

Social Work Cultural Competence Self-Test

The following self-assessment can assist care providers in identifying areas in which they might improve the quality of their services to culturally diverse populations.

Directions: Please rate each item listed below.

Physical Environment, Materials & Resources

1. Pictures, posters, artwork and other decor that reflect the cultures and ethnic backgrounds of clients served are displayed (in my office/in the agency)

Frequently Occasionally Rarely/Never NA

2. Magazines, brochures and other printed materials in reception areas of the agency in which I work are of interest to and reflect the different cultures/ethnicities/genders of individuals and families served.

Frequently Occasionally Rarely/Never NA

3. When using videos, films or other media resources for psycho-education, treatment or other interventions, my agency ensures that they reflect the cultures, ethnic and gender backgrounds of individuals and families served.

Frequently Occasionally Rarely/Never NA

4. Printed information disseminated at 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. Someone at my agency identifies 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. At my agency trained interpreters are used 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. At my agency when possible, all notices to individuals and families are written in their language of origin.

Frequently Occasionally Rarely/Never NA

9. My agency understands that it may be necessary to use alternatives to written communications for some individuals and families.

Frequently Occasionally Rarely/Never NA

Agency Values & Attitudes

10. As an agency, my colleagues and I avoid imposing values that may conflict or be inconsistent with those of cultures, ethnic or gender groups other than my own.

Frequently Occasionally Rarely/Never NA

11. As an agency, my colleagues and I intervene in an appropriate manner when we observe other staff or clients within the program or agency engaging in behaviors that show cultural, ethnic or gender insensitivity, racial biases and prejudice.

Frequently Occasionally Rarely/Never NA

12. We 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. At our agency, even when professional or moral viewpoints differ, my colleagues and I accept individuals and families as the ultimate decision makers for services and supports impacting their lives.

Frequently Occasionally Rarely/Never NA

14. My colleagues and 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

15. My colleagues and I are well versed in the most current and proven practices, treatments and interventions for minoritized ethnic, racial and gender groups within the geographic locale served by my agency or program.

Frequently Occasionally Rarely/Never NA

16. My colleagues and I avail ourselves to professional development and training to enhance our knowledge and skills in the provision of services and supports to minoritized individuals and 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 ten things in the coming year, what would they be?

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.