

2014 ANNUAL CONVENTION

August 7-10 2014 ★ Washington, DC

Improving the Quality of Psychological Health Research, Education, and Treatment for Black Women

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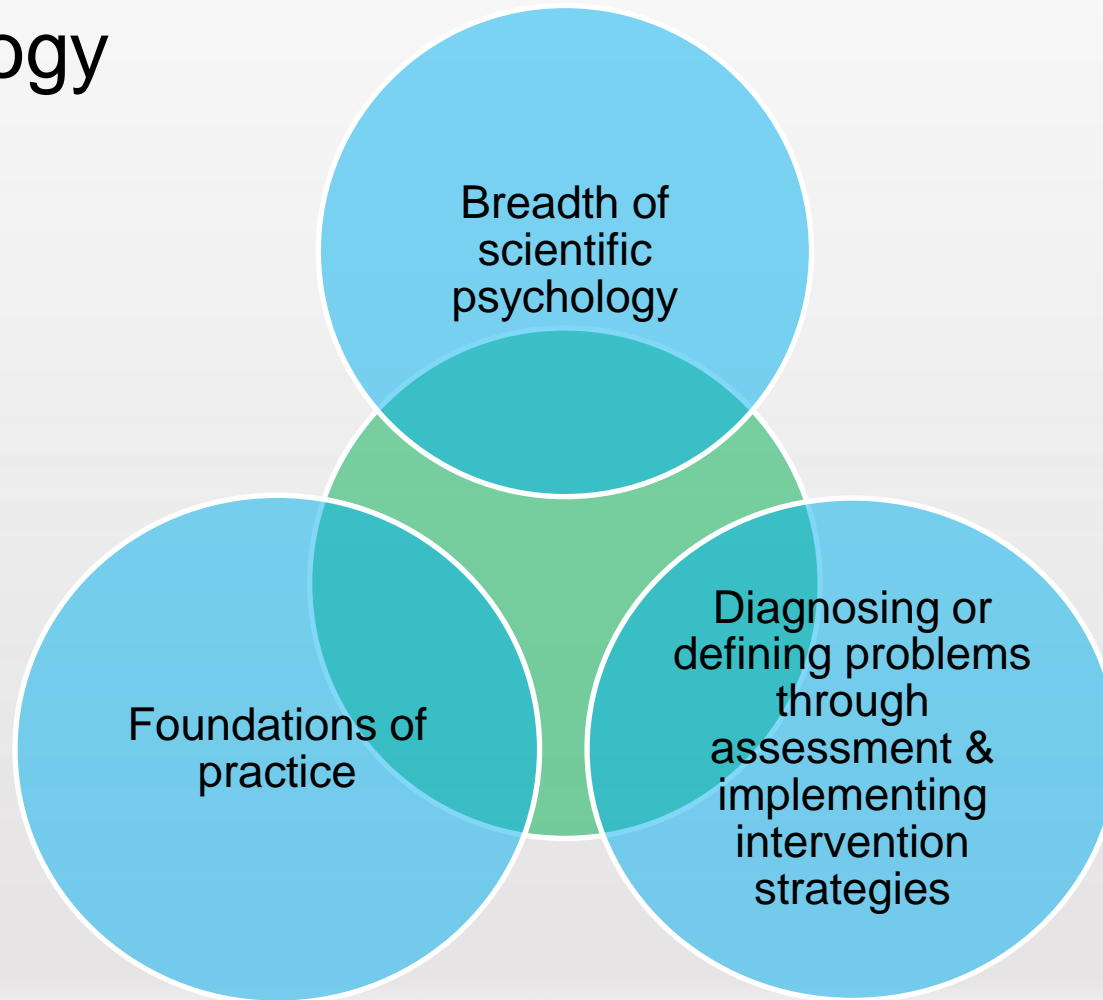
What Graduate Students Haven't Learned about Black Women

