



National Hispanic and Latino

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Considering Culture in the Diagnosis of Mental Health Disorders with Hispanic and Latino Clients:

Michelle Evans, DSW, LCSW, CADC

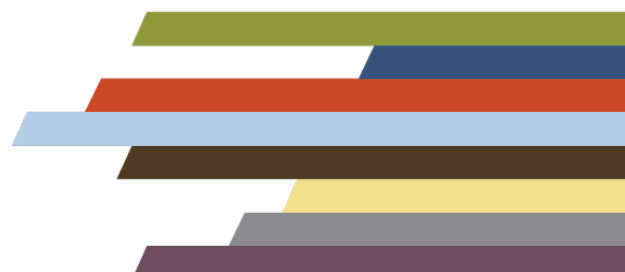
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1pm EDT

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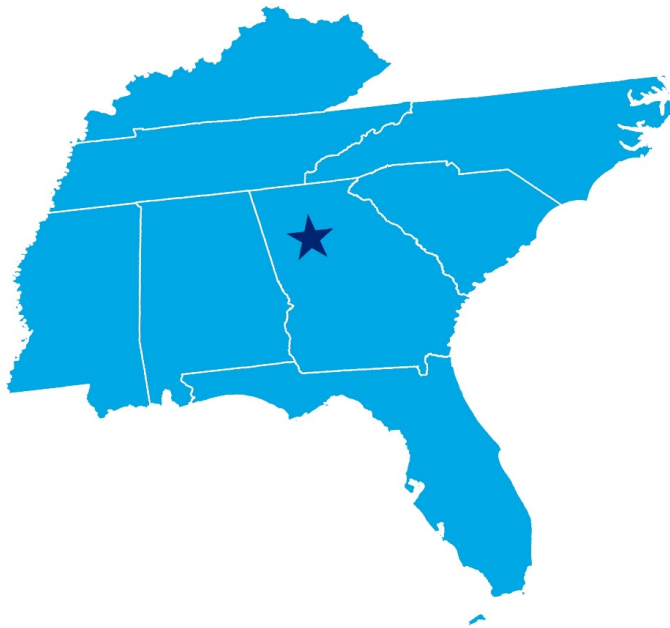


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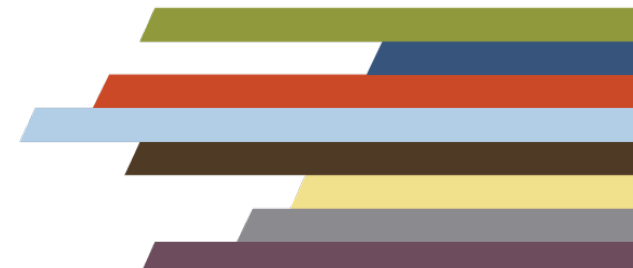
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of past trainings.



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

STRENGTHS-BASED
AND HOPEFUL

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

HEALING-CENTERED/
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
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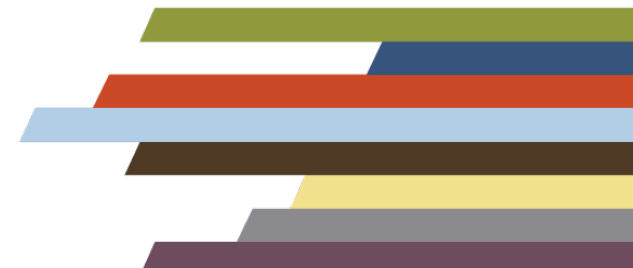
Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf



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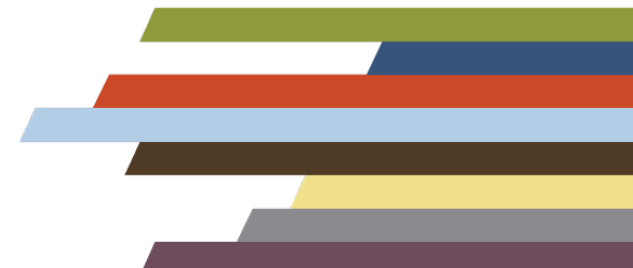
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Authors Disclose Conflicts of Interest

