

Running head: COGNITIVE-BEHAVIORAL THERAPY

Cognitive-Behavioral Therapy and Ethnic Minority Groups:

A Review of Outcome Research

Letter of Intent

Rhonda Woodcock

Campus Alberta Applied Psychology

Supervisor: Vivian Lalande

August 2, 2005

This letter of intent titled “Cognitive-Behavioral Therapy and Ethnic Minority Groups: A Review of Outcome Research” proposes a literature review to examine the extent to which cognitive-behavioral therapy has received both quantitative and qualitative support in the therapeutic treatment of members of ethnic minority groups as well as to determine whether some ethnic minority gain greater benefits from the treatment than others. The implications of this literature review are to inform and improve the application of cognitive-behavioral therapy for the treatment of members of ethnic minorities.

### Overview

#### *Problem Statement*

A review of recent and relevant literature conducted by the author, as provided below, displays that there is little empirical evidence illustrating the efficacy of cognitive-behavioral therapy (CBT) in the treatment of individuals from ethnic minority groups. Therefore, a more comprehensive review including quantitative research and qualitative research is necessary to determine the extent to which CBT has received support for its application with diverse populations.

#### *Rationale*

As Western society is becoming increasingly diverse, the challenge of meeting psychological health needs requires increased attention. Many research studies have provided empirical support for the efficacy of CBT in the general population for the treatment of depression, phobic disorders, anxiety, and more recently post traumatic stress disorder (Blanchard et al., 2004; Cohen, Mannarino, & Knudsen, 2005; Corsini & Wedding, 2000). However, many of these studies included only white, middle-class participants. Very little CBT research has been conducted with diverse populations, thereby causing little to be known about

the efficacy of CBT with members of ethnic minority groups. In fact, as recently as 1988, Casas (1988) conducted a literature review of psychological abstracts that included studies that were conducted within the prior 20 years, searching for studies that focused on cognitive-behavioral treatments of anxiety in people of racial or ethnic minority groups. Casas found only three empirically based outcome studies that included ethnic minority participants, and two of these studies included only two ethnic minority persons in each of their samples. Therefore, a more recent and comprehensive literature review is needed to determine whether recent research has included and/or has had a sole focus on members of minority populations to determine the efficacy of CBT with members from these diverse populations.

Many counselling theories that are utilized today have originated from a Eurocentric view with individualistic and agentic values underlying the approaches (Hays, 1995). Human agency refers to the capacity for humans to make choices and to impose those choices on the world, which occurs in contrast to natural forces and the will of God (Wikipedia, 2005). These Western beliefs and/or freedoms are not an understood or accepted human value for all cultures. Thereby, illustrating that the underlying values infused in Western counselling interventions may not meet the needs of our changing population and may in fact lead to more harm than good.

Over the last decade immigration numbers have been on the rise. In fact, Ibrahim (1991) claimed that “a century from now, the population of the United States will be closer to the world balance: 57% Asian, 26% White, 7% Black, and 10% people of Hispanic origin” (p. 13); and “the total population of Canada’s visible minority population is expected to reach 20% of the adult population and 25% of children by the year 2016” (McDougall & Arthur, 2001, p. 123). Increasing immigration and the growth of ethnic minority groups are producing changes in the acceptability of Eurocentric counselling practices. Many cultures do not support, understand, or

recognize European/American counselling methods because of conflicting covert and/or overt cultural values represented by the intervention and/or the ethnic minority client. Therefore, this change in the overall structure of the population suggests the need to increase our awareness to diversity and alter the structure and application of therapeutic interventions utilized with members of ethnic minority groups.

Although “ethnic minorities make up nearly 25% of the United States population, the percentage of ethnic minority psychologists in practice is estimated at 5.1% or less” (Hammond & Yung, 1993, p. 4). Hays (1995) stated as well that “although the representation of people of color in cognitive-behavioral practice has yet to be assessed, a look at the literature suggests that cognitive-behavioral therapy as a field is similarly dominated by Euro-American perspectives” (p. 311). Therefore, the underlying philosophies that guide cognitive-behavioral therapy may not have been thoroughly examined and consequentially, may not be appropriate or beneficial for certain diverse populations.

Literature that has focused on diversity and the effects of psychotherapy suggested that therapeutic treatments may be affected by many cultural factors, such as ethnic match for some groups (Kim, Ng, & Ahn, 2005), client expectations (Fischer, Jome, & Atkinson, 1998), shared worldview (Frank & Frank, 1991; Torrey, 1986), communication styles (Sue & Sue, 1999), culturally responsive forms of treatment (Hays, 1995), degree of acculturation (Atkinson, Kim, & Caldwell, 1998; Sue & Sue, 2003), and the training of therapists to work with ethnic minority groups (Sue & Sue, 2003). Therefore, controversy over the need for supported treatments for ethnic minorities is looming as there is increasing recognition that diverse clientele may achieve greater gains from culturally sensitive psychotherapy services. If such culturally sensitive therapies are not developed and implemented into the counselling practice, members of ethnic

minority groups may not seek counselling services, may have high attrition rates, and/or may even be harmed by these Western value-laden interventions.

### *Reference to Literature*

The author conducted a literature review to determine whether there was any current and available research that would help to determine the efficacy of cognitive-behavioral treatment approaches for members of ethnic groups and uncovered 19 outcome studies that included members of ethnic minorities. The outcome studies included participants from various ethnic minority groups including Chinese, Asian American, Puerto-Rican, Hispanic/Latino, Iranian, African American, Cambodian refugees, and Armenian children (Arroya, Miller, & Tonigan, 2003; Carter, Sbrocco, Gore, Watt Marin, & Lewis, 2003; Chan et al., 2005; Dai et al., 1999; Fu Keung Wong, Yu Kit Sun, Tse, & Wong, 2002; Gil, Wagner, & Tubman, 2004; Goenjian et al., 1997; Jaberghaderi et al., 2004; Kataoka et al., 2003; Kubany et al., 2004; Markowitz, Spielman, Sullivan, & Fishman, 2000; Miranda et al., 2003a; Miranda, Azocar, Organista, Dwyer, & Areane, 2003b; Organista, Munoz, & Gonzalez, 1994; Otto et al., 2003; Rosello, & Bernal, 1999; Schneiderman et al., 2004; Silverman et al., 1999a, b; as cited in Pina, Silverman, Fuentes, Kurtines, & Weems, 2003; Zlotnick, Najavits, Rohsenow, & Johnson, 2003).

The author will conduct a critical analysis of these studies, with reference to the evaluation guidelines outlined in Mertens (1998) for analyzing experimental and quasi-experimental research, to determine the level of empiricism applied throughout the research. The research studies will then be categorized into well-controlled, medium-controlled, and low controlled groups and will include both quantitative and qualitative studies. The findings from these 19 studies, along with any newly surfacing studies, will be analyzed and synthesized to determine the efficacy of CBT with members from the said minority groups and highlight which

ethnic minority groups are more likely to benefit from cognitive-behavioral therapy as a treatment intervention and which may benefit more from different therapeutic interventions.

### *Method of Procedures*

This literature review will be conducted on the basis of the following descriptive research question: To what extent has CBT received quantitative and qualitative support with members of ethnic minority groups? A brief description of CBT will be included, followed by an overview of recent literature regarding the relationship of CBT to client diversity. A review of how the evaluation of counselling and counselling interventions is conducted as well as literature regarding efficacy research conducted with diverse clientele will be included. Research will include a review of secondary sources to obtain a comprehensive overview of what is known about CBT and ethnic minority groups. An extensive literature search, utilizing and consulting databases such as PsychInfo, EBSCOhost, and OVID, augmented by findings from the World Wide Web, bibliographies of secondary sources, and personal networks, including peers and colleagues who are currently working in the field of CBT or who have completed related work, will be performed to select primary research studies conducted within the last ten years that apply the terms “cognitive behavioral therapy” in conjunction with “ethnic”, “culture”, “multicultural” “minority” and “diverse” to determine the extent to which CBT has received qualitative and/or quantitative support regarding the effectiveness of this approach with individuals from ethnic minority groups. The primary research articles will then be evaluated and analyzed with reference to Mertens’ (1998) guidelines for evaluating qualitative and quantitative research, and the results will be synthesized to provide a conclusion to the research question guiding the literature review. This synthesis will also help to illustrate and guide the development of future research.

*Implications*

The increased diversity in North America and the recent rise in the acceptability and application of CBT make the information elicited from this literature review invaluable. The conclusions of this review could serve many purposes. First, the findings will help to highlight the need for more culturally sensitive research into the applicability of other therapeutic techniques for the treatment of members of ethnic minority groups. Second, the findings may emphasize the importance of implementing specific educational curriculum into counselling programs that focuses on teaching culturally sensitive interventions. Third, these conclusions will help to educate students and counsellors on the extent to which CBT has received support in the treatment of members of ethnic minority groups. This information will help to guide counsellors through their decision making processes when choosing techniques and interventions that will be in the best interest of a client of particular ethnic minority group. Fourth, the conclusions of this research will increase the competency of the counselling field and will help to ensure that individuals of ethnic minority groups receive culturally sensitive interventions and thus, obtain greater gains from therapy. And finally, this information could pave the way towards the integration of a more emic approach to counselling, which described by Scorzelli and Reinke-Scorzelli (2001) “suggests that counselling strategies unique to the client’s culture are needed to effectively meet the needs of the particular client group” (p. 85).

## References

- Arroyo, J. A., Miller, W. R., & Tonigan, S. J. (2003). The influence of Hispanic ethnicity on long-term outcome in three alcohol-treatment modalities. *Journal of Studies on Alcohol, 64*(1), 98-105.
- Atkinson, D. R., Kim, B. S. K., & Caldwell, R. (1998). Ratings of helper roles by multicultural psychologists and Asian American students: Initial support for the three-dimensional model of multicultural counseling. *Journal of Counseling Psychology, 45*, 414-423.
- Blanchard, E. B., Hickling, E. J., Malta, L. S., Freidenberg, B. M., Canna, M. A., Kuhn, E., et al. (2004). One- and two-year prospective follow-up of cognitive-behavioral therapy or supportive psychotherapy. *Behavioural Research & Therapy, 42*(7), 745-760.
- Carter, M. M., Sbrocco, T., Gore, K. L., Watt Marin, N. W., & Lewis, E. L. (2003). Cognitive-behavioral group therapy versus a wait-list control in the treatment of African-American women with panic disorder. *Cognitive Therapy and Research, Vol. 27*(5), 505-518.
- Casas, J. M. (1988). Cognitive behavioral approaches: A minority perspective. *The Counselling Psychologist, 16*, 106-110.
- Chan, I., Kong, P., Leung, P., Au, A., Li, P., Chung, R., et al. (2005). Cognitive-behavioral group program for Chinese heterosexual HIV-infected men in Hong Kong. *Patient Education and Counseling, 56*(1), 78-84.
- Cohen, J. A., Mannarino, A. P., Knudsen, K. (2005). Treating sexually abused children: 1 year follow-up of a randomized controlled trial. *Child Abuse & Neglect, 29*(2), 135-146.
- Corsini, R. J. & Wedding, D. (2000). *Current psychotherapies*. Itasca, IL: Peacock.
- Dai, Y., Zhang, S., Yamamoto, J., Ao, M., et al. (1999). Cognitive behavioral therapy of minor depressive symptoms in elderly Chinese Americans: A pilot study. *Community Mental*



- Health Journal*, 35(6), 537-543.
- Fischer, A. R., Jome, L. M., & Atkinson, D. R. (1998). Reconceptualizing multicultural counseling: Universal healing conditions in a culturally specific context. *The Counseling Psychologist*, 25, 525–588.
- Frank, J. D., & Frank, J. B. (1991). *Persuasion and healing: A comparative study of Psychotherapy*. Baltimore: Johns Hopkins University Press.
- Fu Keung Wong, D., Yu Kit Sun, S., Tse, J., & Wong, F. (2002). Evaluating the outcomes of a cognitive-behavioral group intervention model for persons at risk of developing mental health problems in Hong Kong: A pretest-posttest study. *Research on Social Work Practice*, 12(4), 534-545.
- Gil, A. G., Wagner, E. F., & Tubman, J. G. (2004). Culturally sensitive substance abuse intervention for Hispanic and African American adolescents: empirical examples from the Alcohol Treatment Targeting Adolescents in Need (ATTAIN) Project. *Addiction Supplement*, 99(2), 140-150.
- Goenjian, A. K., Karayan, I, Pynoos, R. S., Minassian, D, Najarian, L. M., Steinberg, et al. (1997). Outcome psychotherapy among early adolescents after trauma. *American Journal of Psychiatry*, 154(4), 536-543.
- Hammond, W. R., & Yung, B. (1993). Minority student recruitment and retention practices among schools of professional psychology: A national survey and analysis. *Professional Psychology: Research and Practice*, 24, 3-12.
- Hays, P. A. (1995). Multicultural applications of cognitive-behavioral therapy. *Professional Psychology: Research and Practice*, 26(3), 309-315.
- Ibrahim, F. A. (1991). Contribution of cultural worldview to generic counseling and

- development. Special Issue: Multiculturalism as a fourth force in counseling. *Journal of Counseling and Development*, 70(1), 13-19.
- Jaberghaderi, N., Greenwald, R., Rubin, A., Oliae Zand, S., & Dolatabadi, S. (2004). A comparison of CBT and EMDR for sexually-abused Iranian girls. *Clinical Psychology and Psychotherapy*, 11, 358-368.
- Kataoka, S. H., Stein, B. D., Jaycox, L. H., Wong, M., Escudero, P., Tu, W., et al. (2003). A school-based mental health program for traumatized Latino immigrant children. *Journal of the American Academy of Child & Adolescent Psychiatry*, 42(3), 311-318.
- Kim, B. S. K., Ng, G. F., & Ahn, A. (2005). Effects of client expectations for counseling success, client-counsellor worldview match, and client adherence to Asian and European American cultural values on counseling process with Asian Americans. *Journal of Counseling Psychology*, 52(1), 67-76.
- Kubany, E. S., Owens, J. A., McCaig, M. A., Hill, E. E., Iannce-Spencer, C., & Tremayne, K. J. (2004). Cognitive trauma therapy for battered woman with PTSD (CTT-BW). *Journal of Consulting & Clinical Psychology*, 72(1), 3-18.
- Markowitz, J. C., Spielman, L. A., Sullivan, M., & Fishman, B. (2000). An exploratory study of ethnicity and psychotherapy outcome among HIV-positive patients with depressive symptoms. *Journal of Psychotherapy and Practice Research*, 9, 226-231.
- McDougall, C., & Arthur, N. (2001). Applying racial identity models in multicultural counselling. *Canadian Journal of Counselling*, 35, 122-136.
- Mertens, D. M. (1998). *Research methods in education and psychology: Integrating diversity with quantitative & qualitative approaches*. Thousand Oaks: Sage.
- Miranda, J., Azocar, F., Organista, K. C., Dwyer, E., & Areane, P. (2003b). Treatment of

depression among impoverished primary care patients from ethnic minority groups.

*Psychiatric Services*, 54(2), 219-225.

Miranda, J., Chung, J. Y., Green, B. L., Krupnick, J., Siddique, J., Revicki, D. A., et al. (2003a).

Treating depression in predominantly low-income young minority women: a randomized controlled trial. *JAMA*, 290, 57-65.

Organista, K. C., Munoz, R. F., & Gonzalez, G. (1994). Cognitive-behavioral therapy for

depression in low-income and minority medical outpatients: Description of a program and exploratory analyses. *Cognitive Therapy and Research*, 18(3), 241-259.

Otto, M. W., Hinton, D., Korbly, N. B., Chea, A., Ba, P., Gershuny, S., et al. (2003). Treatment

of pharmacology-refractory posttraumatic stress disorder among Cambodian refugees: a pilot study of combination treatment with cognitive-behavior therapy vs sertraline alone.

*Behavior Research and Therapy*, 41(11), 1271-1276.

Pina, A. A., Silverman, W. K., Fuentes, R. M., Kurtines, W. M., & Weems, C. F. (2003).

Exposure-based cognitive-behavioral treatment for phobic and anxiety disorders: Treatment effects and maintenance for Hispanic/Latino relative to European-American youths. *Journal of the American Academy of Child & Adolescent Psychiatry*, 42(10), 1179-1187.

Rosello, J., & Bernal, G. (1999). The efficacy of cognitive-behavioral and interpersonal

treatments for depression in Puerto Rican Adolescents. *Journal of Consulting and Clinical Psychology*, 67(5), 734-745.

Schneiderman, N., Saab, P. G., Catellier, D. J. Powell, L. H. DeBusk, R. F., Williams, R. B., et

al. (2004). Psychosocial treatment within sex by ethnicity subgroups in the enhancing recovery in coronary heart disease clinical trial. *Psychosomatic Medicine*, 66(4), 475-483.

- Scorzelli, J. F., & Reinke-Scorzelli, M. (2001). Cultural sensitivity and cognitive therapy in Thailand. *Journal of Mental Health Counseling, 23*(1), 85-93.
- Silverman, W. K., Kurtines, W. M., Ginsburg, G. S., Weems, C. F., Lumpkin, P. W., & Carmichael, D. H. (1999a). Treating anxiety disorders in children with group cognitive behavioral therapy: a randomized clinical trial. *Journal of Consulting Clinical Psychology, 67*, 995-1003.
- Silverman, W. K., Kurtines, W. M., Ginsburg, G. S., Weems, C. F., Rabian, B., & Serafini, L. T. (1999b). Contingency management, self-control, and education support in the treatment of childhood phobic disorders: A randomized clinical trial. *Journal of Consulting Clinical Psychology, 67*, 675-687.
- Sue, D. W., & Sue, D. (1999). *Counseling the culturally different: Theory and practice*. New York: J. Wiley & Sons.
- Sue, D. W., & Sue, D. (2003). *Counseling the culturally different: Theory and practice*. New York: J. Wiley & Sons.
- Torrey, E. F. (1986). *Witchdoctors and psychiatrists: The common roots of psychotherapy and its future*. New York: Harper & Row.
- Wikipedia (2005). The free encyclopedia. Retrieved August 4, 2005 from <http://en.wikipedia.org/wiki/Wikipedia>
- Zlotnick, C., Najavits, L. M., Rohsenow, D. J., & Johnson, D. M. (2003). A cognitive-behavioral treatment for incarcerated women with substance abuse disorder and posttraumatic stress disorder: findings from a pilot study. *Journal of Substance Abuse Treatment, 25*, 99-105.