

How can Educational Psychologists develop Culturally Responsive Practice? A
Delphi Study.

Ellie Sakata

A thesis submitted for the degree of Professional Doctorate in Child, Community and
Educational Psychology

Tavistock and Portman NHS Foundation Trust/ University of Essex

Date of submission for examination (May 2021)

Abstract

The United Kingdom's response to growing multiculturalism is subject to debate over how to respond, accommodate and promote cultural diversity. This impacts the role of educational psychologists (EPs) who work with children and young people, their families, and professionals from a variety of cultural backgrounds. EPs are responsible for engaging in, and developing, Culturally Responsive Practice (CRP), an ongoing process which is both intrapersonal and interpersonal; this will ensure the best possible outcomes for their culturally diverse clients. This thesis is an exploratory study which aimed to address the lack of research regarding how EPs take culture into account in their work, and more specifically, develop a framework that can be used by EPs to evaluate the extent to which they are culturally responsive in their practice.

This research used a two-round Delphi method to reach consensus regarding what features of CRP are important for EP practice. Round one consisted of an extensive review of the literature pertaining to culture, mainly focusing on School Psychology practice in the United States, and more broadly within the psychological professions. Through this, a deductive thematic analysis was used to identify statements associated with CRP. These statements were presented to EPs (n=23) with relevant experience responding to cultural difference, asking them to rate their perceived importance for their practice, as well as inviting EPs to provide their own features of CRP. In round two, EPs (n=18) evaluated their response to statements which had not met consensus after round one considering the group opinion, and rated additional features of CRP collated from participants. At the end of round two, out of a possible 103 statements, 82 statements were deemed as key features of CRP for EPs, which

is presented as a guiding framework for practice. Statements which did/did not meet consensus are considered, and implications for EP practice will be discussed.

Acknowledgements

I would like to say a huge thank you to everyone who has contributed to this research and supported me on this journey. Thank you to my supervisor, Dr Rachael Green, who not only introduced me to the wonders of the Delphi but has offered consistent support and guidance (as well as being so containing during my moments of panic!)

Thank you to the EPs for dedicating their time to take part in my research, I am indebted to you all. Thank you to my Tavi 2018 cohort who have been so amazing over the last three years. To those of you who looked over my themes and survey, your feedback was invaluable.

Lastly, thank you to my wonderful family who I owe it all to. To my mum and dad (Otosan), Deborah Eastwood and Kozo Sakata, who have always taught me to be kind and work hard. The values and principles you have instilled in me are at the core of this thesis. To my brother Toby, whose logic and sense of humour made all the difference. To my fiancé Jordan, who has supported me all the way (and had to do a *lot* of listening these past few years). Thank you for always believing in me.

List of Abbreviations

Attention Deficit Hyperactivity Disorder	ADHD
Black, Asian and minority ethnic	BAME
Black and Ethnic Minority Educational Psychology	BEEP
Black and Minority Ethnic in Psychiatry and Psychology	BIPP
Black Lives Matter	BLM
British Psychological Society	BPS
Cultural Assets Identifier	CAI
Child and Adolescent Mental Health Services	CAMHS
Critical Appraisal Skills Programme	CASP
Cognitive Behavioural Therapy	CBT
Cultural Formulation Interview	CFI
Culturally Responsive Cognitive Behavioural Therapy	CR-CBT
Culturally Responsive Consultation	CRC
Culturally Responsive Practice	CRP
Culturally Responsive Questionnaire	CRQ
Children and Young People	CYP
Division of Education and Child Psychology	DECP
English as an Additional Language	EAL
Educational Psychologist(s)/Educational Psychology	EP(s)
Educational Psychology Race and Culture Forum	EPRCF
Educational Psychology Service	EPS
General Certificate of Secondary Education	GCSE
Health and Care Professions Council	HPC
Jones Intentional Multicultural Interview Schedule	JIMIS
Multicultural School Consultation	MSC
National Association of School Psychologists	NASP
Psychotherapy Adaptation and Modification Framework	PAMF
Preferred Reporting Items for Systematic Reviews and Meta-Analyses	PRISMA
Social, Emotional, and Mental Health	SEMH
Special Educational Needs	SEN
Session Evaluation Questionnaire	SEQ
Systematic Literature Review	SLR
School Psychologist(s)/School Psychology	SP(s)
Trainee Educational Psychologist	TEP
Trainee Educational Psychologists Initiative for Cultural Change	TEPICC
Tavistock Research Ethics Committee	TREC
United Kingdom	UK
United States	US

Table of Contents

Abstract	2
Acknowledgements	4
List of Abbreviations	5
List of Tables and Figures	11
List of Tables.....	11
List of Figures	12
1. Introduction.....	17
1.1 Defining Culture	17
1.1.1 Culture, Ethnicity and Race	17
1.2 Multiculturalism and Cultural Inequalities	18
1.3 Multiculturalism in the United Kingdom	19
1.4 Multiculturalism in Education.....	20
1.4.1 Educational Disparities	21
1.5 The Role of Educational Psychologists	23
1.5.1 Governing Bodies	24
1.5.2 What are EPs Doing to Address Culture?.....	24
1.5.3 Considerations and Implications for EP Practice	28
1.5.4 Cultural Theories and Frameworks in EP Practice	31
1.6 Terms of Reference When Working with Cultural Difference in EP practice ...	32
1.6.1 Cultural Competence	33
1.6.2 Cultural Awareness and Humility	34
1.6.3 Cultural Responsiveness	35
1.6.4 Culturally Responsive Practice	36
1.7 Rationale for the Present Study	37
1.8 Research Aims.....	38
1.8.1 Research Questions	38
2. Literature Review.....	40
2.1 Introduction to Literature Review	40
2.2 Literature Search Procedure	40
2.3 How Do SPs Consider Culture Within Their Practice?	47
2.3.1 Differences between EP and SP Working Practices.....	52
2.3.2 Recommendations for Practice.....	55
2.3.2 Assessment	56
2.3.3 Intervention	61

2.3.4 Consultation.....	67
2.3.5 Supervision.....	69
2.4 What Empirical Research is Available Which Demonstrates How EPs Can Develop CRP?	72
2.4.1 Key features of CRP - ‘Cross-Cultural Competencies’	77
2.4.2 CRP in Consultation	81
2.4.3 Culturally Responsive Intervention	89
2.4.4 Exploring EPs’ Work with CYP and Families from Minority Cultural and Linguistic Communities.....	93
2.4.5 Empirical Research in the UK.....	94
2.5 Summary of the SLR.....	98
2.5.1 Use of Models, Tools and Frameworks	98
2.5.2 A Recognition for Continuous Learning	99
2.5.3 The Need for Further Research.....	99
2.5.4 Limitations and Implications for EP Practice	100
2.6 Working Definition of CRP	100
3. Methodology	104
3.1 Aims and Overview of the Research.....	104
3.2 Research Position.....	105
3.2.1 Critical Realist Ontology	106
3.2.2 Pragmatist Epistemology	107
3.2.3 Pragmatic-Critical Realist Position.....	109
3.3 Ethical Considerations	110
3.4 Study Design.....	111
3.4.1 Delphi Method.....	111
3.5 Development of Survey One	117
3.5.1 Survey One Literature Review	118
3.5.2 Thematic Analysis of the Literature and Construction of Survey One	125
3.5.3 Initial Feedback.....	134
3.5.4 Inter-rater Reliability.....	135
3.5.4 Triangulation of Data	136
3.6 Creation of Survey One.....	137
3.6.1 Information and Consent	137
3.6.2 Demographic Information.....	137
3.6.3 Statements Linked to Developing CRP.....	138

3.6.4 Likert Scaling	143
3.6.5 Consensus.....	145
3.7 Pilot.....	146
3.8 Recruitment.....	149
4. Results.....	151
4.1 Results Summary.....	151
4.2 Respondent Characteristics	151
4.2.1 Ethnicity	152
4.2.2 Experience of Engaging in CRP	153
4.2.3 Verification of EP Panel	155
4.3 Round One Results: Statements Reaching Consensus.....	155
4.4 Additional Statements from Round One.....	163
4.5 Statements Not Meeting Consensus After Round One	164
4.6 Statements Meeting Consensus After Round Two	165
4.7 Statements Not Meeting Consensus After Round Two	174
4.8 Final List of Key Features Regarding Developing CRP	187
4.9 Respondent Reflections	193
4.9.1 Reflections on the Cultural Models, Tools and Frameworks	195
4.9.2. Challenges and Opportunities from Completing the Survey	196
4.9.3 Challenges of Engaging in CRP	198
4.9.4 Importance of Developing Learning	198
5. Discussion.....	200
5.1 Aims of the Research.....	200
5.2 Statements Achieving Strong Consensus.....	201
5.3 Statements Which Did Not Reach Consensus	205
5.4 Strengths of the Research	210
5.4.1 Pragmatic Outcome	210
5.4.2 Experience and Participation of Expert Panel.....	210
5.4.3 Respecting Individual Perspectives	212
5.5 Limitations of the Research.....	213
5.5.1 Creation of Survey One	213
5.5.2 Representation of Expert Panel.....	216
5.5.3 Delphi Method.....	217
5.6 Implications and Directions for Future Research	221
5.6.1 Training Programs	228

5.6.2 Cultural Models, Tools and Frameworks	229
5.6.3 Specific Focus within CRP	230
5.6.4 Research Addressing Language.....	231
5.6.5 Working Groups.....	232
5.6.6 Implications for Individual Reflective Practice	233
5.6.7 Barriers to Developing CRP.....	238
5.7 Concluding Comments.....	239
6. References	242
7. Appendices.....	279
Appendix A.....	280
Studies (n=11) from Ratheram’s 2020 SLR informing EP practice with minority cultural and linguistic populations in the UK	280
Appendix B.....	282
Articles excluded after reading full text and reasons for their exclusion	282
Appendix C.....	283
Critical appraisal of empirical studies using CASP checklists	283
Table C1	283
<i>Critical appraisal of empirical studies using ‘Qualitative Research’ CASP Checklist</i>	283
Table C2	285
<i>Critical appraisal of empirical studies using the ‘Cohort Studies’ CASP Checklist</i>	285
Table C3	288
<i>Critical appraisal of empirical studies using the ‘Case Control Study’ CASP Checklist</i>	288
Table C4	290
<i>Critical appraisal of Ratheram’s 2020 doctoral thesis using the ‘Qualitative Study CASP Checklist’</i>	290
Appendix D.....	291
TREC Application Form.....	291
Appendix E.....	308
TREC Approval Letter	308
Appendix F	309
List of articles excluded from methodology lit review and their reason.....	309
Appendix G	323
Summary of the additional articles identified for survey one (n=19).....	323

Appendix H.....	327
Example of extracts taken from article as part of thematic analysis process.....	327
Appendix I	328
Inter-rater reliability: summary of the codes selected for review, TEP responses and actions based on discussion	328
Appendix J	333
Survey One	333
Appendix K.....	356
Table of statements from survey one and their sources.....	356
Appendix L	400
Recruitment post on EPNET	400
Appendix M	401
Additional statements provided by respondent in survey one	401
Appendix N.....	403
Survey Two sent to respondents.....	403
Appendix O	411
Respondent comments following completion of survey one.....	411
Appendix P.....	413
Summary of cultural models, tools and frameworks for further exploration.....	413

List of Tables and Figures

List of Tables

Table 1	43
SLR search terms and criteria used	43
Table 2	44
Inclusion and Exclusion criteria used for screening article abstracts.....	44
Table 3	48
Summary of non-empirical articles related to CRP	48
Table 4	52
The core competencies for Doctoral programmes in Educational Psychology and the National Association of School Psychologists Professional Practices.....	52
Table 5	75
Summary of empirical studies related to CRP	75
Table 6	119
Literature search process for sourcing additional articles for survey one	119
Table 7	121
Reasons for excluding articles based on a review of abstracts	121
Table 8	123
Articles used to inform survey one	123
Table 9	127
Coding example for stage two of thematic analysis: 'Safe environment', data extracts aligned to this code and their source.....	127
Table 10	139
96 statements related to CRP included in survey one.....	139
Table 11	148
Feedback following pilot survey and subsequent adaptations.....	148
Table 12	152
Participant characteristics for round one and round two of the Delphi study	152
Table 13	164
Finalised additional statements generated from respondents in survey one	164
Table 14	192
Summary of statements rated in this Delphi study	192
Table 15	223

Comparing the present research with Lopez and Rogers' (2001) and Rogers and Lopez' (2002) Delphi studies.....	223
---	-----

List of Figures

Figure 1	46
PRISMA flow diagram detailing identification, screening, eligibility and included articles for the SLR.....	46
Figure 2	103
Visual illustration for the working definition of CRP	103
Figure 3	122
PRISMA flow diagram summarising the process of identifying relevant articles for survey one.....	122
.....	122
Figure 4	128
Generation of codes, sub-themes and themes at stage three of thematic analysis	128
Figure 5	131
Additional codes created during stage four of thematic analysis, linked to their themes and sub-themes.....	131
Figure 6	132
Thematic map at stage four of thematic analysis, summarising themes, and sub-themes	132
Figure 7	135
Final thematic map of literature, illustrating overall themes and sub-themes	135
Figure 8	154
Graphical representation summarising respondent EPs' experience of CRP.....	154
Figure 9	157
Statements reaching consensus from round one, section 1A. Apply Culturally Responsive Skills: Initial Relationship Building	157
Figures 10-11	158
Statements reaching consensus from round one, section 1B. Apply Culturally Responsive Skills: Assessment and Intervention	158
Figure 12	160
Statements reaching consensus from round one, section 2A: Engage in a Continuous Learning Process: Intrapersonal Development	160
Figure 13.....	161

Statements reaching consensus from round one, Section 2B: Engage in a Continuous Learning Process: Interpersonal Development	161
Figure 14	162
Statements reaching consensus from round one, section 3: Consider Structural Implications Related to Culture	162
Figures 15-19	167
Statements reaching consensus after round two, with responses after round one and two. Culturally Responsive Skills: Assessment and Intervention.....	167
Figure 15	167
Graph representing statement 1B11, ‘Use cultural tools to support their approach to working with culturally diverse populations’	167
Figure 16	168
Graph representing statement 1B11.4, ‘Use objects and symbols relevant to the individual’s culture’	168
.....	168
Figure 17	168
Graph representing statement 1B12, ‘Use cultural models and frameworks to support their approach to working with culturally diverse populations’	168
Figure 18	169
Graph representing statement 1B19, ‘Use cultural variables as part of hypothesis testing’	169
Figure 19	170
Graph representing statement 1B28.2, ‘Ensure that culturally relevant strengths are included in any intervention’	170
Figure 20	170
Statement reaching consensus after round two: Ensure a continuous learning process – Intrapersonal Development statement 2A35.3, ‘Use tools such as an Implicit Association Bias test to reflect on one’s own biases’	170
Figures 21-22	171
Statements reaching consensus after round two, Ensure a continuous learning process: Interpersonal Development.....	171
Figure 21	171
Graph representing statement 2B39, ‘Explore cultural differences and similarities between oneself and others when engaging in consultation i.e. between clients and/or consultees’	171
Figure 22	172
Graph representing statement 2B47, ‘Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference’	172

Figure 23	173
Additional statements suggested by respondents reaching consensus after round two.....	173
Figure 24	175
Statements which did not reach consensus after round two: Culturally Responsive Skills, Initial Relationship Building, statement 2.2, ‘Where appropriate, use a subtle approach to questioning and avoid direct or intrusive questioning’	175
Figures 25-38	175
Statements which did not reach consensus after round two: Culturally Responsive Skills, Assessment and Intervention.....	175
Figure 25	176
Graph representing statement 11.1, ‘Use cultural interview schedules, such as the Cultural Interview Formulation (from DSM-V) or the Jones Intentional Multicultural Interview Schedule (JIMIS) Jones, 2009).....	176
Figure 26	176
Graph representing statement 11.2, ‘Use tools to identify cultural strengths, such as The Cultural Assets Identifier (CAI) (Aganza et al., 2015).....	176
Figure 27	177
Graph representing statement 11.3, ‘Use tools such as cultural genograms to explore cultural backgrounds and beliefs’	177
Figure 28	177
Graph representing statement 12.1, ‘Use a cultural consultation model or framework, such as The Multicultural School Consultation (MSC) Framework (Ingraham, 2000) or the Culture Specific Consultation Model (CSCM) (Nastasi et al., 2004).....	177
Figure 29	178
Graph representing statement 12.3, ‘Use a bio-psycho-socio-cultural framework’.	178
Figure 30	178
Graph representing statement 12.4, ‘Use a cultural model or framework to consider intersectionality, such as the ADDRESSING framework (Hays, 1996) or Dimensions of Personality Identity Model (Arredondo, 2017)	178
Figure 31	179
Graph representing statement 12.5, ‘Use a framework to reflect on cultural difference, such as the Reflective Local Practice (RLP) Framework (Sandeem et al., 2018)	179
Figure 32	179
Graph representing statement 12.6, ‘Use a framework to adapt and modify interventions to be culturally relevant, such as Hwang’s adaptation and modification framework (2006) or the Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)	179

Figure 33	180
Graph representing statement 12.7, 'Use models for evaluating cultural difference e.g. The Ethnic Validity Model	180
Figure 34	180
Graph representing statement 12.8, 'Use an ecological model e.g. The Ecological Validity Model (Bernal et al., 1995).....	180
Figure 35	181
Graph representing statement 12.9, 'Use of models to support understanding of how cultural difference influences identity, e.g. the Minority Identity Development Model (Atkinson et al., 1979)	181
Figure 36	182
Graph representing statement 18, 'Recognise and value alternative models of helping which may be applicable to culturally diverse populations, such as healing traditions'	182
Figure 37	182
Graph representing statement 21, 'Conceptualise and validate the problem or beliefs of the individual's culture'	182
Figure 38	183
Graph representing statement 28.1, 'Attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc.' ..	183
Figures 39-41	183
Statements which did not reach consensus after round two: Ensure a Continuous Learning Process: Interpersonal Development	183
Figure 39	184
Graph representing statement 40.1, 'Use cultural models or frameworks within supervision e.g. the White Racial Identity Development Model (Helms, 1990)	184
Figure 40	184
Graph representing statement 42, 'Consult with cultural experts, such as cultural brokers as appropriate)	184
Figure 41	185
Graph representing statement 43, 'Make effort to engage in the cultural community where they live, for example attending local cultural community events'.....	185
Figures 42-43	185
Statements which did not reach consensus after round two: Consider Structural Implications to Culture.....	185
Figure 42	186
Graph representing statement 53, 'Be aware of and interpret legal decisions that are relevant to culturally diverse individuals they work with'	186

Figure 43	186
Graph representing statement 57.3, 'Consider how to be an ally, activist and advocate for culturally diverse groups and implement appropriate actions (Melton, 2018)'	186
Figure 44	187
Additional Statement which did not reach consensus after round two: Culturally Responsive Skills, 'Learn some of the individual's language to assist in valuing their culture'	187
Figure 45	188
Final list of key features regarding developing CRP, according to the expert panel	188
Figure 46	194
Thematic map of EP comments after completing survey one	194
Figure 48	234
Self-reflective framework for EPs to develop CRP	234

1. Introduction

1.1 Defining Culture

Individual experiences shape our definition of culture, making it a difficult construct to define. Culture is undoubtedly “complex and multi-dimensional” (Urdan & Bruchmann, 2018, p. 124). It can be both a blueprint for behaviour, thoughts and feelings, but also a changing body of ideas, open to and for, interpretation (Krause & Miller, 1995). Broadly speaking, this research aligns with King et al.’s definition of culture, “the social norms, roles, beliefs, values and traditions that influence the behaviours of a particular social group” (2018, p. 1032). Whilst this research uses the single term ‘culture’ for ease of reference, it is recognised that individual perspectives, experience, and its dynamic nature will underpin definitions (Kumar et al., 2018). Similarly, whilst there may be commonalities amongst a particular cultural group, some individuals may align with or have developed specific cultural practices within their own family/culture, and it is important that both are considered.

1.1.1 Culture, Ethnicity and Race

Different perspectives exist regarding how culture overlaps with concepts such as race and ethnicity. Some argue that culture as a concept is more fluid compared to ethnicity (Singh & Dutta, 2010). Kumar et al. define culture as being linked more to ethnicity compared with race (2018), whereas others believe that culture overlaps with both ethnicity and race (King et al., 2018; Urdan & Bruchmann, 2018). It is recognised that an individual’s culture may be influenced by various aspects of difference, such as

ethnicity, race, sexuality, social status, disability etc., however this research views culture from a lens which interacts largely with ethnicity. This is due to the researcher's own experience of coming from a mixed ethnic background, which has influenced their own cultural identity.

Ethnicity has been recognised as a preferred term by anthropologists, "who use this to mean a group of people who have shared ancestry, heritage, culture and customs" (Perepa, 2019 p. 13), as well as sharing commonalities amongst aspects such as language, region of origin, religion and appearance (Markus, 2008). Kumar et al. argue that these characteristics "can be a source of motivation and pride, ultimately resulting in a sense of identity or belonging" (2018, p. 81). This helps to explain how these concepts can overlap, and the terms 'culture' and 'ethnicity' are often used as synonyms (Perepa, 2019). The terms 'ethnicity' and 'race' are mainly used in this introduction chapter to support context, whereas terms related to 'culture' will be predominately referred to throughout this research.

1.2 Multiculturalism and Cultural Inequalities

Over the last 40 years, there has been global debate regarding how to accommodate cultural diversity, coined by Kymlicka as "rise and fall of multiculturalism" (2019, p. 133). Multiculturalism can be defined as, "the practice of giving importance to all cultures in a society" (Oxford Learner's Dictionaries, 2021) and is arguably multi-faceted, encompassing aspects such as race, policy, immigration and education (Ashcroft & Bevir, 2018). Whilst there have been historical developments through multiculturalism policies to ensure the rights of minority individuals, for example the

Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities (1992), there remains a plethora of challenges related to accommodating difference within our societies, which is captured through the existence of cultural inequalities. These are differences in the treatment, perceived or actual, towards individuals of a different cultural group to others. This treatment can be overt, such as verbal racism towards another individual, but other forms of cultural inequality may be harder to distinguish and become embedded within society, known as institutional or systemic discrimination or racism. This has been defined as:

the collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture, or ethnic origin. It can be seen or detected in processes, attitudes and behaviour that amount to discrimination through prejudice, ignorance, thoughtlessness, and racist stereotyping which disadvantage minority ethnic people (Macpherson, 1999, para 6.34).

More recently in May 2020, the death of George Floyd in The United States (US) sparked universal debate and a surge of support for the Black Lives Matter (BLM) movement, resurfacing longstanding and continuous issues of systemic racism and social injustice.

1.3 Multiculturalism in the United Kingdom

The United Kingdom's response to growing multiculturalism is subject to political, legal and theoretical debate over how to respond, accommodate and promote cultural diversity (Ashcroft & Bevir, 2018). Akin to global developments, the United Kingdom (UK) continues to experience challenges with cultural inequalities. Following the UK's decision to leave the European Union in 2016, statistics suggest a large increase in racially and religiously motivated hate crime in England and Wales, which have more than doubled between 2011/12 to 2017/18 (Home Office, 2018). Whilst police-

recorded hate crimes have increased by 131% from 2011 to March 2020, responses to the Crime Survey of England and Wales suggest a reduction in racially motivated hate crimes from 149,000 to 104,000 (between 2010-2012 and 2018-2020) (Home Office, 2020). Despite this apparent downward trend, these high statistics continue to highlight equality issues that are both present and ongoing.

In addition, research in the UK suggests a disproportionate number of ethnic minority individuals being impacted by Covid-19, and research has called for an exploration into cultural factors which may have influenced outcomes for these individuals in the UK (Public Health England, 2020). These examples raise serious concerns regarding inequality of treatment for some cultural groups, and the extent to which this has a detrimental impact on their outcomes.

1.4 Multiculturalism in Education

Another area which is impacted by multiculturalism and has a large influence on outcomes for children and young people (CYP) is the education sector. In the UK, 33.9% of primary aged pupils and 32.3% of secondary aged pupils come from an ethnic minority background (GOV.UK, 2021). This has been steadily increasing since January 2019 (DfE, 2019). In addition, it is suggested that 21.2% of pupils in primary schools and 16.9% of pupils in secondary schools speak English as an Additional Language (EAL) (DfE, 2019). Educational professionals must consider their approach to working with CYP with ethnic and language differences, so that they feel included, respected, and are able to meet their potential. In addition to language differences, educational professionals must consider how an individual's previous experiences

may influence their presentation within the school context. By the end of 2019, there were 133,094 refugees in the country (The UN Refugee Agency, 2019), with the number of asylum applications by unaccompanied minors having risen by 20% since 2017, to 2,872 (Refugee Council, 2019). Given these statistics, professionals should be sensitive to the varying experiences of culturally diverse CYP, and how this may impact their access and approach to education.

One example of this is ensuring ethnic minority children feel appropriately represented through educational material. Statistics suggest around one third of CYP in schools are from an ethnic minority, however only 5% of children's books reportedly have an ethnic minority main character (Centre for Literacy in Primary Education [CLPE], 2020). This is an example of how cultural inequalities can permeate our education system and how more must be done at a systemic level to ensure cultural equality.

1.4.1 Educational Disparities

Another example of cultural inequalities within the UK is the existence of educational disparities, such as ethnic disproportionality. Ethnic disproportionality can be defined as an ethnic group who are significantly more, or significantly less likely to be identified with Special Educational Needs (SEN), compared to an ethnic majority (Strand & Lindorff, 2018). Differential representations of ethnic minority children are being identified with SEN, making disproportionality an on-going issue (Strand & Lindorff, 2018).

One example of this includes the disproportionate number of Black Caribbean pupils being identified with SEN, being excluded from educational provisions, or being identified for a Social Emotional and Mental Health (SEMH) provision (Strand & Lindorff, 2018). These statistics have been raised historically and have acknowledged similar data (e.g. Booker et al., 1989), including a disproportionate number of Black pupils in schools for moderate learning difficulties or emotional and behavioural difficulties (now known as SEMH). Black pupils and pupils from mixed ethnic origins also make up a greater proportion of pupils in pupil referral units than in mainstream schools (DfE, 2019). Possible explanations for this disproportional representation of pupils include, “inappropriate interpretation of ethnic and cultural differences including teacher racism, low expectations and a failure of schools to provide quality instruction or effective classroom management” (Strand & Lindorff, 2018, p. 2). In addition to possible teacher racism, recent statistics have reported over 60,000 racist incidents over the past five years in UK schools (Batty & Parveen, 2021). This has highlighted stark disparities with how the British education system manages these incidents, and there are calls for schools to review their education policies to ensure CYP’s future outcomes are not impacted (Parveen, 2021).

The priorities of educational professionals focus largely on outcomes for CYP and what factors impact achieving these outcomes. In the recent Commission on Race and Ethnic Disparities Report, the authors comment on outcomes within education and training for ethnic minority CYP, summarising:

The picture of educational achievement across ethnic groups is complex, and different social, economic and cultural factors contribute to this: parental income levels, parental career and educational achievement, geography, family structure, and attitudes towards education within the family and wider community (Commission on Race and Ethnic Disparities [CRED], 2021, p. 55).

Statistics suggest that Irish Travellers and Gypsy/Roma ethnic groups have the lowest percentage of pupils meeting attainment target goals in early years, key stage two, General Certificate of Secondary Education (GCSEs) and Advanced Level (A-Level) (CRED, 2021). Regarding secondary education, Strand compared the best eight GCSE scores of pupils across ethnicity, gender and socio-economic status and found that Black Caribbean and Black African boys, and Pakistani girls, all of high socio-economic status, had “significantly lower achievement than White British pupils of the same socio-economic background and sex” (2021, p. 68). Whilst hypotheses are given as to why these findings are the case, they highlight the continued existence of ethnic disproportionalities and that educational professionals working with CYP from culturally diverse backgrounds must be continually aware, responsive to and are committed to reversing some of these inequalities.

1.5 The Role of Educational Psychologists

Professionals working in the education sector must consider how multiculturalism impacts the outcomes of CYP from culturally diverse populations accessing education in the UK. These professionals include educational psychologists (EPs), whose work effects change and influences positive outcomes for CYP, from birth to 25 years (Department for Education [DfE] and Department of Health [DoH], 2015). EPs must acknowledge, and respond to, the changing national context regarding multiculturalism and education, as this impacts the scope of their work.

1.5.1 Governing Bodies

Governing bodies of EPs clearly address culture in their guidelines as an important component of their practice. The British Psychological Society's (BPS) Code of Ethics and Conduct states that EPs respect the dignity of people across cultural boundaries, considering issues of power, and act with integrity to ensure accurate and unbiased representation of CYP (BPS, 2018). The Health and Care Professions Council (HCPC) guides practitioner psychologists, acknowledging their need to adapt practice "to meet the needs of different groups and individuals" (HCPC, 2015, p. 8). Similarly, the BPS Practice Guidelines outline working with cultural differences, highlighting that psychologists must be aware of discrimination in practice, find ways to work productively with different cultural groups and be aware of their own ethnocentricity (BPS, 2017). The BPS standards for doctoral accreditation state EPs should "demonstrate knowledge and understanding of different cultural, faith and ethnic groups, and how to work with individuals from these backgrounds in professional practice" (BPS, 2019, p. 17). Whilst trainee and qualified EPs must demonstrate their sensitivity towards working with culturally diverse groups, there is a lack of reference to further guidance, resources, or tools which can be used to support this development. This may be due to the lack of research in how EPs respond to cultural differences.

1.5.2 What are EPs Doing to Address Culture?

This longstanding issue of how to address culture was recognised by the Educational Psychology (EP) profession over 30 years ago, when members of the EP workforce acknowledged the existence of systemic racism and the need for the profession to

combat anti-racist practices to “promote changes in attitudes” (Booker et al., 1989, p. 123). Ways in which some EPs have attempted to address culture has been through working groups and research.

1.5.2.1 EP Working Groups.

Discussions towards the end of the twentieth century around responding to culture influenced the Division of Education and Child Psychology’s (DECP) working party report on anti-racism in 2006, ‘Promoting Racial Equality within Educational Psychology Services’, consisting of a framework checklist spanning policy development, professional practice and Continued Professional Development (CPD) (BPS, 2006). However, due to the lack of mandatory reporting requirements, it is acknowledged that there has been a lack of evidence of this being used in practice (Williams, 2020).

More recently, the resurgence of the BLM movement prompted frank discussions amongst the EP profession, with the Educational Psychology Race and Culture Forum (EPRCF) organising a reflective webinar titled ‘The Whiteness of Educational Psychology in Britain’. Discussions identified that systemic racism continues to permeate our education systems and there is a need for professionals to not only acknowledge their own biases, but also to challenge others in the pursuit of being more culturally responsive practitioners. For this to happen, there is a need to acknowledge and address educational disparities with the education system.

As a result of these webinars and culture forums, members of EPRCF wrote an open letter to the BPS/DECP, the National Association of Principal Educational Psychologists, and programme directors of professional training in Educational Psychology (appended in William's 2020 editorial). The open letter asked that the profession strives to "take all necessary steps to address and eradicate institutional racism and all forms of systemic inequalities from our profession" (EPRCF, 2020; Williams, 2020, p. 6) and acknowledged the need for a continued effort to work towards culturally responsive practices.

It is encouraging that several networks have been created to promote further reflection on cultural diversity, such as Black and Ethnic Minority Educational Psychology (BEEP) Network and Black and Minority Ethnicity in Psychiatry and Psychology (BIPP) Network. Recent events have also prompted trainee educational psychologists (TEPs) to take initiative in developing their levels of cultural responsiveness. This can be seen through developments of trainee working groups, such as The Trainee Educational Psychologists Initiative for Cultural Change (TEPICC) group, which aims to "use psychological theory and apply an intersectional lens to underpin our action for change at a targeted socio-cultural level within and beyond the profession" (TEPICC, 2020, para 1.). Whilst these working groups are inherent to developing the profession's understanding of how to engage in culturally responsive practices, it is important that research in this area continues to develop, to support and guide the work within these groups.

1.5.2.2 Culture in EP Research.

In 2015, The DECP released a special issue of Educational & Child Psychology focusing on 'Race', Culture and Ethnicity in the profession. The issue published a collection of research in the UK which explored the experiences of specific cultural groups. In the guest editorial, Williams et al. acknowledged the continual and pertinent issues when researching culture stating, "there is no doubt that differences in respect to colour, culture and ethnicity continue to be differences with which psychology (and hence, psychologists) struggle" (2015, p. 5). They address how psychology must be applied in the right way and question the relevance of research that has come from White Western communities when it is applied and related to individuals from diverse cultural backgrounds (Williams et al., 2015). The authors recognise that culture needs to be a primary consideration within EP thinking. They acknowledge that EPs must develop their effectiveness when working with diverse communities, and equally consider how culture shapes outcomes (Williams et al., 2015).

In last year's volume of Educational Psychology Research and Practice (EPRAP), members of the profession published a collection of articles around the Whiteness of Educational Psychology, offering reflective accounts and tools for practice. In the editorial, Williams acknowledged that the thread connecting all articles in the edition was the "call for a self-awareness that is both personal and professional" (Williams, 2020, p. 2). Recent global events and movements have spurred members of the EP workforce to ask that the profession takes more accountability for the cultural issues which continue to pervade their work.

Recent EP doctoral research has begun to explore the impact of culture on practice. Research has included the self-perceived ‘intercultural competence’ and cross-cultural experiences of EPs (Anderson, 2018) and how EPs might develop their practice when working with CYP and families from minority cultural and linguistic communities (Ratheram, 2020). Both bodies of research recognised the importance of self-awareness when working with culturally diverse populations; EPs acknowledged that participating in the research raised awareness of gaps in their understanding (Anderson, 2018) but also recognised that work in this area is a “dynamic journey of understanding and change” (Ratheram, 2020, p. 62). The research drew important conclusions about how EPs must continue to improve their understanding when working with culturally diverse populations, for example developing knowledge, skills and awareness.

1.5.3 Considerations and Implications for EP Practice

EPs must make several considerations when responding to cultural difference within their practice. There are various aspects which have implications for the profession, some of which include: representation of cultural diversity within the workforce, scope for cultural bias through use of assessment tools, how differing local contexts may influence levels of cultural responsiveness, and individual experiences.

1.5.3.1 Cultural Make-up of the EP Workforce.

An issue that was raised in the EPRCF open letter was the acknowledged under-representation of students who are from minority ethnic backgrounds in Higher

Education. Whilst the numbers of ethnic minority children appear to be on the increase in UK schools (DfE, 2019), it is questionable as to whether the EP workforce accurately reflects the increasingly culturally diverse population. Surprisingly, demographic data of the EP workforce appears difficult to source. A 2020 article in 'The Psychologist' acknowledges the disproportionate numbers of clinical psychologists from minority ethnic backgrounds compared to the population, and recognised that it is unclear how many qualified or trainee psychologists within other psychological professions, spanning educational, health, forensic, occupational and sport, are from these backgrounds (York, 2020). Where it is possible that the current EP workforce may not accurately represent the current population of CYP who they support, it is imperative that EPs strive to address and respond to cultural diversity in their practice, whilst supporting systemic initiatives to continue to diversify the workforce.

1.5.3.2 Cultural Bias within Assessment.

As well as ensuring accurate representation amongst the EP workforce, it is important that CYP from culturally diverse backgrounds are appropriately represented through assessment tools. Booker and colleagues raised the historical issues of assessing children for SEN and the level of cultural bias that comes from the inappropriate use of certain assessment tools (1989). When aspects of culture are not appropriately considered, this has the potential to significantly impact CYP and their families. Where some children may have had other education experiences before attending school in the UK, some assessments may be biased due to their lack of familiarity and cultural context (Ardila, 2007). Furthermore, some psychological assessments may not fairly represent all ethnic backgrounds in their standardisation process. If culture is not

considered appropriately within psychological assessment, results may be inaccurate (Reynolds & Suzuki, 2013; Skiba et al., 2002). There is an acknowledged lack of research on how to address cultural bias and the need for increasing awareness and guidance on non-discriminatory assessment practice (Zaniolo, 2019). EPs have a duty to reflect on the cultural appropriateness of their work, not only in assessment, but also in all areas of their practice.

1.5.3.3 Local EP Context.

How EPs respond to culture can be impacted by context, where demographic factors influence the extent to which EPs work with CYP and their families from different cultural backgrounds. For EPs working in certain boroughs in the UK, some cultural communities may be more prevalent, which should influence their understanding and approach to work. Anderson's doctoral research which explored EPs' self-perceived cultural competency found that EPs who work in more culturally diverse areas (mainly London) have more experience working with different cultural groups and thus perceive themselves to be more confident working with cultural difference, compared to those in the South West of England (Anderson, 2018). This suggests that there may be discrepancies amongst the profession regarding confidence levels when working with culturally diverse populations.

Local Authorities may also differ in the way they provide support to different cultural groups in their community, such as offering training and resources. In the author's Local Authority where she is on placement, the borough had an initiative to support the achievement of CYP from an ethnic minority background, which included a

resource library containing educational resources tailored to specific cultural groups. However, it is recognised that factors such as funding influence the scope for additional resources.

1.5.3.4 Individual EP Context.

Whilst EP governing bodies and local guidance supports their practice, EPs' own cultural backgrounds and experiences will ultimately shape their approach when responding to cultural difference. Whilst the profession can benefit from gaining a shared understanding of how cultural difference can be explored in practice, perspectives and approaches towards cultural difference will be shaped based on an EP's personal experiences. It is this sharing of experiences which can help broaden understanding amongst the profession. EPs may explore cultural differences through differing cultural lenses, and through use of differing cultural definitions, theories and frameworks.

1.5.4 Cultural Theories and Frameworks in EP Practice

The premise of cultural psychology is that “the human psyche cannot exist independently of its sociocultural contexts” (Eom & Kim, 2014, p. 328), therefore context is key when making sense of human actions (Shweder, 1995). EPs may draw upon a variety of theoretical frameworks to inform their understanding of how an individual interacts with their culture. Whilst these will be context dependent, they may include: considering similarities and differences amongst cultural groups using individualism vs collectivism theories (Triandis et al., 2002); exploring how culture

interacts within an individual's ecological system (Bronfenbrenner, 1977); or reflecting on intersecting aspects of difference within our identities using the Social Graces (Burnham, 2012). Whilst culture as a term is complex, theories which consider culture must also be carefully considered as they will have different reference points and more suitable applications to given cultures than others (Berry & Kim, 1993). Therefore, it is important that theories and frameworks which embed culture are continually researched and critically evaluated for their suitability and application within practice.

1.6 Terms of Reference When Working with Cultural Difference in EP practice

Several terms are referenced when referring to individuals who are culturally diverse. Terms such as 'culturally diverse populations/clients' (Anderson, 2018), 'CYP and families from minority cultural and linguistic communities' (Ratheram, 2020), 'minority communities' (Williams et al., 2015), and 'BAME' (Black, Asian and Minority Ethnic) (Public Health England, 2020; York, 2020) have been used, although use of the latter has more recently been criticised (CRED, 2021). This chapter has already acknowledged the nuances that come with defining culture but has chosen to use the term 'culturally diverse individuals' when speaking of CYP, their families, as well as other professionals who identify as belonging to different cultural groups.

There are also different terms of reference used to describe *how* professionals work with cultural difference in EP practice. Key features of the new accreditation BPS competencies for TEPs recognises that "culturally competent/informed practice is fundamental to EP practice in today's diverse and global society" (2019, p. 9). HCPC proficiencies reference the need for practitioners to be, "aware of the impact of culture,

equality and diversity on practice” (2015, p. 8). Governing bodies of the profession refer to respect, awareness, developing knowledge and understanding, and finding ways to work productively with cultural difference (BPS, 2017, 2019; HCPC, 2015).

Often, multiple terms are used within a single review when talking about culture. Studies have referred to both cultural and multicultural competence, as well as culturally responsive practice (Fallon & Mueller, 2017; Parker, 2019; Reyna et al., 2017; Usher, 2018; Vega et al., 2018). For example in the US, Reyna et al. refer to culturally responsive school psychology (SP) practice, whilst using a self-reported scale measuring ‘multicultural competence’ (2017). Cultural responsiveness has also been connected to cultural awareness and cultural humility (Ellis et al., 2020). The more commonly used terms will now be briefly described: cultural competence, cultural awareness and humility, and cultural responsiveness.

1.6.1 Cultural Competence

Developed by Sue and colleagues within counselling professions, the term ‘cultural competence’ has been defined as a tripartite model, encompassing the need to hold awareness, knowledge and skills to function effectively with culturally diverse populations (Sue et al., 1982, 1992). The term has often been used in relation to psychologists’ training (Benuto et al., 2018; Benuto et al., 2019) and measuring self-perceived cultural competence using rating scales (Anderson, 2018; Reyna et al., 2017; Vega et al., 2018). More recently the term has been referenced within EP practice in the context of anti-racism and racial identity (Kusi, 2020).

The term cultural competence is widely used in the literature and the researcher agrees that knowledge, skills and awareness are important components when working with cultural difference. Whilst it has been acknowledged that the goal of cultural competence is aspirational and “an ongoing journey of learning and growth rather than an achievable, final destination” (Newman & Ingraham, 2020, p. 13), the term has been criticised as it implies a false sense of expertise that “one can learn and gain competency of an entire culture”, as well as the suggestion that “cultures are monolithic”, ignoring diversity within cultural groups (Ellis et al., 2020, p. 27).

1.6.2 Cultural Awareness and Humility

Studies have referred to the importance of ‘cultural awareness’ and ‘cultural humility’. Cultural awareness has been defined as “being mindful or conscious of similarities and differences between people from different groups” (Barsky, 2018 p. 4). Anderson acknowledges the utility of self-assessment in raising one’s own cultural awareness (2018). This aligns with BPS guidelines which acknowledge the need for individuals to be aware of their own ethnocentricity (BPS, 2017). However, it is argued that the term ‘awareness’ can denote a sense of idleness or lack of action; EPs interact with CYP, their families, and educational professionals on a regular basis, therefore using a term which reflects this reciprocal nature feels more appropriate.

Ellis et al. recognise the importance of ‘cultural humility’, the idea that individuals “interrogate their *own* culture and identities, and how these identities interact with other people’s identities as well as the broader sociocultural systems” (2020, p. 27). Ratheram (2020) adapts Fisher-Borne et al.’s cultural humility model (2015) in her

doctoral thesis, acknowledging that cultural humility focuses on accountability and “attention to change at individual and institutional levels” (2020, p. 65). This idea of ongoing learning and critical self-reflection is an important component when working with culturally diverse populations.

1.6.3 Cultural Responsiveness

Culturally responsive pedagogy has been defined by Gay as teaching “to and through [students’] personal and cultural strengths, their intellectual capabilities, and their prior accomplishments” (2002, p. 26). Similarly, Kumar et al. adopted the Culturally Responsive and Relevant Educational Practice Framework (2018); its principles are based on reflecting on culturally diverse contexts and how this influences the process of learning. Cultural responsiveness is a term which has been linked to interpersonal interactions with culturally diverse populations (Parker et al., 2020). It is also about being both aware of, and responding appropriately to culture (Barsky, 2018). This includes being mindful of how culture influences assessment, tailoring interventions to consider culture, and attending to CYP and their families in the context of their cultural beliefs and values (Barsky, 2018; Parker et al., 2020). Cultural responsiveness encompasses not only the cultural background of the individual, but one’s own self-identity, which “interacts and influences one’s practice and attitudes toward those from similar and different backgrounds” (Hwang, 2006, p. 711).

School psychologists (SPs) in the US have used the term cultural responsiveness when reviewing consultation practice (McKenney et al., 2017), and have used the term ‘Culturally Responsive Consultation’ (CRC) to reference the way in which

consultants can use different methods to respond to the needs of culturally diverse populations (Knotek, 2012; Parker et al., 2020). It is recognised that consultants should adopt a CRC style when relating with both consultees and clients (Ramirez et al., 1998). McKenney et al. state that the term cultural responsiveness is most often used in education literature (2017). In the UK, EPRCF webinars on the 'Whiteness of Educational Psychology' analysed attendees chat responses, and one of the key themes identified in their open letter to the BPS was a "need for cultural responsiveness" (ECRCF, 2020; Williams, 2020, p. 6)

1.6.4 Culturally Responsive Practice

Where research has explored the self-perceived cultural competence of EPs, reference has been made to developing 'Culturally Responsive Practice' (CRC) (Parker, 2019). For example, Vega et al. conclude that "culturally competent school psychologists use culturally responsive service delivery strategies in the areas of assessment, consultation, counseling and intervention" (2018, p. 450). This implies that cultural competence as a term is more static and definitive, whereas CRP is an active and fluid process which can be continually developed. This is further emphasised through the School Psychology Unified Antiracism Statement, where they explain "school psychologists enact social justice through culturally responsive professional practice" (Garcia-Vazquez et al., 2020 p. 210). The present research argues that CRP encompasses both ideas of competence, such as knowledge, skills and attitudes (Sue et al., 1982, 1992) but also aspects of self-awareness and humility. The present research aligns with Ellis et al.'s view, that the "integration of cultural

competence and cultural humility will likely foster the most culturally responsive practices” (2020, p. 8).

Whilst the researcher aligns with the definitions ‘cultural responsiveness’, ‘cultural responsivity’, and ‘CRP’ and will predominately use these to describe how individuals respond to cultural difference, it is acknowledged that where other authors use different definitions, these will be used when discussing their research.

1.7 Rationale for the Present Study

There is recognition at a global level that more work needs to be done to respond appropriately to cultural diversity. The current UK context is becoming increasingly culturally diverse, with around one third of school children coming from an ethnic minority background (CLPE, 2020; DfE, 2019). Despite this, there is evidence to suggest continuous ethnic disproportionality in education (Strand & Lindorff, 2018) and cultural inequalities that continue to permeate our education system and practice (EPRCF, 2020). In the US, The American Psychological Association have outlined multicultural guidelines within a framework for SPs (American Psychological Association, 2017). Governing bodies of EPs clearly state the importance of considering culture (BPS, 2017, 2019; HCPC, 2015) but there remains to be a lack of comprehensive guidance on what this looks like in practice. It is also still unclear how culture is approached within UK EP doctoral training programmes.

Despite the abundance of literature exploring culture, there are not sufficiently practical or relevant methods to promote culturally effective professional development (Forrest

et al., 2013). There has been more recent acknowledgement in the EP profession that EPs should be reflecting on how to be more culturally responsive in their practice, but there remains a lack of research in this area. More recently, the ‘Whiteness of Educational Psychology’ webinar attended by over 350 EP representatives asked attendees about their confidence levels around ‘cultural competence’, where “most could only answer “a bit”” (EPRFC, 2020, para.3). It is for these reasons that the current research feels timely and important for EP practice.

1.8 Research Aims

The overall aim of the current research is to explore how EPs can develop CRP. By answering this question, the aim is to create a guiding framework which can be used by EPs in the profession at whatever stage of their professional journey, to reflect on their levels of cultural responsiveness, to consider how they can be more culturally responsive in their practice, and to develop in identified areas.

1.8.1 Research Questions

The main question underpinning the current research was:

1. How can EPs develop CRP?

Further questions to complement this overarching research question were:

2. How do EPs consider culture within their practice?
3. What empirical research is available which demonstrates how EPs can be culturally responsive in their practice?

4. What models, tools or frameworks are available to support EPs in developing CRP?

2. Literature Review

2.1 Introduction to Literature Review

To support the overarching aim of the current research, the purpose of this systematic literature review (SLR) was to gain an understanding of how EPs are developing CRP.

This chapter aimed to answer the following questions:

1. How do EPs consider culture within their practice?
2. What empirical research is available which demonstrates how EPs can be culturally responsive in their practice?

2.2 Literature Search Procedure

To conduct a SLR on CRP, three literature searches were generated in June and July of 2020, using PsychINFO and PsychArticles on Ebsco Host:

- Search one was an abstract search using search terms pertaining to Educational Psychology and School Psychology and cultural responsiveness
- Search two was a full text search using the same search terms as search one
- Search three was a full text search using different search terms to search one and two, using terms linked to Educational Psychology and School Psychology and cultural responsiveness¹.

¹ An updated literature search was completed in March 2021 (using processes for search two and three) to check for new relevant literature. These are referred to in the discussion chapter.

The researcher also completed a brief literature search around EPs and CRP using Google search engine. No additional articles were identified through this method. An initial abstract search was completed using terms linked solely to Educational Psychology and culture. Eight academic journals were generated and over half did not have a predominate focus on CRP (three did not mention culture and three were exploring experiences of specific cultural groups). This provided the researcher with the rationale to broaden the scope of research to include School Psychology literature. Whilst there may be some differences between EPs and SPs, SPs are defined as professionals who support CYP to succeed with their learning (National Association of School Psychologists [NASP], 2021a), therefore it felt justifiable that any suggestions around CRP from SPs could have potential applicability for EPs.

In addition, the researcher discovered a doctoral thesis in March 2021 (Ratheram, 2020) via a Google search, which included an SLR of 11 studies in the UK informing EP practice with minority cultural and linguistic populations (using different search terms)². Whilst this collection of research offered important reflections for EPs on this topic, developing CRP did not often appear to be the main research question being addressed (Appendix A summarises the 11 studies identified from Ratheram's SLR, along with the perceived primary focus of these studies). This provided further justification to the researcher's initial decision to broaden the scope of literature and

² Ratheram's thesis and some of the studies from her SLR were identified as relevant empirical studies to reference and will be discussed at the end of this chapter due to discovering them at a later stage of the SLR process.

include articles referencing SP practice which may have a more direct link to developing CRP.

Table 1 outlines the process for all three literature searches, including search terms and initial inclusion criteria. Articles which were in the English Language and were an academic journal or journal, were chosen to be screened. Due to the number of articles generated, the search process was refined by limiting articles which were within an Educational Psychology or School Psychology publication (search two) or articles which had a 'subject major' of Educational Psychology or School Psychology (search three).

Table 1*SLR search terms and criteria used*

Search	Search Terms	Results	Inclusion criteria	Papers for consideration
1.Abstract Search	"educational psychology" OR "educational psychologist" OR "educational psychologists" OR "school psychology" OR "school psychologist" OR "school psychologists" AND "culturally responsive " OR "cultural responsivity" OR "cultural responsiveness" OR "culturally competent" OR "cultural competence" OR "cultural humility" OR "cultural awareness" OR "culturally aware" OR "cultural sensitivity" OR "culturally sensitive"	134	English Language (134) Academic journals or journal (62)	56 (after duplicates were removed)
2.Full Text Search	"educational psychology" OR "educational psychologist" OR "educational psychologists" OR "school psychology" OR "school psychologist" OR "school psychologists" AND "culturally responsive " OR "cultural responsivity" OR "cultural responsiveness" OR "culturally competent" OR "cultural competence" OR "cultural humility" OR "cultural awareness" OR "culturally aware" OR "cultural sensitivity" OR "culturally sensitive"	1,930	English language (1,926) Academic journals or journals (569) Publication (school psychology or educational psychology journals only. Must have education or school and psychology) (119) Removing duplicates from abstract search (74)	74
3.Full Text Search	cultur* AND educational psycholog* OR school psycholog* AND responsiv* OR competen* OR sensitiv* OR aware* OR humility	5,036	English Language (4,974) Academic journals or papers (1,559) Subject major 'Educational psychology' or 'school psychologists' or 'school psychology' (103) Removing duplicates from Search 1 and 2 (62)	62

Whilst the researcher chose to align their research with the term CRP, other terms linked to responding to cultural difference i.e. cultural competence, cultural awareness etc. were used within the search terms to ensure all possible literature on the topic was identified. Once duplicates were removed, article abstracts from all three searches were screened for review. Articles were discarded if they did not meet the relevant criteria. Table 2 outlines the inclusion and exclusion criteria used for screening abstract articles.

Table 2

Inclusion and Exclusion criteria used for screening article abstracts

Inclusion Criteria	Exclusion Criteria
Articles which mention cultural responsiveness or consider cultural difference	Main focus of the article was not on culture or cultural responsiveness
Articles which consider how EP or SP practice is adapted to consider culture	Articles which focused on EPs' self-perceived cultural competency/self-report measures of EP cultural competency
Articles which focus on EPs or SPs	Articles which did not focus on EPs or SPs
Selecting articles based on generalisability of findings	Articles which focused on psychology training programs
	Article was a correction or comment

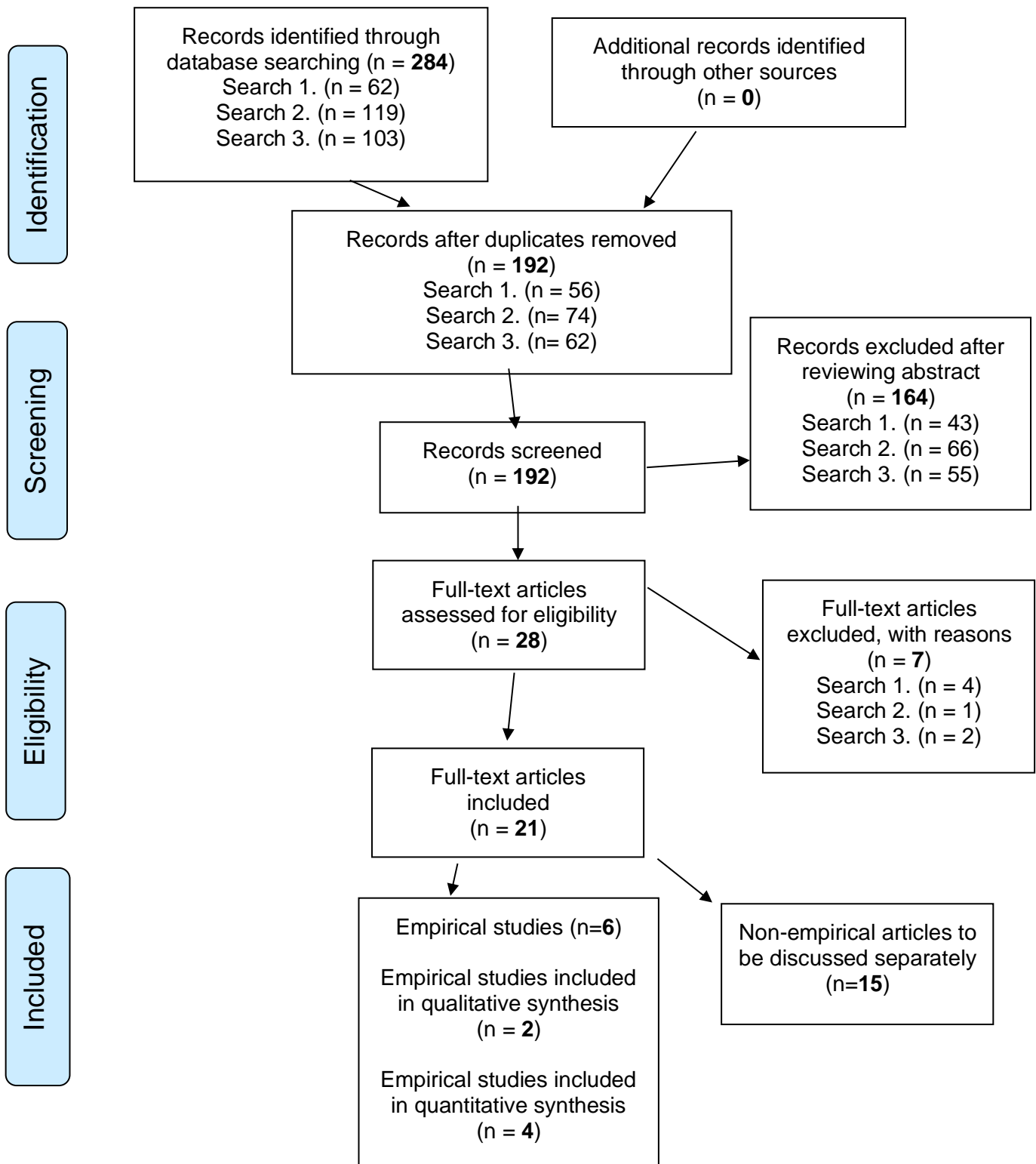
Once article abstracts were screened and irrelevant articles discarded, full text articles were assessed for eligibility. Upon further review, articles which did not appear to have a predominate focus on cultural responsiveness were excluded. At times, the researcher came across articles which, whilst having a predominate focus on culture

or cultural responsiveness, felt to be less generalisable to the research question being addressed. For example, the researcher came across articles which had a focus on culturally competent practice in School Psychology, however a large part of the article focused on the cultural practices of a specific cultural group (e.g., Haboush, 2007), so recommendations and implications felt to be less applicable to the broad approach this research was adopting. Where this was the case, the researcher made a personal judgment to override an exclusion criterion, due to not meeting the inclusion criteria point regarding generalisability.

Appendix B lists articles which were excluded following reading their full-text, and reasons for their exclusion. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flow diagram was used to depict how articles were identified through the SLR (Moher et al., 2009), and is presented as Figure 1.

Figure 1

PRISMA flow diagram detailing identification, screening, eligibility and included articles for the SLR



2.3 How Do SPs Consider Culture Within Their Practice?

One of the research questions guiding this SLR was 'how do EPs consider culture within their practice?' To answer this question, non-empirical articles related to CRP will first be discussed. Whilst some non-empirical articles included recommendations for practice which were drawn from research, articles were largely theoretical based or commentaries. This prompted the decision to discuss these articles separately to empirical-based articles. Table 3 provides a summary of non-empirical articles identified from the literature review, including key themes from each article.

Most articles focused on key areas within EP practice, spanning assessment, intervention, consultation, and supervision, therefore it felt appropriate to reflect on the scope of CRP within these areas. Key themes which arose from articles included making recommendations for practice, as well as referencing models and frameworks which can be considered and applied when thinking about cultural differences.

It is important to acknowledge that all but one article (published in Greece) were published in the US, and as such, all articles referenced either SP or SPs in relation to CRP. Furthermore, many articles made recommendations or used frameworks when working with specific cultural groups. Whilst there may be scope to apply some of these recommendations in other contexts, further research is warranted to explore the efficacy of adapting some of these models and frameworks within the UK EP context.

Table 3

Summary of non-empirical articles related to CRP

Study	Style	Location	Focus	Summary	Main Themes
Using Cultural Assets to Enhance Assessment of Latino Students (Aganza et al., 2015)	Commentary	US	Assessment and Intervention	Discusses the strengths of using the Cultural Assets Identifier (CAI) in identifying and applying strengths to assessment and intervention with Latino students	Using an eco-systemic and strengths-based approach; acknowledgement and valuing students' culture
Multicultural Sensitivity and Competence in the Clinical Supervision of School Counselors and School Psychologists: A Context for Providing Competent Services in a Multicultural Society (Butler, 2003)	Commentary	US	Supervision	Reviews culturally sensitive counselling techniques which can be considered and applied within a supervisory relationship	Being culturally sensitive; embrace cultural difference within the supervisory relationship
Multicultural Supervision: What Difference does Difference Make? (Eklund et al., 2014)	Commentary	US	Supervision	Raises the importance of engaging in multicultural supervision. Identifies cultural factors impacting supervision, outlines multicultural models and frameworks which can help to address this and identifies evidence-based practice considerations	Supervisors and supervisees to examine their own culture and biases; address similarities and differences within the supervisory relationship; use of multicultural supervision models
The Culturally Relevant Assessment of Ebonics Speaking Children (Grant et al., 2009)	Commentary	US	Assessment	Provides SPs with information and practical ways to support assessment of Ebonics speaking children, whilst considering barriers such as limited resources	Engaging in non-biased interactions; using culturally appropriate assessment techniques; monitoring overrepresentation e.g. in special education and disciplinary practices; "closing the achievement gap between Caucasian and African American students" (p. 118)

A Challenge to Consultation Research and Practice: Examining the “Culture” in Culturally Responsive Consultation (Goforth, 2020)	Commentary	US	Consultation	Reflects upon 30 years of multicultural consultation research	Understanding differences between cultural groups; intersectionality; consider sociocultural variables beyond ethnicity and race; re-think the notion of helping
Culturally Responsive Interviewing Practices (Hass & Abdou, 2018)	Commentary	US	Assessment	Describes the background and rationale for adopting culturally responsive interviewing practices within SP assessment, and describes the Cultural Formulation Interview (CFI)	Acknowledging self-learning; conceptualising culture as a resource and the components to consider; language, social relationships and understanding of problems and solutions
Addressing Cultural Factors in Development of System Interventions (Hatzichristou et al., 2006)	Commentary	Greece	System level intervention	Introduces a developed primary intervention program focusing on multicultural intervention	Cultural awareness; a strengths-based approach; acknowledgement of similarities and differences between one’s own culture and other’s culture
Supervision in School Settings: Maintaining a Multicultural and Ethical Practice (Kelly et al., 2019)	Commentary	US	Supervision	Summarises a culturally responsive ethical decision-making model for SPs and offers practice recommendations for those engaging in professional supervision	Acknowledges the importance of engaging in culturally responsive supervision practices, and specifically how culture needs to be embedded within ethical decision-making models which guide SPs
Models and Frameworks for Culturally Responsive Adaptations of Interventions (Peterson et al., 2017)	Literature Review	US	Intervention	Summarises a review of the literature presenting established models and frameworks which incorporate cultural awareness and adaptation of interventions for culturally diverse populations, including application of the models	Ensuring goals are congruent with a client’s culture; cultural elements are embedded into treatment at a systemic level ensuring that community stakeholders are included; effectiveness of interventions are measured

Understanding ADHD from a Biopsychosocial-Cultural Framework: A Case Study (Pham, 2015)	Commentary	US	Assessment and Intervention	Discusses and critically evaluates the Biopsychosocial-cultural framework, a contemporary, systemic and multifaceted approach to assessment and intervention which considers cultural factors, and applies it to a case study involving a Hispanic child with Attention Deficit Hyperactivity Disorder (ADHD)	Using an ecological framework; consider multiple factors, such as family beliefs around neurodevelopmental disorders such as ADHD, to ensure cultural barriers around treatment acceptability are explored
Examining the Cultural Context of Consultation, (Rogers, 2000)	Commentary	US	Consultation	Identifies key components of how culture is to be considered within consultation	Understanding one's own and other's culture; developing cross-cultural and interpersonal communication skills; acquiring culture-specific knowledge
Providing Psychological Services to Racially, Ethnically, Culturally and Linguistically Diverse Individuals in the Schools: Recommendations for Practice (Rogers et al., 1999)	Commentary	US	Broad	Provides a summary of the existing knowledge base regarding how to support culturally diverse students, and provides recommendations for practice	Consider legal issues; cultural awareness at organisational level; sensitivity with assessment; reflect culture in the curriculum; careful use of working with interpreters; cultural sensitivity within research
An Introduction to Cultural Issues Relevant to Assessment with Native American Youth (Saxton, 2001)	Commentary	US	Assessment	Summarises the challenges which some Native Americans face, which provides context to support assessment of this population. It includes a recommended evaluation procedure to ensure culturally competent assessment	Acknowledging diversity within cultural groups; importance of understanding the cultural identity of individuals; careful consideration of assessment process
School Counselors and School Psychologists: Collaborative Partners in Promoting Culturally Competent Schools (Simcox et al., 2006)	Commentary	US	System level intervention	Discusses a model for collaboration between school counsellors and SPs to help promote culturally competent schools	Facilitating student development through intervention; family empowerment; collegial consultation and brokering community resources

Adapting Cognitive-Behavioural Therapy for Mexicans with Anxiety Disorders: Recommendations for School Psychologists (Wood et al., 2008)	Commentary	US	Intervention	Uses the Psychotherapy Adaptation Modification Framework (Hwang, 2006), to offer adaptation principles for Cognitive Behavioural Therapy (CBT), when working with Mexican American youth with school related anxiety disorders	Social justice; creative adaptations to support relationships; engagement and commitment to treatment.
---	------------	----	--------------	--	--

2.3.1 Differences between EP and SP Working Practices

As the SLR has drawn predominately on SP literature in the US, it is important to contextualise this further and draw comparisons between the EP and SP role. Table 4 summarises the core competencies for Doctoral programmes in Educational Psychology (BPS, 2019) and the National Association of School Psychologists (NASP) Professional Practices (NASP, 2020).

Table 4

The core competencies for Doctoral programmes in Educational Psychology and the National Association of School Psychologists Professional Practices

Core competencies for Doctoral programmes in Educational Psychology in England, Northern Ireland and Wales (BPS, 2019)	The National Association of School Psychologists (NASP) Professional Practices (2020)
<ol style="list-style-type: none"> 1. Promoting development and education 2. Personal and professional values, ethics and skills 3. Diversity and cultural differences 4. Consultation 5. Psychological assessment and formulation 6. Psychological intervention and evaluation 7. Service delivery and organisational change 8. Training and development 9. Research and enquiry 10. Transferable skills 	<ol style="list-style-type: none"> 1. Data-based decision making 2. Consultation and collaboration 3. Academic interventions and instructional supports 4. Mental and Behavioural Health services and interventions 5. School-wide practices to promote learning 6. Services to promote safe and supportive schools 7. Family, school and community collaboration 8. Equitable practices for diverse student populations 9. Research and evidence-based practice 10. Legal, ethical and professional practice

2.3.1.1 Roles Undertaken.

As Table 4 suggests, there are similarities across the roles in which EPs and SPs may adopt in their practice, namely collaborating with systems around a CYP, completion of assessment and implementation of effective interventions, in addition to working at different levels of practice (BPS, 2019; NASP, 2020). However, it is acknowledged that there may be differences with how some of these roles are defined or carried out in practice. For example, some of the domains within SP practice speak to delivering individual and group counselling (NASP, 2020). Whilst EPs might engage in therapeutic work, such as psychoeducation, narrative therapies etc, these are not defined as counselling. This highlights the potential nuances with terminology used and how similar or different they are across practice.

Similarly, both the BPS and NASP reference that EPs and SPs engage in consultation, which is described in SP practice as “an indirect, problem-solving approach wherein school psychologists work with teachers or other caregivers to assist children with either learning or adjustment concerns or both” (Bramlett & Murphy, 1998, p. 31). It is acknowledged that whilst there may similarities across definitions within EP and SP practice, there may be differences within the profession as well as between the professions i.e., EPs in the UK may employ consultation in differing ways depending on their context.

In the UK, the roles in which EPs undertake can largely depend on where they practice as an EP i.e., within a Local Authority, private practice, based within the National Health Service etc. There will also be differences within these areas of work, for example some EPs within Local Authorities may work more closely with mental health

services or youth offending teams. Similarly, to the EP role, SPs largely work in public schools, but they may also work in preschools, universities, hospitals, juvenile justice programs and within private practice (NASP, 2021a), and their practice may vary depending on these contexts, in addition to how certain states may operate.

2.3.1.2 Employment.

In terms of routes to qualify as a SP, SPs do not necessarily need to have a doctoral degree to practice. SPs can complete either a specialist-level degree program or a doctoral degree program, but “no state or territory requires more than a specialist-level degree” (NASP, 2017, p. 2). Those that complete the doctoral degree broadens the opportunity for career options within schools, clinics, research etc. This is in comparison to EP practice where the only route into becoming a qualified EP is to complete the doctoral program. That said, the specialist-level degree program in the US typically requires at least three years of full-time study at the graduate level, in comparison to five-to-six years for the doctoral program (NASP, 2017), and the doctoral level program in the UK is three-years full time. This highlights potential differences with qualifications across disciplines.

2.3.1.3 Policies.

The NASP website outlines key policies within SP practice which arguably overlap with EP practice, namely to ensure there are enough practicing SPs, and to continually review structures and policy to ensure equitable outcomes and access for CYP

(2021b). Whilst in principle these policies seem similar to initiatives within EP practice in the UK, there may be some differences with how these are employed, for example the SP policy around equitable outcomes states that it supports

the use of and increase the availability of federal funds to provide professional development on critical race theory, diversity, White privilege, mitigating implicit bias, culturally responsive and antiracist practices within the school context, and other critical concepts necessary to promote an antiracist and culturally responsive education system (NASP, 2021b).

Other differences within SP policy compared to the UK includes differences with insurance i.e., policies include protecting insurance programs so that low-income families can access mental health services, as well as differences within US law (their approach to safe school environments includes rejecting efforts to abolish gun free school zones) (NASP, 2021b).

Whilst it can be argued that there may be several similarities between EPs and SPs, spanning role, policy priorities etc, there are also several differences between EP and SP practice, including but not limited to: nuances within terminology and how elements of practice are adopted. This poses potential challenges of drawing findings from SP practice as directly relatable to EPs within the UK. That said, an additional aim of the present research was to ascertain what aspects of culturally responsive SP practice could be applicable and translated to EPs in the UK context.

2.3.2 Recommendations for Practice

Rogers and colleagues addressed how the educational wellbeing of culturally diverse populations can be promoted, providing psychologists with recommendations for

practice (1999). Their guidance expanded upon the 1991 American Psychological Association guidelines regarding supporting culturally diverse populations. Whilst the article sits within the context of SPs in the US over twenty years ago, their recommendations touch upon the breadth of work within EP practice, for example assessment, consultation, intervention and research, as well as how culture can be considered at an individual level, through exploring one's own biases and seeking out further training, but also at a systemic level, through school culture, policy and advocacy.

2.3.2 Assessment

Articles which focused on cultural considerations within assessment remind readers not to assume similarities amongst cultural groups. Hass and Abdou (2018) provide a helpful comparison between *nomothetic*, commonalities within a cultural group and *idiographic*, unique individual characteristics, and emphasise the importance of acknowledging both. Similarly, in Saxton's (2001) review of challenges which Native American youth face, she acknowledges that these do not apply to all Native American youth, but they can provide some context into how this population can be supported during assessment. Key points which were raised in articles focusing on assessment emphasised use of an ecosystemic approach, a strong consideration of ethics, as well as using a variety of resources to support the assessment process.

2.3.2.1 Ecosystemic Approach.

Some articles recommended the use of an ecosystemic approach or framework when assessing culturally diverse CYP. Pham (2015) adopted a bio-psycho-social-cultural framework when considering best practice in delivering culturally sensitive school based mental health services to CYP with Attention Deficit Hyperactivity Disorder (ADHD). The model was an extension of Engel's 1977 bio-psycho-social model and stems from Bronfenbrenner's ecological model (1977), arguing that multiple factors must be considered to ensure culturally sensitive interventions can be implemented.

Pham used a case study to present a theoretical application of this framework. Whilst it is not clear how this case study was sourced, he outlined factors which affected the child's overall functioning, as well as noting their strengths. Pham raised the importance of conducting comprehensive language assessments, as well as considering cultural norms and parent beliefs about the aetiology of certain developmental disorders, as this may explain why some families may choose not to seek help. Additional feedback from the families of this case study would have provided further insight into their experience of the psychologist's input whilst using this framework.

Aganza et al. argued the importance of using an ecosystemic approach to support the shift from child-deficit to strengths-based discussion with specific cultural groups (2015). The authors argue that particular focus at the micro level (reviewing the systems that surround a CYP) can effectively support the assessment process, and they developed their framework, The Cultural Assets Identifier (CAI), which elicit "valuable skills, attitudes and experiences which emerge from the culture of the

student” (2015, p. 32). The authors used case studies to illustrate its application and highlighted that the model had been developed, tested, and adapted; further information about this process would have provided additional insight into its development. Whilst the CAI was used with Latino students and is therefore more applicable to US demographics, the model has arguable potential to be adapted for other cultural groups. The framework includes space to comment on the student’s home and culture-based activities, what learning or cognitive asset is demonstrated and their protective/resilience factors.

The authors refer to the often inappropriate use of standardised assessments and provide suggestions when observing CYP to support identification of cultural assets. These include developing knowledge of the child’s culture, providing a culturally appropriate and welcoming setting which acknowledges and values the child’s culture, and observing using a cultural assets perspective i.e. one of strength, as opposed to deficit (2015). Similar to Pham (2015), additional feedback regarding the effectiveness of the tool, from a child, parent or school perspective, would have provided further insight into its effectiveness.

2.3.2.2 Ethical Approach.

Grant et al. acknowledged the ethical principles and legislation regarding SP practice when working with Ebonics-speaking children, recognising that SPs must use a certain level of interpretation to understand how they must implement this guidance (2009). Their paper is nomothetic in focus (identifies themes more generally relevant to Ebonics-speaking children), but the authors helpfully summarise four broad themes

related to the ethical and legal guidelines which practitioners should address: the importance of non-biased interactions, ensuring assessment techniques are culturally appropriate, monitoring overrepresentation, and “closing the achievement gap between Caucasian and African-American students” (Grand et al., 2009, p. 118).

The authors offer alternative methods to standardised assessment, such as ecological, contextual or curriculum-based assessment. The Ethnic Validity Model is referenced in their paper (Barnett et al., 1995), which is described as a problem-solving framework focussing on evaluating cultural difference. It acknowledges that assessment should be both sourced from a variety of contexts and that contextual factors should be appropriately evaluated to inform subsequent intervention; the authors offer this as a promising approach to holistic cultural assessment (Grant et al., 2009). Similarly, Saxton urges caution with using standardised assessment with Native American youth and suggests that assessment should be approached with diversity and breadth, recommending using tools such as dynamic and curriculum-based assessment (2001). Saxton created a recommended evaluation procedure to use to promote ‘culturally competent assessment’ with this population. Whilst specifically tailored to Native American youth, it is argued that aspects of the evaluation could be applied with other cultural groups, as recommendations include considering the impact of family involvement, assessing the acculturation level or personal cultural identity of individuals, and carefully considering how intervention plans are formulated and aligned with the individual’s culture (2001).

2.3.2.3 Cultural Resources in Assessment.

Hass and Abdou considered what resources are available to support culturally appropriate assessment (2018). They highlight the importance of taking language into account and where interpreters may be helpful, but also consider how cultural groups make sense of social relationships and show understanding of their problems and solutions. They argue that the Cultural Formulation Interview (CFI) (American Psychiatric Association, 2013) can facilitate a gathering of this information. The CFI was a tool created by psychiatrists to help consider the role of culture when making clinical diagnoses. The interview focuses on four key areas: a “cultural definition of the problem”, “cultural perceptions of the cause, context and support”, “cultural factors that affect self-coping and past help-seeking”, and “cultural factors that affect current help-seeking” (American Psychiatric Association, 2013; Hass & Abdou, 2018, p. 12).

Whilst this tool was primarily created to ensure culture was considered when making clinical diagnoses, something which many EPs are not involved with, it is argued that this tool can be used to gain a personal narrative from the individual regarding their perceptions of their needs, as well as the usefulness of resources around them. The initial development of the CFI for clinical settings was acknowledged by the authors, however they argue that the questions are relevant for use in psychoeducational assessments, consultation and intervention. Other strengths of the tool include its scope to adopt a systemic focus, as family members can also be brought in to engage with the process and offer their interpretation of factors such as help-seeking behaviours of the individual. This would need careful consideration and a sensitive approach however, if these help-seeking behaviours are not perceived by the psychologist as supportive for the individual.

The paper is a commentary therefore the authors have not commented on its direct application with individuals, merely introducing it as a potential resource with culturally diverse populations. They also emphasise that other relational aspects must be considered in addition to the careful use of questioning, such as evidencing skill in relating with the individual, showing respect, reciprocity and responsiveness to the information shared (Hass & Abdou, 2018). Whilst there are articles which comment on using the CFI in clinical settings, it would be beneficial to further explore the utility of this tool within EP practice.

2.3.3 Intervention

Peterson and colleagues completed a literature review to present models and frameworks which focus on adapting interventions to be culturally appropriate (2017). The authors begin with the context of mental health in the US and highlight that factors such as accessibility means that some ethnic groups are under treated, providing the rationale to improve opportunities to support culturally diverse populations. The authors identify that this can be achieved through the knowledge, skills and attitudes of SPs and mental health professionals, but also through systemic factors, such as training and ensuring a diverse workforce. Literature identified from this review referred to several different models that can be used when considering how to adapt interventions to be culturally responsive. These models and frameworks highlighted key themes when adapting interventions: the importance of respecting how individuals may conceptualise their needs, personalised adaptations related to the individual's

culture, and using interpersonal skills which influence the supportive relationship that can impact the engagement and commitment to treatment (Peterson et al., 2017).

A strength of some of the models is that they have potential to be applied when working with a number of cultural groups as the key principles focus on the narrative of the individual and how they conceptualise their problems: something of which could be applicable to EP practice. A consideration and possible challenge of applying some of these models within EP practice is the practicalities of some of the suggestions. One of the models refers to including cultural specialists, but this would be entirely dependent on context and resources. Some of these models will now be discussed.

2.3.3.1 The Ecological Validity Model (Bernal et al., 1995).

The Ecological Validity Model was initially developed within counselling psychology and with Hispanic students to consider how their needs could best be met, but the model's principles can arguably be applied to other cultural groups and to EP practice. The model focuses on: language; how the problem is conceptualised for the individual; exploring similarities and differences between the client and therapist; use of symbols and concepts shared by the client's culture; framing goals within the client's culture; ensuring methods for achieving goals are in line with the client's culture; gaining understanding of the knowledge, values, customs and traditions of the client; and recognising the context in which the intervention is taking place (Bernal et al., 1995). The model has been effectively applied in different contexts, including adapting Cognitive Behavioural Therapy (CBT). In EP practice, it can often be the case that EPs are not the professional to implement interventions with CYP, but the education

provider instead. Consideration regarding implementation fidelity would be important if school staff needed to be trained on this approach.

2.3.3.2 The Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004).

The Cultural Adaptation Process Model is described as an extension of the Ecological Validity Model and identifies four key areas when considering how best to adapt interventions to be culturally responsive: identify a cultural adaptation specialist to guide the process, begin, monitor, evaluate and further adapt the interventions if required (Domenech Rodriguez & Weiling, 2004). The model has been used to adapt parent training in a Spanish community, as well as adapt a depression course for Haitian adolescents. However, in the realities of EP working it is questionable how accessible a cultural specialist would be: this would be largely dependent on the area in which the EP worked and resources available.

2.3.3.3 Psychotherapy Adaptation and Modification Framework (Hwang, 2006).

The Psychotherapy Adaptation and Modification Framework (PAMF) emphasises community involvement and outlines a formative method for adapting psychotherapy to be culturally appropriate. Wood et al. (2008) uses the PAMF framework to offer adaptation principles for CBT with Mexican American youth. Key stages of the PAMF framework include: learning about the family's cultural practices and history, collaborating with school staff, demonstrating respect for how the family

conceptualises mental illness and treatment, understanding the cultural context of the family (including parenting practices), extended family engagement and aligning techniques based on the family's beliefs and traditions (Hwang, 2006). Whilst application of these principles seem useful, further considerations include those identified from the CFI i.e. if a family was conceptualising mental illness and treatment in a way which was not congruent to the practitioner's values.

The efficacy of these models has been explored within particular contexts and with particular cultural groups, therefore further research would be necessary to explore their efficacy in both the UK and EP context. In addition, further insight into the usefulness of these models within their given contexts would be beneficial i.e. feedback from the perspective of the practitioner and client. That said, it is suggested that using models to support the adaptation of interventions to be culturally appropriate can help structure a suitable approach.

2.3.3.4 System-Level Intervention.

Some articles focused on how culturally adapted interventions can be embedded at a system-level (Hatzichristou et al., 2006; Simcox et al., 2006). Simcox et al. suggest how SPs are well placed to collaborate with school counsellors to promote 'culturally competent' schools. They introduced a model to support this collaboration which focused on developing, implementing and evaluating interventions intended to support culturally diverse schools, whilst being mindful of contextual factors which might impact the success of implementation. The model focused on delivery and evaluation at four levels: i) work with students, such as promoting self-awareness, positive

cultural identity, and valuing diversity, ii) services for families, including demonstrating respect for their help-seeking attitudes and ensuring their involvement in the education process, iii) interventions with educators, to ensure an increase in sensitivity and awareness of others, and iv) community involvement, such as forming an alliance with key stakeholders in the community from culturally diverse backgrounds (Simcox et al., 2006).

The authors recognise this model is an ideal and they touch upon the challenges that may be faced with implementing this intervention at a system-level, including resistance from certain stakeholders and time, but could have explored these issues with more depth. The authors acknowledge how SPs and counsellors complement each other well: whilst this may be the case in theory, it is questionable whether in the UK context of EP work whether this would apply. As some schools in the UK have counsellors 'in house', EPs which are linked to specific schools may be able to organise time with the school counsellor and consider how their work could contribute to CRP within the school. However, it is argued that school counsellor roles are largely working with individual children, whereas EPs may have more scope to work at a group or organisation level, therefore this aspect of working with school at system level may involve some negotiation and professionals taking ownership for particular areas of intervention. The main challenges within the UK context would be where both counsellors and EPs are working in schools on an ad-hoc basis and logistics for collaboration may be much more difficult.

Hatzichristou and colleagues acknowledge that an important prerequisite of system-level intervention is understanding other cultures. They reference Nastasi's

Participatory Culture Specific Consultation Model (2004) which identifies the culture-specific needs of individuals and systems. The authors suggest adopting a “metacultural perspective” (2006, p. 110) which integrates multicultural systems to form new dynamic outcomes, and using a transnational approach to system level multicultural interventions, which includes; using a conceptual framework to integrate culturally appropriate theories, ensuring a needs assessment and literature review is carried out on possible interventions, and to create, develop and evaluate a program of intervention (2006).

This model was implemented in Greece and involved drawing on empirical data, such as how several variables influence children’s functioning (i.e. family status), identifying students that may be at risk, exploring the needs of schools within a set district, and integrating these together into a “comprehensive prevention-consultation approach” (Hatzichristou et al., 2006, p. 115). The authors provide concrete strategies when considering how to apply these models, including a consideration of who may be best placed to implement the intervention, a consideration of the target groups, goals and content for the intervention, and to embed strong community networks to facilitate the continuation of the intervention (2006).

Similar to Simcox et al. (2006) the ease in building strong community networks may be dependent on the context in which EPs are working i.e. whether they operate on a link model with schools or not, as this may determine the ability to draw on needs of multiple schools within an area. However, its adoption of a strengths-based approach, one equally adopted by Aganza and colleagues (2015) is recognised and adopted by many EPs in the UK, which may support familiarity and streamlining.

