

## **CTI Self-Assessment Competency Framework**

Are you thinking of working in a low or middle income country and wanting a guide to develop your competence? The CTI Self-Assessment Competency (CommTiSac) Framework is intended as a guide to the skills and knowledge you will need to maximise your effectiveness, confidence and self-awareness when working in LMIC.

This framework has been written by members of Communication Therapy International (CTI). CTI's mission is to support professionals, including Speech and Language Therapists (SLTs), from High Income Countries (HICs), to maximize the impact of their work with people with communication disability in Low and Middle Income Countries (LMICs).

We would suggest that you use this framework in conjunction with the document *Working in Less Resourced Settings: Guidance for Allied Health Professionals* (1) developed jointly by Communication Therapy International, OT Frontiers and ADAPT (Chartered Physiotherapists working in International Health and Development).

We would recommend checking Covid-19 guidance for the country you are working in and compare with guidance in your home country. You should reflect on whether you are comfortable with the guidance and level of PPE provided. You should also carry out a personal risk assessment and consider levels of risk for the clients and families you are working with, in conjunction with colleagues in the country in which you're working. Please consider that as vaccines become available, vaccination levels in different countries are likely to vary depending on availability and costs for governments worldwide.

In addition, the Black Lives Matter movement has highlighted how colonialism, systemic racism and implicit bias has impacted healthcare and life more generally. This may be within countries but is also evident between countries, academic/ educational and healthcare systems. Making efforts to equalise any power imbalance between colleagues from LMICs and HICs will allow more effective collaboration to benefit PWDs. Having a mindset of 'coming to learn and collaborate', while acknowledging a position of privilege, rather than 'wanting to help' might be helpful.

The competencies were inspired by the *Global Health Competencies for UK Health Professionals* (2) and provide a structure for considering your own competence. During their development, we consulted widely with colleagues working or studying in the field of communication disability in LMIC, SLTs from the UK who have worked abroad and CTI members. We also sought feedback from final year SLT students who were considering working abroad. We are grateful for their valuable thoughts and comments and have adapted the framework in response. Please see appendix A for the list of those who gave feedback.

We welcome further feedback from colleagues who try them out and would like to hear how they are used. Please send any comments or suggestions to CTI at [CTImembership@gmail.com](mailto:CTImembership@gmail.com).

We are happy for them to be used but please reference us.

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The six competency areas:

1. Cultural responsiveness
2. Working with(in) existing health / social care / education systems
3. Working as a lone SLT & accessing supervision
4. Reflective practice and emotional resilience
5. Sharing skills and delivering training
6. Problem-solving with limited resources

We appreciate that they may at first seem difficult to use, because they rely on an ability to measure and determine your own competency. You may find it helpful to reflect on the framework and discuss with colleagues. We hope this will give you insight into what you could consider before going abroad to work and share your knowledge and experience in a different context. There will be further development of the competencies as part of a regular revision of Working in Less Resourced Settings: Guidance for Allied Health Professionals (1) and to incorporate changes worldwide in response to the global pandemic of 2020.

This document is not intended as a guide to the specific clinical skills required in communication or dysphagia, as these will be covered by the standards of proficiency upheld by the regulatory bodies in the country in which they hold professional registration.

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## Competency 1: Cultural responsiveness

Working in diverse communities all over the world requires an ability to interact sensitively and effectively with people from different cultural backgrounds. When working in a LMIC you may be the only person from your culture working in that setting and therefore an awareness of one's own culture and an ability to respond to and try to understand others' culture is essential. You may find yourself challenged by new cultural perspectives, factors to do with religious beliefs and other cultural practices. It is all the more important, therefore, to maintain reflective practice throughout. Knowledge of skills of ethnographic interviewing (3) may be helpful in reflecting on your own and others cultural perspectives.

