



About the presenter:

J Rocky Romero, PhD, LMSW

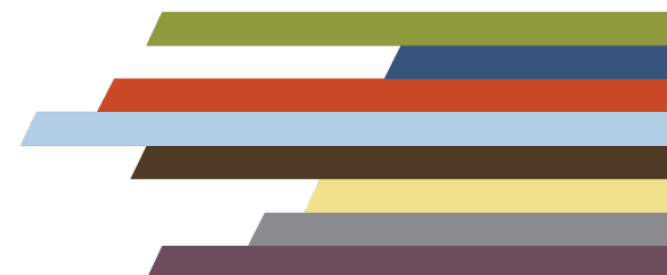
Dr. J Rocky Romero is the CEO and owner of JR Romero & Associates, a training and consultant company he started almost 20 years ago. In addition, Dr. Romero is a former Assistant Professor for New Mexico Highlands University School of Social Work in Albuquerque, NM. He served as the co-chair for Governor Richardson's appointed NM Higher Education Department on Cultural Competency Task-Force. Dr. Romero has also served as an Executive Council member for the NM-Consortium for Behavioral Health Training and Research. In addition, Dr. Romero completed his doctoral studies at the University of New Mexico in Language, Literacy and Sociocultural Studies. Dr. Romero has been a trainer and consultant for the NHL-MHTTC for the last 10 years. He is focused on culturally appropriate treatment while focusing on reducing health disparities for people of color.



About the presenter:

Isa I. Vélez Echevarría, PsyD

Dr. Isa Vélez is a clinical psychologist and a Certified Child and Adolescent Trauma Professional by the International Association of Trauma Professionals since 2018. She obtained a certification as Interpersonal Psychotherapy Clinician, was trained in Trauma-Focused Cognitive Behavioral Therapy, Family Therapy, and Neurofeedback. She completed a post-doctoral fellowship at Community Services Institute in Boston, MA., where she provided home-based and school-based psychotherapy for communities of color. She is currently working as a clinical psychologist at A&R Behavioral Associates and as a Training and Content Specialist for the National Hispanic and Latino MHTTC, at the Universidad Central del Caribe, in Bayamon, PR.





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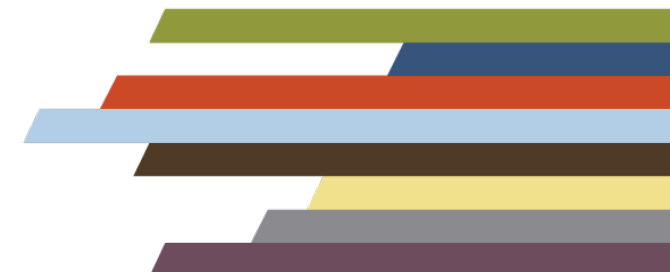
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Family Therapy: A Culturally Sensitive Modality When Working With Immigrant Latino Families

J Rocky Romero, PhD, LMSW & Isa I. Vélez Echevarría, PsyD

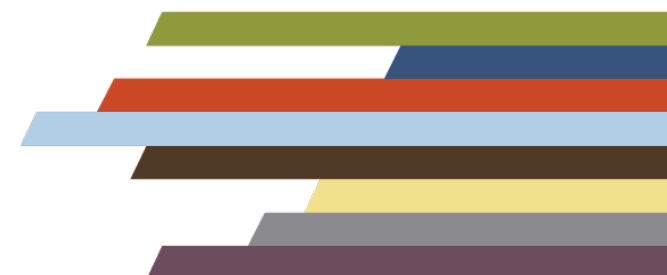
National Hispanic and Latino MHTTC

July 22, 2020



Objectives

- **Identify cultural values to consider in the provision of family therapy with Latinos.**
- **Discuss family centered approaches as culturally responsive approaches for Latino children, adolescents and their families.**
- **Address competencies of culturally responsive family therapists.**
- **Discuss a case that illustrates the application of structural family therapy with a young Mexican girl and their family.**





National Hispanic and Latino

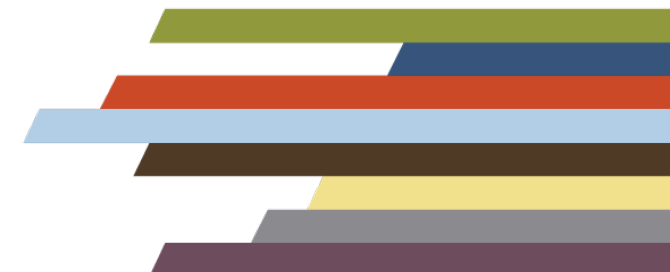
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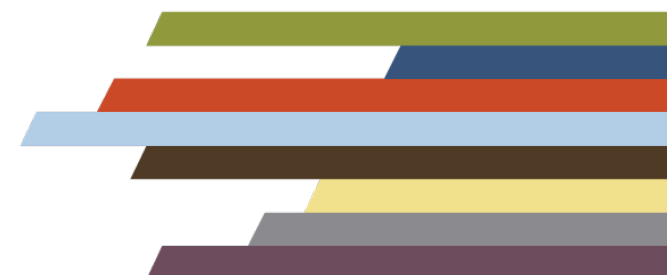
Family Centered Interventions for Latinos

- J Rocky Romero, PhD, LMSW
- National Hispanic and Latino MHTTC
- Trainer and Content Specialist



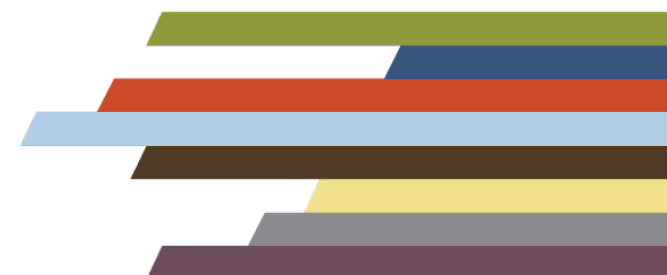
Familismo

- ***Familismo*** or familism is a cultural value frequently seen in Hispanic cultures, in which a higher emphasis is placed on the family unit in terms of respect, support, obligation, and reference.
- Familism has been implicated as a protective factor against mental health problems and may foster the growth and development of children.
- Lack of familism has been identified as a risk factor.



