



Bridging Refugee Youth & Children's Services

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Culturally Competent Family Strengths Assessment Tool

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Culturally Competent Family Strengths Assessment Tool

This instrument is constructed on a Strength Based Model:

I believe that individuals, cultures, and communities have resilient characteristics that have caused them to be alive now. One of our first tasks as clinicians/case workers in providing services to these groups should be to seek to discover these resilient characteristics. Providing services in such an environment should compel us to move away from culturally-based assumptions and deficit-focused frameworks in order to allow the individual to articulate their vision/presenting problem. As experts, our roles should be to fill in the details. We should move away from working in isolation and beyond rhetoric. This is the purpose for this instrument.

This instrument is intended to assist clinicians and other others working in a multicultural environment to integrate culture into their clinical practice/case management. It is also intended to assist clinicians in making a culturally competent diagnosis and utilizing appropriate treatment interventions to address the problem.

Culturally Competent Family Strengths Assessment Tool

Date:

Social Worker:

Agency:

Demographic Information

Name:

Address:

Phone #:

Back up phone #:

Date of Births of All Household Members:

Family's Country of Origin:

Languages spoken in the home:

Status: Newly arrived refugee family receiving active services through resettlement agency Refugee family not receiving active services through resettlement agency Naturalized citizens

Insurance (for community referrals): Medicaid Other (specify:)

Referring Agency:

Referring Agency Case Worker:

Phone #:

Has the family agreed to Family Stabilization Services? Y N

Who has legal custody of the children? Full custody Shared Placement Only

Cultural and Socioeconomic Identity

1. Describe the client's* customs, beliefs, values, religion, interpersonal and familial relationships, and any other relevant information related to their worldview.
2. Compare the client's answer to Question One with others' worldview, both in and outside of their culture.
3. Prior to coming to the U.S., was the client exposed to American/Western culture?
4. Describe each family member's level of acculturation. Is there a particular family member who has the most knowledge of American culture?
5. What is the client's educational background, both before coming to the U.S. and since being in the U.S.?
6. What is the client's employment background, both before coming to the U.S. and since being in the U.S.?

Perception of the Problem & Expression of Symptoms

7. How does the client define the problem? (Note the words the client uses, particularly if a particular expression is used. If needed, work with an interpreter to interpret its meaning.)
8. What does the client believe is the source of the stress? What are the contributing factors?
9. How does the community explain the client's presenting problem or mental illness? Is there a stigma associated with it?
10. Is the client's experience with this stressor fairly common for refugees? Is it fairly common for their particular refugee community (i.e. Iraqi, etc.)? Is it fairly common for individuals and families in their city or state?

Help-Seeking Behaviors

11. What type of treatment did the client or community traditionally access in the country of origin (i.e. hospitals, traditional medicine, etc.)?
12. What is the role of the kin network in providing care?
13. What are the client's beliefs about treatment? What does the client think is needed to get better? Include any non-Western interventions discussed.

** The "client" refers to the family as well as each member of the family unit. Within each question, it is important to assess each family member as well as the family unit as a whole.*