# Handout for Group Activity: Using Cultural Formulation Interview to Mitigate Bias in Treatment

# **Group Activity Instructions:**

- Break into small groups (4–5 participants).
- Each group will review a case study.
- Use the Cultural Formulation Interview (CFI) prompts to explore the case.
- Identify potential biases that could arise in treatment.
- Discuss and propose best practices for culturally responsive engagement.
- Complete the worksheet provided.
- Share key takeaways with the larger audience.

# **Cultural Formulation Interview: Key Questions**

- What cultural identity is most important to the client (ethnicity, gender, religion, disability status, etc.)?
- How does the client perceive the problem and its causes?
- What cultural factors influence how the client expresses symptoms and seeks help?
- What are the client's past experiences with treatment systems or authority figures?
- What supports does the client have in their community or family network?

#### **Case Studies**

- Case Study 1: Racial Identity
- Derek, 27-year-old Black man seeking outpatient SUD treatment after inpatient care.
- History of racial profiling and healthcare distrust.
- Expresses frustration with medication options.
- Expresses concerns over being able to discuss his trauma in group and individual sessions.

## Case Study 2: LGBTQ+ Identity

- Jordan, 32-year-old nonbinary individual (they/them) in residential treatment for methamphetamine use.
- Experienced misgendering and discrimination.
- Requests LGBTQ+ inclusive support groups.
- Express concerns about gender specific housing.

## **Case Study 3: Disability Identity**

- Elena, 45-year-old Latina woman with visual/mobility impairment and chronic pain entering IOP for alcohol misuse.
- Reports inaccessible groups and assumptions about her needs
- Expresses frustrations made limiting medications she is prescribed for pain management.

## Case Study 4: Intersectionality (Race + LGBTQ+)

- Andre, 23-year-old Afro-Latino gay man recently completing withdrawal management, referred to outpatient care.
- Expresses fear of racial and sexual orientation bias.
- Feels unseen in traditional therapies.
- Seeking support with engaging family in treatment.

## **Best Practices for Bias Mitigation (Quick Reference)**

- Use curiosity rather than assumptions during assessments.
- Document observations objectively (e.g., 'client responded briefly' vs. 'client was resistant').
- Adapt treatment plans based on client-identified goals.
- Create inclusive environments using affirming language and visual cues.
- Reflect on biases after sessions using daily reflection tools.

## **Group Report Out:**

## 1. Key Cultural Factors Identified:

(List 2–3 important cultural factors about the client that could impact quality of care outcomes.)

## 2. Potential Biases or Assumptions:

(What clinician biases or assumptions could negatively impact quality of care?

## 3. CFI Questions That Would Help:

(Write 2 Cultural Formulation Interview questions you would use to improve understanding and care quality.)

# 4. Strategies to Ensure Culturally Responsive, High-Quality Care:

(List 1–2 action steps to support improved quality of care for this client.)

## **Group Reflection Questions**

- 1. What did your group learn about the importance of culturally responsive practices in improving quality of care outcomes?
- 2. How might using the CFI strengthen our ability to deliver more equitable, higher-quality care?
- 3. How could collecting both qualitative (narratives, lived experiences) and quantitative (measurable outcomes) data help track and improve quality of care?
- 4. What specific changes could your program make, based on collected data, to immediately strengthen quality of care and reduce disparities?