### Descriptors

Aware	Proficient	Advisor
Aware of and actively reflects on own culture, own cultural bias and how this impacts on individual relationships across cultures	Implements ongoing process of personal development in relation to cultural responsiveness. Uses reflection, seeks opportunities for support and supervision in this area	Works with stakeholders and colleagues to ensure culturally appropriate and culturally reflective services
Aware of the intersection of colour, race, inequality and power and how this will influence therapy encounters	Actively uses this knowledge to challenge own and others' cultural beliefs and practices, working with others to develop culturally appropriate intervention	Applies and integrates knowledge and skills about culturally responsive practice to create policies and procedures which are culturally relevant in the settings
Aware of need to research issues relating to cultural differences and able to access support for researching these in advance of visit as well as during visit	Seeks feedback on own practice through discussion and consultation with local stakeholders and through support and supervision in order to ensure effective culturally responsive working practices are established and maintained	Regularly reviews and scrutinises practice using recognised cultural awareness audit processes and is able to develop processes appropriate to the setting for reviewing culturally responsive practice. Able to provide support and supervision to others in developing these processes

## Key knowledge and skills

- Knowledge of concepts of cultural humility, cultural competence, cultural confidence and cultural safety and ability to apply these to individual and organisational policy contexts
- Knowledge of cultural practices of the country being worked in and an awareness of the need to continually develop this knowledge with the support of local people
- Strong reflective skills and a commitment to using these in developing knowledge and skills

## Competency 2: Working with(in) existing Health, Social Care and Education Systems

Most LMICs will have some formal state health and education systems; these are often supported by private and / or non-governmental organisations. Navigation of health, social care and education systems in LMIC can be very different from HIC contexts where services are more established, regulated and publicised. For services to be effective and sustainable there is a need to embed new services and ways of working within the countries' existing systems. Be aware that it may be difficult to obtain information about government policies, objectives and service developments. As a visiting professional your working practices need to be sustainable and appropriate to the local context. When there is no shared language, you may need to access translation and interpreting support.

### Descriptors

Aware	Proficient	Advisor
Is aware of and has researched existing services (such as contacting RCSLT, CTI and conducting own research and contacting relevant local individuals and organisations)	Ensures existing services are aware of own service/projects aims and objectives	Works with stakeholders and colleagues to ensure high quality services which complement and are integrated with existing services
Is aware of health/ education services the local population can access and how they are funded	Knows most and has contact with some of key stakeholders in local services and can develop good working relationships	Works with other services to ensure a wide population is reached
Aware of some of the key stakeholders in local services (e.g. service users, government clinics and hospitals, special school, NGOs, voluntary organisations)	Knows of current health targets and policies for the country (e.g. governmental, NGOs, foreign aid)	Works with stakeholders and partners to develop ethical frameworks.

Awareness of local self-help support groups and able to refer to them	Able to set up self-help groups and support groups, encouraging basic self-advocacy for people with communication and swallowing disorders and their families. Can refer clients/ families to existing local self-help/ support groups	Able to advise and supervise/support colleagues to set up and facilitate such groups. Helps problem solve challenges. Supports groups to work towards becoming national support organisations. Shares information on onward referral agencies
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### Key knowledge and skills

- Knowledge of health policy at national and international level
- Knowledge of political climate of the country being worked in
- Strong negotiation and advocacy skills
- Skills in publicising services and supporting local groups to self-advocate

**Competency 3: Working as a lone SLT and accessing supervision (see also reflective practice)**

Working autonomously is essential in LMIC contexts where SLT provision is likely to be sparse and there may not be another SLT in the country/nearby. SLTs need to be aware of the boundaries of their role and that these may differ from professional boundaries in their home country. They also need to be aware that an existing local worker may already be doing some of the work of an SLT, so the visiting SLT needs to complement this through careful negotiation of role boundaries. SLTs need to know how and when to escalate to external networks of support, which may be in the country in question or in their home country. There may be a need to initiate and support small scale research projects on identified areas of need. Be alert to the possibility that SLT actions may compromise activities of local organisations; seek to discuss your actions with relevant local partners.

