

What is the comparative effectiveness of specific therapy modalities in improving mental health outcomes for Black and Indigenous clients?



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ABSTRACT

Black and Indigenous clients are frequently underrepresented in therapeutic research and treatment, despite the increase of individuals from these communities seeking therapy services. This qualitative study has been initiated to highlight the lack of supporting evidence for best treatment practices for Black and Indigenous-identifying clients. The goal of this study is to provide evidence-based treatment for master's and doctoral-level clinicians who work with Black and Indigenous patients. The study will analyze various treatment groups, including Black and Indigenous adult participants; and will utilize treatments and interventions from Internal Family Systems (IFS) therapy and Art Therapy.

INTRODUCTION

There is extensive research regarding treatment for a diverse range of clients. However, despite the cultural considerations and sensitivity, there is not enough empirical evidence indicating efficacious treatment outcomes for Black and Indigenous clientele.

- o As a group, Indigenous or Native folks experience disorders like anxiety and depression at higher rates compared to the general US population (Thomason, 2012).
- o Psychological treatment needs to improve as a science and practice to become more efficacious in addressing current realities for Native clients (Blume, 2014).
- o The system of care is often monocultural and ethnocentric in the assessment, diagnosis, and treatment of racial/ethnic minority populations (Sue, 2003).
- o The IFS model emerged out of Western psychology, but aligns with the relational reciprocity of the indigenous worldview. (McVicker, 2014).
- o The formation of the BIPOC circle, related to art therapy methods, shows a heightened level of comfort and openness in discussing specific topics of concern (Goerdt, Gruezo Resurrecion, Taziyah, Johnson, Lorenzo, and Johnson, 2021).
- o With the considerations listed, it is necessary to further examine these treatment methods for best outcomes as there is an increase of Black and Indigenous clients seeking care as mental health care becomes normalized. In this study, we attempt to acknowledge these critiques and contribute by conducting research that builds upon previous studies examining these areas.

PRIMARY AIM AND HYPOTHESES

Research Questions

- 1. Which therapeutic modalities are most efficacious for Black and Indigenous adult clients?
- 2. What treatment interventions are particularly successful in treating Black and Indigenous clients?

Hypotheses:

- 1.Black and Indigenous adult clientele will report higher success rates with Internal Family Systems therapy and Art therapy interventions
- 2.Non-traditional treatment methods, such as art therapy, Internal Family Systems therapy will positively impact outcomes of therapy for Black and Indigenous clients.

METHODS

Participants: All participants (500) are adult clients, ages 18+ that identify as either Black/African American or Indigenous/Native American.

•Participants will be recruited through community mental health facilities throughout Washington state. Physical and virtual advertisements will be used to invite participants with physical posters in selected community mental health facilities and local libraries. Online advertisements will be distributed via social media platforms including Facebook and Instagram.

MEASURES

Procedures:

Beck Anxiety and Depression Inventories (known as BAI and BDI), as well as the Adverse Childhood Experience test (ACE) will be administered to both the control, Art therapy, and IFS treatment groups as a part of the intake process.

- •Participants will be assigned a fully licensed or associate licensed therapist who is competently trained and certified in either Internal Family Systems Therapy or Art Therapy. 100 (50 Black/African American and 50 Indigenous) participants will be receiving non-IFS or Art therapy treatment as a control group. 100 Black/African American participants will receive IFS treatment. 100 Indigenous participants will receive IFS treatment. 100 Black/African American participants will receive Art therapy treatment. 100 Indigenous participants will receive Art therapy treatment.
- •All participant groups will attend approximately 10 sessions, in person with their assigned therapist. All groups will be administered their assigned therapeutic intervention throughout their sessions.
- •BDI and BAI will be administered within 5 days following the final session.

RESULTS

Research Question: What is the comparative effectiveness of specific therapy modalities in improving mental health outcomes for Black and Indigenous clients?

- •Analysis of Variance (ANOVA) will be used to compare the mean scores of the results collected from the BDI and BAI instruments in the control group, Art therapy group, and IFS group before treatment and after the 10th session.
- •ANOVA is a suitable statistical measure for analyzing data from a study investigating the efficacy of Art Therapy and Internal Family Systems Therapy with Black and Indigenous clients, as it allows for comprehensive comparison and interpretation of treatment outcomes across different therapy types and client demographics. ANOVA will assess potential interaction effects between the therapy modalities and the ethnicity of participants. This can help identify the effectiveness of therapy treatment based on ethnic backgrounds.

Discussion

Clinical and Social Implications: If our hypothesis is correct, Black and Indigenous participants may exhibit higher success rates with IFS and/or Art therapy interventions. This outcome would present a range of positive consequences. Specifically, it would enable participants to develop stronger coping mechanisms through IFS language and Art therapy mediums, allow for the provision of accessible short-term treatment to a broad range of minority populations statewide, and result in an increase in underrepresented populations' representation in mental health research.

This study not only provides an evidence-based approach to treating underserved populations but also supports clinicians who serve these groups. The benefits of this research extend beyond these populations, as it has the potential to significantly improve mental health outcomes for a wide range of BIPOC individuals.

Implications for Future Research:

The study at hand has some limitations that warrant consideration. To that end, we recommend that any future research on this matter incorporate culturally adapted methods in both IFS and Art therapy treatment. This is critical to ensure that these modalities align with cultural and communal beliefs, values, and healing practices. It is worth considering inviting community elders and cultural experts to consult with researchers and clinicians in developing culturally responsive interventions.

The current study was conducted on a statewide level, which may limit the diversity and variety in perspectives when considering elements of intersectionality and geographical influences. Therefore, future research should encompass community mental health services, along with group and private practice agencies on a national level, to ensure inclusivity.

It is vital for researchers to be cognizant of the limitations we mention here as they may impact the generalizability of study findings. Therefore, incorporating culturally responsive interventions and expanding the sample population in future studies can improve the accuracy and relevance of research outcomes.

