

Clinicians' Cultural Sensitivity Survey (CCSS-29)

CCSS English and Spanish Surveys and Scoring Instructions

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More information about the CCSS-29 and the concept of cultural sensitivity is available on the Center for Aging in Diverse Communities website:

<https://cadc.ucsf.edu/clinicians-cultural-sensitivity-survey>

Clinicians' Cultural Sensitivity Survey (CCSS-29)

The *Clinicians' Cultural Sensitivity Survey (CCSS-29)* is a 29-item multidimensional questionnaire that assesses several domains of cultural sensitivity identified in our qualitative research with ethnically diverse patients (Nápoles-Springer et al, 2005).

Method of Administration

The CCSS-29 is designed to be interviewer-administered because of the need to administer some items only to patients with limited English proficiency or to immigrants.

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Publication

Information on its development and testing is presented in Nápoles et al., 2012. It was administered to over 500 English- and Spanish-speaking Latinos from primary care practices. The final measures resulted from analyses of these data.

Nápoles AM, Santoyo-Olsson J, Farren G, Olmstead J, Cabral R, Ross B, Gregorich SE, Stewart AL. The patient-reported Clinicians' Cultural Sensitivity Survey: a field test among older Latino primary care patients. *Health Expectations*, 2012; 15(1):63-77. [PMC3570254](https://pubmed.ncbi.nlm.nih.gov/23570254/)

- A supplement to this article contains the final 29-item survey, descriptive statistics including reliability, factor loadings, and inter-factor correlations. [Download supplemental material.](#)



Scoring Instructions: CCSS-29

Scales: The CCSS-29 comprises 14 multi-item scales: 11 are relevant for all patients, two for those with limited English proficiency, and one for immigrants (# of items in parentheses).

All respondents

- Complementary and alternative medicine (2)
- Mind-body connections (2)
- Causal attributions of health problem (2)
- Preventive care (2)
- Family involvement (2)
- Modesty (2)
- Prescription medications (1)
- Spirituality (1)
- Physician discrimination due to education (2)
- Physician discrimination due to race/ethnicity (2)
- Staff discrimination due to race/ethnicity (2)

For persons with limited English proficiency

- Discrimination due to language needs (3)
- Sensitivity to language needs (3)

For immigrants

- Sensitivity to immigration status (3)

Direction of scoring: all CCSS scales are scored so that higher scores indicate higher frequency of the labeled domain, which means that higher scores sometimes indicate better processes (e.g., *greater sensitivity to complementary and alternative medicine*) and sometimes indicate worse processes (e.g., *discrimination due to race/ethnicity*).

Scoring: No item reversals are needed to create the summary scales. Scale scores for each respondent are calculated as the mean of their responses to the corresponding non-missing items (i.e., item responses are averaged, not summed). This results in scale scores with a possible range of 1-5 and allows individual scale scores to be calculated whenever at least one item per scale has a valid response. Two domains, *prescription medications* and *spirituality*, consist of single items.

Missing data: for the three group-specific measures (two for those with limited English proficiency and one for immigrants), scores are calculated only for those who “skipped in” to the section, thus the sample size will be smaller for these scales.



Scoring the CCSS-29: Scale Names, Direction of Scoring, Item Numbers, and Definitions

