



## **Episode 4, Part 2: Cultural Humility in Special Populations** **(Children and Adolescents)**

**Dr. Ijeoma Opara** is a tenure track Assistant Professor in the Department of Social and Behavioral Sciences at the School of Public Health. She's also the founder and director of the substance abuse and sexual health lab. Her research interests focus on HIV AIDS, STI and substance use prevention for urban youth racial and gender specific prevention interventions for black girls and community based participatory research with urban youth. Dr. Opara has received many awards for her work in prevention research from the American Public Health Association, National Council on Family Relations and Academy Health. Most recently, Dr. Opara was named the 2020 recipient of the NIH directors early independence Award, which funds her five-year community-based study on youth substance use, mental health outcomes, and neighborhoods in Paterson, New Jersey. The early independence award is given to Junior Scientists through the high risk-high reward program who have demonstrated exceptional ability to engage in independent research. Dr. Opara's teaching experiences include her former appointment as an assistant professor at Stony Brook University School of Social Welfare from 2019 to 2021, where she taught graduate level Child and Family social work practice courses. She has also worked as an adjunct professor at Columbia University's School of Social Work, teaching a graduate level adolescent development course and at Rutgers University Bloustein School of Planning and Social Policy, where he taught an undergraduate social justice in public health course. Dr. Parr received her PhD in Family Science and Human Development at Montclair State University, a Master of Social Work from New York University with a specialization in primary and behavioral health integrated care, a Master of Public Health in epidemiology from New York Medical College and a Bachelors of Arts in Psychology from New Jersey City University. During her doctoral studies, Dr. Opara received an external pre doctoral fellowship from the behavioral sciences training on Drug Abuse research housed at NYU funded by the National Institute on Drug Abuse, which funded her dissertation research and doctoral training. Dr. Opara can be found on Twitter @IjeomaOparaPHD, Instagram [dr.ijeoma.opara](https://www.instagram.com/dr.ijeoma.opara), and at her personal website: [www.ijeomaopara.com](http://www.ijeomaopara.com)

Before You Listen: *Self-reflect and/or journal about the following*

- Reflect on your experiences working with families, or if you do not have experience working with families, think of an adult client who discussed their relationship with their parents and siblings. Identify cultural aspects that played a role in this relationship.
- Have you ever talked to a client or a supervisor about race? Reflect on this experience. How did you feel about it? What was the outcome?

Episode Summary

- Dr. Opara discusses the way case conceptualization differs by population. She reminds listeners that clients may not be initially comfortable sharing private, personal information. This comfort level can differ by age, ethnicity, race, religion, and other cultural factors. We may not get all the information we need in the beginning, so we should be prepared for information collection to take time.
- In working with families, Dr. Opara discusses different family cultures and how they play a role in therapy. For example, she has worked with families with patriarchal structures, where the father is the head of the household, and the therapist is expected to work with the father only. She has also worked with families where the father is not involved in therapy, and she is only working with the mother. She recommends being aware of your own bias, being understanding, being curious, asking questions, and not letting your own

opinions about their family structure get in the way of improving the presented symptoms. Respect and work within their family system.

- In some cultures and families, words like “depression” and “anxiety” can have a profound impact when a therapist uses them to describe a client. We want to be respectful of that and work within the family culture to move towards healing. We want to be careful not to alienate clients and their families, because we want to be able to provide our services.
- Dr. Opara offers 8 strategies for cultural humility in child/family therapy.
  1. Not everyone who is part of the same culture is the same, has the same cultural awareness, has the same experiences with prejudice or racism.
  2. Be honest with yourself that you have biases. We all have biases. Clients can pick up on when their therapist is not fully hearing them.
  3. Meet clients where they are. They may not be ready to talk about emotions or trauma. It might take time to get to the point where they can talk about these things, and we should let them get there on their own time. Be comfortable with silence.
  4. Be authentic. Remind yourself and your client that the goal of therapy is to end therapy and continuously work with them to find ways to support their mental health without you.
  5. Ask clients how they prefer for their therapist to learn about their culture. Ask if they would be willing to teach you aspects? Are there books you should read? Are there other resources you should seek out?
  6. Encourage cultural and racial pride. Focus on the positives and strengths that a client’s culture contributes to their therapeutic process. Remember that the “right way” to do therapy is not the “white American way.”
  7. Highlight strengths in your clients. Therapy often brings up a lot of negatives or weaknesses about a client, so therapists can work with them to highlight personal strengths and celebrate them,
  8. Be comfortable talking about race, but don’t make it about you.
- For white therapists working with Black clients, if they are not talking with you about race, that is okay. Provide them with a space to discuss these things, but if they choose not to, that’s okay. You may not be the person they want to talk to about these things, so do not force it. Your job is to address their symptoms.
- Dr. Opara discusses how therapists should strive to understand parents’ culture while keeping the child client’s mental health at the center of treatment. For example, she discusses immigrant parents balancing their own culture while raising children in the US, and parents who struggle with their child coming out as LGBTQ+.
- Dr. Opara discusses working with other marginalized groups, such as clients with HIV or who are houseless. Sometimes we have to address other concerns before we can address mental health. Finding support groups or identifying resources for affordable housing or financial assistance may take priority over their mental health concerns.
- *Dr. Opara shouts out to:* [Dr. Noni Gaylord-Harden](#), [Dr. Isha Metzger](#), [Dr. Raquel Martin](#), [Dr. Riana Anderson](#), [Dr. Rheeda Walker](#), and [Village of Wisdom](#)