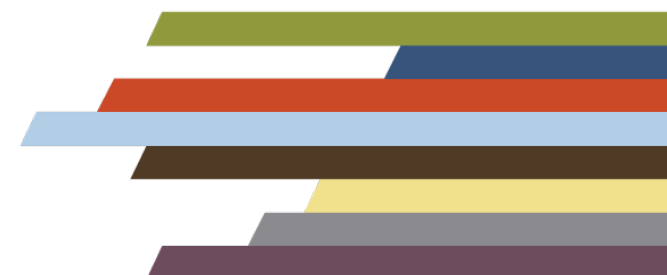
Measures of *Familismo*

- Structural
- Behavioral
- Attitudinal



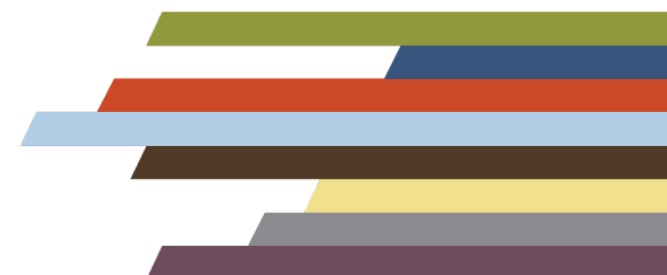
Cultural values

- *Respeto*
- *Personalismo*
- Gender Roles
- Spirituality



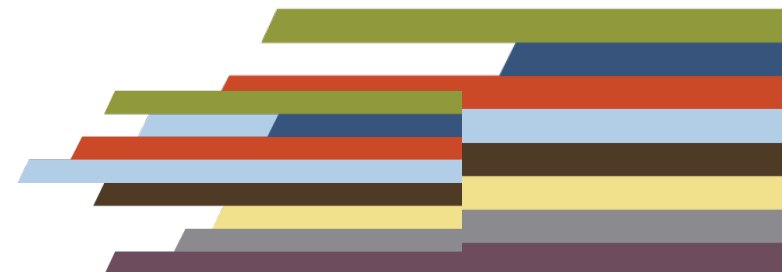
Cultural considerations

- **Acculturation gaps**
- **Acculturative stress**
- **Language among family members**
- **Immigration journey**
- **Parenting styles according to values**



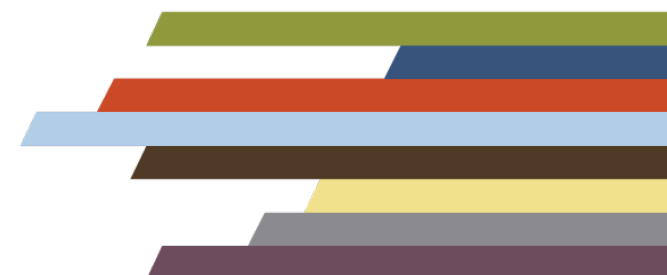
Family Centered Interventions

- Because of the important role of the family system in risk and protective factors, the treatment of serious problems with children and adolescents often involves work with the entire family.
- Not surprisingly, many of the empirically supported treatments for children and adolescents are family-based programs.



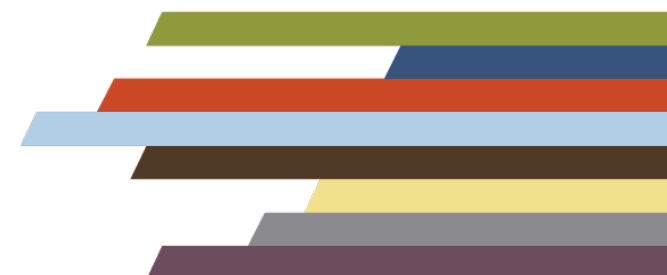
Family Centered Interventions

- Family-oriented therapy maximizes the effects of intervention for adult and adolescent Latinos, since family therapy builds bridges between family members who were estranged or parents, children and adolescents who were in conflict. The family therapist's role is to help clarify expectations, justify conflicts, translate family members' cultural behavior, and encourage compromise and negotiation, particularly when generational and acculturational differences exist.



Culturally Sensitive Family Therapies for Latinos

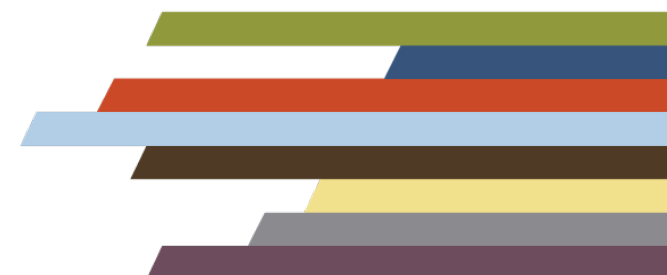
- **Multidimensional Family Therapy (MDFT)**
 - **Brief Strategic Family Therapy (BSFT)**
- **Culturally Informed and Flexible Family Treatment (CIFFTA)**



Selecting a treatment model

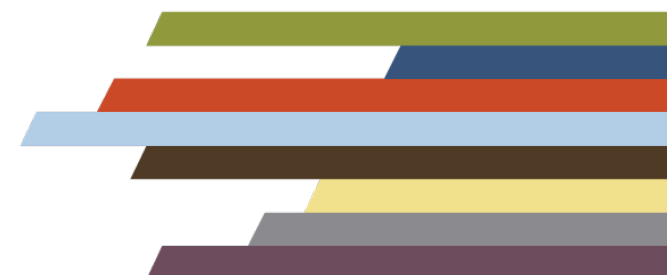
Consider:

- The similarity between the population you work with and the original sample in the research
- The completeness and detail of the treatment manual
- The level of training, supervision, and the level of counselor/therapist experience required
- The processes needed to ensure a high level of fidelity and adherence to the model.



