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International Mental Health Education, Service, and Research: Working Across Cultural Boundaries with Humility, Creativity, and Perseverance [Keynote]

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International Mental Health Education, Service, and Research:

Working Across Cultural Boundaries with Humility, Creativity, and Perseverance

Presenters

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Learning Objectives

- Participants will reflect on professional and personal challenges and joys of promoting mental health education and training, services, and research in communities worldwide
- Participants will understand the essential role of cultural humility and equal partnership in building international collaborations
- Participants will be able to identify strategies in practice, training, and research that contribute to increased counseling knowledge and professionalism globally

Our Intentions



- Internationalization rather than globalization
- Diversity and cultural stereotypes

Cultural Humility



- Personal exploration and positionality (Self-reflection and the LifeLong Learner Model)
- Ongoing dialogue

Intercultural Dialogue



- To effectively communicate and engage
- To exchange of values, beliefs, and perspectives
- To reflect on one's own experiences

Your Participation



Encouraged to engage with each other in the chat

International
Mental Health
Education

Challenges, Joys, and Lessons Learned

Fiji in Context

Under British colonial rule for 96 years. Gained independence in Oct. 1970



Population: 884,887

Ethnicities:

- I-Taukei
- Indo-Fijian
- Routman

Religions:

- Christian
- Hindu
- Islam

SES:

24% live in poverty

36.5% rural

Developing the Counseling Profession in Fiji

- Counseling approach: Advice giving
- Training standards: Based on other countries
- Licensure/credentialing: No system
- Ethical standards: Grounded in social work and psychology

Developing the Counseling Profession in Fiji

- Building a counseling program
 - Consultant
 - Feedback
 - Evaluation



In Burma (Myanmar)

- Very brief primer on Burma (Myanmar)
- Why Myanmar Clinical Psychology Consortium (MCPC)?
- About MCPC educational and clinical training program

Very brief primer on Burma (Myanmar)

Population: 54 million

Ethnicity: 8 "main" and 135 minority ethnic groups

Religion:

Buddhists 87.9% Christians 6.2% Muslims 4.3% Hindus 0.5% Other religions 1.0% No religion 0.1%



<u>History</u>: Over a century under British colonial rule

1948 Independence

1962 Military coup

2010 General election. Nominally civilian govt.

2021 Feb. Military coup

<u>The Name</u>: Burma is the anglicized name called by the British colonial powers

1989 - Burmese military govt. changed the name to Myanmar

Since 2010 - Both names used by civilian govt. Those inside the country tend to call *Myanmar* while those outside tend to call *Burma*. Remains a contested issue.

Why Myanmar Clinical Psychology Consortium?

- No clinical or counseling psychology program at any university in Burma
- Eight master's level counselors, who are Myanmar nationals, in Burma-all received education abroad
- Mental health care is primarily medication management

- Education& Training
- Mental Health Services
- Research

NEED

About Myanmar Clinical Psychology Consortium

- Organized coursework modeled after U.S. graduate program in clinical and counseling psychology
- Counseling practicum with scheduled clinical supervisors (individual and group)
- Community studies

How did the education program work?

2017-2020

- Zero budget
- Volunteer-Based
- Each cohort 16 months
- Primarily in-person

Training Counselors in East and Southeast Asia

- MCPC: Counselor and Clinical Supervisor
- What can you bring to an existing mental health system?
 - In China: mistreatment of children
 - In Malaysia: supporting clients living with schizophrenia; suicide prevention
- Observations and guidelines for transnational work (Duan, 2019; Smith et al., 2018)

- East Asia: China, Japan,
 North Korea, South Korea,
 Mongolia, and Taiwan
- Southeast Asia: Brunei,
 Burma (Myanmar),
 Cambodia, Indonesia, Laos,
 Malaysia, the Philippines,
 Singapore, Thailand,
 Timor-Leste (East Timor),
 and Vietnam.

(The U.S. Department of State, 2022)





Training International Counselors in the United States

- Unique challenges of international counselors-in-training and supervisees
- Training, supervising and mentoring international counselors
- The joy and mutual growth

InternationalMental HealthService

Challenges, Joys, and Lessons Learned

In Burma (Myanmar)

- Counseling services landscape in Burma
- MCPC as a service program

Counseling Landscape in Myanmar (Burma)

- "Counseling," if provided, is usually by staff from non-governmental organizations (NGOs) some with a specific approach and most with minimal education in psychology and generally without practicum or supervision
- Anyone can and have been calling themselves "counselor" and offer services

MCPC's Counseling Services

- Based on age groups: children and adolescents, adults, and older adults
- Special populations: persons with neurodevelopmental disorders, physical disabilities, persons with alcohol-related disorders, and sexual minorities

How did counseling service work?

On the Ground

- As a supervisor
- As a counselor
- As an interpreter
- As a witness

Training Educators in Fiji

- Training of educators
 - Teaching
 - Research
 - Service



3. International Mental Health Research

Challenges, Joys, and Lessons Learned

International Mental Health Research (IMHR)

- Necessity and urgency of international mental health research
 - Increasing mental health needs
 - IMHR dominated by US/Western researchers who view from the US/Western framework
 - IMHR gives voice to diverse MH practices around the world

Culturally Relevant and Affirming Research

- Whose stories? Who is the audience?
- Who is telling the stories using and from what perspectives?
- For whose benefits?

Developing a Research Agenda in Fiji

- School practitioner training agenda
 - How we developed the research studies
 - Lessons learned from cross-cultural research
 - Moving forward with the research

Burma (Myanmar) - At MCPC

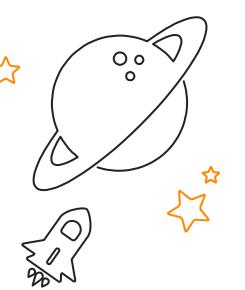
- Community-focused studies
- Internal IRB
- Some examples:
 - Post Gender-Based Violence Services in Myanmar from the Survivors' Perspectives
 - Trauma and Resilience of Sexual Minorities in Myanmar

How did these studies work?

In China

- Emerging themes from qualitative studies on US-trained Chinese counselors adapting counseling to the Chinese context:
 - Multisystemic dissonance
 - Actively reaching for internal and external resources to adapt
 - Taking deliberate actions as adaptation strategies
 - Experiencing professional and personal growth

Our concluding & thoughts



THANK YOU!

Any questions? Concluding remarks?

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