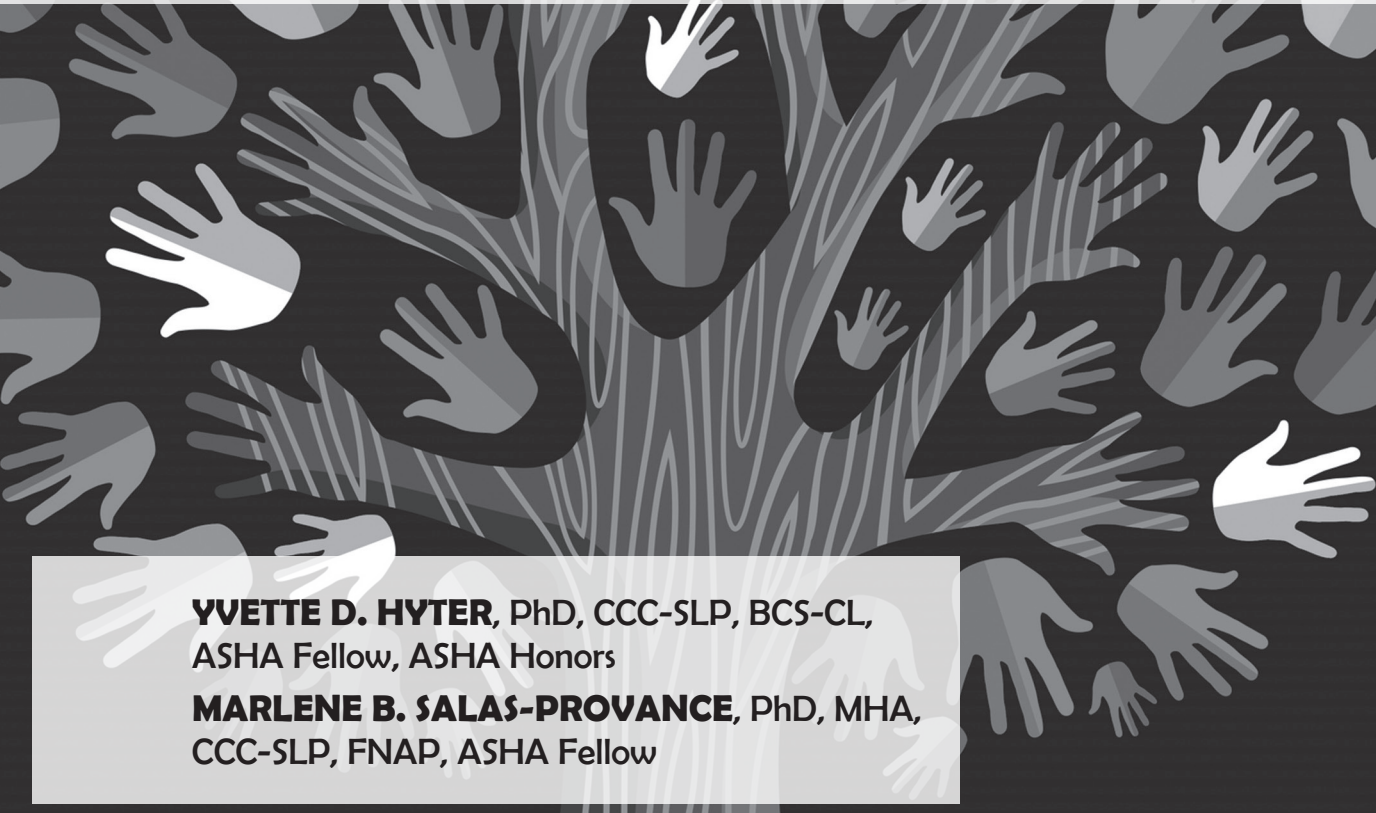
Culturally Responsive Practices

in Speech, Language, and Hearing Sciences

THIRD EDITION



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PREFACE

We are writing the third edition of this textbook in 2025, a time when many courses, research endeavors and funds, and clinical practices are under attack. This is a dangerous time in U.S. history. With each edition of this textbook, we have been joyful and excited about its release, but this year (2025) hits differently. The United States—rather, the world—has changed exponentially since the first publication of this text about eight to 10 years ago. As we finish up our writing in 2025, people in the United States have endured the reversal of many human and civil rights advancements and the erosion of civil liberties. Such reversals or erosions include:

- Reversal of LGBTQIA+ and transgender rights, including bans from serving in the military, defunding gender-affirming health care, eliminating government resources to support this community, and being excluded from participating in sports
- Erosion of civil rights and antidiscrimination protections through the elimination of diversity, equity, and inclusion mandates that were in place to ensure equality and equity of basic human rights and of the freedoms promised in the Bill of Rights to worship, work, and live without fear of persecution; and elimination of government programs designed to prevent or address disparities in education
- Rolling back laws protecting asylum seekers, refugees, and immigrants, including the orchestration of raids by Immigrations and Customs Enforcement (ICE) and the expulsion and deportation of people who are in the United States legally for their dissenting views, particularly those speaking out against the human rights abuses in Palestine and in favor of peace in Palestine
- Taking away funds for universities that teach the history of Black and Brown people
- Removal of ASL interpreters from national press briefings, which makes those briefings inaccessible to Deaf people and those with hearing differences
- Proposed cuts to programs that support disabled people, such as Supplemental Security Income (SSI) and Medicaid, as well as significant reductions in the Affordable Care Act (ACA), making it more difficult for BIPOC (Black, Indigenous, and People of Color) individuals who gained health care through the ACA to have health care.

These rollbacks and erasures are good examples of structural violence (see Chapter 4, "Culturally Responsive Practices: Human Rights, Equity, Inclusion, and Social Justice"), and the field of speech-language and hearing sciences is not immune to these violent incursions. The American Speech-Language-Hearing Association (ASHA); the Council for Academic Accreditation in Audiology and Speech-Language Pathology (CAA), which develops and maintains standards for graduate programs in speech, language, and hearing sciences (SLHS); and the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC), which endorses programs for clinical certification, are in the process of collecting input from the

membership about removing references to diversity, equity, and inclusion from Standard 3.4 A/B, which was adopted just recently in 2023 (Council on Academic Accreditation, 2023). This standard ensures that speech-language and hearing programs incorporate diversity, equity, and inclusion into their clinical and educational curricula. This book will be in print before a solution has been decided upon, but if the language of diversity, equity, and inclusion is indeed removed from the standard, what will be the effect on the progress made in this area for ASHA members and university programs? In this third edition of a text of this type in SLHS, we strongly believe it is necessary to discuss the context in which we are living and writing, and to encourage all those who choose, to join in the struggle for equity and justice for all.

ADDITIONAL CONTEXTS THAT GIVE MEANING TO THIS TEXT

Globalization—*the interconnectedness and interdependence of nations, blurring of borders, and intermingled cultures, ecologies, economies, languages, politics, and technologies*—has uneven effects; that is, some countries often benefit from this increasing interdependence, while others are frequently disadvantaged by it (Hyter, 2014; Pillay & Kathard, 2018; Steger, 2025). Regardless of whether your country experiences the privileges or the drawbacks of globalization, we all perceive that the world is getting smaller.

In the 21st century, there have been major movements of groups of people across the world. Sometimes this movement is voluntary as people search for diverse opportunities elsewhere. At other times, people are forcefully displaced because of such issues as political instability, ethnic persecution, natural and environmental disasters, and wars. Nevertheless, because of this migration, there are increasing opportunities for communication specialists, audiologists, educators, and health care providers to counsel, assess, diagnose, and engage with people whose cultures (values, beliefs, and assumptions transmitted from one generation to another that drive daily practices) and languages are different from one's own. We are also in a time when there have been unprecedented examples of the violations of civil and human rights, extrajudicial killings, and increasing expressions of racism, sexism, Islamophobia, linguicism or linguistic racism[1] (Baker-Bell, 2020; Lippi-Green, 2012; Phillipson, 1992), audism,[2] cultural exclusion, political domination, and economic exploitation in the United States and abroad. For these reasons, the authors know that the content of this textbook disrupts the status quo, or "business as usual," and the time is right to facilitate a different way to think about speech, language, and hearing practices.

THE NEED FOR A CRITICAL SPEECH-LANGUAGE-HEARING SCIENCES

The context outlined in the previous paragraphs underscores the urgent need for a critical speech-language-hearing sciences—one that moves us beyond a narrowly defined, Western, medical model to one that embraces and centers equity and justice at every turn. A critical approach compels us to interrogate and dismantle the systemic structures that disadvantage, exclude, and marginalize confident communicators, particularly those who

[1] *Linguicism*, or linguistic racism, is the systemic exclusion, oppression, or exploitation of any group based on the language(s) spoken by that group.