No conflicts of interest to disclose

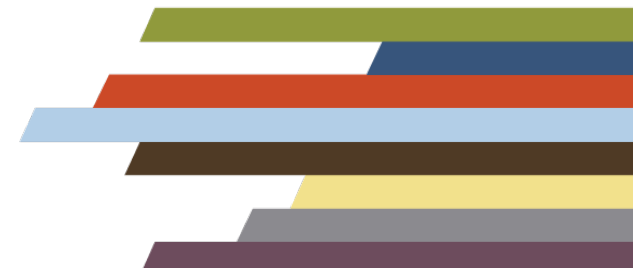


Clinical Applications of Cultural Elements Module Three



**Considering Culture in the Diagnosis of
Mental Health Disorders with Hispanic
and Latino Clients:**

Michelle Evans, DSW, LCSW, CADAC

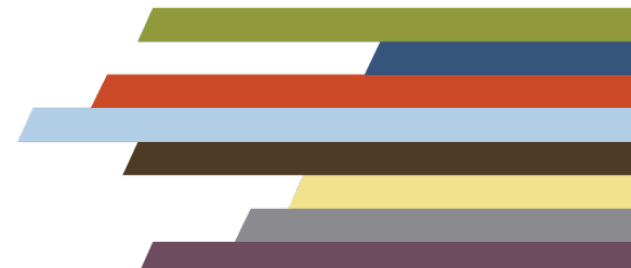


Learning Objectives

Goal: This module will provide training on integrating cultural factors into school mental health services.

Objectives:

- Define and identify major concepts of distress among Hispanic and Latino students.
- Discuss cultural concepts of distress unique to Hispanic and Latino cultures.
- Apply concepts of distress and create culturally relevant treatment plan.



Impact of the Concept of Illness

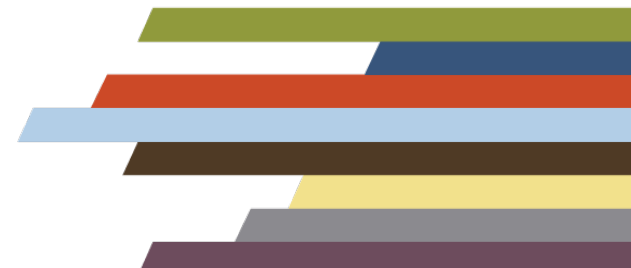
- Cultural concepts may be related to acculturation, discrimination, oppression, and the stigma related to substance use and mental illness.



The Impact of Cultural Values on Illness

Within Hispanic and Latino populations, the cultural values of *familismo*, *machismo*, and *personalismo* have been found to impact interpersonal and intrapersonal behaviors (Delgado, 2007).

- *Familismo* (familism) is a concept which emphasizes an individual's dedication to the family above the needs of the individual.

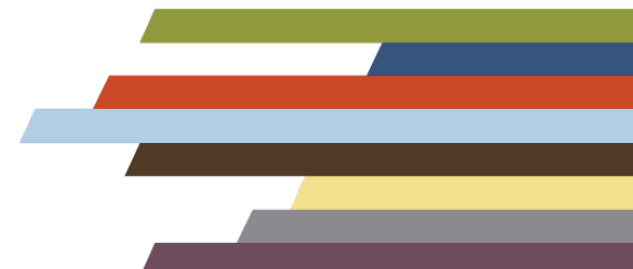


The Impact of Cultural Values on Illness

- *Machismo* is a concept that may also positively or negatively impact a client's perception of suffering, as it may either encourage courage and strength, and the need for responsibility to care for the family, or it may isolate the individual through their belief that they need to dominate others, and to not demonstrate vulnerability (Torres, Solberg, & Carlstrom, 2002).
- *Personalismo* places emphasis on personal relationships.

Possible Beliefs Regarding Mental Illness, Substance Use Disorders, and Treatment

- Values of Latino families may be used as a support or as a risk factor in the treatment of mental health and substance use disorders.
- For example: If you have a student who has harmed his family due to his mental illness and drug use, he may be alienated and struggle to access resources due to sociological barriers. However, if his family agrees to provide support, this may be a great strength.



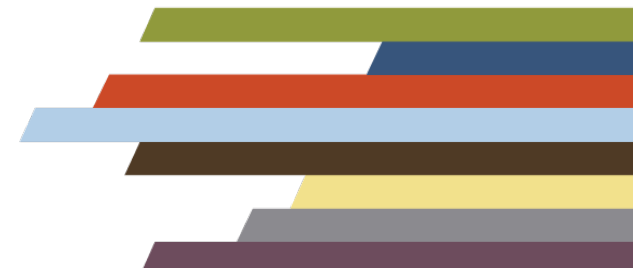
School Systems and Youth Academic Performance

“School is often where problems begin or intensify”.