*Descriptors*

Aware	Proficient	Advisor
<p>Aware that there are implications of lone working in a LMIC, both benefits and drawbacks</p> <p>Aware of own skills and limitations with regards to working as a lone SLT</p> <p>Seek to establish a network of support prior to working in a LMIC</p>	<p>Creates and puts into practice practical solutions to some of the problems of lone working in a LMIC</p> <p>Can maintain professional boundaries when working as a lone SLT</p> <p>Able to draw on existing resources (people, networks, materials):</p> <ul style="list-style-type: none"> <li>-to set up networks of support (not necessarily from SLTs) in home country and in country of work</li> <li>- to reflect independently on own skills and limitations and know how and when to escalate concerns to networks of support</li> </ul>	<p>Evaluates solutions to issues of lone working and disseminates these to other colleagues</p> <p>Able to work with local partners to develop guidelines for autonomous working and supervision in LMIC and help set up local support systems</p> <p>Able to work with local partners to capacity build to ensure support networks are sustainable</p>

<p>Awareness of local / international guidelines for practising as an SLT and safeguarding (e.g. professional indemnity insurance, professional &amp; regulatory body membership, WHO safeguarding guidelines)</p>	<p>Seeks out local policies and procedures on safeguarding adults and children to maintain safety as an SLT practitioner (cf emotional resilience – there may not be any local safeguarding procedures in place and you may not be able to effect any change)</p>	<p>Working with partners to implement and develop organisation safeguarding procedures</p>
<p>Awareness of need to keep own skills and knowledge (CPD) updated through own research. This may involve identifying areas that require further research in collaboration with local SLTs</p>	<p>Able to plan and implement own CPD through recognising opportunities/ challenges, attending relevant training events (within the country or outside), using online resources etc. Able to develop research questions that could form part of collaborative research projects with local SLTs</p>	<p>Supervises other people's CPD in working in communication disability. Able to advise others on research possibilities, and signpost them to appropriate colleagues to support research projects.</p>
<p>Awareness of need to access supervision</p>	<p>Can think creatively about accessing supervision in new ways, e.g. via Whatsapp / Skype</p>	<p>Able to provide supervision remotely to SLTs in LMIC</p>

### Key knowledge and skills

- Knowledge of relevant support networks (both SLT and wider AHP colleagues)
- Knowledge of own registration with professional and regulatory bodies, local registration and international (if none exist in the country you are working in, see WHO guidelines and IALP (International Association of Logopedics and Phoniatics) guidance)
- Knowledge of models of supervision
- Research skills, including the ability to access research and learning opportunities for one's own clinical development

## Competency 4: Reflective Practice and Emotional Resilience

In speech and language therapy, reflective practice is required for the development of direct and indirect practice. Emotional resilience is the ability to adapt to stressful situations in both personal and professional contexts. Working in new contexts and experiencing new cultures requires a developed sense of emotional resilience – consider that reflecting on practice includes reflecting on your skill set and your ability to adapt to new environments before going abroad. Be aware that emotional resilience as a concept may be differently interpreted in different cultural contexts. There may be different cultural expectations in relation to work-life balance, working without remuneration and other concepts taken for granted in high income countries. It can be difficult to maintain appropriate boundaries with children and vulnerable adults in a new context, and it is important to consider carefully the attachments you build. Reflective practice is a key pillar within the UK and the USA but in countries where professions are at a different stage of development, the imposing of reflective practice can be interpreted in unexpected ways. The rich cultural diversity of different countries makes the practice of reflection multi-faceted and not one-dimensional.