[2] *Audism* is the systemic exclusion, oppression, or exploitation of a group based on hearing status.

are racialized, disabled, and linguistically marginalized. This critical approach will compel us to challenge unequal power relations and privilege and to transform our educational and clinical practices and policies to ones that are more equitable and just. As ASHA reaches its 100-year anniversary in 2025, remaining relevant means we need to continue to challenge the status quo, while intentionally collaborating with communities to support equitable and inclusive communication health outcomes, by employing practices that are equitable, inclusive, and socially just.

This book addresses these critical concerns by engaging with key frameworks such as disability justice, crip linguistics, raciolinguistics, translanguaging, and languaging. These perspectives help highlight the ways in which communication is shaped by culture and power and how speech-language-hearing professionals can become more culturally and linguistically responsive and critically reflexive in our practice. Readers will find tools such as theoretical frameworks, case examples, lists of (a) things to think about, (b) things to do, and (c) things to read to facilitate continual movement along the pathway of cultural growth and responsiveness.

WHAT IS IN A NAME?

What is in a name? Everything! We have made well-thought-out decisions about the terms to use when referring to gender and ethnic, cultural, and racialized groups in this text. It has been a detailed and difficult decision, but our goal was to be as accurate as possible while being sensitive. Where gender is generic—that is, not referring to a specific person—we use the singular "they" pronoun or try to avoid the use of any pronoun, as per the American Psychological Association (APA) 7th Edition Style Guide (APA, 2019). There really are no good ways to refer to groups of people. Tuhiwai Smith (2022), a Māori scholar from New Zealand, states that collective names are overly simplistic and do not accurately explain the varied experiences that groups have had. It is always preferable to refer to individuals by the name by which they would like to be called, as in the name of their nation (e.g., Potawatomi). In the absence of being able to ask individuals and groups directly, we have consulted the literature and some individuals to guide our use of group names. Some terms are perceived as insensitive or disparaging, such as referring to the people who originated on U.S. soil as Indians. Based on our conversations with colleagues who identify as Indigenous American/Native American, and after consulting resources (e.g., Baker et al., 2021), we have chosen to refer to this group of people as *Indigenous Americans/Native Americans*. According to a Gallup poll taken in 2019, many people of African descent living in the United States prefer to be called Black (42%) or African American (35%) (Saad, 2020). Immigrants of African descent or from Haiti or the Caribbean who are descendants of Africans often prefer to call themselves Black but also refer to themselves as African American. In this text, we use both *African American* and *Black* interchangeably (Adams, 2020).

Spanish speakers in the United States have been referred to as Hispanic and Latino. But these terms are also used to refer to people from Mexico, Puerto Rico, Cuba, Central America, Argentina, and the Dominican Republic—among others—who all have a language in common but speak different variations of that language and have diverse cultures. The U.S. government developed the category called *Hispanic* in the 1980s, under which it grouped all Spanish speakers (Brammer, 2019; Mora, 2014). Also, the term *Hispanic* has been associated with Spanish ancestry, whereas *Latino* has been used to refer to groups of people who have a history of having been colonized and oppressed (Schelenz & Freeling, 2019). We are deliberately not using

Latinx, a term that is designed to be gender-neutral, but also one primarily used by English speakers. The problem here is that the use of Latinx can seem like linguistic imperialism —that is, English is being imposed on the traditional structure of Spanish (Lopez Torregrosa, 2021). Recent research has revealed that about one in four U.S. Latina(o)s/Hispanics have heard of Latinx, and of those who have heard of it, only 3% use it (Noe-Bustamante et al., 2020). In our discussions with Latina(o)s in our circle of colleagues, there is concern that Latinx is a very American and Eurocentric effort to "erase the history" of how the Spanish language is used (Brammer, 2019; Nuño-Pérez & Aviles, 2019) or is forcing American ideology onto people living in Latin America and who have Latin American ancestry (Brammer, 2019; Guerra & Orbea, 2015). These are the reasons we have not adopted Latinx for this textbook but rather use *Latina(o)* and/or *Hispanic*.