2.3.4 Consultation

Rogers (2000) introduced a mini-series of articles which aimed to contribute an understanding of how SPs can develop cultural competency in consultation. The article acknowledged the difficulty in defining culture and how this may explain why the topic is not so widely explored, while commending those who have tried. Rogers refers to Ingraham's conceptual framework for consultation (Ingraham, 2000), which uses a cultural lens to focus on the content and process of consultation (this framework will be further explored by Parker et al. (2020) in their empirical study). Rogers summarised six key themes which arose from the articles:

1. Understand one's own and others' culture, arguing that a greater awareness allows biases to be overcome
2. The importance of developing cross-cultural communication and interpersonal skills
3. View consultation within a culturally embedded context
4. The importance of practice-based inquiry and use of qualitative methodologies to broaden the scope of research in this area
5. Acquire culture-specific knowledge e.g. level of acculturation, immigration
6. Understand and demonstrate skill in working with interpreters (2000).

She concludes with a hope that other professionals will use these themes to broaden their skills and better support the culturally diverse clients which are served. These suggestions draw on many principles which have already been highlighted in other

areas of SP practice, such as assessment and intervention. What feels particularly important about these suggestions is the combination of cultural self-awareness as well as cultural relatedness with others. These principles cover a wide range of knowledge, skills and attitudes, highlighting the notion of lifelong learning in this area. These suggestions may be helpfully considered within an overarching framework for CRP.

Twenty years later, Goforth reflects upon 30 years of multicultural consultation research. Whilst she acknowledges development in this area, she recognises there is still a lack of commitment to cultural research and wishes to “challenge researchers in consultation to investigate cultural variables more deeply and with more nuance” (2020, p. 3). Goforth raises the importance of understanding differences within cultural groups and the notion of intersectionality to ensure that socio-cultural variables beyond ethnicity and race are considered. Similarly to Rogers (2000), Goforth challenges researchers to consider more innovative approaches, such as qualitative and indigenous research methods, and community-based participatory action research. Research such as this has the potential for researchers to both gain further understanding of specific cultural groups, and to become more accepting of cultural difference, which acts as a positive step towards practitioners developing further self-awareness. For this to happen, EPs may need to develop their confidence and understanding of these alternative research methods. This idea that we should consider how to further understand the cultural experiences of others may be usefully explored in the context of supervision.

2.3.5 Supervision

Three articles raised the importance of how culture should be considered within the supervisory context, both in terms of considering the culture of the supervisor/supervisee, but also considering the cultural differences of clients we are working with (Butler, 2003; Eklund et al., 2014; Kelly et al., 2019). The authors argue that using cultural models and frameworks can help to strengthen the supervisory relationship, provide opportunities to think about one's own and others' biases, and support decision-making processes when reflecting on casework involving culturally diverse populations. The models all consider how culture can be considered within the supervisory context, however some take a more holistic overview e.g. Ancis and Ladany (2001), whilst others focus on particular areas of cultural responsiveness, such as awareness of white privilege (Helms & Carter, 1990). All articles discuss the applicability of these models for SPs, but it is argued that these may be useful for EPs when exploring cultural difference, both between supervisor and supervisee, but also between EP and their clients.

2.3.5.1 Framework for Multicultural Supervision Competencies (Ancis & Ladany, 2001).

The Framework for Multicultural Supervision Competencies outlines five key features which have shown through research to link to personal and professional development within supervision. These include *personal development*; explore one's own biases, *conceptualise*; assess how culture might be impacting on an individual's presentation, *intervention*; supervisors to be open to supervisee suggestions, *process*; ensuring

communication is open and respectful, and *evaluation*; supervisor to evaluate supervisee's multicultural competence (Ancis & Ladany, 2001).

2.3.5.2 Culturally Responsive Decision-Making Model (Kelly et al., 2019).

Kelly et al. integrated various models of decision-making with cultural prompts to form a culturally responsive decision-making model, to assist SPs in making ethical decisions which consider culture. The authors acknowledge that SPs may experience times when an individual's cultural values may conflict with Western ethics. The model involves identifying potential cultural factors that may conflict with ethical or legal factors related to casework, evaluating the rights of all those involved and determining which decision holds more salience (Kelly et al., 2019). Using a model such as this could be particularly useful to facilitate a discussion around particularly complex cases and provides an opportunity to consider multiple perspectives within a decision-making process.

2.3.5.3 White Racial Identity Development Model (Helms & Carter, 1990) and Racial/Cultural Identity Development Model (Atkinson et al., 1998).

Both the White Racial Identity Development Model and Racial/Cultural Identity Development Model are staged models which aim to improve individuals' overall understanding of their own culture, as well as the culture of others. The White Racial Identity Development Model involves a six-stage process, which aims to improve individuals' overall understanding of white privilege and their subsequent efforts to eliminate racism. The model describes how individuals can become faced with ethical

dilemmas and feelings of discomfort upon realising that racism exists, but then progresses to becoming more self-aware of one's own and other races (Helms & Carter, 1990). The Racial/Cultural Identity Development Model describes a five-stage process for racial minorities to gain further insight into their own culture as well as the dominant culture. The aim with this model is that individuals become more self-aware of their own culture as well as securing an appreciation of other cultures (Atkinson et al., 1998).

2.3.5.4 Best Practice for Multicultural Supervision.

Eklund et al. (2014) summarise best practice considerations for multicultural supervision using both empirical and conceptual evidence:

1. Discuss cultural similarities and differences
2. Show genuine interest in and respect for each other's unique culture
3. Create a safe and inclusive setting
4. Model and impart multicultural competencies
5. Value ongoing professional development opportunities

These best practice considerations were supported by studies which had explored these issues, providing some content validity. The authors also provide practical examples for how this might look in practice, such as offering questions which may help to facilitate conversations about race in supervision.

The notion of genuine respect for embracing cultural difference is highlighted in Butler's commentary, which reviews how culturally sensitive techniques can be applied

to the supervisory relationship. The article is written by a counselling professor and references culturally sensitive counselling techniques and interventions, which could be argued as less relevant to SPs. However, the key skills and techniques to elicit cultural sensitivity overlap with those which have been highlighted by Eklund et al., including flexibility, reflecting on white privilege and experiential learning (Butler, 2003). This notion of experiential learning is also emphasised by Kelly et al. who recommend that SPs should provide opportunities for practice and reflection to ensure continued professional development in this area (2019).

Whilst the models and frameworks provide supportive guidance and understanding, it is acknowledged that there may be a lack of empirical support concerning their effectiveness in practice within the supervisory context of EPs. A further challenge which was not mentioned was the scope of introducing these into supervisory discussions when there may be difficulties or tensions within the supervisory relationship i.e. where a supervisee may feel that their supervisor is not responsive to cultural difference. Eklund et al. mention that there is some onus on the supervisor to ensure they frequently raise and revisit discussions about culture (2014), therefore some supervisees/supervisors who feel they must take on this responsibility may feel overwhelmed.

2.4 What Empirical Research is Available Which Demonstrates How EPs Can Develop CRP?

To answer the second question of this SLR, empirical articles focusing on CRP were sought. Empirical studies were defined as research studies based on primary data, as

opposed to articles providing commentaries or analysis of existing data. Six articles met the inclusion criteria being an empirical study focusing on cultural responsiveness in EP practice. The Critical Appraisal Skills Programme (CASP) is a framework which was used to critically appraise all articles. Three different CASP checklists were used to critically appraise the empirical studies based on their research method (CASP, 2018a; 2018b; 2018c). A critical appraisal summary of each study using the CASP checklists are appended ('qualitative research' (Appendix C1), 'case control study' (Appendix C2) and 'cohort study' (Appendix C3)).

Of the six studies, two had a broad focus on culture within SP practice, three focused on Culturally Responsive Consultation (CRC), and one focused on adapting interventions to be culturally responsive. The two broad-focused studies will be discussed first, where key features of CRP within SP were identified, named 'cross-cultural competencies' (Lopez & Rogers, 2001; Rogers & Lopez, 2002). The three studies focusing on CRC will be discussed next, separated by their methodological approach (McKenney et al., 2017; Parker et al., 2020; Ramirez & Smith, 2007). Finally, an evaluation of the study which focused on culturally responsive intervention will be provided (Jones et al., 2017), before presenting an overall summary of themes from all six studies. Notable themes that were drawn from the studies included use of frameworks to help structure research (Jones et al., 2017; McKenney et al., 2017), and recognising the need for both continuous learning in this area and for further research.

As well as drawing on some recurring themes, the studies raised some key issues. All studies in this review were within a US context and referenced the work of SPs. It is

argued that whilst key themes can be drawn upon and applied to the UK context, it would be helpful to have more research from EPs in the UK to expand our understanding in this area and strengthen the reliability of findings. Secondly, whilst all six studies considered how culture can be further considered within SP practice, only half of the studies used the language 'cultural responsiveness' or 'culturally responsive' (Jones et al., 2017; McKenney et al., 2017; Parker et al., 2020); two studies used the term 'cross-cultural competencies' (Lopez & Rogers, 2001; Rogers & Lopez, 2002). Whilst these definitions can hold many similarities i.e. considering culture in practice, it is important to be cautious about making generalisations when working definitions about responding to culture may not completely align. Finally, methodological limitations were identified with some of the studies, for example questioning the validity of findings based on the approach, but also an acknowledgement of missing information regarding research processes, which may have provided further insight and clarity. Table 5 provides a summary of empirical studies which met the inclusion criteria for review.

Table 5*Summary of empirical studies related to CRP*

Study	Method	Location	Focus	Summary	Main Themes
Addressing Cultural Responsiveness in Consultation: An Empirical Demonstration (McKenney et al., 2017)	Quantitative	US	Consultation	Explored to what extent culturally responsive consultation provided additional benefits to teachers' classes, after establishing strong classroom management.	Importance of not taking a colour-blind approach, focus of cultural responsiveness as the process of consultation, rather than content.
Culturally Responsive Consultation Among Practising School Psychologists (Parker et al., 2020)	Qualitative	US	Consultation	Incorporates Ingraham's Multicultural Consultation Framework. Interviews SPs asking what strategies they employ when providing culturally responsive consultation.	Involve others, teach/educate, demonstrate support and engage in ongoing learning.
Case Vignettes of School Psychologists' Consultations Involving Hispanic Youth (Ramirez & Smith, 2007)	Qualitative	US	Consultation	Exploratory study investigating how school consultation was adapted to support Hispanic students.	Use of cultural norms to understand behaviour and create interventions, educating others regarding differences in cultural expectations, language adaptations.
Culturally Responsive Adaptations in Evidence-Based Treatment: The Impact on Client Satisfaction (Jones et al., 2017)	Quantitative	US	Intervention	A non-randomized, repeated measure study, measuring client satisfaction of an adapted CBT based intervention.	Use of frameworks to gain cultural understanding and support adaptation of interventions, multi-disciplinary working, be aware of intersectionality.
Identifying Critical Cross-Cultural School Psychology Competencies (Rogers & Lopez, 2002)	Survey Method	US	Broad	Uses a Delphi method to identify key features of culturally competent practice, informed by an expert panel consisting of SPs.	Competencies relate to the following subject areas: assessment, report writing, laws, working with interpreters, working with parents, theoretical paradigms, counselling, professional characteristics, consultation, culture, academic interventions, research methods, working with organisations, language.

Conceptualizing Cross-Cultural School Psychology Competencies (Lopez & Rogers, 2001)	Survey Method	US	Broad	Similar to Rogers and Lopez, 2002	Similar to Rogers and Lopez, 2002
---	---------------	----	-------	-----------------------------------	-----------------------------------

2.4.1 Key features of CRP - 'Cross-Cultural Competencies'

Rogers and Lopez identified key features of CRP, named 'cross-cultural competencies', to help guide SPs in their work with culturally diverse populations (2001; 2002). Their focus on 'competencies' drew on the work of Sue and colleagues (1982, 1992), which emphasises the integration of knowledge and skills; it is likely that their working definition of cross-cultural competencies will have influenced their studies' approach and findings, which should be carefully considered when comparing these findings with others who may have alternative working definitions when responding to cultural difference.

2.4.1.1 Methodology.

The authors completed two Delphi studies as a method of reaching a consensus amongst their panel of cultural experts (Lopez & Rogers, 2001; Rogers & Lopez, 2002). In the first of the two studies, Lopez and Rogers used an open-ended questionnaire to establish what a group of cultural experts perceive to be important features of cross-cultural SP practice (2001). They used a further two rounds of surveys to define these responses into statements and reach a consensus regarding perceived importance. In their second study, Rogers and Lopez completed a review of the literature pertaining to cross-cultural competencies and used this to form statements which they asked their expert panel to rank in terms of perceived importance (2002). This meant that only two rounds of surveys were adopted to establish consensus, due to the pre-existing information provided from the literature for round one. Once participant ideas (Lopez & Rogers, 2001) or information from the literature (Rogers & Lopez, 2002) was collated, the information was presented back

to participants in the form of statements, where they were asked to rank how important they perceived them to be for SP practice, ranging from 1 ('very important') to 5 ('very unimportant'). Essential items were defined using a mean and consensus percentage, which varied slightly between studies but were both high (100% in the 2001 study and 96% in the 2002 study).

2.4.1.2 Participant Recruitment.

The authors clearly outlined specific criteria to identify their panel who they perceived to have expertise in cross-cultural SP, which included meeting two out of five of the following criteria: being an author of two or more SP publications concerning diverse clients; having presented at least three presentations on cross-cultural topics; were a faculty member of a training program that emphasized multicultural training; were a member of a SP committee about delivering services to the culturally diverse, or had at least five years' experience working with culturally diverse populations (2001, 2002).

This rigorous selection process and clearly defined criteria suggest that the expert panel had a good level of understanding in supporting culturally diverse clients, therefore this may support the validity of results. Whilst the authors recognised that their definition of cross-cultural competence is subjective, their studies provided a helpful definition of 'cross-cultural competency' in SP practice, which was relevant to the full spectrum of psychological services of SPs, therefore being broad in its focus.

2.4.1.3 Results.

Results led to an identification of 89 critical cross-cultural competencies in the 2001 study, and 102 competencies in the 2002 study, as perceived by the two expert panels. Categories which were identified as most important for cross-cultural practice in both studies included 'assessment', the most critically rated item in the 2001 study being, "knowledge of cross-cultural variables influencing performance, assessment results and interpretation" (p. 285), as well as using a variety of assessment tools and recognising the limitations of using standardised assessment. Another category which was deemed highly important across both studies was 'report writing' i.e. ensuring the language used in reports is accessible for culturally diverse families. Both assessment and report writing are arguably frequent aspects of the EP role, therefore these identified cross-cultural competencies feel applicable to EP practice. Other essential categories included: 'consultation'; 'language', namely how language influences assessment results; 'personal characteristics', including tolerance, respect and sensitivity for cultural difference (2001), and 'laws and regulations' (2002). The authors note that 43% of literature-derived competencies were shortlisted as critical cross-cultural competencies (2002) compared with only 31% of competencies derived from the experts (2001). This may be due to the sheer number of statements offered from the expert panel in the 2001 study but provides a rationale for drawing on the psychological literature to inform their research.

2.4.1.4 Limitations.

Whilst the studies have shown rigour in some elements of their process i.e. identifying the expert panel, some methodological limitations are recognised. Both studies

presented a reduced sample of panellists in the final rounds due to high attrition rates (in the 2001 study, the number of experts reduced from 25 experts in round one, to 11 in rounds two and three and in the 2002 study, the experts reduced from 34 in round one to 24 in round two). A second limitation was both the quantity and quality of competency items generated. In the 2001 study, researchers reduced the initial 821 statements generated by the expert panel to 459; further explanation as to what process was followed would have been useful.

2.4.1.5 Implications for CRP within Educational Psychology.

Rogers and Lopez's studies have direct implications for EP practice. The competencies identified in both studies provide both breadth and depth within SP practice, spanning functions of practice integral to EP work i.e. assessment and consultation, as well as important characteristics that are relevant for EPs. This provides scope for its relevance within EP contexts in the UK. The authors have not completed a full comparative analysis on the competencies generated from both studies, but welcome future studies focusing on examining and integrating these cross-cultural competencies. The authors also recognise an increase in the demand for further training in this area and stress the need for further research to "continue to conceptualise essential competencies for school psychologists working with minority populations" (Lopez & Rogers, 2001, p. 293).

2.4.2 CRP in Consultation

One of the key cross-cultural competency categories identified by experts in Rogers and Lopez' studies focused on consultation. Other studies have used differing methodologies to consider how to implement CRC. Those which used a quantitative approach will first be discussed, followed by those using qualitative methods.

2.4.2.1 Quantitative Approach to CRC.

McKenney et al. used a single-case design to investigate whether beneficial effects could be seen from providing CRC, defined by the authors as “engagement in problem solving around culturally based concerns raised and defined by consultees raised in that process” (2017, p. 300), after strengthening classroom management. The authors recognised that cultural responsiveness is complex and not easily observed; they argued that for it to be effectively implemented, it would be beneficial to focus on the conversations between the consultant and consultee, as opposed to set principles which the consultee implemented. Therefore, the culturally responsive element of CRC was the implementation of ideas raised through this process which included: modification of the curriculum, discussions concerning support for individual children and being careful not to overgeneralise cultural norms (McKenney et al., 2017).

Three teachers who met the inclusion criteria of being perceived to have culturally diverse classrooms (having students of varying races, ethnicities, home languages, religion and/or socioeconomic status) took part in the study. The self-referred nature of teacher participation may have influenced their motivation to participate, which the authors hypothesized may have been due to contextual events in their area at the time

(racial tensions and protests). These factors need to be considered when evaluating the reliability of findings i.e. whether teachers who had not self-referred or had not experienced similar contexts, would have seen the same results. The authors provided details of the ethnicities of the teachers, as well as the consultant and supervisors who participated in the study. It may have been helpful to further explore the relational ethics in the study i.e. recognising sameness and differences amongst consultant and teacher (consultee) and how this may have influenced their approaches.

The authors measured the success of the intervention primarily by the number of classroom disruptions following CRC, whilst the secondary variables measured were teachers' use of labelled praise, and opportunities for pupils to respond. Teachers completed a Culturally Responsive Questionnaire (CRQ), which measured their self-perceived cultural responsiveness, before and after having CRC. They also completed the Treatment Evaluation Inventory to measure the acceptability of consultation, which was recognised as having acceptable internal reliability and validity. The results of the CRQs suggested that CRC appeared effective in improving consultee knowledge regarding CRP, although it was not clear how much time had passed after the CRC and the teachers completing the measures. Furthermore, as this is a self-reported measure of cultural responsiveness, it would have been helpful to gather further measures of the effectiveness of CRC i.e. teachers providing feedback on the consultee's approach specifically linked to cultural issues, to provide more evidence that any change was a result of the consultation, and not due to other extraneous variables.

Results showed strong effects in the first class and moderate effects in the second two classes during the CRC phase in decreasing the number of classroom disruptions. There was also an increase in the amount of labelled praise following the classroom management phase and CRC phase. No observed effects in opportunities to respond were evidenced between the classroom management and CRC phase (McKenney et al., 2017). Due to the chosen methodology i.e. a staged intervention where classroom management was first strengthened, high floor effects were evidenced due to the effectiveness of the initial classroom management phase. Therefore, it was difficult to measure the influence of CRC on classroom disruptions. This provides scope for future research to focus on CRC first.

The authors acknowledged that improvements in classroom management came from relatively small changes. This may help support EPs to feel more empowered that they can make a difference, in what may be perceived as an overwhelming and complex topic to address. Furthermore, it was hypothesised that the positive impact of the classroom management phase could have aided the transition to the CRC phase. This raises the importance of developing a strong relationship between consultant and consultee, so consultees feel comfortable to engage in potentially difficult and sensitive discussions regarding culture. The authors raise key messages about taking an individualised approach when understanding the cultural backgrounds of others and not to take a colour-blind approach (McKenney et al., 2017).

2.4.2.2 Qualitative Approaches to CRC.

In the first of two studies adopting a qualitative methodology, Parker and colleagues (2020) interviewed 15 SPs to explore the strategies used to provide CRC and what barriers they faced when attempting to implement these techniques. This study was part of a larger piece of research exploring how cultural responsiveness is defined, perceptions of how SPs were being culturally responsive, and how cultural methods could be implemented within the consultation process. The authors defined CRC as “consultants intentionally using various methods and adapting traditional consultation strategies to support culturally diverse students” (Parker et al., 2020, p. 125). The authors conceptualised cultural responsiveness and SP experiences of being culturally responsive as largely subjective, which aligned with their constructivist methodology and may understandably pose issues when comparing results.

Parker et al.’s study used Ingraham’s Multicultural School Consultation (MSC) framework to support their development of questions for interview, which focuses on five components, “i) Domains for Consultant Learning and Development, ii) Domains for Consultee Learning and Development, iii) Cultural Variations in the Consultation Constellation, iv) Contextual and Power Influences and v) Hypothesized Methods for Supporting Consultee and Client Success” (Ingraham, 2000; Parker et al., 2020, p.122). SPs were recruited via purposive and snowball sampling and interested participants completed a screener to ensure they engaged in consultation at least 10% of the time. Whilst a screening procedure was used to gain information about the SPs i.e. the amount of training they had in relation to providing consultation, and the commitment levels of their services in using consultation, there was no information

regarding how the researchers ensured all participants were practising consultation in the same way, which may raise challenges with treatment fidelity.

The authors used constant comparative analysis to develop five major themes which reflected the strategies SPs used to be culturally responsive during consultation: “i) involve others, ii) teach/educate, iii) demonstrate support, iv) engage in ongoing learning”, and v) be mindful of the contextual and power influences (Parker et al., 2020, p.132). Whilst on the surface these strategies could be argued as general good practice when engaging in consultation, the authors expand on how these strategies incorporate adapting practice to be culturally responsive. For example, when talking about the strategy ‘teach/educate’, participants shared that when conceptualising a child’s needs, cultural dynamics were not always considered by school staff, therefore SPs spoke of raising teachers’ awareness of the student’s cultural backgrounds and how that impacts the support they need in the classroom (2020).

The authors summarised key barriers SPs face when attempting to implement CRC including: i) involvement from parents, ii) teachers being resistant to change, iii) system-level interventions, iv) seeking guidance from cultural guides, v) cultural minimisation and vi) lack of administrative support (Parker et al., 2020). Whilst these themes were expanded upon to reflect cultural barriers, it appears that not all these themes are specific to cultural issues. It may have been helpful to return to participants with the identified themes to check for validity (although it is recognised that this was not a necessity with the chosen methodology). It would have also been beneficial for the authors to include further explanation of how their data was selected and linked with the themes, to demonstrate their analysis process further.

The research had several strengths and limitations. Firstly, the use of Ingraham's MSC as a framework to guide their questioning could be both a strength and limitation, as their interpretation of data was limited to aspects of this framework. The authors reference researcher positionality and comment that care was taken to discuss how their perspectives and potential biases may have influenced the information which was gathered (i.e. through an audit trail, regular meetings). Whilst they outlined their coding process for inter-rater reliability, further reflections could have been revisited in the discussion. Secondly, ethical considerations were addressed in the study, although there was a lack of reference to relational ethics. Some information was provided about the researchers' backgrounds but there was a lack of exploration around how their own experiences influenced their interpretation/sense of relating with the participants. Furthermore, the subjective and personal nature of experiences related to one's culture can evoke emotion, but this was not explored, for example how researchers would address participants becoming distressed through discussing their experiences. Finally, the study raised important support for modifying established consultation techniques to ensure culture is considered. The authors also stress the importance of using an ecological model and moving away from a within-child focus within consultation.

Parker and colleagues questioned whether SPs are "adequately prepared" and "perhaps willing" to challenge the structures and people in positions of power who may act as barriers to implementing CRC (2020, p. 145). The authors recognise that few studies have looked at the extent to which these techniques improve outcomes and highlight scope for further research in this area.

In a similar study, Ramirez and Smith investigated how school consultation was adapted to be culturally responsive for Hispanic youth (2007). 49 anonymised case vignettes were provided by a subsample of National Association of School Psychologist members, who had participated in a study looking at their perceived importance of cultural issues when engaging in consultation with Hispanics. Respondents were invited to provide an optional case vignette with instructions to “describe a situation in which you took culture into account when consulting with a teacher (or parent) about an academic and/or behavioural problem of a Hispanic student, paying particular attention to how culture was taken into account” (2007, p. 83). The vignettes were thematically analysed and subsequent themes which emerged were i) using cultural norms to explain behaviours, ii) differences amongst parents and/or school staff regarding their expectations of culture, iii) how language was considered i.e. through use of interpreters and iv) where culture was mentioned but specific cultural adaptations were not made.

Whilst information was given on why some case vignettes were excluded i.e. due to a lack of information provided, it could have been clearer how the vignettes were initially sourced, for example whether SPs had to have evidenced working with Hispanic students for a certain period. Ethical issues of consent were not outlined, although the study was part of a larger study, which may provide some explanation for this. The authors provided a brief description of the analysis process, but it would have been helpful to provide an example to demonstrate their process of theme selection. Similar to Parker and colleagues, little reference was made to researcher positions and bias in this study, although inter-rater reliability was addressed to check coding for themes.

It was noted that 56% of vignettes chosen were written by SPs from a Hispanic background and the authors acknowledged the discrepancies between themes from Hispanic and non-Hispanic consultants. For example, the theme of justifying behaviours based on culture was more likely to be drawn upon by Hispanic consultants. The authors provided a possible rationale for this and hypothesised that their increased level of knowledge regarding cultural variables with Hispanic children may have impacted their level of empathy or understanding. The authors do however acknowledge the complexity with this dynamic and the danger of ignoring some variables to justify behaviour based on culture.

Based on the reflections from the case vignettes, it is argued that there can be different methods of adapting consultation practices to be culturally responsive. Whilst these strategies were used with a specific cultural group, some of these strategies may have relevance working with other cultural groups. For example, using cultural differences to support explanation of a child's behaviours which may be being perceived as problematic, may support a holistic understanding and ensure interventions are based on making culturally responsive adaptations, as opposed to adopting a within-child approach, supporting Parker et al.'s conclusions (2020).

The demographic of participants may provide limitations in applicability to the UK context, but the key themes that were drawn upon arguably remain pertinent to components of CRC in the UK and could be applied when working with other culturally diverse CYP. The authors acknowledge that SPs must assess their levels of multicultural understanding, seek training as needed and liaise with cultural experts

such as cultural brokers to develop in their role, calling for further research in this area to add to our understanding of how culture is considered within practice.

The qualitative studies by Parker et al. and Ramirez and Smith differ from McKenney and colleagues in that the former studies' evaluation focus was primarily on the SP i.e. gaining their perspectives on how they were culturally responsive when engaging in consultation, whereas McKenney et al.'s study focused more on the impact of the CRC on others i.e. on the teacher's self-perceived cultural responsiveness and the impact on the management of their class. Whilst it could be argued that evaluating the impact of CRC on the consultee may be more beneficial, as they may be more able to identify the impact this involvement has had on outcomes for the CYP (which is the overall aim of EP work), research which is able to triangulate perspectives of those involved i.e. the EP, the consultee (school staff/parent) and where appropriate the client, would be beneficial to gain a broader understanding of the impact of CRC.

2.4.3 Culturally Responsive Intervention

Another area where EPs can be culturally responsive is when devising interventions for CYP. Jones and colleagues investigated whether culturally responsive adaptations in evidence-based treatments had an impact on client satisfaction (2017). Their study expanded upon the literature pertaining to multicultural counselling competencies in SP and focused on adolescents with depression symptoms using a non-randomised, repeated measure study.

The study involved two groups (non-matched samples), one of which was delivering CBT which had an emphasis on culturally responsive techniques, known as culturally responsive CBT (CR-CBT). Clinicians in training from SP, counselling, clinical social work and psychology departments used frameworks which had a cultural focus to support them with their intervention, The ADDRESSING framework (Hays, 2016) and The Jones Intentional Multicultural Interview Schedule (JIMIS) (Jones, 2009). The authors do not expand on these frameworks within their study but refer to Zigarelli et al.'s 2016 paper where the JIMIS interview questions are presented, as they align with the ADDRESSING framework. The authors also make recommendations that SPs use these two frameworks, to support communication and gain clearer understanding about a client's cultural factors. Adaptations to the CR-CBT included, i) cultural adaptations within the therapeutic relationship, ii) integrating cultural knowledge into their intervention, iii) considering strengths and limitations of CBT across cultures, iv) using cultural framing to ensure client thoughts were considered within a cultural context, and v) ensuring cultural supports were continuously included in the intervention (Jones et al., 2017).

Clients rated their satisfaction of therapy using the Session Evaluation Questionnaire (SEQ) at three time points during the therapy. A mixed between-within subjects analysis of variance indicated that both groups showed an improvement on all four dimensions of the SEQ. A main effect between the CR-CBT group and CBT group was only present at the 12th session, where clients' perception of *smoothness* (comfort and relaxation with the intervention) was significantly higher in the CR-CBT group compared to the CBT group (Jones et al., 2017).

Several limitations of the study have been identified. Whilst CR-CBT was clearly defined, and readers were invited to review Jones et al. 2015 paper for more information in the group CBT training, 'CBT as usual' was not necessarily clearly defined. The CBT clinicians were notably from varied backgrounds, spanning psychology, social work and counselling. Whilst the authors followed a set process of training and supervision for the two groups, there is a possibility that the different disciplines may have influenced their style and approach to CBT, making it difficult to directly compare across groups.

Secondly, five adolescent clients (four females and one male) participated in the study, with their ages ranging from 11-15. Four of the clients were identified as Caucasian. Whilst there was some heterogeneity amongst participants regarding demographic area and their presenting depression symptoms, it is not clear whether there was an established reliable system for case selection i.e. the extent and longevity of symptoms, as well as other genetic, environmental and socio-economic factors of the clients which may have influenced outcomes.

Finally, it was arguably unclear how clinicians and clients were allocated to each group. Three clients received CBT and two received CR-CBT. The study highlighted the mix of ethnicities across clients and clinicians but there was no mention of how this may have confounded the results, meaning that a direct comparison of effect is difficult to conclude. Whilst measures of effectiveness were consistent, the authors acknowledge that the small sample size increases the difficulty in generalising results.

Despite these limitations, the study focused on a population that EPs are likely to work with and therefore the findings have relevance for application. There is less awareness and research regarding culturally adapted interventions and the authors helpfully provide recommendations for SPs and SPs in training:

- Use clinical interviewing tools, such as the JIMIS (Jones, 2009) and the CFI (American Psychiatric Association, 2013), which was similarly recommended by Hass and Abdou (2018)
- Use frameworks to help form a clear picture of how a client's culture influences their presentation, for example the ADDRESSING framework (Hays, 2016)
- Push through personal discomfort when talking about cultural difference
- The importance of multi-disciplinary working; discuss with family liaisons and cultural brokers to support the therapeutic process
- Always be aware of the notion of intersectionality and how culture intersects other aspects of difference (Jones et al., 2017).

It is argued that the recommendations offered by Jones and colleagues is likely to be applicable to EP practice. EPs are familiar with using tools and frameworks to support their practice, thus gaining further experience of specific tools offering a cultural lens may be beneficial. Additionally, EPs often present a formulation of their understanding regarding a CYP's needs. The recommendations linked to multi-agency working and considering intersectionality are helpful reminders of what to consider when triangulating and formulating ideas.

2.4.4 Exploring EPs' Work with CYP and Families from Minority Cultural and Linguistic Communities

In March 2021, the researcher discovered a doctoral thesis via a repeated Google search which explored EPs' work in the UK with CYP and families from minority cultural and linguistic communities (Ratheram, 2020). A critical appraisal summary of this research using the CASP is appended (Appendix C4). Whilst Ratheram's research was not included in the SLR or thematic first round of the Delphi (due to late discovery), her work aligned with the current research questions. Ratheram's research was based on the following questions:

1. "How might EPs develop their practice in relation to working with minority cultural and linguistic populations?"
2. How might an EP Service (EPS) develop their practice at service level in relation to working with minority cultural and linguistic populations?" (2020, p. 15)

The author used a participatory action research paradigm with an EPS who had identified this area as a focus for service development. The nine participants included seven EPs (including one Principal EP and two Senior EPs), and two assistant EPs. Participants engaged in four focus groups, which covered a review of current practice, identifying 'even better' work with CYP from minority cultural and linguistic communities, implementing a personal action plan and modifying/continuing work in this area for review. The researcher inductively analysed their data, collating themes/over-arching themes and checked these with participants to increase validity of findings. The thematic map included overarching themes based around

'knowledge', 'skills' and 'awareness', 'enabling access participation' and 'positive professional reputation as a service' (Ratheram, 2020).

A key finding was that "participants developed the concept of a 'dynamic journey of understanding and change' which characterised their professional learning as a process rather than reaching a destination" (Nastasi, 2006) (2020, p. 62). This aligns with the current research and its concept of CRP, as well as linking to other research which focuses on ensuring a continuous learning process within this area. Whilst the author acknowledges the research limitations regarding data collection of one EPS in the UK, the findings provide EPs/EPs with ideas of how to engage in wider CRP both individually and as a service, including devising a "study day for psychologists focusing on culturally sensitive assessment" (p. 62), and developing skills and resources in cross-cultural communication and approaches (Ratheram, 2020).

2.4.5 Empirical Research in the UK

In addition to Ratheram's research, some of the articles retrieved from her SLR provide additional insight into CRP within EP practice in the UK. These include themes already identified from the School Psychology literature, including the importance of ecosystemic approaches and use of tools and approaches to support CRP. Some studies also drew upon aspects of cultural responsiveness when working with families.

2.4.5.1 Importance of Ecosystemic Approaches

SP articles in the US drew on the importance of using an ecosystemic approach when assessing culturally diverse CYP (Aganza et al., 2015; Pham, 2015). Gaulter and Green came to similar conclusions in their UK based research, who were interested in how to promote the inclusion of migrant children (2015). The authors adopted an action research methodology and interviewed nine school staff and five Slovakian children, analysing their data using thematic analysis. Staff acknowledged that their perception of Slovakian culture changed across the length of the research. They also reflected on their understanding of cultural identity and how culture links to other factors within the environment, further emphasising how perceived within-child factors should be compared to social factors.

The authors acknowledged the implications for EPs working in diverse communities. Close links were made to Bronfenbrenner's ecological system theory (1977) to frame their argument that the inclusion of migrant children is influenced by wider systems such as the economic climate. They concluded that EPs are well placed to use ecosystemic approaches to consider culture and to challenge thinking (Gaulter & Green, 2015).

2.4.5.2 Use of Tools or Approaches

Within EP practice, research has suggested that using narrative approaches may provide individuals the opportunity to articulate their experiences. Such approaches have been seen to be beneficial when considering aspects of culture, such as using talking stones to support newly arrived and unaccompanied asylum-seeking children recount

their experiences (Hulusi & Oland, 2020; Morgan, 2018). The Tree of Life intervention is another narrative approach which has supported CYP to further understand their own culture, as well as that of their peers (German, 2013) but has also supported ethnic minority parents of CYP with SEN in eliciting their strengths and empowering them (Rowley et al., 2020).

2.4.5.3 Cultural Responsivity when Working with Culturally Diverse Families

Research by Lawrence draws on themes related to cultural responsivity when working with culturally diverse families (2014). In the qualitative component of her mixed-methods research, Lawrence explored Black African Parents experiences of an EPS in the UK (between 2009-2011) (Lawrence, 2014). Whilst Lawrence states that her findings apply to all families regardless of their ethnic background, key themes are arguably pertinent to CRP when working with culturally diverse families.

A key implication from Lawrence's research was the importance for EPs to work within the belief systems of the family and to promote openness (2014). The African mothers spoke to the differences between their belief systems around understanding their child's SEN needs and how these were perhaps "contrary to their perceptions of White European families" (2014, p. 246). Lawrence highlights that thought processes are influenced by "inter and intra cultural differences" (p. 246), and it is important that these are explored. This was also emphasised in the quantitative aspect of Lawrence's research, as information linked to frequency of preschool referrals acknowledged a

lack of information regarding specific regions within Africa where families originated, and the fact there may be intra-cultural differences within the 'Black African' label.

Another implication for EP practice was the acknowledgement of potential power imbalances between professionals and families. Lawrence articulates,

if professionals hold a powerful position, have incongruent values or beliefs to a family, and families fear racism or cultural stereotyping, the process of identifying a SEN may lead to an interpretation or view that White professionals hold specific ideologies about Black children. This possibility may have impacted on the families' contact with all professionals in the course of caring for their child (Lawrence, 2014, p. 247).

Linked to this power dynamic, some of the mothers spoke to their feeling that they lacked active involvement in decision-making for their child, and they rejected service input. Lawrence highlighted the importance for parents to feel comfortable when working with professionals who may encourage or offer support when accessing services, so the notion of openness can support this process. Implications for practice included parents feeling empowered to ask questions and facilitate effective parent-professional relationships through a position of Safe-Uncertainty, one of respect and collaboration (Mason, 1993), and the importance of making the EP role transparent to families (Lawrence, 2014). The notion of mutual respect and empowerment are themes which also contributed to German's research aiming to promote resilience and emotional wellbeing of refugee parents (2008).

Research by Rupasinha explored how EPs considered cultural factors within assessments for autism (2015). The EPs who participated in the research spoke to some of the belief systems of specific ethnic communities, such as their attitudes towards gender, disability, age-appropriate development and accessing support. A

key theme from the research was how EPs made adjustments when working with culturally diverse families, for example adapting their questioning and being sensitive to the cultural context in which a family was based.

2.5 Summary of the SLR

The aim of this SLR was to answer two key research questions, 'how do EPs consider culture within their practice?' and 'what empirical research is available which demonstrates how EPs can develop CRP?' It is important to recognise that most of the articles from the literature review were largely from the US and therefore referenced SPs as opposed to EPs, however it is argued that findings could be largely relevant and applicable to EP practice in the UK. Findings suggest that SPs consider culture within various aspects of their practice, namely when completing assessment, consultation, intervention and supervision. Whilst there was limited empirical research available, articles used a variety of methodologies to evidence how SPs can develop CRP, through identifying key components to develop practice, reviewing approaches within consultation, and adapting interventions to be culturally responsive. Both empirical and theoretical articles drew upon specific models, tools or frameworks which can be used to consider culture further, as well as recognising the need for continuous learning and further research in this area.

2.5.1 Use of Models, Tools and Frameworks

Several of the theoretical/opinion papers referenced models, tools and frameworks that are argued to facilitate SPs' understanding of culture within practice. Similarly, a

few of the empirical studies used cultural models and frameworks to guide their research, as well as recommending their use in practice. Whilst these models and frameworks offered structure when approaching different aspects of SP work, it is not yet clear how effective they are in developing CRP and improving the outcomes of culturally diverse CYP. It would be helpful to understand whether EPs in the UK are familiar with some of these models and perceive them to be important when developing CRP.

2.5.2 A Recognition for Continuous Learning

Articles emphasised the importance for SPs to focus on cultural responsiveness as an area for CPD. Self-learning was encouraged through recognising one's own biases and through exploring aspects of sameness and difference in practice, spanning assessment, consultation, intervention and supervision, which arguably has clear relevance for EP practice.

2.5.3 The Need for Further Research

All empirical studies acknowledged a lack of research in this area and welcomed further studies to contribute to our understanding of CRP. Ideas for further research included a continued attempt to conceptualise the skills needed to gain 'cross-cultural competency' (Lopez & Rogers, 2001; Rogers and Lopez, 2002), to review the primary impact of implementing CRC (McKenney et al., 2017) and to evaluate the extent to which CRP improves outcomes for CYP (Parker et al., 2020).

2.5.4 Limitations and Implications for EP Practice

Whilst the articles offer key contributions and are argued to have relevance and applicability within EP practice, several limitations are acknowledged. Firstly, the key 'cross-cultural competencies' highlighted in Rogers and Lopez's studies were developed almost 20 years ago and were within a US context (2001; 2002). Whilst the other studies were more recent, they still largely referenced SP practice within the US. It would be helpful to compare these findings within current UK research on EP practice, before drawing conclusions on the relevance of this research. It is promising that newer research is coming to the forefront in the UK context (Ratheram 2020). Furthermore, whilst some of the authors of theoretical articles stated that their recommendations were informed by research, more information is needed to draw accurate and valid conclusions of their utility within EP practice in the UK.

That said, the SLR has identified several ways in which SPs consider culture in their practice, as well as how empirical studies have informed our understanding of how SPs can be culturally responsive in their practice. The articles have highlighted several key themes, which would be helpful to explore further, to decipher their relevance and importance within developing CRP in the UK EP context.

2.6 Working Definition of CRP

The introduction and literature review chapters have identified literature pertaining to culture and EP practice, and have supported the formation of a working definition of CRP. This working definition is from the researcher's perspective, which has evolved largely from reviewing the literature and exploring the different terms of reference that

have been used to consider culture in practice. The empirical articles offered varying definitions when responding to cultural difference and used different terminology when considering how to consider culture in practice, which makes comparison difficult. However, key features or recurring themes that appeared in definitions were combined to form the definition for the current research.

This research defines CRP as an active and evolving process when working with culturally diverse populations, which is both an *interpersonal* and *intrapersonal* process. Culturally diverse populations include CYP and their families, as well as EPs and other professionals who EPs engage with in their work. The term interpersonal has been readily used in the literature when discussing CRP (Parker et al., 2020; Ramirez et al., 1998). The *interpersonal* aspect of CRP pertains to the way in which EPs relate with and respond to those from culturally diverse populations. This is an active process, one which develops through discussion and implementation of ideas/techniques (McKenney et al., 2017). This includes the type of skills EPs use to ensure sensitivity and appropriate engagement with those they are relating with, which may span across the core functions of the EP role: assessment, consultation, intervention, training and research. This definition also includes the role of supervision: how EPs relate with one another in a culturally responsive way, both as supervisors and/or supervisees, and how they speak of their culturally diverse clients. It is acknowledged that EPs operate at different levels within their practice (individual, group and organisational) therefore the interpersonal aspect of CRP is embedded within working at these different levels.

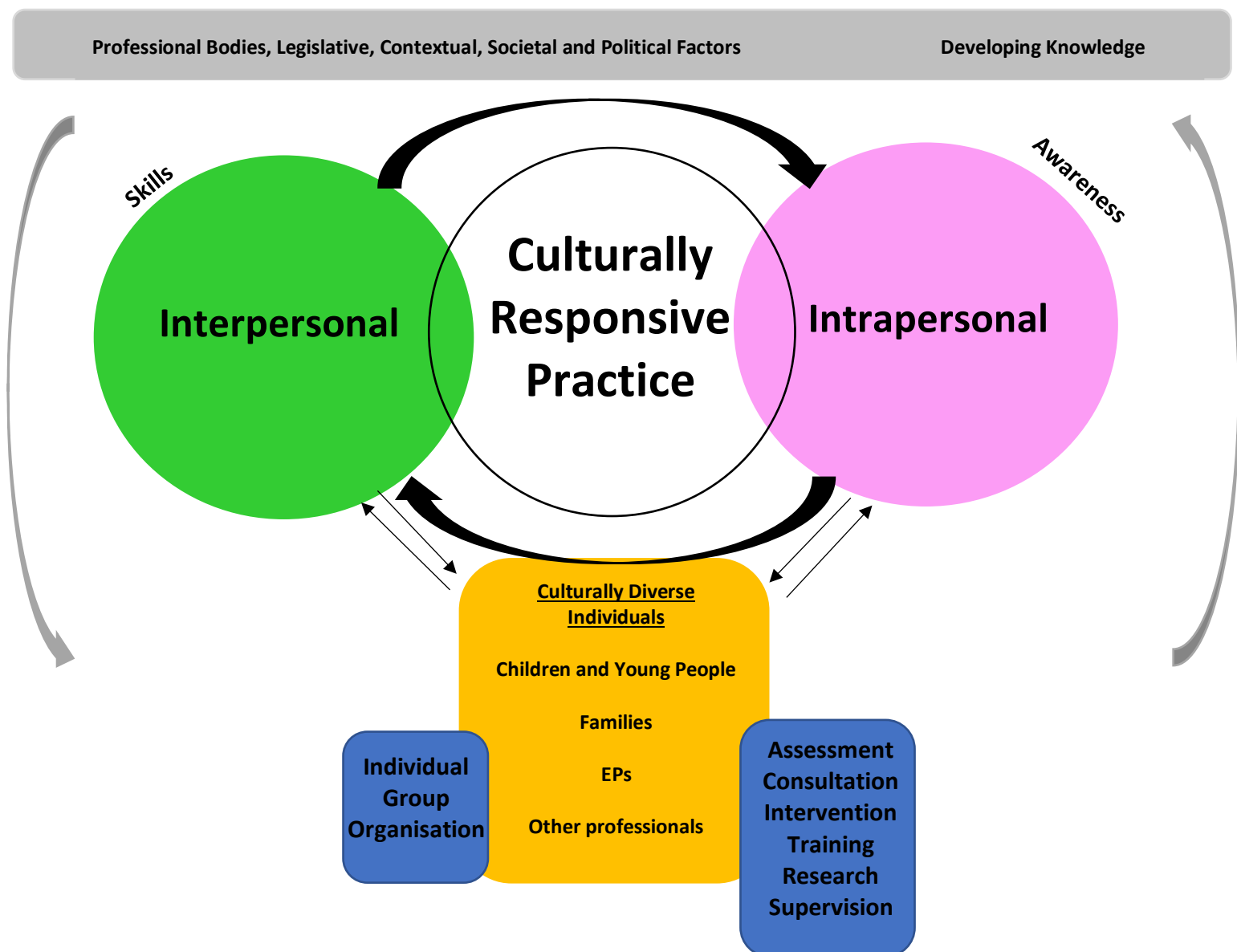
The *intrapersonal* aspect of CRP relates to the self-awareness and self-reflective qualities an EP possesses when responding to cultural differences. The literature has drawn upon several qualities which appear to underpin intrapersonal processes, including recognition, understanding and willingness in learning about the personal biases that may exist about particular cultures, as well as acknowledging the significant cultural issues of others (Hwang, 2006). Similarly to interpersonal processes, these components can relate to a variety of functions of the EP role, and at differing levels. This means an active engagement to develop themselves as culturally responsive practitioners. It is important to acknowledge that both interpersonal and intrapersonal processes interrelate. That is, responding to culturally diverse populations will be influenced by our intrapersonal processes e.g. our biases, and exploring these further will have a subsequent impact on how we respond and relate with culturally diverse individuals.

Whilst the present research has provided a rationale against the utility of the term 'cultural competence', it is acknowledged that many components which underpin this term are applicable and relevant for the current working definition of CRP. In particular, the 'skills' component which underpins cultural competence is particularly relevant to the *interpersonal* component within the current researcher's definition, and the 'attitude' component of cultural competence aligns with the *intrapersonal* component of CRP. The 'knowledge' component which partly defines cultural competence (Sue et al., 1982, 1992) is an important area for EPs to develop, however this component felt less pertinent to the researcher's definition of CRP due to the feelings that it is more static, and it is arguable that individuals will naturally build upon knowledge over time, through different experiences. Other aspects which naturally influence CRP are

professional bodies, legislative, contextual, societal and political components, which join knowledge as components which interact with the definition CRP. Figure 2 provides a visual illustration for the working definition of CRP.

Figure 2

Visual illustration for the working definition of CRP



3. Methodology

3.1 Aims and Overview of the Research

The SLR identified empirical and theoretical articles which explored ways SPs have adapted their practice to consider culture, however they were predominately in the US context. The main question underpinning this research was, 'how can EPs develop CRP?' Therefore, the present research aimed to explore cultural responsiveness within EP practice in the UK. This research aimed to use the Delphi method as a technique to reach a consensus regarding how EPs can develop CRP. One of the main premises of the Delphi method is that a group opinion is more valid than individual opinion, therefore the aim of this research was to identify which features of CRP are perceived by a group of EPs as important to develop within their practice.

EPs who met the inclusion criteria for participation were invited to take part in two surveys. The first survey was produced following an extensive review of the literature pertaining to CRP within the psychological professions. Through this, a deductive thematic analysis (Braun & Clarke, 2006) was used to identify key themes within the literature, which were synthesised to form the first survey. Survey one featured key statements of CRP. Participants were asked to consider each statement and rate them in order of their perceived importance for EP practice. Following completion of all rated responses, EPs were asked whether there were other key aspects of CRP which had not been included in the survey and were invited to share these. Initial responses of survey one were collated, along with any additional comments provided by participants.

Participants who completed survey one were invited to complete a second survey. Survey two presented back findings from survey one, highlighting not only the participant's responses to each statement, but also the group's consensus to each statement. Participants were invited to evaluate their responses in the light of the group opinion. Survey two included the additional items provided by participants from survey one, where participants were invited to rank these new statements regarding their perceived importance. The results of both surveys were synthesised and subsequently identified the group consensus regarding key features of culturally responsive EP practice. The findings offered a self-reflective framework to support EPs in identifying and developing aspects of CRP.

3.2 Research Position

A pertinent dilemma when exploring culture as a construct has been addressed by Cooper and Denner (1998) who questioned how individuals "build scientific generalisations while trying to understand diversity, variation, and change in human beliefs and behaviours" (p. 562). They acknowledged the challenge to address both culturally universal with community specific experiences, arguing that linking cultural concepts to psychological theories is both inherent to practice, but will also "advance global, national, and local goals" (Cooper & Denner, 1998, p. 563). The current study recognised the complex nature of both defining and researching CRP, and as a result felt that philosophies related to both critical realism and pragmatism were best suited to the research questions in this study.

3.2.1 Critical Realist Ontology

Critical Realism was developed by Bhaskar (1978) who defined the nature of reality, or ontological position by three levels: an *empirical* level, an *actual* level, and a *real* level. The *empirical* level is what is experienced and observed by individuals, which is arguably measurable but subject to personal interpretation. The *actual* level is concerned with true occurrences, distinct from personal experience and interpretation. The *real* level emphasises the existence of causal structures or mechanisms, which are underpinned by theory (Bhaskar, 1978). The combinations of these three levels create what is known as ontological depth (Groff, 2004). Fletcher explains “it is the goal of critical realism to explain social events through reference to these causal mechanisms and the effects they can have throughout the three-layered ‘iceberg’ of reality” (2017, p. 183).

The current research aligns with the view that cultural responsiveness is a phenomenon that can be observed and measured, although subject to personal experience (*empirical* level). This was seen through empirical studies in the SLR through culturally responsive intervention and CRC (Jones et al., 2017; McKenney et al., 2017). It is believed that events can occur as a result of engaging in CRP (*actual* level) i.e. through a reduction in classroom disruptions as a response to CRC (McKenney et al., 2017). Causal mechanisms of cultural responsiveness can be defined and explained by theories concerning culture (*real* level). However, it is acknowledged there can be multiple theoretical interpretations to explain causal mechanisms of cultural responsiveness, and the researcher is subject to interpreting data based on personal experiences and understanding. It is therefore argued that the current study is concurrent with a critical realist ontology.

3.2.2 Pragmatist Epistemology

The term pragmatism comes from the Greek word 'pragma', meaning 'deed' or 'action', and became known primarily through the work of Peirce (1931-58). The nature of our knowledge, or epistemological position within a pragmatist approach is one which is arguably based on our experiences (Kaushik & Walsh, 2019). These experiences can be both unique to individuals, but can also be shared with others, suggesting that knowledge can be social knowledge (Morgan, 2014a). It can be argued that knowledge is socially justifiable if those within a specific community deem to offer their consensus of support (Rorty, 1979). This view is shared by James (1909), who argued that knowledge is true if it helps people to deal with their worlds.

It is argued that the current research aligns with a "value-oriented approach to research" (Johnson & Onwuegbuzie, 2004, p. 17). A pragmatist position rejects traditional dualisms i.e. post-positivism and constructivism (Creswell & Clark, 2011) and focuses on what works best for the proposed investigation (Tashakkori & Teddlie, 1998). Pragmatism has been closely aligned to research concerning advocacy of social justice (Morgan, 2014b) and as such, looks to engage in meaningful research which makes a purposeful difference to practice (Goldkuhl, 2012). The current study used the Delphi method which "straddles the divide between qualitative and quantitative methodologies" (Critcher & Gladstone, 1998, p. 433), having been referred to as owning a "hybrid epistemological status" (Mullen, 2003, p. 40). Culture is a complex phenomenon and it is argued that engaging in research which uses a range of methods in the same piece of research (methodological pluralism) such as the Delphi, allows researchers to find the optimum way of answering key research questions (Johnson & Onwuegbuzie, 2004).

A pragmatist approach is one which endorses fallibilism: the notion that truth is a changeable artefact (Rorty, 1982) and as such conclusions are not absolute (Johnson & Onwuegbuzie, 2004). It is argued that culture, and therefore cultural responsiveness, is nuanced and subject to change and develop, therefore a pragmatist approach is well suited as it acknowledges that the current truth, meaning and knowledge is tentative and changes over time.

The overall aim of the present research was to ascertain what key features of CRP are important for EPs to develop in their practice, and, as a result, create a practical and reflective tool that the profession is able to use to facilitate this development. The present research supports the idea that theories related to culture may be true to different degrees, but it is dependent on how well they currently work; as such, researchers need to adapt their ways of thinking to suit certain contexts. The present study has an overall purpose of further developing the EP role, whilst considering the subjectivity and contextual considerations that culture brings. Therefore, it is argued that a pragmatist epistemology complements these aspects of the research.

A further methodological consideration is where a researcher positions themselves within their research, as this can have implications for the way a research project is conducted (Kaushik & Walsh, 2019). Whilst it is argued that there can be a shared understanding amongst individuals as to how culture is defined, the meaning that individuals ascribe to culture will be influenced by individual backgrounds, belief systems and experiences (Morgan, 2007). The current research acknowledges that the researcher's own cultural background will have an impact on the overall conduct

of the study. Culture is recognised as complex, difficult to define and influenced by one's own personal experiences. The researcher recognises their mixed ethnic background and own personal motivations for wanting to develop cultural responsiveness in EP practice. Furthermore, the researcher recognises that their own experiences linked to culture will influence both how it is defined within the study and how interpretations are made. As such, these experiences will influence the choices the researcher makes with regards to what questions they perceive as important to research and how. It is therefore argued that a pragmatist approach, which offers flexibility, both philosophically and methodologically, aligns with the complex and dynamic nature of this topic.

3.2.3 Pragmatic-Critical Realist Position

It has been documented that both pragmatism and critical realism have philosophical components which complement one another and as such, the term 'pragmatic-critical realist' has been referenced (Johnson & Duberley, 2011). The pragmatic-critical realist position has several key components, summarised below:

1. Truth can never be absolute. As such, a pragmatic-critical realist position adopts a reflexive political praxis; a practical focus on how knowledge can serve and guide individuals
2. Humans can manipulate causal structures through their actions, which helps guide and evaluate their helpfulness,

even though our conceptualization and explanation of such regularities are always open to question (due to our lack of a theory-neutral observational language), our ability to undertake practical actions that are successful and our ability to reflect upon and correct actions that

seem unsuccessful implies that we have feedback from an independent 'reality' which constrains and enables practices that would otherwise be inconceivable (Johnson & Duberley, 2011 p. 164)

3. This evaluation helps to develop social knowledge, "we can develop, and indeed identify, in a fallible manner, more adequate social constructions of reality by demonstrating their variable ability to realise our goals, ends or expectations since our practical activities allow transactions between subjects and object" (Johnson & Duberley, 2011, p. 165).

The underlying principles of a pragmatist-critical realist position align with the principles of the current research. The current research adopted a reflexive political praxis and aimed to decipher on a practical level what features of CRP are pertinent for EPs to develop. Furthermore, it is argued that EPs can make adaptations to their environment to be culturally responsive. Through regular evaluation of their practice, EPs learn to develop their cultural responsiveness and gauge which aspects are most effective. As such, this is argued to have an impact on the culturally diverse populations in which they serve.

3.3 Ethical Considerations

Ethical approval was successfully sought from the Tavistock and Portman's Research Ethics Committee (TREC) on 6th May 2020 (please see Appendix D for the TREC application and Appendix E for the approval letter). During participant recruitment, detailed information was provided about the overall aims of the research and the commitment required to participate. Participants were informed of the possible benefits of taking part, as well as potential risks. This was namely the reflective component of

reviewing culturally responsive features of practice: participants were informed that personal experiences related to their own cultural experiences may be provoked through completing the surveys, some of which may be painful to recall, such as personal experiences of racism or discrimination. Participants were encouraged to take any uncomfortable thoughts or feelings to supervision and were signposted to seek support through Black and Ethnic Minority professional groups, such as BEEP and BIPP.

Participants were informed that their confidentiality would be protected except for legal limitations or where disclosure of imminent harm to self and/or others may occur. Participants were informed that anonymity would be upheld but were asked to be mindful that if the sample size was small, this may have implications for anonymity. Participants were asked to confirm they consented to their involvement and were given the right to withdraw at any time from the study.

3.4 Study Design

3.4.1 Delphi Method

The Delphi method is defined as an approach using multiple surveys to help reach a consensus on an important issue (McKenna, 1994). In this instance, the important issue is regarding how EPs can develop CRP. The method has been characterised as “a method for structuring a group communication process so that the process is effective in allowing a group of individuals, as a whole, to deal with a complex problem” (Linstone & Turnoff, 1975, p. 3). The Delphi method originates from Greek mythology, where ‘Delphi’ was the place where the most important oracle resided and was

renowned for providing wisdom on a range of important issues (Keeney et al., 2011). The method is recognised and widely used across several disciplines, such as health and medical research. More recently it has been used to address a range of issues within EP practice, such as quality within dynamic assessment (Green & Birch, 2019), sleep deprivation issues in CYP (Anderson & Tyldesley, 2019) and exploring young people's perspectives of mental health support online (Jago, 2019). There are many different types of Delphi study and as such, it has been referenced in different ways in the literature. For consistency, the term 'Delphi study' will be predominately used to describe the overall research, and 'Delphi method' will be used where specifics around methodology are referenced.

Whilst there is variation within the method, a Delphi study typically includes a questionnaire which is sent out to a selection of respondents, known as an 'expert panel'. Once initial responses are collated, a revised questionnaire is re-circulated to respondents, commonly including a summary of responses, both from the individual and the overall group response. Respondents are then invited to review their response in light of the group opinion. This notion of review is repeated through rounds of surveys until a consensus has been achieved. In summary, a Delphi study typically involves, "a number of rounds, feedback of responses to participants between rounds, opportunity for participants to modify their responses and anonymity of responses" (Mullen, 2003, p. 38).

One benefit of adopting this method is that whilst consensus is achieved as a group, participant anonymity is kept, which arguably removes any potential power imbalances which may have been at play if participants discussed the topic face-to-face, for

example within a focus group. This means that respondents may feel less inclined to compromise their perspectives but are able to experience “reappraisal of a viewpoint without loss of face” (Sumsion, 1998, p. 154). This allows “honest expression of views without the intimidation, inhibition or peer-pressure factors” (Rudy, 1996, p. 19).

3.4.1.1 The Expert Panel.

The Delphi method aims to recruit ‘experts’ in the field that the researcher is interested in. An expert has been defined as: anyone with relevant input on a given topic (Pill, 1971), a group of informed individuals (McKenna, 1994) and “any individual with relevant knowledge and experience of a particular topic” (Cantrill et al., 1996, p. 69). Adler and Ziglio (1996) outlined four key requirements for expertise, which include:

- “knowledge and practical engagement with the issues under investigation”
(p.14)
- capacity and willingness to participate
- sufficient time to participate
- effective communication skills

Initial thoughts around the expert panel led to considerations of seeking EPs with extensive experience within the profession, such as Principal Educational Psychologists, course directors of the EP doctoral training program, or qualified EPs who have served several years in the profession. This initial rationale was that those with significant experience within the profession would more likely (although not

definitively) have had more experience working with culturally diverse populations and thus developed cultural responsiveness in their practice. Through further reflection, it was recognised that whilst the language of 'experts' is subjective, so is the topic of CRP. It is arguable that the degree to which EPs are culturally responsive can be based on a number of factors, which can include but are not limited to: the level of exposure to culturally diverse populations, the length of experience working with culturally diverse groups, EPs' self-perceived levels of cultural responsiveness and whether EPs have had regular or recent CPD or training in this area.

Additionally, it is questionable as to whether individuals from varying cultural backgrounds are suitably represented in EP research. Whilst the demographic of the EP workforce in the UK has not been explicitly documented, it is widely suggested that the population is renowned for having predominantly white and female practitioners. Whilst it is argued that an individual does not need to be from a particular background to be culturally responsive, it is also argued that having a broad representation of participants who come from a variety of cultural backgrounds may provide greater breadth of perspectives contributing to what is a complex and subjective topic. Individuals from different cultural backgrounds will have their own unique experiences and understanding of culture and cultural responsiveness, which would arguably align with the definition of an expert having relevant experience of a particular topic (Cantrill et al., 1996). Therefore, the aim of the current research was to recruit participants from a variety of cultural backgrounds.

To create boundaries around the expert panel (Keeney et al., 2011), the following key criteria was used to identify the expert panel (Thangaratinam & Redman, 2005). To be

eligible to participate in the current research, participants needed to be qualified EPs (at either masters or doctoral level) who were registered with the Health and Care Professions Council. It is recognised that EPs may have gained experience with culturally diverse populations through varying work placements, such as within Local Authorities, but also social enterprises, Child and Adolescent Mental Health Services (CAMHS) etc., to name a few. Therefore, EPs were asked to share what sort of work placement they were currently practicing in at the time of contact. In addition to this, EPs needed to self-rate and perceive themselves to actively engage in CRP, therefore EPs are self-selected experts in this area. The working definition of CRP (informed through the literature) was provided in the information sheet to participants, so there was a shared understanding of what definition was being drawn upon. Finally, EPs needed to fulfil at least one of the following inclusion criteria:

1. EPs have had at least one year's experience working in a culturally diverse area
2. EPs have worked with at least 10 CYP and families from culturally diverse backgrounds
3. EPs have had either training or CPD input on culture and diversity within the past two years

It is acknowledged that “those who are willing to engage in discussion are more likely to be affected directly by the outcome of the process and are more likely to become and stay involved in the Delphi” (Keeney et al., 2011, p. 8). Initially, it was anticipated that the findings of the present study may be most helpful for EPs with less experience of CRP, which may include but are not limited to, TEPs, who will not be taking part in

the survey. However, it is argued that CRP is something that can and will continually develop, therefore the aim of the present study was that the findings of this research can be used as a reflective tool for all practising EPs within the profession. This meant that all EPs who chose to participate would arguably benefit from the outcome of the process. It was also acknowledged that “the commitment of participants is related to their interest and involvement with the question or issue being addressed” (Keeney et al., 2011, p. 8). It is argued that CRP is an inherent part of EP work and would contribute to EPs’ interest and involvement with the topic.

3.4.1.2 Size of the Expert Panel.

Whilst there is variation amongst the literature concerned with the optimum number of experts needed to form an expert panel, several sources have cited numbers between 7 and 12 (Cavalli-Sforza & Ortolano, 1984; Linstone, 1978; Phillips, 2000). Clayton provided guidelines which suggest a panel size of between 15-30 for a homogeneous sample and 5-10 for a heterogeneous sample (1997). It has been acknowledged that accuracy will deteriorate rapidly with smaller sizes (Linstone, 1978), size “should be governed by the purpose of the investigation” (Cantrill et al., 1996, p. 69) and that the representation of the expert panel should be assessed by the quality as opposed to the quantity of panel experts (Powell, 2003).

Literature suggests that it is important that participants who are recruited are knowledgeable in the area of study and are willing to commit to the multiple rounds of questions (Grisham, 2009). Acknowledging these different considerations, as well as the population of practising EPs, time frame for the study, and logistics such as EP

availability, the aim of the present research was to recruit at least 20 participants to form the expert panel.

3.4.1.3 Survey Rounds.

The Delphi method incorporates at least two rounds of surveys, to allow the opportunity for the expert panel to review their responses in light of the group opinion. Mullen acknowledged that the number of optimum rounds has been disputed and studies have previously incorporated between two and five rounds (2003). Sumsion stated that “the classic Delphi technique had four rounds” but “current consensus appears to be that either two or three rounds are preferred” (1998, p. 153). Walker and Selfe suggested that most studies use only two or three rounds as “repeated rounds may lead to fatigue by respondents and increased attrition” (1996, p. 679). The decision a researcher makes regarding the number of rounds to administer is largely pragmatic (Thangaratinam & Redman, 2005). Taking into consideration the capacity of this research, time frames, potential for attrition and potential for having many respondents, the current research adopted two rounds of surveys.

3.5 Development of Survey One

The first survey of a Delphi study typically has a purpose of information gathering to generate ideas. However, there is now support for providing pre-existing information for ranking or response (Keeney et al., 2011). Culture is recognised as a broad and complex topic, therefore it felt justifiable to firstly review the literature available on CRP to inform the first survey. As such, the current study adopted the latter approach,

known as a 'modified Delphi' (Keeney et al., 2011) and structured the first survey based on a completed SLR focused on CRP. This approach lent itself to the two-round Delphi to be less time-consuming for participants, as it is recognised that that Delphi studies which use round one for information gathering tend to complete at least three rounds. It was recognised that providing pre-existing information may limit the scope for the expert panel to offer their own perspectives on what it means to be culturally responsive. Therefore, participants were given the opportunity to provide any additional features of CRP which they felt were pertinent and had not been referenced.

3.5.1 Survey One Literature Review

To create survey one of the Delphi study, literature pertaining to CRP was collated, reviewed and analysed. The SLR chapter acknowledged limited literature in the UK around CRP within the EP profession. Whilst papers tended to explore specific areas of practice, such as cultural responsiveness within consultation, few studies reviewed CRP more broadly within the profession. This provided the researcher with a rationale to search for additional literature (on top of that identified in the SLR) which referenced CRP more broadly within other psychological professions. In addition, whilst the SLR focused on the work of SPs, some of the articles referenced relevant frameworks for SP practice that were developed within other psychological professions i.e. psychotherapy (Hwang, 2006) and counselling (Bernal et al., 1995). This provided another rationale to broaden the literature search to include other psychological professions. The aim of this was to gauge whether aspects of CRP from other psychological professions could be applied to, and have significance for, the EP profession.

In addition to the articles identified from the SLR³, an additional literature search was generated which expanded the search of articles by using search terms ‘psychologist’ and ‘psychologists’. The approach followed a similar format to the SLR; potential articles were gathered and reviewed for relevance, and those which did not meet the inclusion criteria were excluded from review. The most common reason for the exclusion of articles was that they did not align with or focus on the working definition of CRP developed from the SLR. Table 6 outlines the process for sourcing relevant articles for survey one.

Table 6

Literature search process for sourcing additional articles for survey one

Literature search via PsychINFO and PsychArticles	Papers for consideration
"psychologist" OR "psychologists" AND "culturally responsive" OR "cultural responsivity" OR "cultural responsiveness" OR "culturally competent" OR "cultural competence" OR "cultural humility" OR "cultural awareness" OR "culturally aware" OR "cultural sensitivity" OR "culturally sensitive" Limiters	1,195
English Language	1,186
Academic Journals	713
Papers from 2000 onwards	597
Linked to full text	465
Major heading pertaining to culture or psychologist(s) - ‘cultural sensitivity’, ‘multiculturalism’, ‘psychologists’, ‘sociocultural factors’, ‘cross cultural differences’, ‘cross cultural psychology’, ‘school psychologists’, ‘cross cultural treatment’, ‘cross cultural counseling’, ‘acculturation’, ‘culture (anthropological)’	312 (206 when duplicates were removed)

³ As Ratheram’s UK study was discovered in March 2021, findings from this research were not incorporated within survey one.

Due to the large number of potential articles generated, articles were limited based on their date of publishing (the year 2000 onwards), to allow a focus on more recent research in this area. This still yielded large results. Due to the timelines for the current research and subsequent time constraints, articles which were available via their full text, or which included a major heading linked to 'culture' or 'psychologists', were added as additional limiters. Once potential articles were identified, their titles were reviewed to check for any duplications from the SLR (both those which had been identified for review, and those which had already been excluded from the SLR search). Due to time constraints and researcher capacity, additional ancestry searches were not implemented (i.e. reviewing articles embedded within articles already obtained (Cooper, 1989)). Once duplicate articles were removed, the remaining articles were considered for relevance. Article abstracts were read to decipher their relevance to the present study. Table 7 summarises the reasons for excluding articles based on a review of their abstracts. A list of all excluded articles at this stage are appended (Appendix F).

Table 7*Reasons for excluding articles based on a review of abstracts*

Reason for Exclusion	Count
Article did not focus on or align with working definition of CRP	70
Article was a review, summary of an award, overview, correction, comment or reflection	36
Article focused on training programs	20
Article focused on self-perceived cultural competence or cultural competence	16
Article did not directly focus on culture	10
Article focused on culturally responsive research	6
Article did not focus on psychologists	3
Article focused on diversity of workforce/training course	2
Article focused on adult population	2
Total	165

Figure 3 provides a summary of the process for identifying literature to review for survey one, using the PRISMA flow diagram. Table 8 provides a list of the 40 articles which were reviewed for survey one: 21 of these were from the SLR, and 19 were additional articles identified from the second literature search (a summary of the 19 additional articles is appended (Appendix G)).

Figure 3

PRISMA flow diagram summarising the process of identifying relevant articles for survey one

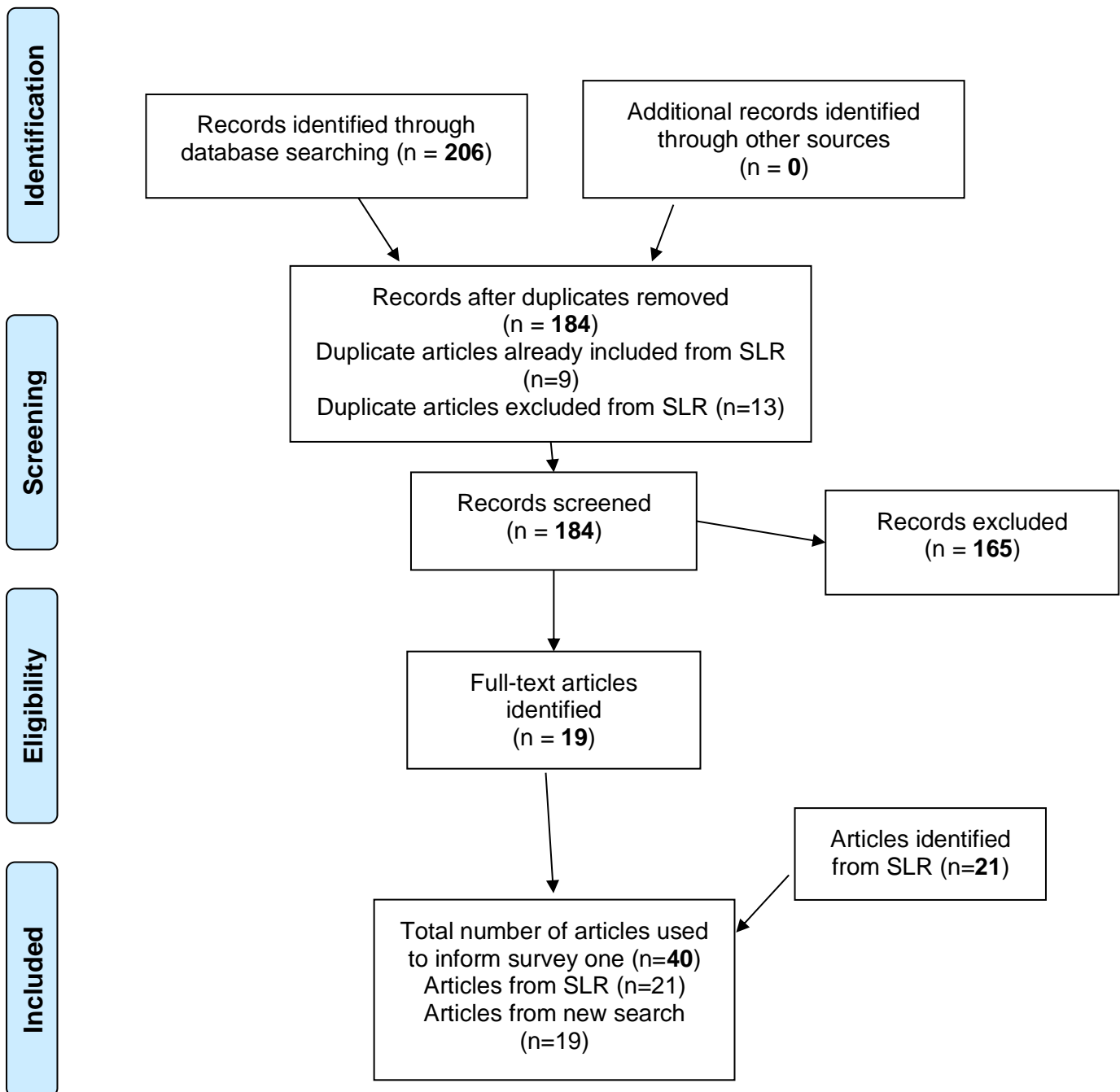


Table 8*Articles used to inform survey one*

Articles from the SLR focusing on SP Practice (n=21)	Articles focusing more broadly on the psychological professions (n=19)
Using Cultural Assets to Enhance Assessment of Latino Students (Aganza et al., 2015)	Serving the underserved: Cultural considerations in behavioural health integration in pediatric primary care (Arora et al., 2017)
Multicultural Sensitivity and Competence in the Clinical Supervision of School Counselors and School Psychologists: A Context for Providing Competent Services in a Multicultural Society (Butler, 2003)	Historical perspectives on the multicultural guidelines and contemporary applications (Arredondo & Perez, 2006)
Multicultural Supervision: What Difference does Difference Make? (Eklund et al., 2014)	Culturally centered psychosocial interventions (Bernal & Sáez-Santiago, 2006)
A Challenge to Consultation Research and Practice: Examining the “Culture” in Culturally Responsive Consultation (Goforth, 2020)	Critical cultural awareness: Contributions to a globalizing psychology (Christopher et al., 2014)
The Culturally Relevant Assessment of Ebonics Speaking Children (Grant et al., 2009)	A framework for enhancing multicultural counselling competence (Collins & Arthur, 2007)
Culturally Responsive Interviewing Practices (Hass & Abdou, 2018)	Toward cultural competence in child intake assessments (Eklund & Johnson, 2007)
Addressing Cultural Factors in Development of System Interventions (Hatzichristou et al., 2006)	Enhancing the identification of autism spectrum disorders via a model of culturally sensitive childhood assessment (El-Ghorouhy & Krackow, 2012)
Culturally Responsive Adaptations in Evidence-Based Treatment: The Impact on Client Satisfaction (Jones et al., 2017)	Ethics and multiculturalism: Advancing cultural and clinical responsiveness (Gallardo et al., 2009)
Supervision in School Settings: Maintaining a Multicultural and Ethical Practice (Kelly et al., 2014)	The psychotherapy adaptation and modification framework: Application to Asian Americans (Hwang, 2006)
Conceptualizing Cross-Cultural School Psychology Competencies (Lopez & Rogers, 2001)	Ten considerations in addressing cultural differences in psychotherapy (LaRoche & Maxie, 2003)
Addressing Cultural Responsiveness in Consultation: An Empirical Demonstration (McKenney et al., 2017)	Ally, activist, advocate: Addressing role complexities for the multiculturally competent psychologist (Melton, 2018)

Culturally Responsive Consultation Among Practising School Psychologists (Parker et al., 2020)	Non-indigenous psychologists working with Aboriginal and Torres Strait Islander people: Towards clinical and cultural competence (Mullins & Khawaja, 2018)
Models and Frameworks for Culturally Responsive Adaptations of Interventions (Peterson et al., 2017)	Working with multiracial clients in therapy: Bridging theory, research and practice (Pedrotti et al., 2008)
Understanding ADHD from a Biopsychosocial-Cultural Framework: A Case Study (Pham, 2015)	Cultural considerations for psychologists in primary care (Richmond & Jackson, 2018)
Case Vignettes of School Psychologists' Consultations Involving Hispanic Youth (Ramirez & Smith, 2007)	Reflective Local Practice: A pragmatic framework for improving culturally competent practice in psychology (Sandeen et al., 2018)
Providing Psychological Services to Racially, Ethnically, Culturally and Linguistically Diverse Individuals in the Schools: Recommendations for Practice (Rogers et al., 1999)	The role of culture and cultural techniques in psychotherapy: A critique and reformulation (Sue & Zane, 2009)
Examining the Cultural Context of Consultation (Rogers, 2000)	Culture and psychotherapy: Asian perspectives (Tseng, 2004)
Identifying Critical Cross-Cultural School Psychology Competencies (Rogers & Lopez, 2002)	Psychoanalytic psychologists' conceptualisation of cultural competence in psychotherapy (Tummala-Narra et al., 2018)
An Introduction to Cultural Issues Relevant to Assessment with Native American Youth (Saxton, 2001)	Navigating cross-cultural issues in forensic assessment: Recommendations or practice (Weiss & Rosenfield, 2012)
School Counselors and School Psychologists: Collaborative Partners in Promoting Culturally Competent Schools (Simcox et al., 2006)	
Adapting Cognitive-Behavioural Therapy for Mexicans with Anxiety Disorders: Recommendations for School Psychologists (Wood et al., 2008)	

3.5.2 Thematic Analysis of the Literature and Construction of Survey One

Shortlisted articles were read and thematically analysed using Braun and Clark's thematic analysis (2006, 2019). Guidance was also sought from other thematic analysis literature (Javadi & Zarea, 2016; Joffe, 2012; Maguire & Delahunt, 2017; Marks & Yardley, 2012). Articles from the SLR helped form a working definition of CRP for the current research. As such, the literature identified for survey one was coded with a specific question in mind: how are psychologists developing CRP? This meant a deductive thematic analysis approach was used as the researcher acknowledged they had their own theoretical interpretation of the data, which had already informed the SLR. A deductive thematic analysis also allowed for specific aspects of the data to be analysed, rather than using all data from the literature (Braun & Clarke, 2006), as only some aspects were perceived by the researcher as relevant to the definition of CRP.

Themes were identified within the explicit or surface meanings of the data, making interpretation largely at a semantic level, as the researcher was not looking for anything beyond what was written in the literature. Braun and Clarke stated that ideally thematic analysis involves a progression from descriptions in the literature (where data has been organised to show patterns in semantic content) to interpretation, where there is an attempt to theorize the significance of the patterns and consider their broader meanings. As such, themes from the literature focused on descriptions and organisations of the semantic content, however the theorising and interpretation would be drawn from the survey analysis. It was acknowledged that Braun and Clarke's six stages needed to be flexibly applied to fit the research question and data (Patton, 1990).

3.5.2.1 Stage One: Familiarising Yourself with Your Data.

Braun and Clark described stage one as “transcribing data (if necessary, reading and re-reading the data, noting down initial ideas)” (2006, p. 87). This phase involved reading through the literature and highlighting extracts of interest or relevance and noting down initial codes to organise the literature and data. Direct extracts from the literature were largely taken to ensure the context of the extract was not lost through researcher interpretation. Initial ideas which began to develop were around different functions of EP work (assessment, consultation, intervention, training, research, and supervision). It was soon apparent that these ideas needed expansion to consider other areas of the data. Appendix H provides an example of extracts taken from one article as part of stage one of the analysis.

3.5.2.2 Stage Two: Generating Initial Codes.

Stage two is described as “coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code” (Braun & Clarke, 2006, p. 87). As the chosen form of thematic analysis was theory-driven, the data was approached with a specific definition of CRP in mind. Using this definition, codes were initially applied to relevant aspects of the data, as opposed to the entire data set. Through a review of relevant extracts, initial codes were developed and linked to data extracts. Once the entire data set had been reviewed, other codes were introduced and assigned to aspects of data. It was recognised that aspects of data

could align with multiple codes. Table 9 provides an example of a code generated during this stage, data extracts which aligned to the code, and their source.

Table 9

Coding example for stage two of thematic analysis: ‘Safe environment’, data extracts aligned to this code and their source

Code	Data extracts aligning to code	Source
‘Safe environment’	“Create a supervisory environment where the supervisee feels safe and respected and where open communication about cultural issues can occur”	Eklund et al., 2014, p. 199
	“Create a safe and inclusive setting”	Eklund et al., 2014, p. 200
	“Safety and stability was also promoted through the development of a safe, trusting attuned relationship between practitioner and client. Helping clients to feel safe in relationships was identified as critical”	Mullins & Khawaja, 2018, p. 399
	“Creating a safe supervisory environment”	Kelly et al., 2019, p. 120

3.5.2.3 Stage Three: Searching for Themes.

Stage three involved “collating codes into potential themes, gathering all data relevant to each potential theme” (Braun & Clarke, 2006, p. 87). Consideration was sought as to how codes may combine to form a theme. At this stage, the working definition of CRP influenced identification of sub-themes from overall themes, such as ‘intrapersonal development’ and ‘interpersonal development’.

Some codes did not appear to fit into a sub-theme so tentatively became a sub-theme themselves. For example, 'considering culturally responsive research' became a sub-theme during this stage. Figure 4 outlines codes, themes and sub-themes generated in stage three of analysis, as well as where some codes linked to additional sub-themes.

