

Diverse client motivation: Why using a transformative paradigm along with a critical race theory framework is important in this mixed methods study

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1. Introduction

The idea of studying diverse clients' needs and motivation came out of the lead author's work as a mental health therapist providing trauma-informed care to culturally diverse (mainly African Americans, Latinas, and various refugee populations) and economically minoritized families and their children. Much of this work is home-based which offered the lead author the opportunity to be with clients within their communities and to better understand their cultural context, needs, and experience. Many of these families are nontreatment seeking and therefore are reluctant to engage in therapeutic services. They are often mistrustful of providers and at times, shared having been let down, misunderstood, or even harmed by individuals and oppressive systems (built by white supremacy culture, e.g., the child welfare, courts, and medical systems). Research confirms this as individuals from minoritized backgrounds are more likely to underutilize or prematurely leave services due to contextual and cultural barriers (Meyer and Takeuchi, 2014; Price-Feeney et al., 2020; Sue et al., 2022), perpetuating social injustices and disparities.

Exploring diverse client motivational factors is one way of understanding low utilization rates of therapy for this population. Within the therapeutic process, client motivation has been deemed a crucial element (Miller and Rollnick, 2004; Ryan and Deci, 2008; Tallman and Bohart, 2001) regardless of the psychotherapeutic theory or approach (Ryan et al., 2011; Ryan and Deci, 2017). Self-determination Theory (SDT) posits that the quality of a person's motivation (whether more internal or more external) across various domains of activity has implications for psychological, developmental, and behavioral well-being (Ryan and Deci, 2017). Motivation can be either autonomous

(internal), that is, derived from a personal sense of choice and coming from the self, or controlled (external), which occurs from some sort of external pressure (Ryan and Deci, 2008). SDT posits that motivation for a given behavior can fall anywhere along a continuum, from external to internal. Central to SDT are the basic psychological needs of *autonomy* (choosing one's activities, initiating one's own behavior), *competence* (feeling effective in one's interactions with the environment), and *relatedness* (having meaningful, mutual relationships) (Ryan and Deci, 2017). Importantly, relationships and contexts that provide support for the satisfaction of the basic needs tend also to promote more autonomous motivation for activity within those social environments (Ryan and Deci, 2017). Although SDT researchers have studied motivational concepts across a number of countries, culturally diverse, often minoritized populations within the United States (US) have not been a focus, with few exceptions (Lynch, 2023). Importantly, SDT emphasizes that support for autonomy, conceptualized as a basic psychological need shared by all humans, involves listening, hearing, and giving voice, especially to marginalized voices (Lynch, 2023). This proposition provides a theoretical grounding for the current study.

To address the mental health disparities and service needs of culturally diverse clients, the methodological question was: How does one go about researching the complexity of cultural influences on diverse clients' motivational processes, centering their lived experiences (including racism, oppression, and strengths) with the goal of changing the status quo? Historically much of the research with members of culturally diverse groups has been done from a post-positivist paradigm using quantitative methods that are not inclusive, culturally focused, and do not address contextual complexity (Arnett, 2008; Usher, 2018). *Mixed methods*, the combining of qualitative and quantitative research

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methods in a single study, is a way of bringing about "... diverse ways of thinking, knowing, and valuing ... understandings that are broader, deeper, and wiser, as well as more multiplistic, more accepting of difference, and more tolerant of uncertainty" (Greene and Caracelli, 2003, p. 93–94). Mixed method approaches are encouraged within the counseling psychology field (Hanson et al., 2005; Leech and Onwuegbuzie, 2011) as qualitative and quantitative methods provide richer findings and understandings of complex dynamics. A major consideration of using mixed methods for our research is that it allowed us to hear from diverse clients about their lived experience with racism and oppression, and their view of cultural strengths and how that connected with their motivational choices. This offered us a chance to see if findings supported adding a cultural component to existing SDT questionnaires. Because this relationship has not been studied in this way, it then supported us in quantitatively exploring whether cultural identity and strengths played a role in the usage and continuation of therapeutic services.

Deciding to use a transformative paradigm within this mixed methods study was an important and intentional choice as it provides a philosophical framework to examine the dynamics of power imbalances, privilege, and oppression with the goal of leading to social justice change (Mertens, 2010). As Mertens (2009) explained, a transformative paradigm places importance on the lives and experiences of marginalized groups, and focuses on "the strength found in communities when their rights are respected and honored" (p. 10). Along with the transformative paradigm, critical theories such as Critical Race Theory (CRT) add to research methodology by explicitly addressing power dynamics and social justice which was an important framework to use in addressing the aims of the research presented in this paper. The use of CRT as a way of understanding racism and social injustices within a transformative paradigm highlights race, racism, and discrimination within context, often through eliciting the voices of people of color focusing on the "... multiple-perspective stories of individuals and who tells the stories" (Creswell, 2007, p. 24). The combining of CRT with a transformative mixed methods approach has recently been discussed in the literature as Critical Race Mixed Methodology (CRMM, DeCuir-Gunby et al., 2024; DeCuir-Gunby & Schutz, 2019). Although the study we report in the current paper was conceptualized prior to the literature on CRMM, our study is an example of a CRMM methodology.

This article is organized into four parts with the overall goal of contributing to the advancement of mixed methods methodology from a transformative perspective. In the first part we briefly outline SDT within the therapeutic domain and provide a rationale for understanding motivation from a cultural perspective. In the second part we continue to highlight the rationale for selecting a CRMM methodology to answer our research question by reviewing elements of mixed methods research, the use of transformative paradigms within mixed methods, and the addition of CRT and cultural wealth from a CRT perspective. In the third part we present our research, an exploratory sequential transformative mixed methods study using a CRT lens. In the last part we discuss the contributions of a transformative, mixed methods methodology to the field and the methodological limitations of our study.

1.1. Researchers' perspectives

The lead author has over four decades of experience as a clinician in the US and Australia. As mentioned above, her therapeutic work with culturally diverse clients emphasized the need for a better understanding of how they view their cultural context and make meaning of their experiences with oppressive systems. As a white clinician and researcher, she positioned herself as a collaborator with participants, taking a stance of curiosity and willingness to learn.

Two graduate research assistants assisted with data collection and analyses for the study: one identifying as a Pakistani and white woman, and one as a white woman. Both have worked at the research site in research and clinical roles for several years with children and families

who have experienced trauma.

2. Literature review

2.1. Motivation from a self-determination theory perspective (SDT)

According to SDT, the quality of motivation a client has for participating in therapy has an impact on engagement, the therapeutic experience, and how effective, long lasting, and transferable the changes made will be (Lynch et al., 2011; Ryan and Deci, 2008). Clients who are autonomously motivated are more likely to be engaged in therapy, have higher retention rates, and have more positive therapeutic outcomes (Pelletier et al., 1997; Ryan et al., 1995; Zuroff et al., 2007). The therapeutic relationship and the environment created within that relationship also play a role in the motivation of clients and the success of therapy (Bachelor and Horvath, 2001; Lynch, 2014). Providing therapy within an SDT framework centers on therapists fostering volition and helping clients to engage autonomously in the therapeutic process, referred to as providing *autonomy support* (Ryan and Deci, 2008). Autonomy support includes attending to feelings, providing meaningful rationale for strategies, offering transparency regarding the therapeutic work, providing choice, and encouraging input, and setting limits in a psychological need supportive way (Ryan and Deci, 2017). When therapists are autonomy-supportive, clients typically report higher levels of autonomous motivation for counseling and have better outcomes (Zeldman et al., 2004; Zuroff et al., 2012).

