

**Fig 1** Tervalon, M. & Murray-Garcia, J. (1998). Cultural Humility Versus Cultural Competence: A Critical Distinction in Defining Physician Training Education Outcomes in Multicultural Education. *Journal of Health Care for the Poor and Underserved, 9(2)*, 117-125.

Cultural humility follows three principles:

1. **Lifelong learning and critical self-reflection.** 
   * *How does your* **Cultural Background** *affect reactions to and interactions with patients? 2*
   * *Avoid being an “expert” in a culture and* **learn** *from the patient 1,3*
2. **Recognize and challenge power imbalances.** 
   * *“Every clinical encounter is a cross cultural encounter”5*
   * *“What* **social** *and* **economic** *barriers impact a client’s ability to receive effective care?”2*
3. **Institutional Accountability.** 
   * **Diversity** *of staff and leadership1,2*
   * *Discussion about oppression and inclusion1,2*
   * *Training to encourage self-reflection2*

Consider:
How do you currently engage in self-reflection?

Practice: 
What are ways you plan to incorporate cultural humility principles into your work?


References:

1. Tervalon, M. & Murray-Garcia, J. (1998). Cultural Humility Versus Cultural Competence: A Critical Distinction in Defining Physician Training Education Outcomes in Multicultural Education. *Journal of Health Care for the Poor and Underserved, 9(2), 117-125*
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3. MacKenzie, L., Hatala, A (2019). Addressing culture within healthcare settings: the limits of cultural competence and the power of humility. *Canadian Medical Education Journal, 10(1), e124-e127.*
4. Kleinman, A. & Benson, P. (2006). Anthropology in the Clinic: The Problem of Cultural Competency and How to Fix It. *Plos Med 3(10): e294.*
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