DOMAIN/ Scale	Item Numbers	Definition
<i>For all respondents</i>		
SENSITIVITY TO CULTURAL BELIEFS AND PRACTICES		
Complementary and alternative medicine (+)	1, 2	Doctors asked if patient used alternative medicines (1) and if patient used traditional or home remedies (2)
Mind-body connections (+)	3, 4	Doctors asked if patient's personal life was affecting their health (3) and how patient's health was affecting their life (4)
Causal attribution of health problem (+)	5, 6	Doctors seemed interested in what patient thought might be causing health problem (5) and really listened to what patient thought was causing health problem (6)
Preventive care (+)	7, 8	Doctors talked to patient about ways to stay healthy (7) and the importance of preventing health problems before getting sick (8)
Family involvement (+)	9, 10	Doctors asked if patient wanted to include a family member or a friend during a visit (9) and if patient wanted to talk to a family member or friends before making a treatment decision (10)
Modesty (+)	11, 12	Doctors took a few moments to put the patient at ease before examination (11) and made patient feel comfortable enough to talk about health concerns that might be embarrassing (12)
Use of prescription medications (+)	13	Doctors asked if patient might have concerns about taking prescription medications (13)
Spirituality (+)	14	Doctors asked if patient had any religious or spiritual beliefs that might influence their health or health care (14)
DISCRIMINATION		
Discrimination due to education (-)	15, 16	Doctors made negative assumptions about patient's level of education (15) and assumed patient would not understand their explanations (16)
Discrimination due to race/ethnicity (-)	17, 18	Doctors paid less attention to patient (17) and discriminated against patient because of their race or ethnicity (18)
Staff discrimination due to race/ethnicity (-)	19, 20	Office staff discriminated against patient (19) and made negative assumptions about patient because of their race/ethnicity (20)
<i>For persons with limited English proficiency</i>		
Sensitivity to language needs (+)	21, 22, 23	Doctors asked what language patient wanted to speak in (21) and if patient needed an interpreter (22); office staff asked if patient needed an interpreter (23)
Discrimination due to language needs (-)	24, 25, 26	Doctors discriminated against patient (24), office staff ignored patient (25), and office staff discriminated against patient because patient does not speak English very well or fluently (26)



**Scoring the CCSS-29: Scale Names, Direction of Scoring,
Item Numbers, and Definitions**

DOMAIN/ Scale	Item Numbers	Definition
<i>For immigrants</i>		
Sensitivity to immigrant status (+)	27, 28, 29	Doctors took into account how being an immigrant might affect patient's health (27), that being an immigrant might make patient feel tense or isolated (28), and that as an immigrant, patient may be less familiar with the U.S. health care system (29)

*+ indicates high score is better processes; – indicates high score is worse processes



CLINICIANS' CULTURAL SENSITIVITY SURVEY (CCSS-29)

INTERVIEWER SCRIPT: The following questions are about your experiences talking with your doctor(s) at [*clinic name*] over the past 12 months. If you see more than one doctor at that clinic, please tell us, on average, how often they did the following:

	Never	Rarely	Sometimes	Usually	Always
1. How often did doctors ask if you use alternative medicines?	1	2	3	4	5
2. How often did doctors ask you about whether you use any traditional or home remedies?	1	2	3	4	5
3. How often did doctors ask if your personal life was affecting your health such as worries you might have or stress?	1	2	3	4	5
4. How often did doctors ask how your health was affecting your life?	1	2	3	4	5
5. How often did doctors seem interested in what you thought might be causing your health problem?	1	2	3	4	5
6. How often did doctors really listen to what you thought was causing your health problem?	1	2	3	4	5
7. How often did doctors talk to you about ways to stay healthy?	1	2	3	4	5
8. How often did doctors talk to you about the importance of preventing health problems before you get sick?	1	2	3	4	5
9. How often did doctors ask if you wanted to include a family member or a friend during your medical visit?	1	2	3	4	5
10. How often did doctors ask if you wanted to talk to your family or friends before making a decision about your treatment?	1	2	3	4	5
11. How often did doctors take a few moments to put you at ease before examining you?	1	2	3	4	5
12. How often did doctors make you feel comfortable enough to talk about health concerns that might be embarrassing?	1	2	3	4	5