Falicov, 2014

- Hispanic and Latino children and families may experience high levels of stress before starting school.
- Latino youth presents higher dropouts. Some of the factors or behaviors that may contribute could include:
 - Cutting classes
 - Constant suspensions
 - Dating constantly
 - Being older for their grade
 - Being female

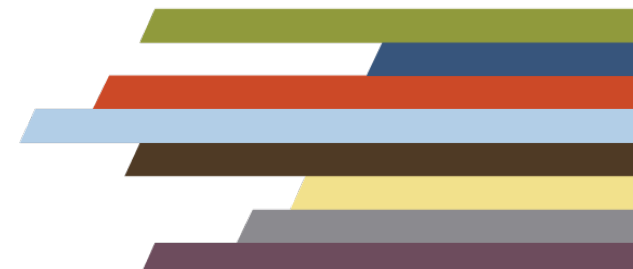
(Falicov, 2014)



Hispanic and Latino Children and Youths' Mental Health and Academic Performance

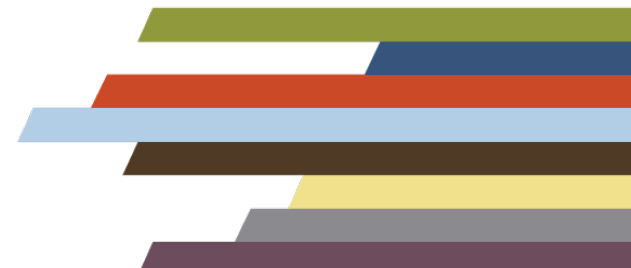
- Factors that may influence students' mental health and academic performance include:
 - migration stress,
 - acculturative stress,
 - discrimination,
 - poverty,
- cultural learning styles,
- socioemotional readiness for starting school,
- linguistic and cultural marginality,
- deportation
- **separation, and**
- **reunification**

(Falicov, 2014)



Unaccompanied Migrant Children

- Under U.S. law, unaccompanied alien children (UAC) are defined as migrants under eighteen years old with no lawful status in the U.S. and who have no parent or legal guardian available to care for them.
- There has been a recent increase in the number of unaccompanied migrant children crossing the southern border of the US from Guatemala, Honduras, El Salvador, and Mexico.



Unaccompanied Migrant Children

Migration stressors were associated with increased risks for mental health symptoms (Potochnick & Perreira, 2010).

Undocumented status in itself has been shown to increase fear and isolation, and negatively affect mental health (Abrego, 2011).



Unaccompanied Migrant Children Experiences

During migration, **unaccompanied migrant children** often face the same types of traumatic events or hardships that they faced in their country of origin, as well as new experiences such as the following:

- Hazardous train rides
- Robbery, assaults, and intimidation by gangs and thieves
- Coercion or abuse by adults referred to as “coyotes”
- Kidnapping
- Sexual violence
- Exposure to the elements without proper supplies and gear
- Harassment and bribery by local authorities
- Hunger, thirst, and exhaustion
- Separation from family
- Loss of community
- Uncertainty about the future
- Detention

Unaccompanied Migrant Children School Experience

Unaccompanied migrant children may face the following challenges when entering the US school system:

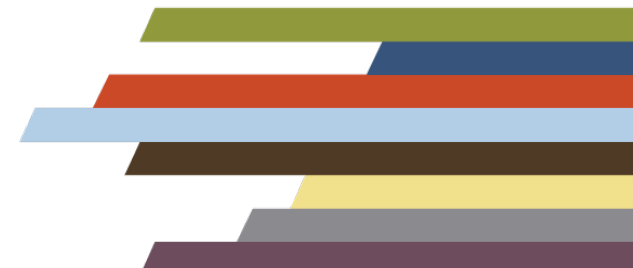
- Being unfamiliar with school routines and expectations
- Being placed in a classroom based on age that does not correspond to their skill or experience level
- “First” experiences, such as eating new foods at lunch and taking a school bus
- Discrimination, teasing, or bullying by other children at school due to their appearance, culture, religion, beliefs, or language
- Trauma-related mental health symptoms, which may be exacerbated in a setting with authority figures

Hispanic and Latino Children and Youths' Mental Health and Academic Performance

Separation

- The Oklahoma State University study included general population sample of Latino 7th-grade students in an urban public school district in the south-central United States (N=611).
- The study examined the relationship between an immigration-related arrest of a family member and depressive symptoms and found:
 - 29% of the students reported an immigration-related arrest of a family member;
 - Latino youth who experienced an immigration-related arrest of a family member reported significantly higher depressive symptoms than youth who did not.

