

Cultural Formulation Interview

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GUIDE TO INTERVIEWER:

INSTRUCTIONS TO THE INTERVIEWER ARE IN ITALICS, BOLD, AND CAPITALIZED.

THE FOLLOWING QUESTIONS AIM TO CLARIFY KEY ASPECTS OF THE PRESENTING CLINICAL PROBLEM FROM THE PATIENT’S POINT OF VIEW, INCLUDING ITS MEANING, POTENTIAL SOURCES OF HELP, AND EXPECTATIONS FOR SERVICES.

INTRODUCTION FOR THE PATIENT: I would like to understand the problems that bring you here so that I can help you more effectively. I want to know about your experience and ideas. I will ask some questions about what is going on and how you are dealing with it. There are no right or wrong answers. I just want to know your views and those of other important people in your life.

CULTURAL DEFINITION OF THE PROBLEM

ELICIT THE PATIENT’S VIEW OF CORE PROBLEMS AND KEY CONCERNS.

What problems or concerns bring you to the clinic? (If patient only mentions symptoms, probe: Anything else?)

FOCUS ON THE ASPECTS OF THE PROBLEM THAT MATTER MOST TO THE PATIENT.

What troubles you most about your problem?

ASK FOR THE PATIENT’S OWN WAY OF UNDERSTANDING THE PROBLEM.

People often understand their problems in their own way, which may be similar or different from how doctors explain the problem. How would you describe your problem to someone else?

THIS CAN BE A CULTURAL LABEL, A TERM IN A DIFFERENT LANGUAGE OR AN INFORMAL EXPRESSION.

Sometimes people use particular words or phrases to talk about their problems. Is there a specific term or expression that describes your problem?

YES NO If YES: What is it?

USE THE TERM, EXPRESSION, OR BRIEF DESCRIPTION TO IDENTIFY THE PROBLEM IN SUBSEQUENT QUESTIONS.

CULTURAL PERCEPTIONS OF CAUSE, CONTEXT, AND SUPPORT CAUSES

THIS QUESTION INDICATES THE MEANING OF THE CONDITION FOR THE PATIENT, WHICH MAY BE RELEVANT FOR CLINICAL CARE.

Why do you think this is happening to you?

What do you think are the particular causes of your [PROBLEM]?

PROMPT FURTHER IF REQUIRED: Some people may explain their problem as the result of bad things that happen in their life, problems with others, a physical illness, a spiritual reason, or by some other cause.

STRESSORS AND SUPPORTS

IDENTIFY STRESSORS THAT COULD BE ADDRESSED DURING TREATMENT.

What, if anything, makes your [PROBLEM] worse, or makes it harder to cope with?

CLARIFY IDEAS ABOUT NEGATIVE EFFECTS OF THE SOCIAL NETWORK ON THE PATIENT'S PROBLEM.

IF DOES NOT MENTION FAMILY/SOCIAL NETWORK: What have your family, friends, and other people in your life done that may have made your [PROBLEM] worse?

LISTEN FOR COPING STRATEGIES, RESOURCES, SOCIAL SUPPORTS AND RESILIENCE.

What, if anything, makes your [PROBLEM] better, or helps you cope with it more easily?

CLARIFY HOW THE PATIENT'S FAMILY AND SOCIAL NETWORKS HELP TO COPE WITH THE PROBLEM.

IF DOES NOT MENTION FAMILY/SOCIAL NETWORK: What have your family, friends, and other people in your life done that may have made your [PROBLEM] better?

ROLE OF CULTURAL IDENTITY

ASK THE PATIENT TO REFLECT ON ELEMENTS OF HIS/HER CULTURAL IDENTITY THAT ARE IMPORTANT LIFE PROBLEMS.

Is there anything about your background, for example your culture, race, ethnicity, religion or geographical origin that is causing problems for you in your current life situation?

YES NO If YES: In What Way?

ASK THE PATIENT TO REFLECT ON ELEMENTS OF HIS/HER CULTURAL IDENTITY THAT CONSTITUTE IMPORTANT SUPPORTS.

On the other hand, is there anything about your background that helps you to cope with your current life situation?

YES NO If YES: In what way?

CULTURAL FACTORS AFFECTING SELF COPING AND PAST HELP SEEKING

CLARIFY SELF-COPING FOR THE PROBLEM.

Sometimes people consider various ways of making themselves feel better. What have you done on your own to cope with your [PROBLEM]?

LISTEN FOR MENTAL HEALTH TREATMENT, MEDICAL CARE, SUPPORT GROUPS, WORK-BASED COUNSELING, FOLK HEALING, RELIGIOUS OR SPIRITUAL COUNSELING, OR OTHER ALTERNATIVE HEALING.

Often, people also look for help from other individuals, groups, or institutions to help them feel better. In the past, what kind of treatment or help from other sources have you sought for your [PROBLEM]?

IF SOUGHT OUTSIDE HELP

CLARIFY THE PATIENT'S EXPERIENCE AND REGARD FOR PREVIOUS TREATMENT.

What type of help or treatment was most useful? Why?/How?

What type of help or treatment was not useful? Why?/How?

CLARIFY THE ROLE OF SOCIAL BARRIERS TO HELP-SEEKING, ACCESS TO CARE, AND PROBLEMS ENGAGING IN PREVIOUS TREATMENT.

Has anything prevented you from getting the help you need-- for example, cost or lack of insurance coverage, getting time off work or family responsibilities, concern about stigma or discrimination, or lack of services that understand your language or culture?

YES NO If YES: What got in the way?

CURRENT HELP-SEEKING

CLINICIAN-PATIENT RELATIONSHIP

ELICIT POSSIBLE CONCERNS ABOUT THE CLINICIAN-PATIENT RELATIONSHIP, INCLUDING PERCEIVED RACISM OR CULTURAL DIFFERENCES THAT MAY UNDERMINE COMMUNICATION, GOODWILL, OR CARE DELIVERY.

Now let's talk about the help you would be getting here. Is there anything about my own background that might make it difficult for me to understand or help you with your [PROBLEM]?

YES NO If YES: In what way?/Why not?

ADDRESS POSSIBLE BARRIERS TO CARE OR CONCERNS ABOUT THE CLINICIAN-PATIENT RELATIONSHIP RAISED PREVIOUSLY.

How can I and others at our clinic be most helpful for you?

PREFERENCES

CLARIFY PATIENT'S CURRENT PERCEIVED NEEDS AND EXPECTATIONS OF MENTAL HEALTH SERVICES (E.G., PSYCHOTHERAPY, SPECIFIC ADVICE, MEDICATION, REFERRAL, OR ASSISTANCE WITH DISABILITY BENEFITS).

What kind of help would you like from us now, as specialists in mental health?

HERE THE CLINICIAN SUMMARIZES THE MAIN POINTS AND MAKES A TRANSITION TO THE REST OF THE INTERVIEW: