.

- **Skills.** The Skills component focuses on practicing cultural competence to perfection. Communication is the fundamental tool by which people interact in organizations. This includes gestures and other non-verbal communication that tend to vary from culture to culture.

Notice that the set of four components of our cultural competence definition—awareness, attitude, knowledge, and skills—represents the key features of each of the popular definitions. The utility of the definition goes beyond the simple integration of previous definitions, however. It is the diagnostic and intervention development benefits that make the approach most appealing.