Arab American, *Asian American*, *Pacific Islander*, and *White* or *European American* are also used, but we realize that these terms do not adequately describe the diverse ethnic groups associated with these names. Typically, in the United States, the word *minority* has been used to refer to the groups of people mentioned above, with the exception of people who identify as White or European American. We deliberately have not used the word *minority*, as it carries a negative connotation. Also, the term *minority* is no longer used to refer to a numerical group but speaks more to the amount of power a group of people is perceived to hold. In addition to trying to use sensitive names for groups, we also struggled with what to call different regions of the world. We use *People of Color* to refer to ethnic groups that have typically been racialized in the United States, although not all members of those groups self-identify as People of Color. Another term to consider, but that we have not used in this version of our textbook, is *global majority*, which situates conversations about race within an international and interconnected perspective while also acknowledging that most of the people in the world are those who identify as People of Color (Hyter, 2021; Lim, 2020).

We have thought about the concepts used to describe the languages that people speak. We are using *African American Language* (rather than African American English). With the use of AAL, we are challenging linguistic hierarchy and the Eurocentric framing of this form of communicating as separate from a language. The use of *language* also acknowledges the cultural expression and identity of AAL speakers (Baker-Bell, 2020).

We have made every effort to use language reflecting a social model of disability perspective throughout the text. In this regard, we tried very hard not to use *disorder*, which is within the deficit view of communicating and languaging. If we are quoting a text, however, we do use disorder in that context but avoid it in our own writing.

We use the concepts of majority-world and minority-world countries (Alam, 2009). *Majority-world country* refers to countries that have a history of colonialism and where access to resources is often strained. This is the part of the world where the majority of the world's population lives. *Minority-world country* refers to countries with high incomes, such as the United States, Canada, many countries in Europe, Israel, and some parts of Asia and of Oceana. The minority-world countries are where a minority of the world's population lives.

POSITIONALITY STATEMENTS

Positionality statements are used to openly acknowledge that all knowledge is situated within perspectives and supported with

assumptions (Holmes, 2020). People are positioned by socially and culturally lived experiences and contexts, but also by educational, economic, and political contexts. It is not only a one-time declaration of our positions in relation to our work and to the people we work with, but a continual negotiation of our roles in relation to systems of power and to the communities we serve (Boveda & Annamma, 2023). Positionality should highlight our solidarity with equity and justice (Zembylas, 2025). We thought it important to share with the readers our positionality statements, which clearly outline the events that have shaped our thinking and clearly identify our values and ethical positions.

I am Yvette D. Hyter, PhD, CCC-SLP, ASHA Fellow, and ASHA Honors. I identify as Black. With the help of my parents, aunts, uncles, cousins, and Ancestry.com, I have been able to trace my paternal family back to 1811 and my maternal family back to 1856. My maternal great-grandfather was a literate farmer who owned his farm outright, which was an act of resistance to a system designed to deny Black autonomy and dignity. My investigation into my paternal great-great-great-grandparents, who were also farmers, led me to Louisa, Virginia. However, I lost track of them there because those who were enslaved were only counted in the "slave schedules," which provided the name of the enslaver and reduced my ancestors to a number, gender, and age, erasing their humanity. This erasure continues to inform my resistance to academic and clinical practices that render children and families invisible.

My parents were teenage sweethearts, married in their 20s and, as of 2025, have been married for 71 years. They were part of the Great Black Migration (see Reich [2014] and Wilkerson [2011]), migrating from Alabama to Michigan in the 1950s. Although I was raised in Detroit, while growing up, I (along with my siblings and parents) spent every summer in Alabama. My father, who aspired to be an architect, was denied access to this goal due to his race. Instead, he became a science educator in Detroit, then went to Cornell University, earned a master's in science education and, when he returned to Detroit, became head of the science department and later the science supervisor for the Detroit Public Schools until he retired. My mother had similar obstacles. She wanted to study to become a registered nurse (RN), but could not due to her race. A nursing school explicitly told her that "We don't take Blacks." Instead of becoming an RN[3], she became a licensed practical nurse (LPN). After working as an LPN for many years during the second shift (from 3 or 4 p.m. until midnight or 1 a.m.), which was difficult while raising a young, growing family, she went back to school to obtain her bachelor's in sociology. Then she worked as a social worker with teens living in residential centers and in out-of-home placements until her retirement. My parents' resistance and perseverance in the face of systemic exclusion and structural barriers provided my siblings

[3]RNs are in a supervisory position over LPNs.

and me a front-row seat to the ways that racism shaped our family's opportunities. Their commitment to education and social services taught us to care for the most vulnerable in society. My parents refused to give up, refused to internalize the position of being minor players in the dominant story, and refused to let racism define who we were and are. They always had an alternative "story" for us, in that they told us about who we were and what was possible when someone called us a name or told us what we could not aspire to be. Their examples and guidance inform my commitment to culturally responsive, human rights, equity-based, inclusive, and justice-oriented speech-language and hearing sciences. All this rich history, abbreviated quite significantly here, contributes to the fabric of who I am and shapes my clinical work, scholarship, and pedagogy.