Figure 4

Generation of codes, sub-themes and themes at stage three of thematic analysis

Theme	Sub-Theme	Codes under this Theme	Links to other codes	
Interpersonal Development	Skills Application	Collaborative Working		
		Avoiding assumptions	Links to Self-Reflection	
		Relationship building		
		Cross-cultural communication skills		
		Anti-oppressive practice	Links to Wider Context	
		Safe environment		
		Validate/respect previous difficult experiences		
		Genuine respect/interest in others' cultural background		
		Ensuring success of minority clients		
		Openness and flexibility		
		Sensitivity and empathy of context		
		Address language/cultural barriers		
		Consider bias/oppression /privilege	Links to Wider Context	
		Action demonstration support needed		
		Educate others		
		Client empowerment		
		Include culturally related strengths		
	Assessment and Intervention		Appropriateness of assessments	
			Cultural explanations in formulations	

		Integrating culture into interventions/goals/outcomes	
		Incorporate culturally appropriate info into reports	
		Use cultural variables as part of hypothesis testing	
		Evaluate effectiveness/appropriateness of interventions	
	Tools	Cultural tools/models/Questions	
		Use of a framework	
		Use of cultural theories	
		Critical of theories	
	Considering Cultural Differences	Differences in consultation triad	
		Differences in supervisory relationship	
		Address aspects of identity	
		Consider individual differences	
		Understand attitudes towards cultural identity	
		Conceptualise beliefs/problem from family perspective	
		Consider sociocultural variables	
		Alternative models of helping	
		Reconceptualise helping	Link to Skills Application
	Pursuit of Personal Development	Consider culture in supervision	
		Gain feedback/evaluate practice	
		Engage in the cultural community	
		Consult cultural experts	

Theme	Sub-Theme	Codes under this Theme	Links to other codes
Intrapersonal Development	Self-Reflection	Push through personal discomfort	
		Continuous learning process	
		Exploration of biases	
		Awareness of one's own culture	

Considering the Wider Context		Interpret legal decisions that are relevant	
		Cultural considerations in ethical decision making	Links to Assessment and Intervention
		Intersectionality	Links to Tools
		Within an ecological and sociocultural context	
		System level support	
	Considering Culturally Responsive Research	Links to Skills Application	

3.5.2.4 Stage Four: Reviewing Themes.

During stage four, Braun and Clarke advise “checking if the themes work in relation to the coded extracts (Level One) and the entire data set (Level Two)”, as well as “generating a thematic ‘map’ of the analysis” (2006, p. 87). Level one analysis involved reviewing all codes for each theme to consider if they could form a coherent pattern. Where codes did not form a coherent pattern, these were re-worked (created into a new theme or moved elsewhere). For example, during this stage, the code ‘continuous learning process’ was moved and became a theme as opposed to a sub-theme.

Level two analysis involved reviewing the entire data set (the extracted data from all papers), to evaluate the validity of themes in relation to the data and consider whether the thematic map accurately reflected the meaning of the entire data set (Braun & Clarke, 2006). This involved reviewing each data extract within each code to check it fitted, or whether a new code was needed. Through this process, new codes were created to better represent some of the data extracts. Figure 5 provides a list of the additional codes created during this stage.

Figure 5

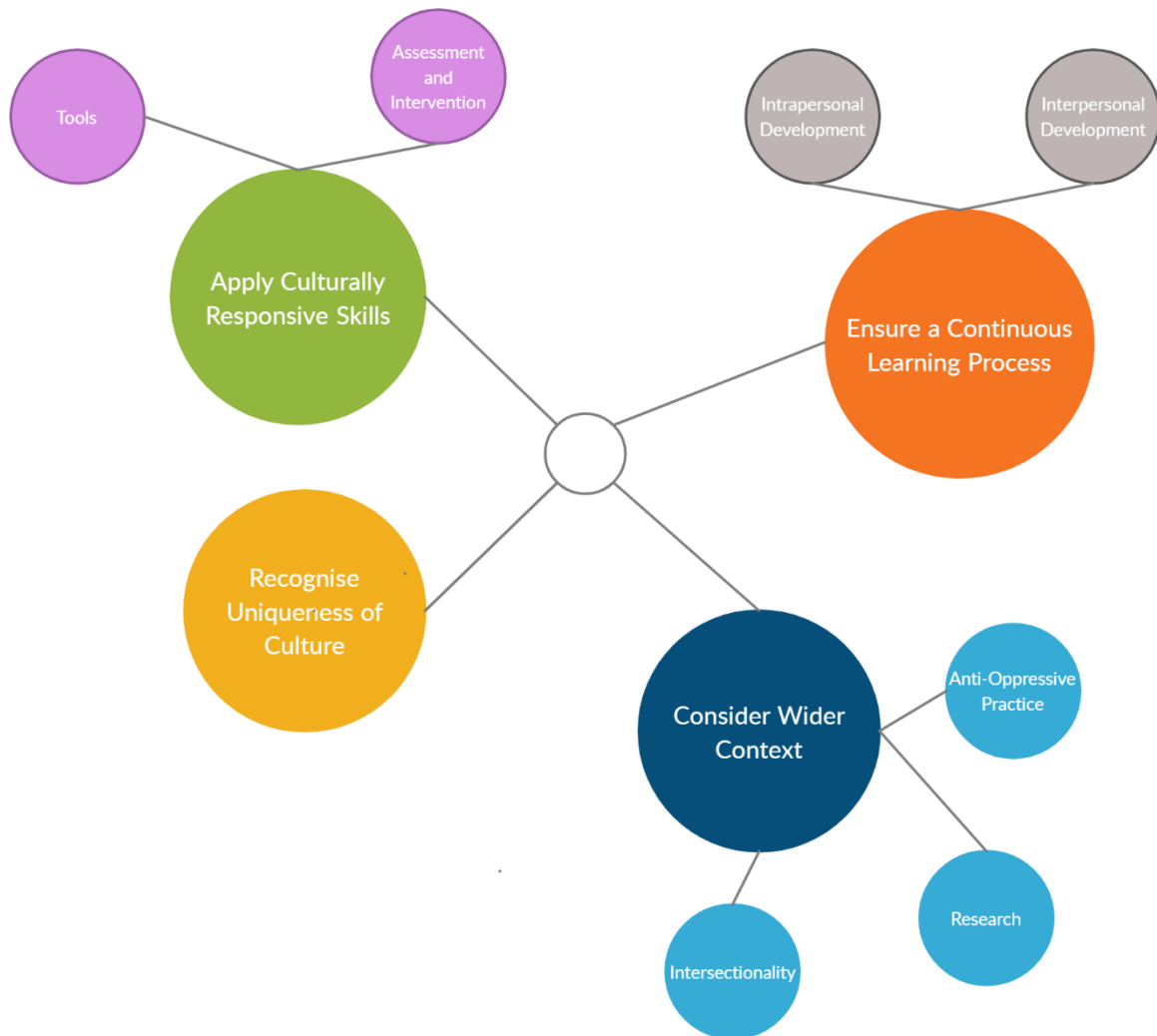
Additional codes created during stage four of thematic analysis, linked to their themes and sub-themes

Theme	Sub-Theme	Additional Codes Created
Apply Culturally Responsive Skills		Reframing negative cultural perceptions
		Bridging differing cultural perspectives
		Consider and address barriers to engagement
	Assessment and Intervention	Plan for and recognise strengths and limitations when using interpreters
		Distinguish between culture and pathology/disability
		Consider strengths and limitations of interventions across cultures
		Consider cultural values i.e. family involvement in process and ensure their inclusion
Ensure a Continuous Learning Process		Seek ongoing training opportunities
		Attend to multicultural climate of school community
Consider the Wider Context		Make appropriate Policy Adjustments

This review also meant the code 'system level support' was merged into the theme 'consider wider context'. Figure 6 provides a visual illustration of the themes and sub-themes forming the thematic map at stage 4.

Figure 6

Thematic map at stage four of thematic analysis, summarising themes, and sub-themes



3.5.2.5 Stage Five: Defining and Naming Themes.

Stage five involved “ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells, generating clear definitions and names for each theme” (Braun & Clarke, 2006, p. 87). Through further analysis of the data, new codes were generated. For example, ‘refer families to appropriate support’ became a new code,

and both codes and themes were refined: the code 'cross-cultural communication skills' felt too broad and too similar to the theme of 'applying culturally responsive skills'; as such this was changed to 'culturally sensitive communication skills'.

Further review ensured that codes which overlapped with others were removed. For example, the code 'consider strengths and limitations of interventions across cultures' felt similar to the code 'evaluate effectiveness/appropriateness of interventions'. Further review also allowed for further separation of codes which felt too broad. For example, the code 'integrate culture into goals, outcomes and interventions' was separated to include the code 'adapt interventions to be culturally relevant'. Through this process, a selection of extracts which fell under 'miscellaneous' were either discarded, re-reviewed and sorted into an existing code or created a new code. For example, the code 'ensure success of minority groups' was discarded and combined into 'anti-oppressive practice/social advocacy'.

3.5.2.6 Re-review of Search Process.

As stage five involves refinement of the overall story the analysis tells, the researcher made the decision to revisit the initial literature search strategy to check all relevant papers were included in the analysis to conclude that the data had been saturated. The SLR and additional review for survey one were completed in tandem, meaning that upon review of this process, three papers were agreed to meet criteria and therefore formed part of the SLR; as such, these papers were incorporated into the thematic analysis for survey one. These papers were analysed, and relevant data was extracted and assigned to codes and themes. Through this process, codes and

themes were further defined. Extracts from the additional three papers were assigned to existing codes. This process was reassuring as the data aligned to existing themes.

The three additional papers included in the analysis process at this stage were:

1. Grant, S. D., Oka, E. R., & Baker, J. A. (2009). The Culturally Relevant Assessment of Ebonics-Speaking Children. *Journal of Applied School Psychology, 25*(2), 113-127.
2. Hass, M. R., & Abdou, A. S. (2018). Culturally Responsive Interviewing Practices. *Contemporary School Psychology*.
3. Wood, J. J., Chiu, A. W., Hwang, W-C., Jacobs, J., & Ifekwunigwe, M. (2008). Adapting Cognitive-Behavioural Therapy for Mexican American Students with Anxiety Disorders: Recommendations for School Psychologists. *School Psychology Quarterly, 23*(4), 515-532.

3.5.2.7 Stage 6: Producing the Report.

Stage 6 offered a “final opportunity for analysis...relating back the analysis to the research questions and literature” (Braun & Clarke, 2006, p. 87). ‘Producing the report’ was replaced with gaining initial feedback and presenting a final thematic map of the data.

3.5.3 Initial Feedback

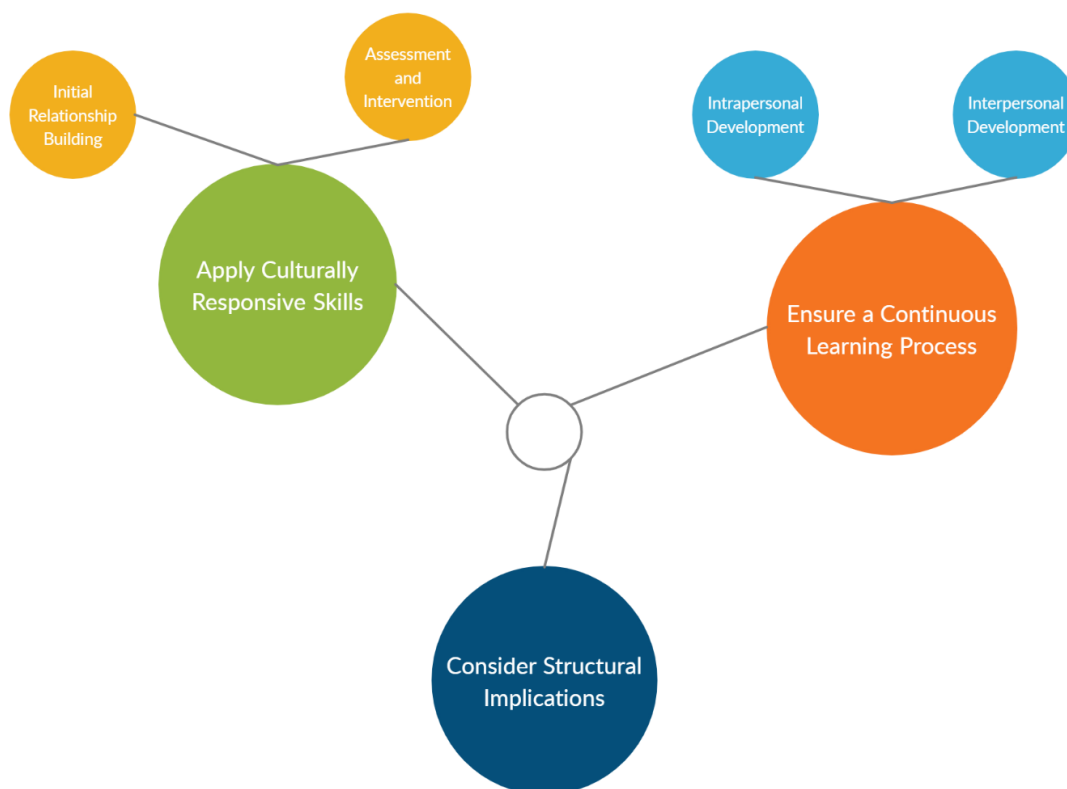
Feedback was sought for the codes and themes which formed the thematic map from the researcher’s supervisor, two colleagues (TEPs) and two individuals unrelated to the EP profession. The focus of feedback was related to the clarity of codes and

themes, and whether codes appeared to align with the themes and sub-themes illustrating the data.

General feedback from respondents supported further reflections around the clarity and distinctiveness of themes; as such the theme 'consider wider context' was reworded to become 'consider structural implications'. Feedback from TEPs considered the suitability of two codes to their assigned themes; 'offer support at a systemic level' and 'client empowerment'. After reflections with the TEPs, a justification was provided to move these codes under alternative sub-themes. The final thematic map, illustrating overall themes and sub-themes, is represented in Figure 7.

Figure 7

Final thematic map of literature, illustrating overall themes and sub-themes



3.5.4 Triangulation of Data

To triangulate the analysed data, the researcher invited two TEPs to review 14 extracts drawn from the literature and asked them to assign these extracts to code(s) they felt fit. The two TEPs were in year three of training on an EP course, and were recruited via opportunistic sampling. The purpose of this exercise was to review and provide clarity to the researcher's coding process. For this reason, there was no set criteria for the TEPs reviewing the codes to self-select themselves as experts in this area. The researcher firstly shared the chosen extracts with TEP 1, where there was a 71% match of extracts (i.e. for 10 out of 14 chosen extracts, the researcher and TEP matched the extracts to at least one same code). Following a review of this process with TEP 1, the researcher added some of the extracts to additional codes. Next, the 14 extracts were then shared with TEP 2, where there was 64% match of extracts. For 5 statements, the researcher matched with one TEP but not the other. In these cases, discrepancies between the researcher and TEP response were reviewed. For 2 statements, the researcher did not match with both TEP responses. These statements were re-reviewed and added to further codes according to feedback.

On a few occasions, codes were reviewed following TEP feedback but not amended. It is acknowledged that defining CRP is both complex and subjective based on experience, and as such interpretation of literature has a personal component. Therefore, it is argued that it would be surprising if statements matched 100% across individual interpretation. That said, an average of 67.5% match on statements was reached across both TEPs, suggesting a reasonable level of commonality amongst

ideas. Appendix I provides a summary of the codes selected for review, TEP responses and actions based on discussion.

3.6 Creation of Survey One

Following initial feedback, survey one was built using Qualtrics, a web-based tool which can be used for conducting online surveys. Below outlines the format of survey one (the full round one survey is appended in Appendix J).

3.6.1 Information and Consent

Participants were invited to read the participant information sheet, detailing information about the overall aims of the research, inclusion criteria and expectations for participation, risk and benefits for participating and information regarding confidentiality and anonymity. Participants were asked to confirm they were happy with the information provided and that by completing the survey were consenting to their involvement.

3.6.2 Demographic Information

To monitor the representation of respondents to the survey, participants were asked to answer questions around their gender, ethnicity, where they practised as an EP and their experience pertaining to CRP.

3.6.3 Statements Linked to Developing CRP

Participants were invited to review 96 statements related to developing CRP and were asked to provide a rating according to their perceived importance within EP practice. If participants did not understand any statement, they were invited to choose the response '*don't know*'. Statements were formed once the thematic analysis of the literature had been completed. The three main themes from the analysis 'applying culturally responsive skills', 'ensuring a continuous learning process', and 'considering structural implications to culture' were used as the main headings for the survey. Within each heading, subheadings were used based on the sub-themes from the analysis i.e. 'initial relationship building' and 'assessment and intervention' were sub-headings within 'applying culturally responsive skills', and 'intrapersonal development' and 'interpersonal development' were within 'ensuring a continuous learning process'.

For the majority of statements formed, they reflected the code which was created as part of the analysis process i.e. they were an amalgam of various extracts from the literature which conceptualised a key feature of CRP. For example, statement 1: 'create a safe and inclusive environment' was formed from a code 'safe environment' where there were several extracts from the literature which aligned to this code. For some statements, extracts were directly drawn from the literature to help form a statement. This was so meaning was not lost or the fact they came from a smaller number of sources. Table 10 provides a list of the 96 statements in survey one. For further insight into the origins of each statement, Appendix K provides a list of all 96 statements from survey one, the codes they were formed from, along with their supporting references from the literature.

Table 10

96 statements related to CRP included in survey one

Applying Culturally Responsive Skills: <i>Initial Relationship Building</i>	
1	Create a safe and inclusive environment when working with culturally diverse populations
2	Use culturally sensitive verbal and non-verbal communication skills
2.1	When communicating with linguistically diverse individuals, “listen through accents” and “allow more processing time for them to respond to questions” (Lopez & Rogers, 2001, p. 298)
2.2	Where appropriate, use a subtle approach to questioning and “avoid direct or intrusive questioning” (Mullins & Khawaja, 2018 pg. 398)
2.3	“Use the language used by the individual to describe their difficulties” (Mullins & Khawaja, 2018 p. 399)
2.4	Take into account potential differences in non-verbal communication, such as eye contact, body language, facial expression etc
2.5	Recognise how use of particular skills are beneficial for certain individuals, such as how normalisation (identifying that some experiences are encountered by many other individuals) may reassure some individuals (Sue & Zane, 2009)
3	Be sensitive and empathetic towards the context that cultural diversity brings to individuals, including empathy for previous difficult cultural experiences, such as oppression
4	Communicate a genuine respect and interest in the cultural background of others, recognising the strength in diversity
5	Stay constantly aware of the notion of intersectionality: that there may be multiple components which influence an individual’s identity and that culture may interact with these
6	Be open and flexible in their approach to working with culturally diverse populations to reflect the constant shifts in cultural and social contexts
7	Address any language barriers and be clear with communication to ensure culturally diverse populations can engage in discussions
8	Take time to understand how an individual’s culture influences their overall identity, and their attitude towards it
9	Empower culturally diverse populations by viewing them as experts of their own cultural experiences (Wood et al., 2008)
Applying Culturally Responsive Skills: <i>Assessment and Intervention</i>	
10	Work collaboratively with children and young people, their families and professionals to ensure a holistic approach to working with culturally diverse populations
11.	Use cultural tools to support their approach to working with culturally diverse populations
11.1	Use cultural interview schedules, such as the Cultural Formulation Interview (from DSM-V) or the Jones Intentional Multicultural Interview Schedule (JIMIS) (Jones, 2009)
11.2	Use tools to identify cultural strengths, such as The Cultural Assets Identifier (CAI) (Aganza et al., 2015)

-
- 11.3 Use tools to explore cultural backgrounds and beliefs such as cultural genograms
 - 11.4 Use objects and symbols relevant to the individual's culture
 - 12 Use cultural models and frameworks to support their approach to working with culturally diverse populations
 - 12.1 Use a cultural consultation model or framework, such as The Multicultural School Consultation (MSC) Framework (Ingraham, 2000) or The Culture Specific Consultation Model (CSCM) (Nastasi et al., 2004)
 - 12.2 Use an ecosystemic framework
 - 12.3 Use a bio-psycho-socio-cultural framework
 - 12.4 Use a cultural model or framework to consider intersectionality, such as the ADDRESSING framework (Age and generational influences, Developmental Disability, Disability acquired later in life, Religion and spiritual orientation, Ethnicity/racial identity, Socioeconomic status, Sexual orientation, Indigenous heritage, National origin, Gender) (Hays, 1996) or Dimensions of Personal Identity Model (Arredondo, 2017)
 - 12.5 Use a framework to reflect on cultural difference, such as the Reflective Local Practice (RLP) Framework (Sandeem et al., 2018)
 - 12.6 Use a framework to adapt and modify interventions to be culturally relevant, such as Hwang's adaptation and modification framework (2006) or the Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)
 - 12.7 Use models for evaluating cultural difference e.g. The Ethnic Validity Model
 - 12.8 Use an ecological model e.g. The Ecological Validity Model (Bernal et al., 1995)
 - 12.9 Use of models to support understanding of how cultural difference influences identity e.g. The Minority Identity Development Model (Atkinson et al., 1979) or The Racial Cultural Identity Development Model (R/CID) (Sue & Sue, 1990)
 - 13 Use cultural theories to inform thinking when considering and working with culturally diverse populations e.g. critical race theory
 - 14 Take a critical approach to theoretical paradigms used in practice, considering their appropriateness for use with culturally diverse populations and adapt these to be culturally relevant
 - 15 Consider socio-cultural variables when working with culturally diverse populations, inquiring about factors such as: acculturation, immigration status, intergenerational trauma, religion, family context and practices etc.
 - 16 Use culturally relevant assessments when working with culturally diverse populations, considering their validity
 - 16.1 Consider whether standardised assessments are appropriate to use with culturally diverse populations
 - 16.2 Use assessment tools which are sensitive to culturally diverse populations, such as: dynamic assessment, ecological assessment, contextual assessment, curriculum-based assessment etc
 - 16.3 Where appropriate, assess language proficiency in an individual's first language
 - 16.4 Be creative and use a variety of different assessment tools to gather culturally sensitive information
 - 17 Find ways to assess culturally related strengths
 - 18 Recognise and value alternative models of helping which may be applicable to culturally diverse populations, such as healing traditions
-

-
- 19 Use cultural variables as part of their hypothesis testing
 - 20 “Distinguish between culture and pathology” (Bernal & Saiz-Santiago, 2006, p.122)
 - 21 Conceptualise and validate the problem or beliefs of the individual’s culture
 - 22 Recognise cultural differences within assessment and intervention
 - 22.1 Recognise cultural differences in the expression of distress e.g. somatization vs. worry, to inform their assessment process (Hwang, 2006; Peterson et al., 2017)
 - 22.2 Recognise there may be differences amongst family structures within different cultural groups, including communication patterns, gender roles etc, which may inform the assessment and intervention process (Ecklund & Johnson, 2007)
 - 22.3 Consider differences in cultural norms to justify or help to explain behaviour (Ramirez & Smith, 2007) e.g. how learning styles in some cultures may be in direct contrast to White Western styles
 - 23 Plan for and recognise the strengths and limitations of using interpreters
 - 24 Factor in cultural considerations with ethical decision making i.e. “identify relevant cultural factors” and whether there are “any conflicts between ethical, legal and cultural factors”, evaluating the rights and responsibilities of all parties involved (Kelly et al., 2019, p. 122)
 - 25 Conceptualise culture in their case formulations
 - 26 Bridge differing cultural perspectives from various professionals
 - 27 Consider important values of certain cultures, such as family members being involved in the process, and ensure their inclusion
 - 28 Integrate culture into interventions
 - 28.1 Attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc (Collins & Arthur, 2007; Rogers et al., 1999)
 - 28.2 Ensure that culturally relevant strengths are included in any intervention
 - 28.3 Ensure language used in any intervention is culturally appropriate
 - 28.4 Frame goals or outcomes within the individual’s culture
 - 28.5 Use therapeutic interventions which are culturally appropriate, such as narrative therapies, psychoeducation, motivational interviewing etc (Mullins & Khawaja, 2018)
 - 29 Adapt interventions to be culturally relevant, such as making adaptations to a Cognitive Behavioural Therapy approach i.e. make the language and concepts more relatable
 - 30 Consider any barriers to interventions for culturally diverse populations, such as why some cultural groups may not wish to seek help with problems (due to shame or stigma) and address these in a sensitive way
 - 31 Evaluate the effectiveness and appropriateness of their suggested interventions, constantly reviewing how congruent it is with the individual’s culture
 - 32 Incorporate culturally appropriate information into their reports, such as cultural characteristics (language, level of acculturation etc), use of translators etc
 - 33 Refer individuals or families to other culturally responsive support, where appropriate

Engage in a Continuous Learning Process: *Intrapersonal Development*

- 34 Increase awareness and understanding by exploring one's own cultural identity
- 35 Reflect on and explore one's own personal biases and assumptions, accepting that these may have an impact on how they communicate with culturally diverse populations
- 35.1 Reflect on one's own hot spots (those "who have experienced powerlessness in aspects of their lives and understandably have strong emotions associated with that dimension") blind spots (being "unaware of relevant cultural information due to unexamined assumptions of one's own background") and soft spots (holding "unexamined assumptions which lead to deviations from usual practice") (Sandeen et al., 2018, p.145)
- 35.2 Reflect on aspects such as White Privilege
- 35.3 Use tools such as an Implicit Association Bias test to reflect on one's own biases (Sandeen et al., 2018)
- 36 Recognise that topics around cultural differences can cause discomfort (e.g. around race, social class, religion, spirituality), and push through these so they can understand the complexity of individual's cultural experiences
- 37 Avoid making assumptions about an individual's cultural background and experiences, ensuring that they do not overgeneralise or undergeneralise anyone's cultural background
- 38 Seek ongoing training opportunities to develop their levels of cultural responsiveness (i.e. training courses, experiential activities)

Engage in a Continuous Learning Process: *Interpersonal Development*

- 39 Explore cultural differences and similarities between oneself and others when engaging in consultation i.e. between clients and/or consultees
 - 40 Consider and pursue discussions around culture in supervision
 - 40.1 Use cultural models or frameworks within supervision e.g. the White Racial Identity Developmental Model (Helms, 1990)
 - 41 Explore cultural differences and similarities in their supervisory relationship (as supervisor or supervisee (Eklund et al., 2014)
 - 42 Consult with cultural experts, such as cultural brokers as appropriate
 - 43 Make effort to engage in the cultural community where they live, for example attending local cultural community events
 - 44 Educate others by helping them become aware of cultural differences and encourage others to reflect on their own biases and values related to cultural difference
 - 45 Model and impart culturally responsive practice onto others i.e. initiating conversations about culture and demonstrate the type of support that is required for culturally diverse individuals
 - 46 Use cultural reframing to recognise when negative cultural perceptions are being used
 - 47 Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference
 - 48 Recognise and acknowledge when others have biased views, are showing prejudiced beliefs or ignoring their privilege, and challenge individuals, whether they are supervisees, supervisors, staff or other professionals
 - 49 Recognise and address power inequities between oneself and others
-

50	Make conscious efforts to gain feedback from others (culturally diverse clients, supervisors, other professionals etc) to evaluate their levels of cultural responsiveness
51	Promote and commit to engaging in culturally responsive research with those from culturally diverse backgrounds
Consider Structural Implications Related to Culture	
52	Ensure work is based within an ecological and sociocultural context
53	Be aware of and interpret legal decisions that are relevant to culturally diverse individuals they work with
54	Attend to the multicultural climate of the community they are working in, such as a school or setting
55	Support and instigate appropriate policy adjustments to support institutions working with culturally diverse individuals
56	Provide culturally responsive support at a systems level to ensure all culturally diverse individuals are supported i.e. school staff development
57	Engage in anti-oppressive practice and social advocacy of cultural groups, to reduce biased beliefs and discriminatory practices
57.1	Conduct cultural audits in their place of work to assess potential barriers to access for culturally diverse populations (Collins & Arthur, 2007)
57.2	Support community-led responses to cultural issues
57.3	Consider how to be an ally, activist and advocate for culturally diverse groups and implement appropriate actions (Melton, 2018)
57.4	Facilitate the development of appropriate resources for culturally diverse children, young people and their families
57.5	Ensure the success of minority supervisees (Kelly et al., 2019)

3.6.4 Likert Scaling

Delphi studies typically use a scale where individuals can provide their contributions through a rating system, which are then reviewed by the expert panel. According to McKenna, “use of frequency distributions to identify patterns of agreement” (1994, p. 1222) is a key characteristic of a Delphi study and as such a key advantage of this method is that all data is considered, including extreme outliers and so opposing views are not averaged. The present study asked participants to rate statements around CRP according to their perceived importance. A 6-point Likert scaling was used for this purpose (Likert, 1932), ranging from 1: *very unimportant*, 2: *unimportant*, 3:

somewhat unimportant, 4: somewhat important, 5: important and 6: very important.

Studies have found that point scales between four and seven tend to return the strongest reliability and validity (Cummins & Gullone, 2000; Dawes, 2008; Dillman, 2007; Lissitz & Green, 1975; Oaster, 1989; Schuman & Presser, 1996).

There has been recorded debate as to whether to include a mid-point rating on a Likert scale, i.e. have an odd number of ratings (Nadler et al., 2015). The literature recognises both the strengths and limitations of this. For example, limitations of having a mid-point rating may include: forcing a false representation of a response; considering that a mid-point rating may be chosen for a number of reasons i.e. 'don't know' 'neutral' etc and if this is not explicitly stated, this can cause difficulties with interpretation and; social desirability bias: it may be easier to choose a neutral position rather than choosing a side. A study by Nadler et al. (2015) found that participants tended to select the midpoint rating more than a 'no opinion' rating. To limit central tendency bias and for clarity, a 6-point Likert scale was adopted. Furthermore, a 'don't know' option was included to allow for instances where participants did not understand the statement or if participants felt they could not comment on the statement's perceived importance due to a lack of knowledge.

Other debates include the strengths and limitations of wording around numerical scales (Cummins & Gallone, 2000). Strengths of wording numerical scales include an enhanced sense of comparability between respondents (Andrews & Withey, 1976). However, Cummins and Gallone acknowledged the limitations of wording, such as there being a discrepancy amongst the meaning which respondents associate with a given word, making it difficult to ensure a standardised point of reference (2000).

Whilst the present study acknowledged varying interpretations around wording scales, it attempted to reduce this interpretation by keeping wording consistent i.e. using 'important' and 'very' or 'somewhat' alongside both statements of importance and unimportance.

3.6.5 Consensus

A key feature of the Delphi study is using participant ranking to establish a group consensus, or 'collective agreement' (Keeney et al., 2011). Whilst there are no set rules for how to set consensus, Delphi studies have set levels which have varied from 51%-100% consensus on items (Keeney et al., 2011). A Review of recent EP Delphi studies saw consensus set at 70% (Anderson & Tyldesley, 2019) and 75% (Green & Birch, 2019; Jago, 2019).

A further review of Delphi studies was evaluated to establish commonalities amongst consensus. Most of the studies presented consensus as a percentage (Boerner et al., 2002; Buck & Hendry, 2016; Hill et al., 2019; Jorm et al., 2008, Kelly et al., 2010; Moynihan et al., 2015; Sünderman et al., 2019) and of these studies at least half established a consensus rate of 80% (Buck & Hendry, 2016; Hill et al., 2019; Jorm et al., 2008; Kelly et al., 2010). Studies have also reached consensus by taking statements which were at the higher end of the rating scale, such as 'totally essential' or 'essential' (Green & Birch, 2019) 'essential' or 'important' (Jorm et al., 2008; Kelly et al., 2010) or 'agreement' or 'strong agreement' (Runyan et al., 2019).

Taking into account the scaling method adopted and consensus levels used in Delphi studies, the current study set consensus at 80% for items ranked 'important' or 'very important', taking into account the number of potential participants involved, as well as anticipating that items are more likely to be ranked on the higher level.

Some Delphi studies have suggested adopting both mean and standard deviation ratings to set consensus (Boerner et al., 2002; Higgins et al., 2013; Runyan et al., 2019). Runyan et al. (2019) aimed to establish consensus of classroom management competencies for school counsellors. Their study used a five-point Likert scale and set consensus at a mean of 4.0 or higher, but also had a standard deviation of 0.85 or less. This was due to the fact that some items had a mean rating of 4 or higher but had a standard deviation that was above the pre-established criteria, which indicated a wider than acceptable range of responses. It was hypothesised that it would be unlikely for respondents to frequently rate responses using extreme negative outliers (*very unimportant* or *unimportant*) to statements around CRP, therefore the current research did not use mean and standard deviation to set consensus. However, it was decided that use of mean and standard deviation would provide a useful way for respondents to analyse the spread of data around the group's responses to statements after round one.

3.7 Pilot

Round one was piloted on four individuals (two TEPs and two individuals not related to the EP profession). The primary purpose of piloting the survey was to seek feedback around the survey experience such as ease of responding, readability and

scaling. Individuals were also invited to offer any reflections on content, if they wished, which were discussed and subsequently contributed to the adaptations for the final survey. The individuals chosen for this task were recruited via opportunistic sampling. The two TEPS chosen were in year three of training on an EP course, and were different to the two TEPs who were recruited to triangulate the analysed data. Similar to the triangulation process, as the primary purpose of this exercise was to seek feedback around the survey experience, there was no set criteria for the TEPs or individuals not related to the EP profession to self-select themselves as experts in CRP. Table 11 outlines the feedback from individuals who participated in the pilot (referred to as TEP 1, TEP 2, Tester 1 and Tester 2, alongside subsequent adaptations which were made as a result of feedback.

Table 11

Feedback following pilot survey and subsequent adaptations

Respondent	Feedback	Adaptations Made
TEP 1	The section which had statements linked to 'Assessment and Intervention' was quite long, resulting in discussion as to whether this section could be split in some way to support respondent experience	'Assessment and Intervention' statements were split across two pages as opposed to all appearing on one page
TEP 1/TEP 2	Reflections were provided around the 'don't know' response. There were aspects of practice which TEP 1 had not heard of and so responded with 'don't know', although acknowledged these statements may be important. This prompted discussion around the wish for participants to respond in this way, or not. TEP 2 commented that the 'don't know' response did not always truly reflect their feeling around the statement; for some statements, they did not know about something but had a wish to learn more and acknowledged it may be important for practice	An additional sentence was added into the survey before participants were invited to respond. The sentence re-clarified the definition of why participants might provide a 'don't know' response. It was acknowledged that there would be space at the end of the survey to provide any feedback i.e. to share where statements were unknown to participants but there was a desire to learn more.
Tester 1	Acknowledged that participants may interpret subheadings differently, for example what defines 'Assessment and Intervention'. Prompted discussion as to whether a short definition could accompany the subheadings to support clarity around each area	Added brief definitions alongside subheadings
TEP 1	Offered reflections around social desirability bias and whether respondents would feel able to rate statements as unimportant, for fear of appearing non-inclusive, or worst, racist. Discussion about ways to enhance participant honesty.	Re-reviewed wording around scaling. Added a sentence 'please answer as honestly as you can' before the statements
Tester 1	Provided reflections around the question around ethnicity, namely the strengths and limitations of providing a definitive grouping. Discussed the importance of allowing respondents to define their ethnicity themselves, and provide an opportunity for them to expand on this: this may provide opportunity for respondents to comment on where they grew up in comparison to where they were born, or where parents are from differing ethnic backgrounds, as this may have implications for cultural identities. Discussed how this feels more aligned to being culturally responsive, so respondents feel their ethnicity has been	Considered the possible number of respondents and practicality of allowing a free text box vs. definitive groupings, against the ethical responsibility of feeling participants are accurately represented. Changed question to open text box

	sensitively considered and accurately represented.	
Tester 1	Commented that the option for participants to include their email address before starting the survey did not flow well	Moved the email address box to the end of the survey
Tester 1	General feedback regarding grammar and formatting, for example ensuring text is the same size	Amended
Tester 2		
TEP 1	When prompted if there are other features of CRP which have not been mentioned, TEP 1 provided feedback regarding acknowledging potential power inequities. Discussed whether this needed to be an explicit statement, rather than embedded within statements regarding anti-oppressive practice.	Reviewed extracts aligned to codes and themes. Added this as a separate statement alongside addressing bias, oppression so it was more explicit
TEP 2	When prompted if there are other features of CRP which have not been mentioned, TEP 2 provided feedback regarding the power of language and how this is discussed, for example addressing ethnic minorities as 'BAME'. Discussed whether language was already addressed in any statements.	Reviewed codes to determine whether language appeared more explicitly in extracts. Recognised statement 'use the language used by the individual to describe their difficulties'. Did not find any further extracts aligned to this
TEP 2	Acknowledged that respondents may not know what aspects are coming up. For example, TEP 2 provided feedback early on around supervision without realising this topic appeared later on in the survey.	Added a summary of the three themes before the survey starts so respondents have a brief idea of what may come up where

3.8 Recruitment

The current study aimed to recruit participants via opportunity or convenience sampling. Once the parameters were set around who could participate, the aim of recruitment was to seek participants who were willing and available to take part. The current study aimed to recruit participants via the following methods:

1. Contacting the National Association of Principal Educational Psychologists and requesting them to:
 - a) complete the survey themselves, and
 - b) distribute this to their services

2. Contacting the directors of the EP doctorate courses
3. Recruiting EPs via EPNET, an online EP forum.

The post used to recruit EPs on EPNET is appended (Appendix L). The first two methods of recruitment were chosen largely due to the initial parameters set for the expert panel (Principal EPs, course directors of EP doctorate training programs and EPs with at least five years' experience in the profession). As the parameters of the expert panel were amended to include EPs with relevant experience of working with culturally diverse populations, it was recognised that participants could be further recruited via other methods, namely practical, opportunistic means and 'snowball sampling', for example, forwarding the survey onto EP colleagues and asking them to complete and share the survey more widely with other EPs in the profession.

Survey one was open to participants for three weeks (Monday 27th July-Sunday 16th August 2020) to give participants a reasonable amount of time to complete it. It was decided not to keep the survey open for longer due to the need to analyse the results and send out survey two, to avoid attrition rates later on.

4. Results

4.1 Results Summary

This chapter details the results from round one and round two of this Delphi study, exploring how EPs can develop CRP. 23 EPs participated in round one of this study and of these 23, 18 EPs participated in round two of this study (78%). Firstly, characteristics of EP respondents which were gathered during survey one are presented. This is followed by the results from round one of the Delphi study, where statements which reached consensus of perceived importance amongst the panel are summarised. Following completion of round one, statements which did not reach consensus after the first survey are reviewed in round two, and the results from round two are presented. Round two results summarise whether the statements that were re-visited in round two subsequently reached consensus amongst the panel. Statements which did not reach consensus after round two are also presented. The results chapter concludes by presenting the key features related to developing CRP which reached consensus amongst the EP respondents. Finally, as respondents were given an opportunity to make any comments or reflections after participating in survey one, a summary of their reflections is provided.

4.2 Respondent Characteristics

Initial participant data gathered from survey one is presented in Table 12, providing a summary of respondent characteristics who participated in round one and two.

Table 12*Participant characteristics for round one and round two of the Delphi study*

Participant Characteristics	Round One (n=23)	Round Two (n=18)
Gender		
Male	4	4
Female	19	14
Where do you work as an EP?		
South East England	10	8
London	10	8
Midlands, England	2	2
North East England	1	0
How do you currently practise as an EP? You may select more than one if applicable		
Local Authority	20	16
Private Practice	6	6
CAMHS	1	1
Other	1	0

Most of the EPs who participated identified themselves as female. EPs who took part in the surveys practised largely in the South East of England and London. Most EPs practised within a Local Authority EPS, with some EPs also working within private practice or within CAMHS. Where one EP identified 'other' in terms of how they currently practice as an EP, they described practising within the National Health Service within a CAMHS disability service.

4.2.1 Ethnicity

Participants were asked to define their ethnicity, with the opportunity of providing as much or as little information as preferred. Just under 70% of EPs in round one

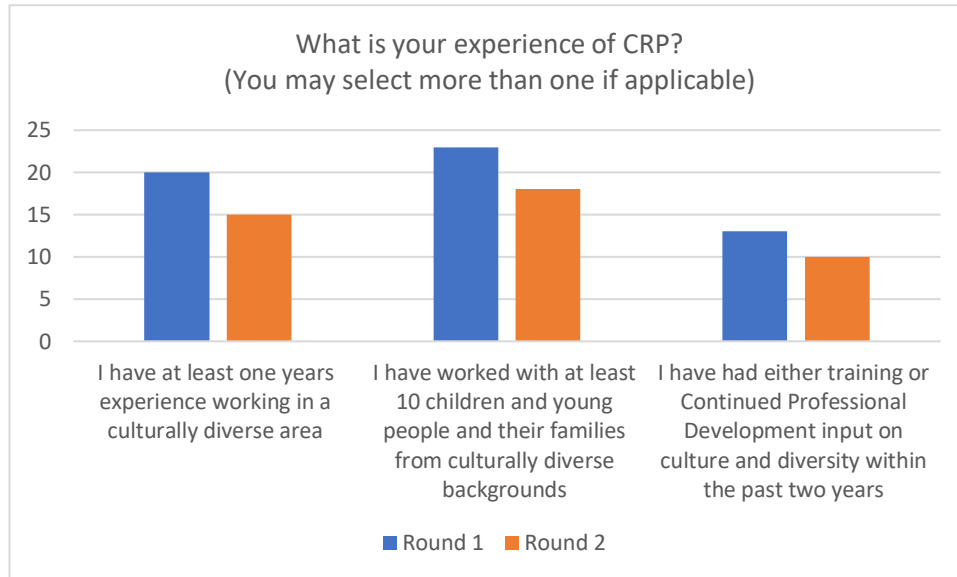
identified themselves as either *White British*, *White* or *British* (n=16). 3 EPs identified their ethnicity as either *White Irish* or *Irish*. 1 EP identified their ethnicity as *Indian*, 1 EP identified their ethnicity as *White European with British Nationality*, 1 EP identified their ethnicity as *British/Polish*, and 1 EP identified their ethnicity as *White British*, acknowledging part of their family was of *Mexican/British* heritage.

4.2.2 Experience of Engaging in CRP

EPs were asked to define their perceived experience of engaging in CRP using three criteria. Figure 8 provides a graphical representation summarising EPs' experience of CRP. Over half of respondents in round one (n=13, 56%) and over half of respondents in round two (n=10, 55%) perceived themselves to meet all three criteria points regarding their experience of CRP: they had at least one year's experience working in a culturally diverse area, they had worked with at least 10 children and young people and their families from culturally diverse backgrounds, and they had either training or CPD input on culture and diversity within the past two years.

Figure 8

Graphical representation summarising respondent EPs' experience of CRP



Of the 10 respondents who did not self-select to meet all three criteria points, seven respondents selected criteria one and two, therefore they had at least one year's experience working in a culturally diverse area and they had worked with at least 10 CYP and their families from culturally diverse backgrounds. Three respondents selected criteria one only, therefore had worked with at least 10 CYP and their families from culturally diverse backgrounds. One of these EPs provided additional context to their experience of CRP, *'I am a bilingual practitioner and I am very mindful of people's first language and cultural background'*.

Whilst it could be argued that the criteria point related to having at least one year's experience working in a culturally diverse area could cover a significant proportion of the EP population, all respondents had worked with at least 10 CYP and their families

from culturally diverse backgrounds, and all had self-selected themselves to engage in CRP, providing a degree of confidence regarding participant expertise.

Participants were given the opportunity to elaborate on their experience of CRP, if desired. One participant shared that they had previous experience leading on “*bilingualism and ethnic minorities*” within EP practice and commented on their interest in this area. Another participant shared that their CPD in this area is “*limited and very recent following on from the death of George Floyd and the BLM protests this year*”.

4.2.3 Verification of EP Panel

21 out of 23 respondents (91%) could be verified to be EPs. 20 out of 23 respondents used a Local Authority or private practice email contact and could be further verified with the HCPC. Three out of 23 respondents used a personal email address as their method of contact for round two, and one of these respondents could be verified with the HCPC due to the information provided in her personal email. Whilst it is recognised that two respondents could not be verified as EPs, the researcher made clear that participants must be qualified EPs registered with the HCPC, were asked information about their current practising as an EP, and methods of recruitment were largely through EP networks.

4.3 Round One Results: Statements Reaching Consensus

Once the deadline for participating in round one had ended, respondent data was downloaded from Qualtrics into Microsoft Excel and SPSS Statistics, for statistical

analysis. Frequency statistics were used to calculate the percentages of responses according to each statement. To establish whether statements met a consensus across the panel regarding their perceived importance for EP practice, the current study required 80% of respondents to rate statements as 'very important' or 'important'. Of the 96 statements presented to participants in round one, 68 of these statements met consensus (70.8%). Figures 9-14 offer graphical representations of the statements which reached consensus after round one, with a summary of how the panel rated the statements in terms of their perceived importance for EP practice. The graphs are separated into the key themes from survey one:

1A. Apply Culturally Responsive Skills: Initial Relationship Building (Figure 9)

1B. Apply Culturally Responsive Skills: Assessment and Intervention (Figures 10-11)

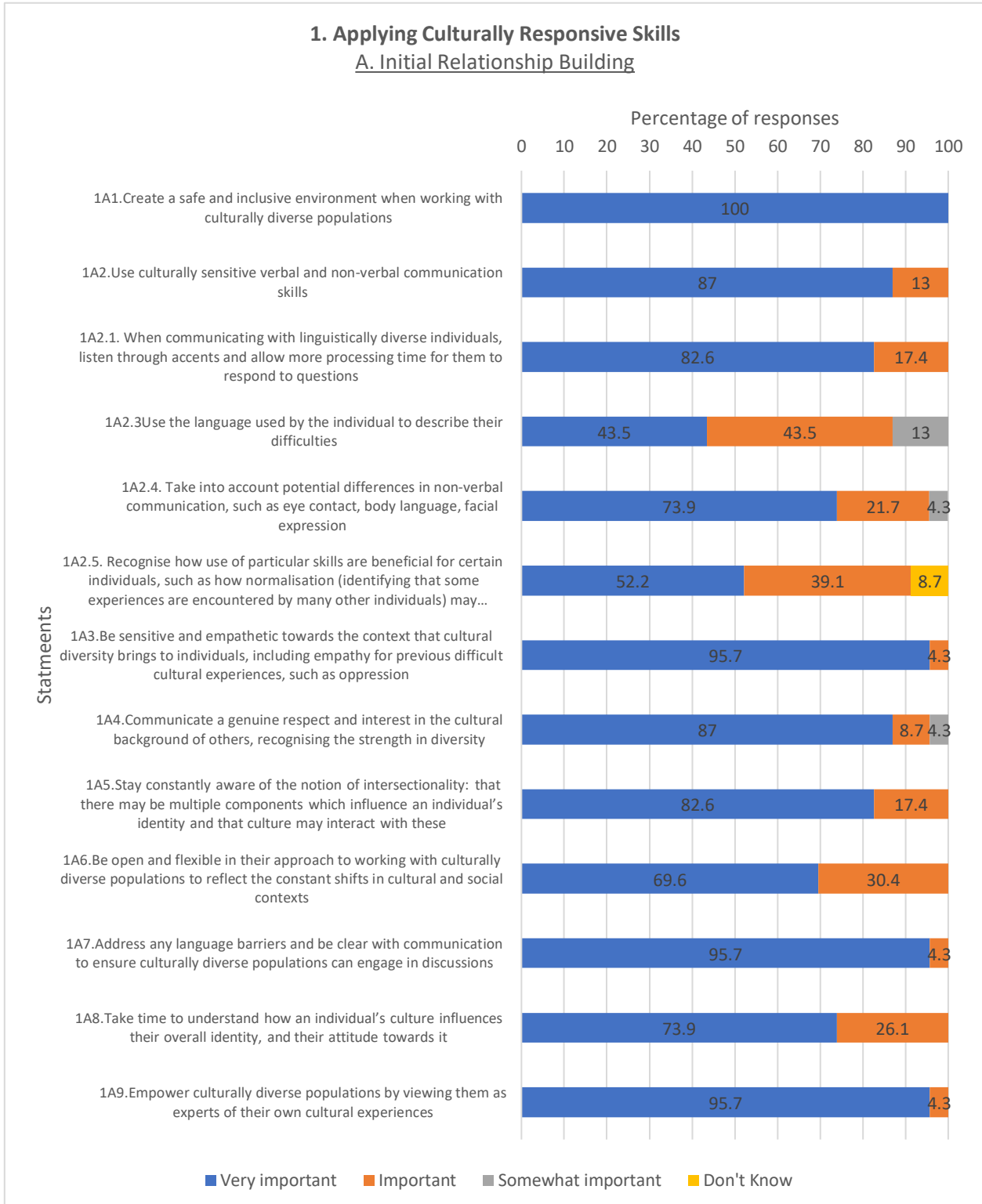
2A. Ensure a Continuous Learning Process: Intrapersonal Development (Figure 12)

2B. Ensure a Continuous Learning Process: Interpersonal Development (Figure 13)

3. Consider Structural Implications to Culture (Figure 14)

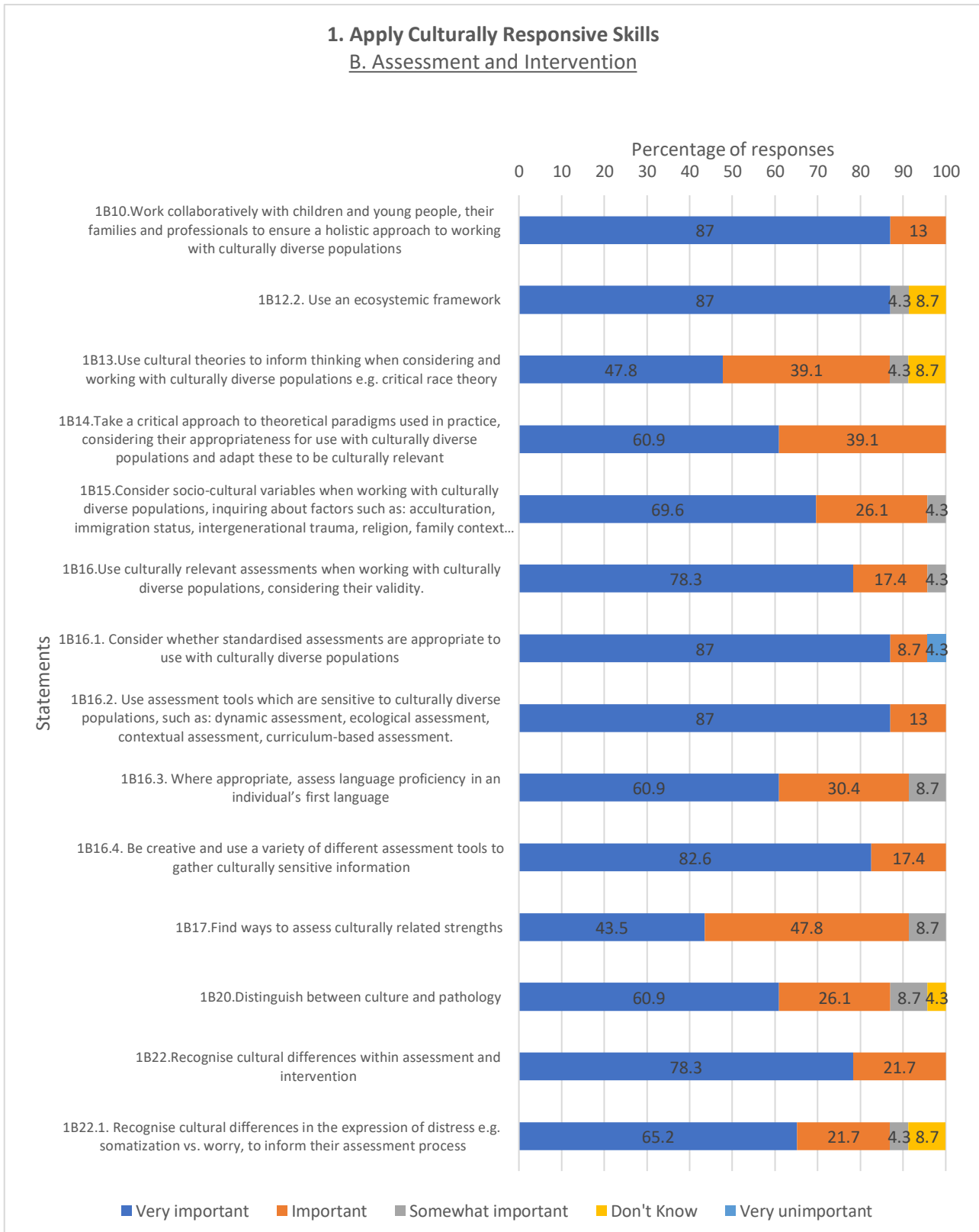
Figure 9

Statements reaching consensus from round one, section 1A. Apply Culturally Responsive Skills: Initial Relationship Building



Figures 10-11

Statements reaching consensus from round one, section 1B. Apply Culturally Responsive Skills: Assessment and Intervention



1. Apply Culturally Responsive Skills B. Assessment and Intervention

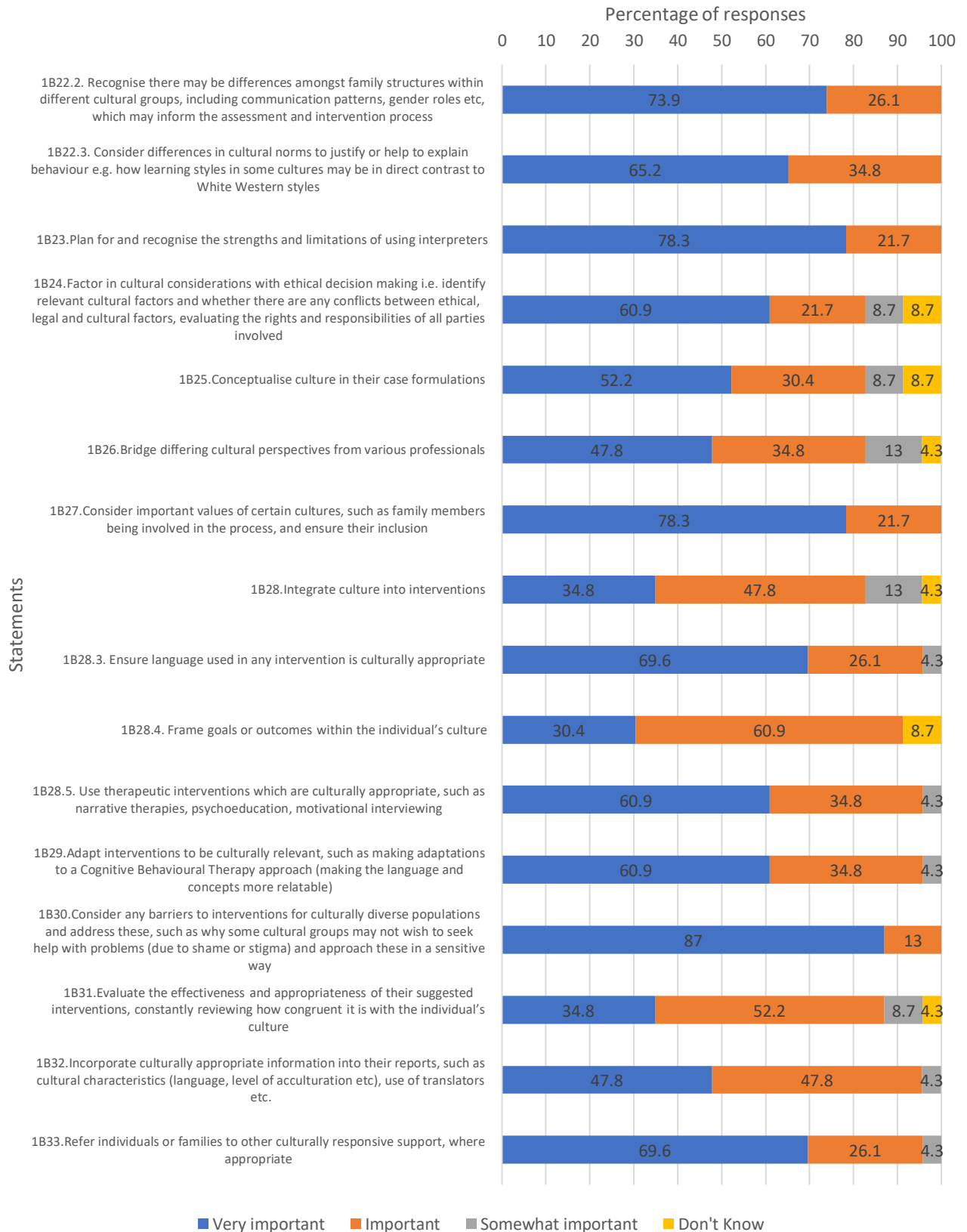


Figure 12

Statements reaching consensus from round one, section 2A: Engage in a Continuous Learning Process: Intrapersonal Development

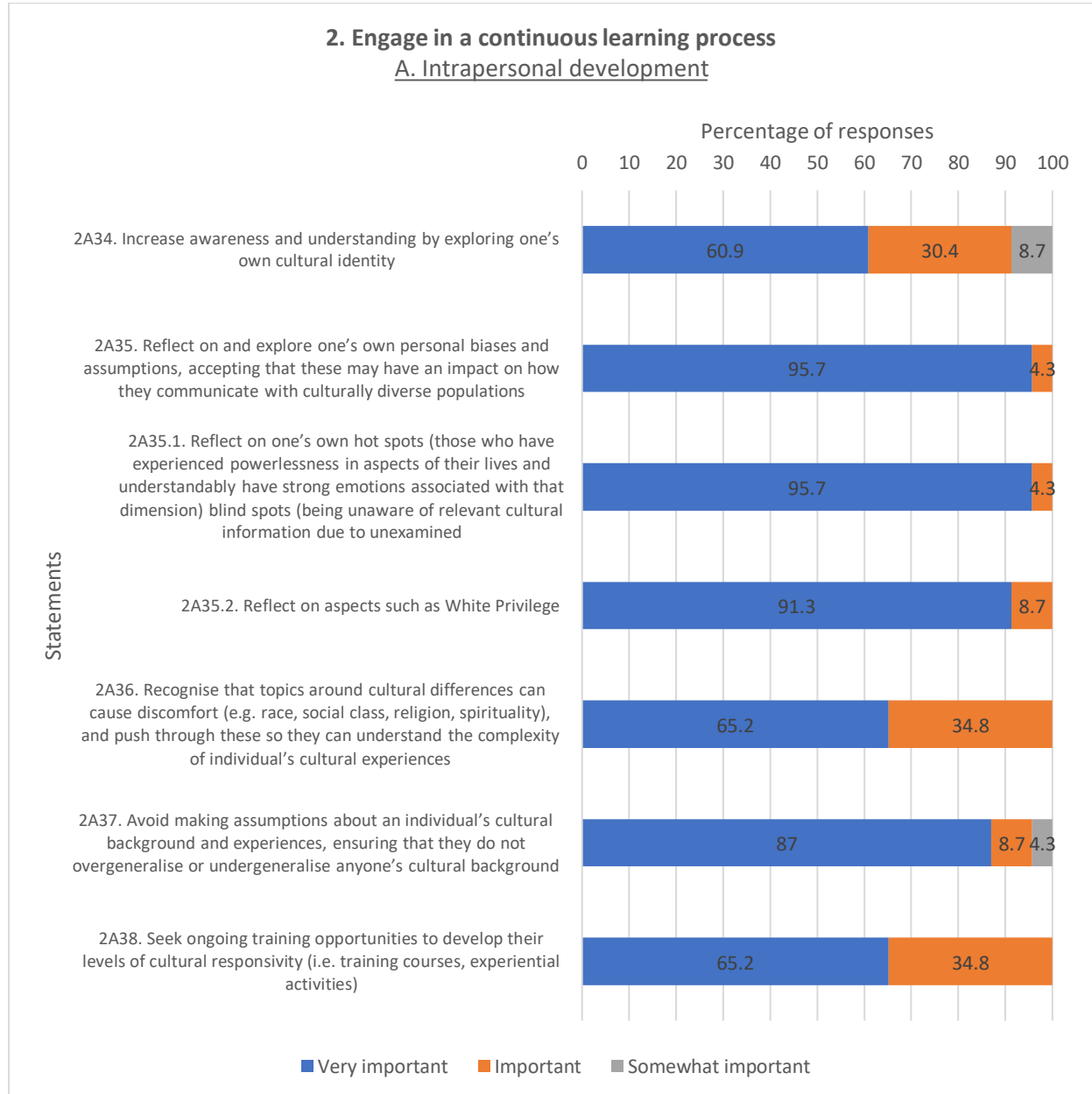


Figure 13

Statements reaching consensus from round one, Section 2B: Engage in a Continuous Learning Process: Interpersonal Development

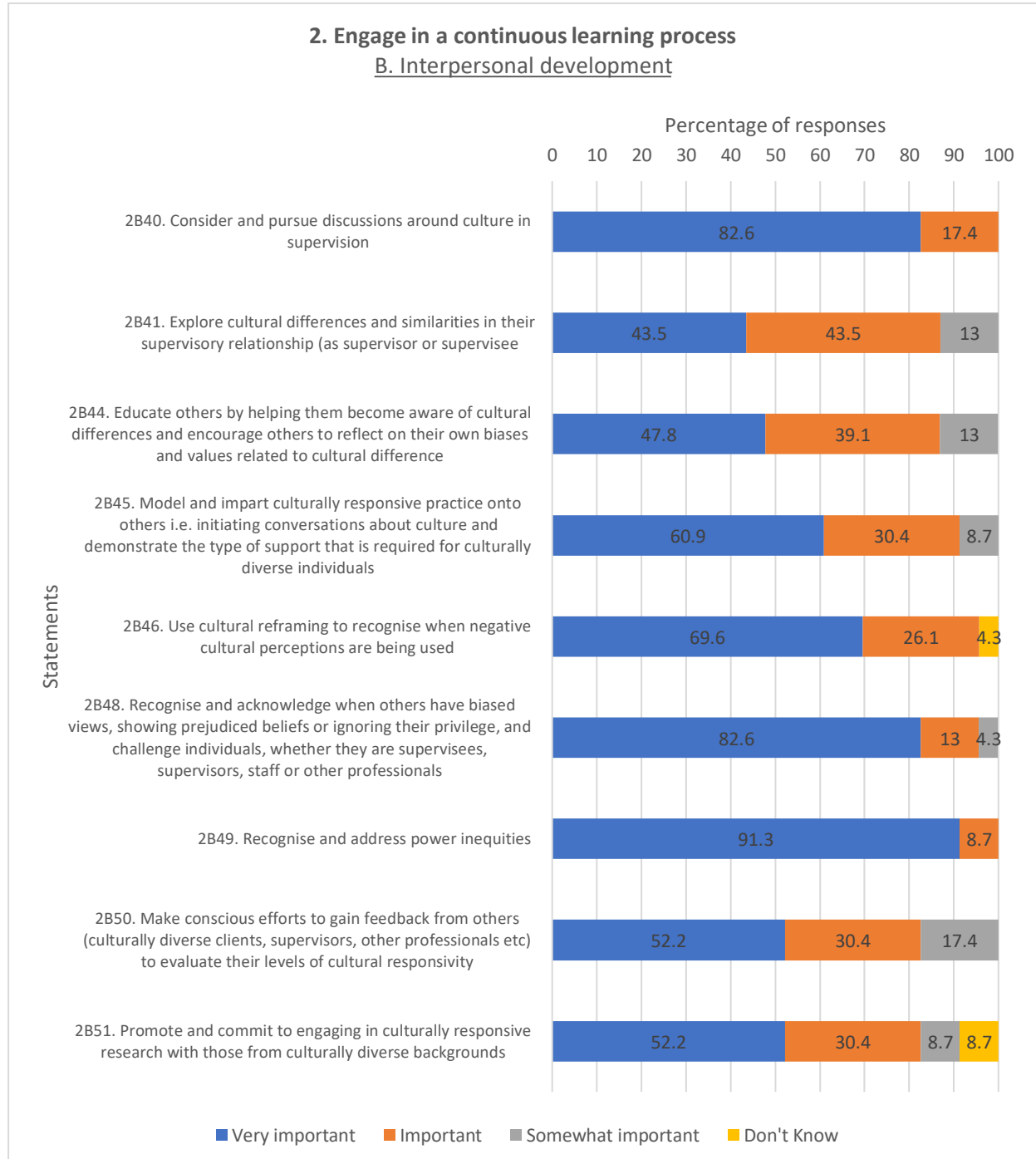
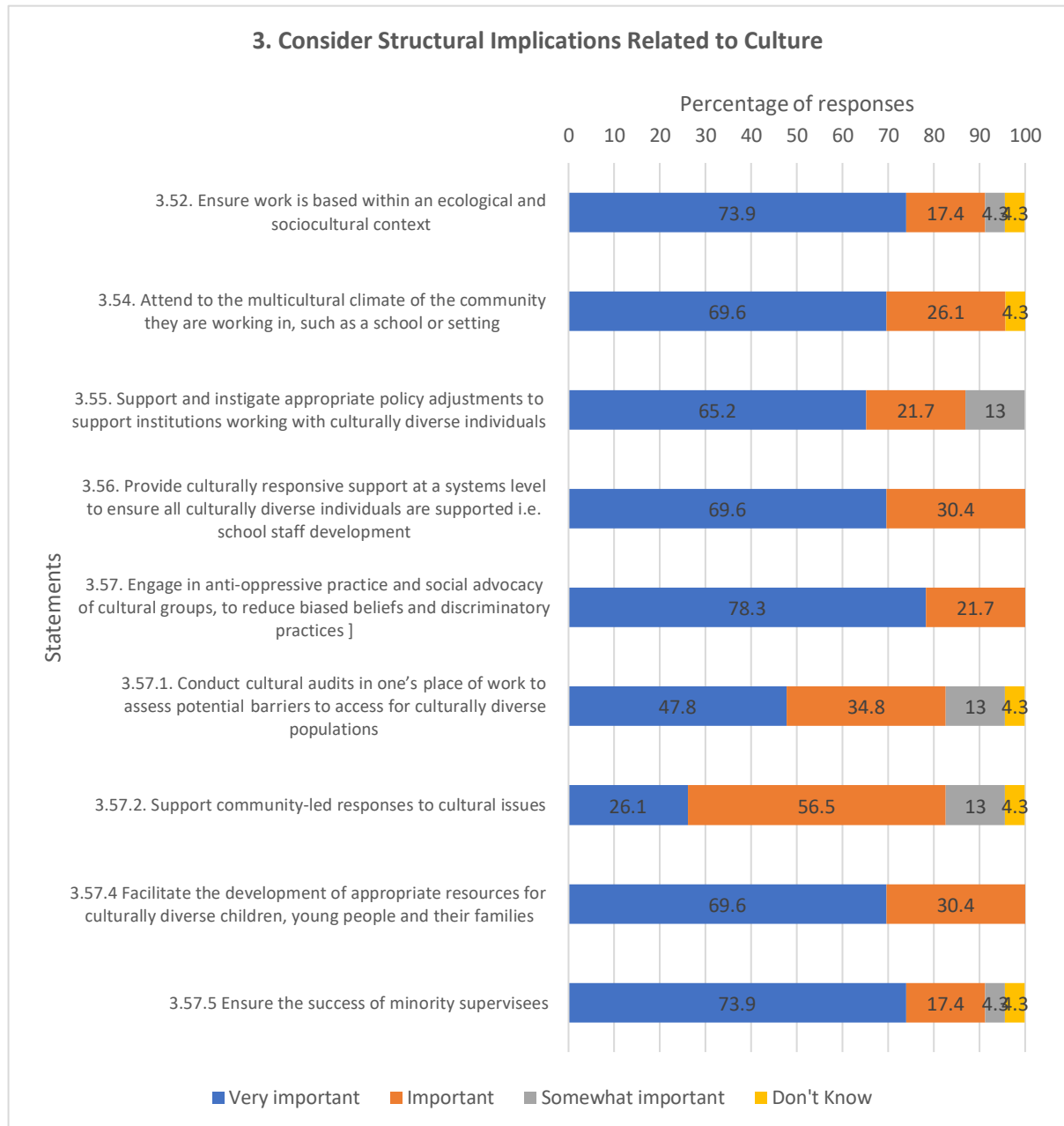


Figure 14

Statements reaching consensus from round one, section 3: Consider Structural Implications Related to Culture



4.4 Additional Statements from Round One

During round one of the Delphi study, respondents were invited to comment on any additional features of CRP which had not been mentioned in the survey and which they deemed to be important for EP practice. Respondents were invited to provide additional statements under each of the main three headings: '*apply culturally responsive skills*', '*engage in a continuous learning process*', and '*consider structural implications to culture*'. In addition to providing further comments under the three key headings, respondents were asked at the end of the survey if there were any other features of CRP that had not been mentioned which they felt were important for EP practice.

11 additional statements were provided by respondents from round one (see Appendix M). These statements were subsequently reviewed by the researcher, who decided whether they duplicated or overlapped with existing statements, or whether these additional statements were deemed to reflect comments as opposed to features of CRP. The researcher discussed all additional comments with her supervisor, who agreed with all decisions made by the researcher with regards to the organisation of additional statements. Following review, the 11 additional statements were reduced to 7. Where additional statements were provided at the end of the survey, the researcher decided where these statements best fit with the three existing main headings. Table 13 provides a summary of the 7 additional statements shortlisted to incorporate into round two of the Delphi survey.

Table 13

Finalised additional statements generated from respondents in survey one

Area	Additional Statement
Culturally Responsive Skills	<i>Learn some of the individual's language to assist in valuing their culture.</i>
	<i>Consider how EAL children and young people perceive the English culture and language as the dominant one and be mindful of how this may influence their refusal to acknowledge their native language / culture.</i>
Engage in a continuous learning process	<i>Take an active role in pushing the topic of cultural responsiveness higher up the organisational systems.</i>
	<i>Engage in and seek basic training on cultural responsiveness</i>
Consider structural implications related to culture	<i>Learn how to deliver traded services and service level agreements which have culturally responsive practice embedded within the contracting with consumers.</i>
	<i>Promote greater aspirations for teenagers, such as more BAME university students studying psychology with a belief that they could go on to become a "Dr" and an EP.</i>
	<i>Deliver training programmes to school staff being informed by culturally responsive practice.</i>

4.5 Statements Not Meeting Consensus After Round One

At the end of round one, 28 out of the 96 statements presented to the panel in round one did not meet consensus (29.2%). These statements were subsequently presented back to respondents in round two, including respondents' individual responses to each

statement from round one, along with the group's response to each statement. This was presented as a percentage (indicating what percentage of respondents chose which statement) the mean (average group response) and standard deviation (the variation of responses). To ensure accurate mean and standard deviation values, statements which were rated as 'don't know' were excluded from the statistical analysis. Please refer to Appendix N to see the full survey sent to respondents in round two.

4.6 Statements Meeting Consensus After Round Two

Of the 35 statements reviewed by participants in round two (28 statements not reaching consensus after round one, and 7 additional statements generated by respondents), 14 statements reached consensus after round two (40%). Of these 14 statements, 8 were statements which had previously not met consensus in round one (57%), and 6 were additional statements generated by respondents during round one (43%). Figures 15-22 present the 8 statements which subsequently reached consensus after round two, with a comparison of responses from both rounds. The graphs are separated into the key themes from survey one:

1B. Apply Culturally Responsive Skills: Assessment and Intervention (Figures 15-19)

2A. Ensure a Continuous Learning Process: Intrapersonal Development (Figure 20)

2B. Ensure a Continuous Learning Process: Interpersonal Development (Figures 21-22)

The largest change in consensus was for the statement '*use tools such as the Implicit Association Bias test to reflect on one's own biases*', where consensus increased by 30.4%, from 56.5% in round one, to 86.9% in round two. 50% of respondents changed their response for this statement to reflect a greater importance for EP practice than in round one: seven respondents rated their response as more important and two respondents changed their response from '*don't know*' to '*important*' for this statement.

The second largest change in consensus was for the statement '*ensure that culturally relevant strengths are included in any intervention*', where consensus increased by 17.4% from 73.9% in round one, to 91.3% in round two. 22% of respondents changed their response for this statement to reflect a greater importance for EP practice than in round one: three respondents rated their response as more important and one respondent changed their response from '*don't know*' to '*important*' for this statement.

The smallest change in consensus was for the statement '*use cultural tools to support their approach to working with culturally diverse populations*', where consensus increased by 8.7% from 73.9% to 82.6%.

Figures 15-19

Statements reaching consensus after round two, with responses after round one and two. *Culturally Responsive Skills: Assessment and Intervention*

Figure 15

Graph representing statement 1B11, 'Use cultural tools to support their approach to working with culturally diverse populations'

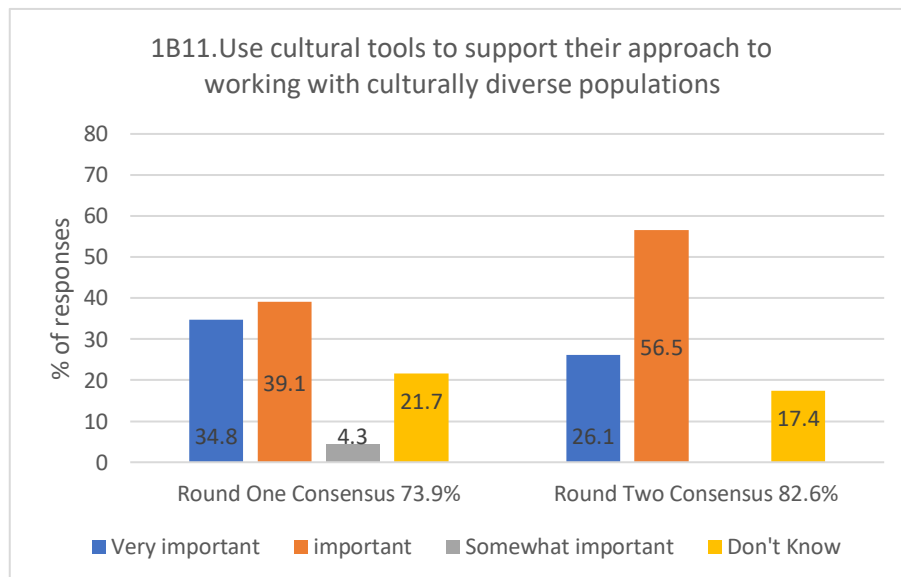
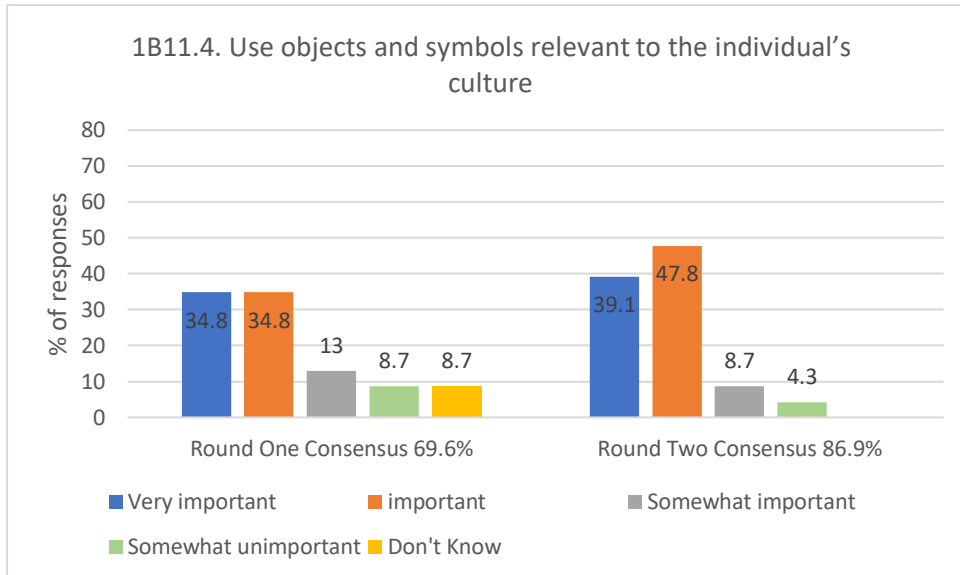


Figure 16

Graph representing statement 1B11.4, 'Use objects and symbols relevant to the individual's culture'

**Figure 17**

Graph representing statement 1B12, 'Use cultural models and frameworks to support their approach to working with culturally diverse populations'

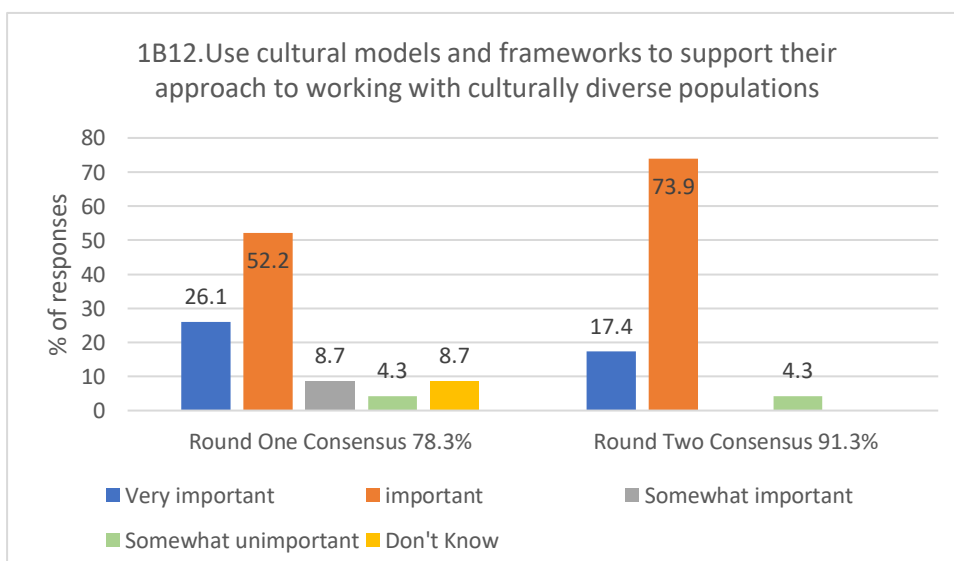


Figure 18

Graph representing statement 1B19, 'Use cultural variables as part of hypothesis testing'

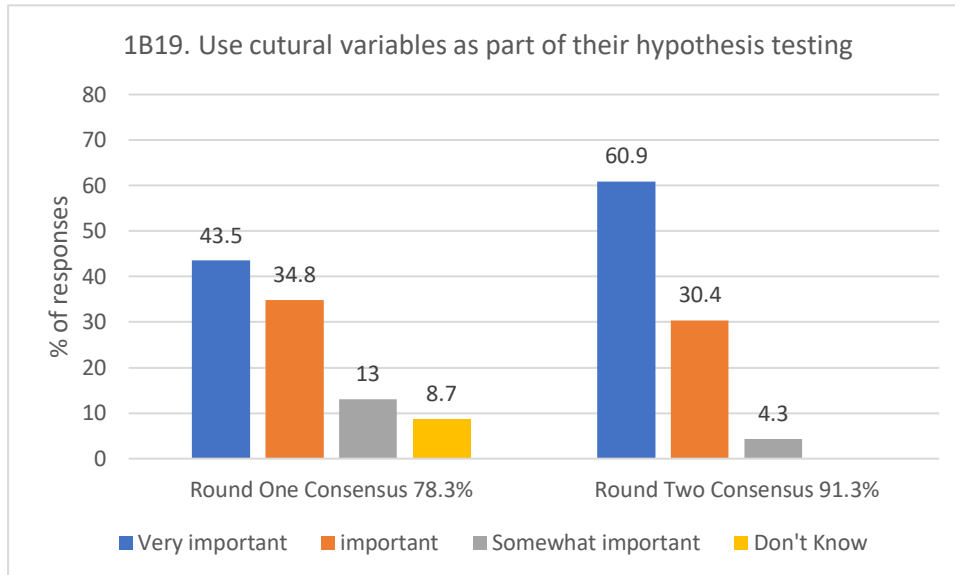
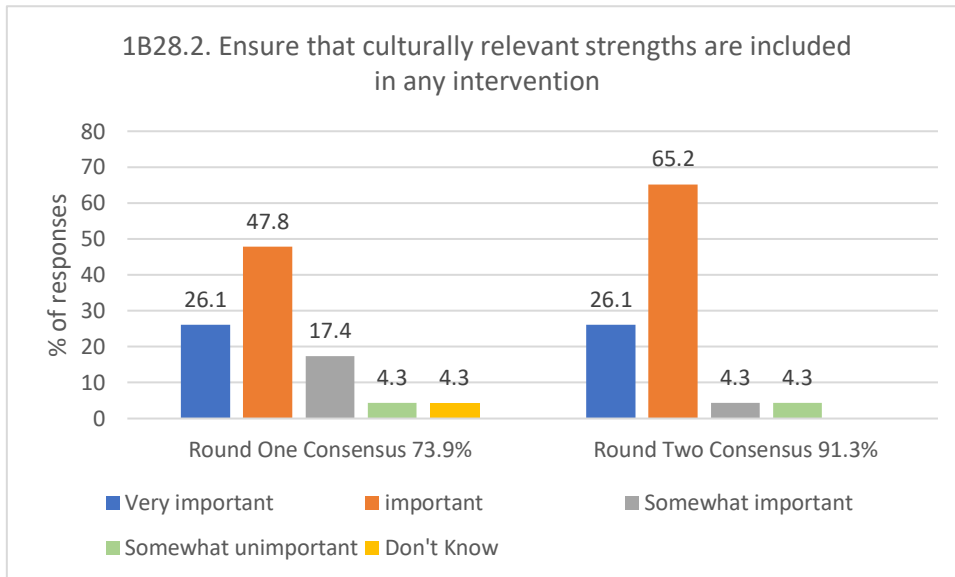
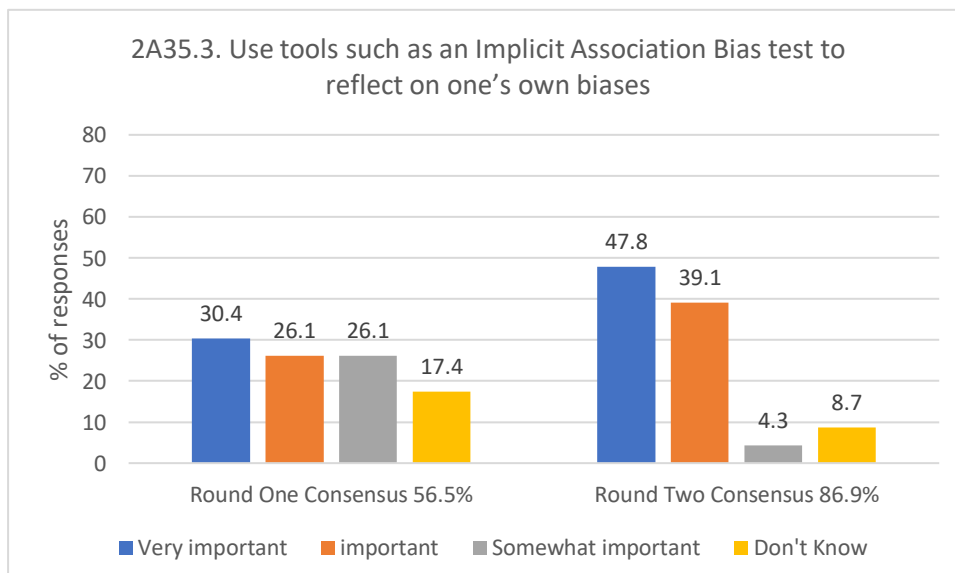


Figure 19

Graph representing statement 1B28.2, 'Ensure that culturally relevant strengths are included in any intervention'

**Figure 20**

Statement reaching consensus after round two: Ensure a continuous learning process – Intrapersonal Development statement 2A35.3, 'Use tools such as an Implicit Association Bias test to reflect on one's own biases'



Figures 21-22

Statements reaching consensus after round two, Ensure a continuous learning process: Interpersonal Development

Figure 21

Graph representing statement 2B39, 'Explore cultural differences and similarities between oneself and others when engaging in consultation i.e. between clients and/or consultees'

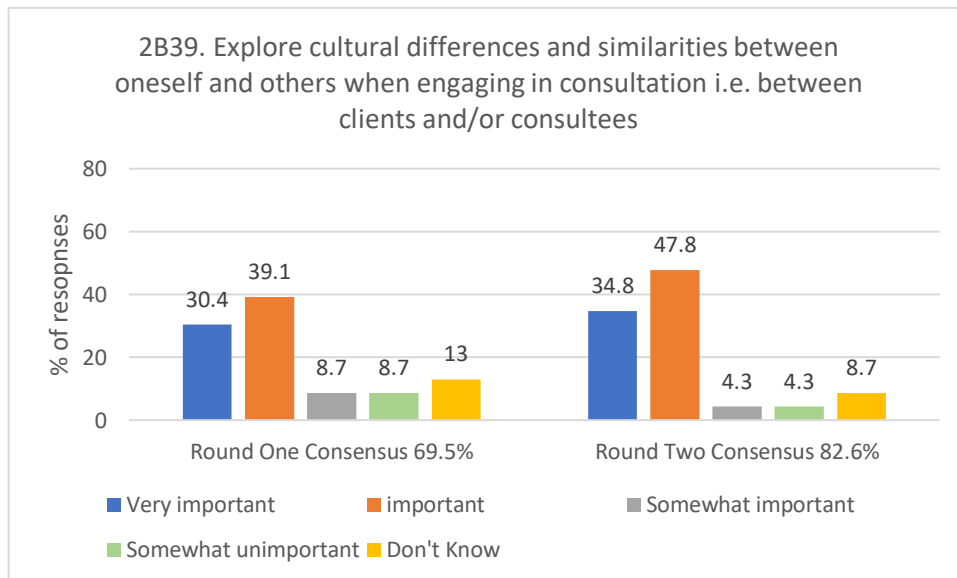


Figure 22

Graph representing statement 2B47, 'Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference'

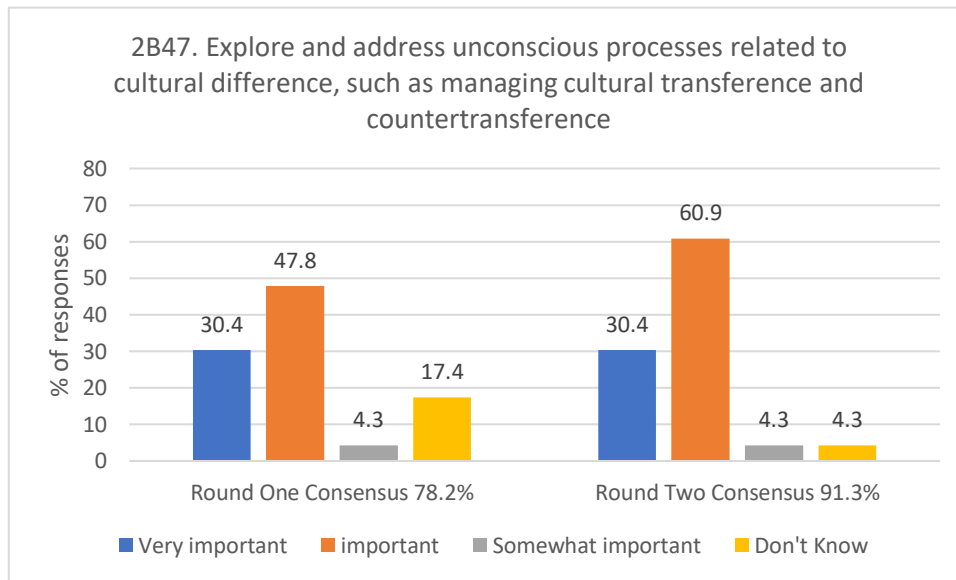
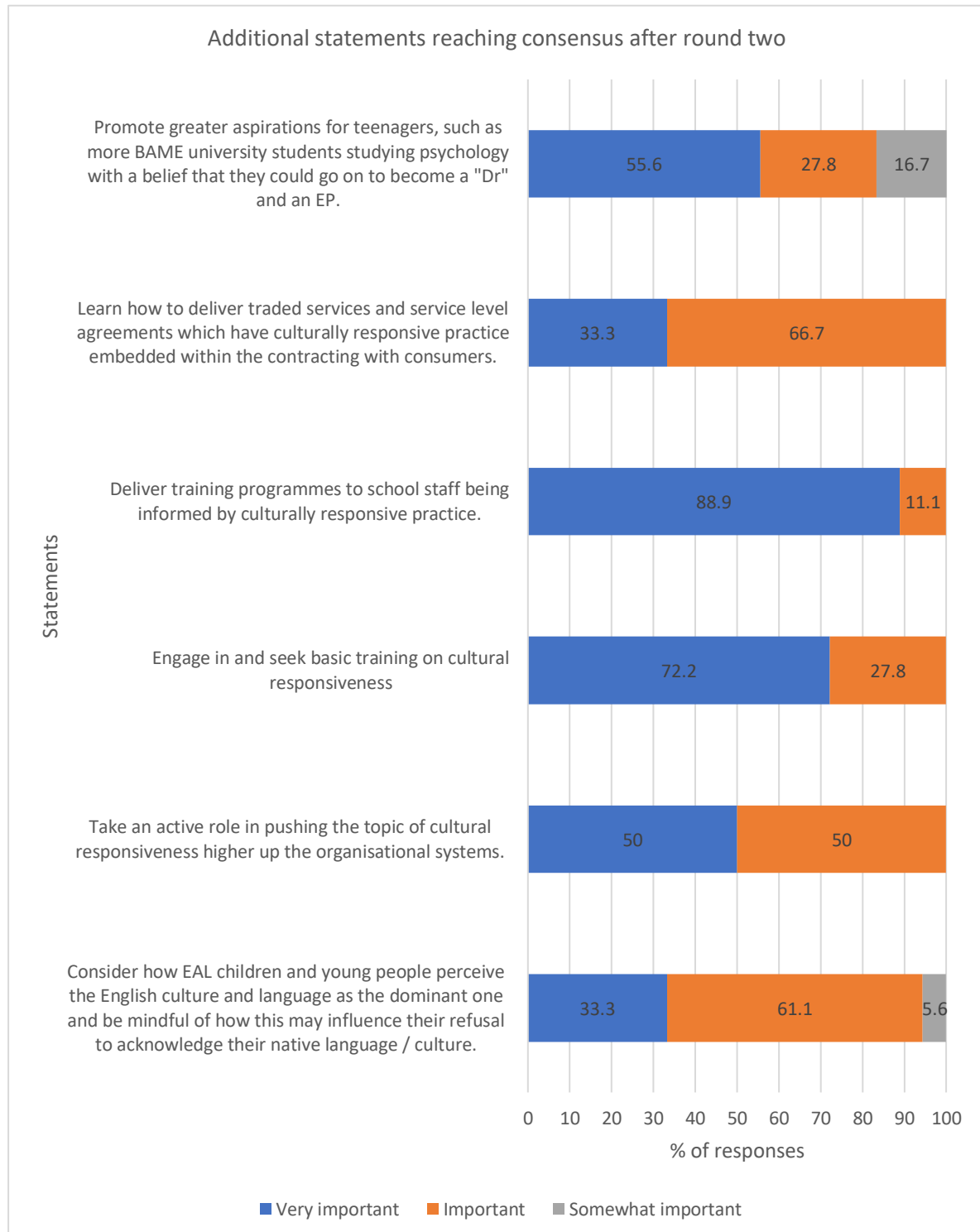


Figure 23 presents the additional statements which reached consensus after round one, and the percentage of responses from participants.

