

HOW CAN YOU HELP BIPOC YOUTH

AS A WHITE THERAPIST?



Overcome Your Own Implicit Bias

Implicit bias is prejudice that occurs outside your awareness -- *even if it doesn't line up with your conscious values and beliefs.*

Implicit biases left unexplored and unchecked may cause **internalized narratives of inferiority** in your client.

I GUESS I AM
JUST BEING
OVERDRAMATIC...



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Clinician Effectiveness

Given limitations to multicultural training, **white clinicians may not be equipped or familiar with interacting with BIPOC youth on issues concerning ethnicity, culture, and racism.**



White providers also often **lack knowledge of structural and environmental discrimination** that BIPOC youth, their families, and their communities experience.

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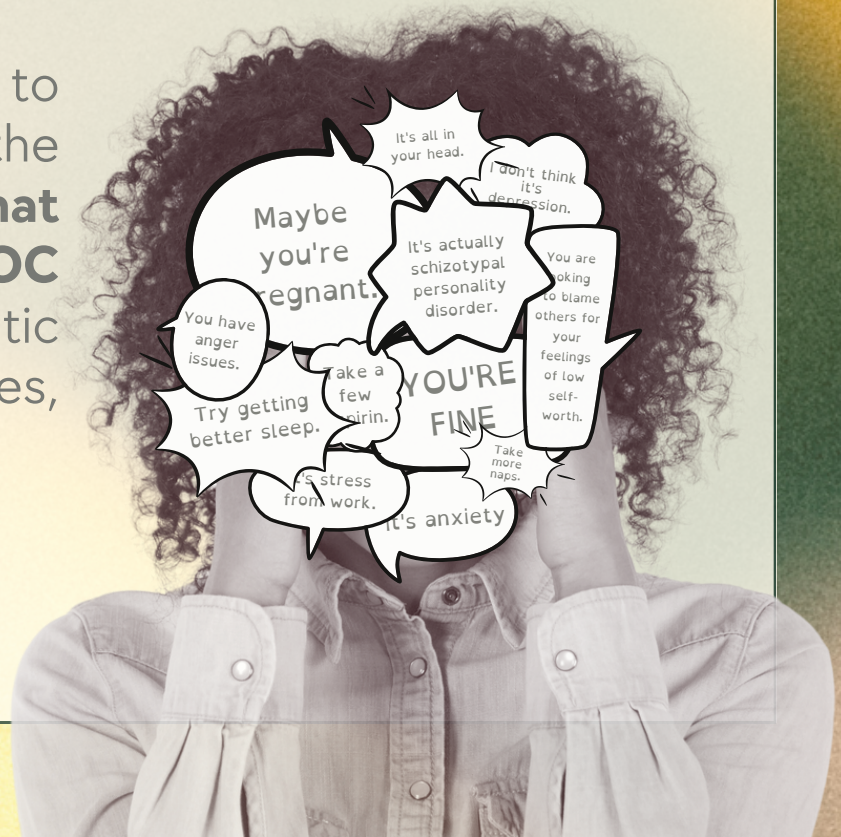
Misdiagnoses

Some providers may be **reluctant to discuss issues of race and discrimination** due to **fear, denial of White privilege, color blindness, or** expressing discomfort around talking about race.



Misdiagnoses

You are less likely to recognize and consider the **environmental factors that negatively impact BIPOC mental health** in diagnostic and treatment processes, leading to **misdiagnoses**.



Savior Complex

Some white clinicians may even interact with BIPOC youth in ways indicative of a "savior complex" that occurs when a clinician benefits from being **perceived as an ally without risking their existing privilege and power**



Source: **Conceptualizing Community Mental Health Service Utilization for BIPOC Youth**



Authors: Isha W. Metzger, Erlanger A. Turner, Maryam M. Jernigan-Noesi, Sycarah Fisher, Julie K. Nguyen, Shola Shodiya-Zeumaultf, and Brian Griffith

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Conceptualizing Community Mental Health Service Utilization for BIPOC Youth

Isha W. Metzger , Erlanger A. Turner , Maryam M. Jernigan-Noesi^a, Sycarah Fisher^a, Julie K. Nguyen^a, shola shodiya-zeumaultf, and Brian Griffith^b

^aDepartment of Psychology, Georgia State University; ^bGraduate School of Education and Psychology, Pepperdine University; ^cJernigan & Associates LLC; ^dDepartment of Educational Psychology, University of Georgia; ^eDepartment of Psychology, University of Washington; ^fDepartment of Counseling Psychology, Georgia State University

ABSTRACT

Historically, children and adolescents who identify as Black, Indigenous, and other people of Color (BIPOC) have had inequitable access to mental healthcare, and research shows that they are significantly less likely than their white American counterparts to utilize available services. Research identifies barriers that disproportionately impact racially minoritized youth; however, a need remains to examine and change systems and processes that create and maintain racial inequities in mental health service utilization. The current manuscript critically reviews the literature and provides an ecologically based conceptual model synthesizing previous literature relating to BIPOC youth barriers for service utilization. The review emphasizes client (e.g., stigma, system mistrust, childcare needs, help seeking attitudes), provider (e.g., implicit bias, cultural humility, clinician efficacy), structural/organizational (clinic location/proximity to public transportation, hours of operation, wraparound services, accepting Medicaid and other insurance-related issues), and community (e.g., improving experiences in education, the juvenile criminal-legal system, medical, and social service systems) factors that serve as barriers and facilitators contributing to disparities in community mental health service utilization for BIPOC youth. Importantly, we conclude with suggestions for dismantling inequitable systems, increasing accessibility, availability, appropriateness, and acceptability of services, and ultimately reducing disparities in efficacious mental health service utilization for BIPOC youth.