As a young Black student and now seasoned faculty (retiree), but still a very active member in a predominantly White field and profession, I am keenly aware of systemic racism and other practices of exclusion enacted through policies, practices, pedagogy, and the SLHS standards and curriculum. My presence in these spaces is an act of resistance and accountability to the communities that I come from, and to the communities I serve. It is my people's and family's history of struggle, strength, and triumph that I carry with me and that has been the primary driver of my tireless work for an antiracist, socially just, equitable, and inclusive discipline that educates clinicians, scholars, and educators to practice in ways that disrupt inequities and injustices, while advancing human rights, equity, inclusion, and justice (Hyter, 2021; Hyter & Salas-Provance, 2023).

My last comment is about a dream I had in 1990, when I enrolled at Temple University to earn a doctorate in speech-language and hearing sciences after having worked as a speech-language-hearing professional (SLHP) for several years. While obtaining my PhD, I was experiencing significant cognitive dissonance around the topic of assessments and interventions with "multicultural populations." I was trying to reconcile what I was learning with how I could have more effectively served children of color on my previous caseloads. I had a dream that all the children of color were locked in a barn, and I could not get them out. I had the key, but it didn't work. I tried to break the barn door down but was unable to. I had that dream repeatedly until I understood what it meant: that the current models, frameworks, assessments, and interventions were not designed for these children —my children. I realized my purpose was to contribute to a change in the way that children who are impoverished, who speak languages other than English, who speak variations of English, who are traumatized, and who are disabled and marginalized by systems are assessed and supported by SLHPs. I have spent over 35 years developing frameworks rooted in equity, inclusion, and justice (Hyter, 2008, 2010, 2014, 2021). Writing a book with my friend and colleague Dr. Marlene B. Salas-Provance is an example of our shared commitment to transforming the field of SLHS and to being accountable to marginalized communities, and of our refusal to replicate or maintain the structural exclusions of the past.

I am Marlene B. Salas-Provance, PhD, MHA, CCC-SLP, FNAP, and ASHA Fellow. I was born and raised in Albuquerque, New Mexico, in a large Hispanic family, the youngest of seven children. My first words were in Spanish, and English was brought into our home from my older brothers and sisters, who were required to use English in school. I believe that my life experiences are similar to those of many Hispanic individuals who were raised in strong religious (Catholic) and extended families. Growing up, my family included three brothers, three sisters, and many uncles, aunts, and cousins around whom our entire life revolved, full of the cultural and religious rituals such as baptisms, first communions, weddings, Matanzas, and Semana Santa (Holy Week). My Salas name originates from my conquistador grandfather of many generations past, Sebastian Salas, who crossed into New Mexico in the late 1500s, having journeyed from Estonia, Spain, looking for a new world. My family has a Salas family shield that represents our long ancestry. New Mexico has many families similar to my own who have lived in the state for hundreds of years.

My mother's father, Esau Bruno Lopez (my grandmother was Maria Melior de Dolores Chavez Lopez), was a man ahead of his time in educating his daughters. He took his daughters by horse and wagon from the small town of Torreon, New Mexico, to Santa Fe, New Mexico, to be educated at the Loretto School for Girls. Two of my aunts became teachers. My own mother, Cora Maria Lopez Salas, went to school through the eighth grade and was a passionate believer in education for her children. She, in fact, completed part of the coursework for a GED in her late 80s. As long as I can remember, she was a church volunteer for numerous causes. I believe my own passion for volunteering was passed down by her. My father, Ross Ray Salas, was a welder in the same job for 30 years. My siblings and I learned the value of hard work and of dedication to a cause, and the importance of family. One of my sisters was educated in the convent as a Sister of the Company of Mary. I credit my mother, Cora, with instilling in me a belief that you never quit and that no matter what the challenges, education is worth it. So, educated I became.

My early success in college began with the unending support of Dr. Edgar Garrett, chair of the department of communication disorders at New Mexico State University. There were only three undergraduate students from a Hispanic background in speech-language pathology in the early 1970s at my university. It is hard to believe that things have not changed much since then. Dr. Garrett supported me then and continued to do so throughout my life. I truly believe that role models are critical to our success as individuals. I had many mentors like Dr. Garrett who set me on the path to my success. The close relationships I have built with students over the years stem from my own experiences and my hopes for their success.