Figure 23

Additional statements suggested by respondents reaching consensus after round two



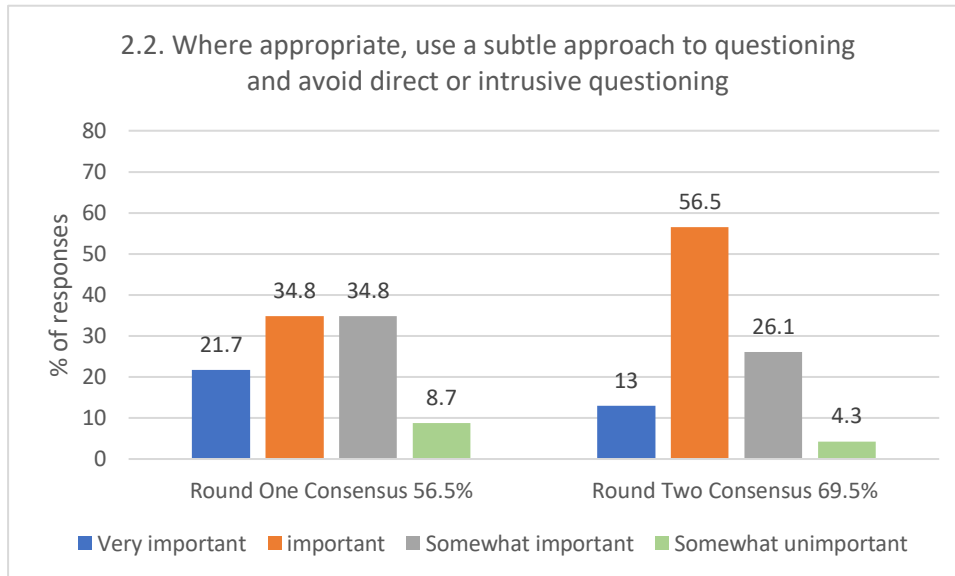
4.7 Statements Not Meeting Consensus After Round Two

Of the 35 statements reviewed by participants in round two (28 statements not reaching consensus after round one, and 7 additional statements generated by respondents), 21 statements did not reach consensus after round two. 20 of these were statements rated in round one, and one was an additional statement generated by respondents in round one and reviewed in round two. Figures 24-44 present statements which did not reach consensus after round two, with a comparison of responses from both rounds.

Of the 20 statements from round one, 5 statements (25%) kept their consensus as either the same or within 1% difference between round one and round two. Only one statement decreased in its consensus percentage after round two: the statement *'attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc.'* reduced in consensus from 21.7% in round one, to 13% in round two.

Figure 24

Statements which did not reach consensus after round two: *Culturally Responsive Skills, Initial Relationship Building, statement 2.2, 'Where appropriate, use a subtle approach to questioning and avoid direct or intrusive questioning'*

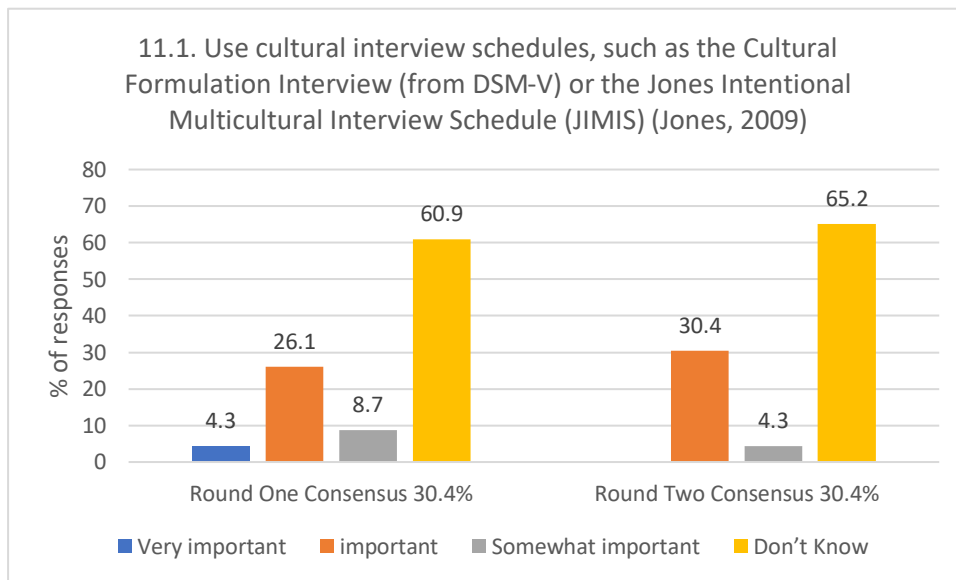


Figures 25-38

Statements which did not reach consensus after round two: *Culturally Responsive Skills, Assessment and Intervention*

Figure 25

Graph representing statement 11.1, 'Use cultural interview schedules, such as the Cultural Interview Formulation (from DSM-V) or the Jones Intentional Multicultural Interview Schedule (JIMIS) Jones, 2009)

**Figure 26**

Graph representing statement 11.2, 'Use tools to identify cultural strengths, such as The Cultural Assets Identifier (CAI) (Aganza et al., 2015)

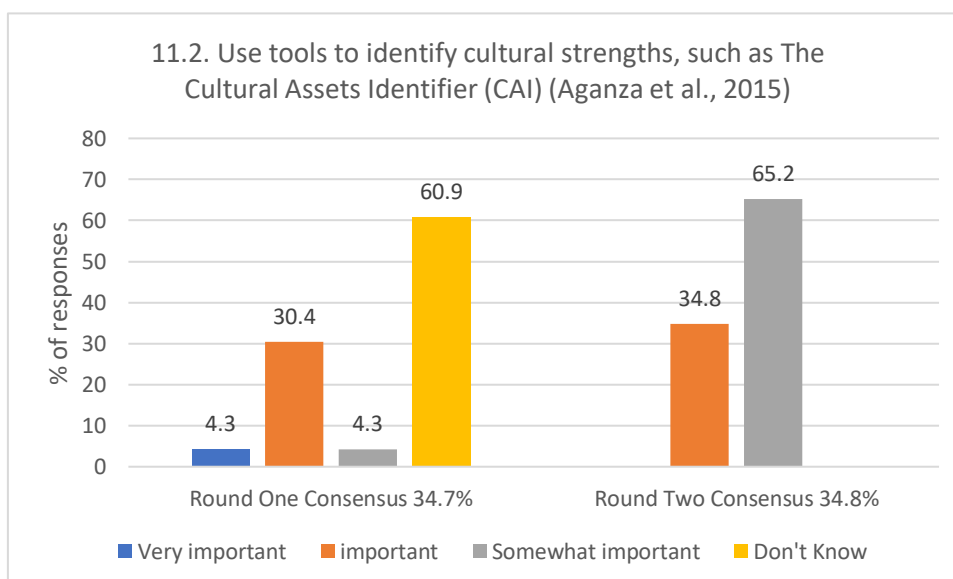
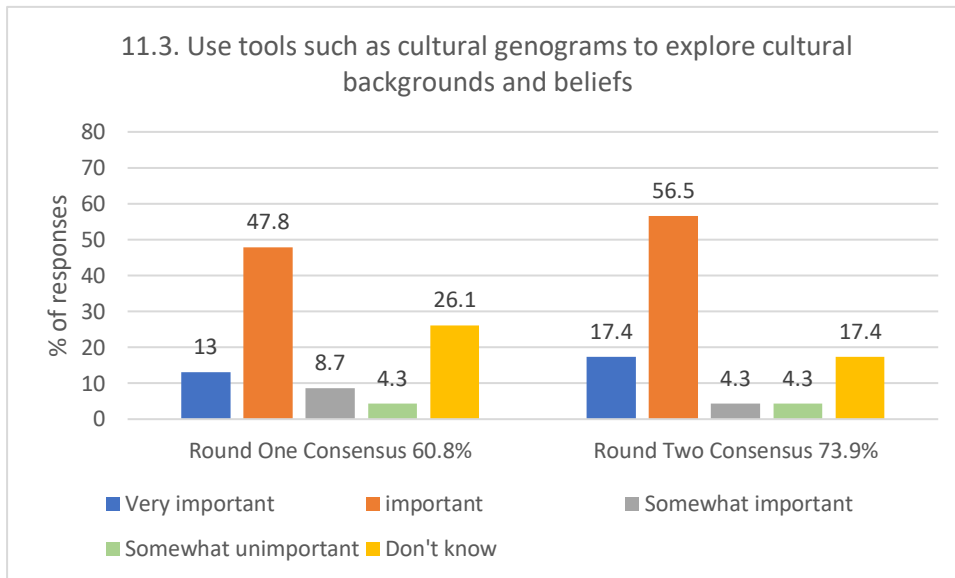


Figure 27

Graph representing statement 11.3, 'Use tools such as cultural genograms to explore cultural backgrounds and beliefs'

**Figure 28**

Graph representing statement 12.1, 'Use a cultural consultation model or framework, such as *The Multicultural School Consultation (MSC) Framework* (Ingraham, 2000) or the *Culture Specific Consultation Model (CSCM)* (Nastasi et al., 2004)

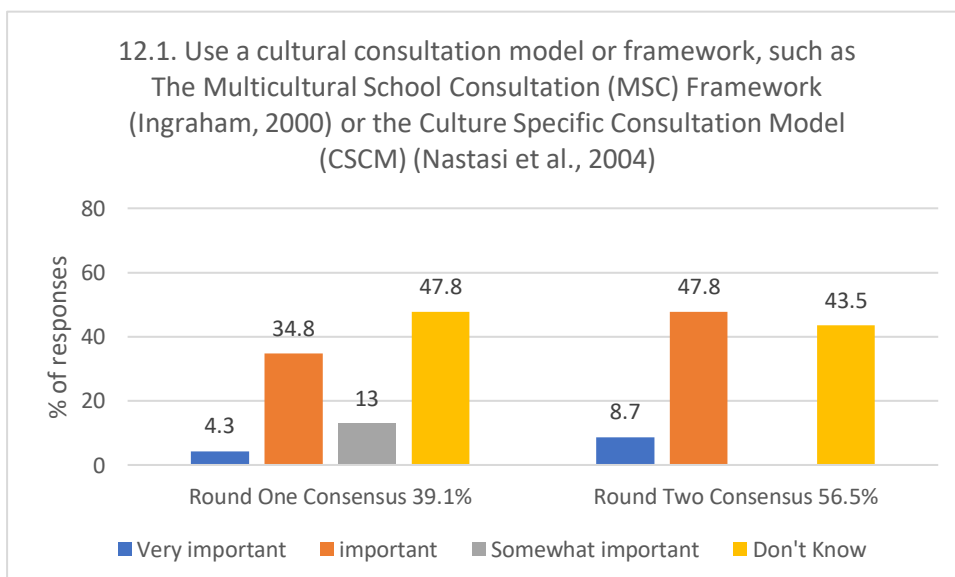
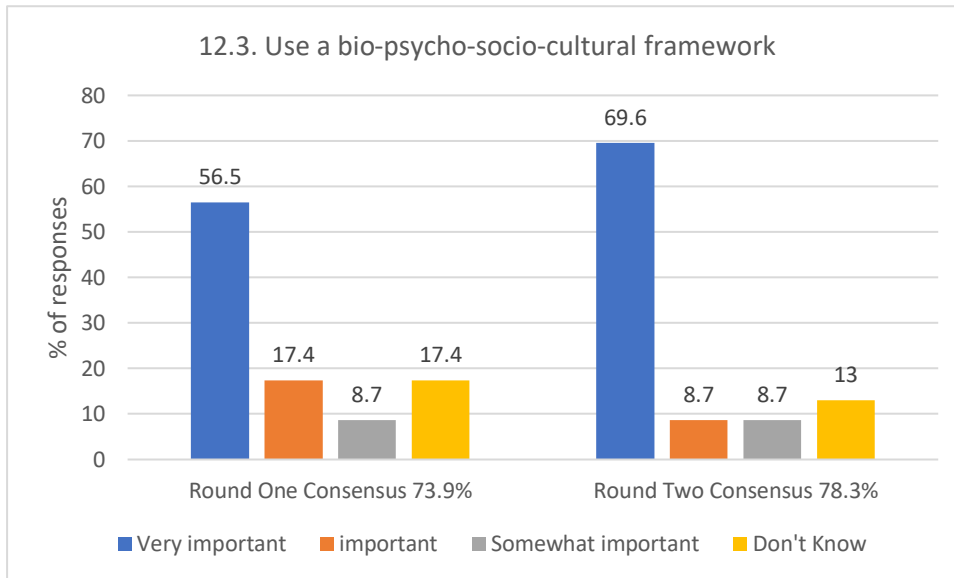


Figure 29

Graph representing statement 12.3, 'Use a bio-psycho-socio-cultural framework'

**Figure 30**

Graph representing statement 12.4, 'Use a cultural model or framework to consider intersectionality, such as the ADDRESSING framework (Hays, 1996) or Dimensions of Personality Identity Model (Arredondo, 2017)'

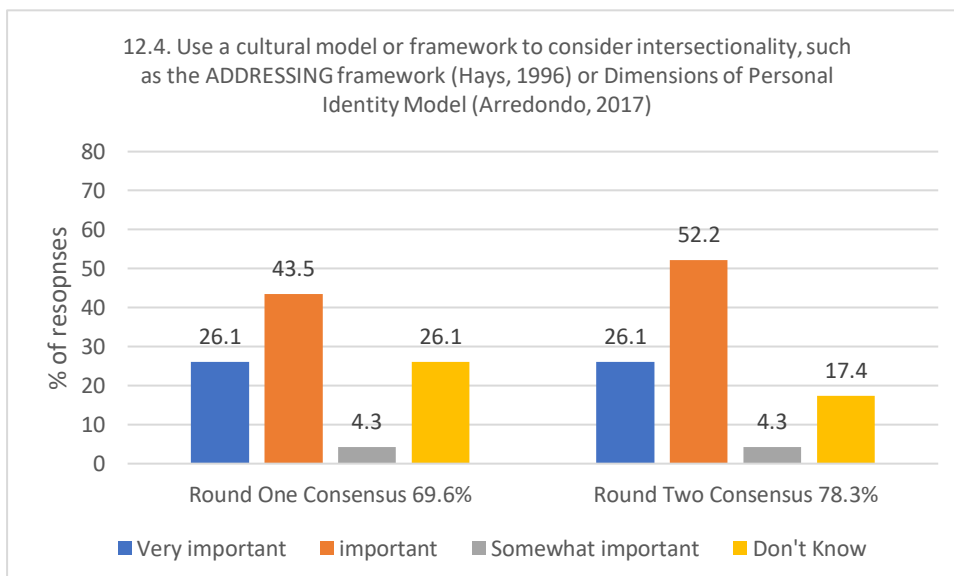
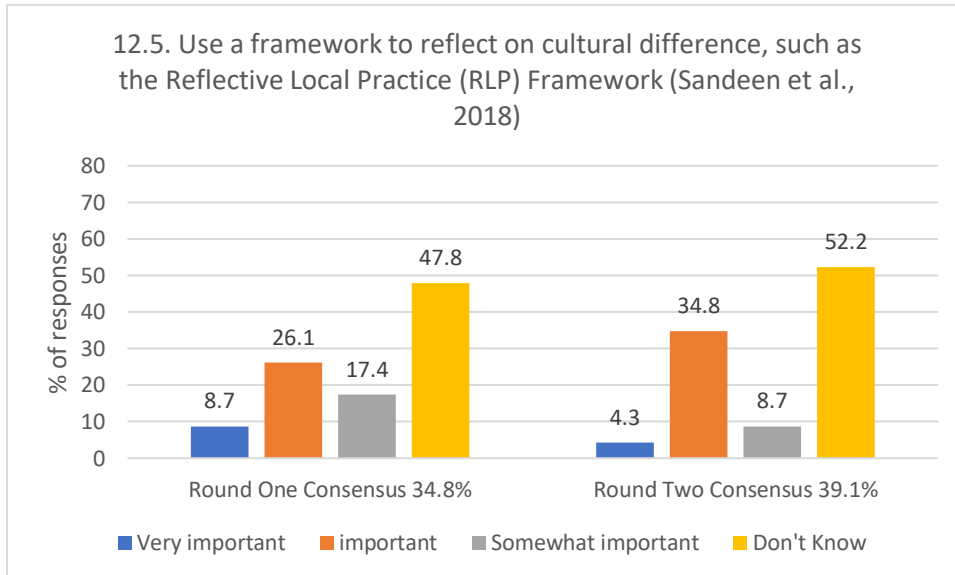


Figure 31

Graph representing statement 12.5, 'Use a framework to reflect on cultural difference, such as the Reflective Local Practice (RLP) Framework (Sandeen et al., 2018)

**Figure 32**

Graph representing statement 12.6, 'Use a framework to adapt and modify interventions to be culturally relevant, such as Hwang's adaptation and modification framework (2006) or the Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)

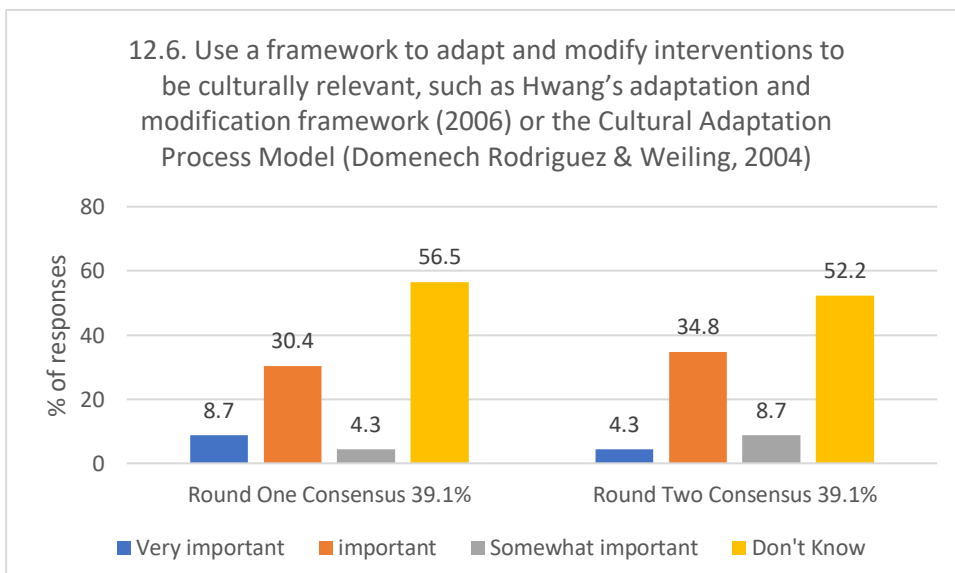
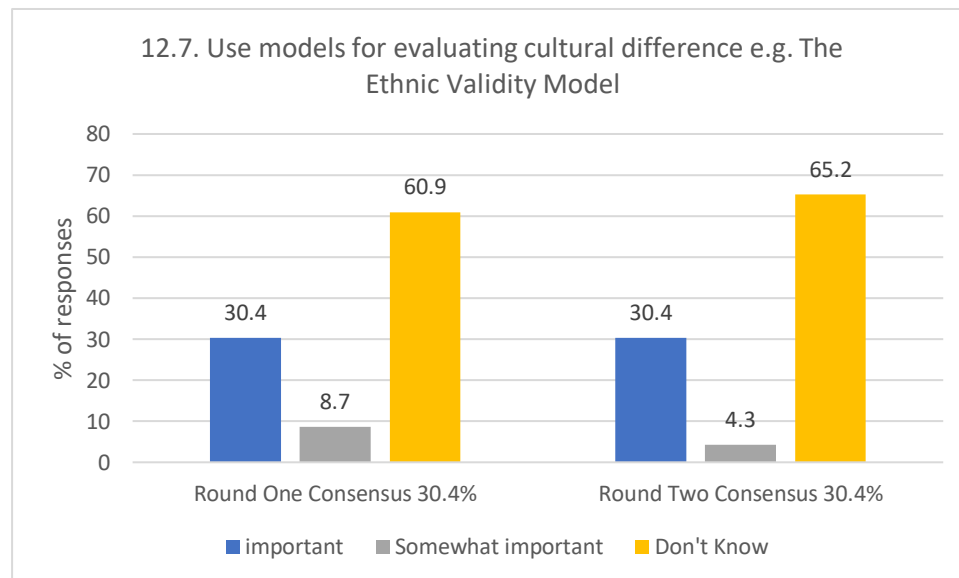


Figure 33

Graph representing statement 12.7, 'Use models for evaluating cultural difference e.g. The Ethnic Validity Model

**Figure 34**

Graph representing statement 12.8, 'Use an ecological model e.g. The Ecological Validity Model (Bernal et al., 1995)

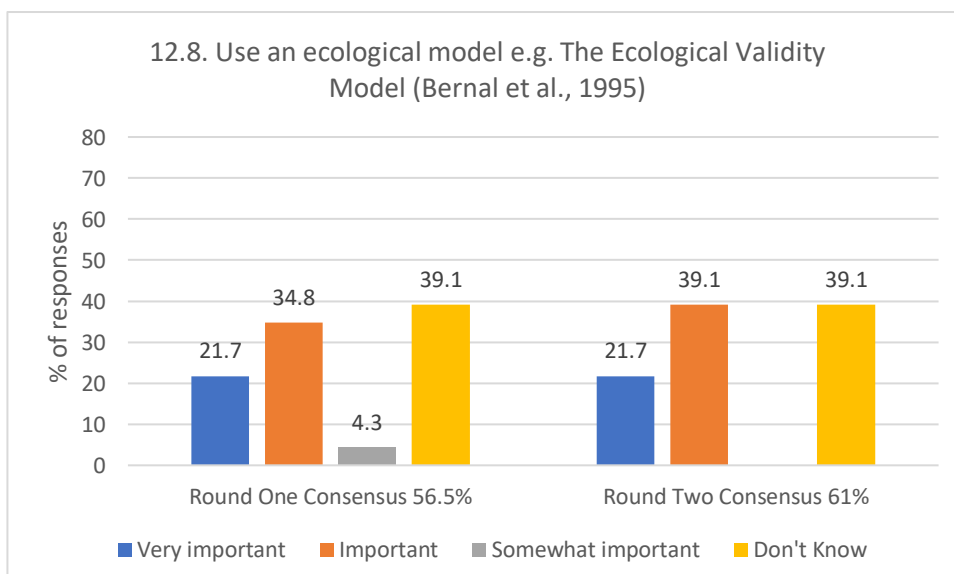


Figure 35

Graph representing statement 12.9, 'Use of models to support understanding of how cultural difference influences identity, e.g. the Minority Identity Development Model (Atkinson et al., 1979)

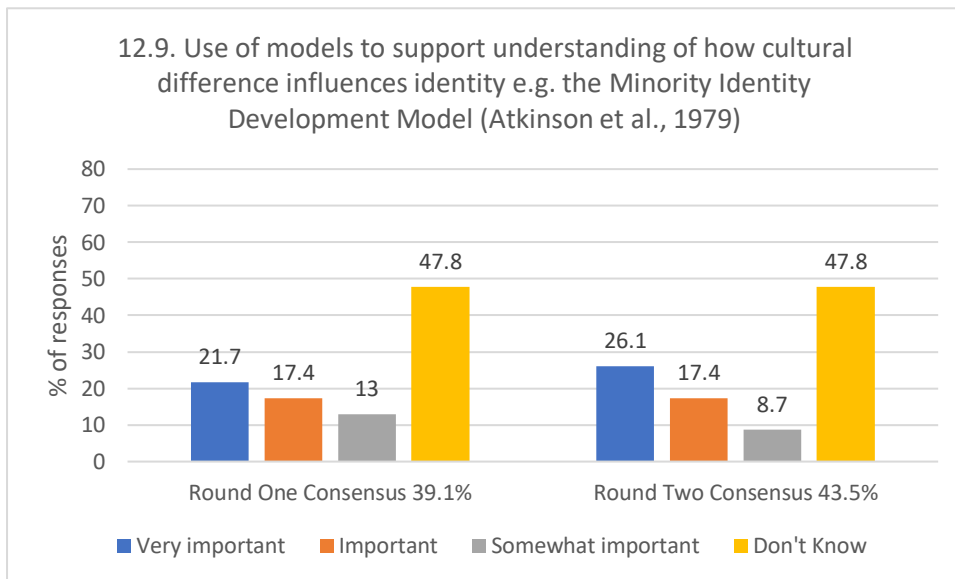
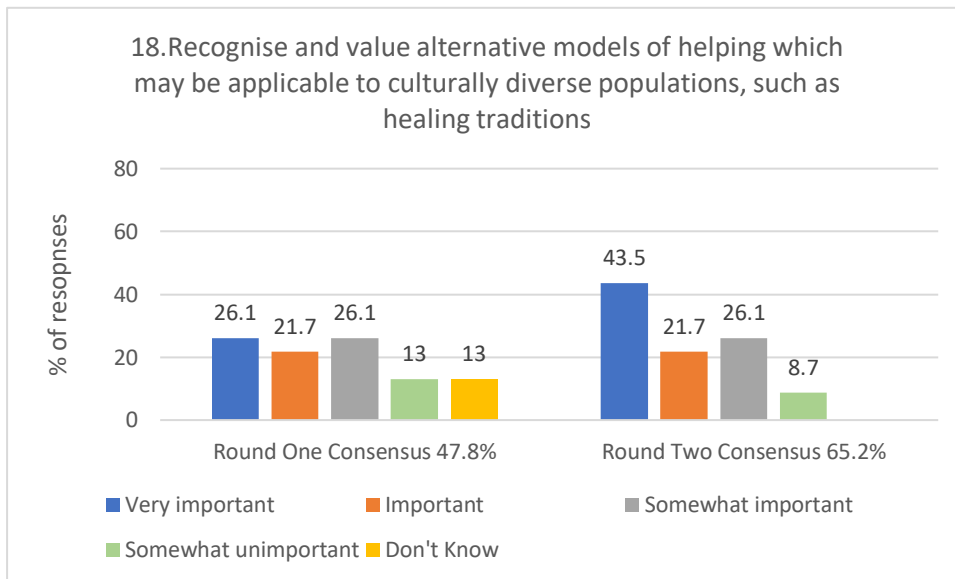


Figure 36

Graph representing statement 18, 'Recognise and value alternative models of helping which may be applicable to culturally diverse populations, such as healing traditions'

**Figure 37**

Graph representing statement 21, 'Conceptualise and validate the problem or beliefs of the individual's culture'

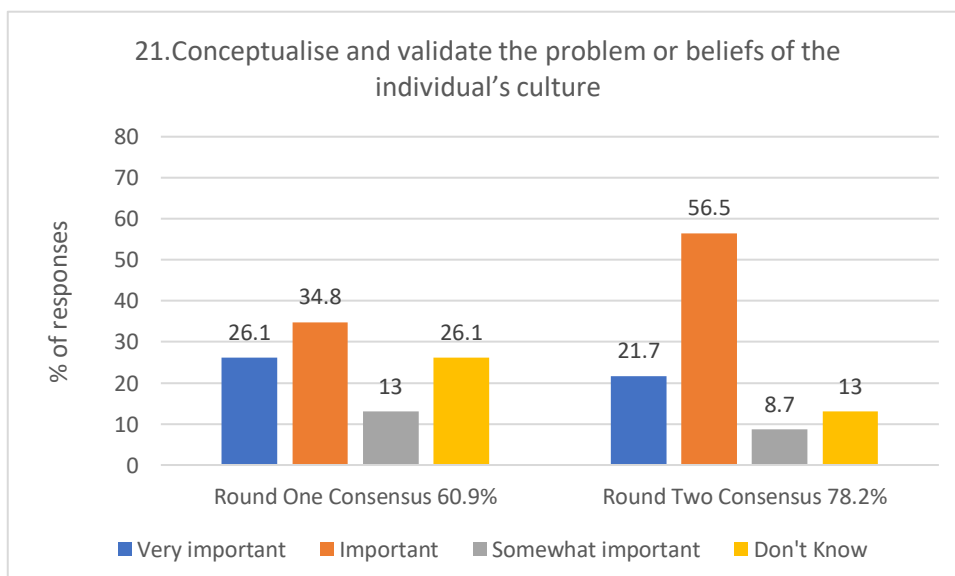
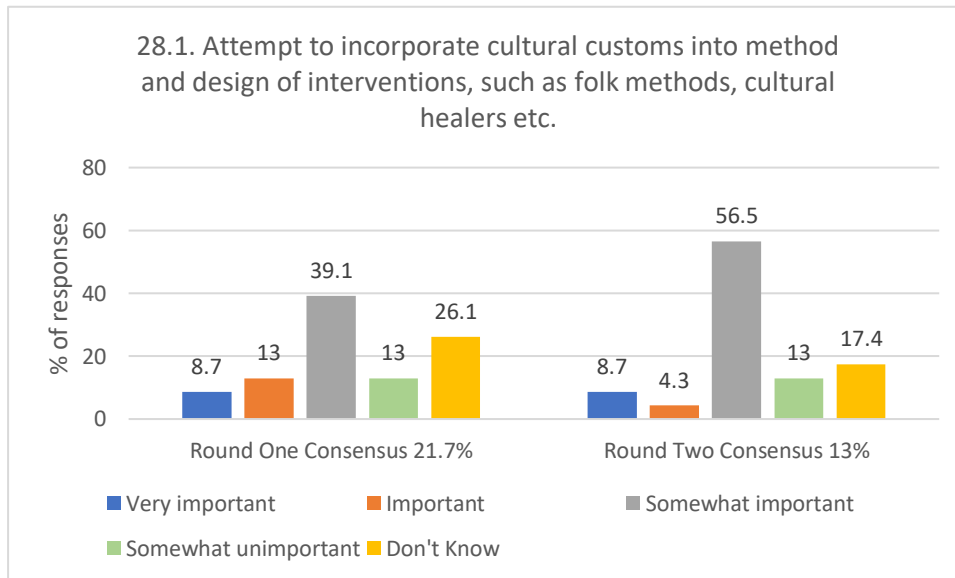


Figure 38

Graph representing statement 28.1, 'Attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc.'

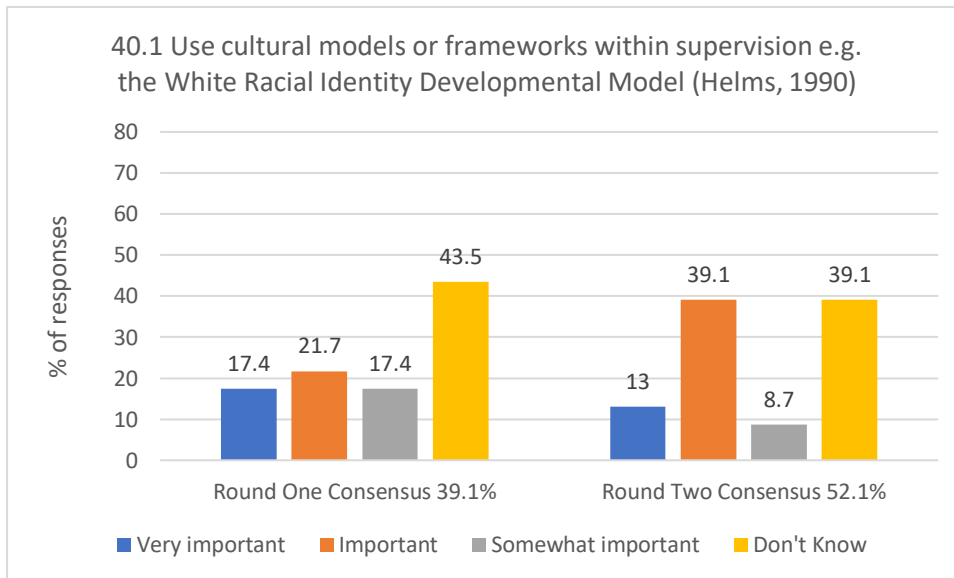


Figures 39-41

Statements which did not reach consensus after round two: *Ensure a Continuous Learning Process: Interpersonal Development*

Figure 39

Graph representing statement 40.1, 'Use cultural models or frameworks within supervision e.g. the White Racial Identity Development Model (Helms, 1990)

**Figure 40**

Graph representing statement 42, 'Consult with cultural experts, such as cultural brokers as appropriate)

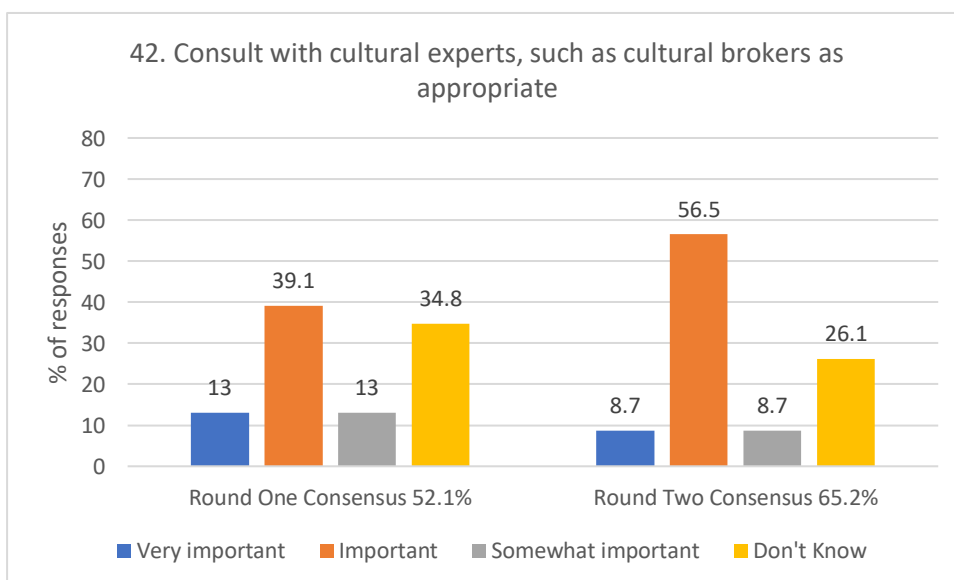
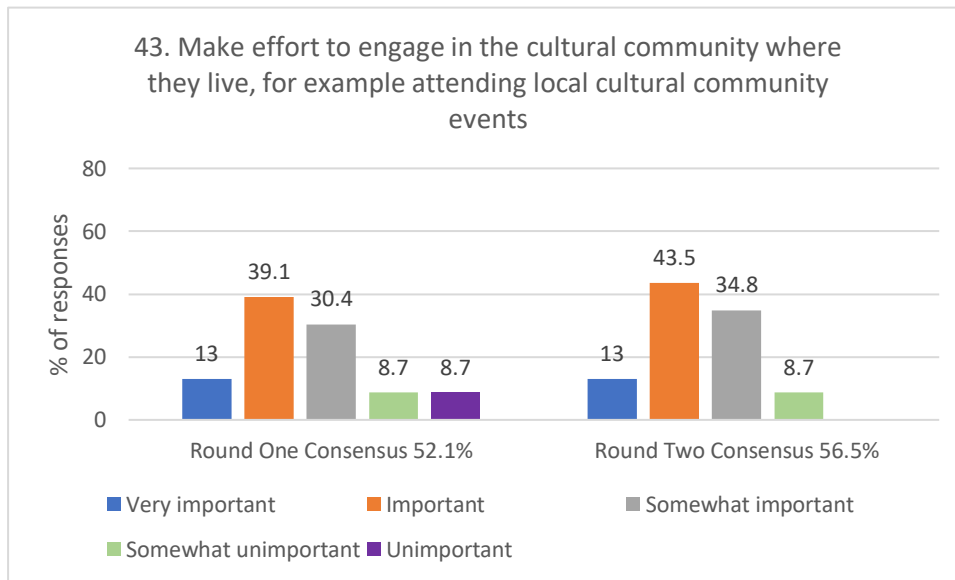


Figure 41

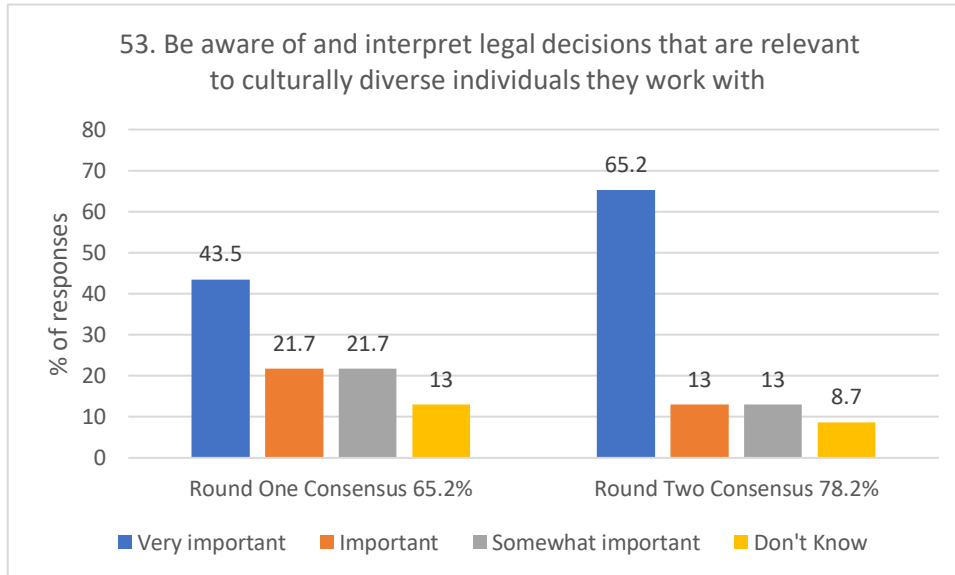
Graph representing statement 43, 'Make effort to engage in the cultural community where they live, for example attending local cultural community events'

**Figures 42-43**

Statements which did not reach consensus after round two: Consider Structural Implications to Culture

Figure 42

Graph representing statement 53, 'Be aware of and interpret legal decisions that are relevant to culturally diverse individuals they work with'

**Figure 43**

Graph representing statement 57.3, 'Consider how to be an ally, activist and advocate for culturally diverse groups and implement appropriate actions (Melton, 2018)'

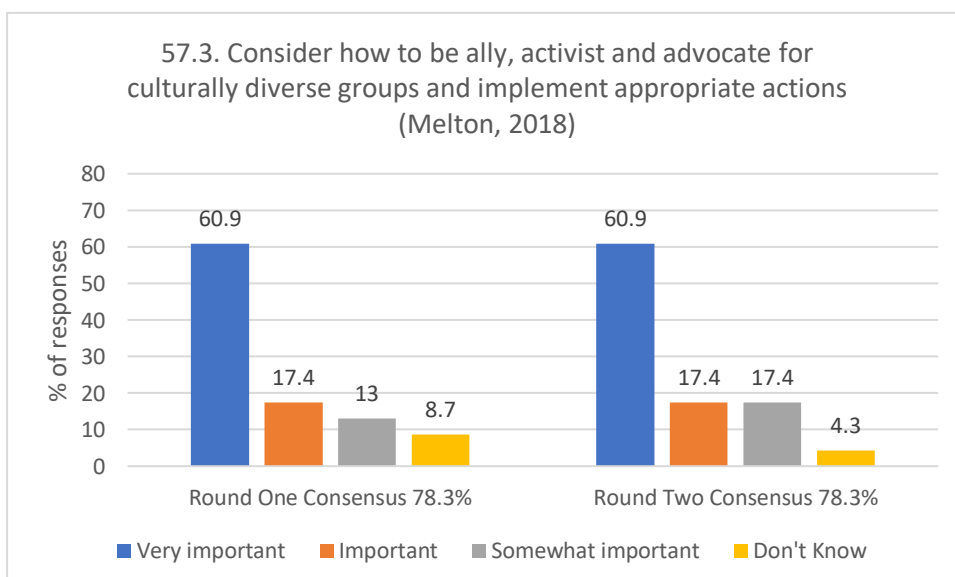
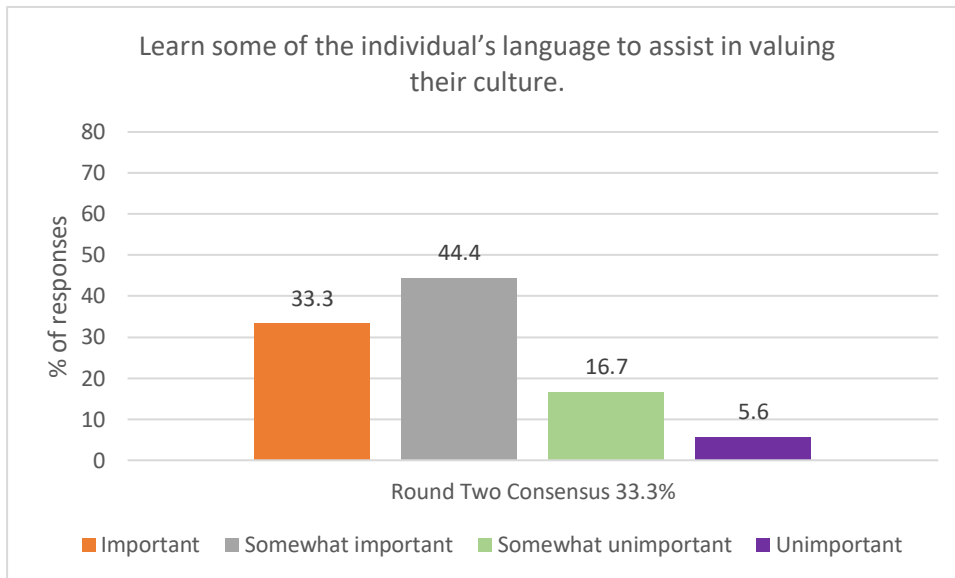


Figure 44

Additional Statement which did not reach consensus after round two: Culturally Responsive Skills, 'Learn some of the individual's language to assist in valuing their culture'



4.8 Final List of Key Features Regarding Developing CRP

82 statements reached consensus and were perceived by EP respondents as 'very important' or 'important' for EP practice. Figure 45 presents a final list of the key features regarding developing CRP, as rated by the group. These are separated into three areas:

1. Apply Culturally Responsive Skills (Initial Relationship Building/Assessment and Intervention)
2. Ensure a Continuous Learning Process (Intrapersonal Development/ Interpersonal Development)
3. Consider Structural Implications to Culture

Figure 45

Final list of key features regarding developing CRP, according to the expert panel

Apply Culturally Responsive Skills

1a. Initial Relationship Building

1. **Create a safe and inclusive environment when working with culturally diverse populations**
2. **Use culturally sensitive verbal and non-verbal communication skills**
 - **When communicating with linguistically diverse individuals, “listen through accents” and “allow more processing time for them to respond to questions” (Lopez & Rogers, 2001, p.298)**
 - **“Use the language used by the individual to describe their difficulties” (Mullins & Khawaja, 2018)**
 - **Take into account potential differences in non-verbal communication, such as eye contact, body language, facial expression**
 - **Recognise how use of particular skills are beneficial for certain individuals, such as how normalisation (identifying that some experiences are encountered by many other individuals) may reassure some individuals (Sue & Zane, 2009)**
3. **Be sensitive and empathetic towards the context that cultural diversity brings to individuals, including empathy for previous difficult cultural experiences, such as oppression**
4. **Communicate a genuine respect and interest in the cultural background of others, recognising the strength in diversity**
5. **Stay constantly aware of the notion of intersectionality: that there may be multiple components which influence an individual’s identity and that culture may interact with these**
6. **Be open and flexible in their approach to working with culturally diverse populations to reflect the constant shifts in cultural and social contexts**
7. **Address any language barriers and be clear with communication to ensure culturally diverse populations can engage in discussions**
8. **Take time to understand how an individual’s culture influences their overall identity, and their attitude towards it**
9. **Empower culturally diverse populations by viewing them as experts of their own cultural experiences**

Apply Culturally Responsive Skills

10. Work collaboratively with children and young people, their families and professionals to ensure a holistic approach to working with culturally diverse populations
11. Use cultural tools to support their approach to working with culturally diverse populations
 - Use objects and symbols relevant to the individual's culture
12. Use cultural models and frameworks to support their approach to working with culturally diverse populations
 - Use an ecosystemic framework
13. Use cultural theories to inform thinking when considering and working with culturally diverse populations e.g. critical race theory
14. Take a critical approach to theoretical paradigms used in practice, considering their appropriateness for use with culturally diverse populations and adapt these to be culturally relevant
15. Consider socio-cultural variables when working with culturally diverse populations, inquiring about factors such as: acculturation, immigration status, intergenerational trauma, religion, family context and practices etc.
16. Use culturally relevant assessments when working with culturally diverse populations, considering their validity.
 - Consider whether standardised assessments are appropriate to use with culturally diverse populations
 - Use assessment tools which are sensitive to culturally diverse populations, such as: dynamic assessment, ecological assessment, contextual assessment, curriculum-based assessment
 - Where appropriate, assess language proficiency in an individual's first language
 - Be creative and use a variety of different assessment tools to gather culturally sensitive information
17. Find ways to assess culturally related strengths
18. Use cultural variables as part of their hypothesis testing
19. "Distinguish between culture and pathology" (Bernal & Saiz-Santiago, 2006, p.122)
20. Recognise cultural differences within assessment and intervention
 - Recognise cultural differences in the expression of distress e.g. somatization vs. worry, to inform their assessment process (Hwang, 2006; Peterson et al., 2017)

1b. Assessment and Intervention

- Recognise there may be differences amongst family structures within different cultural groups, including communication patterns, gender roles etc, which may inform the assessment and intervention process (Ecklund & Johnson, 2007)
 - Consider differences in cultural norms to justify or help to explain behaviour (Ramirez & Smith, 2007) e.g. how learning styles in some cultures may be in direct contrast to White Western styles
21. Plan for and recognise the strengths and limitations of using interpreters
 22. Factor in cultural considerations with ethical decision making i.e. "identify relevant cultural factors" and whether there are "any conflicts between ethical, legal and cultural factors", evaluating the rights and responsibilities of all parties involved (Kelly et al., 2019, p.122)
 23. Conceptualise culture in their case formulations
 24. Bridge differing cultural perspectives from various professionals
 25. Consider important values of certain cultures, such as family members being involved in the process, and ensure their inclusion
 26. Integrate culture into interventions
 - Ensure that culturally relevant strengths are included in any intervention
 - Ensure language used in any intervention is culturally appropriate
 - Frame goals or outcomes within the individual's culture
 - Use therapeutic interventions which are culturally appropriate, such as narrative therapies, psychoeducation, motivational interviewing (Mullins & Khawaja, 2018)
 27. Adapt interventions to be culturally relevant, such as making adaptations to a Cognitive Behavioural Therapy approach (making the language and concepts more relatable)
 28. Consider any barriers to interventions for culturally diverse populations and address these, such as why some cultural groups may not wish to seek help with problems (due to shame or stigma) and approach these in a sensitive way
 29. Evaluate the effectiveness and appropriateness of their suggested interventions, constantly reviewing how congruent it is with the individual's culture
 30. Incorporate culturally appropriate information into their reports, such as cultural characteristics (language, level of acculturation etc), use of translators etc.
 31. Refer individuals or families to other culturally responsive support, where appropriate
 32. Consider how EAL children and young people perceive the English culture and language as the dominant one and be mindful of how this may influence their refusal to acknowledge their native language / culture

Ensure a Continuous Learning Process

2a. Intrapersonal Development

33. Increase awareness and understanding by exploring one's own cultural identity
34. Reflect on and explore one's own personal biases and assumptions, accepting that these may have an impact on how they communicate with culturally diverse populations
 - Reflect on one's own hot spots (those who have "experienced powerlessness in aspects of their lives and understandably have strong emotions associated with that dimension") blind spots (being "unaware of relevant cultural information due to unexamined assumptions of one's own background") and soft spots (holding "unexamined assumptions which lead to deviations from usual practice") (Sandeen et al., 2018, p.145)
 - Reflect on aspects such as White Privilege
 - Use tools such as an Implicit Association Bias test to reflect on one's own biases (Sandeen et al., 2018)
35. Recognise that topics around cultural differences can cause discomfort (e.g. race, social class, religion, spirituality), and push through these so they can understand the complexity of individual's cultural experiences
36. Avoid making assumptions about an individual's cultural background and experiences, ensuring that they do not overgeneralise or undergeneralise anyone's cultural background
37. Seek ongoing training opportunities to develop their levels of cultural responsiveness (i.e. training courses, experiential activities)
38. Engage in and seek basic training on cultural responsiveness

2b. Interpersonal Development

39. Explore cultural differences and similarities between oneself and others when engaging in consultation i.e. between clients and/or consultees
40. Consider and pursue discussions around culture in supervision
41. Explore cultural differences and similarities in their supervisory relationship (as supervisor or supervisee) (Eklund et al., 2014)
42. Educate others by helping them become aware of cultural differences and encourage others to reflect on their own biases and values related to cultural difference
43. Model and impart culturally responsive practice onto others i.e. initiating conversations about culture and demonstrate the type of support that is required for culturally diverse individuals
44. Use cultural reframing to recognise when negative cultural perceptions are being used
45. Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference
46. Recognise and acknowledge when others have biased views, showing prejudiced beliefs or ignoring their privilege, and challenge individuals, whether they are supervisees, supervisors, staff or other professionals
47. Recognise and address power inequities
48. Make conscious efforts to gain feedback from others (culturally diverse clients, supervisors, other professionals etc) to evaluate their levels of cultural responsiveness
49. Promote and commit to engaging in culturally responsive research with those from culturally diverse backgrounds
50. Take an active role in pushing the topic of cultural responsiveness higher up the organisational systems

Consider Structural Implications to Culture

51. Ensure work is based within an ecological and sociocultural context
52. Attend to the multicultural climate of the community they are working in, such as a school or setting
53. Support and instigate appropriate policy adjustments to support institutions working with culturally diverse individuals
54. Provide culturally responsive support at a systems level to ensure all culturally diverse individuals are supported i.e. school staff development
55. Engage in anti-oppressive practice and social advocacy of cultural groups, to reduce biased beliefs and discriminatory practices
 - Conduct cultural audits in one's place of work to assess potential barriers to access for culturally diverse populations (Collins & Arthur, 2007)
 - Support community-led responses to cultural issues (Mullins & Khawaja, 2018)
 - Facilitate the development of appropriate resources for culturally diverse children, young people and their families
 - Ensure the success of minority supervisees (Kelly et al., 2019)
56. Learn how to deliver traded services and service level agreements which have culturally responsive practice embedded within the contracting with consumers
57. Promote greater aspirations for teenagers, such as more BAME university students studying psychology with a belief that they could go on to become a "Dr" and an EP
58. Deliver training programmes to school staff being informed by culturally responsive practice

Table 14 provides a summary of the total number of statements rated in this Delphi study and the final number of statements which met and did not meet consensus at the end of round two.

Table 14

Summary of statements rated in this Delphi study

Statements	Count
Total number of statements generated from the review of the literature	96
Total number of additional statements generated by respondents at the end of round one	7
Total number of statements rated by respondents across round one and round two	103
Total number of statements that met consensus i.e. were rated as either '<i>very important</i>' or '<i>important</i>' by respondents at the end of round two	82
<i>Statements meeting consensus at the end of round one</i>	68
<i>Statements meeting consensus at the end of round two</i>	14
<i>Statements generated from the literature</i>	76
<i>Additional statements generated by respondents</i>	6
Total number of statements where consensus was not met	21
<i>Statements generated from the literature</i>	20
<i>Additional statements generated by respondents</i>	1

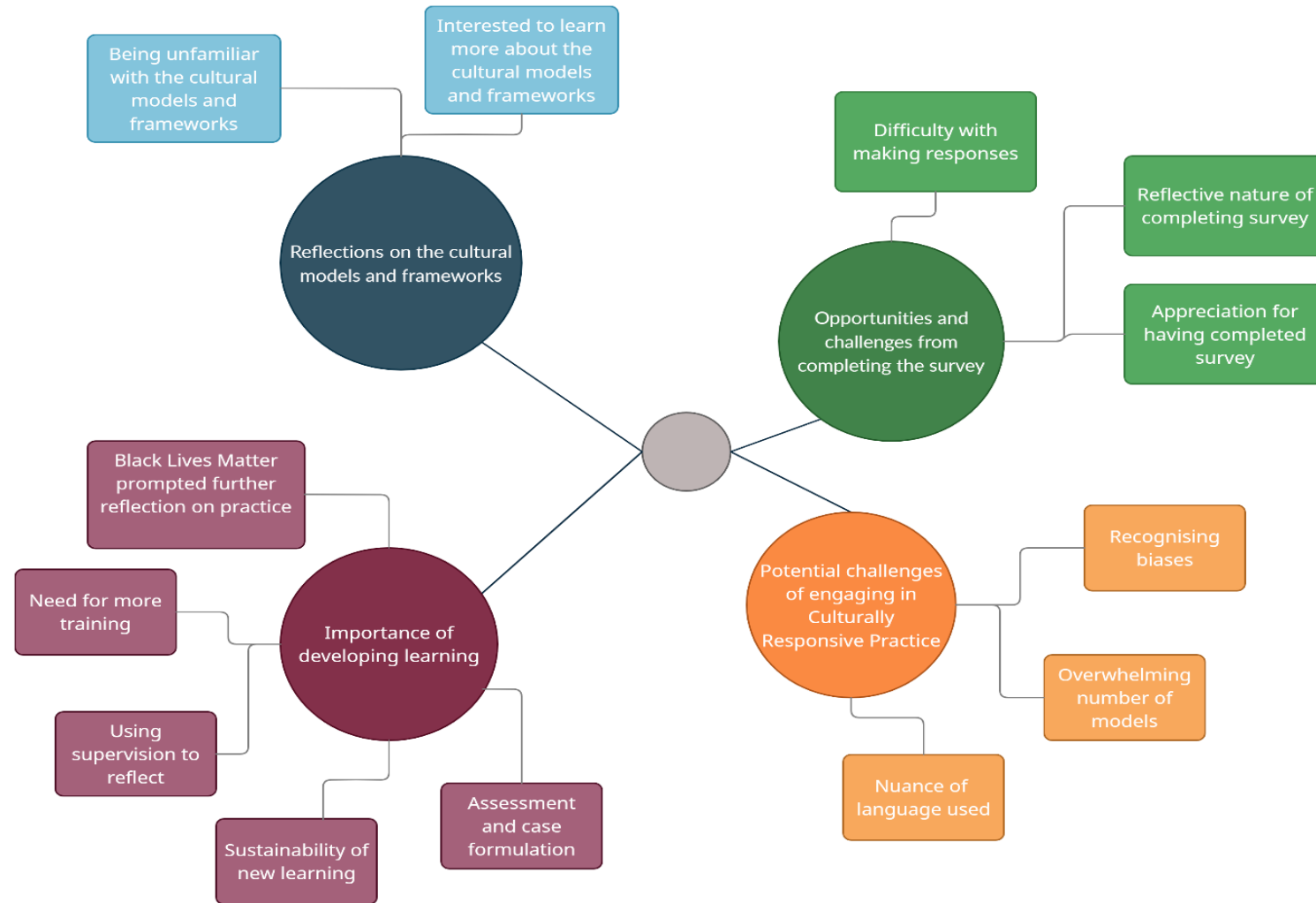
4.9 Respondent Reflections

Respondents who participated in round one were invited to make any reflections or comments on their participation. Respondents were prompted to consider where they may have chosen the 'don't know' response and were invited to comment on any unknown aspects of CRP, and whether they had an interest to learn more about these areas or not. 16 out of 23 participants provided additional comments, which are outlined in Appendix O.

Respondent reflections were thematically analysed using Braun and Clarke's six-stage approach (2006) (these stages are described in more detail in the Methodology chapter). As respondents were prompted to comment on whether they had chosen 'don't know' to any responses and had an interest to learn more about unknown areas, a deductive thematic analysis was chosen, as comments were initially analysed focusing on this area. Through this analysis, other reflections emerged, which are illustrated as a thematic map in Figure 46.

Figure 46

Thematic map of EP comments after completing survey one



4.9.1 Reflections on the Cultural Models, Tools and Frameworks

Several participants reflected that their 'don't know' responses were in relation to not being aware of some of the cultural models, tools and frameworks which were referenced, and they expressed a wish to learn more about these:

"I'd love to know more about the models identified in this survey - they are clearly going to be very helpful in addressing cultural responsiveness in EP practice but I've not been aware of them until completing this survey".

"I was not familiar with several of the culturally responsive tools that were specific referenced e.g. in the assessment section. I would be interested in learning more about these and their application".

"I wonder whether there is duplication of ideas in different models/frameworks or whether they are very different/ unique. I would like to distil what are the key principles informing culturally responsive practice and identify tools that enable me to work more effectively in this way".

"Tended to answer with 'don't know' for questions relating to cultural models etc. This is an area I have limited awareness of, and didn't feature in my recent training or CPD. This has made me aware of gaps in my knowledge and practice which I'd like to explore and respond to".

4.9.2. Challenges and Opportunities from Completing the Survey

Another theme which emerged from the respondent comments was both the challenges and opportunities which came from completing the survey. In terms of challenges, one respondent highlighted the difficulty in rating the statements, as they felt their response would be dependent on the nature of their involvement:

“Answering some of the questions was difficult, as I felt my response would depend on the level and nature of my involvement and the individual themselves- so the nuance of response could not be reflected in the answer”.

The nuances linked to the use of the word ‘safe’ was questioned by one respondent in the statement, ‘Create a safe and inclusive environment when working with culturally diverse populations’:

“I don’t know about this. I wonder whether as a white woman working with clients/families who have experienced racism from other white people: does it truly feel safe?”

The nuance behind other statements was also reflected on by one respondent:

“On the item re: using their language, I agree and also wonder about ‘what if their preferred language is deficit-driven? negative about the self?’; is there an opportunity to engage in some narrative re-authoring by introducing something different? The other bit I wondered about is the degree of say racial trauma that is experienced by

certain groups and whether they would feel able to use the word racism with me - might the possibility exist that someone calling what something has been/is could be of help or benefit to the service user?"

"Collaboration can look very different for different families and how each expresses their culture e.g., some families feel very strongly about hierarchy and respect to be displayed to others and may find more Western constructions of collaboration more uncomfortable/unhelpful at least at first perhaps?"

"I don't know whether I see things as pathology vs culture or distinguishing between them? Some behaviours are 'pathological' [I am not sure I might mean the same things as others by choosing this word!] within the cultural group/families own expression of culture; some aren't".

In terms of opportunities, some respondents commented on how completing the survey has prompted further reflections, and were appreciative of the opportunity to take part in this research:

"Thought provoking questions. Make you realise that although we may have a broad awareness of the importance of cultural sensitivity, there are perhaps a much wider range of specific instruments out there by which increased understanding and efficacy of our practice in this area might be supported"

"I welcome this research in our profession and I'm grateful for the learning that has come from simply taking part"

“This is such important research and a truly helpful and stimulating exercise to engage in: much to consider further!”

4.9.3 Challenges of Engaging in CRP

Some of the respondent reflections highlighted potential challenges which may arise through engaging in CRP. Such challenges included the possibility of becoming overwhelmed through the number of cultural models and frameworks, and the uncomfortable nature that may be evoked through exploring one’s own biases:

“There are so many different models/frameworks it can feel overwhelming where to start in terms of learning more”.

4.9.4 Importance of Developing Learning

What was apparent from respondent reflections was that this is an area which needs ongoing learning. Suggestions that were offered included the need for further training in this area and utilising supervision to continue experiential learning. Some respondents identified that the BLM movement had supported further reflection in this area, and another respondent considered how this learning can be sustained and embedded into EP practice:

“The sustainability of new learning and embedding this into everyday practice is important for me, whatever I do needs to continue beyond a training event or team discussion. Continuous experiential learning through relationships such as supervision I feel are also important for this.”

“There is a clear need for more training in this area for all EPs I think.”

“The recent BLM events and discussions have prompted me to reflect on my practice and own biases much more. I've recognised that I haven't been considering families cultures enough within my work - something I did much more of when training as an EP due to continued discourses within teaching sessions and fellow trainees”.

“I would like to state that my responses have been informed signification following the events and dialogue of recent months and following the increased narratives around Black Lives Matter. My own unconscious bias and passivity to structural racism has been uncomfortably recognized and I am endeavouring to respond through learning, listening and giving energy.”

5. Discussion

5.1 Aims of the Research

The overall aim of this exploratory research was to answer the following question;

- **How can EPs develop CRP?**

and the following were additional questions which were addressed during this research;

- **How do EPs consider culture within their practice?**
- **What empirical research is available which demonstrates how EPs can be culturally responsive in their practice?**
- **What models, tools or frameworks are available to support EPs in developing CRP?**

Through use of a Delphi method, this research has identified 82 statements linked to CRP which a panel of EPs perceive to be 'very important' or 'important' for their practice. These statements have formed a reflective framework which can be used by EPs, whether new or experienced practitioners in the profession, to reflect on their levels of cultural responsiveness, and consider areas in which they would like to develop their CRP further. It is important to recognise that this framework does not include an exhaustive list of CRP key features; these statements were those largely identified and formed by the researcher from the literature, and which subsequently met consensus by a group of EP respondents as being deemed important for EP practice.

However, these statements provide a starting point for supporting EPs to reflect on their levels of cultural responsiveness and commit to furthering CPD in an important area of practice.

The statements (predominately identified from the literature) formed themes related to CRP which largely focused on description and organisation of semantic content; however, it is recognised that analysing the responses and comments from the surveys will support theorising and interpretation (Braun & Clark, 2006). Whilst it is beyond the scope of the discussion to analyse each statement within the framework, this discussion will summarise key themes from the findings, compare these findings with existing literature, and consider their implications for practice.

5.2 Statements Achieving Strong Consensus

When considering the key features of CRP, statements which achieved the strongest consensus levels amongst EP respondents i.e. at least 80% of respondents rated statements as 'very important', were around the skills related to building relationships with culturally diverse populations, including creating a safe and inclusive environment (100%), being sensitive and empathic towards the experiences of culturally diverse populations (95.7%) addressing language barriers and providing clear communication (95.7%), empowering culturally diverse individuals, recognising they are experts within their own cultural experiences (95.7%) and communicate a genuine respect and interest in the cultural background of others, recognising the strength in diversity (87%). Features of relationship building, inclusivity and empowerment are arguably integral to general EP practice and were also key themes in UK based literature around

cultural responsiveness (German, 2008; Lawrence, 2014; Rowley et al., 2020), so it is perhaps unsurprising that these areas were identified by respondents as very important in relation to CRP. Similarly, respecting the values and cultures of others was a theme drawn from EPs in Ratheram's action research in developing practice when working with minority cultural and linguistic communities (2020).

The importance of addressing language barriers was also found to be a key part of cross-cultural competency in Rogers and Lopez' studies, where 'language' was identified as an area reaching strong consensus from their group of cultural experts, including skill in working with translators and using culturally sensitive verbal and non-verbal communication styles (2002). Statements from Lopez and Rogers' studies were incorporated into statements in the current research, including 'when communicating with linguistically diverse individuals, "listen through accents" and "allow more processing time for them to respond to questions"' (2001, p. 298) so it is encouraging that these statements met consensus in both research studies with different expert panels, albeit under different categories and parameters.

Another area of CRP which reached strong consensus levels were statements related to assessment and intervention. Key features which were deemed as 'very important' from respondents included collaborative working (87%), using an ecosystemic framework (87%), considering whether standardised assessments are culturally appropriate (87%), using assessment tools which are culturally sensitive, such as dynamic, ecological, contextual, curriculum-based (87%), and addressing barriers to interventions, considering why some cultural groups may not wish to seek help i.e. due to stigma, and approach this with sensitivity (87%). This notion of moving away

from within-child factors and considering the systems around the CYP is an important component within EP practice and has been highlighted to be significant when working with culturally diverse populations (Gaulter & Green, 2015). These results largely align with findings from Rogers and Lopez' studies, where assessment was one of their categories deemed most important by their expert panel. Considering the level of cultural bias and inaccuracies with results that can come from inappropriate use of assessment tools (Reynolds & Suzuki, 2013; Skiba et al., 2002), it is also somewhat unsurprising that these statements have been deemed very important by respondents.

In addition to statements which were sensitive to cultural bias within assessment, statements which considered biases more broadly when ensuring continuous learning and considering structural implications of culture, similarly reached strong consensus levels. On an intrapersonal level, this was the importance of exploring one's own biases (95.7%) and the components within that i.e. 'hot spots' and 'blind spots' (Sandeen et al., 2018) (95.7%). On an interpersonal level, this was to 'recognise and acknowledge when others have biased views, showing prejudiced beliefs or ignoring their privilege, and challenge individuals, whether they are supervisees, supervisors, staff or other professionals' (82.6%). Another statement linked to biases which met consensus amongst respondents was, 'educate others by helping them become aware of cultural differences and encourage others to reflect on their own biases and values related to cultural difference', where 86.9% of respondents rated this as 'very important' or 'important' for EP practice. This was seen to be an important feature of German's research (2013) which highlighted the potential impact narrative approaches can have in facilitating these discussions around cultural differences between individuals. Furthermore, the statement that demonstrated the largest

change in consensus from round one to round two was around biases, 'use tools such as the Implicit Association Bias Test to reflect on one's own biases' which increased in perceived importance from 56.1% in round one to 86.9% in round two.

The release of survey one of this research came shortly after the resurgence of the BLM movement which provoked frank discussions and reflections amongst the profession, indicated by some of the comments provided by respondents. Therefore, statements which addressed the importance of EPs exploring their own biases and supporting others in addressing discrimination may have felt particularly pertinent to respondents at the time of completing survey one. Acknowledging biases was a recurring theme in the literature across SP practice (Eklund et al., 2014; Grant et al., 2008; Hass & Abdou, 2018; Hatzichristou et al., 2006; Parker et al., 2020; Ramirez & Smith, 2007; Rogers & Lopez, 2002; Rogers, 2000; Rogers et al., 1999; Saxton, 2001; Simcox et al., 2006) and more broadly within the psychological professions (Arora et al., 2017; Arredondo & Perez, 2006; Collins & Arthur, 2007; Melton, 2018; Richmond & Jackson, 2018; Sandeen et al., 2018; Weiss & Rosenfield, 2012). Whilst it is argued that the topic of bias appeared in fewer statements in Rogers and Lopez' study, similar findings were concluded, where they found that "eliminating biases, prejudices, and discriminatory practices" was a key component of 'cross-cultural competence' (2002, p. 131).

As highlighted in the topic of biases, it is worth noting that several statements which reached strong consensus from respondents came from papers sourced through the wider literature search i.e. referencing psychologists more generally. For example, some of the statements linked to sensitive verbal and non-verbal communication skills were lifted directly from papers focusing on psychologists (Mullins & Khawaja, 2018),

forensic psychology (Weiss & Rosenfield, 2012) and psychotherapy (Sue & Zane, 2009). The importance of considering intersectionality also reached strong consensus amongst the EP panel (100% consensus overall, with 82.6% rating it as 'very important'), which was referenced in several papers focusing more broadly on psychological professions (Arredondo & Perez, 2006; Hwang, 2006; LaRoche & Maxie, 2002; Sandeen et al., 2018; Tummala-Narra et al., 2018). These results suggest that broadening out the literature search to include psychological professions more generally was warranted, as respondents have agreed that many of these features are directly applicable and important to consider within EP practice. This method of reviewing literature from other psychological professions was also adopted by Rogers and Lopez in their 2002 Delphi study, where they found that more competencies derived from their literature search (43%) were deemed essential than those derived from the expert panel (31%), providing further warranty for adopting this method.

5.3 Statements Which Did Not Reach Consensus

21 statements did not reach consensus amongst respondents and were subsequently not identified as key features of developing CRP for EPs. Over half of the statements which did not reach consensus (n=12) were referring to cultural models, tools or frameworks, drawn from the literature:

1. Use cultural interview schedules, such as the Cultural Formulation Interview (from DSM-V) or the Jones Intentional Multicultural Interview Schedule (JIMIS) (Jones, 2009)

2. Use tools to identify cultural strengths, such as The Cultural Assets Identifier (CAI) (Aganza et al., 2015)
3. Use tools such as cultural genograms to explore cultural backgrounds and beliefs
4. Use a cultural consultation model or framework, such as The Multicultural School Consultation (MSC) Framework (Ingraham, 2000) or the Culture Specific Consultation Model (CSCM) (Nastasi et al., 2004)
5. Use a bio-psycho-socio-cultural framework
6. Use a cultural model or framework to consider intersectionality, such as the ADDRESSING framework (Age and generational influences, Developmental Disability, Disability acquired later in life, Religion and spiritual orientation, Ethnicity/racial identity, Socioeconomic status, Sexual orientation, Indigenous heritage, National origin, Gender) (Hays, 1996) or Dimensions of Personal Identity Model (Arredondo, 2017)
7. Use a framework to reflect on cultural difference, such as the Reflective Local Practice (RLP) Framework (Sandeem et al., 2018)
8. Use a framework to adapt and modify interventions to be culturally relevant, such as Hwang's adaptation and modification framework (2006) or the Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)
9. Use models for evaluating cultural difference e.g. The Ethnic Validity Model
10. Use an ecological model e.g. The Ecological Validity Model (Bernal et al., 1995)
11. Use of models to support understanding of how cultural difference influences identity e.g. the Minority Identity Development Model (Atkinson et al., 1979)
12. Use cultural models or frameworks within supervision e.g. the White Racial Identity Developmental Model (Helms, 1990)

Frequency statistics for statements suggest that the reason these statements did not reach consensus was due to many respondents selecting the 'don't know' response. 'Don't know' responses varied between 13-65.2% on statements which referenced cultural models, tools or frameworks. Furthermore, 12 respondents provided additional comments at the end of survey one which stated that their 'don't know' responses were in relation to being unfamiliar with some of the models, tools or frameworks referenced, providing further evidence for this reasoning.

Many of the models, tools and frameworks which were referenced in the SLR predominately focused on SP practice in the US. Some of the models, tools and frameworks were also sourced through the broader literature search which reviewed papers outside of EP or SP practice. For example, the Minority Identity Development Model (Atkinson et al., 1979) and the Reflective Local Practice Framework (Sandeen et al., 2018) were referenced in papers which spoke of psychologists more generally (Arrendondo & Perez; Sandeen et al., 2018). This may provide some explanation as to why these models, tools and frameworks were somewhat unfamiliar to EPs in the UK. That said, aspects of these models were acknowledged as important for practice, as the statement linked to 'hot spots' and 'blind spots' came from Sandeen et al.'s Reflective Local Practice Framework (2018) and met consensus amongst the EP panel.

The SLR summary of non-empirical articles identified that whilst there are a number of models, tools and frameworks referenced in the literature, there is minimal understanding as to the efficacy of using these models in practice, which provides

further reasoning for why respondents may not have felt they were able to rate these according to their perceived importance for EP practice. Nevertheless, respondents recognised the importance of using cultural models, tools and frameworks more generally to support their approach to working with culturally diverse populations, as these statements reached consensus amongst the respondent panel. However, these statements only reached consensus after round two, with a percentage of respondents still selecting the 'don't know' response. The statement, 'use tools such as the Implicit Association Bias Test to reflect on one's own biases' met consensus after round two, however one respondent offered further reflection around its efficacy:

"I have completed it but seen mixed messages as regards its effectiveness? Trying to get at and deal with my own implicit biases is essential, I am just not sure about the IAT itself?"

This suggests that whilst tools can be useful to support learning, understanding more about the efficacy of tools for practice is important. Considering that most statements which referenced specific models, tools and frameworks did not meet consensus, it is understandable that EPs may have been unsure of how important using these in a more general sense would be for EP practice. Developing an understanding of these models, tools and frameworks may be a key area of intervention within EP practice regarding future implications (which will be further explored later in this chapter).

Of the remaining statements which did not reach consensus, two were connected to specific cultural traditions, 'recognise and value alternative models of helping which may be applicable to culturally diverse populations, such as healing traditions', where

less than half of respondents rated this as 'very important' (43.5%) and, 'attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc', where only 8.7% of respondents rated this as very important for EP practice. One hypothesis for the low levels of perceived importance for this area may be due to EPs feeling that they have less understanding of the efficacy of using specific cultural customs, which could lead to decreased confidence levels in valuing these, or less understanding in how these could be integrated into interventions.

Another statement which did not reach consensus was around language used with culturally diverse populations, 'where appropriate, use a subtle approach to questioning and avoid direct or intrusive questioning'. Whilst a large percentage of respondents rated this as 'very important' (69.5%) one respondent offered reflections which may explain why it did not meet consensus,

"direct questions have a place e.g., in families whose preference is more direct than less, when there are English language learning factors and less direct questions can be quite confusing or unhelpful and when dealing with safeguarding and risk".

This comment helpfully illustrates the potential nuance of some statements and why respondents may not have felt confident with generalising the components within the statement: this emphasises the importance of taking an individualised approach as statements may not necessarily be helpful in all contexts.