2.2. Culture, motivation, and counseling

Cultural differences were first studied in the US by exploring racial disparities and then extended to include other marginalized communities based on religion, socioeconomic status, sexual orientation and gender, and disability (Sue and Sue, 2013). Currently, the awareness of cultural differences encompasses intersectionality and social and systemic factors such as discrimination, power and privilege, and oppression (Sue et al., 2022). Given the changing dynamics of the population and demographics in the US (Cardenas et al., 2011) there has been a push for more culturally sensitive counseling which is referred to as *multicultural counseling*. Multicultural counseling literature highlights several over-arching concepts that many theories and practices incorporate, such as cultural identity, worldview, dominant culture and power, and strengths within culturally diverse groups (Smith, 2006; Sue et al., 2022). Understanding the relationship that one has with his or her culture is referred to as cultural, racial, or ethnic identity (McAuliffe, 2008). There is a strong relationship between racial/ethnic identity development and worldview and both are highly correlated with a person's cultural upbringing and life experiences (Sue and Sue, 1999). Sue and Sue (1999) defined worldview as how a person perceives their relationship to the world and stated that worldviews are "... not only composed of our attitudes, values, opinions, and concepts; they may also affect how we think, define events, make decisions, and behave" (p. 166). Comas-Diaz (2011) highlighted other culturally embedded therapeutic themes such as family relationships, interpersonal boundaries, emotional space, and identity. The inappropriateness and/or possible antagonistic or oppressive ways Western forms of counseling may be delivered to diverse clients when counselors do not take into consideration the client's culture is cautioned within the literature (Christopher et al., 2014; Lynch, 2002; Sue and Sue, 2013). Day-Vines et al. (2007) discussed the importance of a "... counselor's ability to consider the relationship of racial and cultural factors to the client's presenting problem, especially because these issues might otherwise remain unexamined during the counseling process" (p. 401). They have termed this "broaching", and linked counselor racial identity development with levels of broaching and discussed how the two will likely have an impact on the client-counselor relationship. Providing culturally relevant therapeutic services (e.g., multicultural counseling) and advocating to

eliminate systemic social injustice are considered ethical imperatives for mental health clinicians (American Psychological Association, 2017; Ratts et al., 2015).

Within SDT, there has been a great deal of research across countries and cultures examining cultural aspects of motivation. The research supports the premise that the psychological needs of autonomy, competence, and relatedness are both universal and innate (Lynch, 2023; Sheldon and Ryan, 2011), and yet it has been learned that how the psychological needs are satisfied varies within different cultural environments (Chen et al., 2015). In other words, need satisfaction and need frustration are best understood within a cultural framework. Sheldon and Ryan (2011) pointed out “What may vary across contexts, cultures, and eras is how the needs are satisfied, how much they are satisfied, and how much satisfaction or dissatisfaction affects different types of outcomes” (p. 42). Of note, there has been controversy within the literature regarding the universality of autonomy in non-Western cultures; often this stems from confusing autonomy with individualism. SDT, however views autonomy as volition or self-ownership (Lynch, 2023; Sheldon and Ryan, 2011). Understanding the impact of a person’s culture on the satisfaction of their psychological needs for autonomy, competence, and relatedness and how this impacts their motivation, has many implications within therapy; however, there has been little in the literature connecting motivational processes with cultural identity within the therapeutic domain. Importantly, inviting and hearing the person’s own voice is an essential aspect of support for autonomy, as understood within SDT (Lynch, 2023). Researchers have not done much to investigate how acknowledging oppression and discrimination along with client strengths relates to motivation and therapeutic outcomes.

3. The need for using mixed methods with a transformative paradigm including a CRT perspective

As mentioned, in order to address the mental health disparities and service needs of culturally diverse clients, a methodology that takes into account complex cultural influences on diverse clients’ motivational processes, centering their lived experiences including racism, oppression, and strengths, with the goal of changing the status quo, was needed. This section highlights the methodological rationale for choosing an exploratory sequential mixed methods approach, along with a transformative paradigm with a CRT perspective to answer the research questions of the study presented.

3.1. Why use mixed methods?

“Mixed methods research involves the collection, analysis, and, most importantly, the integration of quantitative and qualitative research” (Guetterman and Perez, 2023, p. 235). Arguably, quantitative approaches do not fully describe and explain the clients’ motivational experiences, as they do not strive to elicit clients’ perspectives in their own words. By using a mixed methods approach, greater understanding is developed by including the voices of the participants (Creswell and Plano Clark, 2011). There are a number of mixed methods designs (Guetterman and Perez, 2023) and the most logical design to implement for our study was one in which the qualitative research was collected and analyzed first, centering the voices of participants. These findings were then used to inform the second quantitative data collection, which included instrument development. This is referred to as an exploratory sequential design as outlined by Guetterman and Perez (2023).

An essential characteristic of mixed methods methodology is *integration* which can be done at multiple levels. Fetterman et al. (2013) described the importance of integration at the study design, methods, and interpretation and reporting levels. The design of this study was an exploratory sequential design, in that findings from the first qualitative phase informed the data collection of the next quantitative phase. Similarly, within the methods level, qualitative and quantitative data build on one another. In this study, the data collected from the first

phase was used to identify variables to use to adapt an existing SDT instrument which was part of the data collection of the second phase. At the interpretation and reporting levels, Fetterman et al., talked about the contiguous approach to integration which involves presenting the findings within a single report, with the qual and quant findings reported separately along with how they are integrated. Guetterman and Perez (2023) discussed the synergy of integration, which means that “... integration produces something new” (p. 248). Integration of both phases is explored further in this paper.

3.2. What a transformative framework adds

As mentioned, a transformative framework takes on an advocacy stance and centers marginalized communities within the research methodology (Sweetman et al., 2010).

Criteria to use within a transformative framework as outlined by Sweetman et al. (2010) in which they have incorporated steps from Mertens (2003, 2009) include: stating “a problem in a community of concern” (p. 442), writing research questions with an advocacy approach, including a discussion of diversity and oppression in the literature review, ensuring that data collection and outcomes benefit the community and facilitate social change, having participants involved (initiating or engaged) in the study, revealing power relationships, and explicitly stating the “use of a transformative framework” (p. 451).

Understanding the philosophical assumptions of research paradigms is crucial in determining how to best address the research questions of this study. Within the transformative paradigm, Mertens (2009, 2010, 2012; drawing from Guba and Lincoln (2005) identified the following philosophical assumptions, which were of importance in our research.