My professional work in diversity began with the American Speech-Language-Hearing Association's Hispanic Caucus in 1994, and cultural issues have been a focus of my personal and professional life since that time. My friend and colleague Dr. Yvette Hyter planted

the seeds for the origin of this book. We have taken it to a new level in this third edition. We always enjoy the cover reveal. The tree with its hands reaching out from every space is a metaphor for our purpose in writing this book—to reach out to others no matter their stage in the journey of cultural responsiveness. The third edition has been intentionally and thoughtfully arranged to prepare you to meet the needs of your culturally and linguistically diverse patients, clients, and students, no matter their disabilities.

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1 Introduction

To live in the United States today means to live among more than 341 million people (U.S. Census Bureau, 2025), with Indigenous Americans/Native Americans, Blacks/African Americans, Latina(o)s/Hispanics, Asians/Asian Americans, and Arab Americans collectively representing 41.21% of the population (Arab American Institute Foundation, 2021–2025; U.S. Census Bureau, 2024). The term usually used to refer to these groups of people is *minorities*; however, this term is problematic and often offensive, particularly because it no longer typically refers to numbers of people. The use of the term *minority* is particularly important to think about because, in many large cities, most children under age 5 come from communities of color and diverse ethnicities are the numerical majority. In 2020, 53% of children under age 5 were children of color (O'Hare & Mayol-Garcia, 2023). In this text, we will use *People of Color* to refer to people who identify as Black/African American, Indigenous American/Native American, Latina(o)/Hispanic, Asian/Asian American, and Arab American. It is also important to note that some people from these aforementioned ethnic groups self-identify not as People of Color, but as White. Table 1–1 shows the projections of the ethnic makeup of the U.S. population from 2020 to 2060 (Vespa et al., 2020).

People of Color in the United States are expected to make up more than 60% of the total population by 2060, compared with 41.21% in 2020. Before 2025, the United States was continuing along the path to becoming a plurality of people from a variety of racial, ethnic, and linguistic backgrounds. Part of this racial and ethnic plurality are those who identify as European American, Caucasian, or White, and who have their own distinct histories, cultures, and worldviews. In 2025, however, the U.S. government is severely limiting which ethnic groups can migrate, be refugees, seek asylum, exercise their right to free speech, and remain in the United States, even with a legal visa (Yam, 2025). People of Color who have participated in protests against the human rights abuses occurring in Palestine (Fakhri, 2025; Rubin & Soroka, 2025; United Nations Human Rights Council, 2025) are being detained and deported, even with current visas, at the same time that White South Africans (Afrikaners who benefited from Apartheid [1948–1994]) are being welcomed to the United States as refugees (Bruce, 2025). There are a variety of reasons for these changes, which you may

Table 1–1. Populations by Race and Hispanic Origin: 2030–2060 (in thousands)

	2030		2060	
Race and Hispanic Origin	**Number**	**Percent**	**Number**	**Percent**
Total population	**355,101**	**100.0**	**404,483**	**100.0**
One race				
White	263,453	74.2	275,014	68.0
Non-Hispanic White	197,992	55.8	179,162	44.3
Black or African American	49,009	13.3	60,690	15.0
American Indian and Alaska Native	4,663	1.3	5,583	1.4
Asian	24,394	6.9	36,815	9.1
Native Hawaiian and other Pacific Islander	913	0.3	1,125	0.3
Two or more races	12,669	3.6	25,255	6.2
Hispanic	74,807	21.1	111,216	27.5

Source: Adapted from Vespa, J., Medina, L., & Armstrong, D. M. (2020). *Demographic turning points for the United States: Population projections for 2020 to 2060: Current population reports*. U.S. Census Bureau. https://www.census.gov/content/dam/Census/library/publications/2020/demo/p25-1144.pdf

want to discuss with your instructor and/or peers, but the official state party line is that these individuals (many without criminal records or prior involvement with the judicial system) have adverse consequences for U.S. foreign policy (Deportable Aliens, 2025).

Typically, in the United States, when race and ethnicity are mentioned, Whiteness is not considered, yet it is central to how race was constructed in the nation (McDermott, 2020). One goal of this text is to help all readers, regardless of their racial and ethnic backgrounds, produce knowledge and acquire skills and attitudes that will help them engage, interact, practice, and provide care to anyone from any racial, ethnic, or cultural group in a responsive, equitable, just, and humane manner.