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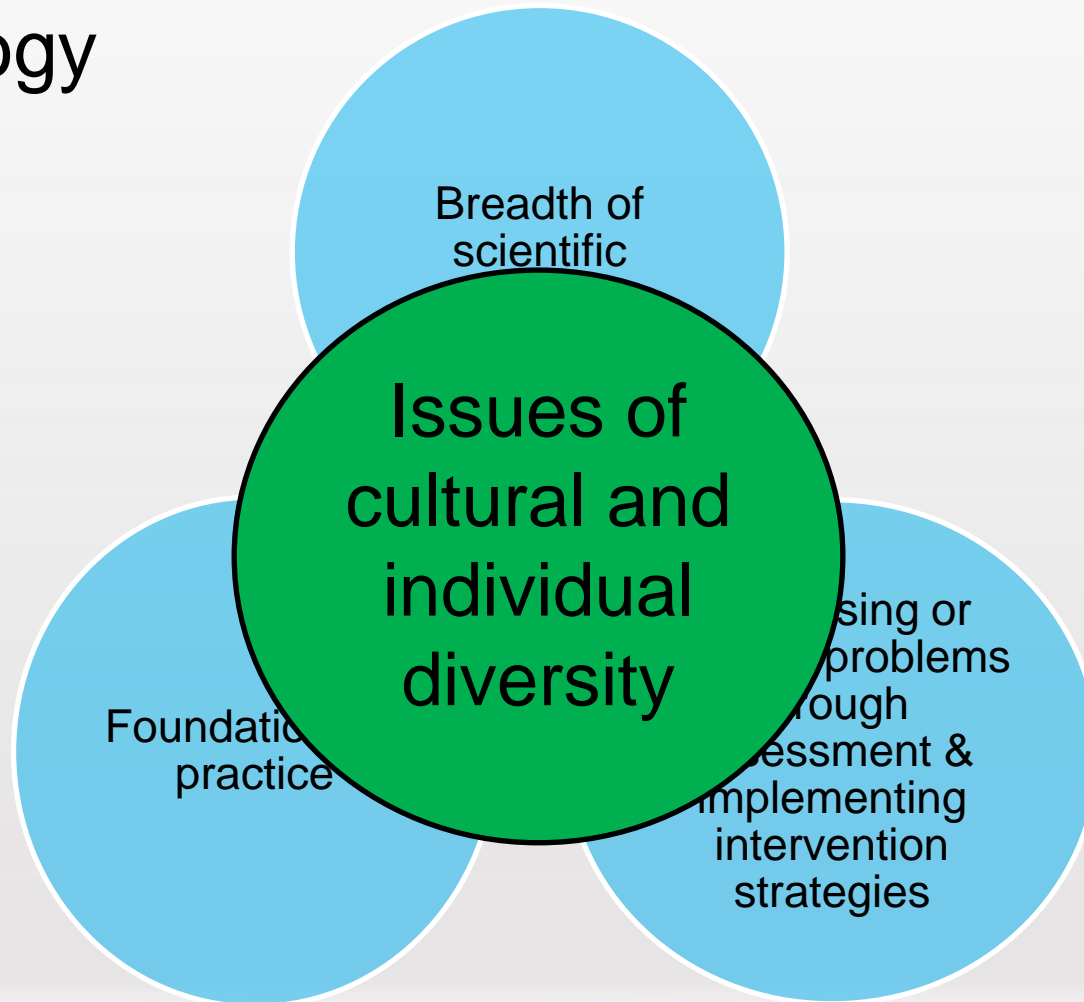
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American Psychological Association: Content Areas for Accredited Programs in Professional Psychology



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Multicultural Counseling & Psychotherapy Courses

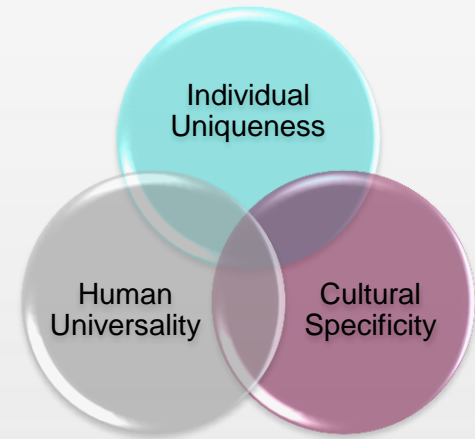
- Focus: Multicultural Competence
 - Self-awareness
 - Knowledge of clients' culture
 - Culturally appropriate treatment