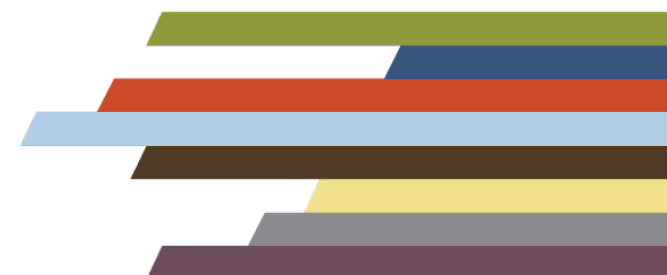
Family Therapist competencies

- **An important set of components of Couples and Family Therapy have been delineated:**
 - **Developing a systemic formulation**
 - **Forging a systemic therapeutic alliance**
 - **Understanding family of origin issues**
 - **Reframing and managing negative interactions**
 - **Building cohesion/intimacy/communication**
 - **Restructuring/parenting**



Family Therapist competencies

- **The culturally competent family therapist must be able to identify and understand:**
 - **Immigration and acculturation-related factors that can increase risk**
 - **Strengths and protective factors that may be active or dormant in the Hispanic and Latino family and can be used in the recovery process.**
 - **Family expectations/values and their fit with the process of therapy.**

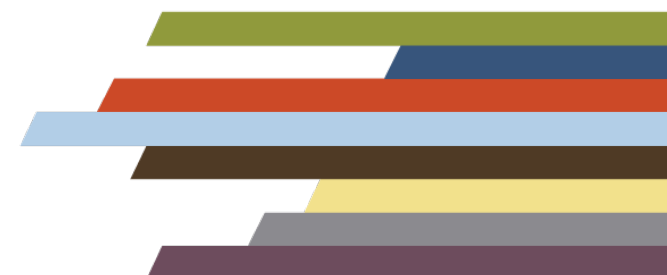


Culturally Responsive Therapists

Attend to the defensiveness

Explore the pain and lost time associated with the separation

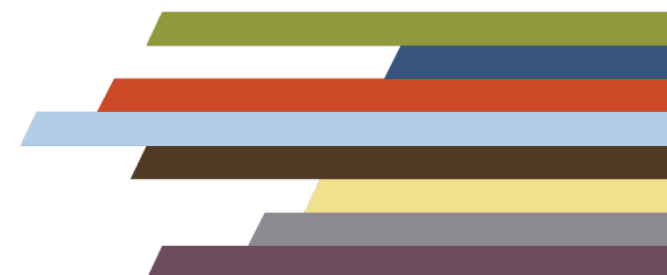
Share questions and stories to help them move forward and re-connect



Culturally responsive therapists provide leadership, support and guidance

Consider possible impacts of culture-related variables:

- Sometimes Hispanic and Latino families that are acculturating and balancing “new world” and “old world” parenting blueprints may struggle in their parenting.
- Acculturation could be associated with less effective types of parenting practices that directly impacted behavior problems in youth.

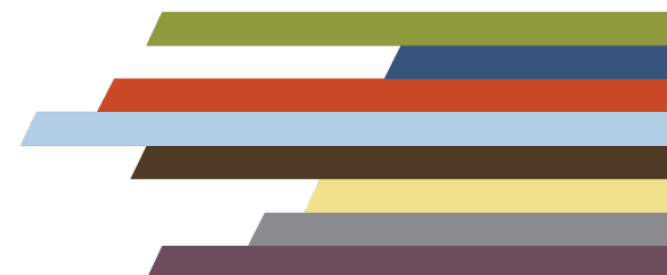


Consider

Parent-child conflict and the possible impact of acculturation-related issues



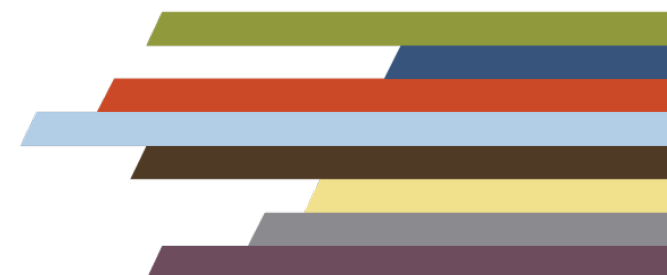
- There may be unique circumstances in Hispanic and Latino families that may lead to a special type of conflict or a diminished ability to resolve normal conflicts.
- As immigrant youngsters acculturate at a faster rate than their parents, they tend to move even more quickly to take on new values, beliefs and behaviors of the host culture that clash with those help by parents.