The diversity of languages spoken in the United States is wide: More than 350 languages are spoken in U.S. homes, and approximately 35 of these languages are spoken by at least 100,000 individuals over the age of 5. These data indicate that one out of every five children in the United States speaks a language other than English (U.S. Census Bureau, 2022). A closer look across the United States reveals that 224 languages are spoken in Los Angeles (Strommen, 2024), 166 in Seattle, 164 in Texas (Ura & McCollough, 2015), and 126 in Detroit.

1. Look up the percentage of people in the most populous areas of the country who speak languages other than English.
2. Look up the percentage of people in your state who speak languages other than English.

English remains the predominant language spoken in the United States, with a little over 240 million speakers. In 2022, about 68

million people in the United States spoke a language other than English at home, with 41.7 million of those speaking Spanish at home (U.S. Census Bureau, 2022). Table 1–2 shows information regarding languages spoken at home in the United States in 2023.

It is important to understand the racial, ethnic, and linguistic diversity in this country, because it will—or should—influence and dictate the work of policymakers, researchers, educators, and service providers. Millions of diverse people build ways of living together, participating in collective problem solving among individuals and groups. Their everyday lives are shaped by shared historical experiences—and cultures are born. Chapter 2 is devoted to definitions and concepts, but in this chapter, we briefly define two primary concepts that occur throughout this text: culture and cultural responsiveness. We also discuss unconscious bias.

DEFINITION OF CULTURE

At its core, culture is a set of factors from multiple dimensions that can describe how people experience life and engage in daily practices. Culture is learned and transmitted socially through patterns of behavior driven by such factors as problem-solving strategies, value systems, beliefs, symbols, attitudes, religion, artifacts, and communication. We learn these practices over time, and they become our culture. How we accept these variations, especially when they go well beyond our own personal preferences, speaks to our sensitivity level for other cultures—yet we can, and do, fit into a variety of cultures. Some cultural connections come more naturally than others. We return to this concept of culture throughout the book.

Table 1–2. Top Five Languages Other Than English Spoken at Home in the U.S. in 2023

Language	Number of Speakers
Spanish	43,369,734
Chinese (includes Mandarin, Cantonese)	3,531,221
Tagalog (includes Filipino)	1,803,005
Vietnamese	1,570,595
Arabic	1,423,225

Source: Statista (2025).

In our daily interactions, we encounter cultures that are different from our own. It is up to us individually and as part of a group to decide who or what we accept or reject. We measure differences and similarities and then make choices. We reject some cultural practices outright—consciously or unconsciously. There are degrees of this decision-making paradigm that are acceptable and unacceptable according to the laws of the countries where we reside; however, the current published documents through the Equal Employment Opportunity Commission (EEOC) in the United States can be misleading (Travis, 2025). Under the current president of the United States (the 47th president), the EEOC describes "illegal DEI (diversity, equity, and inclusion)" defined as "taking employment action 'motivated—in whole or part—by race, sex, or another protected characteristic' " (EEOC, n.d.). In short, the EEOC under the 47th president of the United States has rolled back protections offered to people who have been historically discriminated against in the United States and has indicated that it is now permissible to discriminate against groups with protected characteristics. Individuals in the United States continue to be excluded, exploited, or disadvantaged based on race, sex, gender, religion, socioeconomic status, and ability level. Ten former EEOC officials

wrote a letter against the current EEOC policy of "illegal DEI." They stated that the current EEOC chair "makes misleading statements about common DEI practices" and that "DEI practices remain legal and necessary for advancing equal employment opportunity" (Travis, 2025, paragraph 2). Apart from the laws of the country, each person has a personal choice in how to live their life and how to treat others, and much of that is framed by what they have learned over time, their experiences, and their culture.

Let's read a story that may or may not be familiar to you. Interject yourself into the scenarios in Box 1–1 and take the time to consider how you would decide to accept or reject some of these cultural practices. Are they new and interesting to you, or are they so different that you could not possibly adapt or consider them under any circumstances? Are you willing to say, "This is not for me, but I understand how these individuals may benefit from this experience?" Are they common for you because of the region of the country or part of the world in which you live? Do you enjoy the rituals, the fruits of labor, and the familial comradery?

In groups of four, investigate and discuss one of the four cultural events in Box 1–1. The individual groups can first discuss the events together and then with the larger class. These events should be considered personal invitations you received from a professional colleague in your work setting.