### Descriptors

Aware	Proficient	Advisor
<p>Understands the role of reflective practice in speech and language therapy</p> <p>Aware of how reflective practice will be of benefit in the LMIC setting and across ‘types’ of therapeutic input (direct and indirect therapy)</p> <p>Has an understanding of emotional resilience and knows avenues of supervision (see competency 1). Aware of the need to maintain</p>	<p>Implements and evidences own reflective practice in the LMIC setting</p> <p>Able to draw on existing networks and knowledge to advocate for the need for reflective practice and emotional resilience to local stakeholders</p> <p>Evaluates own emotional resilience and the emotional resilience of others and adapts practice accordingly. Maintains healthy work/life balance and</p>	<p>Works with local partners to set up a reflective practice ethos and set up procedures to implement this (if it is not already established)</p> <p>Develops policies, procedures and guidance on reflective practice</p> <p>Models a high level of emotional resilience and reflective practice, including a commitment to a healthy work/life balance</p>

<p>work/life balance, especially when not surrounded by familiar sources of support and relaxation</p> <p>Will seek support when required. Starting to act as a “buddy” to support others</p>	<p>encourages others to do the same</p> <p>Is able to provide clinical and personal supervision support to others</p>	<p>Offers supervision to colleagues; remotely and those nearby</p>
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### Key knowledge and skills

- Knowledge of models of reflective practice
- Skills in independent reflection on practice
- Knowledge of supervision models and processes

## Competency 5: Sharing skills and delivering training

Skill sharing with families/carers, practitioners and other people working in communication disability etc., is a key area of need. It is critical to the sustainability and development of services for people with communication disability. Be aware that other people will bring with them skills, knowledge and experience which can be reciprocally shared. Be open to the learning these experiences will bring and be prepared to adapt your training in response. Basic skills in how to deliver training should underpin the different descriptors listed.

### Descriptors

Aware	Proficient	Advisor
Aware of the benefits and risks of training others for sustainability of practice	Works with local practitioners to develop small packages of training to meet the need of local professionals and communities	Able to work with local partners to develop train-the-trainer programmes, appropriate to the priorities and workforce of the local context
Seeks information about training already delivered in the locality: what, by whom, how it was delivered, how it was received, impact	Able to draw on existing resources (people, networks, materials) to support and consolidate skill sharing and implementation of previous training	Able to consider training needs and plan and implement training, CPD events, conferences, of all SLT colleagues within the country
Aware of the need to consider socio-cultural and language needs of the group being trained and those they may work with.	Is able to evaluate impact and sustainability of training the local organisation has already had. Able to build on these to design, deliver and measure outcomes of appropriate training to further address local priorities	Provides guidance and supervision on designing and implementing training for overseas SLTs working in LMIC
Attends suitable training / interest groups in home country before leaving for LMIC	Works with organisations that support professionals in LMICs (eg CTI, NGOs)	Able to develop and coordinate UK programmes for training UK SLTs to work effectively and appropriately in LMIC

<p>Aware of sources of support if student clinical placements are requested</p>	<p>Can supervise SLT students (or students from other professions as required) on clinical placements and mentoring to other staff using SLT skills in their work.</p>	<p>Maintains links with SLT training institutions within the country or outside in order to set up/organise student clinical placements.</p>
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#### Key knowledge and skills

- Understanding of adult learning models
- Experience of developing and delivering training for professionals and carers/ families
- Knowledge of existing training packages that can be adapted for a LMIC context
- Ability to consider different presentation methods in the absence of audio-visual technology
- Organisational and planning skills

## Competency 6: Problem-solving with limited resources

SLTs in low and middle income countries are not likely to have access to the same materials and resources as those in high income countries. An ability to think creatively and make use of the resources available is key. Be aware that your own knowledge and practice of resolving problems will not have been tried and tested locally so seek co-creation of solutions with local partners. This may include collaborating with local partners to develop SLT resources created with local material. This may relate to assessments, therapy, training, making resources and forming networks.

