

**TABLE 2**  
**Guiding Questions for Critical Reflection**

- In what ways do I dominate the conversation? In what ways do I allow space for patients to narrate their story through my words and body language?
- Am I listening enough? Observing enough? How do I listen and observe? What are my practices? How do patients and family members interact? How do they use language?
- How does the structure of the setting shape social interaction?
- In what ways do I consider my patients' 'unique circumstances? Do I lump them together and base my interaction on previous experiences with members from their cultural group(s)?
- In what ways do I oversimplify my patients' cultural experience and not notice intragroup differences? What are my experiences with other members from this cultural community?
- What other information do I need to gather about patients' background? Do I have the resources to communicate with all my patients?
- In what ways do I reflect on my practice after patients leave my office?
- In what ways do clinic, hospital, insurance, and state policies shape the care I provide?
- In what ways are clinic, hospital, insurance, and state policies enacting racism, classism, sexism, and other power relations?
- What opportunities exist to advocate for the cultural communities that I serve in my health care context, community, state, and nation? In what ways do these sociocultural factors have a hold on my patient's health?
- What are my own cultural experiences? How do they shape my practice? What do I know and don't I know about my cultural background? What do I want to know?

*The reference for Table 2, Guiding Questions for Critical Reflection is:*

*Botelho, M., & Lima, C. (2020). From Cultural competence to cultural respect: A critical review of six models. Journal of Nursing Education, 59(6), 311-318.*

## Cultural Self-assessment Questionnaire

For each of the pairs of statements below, **choose either As or Bs** most representative of your attitudes.

- |                              |   |
|------------------------------|---|
| <input type="checkbox"/> 1A  | Although people may speak different languages and dress in different ways, beneath the surface everyone is the same.  |
| <input type="checkbox"/> 1B  | Beneath the surface, the values and assumptions held by diverse cultures may be very different from each other.   |
| <hr/>                        |   |
| <input type="checkbox"/> 2A  | Other people probably have the same basic beliefs and attitudes as I do.  |
| <input type="checkbox"/> 2B  | People in different cultures may well not have the same basic beliefs and attitudes as I do.  |
| <hr/>                        |   |
| <input type="checkbox"/> 3A  | I would find it relatively hard to identify a range of external influences (for example, profession, nationality and so on) on the way in which I think and behave. |
| <input type="checkbox"/> 3B  | I would find it relatively easy to identify a range of external influences (for example, profession, nationality and so on) on the way in which I think and behave. |
| <hr/>                        |   |
| <input type="checkbox"/> 4A  | It is not usually necessary to know too much about someone's background in order to come to an understanding of who they are.                                       |
| <input type="checkbox"/> 4B  | The only way to really know someone is to understand something about the cultures and social groups to which they belong.   |
| <hr/>                        |   |
| <input type="checkbox"/> 5A  | I think that first impressions are usually quite a good way of coming to a judgement about someone.   |
| <input type="checkbox"/> 5B  | I think that first impressions are rarely quite a good way of coming to a judgement about someone.  |
| <hr/>                        |   |
| <input type="checkbox"/> 6A  | I think that there is usually one best way of arriving at a decision.   |
| <input type="checkbox"/> 6B  | I think that different perspectives can contribute greatly to good decision-making.   |
| <hr/>                        |   |
| <input type="checkbox"/> 7A  | I think that diversity makes it harder for people to work together.   |
| <input type="checkbox"/> 7B  | I think that diversity makes a positive contribution to working together.   |
| <hr/>                        |   |
| <input type="checkbox"/> 8A  | I would find it quite hard to describe my basic values and beliefs, and the things that are most important to me as a person.                                       |
| <input type="checkbox"/> 8B  | I would find it quite easy to describe my basic values and beliefs, and the things that are most important to me as a person.                                       |
| <hr/>                        |   |
| <input type="checkbox"/> 9A  | I can rarely recognize when culture is having an impact on the effectiveness of my communication with people from different backgrounds.                            |
| <input type="checkbox"/> 9B  | I can usually recognize when culture is having an impact on the effectiveness of my communication with people from different backgrounds.                           |
| <hr/>                        |   |
| <input type="checkbox"/> 10A | I find it easy to recognize when I am suffering from stress and anxiety.  |
| <input type="checkbox"/> 10B | I find it difficult to recognize when I am suffering from stress and anxiety.   |

**Count the number of A and B answers and write down the totals below:**

**Total As:** \_\_\_\_\_ More As than Bs means being more culturally effective.

**Total Bs:** \_\_\_\_\_ More Bs than As means there is a need to develop more understanding of cultural implications

Adapted from *The Cross-Cultural Communication Trainer's Manual - Volume Two: Activities for Cross-Cultural Training*, John Cutler, Gower: Aldershot, 2005. Activity 3.