Consider

Attachment and Immigration-related processes

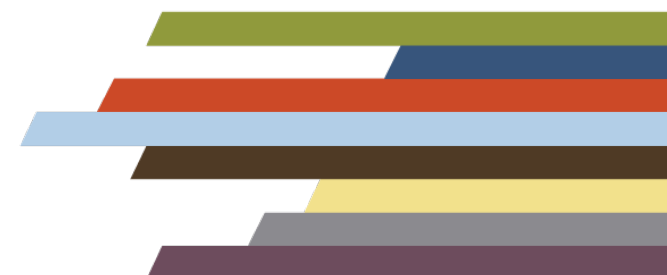
- In some Hispanic and Latino family's attachment difficulties can result from “immigration-related separations” in the family.
- When parents immigrate ahead of their children (or send their children ahead of them) there may be disruptions in the level of attachment, bonding, and trust between child and parent.



A note on familismo

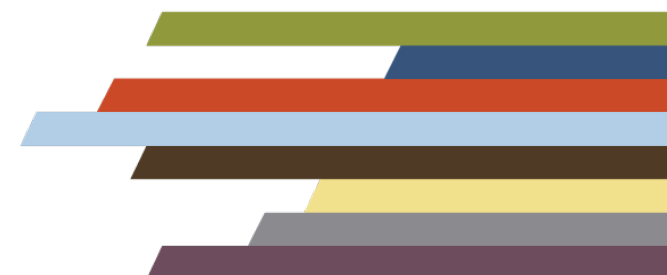
Appreciating the power and positive influence of extended families

- When working with Latino children and adolescents it is important to consider extended families.
- *Abuelas* and *abuelos* (grandmothers and grandfathers), aunts, uncles, cousins can all be highly influential in the lives of the target adolescent. It is also important to consider elective families, that is, self-identified families formed by choice and not by blood, marriage, or law.
- These extended or elected family members often play a crucial role in the treatment process.



When Hispanic and Latino families find the therapist's views acceptable and relevant, they are likely to achieve better:

- Engagement
- Retention
- Therapeutic alliance
- Treatment outcomes



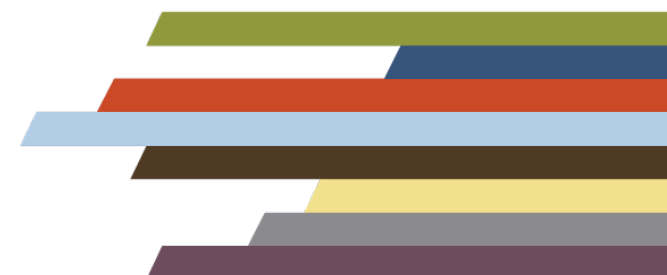
The family therapist must help families create a new and effective blueprint for parenting that integrates new and old ideas and help them figure out how to effectively interact with schools and other community institutions for the well being of the child.



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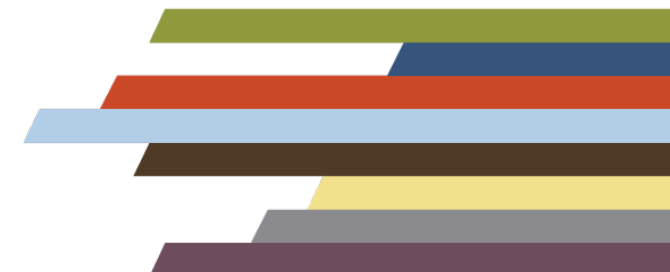
Clinical Case Presentation: Marcela

Isa I. Vélez Echevarría, PsyD

National Hispanic and Latino MHTTC

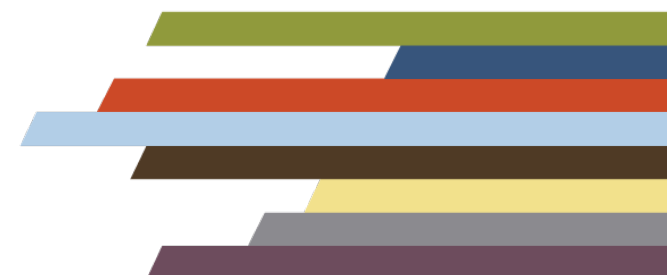
Trainer and Content Specialist

July 22, 2020



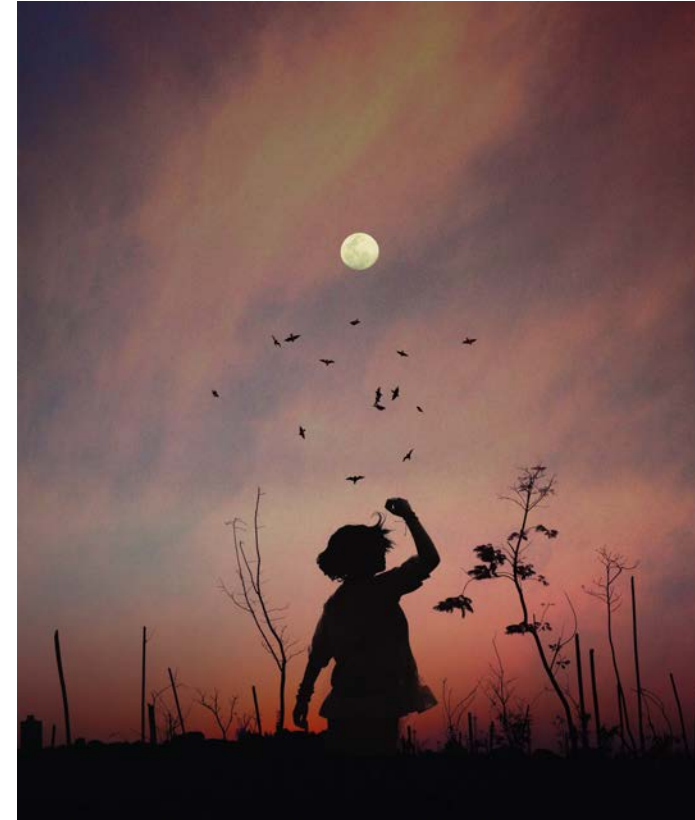
Clinical Case Presentation: Socio-Demographics

