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AUTHOR Pedersen, Paul
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ABSTRACT

This paper describes the Developing Interculturally Skilled Counselors (DISC) project, a three year training program designed to assess and articulate the need for cross-cultural counseling skills. A review of existing inservice or pre-service training programs is presented that suggests these programs are narrow in their approaches and specialized in their perspectives, i.e., centering on one ethnic group rather than multicultural populations. The DISC project is presented as a training strategy that applies a broader definition of culture to a balanced emphasis on awareness, knowledge and skill through an interdisciplinary approach based in both the community and the classroom. Examples of DISC training on several levels are given, and a review of DISC activities is discussed. Objectives for future programs which emerged from the needs assessment evaluation are suggested. The DISC project is supported as a viable, experimental program aimed at identifying a variety of needs for intercultural counseling and therapy training.
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THE INTERCULTURAL TRAINING OF MENTAL HEALTH PROFESSIONALS

Paul Pedersen
Dept. of Psychology
University of Hawaii - Manoa

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THE INTERCULTURAL TRAINING OF MENTAL HEALTH PROFESSIONALS

Paul Pedersen, East-West Center, Culture Learning Institute, and the Department of Psychology, University of Hawaii at Manoa

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The importance of interculturally skilled counseling and therapy is widely recognized in the priorities of the National Institute of Mental Health, the American Psychological Association's accreditation criteria, the 1979 Preseident's Commission on Mental Health needs assessment, and numerous other professional and public organizations at the national as well as the international level. There is still, however, no recognized degree-oriented academic program at the university level to train counselors in cross-cultural skills, there are few articles in the major professional mental health journals on cross-cultural counseling, and there are few programs scheduled in the area of cross-cultural counseling at professional meetings of counselors and therapists. A NIMH-funded three year training grant titled DISC (Developing Interculturally Skilled Counselors) has developed a coordinated response to assess and articulate these needs more clearly (Pedersen, 1981).

1. Intercultural Training:

Most counselors or therapists with an interest in cross-cultural counseling have had to develop their own programs in the area from courses scattered throughout the curriculum. Many of these pre-service courses have emphasized the specialized perspective of one or another ethnic group in relation to the dominant culture, with less emphasis on the skills required for working in a multi-cultural population where age, sex role, life style, socio-economic status as well as ethnicity and nationality may determine a person's "cultural" point of view. Many of the in-service or pre-service training programs have emphasized

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either awareness, knowledge, or skill to the exclusion of the other two elements, rather than balancing the emphasis of each component with one another interactively. Many of the training programs emphasize one disciplinary point of view, rather than the complementary viewpoints of different disciplines viewing the same cultural issue. Many of the training programs emphasize either classroom work or field experience, with less involvement of resource persons from cultures being discussed in the teaching of knowledge, awareness or skill from their own cultural perspectives in a balanced emphasis on both the classroom and the field work. DISC has applied a broader definition of culture to a balanced emphasis on awareness, knowledge and skill in an interdisciplinary approach based in the community as well as the classroom.

The DISC project trains participants at several levels. Among all the DISC participants, from the eight pre-doctoral trainees who are involved on a full-time basis for each of the three years, to the students in three DISC seminars offered each semester for three years on intercultural awareness (Social Work 780C), intercultural knowledge (Psychology 705E) and intercultural skill (Psychology 705Q); to the participants in 35 intercultural workshops in Saipan, Hilo, the Philippines, Vancouver, or elsewhere on the U.S. Mainland; to the presenters discussing papers in the 1979, 1980, and 1981 International Annual Intercultural Mental Health Conferences; to the persons attending one of the more than 100 presentations by DISC staff and/or trainees; to persons reading from several dozen publications and occasional papers produced through the project; to the network of more than 700 subscribers to the DISC REPORT semi-annual newsletter of project activities; the DISC project has carried out an experiment on how otherwise-underutilized resources in a multicultural university community can be mobilized to meet the intercultural needs of mental health professionals in training (Pang, 1981; Sue, 1981; Marsella & Pedersen, 1981).

Developing interculturally skilled counselors is a complex task, and DISC has been able to explore a very limited number of very tentative approaches to training counselors in intercultural skills. Other projects and proposals are needed to join in a comprehensive, interdisciplinary, intercultural network of cross-cultural counselors who can combine what we already know toward the unmet needs of counseling in a pluralistic society.