5.4 Strengths of the Research

5.4.1 Pragmatic Outcome

There are several strengths that can be identified from the current research. From a pragmatist perspective, the purpose of the research was to seek ways in which EPs can develop CRP, through prescriptive information, to both influence EP practice and have a positive impact on outcomes for CYP from culturally diverse backgrounds. This information is argued to be socially justifiable if those within a specific community support it (Rorty, 1979). The key features linked to developing CRP were predominately identified through literature written by psychologists in the profession with an understanding of CRP, and a large amount of this knowledge was identified by respondents with experience responding to cultural difference as key features of CRP for EPs. Whilst this is not an exhaustive list and little still exists about UK EP practice in this area, practice from comparable fields appears to be relevant to draw on; this information contributes to further understanding in this area of research for EPs, and it is hoped that this will have a positive impact on raising awareness of, and developing CRP in the profession.

5.4.2 Experience and Participation of Expert Panel

Secondly, it is argued that EP respondents who formed the expert panel had a good level of experience in engaging in CRP; over half of respondents perceived themselves to meet all three criteria set out by the researcher. This suggests that the respondents met sufficient thresholds and had relevant experience in the topic being addressed. Additional comments provided by some respondents also implied that they

were motivated to participate and were grateful for further research in this area of practice, which may explain the low attrition rates (similar to Jago's 2019 Delphi study, 18 out of 23 respondents from round one participated in round two (78%)).

As well as sharing their motivation to engage in this topic, another hypothesis for the low attrition rates may be linked to the number of statements which respondents were asked to rate. The current research had significantly fewer statements for respondents to rate in comparison to other Delphi studies. For example, respondents were required to rate 260 and 459 statements in Lopez and Rogers' studies (2001; 2002). The number of statements in the present study (n=102) was similar to Green and Birch's Delphi study (n=138) who similarly had low attrition rates (2019). The researcher weighed up the strengths and challenges of having a large number of statements; whilst it could be argued that having fewer statements minimises the overall breadth within CRP, the researcher completed an in-depth analysis of literature and grouped areas into key themes, with the intention of making the survey more accessible for respondents to complete.

Another possible reason for the low drop-out rate was that the researcher chose to adopt a two-round Delphi method, where respondents were asked to complete only two rounds of surveys. Delphi studies tend to adopt at least two rounds, but often studies incorporate additional rounds, which may cause respondents to drop out due to the commitment levels needed to participate (Donohoe & Needham, 2008). A final explanation for the low attrition rates may be due to the self-selected nature of the respondents. In the current study, respondents identified their relevant experience linked to CRP and nominated themselves to participate. This is in comparison to

Rogers and Lopez' studies where the panellists were identified based on their inclusion criteria, then subsequently approached and invited to participate. This may suggest that respondents in the current research felt they had more autonomy in participating.

5.4.3 Respecting Individual Perspectives

A third strength of the research was that the researcher tried to ensure individual perspectives were respected throughout the research, despite using a methodology which focuses on group consensus. For example, each respondent was provided the opportunity to give their own suggestions of what they felt were key features of CRP. In addition, respondents were invited to define their own ethnicity, elaborating as much or as little as they wished, as opposed to asking them to select an option from a menu. One comment from a respondent provided further insight to suggest that whilst you may label yourself as one thing, additional information can add further insight to the cultural lens that an individual may be adopting i.e. one respondent identified themselves as White British, but acknowledged a member of their family was of Mexican heritage. This arguably supports the general ethos of the research; whilst culture is pertinent to individuals and each will be approaching the research through different lenses, differing perspectives adds value in contributing to an overall perspective amongst the EP profession.

Whilst the research embraced cultural differences, the researcher provided their working definition of CRP, which was informed by the literature. This provided a useful starting point for respondents to work from, which was reflected in the structure of the

survey. In addition, respondents were given the opportunity to select 'don't know' and were given reasons why this response could be selected. This meant that responses may have been more accurate, as respondents would not select a rating of perceived importance unless they had some understanding of the statement which was presented to them.

5.5 Limitations of the Research

Whilst the present research provides key contributions to the area of cultural responsiveness in EP practice, it is appropriate to recognise several potential methodological limitations. These limitations focus on creating survey one, representation of the expert panel, and limitations linked to the Delphi method.

5.5.1 Creation of Survey One

One potential limitation of the current research was the approach used to create survey one. The researcher chose round one of their research to be informed by available literature on CRP. Some may argue that using an open-ended round one survey (inviting respondents to solely share features of CRP) may have ensured that choices were representative of the respondent panel, thus eliciting a greater power balance between researcher and respondents (Mullen, 2003). As this is an area of EP practice which has limited literature in the UK and therefore may imply potentially less understanding, the researcher felt it was appropriate to scope out existing literature where this area is discussed, to act as a base to work from. It is also acknowledged that most of the literature which was drawn from was outside of the UK, predominately

focusing on SPs in the US. This is a recognised limitation due to potential differences within SP and EP practice. In addition, the researcher acknowledges the potential bias that could be implied from the SLR process, where certain literature was excluded over others regarding their personal judgement regarding potential generalisability of findings. Lastly, the search terms used within the SLR meant that some available literature in the UK was not included, such as those referenced in Ratheram's thesis. It is also acknowledged that there is a wealth of literature related to Maori culture within New Zealand and subsequent recommendations related to CRP, which did not appear in the SLR. Future research may benefit from varying search strategies and sourcing a greater number of articles from other areas of the globe.

Whilst caution must be sought regarding generalisability to the EP context within the UK, it is argued that from the consensus levels reached by EP respondents, this literature showed both relevance and applicability to EP practice. Respondents were also given the opportunity to provide their own examples of CRP which had not featured in the survey, to ensure greater balance amongst the researcher and panel.

Whilst the researcher outlined their approach in determining the inclusion and exclusion criteria of papers and described their process of analysis, it is recognised that the decisions made were based on the researcher's understanding and working definition of CRP. Direct extracts were largely taken from papers to ensure wording could be kept as close to the data as possible, however through the analysis process, certain extracts and subsequent codes were merged. As the researcher was conscious of having too large a list of statements for respondents to rank, this meant that decisions were made during the process to merge statements or select

information over others which felt more pertinent to the researcher. This was down to researcher perspective in terms of how easily understood statements were and how well they aligned with EP practice, while another researcher analysing the same literature may have identified or prioritised different statements, which may impact external validity. However, the researcher completed several steps to increase inter-rater reliability, through sharing initial codes, themes and survey one with other colleagues (both within and outside of the profession). It is recognised that findings from the current study can act as a starting framework for the profession, and further research can help to validate these findings.

As part of the literature search process, the current research did not use an ancestry approach (finding original sources cited in chosen studies (Copper, 1989)) which was adopted in Rogers and Lopez' Delphi study when identifying literature to form their first survey (2002). This was purely due to researcher capacity and the number of relevant papers identified through the chosen method i.e. including research both within EP practice but also more broadly within psychological professions. Given longer time frames or additional resources, an ancestry search may have been beneficial to review original sources which had been cited in studies already obtained, for example, sourcing the original papers which referenced cultural models, tools or frameworks.

One of the main areas of the survey which was identified by the researcher was around assessment and intervention. Given the content and focus of the literature, this felt largely appropriate. However, whilst aspects such as consultation, training, research and supervision were mentioned, they were less prominent in the survey. This is in part due to the selected papers and their focus. For example, half of the empirical

papers were based on CRC, while their chosen methodology meant the researcher perceived there to be fewer key features of CRP to extract for the survey in comparison to Rogers and Lopez' studies, which used the same methodology to this research.

5.5.2 Representation of Expert Panel

A second limitation of the current research was the representation of EPs who formed the expert panel. Most respondents practised as an EP in the South East of England or London. Whilst the researcher attempted to recruit nationally, EPs in various areas of the country did not respond to this call for participants. This could be partly explained by findings from Anderson's doctoral research, where EPs working in more culturally diverse areas (predominately London) had increased levels of self-perceived cultural competence due to the level of experience they had working with different cultural groups, in comparison to those in the South West of England (2018). As part of the current research, respondents were invited to participate who met the researcher's criteria and who perceived themselves to engage in CRP, providing a possible explanation as to why EPs practising in London/the South East chose to participate. Another explanation for the make-up of the panel may reflect where the researcher is training and on placement for the Educational Psychology Doctorate. Nevertheless, it may have been beneficial to have had EPs from a wider range of geographical locations to contribute to the research.

Furthermore, just under 70% of respondents identified themselves as 'White British', 'White', or 'British' and the just over 80% of respondents identified themselves as 'female'. At present, it is believed that there is no current demographic data of the EP

workforce, however it could be argued that this expert panel is largely representative of the workforce in terms of gender and ethnicity. It was recognised that there was some cultural diversity within the respondent panel, and additional information provided by respondents allowed greater understanding of the differing lenses through which they may be viewing the research. However, the researcher would have welcomed more EPs from a variety of cultural backgrounds to participate, to broaden the range of perceptions on what constitutes CRP.

5.5.3 Delphi Method

5.5.3.1 Expert Panel.

Whilst it is argued that the Delphi method elicits several strengths, aspects of its methodology have been criticised. The method's main sources of controversy are based on "use of an "expert" panel, consensus, questionnaire construction, anonymity and interaction between panel members" (Mullen, 2003, p. 40). It is recognised that labelling individuals as 'experts' within a given area is difficult to define (Sackman, 1975), but additionally, defining CRP is complex and subject to debate. Literature suggests that it is important that participants who are recruited for the research have relevant input, are knowledgeable in the chosen topic and are willing to commit to the different stages of the research (Cantrill et al., 1996; Grisham, 2009; Pill, 1975). It is argued that respondents who made up the expert panel had relative experience which met the researcher's criteria, and the low attrition rates and comments provided by respondents suggested their motivation to commit to the research. It has also been recommended for research to describe the criteria that was used to select the expert panel (Thangaratinam & Redman, 2005), which the researcher followed.

5.5.3.2 Size of Panel.

The size of the expert panel is another source of debate, where many of those who offer critique based on small panels often confuse Delphi studies with conventional quantitative surveys (Mullen, 2003). Guidelines have been provided which suggest 15-30 participants is appropriate for a homogeneous sample and 5-10 for a heterogeneous sample (Clayton, 1997). The current research aimed to recruit a minimum of 20 EPs, given the time frame of the research, and recruited 23 EPs for round one, and 18 in round two, which is arguably sufficient, considering the levels of both homogeneity and heterogeneity amongst the panel.

5.5.3.3 Consensus.

Researchers have also critiqued the process of reaching, or 'forcing' consensus within Delphi studies, as participants are not able to discuss or elaborate on issues with one another, especially where statements may be nuanced or need more context. However, it is argued that anonymity amongst respondents can aid honesty within the panel, where they are free from visible judgement of others, which may look different if using an alternative methodological approach such as a focus group. Respondents were given the opportunity to make any comments at the end of the survey, offering them to elaborate on any nuances if they wished. Furthermore, respondents were provided the option of selecting 'don't know' in response to unknown statements and could elaborate on this further at the end of the survey. Whilst the use of a 'don't know' response can be seen as a strength, a potential limitation of this option is the idea that

EPs may not feel comfortable to say that a statement regarding CRP is not important, for fear of being non-inclusive (which was raised during the pilot feedback) and so may subsequently select 'don't know' instead.

It is important to acknowledge that not all statements reached consensus. Whilst it is known that at least two rounds are needed in a Delphi study, the number of rounds is subject to dispute and it is deemed that there is no 'correct' number of rounds (Keeney et al., 2011). The current research adopted a two-round Delphi due to using existing literature to form the first round, and to promote low attrition rates. Literature suggests that the classic Delphi technique had four rounds (Sumsion, 1998) or that making the decision to end a study is usually taken after round three (Keeney et al., 2011). Whilst some may argue that stopping at two rounds prevents respondents from further reflection and the scope to meet consensus on further statements, the researcher felt that additional rounds may have influenced fatigue and subsequent attrition rates.

Researchers have also criticised Delphi methods where disagreements amongst the panel have not been acknowledged, or where "extreme opinions will be masked by the statistical analysis" (Rudy, 1996, p. 19). Out of the 28 statements which did not meet consensus at the end of round one, only 8 of these subsequently met consensus at the end of round two (28.5%). This suggests that respondents did not feel 'forced' into changing their responses on statements where it did not feel appropriate. The present research has commented on the common statements which did not reach consensus, and the possible reasons behind this. In addition to reaching consensus, Delphi studies have been criticised for providing little information of the scoring/aggregation methods used, with researchers requesting greater clarity in

studies (Thangaratinam & Redman, 2005). The present study provided the rationale for the chosen consensus levels and statistical analysis used, as well as reasons for using a Likert scale with an even number of ratings. This is significant should this research be replicated, but also the use of a six-point scale, in addition to having a 'don't know response' increased clarity and limited central tendency bias.

5.5.3.4 Anonymity.

Whilst anonymity has been acknowledged as a strength of the Delphi method, it can also be a limitation. Sackman (1975) argues that as identities are not disclosed to panel members in this method, this element of anonymity means respondents are not visibly accountable for their or the group responses. However, it is argued that the reverse can in fact happen; a 'disinhibition effect' can be produced from technology-based communication, where participants may self-disclose more due to increased feelings of anonymity (Suler, 2004).

There are similar arguments for limitations related to social desirability bias. This was raised during the pilot phase of the study by a TEP who wondered whether respondents would admit if they felt a statement around CRP was not important, for fear of being perceived as non-inclusive or racist. However, it is argued that this fear of judgement is less likely than in other methods, such as a focus group, where you are directly and visibly sharing opinions with others. As the Delphi method is largely anonymised (except for the researcher being able to identify individuals) it is hoped that individuals would rate as honestly as possible. This was arguably seen in the

present research, as, whilst not common, some statements related to CRP were rated as 'somewhat unimportant' or 'unimportant' by respondents.

5.5.3.5 Interaction with Expert Panel.

A final limitation of the Delphi method is the relatively interaction-free approach that this method adopts. CRP is recognisably a complex phenomenon, where EPs' own cultural positioning will impact their views about cultural responsiveness. Whilst the researcher provided their working definition of CRP, explained what it was informed by, and used this definition to help structure their survey, that is not to say that respondents completing the survey will completely align with this definition. As the method is largely interactive free, with limited interaction between researcher and respondents, this makes it more difficult to explore in further detail respondents' understanding of CRP, what has informed their understanding and how this influences their ratings. However, the researcher provided as many opportunities as possible for respondents to elaborate on their answers from the outset i.e. in relation to their ethnicity, how they engage in CRP, and providing opportunity to share additional aspects of CRP which they felt were pertinent, as well as sharing any other comments on completing the survey.

5.6 Implications and Directions for Future Research

Despite these limitations, these results offer practical implications for the EP profession. This is the first research in EP practice, in the UK, which has explored cultural responsiveness (at the time of writing, to the researcher's knowledge), and

which offers a starting framework to use when reflecting on and developing CRP; this can be further expanded or adapted to respond to practice and further research. The current research is similar in method and approach to Rogers and Lopez' 2002 Delphi study which identified 'cross-cultural competencies' in SP practice, and it is promising that key features of CRP overlap with some of the themes and competencies from their findings (Lopez & Rogers, 2001; Rogers & Lopez, 2002). That said, there were a number of differences between the current research and Rogers and Lopez' Delphi studies (2001; 2002), namely, how considering cultural difference was defined, how the expert panel was identified, how respondents were recruited, and processes within rating statements and reaching consensus. Table 15 provides a comparison of the current research with Rogers and Lopez' 2002 study and Lopez and Rogers' 2001 study.

Table 15

Comparing the present research with Lopez and Rogers' (2001) and Rogers and Lopez' (2002) Delphi studies

Criteria	My Research	Lopez and Rogers (2001)	Rogers and Lopez (2002)
Defining culture	<p>Culture can be both a blueprint for behaviour, thoughts and feelings, but also a changing body of ideas, open to and for, interpretation (Krause & Miller, 1995). Broadly speaking, this research aligns with King et al's definition of culture, "the social norms, roles, beliefs, values and traditions that influence the behaviours of a particular social group" (2017, p. 1032). It is recognised that an individual's culture may be informed by various aspects of difference, such as ethnicity, race, sexuality, social status etc., however this research aligns culture more closely to the context of ethnicity. This is in part due to the researcher's own experience of coming from a mixed ethnic background, which has influenced their definition of culture.</p>	<p>Defining "cross-cultural" as "racially, ethnically, culturally and linguistically diverse clients" (African American, Asian American, Hispanic, Native American and Pacific Islander backgrounds) ... "and individuals with diverse handicaps, sexual orientations, economic status, religious backgrounds and gender" (p. 270)</p>	<p>Defining diverse group members "referred to African Americans/ Blacks, Asian Americans, Hispanics/ Latinos, Native American Indians, Pacific Islanders, bilinguals, biracials, and ELLs. In addition, individuals representing other diverse 'cultural' groups (because of sexual orientation, economic status, and gender) were also included in the present definition (p. 118)</p>
Definition adopted when considering culture	<p>"Culturally Responsive Practice" An active and evolving process when working with culturally diverse populations, which is both an <i>interpersonal</i> and <i>intrapersonal</i> process. Culturally diverse populations include children and young people and their families, as well as EPs</p>	<p>"Cross-cultural competence" "demonstrate cultural knowledge, and engage in behaviours or skills that reflect an awareness and sensitivity to cross-cultural issues" (2001, p.274)</p>	<p>"Cross-cultural competence" embraces Lynch and Hanson's (1992) perspective, which defines cross-cultural competence as a "way of thinking and behaving that</p>

and other professionals who EPs engage with in their work. The *interpersonal* aspect of CRP pertains to the way in which EPs relate with those from culturally diverse populations. The *intrapersonal* aspect of CRP relates to the self-awareness and self-reflective qualities an EP possesses in relation to thinking about cultural differences

enables members of one cultural, ethnic, or linguistic group to work effectively with members of another” (p. 356).

Delphi method	<p>Two-round Delphi: Round one developed from literature, as well as inviting panel to provide their own statements of CRP not mentioned in the literature</p> <p>Literature search procedure exploring Educational Psychology/School Psychology Practice, and broader psychological professions:</p> <ol style="list-style-type: none"> 1. A computerized search on PsychInfo and PsychArticles involving <ol style="list-style-type: none"> a. Abstract Search b. Full text Search c. Full text Search using different search parameters 2. Manual Google Search <p><i>Ancestry approach was not used due to the number of papers identified through first two methods (literature review and broader psychological profession search)</i></p>	<p>Three-round Delphi: Open-ended questionnaire (literature search completed to identify 14 categories to structure questionnaire, panel asked to identify up to 5 statements for each category (knowledge and skills)</p>	<p>Two-round Delphi: Round one developed from literature, as well as inviting panel to provide their own competencies not mentioned in the literature</p> <p>Literature search procedure exploring School Psychology Practice and other closely related specialties in psychology, namely clinical and counselling psychology, and related disciplines including interpreters, multicultural education, measurement, and second language development:</p> <ol style="list-style-type: none"> 1. A computerized search involving an abstract data base 2. A manual search of relevant journals, books,
----------------------	--	--	---

The key features of CRP drawn from the literature were based on the results of empirical studies, and insights from theoretical, commentary, opinion pieces

- and professional and regulatory standards
- 3. An ‘ancestry’ search approach (finding original sources cited in studies already obtained (Cooper, 1989))

“The cross-cultural competencies drawn from the literature were based on the results of empirical studies, and formulations from theoretical, position, and practice-oriented manuscripts (p. 120).

‘Expert’ panel criteria

Panel must be qualified EPs, registered with the Health and Care Professions Council, perceive themselves to engage in CRP and meet at least 1 criterion:

- 1. EPs have had at least one years’ experience working in a culturally diverse area
- 2. EPs have worked with at least 10 children and young people and families from culturally diverse backgrounds
- 3. EPs have had either training or Continued Professional Development input on culture and diversity within the past two years

Panel must meet 2 out of 5 criteria:

- 1. Author of at least 2 SP publications
- 2. Presented at least 3 NASP/APA
- 3. Faculty member – teaching on SP programs
- 4. Those who met at least 2 of the first 3 criteria were invited to recommend those who have at least 5 years working with culturally diverse clients
- 5. Those who met at least 2 of the first 3 criteria were invited to recommend supervisors with at least 5 years’ experience working with culturally diverse clients

Recruitment	Opportunity sampling (largely via EPNET, contacting NASP etc).	Identified those who met criteria – 64 were randomly selected and contacted	Identified those who met criteria – 65 were randomly selected and contacted
Number of experts in each round	Round 1: 23 Round 2: 18	Round 1: 25 Round 2: 11 Round 3: 11	Round 1: 34 Round 2: 24
Attrition Rate	23%	56%	30%
Number of statements to rate	103 96 from literature review 7 developed from panel	459 (821 identified after round 1, which was reduced to 518, then 459)	260 185 from literature review 75 developed from panel
Scaling used	Likert 6-point scale (6: very important, 5: important, 4: somewhat important, 3: somewhat unimportant, 2: unimportant, 1: very unimportant), with 'Don't know' option	Likert 5-point scale (1: very important, 2: important, 3: <i>not mentioned</i> , 4: unimportant, 5: very unimportant)	
Consensus levels	80% panel selecting 'very important or 'important'	100% respondents agreement on statements with a mean of 1.49 (category means within 'very important' and 'important')	96% respondents agreement on statements with a mean of 1.49 (category means within 'very important' and 'important')
Statistics presented to panel	% of respondents who selected each rating Mean and Standard Deviation	Mean and standard deviation Range of consensus	
Statements which met consensus	82 Covering 3 key areas: Culturally Responsive Skills (Initial Relationship Building/Assessment and Intervention), Ensuring a Continuous Learning Process (Intrapersonal Development/Interpersonal Development), Considering Structural Implications to Culture	89	102 Covering 14 major domains: (Academic Interventions, Assessment, Consultation, Counselling, Culture, Language, Laws and Regulations, Organisational Skills, Professional Characteristics, Report

			Writing, Research Methods, Theoretical Paradigms, Working with Interpreters, Working with Parents
Panel demographic	14 female, 4 male Just under 70% of EPs in round one identified themselves as either <i>White British</i> , <i>White</i> or <i>British</i> (n=16).	9 female, 2 male 55% Caucasian	12 female, 12 male 38% Caucasian 62% represented ethnic minority
Findings	Statements reaching high consensus: 1. Those which consider embracing cultural difference 2. Assessment (use of culturally sensitive assessment tools etc) 3. Consideration of biases (one's own and acknowledging others)	5 most important categories: 1. Assessment 2. Consultation 3. Language 4. Professional Characteristics 5. Report Writing 'Professional characteristics' and 'culture' had the highest percentage of items which met 'essential' criteria.	5 most important categories: 1. Assessment 2. Report Writing 3. Laws and regulations 4. Working with Interpreters 5. Working with Parents

It may be beneficial for future research to replicate Rogers and Lopez' process from their 2001 study: completing a Delphi study using a more open-ended approach to survey one instead of pre-identified statements drawn from the literature, and/or completing a pre-literature search to frame an open-ended questionnaire in round one, to ascertain whether similar findings would emerge. Future research may also wish to extend upon other processes adopted from Rogers and Lopez, such as completing an ancestry search, using higher consensus levels or different criteria to identify experts, to both evaluate the validity of findings but to also extend on findings from the current research.

5.6.1 Training Programs

Recent literature in the US has emphasised the importance of equipping trainees with skills to respond appropriately to culture (Hughes et al., 2020; Jones & Lee, 2020; Malone & Ishmail, 2020; Nastasi et al., 2020; Newman & Ingraham, 2020). Whilst governing bodies of EPs in the UK reference the importance of considering cultural difference (BPS, 2017, 2019; HCPC, 2015) it is still arguably unclear how this is approached within EP doctoral training programs. This has implications for EP practice, with scope for those who support the doctoral training programs to review the course content and consider whether there is sufficient reference to, and opportunity for, responding to cultural difference.

5.6.2 Cultural Models, Tools and Frameworks

One of the research questions posed at the start of this study was ‘what models, tools and frameworks are available which EPs can use to support their development of CRP?’ Results suggest that EPs recognise the importance of using cultural models, tools and frameworks in practice, yet many of these identified in the study were largely unknown to respondents, hence not reaching a consensus of importance for EP practice at this stage. This partly aligns with Anderson’s doctoral research which concluded that EPs reported lower areas of competence linked to theories of racial/ethnic identity development (2018). Additionally, the SLR identified that where models, tools or frameworks were referenced in papers, these were largely conceptual and there was limited information regarding their efficacy of use within practice. Some papers conceptually applied the framework when working with specific populations i.e. Hispanic students in the US (Aganza et al., 2015), however it is argued that aspects of these frameworks may be applicable when working with other cultural groups. It has been recently acknowledged that cultural frameworks and adaptation models should be integrated into daily practice (Hughes et al., 2020) and that future transformations:

requires thinking outside of traditional frameworks and models of practice possibly drawn from other disciplines such as anthropology and sociology, and other specialties in psychology (social, organizational, cross cultural); from international literature in school psychology; and from international research and development literature (Nastasi et al., 2020, p. 442).

This provides a clear scope for future research and practice. Many of the models, tools and frameworks which did not reach consensus amongst the respondents have been extracted from literature outside of EP practice and UK research, but could support future research within the EP UK context. For example, a specific model, tool or

framework could be reviewed by EPs in the UK, exploring its efficacy within a particular area of practice.

Additionally, this provides clear implications for providers of the doctoral training program for EPs, where a review of current course content may highlight areas where responding to cultural difference are more concretely embedded. This has been supported by recent SP literature,

training programs should focus on including cultural adaptation models and frameworks, alterable evidence based mental health practices, and progress monitoring systems in therapy, and instruct students on how to link these models and practices to school wide interventions (Hughes et al., 2020, p. 433).

Whilst these models, tools and frameworks could be beneficial for EP practice, EPs did not meet consensus on statements related to these, due to largely being unaware of the models and subsequently responding 'don't know' in the majority of cases. Whilst EPs commented that it might be useful to explore these models, they and the research do not know them in detail to make a recommendation for this. Appendix P provides a summary of some of the cultural models, tools and frameworks which were identified through the research, but which did not meet consensus amongst the expert panel. It is argued that future research could look into the applicability of these models for EP practice and may serve to support practice-based evidence opportunities, CPD, working groups and training programs.

5.6.3 Specific Focus within CRP

It is recognised that similar to Rogers and Lopez' studies (2001; 2002), the present research took a broad approach to cultural responsiveness within EP practice, where

various core functions of the EP role were explored, with a predominant focus on assessment and intervention. Future research could explore a specific function in further depth, i.e. consultation, supervision etc. which may provide scope to expand on the present framework. In addition, one of the statements linked to interpersonal CRP development was, 'promote and commit to engaging in culturally responsive research with those from culturally diverse backgrounds'. Future research may wish to add to the limited research available where the experiences of specific cultural groups are explored in detail (e.g. Gaulter & Green, 2015; Rizwan & Williams, 2015; Theara & Abbott, 2015) and commit to conducting research using a variety of culturally appropriate methodologies (Nastasi et al., 2020).

5.6.4 Research Addressing Language

It is argued that another aspect to being culturally responsive is sensitivity of the language being used to describe those from culturally diverse populations. The current research has predominately used the terms 'culturally diverse populations' or 'culturally diverse CYP' but it is recognised that the term 'Black, Asian and Minority Ethnic' or 'BAME' is often used in reference when referencing disproportionality (Public Health England, 2020) and representation within psychology professions (York, 2020). This debate around appropriateness of language was raised during the inter-rater reliability process for survey one by a TEP who provided feedback regarding the power of language and how this is discussed, for example, addressing ethnic minorities as 'BAME'. Whilst the statement, 'use the language used by the individual to describe their difficulties' was identified from the literature, further reference to how CYP from culturally diverse backgrounds like to be referred to was lacking. The Commission on

Race and Ethnic Disparities Report acknowledged one of its recommendations to “disaggregate the term ‘BAME’...to better focus on understanding disparities and outcomes for specific ethnic groups” (2021, p. 14). Future research may be beneficial to explore the nuance behind language used to describe cultural groups, the implications this has, and how use of language can further support CRP.

5.6.5 Working Groups

The researcher has felt encouraged by having been contacted by both survey respondents and members of the profession seeking further understanding/information provided in the initial survey, with the aim of developing CRP in Local Authorities in the UK through modalities such as working groups. This links back to some of the comments provided by respondents, who acknowledged the importance of ongoing learning in this area, and for this to become embedded into everyday practice. The notion that learning is an ongoing process has been raised in the literature, “a single course is not sufficient to provide students with the skills needed to demonstrate culturally responsive (school psychology) practice...the importance of such training lies in (school) psychologists’ ethical obligation to engage in culturally responsive practices” (Vega et al., 2018, p. 460). This provides implications for practice in identifying working groups within EP services/teams to ensure CRP is an area which is continually developed and reviewed.

5.6.6 Implications for Individual Reflective Practice

As well as establishing priorities amongst cultural responsiveness on a group level, the current research offers implications for practitioners at an individual level. EPs have a responsibility to commit to their own professional development in developing CRP through their own self-reflections (Nastasi et al., 2020). The statements which reached consensus amongst the EP panel can transform into a self-reflective framework (see Figure 48) which can support EPs to establish where they are at in their own personal journey of developing CRP, and where they may wish to focus their efforts.

Figure 48

Self-reflective framework for EPs to develop CRP

Culturally Responsive Skills

1a. Initial Relationship Building – as an EP, do I/am I...

<p>Create a safe and inclusive environment when working with culturally diverse populations?</p>	
<p>Use culturally sensitive verbal and non-verbal communication skills?</p> <ul style="list-style-type: none"> ○ When communicating with linguistically diverse individuals, do I listen through accents and allow more processing time for them to respond to questions? (Lopez & Rogers, 2001, p.298) ○ Do I use the language used by the individual to describe their difficulties? (Mullins & Khawaja, 2018, p.399) ○ Do I take into account potential differences in non-verbal communication, such as eye contact, body language, facial expression? ○ Do I recognise how use of particular skills are beneficial for certain individuals, such as how normalisation (identifying that some experiences are encountered by many other individuals) may reassure some individuals? (Sue & Zane, 2009) 	
<p>Sensitive and empathetic towards the context that cultural diversity brings to individuals, including empathy for previous difficult cultural experiences, such as oppression?</p>	
<p>Communicate a genuine respect and interest in the cultural background of others, recognising the strength in diversity?</p>	
<p>Stay constantly aware of the notion of intersectionality: that there may be multiple components which influence an individual's identity and that culture may interact with these?</p>	
<p>Open and flexible in their approach to working with culturally diverse populations to reflect the constant shifts in cultural and social contexts?</p>	
<p>Address any language barriers and be clear with communication to ensure culturally diverse populations can engage in discussions?</p>	
<p>Take time to understand how an individual's culture influences their overall identity, and their attitude towards it?</p>	
<p>Empower culturally diverse populations by viewing them as experts of their own cultural experiences?</p>	

Culturally Responsive Skills

1b. Assessment and Intervention – as an EP, do I...

Work collaboratively with children and young people, their families and professionals to ensure a holistic approach to working with culturally diverse populations	
Use cultural tools to support their approach to working with culturally diverse populations <ul style="list-style-type: none"> Use objects and symbols relevant to the individuals' culture 	
Use cultural models and frameworks to support their approach to working with culturally diverse populations <ul style="list-style-type: none"> Use an ecosystemic framework 	
Use cultural theories to inform thinking when considering and working with culturally diverse populations e.g. critical race theory	
Take a critical approach to theoretical paradigms used in practice, considering their appropriateness for use with culturally diverse populations and adapt these to be culturally relevant	
Consider socio-cultural variables when working with culturally diverse populations, inquiring about factors such as: acculturation, immigration status, intergenerational trauma, religion, family context and practices etc.	
Use culturally relevant assessments when working with culturally diverse populations, considering their validity <ul style="list-style-type: none"> Consider whether standardised assessments are appropriate to use with culturally diverse populations Use assessment tools which are sensitive to culturally diverse populations, such as: dynamic assessment, ecological assessment, contextual assessment, curriculum-based assessment Where appropriate, assess language proficiency in an individual's first language Be creative and use a variety of different assessment tools to gather culturally sensitive information 	
Find ways to assess culturally related strengths	
Use cultural variables as part of their hypothesis testing	
Distinguish between culture and pathology (Bernal & Saiz-Santiago, 2006, p.122)	
Recognise cultural differences within assessment and intervention <ul style="list-style-type: none"> Recognise cultural differences in the expression of distress e.g. somatization vs. worry, to inform their assessment process (Hwang; Peterson et al., 2017) 	

<ul style="list-style-type: none"> Recognise there may be differences amongst family structures within different cultural groups, including communication patterns, gender roles etc, which may inform the assessment and intervention process (Ecklund & Johnson, 2007) Consider differences in cultural norms to justify or help to explain behaviour (Ramirez & Smith, 2007) e.g. how learning styles in some cultures may be in direct contrast to White Western styles 	
Plan for and recognise the strengths and limitations of using interpreters	
Factor in cultural considerations with ethical decision making i.e. identify relevant cultural factors and whether there are any conflicts between ethical, legal and cultural factors, evaluating the rights and responsibilities of all parties involved (Kelly et al., 2019, p.122)	
Conceptualise culture in their case formulations	
Bridge differing cultural perspectives from various professionals	
Consider important values of certain cultures, such as family members being involved in the process, and ensure their inclusion	
Integrate culture into interventions <ul style="list-style-type: none"> Ensure that culturally relevant strengths are included in any intervention Ensure language used in any intervention is culturally appropriate Frame goals or outcomes within the individual's culture Use therapeutic interventions which are culturally appropriate, such as narrative therapies, psychoeducation, motivational interviewing (Mullins & Khawaja, 2018) 	
Adapt interventions to be culturally relevant, such as making adaptations to a Cognitive Behavioural Therapy approach (making the language and concepts more relatable)	
Consider any barriers to interventions for culturally diverse populations and address these, such as why some cultural groups may not wish to seek help with problems (due to shame or stigma) and approach these in a sensitive way	
Evaluate the effectiveness and appropriateness of their suggested interventions, constantly reviewing how congruent it is with the individual's culture	
Incorporate culturally appropriate information into their reports, such as cultural characteristics (language, level of acculturation etc), use of translators etc.	
Refer individuals or families to other culturally responsive support, where appropriate	
Consider how EAL children and young people perceive the English culture and language as the dominant one and be mindful of how this may influence their refusal to acknowledge their native language / culture	

Ensure a Continuous Learning Process

2a. Intrapersonal Development – as an EP, do I...

Increase awareness and understanding by exploring my own cultural identity?	
<p>Reflect on and explore my own personal biases and assumptions, accepting that these may have an impact on how I communicate with culturally diverse populations?</p> <ul style="list-style-type: none"> • Reflect on my own hot spots (those who have “experienced powerlessness in aspects of their lives and understandably have strong emotions associated with that dimension”) blind spots (being “unaware of relevant cultural information due to unexamined assumptions of one’s own background”) and soft spots (holding “unexamined assumptions which lead to deviations from usual practice”) (Sandeen et al., 2018, p.145) • Reflect on aspects such as White Privilege • Use tools such as an Implicit Association Bias test to reflect on my own biases (Sandeen et al., 2018) 	
Recognise that topics around cultural differences can cause discomfort (e.g. race, social class, religion, spirituality), and push through these so I can understand the complexity of individual’s cultural experiences	
Avoid making assumptions about an individual’s cultural background and experiences, ensuring that I do not overgeneralise or undergeneralise anyone’s cultural background	
Seek ongoing training opportunities to develop my levels of cultural responsivity (i.e. training courses, experiential activities)	
Engage in and seek basic training on cultural responsiveness	

2b. Interpersonal Development – as an EP, do I...

Explore cultural differences and similarities between myself and others when engaging in consultation i.e. between clients and/or consultees	
Consider and pursue discussions around culture in supervision	
Explore cultural differences and similarities in my supervisory relationship (as supervisor or supervisee) (Eklund et al., 2014)	
Educate others by helping them become aware of cultural differences and encourage others to reflect on their own biases and values related to cultural difference	
Model and impart culturally responsive practice onto others i.e. initiating conversations about culture and demonstrate the type of support that is required for culturally diverse individuals	
Use cultural reframing to recognise when negative cultural perceptions are being used	
Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference	
Recognise and acknowledge when others have biased views, showing prejudiced beliefs or ignoring their privilege, and challenge individuals, whether they are supervisees, supervisors, staff or other professionals	
Recognise and address power inequities	
Make conscious efforts to gain feedback from others (culturally diverse clients, supervisors, other professionals etc) to evaluate their levels of cultural responsivity	
Promote and commit to engaging in culturally responsive research with those from culturally diverse backgrounds	
Take an active role in pushing the topic of cultural responsiveness higher up the organisational systems	

Consider Structural Implications to Culture As an EP, do I...

Ensure work is based within an ecological and sociocultural context	
Attend to the multicultural climate of the community they are working in, such as a school or setting	
Support and instigate appropriate policy adjustments to support institutions working with culturally diverse individuals	
Provide culturally responsive support at a systems level to ensure all culturally diverse individuals are supported i.e. school staff development	
Engage in anti-oppressive practice and social advocacy of cultural groups, to reduce biased beliefs and discriminatory practices <ul style="list-style-type: none"> • Conduct cultural audits in one's place of work to assess potential barriers to access for culturally diverse populations (Collins & Arthur, 2007) • Support community-led responses to cultural issues (Mullins & Khawaja, 2018) • Facilitate the development of appropriate resources for culturally diverse children, young people and their families 	
Learn how to deliver traded services and service level agreements which have culturally responsive practice embedded within the contracting with consumers	
Promote greater aspirations for teenagers, such as more BAME university students studying psychology with a belief that they could go on to become a "Dr" and an EP	
Deliver training programmes to school staff being informed by culturally responsive practice	

The literature review recognised that it is still largely unclear to what extent being culturally responsive practitioners improves future outcomes for culturally diverse populations (Parker et al., 2020). Future research which seeks feedback or measures the impact of utilising some of these skills would be valuable, such as seeking feedback within supervision when applying cultural models to explore similarities and differences within the supervisory relationship, or identifying ways to measure the effect of employing particular cultural responsive approaches, from multiple perspectives.

5.6.7 Barriers to Developing CRP

Whilst it is important that EPs take responsibility for engaging and developing CRP, it is recognised that there can be several challenges or barriers that EPs may face. This has been acknowledged in recent literature, “culture is not easy to measure, nor its impact on educational performance easily quantified” (Hughes et al., 2020, p. 433). One survey respondent shared that they wondered whether their responses were meant to be “*based on in practice or idealism*” (see Appendix O). It is acknowledged that aspects of CRP may be the ideal in how we want to work as EPs, however in reality, there may be several barriers that we are faced with which may make implementing some of these practices more difficult.

Some of these barriers were highlighted by Parker et al. (2020), which include: having limited time with parents to further understand a child’s cultural background, experiencing teachers who are resistant to change or who are not empathising with a child’s cultural experiences, consultants feeling hesitant to discuss cultural issues with

guides/experts who may come from an ethnic minority background, and cultural minimisation, where consultants decide that other factors are more pertinent to focus on compared with cultural influences. Other challenges which have been identified when working with culturally diverse individuals include unpicking learning needs vs EAL needs, managing differing points of view/experiences, and recognising the negative impact of certain government agendas (Ratheram, 2020). Ways to meet some of these challenges were explored in Ratheram's study, which included: working together, trying to understand an individual's point of view, use of positive framing, developing self-awareness and ensuring a holistic view (2020). Many of these approaches have been identified in the current research as key features to develop CRP i.e. collaborative working, including cultural strengths, and ensuring intrapersonal development. Whilst EPs should acknowledge these potential barriers and take them into consideration, they must continually explore how these can be overcome, which links back to the idea that this is a continuous learning process.

5.7 Concluding Comments

This research has explored how EPs can develop CRP. At the time of writing, there was no current literature within the UK offering a framework for CRP in the profession. Most of the available literature was based within the US, focusing on the practice of SPs. Previous studies have also focused on the language inter-cultural or cross-cultural 'competence' (Anderson, 2018; Lopez & Rogers, 2001; Rogers & Lopez, 2002). 20 years ago, Rogers and Lopez and Lopez and Rogers used the Delphi method to establish cross-cultural competencies for SPs in the US (2001; 2002). The current research adopted the Delphi method to establish what features of CRP were

deemed important to develop within EP practice in the UK. An extensive review of available literature explored CRP mainly within SP practice in the US, but also more broadly within psychological professions, to establish key statements which were rated by a panel of EPs who perceived themselves to have experience in considering cultural difference in their work. The EP respondents met consensus on 82 statements related to CRP within EP practice. These included culturally responsive skills linked to relationship building, assessment and intervention, ensuring that EPs engage in a continuous learning process around culture, considering both intrapersonal and interpersonal development, and considering structural implications related to culture. Statements which did not reach consensus were largely around specific models, tools and frameworks, which EP respondents reported was due to being largely unfamiliar with the models, tools and frameworks mentioned.

The process of participating in this research was a reflective exercise, and respondents articulated their wish to learn more about some of the models, tools, and frameworks which they were unaware of. Statements which met consensus amongst the respondent panel have formed a starting framework for EPs to use to reflect on their levels of cultural responsiveness and consider what aspects they may need to address to support their CPD in this area. It is hoped that future research will attempt to build upon this study by evaluating the efficacy of some of the models, tools and frameworks mentioned from the literature, and also exploring cultural responsiveness in more detail within different functions of the EP role. Initial literature within the UK highlights pertinent themes and are linked to key features of practice which met consensus in the present research (Gaulter & Green, 2015; German, 2008; German,

2013; Hulusi & Oland, 2020; Lawrence, 2014; Ratheram, 2020; Rowley et al., 2020; Rupasinha, 2015).

In conclusion, EPs have a key role considering cultural difference in their work, taking into account the increasingly diverse school populations who they serve. This is addressed in guidance of EP governing bodies, but it is acknowledged that there are limited sufficient or practical methods stating how the profession can address and develop this in their practice; this research has provided a framework for EPs to use and develop. It is acknowledged that EPs may face several barriers to implementing CRP, but it is with hope that the profession is motivated to continuously develop their understanding in this complex, multi-faceted but undoubtedly important area of practice, so that they can achieve the best possible outcomes for culturally diverse populations who they serve.

6. References

- Adler, M. & Ziglio E. (1996) *Gazing into the Oracle: The Delphi Method and Its Application to Social Policy and Public Health*. Jessica Kingsley Publishers, London.
- Aganza, J. S., Godinez, A., Smith, D., Gonzalez, L. G., & Robinson-Zañartu, C. (2015). Using cultural assets to enhance assessment of Latino students. *Contemporary School Psychology*, 19(1), 30–45. <https://doi.org/10.1007/s40688-014-0041-7>
- American Psychiatric Association (2013). *Diagnostic and Statistical Manual of Mental Disorders (5th ed.)*. Washington, DC: Author.
- American Psychological Association. (2017). *Multicultural Guidelines: An Ecological Approach to Context, Identity, and Intersectionality*. Retrieved from: <https://www.apa.org/about/policy/multicultural-guidelines.pdf>
- Ancis, J. R., & Ladany, N. (2001). A multicultural framework for counselor supervision. In L. J. Bradley & N. Ladany (Eds.), *Counselor supervision: principles, process, and practice* (3rd ed., pp. 63–90). Philadelphia: Brunner-Routledge.
- Anderson, A. (2018). *An Exploration of the Intercultural Competence and the Cross-Cultural Experiences of Educational Psychologists in the United Kingdom*

[Doctoral dissertation, University of Exeter]. ProQuest Dissertation & Theses Global. <http://hdl.handle.net/10871/34340>

Anderson, J., & Tyldesley, K. (2019). Children and young people who present with sleep deprivation: An initial exploratory study using the Delphi technique with reference to potential competencies required for the initial training of educational psychologists. *Educational & Child Psychology, 36*(3), 77-91.

Andrews, F. M., & Withey, S. B. (1976). *Social Indicators of well-being: Americans' perceptions of life quality*. New York: Plenum Press.

Ardila, A. (2007) The impact of culture on neuropsychological test performance. In B. P. Uzzell, M. O Pontón, & A. Ardila, *International handbook of cross-cultural neuropsychology*. New Jersey: Lawrence Erlbaum Associates Inc.

Arora, P. G., Godoy, L., & Hodgkinson, S. (2017). Serving the underserved: Cultural considerations in behavioral health integration in pediatric primary care. *Professional Psychology: Research and Practice, 48*(3), 139–148.
<https://doi.org/10.1037/pro0000131>

Arredondo, P. (2017). *Dimensions of personal identity (Revised)*. Phoenix: Arredondo Advisory Group.

- Arredondo, P., & Perez, P. (2006). Historical perspectives on the multicultural guidelines and contemporary applications. *Professional Psychology: Research and Practice*, 37(1), 1–5. <https://doi.org/10.1037/0735-7028.37.1.1>
- Ashcroft, R. T., & Bevir, M. (2018). Multiculturalism in contemporary Britain: policy, law and theory. *Critical Review of International and Social and Political Philosophy*, 21(1), 1-21. <https://doi.org/10.1080/13698230.2017.1398443>
- Atkinson, D. R., Morten, G., & Sue, D. W. (1998). *Counseling American minorities (5th ed.)*. Boston: McGraw Hill.
- Barnett, D. W., Collins, R., Coulter, C., Curtis, M. J., Ehrhardt, K., Glaser, A., et al. (1995). Ethnic validity and school psychology: Concepts and practices associated with cross cultural professional competence. *Journal of School Psychology*, 33, 219–234.
- Barsky, A. (2018). Cultural Competence, Awareness, Sensitivity, Humility, and Responsiveness: What's the Difference? *The New Social Worker*, 4-5.
- Batty, D., & Parveen, N. (2021, March 28). UK schools record more than 60,000 racist incidents in five years. *The Guardian*.
https://www.theguardian.com/education/2021/mar/28/uk-schools-record-more-than-60000-racist-incidents-five-years?CMP=Share_iOSApp_Other

- Benuto, L. T., Casa, J., & O'Donohue, W. T. (2018). Training Culturally Competent Psychologists: A Systemic Review of the Training Outcome Literature. *Training and Education in Professional Psychology, 12*(3), 125-134. <https://doi.org/10.1037/tep0000190>
- Benuto, L. T., Singer, J., Newlands, R. T., & Casa, J. B. (2019). Training culturally competent psychologists: where are we and where do we need to go? *Training and Education in Professional Psychology, 13*(1), 56-63. <https://doi.org/10.1037/tep0000214>
- Bernal, G., & Sáez-Santiago, E. (2006). Culturally centered psychosocial interventions. *Journal of Community Psychology, 34*(2), 121–132. <https://doi.org/10.1002/jcop.20096>
- Bernal, G., Bonilla, J., & Bellido, C. (1995). Ecological validity and cultural sensitivity for outcome research: issues for cultural adaptation and development of psychosocial treatments with Hispanics. *Journal of Abnormal Child Psychology, 23*, 67–82. <https://doi.org/10.1007/BF01447045>
- Berry, J. W., & Kim, U. (1993). The Way Ahead – From Indigenous Psychologies to a Universal Psychology. In U. Kim and J. W. Berry (eds) *Indigenous Psychologies* (pp. 277-280). Newbury Park, CA: Sage Publications.
- Bhaskar, R. (1978). *A Realist Theory of Science*, 2nd Ed. Harvester Press.

- Boerner, K. E., Coulombe, A., & Corkum, P. (2002). Core Competencies for Health Professionals' Training in Pediatric Behavioral Sleep Care: A Delphi Study. *Behavioral Sleep Medicine, 13*, 265-284.
- Booker, R., Hart, M., Moreland, D., & Powell, J. (1989). Struggling Towards Better Practice: a psychological service team and anti-racism. *Educational Psychology in Practice, 5*(3), 123-129.
<https://doi.org/10.1080/0266736890050302>
- Bramlett, R. K., & Murphy, J. J. (1998). School Psychology Perspectives on Consultation: Key Contributions to the Field. *Journal of Educational and Psychological Consultation, 9*(1), 29-55. DOI: 10.1207/s1532768xjepc0901_2
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*, 77-101. DOI:10.1191/1478088706qp063oa
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health, 11*(4), 589-597.
<https://doi.org/10.1080/2159676X.2019.1628806>
- British Psychological Society (2006). *Promoting Racial Equality within Educational Psychology Services: A report from the DECP Working Party on Anti-Racism*. Leicester: British Psychological Society.

British Psychological Society (2017). *Practice Guidelines Third Edition*. Leicester:

British Psychological Society.

British Psychological Society (2018). *Code of Ethics and Conduct*. Leicester: British

Psychological Society.

British Psychological Society (BPS). (2019). *Standards for the accreditation of*

*Doctoral programmes in educational psychology in England, Northern Ireland
& Wales*. Leicester: British Psychological Society.

Bronfenbrenner, U. (1977). Toward an experimental ecology of human development.

American Psychologist, 32, 513–531.

Buck, E. T., & Hendry, A. (2016). Developing principles of best practice for art
therapists working with children and families. *International Journal of Art*

Therapy, 21(2), 56-65. <https://doi.org/10.1080/17454832.2016.1170056>

Burnham, J. (2012). Developments in Social GRRRAAACCEEESSS: visible-invisible

and voiced-unvoiced. In Krause, I-B. (Eds.) *Culture and Reflexivity in*

Systemic Psychotherapy: Multiple perspectives (pp. 139-160). London:

Karnac Books.

Butler, S. K. (2003). Multicultural sensitivity and competence in the clinical

supervision of school counselors and school psychologists: A context for

providing competent services in a multicultural society. *The Clinical Supervisor*, 22(1), 125–141. https://doi.org/10.1300/J001v22n01_09

Cantrill, J. A., Sibbald, B., & Buetow, S. (1996). The Delphi and nominal group techniques in health services research. *International Journal of Pharmacy Practice*, 4(2), 67-74. <https://doi.org/10.1111/j.2042-7174.1996.tb00844.x>

Cavalli-Sforza, V., & Ortolano, L. (1984). Delphi forecasts of land-use – transportation interactions. *Journal of Transportation Engineering*, 110(3), 324-39.

Centre for Literacy in Primary Education (2020). *Reflecting Realities: Survey of Ethnic Representation within UK Children’s Literature 2019*. <https://clpe.org.uk/clpes-reflecting-realities-survey-ethnic-representation-within-uk-children%E2%80%99s-literature-published>

Christopher, J. C., Wendt, D. C., Marecek, J., & Goodman, D. M. (2014). Critical cultural awareness: Contributions to a globalizing psychology. *American Psychologist*, 69(7), 645–655. <https://doi.org/10.1037/a0036851>

Clayton, M. J. (1997). Delphi: A technique to harness expert opinion for critical decision- making tasks in education. *Educational Psychology*, 17(4), 373-386.
DOI: 10.1080/0144341970170401

- Collins, S., & Arthur, N. (2007). A framework for enhancing multicultural counselling competence. *Canadian Journal of Counselling*, 41(1), 31–49.
- Commission on Race and Ethnic Disparities (2021, March). *Commission on Race and Ethnic Disparities: The Report*. Retrieved from [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/974507/20210331 - CRED Report - FINAL - Web Accessible.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/974507/20210331_-_CRED_Report_-_FINAL_-_Web_Accessible.pdf)
- Cooper, C. R. & Denner, J. (1998). Theories Linking Culture and Psychology: Universal and Community-Specific Processes. *Annual Review of Psychology*, 3, 559-584. <https://doi.org/10.1146/annurev.psych.49.1.559>
- Cooper, H. M. (1989). *Integrating research: A guide for literature reviews (2nd ed.)*. Newbury Park: Sage.
- Creswell, J. W., & Clark, V. L. P (2011). *Designing and Conducting Mixed Methods Research, 2nd ed.* Thousand Oaks: Sage.
- Critcher, C., & Gladstone, B. (1998). Utilizing the Delphi technique in policy discussion: a case study of a privatized utility in Britain. *Public Administration*, 76(3), 431-450. <https://doi.org/10.1111/1467-9299.00110>

Critical Appraisal Skills Programme (CASP) (2018a). CASP Case Control Checklist.

[online] Available at: https://casp-uk.net/wp-content/uploads/2018/03/CASP-Case-Control-Study-Checklist-2018_fillable_form.pdf

Critical Appraisal Skills Programme (CASP) (2018b). CASP Cohort Checklist.

[online] Available at: https://casp-uk.net/wp-content/uploads/2018/01/CASP-Cohort-Study-Checklist_2018.pdf

Critical Appraisal Skills Programme (CASP) (2018c). CASP Qualitative Checklist.

[online] Available at: https://casp-uk.net/wp-content/uploads/2018/03/CASP-Qualitative-Checklist-2018_fillable_form.pdf

Cummins, R. A., & Gullone, E. (2000). Why we should not use 5-point Likert scales:

The case for subjective quality of life measurement. In *Proceedings, Second International Conference on Quality of Life in Cities* (pp. 74–93). Singapore: National University of Singapore.

Dawes, J. (2008). Do data characteristics change according to the number of scale

points used? An experiment using 5-point, 7-point and 10-point scales.

International Journal of Market Research, 50, 61–77.

Department for Education and Department of Health (2015). *Special educational*

needs and disability code of practice: 0 to 25 years. Retrieved from

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND Code of Practice January 2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

Department for Education. (2019). *Schools, pupils and their characteristics*: January 2019.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/812539/Schools Pupils and their Characteristics 2019 Main Text.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/812539/Schools_Pupils_and_their_Characteristics_2019_Main_Text.pdf)

Dillman, D. A. (2007). *Mail and internet surveys: The tailored design method*. New York, NY: John Wiley & Sons. DOI: 10.1080/15402002.2013.874348

Domenech Rodríguez, M., & Weiling, E. (2004). Developing culturally appropriate, evidence-based treatments for interventions with ethnic minority populations. In M. Rastogin & E. Weiling (Eds.), *Voices of color: first person accounts of ethnic minority therapists* (pp. 313–333). Thousand Oaks: Sage.

Donohoe, H., & Needham, R. (2008). Moving Best Practice Forward: Delphi Characteristics, Advantages, Potential Problems, and Solutions. *International Journal of Tourism Research*, 11, 415-37. doi.10.1002/jtr.709

Ecklund, K., & Johnson, W. B. (2007). Toward cultural competence in child intake assessments. *Professional Psychology: Research and Practice*, 38(4), 356–362. <https://doi.org/10.1037/0735-7028.38.4.356>

- Eklund, K., Aros-O'Malley, M., & Murrieta, I. (2014). Multicultural supervision: What difference does difference make? *Contemporary School Psychology, 18*(3), 195–204. <https://doi.org/10.1007/s40688-014-0024-8>
- El-Ghoroury, N. H., & Krackow, E. (2012). Enhancing the identification of autism spectrum disorders via a model of culturally sensitive childhood assessment. *Professional Psychology: Research and Practice, 43*(3), 249–255. <https://doi.org/10.1037/a0027354>
- Ellis, B. H., Abdi, S. M., & Winer, J. P. (2020). Working Cross-Culturally. In *Mental Health Practice with Immigrant and Refugee Youth: A Socioecological Framework* (pp. 21-35). American Psychological Association.
- Engel, G. L. (1977). The need for a new medical model: a challenge for biomedicine. *Science, 196*, 129–136.
- Eom, K., & Kim, H. S. (2014). Cultural psychological theory. In *Theory and explanation in social psychology* (pp. 328-344). New York: Guilford Press.
- Fallon, L. M., & Mueller, M. R. (2017). Culturally Responsive Wraparound Supports: Collaborating with Families to Promote Students' Behavior Regulation Across Settings. *Contemporary School Psychology, 21*, 201-210.
- Fisher-Borne, M., Montana Cain, J. & Martin, S. L. (2015). From Mastery to Accountability: Cultural Humility as an Alternative to Cultural Competence.

Social Work Education, 34(2), 165-181.

<https://doi.org/10.1080/02615479.2014.977244>

Fletcher, A. J. (2017). Applying critical realism in qualitative research: methodology meets method. *International Journal of Social Research Methodology*, 20(2), 181-194. DOI: 10.1080/13645579.2016.1144401

Forrest, L., Elman, N S., Huprich, S. K., Veilleux, J. C., Jacobs, S. C., & Kaslow, N. J. (2013). Training directors' perceptions of faculty behaviours when dealing with trainee competence problems: A mixed method pilot study. *Training and Education in Professional Psychology*, 7, 23-32.

Gallardo, M. E., Johnson, J., Parham, T. A., & Carter, J. A. (2009). Ethics and multiculturalism: Advancing cultural and clinical responsiveness. *Professional Psychology: Research and Practice*, 40(5), 425-435.

<https://doi.org/10.1037/a0016871>

García-Vázquez, E., Reddy, L., Arora, P., Crepeau-Hobson, F., Fenning, P., Hatt, C., Hughes, T., Jimerson, S., Malone, C., Minke, K., Radliff, K., Raines, T., Song, S., & Vaillancourt Strobach, K. (2020). School Psychology Unified Antiracism Statement and Call to Action. *School Psychology Review*, 49(3), 209-11. DOI:10.1080/2372966X.2020.1809941

Gaulter, A., & Green, R. (2015). Promoting the inclusion of migrant children in a UK school. *Educational and Child Psychology*, 32(4), 39-51.

- Gay, G. (2002). Preparing for culturally responsive teaching. *Journal of Teacher Education*, 53, 106-116. doi:10.1177/0022487102053002003
- German, M. (2008). Educational psychologists promoting the emotional wellbeing and resilience of refugee parents. *Educational and Child Psychology*, 25(2), 91-103.
- German, M. (2013). Developing our cultural strengths: Using the 'Tree of Life' strength-based, narrative therapy intervention in schools, to enhance self-esteem, cultural understanding and to challenge racism. *Educational and Child Psychology*, 30(4), 75-99.
- Goforth, A. N. (2020). A challenge to consultation research and practice: Examining the 'culture' in culturally responsive consultation. *Journal of Educational & Psychological Consultation*, <https://doi.org/10.1080/10474412.2020.1728284>
- Goldkuhl, G. (2012). Pragmatism vs interpretivism in qualitative information systems research. *European Journal of Information Systems*, 21, 135–146.
<https://doi.org/10.1057/ejis.2011.54>
- GOV.UK (2021, February 2). *Schools, pupils and their characteristics*. Retrieved April 6, 2021, from <https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics>

- Grant, S. D., Oka, E. R., & Baker, J. A. (2009). The culturally relevant assessment of Ebonics-speaking children. *Journal of Applied School Psychology, 25*(2), 113–127. <https://doi.org/10.1080/15377900802484588>
- Green, R., & Birch, S. (2019). Ensuring quality in EPs' use of dynamic assessment: a Delphi study. *Educational Psychology in Practice, 35*(1), 82-98. <https://doi.org/10.1080/02667363.2018.1538938>
- Grisham, T. (2009). The Delphi technique: a method for testing complex and multifaceted topics. *International Journal for Managing Projects in Business, 2*, 112-130.
- Groff, R. (2004). *Critical Realism, Post-positivism and the Possibility of Knowledge*. London and New York: Routledge.
- Haboush, K. J. (2007). Working with Arab American Families: Culturally Competent Practice for School Psychologists. *Psychology in the Schools, 44*(2), 183-198. <https://doi.org/10.1002/pits.20215>
- Hass, M. R., & Abdou, A. S. (2018). Culturally responsive interviewing practices. *Contemporary School Psychology. https://doi.org/10.1007/s40688-018-0204-z*
- Hatzichristou, C., Lampropoulou, A., & Lykitsakou, K. (2006). Addressing Cultural Factors in Development of System Interventions. *Journal of Applied School Psychology, 22*(2), 103–126. https://doi.org/10.1300/J370v22n02_06

Hays, P.A. (2016). *Addressing cultural complexities in practice: a framework for clinicians and counselors (3rd ed.)*. Washington, DC: American Psychological Association.

Health and Care Professions Council (HCPC). (2015). *Standards of proficiency – Practitioner psychologists*. London: Health and Care Professions Council.

Helms, J. E., & Carter, R. T. (1990). White racial identity attitude scale. In J. E. Helms (Ed.), *Black and White racial identity: theory, research, and practice* (pp. 145–163). New York: Greenwood.

Higgins, S. E., McCarthy, P. V., MacFarlane, I. M., Borders, L. D, LeRoy, B., & Callanan, N. (2013). Genetic Counseling Supervisor Competencies: Results of a Delphi Study. *Journal of Genetic Counseling, 22*, 39-57.

Hill, N. T. M., Shand, F., Torok, M., Halliday, L., & Reavley, N. J. (2019). Development of best practice guidelines for suicide-related crisis response and aftercare in the emergency department or other acute settings: a Delphi expert consensus study. *BMC Psychiatry, 19*(6), 1-10. DOI: 10.1186/s12888-018-1995-1

Home Office (2018). *Official Statistics: Hate crime, England and Wales, 2017-2018*. <https://www.gov.uk/government/statistics/hate-crime-england-and-wales-2017-to-2018>

- Home Office, (2020). *Office Statistics: 'Hate Crime, England and Wales, 2019 to 2020'*. <https://www.gov.uk/government/statistics/hate-crime-england-and-wales-2019-to-2020/hate-crime-england-and-wales-2019-to-2020>
- Hughes, T. L., Hess, R., Jones, J., & Worrell, F. (2020). From Traditional Practice to Tiered Comprehensive Services for All: Developing a Responsive School Culture for the Future. *School Psychology, 35*(6), 428-439.
<https://doi.org/10.1037/spg0000410>
- Hulusi, H., & Oland, L. (2010). Using narrative to make sense of transitions: supporting newly arrived children and young people. *Emotional and Behavioural Difficulties, 15*(4), 341-351. DOI: 10.1080/13632752.2010.523247
- Hwang, W. (2006). The psychotherapy adaptation and modification framework: application to Asian Americans. *American Psychologist, 61*, 702–715.
<https://doi.org/10.1037/0003-066X.61.7.702>
- Ingraham, C. L. (2000). Consultation through a multicultural lens: Multicultural and cross-cultural consultation in schools. *School Psychology Review, 29*, 320–343.
- Jago, N. (2019). *Mental Health Beyond the School Gate: Young People's Perspectives of Mental Health Support Online, and in Home, School and Community Contexts*. [Doctoral Dissertation, University of Southampton].

Retrieved from e-theses online service (EThOS)

(<https://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.800810>).

James, W. (1909) [1975]. *The Meaning of Truth: A Sequel to "Pragmatism"*. New York and London: Longmans, Green & Co; reprinted Cambridge, MA: Harvard University Press, 1975.

Javadi, M., & Zarea, K. (2016). Understanding Thematic Analysis and its Pitfall. *Journal of Client Care*, 1(1), 34-40. DOI:10.15412/J.JCC.02010107

Joffe, H. (2012). Thematic Analysis. In D. Harper & A. R. Thompson (Eds.), *Qualitative Research Methods in Mental Health and Psychotherapy: A Guide for Students and Practitioners, First Edition*. (pp. 209-223). John Wiley & Sons, Ltd.

Johnson, P., & Duberley J. (2011). Pragmatism and Critical Realism- Transcending Descartes' Either/Or? In P. Johnson & J. Duberley (Eds.) *Understanding Management Research* (pp.149-176). London: Sage Publications.

Johnson, R. B., & Onwuegbuzie, A. J. (2004). Mixed Methods Research: A Research Paradigm Whose Time Has Come. *Educational Researcher*, 33(7), 14-26. <https://doi.org/10.3102/0013189X033007014>

Jones, J. M. (2009). Counseling with multicultural intentionality: the process of counseling and integrating client cultural variables. In Jones, J. M. (Ed.), *The*

psychology of multiculturalism in the schools: a primer for practice, training, and research. (pp. 191–213). Bethesda, MD: NASP Publications.

Jones, J. M., & Lee, L. H. (2020). Multicultural Competency Building: a Multi-year study of Trainee Self-Perceptions of Cultural Competence. *Contemporary School Psychology*. <https://doi.org/10.1007/s40688-020-00339-0>

Jones, J. M., Begay, K. K., Nakagawa, Y., Cevalco, M., & Sit, J. (2015). Multicultural counseling competence training: adding value with multicultural consultation. *Journal of Educational and Psychological Consultation*, 25, 1–26.
doi:10.1080/10474412.2015.1012671.

Jones, J., Lee, L., Zigarelli, J., & Nakagawa, Y. (2017). Culturally responsive adaptations in evidence-based treatment: The impact on client satisfaction. *Contemporary School Psychology*, 21(3), 211–222.
<https://doi.org/10.1007/s40688-016-0118-6>

Jorm, A. F., Minas, H., Langlands, R. L., & Kelly, C. M (2008). First aid guidelines for psychosis in Asian countries: a Delphi consensus study. *International Journal of Mental Health Systems*, 2(2). <https://doi.org/10.1186/1752-4458-2-2>

Kaushik, V., & Walsh, C. A. (2019). Pragmatism as a Research Paradigm and Its Implications for Social Work Research. *Social Sciences*, 8(255), 1-17. <https://doi.org/10.3390/socsci8090255>

- Keeney, S., Hasson, F., & McKenna, H. (2011). *The Delphi Technique in Nursing and Health Research*. Chichester, West Sussex: Wiley-Blackwell.
- Kelly, C. M., Jorm, A. F., & Kitchener, B. A. (2010). Developmental of mental health first aid guidelines on how a member of the public can support a person affected by a traumatic event: a Delphi study. *BMC Psychiatry*, *10*(1), 49-63. DOI: 10.1186/1471-244X-10-49
- Kelly, K., Diamond, E., Davis, S., & Whalen, A. (2019). Supervision in school settings: Maintaining a multicultural and ethical practice. *Training and Education in Professional Psychology*, *13*(2), 119–126. <https://doi.org/10.1037/tep0000220>
- King, R. B., McInerney, D. M., & Pitliya, R. J. (2018). Envisioning a culturally imaginative educational psychology. *Educational Psychology Review*, *30*, 1031-1065. <https://doi.org/10.1007/s10648-018-9440-z>
- Knotek, S. E. (2012). Utilizing culturally responsive consultation to support innovation implementation in a rural school. *Consulting Psychology Journal: Practice and Research*, *64*(1), 46–62. doi:10.1037/a0027993
- Krause, I. B., & Miller, A. (1995). Culture and family therapy. In: S. Fernando (Ed.), *Mental Health in a Multi-ethnic Society: A Multi- disciplinary Handbook* (pp. 149–171). London: Routledge.

- Kumar R., Zusho, A., & Bondie, R., (2018). Weaving cultural relevance and achievement motivation into inclusive classroom cultures. *Educational Psychologist*, 53(2), 78-96. <https://doi.org/10.1080/00461520.2018.1432361>
- Kusi, J. (2020). Visual Art: A Tool for Facilitation of Cultural Competence and Antiracism when Training Helping Professionals. *Educational Psychology Research and Practice*, 6(1), 1-9. <https://doi.org/10.15123/uel.8911x>
- Kymlicka, W. (2019). The rise and fall of multiculturalism? New debates on inclusion and accommodation in diverse societies. Re-printed from: *International Social Science Journal*, 2010, 61, 97-112. <https://doi.org/10.1111/issj.12188>
- La Roche, M. J., & Maxie, A. (2003). Ten considerations in addressing cultural differences in psychotherapy. *Professional Psychology: Research and Practice*, 34(2), 180–186. <https://doi.org/10.1037/0735-7028.34.2.180>
- Lawrence, Z. (2014). Black African parents' experiences of an Educational Psychology Service. *Educational Psychology in Practice*, 30 (3), 238-254.
- Likert R. A. (1932). Technique for measurement of attitudes. *Archives of Psychology*, 140, 44-53.
- Linstone, H.A. (1978). The Delphi technique. In: J. Fowlers (Eds.), *Handbook of Futures Research* (pp. 273–300). Greenwood Press, Westport.

- Linstone, H. A., & Turnoff, M. (1975). Introduction to the Delphi method: techniques and applications. In H. A. Linstone, & M. Turnoff (Eds.), *The Delphi Method: Techniques and Applications* (pp. 3-12). Addison-Wesley Publishing Company, Reading, MA.
- Lissitz, R. W., & Green, S. B. (1975). Effect of the number of scale points on reliability: A Monte Carlo approach. *Journal of Applied Psychology*, 60, 10–13.
<https://doi.org/10.1037/h0076268>
- Lopez, E. C., & Rogers, M. R. (2001). Conceptualizing cross-cultural school psychology competencies. *School Psychology Quarterly*, 16(3), 270–302.
<https://doi.org/10.1521/scpq.16.3.270.19889>
- Macpherson, W. (1999). *The Stephen Lawrence Inquiry*.
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/277111/4262.pdf
- Maguire, M., & Delahunt, B. (2017). Doing a Thematic Analysis: A Step-by-Step Guide for Learning and Teaching Scholars. *All Ireland Journal of Teaching and Learning in Higher Education (AISHE-J)*, 3, 3351-33514.
- Malone, C. M., & Ishmail, K. Z. (2020). A snapshot of multicultural training in school psychology. *Psychology in the Schools*, 57, 1022-1039.
<https://doi.org/10.1002/pits.22392>

Marks, D. F., & Yardley, L. (2012). Content and Thematic Analysis. In D. F. Marks & L. Yardley (Eds.) *Research Methods for Clinical and Health Psychology*. (pp. 56-68). SAGE Publications, Ltd.

Markus, H. R. (2008). Pride, prejudice, and ambivalence: Toward a unified theory of race and ethnicity. *American Psychologist*, 63, 651–670. doi:10.1037/0003-066X.63.8.651

Mason, B. (1993). Towards positions of safe-uncertainty. *Human Systems The Journal of Systemic Consultation & Management*, 4, 189–200.

McKenna, H. P. (1994). The Delphi technique: a worthwhile approach for nursing? *Journal of Advanced Nursing*, 19, 1221-1225. DOI: 10.1111/j.1365-2648.1994.tb01207.x

McKenney, E. L. W., Mann, K. A., Brown, D. L., & Jewell, J. D. (2017). Addressing cultural responsiveness in consultation: An empirical demonstration. *Journal of Educational & Psychological Consultation*, 27(3), 289–316.
<https://doi.org/10.1080/10474412.2017.1287575>

Melton, M. L. (2018). Ally, activist, advocate: Addressing role complexities for the multiculturally competent psychologist. *Professional Psychology: Research and Practice*, 49(1), 83–89. <https://doi.org/10.1037/pro0000175>

- Moher, D., Liberati, A., Tetzlaff, J., & Altman, D. G, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. *BMJ*. <https://doi.org/10.1136/bmj.b2535>
- Morgan, A. (2018). *The educational needs of unaccompanied asylum-seeking children in UK in one local authority in England: Professional and child perspectives*. [Doctoral dissertation, University of Exeter]. Open Research Exeter. <http://hdl.handle.net/10871/34337>
- Morgan, D. L. (2007). Paradigms lost and pragmatism regained: Methodological implications of combining qualitative and quantitative methods. *Journal of Mixed Methods Research*, 1, 48-76.
<https://doi.org/10.1177/2345678906292462>
- Morgan, D. L. (2014a). *Integrating Qualitative and Quantitative Methods: A Pragmatic Approach*. Thousand Oaks: Sage.
- Morgan, D. L. (2014b). Pragmatism as a paradigm for social research. *Qualitative Inquiry*, 20, 1045–1053. <https://doi.org/10.1177/1077800413513733>
- Moynihan, S., Paakkari, L., Välimaa, R., Jourdan, D., & Mannix-McNamara, P. (2015). Teacher Competencies in Health Education: Results of a Delphi Study. *PLoS ONE* 10(12): 1-17. doi:10.1371/journal.pone.0143703

Mullen, P. M. (2003). Delphi: myths and reality. *Journal of Health Organisation and Management*, 17(1), 37-52. DOI: 10.1108/14777260310469319

Mullins, C., & Khawaja, N. G. (2018). Non-indigenous psychologists working with Aboriginal and Torres Strait Islander people: Towards clinical and cultural competence. *Australian Psychologist*, 53(5), 394–404.

<https://doi.org/10.1111/ap.12338>

Nadler, J. T., Weston, R., & Voyles, E. C. (2015). Stuck in the Middle: The Use and Interpretation of Mid-Points in Items on Questionnaires. *The Journal of General Psychology*, 142(2), 71–89. DOI: 10.1080/00221309.2014.994590

Nastasi, B. K. (2006) Multicultural issues in school psychology practice. *Journal of Applied School Psychology*, 22(2), 1-11.

Nastasi, B. M., Chittoran, M. (R.) N., Arora, P., & Song, S. (2020). Infusing Global and Intercultural Perspectives to Transform School Psychology and School Psychologists. *School Psychology*, 35(6), 440-450.

<https://doi.org/10.1037/spq0000403>

Nastasi, B., Moore, R. B., & Varjas, K. M. (2004). *School-based mental health services: Creating comprehensive and culturally specific programs*. Washington, DC: American Psychological Association.

National Association of School Psychologists (2017). *Overview of Differences Among Degrees in School Psychology*.

<https://www.nasponline.org/Documents/About%20School%20Psychology/Overview%20of%20Differences%20Among%20Degrees%20in%20School%20Psychology.pdf>

National Association of School Psychologists (2020). *The Professional Standards of the National Association of School Psychologists*.

<https://www.nasponline.org/x55315.xml>

National Association of School Psychologists (2021a, July 30). *Who are School Psychologists?* National Association of School Psychologists.

<https://www.nasponline.org/about-school-psychology/who-are-school-psychologists>

National Association of School Psychologists (2021b, July 30). *NASP Policy Platform*. National Association of School Psychologists.

<https://www.nasponline.org/research-and-policy/policy-priorities/nasp-policy-platform>

Newman, D. S., & Ingraham, C. L. (2020). Cross-university dialogues to support multicultural school consultation training. *Journal of School Psychology, 81*, 11-27. DOI:10.1016/j.jsp.2020.06.001

Oaster, T. R. F. (1989). Number of alternatives per choice point and stability of Likert-type scales. *Perceptual and Motor Skills*, 68, 549–550.

<https://doi.org/10.2466/pms.1989.68.2.549>

Oxford Learner's Dictionaries (2021). Multiculturalism. In *Oxford Learner's Dictionaries*. Retrieved April 6, 2021, from

<https://www.oxfordlearnersdictionaries.com/definition/english/multiculturalism>

Parker, J. S. (2019). Spiritual and religious multicultural practice competencies: A partial replication study with school psychologists. *School Psychology Forum: Research in Practice*, 13(1), 53–73.

Parker, J. S., Castillo, J. M., Sabins, S., Daye, J., & Hanson, P. (2020). Culturally Responsive Consultation Among Practicing School Psychologists. *Journal of Educational and Psychological Consultation*, 30(2), 119-155. DOI: 10.1080/10474412.2019.1680293

Parveen, N. (2021, March 18). Children 'may lose out' due to lack of policy on racism in UK schools. *The Guardian*.

https://www.theguardian.com/education/2021/mar/28/children-may-lose-out-lack-policy-racism-uk-schools?CMP=Share_iOSApp_Other

Patton, M. Q. (1990). *Qualitative evaluation and research methods, second edition*. Sage.

- Pedrotti, J. T., Edwards, L. M., & Lopez, S. J. (2008). Working with multiracial clients in therapy: Bridging theory, research, and practice. *Professional Psychology: Research and Practice*, 39(2), 192–201. <https://doi.org/10.1037/0735-7028.39.2.192>
- Peirce, C. S. (1931-58) *Collected Papers of Charles S. Peirce, 8 vols.* Harvard University Press, Cambridge, MA.
- Perepa, P. (2019). *Autism, Ethnicity and Culture, Working with Children and Families from Minority Communities.* Jessica Kingsley Publishers.
- Peterson, L. S., Villarreal, V., & Castro, M. J. (2017). Models and frameworks for culturally responsive adaptations of interventions. *Contemporary School Psychology*, 21(3), 181–190. <https://doi.org/10.1007/s40688-016-0115-9>
- Pham, A. V. (2015). Understanding ADHD from a biopsychosocial-cultural framework: A case study. *Contemporary School Psychology*, 19(1), 54–62. <https://doi.org/10.1007/s40688-014-0038-2>
- Phillips, R. (2000). New applications for the Delphi technique. *Annual "San Diego" Pfeiffer and Company*, 2, 191-196.
- Pill, J. (1971). The Delphi method: substance, context, a critique and an annotated bibliography. *Socio-economic Planning Science*, 5(1), 57-71.

Powell C. (2003). Myths and realities of the Delphi technique. *Journal of Advanced Nursing*, 41, 376-382. DOI: 10.1046/j.1365-2648.2003.02537.x

Public Health England (2020). *Beyond the data: Understanding the impact of Covid-19 on BAME groups*.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892376/COVID_stakeholder_engagement_synthesis_beyond_the_data.pdf

Ramirez, S. Z., & Smith, K. A. (2007). Case vignettes of school psychologists' consultations involving Hispanic youth. *Journal of Educational & Psychological Consultation*, 17(1), 79–93. https://doi.org/10.1207/s1532768Xjepc1701_4

Ramirez, S. Z., Lepage, K. M., Kratochwill, T. R., & Duffy, J. L. (1998). Multicultural issues in school-based consultation: Conceptual and research considerations. *Journal of School Psychology*, 36, 479–509. [https://doi.org/10.1016/S0022-4405\(98\)00014-4](https://doi.org/10.1016/S0022-4405(98)00014-4)

Ratheram, E. M. (2020). *Exploring educational psychologists' work with children, young people and families from minority cultural and linguistic communities* [Doctoral dissertation, University of Manchester]. Retrieved from https://www.research.manchester.ac.uk/portal/files/184627464/FULL_TEXT.PDF

Refugee Council (2019). *Children in the Asylum System*. Refugee Council.

<https://www.refugeecouncil.org.uk/wp-content/uploads/2019/06/Children-in-the-Asylum-System-May-2019.pdf>

Reyna, R. S., Keller-Margulis, M. A., & Backscheider Burrige, A. (2017). Culturally Responsive School Psychology Practice: a Study of Practitioners' Self-Reported Skills. *Contemporary School Psychology, 21*, 28-37.

Reynolds, C. R., & Suzuki, L. A. (2013). Bias in Psychological Assessment: An Empirical Review and Recommendations. In J. R. Graham, J. A. Naglieri, & I. B. Weiner (Eds.), *Handbook of psychology: Assessment psychology., Vol. 10, 2nd ed.* (pp. 82-113). Hoboken, NJ: John Wiley & Sons Inc.

Richmond, A., & Jackson, J. (2018). Cultural considerations for psychologists in primary care. *Journal of Clinical Psychology in Medical Settings, 25*(3), 305–315. <https://doi.org/10.1007/s10880-018-9546-y>

Rizwan, R., & Williams, A. (2015). 'Only the wind hears you...' The experiences of Pakistani girls in a primary school: An interpretative phenomenological analysis. *Educational and Child Psychology, 32*(2), 36-46.

Rogers, M. R. (2000). Examining the cultural context of consultation. *School Psychology Review, 29*(3), 414–418.

- Rogers, M. R., & Lopez, E. C. (2002). Identifying critical cross-cultural school psychology competencies. *Journal of School Psychology, 40*(2), 115-141. [https://doi.org/10.1016/S0022-4405\(02\)00093-6](https://doi.org/10.1016/S0022-4405(02)00093-6)
- Rogers, M. R., Ingraham, C. L., Bursztyn, A., Cajigas-Segredo, N., Esquivel, G., Hess, R., Nahari, S. G., & Lopez, E. C. (1999). Providing psychological services to racially, ethnically, culturally, and linguistically diverse individuals in the schools: Recommendations for practice. *School Psychology International, 20*(3), 243–264. <https://doi.org/10.1177/0143034399203001>
- Rorty, R. (1979). *Philosophy and the Mirror of Nature*. Princeton: Princeton University Press.
- Rorty, R. (1982). *Consequences of Pragmatism*. Minneapolis: University of Minnesota Press.
- Rowley, J., Rajbans, T., & Markland, B. (2020). Supporting parents through a narrative therapeutic group approach: a participatory research project. *Educational Psychology in Practice, 36*(2) 115-132. DOI: 10.1080/02667363.2019.1700349
- Rudy, S. F. (1996). A review of Delphi surveys conducted to establish research priorities by specialty nursing organizations from 1985 to 1995. *ORL Head and Neck Nursing, 14*(2), 16-24.

- Runyan, H., Grothaus, T., & Michel, R. E. (2019). Classroom Management Competencies for School Counselors: A Delphi Study. *Professional School Counseling, 22*(1), 1-12. <https://doi.org/10.1177/2156759X19834293>
- Rupasinha, J. (2015). Addressing an imbalance? Educational Psychologists' considerations of ethnic minority cultural factors in assessments for autistic spectrum condition. *Educational and Child Psychology, 32*(2), 77-88.
- Sackman, H. (1975). Summary evaluation of Delphi. *Policy Analysis, 1*(4), 693-718.
- Sandeen, E., Moore, K. M., & Swanda, R. M. (2018). Reflective local practice: A pragmatic framework for improving culturally competent practice in psychology. *Professional Psychology: Research and Practice, 49*(2), 142–150. <https://doi.org/10.1037/pro0000183>
- Saxton, J. D. (2001). An introduction to cultural issues relevant to assessment with Native American youth. *California School Psychologist, 6*, 31–38. <https://doi.org/10.1007/BF03340881>
- Schuman, H., & Presser, S. (1996). *Questions and answers in attitude surveys*. London, UK: Sage Publications.
- Shweder, R. (1995). Cultural psychology: What is it? In N. R. Goldberger & J. B. Veroff (Eds.), *The culture and psychology reader* (pp. 41–86). New York: New York University Press.

Simcox, A. G., Nuijens, K. L., & Lee, C. C. (2006). School Counselors and School Psychologists: Collaborative Partners in Promoting Culturally Competent Schools. *Professional School Counseling, 9*(4), 272–277.

<https://doi.org/10.5330/prsc.9.4.u8x6jh4gk6h77858>

Singh, R., & Dutta, S. (2010). *“Race” and Culture: Tools, Techniques, and Trainings*. Karnac Books Ltd.

