

## **Cultural Competence Self-Test**

This self-assessment can assist care providers to identify areas in which they can improve the quality of their services to culturally diverse populations.

## Directions: Please circle your response to each statement listed below

# **Physical Environment, Materials & Resources**

- 1. I display pictures, posters, artwork and other decor that reflect the cultures and ethnic backgrounds of clients served. Frequently Occasionally Rarely/Never NA
- 2. I ensure that magazines, brochures and other printed materials in reception areas are of interest to and reflect the different cultures of individuals and families served. Frequently Occasionally Rarely/Never NA
- 3. When using videos, films or other media resources for health education, treatment or other interventions, I ensure that they reflect the cultures and ethnic background of individuals and families served. Frequently Occasionally Rarely/Never NA
- 4. I ensure that printed information used by my agency or program takes into account the average literacy levels of individuals and families receiving services. Frequently Occasionally Rarely/Never NA

# **Communication Styles**

- 5. I identify the primary language spoken by clients. Frequently Occasionally Rarely/Never NA
- 6. When interacting with individuals and families who have limited English proficiency, I keep in mind that their limited ability to speak the language of the dominant culture has no bearing on their ability to communicate effectively in their primary language. Frequently Occasionally Rarely/Never NA
- 7. I use trained medical interpreters for treatment, interventions, meetings or other events for individuals and families who need or prefer this level of assistance. Frequently Occasionally Rarely/Never NA
- 8. When possible, I ensure that all notices and communiqués to individuals and families are written in their language of origin. Frequently Occasionally Rarely/Never NA
- 9. I understand that it may be necessary to use alternatives to written communications for some individuals and families. Frequently Occasionally Rarely/Never NA

#### **Values & Attitudes**

10. I avoid imposing values that may conflict or be inconsistent with those of cultures or ethnic groups other than my own. Frequently Occasionally Rarely/Never NA

- 11. I intervene in an appropriate manner when I observe other staff or clients within my program or agency engaging in behaviors that show cultural insensitivity, racial biases and prejudice. Frequently Occasionally Rarely/Never NA
- 12. I understand that age, gender and life-cycle factors must be considered in interactions with individuals and families (e.g., high value placed on the decision of elders, the role of eldest male or female in families, or roles and expectation of children within the family). Frequently Occasionally Rarely/Never NA
- 13. Even though my professional or moral viewpoints may differ, I accept individuals and families as the ultimate decision makers for services and supports impacting their lives. Frequently Occasionally Rarely/Never NA
- 14. I recognize that the meaning or value of medical treatment and health education may vary greatly among cultures.

Frequently Occasionally Rarely/Never NA

- 15. I accept that religion and health care beliefs may influence how individuals and families respond to illnesses, disease and death. Frequently Occasionally Rarely/Never NA
- 16. I keep abreast of the major health concerns and issues for ethnically and racially diverse client populations residing in the geographic locale served by my program or agency. Frequently Occasionally Rarely/Never NA
- 17. I am well versed in the most current and proven practices, treatments and interventions for major health problems among ethnically and racially diverse groups within the geographic locale served by my agency or program. Frequently Occasionally Rarely/Never NA
- 18. I avail myself of professional development and training to enhance my knowledge and skills in the provision of services and supports to culturally, ethnically, racially and linguistically diverse groups. Frequently Occasionally Rarely/Never NA

How to use this checklist: This checklist is intended to heighten the awareness and sensitivity of personnel to the importance of cultural and linguistic competence in health and human service settings. It provides concrete examples of the kinds of beliefs, attitudes, values and practices that foster cultural and linguistic competence at the individual level. There is no answer key with correct responses. However, if you frequently responded "rarely/never," you may not necessarily demonstrate beliefs, attitudes, values and practices that promote cultural and linguistic competence within health care delivery programs.

Based on the results of this assessment, if you could change two things in the coming year, what would they be?

1.

2.