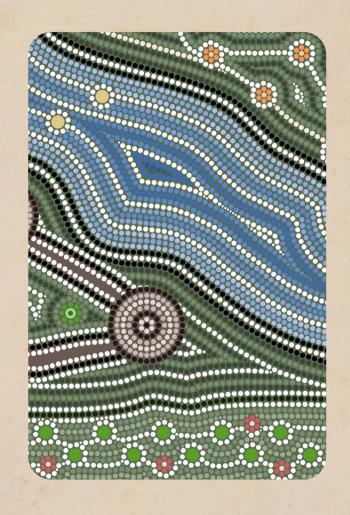


# An introduction into Cultural Intelligence in Mental Health

WITH

**MONIQUE TOOHEY** 

PSYCHOLOGIST & CULTURAL INTELLIGENCE ADVISOR



www.cmw.org.au

# **Culture Matters**

Am I safe? - Who am I? - How do I enact goodness? Where do I belong?

Wellbeing - Identity - Purpose - Belonging





When we don't have enough cultural knowledge we interpret each others thoughts, beliefs and behaviours through the narrow prism of our own culture(s).

Minimise

**Exaggerate & generalise** 

4.

Colour blind

**Stereotypes** 

· It's their personality

It's their culture'

Faulty thinking leads to misattributions





Values and Beliefs; Communication Styles; Approaches to parenting and partnering; Gender roles; Family structures; Attitude toward hierarchy; Sense of independence vs interdependence; Sense of individual power & need for autonomy; Approaches to Conflict Resolution & problem solving; Locus of control; Time Orientation; **Boundary setting** 







A TAR NROSC/RNCA

### CULTURE IS QUITE LITERALLY IN THE BRAIN.

- 'Language' is a cultural capacity of the brain.
- 'Tradition and cultural scripts' are stored in Long Term Memory.
- Zhang et el. (2006) found that when individuals from <u>individualist</u> cultures think about their self and a close other (such as a mother), two regions of the brain are activated representing 'self' and 'other'.
- By contrast, when individuals from <u>collectivist</u> cultures think about themselves and a close other, only one region of the brain activates.
- The process of enculturation impacts brain functioning.





# WE DON'T SEE THINGS AS THEY ARE. WE SEE THINGS AS WE ARE.

**Anais Nim** 













**Melbourne 2016 Writers Festival** 

■ MENU

CONTACT US WISHLIST CART



Monique Toohey









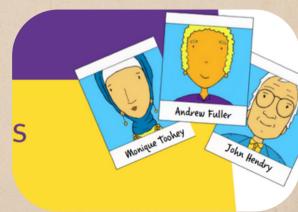












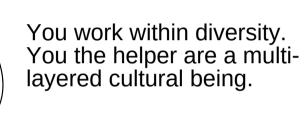
'I just focus on people's personality and presenting problem not their background"

"I really try and connect with people based on who they are"

"I see the person, not their race or culture"

"I treat others as I would want to be treated"





Who are you culturally & racially to the clients you work with?

### 

Intergenerational trauma

Cultural scripts about mental illness

Family response to 'unwellness'

Stigma about mental illness and stigma in seeing a mental health professional

Cultural scripts to enhance wellbeing and cope with stress

Cultural resources, stories, rituals, places, people

Cultural stories that embed cultural values and strengths

What are you missing if you don't know a client's cultural background?

MATTER



### **CULTURE MATTERS IN MENTAL HEALTH**

Is what we know about mental illness and service delivery true and applicable for all people regardless of their cultural background?

WATTERS OF

Culture affects the way people describe symptoms, label illness, experience distress, define behaviour as normative or not, utilise coping strategies, stigma associated with expressions of unwellness, help-seeking behaviours, and the expectations held by clients/ consumers of helpers.

# Things clients think but may not say....



How do I open up about my family? I don't want to expose them or say bad things about them behind their back



I wonder how much experience the therapist has working with people from my cultural/racial group



I don't want the therapist to judge my faith based on how I or my family act



I'm going to omit parts of this story that are cultural/ religious, because the therapist wouldn't understand



How do I translate this word or concept that explains what I'm going through



I'm not going to tell the therapist that I think there are supernatural influences at play, because they'll think I'm, my family, faith or community are crazy WATTERN CB

- Clients don't feel heard or understood
- Misdiagnosis
- Clinicians overlook amazing client resources (stories/ strengths/ social support/ spiritual resources)
- We (clinicians) don't understand why clients waited so long to access treatment
- Blind application of 'evidence-based treatment modalities'
- Low retention in treatment services
- Poor treatment outcomes
- Higher reliance on medication than types of support to address trauma, relationship issues or current stressors



Opportunities for change

1

People with CALM backgrounds continue to be under-represented in mental health service access and utilisation figures.