Skiba, R. J., Knesting, K., & Bush, L. D. (2002). Culturally Competent Assessment: More Than Nonbiased Tests. *Journal of Child and Family Studies, 11*(1), 61-78. <https://doi.org/10.1023/A:1014767511894>

Strand, S. (2021). *Ethnic, socio-economic and sex inequalities in educational achievement at age 16*. University of Oxford, Department of Education. <https://www.gov.uk/government/publications/the-report-of-the-commission-on-race-and-ethnic-disparities-supporting-research/ethnic-socio-economic-and-sex-inequalities-in-educational-achievement-at-age-16-by-professor-steve-strand>

Strand, S., & Lindorff, A (2018). *Ethnic disproportionality in the identification of Special Educational Needs (SEN) in England: Extent, cause and consequences*. University of Oxford, Department of Education. <http://www.education.ox.ac.uk/research/the-unequal-representation-of-ethnic-minorities-in-special-education-in-england-extent-causes-and-consequences/>

- Sündermann, O., See, C., & Veale, D. (2019). The delivery of psychotherapy—A Delphi study on the dimensions of psychotherapy delivery and a proposal for reporting guidelines. *Clinical Psychology and Psychotherapy*, *26*, 483-491.
- Sue, D. W., Arredondo, P., & McDavis, R. J. (1992). Multicultural counseling competencies and standards: A call to the profession. *Journal of Multicultural Counseling and Development*, *20*, 64 – 88. <https://doi.org/10.1002/j.2161-1912.1992.tb00563.x>
- Sue, D. W., Bernier, J. E., Durrant, A., Feinberg, L., Pedersen, P., Smith, E. J., & Vasquez-Nuttall, E. (1982). Position paper: Cross-cultural counseling competencies. *The Counseling Psychologist*, *10*, 45–52. <http://dx.doi.org/10.1177/0011000082102008>
- Sue, S., & Zane, N. (2009). The role of culture and cultural techniques in psychotherapy: A critique and reformulation. *Asian American Journal of Psychology*, *S*(1), 3–14. <https://doi.org/10.1037/1948-1985.S.1.3>
- Suler, J. (2004). The Online Disinhibition Effect. *Cyber Psychology & Behaviour*, *7*(3), 321-326. <https://doi.org/10.1089/1094931041291295>
- Sumsion, T. (1998). The Delphi technique: an adaptive research tool. *British Journal of Occupational Therapy*, *61*(4), 153-156. <https://doi.org/10.1177/030802269806100403>

Tashakkori, A., & Teddlie, C. (1998). *Mixed Methodology: Combining Qualitative and Quantitative Approaches*. Thousand Oaks: Sage Publications.

Thangaratinam, S., & Redman, C. W. (2005). The Delphi technique. *The Obstetrician & Gynaecologist*, 7(2), 120-125. <https://doi.org/10.1576/toag.7.2.120.27071>

The UN Refugee Agency (2019). *Global Trends: Forced Displacement in 2019*. <https://www.unhcr.org/5ee200e37.pdf>

Theara, G., & Abbott, D. (2015). Understanding the experiences of South Asian parents who have a child with autism. *Educational and Child Psychology*, 32(2), 47-56.

Trainee Educational Psychologists' Initiative for Cultural Change (2020). *Mission Statement*.

Triandis, H. C. (2002). Subjective culture. *Online Readings in Psychology and Culture*, 2(2).

Tseng, W. S. (2004). Culture and psychotherapy: Asian perspectives. *Journal of Mental Health*, 13(2), 151-161. <https://doi.org/10.1080/09638230410001669282>

- Tummala-Narra, P., Claudius, M., Letendre, P. J., Sarbu, E., Teran, V., & Villalba, W. (2018). Psychoanalytic psychologists' conceptualizations of cultural competence in psychotherapy. *Psychoanalytic Psychology, 35*(1), 46–59. <https://doi.org/10.1037/pap0000150>
- Urdan, T., & Bruchmann, K. (2018). Examining the academic motivation of a diverse student population: A consideration of methodology. *Educational Psychologists, 53*(2), 114-130. <https://doi.org/10.1080/00461520.2018.1440234>
- Usher, E. L. (2018). Acknowledging the Whiteness of Motivation Research: Seeking Cultural Relevance. *Educational, School and Counseling Psychology, 53*(2), 131-144. <https://doi.org/10.1080/00461520.2018.1442220>
- Vega, D., Tabbah, R., & Monserrate, M. (2018). Multicultural school psychology training: An examination of students' self-reported course outcomes. *Psychology in the Schools, 55*(5), 449-463. <https://doi.org/10.1002/pits.22123>
- Walker, A. M., & Selfe, J. (1996). The Delphi method: a useful tool for the allied health researcher. *British Journal of Therapy and Rehabilitation, 3*(12) 677-680.
- Weiss, R. A., & Rosenfeld, B. (2012). Navigating cross-cultural issues in forensic assessment: Recommendations for practice. *Professional Psychology: Research and Practice, 43*(3), 234–240. <https://doi.org/10.1037/a0025850>

Williams, A. R. (2020). Editorial: The Whiteness of educational psychology: Colonialism, post-colonialism and racialisation in the theory, training and practice of educational psychology. *Educational Psychology research and practice*, 6(1), 1-8. Available at: <https://www.uel.ac.uk/research/Educational-Psychology-Research-and-Practice/Volume-6-No-1-2020>

Williams, A., Weerasinghe, D., & Hobbs, C. (2015). 'Race', culture and ethnicity in educational psychology. *Educational and Child Psychology*, 32(2), 5-9.

Wood, J. J., Chiu, A. W., Hwang, W.-C., Jacobs, J., & Ifekwunigwe, M. (2008). Adapting cognitive-behavioral therapy for Mexican American students with anxiety disorders: Recommendations for school psychologists. *School Psychology Quarterly*, 23(4), 515–532. <https://doi.org/10.1037/1045-3830.23.4.515>

York, K. (2020, January). BAME representation and psychology. *The Psychologist*. <https://thepsychologist.bps.org.uk/volume-33/january-2020/bame-representation-and-psychology>

Zaniolo, A. (2019). A Critical Evaluation of EPs' Cognitive Assessment Work with Children and Young People with English as an Additional Language. *Educational Psychology Research and Practice*, 5(1), 1-16. <https://doi.org/10.15123/uel.88731>

Zigarelli, J. C., Jones, J. M., Palomino, C. I., & Kawamura, R. (2016). Culturally Responsive Cognitive Behavioral Therapy: Making the Case for Integrating Cultural Factors in Evidence-Based Treatment. *Clinical Case Studies*, 1–16.
<https://doi.org/10.1177/1534650116664984>

7. Appendices

Appendix A

Studies (n=11) from Ratheram's 2020 SLR informing EP practice with minority cultural and linguistic populations in the UK

Study	Summary	Focus on CRP?
EPs		
Anderson (2018) doctoral thesis - An exploration of the intercultural competence and the cross-cultural experiences of educational psychologists in the United Kingdom	"EP/Ts generally perceived themselves to be competent to work cross-culturally with particular areas of competence including knowledge of assessment bias, poverty effects, and positive attitudes towards diverse cultures. EP/Ts also reported areas of lower competence including theories of racial/ethnic identity development, limited experiences of community work and limited knowledge of community resources. However, EP/Ts perceptions about development needs depended upon their awareness. The process of participating in the study raised awareness of gaps in knowledge and limitations in practice" (pp.3-4)	Focus is largely on self-perceived cultural competence of EPs
Krause (2018) – doctoral thesis: What do educational psychologists recognise is their unique contribution within their profession when working with ethnic minority clients using language/s other than English: a socio-cultural activity theory analysis	"The findings suggest that EP services may not yet have taken advantage of the opportunities that workforce diversity offers. As the EPs' practice is varied, it is difficult to make specific recommendations to guide EPs in their work with EMCs. The study suggests that data should be collected on the other languages EPs can speak and then guidelines drawn up as to how this expertise might be used and the issues arising. Further research is needed to determine the potential benefits to the child and family when the EP speaks the same language (other than English). It would also be useful to explore whether there is value for EMC families when their EP also has English as a secondary language, even when the additional language is not shared" (abstract, para. 3)	Focus is on EPs who speak a second language.
Rupasinha (2015) - Addressing an imbalance? Educational Psychologists' considerations of ethnic minority cultural factors in assessments for autistic spectrum condition	How EPs consider ethnic minority cultural factors (EMCF) within Autistic spectrum conditions (ASC) assessments.	Themes are linked to cultural factors which are considered within assessment. But not all themes were linked to CRP, some focused on barriers, i.e. the distinctiveness of ASC
Working with Parents		
German (2008) - Educational psychologists promoting the emotional wellbeing and resilience of refugee parents	Explores how educational psychologists can begin to address this imbalance to promote the emotional wellbeing and resilience of refugee parents	Focus is not predominately on CRP. It is on emotional wellbeing and resilience of refugee parents. Findings link to findings from current research i.e. approaches that foster non-pathology, mutual respect, shared learning, empowerment and advocacy
Lawrence (2014) - Black African parents' experiences of an Educational Psychology Service	"Quantitative data were gathered from the EPS preschool database and parents completed the Family Support Scale which explored the social support they accessed outside of the EPS, such as relatives. Semi-structured interviews were used to explore five parents' experiences of the preschool EPS" (p. 238)	Study is based on Black African parents' experiences of an EPS. Implications are useful: "The research study highlighted the important role that professionals have in working with families. For professionals, there is a need for role transparency; equality in the parent-professional relationship; and an adaptation of practice to suit families' belief systems. These factors are not specific to Black African parent-professional relationships. What is specific is the role of culture, and the ways in which professionals respond to and try to make sense of some culturally based views of special needs." (p. 251)

Specific Interventions		
German (2013) - Developing our cultural strengths: Using the 'Tree of Life' strength-based, narrative therapy intervention in schools, to enhance self-esteem, cultural understanding and to challenge racism	Evaluates the use of the 'Tree of Life' (ToL) intervention with a class of 29 Year 5 pupils (aged 9 and 10-years-old) in a primary school in North London	Focus is not on EPs developing CRP. It is on effectiveness of ToL intervention. Findings indicate importance strengths in children increasing their cultural self-awareness
Hulusi & Oland (2010) - Using narrative to make sense of transitions: supporting newly arrived children and young people	Intervention: "Talking Stones" to help newly arrived CYP (NACYC) make coherent narratives of their experiences.	Focus is on use of talking stones. Large part of paper is conceptualising new arrivals in education and their experiences, then moves onto narrative psychology and talking stones. Main usefulness comes from conclusion: "The use of Talking Stones acted as a scaffold that allowed newly arrived children and young people to articulate a coherent narrative of their migration" (pp. 348 - 349)
Action Research		
Gaulter & Green (2015) - Promoting the inclusion of migrant children in a UK school	Action research promoting the inclusion of Slovakian children in a primary school.	The authors acknowledged the implications for EPs working in diverse communities. Close links were made to Bronfenbrenner's ecological system theory (1979) to frame their argument that the inclusion of migrant children is influenced by wider systems such as the economic climate. They concluded that EPs are well placed to use eco-systemic approaches to consider culture and to challenge thinking.
Morgan (2018) doctoral thesis- The educational needs of unaccompanied asylum-seeking children in UK in one local authority in England: Professional and child perspectives	Part 1. Six semi-structured interviews with six professionals and use of Talking Stones with unaccompanied asylum-seeking children. Part 2. Collaborative action research, one cycle of three group supervision sessions with five professionals from part one, using a solution circles approach (p.6)	Focus is on the specific experiences, use of group supervision. "An array of opportunities and challenges of supporting the social and emotional needs of UASC are outlined by school and college staff. Such findings include: recognising and identifying the social and emotional needs of UASC, a lack of experience and opportunities for staff training, challenges with inclusion and integration of UASC within the educational settings, funding and available resources, developing supportive and trusting relationships over time and forming social connections" (p. 7)
Rowley, Rajbans & Markland (2020) - Supporting parents through a narrative therapeutic group approach: a participatory research project	What do ethnic minority parents of CYP with SEND think of the Tree of Life support group intervention in which they participated?	Focus is on using ToL as a support group intervention for parents. "Qualitative data were collected through a focus group with six parents on their views of the sessions. The parent co-researcher carried out the analysis of the data, using thematic analysis. The main themes identified were: "Sharing", "Self-awareness" and "Change". Strengths and limitations of the participatory research project are considered. The findings are discussed in relation to the experiences of ethnic minority parents of children with SEND. They are also considered in the context of educational psychologists engaging in critical and transformative practice through using narrative, strengths-based approaches, responding sensitively to diversity and working in ways which empower service-users" (p. 115)
Sharpe (2010) doctoral thesis- Identifying and meeting the social, emotional and behavioural needs of refugee children in a primary school.	Action Research with primary school staff & refugee/asylum seeking CYP to identify & develop support for social, emotional & behavioural needs.	Implications are provided for EPs at an individual, group and whole school and LA level, to support refugee children. Some of these include working collaboratively with other professionals, supporting with training schools, carrying out interventions etc. But main focus is not how EPs can develop CRP generally.

Appendix B

Articles excluded after reading full text and reasons for their exclusion

Reason 1: Culture or cultural responsiveness was perceived to be an 'add-on', as opposed to the focus of the article

Reason 2: Articles which focused on self-report measures of EPs' cultural competency

Reason 3: Article predominately focused on knowledge/practices of a specific cultural group

Reason 4: Results indicate a lack of culturally responsive practices

Articles excluded after reading full text	Reason
Fallon, L. M., & Mueller, M. R. (2017). Culturally Responsive Wraparound Supports: Collaborating with Families to Promote Student's Behavior Regulation across Settings. <i>Contemporary School Psychology, 21</i> (3), 201-210. https://doi.org/10.1007/s40688-016-0116-8	1
Newell, M. The Implementation of Problem-Solving Consultation: An Analysis of Problem Conceptualization in a Multiracial Context. <i>Journal of Educational & Psychological Consultation, 20</i> (2), 83-105. https://doi.org/10.1080/10474411003785529	1/4
Castro-Villarreal, F., Rodriguez, B. J. (2017). Using Consultee-Centred Consultation with Teachers in a Contemporary School Setting to Inform Culturally Responsive Practice. <i>Contemporary School Psychology, 21</i> (3), 240-254. https://doi.org/10.1007/s40688-017-0135-0	1
Haboush, K. J. (2007). Working with Arab American Families: Culturally Competent Practice for School Psychologists. <i>Psychology in the Schools, 44</i> (2), 183-198. https://doi.org/10.1002/pits.20215	3
McIntosh, J., Moniz, C., Craft, C. B., Golby, R., & Steinwand-Deschambeault, T. (2014). Implementing School-Wide Positive Behavioural Interventions and Supports to Better Meet the Needs of Indigenous Students. <i>Canadian Journal of School Psychology, 29</i> (3), 236-257. https://doi.org/10.1177/0829573514542217	1
Harris, B., Sullivan, A. L., Oades-Sese, G. V., & Sotelo-Dynega, M., (2015). Culturally and Linguistically Responsive Practices in Psychoeducational Reports for English Language Learners. <i>Journal of Applied School Psychology, 31</i> (2), 141-166. https://doi.org/10.1080/15377903.2014.1002144	4
Harris, McClain, M. B., Haverkamp, C. R., Cruz, R. A., Benallie, K. J., & Benney, C. M. (2019). School-Based Assessment of Autism Spectrum Disorder among Culturally and Linguistically Diverse Children. <i>Professional Psychology: Research and Practice, 50</i> (5), 323-332. https://doi.org/10.1037/pro0000256	2

Appendix C

Critical appraisal of empirical studies using CASP checklists

Table C1

Critical appraisal of empirical studies using ‘Qualitative Research’ CASP Checklist

Questions	Culturally Responsive Consultation Among Practising School Psychologists (Parker et al, 2020)	Case Vignettes of School Psychologists’ Consultations Involving Hispanic Youth (Ramirez & Smith, 2007)
1. Was there a clear statement of the aims of the research?	Yes <i>“This study was a part of a larger study that sought to understand (a) how school psychologists conceptualized cultural responsiveness, (b) school psychologists’ perceptions of how they learned how to be culturally responsive, and (c) strategies and methods school psychologists used to provide culturally responsive consultation.”</i>	Yes Investigate how school consultation was adapted with Hispanic youth. Lack of research regarding multicultural issues in consultation, especially with Hispanic youth.
2. Is a qualitative methodology appropriate?	Yes Conceptualising CR and EP experiences of being CR, largely subjective, down to experiences, links to constructivist methodology which is outlined in study.	Yes Analysis of case vignettes
3. Was the research design appropriate to address the aims of the research?	Yes	Yes
4. Was the recruitment strategy appropriate to the aims of the research?	Yes Through purposive and snowball sampling. Those who expressed interest completed a pre-screening questionnaire - needed to be school-based psychologists who engaged in consultation at least 10% of the time.	Can’t Tell Subsample of NASP members. Part of a larger study. Info given on why case vignettes were not included. Not entirely clear for this study how they were chosen? Inclusion criteria? i.e. had to have worked with Hispanic population 'x' amount
5. Was the data collected in a way that addressed the research issue?	Yes Semi-structured interviews main source of data collection. Justification was <i>‘based on our research paradigm’</i> .	Yes Case vignette. Justification of method chosen? Explanation of the question given to participants to outline their case vignette

6. Has the relationship between researcher and participants been adequately considered?	<p style="text-align: center;">Can't Tell</p> <p>Researcher positionality has been referenced, <i>'took care to discuss how our different perspectives and experiences could influence the data gathered'</i> however this was not revisited in the discussion</p>	<p style="text-align: center;">No</p> <p>No reference to researcher bias. Inter-rater reliability was addressed to check reliability of coding.</p>
7. Have ethical issues been taken into consideration?	<p style="text-align: center;">Yes</p> <p>Ethical approval was sought, and ethical considerations were addressed. However, there was not any discussion of if participants became distressed i.e. through exploring difficult casework/barriers to CR consultation, and how this would be addressed.</p>	<p style="text-align: center;">No</p> <p>It seems this was part of a larger study. Issues of consent, explanation of study etc was not outlined</p>
8. Was the data analysis sufficiently rigorous?	<p style="text-align: center;">Yes</p> <p>Constant comparative analysis. Process of establishing inter-coder agreement. Audit trail was kept. Research team met every 2 weeks. No detailed explanation of how the data presented was selected from the original sample, to demonstrate analysis process. Did not revisit researcher positionality and potential biases that may have formed through this process (but discussions were had through inter-coder agreement, so is this sufficient?</p>	<p style="text-align: center;">Can't Tell</p> <p>Brief description of analysis process - thematic coding (open-coded, axial-coded and selective coding). Inter-rater reliability referenced. No mention of researcher position, bias etc. No example to demonstrate the process of selection.</p>
9. Was there a clear statement of findings?	<p style="text-align: center;">Yes</p> <p>Identified 5 major themes. Within each theme, authors spoke of the potential barriers related to the 5 themes. No discussion re: respondent validation.</p>	<p>4 major themes. Anonymous vignette so no respondent validation</p>
10. How valuable is the research?	<p style="text-align: center;">Yes</p> <p>Support for modifying established consultation techniques to take culture into account. Importance of an ecological model and moving away from within child factors. Acknowledge future research should look at the extent to which these adaptations improve outcomes</p>	<p style="text-align: center;">Yes</p> <p>Implications for practice reference cultural brokers, further training, university training programs</p>

Table C2

Critical appraisal of empirical studies using the 'Cohort Studies' CASP Checklist

	Addressing Cultural Responsiveness in Consultation: An Empirical Demonstration (McKenney et al, 2017)	Identifying Critical Cross-Cultural School Psychology Competencies (Rogers & Lopez, 2002)	Conceptualizing Cross-Cultural School Psychology Competencies (Lopez & Rogers, 2001)
1. Did the study address a clearly focused issue?	Yes Focus: Population: teachers (through SP support) Study tried to detect a beneficial effect in CRC (after strengthening classroom management). Question remains as to whether the issue was 'clearly focused' as the first phase of the research was strengthening classroom management (the second phase was measuring the impact of CRC on classroom disruption levels).	Yes Population was cross-cultural experts, including school psychology practitioners, faculty and supervisors/administrators.	Yes Identifying critical cross-cultural competencies for school psychologists. Where this differs to Rogers and Lopez (2002) is the open-ended nature of round one, to establish what experts themselves perceive to be cross-cultural competencies, as opposed to a definition derived from the literature.
2. Was the cohort recruited in an acceptable way?	Yes Teachers were recruited by the consultant during staff meetings at the beginning of the year. Inclusion criteria was ensuring the teachers had a culturally diverse classroom (definition of this was provided).	Yes Clearly outlined their expert panel i.e. qualified SPs with extensive accomplishments re: serving the culturally diverse. 2 out of 5 criterion needed to have been met: (a) author of two or more SP publications concerning diverse clients; (b) presented three or more presentations on cross-cultural topics; (c) member of committee re: supporting culturally diverse; (d) 5 years' experience working with culturally diverse populations and; (e) member of training program that emphasized multicultural training. Detail was provided about each of these criteria.	Yes 5 specific criteria used to select panel (differs slightly from Rogers and Lopez 2002, criteria e). (a) author of two or more SP publications concerning diverse clients; (b) presented three or more presentations on cross-cultural topics; (c) faculty member of training program that emphasized multicultural training; (d) 5 years' experience working with culturally diverse populations and (e). Panellists who met criteria a, b and c were asked to nominate supervisors who had 5 years of experience or more working with culturally and linguistically diverse clients. 128 met criteria, 64 were randomly selected
3. Was the exposure accurately	Yes The primary variable was classroom disruptions. Secondary variables included	Yes All experts given same info, questionnaire, ratings etc.	Yes All participants exposed to same instructions and procedures: groups given

	measured to minimise bias?	teachers use of labelled praise and opportunities to respond. Classroom management was strengthened first in an attempt to minimise bias.		14 categories: re: cross cultural competencies and asked to identify cross cultural competencies within these groups.
4.	Was the outcome accurately measured to minimise bias?	Yes Teachers completed the CRQ before and after CRC, to see if this input had an impact. They also completed the Treatment Evaluation Inventory to measure acceptability of consultation, which has reportedly acceptable internal reliability and validity.	Yes Established consensus levels. Mean, S.D, range.	Yes Established consensus levels. Mean, S.D, range.
5a.	Have the authors identified all important confounding factors?	Can't Tell Cultural responsiveness is complex, and therefore the authors acknowledge it cannot be easily observed. Additionally, the self-referred nature of teacher participation was acknowledged to be a confounding factor, as their motivation to participate may have impacted results.	Yes Acknowledged by the authors: definition of cross-cultural expertise, task demand of Delphi and subsequent attrition rate, ceiling effect, a lot rated statements as 'very important' in round 1.	Yes Small sample of panellists (reduced to 11 from round 1 to round 2 and 3) Quantity and quality of competency items generated. Reduced initial 821 statements from experts to 463 - not entirely clear how this was achieved, mentions inter-rater reliability for creating the categories but not how statements were reduced/combined?
5b.	Have they taken account of the confounding factors in the design and/or analysis?	Yes Classroom management effectiveness produced floor effect - flaw in methodology Analysis: differences of CM and CR consultation on use of labelled praise and opportunities to respond. Masked visual analysis conducted retrospectively therefore authors acknowledged the inability to constrain Type I error to less than the conventionally accepted value.	Yes Recognise definition of expert panel and questionnaire 1 being statements generated from lit review has impacted results. But acknowledged more literature generated statements reached consensus vs respondent responses.	Yes High ceiling effects The relationship between the level of agreement and the wide range of consensus used in this investigation.
6a.	Was the follow up of subjects complete enough?	Yes	Yes	Yes
6b.	Was the follow up of subjects long enough?	Can't Tell Not clear how much after the CRC that teachers then did the post-measure of CRQ and TEI	Can't Tell Not sure how many times non-responders were contacted?	Can't Tell Not sure how many times non-responders were contacted?

7. What are the results of this study?	There was an observed relationship between the classroom management phase of consultation with the number of classroom disruptions reducing. Due to the effectiveness of this first phase, additional reductions in classroom disruption following CRC was difficult to observe.	Identification of key cross-cultural competencies	Identification of 89 critical cross-cultural competencies.
8. How precise are the results?	Graphs summarise frequency of classroom disruptions, labelled praise and opportunities to respond across classrooms Mean data provided of disruptions, use of labelled praise and opportunities to respond at baseline, after 'classroom management' consultation, and after 'cultural responsiveness' consultation across classes and teachers	Mean and standard deviations are provided for each statement	Mean and standard deviations are provided for each statement
9. Do you believe the results?	Yes But acknowledge the challenge in attributing the change to culturally responsive consultation, due to initial phase	Yes	Yes
10. Can the results be applied to the local population?	Yes Provides methods of how consultants may support consultees in considering culture within their classrooms	Yes Provides a definition of cross-cultural competencies, relevant to full spectrum of SP services i.e. not focusing on a particular area within SP. Broad range of minority respondents sourced.	Yes Provides a definition of cross-cultural competencies, relevant to full spectrum of SP services i.e. not focusing on a particular area within SP.
11. Do the results of this study fit with other available evidence?	Researchers acknowledge that this is one of very few studies focusing on cultural responsiveness within consultation via a single-case design	Yes Statements with the least consensus came from topics linked to assessment, working with interpreters and laws and regulations. This aligns to contention re: use of standardised assessments, and ethical implications of using interpreters, and perhaps less work at a systemic level with policy.	Yes
12. What are the implications of this study for practice?	"these findings indicate that culturally diverse youth benefit when teachers engage in meaningful, relevant, evidence-based forms of consultation that target both classroom management and culturally responsive instruction" (p.313). Implications for SPs regarding developing and applying culturally responsive consultation skills	Implications for the future training of practicing SPs. Prompting an increase in demand for further cross-cultural training for current SPs.	Implications for the future training of practicing SPs. Prompting an increase in demand for further cross-cultural training for current SPs.

Table C3

Critical appraisal of empirical studies using the 'Case Control Study' CASP Checklist

Culturally Responsive Adaptations in Evidence-Based Treatment: The Impact on Client Satisfaction (Jones et al, 2017)	
1. Did the study address a clearly focused issue?	Yes Impact of CR CBT on counselling clients with depression symptoms Population was adolescents. Detecting impact on culturally adaptive EBT on client satisfaction. However, CBT clinicians were from varied backgrounds (school psychologists, psychology, social work, and counselling).
2. Did the authors use an appropriate method to answer their question?	Yes CBT vs adapted CBT. Appropriate to use control i.e. without CR element.
3. Were the cases recruited in an acceptable way?	Yes Adolescent participants recruited through flyers. Cases are not clearly defined i.e why they were suitable for CBT. 5 adolescents (11-15years old, 4 females, 1 male), 4 of whom were Caucasian. Participants were from the Pacific Northwest and had depression symptoms. Not clear if there was an established reliable system for selecting cases i.e. extent and longevity of depression symptoms
4. Were the controls selected in an acceptable way?	Can't Tell Non-randomized repeated measure design. Either CBT or CR-CBT. Unclear how clinicians and clients were allocated to each. Do not have enough information about the selected clients. 3 in CBT vs 2 in CR-CBT group.
5. Was the exposure accurately measured to minimise bias?	Can't Tell CR-CBT is clearly defined i.e. the cultural adaptations made for this treatment group. Readers are invited to review Jones et al 2015 for more info on the group CBT training. Measurement of effectiveness is same for both (self-RCADs rating). However, 'CBT as usual' is not necessarily clearly defined i.e. there is not a set manualised intervention to follow? Each client had a different clinician too. Whilst they followed a clearly defined process, the specifics of how this was achieved cannot be guaranteed to be the same as others following the same process. Also clinicians come from different professional backgrounds which may influence their style and approach. Whilst measures of effectiveness were the same i.e. SEQs, I am unsure if exposure was accurately measured.
6a. Aside from the experimental intervention, were the groups treated equally?	Can't Tell Different clinicians from different professions. They all had CBT training together, and received the same amount of supervision etc. Unaware of other genetic, environmental, and socio-economic factors of the clients.
6b. Have the authors taken account of the potential confounding factors in the design and/or in their analysis?	Yes/Can't Tell Small sample size acknowledges probability of Type II error. Also, mixture of ethnicities across client and clinician but no mention of how this may have confounded results.
7. How large was the treatment effect?	Statistically significant main effect for positivity, smoothness and arousal at 3 different time points. Differences noted between client satisfaction at different time points in CBT vs CR-CBT e.g. differential effects appearing quicker in CR-CBT group.
8. How precise was the estimate of the treatment effect?	Mixed between-within subjects' ANOVA. Levine's F test for the homogeneity of variance revealed that the assumption was not violated. However, since the sample size was small, we adopted an alpha level of

		.08 for all subsequent analyses. Considered differences amongst time points of treatment.
9	Do you believe the results?	Yes Process was followed re: CBT training and CR-CBT. However, differences amongst clients and clinicians means that direct comparison of effects is difficult to conclude.
10.	Can the results be applied to the local population?	Yes Population that we are likely to work with and therefore likely that we can apply these results to those we work with.
11.	Do the results of this study fit with other available evidence?	Yes Fits in terms of effectiveness of CBT. Less awareness/research regarding culturally adapted interventions.

Table C4

Critical appraisal of Ratheram's 2020 doctoral thesis using the 'Qualitative Study CASP Checklist

Questions		Exploring EPs' work with CYP and their families from minority cultural and linguistic communities (Ratheram, 2020)
1.	Was there a clear statement of the aims of the research?	Yes <i>"The aim of this thesis was to explore the work and development of the practice of educational psychologists (EPs) with children, young people (CYP) and families from minority cultural and linguistic (C&L) communities"</i>
2.	Is a qualitative methodology appropriate?	Yes The researcher used an action research methodology, and provided a rationale for why this was suitable, "the complex and recursive nature of transformative professional learning requires a model which foregrounds agency, collaboration and criticality about practice over a sustained period (Kennedy, 2014; Boylan & Demack, 2018). Therefore, a participatory action research paradigm was considered appropriate for this study" (p.50)
3.	Was the research design appropriate to address the aims of the research?	Yes The research design involved four focus groups with an EPS. The researcher included justification of why this method was chosen.
4.	Was the recruitment strategy appropriate to the aims of the research?	Yes Through purposive sampling, "EPSs who might be interested in participating in this action research project were identified through purposive sampling and sent a brief outline". It is not clear whether the researcher chose and ES or only one came forward.
5.	Was the data collected in a way that addressed the research issue?	Yes The researcher provides a structure which was used for the four focus groups.
6.	Has the relationship between researcher and participants been adequately considered?	Yes/Can't Tell The researcher outlines 'axiology' i.e. their values and belief systems which has influenced the approach to the research. The researcher explains that themes following focus groups were sent back to participants for member checking. It is less explicit whether the researcher critically examined potential bias i.e. within the data collection, recruitment process etc.
7.	Have ethical issues been taken into consideration?	Yes The researcher acknowledged the appropriate obtainment of ethics, and ways to mitigate possible harm in a 'low risk' research study i.e. information sheet, contracting during focus group.
8.	Was the data analysis sufficiently rigorous?	Yes The researcher describes how the data was "inductively analysed collaboratively using an adaptation of the Nominal Group Technique" (p. 54). The analysis description was brief but further information was appended e.g. where themes were checked by members.
9.	Was there a clear statement of findings?	Yes The researcher presented a thematic map of findings, summarising a description of each overarching theme and themes within.
10.	How valuable is the research?	Yes Whilst the research accounts the experiences of one EPS, the reflections support existing literature around culture i.e. increasing awareness, and provides EPs/EPs with ideas as to how to develop their practice in this area further.

Appendix D

TREC Application Form

The Tavistock and Portman 
NHS Foundation Trust

Tavistock and Portman Trust Research Ethics Committee (TREC)

APPLICATION FOR ETHICAL REVIEW OF RESEARCH INVOLVING HUMAN PARTICIPANTS

This application should be submitted alongside copies of any supporting documentation which will be handed to participants, including a participant information sheet, consent form, self-completion survey or questionnaire.

Where a form is submitted and sections are incomplete, the form will not be considered by TREC and will be returned to the applicant for completion.

For further guidance please contact Paru Jeram (academicquality@tavi-port.nhs.uk)

SECTION A: PROJECT DETAILS

Project title	How can Educational Psychologists be culturally responsive in their practice? A Delphi Study		
Proposed project start date	May 2020	Anticipated project end date	May 2021

SECTION B: APPLICANT DETAILS

Name of Researcher	Ellie Sakata
Email address	ESakata@tavi-port.nhs.uk
Contact telephone number	[REDACTED]

SECTION C: CONFLICTS OF INTEREST

<p>Will any of the researchers or their institutions receive any other benefits or incentives for taking part in this research over and above their normal salary package or the costs of undertaking the research? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, please detail below:</p>
<p>Is there any further possibility for conflict of interest? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, please detail below:</p>

FOR ALL APPLICANTS


<p>'Is your research being commissioned by and or carried out on behalf of a body external to the trust? (for example; commissioned by a local authority, school, care home, other NHS Trust or other organisation).</p> <p><small>*Please note that 'external' is defined as an organisation which is external to the Tavistock and Portman NHS Foundation Trust (Trust)</small></p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> NA <input type="checkbox"/></p>
<p>If YES, please supply details below:</p>	
<p>Has external* ethics approval been sought for this research? (i.e. submission via Integrated Research Application System (IRAS) to the Health Research Authority (HRA) or other external research ethics committee)</p> <p><small>*Please note that 'external' is defined as an organisation/body which is external to the Tavistock and Portman Trust Research Ethics Committee (TREC)</small></p> <p>If YES, please supply details of the ethical approval bodies below AND include any letters of approval from the ethical approval bodies:</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p><input checked="" type="checkbox"/></p>
<p>If your research is being undertaken externally to the Trust, please provide details of the sponsor of your research?</p>	
<p>Do you have local approval (this includes R&D approval)?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p><input type="checkbox"/> NA <input checked="" type="checkbox"/></p>


SECTION D: SIGNATURES AND DECLARATIONS

<p>APPLICANT DECLARATION</p> <p>I confirm that:</p> <ul style="list-style-type: none"> • The information contained in this application is, to the best of my knowledge, correct and up to date. • I have attempted to identify all risks related to the research. • I acknowledge my obligations and commitment to upholding our University's Code of Practice for ethical research and observing the rights of the participants. • I am aware that cases of proven misconduct, in line with our University's policies, may result in formal disciplinary proceedings and/or the cancellation of the proposed research. 	
<p>Applicant (print name)</p>	<p>Ellie Sakata</p>
<p>Signed</p>	<p>Ellie Hana Sakata</p>
<p>Date</p>	<p>24th April 2020</p>

FOR RESEARCH DEGREE STUDENT APPLICANTS ONLY

<p>Name of Supervisor</p>	<p>Dr Rachael Green</p>
<p>Qualification for which research is being undertaken</p>	<p>Doctorate in Child, Community and Educational Psychology (DEdPsy)</p>

Supervisor –	
<ul style="list-style-type: none"> Does the student have the necessary skills to carry out the research? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Is the participant information sheet, consent form and any other documentation appropriate? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Are the procedures for recruitment of participants and obtaining informed consent suitable and sufficient? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Where required, does the researcher have current Disclosure and Barring Service (DBS) clearance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> 	
Signed	
Date	24 th April 2020

COURSE LEAD/RESEARCH LEAD	
<ul style="list-style-type: none"> Does the proposed research as detailed herein have your support to proceed? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> 	
Signed	
Date	28.04.2020

SECTION E: DETAILS OF THE PROPOSED RESEARCH

<p>1. Provide a brief description of the proposed research, including the requirements of participants. This must be in lay terms and free from technical or discipline specific terminology or jargon. If such terms are required, please ensure they are adequately explained (Do not exceed 500 words)</p>
<p>This is an exploratory study which aims to develop a framework that can be used by Educational Psychologists (EPs) to evaluate the extent to which they are culturally responsive in their practice. Individual experiences shape our definition of culture, making it a difficult construct to define. Culture is undoubtedly “complex and multi-dimensional” (Urdan & Bruchmann, 2018, p. 124) and should consider both culture-specific (etic) as well as universal aspects of culture (emic) (Triandis, 2002). The proposed research aligns with King, McInerney & Pitliya’s definition, “the social norms, roles, beliefs, values and traditions that influence the behaviours of a particular social group” (2017, p. 1032).⁴</p> <p>There are differing opinions on whether culture overlaps with other constructs such as race and ethnicity. Kumar et al (2018) define culture as being linked to ethnicity but not race, whereas others conclude that culture overlaps with both ethnicity and race (King, et al, 2015; Urdan & Bruchmann, 2018). The proposed research uses the single term ‘culture’ for ease of reference, but recognises individual perspectives, experience and its dynamic nature will underpin definitions, (Kumar, Busho & Bondie, 2018).</p> <p>Culturally responsive practice can be defined as having both an awareness of how culture influences individuals but also responding appropriately to cultural difference (Barsky, 2018). Whilst there are a number of ways to define how individuals work with cultural difference, the term cultural responsiveness has been chosen as it is believed to encompass both strategies of cultural competence, such as knowledge of specific cultures, but also cultural humility: being self-reflective</p>

⁴ Highlighted detail in yellow indicates amendments made to the TREC application following initial feedback

and aware of one's own culture (Ellis, Abdi & Winer, 2019). The term cultural responsiveness has been recognised as a term most often used in education literature (McKenney, Mann, Brown & Jewell, 2017).

The proposed research aims to use the Delphi method as a technique to reach a consensus of opinion regarding cultural responsiveness in the EP profession. This method would firstly involve a thorough review of the available literature regarding cultural responsiveness broadly in psychological professions. The literature will inform the survey which will be distributed to EPs. The first survey will outline key features of cultural responsiveness (informed by the literature) and will ask EPs to rank each feature according to its perceived importance for them within their practice. Survey responses will be collated and re-distributed to participants who took part. The second survey will include the participant's own responses with regards to each feature, along with the collated group responses of participants. EPs will have the opportunity to adjust their responses, depending on how they have interpreted the group's response to each key feature. Participants' final responses will be collated.

I intend to survey a minimum of 20 experienced EPs within the profession, taking into account the purpose of the project and time frame for data collection. I will attempt to recruit Principal EPs, course directors of the Educational Psychology doctorate and qualified EPs with at least 5 years experience.

The desired outcome is a list of key features which EPs believe are inherent to supporting cultural responsiveness in their practice. This is with the intention that these guidelines will benefit all practicing EPs (in-training, newly qualified and experienced) by functioning as a tool to help EPs reflect on their cultural practice, in the hope that this will help to develop EPs' cultural responsiveness.

Barsky, A. (2018). Cultural Competence, Awareness, Sensitivity, Humility, and Responsiveness: What's the Difference? *The New Social Worker*, 4-5.

Ellis, B. H., Abdi, S. M., & Winer, J. P. (2019). Working Cross-Culturally. In *Mental Health Practice with Immigrant and Refugee Youth: A Socioecological Framework* (pp. 21-35). American Psychological Association.

McKenney, E. L. W., Mann, K. A., Brown, D. L., & Jewell, J. D. (2017). Addressing Cultural Responsiveness in Consultation: An Empirical Demonstration. *Journal of Educational and Psychological Consultation*, 27(3), 289-316.

2. Provide a statement on the aims and significance of the proposed research, including potential impact to knowledge and understanding in the field (where appropriate, indicate the associated hypothesis which will be tested). This should be a clear justification of the proposed research, why it should proceed and a statement on any anticipated benefits to the community. (Do not exceed 700 words)

The current study aims to address the lack of research about how EPs take culture into account in their work, and more specifically come to a consensus regarding what the key features are to becoming a culturally responsive EP. The UK's response to growing multiculturalism is subject to political, legal and theoretical debate over how to respond, accommodate and promote cultural diversity (Ashcroft & Bevir, 2018). The country has also seen a rise in the population of people from ethnic minority backgrounds, accounting for 30% of pupils aged 5-16 (Department for Education [DfE], 2016). Differential representations of ethnic minority children are being identified with special educational needs (SEN), making disproportionality an on-going issue (DfE, 2018). When aspects of culture are not appropriately considered, this has the potential to significantly impact children and young people (CYP) and their families. For example, if culture is not considered appropriately within psychological assessment, results may be inaccurate (Reynolds & Suzuki, 2013).

Governing bodies of Educational Psychologists clearly address culture in their guidelines as an important component to their practice. The British Psychological Society's Code of Ethics and Conduct states that EPs respect the dignity of people across cultural boundaries, considering issues of power and act with integrity, to ensure accurate and unbiased representation of children and young people (British Psychological Society [BPS] 2018). The BPS standards for doctoral accreditation state EPs should "demonstrate knowledge and understanding of different cultural, faith and ethnic

groups, and how to work with individuals from these backgrounds in professional practice” (BPS, 2019, p. 17). The Health and Care Professions Council guides practitioner psychologists, acknowledging their need to adapt practice “to meet the needs of different groups and individuals (Health and Care Professions Council, 2015, p. 8). The BPS Practice Guidelines outline working with cultural differences, highlighting that psychologists must be aware of discrimination in practice, find ways to work productively with different cultural groups and be aware of their own ethnocentricity (BPS, 2017).

Of the research available that explores culture within psychological professions, most are outside Educational Psychology practice, such as counselling psychology and clinical psychology. Some of this research focuses on training programs and individuals’ self-perceived cultural competence, attempting to consider what is needed to support the cultural training of students entering psychological professions (Benuto, Casas & O’Donohue, 2018; Geerling, Thompson, Bouma & Hawkins, 2018).

Within EP research, a recent doctoral thesis explored EPs’ self-perceived cultural competency and cross-cultural experiences (Anderson, 2018). The study addressed areas of practice related to culture where EPs felt less confident, some of which included theories of racial or ethnic identity development, knowledge of community resources to support those from ethnic minorities and on supporting culturally diverse groups in relation to intervention. Anderson acknowledges the pertinence of self-assessment being useful to raise cultural awareness, which aligns with other research that emphasises how the use of cultural self-assessment tools can improve competence of psychologists (Roysircar, 2004). This reinforces the idea that building cultural responsiveness is more than didactic knowledge (Sue, Arredondo & Davies, 1992).

Whilst the current context and governing bodies of EPs acknowledge the pertinence of considering cultural difference, it remains unclear what this looks like in EP practice. Despite the abundance of literature interested in culture, there are not sufficiently practical or relevant methods to promote culturally effective professional development (Forrest et al, 2013).

The present research aims to establish a clearer understanding within the EP profession of what knowledge, skills and attitudes are needed to be culturally responsive in their practice. It is with the aim that findings from the present research will help to inform trainees, newly qualified and experienced EPs, and more specifically promote cultural self-awareness and act as a framework to guide their practice in this area.

Anderson, A. (2018). *An Exploration of the Intercultural Competence and the Cross-Cultural Experiences of Educational Psychologists in the United Kingdom* (Doctoral dissertation). Retrieved from e-theses online service (EThOS) (uk.bl.ethos.761752).

Ashcroft, R. T., & Bevir, M. (2018). Multiculturalism in contemporary Britain: policy, law and theory. *Critical Review of International and Social and Political Philosophy*, 21(1), 1-21.

Benuto, L. T., Casa, J., & O’Donohue, W. T. (2018). Training Culturally Competent Psychologists: A Systemic Review of the Training Outcome Literature. *Training and Education in Professional Psychology*, 12(3), 125-134.

British Psychological Society (2017). *Practice Guidelines Third Edition*. Leicester: British Psychological Society.

British Psychological Society (2018). *Code of Ethics and Conduct*. Leicester: British Psychological Society.

British Psychological Society (BPS). (2019). *Standards for the accreditation of Doctoral programmes in educational psychology in England, Northern Ireland & Wales*. Leicester: British Psychological Society.

Department for Education (2016). *Schools, pupils and their characteristics January 2016 (SFR 20/2016)*. London: Department for Education.

Forrest, L., Elman, N S., Huprich, S. K., Veilleux, J. C., Jacobs, S. C., & Kaslow, N. J. (2013). Training directors' perceptions of faculty behaviours when dealing with trainee competence problems: A mixed method pilot study. *Training and Education in Professional Psychology, 7*, 23-32.

Geerlings, L. R. C., Thompson, C. L., Bouma, R., & Hawkins, R. (2018). Cultural Competence in Clinical Psychology Training: A Qualitative Investigation of Student and Academic Experiences. *Australian Psychologist, 53*, 161-170.

Health and Care Professions Council (HCPC). (2015). *Standards of proficiency –Practitioner psychologists*. London: Health and Care Professions Council.

Reynolds, C. R., & Suzuki, L. A. (2013). Bias in Psychological Assessment: An Empirical Review and Recommendations. In J. R. Graham, J. A. Naglieri, & I. B. Weiner (Eds.), *Handbook of psychology: Assessment psychology., Vol. 10, 2nd ed.* (pp. 82-113). Hoboken, NJ: John Wiley & Sons Inc.

Roysircar, G. (2004). Cultural self-awareness assessment: Practice examples from psychology training. *Professional Psychology: Research and Practice, 35*(6), 658.

Sue, D. W, Arredondo, P., & McDavies, R. J. (1992). Multicultural competencies/standards: A call to the profession. *Journal of Counselling & Development, 70*, 477-486.

3. Provide an outline of the methodology for the proposed research, including proposed method of data collection, tasks assigned to participants of the research and the proposed method and duration of data analysis. If the proposed research makes use of pre-established and generally accepted techniques, please make this clear. (Do not exceed 500 words)

The proposed research will use the Delphi method as its research methodology. The Delphi method is defined as an approach using multiple surveys to help reach a consensus on an important issue (McKenna, 1994). In this instance, the important issue is regarding how Educational Psychologists can be culturally responsive within their practice. One of the main premises of the Delphi method is that a group opinion is more valid than individual opinion, therefore the aim is to reach a general consensus among EPs regarding this topic.

EPs who meet the inclusion criteria for participation will be invited to take part in two surveys. Typically within the Delphi method, the first survey has a purpose of information gathering to generate ideas. However there is now support for providing pre-existing information for ranking or response (Keeney, Hasson & McKenna, 2011). The present study aims to produce an extensive review of the literature pertaining to culture and practice within the psychological professions. Through this, a deductive Thematic Analysis (Braun & Clarke, 2006) will be used to identify key themes within the literature. This information will be synthesised and used to formulate survey one. Survey one will be formed of a number of key features of culturally responsive practice (informed by the literature). Participants will be asked to consider each feature and rank it in order of their perceived significance for EP practice. Initial responses of survey one will then be collated.

Participants will be asked to complete a second survey. This survey will present back findings from survey one, highlighting not only the participant's responses to each feature, but also the group's consensus to each feature. Participants are then invited to evaluate their response in the light of the group opinion. The present study aims to use only two rounds of surveys, to encourage higher response rates and limit drop-out. The results of both surveys will be synthesised and presented back to participants, identifying guidelines or group consensus regarding cultural responsiveness within EP practice.

It is anticipated that the largest amount of time will be given to reviewing the literature and analysing key features of culturally responsive practice (two months). Following the collation of survey responses from round one, analysis and production of survey two will be approximately one month. Following the collation of survey responses from round two, analysis will take approximately one month.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

Keeney, S., Hasson, F., & McKenna, H. (2011). *The Delphi Technique in Nursing and Health Research*. Chichester, West Sussex: Wiley-Blackwell.

McKenna, H. P. (1994). The Delphi technique: a worthwhile approach for nursing? *Journal of Advanced Nursing*, 19, 1221-1225.

SECTION F: PARTICIPANT DETAILS

4. Provide an explanation detailing how you will identify, approach and recruit the participants for the proposed research, including clarification on sample size and location. Please provide justification for the exclusion/inclusion criteria for this study (i.e. who will be allowed to / not allowed to participate) and explain briefly, in lay terms, why this criteria is in place. (Do not exceed 500 words)

The Delphi method aims to recruit 'experts' in the field that the researcher is interested in. Whilst the language of 'experts' is subjective, so is the topic of cultural responsiveness. The degree to which psychologists perceive themselves to be culturally responsive can be based on a number of factors, such as level of self-awareness/level of knowledge/level of exposure to culturally diverse populations. The aim of the present study is to recruit participants who have sufficient experience within the profession. EPs with higher levels of experience are more likely (although not definitively) to have had more experience working with culturally diverse populations. In order to create boundaries around the expert panel (Keeney et al, 2011), the following inclusion criteria will be used:

- Qualified EPs (at either masters or doctoral level) who are registered with the Health and Care Professions Council
- Is a Course Director on an Educational Psychology doctorate course OR is a Principal EP OR is an EP with at least five years experience in the profession

The Delphi method can use a sample size of anything between 3 and 80 participants. Literature suggests that it is important that participants who are recruited are knowledgeable in the area of study and are willing to commit to multiple rounds of questions (Grisham, 2009). The study aims to recruit a minimum of 20 EPs, given the time frame of the research.

The proposed study will aim to contact participants in the following ways:

1. Contacting The National Association of Principal EPs and requesting them to a) complete the survey themselves, and b) distribute this to their services
2. Contacting the directors of the Educational Psychology doctorate courses
3. Recruiting EPs via EPNET, The online Educational Psychology forum

It is acknowledged that EPs practice with many time-constraints, especially those with high levels of experience and responsibilities. Therefore the Delphi method was chosen as it allows inclusion of a large number of participants and across a number of locations. Whilst participants will be homogenous in their profession and level of 'expertise' (experience), it is with hope that there is heterogeneity amongst the sample to reflect the demographic of the EP population.

An anticipated challenge in participant recruitment is the idea that "those who are willing to engage in discussion are more likely to be affected directly by the outcome of the process and are more likely to become and stay involved in the Delphi" (Keeney, Hasson & McKenna, 2011, p. 8). The present study recognises that the findings may be most helpful for EPs who are less experienced in this area, such as trainee or newly-qualified EPs, who will not be taking part in the survey. It is recognised that "the commitment of participants is related to their interest and involvement with the question or issue being addressed" (Keeney et al, 2011, p. 8). It is with hope that addressing participants as 'experts' in this area and the importance for their views to support the profession, will encourage participation.

Grisham, T. (2009). The Delphi technique: a method for testing complex and multifaceted topics. *International Journal for Managing Projects in Business*, 2, 112-130.

Keeney, S., Hasson, F., & McKenna, H. (2011). *The Delphi Technique in Nursing and Health Research*. Chichester, West Sussex: Wiley-Blackwell.

5. Will the participants be from any of the following groups? (Tick as appropriate)

- Students or staff of the Trust or the University.
- Adults (over the age of 18 years with mental capacity to give consent to participate in the research).
- Children or legal minors (anyone under the age of 16 years)¹
- Adults who are unconscious, severely ill or have a terminal illness.
- Adults who may lose mental capacity to consent during the course of the research.
- Adults in emergency situations.

Adults² with mental illness - particularly those detained under the Mental Health Act (1983 & 2007).

Participants who may lack capacity to consent to participate in the research under the research requirements of the Mental Capacity Act (2005).

- Prisoners, where ethical approval may be required from the National Offender Management Service (NOMS).
- Young Offenders, where ethical approval may be required from the National Offender Management Service (NOMS).
- Healthy volunteers (in high risk intervention studies).

Participants who may be considered to have a pre-existing and potentially dependent³ relationship with the investigator (e.g. those in care homes, students, colleagues, service-users, patients).

- Other vulnerable groups (see Question 6).
- Adults who are in custody, custodial care, or for whom a court has assumed responsibility.
- Participants who are members of the Armed Forces.

¹If the proposed research involves children or adults who meet the Police Act (1997) definition of vulnerability², any researchers who will have contact with participants must have current Disclosure and Barring Service (DBS) clearance.

² 'Adults with a learning or physical disability, a physical or mental illness, or a reduction in physical or mental capacity, and living in a care home or home for people with learning difficulties or receiving care in their own home, or receiving hospital or social care services.' (Police Act, 1997)

³ Proposed research involving participants with whom the investigator or researcher(s) shares a dependent or unequal relationships (e.g. teacher/student, clinical therapist/service-user) may compromise the ability to give informed consent which is free from any form of pressure (real or implied) arising from this relationship. TREC recommends that, wherever practicable, investigators choose participants with whom they have no dependent relationship. Following due scrutiny, if the investigator is confident that the research involving participants in dependent relationships is vital and defensible, TREC will require additional information setting out the case and detailing how risks inherent in the dependent relationship will be managed. TREC will also need to be reassured that refusal to participate will not result in any discrimination or penalty.

6. Will the study involve participants who are vulnerable? YES NO

For the purposes of research, 'vulnerable' participants may be adults whose ability to protect their own interests are impaired or reduced in comparison to that of the broader population. Vulnerability may arise from the participant's personal characteristics (e.g. mental or physical impairment) or from their social environment, context and/or disadvantage (e.g. socio-economic mobility, educational attainment, resources, substance dependence, displacement or homelessness). Where prospective participants are at high risk of consenting under duress, or as a result of manipulation or coercion, they must also be considered as vulnerable.

Adults lacking mental capacity to consent to participate in research and children are automatically presumed to be vulnerable. Studies involving adults (over the age of 16) who lack mental capacity to consent in research must be submitted to a REC approved for that purpose. Please consult [Health Research Authority \(HRA\)](https://www.hra.nhs.uk/) for guidance: <https://www.hra.nhs.uk/>

6.1. If YES, what special arrangements are in place to protect vulnerable participants' interests?

If **YES**, the research activity proposed will require a DBS check. (NOTE: information concerning activities which require DBS checks can be found via <https://www.gov.uk/government/publications/dbs-check-eligible-positions-guidance>)

7. Do you propose to make any form of payment or incentive available to participants of the research? YES NO

If **YES**, please provide details taking into account that any payment or incentive should be representative of reasonable remuneration for participation and may not be of a value that could be coercive or exerting undue influence on potential participants' decision to take part in the research. Wherever possible, remuneration in a monetary form should be avoided and substituted with vouchers, coupons or equivalent. Any payment made to research participants may have benefit or HMRC implications and participants should be alerted to this in the participant information sheet as they may wish to choose to decline payment.

8. What special arrangements are in place for eliciting informed consent from participants who may not adequately understand verbal explanations or written information provided in English; where participants have special communication needs; where participants have limited literacy; or where children are involved in the research? (Do not exceed 200 words)

Participants are qualified Educational Psychologists. As part of their training, a certain competency level of literacy is required to train, such as holding an Undergraduate degree or masters conversion in Psychology. Qualified EPs will have either a doctorate or masters qualification. Therefore the present study does not envisage difficulties regarding understanding of written information.

Where participants may have certain requirements regarding their literacy, this will be highlighted on the information form where they can make the researcher aware if there are any adaptations that need to be made to the surveys to support their participation.

SECTION F: RISK ASSESSMENT AND RISK MANAGEMENT

<p>9. Does the proposed research involve any of the following? (Tick as appropriate)</p> <p><input checked="" type="checkbox"/> use of a questionnaire, self-completion survey or data-collection instrument (attach copy)</p> <p><input checked="" type="checkbox"/> use of emails or the internet as a means of data collection</p> <p><input type="checkbox"/> use of written or computerised tests</p> <p><input type="checkbox"/> interviews (attach interview questions)</p> <p><input type="checkbox"/> diaries (attach diary record form)</p> <p><input type="checkbox"/> participant observation</p> <p><input type="checkbox"/> participant observation (in a non-public place) without their knowledge / covert research</p> <p><input type="checkbox"/> audio-recording interviewees or events</p> <p><input type="checkbox"/> video-recording interviewees or events</p> <p><input type="checkbox"/> access to personal and/or sensitive data (i.e. student, patient, client or service-user data) without the participant's informed consent for use of these data for research purposes</p> <p><input type="checkbox"/> administration of any questions, tasks, investigations, procedures or stimuli which may be experienced by participants as physically or mentally painful, stressful or unpleasant during or after the research process</p> <p><input type="checkbox"/> performance of any acts which might diminish the self-esteem of participants or cause them to experience discomfiture, regret or any other adverse emotional or psychological reaction</p> <p><input type="checkbox"/> investigation of participants involved in illegal or illicit activities (e.g. use of illegal drugs)</p> <p><input type="checkbox"/> procedures that involve the deception of participants</p> <p><input type="checkbox"/> administration of any substance or agent</p> <p><input type="checkbox"/> use of non-treatment of placebo control conditions</p> <p><input type="checkbox"/> participation in a clinical trial</p> <p><input type="checkbox"/> research undertaken at an off-campus location (<u>risk assessment attached</u>)</p> <p><input type="checkbox"/> research overseas (<u>copy of VCG overseas travel approval attached</u>)</p>
<p>10. Does the proposed research involve any specific or anticipated risks (e.g. physical, psychological, social, legal or economic) to participants that are greater than those encountered in everyday life? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If YES, please describe below including details of precautionary measures.</p>
<p>11. Where the procedures involve potential hazards and/or discomfort or distress for participants, please state what previous experience the investigator or researcher(s) have had in conducting this type of research.</p> <p>I am a Trainee Educational Psychologist, who has regular supervision both on placement as well as accessing regular research supervision.</p>
<p>12. Provide an explanation of any potential benefits to participants. Please ensure this is framed within the overall contribution of the proposed research to knowledge or practice. (Do not exceed 400 words)</p> <p>NOTE: Where the proposed research involves students of our University, they should be assured that accepting the offer to participate or choosing to decline will have no impact on their assessments or learning experience. Similarly, it should be made clear to participants who are patients, service-users and/or receiving any form of treatment or medication that they are not invited to participate in the belief that participation in the research will result in some relief or improvement in their condition.</p>

Participants will help to form guidelines regarding culturally responsive Educational Psychology practice. This has the potential to be of significant benefit to a large proportion of the profession, largely trainee and newly qualified EPs, but also experienced EPs. Participants will be involved in research which may have a positive impact on more of a systemic level, for example to support EPs to reflect on and develop their cultural practice, and as such has the potential to be a gratifying experience.

By supporting EPs to be more culturally responsive in their practice, the overarching aim is for this to positively benefit the children and families that EPs work with. If a development and subsequent improvement in culturally responsive practice leads to improved outcomes for children, young people and their families, participants and their profession will have benefited from the research.

Having the time and space to review features of culturally responsive practice may also benefit participants in the sense that it might act as a helpful reflective exercise, for example it may prompt actions or next steps regarding their own practice.

13. Provide an outline of any measures you have in place in the event of adverse or unexpected outcomes and the potential impact this may have on participants involved in the proposed research. (Do not exceed 300 words)

As part of the reflective nature of participants engaging in the surveys, such as reviewing components of culturally responsive practice and considering their importance, participants may reflect on significant experiences within their own practice regarding cultural difference. This may result in some adverse experiences, for example, if participants reflect on a specific case experience which may have been particularly distressing, or question their level of cultural responsiveness in previous experiences. Furthermore, personal experiences related to participants' own cultural experiences may be provoked through completing the surveys, some of which may be painful to recall, such as personal experiences of racism or discrimination.

As such, participants will be encouraged to reflect on this process in their own supervision they receive. There will also be a space to contact the researcher, should participants feel they would like. As part of the Delphi methods, participants will be contacted for a second phase when reviewing their own results/the results of the group. At this stage the researcher can use this opportunity to re-highlight the space to contact the researcher, should they have any concerns.

Participants will also be directed to links for groups supporting Black and Minority Ethnic professionals in the fields of psychology, should they wish to explore these further, such as BAME in Psychiatry and Psychology Network (Twitter – @BIPPNetwork)

14. Provide an outline of your debriefing, support and feedback protocol for participants involved in the proposed research. This should include, for example, where participants may feel the need to discuss thoughts or feelings brought about following their participation in the research. This may involve referral to an external support or counseling service, where participation in the research has caused specific issues for participants. Where medical aftercare may be necessary, this should include details of the treatment available to participants. Debriefing may involve the disclosure of further information on the aims of the research, the participant's performance and/or the results of the research. (Do not exceed 500 words)

Participants will be debriefed after completing their surveys and will have the opportunity to contact the researcher to ask any questions if they wish.

Participants will be informed with regards to anonymity, confidentiality and the right to withdraw. Using the Delphi method, participants will be shared the group results from survey one. Following survey two, findings will be collated and shared back with participants.

FOR RESEARCH UNDERTAKEN AWAY FROM THE TRUST OR OUTSIDE THE UK**15. Does any part of your research take place in premises outside the Trust?**

- YES**, and I have included evidence of permissions from the managers or others legally responsible for the premises. This permission also clearly states the extent to which the participating institution will indemnify the researchers against the consequences of any untoward event

16. Does the proposed research involve travel outside of the UK?

- YES**, I have consulted the Foreign and Commonwealth Office website for guidance/travel advice? <http://www.fco.gov.uk/en/travel-and-living-abroad/>
- YES**, I am a non-UK national and I have sought travel advice/guidance from the Foreign Office (or equivalent body) of my country of origin
- YES**, I have completed the overseas travel approval process and enclosed a copy of the document with this application

For details on university study abroad policies, please contact academicquality@tavi-port.nhs.uk

IF YES:**17. Is the research covered by the Trust's insurance and indemnity provision?**

- YES** **NO**

18. Please evidence how compliance with all local research ethics and research governance requirements have been assessed for the country(ies) in which the research is taking place.

NOTE:

For students conducting research where the Trust is the sponsor, the Dean of the Department of Education and Training (DET) has overall responsibility for risk assessment regarding their health and safety. If you are proposing to undertake research outside the UK, please ensure that permission from the Dean has been granted before the research commences (please attach written confirmation)

SECTION G: PARTICIPANT CONSENT AND WITHDRAWAL

18. Have you attached a copy of your participant information sheet (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials. YES NO

If **NO**, please indicate what alternative arrangements are in place below:

19. Have you attached a copy of your participant consent form (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials. YES NO

If **NO**, please indicate what alternative arrangements are in place below:

20. The following is a participant information sheet checklist covering the various points that should be included in this document.

- Clear identification of the Trust as the sponsor for the research, the project title, the Researcher or Principal Investigator and other researchers along with relevant contact details.
- Details of what involvement in the proposed research will require (e.g., participation in interviews, completion of questionnaire, audio/video-recording of events), estimated time commitment and any risks involved.
- A statement confirming that the research has received formal approval from TREC.
- If the sample size is small, advice to participants that this may have implications for confidentiality / anonymity.
- A clear statement that where participants are in a dependent relationship with any of the researchers that participation in the research will have no impact on assessment / treatment / service-use or support.
- Assurance that involvement in the project is voluntary and that participants are free to withdraw consent at any time, and to withdraw any unprocessed data previously supplied.
- Advice as to arrangements to be made to protect confidentiality of data, including that confidentiality of information provided is subject to legal limitations.
- A statement that the data generated in the course of the research will be retained in accordance with the University's Data Protection Policy.
- Advice that if participants have any concerns about the conduct of the investigator, researcher(s) or any other aspect of this research project, they should contact Simon Carrington, Head of Academic Governance and Quality Assurance (academicquality@tavi-port.nhs.uk)
- Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

21. The following is a consent form checklist covering the various points that should be included in this document.

- Trust letterhead or logo.
- Title of the project (with research degree projects this need not necessarily be the title of the thesis) and names of investigators.
- Confirmation that the project is research.
- Confirmation that involvement in the project is voluntary and that participants are free to withdraw at any time, or to withdraw any unprocessed data previously supplied.
- Confirmation of particular requirements of participants, including for example whether interviews are to be audio-/video-recorded, whether anonymised quotes will be used in publications advice of legal limitations to data confidentiality.
- If the sample size is small, confirmation that this may have implications for anonymity any other relevant information.
- The proposed method of publication or dissemination of the research findings.
- Details of any external contractors or partner institutions involved in the research.
- Details of any funding bodies or research councils supporting the research.
- Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

SECTION H: CONFIDENTIALITY AND ANONYMITY

22. **Below is a checklist covering key points relating to the confidentiality and anonymity of participants. Please indicate where relevant to the proposed research.**

- Participants will be completely anonymised and their identity will not be known by the investigator or researcher(s) (i.e. the participants are part of an anonymous randomised sample and return responses with no form of personal identification)?
- The responses are anonymised or are an anonymised sample (i.e. a permanent process of coding has been carried out whereby direct and indirect identifiers have been removed from data and replaced by a code, with no record retained of how the code relates to the identifiers).
- The samples and data are de-identified (i.e. direct and indirect identifiers have been removed and replaced by a code. The investigator or researchers are able to link the code to the original identifiers and isolate the participant to whom the sample or data relates).
- Participants have the option of being identified in a publication that will arise from the research.
- Participants will be pseudo-anonymised in a publication that will arise from the research. (i.e. the researcher will endeavour to remove or alter details that would identify the participant.)
- The proposed research will make use of personal sensitive data.
- Participants consent to be identified in the study and subsequent dissemination of research findings and/or publication.

23. **Participants must be made aware that the confidentiality of the information they provide is subject to legal limitations in data confidentiality (i.e. the data may be subject to a subpoena, a freedom of information request or mandated reporting by some professions). This only applies to named or de-identified data. If your participants are named or de-identified, please confirm that you will specifically state these limitations.**

YES NO

If **NO**, please indicate why this is the case below:

NOTE: WHERE THE PROPOSED RESEARCH INVOLVES A SMALL SAMPLE OR FOCUS GROUP, PARTICIPANTS SHOULD BE ADVISED THAT THERE WILL BE DISTINCT LIMITATIONS IN THE LEVEL OF ANONYMITY THEY CAN BE AFFORDED.

SECTION I: DATA ACCESS, SECURITY AND MANAGEMENT

24. **Will the Researcher/Principal Investigator be responsible for the security of all data collected in connection with the proposed research? YES NO**

If **NO**, please indicate what alternative arrangements are in place below:

25. **In line with the 5th principle of the Data Protection Act (1998), which states that personal data shall not be kept for longer than is necessary for that purpose or those purposes for which it was collected; please state how long data will be retained for.**

1-2 years 3-5 years 6-10 years 10> years

NOTE: Research Councils UK (RCUK) guidance currently states that data should normally be preserved and accessible for 10 years, but for projects of clinical or major social, environmental

or heritage importance, for 20 years or longer.
<http://www.rcuk.ac.uk/documents/reviews/grc/grcpoldraft.pdf>

26. Below is a checklist which relates to the management, storage and secure destruction of data for the purposes of the proposed research. Please indicate where relevant to your proposed arrangements.

- Research data, codes and all identifying information to be kept in separate locked filing cabinets.
 Access to computer files to be available to research team by password only.
 Access to computer files to be available to individuals outside the research team by password only (See 23.1).
 Research data will be encrypted and transferred electronically within the European Economic Area (EEA).
 Research data will be encrypted and transferred electronically outside of the European Economic Area (EEA). (See 28).

NOTE: Transfer of research data via third party commercial file sharing services, such as Google Docs and YouSendIt are not necessarily secure or permanent. These systems may also be located overseas and not covered by UK law. If the system is located outside the European Economic Area (EEA) or territories deemed to have sufficient standards of data protection, transfer may also breach the Data Protection Act (1998).

- Use of personal addresses, postcodes, faxes, e-mails or telephone numbers.
 Use of personal data in the form of audio or video recordings.
 Primary data gathered on encrypted mobile devices (i.e. laptops). **NOTE:** This should be transferred to secure UEL servers at the first opportunity.
 All electronic data will undergo secure disposal.

NOTE: For hard drives and magnetic storage devices (HDD or SSD), deleting files does not permanently erase the data on most systems, but only deletes the reference to the file. Files can be restored when deleted in this way. Research files must be overwritten to ensure they are completely irretrievable. Software is available for the secure erasing of files from hard drives which meet recognised standards to securely scramble sensitive data. Examples of this software are BC Wipe, Wipe File, DeleteOnClick and Eraser for Windows platforms. Mac users can use the standard 'secure empty trash' option; an alternative is Permanent eraser software.

- All hardcopy data will undergo secure disposal.

NOTE: For shredding research data stored in hardcopy (i.e. paper), adopting DIN 3 ensures files are cut into 2mm strips or confetti like cross-cut particles of 4x40mm. The UK government requires a minimum standard of DIN 4 for its material, which ensures cross cut particles of at least 2x15mm.

27. Please provide details of individuals outside the research team who will be given password protected access to encrypted data for the proposed research.

28. Please provide details on the regions and territories where research data will be electronically transferred that are external to the European Economic Area (EEA).

29. Will this research be financially supported by the United States Department of Health and Human Services or any of its divisions, agencies or programs? YES NO

If **YES** please provide details:

SECTION J: PUBLICATION AND DISSEMINATION OF RESEARCH FINDINGS

30. How will the results of the research be reported and disseminated? (Select all that apply)

- Peer reviewed journal
- Non-peer reviewed journal
- Peer reviewed books
- Publication in media, social media or website (including Podcasts and online videos)
- Conference presentation
- Internal report
- Promotional report and materials
- Reports compiled for or on behalf of external organisations
- Dissertation/Thesis
- Other publication
- Written feedback to research participants
- Presentation to participants or relevant community groups
- Other (Please specify below)

SECTION K: OTHER ETHICAL ISSUES

31. Are there any other ethical issues that have not been addressed which you would wish to bring to the attention of Tavistock Research Ethics Committee (TREC)?

It is recognised that cultural responsiveness is not only an understanding of others' cultural backgrounds and experiences, but an awareness of one's own, therefore EPs' own cultural identities and subsequent positioning regarding culture will influence their responses to the survey. This can be seen as a limitation, as participants may be drawing on different definitions of culture when approaching this survey, making the concept of reaching consensus potentially challenging. However, this can also be seen as a strength, as it is acknowledged that culture can be broadly defined based on personal experiences, and how differing viewpoints allow for a broad analysis of what is a very complex concept.

It is also acknowledged that my own cultural background as a researcher will have an impact on the overall conduct of the study. I am of a mixed ethnic background and recognise my own motivations for wanting to develop culturally responsive EP practice. I also understand that my own experiences linked to culture will influence both how I define it and make interpretations. I recognise culture as complex, difficult to define, and influenced by one's own personal experiences. Therefore, I have chosen to position my research within a pragmatist approach, which offers flexibility, both philosophically and methodology, to align with the complex and dynamic nature of this topic.

Furthermore, I am using a deductive thematic analysis when analysing the literature surrounding culturally responsive practice. This allows for a systematic approach, whilst recognising that this form of analysis is driven by my theoretical interest in the area of culture and is more analyst driven (Braun and Clarke, 2006). Once I have collated the literature and formed my first survey, I will check for inter-rater reliability (using my research supervisor and/or peers) to code for a selected aspect of the literature.

Whilst the quantitative nature of numerical consensus scores allows for objective measurement, I intend to reflect on discrepancies amongst consensus (if any) and will consider both my own cultural positioning, as well as the different cultural positioning of participants, to analyse this. Furthermore, I will seek regular supervision from my research supervisor, who will also have her own personal understanding and experience of culture, which will help diversify my reflections of the research.

SECTION L: CHECKLIST FOR ATTACHED DOCUMENTS

32. Please check that the following documents are attached to your application.

- Letters of approval from any external ethical approval bodies (where relevant)
- Recruitment advertisement
- Participant information sheets (including easy-read where relevant)
- Consent forms (including easy-read where relevant)
- Assent form for children (where relevant)
- Evidence of any external approvals needed
- Questionnaire
- Interview Schedule or topic guide
- Risk Assessment (where applicable)
- Overseas travel approval (where applicable)

34. Where it is not possible to attach the above materials, please provide an explanation below.

The proposed study will use the Delphi method, which asks participants to complete two sets of surveys. The first survey will be created via an extensive search of the literature pertaining to cultural responsiveness. For this reason, the first survey has not yet been created.

Appendix E

TREC Approval Letter

The Tavistock and Portman 
NHS Foundation Trust

Quality Assurance & Enhancement
Directorate of Education & Training
Tavistock Centre
120 Belsize Lane
London
NW3 5BA

Tel: 020 8938 2699
<https://tavistockandportman.nhs.uk/>

Ellie Sakata

By Email

6 May 2020

Re: Trust Research Ethics Application

Title: How can Educational Psychologists be culturally responsive in their practice? A Delphi Study

Dear Ellie,

Thank you for submitting your updated Research Ethics documentation. I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

Please be advised that any changes to the project design including changes to methodology/data collection etc, must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.

