

Bridging Cultures: Empowering LCSWs to Deliver Culturally Congruent Care (CCC)

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Introduction

Ethnically diverse individuals experience disparities in mental health care (American Psychiatric Association, 2017, Center for Disease Control, 2023; Arundell et al., 2021; Office of the Surgeon General (US); Center for Mental Health Services (US); National Institute of Mental Health (US), 2001) including access, treatment, and outcomes, that are potentially long-lasting (American Psychiatric Association, 2017) and lead to negative impacts on health and productivity (Office of the Surgeon General (US); Center for Mental Health Services (US); National Institute of Mental Health (US), 2001). Licensed Clinical Social Workers (LCSWs) comprise 26% of the licensed behavioral health workforce in California (California Department of Consumer Affairs, 2024) which is lacking in the provision of culturally congruent mental health care.

Research Question

What do LCSWs need in order to provide culturally congruent care?

Methods and Findings

Design: Qualitative Needs Assessment using thematic analysis

Sample: 25 participants recruited with convenience and snowball sampling

Data Collection: Individual interviews over Zoom with demographic questionnaires in Qualtrics

Data Analysis: Thematic Analysis

Epistemology: Social Constructivist

Theoretical Frameworks: Intersectionality, Critical Race Theory, Relational Theory, Intersubjectivity Theory

Findings: 6 Themes

- 1) Clinician Identity
- 2) Ways of Knowing and Learning
- 3) Work Environments
- 4) Co-created Therapeutic Space
- 5) Culturally Congruent Care Needs, Facilitators and Limiters
- 6) Providing Culturally Congruent Care

Clinicians need:
courage, self-awareness,
flexibility,
and
support
to provide
culturally
congruent care.



Results

How to Provide Culturally Congruent Care

- 1) Ways of Being
 - a. Be a courageous clinician
 - b. Practice self-awareness
 - c. Be flexible
- 2) Clinical Approaches
 - a. Create safety
 - b. Partner with the client as the expert
 - c. Obtain culturally-informed consent
 - d. Conduct cultural assessments
 - e. Engage in cultural treatment planning
 - f. Approach sessions with culturally-informed practices and interventions
- 3) Collaboration
 - a. Share knowledge with colleagues
 - b. Develop a support system

Implications

Practice: Clinicians need self-reflective tools and practices to support their ability to remain present and model courage in sessions. Clinicians need access to tools and resources about different cultures’ historical and present contexts. It’s helpful to take a systems approach, to ask clarifying questions, and to develop diverse consultation and support networks.

Education: MSW programs should include community immersions and off-site retreats. Update supplemental reading lists to include diverse authors. Integrate culture into all classes. Invite diverse guest speakers to include multiple perspectives. Incorporate culture into practicum supervision and seminar classes.

Post-graduate Trainings: Provide live and in-person multi-day trainings with mature and diverse trainers at off-site locations to cultivate safety. Ensure training or break-out groups for supervisors. Offer optional CEUs. Include guest speakers and clinician panels to share about cultural mistakes they’ve made in clinical work.

Organizations: Expand translator services to offer in-person. Provide client communications and flyers in multiple languages. Recognize a variety of cultures to support a move away from Eurocentrism. Allocate time for consultation and research. Encourage differences, courage, and open-mindedness.

References

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