### Descriptors

Aware	Proficient	Advisor
<p>Aware that local solutions may not correspond directly to ones you are familiar with e.g. use of maize flour instead of commercial thickener in dysphagia</p>	<p>Use of frameworks/ protocols/ solutions when no local solutions exists this (e.g. IDDSI)</p>	<p>Able to work with local counterparts to co-create locally appropriate solutions e.g. to food textures</p>
<p>Aware of factors affecting how resources may be perceived and how others may view use of second hand materials e.g. Is it taboo to share certain things? May people feel as if not perceived worthy of new things?</p>	<p>Be able to think creatively and flexibly to make use of local materials and create sustainable solutions to problems encountered</p>	<p>Able to develop networks of craftspeople and create sustainable work for others</p>
<p>Being alert to barriers to people in LMIC obtaining knowledge and tailor activities as required (e.g. low literacy levels, limited internet access)</p>	<p>Able to develop some solutions to ways in which people can obtain information (e.g. use of radio media)</p>	<p>Able to teach flexible thinking, e.g. by use of problem based learning to students and professionals</p>
<p>Aware of appropriate resources to take from HIC to LMIC and seek information on what resources (e.g. stationery, craft items, toys, books etc) can be sourced within the country affordably</p>	<p>Able to select appropriate bought and donated resources to take to LMIC</p>	<p>Generates funding solutions to local resource problems</p>
<p>Awareness that some solutions may be outside the remit of the SLT and care to</p>	<p>Consideration of specific cultural norms around the presentation of solutions to</p>	<p>Development of and guidance given on solutions to work collaborative work with local</p>

be taken that not taking away someone else's job in areas of low employment e.g. a carpenter making children's toys	problems and how that intersects with perceived status as 'expert'	practitioner's and communities.
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Key knowledge and skills:

- Understanding of problem based learning
- Knowledge of informal options for assessment and therapy
- Research skills to seek out local resources
- Problem solving skills

## References

1. Working in Less Resourced Settings: Guidance for Allied Health Professionals (2017) <https://communicationtherapyinternational.org/resources-for-communication-disability-professionals-working-in-under-resourced-settings/preparation-for-working-in-a-lower-middle-income-country/>
2. Walpole, S., Shortall, C.& van Schalkwyk, M. et al. (2015) Global Health Competencies for UK Health Professionals. Available for download from [https://www.researchgate.net/publication/283086441\\_Global\\_Health\\_Competencies\\_for\\_UK\\_Health\\_Professionals#fullTextFileContent](https://www.researchgate.net/publication/283086441_Global_Health_Competencies_for_UK_Health_Professionals#fullTextFileContent)
3. Westby, C.,Burda, A. Mehta, Z. (2003) Asking the Right Questions in the Right Ways; Strategies for Ethnographic Interviewing in The ASHA Leader Vol.8, Issue 8, April 2003. <https://doi.org/10.1044/leader.FTR3.08082003.4>

## Selected further reading and resources

*Engaging in Global Health: The Framework for Voluntary Engagement in Global Health by the UK Health Sector.* Provides some helpful policy context for volunteering overseas as a UK Health Professional.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/352928/Engaging\\_in\\_Global\\_Health\\_1\\_.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/352928/Engaging_in_Global_Health_1_.pdf)

*Health Education England guidance for trainees planning to volunteer or work overseas.* This is aimed at medics but contains some helpful things to consider as an AHP.

<https://www.hee.nhs.uk/sites/default/files/documents/HEE%20Guidance%20for%20Trainees%20planning%20to%20volunteer%20or%20work%20overseas%20v2%20%28Low%20resolution%29.pdf>

Multi Agency International Training and Support (MAITS) have a list of resources available for health and education workers, trainers or carers.

<https://www.maits.org.uk/resources/>

Cerebral Palsy Africa provide four courses for working with children with CP

<http://www.cerebralpalsyafrika.co.uk/>

The London School of Hygiene and Tropical Medicine run short courses in areas which may be of interest to those working or volunteering in Low and Middle Income Countries.

<https://www.lshtm.ac.uk/study/courses/short-courses/a-z>

Future Learn host a free online course on Global Health and Disability.

<https://www.futurelearn.com/courses/global-disability>

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