If you have any further questions or require any clarification do not hesitate to contact me. I

am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,



Paru Jeram

Secretary to the Trust Research Degrees Subcommittee
T: 020 938 2699
E: academicquality@tavi-Port.nhs.uk

Appendix F

List of articles excluded from methodology lit review and their reason

Article did not focus on or align with working definition of CRP (n=70)

- Albeg, L. J., & Castro-Olivo, S. M. (2014). The relationship between mental health, acculturative stress, and academic performance in a Latino middle school sample. *Contemporary School Psychology, 18*(3), 178–186. <https://doi.org/10.1007/s40688-014-0010-1>
- Aleksandrov, D. S., Bowen, A. R., & Colker, J. (2016). Parent training and cultural considerations. *The Journal of Individual Psychology, 72*(2), 77–89. <https://doi.org/10.1353/jip.2016.0007>
- Ali, S. R., Liu, W. M., & Humedian, M. (2004). Islam 101: Understanding the Religion and Therapy Implications. *Professional Psychology: Research and Practice, 35*(6), 635–642. <https://doi.org/10.1037/0735-7028.35.6.635>
- Allan, B. A., Campos, I. D., & Wimberley, T. E. (2016). Interpersonal psychotherapy: A review and multicultural critique. *Counselling Psychology Quarterly, 29*(3), 253–273. <https://doi.org/10.1080/09515070.2015.1028896>
- Aranda, R. (2016). Living in the shadows: Plight of the undocumented. *Journal of Clinical Psychology, 72*(8), 795–806. <https://doi.org/10.1002/jclp.22361>
- Artman, L. K., & Daniels, J. A. (2010). Disability and psychotherapy practice: Cultural competence and practical tips. *Professional Psychology: Research and Practice, 41*(5), 442–448. <https://doi.org/10.1037/a0020864>
- Barrett, M. (2018). How schools can promote the intercultural competence of young people. *European Psychologist, 23*(1), 93–104. <https://doi.org/10.1027/1016-9040/a000308>
- Bodkin-Andrews, G. H., Denson, N., & Bansel, P. (2013). Teacher racism, academic self-concept, and multiculturalism: Investigating adaptive and maladaptive relations with academic disengagement and self-sabotage for Indigenous and non-Indigenous Australian students. *Australian Psychologist, 48*(3), 226–237. <https://doi.org/10.1111/j.1742-9544.2012.00069.x>
- Brown, C., & Trangsrud, H. B. (2008). Factors associated with acceptance and decline of client gift giving. *Professional Psychology: Research and Practice, 39*(5), 505–511. <https://doi.org/10.1037/0735-7028.39.5.505>
- Cardemil, E. V., & Battle, C. L. (2003). Guess who's coming to therapy? Getting comfortable with conversations about race and ethnicity in psychotherapy. *Professional Psychology: Research and Practice, 34*(3), 278–286. <https://doi.org/10.1037/0735-7028.34.3.278>
-

-
- Chang, C. Y., & Ritter, K. B. (2004). Cultural considerations of Adlerian parenting education. *The Journal of Individual Psychology, 60*(1), 67–75.
- Cooper, S., Wilson-Stark, K., Peterson, D. B., O’Roark, A. M., & Pennington, G. (2008). Consulting competently in multicultural contexts. *Consulting Psychology Journal: Practice and Research, 60*(2), 186–202.
<https://doi.org/10.1037/0736-9735.60.2.186>
- Dana, R. H. (2002). Multicultural assessment: Teaching methods and competence evaluations. *Journal of Personality Assessment, 79*(2), 195–199.
https://doi.org/10.1207/S15327752JPA7902_02
- Dias, J., Chan, A., Ungvarsky, J., Oraker, J., & Cleare-Hoffman, H. P. (2011). Reflections on marriage and family therapy emergent from international dialogues in China. *The Humanistic Psychologist, 39*(3), 268–275.
<https://doi.org/10.1080/08873267.2011.592434>
- Dryjanska, L. (2019). Exploring advocacy in psychology in Italy: Exporting a term from the US to a different cultural context. *Professional Psychology: Research and Practice, 50*(3), 184–194. <https://doi.org/10.1037/pro0000227>
- Fouad, N. A., Santana, M., & Ghosh, A. (2017). Empirical influence of the multicultural guidelines: A brief report. *Cultural Diversity and Ethnic Minority Psychology, 23*(4), 583–587. <https://doi.org/10.1037/cdp0000136>
- Fowers, B. J., & Davidov, B. J. (2006). The virtue of multiculturalism: Personal transformation, character, and openness to the other. *American Psychologist, 61*(6), 581–594. <https://doi.org/10.1037/0003-066X.61.6.581>
- Frohman, K. D., & Beehler, G. P. (2010). Psychologists as change agents in chronic pain management practice: Cultural competence in the health care system. *Psychological Services, 7*(3), 115–125. <https://doi.org/10.1037/a0019642>
- Gauthier, J., Pettifor, J., & Ferrero, A. (2010). The Universal Declaration of Ethical Principles for Psychologists: A culture-sensitive model for creating and reviewing a code of ethics. *Ethics & Behavior, 20*(3–4), 179–196.
<https://doi.org/10.1080/10508421003798885>
- Gerner, M. E., & Perry, F. (2000). Gender differences in cultural acceptance and career orientation among internationally mobile and non-internationally mobile adolescents. *School Psychology Review, 29*(2), 267–283.
- Ghuman, P. S. (2005). Daughters of traditions. *The Psychologist, 18*(10), 620–622.
- Goforth, A. N., Pham, A. V., Chun, H., Castro-Olivo, S. M., & Yosai, E. R. (2016). Association of acculturative stress, Islamic practices, and internalizing symptoms among Arab American adolescents. *School Psychology Quarterly, 31*(2), 198–212. <https://doi.org/10.1037/spq0000135>
- Goldston, D. B., Molock, S. D., Whitbeck, L. B., Murakami, J. L., Zayas, L. H., & Hall, G. C. N. (2008). Cultural considerations in adolescent suicide prevention and psychosocial treatment. *American Psychologist, 63*(1), 14–31.
<https://doi.org/10.1037/0003-066X.63.1.14>
-

-
- Gone, J. P. (2009). A community-based treatment for Native American historical trauma: Prospects for evidence-based practice. *Journal of Consulting and Clinical Psychology, 77*(4), 751–762. <https://doi.org/10.1037/a0015390>
- Gone, J. P. (2013). A community-based treatment for Native American historical trauma: Prospects for evidence-based practice. *Spirituality in Clinical Practice, 1*(S), 78–94. <https://doi.org/10.1037/2326-4500.1.S.78>
- Gone, J. P. (2015). Reconciling evidence-based practice and cultural competence in mental health services: Introduction to a special issue. *Transcultural Psychiatry, 52*(2), 139–149. <https://doi.org/10.1177/1363461514568239>
- Han, S., & Northoff, G. (2008). Culture-sensitive neural substrates of human cognition: A transcultural neuroimaging approach. *Nature Reviews Neuroscience, 9*(8), 646–654. <https://doi.org/10.1038/nrn2456>
- Hanson, S. L., & Kerkhoff, T. R. (2007). Ethical decision making in rehabilitation: Consideration of Latino cultural factors. *Rehabilitation Psychology, 52*(4), 409–420. <https://doi.org/10.1037/0090-5550.52.4.409>
- Hardin, E. E., Robitschek, C., Flores, L. Y., Navarro, R. L., & Ashton, M. W. (2014). The cultural lens approach to evaluating cultural validity of psychological theory. *American Psychologist, 69*(7), 656–668. <https://doi.org/10.1037/a0036532>
- Hoffman, L., & Cleare-Hoffman, H. P. (2011). Existential therapy and emotions: Lessons from cross-cultural exchange. *The Humanistic Psychologist, 39*(3), 261–267. <https://doi.org/10.1080/08873267.2011.594342>
- Hunt, M. O., Jackson, P. B., Powell, B., & Steelman, L. C. (2000). Color-blind: The treatment of race and ethnicity in social psychology. *Social Psychology Quarterly, 63*(4), 352–364. <https://doi.org/10.2307/2695845>
- Hwang, K.-K. (2019). Enhancing cultural awareness by the construction of culture-inclusive theories. *Journal of Theoretical and Philosophical Psychology, 39*(2), 67–80. <https://doi.org/10.1037/teo0000086>
- Johnson, Z. (2001). Cultural competency and humanistic psychology. *The Humanistic Psychologist, 29*(1–3), 204–222. <https://doi.org/10.1080/08873267.2001.9977014>
- Kilcullen, M., Swinbourne, A., & Cadet-James, Y. (2016). Aboriginal and Torres Strait Islander health and well-being: Implications for a cognitive behavioural therapy framework. *Australian Psychologist, 51*(6), 453–462. <https://doi.org/10.1111/ap.12159>
- Kleftaras, G. (2008). Difficulties and barriers in counseling psychotherapy of cultural and ethnic minority individuals. *Psychology: The Journal of the Hellenic Psychological Society, 15*(1), 71–89.
- Knapp, S., & VandeCreek, L. (2007). When values of different cultures conflict: Ethical decision making in a multicultural context. *Professional Psychology: Research and Practice, 38*(6), 660–666. <https://doi.org/10.1037/0735-7028.38.6.660>
-

-
- Lebedeva, N., & Tatarko, A. (2013). Multiculturalism and immigration in post-Soviet Russia. *European Psychologist*, 18(3), 169–178. <https://doi.org/10.1027/1016-9040/a000161>
- Li, C., Li, H., & Niu, J. (2016). Intercultural stressors of Chinese immigrant students: Voices of Chinese-American mental health professionals. *Asian American Journal of Psychology*, 7(1), 64–73. <https://doi.org/10.1037/aap0000044>
- Liu, W. M. (2005). The Study of Men and Masculinity as an Important Multicultural Competency Consideration. *Journal of Clinical Psychology*, 61(6), 685–697. <https://doi.org/10.1002/jclp.20103>
- Lomay, V. T., & Hinkebein, J. H. (2006). Cultural considerations when providing rehabilitation services to American Indians. *Rehabilitation Psychology*, 51(1), 36–42. <https://doi.org/10.1037/0090-5550.51.1.36>
- Madowitz, J., & Boutelle, K. N. (2014). Ethical implications of using the term ‘non-white’ in psychological research. *Ethics & Behavior*, 24(4), 306–310. <https://doi.org/10.1080/10508422.2013.858604>
- Maxie, A. C., Arnold, D. H., & Stephenson, M. (2006). Do therapists address ethnic and racial differences in cross-cultural psychotherapy? *Psychotherapy: Theory, Research, Practice, Training*, 43(1), 85–98. <https://doi.org/10.1037/0033-3204.43.1.85>
- McKeough, A., Bird, S., Tourigny, E., Romaine, A., Graham, S., Ottmann, J., & Jeary, J. (2008). Storytelling as a foundation to literacy development for Aboriginal children: Culturally and developmentally appropriate practices. *Canadian Psychology/Psychologie Canadienne*, 49(2), 148–154. <https://doi.org/10.1037/0708-5591.49.2.148>
- Moats, M., Claypool, T. R., & Saxon, E. (2011). Therapist development through international dialogue: Students’ perspectives on personal and professional life changing interactions in China. *The Humanistic Psychologist*, 39(3), 276–282. <https://doi.org/10.1080/08873267.2011.592439>
- Morris, E. F. (2001). Clinical practices with African Americans: Juxtaposition of standard clinical practices and Africentricism. *Professional Psychology: Research and Practice*, 32(6), 563–572. <https://doi.org/10.1037/0735-7028.32.6.563>
- Naeem, F., Gobbi, M., Ayub, M., & Kingdon, D. (2010). Psychologists experience of cognitive behaviour therapy in a developing country: A qualitative study from Pakistan. *International Journal of Mental Health Systems*, 4. <https://doi.org/10.1186/1752-4458-4-2>
- Nzewi, E. N. (2009). Linking African and western models through integration of trickster folktales in the application of cognitive behavior therapy for depression. *Psychology: The Journal of the Hellenic Psychological Society*, 16(2), 146–163.
- O’Dell, L., Abreu, G. D., & O’Toole, S. (2004). The turn to culture. *The Psychologist*, 17(3), 138–141.
-

-
- O'Donohue, W. T. (2016). Oppression, privilege, bias, prejudice, and stereotyping: Problems in the APA code of ethics. *Ethics & Behavior*, 26(7), 527–544. <https://doi.org/10.1080/10508422.2015.1069191>
- Pedersen, A., & Barlow, F. K. (2008). Theory to social action: A university-based strategy targeting prejudice against Aboriginal Australians. *Australian Psychologist*, 43(3), 148–159. <https://doi.org/10.1080/00050060802318587>
- Pitama, S. G., Bennett, S. T., Waitoki, W., Haitana, T. N., Valentine, H., Pahina, J., Taylor, J. E., Tassell-Matamua, N., Rowe, L., Beckert, L., Palmer, S. C., Huria, T. M., Lacey, C. J., & McLachlan, A. (2017). A proposed hauora Māori clinical guide for psychologists: Using the hui process and Meihana model in clinical assessment and formulation. *New Zealand Journal of Psychology*, 46(3), 7–19.
- Poyrazli, S. (2003). Validity of Rogerian Therapy in Turkish Culture: A Cross-Cultural Perspective. *Journal of Humanistic Counseling, Education & Development*, 42(1), 107–115. <https://doi.org/10.1002/j.2164-490X.2003.tb00172.x>
- Qasqas, M. J., & Jerry, P. (2014). Counselling Muslims: A culture-infused antidiscriminatory approach. *Canadian Journal of Counselling and Psychotherapy*, 48(1), 57–76.
- Ralph, S., & Ryan, K. (2017). Addressing the mental health gap in working with Indigenous youth: Some considerations for non-indigenous psychologists working with Indigenous youth. *Australian Psychologist*, 52(4), 288–298. <https://doi.org/10.1111/ap.12287>
- Reger, M. A., Etherage, J. R., Reger, G. M., & Gahm, G. A. (2008). Civilian psychologists in an Army culture: The ethical challenge of cultural competence. *Military Psychology*, 20(1), 21–35. <https://doi.org/10.1080/08995600701753144>
- Roberts, R. L., Harper, R., Caldwell, R., & Decora, M. (2003). Adlerian lifestyle analysis of Lakota women: Implications for counseling. *The Journal of Individual Psychology*, 59(1), 15–29.
- Rodríguez Esquivel, D., Webb Hooper, M., Baker, E. A., & McNutt, M. D. (2015). Culturally specific versus standard smoking cessation messages targeting Hispanics: An experiment. *Psychology of Addictive Behaviors*, 29(2), 283–289. <https://doi.org/10.1037/adb0000044>
- Schwebel, D. C., & Hodari, A. J. (2005). Ethical Principles and Acculturation: Two Case Studies. *Ethics & Behavior*, 15(2), 131–137. https://doi.org/10.1207/s15327019eb1502_3
- Sharma, P., & Kerl, S. B. (2002). Suggestions for psychologists working with Mexican American individuals and families in health care settings. *Rehabilitation Psychology*, 47(2), 230–239. <https://doi.org/10.1037/0090-5550.47.2.230>
- Silverstein, L. B. (2006). Integrating feminism and multiculturalism: Scientific fact or science fiction? *Professional Psychology: Research and Practice*, 37(1), 21–28. <https://doi.org/10.1037/0735-7028.37.1.21>
-

-
- Smart, R., Tsong, Y., Mejía, O. L., Hayashino, D., & Braaten, M. E. T. (2011). Therapists' experiences treating Asian American women with eating disorders. *Professional Psychology: Research and Practice*, 42(4), 308–315. <https://doi.org/10.1037/a0024179>
- Smith, L., Constantine, M. G., Graham, S. V., & Dize, C. B. (2008). The territory ahead for multicultural competence: The 'spinning' of racism. *Professional Psychology: Research and Practice*, 39(3), 337–345. <https://doi.org/10.1037/0735-7028.39.3.337>
- Standke-Erdmann, B. (2005). Working with Families from the Indian Sub-Continent: An Indo-German Experience. *Contemporary Family Therapy: An International Journal*, 27(3), 315–327. <https://doi.org/10.1007/s10591-005-6212-y>
- Strickland, B. R. (2000). Misassumptions, misadventures, and the misuse of psychology. *American Psychologist*, 55(3), 331–338. <https://doi.org/10.1037/0003-066X.55.3.331>
- Thomas, T. (2004). Psychology in a culturally diverse society. *Australian Psychologist*, 39(2), 103–106. <https://doi.org/10.1080/00050060410001701807>
- Thrower, S. J., Helms, J. E., & Manosalvas, K. (2020). Exploring the role of context on racially responsive supervision: The racial identity social interaction model. *Training and Education in Professional Psychology*, 14(2), 116–125. <https://doi.org/10.1037/tep0000271>
- Welkin, L., Candansayar, S., & Dönmez, A. (2015). Systematizing cultural awareness: Toward a model for modification of trauma therapy and an application in Turkey. *Transcultural Psychiatry*, 52(6), 808–826. <https://doi.org/10.1177/1363461515578061>
- Wendt, D. C., & Gone, J. P. (2012). Rethinking cultural competence: Insights from indigenous community treatment settings. *Transcultural Psychiatry*, 49(2), 206–222. <https://doi.org/10.1177/1363461511425622>
- Whealin, J. M., & Ruzek, J. (2008). Program evaluation for organizational cultural competence in mental health practices. *Professional Psychology: Research and Practice*, 39(3), 320–328. <https://doi.org/10.1037/0735-7028.39.3.320>
- Yali, A. M., & Revenson, T. A. (2004). How Changes in Population Demographics Will Impact Health Psychology: Incorporating a Broader Notion of Cultural Competence Into the Field. *Health Psychology*, 23(2), 147–155. <https://doi.org/10.1037/0278-6133.23.2.147>

Article was a review, summary of an award, overview, correction, comment or reflection (n=36)

- Abi-Hashem, N. (2015). Revisiting cultural awareness and cultural relevancy. *American Psychologist*, 70(7), 660–661. <https://doi.org/10.1037/a0038984>
-

-
- Barn, J. K. (2011). Review of Child abuse and culture: Working with diverse families. *Educational Psychology in Practice*, 27(2), 191–192. <https://doi.org/10.1080/02667363.2011.576074>
- Bullard, A. (2005). L'Oedipe Africain, a retrospective. *Transcultural Psychiatry*, 42(2), 171–203. <https://doi.org/10.1177/1363461505052659>
- Carey, T. A., Dudgeon, P., Hammond, S. W., Hirvonen, T., Kyrios, M., Roufeil, L., & Smith, P. (2017). The Australian Psychological Society's apology to Aboriginal and Torres Strait Islander people. *Australian Psychologist*, 52(4), 261–267. <https://doi.org/10.1111/ap.12300>
- Cartwright, B. Y., & D'Andrea, M. (2005). A personal journey toward culture-centered counseling: An interview with Paul Pedersen. *Journal of Counseling & Development*, 83(2), 214–221. <https://doi.org/10.1002/j.1556-6678.2005.tb00598.x>
- Christopher, J. C., Marecek, J., & Wendt, D. C. (2015). Culture revisited: A reply to comments. *American Psychologist*, 70(7), 662–663. <https://doi.org/10.1037/a0039203>
- Comas-Díaz, L. (2000). 'Ethnic minority psychology: Identity, empowerment, and transformation': Correction to Comas-Díaz (1998). *Cultural Diversity and Ethnic Minority Psychology*, 6(1), 12–12. <https://doi.org/10.1037/1099-9809.6.1.12>
- Cooper-Thomas, H., & Dumble, P. (2005). Guest Editorial: People at Work: Organisational Psychology -Theory, Practice & Research, Part One. *New Zealand Journal of Psychology*, 34(2), 66–68.
- Crowe, S. (2004). Editorial. *Australian Psychologist*, 39(2), 101–101. <https://doi.org/10.1080/00050060410001711969>
- DeSmet, J. L. (2010). Review of Clinical practice with people of color: A guide to becoming culturally competent. *Remedial and Special Education*, 31(2), 143–144. <https://doi.org/10.1177/0741932508324395>
- Edward A Delgado-Romero: Award for Distinguished Early Career Contributions to Psychology in the Public Interest. (2011). *American Psychologist*, 66(8), 721–723. <https://doi.org/10.1037/a0025415>
- 'Factors associated with multicultural teaching competence: Social justice orientation and multicultural environment': Correction to Mena and Rogers (2017). (2017). *Training and Education in Professional Psychology*, 11(3), 189–189. <https://doi.org/10.1037/tep0000174>
- Fernando, S. (2006). Review of Cultural competence in forensic mental health. *Journal of Forensic Psychiatry & Psychology*, 17(1), 171–173.
- Fowers, B. J., & Davidov, B. J. (2007). Dialogue as the interplay of otherness and shared humanity. *American Psychologist*, 62(7), 705–706. <https://doi.org/10.1037/0003-066X.62.7.705>
-

-
- Hall, G. C. N. (2006). Accessibility and Attitudes: Comment on Lau (2006). *Clinical Psychology: Science and Practice*, 13(4), 317–320. <https://doi.org/10.1111/j.1468-2850.2006.00044.x>
- Hammell, K. W. (2014). Review of Culture in clinical care: Strategies for competence (2nd ed). *Canadian Journal of Occupational Therapy / Revue Canadienne D'Ergotherapie*, 81(4), 246–246. <https://doi.org/10.1177/0008417413514848>
- Hook, J. N., & Watkins, C. E. Jr. (2015). Cultural humility: The cornerstone of positive contact with culturally different individuals and groups? *American Psychologist*, 70(7), 661–662. <https://doi.org/10.1037/a0038965>
- Islam, G. (2007). Virtue ethics, multiculturalism, and the paradox of cultural dialogue. *American Psychologist*, 62(7), 704–705. <https://doi.org/10.1037/0003-066X.62.7.704>
- Kim-Prieto, C., & DeBerry, J. (2011). Review of Culturally responsive counseling with Asian American men. *Cultural Diversity and Ethnic Minority Psychology*, 17(3), 342–343. <https://doi.org/10.1037/a0023803>
- Lieberman, F. (2006). Review of Destructive Trends in Mental Health: The Well-Intentioned Path to Harm. *Research on Social Work Practice*, 16(2), 233–235. <https://doi.org/10.1177/1049731505282201>
- Lowe, S. M., & Davis, C. I. (2010). Sharing wisdom: Ethnic minority supervisor perspectives. *Training and Education in Professional Psychology*, 4(1), 1–2. <https://doi.org/10.1037/a0018560>
- Lu, F. G. (2005). Evelyn Lee (1944-2003). *American Psychologist*, 60(3), 257–257. <https://doi.org/10.1037/0003-066X.60.3.257>
- M Brinton Lykes: International Humanitarian Award. (2013). *American Psychologist*, 68(8), 772–774. <https://doi.org/10.1037/a0034765>
- Margaret Beale Spencer: Award for Distinguished Senior Career Contributions to Psychology in the Public Interest. (2005). *American Psychologist*, 60(8), 818–821. <https://doi.org/10.1037/0003-066X.60.8.818>
- McGrath, P. J. (2004). Review of The Portable Mentor: Expert Guide to a Successful Career in Psychology. *Canadian Psychology/Psychologie Canadienne*, 45(2), 188–189. <https://doi.org/10.1037/h0086986>
- Mena, J. A., & Rogers, M. R. (2017). Factors associated with multicultural teaching competence: Social justice orientation and multicultural environment. *Training and Education in Professional Psychology*, 11(2), 61–68. <https://doi.org/10.1037/tep0000143>
- Netzer, D. (2017). Passage: A conversation with artist Jill Mellick. *Journal of Transpersonal Psychology*, 49(2), 149–167.
- Nieman, Y. F. (2006). Review of Strategies for Building Multicultural Competence in Mental Health and Educational Settings. *Cultural Diversity and Ethnic Minority Psychology*, 12(1), 165–168. <https://doi.org/10.1037/1099-9809.12.1.165>
-

- Osherson, S. (2009). Review of The boy in the striped pajamas. *Journal of the American Academy of Child & Adolescent Psychiatry*, 48(4), 456–457. <https://doi.org/10.1097/01.CHI.0000314067.04661.a1>
- Plante, T. G. (2014). Four steps to improve religious/spiritual cultural competence in professional psychology. *Spirituality in Clinical Practice*, 1(4), 288–292. <https://doi.org/10.1037/scp0000047>
- Room, R. (2014). Klaus Mäkelä, 1939–2013: A socially committed scholar, an inspiring research leader. *Addiction*, 109(9), 1564–1565. <https://doi.org/10.1111/add.12639>
- Ruiz, P. (2007). Review of Strategies for building multicultural competence in mental health and educational settings. *Psychiatric Services*, 58(2), 275–275. <https://doi.org/10.1176/appi.ps.58.2.275>
- Stuart, R. B. (2005). Multiculturalism: Questions, not answers. *Professional Psychology: Research and Practice*, 36(5), 576–578. <https://doi.org/10.1037/0735-7028.36.5.576>
- Sue, S. (2003). In Defense of Cultural Competency in Psychotherapy and Treatment. *American Psychologist*, 58(11), 964–970. <https://doi.org/10.1037/0003-066X.58.11.964>
- Winston, C. N., & Maher, H. (2015). Beyond the confines of culture: Reflections of two non-American psychologists. *American Psychologist*, 70(7), 659–660. <https://doi.org/10.1037/a0038954>
- Wright, S. M. (2007). Bridging the cultural divide: Why psychologists must begin to take culture seriously and how they can. *Analyses of Social Issues and Public Policy (ASAP)*, 7(1), 269–271. <https://doi.org/10.1111/j.1530-2415.2007.00148.x>

Article focused on training programs (n=20)

- Andrews, E. E., & Lund, E. M. (2015). Disability in psychology training: Where are we? *Training and Education in Professional Psychology*, 9(3), 210–216. <https://doi.org/10.1037/tep0000085>
- BEA Virtual Working Group on Restrictions Affecting Diversity Training in Graduate Education. (2015). Preparing professional psychologists to serve a diverse public: A core requirement in doctoral education and training a pedagogical statement. *Training and Education in Professional Psychology*, 9(4), 269–270. <https://doi.org/10.1037/tep0000093>
- Benuto, L. T., Casas, J., & O'Donohue, W. T. (2018). Training culturally competent psychologists: A systematic review of the training outcome literature. *Training and Education in Professional Psychology*, 12(3), 125–134. <https://doi.org/10.1037/tep0000190>
- Benuto, L. T., Singer, J., Newlands, R. T., & Casas, J. B. (2019). Training culturally competent psychologists: Where are we and where do we need to go?

-
- Training and Education in Professional Psychology*, 13(1), 56–63.
<https://doi.org/10.1037/tep0000214>
- Brooks, B. L., Mintz, A. R., & Dobson, K. S. (2004). Diversity Training in Canadian Predoctoral Clinical Psychology Internships: A Survey of Directors of Internship Training. *Canadian Psychology/Psychologie Canadienne*, 45(4), 308–312. <https://doi.org/10.1037/h0088237>
- Canady, B. E., Rivera, M., Gerdes, J., Ford, A., Johnson, K., & Nayak, N. (2011). Cultural roadmap: Developing cultural learning strategies during internship. *Training and Education in Professional Psychology*, 5(1), 30–37. <https://doi.org/10.1037/a0021856>
- Chrobot-Mason, D. (2012). Developing multicultural competence to improve cross-race work relationships. *The Psychologist-Manager Journal*, 15(4), 199–218. <https://doi.org/10.1080/10887156.2012.730440>
- Chu, J. P., Poon, G., Kwok, K. K., Leino, A. E., Goldblum, P., & Bongar, B. (2017). An assessment of training in and practice of culturally competent suicide assessment. *Training and Education in Professional Psychology*, 11(2), 69–77. <https://doi.org/10.1037/tep0000147>
- Dunn, D. S., & Andrews, E. E. (2015). Person-first and identity-first language: Developing psychologists' cultural competence using disability language. *American Psychologist*, 70(3), 255–264. <https://doi.org/10.1037/a0038636>
- Fouad, N. A. (2006). Multicultural guidelines: Implementation in an urban counseling psychology program. *Professional Psychology: Research and Practice*, 37(1), 6–13. <https://doi.org/10.1037/0735-7028.37.1.6>
- Geerlings, L. R. C., Thompson, C. L., Bouma, R., & Hawkins, R. (2018). Cultural competence in clinical psychology training: A qualitative investigation of student and academic experiences. *Australian Psychologist*, 53(2), 161–170. <https://doi.org/10.1111/ap.12291>
- Lee, A., & Khawaja, N. G. (2013). Multicultural training experiences as predictors of psychology students' cultural competence. *Australian Psychologist*, 48(3), 209–216. <https://doi.org/10.1111/j.1742-9544.2011.00063.x>
- Ranzijn, R., McConnochie, K., Day, A., Nolan, W., & Wharton, M. (2008). Towards cultural competence: Australian indigenous content in undergraduate psychology. *Australian Psychologist*, 43(2), 132–139. <https://doi.org/10.1080/00050060701762554>
- Resnick, J. L. (2006). Strategies for implementation of the multicultural guidelines in university and college counseling centers. *Professional Psychology: Research and Practice*, 37(1), 14–20. <https://doi.org/10.1037/0735-7028.37.1.14>
- Robinson, D. T., & Morris, J. R. (2000). Multicultural counseling: Historical context and current training considerations. *The Western Journal of Black Studies*, 24(4), 239–253.
- Rogers-Sirin, L. (2008). Approaches to multicultural training for professionals: A guide for choosing an appropriate program. *Professional Psychology*:
-

Research and Practice, 39(3), 313–319. <https://doi.org/10.1037/0735-7028.39.3.313>

Skogstad, P., Skogstad, I., & Britt, E. (2005). Taha Maori and Aotearoa/New Zealand Clinical Psychology: Developments at the University of Canterbury. *New Zealand Journal of Psychology*, 34(1), 58–63.

Tormala, T. T., Patel, S. G., Soukup, E. E., & Clarke, A. V. (2018). Developing measurable cultural competence and cultural humility: An application of the cultural formulation. *Training and Education in Professional Psychology*, 12(1), 54–61. <https://doi.org/10.1037/tep0000183>

Valencia-Garcia, D., & Montoya, H. (2018). Lost in translation: Training issues for bilingual students in health service psychology. *Training and Education in Professional Psychology*, 12(3), 142–148. <https://doi.org/10.1037/tep0000199>

Woods-Jaeger, B., Cho, B., & Briggs, E. C. (2020). Training psychologists to address social determinants of mental health. *Training and Education in Professional Psychology*. <https://doi.org/10.1037/tep0000307>

Article focused on self-perceived cultural competence or cultural competence (n=16)

Benuto, L. T., Singer, J., Casas, J., González, F., & Ruork, A. (2018). The evolving definition of cultural competency: A mixed methods study. *International Journal of Psychology & Psychological Therapy*, 18(3), 371–384.

Bryson, J., & Hosken, C. (2005). What Does it Mean to be a Culturally Competent I/O Psychologist in New Zealand? *New Zealand Journal of Psychology*, 34(2), 69–76.

Chrobot-Mason, D., & Leslie, J. B. (2012). The role of multicultural competence and emotional intelligence in managing diversity. *The Psychologist-Manager Journal*, 15(4), 219–236. <https://doi.org/10.1080/10887156.2012.730442>

Hansen, N. D., Randazzo, K. V., Schwartz, A., Marshall, M., Kalis, D., Frazier, R., Burke, C., Kershner-Rice, K., & Norvig, G. (2006). Do we practice what we preach? An exploratory survey of multicultural psychotherapy competencies. *Professional Psychology: Research and Practice*, 37(1), 66–74. <https://doi.org/10.1037/0735-7028.37.1.66>

Lee, E. (2010). Revisioning cultural competencies in clinical social work practice. *Families in Society*, 91(3), 272–279. <https://doi.org/10.1606/1044-3894.4005>

Malott, K. M. (2008). Achieving cultural competency: Assessment of US-based counselor educators instructing internationally. *International Journal for the Advancement of Counselling*, 30(1), 67–77. <https://doi.org/10.1007/s10447-007-9045-6>

McConnochie, K., Ranzijn, R., Hodgson, L., Nolan, W., & Samson, R. (2012). Working in indigenous contexts: Self-reported experiences of non-indigenous Australian psychologists. *Australian Psychologist*, 47(4), 204–212. <https://doi.org/10.1111/j.1742-9544.2011.00042.x>

- Middleton, R. A., Ergüner-Tekinalp, B., Williams, N. F., Stadler, H. A., & Dow, J. E. (2011). Racial identity development and multicultural counseling competencies of White mental health practitioners. *International Journal of Psychology & Psychological Therapy*, 11(2), 201–218.
- Mona, L. R., Cameron, R. P., & Clemency Cordes, C. (2017). Disability culturally competent sexual healthcare. *American Psychologist*, 72(9), 1000–1010. <https://doi.org/10.1037/amp0000283>
- Sehgal, R., Saules, K., Young, A., Grey, M. J., Gillem, A. R., Nabors, N. A., Byrd, M. R., & Jefferson, S. (2011). Practicing what we know: Multicultural counseling competence among clinical psychology trainees and experienced multicultural psychologists. *Cultural Diversity and Ethnic Minority Psychology*, 17(1), 1–10. <https://doi.org/10.1037/a0021667>
- Sperry, L. (2012). Cultural competence: A primer. *The Journal of Individual Psychology*, 68(4), 310–320.
- Tan, L. L., & Denson, L. (2019). Bilingual and multilingual psychologists practising in Australia: An exploratory study of their skills, training needs and experiences. *Australian Psychologist*, 54(1), 13–25. <https://doi.org/10.1111/ap.12355>
- Tao, K. W., Owen, J., Pace, B. T., & Imel, Z. E. (2015). A meta-analysis of multicultural competencies and psychotherapy process and outcome. *Journal of Counseling Psychology*, 62(3), 337–350. <https://doi.org/10.1037/cou0000086>
- Tucker, C. M., Moradi, B., Wall, W., & Nghiem, K. (2014). Roles of perceived provider cultural sensitivity and health care justice in African American/Black patients' satisfaction with provider. *Journal of Clinical Psychology in Medical Settings*, 21(3), 282–290. <https://doi.org/10.1007/s10880-014-9397-0>
- Vieten, C., Scammell, S., Pierce, A., Pilato, R., Ammondson, I., Pargament, K. I., & Lukoff, D. (2016). Competencies for psychologists in the domains of religion and spirituality. *Spirituality in Clinical Practice*, 3(2), 92–114. <https://doi.org/10.1037/scp0000078>
- Worthington, R. L., Soth-McNett, A. M., & Moreno, M. V. (2007). Multicultural counseling competencies research: A 20-year content analysis. *Journal of Counseling Psychology*, 54(4), 351–361. <https://doi.org/10.1037/0022-0167.54.4.351>

Article did not directly focus on culture (n=10)

- Bourhis, R. Y. (2020). A journey researching prejudice and discrimination. *Canadian Psychology/Psychologie Canadienne*, 61(2), 95–100. <https://doi.org/10.1037/cap0000214>
- Gato, J., & Fontaine, A. M. (2016). Predicting Portuguese psychology students' attitudes toward the psychological development of children adopted by lesbians and gay men. *Journal of Homosexuality*, 63(11), 1464–1480. <https://doi.org/10.1080/00918369.2016.1223316>

-
- Hatcher, R. L., Fouad, N. A., Grus, C. L., Campbell, L. F., McCutcheon, S. R., & Leahy, K. L. (2013). Competency benchmarks: Practical steps toward a culture of competence. *Training and Education in Professional Psychology, 7*(2), 84–91. <https://doi.org/10.1037/a0029401>
- Jones, R. T., Immel, C. S., Moore, R. M., & Hadder, J. M. (2008). Hurricane Katrina: Experiences of psychologists and implications for future disaster response. *Professional Psychology: Research and Practice, 39*(1), 100–106. <https://doi.org/10.1037/0735-7028.39.1.100>
- Knapp, S., & VandeCreek, L. (2003). An overview of the major changes in the 2002 APA Ethics Code. *Professional Psychology: Research and Practice, 34*(3), 301–308. <https://doi.org/10.1037/0735-7028.34.3.301>
- Lints-Martindale, A. C., Carlson, A. A., Goodwin, S. L., & Thompson, S. N. (2018). Putting recommendations into practice: Improving psychological services in rural and northern Canada. *Canadian Psychology/Psychologie Canadienne, 59*(4), 323–331. <https://doi.org/10.1037/cap0000158>
- Ponce, A. N., Carr, E. R., Miller, R., Olezeski, C. L., & Silva, M. A. (2019). Psychologists as educators: Creating change in community mental health. *Professional Psychology: Research and Practice, 50*(6), 427–433. <https://doi.org/10.1037/pro0000253>
- Rezazadeh, M. S., & Hoover, M. L. (2018). Women's experiences of immigration to Canada: A review of the literature. *Canadian Psychology/Psychologie Canadienne, 59*(1), 76–88. <https://doi.org/10.1037/cap0000126>
- Sperry, L., & Carlson, J. (2012). The global significance of individual psychology: An introduction and overview. *The Journal of Individual Psychology, 68*(3), 205–209.
- Yong, A. G., Lemyre, L., Farrell, S. J., & Young, M. Y. (2016). Acculturation in preventive health for immigrants: A systematic review on influenza vaccination programs in a socio-ecological framework. *Canadian Psychology/Psychologie Canadienne, 57*(4), 340–355. <https://doi.org/10.1037/cap0000075>

Article focused on culturally responsive research (n=6)

- Cheung, F. M., van de Vijver, F. J. R., & Leong, F. T. L. (2011). Toward a new approach to the study of personality in culture. *American Psychologist, 66*(7), 593–603. <https://doi.org/10.1037/a0022389>
- Lau, A. W., & Gallagher-Thompson, D. (2002). Ethnic minority older adults in clinical and research programs: Issues and recommendations. *The Behavior Therapist, 25*(1), 10–11.
- Tucker, C. M., & Herman, K. C. (2002). Using culturally sensitive theories and research to meet the academic needs of low-income African American children. *American Psychologist, 57*(10), 762–773. <https://doi.org/10.1037/0003-066X.57.10.762>
-

Wadsworth, L. P., Morgan, L. P., Hayes-Skelton, S. A., Roemer, L., & Suyemoto, K. L. (2016). Ways to boost your research rigor through increasing your cultural competence (part 2 of 2). *The Behavior Therapist*, 39(3), 90–92.

Whaley, A. L., & Davis, K. E. (2007). Cultural competence and evidence-based practice in mental health services: A complementary perspective. *American Psychologist*, 62(6), 563–574. <https://doi.org/10.1037/0003-066X.62.6.563>

Woidneck, M. R., Pratt, K. M., Gundy, J. M., Nelson, C. R., & Twohig, M. P. (2012). Exploring cultural competence in acceptance and commitment therapy outcomes. *Professional Psychology: Research and Practice*, 43(3), 227–233. <https://doi.org/10.1037/a0026235>

Article did not focus on psychologists (n=3)

Kelley, H. M., Siwatu, K. O., Tost, J. R., & Martinez, J. (2015). Culturally familiar tasks on reading performance and self-efficacy of culturally and linguistically diverse students. *Educational Psychology in Practice*, 31(3), 293–313. <https://doi.org/10.1080/02667363.2015.1033616>

Smith, S., O'Grady, L., Cubillo, C., & Cavanagh, S. (2017). Using culturally appropriate approaches to the development of KidsMatter resources to support the social and emotional wellbeing of Aboriginal children. *Australian Psychologist*, 52(4), 299–305. <https://doi.org/10.1111/ap.12284>

Webb, M. S. (2008). Does one size fit all African American smokers? The moderating role of acculturation in culturally specific interventions. *Psychology of Addictive Behaviors*, 22(4), 592–596. <https://doi.org/10.1037/a0012968>

Article focused on diversity of workforce/training course (n=2)

Kearns, T., Ford, L., & Linney, J. A. (2005). African American Student Representation in Special Education Programs. *Journal of Negro Education*, 74(4), 297–310.

Turpin, G., & Coleman, G. (2010). Clinical psychology and diversity: Progress and continuing challenges. *Psychology Learning & Teaching*, 9(2), 17–27. <https://doi.org/10.2304/plat.2010.9.2.17>

Article focused on adult population (n=2)

Hinrichsen, G. A. (2006). Why multicultural issues matter for practitioners working with older adults. *Professional Psychology: Research and Practice*, 37(1), 29–35. <https://doi.org/10.1037/0735-7028.37.1.29>

Wallace, K., Berry, J., & Shores, E. A. (2018). The Chinese Australian Neuropsychological Normative Study: Neuropsychological test norms for Chinese Australians aged 55–90 years. *Australian Psychologist*, 53(5), 427–443. <https://doi.org/10.1111/ap.12340>

Appendix G

Summary of the additional articles identified for survey one (n=19)

Article	Style	Location	Practitioner Focus	Summary <i>Taken from abstracts</i>
Serving the underserved: Cultural considerations in behavioural health integration in pediatric primary care (Arora et al., 2017)	Commentary	US	Psychologists (in pediatric primary care)	“Seeks to contribute to the efforts of psychologists in pediatric primary care in addressing the needs of underserved, racial and ethnic minority youth...review particular areas of focus as they relate to cultural competence for the psychologist embedded in pediatric primary care settings” (p. 139)
Historical perspectives on the multicultural guidelines and contemporary applications (Arredondo & Perez, 2006)	Commentary	US	Psychologists	“Presents some of the events that led to the approval of the “Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists” (American Psychological Association, 2003) and describes some of the ways in which psychologists may apply the guidelines in their work as clinicians, educators, and researchers” (p. 1)
Culturally centered psychosocial interventions (Bernal & Sáez-Santiago, 2006)	Literature Review	US	Psychologists	“review relevant literature concerning the consideration of cultural issues in psychosocial interventions. They present arguments in favour of culturally centering interventions. In addition, they discuss a culturally sensitive framework that has shown to be effective for working with Latinos and Latinas. This framework may also be applicable to other cultural and ethnic groups” (p. 121)
Critical cultural awareness: Contributions to a globalizing psychology (Christopher et al., 2014)	Commentary	US	Psychologists	“The number of psychologists whose work crosses cultural boundaries is increasing. Without a critical awareness of their own cultural grounding, they risk imposing the assumptions, concepts, practices, and values of U.S.-centered psychology on societies where they do not fit... Hermeneutic thinkers offer theoretical resources for gaining cultural awareness. Culture, in the hermeneutic view, is the constellation of meanings that constitutes a way of life. Such cultural meanings— especially in the form of folk psychologies and moral visions—inevitably shape every psychology, including U.S. psychology. The insights of hermeneutics, as well as its conceptual

<p>A framework for enhancing multicultural counselling competence (Collins & Arthur, 2007)</p>	Commentary	Canada	Counsellors	<p>resources and research approaches, open the way for psychological knowledge and practice that are more culturally situated” (p. 645)</p> <p>“Canadian counsellors are increasingly called upon to work with diverse client populations whose needs may not be met through traditional counselling models. The question for many is how to development the attitudes, knowledge, and skills for competent and ethical practice. This article introduces core competencies designed to assist counsellors to effectively infuse culture into all aspects of the counselling process. It then describes how these competencies are combined to enhance the multicultural competence of counsellors. Practical strategies are then introduced to provide a starting place for counsellors who identify the need for further professional development to increase their multicultural competence” (p. 31)</p>
<p>Toward cultural competence in child intake assessments (Ecklund & Johnson, 2007)</p>	Commentary	US	Psychologists	<p>“This article presents a process for integrating assessment of cultural data with the traditional intake assessment in children’s mental health. The purpose and process of integrating cultural assessment throughout the child intake are presented. By using the cultural formulation guidelines proposed in the Diagnostic and Statistical Manual of Mental Disorders (4th ed.; American Psychiatric Association, 1994), the content of a culture-integrated assessment is conceptualized and organized. The purpose of this article is to assist child, youth, and family psychologists with developing applied cultural competency skills in the context of the intake assessment with children” (p. 356)</p>
<p>Enhancing the identification of autism spectrum disorders via a model of culturally sensitive childhood assessment (El-Ghorouhy & Krackow, 2012)</p>	Commentary	US	Psychologists	<p>“This article presents a model for culturally sensitive child assessment that would help psychologists detect ASDs if present, even when ASDs are not mentioned as the presenting problem. Four cases of ASD are presented along with multicultural lessons learned from the cases that highlight components of the model” (p. 249)</p>
<p>Ethics and multiculturalism: Advancing cultural and clinical responsiveness (Gallardo et al., 2009)</p>	Commentary	US	Psychotherapists/Psychologists	<p>“This article provides additional considerations for practicing psychologists as they attempt to navigate dimensions of culture and culturally responsive practice in psychology, while negotiating the ethical challenges presented in practice” (p. 425)</p>
<p>The psychotherapy adaptation and modification framework:</p>	Commentary	US	Psychotherapists	<p>“This article addresses the need for adapting psychotherapy and provides a conceptual framework for making such modifications. The psychotherapy adaptation and modification framework model is applied to recent Asian American immigrants as an illustrative example. However, it may also serve as a point of departure to adapt therapies for other ethnocultural groups” (p. 702)</p>

Application to Asian Americans (Hwang, 2006)				
Ten considerations in addressing cultural differences in psychotherapy (LaRoche & Maxie, 2003)	Commentary	US	Psychotherapy	“Ten clinical considerations regarding the appropriateness of discussing cultural differences with patients are described. Examples are provided of how these suggested guidelines may apply to clinical practice. The literature that has supported addressing differences, including selected theoretical models, is cited in the context of these recommendations” (p. 180)
Ally, activist, advocate: Addressing role complexities for the multiculturally competent psychologist (Melton, 2018)	Commentary	US	Psychologists	“The purpose of this article is to present a practical application of advocacy, in all its forms, as a foundational and functional competency for practitioners of psychology to strengthen psychology’s leadership in advocating for psychological health and well-being for all people” (p. 83)
Non-indigenous psychologist working with Aboriginal and Torres Strait Islander people: Towards clinical and cultural competence (Mullins & Khawaja, 2018)	Qualitative study	Australia	Psychologists	“The study explored how non-Indigenous psychologists enact clinical and cultural competence in their work with Aboriginal and Torres Strait Islander clients, with a particular focus on client assessment, diagnosis, and interventions. Semi-structured individual interviews were conducted with 12 non-Indigenous psychologists from across Australia experienced in working with Aboriginal and Torres Strait Islander people in diverse geographic and organisational contexts” (p. 394)
Working with multiracial clients in therapy: Bridging theory, research and practice (Pedrotti et al., 2008)	Commentary	US	Psychologists	“The overarching goal of this article is to provide clinicians with current theory and research, as well as particular therapeutic strategies that will be useful in their work with multiracial clients. Specifically, this article (a) provides a brief review of some prevalent models of multiracial identity; (b) discusses several common themes derived from theory and research about multiracial identity, which should be taken into account when working with this population; and (c) offers some specific techniques and strategies that may be used in therapy to develop more accurate conceptualizations of multiracial clients” (p. 192)
Cultural considerations for psychologists in primary care (Richmond & Jackson, 2018)	Commentary	US	Psychologists	“Many psychologists in primary care struggle with how to integrate a culture-centered paradigm into their roles as behavioral health providers. This paper provides an introduction on how three culture-centered concepts (providers’ cultural sensitivity, patient–provider cultural congruency, and patients’ health literacy) can be applied in primary care using the Five A’s Organizational Construct and a model of cultural competence. In addition, the paper includes a section on integration of cultural

Reflective Local Practice: A pragmatic framework for improving culturally competent practice in psychology (Sandeen et al., 2018)	Commentary	US	Psychologists	considerations into consultation and training and concludes with a discussion of how the three culture-centered concepts have implications for health equity” (p. 305) “The current article presents a framework for improving cultural competence, called reflective local practice. The term reflective relates to the primary focus on self-understanding and insight as tools to enhance lifelong growth in cultural competence. The term local refers to suggestions about utilizing one’s local community and its unique history in this reflective process. Finally, the term practice reminds psychologists and psychology trainers that applied skills training is a necessary part of developing cultural competence. The reflective local practice framework is intended to be relevant for psychologists and training programs situated in any cultural milieu, and to be useful for psychologists and trainees from all cultural backgrounds” (p. 142)
The role of culture and cultural techniques in psychotherapy: A critique and reformulation (Sue & Zane, 2009)	Commentary	US	Psychotherapists	“This article examines the role of cultural knowledge and culture-specific techniques in the psychotherapeutic treatment of ethnic minority-group clients” (p. 3)
Culture and psychotherapy: Asian perspectives (Tseng, 2004)	Literature Review	US/Asia	Psychotherapists	“Based on clinical experiences and a review of the literature, primarily relating to Asian perspectives, it is aimed to elaborate what the issues are that need consideration in modifying the practice of psychotherapy. Method: Review of relevant literature and the clinical experience of Asian psychologists and psychiatrists” (p. 151)
Psychoanalytic psychologists’ conceptualisation of cultural competence in psychotherapy (Tummala-Narra et al., 2018)	Qualitative study	US	Psychotherapists	“The present study aimed to examine how psychoanalytic psychologists approach cultural competence in psychotherapy. Semi structured interviews were conducted with 20 psychologists (10 men and 10 women; 12 White, 4 Latino/a, 2 African American, 1 Asian American, 1 Multiracial) with at least 10 years of experience in providing psychoanalytic psychotherapy with clients from socially and culturally diverse backgrounds” (p. 46)
Navigating cross-cultural issues in forensic assessment: Recommendations or practice (Weiss & Rosenfield, 2012)	Commentary	US	Psychologists (forensic)	“This article examines a range of topics that impact cross-cultural validity in psychological assessments more generally, with particular attention to the issues most relevant for forensic assessment (e.g., clinical interviewing, diagnostic assessment, and psychological testing). Additionally, recommendations for best practice in forensic assessment with culturally diverse evaluatees are offered” (p. 234)

Appendix H

Example of extracts taken from article as part of thematic analysis process

Jones, J., Lee, L., Zigarelli, J., & Nakagawa, Y. (2017). Culturally responsive adaptations in evidence-based treatment: The impact on client satisfaction. *Contemporary School Psychology, 21*(3), 211–222.

<https://doi.org/10.1007/s40688-016-0118-6>

Open discussion with clients about clinician level of cultural competence

Empathy and warmth around issues of race and oppression

Use clinical interviewing tools such as cultural formulation interview and JIMIS (Jones 2009)

Held discussion with client about religion and spirituality as related to coping

Open discussions about strengths and limitations of CBT across cultures

Analysed cognitive focus and its potential misalignment with collectivist cultures

Include concepts of bias and privilege

Address ways in which oppression can impact the client

interpreted cognitive appraisals in cultural context of the client, rather than identifying 'distortions' or maladaptive thinking

Reframed perceived pathology when appropriate as an acculturation issue

Collaborated with client on goal setting

Extend the culturally related support interventions to family/support household

Ensured that cultural supports and culturally related personal strengths were included as the foundation for the intervention

Obtain a clear understanding of how culture is enacted using models such as ADDRESSING (Hays, 2016) to inform therapy, psychoeducation assessments and behavioural intervention plans

Use of a framework will support a SP not to miss key domains of cultural strengths and challenges

Push through any personal discomfort around discussing cultural difference.

liaise with family liaisons and cultural brokers

Stay constantly aware of issue of intersectionality, remembering the interrelation of aspects of race with other issues.

Assessed acculturation

normalised experiences with racism, prejudice or discrimination

Appendix I

Inter-rater reliability: summary of the codes selected for review, TEP responses and actions based on discussion

Extracts	Codes chosen by Researcher	Codes chosen by TEP 1	Actions following first coder	Codes chosen by TEP 2	Actions following second coder
<i>Honesty in regards to multicultural competence is essential when it comes to supervisors fostering a strong supervisory relationship</i>	Openness and flexibility Consider/pursue culture in supervision	Consider/pursue culture in supervision	None	Openness and flexibility Create a safe environment	None
<i>Understand how cultural beliefs have influenced help-seeking patterns for your client</i>	Value/recognise alternative models of helping Conceptualise and validate the problem/beliefs in child/family culture	Value/recognise alternative models of helping	None	Seek ongoing training opportunities explore cultural similarities differences between client and consultant	None
<i>Demonstrate an awareness of an individual's worldviews and sociopolitical experiences including the negative effects of racism, oppression and stereotyping. They are aware of the impact life experiences, cultural heritage and historical</i>	Communicate empathy and respect regarding previous difficult experiences e.g. oppression Recognise and challenge bias/oppression/privilege	Communicate empathy and respect regarding previous difficult experiences e.g. oppression Recognise and challenge bias/oppression/privilege	None	Communicate empathy and respect regarding previous difficult experiences e.g. oppression Recognise and challenge bias/oppression/privilege	None

<p><i>background have on culturally diverse individuals.</i></p>				<p>Explore and address unconscious processes related to culture</p> <p>Engage in anti-Oppressive Practice/social advocacy of cultural groups</p> <p>Offer support at a systemic level</p>	
<p><i>Viewing psychological theories and practices in cultural and historical perspective can lead to awareness of how radically alien these may be for others and raise questions about their appropriateness</i></p>	<p>Be critical and adapt theories</p>	<p>Be critical and adapt theories</p> <p>Consider appropriateness of standardised assessments</p>	<p>Added to 'Consider appropriateness of assessments'</p>	<p>Be critical and adapt theories</p> <p>Use of cultural theories</p>	<p>None</p>
<p><i>Acknowledge and value the student's culture and language, verbally affirming ways in which the student's culture is an asset</i></p>	<p>Genuine respect/interest in others' cultural background/diversity</p> <p>Include culturally related strengths</p>	<p>Genuine respect /interest in others' cultural background/ diversity</p> <p>Include culturally related strengths</p>	<p>None</p>	<p>Client empowerment</p> <p>attend to multicultural climate of school community</p>	<p>Added to 'client empowerment'</p>
<p><i>Finding an interpreter who speaks as closely as possible the language or dialect of the test taker</i></p>	<p>Address language barriers</p>	<p>Address language barriers</p>	<p>Added to 'plan for and recognise strengths and limitations when using interpreters'</p>	<p>Address language barriers</p> <p>Plan for and recognise strengths</p>	<p>None</p>

<p>Assess the salience of various cultural identities to the client's issues.</p>	<p>Understand child/family attitude towards their cultural identity</p>	<p>Plan for and recognise strengths and limitations when using interpreters</p> <p>Use cultural variables as part of hypothesis testing</p> <p>Distinguish between culture and pathology</p> <p>Use cultural explanations in formulations</p>	<p>Added to 'use cultural variables as part of hypothesis testing'</p>	<p>and limitations when using interpreters</p> <p>Consider culture in supervision</p> <p>Consult cultural experts</p> <p>Explore cultural differences/similarities between client and consultant and supervisor/supervisee</p>	<p>Added to 'Explore cultural differences/similarities between client and consultant and supervisor/supervisee'</p>
<p>Explore the histories of their clients and learn how any specific cultural variables will affect therapy</p>	<p>Integrating culture into interventions/goals/outcomes</p>	<p>Consider socio-cultural variables</p> <p>Consider barriers to treatment</p>	<p>Added 'consider socio-cultural variables' and 'consider barriers to treatment'</p>	<p>Consider barriers to treatment</p> <p>Consider culture in supervision</p> <p>Consult cultural experts</p>	<p>None</p>
<p>Skill in recognizing the limits of their own knowledge and skills so that they can seek consultation or referral to other professionals, as needed</p>	<p>Ensure a continuous learning process</p> <p>Consider/pursue culture in supervision</p> <p>Consult cultural experts</p>	<p>Awareness of one's own culture</p> <p>Self-awareness/acceptance and exploration of biases</p>	<p>None</p>	<p>Consult cultural experts</p> <p>Awareness of one's own culture</p> <p>Self-awareness/acceptance and exploration of biases</p>	<p>None</p>

Encouraging teachers to reflect upon their own values and practices in relation to the culture of the student, as well as exploring the disconnect between what teachers are doing and what culturally diverse students need

Educate others/help them become aware of cultural differences

Educate others/help them become aware of cultural differences

None

Push through personal discomfort
avoiding assumptions
gain feedback/evaluate practice'

No change

Use of a flexible approach to reflect the constant shifts in cultural and social contexts

Openness and flexibility

Openness and flexibility
Be critical and adapt theories

None

Openness and flexibility
Be critical and adapt theories
Sensitivity of context

None

Using cultural norms to justify/help explain behaviour i.e. how particular learning styles in some cultures can be in direct contrast to White Western style

Consider individual differences

Conceptualise the problem/beliefs in family culture
Use cultural explanations in formulations

Added to 'use cultural explanations in formulations'

Conceptualise the problem/beliefs in family culture
consider cultural variables
distinguish between culture and pathology

Added to 'conceptualise the problem/beliefs in family culture'

Translating traditional theoretical paradigms into relevant and sensitive research that benefits linguistically and culturally diverse populations

Be critical and adapt theories
Promoting culturally responsive research

Be critical and adapt theories
Use of cultural theories and models

No change

Be critical and adapt theories
Use of cultural theories and models
Use of cultural tools

Added to 'use of cultural theories and models'

Acknowledge aspects of privilege 'white privilege' so supervisees can develop trusting relationships with their supervisors, and so supervisees feel supported in knowing supervisors will bring up multicultural issues

Explore cultural differences/similarities in supervisory relationship

Recognise and challenge bias/oppression/privilege

Explore cultural differences/similarities in supervisory relationship

Self-awareness/acceptance and exploration of biases

Awareness of one's own culture

Added to 'self-awareness/acceptance and exploration of biases'

Self-awareness/acceptance and exploration of biases

Push through personal discomfort

Consider culture in supervision

Consider and challenge bias/oppression/privilege/intergenerational trauma

None

Appendix J

Survey One



The Tavistock and Portman
NHS Foundation Trust

How can Educational Psychologists be culturally responsive in their practice? A Delphi Study.

Thank you for your interest in participating in this study. Please take the time to read the participant information sheet before proceeding to the survey.

Participant Information Sheet

Research Title

How can Educational Psychologists be culturally responsive in their practice? A Delphi Study

Who is doing the research?

The research will be carried out by myself, Ellie Sakata. I am a Trainee Educational Psychologist studying the Doctorate in Child, Community and Educational Psychology at the Tavistock and Portman NHS Trust. I am carrying out this research as part of my course under the supervision of Dr Rachael Green, Research Supervisor.

Aims of the research

The aim of this research is to reach a consensus regarding how Educational Psychologists (EPs) can be culturally responsive in their practice. The research aims to explore what features of culturally responsive practice are most pertinent to EPs. This is with the aim of creating a set of key principles which EPs can use in the future, to reflect on and develop their cultural responsiveness.

Who has given permission for this research?

The proposed research is sponsored by the Tavistock and Portman NHS Trust and has received formal approval from the Tavistock Research and Ethics Committee (TREC)

Defining Culturally Responsive Practice

The present research defines Culturally Responsive Practice (CRP) as:

an active and evolving process when working with culturally diverse populations, which is both an interpersonal and intrapersonal process. Culturally diverse populations include children and young people and their families, as well as EPs and other professionals EPs engage with in their work. The interpersonal aspect of CRP is how EPs interact with culturally diverse populations and others when thinking about cultural differences. The intrapersonal aspect of CRP relates to the self-awareness and self-reflective qualities an EP possesses in relation to thinking about cultural differences. This includes recognition, understanding and willingness in learning about one's own biases they may have about particular cultures, as well as acknowledging the significant cultural issues of others.

Who can take part in this research?

I am looking for qualified EPs who are registered with the Health and Care Professions Council, who perceive themselves to engage in culturally responsive practice and who meet **one** of the following criteria:

- EPs who have had at least one years experience working in a culturally diverse area
- EPs who have worked with at least 10 children and young people and their families from culturally diverse backgrounds
- EPs who have had either training or Continued Professional Development input on culture and diversity within the past two years

Participant Requirements

Participants will be required to complete two surveys.

Survey one: participants will read a list of key features aligned with culturally responsive practice (informed by the literature), and will be asked to rate their perceived importance of each statement within EP Practice. Participants will be invited to comment on any additional features of culturally responsive practice which they perceive to be important, which they feel have not been included in the survey (this should take no longer than 30 minutes).

Survey two: the researcher will collate participant responses from survey one and distribute these responses within survey two. For each feature, participants will be shown their response plus the group's response. Participants will be given the opportunity to change their responses provided in survey one, following a review of the group responses. Participants will review any additional features of culturally responsive practice (collated from survey one) and rank these features according to their perceived importance (this should take no longer than 30 minutes).

*If you have any further requirements when completing this survey (i.e. supportive adaptations), please contact the researcher directly.

Group Conformity

Whilst the method used for this research recognises the strength in allowing participants to view the groups' response to each statement, it is important that participants rank each statement honestly and only change their answer if they feel it is justified.

Benefits of taking part

A potential benefit in participating in this study is providing future support to EPs in the profession in reflecting and actively developing their cultural responsiveness. Participants may increase their own self-awareness and development with regards to thinking about culture. By supporting EPs to be more culturally responsive in their practice, the overarching aim of this research is to positively benefit the culturally diverse children, young people and families that EPs work with.

Possible risks of taking part

Every research project has the potential to cause risk to participants. One potential risk in the present study is the reflective process of the surveys. Participants may reflect on their own practice with regards to cultural difference, some of which may have been difficult experiences. Furthermore, personal experiences related to participants' own cultural experiences may be provoked through completing the surveys, some of which may be

painful to recall, such as personal experiences of racism or discrimination. Participants will be encouraged to take any uncomfortable thoughts or feelings to supervision.

Confidentiality

Following completion of the surveys, participant confidentiality will be protected. Participant personal data will be processed in accordance with current data protection legislation and the University's Data Protection Policy, and will be treated in the strictest confidence. Data will not be used other than for the purposes detailed above and third parties will not be given access unless required by law. All data will be stored on a password protected device and will not be shared with others, with the exception of my research supervisor (for analysis purposes only).

In accordance with the Data Protection Act 2018, data will not be kept for longer than is necessary, and as such participant data will be kept for 2 years, after which it will be destroyed.

Are there times when my data cannot be kept confidential?

Please note confidentiality of information is subject to legal limitations or where disclosure of imminent harm to self and/or others may occur.

Anonymity

Data collated from the surveys will be held and referred to anonymously. No participants will be identifiable from any of the demographic data retrieved. Only myself as the researcher will be able to identify participants, based on the email addresses given (for the purposes of sending out survey two). Once participants have submitted survey one, they will be assigned a code which will be used to identify their data. Once participants have been sent survey two, their email addresses will be deleted.

NB: Please be mindful that if the sample size is small, this may have implications for anonymity.

What will happen to the findings from the research?

The findings will be collated and will form my thesis, which will be read by examiners. I may also publish my research at a later date. Participants will have the option to read a summary of the findings or the full thesis once complete. I may also draw on the data to create resources for services. Participants may contact me if they wish to be given a summary of the findings or read the full thesis once complete.

What will happen if I don't want to carry on with the research?

Participation in this research project is voluntary and participants may withdraw at any stage (including the right to withdraw any unprocessed data previously supplied).

Further information and contact details

For further information regarding this research, or if you would like to contact the researcher, please use the details provided below.

Email: ESakata@tavi-port.nhs.uk

If you have any concerns/questions about the research or about the conduct of the researcher, please contact Simon Carrington, Head of Academic Governance and Quality Assurance (academicquality@tavi-port.nhs.uk) or Dr Rachael Green, Research Supervisor (RGreen@tavi-port.nhs.uk)

Consent

By completing this survey, you are confirming:

I have been fully informed about the aim and purpose of the research.

I give consent to my participation in the present research, involving completing two surveys about culturally responsive Educational Psychology practice.

I understand that participation in this research project is voluntary and, if I choose to participate, I may withdraw at any stage (including the right to withdraw any unprocessed data previously supplied).

I have the right to refuse permission for the publication of any information about me. Any information that I give will be used solely for the purposes of this research project, which may include publications or academic conference or seminar presentations.

The researcher will make every effort to preserve my anonymity, but I acknowledge that if the sample size is small this may have implications for anonymity.

All information I give will be treated as confidential, but there may be limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

The information which I give may be shared between the research supervisor participating in this project

I consent to the information provided and wish to continue

Q1

About you.

To monitor the representation of respondents to this survey, please may I ask you to answer the following questions.

What gender do you identify with?

- Male (1)
- Female (2)
- Other, please specify (3)
-

- Prefer not to say (4)

Q2 How would you define your ethnicity?

Please add as much or as little detail as you like. If you would prefer not to say, please move onto the next question.

Q3 Where do you work as an EP?

- South East England (1)
 - South West England (2)
 - London (3)
 - Midlands, England (4)
 - North East England (5)
 - North West England (6)
 - Scotland (7)
 - Wales (8)
 - Northern Ireland (9)
 - Outside UK (please specify) (10)
-

Q4 How do you currently practise as an EP? (You may select more than one if applicable)

- Local Authority (1)
- Private Practice (2)
- Child and Adolescent Mental Health Service (3)
- Locum (4)
- Other (please specify) (5)
-

Q5 What is your experience of culturally responsive practice? (You may select more than one if applicable)

- I have at least one years experience working in a culturally diverse area (1)
- I have worked with at least 10 children and young people and their families from culturally diverse backgrounds (2)
- I have had either training or Continued Professional Development input on culture and diversity within the past two years (3)
- Please use this space to elaborate on your experience of culturally responsive practice, if you like (4)
-

Features of Culturally Responsive Practice

On the next page, you will see a list of key features of culturally responsive practice

related to Educational Psychologists and Psychologists, informed by a review of available literature. These features are organised into three themes:

1. Apply Culturally Responsive Skills ('Initial Relationship Building' and 'Assessment and Intervention')
2. Engage in a Continuous Learning Process ('Intrapersonal Development' and 'Interpersonal Development')
3. Consider Structural Implications Related to Culture

Please review each feature and provide a rating according to your perceived importance within Educational Psychology practice: (1-Very unimportant, 2-unimportant, 3-somewhat unimportant, 4-somewhat important, 5-important, 6-very important). If you do not understand a statement i.e. are not familiar with its content, or feel you cannot comment on a statement's perceived importance despite being familiar with the content, please choose the 'don't know' response. There will be an opportunity at the end of the survey to reflect on any 'don't know' responses and invite you to comment on your interest in learning more about unknown aspects of culturally responsive practice. Please answer as honestly as you can.

1. Applying Culturally Responsive Skills

A. Initial Relationship Building (skills to consider and apply when building initial relationships with culturally diverse populations, be that children and young people, their families, or other professionals you may work with, such as school staff)

intergenerational trauma, religion, family context and practices etc.

16. Use culturally relevant assessments when working with culturally diverse populations, considering their validity

16.1. Consider whether standardised assessments are appropriate to use with culturally diverse populations

16.2. Use assessment tools which are sensitive to culturally diverse populations, such as: dynamic assessment, ecological assessment, contextual assessment, curriculum-based assessment etc.

16.3 Where appropriate, assess language proficiency in an individual's first language

16.4. Be creative and use a variety of different assessment tools to gather culturally sensitive information

1. Apply Culturally Responsive Skills

B. Assessment and Intervention (skills to consider and apply when assessing and creating interventions for children and young people from culturally diverse populations)

and concepts more relatable

30. Consider any barriers to interventions for culturally diverse populations, such as why some cultural groups may not wish to seek help with problems (due to shame or stigma) and address these in a sensitive way

31. Evaluate the effectiveness and appropriateness of their suggested interventions, constantly reviewing how congruent it is with the individual's culture

32. Incorporate culturally appropriate information into their reports, such as cultural characteristics (language, level of acculturation etc), use of translators etc.

33. Refer individuals or families to other culturally responsive support, where appropriate

Are there any culturally responsive skills that have not been mentioned which you feel are important within EP practice? If so, please detail them below.

2. Engage in a Continuous Learning Process

A. Intrapersonal Development (development relating to oneself)

37. Avoid making assumptions about an individual's cultural background and experiences, ensuring that they do not overgeneralise or undergeneralise anyone's cultural background

38. Seek ongoing training opportunities to develop their levels of cultural responsiveness (i.e. training courses, experiential activities)

2. Engage in a Continuous Learning Process

B. Interpersonal Development (development through relating with others)

Are there any aspects of culturally responsive practice related to engaging in a continuous learning process that have not been mentioned which you feel are important? If so, please detail them below.

3. Consider Structural Implications Related to Culture

57.2. Support community-led responses to cultural issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
57.3. Consider how to be an ally, activist and advocate for culturally diverse groups and implement appropriate actions (Melton, 2018)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
57.4 Facilitate the development of appropriate resources for culturally diverse children, young people and their families	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
57.5 Ensure the success of minority supervisees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Are there any structural implications related to culturally responsive practice that have not been mentioned which you feel are important within EP practice? If so, please detail them below.

Are there any other features of culturally responsive practice that have not been mentioned which you feel are important for EPs? If so, please detail them below.

If you have any reflections or comments you wish to share following completion of this survey, please detail them in the space below. This includes where you may have chosen the 'don't know' response. You are invited to comment on any unknown aspects of culturally responsive practice and whether you have an interest to learn more about these areas or not.

Please include your email address so I can send you survey two

Appendix K

Table of statements from survey one and their sources

Statements	Code	Statements from the literature aligning to codes and their sources
1. Create a safe and inclusive environment when working with culturally diverse populations	'Safe environment'	<p>creating a safe supervisory environment (Kelly et al., 2019, p.120)</p> <p>create a safe and inclusive setting (Eklund et al., 2014, p.200)</p> <p>create a supervisory environment where the supervisee feels safe and respected and where open communication about cultural issues can occur (Eklund et al., 2014, p.199)</p> <p>Safety and stability was also promoted through the development of a safe, trusting, attuned relationship between practitioner and client. Helping clients to feel safe in relationships was identified as critical (Mullins & Khawaja, 2018, p.399)</p>
2. Use culturally sensitive verbal and non-verbal communication skills	'Culturally sensitive communication skills'	<p>culturally sensitive communication strategies as critical to gathering accurate and rich information about the client and their concerns (Mullins & Khawaja, 2018, p.398)</p> <p>Sensitivity to verbal and non-verbal cues that differ across cultures (Lopez & Rogers, 2001, p.299)</p> <p>actively attuned to verbal and nonverbal communications and modifies his or her approach to meet the cultural expectations and needs of the client (Eklund & Johnson, 2007, p.359)</p>
2.1. When communicating with linguistically diverse individuals, "listen through accents" and "allow more processing time for		<p>An ability to allow for difficulties linguistically diverse students experience (i.e., "listen through" accents, allow more "processing time" for them to respond to questions) (Lopez & Rogers, 2001, p.298)</p> <p>Most participants reported adjusting their interviewing style so that it felt more like a conversation rather than a clinical intake interview (Mullins & Khawaja, 2018, p.398)</p> <p>Allowing the story to unfold naturally, accepting silences, waiting for responses and avoiding direct or intrusive questioning (Mullins & Khawaja, 2018, p.398)</p>

<p>them to respond to questions” (Lopez & Rogers, 2001, p.298)</p>	
<p>2.2. Where appropriate, use a subtle approach to questioning and “avoid direct or intrusive questioning” (Mullins & Khawaja, 2018 pg. 398)</p>	<p>subtle approach through the use of questions, modeling, and visual stimuli versus directly confronting colleagues about the limitations of their attitudes, knowledge and skills (Parker et al., 2020, p.135)</p>
<p>2.3. “Use the language used by the individual to describe their difficulties” (Mullins & Khawaja, 2018 pg. 399)</p>	<p>use the language used by the person to describe their difficulties (Mullins & Khawaja, 2018, p.399)</p>
<p>2.4. Take into account potential differences in non-verbal communication, such as eye contact, body language, facial expression etc</p>	<p>Sensitivity to verbal and non-verbal cues that differ across cultures (Lopez & Rogers, 2001, p.299) factors such as body language, eye contact, facial expressivity, and grooming are influenced by culture (Weiss & Rosenfield, 2012, p.236)</p>
<p>2.5. Recognise how use of particular skills are beneficial for certain individuals, such as how normalisation (identifying that some experiences are encountered by many other individuals) may</p>	<p>Recognise where skills such as normalization are beneficial for certain cultural groups. refers to a process by which clients come to realize that their thoughts, feelings, or experiences are common and that many individuals encounter similar experiences (Sue & Zane, 2009, p.9)</p>

<p>reassure some individuals (Sue & Zane, 2009)</p>		
<p>3. Be sensitive and empathetic towards the context that cultural diversity brings to individuals, including empathy for previous difficult cultural experiences, such as oppression</p>	<p>‘Communicate empathy and respect regarding previous difficult experiences e.g. oppression’ ‘Communicating empathy of context’</p>	<p>Communicate empathy (Parker et al., 2020, p.123) Empathy and warmth around issues of race and oppression (Jones et al., 2017, p.215) A supervisor should validate and respect any previous experiences the supervisee might have had with prejudice and oppression and understand how these experiences affect an individual’s behavior during supervision (Eklund et al., 2014, p.201) demonstrate an awareness of an individual’s worldviews and sociopolitical experiences including the negative effects of racism, oppression and stereotyping. They are aware of the impact life experiences, cultural heritage and historical background have on culturally diverse individuals (Rogers et al., 1999, p.254) understand the nature and impact of historical, intergenerational, and present-day trauma of some cultural groups (Mullins & Khawaja, 2018, p.401) become more attuned to current expressions of privilege, and acknowledge the ways overt, covert, and institutional forms of discrimination have impacted clients’ interactions, challenges, and life course (Sandeen et al., 2018, p.144) Attending to the client’s experience of oppression and social injustice (Tummala-Narra et al., 2018, p.52) appreciate the child’s experience with oppression, prejudice, and racism, as well as the degree to which caregivers have nurtured coping strategies and offered a way of understanding adverse minority group experiences (Ecklund & Johnson, 2007, p.358) willing to hold a space for clients to express their distress and to react against an oppressive system, even though we may identify with that system and may naturally tend to respond with guilt and denial of our own roles in their oppression (Collins & Arthur, 2007, p.38)</p>
<p>4. Communicate a genuine respect and interest in the cultural</p>	<p>‘Genuine respect/interest in</p>	<p>Supporting parents through explicitly acknowledging cultural difference and articulating a wish to get to understand these (Parker et al., 2020)</p>

background of others, recognising the strength in diversity	others' cultural background /diversity'	<p>Acknowledge and value the student's culture and language, verbally affirming ways in which the student's culture is an asset (Aganza et al., 2015, p.38)</p> <p>Demonstrate respect and acceptance for individual variations in cultural values and norms (Eklund et al., 2014, p.200)</p> <p>show genuine interest in and respect for each other's unique culture (Eklund et al., 2014, p.200)</p> <p>Show Genuine Interest in and Respect for the Supervisee's Unique Culture (Eklund et al., 2014, p.201)</p> <p>promote tolerance and respect for difference based on culture, race, ethnicity and language. Psychologists inform and educate school staff about cultural and behavioral patterns of culturally and linguistically diverse populations (Rogers et al., 1999, p.248)</p> <p>show respect for individual differences as well as commonalities in human experiences (Rogers et al., 1999, p.254)</p> <p>Psychologists respect an individual's beliefs, values, and native languages (Rogers et al., 1999, p.254)</p> <p>encounter others as if their ways of life, beliefs, and values are potentially on an equal footing with our own...cultural humility...a learning attitude, including reflection, humility, appreciation of privilege, and appreciation of cultural contexts and explanatory frameworks that stretch boundaries" (Christopher et al., 2014, p.653)</p> <p>communication of a genuine interest in and inquiry of cultural factors (Ecklund & Johnson, 2007, p.357)</p> <p>communicate genuine respect and affirmation of cultural identity and practice...show sincere interest in clients' race, ethnicity, religion, and sexual orientation and seek opportunities to explore cultural influence on the client's current experience without assuming that these factors play a role in the presenting problem. (Ecklund & Johnson, 2007, p.358)</p> <p>actively attend to the cultural dynamic that clients may think the psychologist is represents oppressive systems, in the relationship and make every effort to communicate respect for and interest in the cultural identity and experiences of the client (Ecklund & Johnson, 2007, p.360)</p>
--	---	--

		<p>Demonstrate awareness of differences between your own cultural identities and those of individuals from other dominant or non-dominant groups (Collins & Arthur, 2008, p.33)</p> <p>value, respect, and appreciate these differences (Collins & Arthur, 2008, p.34)</p> <p>development of rapport, demonstration of respect, and appreciation of cultural nuances in cross-cultural communication (Arredondo & Perez, 2006, p.3)</p> <p>valuing diversity (Saxton, 2001, p.34)</p> <p>appreciate the diversity within each cultural group (Gallardo et al., 2009, p.429)</p> <p>promote mutual respect and understanding (Simcox et al, 2006, p.274)</p> <p>culturally sensitive and respectful of their clients' individual needs, life experiences, and worldviews (Butler, 2003, p.136)</p>
<p>5. Stay constantly aware of the notion of intersectionality: that there may be multiple components which influence an individual's identity and that culture may interact with these</p>	<p>'intersectionality'</p>	<p>Understanding cultural difference and intersectionality within an ecological and sociocultural context (Goforth, 2020, p.4)</p> <p>School psychologists should stay constantly aware of the existence of intersectionality with students of color (Jones et al., 2017, p.220)</p> <p>intersectionality of identity, difference, and disadvantage in the understanding of human experience (Sandeem et al., 2018, p.143)</p> <p>recognizing that individuals negotiate complex, intersecting cultural identifications in adaptive and self-damaging ways (Tummala-Narra et al., 2018, p.47)</p> <p>Be aware of and address clients' multiple identities and group memberships (Hwang, 2006, p.708)</p> <p>"What are adaptive, responsive, and responsible ways to incorporate culture, race, ethnicity, all forms of diversity, and their intersection within the context of this person's worldview and culture?" (Gallardo et al., 2009, p.435)</p>
<p>6. Be open and flexible in their approach to working with culturally diverse populations to reflect the constant</p>	<p>'openness and flexibility'</p>	<p>Skill in responding flexibly with a range of possible solutions that reflect sensitivity to cross-cultural issues (Lopez & Rogers, 2001, p.298)</p> <p>Skill in clearly communicating expectations about respective roles (Lopez & Rogers, 2001, p.302)</p> <p>Being honest and transparent about one's role or service (Mullins & Khawaja, 2018, p.397)</p>

shifts in cultural and social contexts

flexibility, adaptability, and a willingness to step outside the bounds of psychology's traditional functions and formalities (Mullins & Khawaja, 2018, p.401)

consideration of what approaches, with whom, in what situations, and for which types of problems work best for this cultural group (Mullins & Khawaja, 2018, p.401)

Use of a flexible approach to reflect the constant shifts in cultural and social contexts (Sandeen et al., 2018)

maintaining a sense of curiosity and openness in listening to the client's sociocultural context (Tummala-Narra et al., 2018, p.50)

being open to practices that may not involve professionalized services, credentialed clinicians, or medicalized or "health"-oriented frameworks (Christopher et al., 2014, p.652)

functioning flexibly in the professional role, integrating service delivery with the cultural needs and expectations of the client (Ecklund & Johnson, 2007, p.360)

establishing an effective working alliance that includes open discussion of cultural issues affecting the professional relationship (Ecklund & Johnson, 2007, p.360)

flexibility in both communication and counselling styles (Sue & Sue, 1999) and a willingness to adjust some of the cultural norms associated with applied practice (Collins & Arthur, 2007, p.39)

openness, vulnerability, and ability to experience a wide range of potentially uncomfortable feelings (Hwang, 2006, p.711)

communicate a strong openness to understanding the patient's unique experiences, including cultural perspectives (Whaley, 2001) (LaRoche & Maxie, 2003, p.182)

"What are adaptive, responsive, and responsible ways to incorporate culture, race, ethnicity, all forms of diversity, and their intersection within the context of this person's worldview and culture?" (Gallardo et al., 2009, p.435)

comprehensive, flexible, and varied in their approach (Arora et al., 2017, p.141)

balance flexibility with fidelity to manualized interventions (Arora et al., 2017, p.143)

flexible interpretation and a non-judgmental stance (Hass & Abdou, 2018, p.16)

remain flexible in modifying tasks to suit the family's needs (Wood et al., 2008, p.524)

<p>7. Address any language barriers and be clear with communication to ensure culturally diverse populations can engage in discussions</p>	<p>‘address language barriers’</p>	<p>Address barriers of parent participation difficulties, e.g. using a sibling of the targeted child if appropriate, or other external services (Parker et al., 2020)</p> <p>Language adaptations, such as consultants speaking Spanish, providing interpreters, (Ramirez & Smith, 2007, p.79)</p> <p>use of translations, interpreter (Lopez & Rogers, 2002)</p> <p>finding an interpreter who speaks as closely as possible the language or dialect of the test taker (Lopez & Rogers, 2001, p.302)</p> <p>using illustrated scales/flashcards, or written instructions along with gestures (e.g., demonstrating how to apply medication) to improve client understanding (Richmond & Jackson, 2018, p.309)</p> <p>verbal teach-back method, getting clients to explain back what they understand of what has been shared with them - can help establish whether further communicative support is needed i.e. with visual resources or interpreter (Richmond & Jackson, 2018, p.309)</p> <p>Using accessible language (Richmond & Jackson, 2018, p.309)</p> <p>Psychologists ensure that the informed consent of all research participants (students and their legal guardians/parents) is secured and has been elicited in the language the family is most comfortable with (Rogers et al., 1999, p.258)</p> <p>Additionally, although informed consent is a standard part of virtually every doctor-patient interaction in the United States, it may be unfamiliar or even confusing to individuals from non-Western cultures, who have little awareness of concepts like confidentiality, privilege, or the right to refuse to answer questions. As a result, the evaluator must take care to clearly explain these issues, (Weiss & Rosenfield, 2012, p.236)</p> <p>Careful that the concepts being assessed are understood by the parent and child (El-Ghorouhy & Krackow, 2012, p.252)</p> <p>explaining the assessment process in a way that makes sense to the client (Ecklund & Johnson, 2007, p.360)</p> <p>Give services in the client's preferred language (Peterson et al., 2017, p.183)</p>
<p>8. Take time to understand how an</p>	<p>‘Understand child/family</p>	<p>Consider individual differences in how students relate to and is affected by, various aspects of their background (McKenney et al., 2017, p.291)</p>

<p>individual's culture influences their overall identity, and their attitude towards it</p>	<p>attitude towards their cultural identity'</p>	<p>Enhance relationship with client by acknowledging patients' sociocultural identity (Richmond & Jackson, 2018, p.306) develop an understanding of the child's and parents' overarching attitude toward their cultural identity (e.g., awareness, pride, positive/ negative regard) (Ecklund & Johnson, 2007, p.358) awareness of the relationship of personal culture to health and well-being (Collins & Arthur, 2007, p.33) Assess the salience of various cultural identities to the client's issues (Collins & Arthur, 2007, p.37) understand the uniqueness of this client and how he or she draws upon cultural and group affiliations to make their way in the world (Hass & Abdou, 2018, pp.6-7)</p>
<p>9. Empower culturally diverse populations by viewing them as "experts of their own cultural experiences" (Wood et al, 2008)</p>	<p>'client empowerment'</p>	<p>collaborate to promote educational empowerment for all students (Simcox et al, 2006) Where possible, clients were empowered to make the decision about how services were delivered including the location, timing, methods of communication, and who should be involved in the sessions (Mullins & Khawaja, 2018, p.397) Viewing members of the family as experts on their own cultural experiences and asking them about their own backgrounds, family structure, beliefs, values and traditions (Wood et al, 2008, p.523)</p>
<p>10. Work collaboratively with children and young people, their families and professionals to ensure a holistic approach to working with culturally diverse populations</p>	<p>'collaborative working'</p>	<p>Acquire feedback from others to further develop - value multiple perspectives (Parker et al., 2020) Involve others in the process/decision making - teachers, parents, other professionals (Parker et al., 2020) Collaborated with the client on the treatment plan and goal setting (Jones et al., 2017, p.215) should engage in discussions with family liaisons and cultural brokers, (Jones et al., 2017, p.220) Work collaboratively with parents (McKenney et al., 2017, p.309) consider the involvement of trained bilingual interpreters, community consultants, extended family members and other paraprofessionals as resources in counseling intervention (Rogers et al, 1999, p.254)</p>

	<p>Working with other professionals collaboratively to provide a holistic approach/response (Mullins & Khawaja, 2018, p.400)</p> <p>emphasize collaboration over confrontation with attention to sociocultural differences between the client and therapist (Tummala-Narra et al., 2018, p.47)</p> <p>Inclusion of community stakeholders that reflect the values and culture of the people that will participate in the intervention (Peterson et al., 2017, p.187)</p> <p>identifies and collaborates with community stakeholders (Peterson et al., 2017, p.186)</p> <p>Collaborate with clients to establish counselling goals that are responsive to salient dimensions of cultural identity (Collins & Arthur, 2007, p.39)</p> <p>Seek out opportunities for consultation with members of other professional groups who may also be involved in client care (Collins & Arthur, 2007, p.45)</p> <p>Psychologists should seek to collaborate with the extended familial and social resources available to the child or youth (Arora et al., 2017, p.141)</p> <p>collaborate to promote educational empowerment for all students (Simcox et al., 2006)</p> <p>"Actively Collaborate with School Staff to Alleviate Parental Apprehension" (Wood et al., 2008, p.521)</p> <p>collaborate with the family when establishing goals to ensure that they are congruent with the family's cultural values and practices (Wood et al., 2008, p.522)</p>
<p>11. Use cultural tools to support their approach to working with culturally diverse populations</p>	<p>'use of cultural tools'</p> <p>Use clinical interviewing tools such as cultural formulation interview and JIMIS (Jones 2009) (Jones et al., 2017, p.220)</p> <p>Use tools such as cultural assets identifier to assist and identify application of cultural assets to assessment and intervention (Aganza et al., 2015)</p> <p>explore their own cultural backgrounds and beliefs by creating cultural genograms or by completing racial identity inventories (Eklund et al., 2014, p.201)</p> <p>use handouts, exercises, and homework that incorporate patients' culture (Richmond & Jackson, 2018, p.308)</p> <p>Use of self-guided instructional skills: structured cultural interviews such as the "Cultural Formulation Interview" of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (Sandeem et al., 2018, p.147)</p>

	<p>implicit association bias test (1998) and its many iterations is useful for exploration and normalization of one's own implicit biases (Sandeen et al., 2018, p.145)</p> <p>The use of symbols and concepts shared by the clients' culture (Peterson et al., 2017, p.183)</p> <p>Creation of genograms as a particularly useful tool therapists can use to understand family dynamics and identify strong relationships that may assist in meeting goals as well as points of conflict (Peterson et al., 2017, p.184)</p> <p>incorporation of objects and symbols of the client's culture (Bernal & Saiz-Santiago, 2006, p.128)</p> <p>Create a personal cultural genogram (family tree) (Collins & Arthur, 2007, p.42)</p>
<p>11.1. Use cultural interview schedules, such as the Cultural Formulation Interview (from DSM-V) or the Jones Intentional Multicultural Interview Schedule (JIMIS) (Jones, 2009)</p>	<p>Use clinical interviewing tools such as cultural formulation interview and JIMIS (Jones 2009) (Jones et al., 2017, p.220)</p> <p>Use of self-guided instructional skills: structured cultural interviews such as the "Cultural Formulation Interview" of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (Sandeen et al., 2018, p. 147)</p> <p>Building on the guidelines and principles of the Cultural Formulation Interview (CFI), developed by the American Psychiatric Association, authors describe the potential applicability of the interviewing format for use with culturally and linguistically diverse students and families (Hass & Abdou, 2018, p.2)</p>
<p>11.2. Use tools to identify cultural strengths, such as The Cultural Assets Identifier (CAI) (Aganza et al, 2015)</p>	<p>Use tools such as cultural assets identifier to assist and identify application of cultural assets to assessment and intervention (Aganza et al., 2015)</p>
<p>11.3. Use tools to explore cultural backgrounds and beliefs such as cultural genograms</p>	<p>explore their own cultural backgrounds and beliefs by creating cultural genograms or by completing racial identity inventories (Eklund et al., 2014, p.201)</p> <p>Creation of genograms as a particularly useful tool therapists can use to understand family dynamics and identify strong relationships that may assist in meeting goals as well as points of conflict (Peterson et al., 2017, p.184)</p>

11.4. Use objects and symbols relevant to the individual's culture		<p>incorporation of objects and symbols of the client's culture (Bernal & Saiz-Santiago, 2006, p.128)</p> <p>The use of symbols and concepts shared by the clients' culture (Peterson et al., 2017, p.183)</p>
12. Use cultural models and frameworks to support their approach to working with culturally diverse populations	<p>'use of cultural frameworks'</p> <p>'use of cultural theories and models'</p>	<p>Need for a comprehensive framework (Goforth, 2020, p.2)</p> <p>Using a framework may reduce the likelihood that a school psychologist will miss essential domains of cultural strength or challenges. (Jones et al., 2017, p.220)</p> <p>Use of Multicultural school consultation framework (Parker et al., 2020)</p> <p>Thus, the ecosystemic approach supports a shift in the school psychologist's perspective from a deficit to a strength-based view of the student (Aganza et al., 2015, p.31)</p> <p>Use of bio-psycho-social cultural framework "to address mental health needs of culturally diverse youth Attention-Deficit/Hyperactivity Disorder (ADHD)." (Pham, 2015, p.54)</p> <p>Use of a framework to help weigh a multitude of factors, when assessing child functioning and when collaborating with families to develop culturally sensitive interventions (Pham, 2015, p.60)</p> <p>Use a framework such as framework for multicultural supervision competencies (Eklund et al., 2014)</p> <p>use a culturally responsive decision-making model when it comes to ethical decision making (Kelly et al., 2019)</p> <p>The Ecocultural Framework considers human diversity at all levels as a set of collective and individual adaptations to context (Hatzichristou et al., 2006, p.106)</p> <p>Use of a framework to consider multiple identifies and intersectionality i.e. ADDRESSING framework (Sandeem et al., 2018)</p> <p>Adaptation and modification framework (Hwang, 2006)</p> <p>It becomes imperative that we begin with a culturally responsive framework (Gallardo et al., 2009, p.429)</p> <p>awareness of the impact of culture on the theory and practice of psychology (Collins & Arthur, 2007, p.33)</p>

12.1. Use a cultural consultation model or framework, such as The Multicultural School Consultation (MSC) Framework (Ingraham, 2000) or The Culture Specific Consultation Model (CSCM) (Nastasi et al, 2004)

developing a multicultural consultation model which reflects an understanding of cultural values and implications for working with culturally diverse families (Rogers et al., 1999, p.255)

Use of models e.g. The Ecological Validity Model (Bernal et al., 1995) (Peterson et al., 2017)

The multicultural counselling and psychology literature is rich with models that can contribute to reducing the use of categorization and inform culturally respectful behavior. Among these are the minority identity development model (Atkinson, Morten, & Sue, 1979); ethnic and racial minority group theories (Helms, 1990; Ruiz, 1990; Sue & Sue, 2003); and models that examine the interaction of beliefs, emotions, and behavior (Brewer & Brown, 1998; Fiske, 1998) (Arredondo & Perez, 2006, p.2)

The Ethnic Validity Model for school psychology uses a problem-solving approach that systematically evaluates cultural difference (Grant et al., 2009, p.122)

Use of Multicultural school consultation framework (Parker et al., 2020)

comprehensive framework for the practice of multicultural school consultation that should (a) include a broad consideration of diversity; (b) attend to all parties in the consultation process; (c) consider the cultural context in which consultation occurs; (d) explore a range of issues related to consultation across and within cultures; and (e) identify competencies to develop and increase attention to areas in need of research (Hatzichristou et al., 2006, p.107)

use of a consultation framework for considering and understanding cultural and national issues regarding the provision of school psychological services (Hatzichristou et al., 2006, p.118)

Nastasi has proposed a Participatory Culture Specific Consultation model (PCSC) (Nastasi, Moore, & Varjas, 2004) that focuses upon identifying and addressing the culture-specific needs of individuals and systems (Hatzichristou et al., 2006, p.109)

references use of Ingraham's 2000 multicultural consultation model (Rogers, 2000) developing a multicultural consultation model which reflects an understanding of cultural values and implications for working with culturally diverse families (Rogers et al., 1999, p.255)

<p>12.2. Use an ecosystemic framework</p>	<p>Thus, the ecosystemic approach supports a shift in the school psychologist’s perspective from a deficit to a strength-based view of the student (Aganza et al., 2015, p.31)</p>
<p>12.3. Use a bio-psycho-socio-cultural framework</p>	<p>Use of bio-psycho-social cultural framework “to address mental health needs of culturally diverse youth Attention-Deficit/Hyperactivity Disorder (ADHD).” (Pham, 2015, p.54)</p>
<p>12.4. Use a cultural model or framework to consider intersectionality, such as the ADDRESSING framework (Age and generational influences, Developmental Disability, Disability acquired later in life, Religion and spiritual orientation, Ethnicity/racial identity, Socioeconomic status, Sexual orientation, Indigenous heritage, National origin, Gender) (Hays, 1996) or Dimensions of Personal Identity Model (Arredondo, 2017)</p>	<p>Obtain a clear understanding of how culture is enacted using models such as ADDRESSING (Hays, 2016) to inform therapy, psychoeducation assessments and behavioural intervention plans (Jones et al., 2017, p.220) Use of a framework to consider multiple identifies and intersectionality i.e. ADDRESSING framework (Sandeel et al., 2018) ADDRESSING framework to help clinicians understand and respond to these complexities (Hwang, 2006, p.707) Arredondo et al, dimensions of personal identity model. A dimensions (age, culture, ethnicity, gender, ethnicity, language etc. B dimensions: education background, religion/spirituality, military experience etc. C dimensions: historical moments, eras. (Arredondo & Perez, 2006, p.2)</p>
<p>12.5. Use a framework to reflect on cultural difference, such as the Reflective Local</p>	<p>presents a framework for improving cultural competence, called reflective local practice. The term reflective relates to the primary focus on self-understanding and insight as tools to enhance lifelong growth in cultural competence. The term local refers to suggestions about utilizing one’s local community and its unique history in</p>

<p>Practice (RLP) Framework (Sandeen et al., 2018)</p>	<p>this reflective process. Finally, the term practice reminds psychologists and psychology trainers that applied skills training is a necessary part of developing cultural competence (Sandeen et al., 2018, p.142)</p>
<p>12.6. Use a framework to adapt and modify interventions to be culturally relevant, such as Hwang's adaptation and modification framework (2006) or the Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)</p>	<p>Adaptation and modification framework (Hwang, 2006) "a framework for identifying situations in which cultural adaptations of interventions may be especially relevant (Arora et al., 2017, p.143) Cultural adaptation process model (Domenech Rodríguez and Weiling 2004) - expansion of EVM, to guide cultural adaptations of interventions (Peterson et al, 2017)</p>
<p>12.7. Use models for evaluating cultural difference e.g. The Ethnic Validity Model</p>	<p>The Ethnic Validity Model for school psychology uses a problem-solving approach that systematically evaluates cultural difference (Grant et al., 2009, p.122)</p>
<p>12.8. Use an ecological model e.g. The Ecological Validity Model (Bernal et al., 1995)</p>	<p>Use of models e.g. The Ecological Validity Model (Bernal et al., 1995) (Peterson et al., 2017)</p>
<p>12.9. Use of models to support understanding of how cultural difference influences identity e.g. The Minority Identity Development Model (Atkinson et al, 1979)</p>	<p>Apply racial identity models within multicultural supervision practices, such as White Racial Identity Development Model and the Racial Cultural Identity Model to ensure appropriate consideration is given to racial identity of supervisee and supervisor - report better trust, strong working alliances (Eklund et al., 2014) Among these are the minority identity development model (Atkinson, Morten, & Sue, 1979); ethnic and racial minority group theories (Helms, 1990; Ruiz, 1990; Sue & Sue, 2003); and models that examine the interaction of beliefs, emotions, and behavior (Brewer & Brown, 1998; Fiske, 1998) (Arredondo & Perez, 2006, p.2)</p>

or The Racial Cultural Identity Development Model (R/CID) (Sue & Sue, 1990)

13. Use cultural theories to inform thinking when considering and working with culturally diverse populations e.g. critical race theory

multiple theories and frameworks exist for understanding cultural dynamics in schools. Some of these theories focus on identifying, and deconstructing or dismantling oppressive systems and structures (e.g., critical race theory) (Parker et al., 2020, p.121)

Integration of theories that are culturally appropriate, applicable and effective within a specific context and development of a synthetic conceptual framework (Hatzichristou et al., 2006, p.120)

translating traditional theoretical paradigms into relevant and sensitive research that benefits linguistically and culturally diverse populations (Rogers & Lopez, 2002, p.131)

For too long, U.S. psychologists have dismissed non-Western psychologies out of hand as culture-bound. Once we acknowledge that U.S. psychology too is culture-bound, little justification remains for maintaining the firewall between “them” and “us.” By tearing down this firewall, U.S. psychologists can take a first step toward engaging respectfully with psychologies other than their own (Christopher et al., 2014, p.652)

awareness of the impact of culture on the theory and practice of psychology (Collins & Arthur, 2007, p.33)

In this process, the consonance between culture and context is critical for treatment efficacy. (Bernal & Saiz-Santiago, 2006, p.128)

use theory and one’s knowledge of the specific population to guide changes (Wood et al., 2008, p.519)

14. Take a critical approach to theoretical paradigms used in practice, considering their appropriateness for use with culturally

‘be critical and adapt theories’

Analysed cognitive focus and its potential misalignment with collectivist cultures (Jones et al., 2017, p.215)

Consider use of strengths and limitations of the major theoretical paradigms that operate in school psychology and the appropriateness of their applications to LCD individuals/groups (Rogers & Lopez, 2002, p.130)

diverse populations and adapt these to be culturally relevant

translating traditional theoretical paradigms into relevant and sensitive research that benefits LCD populations (Rogers & Lopez, 2002, p.131)
"Knowledge of how our own (i.e., psychologists) theoretical paradigms are influenced by our cultural background (Lopez & Rogers, 2001, p.287)
Viewing psychological theories and practices in cultural and historical perspective can lead to awareness of how radically alien these may be for others and raise questions about their appropriateness (Christopher et al, 2014., p.652)
Textbooks, of course, cannot document the full extent of cultural variation across the world; however, their accuracy would be substantially increased if writers acknowledged the cultural specificity of their evidence base (Christopher et al., 2014, p.652)
awareness of the impact of culture on the theory and practice of psychology (Collins & Arthur, 2007, p.33)

Many theoretical concepts that have been used by clinicians to understand the nature of mind, psychopathology, and ways to seek solutions for psychological problems need to be challenged and modified when psychotherapy is applied to patients of diverse cultural backgrounds (Tseng et al., 2004) (Tseng, 2004, p.155)
Consider sociocultural variables i.e acculturation, immigration status, ethnic identity, intergenerational trauma, parenting disciplinary practices, religiosity and spirituality (Goforth, 2020, p.4)
Held discussion with client about religion and spirituality as related to coping (Jones et al., 2017, p.215)
Assessed acculturation (Jones et al., 2017, p.215)
understand students' family backgrounds, unique cultural norms that apply to their families and/or selves, previous educational experiences, and parents' discipline practices. (McKenney et al., 2017, p.291)
assessing acculturation of the client and responding to the client's self- presentation rather than the counselor's inferred identity of the client. (Rogers & Lopez, 2002, p.130)
developing an in-depth understanding of their sociocultural experiences, and the impact of these experiences on their identities and worldviews (Tummala-Narra et al., 2018, p.55)

15. Consider socio-cultural variables when working with culturally diverse populations, inquiring about factors such as: acculturation, immigration status, intergenerational trauma, religion, family context and practices etc.

