

TIP SHEET

Cultural Considerations in Short-Term Cognitive Behavioral Therapy

Guileine F. Kraft, PhD, LGSW

What is CBT in Cross-Cultural Practice?

Cognitive Behavioral Therapy with cross-cultural clients refers to:

- ❖ How the cross-cultural client thinks about them self, the world, and other people, in relation to the new environment, new systems, and new culture
- How the cross-cultural client's actions and behaviors influence their thoughts and feelings
- Helps a client change how they think ("Cognitive") and what they do ("Behavior")
- Helps the client to feel better as a result of the implemented changes
- Focuses on the "here and now" problems and difficulties. Instead of focusing on the causes of the distress or symptoms in the past, it looks for ways to improve the client's state of mind now

When does CBT help?

CBT has been shown to help with many different types of problems. These include: anxiety, depression, panic, phobias (including agoraphobia and social phobia), stress, bulimia, obsessive compulsive disorder, post-traumatic stress disorder, bipolar disorder and psychosis. CBT may also help if you have difficulties with anger, a low opinion of yourself or physical health problems, like pain or fatigue.

- Who often experience anxiety, depression, panic, phobias, stress, PTSD, anger, and culture shock
- In addition to being helpful with the cross-cultural client's cultural assimilation, CBT may facilitate improved outcomes with any pre-existing conditions, which may include anxiety, depression, stress, PTSD, etc.

How does CBT work with cross-cultural clients?

CBT can help cross-cultural clients partialize challenges that seem overwhelming by breaking them down into individual units, thus making it easier for the cross-cultural client to see how the challenges/symptoms are connected and how they affect the client. These individual units include:

❖ A **Situation** – a challenge, circumstance/event, or difficult situation

Which when internalized, may provoke:

- Thoughts of uncertainty, defeatist, negativity
- **Emotions** anxiety, depression, stress, anger, rejected, sad
- Physical feelings _ various physical symptoms manifesting in some form of pain or fatigue
- **Actions** isolation, aggressive behavior

Each of these areas can affect the others. How the client thinks about a problem can affect how they feel physically and emotionally. It can also alter what the client does about it. There are helpful and unhelpful ways of reacting to most situations, depending on how the client thinks about them.

EXPERIENTIAL CYCLE

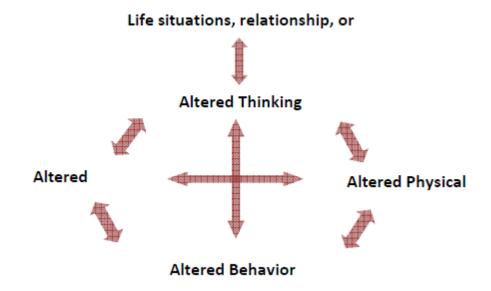


The experiences of cross-cultural clients, similar to *regular* clients, are largely influenced by the situation, their thoughts about the situation, their actions, and their feelings. The whole sequence, and parts of it, can also feedback like this:

This "vicious circle" can make the client feel worse. It can even create new situations that make the client feel worse. The client can start to believe quite unrealistic (and unpleasant) things about them self. This happens because, when we are distressed, we are more likely to jump to conclusions and to interpret things – in the current situation or future situations – in extreme and unhelpful ways. CBT can help the client to break this vicious circle of altered thinking, feelings and behavior.

When the client sees the parts of the sequence clearly, they can change them - and so change the way they feel. CBT aims to get the client to a point where they can "do it them self", and work out their own ways of tackling these problems. Helping the cross-cultural client break this vicious cycle involves facilitating CBT with Cultural Self-Determination.

A Five Areas Assessment



CHANGE VIEW: 10 key facts about CBT

Change: your thoughts and actions **H**omework: practice makes perfect

Action: don't just talk, do! **N**eed: pinpoint the problem **G**oals: move towards them **E**vidence: shows CBT can work **V**iew: events from another angle I can do it: self-help approach **E**xperience: test out your beliefs

Write it down: to remember progress

Adapted from the Royal College of Psychiatrists Public Education Editorial Board. http://www.rcpsych.ac.uk/mentalhealthinfoforall/treatments/cbt.aspx