

Impact of Client-Therapist Ethnic Match on Treatment Outcome for African-American Clients Presenting with Depressive and Anxious Symptoms

Ethnicity of Client



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Introduction

The United States population is 320,576,233(United States Census Bureau, 2015). According to data from the United States 2010 Census, the African-American population was 38.9 million, thus representing 13% of the total population.

Shin (2005) argues that individuals from the African-American population have been found to have less access to mental health services, a lower probability of receiving needed services, and a greater likelihood of receiving poor quality of care, thus influencing retention during treatment and the efficacy of counseling. However, even when African-Americans access mental health care, there is risk of meeting with a therapist who may or may not understand the African-American experience and may even micro-aggress against minority clients. This leaves us to wonder whether the ethnic match of clients to therapists is important.

Objectives

The present study examines the efficacy of clienttherapist match during treatment and to explores whether the strength of the therapeutic alliance yields positive outcomes.

Hypotheses include that African-American clients matched with African-American therapist will show:

- A stronger therapeutic alliance
- Greater improvement during treatment for depression and anxiety than African-American clients working with Caucasian therapists or Caucasian clients working with African American therapists.



Methods

Participants

The participants were 1286 counselees who completed measures of symptoms and therapeutic alliance across the course of their counseling at the network of Richmont Graduate University counseling centers the Chattanooga and Atlanta areas. Some 60 therapists from Richmont include graduate student interns, unlicensed master's level clinicians, and licensed LPCs, MFTs, and psychologists.. All client participants signed a release for the data to be collected as part of their informed consent. Counselors gave consent to provide demographic information on themselves.

Inasmuch as ethnicity data on clients is not reported on the actual client survey forms, this was added only when available through the submission of the therapist. Moreover, not all therapists chose to provide ethnicity data, leading to limited cases where both ethnicity of client and therapist were available.

Measures

Prior to each session, clients filled out a brief outcome questionnaire that is designed from a collaborative Outcome Resource Network (ACORN) by the Center for Clinical informatics and based on research showing the items to be effective in tracking progress. Items tracked the therapeutic alliance, affective symptoms ("Symptoms" in the data), religious coping, overall progress, and change in daily and social functioning.

Procedures

These forms are uploaded to a secure online database free of identifying information, and collated by therapist and client. Data is then downloaded and analyzed using SPSS.

Results

Table 1
Ethnicity of Client * Ethnicity of Counselor Cross-tabulation

Clients Seen by Ethnicity of Counselor

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	Caucasian	African American	Latino/a	Total
Caucasian	368	17	6	391
African American	21	7	O	28
Hispanic	3	0	0	3
Asian/Pacific Islander	2	О	О	2
Other	7	0	0	7
Total	409	24	6	431

Note. Small Sample Size

Table 2 *T-test Statistics by Client Ethnicity*

	Ethnic Match	N	Mean Therapeutic Alliance	t value	Significance
Caucasian Clients	CC	352	.08	5.54 (nonequal Variances)	P<.001
	AC	15	.00		
African- American Clients	AA	7	.05	-1.018	N/S
	CA	21	.24		

Table 3
Change In Symptom Scores

CC	.17
AA	.06
CA	.22
AC	.04
Total	.17

Conclusions

- Caucasian therapists have significantly better alliances with Caucasian than with African-American clients.
- African-American therapists do not show differing alliances depending on client ethnicity
- African American clients matched with Caucasian therapists showed a stronger therapeutic alliance compared to African American therapists (see table 2).
- The client-therapist ethnic match did not relate to change in anxious and depressed symptoms; improvement was independent of ethnic match (see table 3).

Weaknesses of the Present Study

- Clearly the N sizes varied widely so the groups were not clearly comparable
- Few therapists were used, and scores may be a function of therapist personality and not ethnicity
- Missing data reduced the N

References

Constantine, M. G. (2007). Racial microaggressions against African American clients in cross-racial counseling relationships. *Journal of Counseling Psychology*, 54(1), 1-16. Lambert, M. J. (2011). Yes, It Is Time for Clinicians to Routinely Monitor Treatment Outcome". In B. L. Duncan, S. D. Miller, B. E. Wampold, & M. A. Hubble (Eds.), *The Heart & Soul of Change* (2nd ed. (pp. 239-266). Washington DC: American Psychological Association.

Shin, S., Chow, C., Levy, R., Allen, E., & Leff, S. (2005). A Meta-Analytic Review of Racial-Ethnic Matvhing for African American and Caucasian American Clients and Clinicians.

Statistical abstract of the United States:2004-2005. (2015). Retrieved from http://www.census.gov/statab/www/sa04aian.pdf U.S.Census Bureau. (2010). *About poverty*. Retrieved from http://www.census.gov/hhes/www/poverty/about/overview/index.html