Giano et al., 2019



Reunification

During reunification with a sponsor, such as a parent or family member, unaccompanied migrant children may face the following:

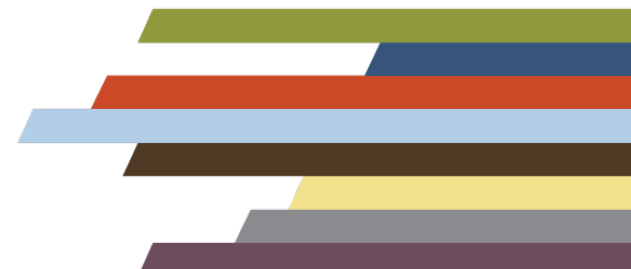
- Disruptions in attachment
- Lack of familiarity and connection with caregivers
- Caregivers with limited parenting experience or knowledge of child development
- Difficulty trusting caregivers
- Stress in caregiver-child relationship
- Limited resources
- Fear of deportation or legal involvement
- Discovery that parents may have a new family
- Caregivers unable to understand or relate to the UMC experience
- Expectations of the US and an idealistic image of a family that does not match their reality

How can providers enhance their cultural competence?

- Read basic information about the unaccompanied migrant children 's country and culture of origin.
- Acknowledge the difficulties that unaccompanied migrant children and their families have experienced.
- Learn about the community where unaccompanied migrant children live and develop relationships with community providers so you can provide a coordinated response.
- Understand their basic needs and help leverage resources in order to meet these needs.

How can providers enhance their cultural competence?

- Provide culturally and linguistically sensitive services by using cultural brokers or interpreters when possible
- Make efforts to learn and respect unaccompanied migrant children understandings of symptoms and healing.
- Remember that unaccompanied migrant children's situations are often tenuous due to their legal circumstances; be aware of how this might affect treatment goals and interventions.



Cultural Concepts of Distress

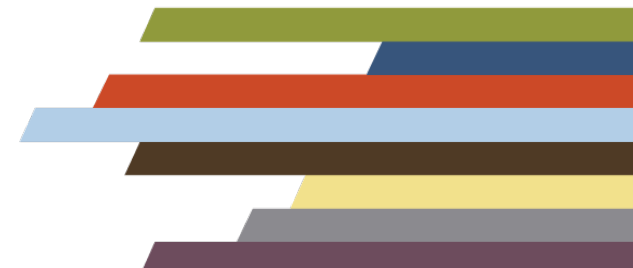
Cultural concepts of distress are expressed through three concepts:

- Cultural syndromes: Groups of symptoms that co-occur among individuals in specific cultural groups, communities, and contexts.
- Cultural idioms of distress: Ways that symptoms are expressed which provide a collective, shared ways of experiencing and talking about personal and social concerns.
- Cultural explanations (perceived causes): Labels, attributions, or features of an explanatory model that indicate culturally recognized meaning or etiology for symptoms, illness, or distress.

(APA, 2013. p.758.)

Cultural Concepts of Distress

Although a majority of Latino children in the United States have been socialized to some extent into American beliefs around psychological wellbeing, it is still important to understand these different interpretations of distress, particularly since so many Latinos live in mixed-status and multigenerational families where parents, grandparents, and other family members may have varying perspectives on mental health issues.



Latino Cultural Syndrome

Ataque de nervios

- Characterized by symptoms of intense emotional upset (including anxiety), screaming, shouting, crying, trembling, may include verbal and physical aggression.
- Dissociative experiences, seizure-like or fainting episodes, and suicidal gestures are prominent in some *ataques* but absent in others.
- Mostly, it occurs as a direct exposure to a stressful event relating to family.

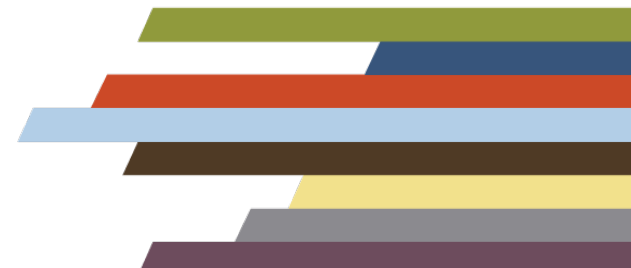


(DSM-5, p. 833)

Idioms of Distress Prevalent among Hispanic and Latino Cultures

Cultural Idioms - Hispanic and Latino persons may use expressions that are consistent with the culture syndromes that they experience. For example:

- *Nervios*
 - General state of vulnerability to stressful life experiences and to difficult life circumstances. (DSM-5, p. 835)
 - It starts with a “persistent idea that is stuck” (“idea pegada a la mente”). The individual may find it difficult to think about other things, or they find their thoughts consistently returning to the idea.