After You Listen: *Discuss the following with an accountability group and/or partner*

- What are some ways your own experiences or reactions agree or disagree with Dr. Opara’s conceptualization of culture in family therapy? How is this related to your specific identities, privileges, and/or positionality?
- How would you discuss learning about a client’s culture with clients?
- How would you bring up your own race with clients of a different race? Discuss different strategies of bringing up these topics to ensure that you are not making the conversation about yourself.

- How would you work with a client who has different values than you? For example, a parent who is angry that their child has come out as LGBTQ+. How will you practice non-judgmental curiosity as an approach to understanding the root of their anger to find a way to move toward addressing the child's mental health?
- For therapists who do not work with children and families, think about how will you work with an adult client who expresses anti-gay views about a member of their family.

After You Listen: *Action items*

- As therapists, our job is to address mental health symptoms, but what if other things are getting in the way? Find resources in your area for support groups, food, housing, and financial assistance programs.
- Find and continue to build your list of go-to resources for clients.

Read more about Dr. Opara and her research here:

- [https://ysph.yale.edu/profile/ijeoma\\_opara/](https://ysph.yale.edu/profile/ijeoma_opara/)

Recent work:

Lardier, D. T., **Opara, I.**, Garcia-Reid, P., & Reid, R. J. (2021). The mediating role of ethnic identity and social justice orientation between community civic participation, psychological sense of community, and dimensions of psychological empowerment among adolescents of color. *The Urban Review*, 53(3), 403-423.  
<https://doi.org/10.1007/s11256-020-00573-z>

Lardier Jr, D. T., **Opara, I.**, & Roach, E. (2021). A latent profile analysis of psychological sense of community and ethnic identity among racial-ethnic minority young adults from the southwestern United States. *Journal of Community Psychology*.  
<https://doi.org/10.1002/jcop.22686>

**Opara, I.**, Hill, A. V., Calhoun, A., Francois, M., Alves, C., Garcia-Reid, P., & Reid, R. J. (2021). Sociopolitical control as a mediator between ethnic identity and social support on 30-day drug use among black girls. *Journal of Ethnicity in Substance Abuse*, 1-20.  
<https://doi.org/10.1080/15332640.2021.1975007>

Wint, K. M., **Opara, I.**, Gordon, R., & Brooms, D. R. (2021). Countering Educational Disparities Among Black Boys and Black Adolescent Boys from Pre-K to High School: A Life Course-Intersectional Perspective. *The Urban Review*, 1-24.  
<https://doi.org/10.1007/s11256-021-00616-z>

Visit [Dr. Opara's Google Scholar](#) profile to read more of her publications.

Host Bios

**Jiwon "Jennie" Min, M.S.**, is a cisgender heterosexual Korean Canadian. She is a 6th-year doctoral candidate in clinical psychology at Oklahoma State University. Her research focuses on the daily processes of personality pathology, mobile treatment of related maladaptive behaviors (e.g., nonsuicidal self-injury, substance use) and multi-method, multi-informant assessment of personality pathology. In her free time, she loves to play with her cats and sing. You can find her on Twitter @JiwonMin.

**Déjà Clement, M.S.**, is a cisgender heterosexual Caribbean American/Black woman, originally from NY. She is a 4th year Clinical Psychology doctoral student whose research takes an interdisciplinary approach by combining public health and clinical psychology to examine risk

and resilience factors for mental health outcomes and health behaviors for Black women. Outside of grad school, she loves food and taking pictures of food and spending time with her people. You can follow her Twitter @ClementDeja.