	Never	Rarely	Some- times	Usually	Always
13. How often did doctors ask if you might have concerns about taking prescription medicines?	1	2	3	4	5
14. How often did doctors ask if you had any religious or spiritual beliefs that might influence your health or health care?	1	2	3	4	5
15. How often did doctors make negative assumptions about your level of education?	1	2	3	4	5
16. How often did doctors assume that you would not understand their explanations?	1	2	3	4	5
17. How often did doctors pay less attention to you because of your race or ethnicity?	1	2	3	4	5
18. How often did you feel discriminated against by doctors because of your race or ethnicity?	1	2	3	4	5
19. How often did you feel discriminated against by office staff because of your race or ethnicity?	1	2	3	4	5
20. How often did office staff make negative assumptions about you because of your race or ethnicity?	1	2	3	4	5
These next questions (21-26) are for persons who do not speak English very well.					
SUGGESTION FOR INTERVIEWERS: Ask the person, “which language do you prefer for your medical visits?” If they answer “Spanish,” ask questions 21-26.					
	Never	Rarely	Some- times	Usually	Always
21. How often did doctors ask what language you wanted to speak in?	1	2	3	4	5
22. How often did doctors ask if you needed an interpreter?	1	2	3	4	5
23. How often did office staff ask you if you needed an interpreter?	1	2	3	4	5
24. How often did you feel discriminated against by doctors because you do not speak English very well or fluently?	1	2	3	4	5



	Never	Rarely	Sometimes	Usually	Always
25. How often did you feel ignored by office staff because you do not speak English very well or fluently?	1	2	3	4	5
26. How often did you feel discriminated against by office staff because you do not speak English very well or fluently?	1	2	3	4	5
<p>The last 3 questions are for persons born outside of the United States.</p> <p>SUGGESTIONS FOR INTERVIEWERS: Ask the person, “in which country were you born?” If they answer a country other than the United States, ask questions 27-29.</p>					
27. How often did doctors take into account how being an immigrant might affect your health?	1	2	3	4	5
28. How often did doctors take into account that being an immigrant may make you feel tense or isolated?	1	2	3	4	5
29. How often did doctors take into account that as an immigrant you may be less familiar with the health care system in the U.S.?	1	2	3	4	5



CLINICIANS' CULTURAL SENSITIVITY SURVEY (CCSS-29): SPANISH

Las siguientes preguntas son acerca de sus experiencias al hablar con su médico(s) en [nombre de la clínica] durante los últimos 12 meses. Si ve más de un médico en esa clínica, por favor díganos, en promedio, la frecuencia con que hizo lo siguiente.

	Nunca	Casi nunca	A veces	Frecuente-mente	Siempre
1. ¿Con qué frecuencia le preguntaron los doctores si usted usa medicinas alternativas?	1	2	3	4	5
2. ¿Con qué frecuencia le preguntaron los doctores si usted usa remedios tradicionales o caseros?	1	2	3	4	5
3. ¿Con qué frecuencia le preguntaron los doctores si su vida personal estaba afectando su salud, tal como preocupaciones que usted tiene o estrés?	1	2	3	4	5
4. ¿Con qué frecuencia le preguntaron los doctores cómo su salud estaba afectando su vida?	1	2	3	4	5
5. ¿Con qué frecuencia parecían interesados los doctores en lo que usted pensaba que podía estarle causando su problema de salud?	1	2	3	4	5
6. ¿Con qué frecuencia los doctores realmente prestaron atención a lo que usted pensó que le estaba causando su problema de salud?	1	2	3	4	5
7. ¿Con qué frecuencia le hablaron los doctores sobre las cosas que puede hacer para mantenerse saludable?	1	2	3	4	5
8. ¿Con qué frecuencia le hablaron los doctores sobre la importancia de prevenir los problemas de salud antes de enfermarse?	1	2	3	4	5
9. ¿Con qué frecuencia le preguntaron los doctores si usted quería que le acompañe un miembro de su familia o un amigo/a en su visita médica?	1	2	3	4	5
10. ¿Con qué frecuencia le preguntaron los doctores si le gustaría hablar con su familia o amigos antes de tomar una decisión acerca de su tratamiento?	1	2	3	4	5
11. ¿Con qué frecuencia tomaron los doctores unos minutos para hacerle sentirse cómodo/a antes de examinarle?	1	2	3	4	5