- **Axiology** - referring to the nature of ethics: respects cultural histories and norms, recognizing that discrimination and oppression are pervasive. Research is conducted to question the status quo in order to increase social justice.
- **Ontology** - the “nature of reality” (Mertens, 2012, p. 804): assumes there is one reality with multiple opinions and that knowledge is not neutral as it reflects power and social relationships. Whose opinion gets privileged and why in a particular context is questioned.
- **Epistemology** - the nature of “knowledge and relation between the knower and that which is to be known” (Mertens, 2012, p. 804): questions the kind of relationship the researcher has with the participants of the study, how to make the relationship better to determine what is real in a particular context, and how culturally competent the researcher is within the community being researched.
- **Methodology** - the “process of systematic inquiry” (Mertens, 2012, p. 804): is concerned with gathering data about the reality of a concept “... in an ethical manner and that has potential to lead to the enhancement of social justice” (Mertens, 2010, p. 472). Mertens (2007) stated that mixed methods are the preferred method in a transformative approach to achieve “... an understanding of reality as it is experienced in culturally complex communities” (p. 224).

3.3. The addition of CRT and cultural wealth from a CRT perspective

Adding an additional perspective of CRT within a transformative mixed methods study centers the research on racism and power imbalances in order to change the status quo (Creswell, 2007). Tenets of CRT include recognizing that racism is endemic in society; challenging white privilege and ideology; committing to “social justice and the elimination of racism” (Solorzano, 1997, p. 7); and recognizing experiential knowledge such as narratives and storytelling, highlighting culturally diverse people’s lives from their own perspective (Solorzano, 1997). Delgado (2000) spoke of *counterstorytelling*, as a way of challenging the status quo. Solorzano and Yosso (2002) explained counter-story as “... a tool for exposing, analyzing, and challenging the majoritarian stories of racial privilege” (p. 32). As mentioned, the distinct combination of

combining CRT within a transformative mixed methods approach is referred to in the literature as CRMM (DeCuir-Gunby & Schutz, 2019; DeCuir-Gunby et al., 2024). DeCuir-Gunby et al. (2024) discussed the benefits (and challenges) of using CRMM which include allowing researchers to study and understand complex experiences, reflecting the voices of marginalized groups, and highlighting race within the mixed methods research.

A unique contribution to this study is the addition of Yosso's (2005) conceptualization of cultural wealth from a CRT perspective. As Yosso

explains, traditionally, culturally diverse groups have been oppressed, under resourced, and viewed as having deficits. Yosso's (2005) view challenges this deficit thinking, describing community cultural wealth as "an array of knowledge, skills, abilities, and contacts possessed and utilized by Communities of Color to survive and resist macro and micro-forms of oppression" (p. 77). From an educational viewpoint, Yosso outlined "... forms of capital nurtured through cultural wealth ..." (p. 69). These are.

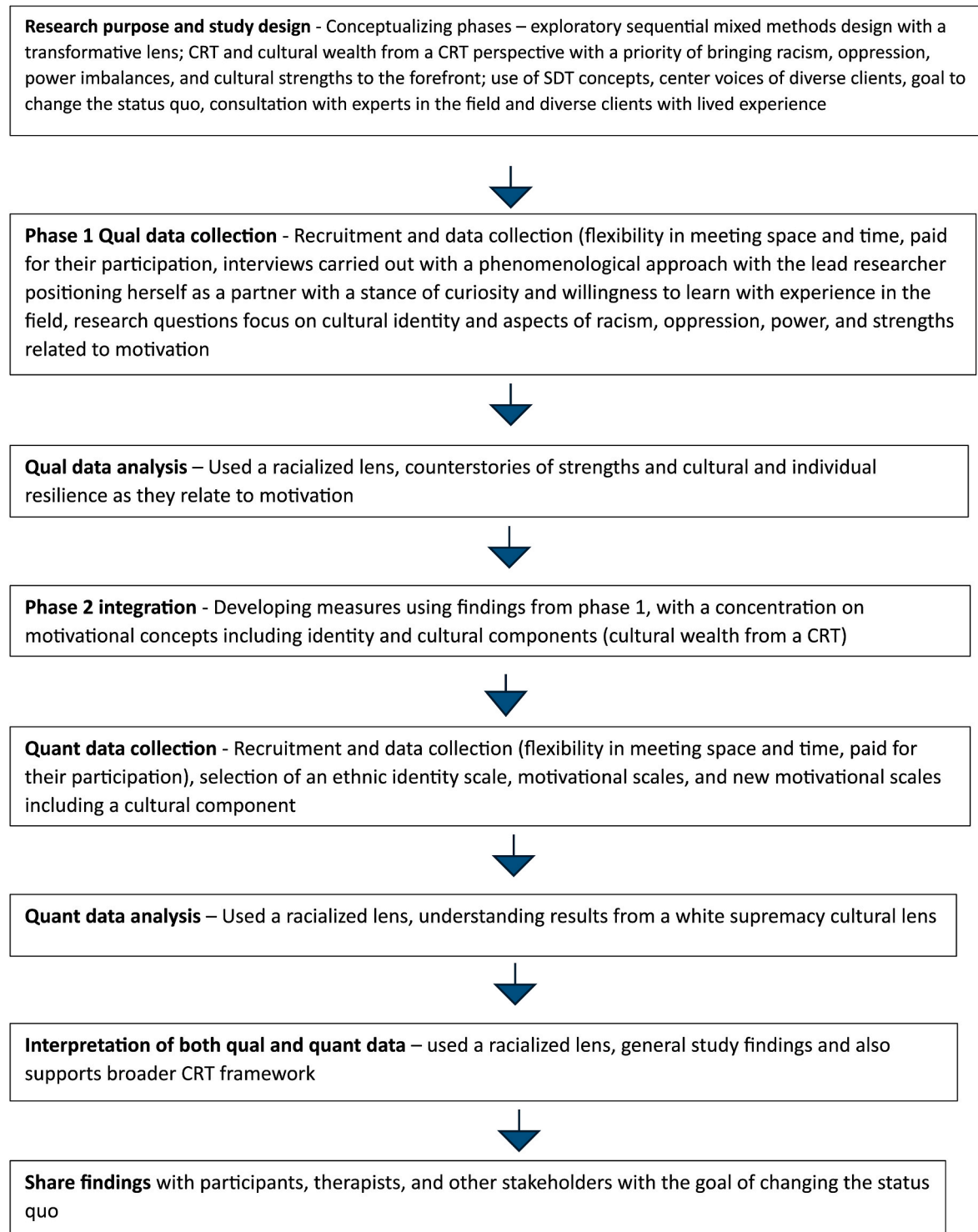


Fig. 1. Transformative and critical race theory used throughout this study.

1. *Aspirational capital*, which is “the ability to maintain hopes and dreams for the future, even in the face of real and perceived barriers” (p. 77).
2. *Linguistic capital*, which “includes the intellectual and social skills attained through communication experiences in more than one language and/or style” (p. 78). This includes the ability to communicate with storytelling, visual art, music or poetry; and communicating with different audiences.
3. *Familial capital* “engages a commitment to community well-being and expands the concept of family to include a broader understanding of kinship” (p. 79) and includes “... a sense of community history, memory and cultural intuition” (p. 79).
4. *Social capital* refers to “networks of people and community resources” (p. 79), including peers and other social contacts that “... provide support to navigate through society’s institutions” (p. 79). This also includes giving back the information and resources gained to their social contacts.
5. *Navigational capital* is “the skills of maneuvering through social institutions ... not created with Communities of Color in mind” (p. 80). This acknowledges resilience and “... individual agency within institutional constraints” (p. 80).
6. *Resistant capital* “refers to those knowledges and skills fostered through oppositional behavior that challenges inequality” (p. 80). This includes “cultural knowledge of the structures of racism and motivation to transform such oppressive structures” (p. 81).