2. Needs Assessment

In reviewing DISC activities from July, 1978 to the present, ten priority needs emerge as clearly important:

- (1) Very few other institutions offer specializations in cross-cultural mental health, although increasingly, departments are offering isolated courses in cross-cultural counseling and therapy. There is a need for a network across disciplines and institutions, to coordinate the efforts of cross-cultural counseling and therapy.
- (2) The literature on cross-cultural mental health is diffuse, often published in journals of limited circulation, and varies a great deal in quality from very weak to very strong. There is a need for a journal or a series of review publications which establishes a threshold of quality control for previous as well as current publications.
- (3) Each of the disciplines training mental health care professionals provides unique perspectives, resources and personnel working on cross-cultural issues in isolation, while the issues themselves cut across the "cultures" of disciplines or fields. There is a need for interdisciplinary cooperation on problem-specific training that combines the resources of several related disciplines.

(4) There is a great difference between the universities providing training for mental health service professionals and the community agencies who see much of the university curricula as unresponsive to the culturally complex "real world" problems outside. There is a need for more in-service training that involves the community as well as the university, in joint teaching efforts through increased cooperation and exchange of expertise.

(5) There are few role models for examples of how cross-cultural counseling and therapy should be done, and the emphasis has focused on the problems, mistakes and examples of inadequacy in the field. This has tended to demoralize mental health professionals who often feel overwhelmed by the impossibility of dealing with cultural variables. There is a need for more visibility of "role models" who are appropriately integrating theory and practice within the limited scope of their practice. Conferences emphasizing intercultural themes might be one way to increase the visibility of available role models.

(6) Research on cross-cultural variables in counseling and psychotherapy have not been able to identify a clearly preferred theoretical framework or guidelines to match the appropriate intervention with the appropriate problem in each culturally different setting. There is a need for more coordinated research on applied problems of delivering cross-cultural counseling and therapy services, which will give us clear measures of intercultural competence.

(7) Cultural differences of ethnicity and nationality are often confounded by other demographic differences of age, sex role, life style, socio-economic status and other variables, leaving us to choose between an artificially narrow definition of culture, or a definition which is so diffuse it seems to move all analysis back to individual differences, disregarding cultural categories. There is a need to define cultural differences functionally and operationally so that the language of intercultural counseling and therapy will be clear and understandable.

(8) Many non-Western cultures disregard "talk therapy" and prefer a variety of helping resources which bear little resemblance to counseling and therapy as it is normally defined. There is a need to re-define the modes of counseling and therapy to include non-formal and informal modes as well as a variety of contrasting formal modes developed outside the dominant culture perspective.

(9) As a result of inadequacies in programs of counseling and therapies, increasing numbers of immediate crises arise where there is no time to train professionals through normal pre-service and in-service programs but where immediate solutions are required. There is a need for consultation teams that can respond immediately to a variety of crisis situations and prevent the escalation of culturally unfavorable conditions in a proactive rather than a reactive mode.

(10) Much of the energy going into intercultural counseling and therapy lacks focus, hard funds, and full time commitment by a coordinated team of professionals. More often the rhetoric in support of intercultural sensitivity is a substitute for action. There is a need for one program, institution, or center to take the leadership and fill this vacuum with a coordinated effort of intercultural expertise.

3. Conclusion

The DISC grant has provided three years of contact with mental health professionals from a wide range of cultural backgrounds and perspectives. DISC has itself been a "needs assessment" of the field in terms of gaps which other subsequent programs will need to fill. In terms of the outcomes from DISC it will be important to look briefly at the project objectives for future training of mental health professionals.

Based on identified needs from the first three years of the DISC project, several objectives emerged for future programs.

1. to encourage interculturally skilled mental health specialists to work in areas and settings where severe shortages exist;
2. to increase the number of qualified minority personnel in the mental health professions and number of mental health personnel trained to deal with special problems of culturally different populations;
3. to assure that skills and knowledge of mental health personnel are appropriate to the culturally defined needs of consumers.

The first three years of the DISC project will conclude in September, 1981. As an experimental project the program has identified a variety of needs for intercultural counseling and therapy training. We are at a starting point where a permanent program could now be established on a substantial baseline of data and expertise. The next step will not include the development of a "cross-cultural specialization" as a separate field of counseling, but rather illustrate how important the cultural variable is to the definition of "competent" counseling. Our effort is not to promote the increase of "cross-cultural counselors" but rather to promote the increase of "good counseling" which is responsive to significant cultural variables.

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