- **Age: 6-year-old**
- **Gender: Female**
- **State: California**
- **Ethnicity: Hispanic (Mexican-American)**
- **Languages: Spanish and English**
- **Level of education: First Grade in a public school**
- **Living situation: Rental studio apartment with mother**



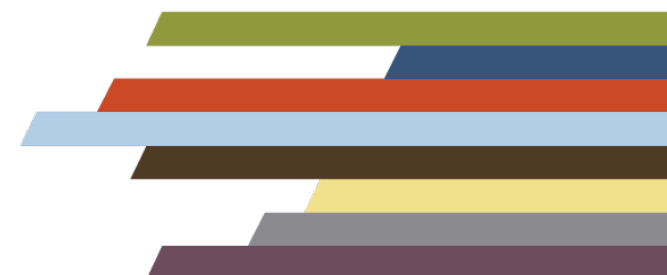
Clinical Case Presentation: Family History

- 3 older sisters and one brother.
- Her brother died in 2012.
- Parents separation
- Visitations dates were three times a week.



Clinical Case Presentation

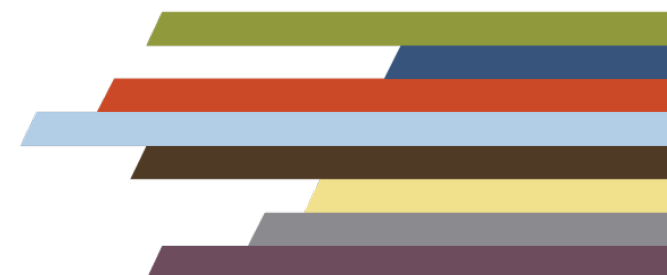
- Received psychotherapy services since she was 3 years old.
- Father was not included in therapy sessions.



Clinical Presentation

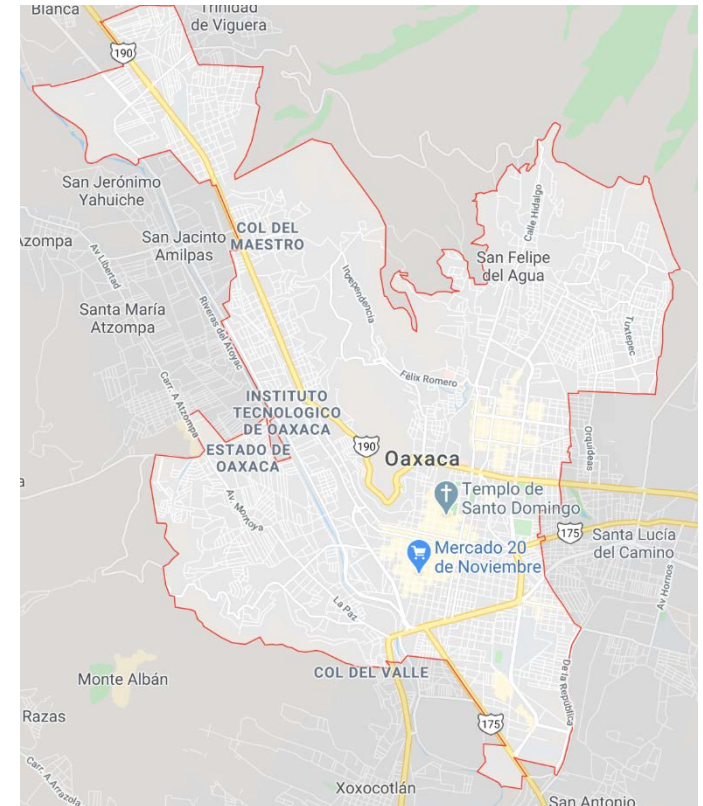
Marcela presented several trauma symptoms which include:

- **Sadness**
- **Sleep disturbance**
- **Fear (i.e. being alone with father and thinking that mother could die)**
- **Preoccupation with the subject of death**
- **Grieving over her brother's death**
- **Anxiety**
- **Crying spells**
- **Reduced appetite**
- **Psychological reactivity when discussing past trauma.**



Mother's Background

- Born Oaxaca de Juarez, Mexico.
- Physically and emotionally abused by her father.
- Married, had two children and moved to California with her first husband on 2005.
- Works as a housekeeper seven days a week.
- Maintains a mother work itinerary.

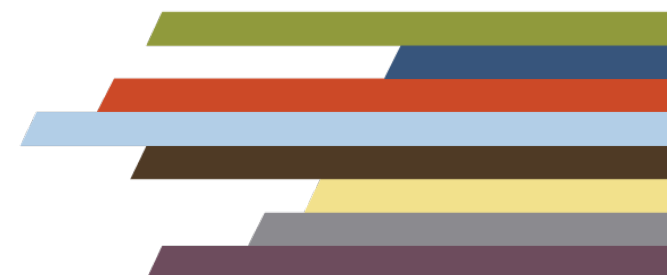


Father's Background

- Father was born in Oaxaca de Juarez, Mexico.
- Spanish speaking.
- History of Substance Use Disorder- alcohol and other substances.
- 10-year imprisonment resulted from a car accident in which someone lost their life.
- Became a Christian in prison and is in recovery.
- Moved to California in 2005 because he was threatened when he was released from prison.
- He started dating Marcela's mother, not knowing she was married.