Box 1–1. Cultural Events

1. La Matanza (pig slaughtering feast) in New Mexico; there are similar animal feasts in other parts of the country and the world.
2. A birthday party for a 12-year-old Deaf child, where most but not all of the communication will be in sign language.
3. A graduation afterparty sponsored by your colleague for her relative, who is a DACA student; many of your colleague's family members are undocumented and primarily speak Spanish.
4. A baptismal ceremony for the adopted daughter of your colleague's sister. The child is two years old and was adopted from an orphanage in Asia.

As you think about the cases in Box 1–1, ask yourself these questions:

- Do you stay or leave the event?
- If you stay, do you actively partake?
- Do you think what they are doing is right?
- Do you place a value judgment on any part of this event or the people and their choices?
- Do you ever accept another invitation from this colleague after this event?
- Are the cultures of work and of the event so different that you now see this colleague in a different (perhaps more negative or more positive) way?
- Should you accept all aspects of this new experience to be culturally sensitive or culturally responsive?
- Did you have a joyful experience? Why?
- Has your lived experience previously included these types of events?
- Do you think you could adapt or consider these events even if they were unfamiliar to you at the start?

CULTURAL RESPONSIVENESS

The idea of cultural competence is difficult to conceptualize. It appears to be an all-or-nothing phenomenon—either we are competent, or we are not. But as with any other skill, being competent is an evolving process. Sometimes

the term *competence* itself causes confusion. A concept that is increasingly being promoted in education literature is *culturally sustaining pedagogies* (Alim & Paris, 2017; Paris, 2012), which focus on schools sustaining cultures of People of Color. Specifically, according to Paris (2012), culturally sustaining practice seeks to "sustain linguistic, literate and cultural pluralism" in schools (p. 93). Throughout this text, however, we have chosen to use another term. **Cultural responsiveness** provides us with a broader perspective from which to view our behaviors as they relate to our actions with individuals across a variety of cultures that are different from our own. In 1994, pedagogical theorist and educator Gloria Ladson-Billings discussed pedagogy that was relevant and responsive to the cultures of the children being taught. Culturally responsive practices are those that take the client's cultural perspectives, beliefs, and values into consideration in all aspects of education or providing a service (Gay, 2018; Ladson-Billings, 1994, 1995).

Each person's degree of cultural responsiveness is a product of the fusion of their experiences and influences. Our feelings and the decisions we make about our behavior toward others are not linear. There is not one point in time when we can say we are safely culturally responsive in every one of our interactions. Cultural responsiveness is, so to speak, always a work in progress. How we communicate with our world systems stems from a more circular framework of decision-making. It can be said that we go in and out of being culturally responsive at various points in time. We hope that, as you read and reflect on the writings in this text, your reactions to the people, families, and communities with whom you work and collaborate will become more and more *responsive* to their cultural worldviews, beliefs, and values.

In their 1989 writings about cultural competence, Cross et al. described the lowest level of development, calling it "cultural destructiveness." Cultural destructiveness reveals complete lack of empathy for anything or anyone outside the individual's belief system. At this level, individuals and groups are willing to destroy others for self-serving purposes. The Tuskegee experiments are a good example of cultural destructiveness. Beginning in 1932, the U.S. Public Health Service conducted the Tuskegee experiments to study the course of syphilis in Black/African American men, intentionally withholding treatment (Gray, 2013). The 600 men in the study (399 with syphilis and 201 without the disease) were not completely informed of the purpose or risks of the study, and "had been misled and had not been given all the facts required to provide informed consent" (Centers for Disease Control and Prevention [CDC], 2016). Tragically, those with syphilis did not receive appropriate treatments, even as new cures became available over the 40 years of the study. The researchers were, in the end, found to be "unethically justified" (CDC, 2016). In 1997, President Bill Clinton apologized to the men and their families on behalf of the nation. The remaining men in the study, as well as their spouses, widows, and children, were provided health benefits for life (CDC, 2016). This is a clear example of cultural destructiveness and practices that disregard the value of the lives of others. Other examples of these types of atrocious practices are found throughout history, including:

- the enslavement of Africans and their forced transport from their homelands to the Americas and the Caribbean;
- the treatment of Jews by Hitler and the Germans;
- the hostile removal of Indigenous Americans/Native Americans from their lands throughout the United States;
- the riot in Charlottesville, Virginia, in August 2017 caused by the members of the Ku Klux Klan and other White nationalists marching down the street while carrying torches and guns and yelling obscenities