Gaps in the literature and courses regarding Black women

- Sparse literature on appropriateness of current treatment models with Black women
- Little is emphasized on the specific experiences of Black women in courses of diversity

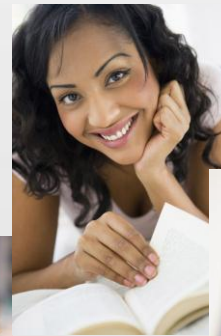
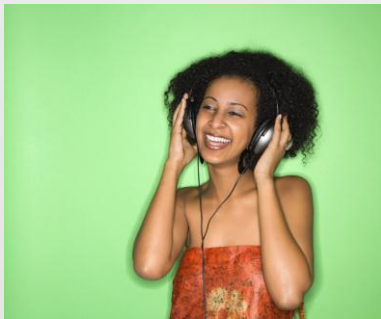
Specific aspects often missing in graduate training about the Black female experience

- Heterogeneity
 - Tripartite Model
- Intersectionality
 - Exposure to multiple forms of oppression
 - Racialized sexual stereotypes



Heterogeneity

- African American women vary in education, income, religion, political affiliation, and overall lifestyle (Gibbs & Fuery, 1994)
- Variation in cultural salience



Intersectionality: Racism, Sexism, and Classism (for some)

- Racialized sexual stereotypes
 - Jezebel, Sapphire, Mammy
 - New stereotypes: Gold digger, Baby Mama, Video Vixen
 - Influence interpersonal interactions
 - Buchanan et al. (2008) : African American women reported significantly more instances of sexual coercion than their White counterparts
 - Influence behavior
 - Townsend and colleagues (2010)- Adolescents: Endorsement of the Jezebel stereotype associated with the perception that risky sexual practices were harmless



How do we challenge our students to face the assumptions they have regarding Black women?

What kinds of assumptions do students tend to have?

What strategies do you employ to get them to face those assumptions?

Implications of lack of knowledge or biases regarding African American women

- Therapeutic alliance
- Inability to address racial trauma, racial silence (Daniels, J. H., 2000)
- Clinicians bringing their stereotypes into the therapy room (Boyd, 1990)
- Inability to address social power differentials between clinician & client
- Premature termination

Applying the Black female experience to traditional treatment methodologies

- Cultural adaptations to EBT for Black women (McNair, 1996)
 - Understand cultural based beliefs and behaviors
 - Stereotypes: Jezebel, Super woman
 - Extended family involvement & codependency
 - Isolation and loneliness found among successful Black women
 - The role of culture in presenting issue
 - Culturally relevant coping strategies
- Psychodynamic theory and therapy (see Jackson & Greene (eds.), 2000)
 - Trust and the therapeutic alliance
 - Development of clinician's self-awareness and ability to discuss client's concerns about difference
 - Managing cultural mistrust

Understanding and utilizing indigenous strategies

- Gendered Racial Socialization
 - Racial Socialization:
 - Racial Pride, education, independence, premarital sex & relationships with men, physical beauty acceptance (Thomas & Speight, 1999)
 - Gender Socialization: masculine and feminine sex role characteristics (Harris, 1996)

Understanding and utilizing indigenous strategies

- Gendered Racial Socialization

- Implicit and explicit messages about the realities of the African American female experience
- Teaches African American women how to cope with the gendered racism (e.g., racialized sexual stereotyping)
- Armoring (Edmonson-Bell & Nkomo, 1998): African American mothers have a crucial role in protecting their daughters from the deleterious impact of the multiple oppressions they face

Understanding and utilizing indigenous strategies

- Implications for graduate training in culturally relevant techniques with African American Women
 - Encouraging students to examine social, political, and economic factors that may contribute to presenting issue
 - Considering the cultural experiences that may serve as strengths
 - Emphasizing the development of trust in the therapeutic alliance
 - Guidelines/Standards for the incorporation of indigenous forms of healing in clinical work



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