



How to Support Culturally Informed Mental Health Programs

Black, Indigenous, and People of Color (BIPOC) experience disproportionately high rates of mental health and substance use disorders. Yet, they often have less access to treatment and supportive services than other groups, due to higher levels of racism, systemic oppression, and trauma. Additional factors such as a lack of Black, Latinx, Asian, and Indigenous providers in the workforce, misdiagnosis due to unconscious bias, language barriers, and uninsurance also disproportionately keep communities of color from receiving high quality mental health care. Philanthropy can help by supporting culturally informed mental health models that are developed by and for communities of color specifically to address their unique needs. Here are some ways that funders can identify and promote these models.

Limitations of Popular Models

Many widely used mental health models today were not developed by communities of color or with them in mind. Furthermore, the evidence base for models meant for the general population also often excludes these communities. For example, randomized control studies typically do not include people who have gone through multiple incidents of trauma, experience suicidality, or use substances. Failure to consider complex and ongoing traumatic stress in the development and study of mental health models limits their usefulness to communities of color, who bear a disproportionate burden of traumatic stress as compared to their White peers.

The Importance of Culturally Informed Programs

One way that health systems have tried to address the limitations described above is through **cultural competence** training for non-BIPOC mental health providers. These trainings aim to help providers to be aware of different cultural norms among their patients and address related barriers to care. However, [this approach often falls short](#) of **cultural humility**, which is a state of continuous learning and self-reflection regarding cultural diversity, with providers being open to learning from patients themselves as well.

Another strategy to address limitations of certain programs is **cultural modification**, or taking an existing model and tailoring it to a specific cultural group. For example, providers may modify an existing trauma-focused cognitive behavioral therapy (CBT) program for the general population to serve Latino children specifically. However, both cultural competence and cultural modification fail to fully address the limitations of models that were never developed with people of color in mind in the first place.



On the other hand, **culturally informed programs** are created by and for communities themselves, often by psychologists of that background in conjunction with community leaders and healers. Culturally informed models are specifically developed with specific and unique needs of the community in mind from the start. Examples of culturally informed programs include [African-centered psychotherapy](#), [womanist and mujerista psychotherapy](#), [liberation psychotherapy](#), and [hip hop therapy](#).

Characteristics of Culturally Informed Programs

Culturally informed models meet community members in the physical spaces, cultural settings, and historical contexts where they are. Considerations include providing programs in spaces such as schools and community centers, delivering care through providers of color, and providing wraparound services, which may include culture and faith-based social activities, facilitated support groups based on shared lived experiences, and workforce development and employment support. These models also take into account the history of oppression that communities of color have faced, and how factors like racism and intergenerational trauma affect these communities today.

This often means incorporating faith and traditional healing, which is often left out of most psychology frameworks and models. For example, for Native Americans/American Indians – a group that experiences the highest rate of suicide of any population – this can mean working with traditional and spiritual healers, who members of the community often seek out for care over other medical sources. For African Americans, this may mean training religious leaders such as pastors to recognize signs of mental distress and provide them with resources for referrals to care.

Culturally informed programs may also make linguistic services (interpretation and translation) free and available in treatment settings. This is particularly important for immigrants, refugees, and other patients of color for whom language is a barrier to accessing quality care.

How Can Philanthropy Help?

Culturally informed programs are often hard to find and do not have the resources necessary to expand and scale, or evaluate their impact. Philanthropy has an important opportunity to elevate and expand those models of care developed for and by the communities they intend to serve.

Funders looking for “evidence-based” programs may ask, but where is the evidence for such programs? Keep in mind that culturally informed programs often do not have the funding to do large studies such as randomized control trials to prove their effectiveness. Unfortunately, as a



result, these programs are often labeled as ineffective. Furthermore, it is important to ensure that programs meant to serve communities of color are tested in these populations specifically.

Supporting culturally informed mental health programming first requires expanding the use of the term evidence beyond rigorous, large-scale studies and instead looking for promising models that are led by and serve communities of color, and deeply rooted in the communities they seek to serve. Philanthropy is uniquely positioned to take on risk in this area and partner with promising programs to help build and scale.

With the above characteristics of culturally informed programs in mind, funders can:

- Identify those models that meet communities of color where they are with relevant, affirming programming.
- Reach out to developers of these programs and simply ask how philanthropy can support the dissemination of their model. This may entail bringing the model to different geographies or communities, and/or supporting the development of a more robust evidence base.
- Fund technical assistance and capacity building support to organizations that serve communities of color particularly place-based grassroots organizations and those led by leaders from those communities.
- Support peer-led work given the importance of a communal focus among many communities of color.
- Ensure inclusion of diverse mental health experts at the beginning stages of program development to ensure more inclusive programming and build collaboration.
- Leverage the resources, knowledge, and networks of other funders that have a deep focus in communities of color to foster partnership in the field and learn from others.

Culturally informed models are key to improving mental health outcomes for communities of color. Philanthropy is uniquely positioned to come together and support what have been traditionally viewed as risky models to reap outsized rewards in this area of urgent need.

Mindful Philanthropy is grateful for the expertise of the following individuals, whose insights helped inform this piece: Dr. Thema Bryant, President of the American Psychological Association and tenured professor of psychology at Pepperdine University; Stephanie Bell-Rose, Co-Founder and Board member, The Steve Fund; and Jackie St. Louis, Founder of Tender Tongues Counseling and Principal of D-Fine Concepts Counseling.