This research expands the concepts of using cultural wealth based on a CRT perspective within the therapeutic realm, introducing a new way of conceptualizing and understanding cultural factors on diverse clients’ motivation and need satisfaction.

4. Summary of our exploratory sequential transformative mixed methods study

We provide a brief summary of the methods used, findings, and discussion for each phase of our transformative mixed methods study with a CRT lens, highlighting integration at each level. Aims of the study included: stimulating further discussion concerning the importance of using mixed methods along with a more inclusive and empowering research paradigm to better understand motivational experiences of culturally diverse clients; adding to the existing SDT literature; broadening multicultural counseling practices by introducing motivational concepts; and most importantly, highlighting and promoting better practices for culturally diverse clients. Fig. 1 shows how a transformative and CRT lens was used throughout this study.

4.1. Phase 1 qualitative

The first phase of this study qualitatively addressed the question: How do culturally diverse clients identify and view their cultural wealth and motivation for counseling? Cultural diversity in this study was viewed broadly and included race/ethnic background, sexual orientation, religion, SES, and gender (based on the Cultural Formulation Interview in the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2013).

Consultations with clients (not in this study) and therapists of color at the center from which participants were recruited and experts in the field of multicultural practices, CRT, and SDT aided in the formation of all aspects of this phase of the study, including in recruitment strategies, interview questions, and data analysis. Participants self-selected to participate and although eligibility was not confined to women, there were no men who expressed interest in the study. Eleven women participated and were between the ages of 18–55 and all had at least one child. Three identified as African American, two as mixed race (African American and Italian, African American and Puerto Rican), and one as an immigrant. Although 5 of the 11 participants identified themselves as

European Americans, these participants also self-identified as culturally diverse due to diversity in religious beliefs, experiences of poverty, and/or racial/ethnic diversity in their families.

Data utilized by the lead researcher included semi-structured individual interviews using a phenomenological approach (Bloomberg and Volpe, 2008), member checking which confirmed accuracy of the understanding of the participants’ responses (Lincoln and Guba, 1985), and memos (written reflections after each interview). The phenomenological approach fit the study’s aim in understanding culturally diverse clients’ motivation and cultural wealth as they actually experienced it while also acknowledging explicitly the power imbalances and oppression experienced. Questions asked in the interview included how participants decided to come to counseling, important aspects of their culture including strengths, experiences of discrimination, and how their culture influenced their decisions in coming to counseling. Issues of credibility, dependability, and transferability (Bloomberg and Volpe, 2008; Lincoln and Guba, 1985) were addressed in this study to ensure trustworthiness. For example, credibility was addressed by stating the researchers’ roles and perspectives, member checking after interviews were completed to confirm interpretation of participants’ responses, discussions with peers and experts in the field to enhance accuracy of interpretations, and continual reflection on the research process. Examples of how dependability and transferability were addressed included providing detailed procedures used in collecting and analyzing the data, describing the research site, and including thick descriptions of participants’ experiences as described by Lincoln and Guba (1985).

Interviews were transcribed (verbatim) and coded using an Interpretive Phenomenological Analysis approach (Smith et al., 2009). Using inductive coding, 49 themes emerged, patterns between these themes were identified and formed into 11 subthemes and then grouped together to create three main themes (Smith et al., 2009; see Walck, 2017a for more information). Consensus among the research team was established related to the groupings of the themes, which was then shared with an expert in the field of multicultural research, and then subsequently mapped against theoretical concepts drawn from SDT and CRT.

The three main themes and their subthemes including examples of participant responses are presented in Table 1 (see Walck, 2017a for more participant responses). Conceptual overlap with SDT constructs, and Yosso’s (2005) forms of cultural wealth from a CRT perspective are included in the table.

There are many important findings from this phase and we present several in this paper. Participants acknowledged factors of their cultural identity including race and/or cultural heritage, spirituality and/or religion, community, and motherhood, with some talking specifically about the intersectionality of these identities. Participants identified attributes within themselves and shared counterstories which included their ability to fight back from their past and current struggles to improve their lives and the lives of their children. The importance of acceptance, tolerance, and diversity as a cultural strength was expressed, which for some stemmed from the discrimination they had experienced. Some participants avidly shared their desire to overcome the discrimination, which appeared to drive them to fight harder to achieve their goals. Some had awareness of the impact of their cultural identity on their thoughts and behaviors.

Therapists’ behaviors that participants described as helpful, aiding in facilitating strong client-therapist bonds, included being non-judgmental, understanding, and offering encouragement which are endorsed by SDT researchers as being autonomy supportive (e.g., Ryan and Deci, 2008). Participants also described receiving autonomy support from others to attend counseling. It should be noted that participants who were mandated to attend counseling, which clearly was not a volitional choice, were able to develop more autonomous reasons to stay in counseling perhaps due to the relationship built with their therapists, as noted in previous research (Lynch, 2014; Ryan et al., 1995). Participants also placed importance on therapists understanding their cultural

Table 1
Findings from phase 1.

Theme 1: Traumas and Challenges

All participants brought up past traumas and/or current struggles as well as issues related to having children when asked about reasons for coming to counseling, the impact of their culture on their lives, and the discrimination they experienced.

Subthemes

- **Background of Struggling** Ten out of the 11 participants disclosed information about trauma they had experienced as children. All participants talked about adversities and stresses they were currently facing.

... being abused and um, just, so much drama basically. ... with every year it's something different ... but at that particular time I had, um, just had a baby and my son's dad went to prison, and now I'm alone, again. ... So, it's just you know overwhelming All the stuff that I've gone through and witnessed you know, I've had friends die, and just you know, things kids shouldn't have to deal with (Participant 8)

- **Encounters with Racism/Discrimination** Eight participants described individual, structural, and/or cultural racism and the negative influence on their lives. All six participants of color shared vivid stories of racism based on their race.

I feel like, with my culture, Black America, I mean African Americans ... we have a statistic to run from ... as a Black African American we get judged on our skin color ... Not because of what we can do, how our mind is, not a background check, it's your skin color first. (Participant 9)

- **Complexities of Being a Mother** All participants were mothers and all of them spoke about struggles and sacrifices associated with having children

Um, I don't know ever since I had kids I just, it's just been a priority. I don't know, um, I guess sometimes it gets rough ... But, because by me being a single parent I don't have friends at all, I don't, I don't, I'm not able to get out and mingle. Um, I'm not in any kind of relationship. And by me having as many kids as I do it kind of slim my chances of a good relationship too. (Participant 10)

Intersect with Theory SDT: In describing past traumas and current struggles, participants described environments that deprived and thwarted (Vansteenkiste and Ryan, 2013) their basic psychological needs of autonomy (i.e., involved in DV relationships), relatedness (e.g., loss of family and/or child/ren, abuse by caregivers), and competence (e.g., being young single mothers, missing educational opportunities). These needs were also thwarted by cultural racism (e.g., feeling judged by people because of the color of their skin). CRT: Racial issues were brought to the forefront through questions related to racism, discrimination, and oppression. Some participants shared an understanding of the impact of individual, structural and cultural racism.