	Nunca	Casi nunca	A veces	Frecuente -mente	Siempre
12. ¿Con qué frecuencia le hicieron los doctores sentirse suficientemente cómodo/a para hablar acerca de algún problema de salud que puede causar pena o vergüenza?	1	2	3	4	5
13. ¿Con qué frecuencia le preguntaron los doctores si usted tenía alguna preocupación acerca de tomar medicinas que son recetadas?	1	2	3	4	5
14. ¿Con qué frecuencia le preguntaron los doctores si usted tenía alguna creencia religiosa o espiritual que pudiera influir su salud o cuidado médico?	1	2	3	4	5
15. ¿Con qué frecuencia sacaron conclusiones negativas los doctores acerca de su nivel de educación?	1	2	3	4	5
16. ¿Con qué frecuencia pensaron los doctores que usted no iba a entender las explicaciones que le daban?	1	2	3	4	5
17. ¿Con qué frecuencia le prestaron menos atención los doctores debido a su raza o grupo étnico?	1	2	3	4	5
18. ¿Con qué frecuencia sintió usted que los doctores le discriminaron debido a su raza o grupo étnico?	1	2	3	4	5
19. ¿Con qué frecuencia sintió usted que el personal de la oficina le discriminó debido a su raza o grupo étnico?	1	2	3	4	5
20. ¿Con qué frecuencia el personal de la oficina sacó conclusiones negativas acerca de usted debido a su raza o grupo étnico?	1	2	3	4	5
Las siguientes preguntas (21-26) son para las personas que no hablen inglés muy bien. SUGERENCIAS PARA LAS PERSONAS QUE HAGAN LAS ENTREVISTAS: El entrevistador(a) le puede preguntar primero a la persona, “¿en cuál idioma prefiere recibir su atención médica?” Si responde “en español,” hágale las preguntas 21-26.					
	Nunca	Casi nunca	A veces	Frecuente -mente	Siempre
21. ¿Con qué frecuencia le preguntaron los doctores en que idioma quería usted hablar?	1	2	3	4	5



	Nunca	Casi nunca	A veces	Frecuente -mente	Siempre
22. ¿Con qué frecuencia le preguntaron los doctores si usted necesitaba un intérprete?	1	2	3	4	5
23. ¿Con qué frecuencia le preguntó el personal de la oficina si usted necesitaba un intérprete?	1	2	3	4	5
24. ¿Con qué frecuencia sintió usted que los doctores le discriminaron porque usted no habla muy bien o con fluidez el inglés?	1	2	3	4	5
25. ¿Con qué frecuencia sintió que el personal de la oficina no le hacía caso debido a que usted no habla muy bien o con fluidez el inglés?	1	2	3	4	5
26. ¿Con qué frecuencia se sintió discriminado/a por el personal de la oficina debido a que usted no habla muy bien o con fluidez el inglés?	1	2	3	4	5

Las 3 últimas preguntas son para las personas nacidos fuera de los EEUU.

SUGERENCIAS PARA LAS PERSONAS HACIENDO LAS ENTREVISTAS: El entrevistador(a) le puede preguntar primero a la persona, “¿en qué país nació usted?” Si responde otro país que no sea los EEUU, hágale las preguntas 27-29.

	Nunca	Casi nunca	A veces	Frecuente -mente	Siempre
27. ¿Con qué frecuencia tomaron en cuenta los doctores que su situación de inmigrante puede estar afectando su salud?	1	2	3	4	5
28. ¿Con qué frecuencia tomaron en cuenta los doctores que su situación de inmigrante puede hacerle sentir tenso/a o aislado/a?	1	2	3	4	5
29. ¿Con qué frecuencia tomaron en cuenta los doctores que debido a su situación de inmigrante quizás usted no conoce bien el sistema de cuidado médico de los Estados Unidos?	1	2	3	4	5