**TABLE 3**

**Cross-Cultural Interview Questions Regarding Serious Illness and End-of-Life Care**

“Some people want to know everything about their medical condition, and others do not. What is your preference?”

“Do you prefer to make medical decisions about future tests or treatments for yourself, or would you prefer that someone else make them for you?”

*To patients who request that the physician discuss their condition with family members: “Would you be more comfortable if I spoke with your (brother, son, daughter) alone, or would you like to be present?” If the patient chooses not to be present: “If you change your mind at any point and would like more information, please let me know. I will answer any questions you have.” (This exchange should be documented in the medical record.)*

*When discussing medical issues with family members, particularly through a translator, it is often helpful to confirm their understanding: “I want to be sure that I am explaining your mother's treatment options accurately. Could you explain to me what you understand about your mother's condition and the treatment that we are recommending?”*

“Is there anything that would be helpful for me to know about how your family/community/religious faith views serious illness and treatment?”

“Sometimes people are uncomfortable discussing these issues with a doctor who is of a different race or cultural background. Are you comfortable with me treating you? Will you please let me know if there is anything about your background that would be helpful for me to know in working with you or your (mother, father, sister, brother)?”

*Information from references 5, 19, and 25.*

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## 9.3 Cultural Diversity Awareness Questionnaire

### Purpose

1. To identify your attitudes and perspectives regarding cultural diversity
2. To help you become aware of and understand your prejudices and biases
3. To help you understand the potential consequences of your approach to diversity in the workplace

### Directions

1. Read each statement and circle the number that best describes your belief or behavior.
2. Be as candid as possible with your responses; there are no right or wrong answers.

	Never	Almost Never	Sometimes	Almost Always	Always
1. I am aware of my own biases and how they affect my thinking.	1	2	3	4	5
2. I can honestly assess my strengths and weaknesses in the area of diversity and try to improve myself.	1	2	3	4	5
3. I assume good intent and ask for clarification when I don't understand what was said or implied.	1	2	3	4	5
4. I challenge others when they make racial/ethnic/sexually offensive comments or jokes.	1	2	3	4	5
5. I speak up if I witness another person being humiliated or discriminated against.	1	2	3	4	5
6. I do not participate in jokes that are derogatory to any individual group.	1	2	3	4	5
7. I don't believe that my having a friend of color means that I'm culturally competent.	1	2	3	4	5
8. I understand why a lack of diversity in my social circle may be perceived as excluding others.	1	2	3	4	5

	Never	Almost Never	Sometimes	Almost Always	Always
9. I realize that people of other cultures have a need to support one another and connect as a group.	1	2	3	4	5
10. I do not make assumptions about a person or individual group until I have verified the facts on my own.	1	2	3	4	5
11. I have multiple friends from a variety of ethnicities and abilities.	1	2	3	4	5
12. I connect easily with people who look different from me and am able to communicate easily with them.	1	2	3	4	5
13. I'm interested in the ideas and beliefs of people who don't think and believe as I do, and I respect their opinions even when I disagree.	1	2	3	4	5
14. I work to make sure people who are different from me are heard and accepted.	1	2	3	4	5
15. I recognize and avoid language that reinforces stereotypes.	1	2	3	4	5
16. I know others' stereotypes associated with my ethnicity.	1	2	3	4	5
17. I encourage people who are culturally different from myself to speak out on their issues and concerns, and I validate their issues and concerns.	1	2	3	4	5
18. I avoid assuming that others will have the same reaction as I do when discussing or viewing an issue.	1	2	3	4	5
19. I understand that I'm a product of my upbringing and believe there are valid beliefs other than my own.	1	2	3	4	5
20. I do not take physical characteristics into account when interacting with others or when making decisions about others' competence or ability.	1	2	3	4	5

	Never	Almost Never	Sometimes	Almost Always	Always
21. I recognize that others stereotypeme, and i try to overcome their perceptions.	1	2	3	4	5
22. I include people who are culturallydifferent from myself in team decision-making processes that impact them.	1	2	3	4	5
23. I actively seek opportunities to connectwith people who are different from meand seek to build rapport with them.	1	2	3	4	5
24. I believe “color blindness” is counterproductive and devalues aperson’s culture or history.	1	2	3	4	5
25. I avoid generalizing behaviors or attitudes of one individual in a group to others.	1	2	3	4	5
26. I actively convey that employees or students of varying backgrounds areas skilled and competent as others.	1	2	3	4	5
27. I do not try to justify acts of discrimination to make the victim feelbetter. i validate his/her assessmentof what occurred.	1	2	3	4	5
28. I try to learn about and appreciate therichness of other cultures and honortheir holidays and events.	1	2	3	4	5
29. I believe there are policies and practicesin place that negatively impact people outside the majority culture.	1	2	3	4	5
30. I understand the definition of internalized racism and how it impactspeople of color.	1	2	3	4	5
31. I believe that race is a social construct, not a scientific fact.	1	2	3	4	5
32. I know and accept that people’s experiences and background impact how they interact with and trust me.	1	2	3	4	5

*Source:* Adapted from Special Populations and CTE Illinois Leadership Project. (2016). *Cultural Diversity Self-Assessment*. Retrieved from <http://illinoiscte.org/index.php/resources/cultural-competency-module>

### Scoring

Sum the numbers you circled on the questionnaire. This number is your cultural diversity awareness score.

