Kagawa-Singer & Blackhall’s ABCD Cultural Assessment Model

Kagawa-Singer and Blackhall developed a cultural assessment mnemonic approach to assess the degree of cultural adherence to help avoid stereotyping and decrease the risk of miscommunication (Kagawa-Singer & Backhall, 2001). The **ABCD** cultural assessment is outlined below:

<table>
<thead>
<tr>
<th>Relevant Information</th>
<th>Questions and Strategies for the Health Care</th>
</tr>
</thead>
</table>
| **A**ttitudes of parents and families: | • Increase one’s knowledge about the values, beliefs, and attitudes of the cultural group most frequently seen in your practice.  
  • Determine the patient and family’s perception of an illness: “What does your illness/sickness mean to you?”  
  • Determine if the patient uses traditional healing practices and for what problems.  
  • Determine if the patient or family has positive or negative attitudes about a particular aspect of care being addressed, such as advance directives. |
| • What attitudes does this ethnic/cultural group in general – and the patient and family in particular – have about truth telling with regard to diagnosis and prognosis?  
  • What is their general attitude towards discussion of death and dying?  
  • Do they have positive or negative attitudes about particular aspects of care? |
| **B**eliefs: | • “Spiritual or religious strength sustain many people in times of distress. What is important for me to know about your faith or spiritual needs?”  
  • “How can we support your needs and practices?”  
  • “Where do you find your strength to make sense of what is happening to you?” |
| • What are the patient’s and family’s religious and spiritual beliefs, especially relating to the meaning of death and dying, the afterlife, and miracles? |
| **C**ontext: | • “Where were you born and raised?”  
  • “How long have you lived in the United States? What has your experience been since coming to the U.S. (or the city)?”  
  • “How has your life changed since coming to the U.S.?”  
  • “What language are you most comfortable using when talking about your health care?”  
  • “What were other important times in your life that might help us better understand your situation?” |
| • Determine the historical and political context of the patient’s and family’s lives, including place of birth, refugee or immigrant status, poverty, experience with discrimination, health disparities, language spoken, and degree of integration within their ethnic community and the degree of assimilation into Western culture. |
| **D**ecision-making style: | • “How are decisions about health care made in your family?”  
  • “Who is the head of the family?”  
  • “Is there anyone else I should talk to in your family about your condition?” |
| • What is the general decision-making style of the cultural group and specifically of the patient and family?  
  • Is the emphasis on the individual decision-making process or the family decision-making process? |
**Environment:**
- What resources and support are available to the patient and family?
- What resources are available to assist the health care provider to interpret the significance of the patient’s culture?

- Identify community resources that may be of assistance to the health care provider and the patient and family, such as translators, health care workers from the same community as the patient, community associations, religious leaders, and healers.