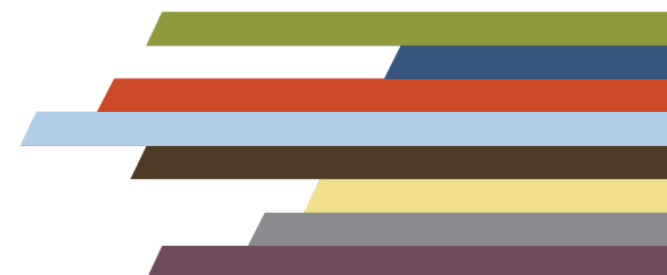
Clinical Formulation: The Five P's Model

- **Presenting Problem**
 - Marcela was experiencing anxiety symptoms related to her trauma history. Conflicts between her parents was a trigger for her anxiety symptoms.
- **Predisposing Factors**
 - Family history of mental health conditions including depression.
 - Adverse experiences.
 - Low-socioeconomic status.
 - Emotional instability at home made client worry about the family



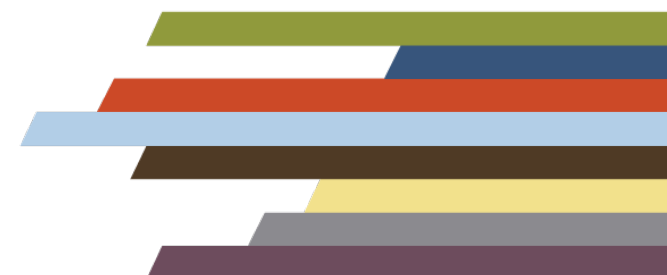
Clinical Formulation: The Five P's Model

- **Precipitating Factors**
 - Witnessing several episodes of domestic violence inside home.
 - Brother passing away.
 - Constant conflicts between parents.
- **Perpetuating Factors**
 - Ongoing conflicts between parents
 - Tantrums
 - Anxiety
 - Fear
 - Nail-biting



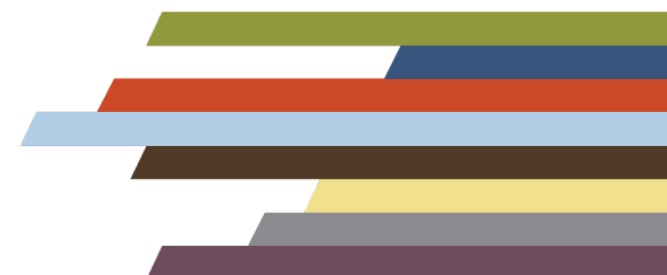
Clinical Formulation: The Five P's Model

- **Protective/strengths Factors**
 - Spirituality
 - Strong bond with mother
 - Engaging
 - Coloring
 - Empathy



Individual Therapy Interventions

- **Develop rapport and therapeutic alliance by using active listening, play therapy, and sharing resources.**
- **Address client's symptoms and identified that they are more related to Marcela's mother and father conflicts.**
- **Practice with client emotion identification, emotion regulation, relaxation techniques, validation of emotions, and provision of a safe space to talk about her day and concerns.**



Collateral Interventions

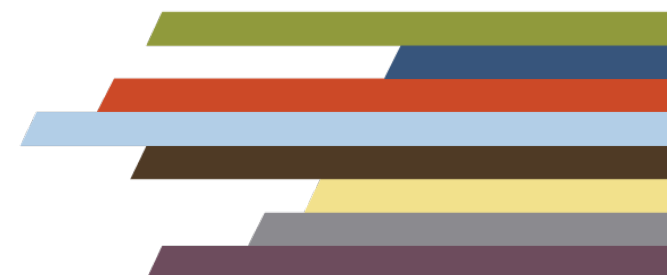
Explore mother and father nuclear family history and cultural background.

- Identify some discrepancies between mother and father's narrative.
- Provide parenting skills for both.
 - *"Siempre nos chocabamos, yo a veces digo cosas para defender a la nena"* (We always have difficulties, sometimes I say things to defend my girl).
- Develop a contract of how to resolve conflicts.
- Cultural values of *Familia, Respeto, and Personalismo.*

Cultural Value of *Familismo*

Include 4 components:

- Belief that family comes before the individual
- Familial interconnectedness
- Belief in family reciprocity
- Belief in familial honor



Family Therapy Interventions

Incorporate father to family and conjoint therapy sessions treatment.

Identify areas that parents consider a concern.

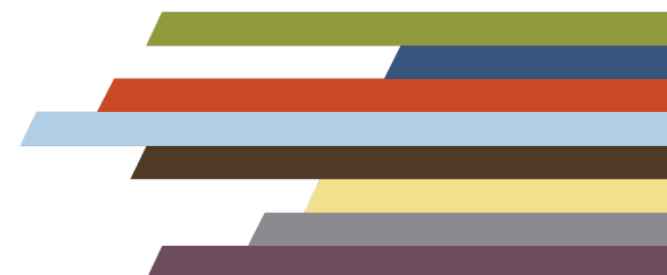
Clarify and discuss different traumatic events with parents.

Provide support to family members installing hope and caring about their needs.

Psycho-education about effective communication (passive, aggressive and assertive).

Structural Family Therapy

- Identified Marcela's family system's changes:
 - Cross-generational coalition- between mother and Marcela against father.
 - Supports- family members, and friends.
 - Stressors- watching her brother dying in the hospital, witnessing domestic violence, mother was arrested and visitation dates with father.
 - Diffused boundaries- affect adaptation process like: parents separation and continuous verbal discussions between mother and father ("I love you, but take a rest").



What you want to say to your parents?



