National Hispanic and Latino
MHTTC Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

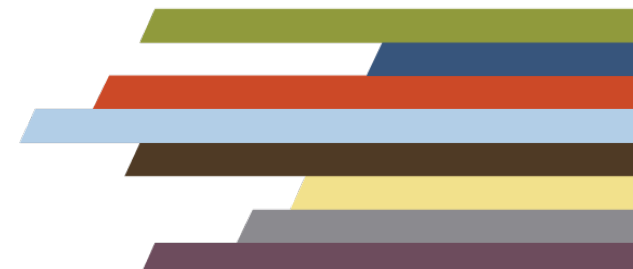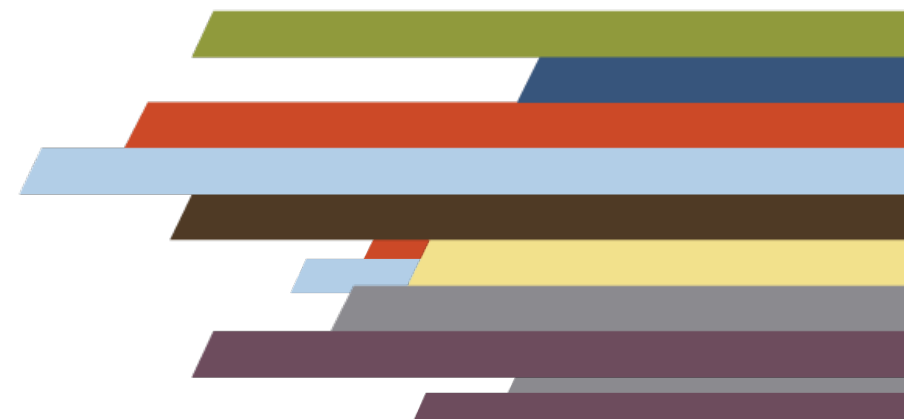# Engaging and Treating Hispanic and Latino Clients

Michelle Evans, DSW, CADC, LCSW

October 28, 2020

1pm EDT

SAMHSA
Substance Abuse and Mental Health
Services Administration

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Module Five

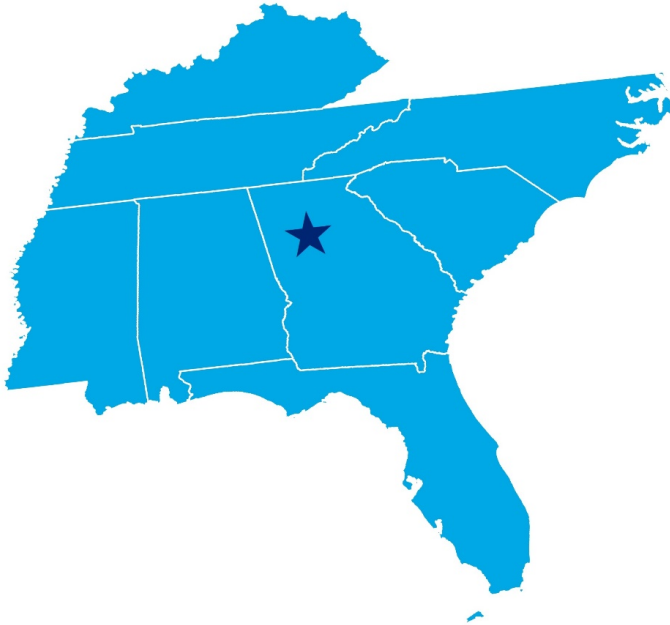Engaging and Treating the Hispanic and Latino Client
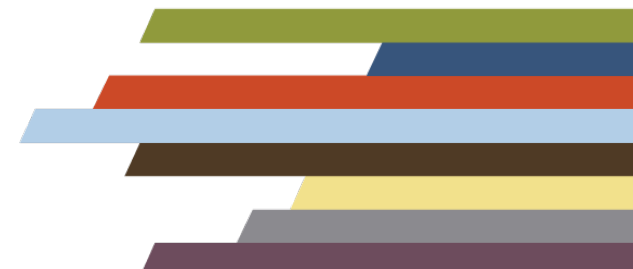
Southeast (HHS Region 4)

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Please visit our website at **www.southeastmhttc.org** for upcoming trainings as well as archived recordings of past trainings.

SAMHSA
Substance Abuse and Mental Health Services Administration

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

INVITING TO INDIVIDUALS PARTICIPATING IN THEIR OWN JOURNEYS

STRENGTHS-BASED AND HOPEFUL

PERSON-FIRST AND FREE OF LABELS

INCLUSIVE AND ACCEPTING OF DIVERSE CULTURES, GENDERS, PERSPECTIVES, AND EXPERIENCES

NON-JUDGMENTAL AND AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR AND UNDERSTANDABLE

HEALING-CENTERED/ TRAUMA-RESPONSIVE

CONSISTENT WITH OUR ACTIONS, POLICIES, AND PRODUCTS

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf
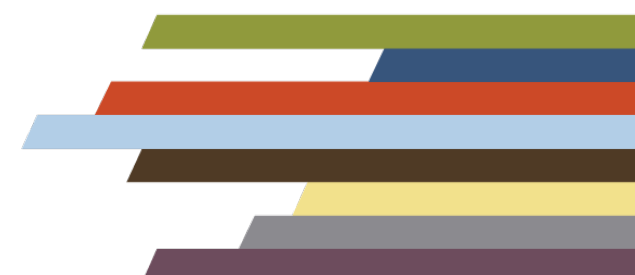
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Engaging and Treating Hispanic and Latino Clients

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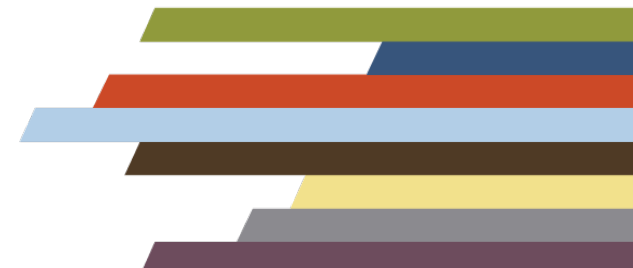
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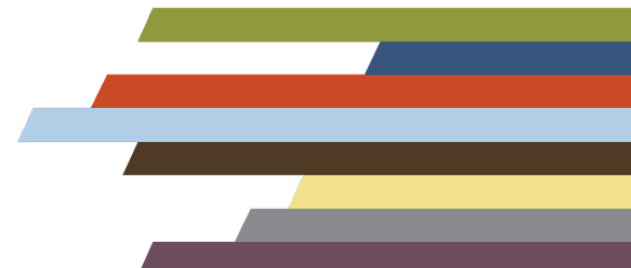
LEARNING OBJECTIVES

Goal: This module will provide training on best practices in the engagement and treatment phase of substance use treatment with the Hispanic and Latino client.

Objectives:

- Participants will be able to identify three cultural elements that inform mental health assessment and treatment interventions with Hispanic and Latino individuals;

- Participants will be able to list and discuss at least two specific evidence-based interventions and techniques in Latino mental health

- Participants will be able to demonstrate two culturally informed assessment and treatment techniques shown to be effective with Latino clients.

Cultural Values that Impact the Engagement Phase

- Cultural values are embedded in every interaction
- Providers need to:
  - Be familiar with normative cultural values
  - Have an understanding of his/her own beliefs
  - Be aware of values that increase client engagement
  - Be aware that values impacting health care may change over the life of the case
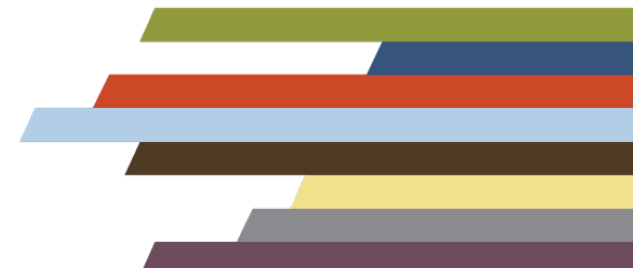
# Cultural Values that Impact the Engagement Phase
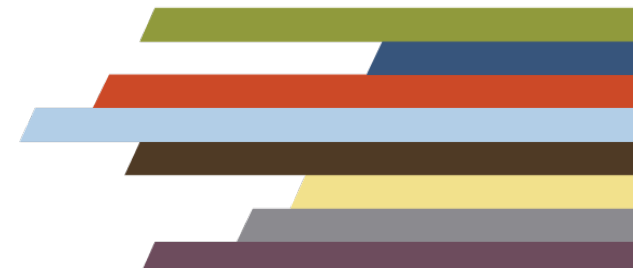
Confianza   Trust

"Confianza", or trust, is a form of mutual reciprocity having faith that individual will help you to the best of their ability based on the relationship.

Mutual reciprocity in the relationship may be emphasized and expected.

Small self-disclosures may be helpful in establishing trust (Falicov, C., 1982.)
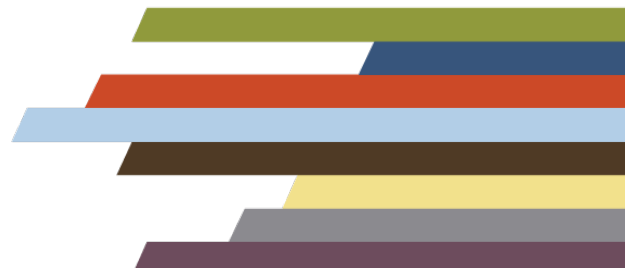
Personalismo – Formal Friendliness

- "Personalismo" (formal friendliness) refers to how one behaves within relationships.

- Clients may expect health care providers to demonstrate "simpatia", or kindness, and "personalismo", which is a formal friendliness.

- Clients may feel slighted if these values are not expressed; this reduces the likelihood of compliance in treatment and in recommendations.
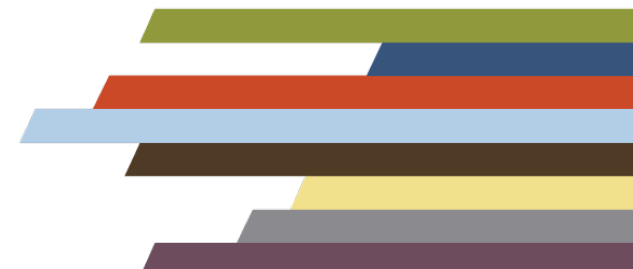
Familismo – Familism

- Familismo describes the client's focus on family and their community group as a source of identity and support.

- Boundaries may be flexible between family members; clinicians must avoid pathologizing relationships that may be supportive.

- Provider should convey a flexible understanding of boundaries to build trust between the clinician and the client.
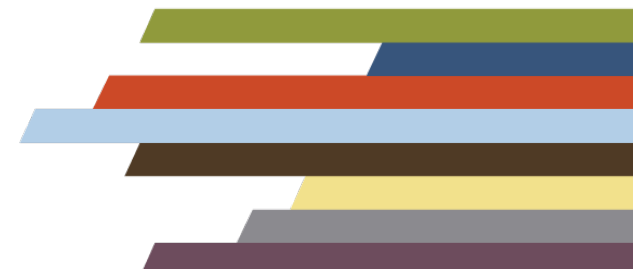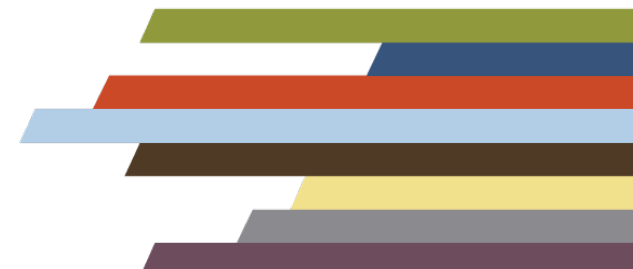
Respeto – respect

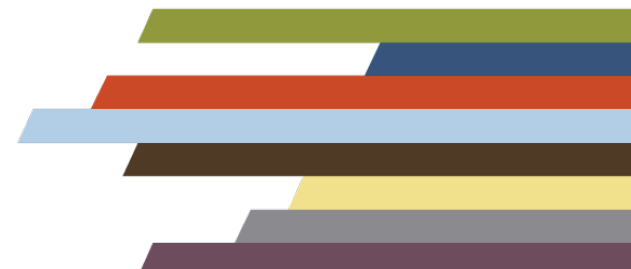Respeto refers to the respect given to professional based on their position.

Providers are seen as authority figures, therefore, individuals may struggle to question or express concerns about recommendations.

Healthcare professionals should demonstrate respect through use of titles.

Cultural Values that Impact the Treatment Phase

Cultural Values that Impact the Treatment Phase

Values that most affect the treatment phase due to the pervasive way that these values impact the client's perception of identity may be:

-Machismo

-Marianismo

-Fatalismo

Machismo

- Machismo is a form of masculinity that involves having pride, being courageous and valorous, but it also promotes male dominance and superiority.

- Men with this value may struggle to accept appropriate emotions and vulnerability.

- In treatment, machismo may lead to men minimizing symptoms, not using familial support, or stopping treatment prematurely.
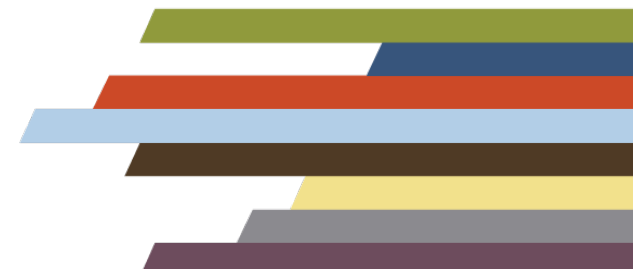
Marianismo

- Marianismo is the female equivalent of machismo, which incorporates the concepts of saintliness, submissiveness, humility and vulnerability. It may also include the role as a provider and having a strength to raise children.

- Women with this value are more likely to minimize symptoms or neglect treatment to care for family.

- Providers should develop a treatment plan that considers the client's values regarding treatment. (Kouymdjjian, Zamboaga, & Hansen, 2003.)
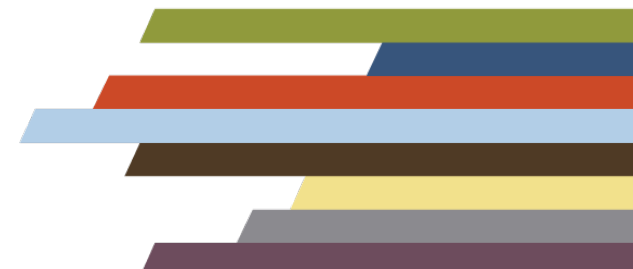
Fatalismo

- Fatalismo (fatalism) is the concept that the individual can not change their fate.

- Individuals may be less open to new technology, and may have less drive to manage their own health care in favor of trusting a higher power.

- Providers must respect individual beliefs, while offering education and options for wellness.
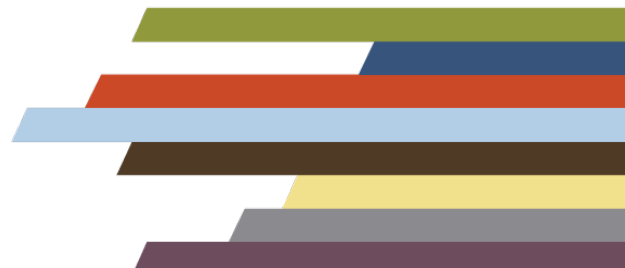
# Therapeutic Elements of the Engagement Phase
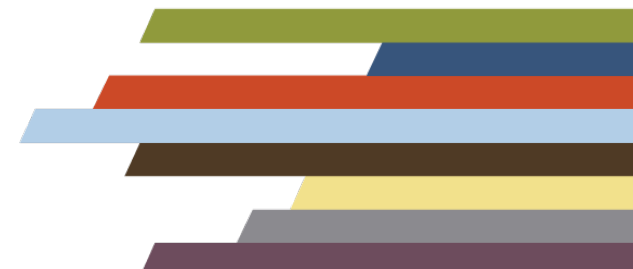
Development of the Therapeutic Relationship

- Differing experiences of justice, oppression, and discrimination can impact the establishment of therapeutic rapport.

- The areas that are most impacted in the engagement and treatment phase are in the expression of empathy, transference, and countertransference.

- The provider must consider the client's values, and suspend judgement in order to understand the client most accurately.
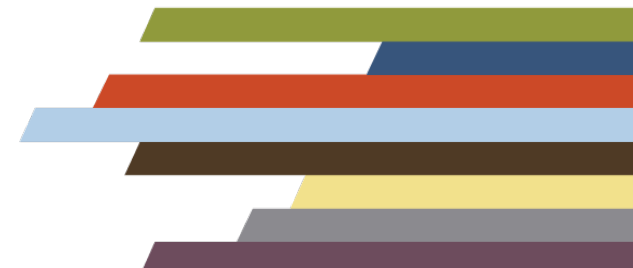
Expression of Empathy

- Empathy is a "feeling in oneself the feeling of others" (Strayer, 1987.)

- The provider should seek to empathize with the client regarding their experienced based on an understanding of each of their culturally based perspectives.

- This empathy offers clients a richer opportunity to resolve their own ethnocultural conflicts (Comas-Días, 1991).
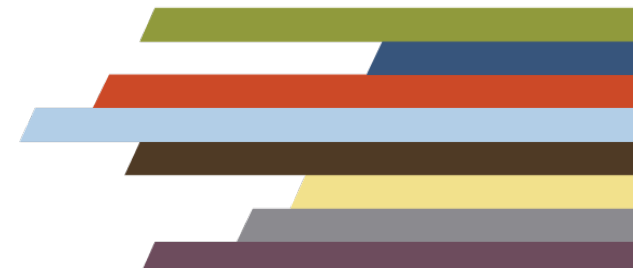
Transference

- Transference is when the client attributes unconscious thoughts and feelings to the provider.

- A provider's openness to ethnocultural transference may lead to a deeper therapeutic experience.
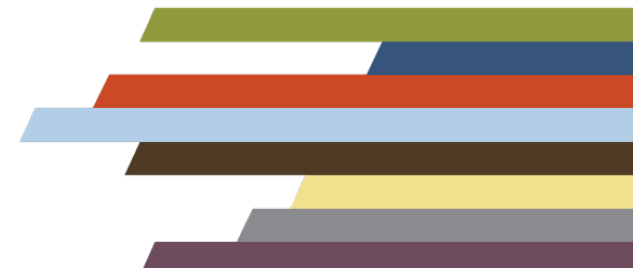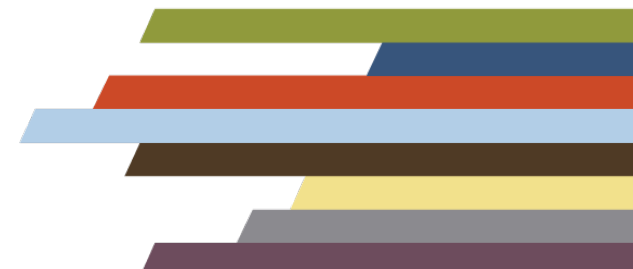
Countertransference

- Countertransference is the provider's own repressed feelings in reaction to the emotions, experiences, or problems of a person undergoing treatment, as specifically related to the race and ethnicity of the provider and client.

- The goal for the provider is to be aware of biases and to explore the impact of those biases in supervision to avoid an impact on the client.
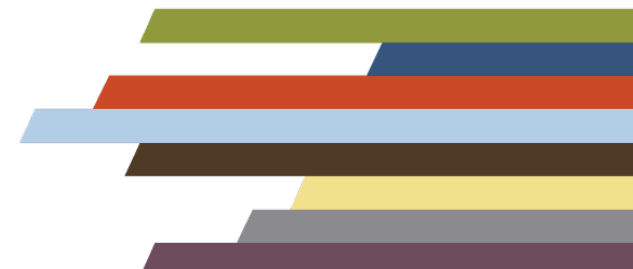
Impact of an Intercultural Relationship

An intercultural relationship between a client and provider who are racially and ethnically dissimilar may present with some challenges. The provider may:

- Endorse colorblindness
- Deny importance of ethnicity and race
- Overly focus on culture
- Feel guilt, pity, or aggression toward client
- Feel ambivalent regarding cultural experiences.

Impact of an Intercultural Relationship

The client may demonstrate evidence of intercultural transference by:

- Demonstrating overcompliance and friendliness as to not reinforce stereotypes
- Demonstrate mistrust, suspicion, and hostility
- Deny the impact of ethnicity and culture
- Demonstrate ambivalence
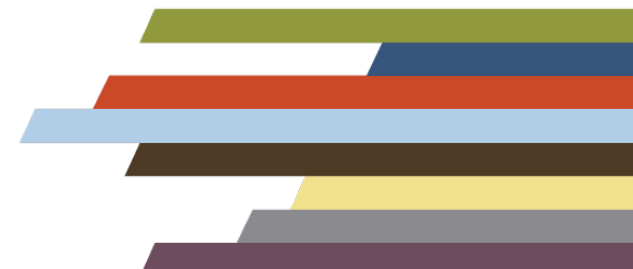
The Impact of Evidence Based Therapies on the Engagement and Treatment Phase
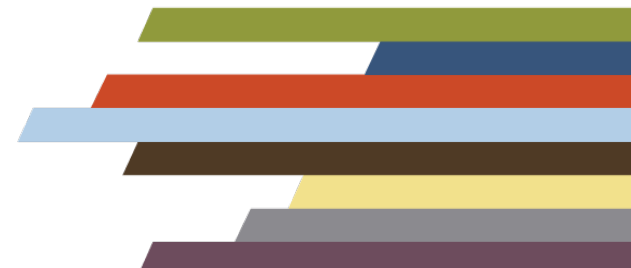
Cognitive Behavioral Therapies

Cultural Adaptation of Cognitive Behavioral Therapy (CBT)

- Developed for adolescents with severe depression.
- Considers and adapts cultural developmental and socioeconomic factors.

Cognitive Behavioral Therapies

Dialectical Behavior Therapy (DBT)

- focuses on capability enhancement, motivational enhancement, and the generalization to outside environments.
- Can be adapted to integrate elements of the individual's culture
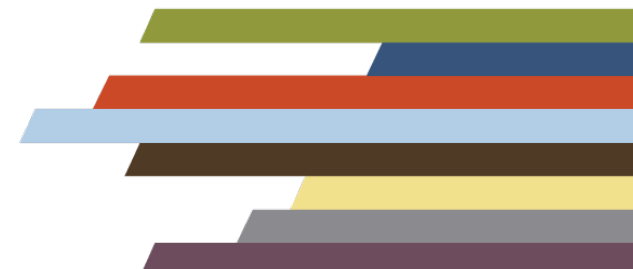
Motivational Enhancement Therapy

Motivational Enhancement Therapy was adapted from motivational interviewing.

- Uses an empathic and strategic approach to increase client's motivation to change.
- Can be adapted to integrate client's beliefs, values, and context to maximize benefit of treatment.
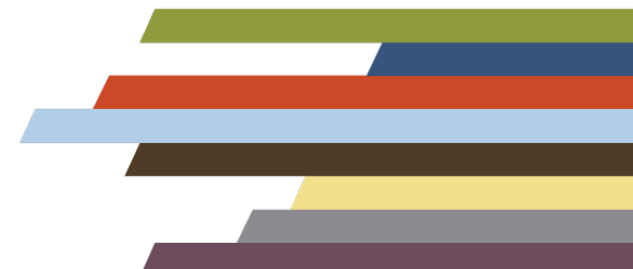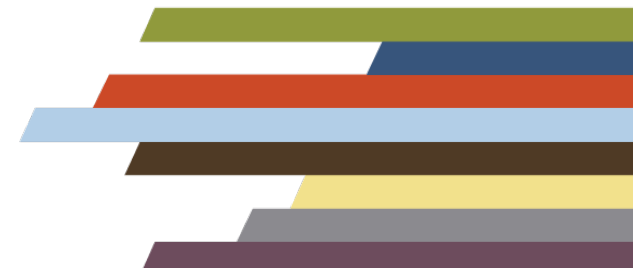
Trauma Informed Therapies

Seeking Safety is an evidence-based counseling model used to help clients who have experienced trauma and substance abuse. The goal is to help clients attain safety through a focus on:

- Integrated and holistic treatment
- Ideals
- Cognitive, behavioral, interpersonal, and case management
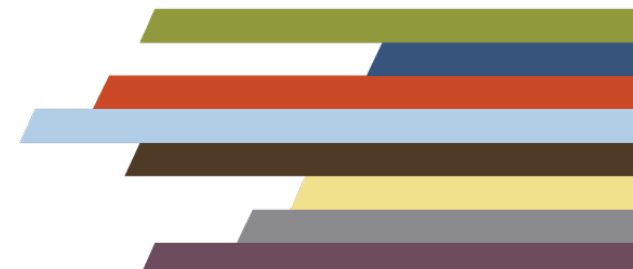- The clinician's process

(Navavits, 2001)

Trauma Informed Therapies

The Trauma Recovery and Empowerment Model (TREM) is a group treatment model designed to empower, provide trauma education, and to build skills (Harris, 1998).

This model is highly adaptable to the cultural values and beliefs of Hispanic and Latino populations (Harris, 1998).

Family Therapies

Family therapies can be very effective with clients as it may be used to engage all members of the client's support system.

Family therapies can be used to identify cultural interactional patterns, improve family interactions, and educate the family as a system.
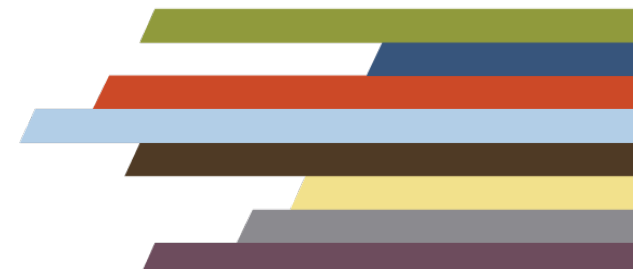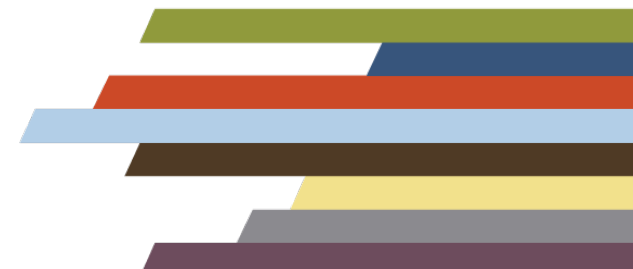
Family Therapies

The following family therapies have been identified as evidence based:

- Brief Strategic Family Therapy (BSFT)
- Celebrating Families
- Family Support Network
- Functional Family Therapy
- Multidimensional Family Therapy
- Network Therapy

All are proven effective with the Hispanic population.

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Ibis Carrión, Psy.D.
Director
ibis.carrion@uccaribe.edu

Angel Casillas, MHS
Project Manager
angel.casillas@uccaribe.edu

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