

# Conversation Starters: Culture and Needs



The beliefs, values, perceptions, norms, interactions, and behavior shared among a group are what we refer to as culture. Culture has an impact on our healthcare. Starting a conversation around culture and language can be challenging.

As healthcare professionals, we want our conversations to help a person feel better or supported and not make them feel disrespected, stigmatized, or threatened. The “Conversation Starters: Culture and Needs” tip sheet includes questions to begin a respectful approach to discussing cultural aspects with members. Providers can use this conversation tool to adequately prepare for and conduct the intake process. It can also be used as a reference for important and complementary questions to ask during visits with patients. This is not an assessment. It will help your client gain an understanding of how culture will affect healthcare decisions and the supports needed to reach their desired health goals.

Culture is the foundation of our understanding of the world and the language that we use to describe ourselves and our beliefs. There are ten elements impacted by a person’s culture that we want to help you talk about. The elements and questions do not need to be asked in any certain order. Begin with the element that is most comfortable to you or most appropriate for the situation and skip around to other questions as the conversation flows.

## 1. Communication

- What is the best way to reach you?
- How do you speak with others in your family?
- What is your preferred language?
- In what language are you most comfortable speaking and reading?
- Do you have any special hearing or visual needs?

## 2. Education

- How far did you go in school?
- Are you currently enrolled in school?
- Ask about developmental milestones to explore issues outside of education.

## 3. Health and Wellness

- What are your thoughts or feelings about your health? (mental, physical, or spiritual health)
  - Why do you think that you are feeling this way?
  - What do you think caused this?
- Do you have any health and wellness goals?
- Do you have any health concerns?
- What is worrying you?
- Are you currently taking any medication or supplements?
- How do you feel about taking prescription medications?
- Are there natural remedies you prefer over medications?

## 4. Solution-Focused Therapy, Group Counseling

- Have you ever been involved in a process like this before?
- These might work for individual counseling: What is your view of behavioral health? What is your cultural view of mental illness? Addiction?

## 5. Gender and Sexuality

- What are your preferred pronouns?\*
  - What sex were you assigned at birth?
  - How do you identify?
  - What sex are you attracted to? What is your sexual orientation?
- \*You may consider referencing the client’s intake form/assessment to see if they have shared their pronouns before.

## 6. Holidays, Religion, and Spirituality

- Do you or your family have any spiritual beliefs or religious affiliations important to you?
- Is there a specific religion you identify with?
- Have you attended or do you currently attend a place where you practice your beliefs?
- Do you hold specific beliefs about dealing with illness that will help you?
- Does your family have any special traditions or activities they celebrate? How do you celebrate? Are there any significant times of the year for you?

## 7. Family, Friends, and Community

- Are you connected with any family members or friends?
  - Are your friends from the same cultural background as you? Who is your ‘go-to’ person? Who do you confide in?
- What do current or previous relationships look like?
- Describe your community to me.
  - Are you involved with your community?
  - Do you have specific groups in which you are interested?
- How would you describe your family? How does your family describe their values, culture, and beliefs? In your culture or family belief system, what is the role of family and children?

## 8. Decision-Making

- How are others involved in your care?
- Who would you like included in making decisions about managing your health?
- Who makes the decisions in your family?

## 9. Food

- What do your current eating habits look like? Are there foods that you do not eat? Explore reasons why.
- Do you restrict eating to certain times or days? Do you fast?

## 10. Race, Ethnicity, and Nationality

- Where were you born? Where were your parents born?
- Do you identify by race, ethnicity, or nationality?
- What is your cultural background?
- Do you have traditions that connect with your background?
- When you were growing up, who lived with you and your family?
- How are elders viewed in your culture?
- Is your culture known for any special customs (e.g., rites of passage, foods, and holidays)?

## General

- Where are you staying? (Housing)
  - Explore multiple generations living together.
- Who do you share your meals with? (Connectiveness) When someone in your family is ill, who cares for them? What foods are prepared? Is there anything the ill person should avoid or refrain from doing?
- What are the things that make the child or family feel good about themselves and help make their life meaningful?