CULTURALLY RESPONSIVE, TRAUMA-INFORMED CLINICAL INTAKE & FORMULATION

Cultural Context, Identity, & Family Values Clinical Questionnaire

Collaborative Assessment Tool for Exploring Heritage, Family Dynamics, Strengths, & Healing Beliefs

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> **Clinical Rationale & Cultural Humility Approach:** Culture shapes how individuals experience distress, define family roles, express emotion, and seek healing **(SAMHSA, 2014; APA, 2022)**. Rather than making assumptions based on race, ethnicity, nationality, or surname, this questionnaire invites the client—in their own words—to share the cultural identities, family expectations, spiritual traditions, and systemic stressors that matter most to their care.

Client Name / Chosen Name & Pronouns: _____	**Assessment Date / Age:** _____
Preferred Language(s) (Spoken / Written / Interpreter): _____	**Clinician / Provider Name & Role:** _____

Part 1: Principles for Culturally Humble Administration

1. **Follow the Client's Self-Definition:** Use the client's own words for their racial, ethnic, cultural, spiritual, gender, and community identities rather than forcing narrow demographic boxes **(Hook et al., 2017)**.
2. **Honor Both Protective Strengths & Intergenerational Tensions:** Explore how culture and family serve as sources of resilience and belonging, while gently creating space for any intergenerational, immigration, or role conflicts.
3. **Ensure Independent Language Access:** Always offer a qualified, independent interpreter in the client's preferred language—never rely on family members or companions to translate clinical sessions.

Part 2: Cultural Identity, Family Structure, & Healing Questionnaire

Complete collaboratively during intake or early sessions, or provide as a self-reflection form. Clients may skip any question they prefer not to answer.

Client Prompt & Clinical Focus	Client's Words, Reflections, & Context
Domain 1: Cultural Identity, Heritage, & Language	
1.1 "How do you describe your cultural background, heritage, or the communities that feel like 'home' to you? Which parts of your identity are most important for me to understand?" Captures intersectional identity (race, ethnicity, nationality, faith, LGBTQ+ identity, disability, regional roots).	

Client Prompt & Clinical Focus	Client's Words, Reflections, & Context
1.2 "What language(s) do you feel most comfortable using to talk about feelings, stress, or health, and what language(s) are spoken at home?" Identifies linguistic preferences, bilingual emotional expression, and potential language brokering roles.	
Domain 2: Family Roles, Expectations, & Decision-Making	
2.1 "Who do you consider part of your family or chosen support circle, and how are important decisions typically made in your family?" Clarifies extended/chosen kinship networks and individualist vs. collective decision-making norms.	
2.2 "What expectations or responsibilities do you carry within your family (such as caregiving, financial support, educational goals, or keeping family matters private)?" Explores filial duty, gendered expectations, privacy norms, and potential sources of pride or pressure.	
2.3 "Are there any differences in cultural values, migration experiences, or expectations between you and other generations in your family that create stress?" Identifies acculturative gaps, intergenerational trauma, or bicultural identity strain.	
Domain 3: Beliefs About Distress, Wellness, & Help-Seeking	
3.1 "In your family or culture, how do people usually talk about—or cope with—emotional pain, stress, trauma, or substance use?" Illuminates cultural idioms of distress, stigma barriers, and unspoken rules around vulnerability.	
3.2 "What cultural, spiritual, faith-based, or traditional healing practices give you strength, comfort, or grounding?" Identifies protective cultural assets (prayer, community rituals, elders, music, ancestral practices) to integrate into care.	
Domain 4: Experiences of Discrimination, Safety, & Therapeutic Preferences	
4.1 "Have experiences of racism, discrimination, immigration stress, or feeling misunderstood in healthcare/schools affected your wellbeing or trust in providers?" Validates racial/systemic trauma and informs trust-building within the therapeutic relationship.	

Client Prompt & Clinical Focus	Client's Words, Reflections, & Context
4.2 "How would you like your family, faith leaders, or cultural practices included (or kept separate) in our work together?" Establishes clear collaborative boundaries around family involvement and culturally tailored interventions.	

Part 3: Collaborative Care Plan Integration Summary

Clinical Formulation Dimension	How We Will Honor & Integrate This in Care
Cultural & Family Protective Strengths	
Cultural / Systemic Stressors & Stigma Considerations	
Family Involvement & Language / Accessibility Plan	

Additional Clinician & Client Reflections

Practice Standards & References

1. American Psychiatric Association (APA). (2022). *Diagnostic and Statistical Manual of Mental Disorders* (5th ed., text rev.; Cultural Formulation Interview framework). American Psychiatric Association Publishing.
2. Hook, J. N., Davis, D., Owen, J., & DeBlaere, C. (2017). *Cultural Humility: Engaging Diverse Identities in Therapy*. American Psychological Association.
3. Substance Abuse and Mental Health Services Administration (SAMHSA). (2014). *Improving Cultural Competence* (Treatment Improvement Protocol [TIP] Series, No. 59). HHS Publication No. (SMA) 14-4849.

Clinical & Originality Notice: *All assessment prompts and formulation tables in this questionnaire are original clinical items developed for educational and intake use, informed by public federal guidance (SAMHSA TIP 59) and published cultural humility scholarship (Hook et al., 2017; APA, 2022). No copyrighted third-party instruments are reproduced herein. © 2026 Klasey Consulting. All rights reserved.*

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