

# Cultural Competence Checklist: Service Delivery

## Ratings:

- 1 Things that I always do
- 2 Things that I sometimes do
- 3 Things that I rarely do

This tool was developed to heighten your awareness of how you view clients/patients from culturally and linguistically diverse (CLD) populations.

\*There is no answer key; however, you should review responses that you rated a 3 or even a 2.

- I include the clients and their families as partners in determining outcomes for treatment.
- I recognize differences in narrative styles and pragmatic behaviors that vary across cultures.
- I learn about acceptable behaviors and customs that are prevalent in my clients' cultures.
- I consider my clients' beliefs in both traditional and alternative medicines when I prescribe a treatment regimen.
- I respect my client's decision to seek alternative treatments from a holistic practitioner.
- I understand that some individuals may have different reading levels in English and/or their native language(s).
- I provide written information for clients to take home in their preferred languages.
- I seek assistance from trained interpreters, bilingual coworkers and those in related professions who can help interpret, as needed.
- I have trained my interpreters using clearly defined roles and responsibilities to assist me in providing services to linguistically diverse populations.
- I ask questions about the client's language developmental history.
- I ask clients' family members and friends about the clients' ability to use their native language(s).
- I ask clients' family members and friends about the clients' exposure to English and native language(s).
- I use assessment tools and materials (e.g., language batteries, articulation assessments, Pb word lists, spondee word lists) that are not biased in favor of or against any one population.
- I consider all of the available research evidence.
- I consider the cultural and linguistic background of my clients when I select treatment materials (e.g., pictures, books/workbooks, flashcards, videos, music, food).

## I consider clients' and their families' norms and preferences when planning:

- Appointments
- Community outings
- Holiday celebrations
- Meals, snacks
- Services in the home
- Homework/recommendations for caregivers

## I allow for alternative methods of sharing experiences and communication, such as:

- Story telling
- Use of props to support the "oral tradition" that is prevalent in some cultures.

## I allow for alternatives to written communication, which may be preferred, such as:

- Communicating verbally
- Modeling the recommendations
- Use of video/audio clips

## When communicating with clients whose native language is NOT English, I use:

- Key words or signs in their language
- Visual aids
- Gestures/physical prompts
- Trained Interpreters/translators

## I am aware that individuals from my clients' racial/ethnic background may have a higher incidence of specific disorders/diseases that may have implications for speech, language and hearing, including:

- Sickle Cell Anemia
- Hypertension
- Diabetes
- Cardiovascular disease
- Frequent middle ear and upper respiratory infections

Source: American Speech-Language-Hearing Association. (2010). Cultural Competence Checklist: Service delivery. Available from [www.asha.org/uploadedFiles/practice/multicultural/personalreflections.pdf](http://www.asha.org/uploadedFiles/practice/multicultural/personalreflections.pdf)



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