# DEFINITIONS

#### **Cultural Competency**

Cultural and linguistic competence is defined by the Centers for Disease Control and Prevention (CDC) as a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals, enabling effective work in cross-cultural situations. This involves valuing diversity, conducting self-assessment, managing the dynamics of difference, acquiring and institutionalizing cultural knowledge, and adapting to diversity and the cultural contexts of the communities served.

Cultural competence is a developmental process that evolves over time, requiring organizations to have a defined set of values and principles, and to demonstrate behaviors, attitudes, policies, and structures that enable them to work effectively cross-culturally. (npin.cdc.gov)

### **Health Inequities**

Health inequalities are differences in health outcomes between different groups of people that can be prevented or reduced. These inequalities are influenced by social factors, including where people live, learn, work, play, and worship. Factors contributing to health inequalities include:

**Economic Inequalities:** Institutions such as governments, schools, and workplaces may create disadvantages, leading to poor educational outcomes or limited job opportunities, which in turn cause economic disparities.

**Social Inequalities:** Unfair treatment of individuals based on characteristics such as gender, race, sexual orientation, class, or immigration status can lead to social disadvantages.

**Environmental Inequalities:** The geographic location where individuals reside can significantly impact their health status. Lower-income neighborhoods often have fewer resources, including quality housing, safe streets, and access to healthy foods, all of which affect health outcomes.

#### **Health Disparities**

The CDC defines health disparities as preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by populations disadvantaged by their social or economic status, geographic location, and environment. These disparities negatively affect groups who have faced obstacles to health based on characteristics historically linked to discrimination or exclusion, such as race or ethnicity, religion, socioeconomic status, gender, mental health, sexual orientation, or geographic location. (cdc.gov)

## Social Drivers of Health

Social drivers of health are factors from one's social environment that may either contribute to or detract from the health of individuals and communities. They are the circumstances in which people are born, grow up, live, and work.

Social drivers of health may include: education, socioeconomic position, gender, income, sexual orientation, race or ethnicity, environment, access to services, and ability to participate in society.

## **CLAS Standards**

The National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care were developed by the U.S. Department of Health and Human Services Office of Minority Health. These standards aim to improve quality and help eliminate health care disparities by providing a blueprint for individuals and organizations to implement culturally and linguistically appropriate services.

The principal standard is to provide effective, 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. (thinkculturalhealth.hhs.gov)