Idioms of Distress Prevalent Among Hispanic and Latino Cultures

In terms of *nervios*, children and adolescents could experience:

- Headaches or “brain aches”
- Irritability
- Stomach disturbances
- Sleep difficulties
- Nervousness
- Easy tearfulness
- Inability to concentrate
- Trembling
- Tingling sensations
- Dizziness



(APA, 2013)

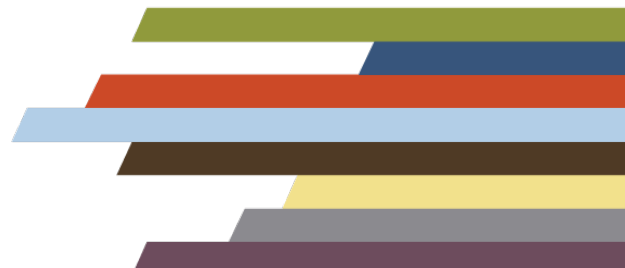
Latino Cultural Explanations for an Illness

Susto

Attributed to a frightening event that causes the soul to leave the body and results in unhappiness and sickness, as well as difficulties functioning in key social roles. This syndrome may occur with somatic symptoms.

- Prevalent among Latinos living in the US that are from Mexico, Central America and South America.
- Related DSM-5 diagnoses include:
 - major depressive disorder;
 - post traumatic stress disorder;
 - other specified or unspecified trauma and stressor-related disorder; and
 - somatic symptom disorders.

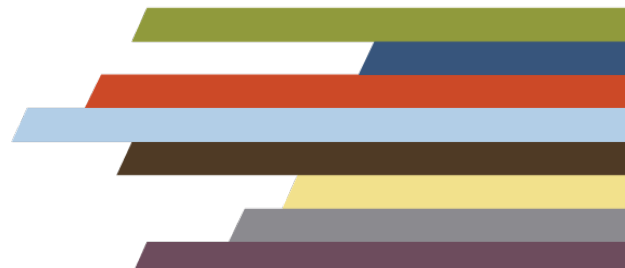
(APA, 2013)



Latino Cultural Explanations for an Illness

- *Susto* - Three syndromic types of *susto* have been identified, each having different relationships with psychiatric diagnoses
- An interpersonal *susto* characterized by feelings of loss, abandonment, and not being loved by family, with accompanying symptoms of sadness, poor-self image, and suicidal ideation, seemed to be closely related to major depressive disorder.
- When *susto* resulted from a traumatic event that played a major role in shaping symptoms and in emotional processing of the experience, PTSD appeared more appropriate.
- *Susto* characterized by various recurrent somatic symptoms was thought to resemble a somatic symptoms disorder

(DSM-5, p. 836)

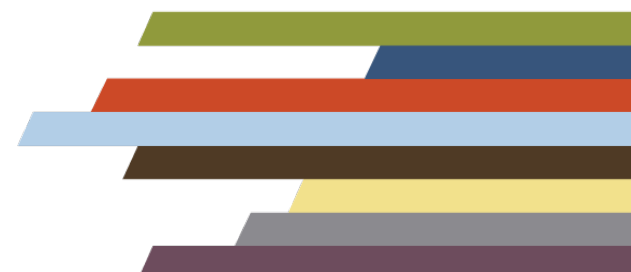


Latino Cultural Explanations for an Illness

Mal de Ojo

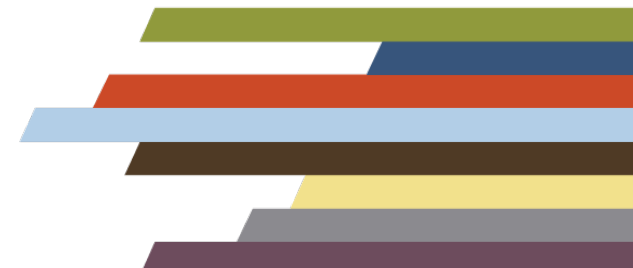


- It is considered an illness transmitted by making eye contact with someone, as it is received through the eyes of the intended recipient. The instigator frequently covets the victim child, and when the illness is passed it heats the blood of the victim, causing multiple gastrointestinal problems.