'Consider socio-cultural variables e.g. acculturation, immigration status'

		<p>Explore Social, political, and economic contexts such as acculturative stress, poverty, and immigration concerns as this may affect treatment (Peterson et al., 2017, p.184)</p> <p>aware of the diversity of clients based on country of origin, immigration circumstances, and socioeconomic and education backgrounds (Peterson et al., 2017, p.186)</p> <p>Consider Cultural expectations of specific behaviors -Child language (multilingualism) -Migration patterns -Acculturation (El-Ghorouhy & Krackow, 2012, p.253)</p> <p>attuned to cultural factors relating to the child and family’s history, psychosocial environment, and current level of functioning...e.g. experience with stress related to racism, experience with stress related to ethnocentric monoculturalism and cultural destructiveness , challenges related to power and privilege, internalized racism, immigration, acculturation, and language acquisition stressors and impact of multicultural or multiracial family composition (Ecklund & Johnson, 2007, p.359)</p> <p>Be aware of and understand life experiences that may act as additional stressors or place clients at additional risk for mental illness (e.g., acculturative stress, racism, linguistic difficulties, social mobility problems, feelings of nostalgia, loss of interpersonal networks, intergenerational family conflict) (Hwang, 2006, p.709)</p> <p>Consider cultural processes. such as acculturative stress, phases of migration, developmental stages, availability of social support, and the one’s relationship to his or her country or culture of origin (Bernal & Saiz-Santiago, 2006, p.128)</p> <p>The acculturation level, personal cultural identity, and developmental stage of the individual must be assessed (Saxton, 2001, p.36)</p> <p>Spend Time Learning About Each Family’s Cultural Practices, Acculturative Status, Migration History, Language Proficiencies and Preferences, and Other Relevant Background History" (Wood et al., 2008, p.520)</p>
<p>16. Use culturally relevant assessments when working with culturally diverse populations,</p>	<p>‘consider appropriateness of assessments’</p>	<p>Non-discriminatory language assessment should consider cognitive, environmental, and socio-cultural variables when determining proficiency in the child’s first (L1) and second (L2) language (Pham, 2015, p.57)</p> <p>Assessment: Culturally sensitive assessment should include (a) assessment of subjects’ cultural orientation and identity (the extent to which the individuals or</p>

**considering their
validity**

members of an ethnic group integrate or reject features of the dominant culture and/or of the culture of origin); (b) awareness of cultural bias in clinical diagnosis and assessment of personality and intelligence; and (c) emphasis on cultural validity in selection of instruments and interpretation of findings (Dana, 1993) (Hatzichristou et al., 2006, p.107)

Assessment: adapting available instruments to assess linguistically and culturally diverse students (Rogers & Lopez, 2002, p.128)

selecting and using a wide array of assessment procedures that fit the referred student according to his/her individual characteristics, including culture and language (Rogers et al., 1999, p.251)

administer measures established as reliable and valid with members of the population tested and take personal, linguistic, and cultural differences into account in assessment interpretation (Weiss & Rosenfield, 2012, p.235)

consider both an evaluatee's culture and level of acculturation in gauging the appropriateness of any measure, even nonverbal ones (Weiss & Rosenfield, 2012, p.238)

Assessment instruments and processes that are culturally appropriate should be selected...examining the underlying assumptions upon which they are built to see if they are an appropriate match to the worldview of your client (Collins & Arthur, 2007, p.39)

**16.1. Consider whether
standardised
assessments are
appropriate to use with
culturally diverse
populations**

Consider or not whether use of standardised assessments is appropriate (Aganza et al., 2015, p.39)

an awareness of the limitations of using standardized tools (Lopez & Rogers, 2001, p.285)

The assessor must be competent to select and use appropriate assessment tools as well as establish rapport with the family. Not only must the assessor be able to use standardized tests, but be trained to evaluate their utility and choose among alternatives. (Saxton, 2001, p.36)

professionals need to pay particular attention to how they are assessing children for special education, particularly children from nondominant cultural backgrounds, as they are often overly represented in the special education population." (Grant et al., 2009, p.124)

<p>16.2. Use assessment tools which are sensitive to culturally diverse populations, such as: dynamic assessment, ecological assessment, contextual assessment, curriculum-based assessment etc</p>		<p>Assessment: using instruments sensitive to cultural and linguistic differences (e.g. dynamic, ecological) (Rogers & Lopez, 2002, p.128) Alternative assessments such as curriculum-based measurement, dynamic assessment, or portfolio review should be considered in order to supplement standardized test results (Saxton, 2001, p.36) try alternative ways to assess students who may not be best served by standardized assessments... contextualized (or situated) assessment, ecological assessment, and curriculum-based assessment (Grant et al., 2009, p.121)</p>
<p>16.3 Where appropriate, assess language proficiency in an individual's first language</p>		<p>assessing language proficiency in the first and second languages, (Rogers & Lopez, 2002, p.133) conducting informal and formal language assessments and in differentiating a language disorder from second language acquisition developmental stages (Rogers et al., 1999, p.251)</p>
<p>16.4. Be creative and use a variety of different assessment tools to gather culturally sensitive information</p>	<p>'creativity and breadth within assessment'</p>	<p>Evaluate "cultural and linguistic assets...by being creative in assessment means" (Aganza et al., 2015, p.42) using a variety of data collection techniques for problem identification and clarification (Rogers & Lopez, 2002, p.130) skills in using a variety of assessment tools to gather culturally sensitive data (Lopez & Rogers, 2001, p.285) selecting and using a wide array of assessment procedures that fit the referred student according to his/her individual characteristics, including culture and language (Rogers et al., 1999, p.251)</p>
<p>17. Find ways to assess culturally related strengths</p>		<p>Use tools such as cultural assets identifier to assist and identify application of cultural assets to assessment and intervention (Aganza et al., 2015) Evaluate "cultural and linguistic assets...by being creative in assessment means" (Aganza et al., 2015, p.42) identify culturally relevant strengths (Pedrotti et al, 2008, p.198)</p>

<p>18. Recognise and value alternative models of helping which may be applicable to culturally diverse populations, such as healing traditions</p>	<p>‘Value/recognise alternative models of helping’</p>	<p>Alternative models of helping (Goforth, 2020, p.4) Consultation: recognizing that helping styles and methods may be culture-bound (Rogers & Lopez, 2002, p.130) acknowledged the importance of cultural healing traditions (Mullins & Khawaja, 2018, p.400) Does the family prefer that traditional/cultural healing practices be incorporated into the treatment plan (APA, 2003)? (Ecklund & Johnson, 2007, p.358) As help-seeking may differ across populations, understanding factors that influence it is crucial for psychologists (Arora et al., 2017, p.141) respect help-seeking attitudes and behaviours of families e.g. it may be necessary to hold meetings with parents within the culturally affirming environment of their communities (Simcox et al., 2006, p.275)</p>
<p>19. Use cultural variables as part of their hypothesis testing</p>	<p>‘Use cultural variables as part of hypothesis testing’</p>	<p>knowledge of common cultural variables should be part of hypothesis testing (Ramirez & Smith, 2007, p.89) Psychologists consider cultural sources of information about students and search for culture specific confirming data (Rogers et al., 1999, p.251) cultural hypothesis should be constantly tested against the alternative ones (Lopez et al., 1989) (Bernal & Saiz-Santiago, 2006, p.122) entertain working hypotheses about how culture influences the treatment process for each family and continually refine these hypotheses as more information about the family unfolds (Wood et al., 2008, p.529)</p>
<p>20. “Distinguish between culture and pathology” (Bernal & Saiz-Santiago, 2006, p.122)</p>	<p>‘Distinguish between culture and pathology/disability’</p>	<p>distinguish between culture and pathology (Bernal & Saiz-Santiago, 2006, p.122) Distinguish between learning differences that are the result of cultural diversity and of those that are consequence of a disability (McKenney et al., 2017, p.309) being able to distinguish learning difficulties from second language acquisition issues (Rogers, 2000, p.417)</p>
<p>21. Conceptualise and validate the problem or beliefs of the individual’s culture</p>	<p>‘Conceptualise and validate the problem/beliefs’</p>	<p>trusting relationship with the family in order to determine the parental perceptions of the causes of behavior and treatment (Pham, 2015, p.57) Cultural norms and parental beliefs about the etiology of ADHD may explain why ethnic minority families are less likely to seek medical or psychological services that fit with their explanation for that problem (Pham et al. 2010) (Pham, 2015, p.58)</p>

in child/family culture’ discuss with the parents regarding their current parenting practices at home (e.g., rules and routine, homework monitoring, discipline, time-outs), their utility, and their explanations for why they believe certain practices were, or were not, effective (Pham, 2015, p.59)
 including using cultural norms to justify/explain a behavior or design an intervention; (Ramirez & Smith, 2007, p.79)
 Understanding the worldview of each individual client and how they and those in their community understand the problem or issue (Mullins & Khawaja, 2018, pp.397-398)
 consider cultural explanations for their symptoms to reduce problems associated with the misdiagnosis, under-diagnosis, and over-diagnosis of mental health conditions (Mullins & Khawaja, 2018, p.395)
 consider cultural beliefs related to pathology (Peterson et al., 2017, p.184)
 considering how parental report of the problem fits into the broader case conceptualization (El-Ghoroughy & Krackow, 2012, p.250)
 how are the child’s challenges described? How is the identified problem understood? Are there culture-specific attributions regarding symptom etiology? (Ecklund & Johnson, 2007, p.358)
 explore the meanings that patients ascribe to these cultural differences (LaRoche & Maxie, 2003, p.181)
 aware of the patient’s understanding of his problems from the standpoint of “illness,” (Tseng, 2004, p.154)
 Cultural definition of the problem (Hass & Abdou, 2018, p.12)
 "listen carefully to the family’s understanding of the problem’s origins and to validate this understanding, finding connections between this understanding and the goals of treatment." (Wood et al., 2008, p.522)

22. Recognise cultural differences within assessment and intervention

Aganza et al., 2015; Arora et al., 2017; Bernal & Saiz-Santiago, 2006; Collins & Arthur, 2007; Ecklund & Johnson, 2007; Gallardo et al., 2009 ; Hass & Abdou, 2018; Hatzichristou et al., 2006; Hwang, 2006; Jones et al., 2017; Kelly et al., 2019; LaRoche & Maxie, 2003; Melton, 2018; Mullins & Khawaja, 2018; Pedrotti et al., 2008; Peterson et al., 2017; Ramirez & Smith, 2007; Richmond & Jackson, 2018; Rogers, 2000; Rogers & Lopez, 2002; Lopez & Rogers, 2001; Rogers et al., 1999;

<p>22.1. Recognise cultural differences in the expression of distress e.g. somatization vs. worry, to inform their assessment process (Hwang, 2006; Peterson et al., 2017)</p>	<p>Saxton, 2001; Simcox et al., 2006; Tseng, 2004; Tummala-Narra et al., 2018; Weiss & Rosenfield, 2012; Wood et al., 2008</p> <p>cultural differences in the expression of distress (e.g., somatization vs. worry) could influence diagnostic accuracy, which could in turn impact psychologists' ability to reliably estimate the prevalence of certain psychiatric (Hwang, 2006, p.705)</p> <p>Understand cultural differences in the expression and communication of distress (Peterson et al., 2017, p.186)</p>
<p>22.2. Recognise there may be differences amongst family structures within different cultural groups, including communication patterns, gender roles etc, which may inform the assessment and intervention process (Ecklund & Johnson, 2007)</p>	<p>appreciation of family structure differences among diverse groups, including patterns of authority, hierarchies, communication patterns, and gender roles (Ecklund & Johnson, 2007, p.357)</p>
<p>22.3. Consider differences in cultural norms to justify or help to explain behaviour (Ramirez & Smith, 2007) e.g. how learning styles in some cultures may be in direct</p>	<p>Using cultural norms to justify/help explain behaviour (Ramirez & Smith, 2007) i.e. how particular learning styles in some cultures can be in direct contrast to White Western styles</p>

<p>contrast to White Western styles</p>		
<p>23. Plan for and recognise the strengths and limitations of using interpreters</p>	<p>‘Plan for and recognise strengths and limitations when using interpreters’</p>	<p>finding an interpreter who speaks as closely as possible the language or dialect of the test taker (Lopez & Rogers, 2001, p.302) They understand the limitations encountered in using interpreters and take them into consideration in evaluating the quality of services delivered through interpreters. (Rogers et al., 1999, p.257) examine data obtained through interpreters with extreme caution and acknowledge the limitations of such data (Rogers et al., 1999, p.258) familiarize themselves with the literature supporting any translation they use (Weiss & Rosenfield, 2012, p.237) Using a bilingual interpreter is one solution, in which case selecting, training, and guiding the interpreter in the performance of his or her function become necessary skills for the therapist (Tseng, 2003. pp. 299 – 302) (Tseng, 2004, p.153) translators used appropriately (Simcox et al., 2006) use an interpreter to conduct an assessment fairly and comprehensively (Hass & Abdou, 2018, p.10)</p>
<p>24. Factor in cultural considerations with ethical decision making i.e. “identify relevant cultural factors” and whether there are “any conflicts between ethical, legal and cultural factors”, evaluating the rights and responsibilities of all parties involved (Kelly et al., 2019, p. 122)</p>	<p>‘Cultural considerations in ethical decision making’</p>	<p>Cultural considerations in ethical decision making (Kelly et al, 2019, p.120) use a culturally responsive decision-making model when it comes to ethical decision making i.e. identify relevant cultural factors, are there any conflicts between ethical, legal and cultural factors, evaluate rights responsibilities and welfare of all parties (Kelly et al., 2019, p.122) further reflection on the relationship between ethics in psychology and the practice of culturally responsive care (Gallardo et al., 2009, p.426)</p>

25. Conceptualise culture in their case formulations	'Cultural conceptualisation/ explanations in formulations'	fostering appropriate case conceptualisation (Kelly et al., 2019, p.120) re case formulation, consider cultural explanations for their symptoms to reduce problems associated with the misdiagnosis, under-diagnosis, and over-diagnosis of mental health conditions (Mullins & Khawaja, 2018, p.395) building a culturally relevant clinical conceptualization and treatment plan (Ecklund & Johnson, 2007, p.360)
26. Bridge differing cultural perspectives from various professionals	'Bridging differing cultural perspectives'	bridge diverse perspectives from different constituent groups (Rogers, 2000, p.416)
27. Consider important values of certain cultures, such as family members being involved in the process, and ensure their inclusion	'Consider cultural values i.e. family involvement in process and ensure their inclusion'	consider the involvement of trained bilingual interpreters, community consultants, extended family members and other paraprofessionals as resources in counseling intervention (Rogers et al., 1999, p.254) extended family may play a large role (Saxton, 2001, p.36) Psychologists should seek to collaborate with the extended familial and social resources available to the child or youth (Arora et al., 2017, p.141) collaborate with the family when establishing goals to ensure that they are congruent with the family's cultural values and practices (Wood et al., 2008, p.522) explore the family structure and level of reliance on extended family for childcare and ask extended family members to collaborate in the treatment process when appropriate (Wood et al., 2008, p.523)
28. Integrate culture into interventions	'Integrating culture into interventions/goals/outcomes'	Aganza et al., 2015; Arora et al., 2017; Collins & Arthur, 2007; Ecklund & Johnson, 2007; Hass & Abdou, 2018; Hwang, 2006; Jones et al., 2017; LaRoche & Maxie, 2003; Richmond & Jackson, 2018; Rogers & Lopez, 2002; Rogers et al., 1999; Peterson et al., 2017; Saxton, 2001; Wood et al., 2008
28.1. Attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc (Collins &		attempt to incorporate cultural customs such as folk methods into intervention design (Rogers et al., 1999, p.254) Willingness to draw on a wider range of interventions and resources, including indigenous or group-specific strategies or cultural healers (Coleman & Wampold, 2003) (Collins & Arthur, 2007, p.40)

Arthur, 2007; Rogers et al, 1999)		Seek out professional training in the use of non-Western, indigenous healing practices or interventions, factor them as culturally appropriate (Collins & Arthur, 2007, p.45)
28.2. Ensure that culturally relevant strengths are included in any intervention	'include culturally related strengths'	<p>Ensured that cultural supports and culturally related personal strengths were included as the foundation for the intervention (Jones et al., 2017, p.215)</p> <p>Use tools such as cultural assets identifier to assist and identify application of cultural assets to assessment and intervention (Aganza et al., 2015)</p> <p>They emphasize a model of intervention that stresses prevention by attempting to build on and enhance strengths (Rogers et al., 1999, p.256)</p> <p>Find ways to integrate extant cultural strengths and healing practices into the client's treatment (Hwang, 2006, p.708)</p>
28.3. Ensure language used in any intervention is culturally appropriate	'Adapting interventions to be culturally relevant'	<p>adaptations to CBT: Modifying the language and concepts to be more relatable (Mullins & Khawaja, 2018, p.399)</p> <p>Intervention materials should be adapted to the native languages of students as much as possible, with visual aids for English language learners, and rewards and consequences should reflect the cultures of the students and the community to ensure maximum effectiveness (Sugai et al, 2012) (Peterson et al., 2017, p.188)</p> <p>adopt appropriate metaphors and modalities for implementing CBT (e.g., play, art, music) that will prove meaningful to the family (Wood et al., 2008, p.520)</p> <p>Consideration of language. language used in an intervention must be culturally appropriate and syntonic, taking into consideration differences in inner city, regional, or subcultural groups (Bernal & Saiz-Santiago, 2006, p.127)</p>
28.4. Frame goals or outcomes within the individual's culture	'Integrating culture into interventions/goals/outcomes'	<p>Frame Treatment goals within the culture's values, customs, and traditions (Peterson et al., 2017)</p> <p>Use Methods for achieving goals should be in line with the culture (Peterson et al., 2017, p.184)</p> <p>establish goals early in therapy that reflect the client's cultural framework (Peterson et al., 2017, p.186)</p> <p>important of creating goals that are congruent with the client's culture and values (Peterson et al., 2017, p.187)</p> <p>Collaborate with clients to establish counselling goals that are responsive to salient dimensions of cultural identity (Collins & Arthur, 2007, p.39)</p>

		<p>uses modalities and define goals that are consistent with the cultural values and life experiences of the client (Hwang, 2006, p.704)</p> <p>The goals of treatment should reflect a cultural knowledge (Bernal & Saiz-Santageo, 2006, p.128)</p> <p>"listen carefully to the family's understanding of the problem's origins and to validate this understanding, finding connections between this understanding and the goals of treatment." (Wood et al., 2008, p.522)</p>
<p>28.5. Use therapeutic interventions which are culturally appropriate, such as narrative therapies, psychoeducation, motivational interviewing etc (Mullins & Khawaja, 2018)</p>	<p>'use of culturally appropriate interventions'</p>	<p>Use of interventions which help explore and re- author the stories of one's life, challenging dominant discourses, and externalising the problem, such as narrative therapy (Mullins & Khawaja, 2018, p.400)</p> <p>Therapeutic interventions: psychoeducation, motivational interviewing, acceptance and commitment therapy, solution focused brief therapy, psychodynamic therapy, schema therapy, family therapy and parenting interventions, behavioural therapy, and psycho- drama (Mullins & Khawaja, 2018, p.400)</p>
<p>29. Adapt interventions to be culturally relevant, such as making adaptations to a Cognitive Behavioural Therapy approach i.e. make the language and concepts more relatable</p>	<p>'Adapting interventions to be culturally relevant'</p>	<p>Consider the impact of cultural factors on the various types of intervention that you plan to apply and make the necessary adjustments (Hatzichristou et al., 2006, p.121)</p> <p>Adaptations to CBT: Modifying the language and concepts to be more relatable, gently exploring the helpfulness of certain thoughts in one's life, considering alternative options without directly challenging the client, and encouraging the development of practical skills such as goal setting and problem solving (Mullins & Khawaja, 2018, p.400)</p> <p>CBT adaptation: inquire into the helpfulness instead of the validity of a thought or belief in cognitive restructuring (Tummala-Narra et al., 2018, p.47)</p> <p>creating frameworks for adapting evidence-based interventions for culturally diverse populations and the need to pilot the intervention within the target population, measure the effectiveness of the intervention, and go back to the specialists or stakeholders to address any problems and finalize the intervention (Peterson et al., 2017, p.187)</p>

		<p>Use cultural bridging to relate cognitive-behavioral therapy concepts to cultural beliefs and traditions (Hwang, 2006, p.708)</p> <p>"a framework for identifying situations in which cultural adaptations of interventions may be especially relevant, data are used to identify problems and communities that would most benefit from treatment adaptations, such as when evidence suggests that EBIs are less effective with certain groups" (Arora et al., 2017, p.143)</p> <p>Align CBT techniques with family cultural beliefs and traditions to enhance commitment to treatment" (Wood et al., 2008, p.523)</p>
<p>30. Consider any barriers to interventions for culturally diverse populations, such as why some cultural groups may not wish to seek help with problems (due to shame or stigma) and address these in a sensitive way</p>	<p>'Consider barriers to treatment'</p>	<p>Consider cultural barriers related to treatment acceptability (Pham, 2015, p.54)</p> <p>Cultural norms and parental beliefs about the etiology of ADHD may explain why ethnic minority families are less likely to seek medical or psychological services that fit with their explanation for that problem (Pham et al. 2010). (Pham, 2015, p.58)</p> <p>systematic planning process that that identifies key cultural factors that facilitate or interfere with the effective delivery of service (Rogers, 2000, p.416)</p> <p>Be aware of shame and stigma issues that may influence the treatment process (Hwang, 2006, p.709)</p>
<p>31. Evaluate the effectiveness and appropriateness of their suggested interventions, constantly reviewing how congruent it is with the individual's culture</p>	<p>'Evaluate effectiveness/appropriateness of interventions'</p>	<p>Psychologists are skilled in program evaluation to determine the appropriateness and adequacy of instructional programs specifically aimed at racially, ethnically, culturally and linguistically diverse youngsters (Rogers et al., 1999, p.258)</p> <p>If patients struggle with the intervention or engaging in treatment, re-assess the treatment plan and review how congruent the intervention is with patients' cultural values (Richmond & Jackson, 2018, p.310)</p> <p>Assess impact and/or effectiveness of implementation (Melton, 2018, p.87)</p> <p>creating frameworks for adapting evidence-based interventions for culturally diverse populations and the need to pilot the intervention within the target population, measure the effectiveness of the intervention, and go back to the specialists or stakeholders to address any problems and finalize the intervention (Peterson et al., 2017, p.187)</p>

		<p>Provide opportunities for client feedback related to intervention strategies and outcomes, addressing issues related to the fit with client worldview (Collins & Arthur, 2007, p.45)</p>
<p>32. Incorporate culturally appropriate information into their reports, such as cultural characteristics (language, level of acculturation etc), use of translators etc</p>	<p>'Incorporate culturally appropriate info into reports'</p>	<p>Incorporating information about family origins, family composition, parental attitudes about education and handicapping conditions, and level of acculturation into report (if relevant) (Rogers & Lopez, 2002, p.129) Skill in writing reports that include descriptions of (a) language or languages spoken, and (b) other relevant cultural characteristics such as reasons for immigration, years since immigration, effect of immigration experience, religious practices, adjustment to new culture, support systems, level of acculturation (Lopez & Rogers, 2001, p.301)</p>
<p>33. Refer individuals or families to other culturally responsive support, where appropriate</p>	<p>'Refer families to appropriate support'</p>	<p>Skill in recognizing the limits of their own knowledge and skills so that they can seek consultation or referral to other professionals, as needed (Lopez & Rogers, 2001, p.301) Psychologists can also refer families to local peer-to-peer support organizations, (Arora et al., 2017, p.142)</p>
<p>34. Increase awareness and understanding by exploring one's own cultural identity</p>	<p>'Increase awareness/ understanding of one's own culture'</p>	<p>This domain focuses on self- awareness and stipulates that supervisors must engage in a process of self-exploration in order to uncover their own personal biases, values, and knowledge of cultural differences and similarities (Eklund et al., 2014, p.199) explore their own cultural backgrounds and beliefs by creating cultural genograms or by completing racial identity inventories and discussing these results within the context of supervision (Eklund et al., 2014, p.201) Cultural awareness, understanding one's own and others' culture (Hatzichristou et al., 2006, p.106) Understanding one's own and others' culture (Rogers, 2000, p.415) They are aware of how their own cultural background and biases influence their ability to communicate effectively with culturally diverse students, school personnel and family members (Rogers et al., 1999, p.255) increase awareness of meaningful events within one's own cultural background and their potential impact upon clinical work (Sandeem et al., 2018, p.145)</p>

<p>35. Reflect on and explore one's own personal biases and assumptions, accepting that these may have an impact on how they communicate with culturally diverse populations</p>	<p>'Self-awareness/acceptance and exploration of biases'</p>	<p>understand their own cultural background and how this impacts their work, while understanding the client's background and how to accommodate their needs (Peterson et al., 2017, p.183)</p> <p>Engagement with issues of diversity in one's personal life (Tummala-Narra et al., 2018, p.53)</p> <p>Develop a genuine understanding of themselves as cultural beings with an implicit worldview that influences their interpersonal, cognitive, emotional, and belief systems...includes an appreciation of how one is privileged and imbued with social power that may influence rapport building and relationship development with the client (Ecklund & Johnson, 2007, p.360)</p> <p>Expanding the depth of our personal inquiry...Demonstrate awareness of your own cultural identities (Collins & Arthur, 2007, p.32)</p> <p>cultural background of the therapist should also be examined and managed properly throughout therapy, because his or her own cultural attitudes, views, beliefs, and value systems will have a tremendous effect, whether directly or indirectly, on the process and direction of the therapy (Tseng, 2004, p.160)</p> <p>how their own, as well as their patients', cultural, racial, and ethnic identity, biases, and experiences influence the patient-provider relationship (Arora et al., 2017, p.141)</p> <p>commitment to self-awareness and understanding their own identities (Hass & Abdou, 2018, p.6)</p> <p>supervisors must engage in a process of self-exploration in order to uncover their own personal biases, values, and knowledge of cultural differences and similarities (Eklund et al., 2014, p.199)</p> <p>self-reflection, development and change regarding personal attitudes, misconceptions, behaviors and professional skills (Hatzichristou et al., 2006, p.108)</p> <p>greater self-awareness of prejudices/beliefs and assumptions (Rogers, 2000, p.416)</p> <p>Psychologists are aware of their own cultural values and biases, and have the ability to recognize the limits of their own multicultural competence and expertise and how these may be detrimental to a culturally diverse individual (Rogers et al., 1999, pp.247-248)</p>
---	--	--

aware of how their own cultural background and biases influence their ability to communicate effectively with culturally diverse students, school personnel and family members (Rogers et al., 1999, p.255)

Regularly assess their own cultural awareness and cultural desire to identify any biases that may negatively impact their services (Richmond & Jackson, 2018, p.310)

Raising awareness about one's own assumptions and biases - reflective self-awareness of one's own assumptions and potential sources of bias (Sandeen et al., 2018, p.143)

awareness of one's explicit and implicit biases (Melton, 2018, p.86)

Ongoing Commitment to Self-Reflection - Reflecting on one's own social location, privilege, and marginality (Tummala-Narra et al., 2018, p.52)

aware of his or her cultural biases in the interpretation of nonverbal behavior (Weiss & Rosenfield, 2012, p.236)

sensitive to their own prejudices, particularly those with potential for derailing a collaborative relationship with diverse children and families - self-awareness regarding one's own attitudes, values, judgments, and biases against cultural groups as well as the obligation to minimize negative impact of biases in one's work (Ecklund & Johnson, 2007, p.359)

Willingness to openly acknowledge that we hold stereotypes of individuals based on group membership (Collins & Arthur, 2007, p.35)

become more cognizant of themselves as cultural beings. This means engaging in self-assessments about attitudes and beliefs that can "detrimentally influence their perceptions of and interactions with individuals who are ethnically and racially different from themselves" (Arredondo & Perez, 2006, p.2)

monitor their tendency to categorize on the basis of stereotypes, claim "color blindness," and ignore within-group differences for different ethnic and racial minorities (Arredondo & Perez, 2006, p.2)

actively explore their feelings and thoughts (e.g., countertransference, prejudice, and ethnic biases) (LaRoche & Maxie, 2003, p.184)

examine their own biases (Saxton, 2001, p.34)

35.1. Reflect on one's own hot spots (those who have experienced powerlessness in aspects of their lives and understandably have strong emotions associated with that dimension) blind spots (being unaware of relevant cultural information due to unexamined assumptions of one's own background) and soft spots (holding unexamined assumptions which lead to deviations from usual practice) (Sandeen et al., 2018, p.145)

accept that prejudiced feelings are inevitable given our cultural heritage (Butler, 2003, p.130)

commitment to self-awareness and understanding their own identities, understand the assumptions and bias they bring to situations and help them avoid reflexive interpretation of behavior or circumstances through only their personal social and cultural lenses (Hass & Abdou, 2018, p.6)

To examine their own personal biases and how these might interfere with their duty to advocate for the best outcome of the child (Grant et al., 2009, p.118)

using novel terms hot spots (persons who have experienced powerlessness in certain areas of their lives have understandably strong emotion associated with that dimension), blind spots (unaware of relevant cultural information regarding the client because of unexamined assumptions related to the psychologist's own background), and soft spots (psychologist holds unexamined assumptions that lead to deviations from usual practice, often in the direction of lowered expectations for client behavior and outcome.), to discuss self-awareness of cultural factors in a nonblaming way (Sandeen et al., 2018, p.145)

<p>35.2. Reflect on aspects such as White Privilege</p>		<p>Acknowledge aspects of privilege 'white privilege' so supervisees can develop trusting relationships with their supervisors, and so supervisees feel supported in knowing supervisors will bring up multicultural issues (Eklund et al., 2014) issues of unintentional racism (White privilege), trust, power, and communication are crucial and should be incorporated into the supervisory relationship on both the individual and group level (Butler, 2003, p.137)</p>
<p>35.3. Use tools such as an Implicit Association Bias test to reflect on one's own biases (Sandeem et al., 2018)</p>		<p>The Implicit Association Test and its many iterations is useful for exploration and normalization of one's own implicit biases (Sandeem et al., 2018, p.145)</p>
<p>36. Recognise that topics around cultural differences can cause discomfort (e.g. around race, social class, religion, spirituality), and push through these so they can understand the complexity of individual's cultural experiences</p>	<p>'Recognise and push through personal discomfort'</p>	<p>Push through any personal discomfort around discussing cultural difference (Jones et al, 2017, p.220) ("comfort with discomfort") (Sandeem et al., 2018, p.147) tolerate uncertainty, and accompanying discomfort, anxiety and confusion in order to understand the complexity of their clients' sociocultural experiences (Tummala-Narra et al., 2018, p.50) Recognizing discomfort with select issues (e.g., race, social class, religion, sexuality) (Tummala-Narra et al., 2018, p.53) When present, expeditiously address any cultural discomfort: recognize their own anxiety and discomfort and take steps to resolve them (Ecklund & Johnson, 2007, p.361) "How far are we willing to go to ensure that others have equal opportunity regardless of cultural identities if it means that our own level of comfort and privilege may need to change?" (Collins & Arthur, 2007, p.36) willing to hold a space for clients to express their distress and to react against an oppressive system, even though we may identify with that system and may naturally tend to respond with guilt and denial of our own roles in their oppression (Neville, Worthington, & Spanierman, 2001). (Collins & Arthur, 2007, p.38) openness, vulnerability, and ability to experience a wide range of potentially uncomfortable feelings (Hwang, 2006, p.711)</p>

<p>37. Avoid making assumptions about an individual's cultural background and experiences, ensuring that they do not overgeneralise or undergeneralise anyone's cultural background</p>	<p>'Avoiding assumptions'</p>	<p>step outside of their comfort zones and experience life within the context of the diverse populations they serve (Butler, 2003, p.136)</p> <p>Recognising there is danger in both ignoring explanatory cultural variables and inappropriately justifying certain behaviors on cultural grounds. Consultants must exercise caution in both directions and understand the complexity of multicultural consultation - The heterogeneity within each ethnic group should be recognized (Ramirez & Smith, 2007, p.89)</p> <p>avoiding assumptions about clients' cultural experiences (Tummala-Narra et al., 2018, p.50)</p> <p>gain familiarity with the history and content- based knowledge of local cultural practices, norms, and customs that might apply to clients one is likely to see...however...be aware of the potential for stereotyping that can emerge from overreliance on strategies focused on content-based knowledge about specific groups (Sandeem et al., 2018, p.146)</p> <p>Clinicians should be careful not to use stereotypes when approaching clients of another culture and should understand when to generalize and when to be flexible about the needs of diverse clients (Peterson et al., 2017, p.186)</p> <p>if the client and therapist come from different cultural backgrounds, it is critical that the therapist seeks to understand the needs of the client and avoid generalizations (Peterson et al., 2017, p.187)</p> <p>communicate genuine respect and affirmation of cultural identity and practice. show sincere interest in clients' race, ethnicity, religion, and sexual orientation and seek opportunities to explore cultural influence on the client's current experience without assuming that these factors play a role in the presenting problem (Ecklund & Johnson, 2007, p.358)</p> <p>Assume differences in worldview exist, then you are less likely to inadvertently impose your own perspectives on the client (Collins & Arthur, 2007, p.37)</p> <p>"What aspects of this particular client's cultural identities are relevant to our understanding of these specific presenting concerns? (Collins & Arthur, 2007, p.38)</p> <p>Dynamic sizing, or the skill of knowing when to generalize and when to flexibly individualize treatments on the basis of the client's individual characteristics (Hwang, 2006, p.707)</p>
--	-------------------------------	--

<p>38. Seek ongoing training opportunities to develop their levels of cultural responsivity (i.e. training courses, experiential activities)</p>	<p>'Seek ongoing training opportunities'</p>	<p>engage in ongoing exploration of these changing meanings of cultural differences rather than to critically evaluate the content of these dialogues and to question whether some cultural issues are overlooked and other issues are inappropriately emphasized (LaRoche & Maxie, 2003, p.184)</p> <p>To avoid overgeneralizations when working with culturally diverse groups, it is important to understand the difference between nomothetic and idiographic information. Nomothetic information focuses on commonalities and membership within a group (Hass & Kennedy, 2013), while idiographic information focuses on unique individual characteristics (Hass & Abdou, 2018, p.5)</p> <p>discovering (rather than assuming) the relative value people place on different aspects of their cultural and social identities and understanding how these differences impact decisions about assessment and intervention (Hass & Abdou, 2018, p.6)</p> <p>Ongoing training opportunities to develop intercultural competence (Kelly et al., 2019)</p> <p>that school psychologists must assess their multicultural competencies and seek further training, as needed (Ramirez & Smith, 2007, p.90)</p> <p>Seek out diverse supervisory and internship experiences to expand learning opportunities (Eklund et al., 2014, p.200)</p> <p>Supervisors should seek training opportunities that will enable them to learn about how different cultural groups have been influenced by social, historical, and political factors (Eklund et al., 2014, p.202)</p> <p>Psychologists seek out educational, consultative, and training experiences to improve their understanding and effectiveness in working with culturally diverse populations (American Psychological Association, 1992) (Rogers et al., 1999, p.248)</p> <p>Engage in training that encompasses cultural sensitivity (Richmond & Jackson, 2018, p.308)</p> <p>Experiential activities can also be undertaken within a structured group format as part of a formal professional training program, a peer discussion group, or other continuing education activity (Sandeem et al., 2018, p.146)</p>
---	--	--

		<p>Enroll in a cultural anthropology, ethnic studies, human sexuality, rehabilitation, or gender studies course. Read newspapers, magazines, or novels specific to particular non-dominant populations. Participate in cultural film festivals or rent culture-specific or international films. Access information about various cultural groups via the Internet, paying particular attention to websites generated by rather than simply about various non-dominant populations. Advocate for training opportunities through professional associations, educational institutions, and other organizations Collins & Arthur, 2007, p.43)</p> <p>consistently utilize educational workshops and classes to broaden their knowledge and effectiveness when working with culturally diverse clients (Butler, 2003, p.133)</p>
<p>39. Explore cultural differences and similarities between oneself and others when engaging in consultation i.e. between clients and/or consultees</p>	<p>‘Explore cultural differences / similarities between client, consultant, consultee etc.’</p>	<p>Examine cultural differences amongst members of the consultation triad (Goforth, 2020, p.3)</p> <p>Consultants must exercise caution in both directions and understand the complexity of multicultural consultation - The heterogeneity within each ethnic group should be recognized (Ramirez & Smith, 2007, p.88-89)</p> <p>Attending to similarities and differences in sociocultural identity and position between client and therapist (Tummala-Narra et al., 2018, p.53)</p> <p>examine ethnic and racial similarities and differences and determine how to best address these in therapy so as to maximize the client- therapist relationship... understand their own cultural background and how this impacts their work, while understanding the client’s background and how to accommodate their needs (Peterson et al., 2017, p.183)</p> <p>addressing ethnic/racial similarities and differences between client and practitioner (Hwang, 2006, p.705)</p> <p>consider the role of ethnic and racial similarities and differences in the client–therapist dyad (Bernal & Saiz-Santiago, 2006, p.127)</p> <p>Addressing therapist–patient commonalities may serve to reduce the patient’s ambivalence (LaRoche & Maxie, 2003, p.182)</p>
<p>40. Consider and pursue discussions around culture in supervision</p>	<p>‘Consider/ pursue culture in supervision’</p>	<p>Initiate and revisit diversity dialogues throughout the supervisory relationship (Eklund et al., 2014, p.200)</p>

	<p>Supervisors should model and impart multicultural competencies, initiating conversations and revisiting this dialogue throughout the supervisory relationship (Eklund et al., 2014, p.200)</p> <p>pursue culturally focused supervision (Ecklund & Johnson, 2007, p.360)</p> <p>Record your experiences and debrief them with a trusted colleague or supervisor (Collins & Arthur, 2007, p.42)</p> <p>Engage in multicultural supervision (Collins & Arthur, 2007, p.43)</p> <p>Integrates multiculturalism and diversity in provision of services, research, supervision, and education (Melton, 2018, p.86)</p>
<p>40.1 Use cultural models or frameworks within supervision e.g. the White Racial Identity Developmental Model (Helms, 1990)</p>	<p>Apply racial identity models within multicultural supervision practices, such as White Racial Identity Development Model and the Racial Cultural Identity Model to ensure appropriate consideration is given to racial identity of supervisee and supervisor - report better trust, strong working alliances (Eklund et al., 2014)</p>
<p>41. Explore cultural differences and similarities in their supervisory relationship (as supervisor or supervisee (Eklund et al, 2014)</p>	<p>‘Explore cultural differences / similarities in supervisory relationship’</p> <p>examine how culture may affect the supervisory relationship (Eklund et al., 2014, p.195)</p> <p>Supervisors should discuss cultural similarities and differences with their interns, express acceptance of them, promote risk taking, and create a climate that promotes open dialogue where mistakes can be discussed, as well as successes celebrated (Eklund et al., 2014, p.200)</p>
<p>42. Consult with cultural experts, such as cultural brokers as appropriate</p>	<p>‘Consult cultural experts’</p> <p>Reach out to cultural “experts” (Parker et al., 2020, p.140)</p> <p>engage in discussions with family liaisons and cultural brokers, (Jones et al., 2017, p.220)</p> <p>appropriate use of cultural brokers - individuals who help ease entry into a system and interpret the culture (Ramirez & Smith, 2007, p.89)</p> <p>Skill in recognizing the limits of their own knowledge and skills so that they can seek consultation or referral to other professionals, as needed (Lopez & Rogers, 2001, p.301)</p>

<p>43. Make effort to engage in the cultural community where they live, for example attending local cultural community events</p>	<p>'Engage in the cultural community'</p>	<p>search for local authors who have specific ties to the surrounding geographic region (Sandeem et al., 2018, p.146) Consult with cultural guides from within non-dominant populations (Collins & Arthur, 2007, p.43) refer these children to professionals who are more culturally and linguistically aware if they believe that they are not able to assess or develop appropriate interventions for the child due to lack of knowledge or biases (Grant et al., 2009, p.118) consult with cultural experts when working with a population that they may be less familiar with, especially before addressing sensitive topics such as the role of acculturation gaps in the child's presenting problems (Wood et al., 2008, p.525) become actively involved with culturally diverse individuals and groups in the community to enhance their perspective of diversity beyond the academic realm (Rogers et al., 1999, p.255) Engaging in the community: introducing oneself to community members and organisations, attending and helping out at community events, maintaining a visible presence in the community, being "vouched" for by others in the community, and paying respect to local Elders by making time to meet with them (Mullins & Khawaja, 2018, p.397) Become actively involved with individuals from non-dominant groups outside the professional setting (e.g., community events, social and political functions, celebrations, friendships). Find opportunities to interact with individuals and groups in healthy contexts to gain a balanced perspective (Collins & Arthur, 2007, p.43) "Visiting community-based organizations, participating or attending community events, and reading published reports or articles about the challenges facing the community" (Arora et al., 2017, p.145) Partner to form working alliances with key business, religious civic and professional stakeholders from diverse cultural backgrounds, supporting community resources being channelled into school programs e.g. jointly organise information sessions to increase community awareness, coordinate direct involvement of community stakeholders in school programs, consult with community leaders and support development and maintenance of a community resource bank within school (Simcox et al., 2006, p.276)</p>
--	---	--

		<p>reading literature or watching movies that depict elements of the history and worldview of a group, reading newspapers and periodicals that target a certain cultural group, spending time shopping, eating or attending holiday events in communities different from your own, or finding someone who can help you by being a cultural ambassador to a group (Hass & Abdou, 2018, p.6) talking to parents and students, visiting the community, and reading about the culture (Grant et al., 2009, p.118)</p>
<p>44. Educate others by helping them become aware of cultural differences and encourage others to reflect on their own biases and values related to cultural difference</p>	<p>‘Educate others/help them become aware of cultural differences’</p>	<p>intentional efforts to strengthen school personnel’s capacity to understand and support culturally diverse students, by increasing their awareness about students’ cultural backgrounds and helping teachers learn how to support students’ cultural differences in the classroom (Parker et al., 2020, p.135) helping teachers develop an awareness of students’ cultural differences (Parker et al., 2020, p.120) Supervisors should model and impart multicultural competencies, initiating conversations and revisiting this dialogue throughout the supervisory relationship (Eklund et al., 2014, p.200) provide empirically supported suggestions for appropriate policy adjustments, so that schools meet in the most efficient way the diverse needs of all students including those needs associated to cultural factors (Hatzichristou et al., 2006, p.107) Psychologists work to build relationships with families and educate parents and members of the community about cultural and linguistic factors significant in the development and success of children from diverse backgrounds (Rogers et al., 1999, p.250) Psychologists inform and educate school staff about cultural and behavioral patterns of culturally and linguistically diverse populations (Rogers et al., 1999, p.248) Integrate discussions of patients’ cultural norms and values in team meetings to reinforce the relationship between cultural practices and presentation (Richmond & Jackson, 2018, p.310)</p>

		<p>Hold themselves and their colleagues accountable - psychologists recognize one's own participation in a system of access for some and exclusion for others (Melton, 2018, p.87)</p> <p>implement professional development experiences for teachers, administrators and other school personnel on ways to promote the salient aspects of a culturally responsive school. Such experiences might include individual consultations with colleagues to assist them in identifying potentially culturally alienating or insensitive factors in educational attitudes, behaviours or policies (Simcox et al., 2006, p.275)</p>
<p>45. Model and impart culturally responsive practice onto others i.e. initiating conversations about culture and demonstrate the type of support that is required for culturally diverse individuals</p>	<p>'Model support needed'</p>	<p>Demonstrate the type of support that is required (Parker et al., 2020)</p> <p>Supervisors should model and impart multicultural competencies, initiating conversations and revisiting this dialogue throughout the supervisory relationship (Eklund et al, 2014., p.200)</p>
<p>46. Use cultural reframing to recognise when negative cultural perceptions are being used</p>	<p>'Reframing cultural perceptions'</p>	<p>Reframe negative perceptions from teachers about the pupil - reminding them about circumstances, prompting them to reset their mindsets (Parker et al., 2020)</p> <p>reframing across cultures (Aganza et al., 2015)</p>
<p>47. Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference</p>	<p>'Explore and address unconscious processes related to culture'</p>	<p>recognizing indigenous cultural narrative and related conscious and unconscious meanings (Tummala-Narra et al., 2018, p.47)</p> <p>monitoring and intervening around issues of cultural transference and countertransference (Ecklund & Johnson, 2007, p.360)</p> <p>both ethnic or race-related transference and countertransference need to be detected and managed (Tseng, 2004, p.153)</p>

<p>48. Recognise and acknowledge when others have biased views, are showing prejudiced beliefs or ignoring their privilege, and challenge individuals, whether they are supervisees, supervisors, staff or other professionals</p>	<p>‘Recognise and challenge bias/oppression /privilege’</p>	<p>engaging in ongoing efforts to reduce and eliminate biased beliefs and behaviors (Rogers & Lopez, 2002, p.130)</p>
<p>49. Recognise and address power inequities between oneself and others</p>		<p>identifies issues of power, privilege, oppression, racism, prejudice, stereotyping, discrimination, assimilation, marginalization, and acculturation on micro- and macrosystems level (Melton, 2018, p.86) become more attuned to current expressions of privilege, and acknowledge the ways overt, covert, and institutional forms of discrimination have impacted clients’ interactions, challenges, and life course (Sandeem et al., 2018, p.144) Often therapists have more ascribed power than patients. As patients become aware of these power inequities and other cultural assumptions, they are encouraged to question the impact that these assumptions have on their own lives in both positive and negative ways (LaRoche & Maxie, 2003, p.185) issues of unintentional racism (White privilege), trust, power, and communication are crucial and should be incorporated into the supervisory relationship on both the individual and group level (Butler, 2003, p.137)</p>
<p>50. Make conscious efforts to gain feedback from others (culturally diverse clients, supervisors, other professionals etc) to evaluate their</p>	<p>‘Gain feedback/evaluate practice’</p>	<p>Acquire feedback from consultees, colleagues, and others to further develop one’s multicultural consultation approaches (Parker et al., 2020, p.123) evaluation involves having the supervisor evaluate the supervisee’s multicultural competence and recommending remedial training when necessary (Eklund et al., 2014, p.199) Seeking feedback from clients and others involved in their lives in a purposeful way (Mullins & Khawaja, 2018, p.400)</p>

levels of cultural responsivity	<p>continuously monitoring client responses to ensure that the processes fit with their worldview, values, and beliefs (Collins & Arthur, 2007, p.40)</p> <p>Willingness to be challenged: “Please let me know if there are things that I say in our work together that do not fit with your values, beliefs, or life experiences. I would like for you to challenge me on these differences, because I think it will be useful in our working together.” (LaRoche & Maxie, 2003, p.184)</p>
51. Promote and commit to engaging in culturally responsive research with those from culturally diverse backgrounds	<p>‘Promoting Culturally Responsive Research’</p> <p>Commitment to the field in qualitative research methodology or PAR, which lends itself well to culturally responsive consultation research (Goforth, 2020, p.5)</p> <p>translating traditional theoretical paradigms into relevant and sensitive research that benefits LCD populations (Rogers & Lopez, 2002, p.131)</p> <p>Psychologists consider the social, linguistic and cultural context in which research takes place (Bowman, 1991) (Rogers et al., 1999, p.258)</p> <p>Integrates multiculturalism and diversity in provision of services, research, supervision, and education (Melton, 2018, p.86)</p> <p>recognition of the importance of conducting culture— centered and ethical psychological research among persons from ethnic, linguistic, and racial minority backgrounds (Melton, 2018, p.86)</p> <p>Use of culture friendly research methods i.e qualitative inquiry- ethnographic observation, IPA (Christopher et al., 2014)</p> <p>recognize the importance of conducting culture- centered research among persons from ethnic, linguistic, and racial minority backgrounds (Arredondo & Perez, 2006, p.3)</p>
52. Ensure work is based within an ecological and sociocultural context	<p>‘Work within an ecological and sociocultural context’</p> <p>Understanding cultural difference and intersectionality within an ecological and sociocultural context (Goforth, 2020, p.4)</p> <p>Consider the cultural context in which consultation occurs (Hatzichristou et al., 2006, p.107)</p> <p>viewing clinical information within a contextual perspective (Rogers & Lopez, 2002, p.130)</p> <p>Psychologists consider the social, linguistic and cultural context in which research takes place (Bowman, 1991) (Rogers et al., 1999, p.258)</p> <p>maintaining a sense of curiosity and openness in listening to the client’s sociocultural context (Tummala-Narra et al., 2018, p.50)</p>

		Explore Social, political, and economic contexts such as acculturative stress, poverty, and immigration concerns as this may affect treatment (Peterson et al., 2017, p.184)
53. Be aware of and interpret legal decisions that are relevant to culturally diverse individuals they work with	'Interpret legal decisions that are relevant'	consider a variety of ecological factors (Hass & Abdou, 2018, p.4) skills in interpreting legal and regulatory decisions that are relevant to LCD children and their families (Rogers & Lopez, 2002, p.129)
54. Attend to the multicultural climate of the community they are working in, such as a school or setting	'Attend to multicultural climate of school community'	Attending to the multicultural climate of school, district and community (Kelly et al., 2019, p.119)
55. Support and instigate appropriate policy adjustments to support institutions working with culturally diverse individuals	'Support/instigate appropriate policy adjustments'	provide empirically supported suggestions for appropriate policy adjustments, so that schools meet in the most efficient way the diverse needs of all students including those needs associated to cultural factors (Hatzichristou et al., 2006, p.107) the encouragement of the use of organizational change processes to support culturally informed organizational (policy) development and practices (American Psychological Association, 2003) (Melton, 2018, p.86) initiating change in organizational policies that appear to discriminate, or at least present barriers to access, for particular populations (Collins & Arthur, 2007, p.41) a checklist to plan for culturally informed organization change involves an assessment of policies and practices (Arredondo & Perez, 2006, p.3) taking a leadership role in the implementation of policies and procedures at the organizational level to reduce barriers to care (Arora et al., 2017, p.144)
56. Provide culturally responsive support at a systems level to ensure all culturally	'System Level Support'	System level intervention support - in-service workshops on cultural related topics, develop and implement Positive Behaviour Interventions and Support (Parker et al., 2020)

<p>diverse individuals are supported i.e. school staff development</p>		<p>Thus, cultural factors should be addressed at all levels of school psychological practice in order to maximize its benefits for all students, their families and the community through a culturally-synthetic approach (Hatzichristou et al., 2006, p.122) incorporate cultural diversity into school wide programs (Hatzichristou et al., 2006) applying institutional intervention skills and working to eliminate biases, prejudices, and discriminatory practices (Rogers & Lopez, 2002, p.131)</p>
<p>57. Engage in anti-oppressive practice and social advocacy of cultural groups, to reduce biased beliefs and discriminatory practices</p>	<p>‘Anti- Oppressive Practice/Social advocacy of cultural groups’</p>	<p>When culturally and linguistically diverse parents are unfamiliar with options available within the US educational system, psychologists advocate for these children and their families and inform parents of possible options and resources (Rogers et al., 1999, p.250) creating an environment for recovery and healing by advocating for social and political change (Mullins & Khawaja, 2018, p.400) Select one client population or counselling issue to devote professional time to for social advocacy (Collins & Arthur, 2007, p.41)</p>
<p>57.1. Conduct cultural audits in their place of work to assess potential barriers to access for culturally diverse populations (Collins & Arthur, 2007)</p>		<p>Conduct a cultural audit of services and resources available in your community to assess for barriers to access for members of non-dominant populations (Collins & Arthur, 2007, p.43)</p>
<p>57.2. Support community-led responses to cultural issues (Mullins & Khawaja, 2018)</p>		<p>Celebrating the culture, challenging racism and discrimination, advocating for changes to government and mainstream services’ policies and practices, supporting community-led responses to issues (Mullins & Khawaja, 2018, p.400)</p>
<p>57.3. Consider how to be an ally, activist and advocate for culturally diverse groups and</p>		<p>Develop a plan of action be strategies in choosing activities of allyship, activism and advocacy: 1. Identify barriers to the well-being of individuals and vulnerable groups. 2. Identify appropriate interventions and strategies.</p>

implement appropriate actions (Melton, 2018)	<p>3. Identify supports and potential allies and barriers.</p> <p>4. Implement a plan.</p> <p>5. Assess impact and/or effectiveness of implementation (Melton, 2018, p.87)</p>
57.4 Facilitate the development of appropriate resources for culturally diverse children, young people and their families	<p>consult with community leaders and support development and maintenance of a community resource bank within school (Simcox et al., 2006)</p> <p>Create a resource and referral bank for your personal work with clients or for your organization as a whole (Collins & Arthur, 2007, p.45)</p>
57.5 Ensure the success of minority supervisees (Kelly et al., 2019)	<p>ensuring success of minority supervisees (Kelly et al., 2019, p.120)</p>

Appendix L

Recruitment post on EPNET

Subject line: Research into Culturally Responsive EP Practice - Survey for EPs

Dear all,

Thank you for taking the time to read this. My name is Ellie Sakata and I am a Trainee Educational Psychologist studying the Doctorate Programme in Child, Community and Educational Psychology at the Tavistock and Portman NHS Foundation Trust. As part of my course I am carrying out research which aims to explore how Educational Psychologists can be culturally responsive in their practice.

I am looking for EPs who perceive themselves to engage in culturally responsive practice and who meet one of the following criteria:

- EPs who have had at least one years experience working in a culturally diverse area
- EPs who have worked with at least 10 children and young people and their families from culturally diverse backgrounds
- EPs who have had either training or Continued Professional Development input on culture and diversity within the past two years

I would like participants to complete **two** online surveys which will take **no longer than 30 minutes each**:

- I require **survey one** to be completed by **Sunday 16th August 2020** (3 weeks time)
- Participants will be later contacted via email to complete **survey two**, which I require to be completed by **Sunday 13th September 2020**.

I have felt encouraged by the thoughtful discussions on this platform around the Black Lives Matter movement and how as a profession we must be willing to educate ourselves. I hope that my research will support our profession to further reflect on our practice to consider how we can best serve the culturally diverse populations we work with.

If you wish to participate in this research, please click on the link which will take you to the first survey (participants will be later contacted via email to complete the second survey).

https://essex.eu.qualtrics.com/jfe/form/SV_afX7LYkY4M8qnVr

Thank you in advance for your time.

Best wishes,
Ellie Sakata

Trainee Child, Community and Educational Psychologist

Appendix M

Additional statements provided by respondent in survey one

Wording directly copied	Wording amended	Duplicate existing statements/comments as opposed to offering new statements	
<p>Are there any culturally responsive skills that have not been mentioned which you feel are important within EP practice? If so, please detail them below.</p>	<p>Are there any aspects of culturally responsive practice related to engaging in a continuous learning process that have not been mentioned which you feel are important? If so, please detail them below.</p>	<p>Are there any structural implications related to culturally responsive practice that have not been mentioned which you feel are important within EP practice? If so, please detail them below.</p>	<p>Are there any other features of culturally responsive practice that have not been mentioned which you feel are important for EPs? If so, please detail them below.</p>
<p>I am assuming the skills to do with the self are coming next?!</p>	<p>Push the debate higher up the organisational systems. LAs collect data but I do not think they do anything proactive with it.</p>	<p>How to deliver traded services and service level agreements which have culturally responsive practice embedded within the contracting with consumers.</p>	<p>Training programmes delivered for example to school staff being informed by culturally responsive practice.</p>
<p>The use of supervision in developing culturally responsive practice.</p>	<p>Basic training!</p>	<p>Promote greater aspirations for teens - more BAME uni students studying psychology with a belief that they could go on to become a "Dr" and an EP.</p>	<p>Largely hypothetical and looking at beliefs rather than actual practice which may be v different.</p>

<p>I always learn some of the language to assist in valuing their culture.</p> <p>I have done bilingual assessments too myself which has been v interesting.</p> <p>You ask of importance of measures which I've stated as somewhat when important but I don't know them. Perhaps good to ask what actually used (that may be coming!)</p>			
<p>This has highlighted that more training in this area would be really helpful!</p>			
<p>Yes, EAL children / young people perceiving the English culture and language as the dominant one and refusing to acknowledge their native language / culture. The need to fit in.</p> <p>I have learnt a lot about different frameworks.</p>			

Appendix N

Survey Two sent to respondents

Survey Two

How can Educational Psychologists be culturally responsive in their practice? A Delphi Study

Respondent ID:

Thank you for completing the first survey of this Delphi study looking at how EPs can be culturally responsive in their practice. The second survey of this Delphi provides you with an opportunity to review statements that have not yet reached consensus amongst the expert panel on their importance within EP practice.

Statements which reached consensus from survey one

If at least 80% of respondents rated statements as either *important* or *very important*, this indicated that consensus had been reached amongst the expert panel and as such did not need reviewing.

Statements which did *not* reach consensus from survey one

There are **28** statements linked to culturally responsive practice which did not reach consensus from survey one. For each statement which has not yet reached consensus, you will see three columns beside it:

Column one shows **your own individual response** to each statement which you rated in survey one. This will appear as a number which corresponds to the same scale in survey one, outlined below:

- 1 - Very unimportant
- 2 - Unimportant
- 3 - Somewhat unimportant
- 4 - Somewhat important
- 5 - Important
- 6 - Very important
- Don't Know

Column two shows **the group response** to each statement. The group response will appear as a **percentage** (indicating what percentage of respondents chose which statement), the **mean** (average group response) and **standard deviation** (the variation of responses). *NB: mean and standard deviation values only incorporate ratings from 1-6 i.e. excludes 'don't know responses'*

Column three is blank and is provided as an opportunity for you to reconsider your response since survey one. For each statement, please reconsider your original response in the context of the group response to each benchmark and if you wish to change your response, **please do so by highlighting or bold your response in**

the new response box beside each benchmark. Please note that you do not have to change your original response if you do not wish to. If you do not wish to change your answer, you may leave this box blank.

New statements of culturally responsive practice

This survey also includes new features of culturally responsive practice that were suggested through respondents completing survey one. As in survey one, you are invited to rate these new features of culturally responsive practice according to your perceived importance, using the same rating scale as before.

Statements to review from survey one

For each statement, please reconsider your original response in the context of the group response to each benchmark and if you wish to change your response, **please do so by highlighting or bold your response in the new response box beside each benchmark.** Please note that you do not have to change your original response if you do not wish to. If you do not wish to change your answer, you may leave this box blank.

Statement	Your Response	Group Response	New Response
<p>Applying Culturally Responsive Skills (Initial Relationship Building)</p> <p>2.2. Where appropriate, use a subtle approach to questioning and avoid direct or intrusive questioning</p>		<p>3 - Somewhat unimportant 8.7% 4 – somewhat important 34.8% 5 – important 34.8% 6 – very important 21.7%</p> <p>Mean – 4.7 (SD- .93)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>Applying Culturally Responsive Skills (Assessment and Intervention)</p> <p>11. Use cultural tools to support their approach to working with culturally diverse populations</p>		<p>4 – somewhat important 4.3% 5 – important 39.1% 6 – very important 34.8% Don't Know 21.7%</p> <p>Mean – 5.39 (SD- .61)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>11.1. Use cultural interview schedules, such as the Cultural Formulation Interview (from DSM-V) or the Jones Intentional Multicultural Interview</p>		<p>4 – somewhat important 8.7% 5 – important 26.1% 6 – very important 4.3% Don't Know 60.9%</p> <p>Mean – 4.89 (SD- .60)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>

Schedule (JIMIS) (Jones, 2009)			
11.2. Use tools to identify cultural strengths, such as The Cultural Assets Identifier (CAI) (Aganza et al, 2015)		4 – somewhat important 4.3% 5 – important 30.4% 6 – very important 4.3% Don't Know – 60.9 Mean – 5 (SD- .50)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
11.3. Use tools such as cultural genograms to explore cultural backgrounds and beliefs		3 - Somewhat unimportant 4.3% 4 – somewhat important 8.7% 5 – important 47.8% 6 – very important 13% Don't Know – 26.1% Mean – 4.94 (SD- .75)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
11.4. Use objects and symbols relevant to the individual's culture		3 - Somewhat unimportant 8.7% 4 – somewhat important 13% 5 – important 34.8% 6 – very important 34.8% Don't Know – 8.7% Mean – 5.05 (SD- .97)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
12. Use cultural models and frameworks to support their approach to working with culturally diverse populations		3 - Somewhat unimportant 4.3% 4 – somewhat important 8.7% 5 – important 52.2% 6 – very important 26.1% Don't Know – 8.7% Mean – 5.1 (SD- .77)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
12.1. Use a cultural consultation model or framework, such as The Multicultural School Consultation (MSC) Framework (Ingraham, 2000) or the Culture Specific Consultation Model (CSCM) (Nastasi et al, 2004)		4 – somewhat important 13% 5 – important 34.8% 6 – very important 4.3% Don't Know – 47.8% Mean – 4.83 (SD- .58)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
12.3. Use a bio-psycho-socio-cultural framework		4 – somewhat important 8.7% 5 – important 17.4% 6 – very important 56.5% Don't Know – 17.4% Mean – 5.58 (SD- .69)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
12.4. Use a cultural model or framework to consider intersectionality, such as the ADDRESSING		4 – somewhat important 4.3% 5 – important 43.5% 6 – very important 26.1% Don't Know – 26.1%	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important

<p>framework (Age and generational influences, Developmental Disability, Disability acquired later in life, Religion and spiritual orientation, Ethnicity/racial identity, Socioeconomic status, Sexual orientation, Indigenous heritage, National origin, Gender) (Hays, 1996) or Dimensions of Personal Identity Model (Arredondo, 2017)</p>		<p>Mean – 5.29 (SD- .59)</p>	<p>Don't Know</p>
<p>12.5. Use a framework to reflect on cultural difference, such as the Reflective Local Practice (RLP) Framework (Sandeen et al, 2018)</p>		<p>4 – somewhat important 17.4% 5 – important 26.1% 6 – very important 8.7% Don't Know – 47.8%</p> <p>Mean – 4.83 (SD- .72)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>12.6. Use a framework to adapt and modify interventions to be culturally relevant, such as Hwang's adaptation and modification framework (2006) or the Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)</p>		<p>4 – somewhat important 4.3% 5 – important 30.4% 6 – very important 8.7% Don't Know – 56.5%</p> <p>Mean – 5.10 (SD- .57)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>12.7. Use models for evaluating cultural difference e.g. The Ethnic Validity Model</p>		<p>4 – somewhat important 8.7% 5 – important 30.4% Don't Know – 60.9%</p> <p>Mean – 4.78 (SD- .44)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>12.8. Use an ecological model e.g. The Ecological Validity Model (Bernal et al, 1995)</p>		<p>4 – somewhat important 4.3% 5 – important 34.8% 6 – very important 21.7% Don't Know – 39.1%</p> <p>Mean – 5.29 (SD- .61)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>12.9. Use of models to support understanding of how cultural difference influences identity e.g. the Minority Identity</p>		<p>4 – somewhat important 13% 5 – important 17.4% 6 – very important 21.7% Don't Know – 47.8%</p> <p>Mean – 5.17 (SD- .83)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>

Development Model (Atkinson et al, 1979)			
18. Recognise and value alternative models of helping which may be applicable to culturally diverse populations, such as healing traditions		3 – somewhat unimportant 13% 4 – somewhat important 26.1% 5 – important 21.7% 6 – very important 26.1% Don't Know – 13% Mean – 4.70 (SD- 1.08)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
19. Use cultural variables as part of their hypothesis testing		4 – somewhat important 13% 5 – important 34.8% 6 – very important 43.5% Don't Know – 8.7% Mean – 5.33 (SD- .73)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
21. Conceptualise and validate the problem or beliefs of the individual's culture		4 – somewhat important 13% 5 – important 34.8% 6 – very important 26.1% Don't Know – 26.1% Mean – 5.18 (SD- .73)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
28.1. Attempt to incorporate cultural customs into method and design of interventions, such as folk methods, cultural healers etc.		3 – somewhat unimportant 13% 4 – somewhat important 39.1% 5 – important 13% 6 – very important 8.7% Don't Know – 26.1% Mean – 4.24 (SD- .90)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
28.2. Ensure that culturally relevant strengths are included in any intervention		3 – somewhat unimportant 4.3% 4 – somewhat important 17.4% 5 – important 47.8% 6 – very important 26.1% Don't Know – 4.3% Mean – 5.00 (SD- .82)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
Engage in a continuous learning process (Intrapersonal development) 35.3. Use tools such as an Implicit Association Bias test to reflect on one's own biases		4 – somewhat important 26.1% 5 – important 26.1% 6 – very important 30.4% Don't Know – 17.4% Mean – 5.05 (SD- .85)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
Engage in a continuous learning process		3 – somewhat unimportant 8.7% 4 – somewhat important 8.7%	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant

<p>(Interpersonal development)</p> <p>39. Explore cultural differences and similarities between oneself and others when engaging in consultation i.e. between clients and/or consultees 100%</p>		<p>5 – important 39.1% 6 – very important 30.4% Don't Know – 13%</p> <p>Mean – 5.05 (SD- .94)</p>	<p>4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>40.1 Use cultural models or frameworks within supervision e.g. the White Racial Identity Developmental Model (Helms, 1990)</p>		<p>4 – somewhat important 17.4% 5 – important 21.7% 6 – very important 17.4% Don't Know – 43.5%</p> <p>Mean – 5.00 (SD- .82)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>42. Consult with cultural experts, such as cultural brokers as appropriate</p>		<p>4 – somewhat important 13% 5 – important 39.1% 6 – very important 13% Don't Know – 34.8%</p> <p>Mean – 5.00 (SD- .65)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>43. Make effort to engage in the cultural community where they live, for example attending local cultural community events</p>		<p>2- unimportant 8.7% 3 – somewhat unimportant 8.7% 4 – somewhat important 30.4% 5 – important 39.1% 6 – very important 13%</p> <p>Mean – 4.39 (SD- 1.12)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>47. Explore and address unconscious processes related to cultural difference, such as managing cultural transference and countertransference</p>		<p>4 – somewhat important 4.3% 5 – important 47.8% 6 – very important 30.4% Don't Know – 17.4%</p> <p>Mean – 5.31 (SD- .58)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>
<p>Consider Structural Implications related to Culture</p> <p>53. Be aware of and interpret legal decisions that are relevant to culturally diverse individuals they work with</p>		<p>4 – somewhat important 21.7% 5 – important 21.7% 6 – very important 43.5% Don't Know – 13%</p> <p>Mean – 5.25 (SD- .85)</p>	<p>1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know</p>

57.3. Consider how to be ally, activist and advocate for culturally diverse groups and implement appropriate actions (Melton, 2018)		4 – somewhat important 13% 5 – important 17.4% 6 – very important 60.9% Don't Know – 8.7% Mean – 5.52 (SD- .75)	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
---	--	--	--

Additional statements suggested from survey one

For each new statement, please rate it according to your perceived importance within EP practice, by **highlighting** or **bold** your response in the response box beside each statement.

Statement	Your Response
<p>Applying Culturally Responsive Skills Learn some of the individual's language to assist in valuing their culture.</p>	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
<p>Consider how EAL children and young people perceive the English culture and language as the dominant one and be mindful of how this may influence their refusal to acknowledge their native language / culture.</p>	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
<p>Engage in a continuous learning process Take an active role in pushing the topic of cultural responsiveness higher up the organisational systems.</p>	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
<p>Engage in and seek basic training on cultural responsiveness</p>	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
<p>Consider Structural Implications related to Culture</p>	1 - Very unimportant 2 - Unimportant

Learn how to deliver traded services and service level agreements which have culturally responsive practice embedded within the contracting with consumers.	3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
Promote greater aspirations for teenagers, such as more BAME university students studying psychology with a belief that they could go on to become a "Dr" and an EP.	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know
Deliver training programmes to school staff being informed by culturally responsive practice.	1 - Very unimportant 2 - Unimportant 3 - Somewhat unimportant 4 - Somewhat important 5 - Important 6 - Very important Don't Know

Once you have completed the survey, please return it to the researcher via e-mail address by **Sunday 13th September 2020**.

If you would like to be contacted with a summary of the results following completion of survey two, please place a cross in the box

Appendix O

Respondent comments following completion of survey one

"I was not familiar with several of the culturally responsive tools that were specific referenced e.g. in the assessment section. I would be interested in learning more about these and their application.

The questions within the survey have made me consider some specific elements of EP practice within what I might more broadly consider 'cultural, or cross-cultural curiosity'"

"I have so many thoughts and the survey itself has elicited so many questions and ideas - thank you! Just a couple include:

1. use of the word safe re: the kind of environment I can offer/provide - I don't know about this. I wonder whether as a white woman working with clients/families who have experienced racism from other white people: does it truly feel safe?
2. Direct questions have a place e.g., in families whose preference is more direct than less, when there are English language learning factors and less direct questions can be quite confusing or unhelpful and when dealing with safeguarding and risk
3. On the item re: using their language, I agree and also wonder about 'what if their preferred language is deficit-driven? negative about the self?'; is there an opportunity to engage in some narrative re-authoring by introducing something different? The other bit I wondered about is the degree of say racial trauma that is experienced by certain groups and whether they would feel able to use the word racism with me - might the possibility exist that someone calling what something has been/is could be of help or benefit to the service user?
4. Collaboration can look very different for different families and how each expresses their culture e.g., some families feel very strongly about hierarchy and respect to be displayed to others and may find more Western constructions of collaboration more uncomfortable/unhelpful at least at first perhaps?
5. Did not know what was meant by a couple of items e.g., 'cultural tools', item 21, etc.
6. I don't know whether I see things as pathology vs culture or distinguishing between them? Some behaviours are 'pathological' [I am not sure I might mean the same things as others by choosing this word!] within the cultural group/families own expression of culture; some aren't
7. IAT - I have completed it but seen mixed messages as regards its effectiveness? Trying to get at and deal with my own implicit biases is essential, I am just not sure about the IAT itself?

There is so much else to say - this is such important research and a truly helpful and stimulating exercise to engage in: much to consider further!"

"Most of my 'don't know' responses were because I was not aware of the model or framework you were referencing. I wonder whether there is duplication of ideas in different models/frameworks or whether they are very different/ unique. I would like to distil what are the key principles informing culturally responsive practice and identify tools that enable me to work more effectively in this way.

There are so many different models/frameworks it can feel overwhelming where to start in terms of learning more. The sustainability of new learning and embedding this into everyday practice is important for me, whatever I do needs to continue beyond a training event or team discussion. Continuous experiential learning through relationships such as supervision I feel are also important for this."

"I was unsure/unaware of some of the theoretical models, tools and frameworks that were referred to in some of the questions. In those cases I responded with 'don't know'."

"I would like to state that my responses have been informed signification following the events and dialogue of recent months and following the increased narratives around Black Lives Matter. My own unconscious bias and passivity to structural racism has been uncomfortably recognized and I am endeavouring to respond through learning, listening and giving energy. I welcome this research in our profession and I'm grateful for the learning that has come from simply taking part."

"I've chosen 'don't know' to most questions referring to models as I do not know those models."

"I wavered a lot, unsure of what was being asked, perhaps I should have focused more at your pre information - were the responses to be based on in practice or idealism for example."

"There is a clear need for more training in this area for all EPs I think."

<p>"I wasn't aware of some of the models. Thank you for bringing them to my attention"</p>
<p>"Tended to answer with 'don't know' for questions relating to cultural models etc. This is an area I have limited awareness of, and didn't feature in my recent training or CPD. This has made me aware of gaps in my knowledge and practice which I'd like to explore and respond to. The recent BLM events and discussions have prompted me to reflect on my practice and own biases much more. I've recognised that I haven't been considering families cultures enough within my work - something I did much more of when training as an EP due to continued discourses within teaching sessions and fellow trainees."</p>
<p>"I chose 'don't know' mainly to indicate that I was not aware of a particular framework / methodology / assessment schedule. A large number of these were unknown to me. Yes, I would like to know more, particularly around assessing and case formulation when working with children and young people from EAL or culturally diverse backgrounds."</p>
<p>"Some interventions I am not familiar with so elected don't know in response."</p>
<p>"Thought provoking questions. Make you realise that although we may have a broad awareness of the importance of cultural sensitivity, there are perhaps a much wider range of specific instruments out there by which increased understanding and efficacy of our practice in this area might be supported. Would be interested in gaining more detailed understanding of these tools and how they might further support awareness as well as inclusive and culturally sensitive practice in the future."</p>
<p>"Answering some of the questions was difficult, as I felt my response would depend on the level and nature of my involvement and the individual themselves- so the nuance of response could not be reflected in the answer. Some of my 'don't know' responses reflected the fact that I was not familiar with the assessment or concept in the question. Therefore, I did not think I could give an informed response."</p>
<p>"In some cases I have chosen the 'don't know' response as I am unfamiliar with frameworks and tools mentioned. I am interested to learn more about these areas."</p>
<p>"I'd love to know more about the models identified in this survey - they are clearly going to be very helpful in addressing cultural responsiveness in EP practice but I've not been aware of them until completing this survey."</p>

Appendix P

Summary of cultural models, tools and frameworks for further exploration

General

- Reflective Local Practice Framework (Sandeem et al., 2018)

Assessment and Intervention

- Ethnic Validity Model (Barnet et al., 1995)
- Bio-Psycho-Socio-Cultural Framework (Pham, 2015)
- Cultural Formulation Interview (American Psychological Association)
- Jones Intentional Multicultural Interview Schedule (JIMIS) (Jones, 2009)
- Cultural Assets Identifier (Aganza et al., 2015)
- ADDRESSING framework (Hays, 1996)
- Dimensions of Personality Identity Model (Arredondo, 2017)
- Cultural genograms
- Ecological Validity Model (Bernal et al., 1995)
- Cultural Adaptation Process Model (Domenech Rodriguez & Weiling, 2004)
- Psychotherapy Adaptation Modification Framework (Hwang, 2006)

Consultation

- Multicultural School Consultation Framework (Ingraham, 2000)
- Participatory Culture Specific Consultation Model (Nastasi et al., 2004)

Supervision

- Framework for multicultural supervision competencies (Ancis & Ladany, 2001)
- Culturally Responsive Decision-Making Model (Kelly et al., 2019)
- White Racial Identity Model (Helms & Carter, 1990)
- Racial/Cultural Identity Development Model (Atkinson et al., 1998)
- Minority Identity Development Model (Atkinson et al., 1979)