**Cultural Awareness Self-Assessment Checklist**

This checklist will help to build self-awareness and assess where you currently stand on the path of developing cultural competence. It can help uncover specific areas where you may be able to improve your cultural sensitivity. There is no answer key with correct responses and the checklist is intended to be only a tool for self-reflection. It is not intended to be an actual measure of cultural competence.

*Directions: Please select A, B, or C for each item listed below.*

**A** = Things I do frequently

**B** = Things I do occasionally

**C** = Things I do rarely or never

**Physical Environment, Materials, and Resources**

To the degree that I am able:

I ensure that magazines, brochures, and other printed materials in the reception and waiting areas are of interest to and reflect the different cultures of individuals and families served by my program or agency.

I ensure that printed educational information disseminated by my agency or program takes into account the average literacy levels of individuals and families receiving services.

**Communication Styles**

For individuals and families who speak languages or dialects other than English, I attempt to learn and use key words in their language so that I am better able to communicate with them during assessment, treatment, home visits, or other interventions.

I attempt to determine any familial colloquialisms (jargon or slang) used by individuals or families that may impact assessment, treatment, or other interventions.

I understand the principles and practices of linguistic competency and:

Apply them within my work or program.

Advocate for them within my program or agency.

**Values and Attitudes**

I avoid imposing values which may conflict or be inconsistent with those of cultures or ethnic groups other than my own.

I recognize and accept that individuals from culturally diverse backgrounds may desire varying degrees of acculturation into the dominant culture.

I understand and accept that family is defined differently by different cultures (e.g., extended family members, fictive kin, god parents).

I accept and respect that gender roles in families may vary significantly among different cultures (e.g., who makes major decisions for the family, expected social interactions).

I understand that age 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 expectations of children within the family).

Even though my professional or moral viewpoints may differ from persons I serve, I accept that individuals and families are the ultimate decision makers for services and supports impacting their lives.

I recognize that the meaning or value of medical treatment and health education may vary greatly across and within cultures.

Before visiting or providing services in the home setting, I seek information on acceptable behaviors, courtesies, customs, and expectations that are unique to the culturally and ethnically diverse groups served by my program or agency.

I accept that religion and other beliefs may influence how a family responds to illness, disease, disability, and death.

I pursue professional development and training opportunities to enhance my knowledge and skills in the provision of services and supports to culturally, ethnically, racially, and linguistically diverse groups.

*The items to which you responded “C” indicate areas where there may be room to improve your cultural sensitivity.*

Source: *Cultural Competency and Tuberculosis Care: A Guide for Self-Study and Self-Assessment* (Global Tuberculosis Institute, 2008).