**Central Themes**

Three central themes emerged from the research findings:

A) The meaning of the encounter with their groups of origin.

B) The cultural congruence between therapist and patient.

C) Expressions of the cultural context in relation to the workplace, the staff, and in supervisions.

The interviews indicate that social workers who provide care in culturally congruent dyads perceive themselves as mediators for their patients between their common culture of origin and the Israeli social environment. The therapeutic session enables social workers to address issues of self-identity and questions of belonging. Each of them has a complex identity combining an identity related to their culture of origin and an Israeli identity. However, the nature of their internal dialogue on this subject differs between the social workers who are immigrants to Israel and social workers from the Arab minority in Israel.

It can be seen that the immigrant social workers feel a need to integrate into the majority culture. The interviewees who are also parents noted the dilemmas this raises regarding development of their children's identities through education, including what aspects of their culture of origin they want to impart to their children. Cultural congruence has multiple implications for the therapist and the treatment. It allows for a sense of closeness and intimacy in the stage of initial contact. Nonverbal language and familiarity with the cultural context become distinctive therapeutic skills for the social workers.

Use of the mother tongue makes patients feel more fully understood. For the therapists as well, language becomes an emotional representation, which connects them to their cultural roots. Use of language reflects the complexity in the identity of each individual. Occasionally, the use in therapy of different languages, i.e. both Hebrew and their mother tongue, expresses the conflict between various aspects of their social identities.

Cultural congruence in the therapy dyad creates a sense of “us” – people with a common cultural background, versus “them” – members of the majority culture. The feeling of “us” sometimes leads patients to develop unrealistic expectations of the therapists. Expectations related to concrete types of assistance are easily identified by therapists and allow them to openly address the frustration, disappointment, and anger that result from unfulfilled expectations.

Other aspects of the “us” and “them” discourse are more difficult for the therapist to identify and address. This is especially true in situations of over-identification, such as when social workers identify with their patients' challenges in social integration or their sense of deprivation.

For reasons stemming from the cultural blindness that is an aspect of cultural countertransference, the therapist may also experience difficulty in identifying the patterns, perceptions, and beliefs of patients who do not openly express them, yet which are often the source of the problem. The interviewees indicated that familiarity with their patients’ culture of origin gives them a particular role in the workplace, in that they are seen as having a certain expertise. This is a source of pride and provides them with a sense of security. However, this particularity may also lead to differentiation. The interviewees who are immigrants said they think the establishment has burdened them with the responsibility of addressing the needs of the population from their country of origin. This creates a sense of being overwhelmed, and a lack of awareness of the boundaries of their job. Two interviewees stated that their ability to be promoted to higher positions has been limited because they belong to a minority group.

Some interviewees noted that they also face ethnic diversity within the work team. The Ethiopian immigrants said they see themselves as representing that community and want the others to be familiar with it. One Arab social worker disapproved of superficial references to her culture.

The interviewees emphasized the lack of appropriate training for social workers who are dealing with a culturally congruent population. Because they are considered to be experts in their culture of origin, during the training sessions a type of “role reversal” occurs when the social workers try to explain their patients’ culture to those who are leading the training. The social workers of Ethiopian origin noted their frustrations with instructors’ misunderstandings of Ethiopian culture, and said that their needs were not being met. Issues related to processes of cultural transference and countertransference are also unlikely to be addressed in training due to the instructors’ inadequate awareness of this topic.

The invisibility of the therapists’ needs leads to a sense of injustice and even discrimination, in contrast to the feelings of social workers who are providing care to patients from a different ethnic group.

**Discussion**

The preliminary research undertaken, whose findings are briefly presented here, indicates the complexity of the experiences of social workers providing treatment in culturally congruent dyads.

Dyadic social work with cultural congruence is a powerful opportunity for the personal and professional development of social workers. It constantly presents them with questions regarding their own identity, affiliation, and integration.

Analysis of the interviews conveys a picture of how the social workers deal with their sense of difference within the general society, within the cultural group, and in the workplace.

The interviewees have distinct experiences due to their ethnic diversity. This distinctiveness, on the one hand, imparts a sense of advantage and even superiority over other social workers in terms of understanding patients within culturally congruent dyads. On the other hand, it may result in a sense of feeling overwhelmed, lonely, unseen, differentiated, and excluded. This is a parallel process to the one experienced by immigrant populations and minority populations in Israel, replicated in the relationship between social workers employed in the system and those they work with, who represent the majority culture.

Cultural congruence between a social worker and patient contributes greatly to the process of creating the therapeutic relationship and fostering positive feelings towards the therapist. This stems from conducting the work in their mother tongue and from their role as a representative of the culture of origin. However, a long-term encounter in such a dyad is accompanied by social and cultural identification, which limits the scope of treatment. The differentiation between “us” and “them” is not only done by the patients. Analysis of the interviews shows that the therapists are insufficiently aware of situations in which they participate in the definition of “us” and when they avoid inclusion in the greater population. It is important to expand exploration of the methods that social workers have developed to identify and address these processes of cultural countertransference.

The need for experts who can provide appropriate professional training was apparent. Such experts would offer tools for coping with therapeutic content and processes of cultural countertransference in social work. This reveals the concrete and clear needs of social workers regarding content issues and their translation into a culturally appropriate intervention. This veiled layer refers to the therapists’ unconscious sense of the complexity of their experience in the therapist-patient relationship within a culturally congruent dyad. It can contribute to the prickling sense of differentiation experienced by these social workers.

**Future Work Plan**

In light of the findings and insights obtained in this preliminary study, the proposed research will focus on the following topics:

* **Coping with processes of cultural transference and countertransference**. There is a need for expansion and refinement of methods for identifying processes of cultural countertransference, with a focus on methods that social workers develop to cope with them. Expanding our perspective on this topic will enable better understanding of the emotional exchange that can occur in the therapeutic relationship.
* **The contribution of a culturally congruent therapeutic relationship to social workers’ personal and professional development.** In this realm, there is significant potential for developing social workers’ professional skills. It may also improve understanding of the integration strategies used by social workers in general society and in the workplace.