### Total Score

Cultural diversity awareness score: \_\_\_\_

### Scoring Interpretation

This self-assessment is designed to measure your beliefs and behavior regarding cultural diversity and inclusion. A *higher score* on the assessment indicates that you are acutely aware of prejudice and bias, and that you are very aware of the impact of your behavior on others. Individuals who score high relate to others in ways that value diversity. A *lower score* on the assessment suggests that you are unaware of prejudice and bias, and that you are not fully aware of the impact of your biased behavior on others. Individuals who score low communicate with others in ways that do not value diversity.

If your score is 130–160, you are in the very high range. If your score is 100–129, you are in the high range.

If your score is 70–99, you are in the moderate range.

If your score is 40–69, you are in the low range.

If your score is 0–39, you are in the very low range.

## Kagawa-Singer & Blackhall's ABCD Cultural Assessment Model

Kagawa-Singer and Blackhall developed a cultural assessment mnemonic approach to assess the degree of cultural adherence to help avoid stereotyping and decrease the risk of miscommunication (Kagawa-Singer & Blackhall, 2001).

The **ABCD** cultural assessment is outlined below:

Relevant Information	Questions and Strategies for the Health Care Provider
<b>Attitudes of parents and families:</b> <ul style="list-style-type: none"> <li>What attitudes does this ethnic /cultural group in general – and the patient and family in particular – have about truth telling with regard to diagnosis and prognosis?</li> <li>What is their general attitude towards discussion of death and dying?</li> <li>Do they have positive or negative attitudes about particular aspects of care?</li> </ul>	<ul style="list-style-type: none"> <li>Increase one's knowledge about the values, beliefs, and attitudes of the cultural group most frequently seen in your practice.</li> <li>Determine the patient and family's perception of an illness: <i>"What does your illness/sickness mean to you?"</i></li> <li>Determine if the patient uses traditional healing practices and for what problems.</li> <li>Determine if the patient or family has positive or negative attitudes about a particular aspect of care being addressed, such as advance directives.</li> </ul>
<b>Beliefs:</b> <ul style="list-style-type: none"> <li>What are the patient's and family's religious and spiritual beliefs, especially relating to the meaning of death and dying, the afterlife, and miracles?</li> </ul>	<ul style="list-style-type: none"> <li><i>"Spiritual or religious strength sustain many people in times of distress. What is important for me to know about your faith or spiritual needs?"</i></li> <li><i>"How can we support your needs and practices?"</i></li> <li><i>"Where do you find your strength to make sense of what is happening to you?"</i></li> </ul>
<b>Context:</b> <ul style="list-style-type: none"> <li>Determine the historical and political context of the patient's and family's lives, including place of birth, refugee or immigrant status, poverty, experience with discrimination, health disparities, languages spoken, and degree of integration within their ethnic community and the degree of assimilation into Western culture.</li> </ul>	<ul style="list-style-type: none"> <li><i>"Where were you born and raised?"</i></li> <li><i>"How long have you lived in the United States?" What has your experience been since coming to the U.S. (or the city)?"</i></li> <li><i>"How has your life changed since coming to the U.S.?"</i></li> <li><i>"What language are you most comfortable using when talking about your health care?"</i></li> <li><i>"What were other important times in your life that might help us better understand your situation?"</i></li> </ul>
<b>Decision-making style:</b> <ul style="list-style-type: none"> <li>What is the general decision-making style of the cultural group and specifically of the patient and family?</li> <li>Is the emphasis on the individual decision-making process or the family decision-making process?</li> </ul>	<ul style="list-style-type: none"> <li><i>"How are decisions about health care made in your family?"</i></li> <li><i>"Who is the head of the family?"</i></li> <li><i>"Is there anyone else I should talk to in your family about your condition?"</i></li> </ul>



<p>Environment:</p> <ul style="list-style-type: none"> <li>• What resources and support are available to the patient and family?</li> <li>• What resources are available to assist the health care provider to interpret the significance of the patient's culture?</li> </ul>	<ul style="list-style-type: none"> <li>• <i>Identify community resources that may be of assistance to the health care provider and the patient and family, such as translators, health care workers from the same community as the patient, community associations, religious leaders, and healers.</i></li> </ul>
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Kagawa-Singer, M., & Backhall, L. (2001). Negotiating cross-cultural issues at end of life. *Journal of American Medical Association*, 286(3001), 2993-.