Theme 2: Strengths and Positive Influences

All participants talked in detail about their strengths, positive actions taken, and positive relationships, which represented the largest proportion of what was shared within the interviews.

Subthemes

- **Fighting Back from Past Adversity and Wanting Better** Seven participants described fighting back from their past hardships to make changes in their lives, wanting something better for themselves and determined to provide different experiences for their children than they had growing up.

I want better than how I grew up. ... I just want better for my life and my baby, like I just want better. (Participant 3)

... my mom, she would go through some of the same problems when I was a child and I used to just, I never wanted to go through what she went through with us because we had like a rough childhood so, I always said that if I had kids I do not want them to be in a predicament like I was in. So, since I've had kids my kids have never been like, in the dark, never been without food, never been homeless, never been none of that cause I make it so they're not ever gonna do that. (Participant 10)

- **Impact of Being a Mother** All participants described the positive impact their children had on their lives including how having children positively influenced their decision-making. Seven expressed feeling competent in their abilities as mothers.

... Well it has helped me to change like who I am, I don't do like some of the stuff I use to do like party. Like, I think more about others than I did, I use to just think about myself. (Participant 1)

My girls, changing me, ...like, you have another responsibility, not just an apartment, not just a car, you have a real, born, person in your arm, like, you're responsible of their life ... I gotta make sure I'm alive so that my babies can have me while they're alive. ... Being a mom, I agree with that, because, it changes you. (Participant 9)

- **Belief in Self and Accomplishments** All participants shared a belief in themselves and in their abilities to make changes. All participants conveyed feelings of pride and confidence when describing their accomplishments.

Like I know what I want, you know, um, I'm very, I'm, I'm self-motivated. And I'm determined. And if there's something that is, I can see, like, maybe a goal in the future that I want, then I, um ... I, I kind of like try to take the steps to get there and I tell myself OK, what do you gotta be, you gotta be positive, you know, you gotta keep a positive attitude about it, if you do want to move forward or accomplish that goal ... (Participant 5)

- **Connections and Relationships** All participants talked about important connections and supportive relationships with significant others, including the bond with their children. Well my grandfather, um, he was always like the father I never had He treated me more like his own daughter and stuff. And he really took care of me my whole life. (Participant 3)

I started like, taking parenting classes and ... making sure I built a healthy relationship with my kids. ... I want to understand my children, I want to have that connection with them especially have the relationship, I want to have the communication with them ... (Participant 5)

- **Influence of Culture** Cultural identity included factors such as race and/or cultural heritage, faith/religion, being bilingual, and being mothers with some intersectionality. Cultural strengths included attributes such as being resilient and strong, generous, dependable, honest, having stability and strong minds and priorities. Six identified qualities of tolerance, diversity, and acceptance as strengths within their culture.

... like I am so diverse so that helps a lot in everyday life so I see a little bit of everything growing up so it helps me to keep an open mind about everything and not be so like ignorant like how some people are and things. (Participant 3)

I know a lot of people try to look down upon, um, black single parents but I'm a proud black single parent. I love all four of my kids and I do for all of them. ... I guess by me being a black single parent also it makes me be a stronger individual. Um, more independent, I'm like um, a wild animal in the woods, in the jungle. I'll survive, I'll survive through anything like I make things happen. When there is no way them possibly ever happening. I make them happen so I would use like my ethnicity as a major factor cause a lot of people can't just, go through what I go through with the same mind. Especially with as many kids as I have. (Participant 10)

Intersect with Theory

SDT: Autonomous motivation is expressed by participants in both actions and thoughts in overcoming the trauma they had endured, breaking away from cultural racism and their desire and achievement to provide more for their children. Satisfaction of relational needs in childhood were mentioned (e.g., by grandparents, teachers) and in current relationships (e.g., family members, boyfriends, God) and particularly with their children. Competence was described by all participants through their ability to take action to improve their situation (e.g., working hard to provide for their children, completing educational goals) and to succeed despite cultural racism.

Cultural Wealth from a CRT perspective: Cultural strengths included feeling hopeful in the face of traumatic experiences. Along with this, motherhood played a prominent role in their cultural identity and was linked to their optimism and determination to succeed and to provide better experiences for their children (aspirational capital). The benefits of raising their children to be bilingual was also shared (linguistic capital). Participants talked about being part of a community that offers support and resources, the networking they did within their communities, and wanting to give back to their communities (social capital). Pride in their cultural heritage and a strong desire to overcome cultural racism were expressed (navigational and resistant capital).

Theme 3: Counseling – Attitudes and Benefits

All participants described the importance of counseling in their lives.

Subthemes

- **The Decision to Seek Counseling** Nine participants shared that they chose to participate in their current counseling, two stated that they were court mandated to attend. Important others in their lives were given as sources that provided information and/or moral support to attend counseling. Previous positive experiences with counseling were shared by five participants. Eight participants expressed that they attended counseling because of their own choice and determination.

... my own decision to come to counseling, when you need help, and you know you need help, you have to ask for help. (Participant 7)

Well a lot of people in my culture don't go to counseling. They actually don't believe in going to somebody else to talk to. And that's why I believe that they go wrong because there's nothing wrong with talking to somebody about what's going on in your life when you don't have nobody else to talk to ... I mean for a weak-minded person it would hinder some of them, but it doesn't hinder me because I make my own decisions ... (Participant 10)

(continued on next page)

Table 1 (continued)