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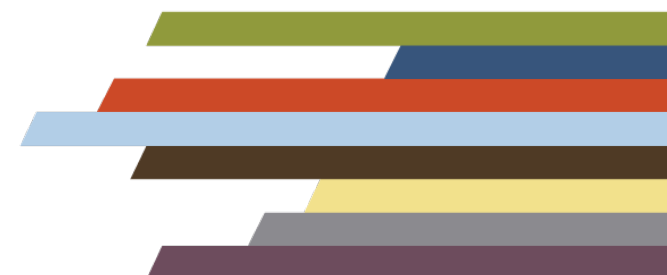
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Structural Family Therapy



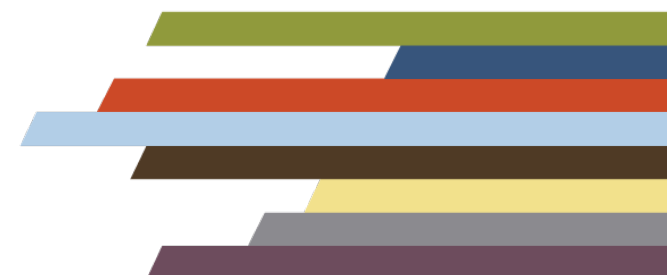
Clips From "The Institutionalization of Children" A Conversation with Sal Minuchin

<https://www.youtube.com/watch?v=gvgOSRomyZU>



Accomplishments

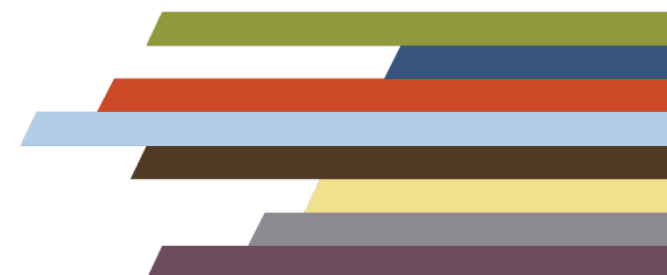
- Provision of psycho-education about the therapeutic process.
- Setting clear boundaries and limits.
- Connection of family with community support.
- Increase in parenting skills like playing with Marcela to connect with her.
- Identification of family patterns.



Therapy Challenges

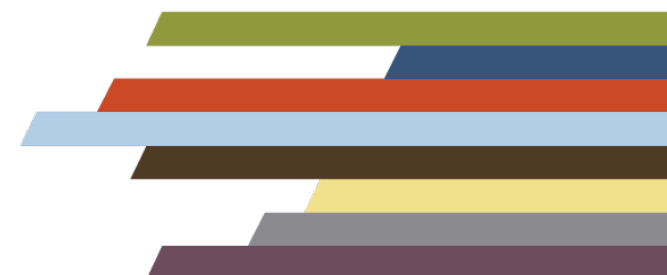
- Consistency with therapy sessions.
- Engaging both parents in therapy.
 - Involvement of parents serve as a protective factor. (Karberg, & Cabrera, 2016).
- Incorporating father into therapy sessions.

“Webster-Stratton (1985a) found that when fathers and mothers were involved in parent training, mother–child interactions were less negative than when fathers were absent from the therapeutic process” (Duhig, A., Phares, V. & Birkeland, R., 2002).

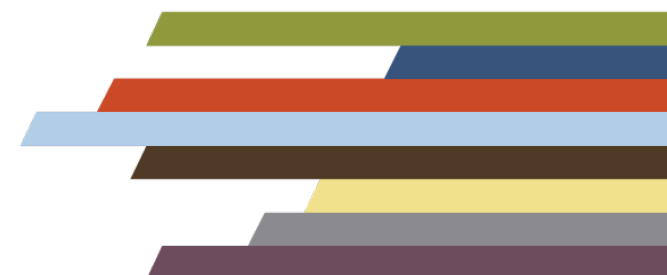


Therapy Challenges

- Illustrating how family history (father and mother) impacts the decisions they make today with their child (Genogram).
- Miscommunication.

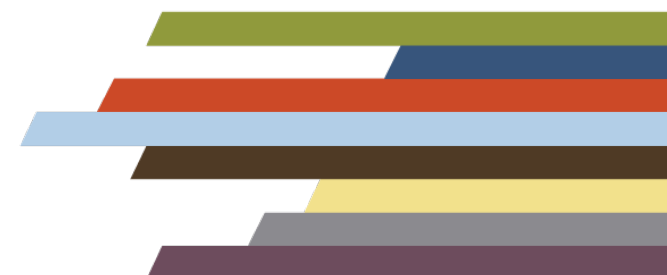


Resources and Recommendations



What would I do differently?

1. Use the DMS-5 Cultural Formulation Interview
2. Recognition of cultural values influences parenting practices and cultural identity.
3. Explore degree of assimilation and acculturation.
4. Referral for mental health services for both parents and parenting classes.
5. Home-based therapy
6. School visitation



Resources: Factsheets

DSM-5 Cultural Formulation Interview



<https://mhttcnetwork.org/centers/national-hispanic-and-latino-mhttc/product/dsm-5-cultural-formulation-interview>

Factsheet

<https://mhttcnetwork.org/centers/national-hispanic-and-latino-mhttc/product/cultural-values-fact-sheet>



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HISPANIC AND LATINO CULTURAL VALUES



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HISPANIC AND LATINO CULTURAL VALUES NEED TO BE ADDRESSED CAREFULLY TO AVOID PERPETUATION OF STEREOTYPES. IT IS IMPORTANT TO RECOGNIZE THAT OTHER CULTURAL GROUPS SHARE MOST HISPANIC AND LATINO VALUES. THE MAIN IMPORTANCE OF THESE CULTURAL VALUES IS THE INFLUENCE THEY HAVE IN HELP-SEEKING PRACTICES



Religion, Spirituality and Traditional Healing Practices

Many Hispanic and Latino individuals are very spiritual, and many are very religious. Religious practices among Hispanics and Latinos are diverse and can include Catholic, Protestant, Jehovah Witnesses, Jewish, Muslim and other practices (1). Hispanics and Latinos may believe that their mental health illness is a spiritual punishment, fate cannot be changed and therefore, they may be less likely to present help-seeking behaviors. Traditional healing practices like curanderismo, yerberos and soberos are used as part of the daily life and impact the view of healing for some Hispanic and Latino communities (2).

Respeto - Respect

There is a high value placed on demonstrating *respeto* (respect) in interactions with others. Hispanic and Latino individuals expect status differences between professionals and non-professionals, which may be different from other cultures, including United States. Healthcare professionals are viewed as authority figures and, Hispanic and Latino individuals may hesitate to ask questions or express concerns about recommendations when they perceive it as disrespectful.



Personalismo - Formal Friendliness

For Hispanics and Latinos *personalismo* is described as a formal friendliness and there might be the expectation to develop a personal relationship with providers. Hispanic and Latino individuals expect health care providers to demonstrate *simpatía*, or friendliness, and *personalismo*. If these values are not expressed, they could feel slighted, or that the health care provider did not deliver a good service. This reduces the likelihood of adherence to treatment and to the mental health care providers' recommendations.

Confianza - Trust

Confianza is a form of mutually reciprocal faith that individuals will help each other to the best of their abilities based on the relationship. During the therapeutic process, mutual reciprocity is emphasized and expected by the client. Small self-disclosures from providers may provoke trust in the therapeutic relationship (3).



Familismo - Familism

Hispanics and Latinos are known for having strong family ties because they value family and community as sources of identity and support. Latinos reference to *familia* (family) may often expand beyond nuclear and extended family to include not only parents and siblings, but also grandparents, aunts, uncles, cousins, close friends, and godparents (4). Family could be a risk and protective factor for our client/patient, it mostly depends on their view of mental health conditions.

Complicated Grief: Cultural Considerations When Working with Loss in Hispanic and Latino Students and Their Families

Booklet

<https://mhttcnetwork.org/sites/default/files/2019-10/complicatedgrieffinal.pdf>



Resources

Cultural Formulation Interview Project-

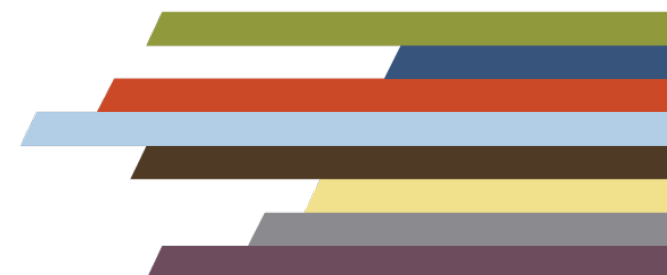
- <https://nyculturalcompetence.org/research-initiatives/initiative-diagnosis-engagement/cultural-formulation-interview-project/>

Father-Paternity Different way of being involved-

- <http://www.child-encyclopedia.com/sites/default/files/docs/coups-oeil/father-paternity-info.pdf>

Project Fatherhood-

- <https://www.childrensinstitute.org/project-fatherhood/>



Resources

Project Fatherhood- Project Fatherhood Father-Daughter Tea

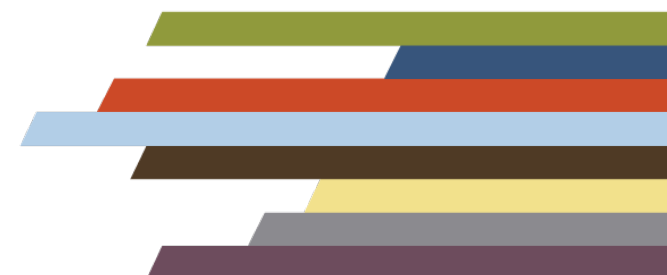
<https://youtu.be/UeYIUWJGZbI>

“ Project fatherhood taught to
never give up on my children and
to never let them down, no
matter how rough life gets. I just
love being a dad. ”

JESSIE, PROJECT FATHERHOOD PARTICIPANT



Questions?
Please type them in the
question box.



Resources Contact Information

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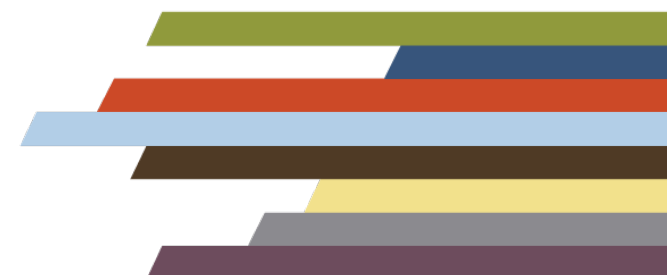
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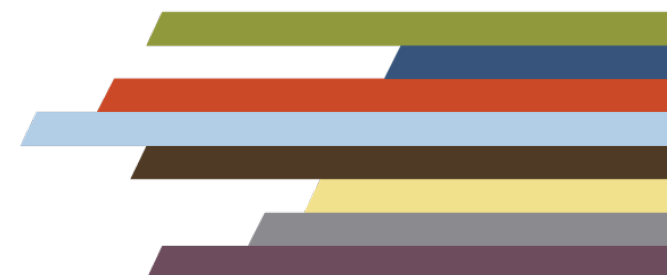
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