2

People with CALM backgrounds typically present late to mental health services and are therefore generally more unwell than the mainstream population.

3

Practitioners are also more likely to prescribe medication at the outset to people with CALM backgrounds than to patients from Anglo backgrounds.

4

50% of clients from minority groups do not return to counselling after their first session. (Sue & Sue, 2013)





### **CULTURAL INTELLIGENCE (CQ)**

The measurable individual capability to relate effectively in intercultural interactions and in cultural contexts.

Our level of CQ has been found to predict our relational performance in multicultural contexts.

--Soon Ang and Linn Van Dyne "Conceptualization of Cultural Intelligence" in Handbook of Cultural Intelligence: Theory, Measurement, and Applications (Armonk, NY: M.E. Sharpe, 2008), 3.



• Cultural intelligence is a malleable set of capabilities that research suggests can be enhanced by multicultural experiences, bilingualism, CQ training, cultural self-awareness and travel\*.

- Cultural intelligence as a capability is a conduit to achieving culturally safety.
- Enhancing the awareness of the cultural elements of relationship between the client and the clinician can prevent clients from being marginalised, minoritised and othered thereby providing an anti-oppressive space for clients.
- The acknowledgement of the role of CQ positions the therapeutic relationship as an intercultural one.



### **CQ DRIVE**

The motivation you have to relate to people culturally different from yourself, and your confidence in culturally different contexts.



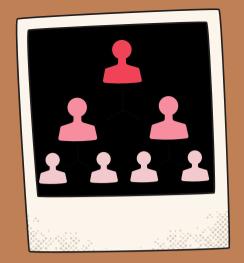
### **CQ DRIVE**

- Why motivates MH clinicians need to demonstrate cultural intelligence in their support of clients/ consumers in multicultural Australia?
- Which body keeps organisations accountable with regards to the provision of culturally intelligent MH services?
- Do clinicians feel confident in their own cultural competencies to effectively engage with culture in the counselling room?

### **CQ KNOWLEDGE**

Your knowledge of how cultures are similar and different.

Your level of cultural self awareness and how you use this knowledge improve credibility & trust in intercultural relationships.





What is your norm?









## **CQ STRATEGY**

The extent to which you plan, adapt & review your effectiveness in an intercultural interaction (beforehand/ during and after).

# Ethical considerations for clinicians

Etic vs Emic approaches to mental illness

Clinician cultural value awareness

The validity of psychological assessment within diversity

Clinician racial identity awareness

Recognising the power dynamic in the room based on identity & role

Treatment effectiveness within diversity

# Ethical considerations for treatment

Awareness of our client's cultural background & intersectional identity

Incorporation of psycho-spiritual approaches to therapy

Commitment to anti-racist & antioppressive practices Collaboration with ethno-specific services, bi-lingual / bi-cultural practitioners.

Being able to identify client culturally influenced strengths & resources

Understanding the role of family, community or faith leaders or elders in recovery & wellbeing.

## **CQ ACTION**

The extent to which you behave in culturally responsive and culturally safe ways that enhances intercultural relationships & task completion in culturally different contexts.



### **Monique Toohey**

Psychologist & CQ Facilitator



Cultural Intelligence
in Mental Health
Care
(Level 1)

### **Enrolment**



\$300



3rd & 4th June, 10am-4pm, 2024



Enrolment admin@cmw.org.au

### **Level 1 Modules**

**Module 1 -** CQ in Mental health care

Module 2 - Culturally intelligent care with Muslim clients & communities

Module 3 - Cultural Values (A)

Module 4 - Cultural Values (B)

**Module 5 -** Socio-linguistics & Cross-cultural communication

**Module 6 -** Developing a cultural formulation

### Aims

This course aims to equip mental health practitioners with an understanding of what it means to work with cultural intelligence in Mental health and therapeutic contexts.

This program will provide opportunities to 'do many difference' through exchanging stories, providing felt sense and experiential learning experiences using ideas culture. around cultural identity, cultural empathy and humility.