<p>• Hindrances in Attending Counseling Eight participants shared barriers experienced in attending counseling such as individuals in their lives who were against it and systemic issues (e.g., the cost of counseling, limited access to clinicians in the community and difficulty making appointments). Five participants shared how their culture did not support the idea of counseling.</p> <p><i>The father of my child is, um, extremely against it. But I don't, I don't know if it necessarily hinders me, it just makes my life difficult.... The only other, I personally, the hindrance is I worry, and I know, you know, that there's confidentiality and all that but I always worry about CPS. (Participant 4)</i></p> <p>• Benefits of Counseling</p> <p>All participants described how helpful counseling had been either in their past and/or currently. Five participants described how their perspective of traumatic events in their lives and their relationships had changed because of counseling.</p> <p><i>I'm basically court ordered to come, but I like it because me and (my counselor), we get along very well. She's a really cool counselor and I like her a lot. (Participant 2)</i></p> <p><i>I was sexually abused as a child. ... being able to sit down and talk with the counselor and explain all this ... and she was just, you know, the most understanding, it wasn't, she didn't judge me. You know, she just listened, and then she kind of like made sense of, you know, certain things. ... She helped me not to blame myself, because I used to blame myself, all the time (crying) ... and she just basically helped me understand that it wasn't my fault (crying) ... and I um, you know, blamed my mom, and then she kind of helped, how do you say, put things in a different perspective cause she asked me if my mom was ever abused, and I said I don't know. ... It really helped me ... look at things in a different perspective. ... I stopped blaming her. I stopped blaming myself, ...so, it kind of helped me, I don't know, take some of the pain away, ...just even seeking out counseling I think was the best thing I ever did ... (Participant 5)</i></p> <p><i>Um, I go to counseling because I really need someone to talk to. So ... so by me going to counseling I bring, me, my issues, my struggles, sometimes I just really need somebody to listen and let me clear my mind. And sometimes I fix my own problems; I just got to talk to save my life. (Participant 10)</i></p> <p>Seven participants who were asked (during member checking) all agreed that therapists' understanding of their culture was important to the work they could do within counseling.</p> <p><i>I think it's pretty important, I mean if I don't feel as though the therapist is identifying with me ... or my background or where I'm coming from or can't relate to me in some ways it's not as easy to open up. ... it's pretty important in order for me to be able to be open up and communicate honestly and effectively. (Participant 4)</i></p> <p>Intersect with Theory</p> <p>SDT: Participants displayed autonomous motivation by attending counseling despite cultural norms to the contrary and other barriers. Competence was expressed by participants in their ability to use the skills learned in counseling. Relationally, participants described having 'strong bonds' with their counselors, and noted autonomy supportive interactions within counseling (e.g., being non-judgmental, confidentiality, building trust).</p> <p>Cultural Wealth from a CRT perspective: Participants' described agency they showed for seeking out counseling. The relationship with their counselor was seen as a community resource, and through this help, they were able to navigate the systems in which they were involved (social and navigational capital). Participants also described how their counselors were able to inspire them to have hope (aspirational capital).</p>

backgrounds. This corresponds with existing research (Sue et al., 2022) which found therapists are perceived as more culturally competent by diverse clients when a cultural lens is applied to their situations. Participants who had previously experienced the benefits of counseling and a good therapeutic relationship were more prone to seek out and continue with counseling which is particularly salient for racially/ethnically diverse populations who are less likely to seek mental health care (Cardemil et al., 2015).

An important finding in this study is the prominent role motherhood played in the participants' cultural identity as well as in the satisfaction of their basic psychological needs. Although having children brought about some sacrifices, overwhelmingly motherhood was a positive aspect of their lives. Appearing to be a pivotal point in many of the participants' lives, motherhood brought about a change of perspective, influencing their decision-making, providing positive transitions, and was associated with their optimism and determination to succeed. Literature on the transformational experiences of becoming a mother endorses these findings (Delle Fave et al., 2013; Stern and Bruschiweiler-Stern, 1998).

By taking a CRT approach to viewing cultural wealth, and expanding the lens to include intersecting factors, findings from this study reveal aspects of cultural wealth as framed by Yosso (2005). As an example, Yosso's aspirational capital (the ability to "maintain hopes and dreams for the future, even in the face of real and perceived barriers" (p.77)) was reflected by all participants in their belief in a better future despite hardships and barriers. Familiar capital is illustrated by the way participants talked about the importance of their children in their lives and connections with others, for some this included other family members and their community. See Walck (2017a) for more examples on other aspects of Yosso's cultural wealth that relate to this study. Yosso (2005) asserted that these capitals, or wealth, are often hidden or unrecognized and unless uncovered, go unseen. This study supports Yosso's assertions in that some participants had not recognized these strengths within themselves.

Findings from this study suggest there are benefits to strengthening awareness of one's cultural identity and wealth as supported in the literature (e.g., Neblett et al., 2012; Umana-Taylor, 2018). The questions asked in this interview acknowledged discrimination and brought to the forefront participants' basic psychological needs (competence, autonomy, and relatedness) and a connection between their strengths and their culture or cultural identity. Some participants reported that this

study evoked new thoughts about the influence of their culture on their motivations and strengths, indicating the importance of bringing culture and strengths to the forefront when talking about hardships.

It was a good questionnaire ... It really got my mind going ... thinking about really um, what I go through and about my race and cultural background, how that affects the decision that I made or I'm doing. I never looked at it like that. (Participant 10)

4.2. Integrating qualitative findings to quantitative phase 2

Integrating findings from phase one, questions were developed to add to existing SDT questionnaires that were used in phase 2. This type of integration is referred to as *building* as discussed by Guetterman and Perez (2023) and Fetters et al. (2013). Table 2 shows an example of how the findings informed question development. In this particular example, cultural aspects of our findings were integrated into items on the original SDT instrument, the Basic Psychological Need Satisfaction and Frustration Scale (BPNSFS; Chen et al., 2015). We referred to this new scale as Cultural BPNSF, which is made up of eleven questions (three measuring relatedness, four measuring autonomy, and four measuring competence). This was accomplished based on how the findings in phase 1 intersected with the theory and the original questionnaire. For example, in Table 2, the quote under Relatedness described feeling connected through a cultural lens. A parenting questionnaire was also constructed in the same manner (See Appendix A for the Cultural BPNSF and Parenting BPNSF.).

4.3. Phase two: quantitative

The goal of the second quantitative phase was to continue exploring the dynamics between cultural identity and wealth and motivation with a larger sample size including males and recruited from an additional site. This phase included administering existing SDT questionnaires (BPNSFS, client motivation for therapy, perceived competence for counseling, autonomy support of the counselor and others), an ethnic identity questionnaire, and the newly integrated questionnaires (cultural BPNSF and parenting BPNSF). Some of the research questions in this phase were: What is the relationship among culturally diverse clients' BPNSF, their perceived competence and motivation for counseling, their ethnic identity, and cultural BPNSF? (This beginning analysis did

Table 2
Joint display integrating culture and identity into the BPNSF.

Original Instrument BPNSF	Qualitative Findings Subtheme - Influence of Culture	New Questions Based on Qual Findings Cultural BPNSF
Question - Autonomy I feel like I am free to decide for myself how to act	Quote "One thing I know bout Haitians are they're very resilient, um, very resilient, very strong people, no matter what situations they're in, you know somehow some way they always make it. You know, um ... they're very proud people (laughs) ... So, you know, all that is very important, um, because it ... that kind of you know, made me who I am ..." (Participant 5)	Question - Autonomy Understanding my cultural background helps me to feel free to decide for myself how to act
Question - Relatedness I feel close and connected with other people who are important to me	Quote "Yes because um ... I just been through a little bit of everything so I know like how it feels to be poor or like ... just, I know a little bit of everything so it just helps me to connect with different people. Like I'm educated so I could just be around a little bit of everybody and then I also know what other less fortunate people are going through." (Participant 3)	Question - Relatedness Understanding my cultural background helps me to feel more connected to others
Question - Competent I feel confident that I can do things well	Quote "Um, I guess by me being a black single parent also it makes me be a stronger individual. Um, more independent ... I'll survive through anything like I make things happen. When there is no way them possibly even happening, I make them happen so ... I would use like my ethnicity as a major factor cause a lot of people can't just, go through what I go through with the same mind." (Participant 10)	Question - Competent Understanding my cultural background helps me to be more competent in what I do

not include parenting BPNE, or autonomy support of the counselor and others.)

Questionnaires were completed by 78 participants. Females made up 80 % of the sample (n = 62). Approximately 18 % of participants identified as Hispanic/Latinx (n = 14). Participants also reported their race: 45 % of participants identified as White (n = 35), 33 % identified as Black (n = 26), 14 % identified as multiracial (n = 11), 1 % identified as Asian/Pacific Islander (n = 1), 1 % identified as American Indian/Alaskan Native (n = 1) and 5 % identified as “other” (n = 4).

Descriptive statistics, correlations, and regressions were conducted with data, yielding results that are consistent with findings from the first phase of this research and with the limited theoretical literature that exists surrounding counseling motivation with culturally diverse clients (Author, xxxx). For example, Pearson’s r correlations revealed autonomous motivation for counseling was positively correlated with feelings of cultural autonomy (r = .360, p = .001), cultural competence, (r = .341, p = .002), cultural relatedness (r = .300, p = .008), and general cultural basic psychological needs satisfaction (r = .390, p = .001). This

demonstrates that higher feelings of satisfaction of cultural BPNs were related to higher autonomous motivation for counseling, which is consistent with SDT theory (author, xxxx). General feelings of autonomy, relatedness, and competence were not correlated with autonomous motivation for counseling.

Additionally, ethnic identity was positively correlated with feelings of cultural autonomy (r = .292, p = .009), cultural competence, (r = .387, p < .001), cultural relatedness (r = .497, p < .001), and general cultural BPN satisfaction (r = .432, p < .001).

The correlations also showed that the single index score of BPNSFS satisfaction was positively correlated with ethnic identity, r = .334, p = .003. Furthermore, general feelings of competence were positively associated with ethnic identity, r = .323, p = .004. The correlations between autonomy and relatedness were not correlated with ethnic identity (see Correlation Tables 3 and 4).

Linear regressions showed that Cultural BPNSF had a statistically significant effect on autonomous motivation for therapy, t(3.59) = 12.85, p = .001. Approximately 13.3 % of the variance in autonomous motivation for counseling was explained by the participants’ level of cultural BPN satisfaction. Additionally, cultural BPN satisfaction had a statistically significant effect on feelings of ethnic identity, t(4.18) = 17.49, p < .001. Approximately 17.6 % of the variance in feelings of ethnic identity was explained by the participants’ level of cultural BPN satisfaction. Results with emerging concepts from the first phase and existing motivational concepts continue to be explored.

4.4. Integration of findings

Results from the quantitative phase confirmed some key findings from the first qualitative phase. In the first phase, findings indicated that there were benefits to strengthening awareness of one’s cultural identity and wealth which aided in the satisfaction of the basic psychological needs of relatedness, competence, and autonomy. In the second phase, a similar trend was seen in that ethnic identity was positively associated with the satisfaction of cultural psychological needs. Findings from the first phase also indicated that increased relatedness to the counselor increased autonomous motivation for counseling. In the second phase, a slightly expanded, nuanced version of this was seen in that higher satisfaction of cultural psychological needs related to higher autonomous motivation for therapy. Walck (2017a) suggested that when diverse clients have their cultural strengths acknowledged by a therapist, they may be more autonomously motivated for therapy. Ryan and Deci (2008) encouraged therapists to enhance autonomous motivation for therapy by acknowledging clients’ perspectives and frames of reference, one example of which could be understood as connecting to the clients’ culture, which is also consistent with suggestions made by Lynch (2023). Similarly, Walck (2017a, 2017b) suggested that counselors who understand diverse clients’ cultural experiences are viewed by them as more autonomy supportive, which in turn enhances clients’ autonomous motivation for therapy.

The impact of being a parent and the positive association with motivation was a key finding in the first phase. It is yet to be seen if this relationship exists with the results of the second phase. Further analysis is also needed to be able to confirm and/or contrast findings from the first phase with findings from the other questionnaires used within the second phase.

5. Implications for counselors/psychologists

This study has practical significance for counselors in their work with diverse clients and many of these findings are supported in the literature. Awareness of the importance of clients’ understanding of their own cultural wealth can guide therapeutic work. Therapists can convey knowledge of past and present racism/discrimination and injustices, expanding both the therapists’ and clients’ understanding of the clients’ reality as discussed in Sue et al. (2022). This can promote the discussion

Table 3

Correlations with Autonomous Counseling Motivation (CMOTS), Ethnic Identity (from the Multigroup Ethnic Identity Measure, MEIM), and Cultural Basic Psychological Need Satisfaction (cultural BPN, composite score and individual scores).

Correlations		Autonomous Motivation CMOTS	Ethnic Identity MEIM	Cultural Autonomy	Cultural Competence	Cultural Relatedness	Composite score Cultural BPN
Autonomous Motivation CMOTS	Pearson	1	.154	.360 ^a	.341 ^a	.300**	.380**
	Correlation						
	Sig. (2-tailed)		.178	.001	.002	.008	.001
Ethnic Identity MEIM	N	78	78	78	78	78	78
	Pearson		1	.292**	.387 ^a	.497 ^a	.432 ^a
	Correlation						
Cultural Autonomy	Sig. (2-tailed)			.009	.000	.000	.000
	N		78	78	78	78	78
	Pearson			1	.659 ^a	.650**	.890 ^a
Cultural Competence	Correlation						
	Sig. (2-tailed)				.000	.000	.000
	N			78	78	78	78
Cultural Relatedness	Pearson				1	.712 ^a	.889 ^a
	Correlation						
	Sig. (2-tailed)					.000	.000
Cultural BPN Total	N				78	78	78
	Pearson					1	.872 ^a
	Correlation						.000
	Sig. (2-tailed)						.000
	N					78	78
							1
							78

^a Correlation is significant at the .01 level (2-tailed).

Table 4

Correlations with Ethnic Identity (from the Multigroup Ethnic Identity Measure, MEIM) and Basic Psychological Need Satisfaction and Frustration Scale (BPNSFS, composite and individual scores).

Correlations		Ethnic Identity MEIM	Composite Score BPNSFS	Autonomy BPNSFS	Relatedness BPNSFS	Competence BPNSFS
Ethnic Identity MEIM	Pearson	1	.292 ^a	.185	.217	.323 ^a
	Correlation					
	Sig. (2-tailed)		.010	.105	.056	.004
Total Composite Score (Satisfaction vs. Frustration) BPNSFS	N	78	78	78	78	78
	Pearson		1	.834 ^a	.796 ^a	.874 ^a
	Correlation					
Autonomy BPNSFS	Sig. (2-tailed)			.000	.000	.000
	N		78	78	78	78
	Pearson			1	.462 ^a	.645 ^a
Relatedness BPNSFS	Correlation					
	Sig. (2-tailed)				.000	.000
	N			78	78	78
Competence BPNSFS	Pearson				1	.529 ^a
	Correlation					
	Sig. (2-tailed)					.000
	N				78	78
						1
						78

^a Correlation is significant at the .01 level (2-tailed).

of clients' cultural identity and cultural strengths and counterstory telling, highlighting how they have dealt with oppression and discrimination in their lives and supporting their perseverance and resilience as highlighted by Clauss-Ehlers (2008) and Walck (2017b). Therapeutic practices that make salient the clients' cultural identity and strengths can lead to interactions that are more respectful, authentic, and enhance growth (Asnaani and Hofmann, 2012; Hampton-Anderson et al., 2021; Sue et al., 2022). This includes understanding diverse clients' experiences with previous mental health care systems (Alang, 2019; Cardemil et al., 2015; Price-Feeney et al., 2020). Highlighting racial/ethnic identity and positive cultural orientations are recommended as a way of

mitigating discrimination (Neblett et al., 2012; Umana-Taylor and Updegraff, 2007). To do this effectively, therapists need to spend time understanding their own biases and have a clear knowledge of dominant cultural privilege (related to race, gender/sex status, religion, etc.) including historical and current oppression of minoritized groups and even power dynamics within the therapeutic environment (Sue et al., 2022).

