

Cultural Formulation Worksheet (Supervision Use)

Identity, Power, Bias Check, and Adaptations (Inman, 2013)

Document Type: Supervision Tool (De-identified; supervision/QA record)

Purpose: To structure culturally responsive case conceptualization and supervision decision-making by explicitly addressing identity, context, power, bias, and culturally congruent adaptations.

Case and Session Information

- **Date:** // _____
- **Supervisor:** _____
- **Supervisee:** _____
- **Case ID (de-identified):** _____
- **Client presenting concern(s):** _____
- **Setting/modality:** In-person Telehealth Hybrid
- **Languages used / interpretation needs:** _____

1) Cultural Identity and Social Location (Client and Clinician)

A. Client identity and context (as known/relevant)

Check and specify salient identities (only those relevant to care):

- Race/ethnicity: _____ Nationality/immigration history: _____
- Language(s): _____ Religion/spirituality: _____
- Age/life stage: _____ Disability/neurodiversity: _____
- SES/class: _____ Education/literacy/health literacy: _____
- Military/veteran status: _____
- Family structure/roles: _____ Community affiliation: _____
- Housing/employment/legal involvement: _____
- **Other salient identity/culture factors:** _____

B. Clinician identity and positionality (supervisee)

- **Salient identities that may shape perception/care:** _____
- **Cultural worldview/assumptions relevant to this case:** _____
- **Lived experience overlaps/differences (clinician–client):** _____

2) Cultural Explanations of Distress and Help-Seeking



A. Client's explanatory model

- **How does the client name/understand the problem?** _____
- **Meaning of symptoms within cultural/community context:** _____
- **Preferred coping/solutions (traditional/community/spiritual):** _____
- **Prior help-seeking experiences and trust concerns:** _____
- **Stigma/shame concerns (mental health, substance use, trauma, etc.):** _____

B. Cultural strengths and protective factors

- **Family/community supports:** _____
- **Cultural values that can support recovery (e.g., collectivism, faith, duty):** _____
- **Identity-based resilience and pride:** _____

3) Context, Systems, and Social Determinants (Structural Lens)

Check relevant conditions and document clinical implications:

- **Discrimination/racism/xenophobia:** _____
- **Poverty/financial strain:** _____
- **Housing instability:** _____
- **Access barriers (transport, childcare, insurance, broadband):** _____
- **Education/literacy barriers:** _____
- **Workplace conditions (injury, shift work, hostile environment):** _____
- **Legal involvement/custody/immigration stressors:** _____
- **Community violence/safety threats:** _____
- **Clinical implication (how context affects symptoms/treatment engagement):** _____

4) Power, Privilege, and Safety in the Therapeutic/Supervision Relationship**A. Power dynamics (client-clinician)**

- **Differences in authority/status (e.g., mandated care, custody, employer referral):** _____
- **Potential areas of mistrust or fear (systems, documentation, confidentiality):** _____



• **What has been done to increase psychological and cultural safety?**

- Explicit consent discussion Transparency about notes/records
- Choice/agency emphasized Collaborative goal-setting
- Interpreter/cultural broker used Other: _____

B. Power dynamics (supervisor–supervisee)

• **Any cultural/power dynamics affecting supervision feedback/evaluation:**

• **Steps to support fairness and openness in supervision:**

- Clarified evaluative role Normalized feedback/repair Invited supervisee perspective
- Structured criteria/rubrics used Other: _____

5) Bias Check and Assumption Audit (Required)

Use this section as a structured “pause” before finalizing case conclusions.

A. What assumptions might be operating?

- **About the client’s motivation/character:** _____
- **About family/community roles:** _____
- **About risk/safety (e.g., perceived threat, credibility):** _____
- **About diagnosis (over/under-pathologizing):** _____

B. What evidence supports vs. contradicts these assumptions?

- **Supporting evidence:** _____
- **Contradicting evidence:** _____

C. What data do we still need?

- **Questions to ask next session:** _____
- **Collateral/assessment tools needed (with consent):** _____

D. Supervisor bias check (optional but recommended)

- **What might I (supervisor) be missing or over-weighting?** _____



6) Culturally Responsive Case Conceptualization (Working Hypothesis)

Integrate culture + context into a concise working formulation:

- **Primary drivers/maintaining factors:** _____
- **Cultural/contextual contributors:** _____
- **Strengths/protective factors:** _____
- **Risk factors and mitigation:** _____

7) Treatment and Supervision Adaptations (Actionable Plan)

A. Clinical adaptations (select and specify)

- Language access plan (interpreter, translated materials)
- Modify psychoeducation to fit worldview/health literacy
- Adjust pacing/structure (trust-building, engagement, session format)
- Incorporate client’s cultural coping resources (faith/community/traditions)
- Family/system involvement (with consent)
- Address structural barriers (case management, resource navigation)
- Modify interventions to reduce stigma (framings, metaphors)
- Safety planning tailored to cultural/contextual realities
- Other: _____

Specific adaptation(s) to implement next:

1. _____
2. _____

B. Supervision adaptations (how supervision will support the above)

- Review recordings with cultural lens checklist
- Role-play culturally responsive language
- Consult cultural broker/specialist (as appropriate)
- Increase observation for high-stakes interactions
- Monitor for diagnostic overshadowing/bias
- Other: _____



8) Outcome Monitoring and Follow-Up

- **How will we know adaptations are working?** (measures/indicators)

Engagement (attendance, alliance) Symptom change Goal progress Client satisfaction

Functional improvement Reduced crises Other: _____

- **Follow-up date in supervision:** // _____

- **Items to revisit next supervision:**

1. _____ 2) _____

3) _____

Sign-Off (Optional)

Supervisee: _____ **Date:** // _____

Supervisor: _____ **Date:** // _____