Help Seeking Plans for Recovery

- Schools are considered a safe place to receive mental health services. Most parents prefer that their children and youth to receive mental health services in the school setting.
- The idioms of wellness and resilience can be used to identify collective and individual areas of coping, social support, and intervention (APA, 2019).



Application

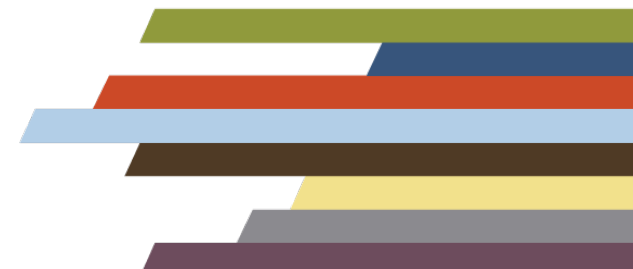
Four year ago, 15-year-old Verónica moved with her parents, Estela and Mario, and two siblings from Mexico City to San Diego, California, after a previous migration from a rural town to the Mexican capital. Estela's oldest sister, Lucía, had spearheaded the migration with her own family by 1 year. Veronica lived in a rental small apartment in a middle-class neighborhood. She goes to a public school. Both parents overwork due to their limited income. Veronica visits a Catholic church frequently with her family. Verónica was a model student in Mexico and in US. She is part of the tops of her class spite the new language and cultural stress. She informed: “Yo quiero ser alguien” (I want to be somebody). One of the major stress that Veronica is dealing with include being involved in a love triangle where she was in competition with her female cousin.

(Case Adaptation from Falicov, 2014 p. 199)

Application (cont.)

She feels anxious about losing her friendships with her cousin and losing her romance with 21-year-old Raúl. Her parents had difficulties providing details of the episodes in which the girl had epileptic-like trembling, rolling of her eyes, sometimes foaming at the mouth, and screams. Veronica's symptoms last for up to half an hour and then stop on their own. Medical evaluation failed to uncover any organic issues. School social worker called her parents in order to provide mental health services to Verónica.

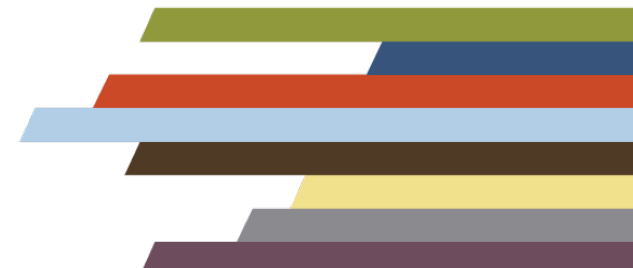
(Case Adaptation from Falicov, 2014 p. 199)



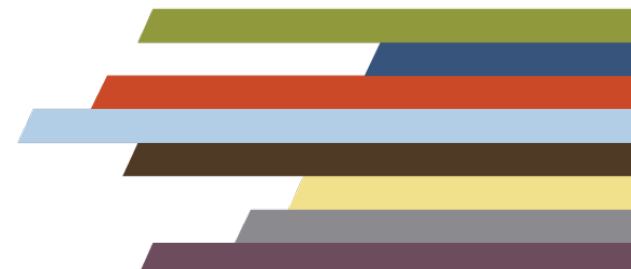
Case Example Questions

Based on the example, identify how the cultural expressions of distress may be impacting Verónica

- What would you like to know about the client that you do not already know?
- How might an understanding of cultural syndromes help the assessment and treatment plan for Verónica?
- How might an understanding of cultural idioms of distress help Verónica treatment?
- How might cultural explanations of illness impact Verónica commitment and motivation for treatment?



QUESTIONS & ANSWERS





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Angel Casillas, MHS
Project Manager

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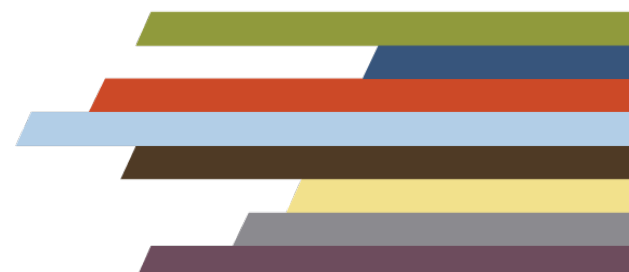


We hope you enjoyed our webinar.

Website:

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