Understanding culturally diverse clients' experiences of need satisfaction and frustration, and then subsequently providing opportunities to experience need satisfaction within therapy (and practicing skills to generalize that learning outside therapy) can contribute to autonomous

motivation for therapy and help to provide more autonomously motivated changes, which as the literature suggests, has numerous benefits for the client's ongoing growth and well-being (Ryan and Deci, 2008; Ryan et al., 2011; Zuroff et al., 2007).

6. Contributions to the field of mixed methods research

How does one study the complexity of cultural influences on diverse clients' motivational processes, centering their lived experiences including racism, oppression, and strengths, all while challenging power imbalances with the goal of changing the status quo? The study highlighted in this paper contributes to the advancement of using a transformative mixed methods methodology with the addition of a CRT lens to research this complex topic. This exploratory sequential mixed methods study, started with a qualitative phase to center voices of marginalized communities and with the use of those findings, used the quantitative phase to explore ethnic and cultural identity within existing motivational questionnaires. This study was strengthened by using SDT's support for autonomy premise which includes listening and giving voice to marginalized voices, and by using a transformative lens and CRT framework acknowledging racism and power imbalances with the goal of challenging the status quo. It is the aim of this paper to add to the field by encouraging further discussion regarding the importance of using mixed methods along with a more inclusive and empowering research paradigm to better understand motivational experiences of culturally diverse clients. This study enhances existing SDT literature by exploring culture with clients in the US and broadens multicultural counseling practices by introducing motivational concepts. Findings from this study give therapists important techniques to provide and enhance culturally responsive treatment for clients who are often oppressed and marginalized by health care systems. Through this mixed methods research, both the qualitative and quantitative phases show how clients' understanding of their own hardships and connecting this to their cultural identity and wealth can impact their motivation in positive ways. Ultimately, these findings are crucial for therapists to understand to work toward a more equitable, anti-oppressive therapeutic space for clients.

It is our intention that by sharing this mixed methods study, more researchers will understand that there are different ways of 'knowing', outlined earlier as philosophical assumptions, within different paradigms that change not only how research is constructed but what is conceptualized and how it is carried out. Researchers who are only exposed to and conduct research from a post-positive paradigm are missing important opportunities and information and may be doing a disservice to the populations they are studying and/or serving. Centering the voices of diverse clients through using a transformative sequential mixed methods, the counterstories within the qualitative portion of this study, combined with the quantitative results offer a different way of understanding culturally diverse clients' motivation by hearing how their struggles transformed into strengths and contributed to developing a more autonomous motivation for pursuing and continuing in therapy.

7. Methodological limitations

Many of the criteria recommended to utilize within a transformative framework (Sweetman et al., 2010) were addressed within this research; however, one criterion was not part of this study. Although, experts in the fields and some community partners were consulted, the community were not collaborators regarding the problem conceptualization or within the research itself. A more comprehensive transformative study would involve community members throughout the entire study. Further work is also needed to confirm the factor structure of the new questionnaire's items in other samples.

Distribution of information to help change systems is the ultimate goal of a transformative study. Sharing results with research participants

is a step within this study, and participants were asked if they were interested in getting a summary of results (many said yes and supplied email or home addresses). However, it has proven difficult to get data analyzed, interpreted, and out to the community (and service providers) in a timely manner. Another challenge, as mentioned by Creamer and Reeping (2020), is a lack of journals within the psychology/counseling field that are willing to publish mixed method approaches. We have experienced that even if a journal indicates they are open to diverse methodologies, reviewers do not always have expertise in these methodologies or diverse paradigms. These journals also often have small maximum word/page counts that are not conducive to more complex studies with multiple theoretical approaches that require more extensive reporting (e.g., the current study presented).

8. Conclusions

This research contributes to the advancement of using a transformative lens within a mixed methods methodology by offering an example of how this methodology can be used to research and understand complex phenomenon. The research presented, started by centering diverse participants' own voices (qualitative phase 1) and integrating this for instrument development to study the phenomenon on a larger scale (quantitative phase 2), with the goal of promoting equity for marginalized groups. The study outlined is the first of its kind to empirically assess culturally diverse clients' motivation for counseling, thoughts about their ethnic identity, and their basic psychological need satisfaction from a cultural perspective integrating a qualitative and quantitative perspective. This research addresses a gap within the literature and aims to increase utilization rates of mental health services and facilitate better outcomes for culturally diverse clients.

CRedit authorship contribution statement

Donna Walck: Writing – review & editing, Writing – original draft, Project administration, Methodology, Investigation, Formal analysis, Data curation, Conceptualization. **Jennifer Parr:** Writing – original draft, Methodology, Formal analysis, Conceptualization. **Kristin Rabb:** Writing – review & editing, Writing – original draft, Methodology, Formal analysis, Conceptualization. **Martin F. Lynch:** Writing – review & editing, Writing – original draft, Methodology, Conceptualization. **Dena P. Swanson:** Writing – original draft, Methodology, Formal analysis, Conceptualization. **Sheree L. Toth:** Writing – review & editing, Writing – original draft, Methodology.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Appendix A

Cultural Basic Psychological Need Satisfaction and Frustration Scale and Parenting Basic Psychological Need Satisfaction and Frustration Scale.

Cultural Basic Psychological Need Satisfaction and Frustration Scale

Understanding my cultural background helps me to be more competent in what I do.

Knowing my cultural background helps me in my decision-making. My cultural background hinders who I am.

Overcoming discrimination/oppression has helped me to express who I really am.

Understanding my cultural background helps me to feel more

connected to others.

Having experienced hardship in my life makes me more determined to succeed.

My cultural background hinders my relationships.

I have overcome discrimination/oppression to achieve what I have achieved.

Understanding my cultural background helps me to feel free to decide for myself how to act.

My cultural background hinders what I do.

Overcoming discrimination/oppression has helped me to connect more with others.

I have hope that my life will improve.???

Parenting Basic Psychological Need Satisfaction and Frustration Scale

Having a child has helped me to decide what I really want in life.

Having a child has helped me to feel close and connected to people with whom I care about.

I have felt forced by having a child to do things I did not really choose to do.

Having a child has helped me to feel capable to achieve my goals.

I feel close and connected to my child/ren.

Having a child has helped me to feel like I am free to decide for myself how to act.

Having a child has contributed to me feeling insecure about my abilities to succeed.

Having a child has contributed to me feeling excluded or distant from my loved ones.

Having a child has contributed to me feeling pressured to do too many things in general.

I feel distant and disconnected to my child/ren.

Data availability

The data that has been used is confidential.

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