



National Hispanic and Latino

MHTTC

Mental Health Technology Transfer Center Network

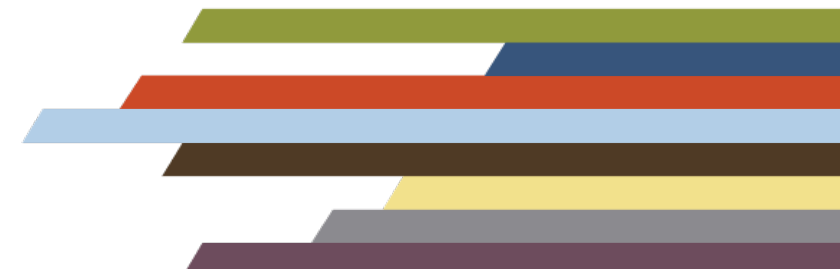
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SECTION 4: Cultural Formulation Interview with the Hispanic and Latino Populations: Peer Worker Perspective & Application

J Rocky Romero, PhD, LMSW

National Hispanic and Latino MHTTC

October 14, 2020



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
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

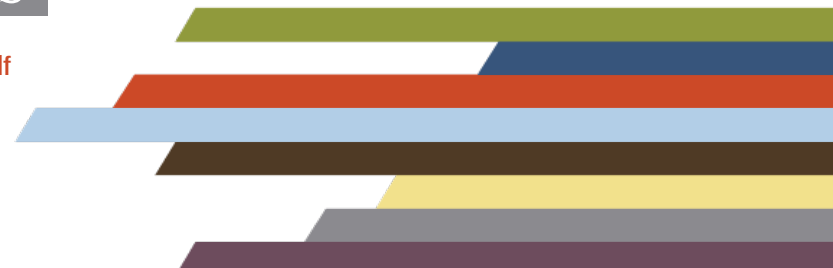
Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf



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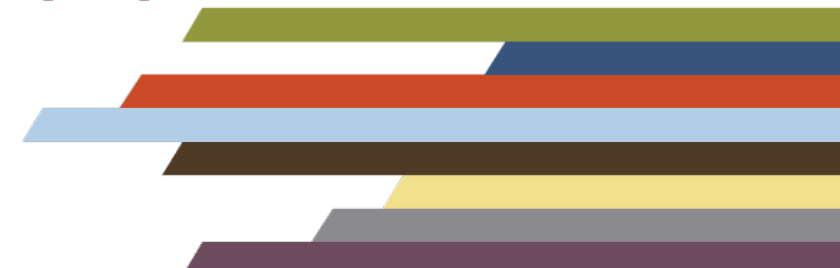
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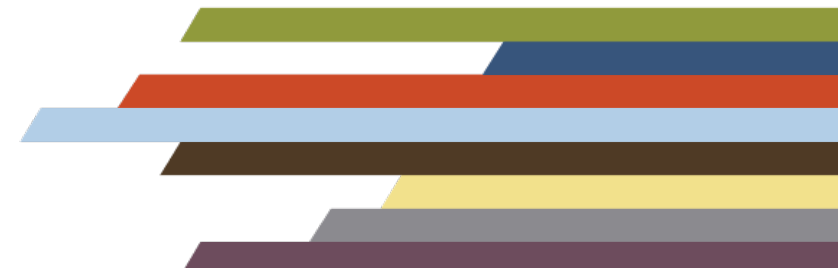
About the presenter:

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 to include other boards and committees. In addition, Dr. Romero completed his doctoral studies at the University of New Mexico in Language, Literacy and Sociocultural Studies with a focus on analyzing legal discourse through a critical race theory lens. Dr. Romero has been a trainer and consultant for the NHL-MHTTC for the last 10 years, in addition he is a National trainer for Clare|Matrix, formerly the Matrix Institute, for the last 12 years. He is focused on culturally appropriate treatment while focusing on reducing health disparities for people of color. Lastly, Dr. Romero is focused on the intersections of racism, discrimination, and the impact of racialized legal discourse on people of color.



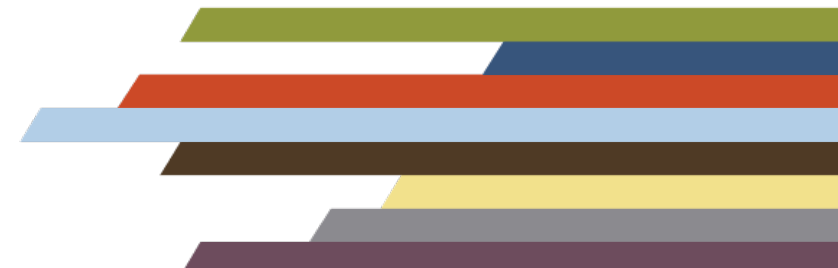
Resources for Peers Working with Hispanic and Latino Populations The Cultural Formulation Interview

SECTION 4



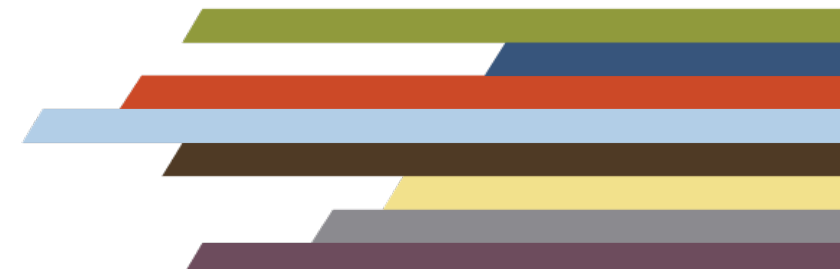
Goals

- Provide practical resources to mental health providers working with Hispanic and Latino populations.
- Use of the Cultural Formulation Interview as an assessment tool when working with Hispanic and Latino populations



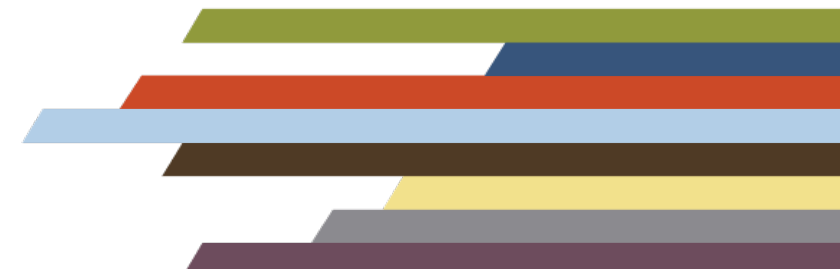
Objectives

- Identify resources that may facilitate the incorporation of culture as part of assessment, case formulation, and treatment
- Promote the use of the Cultural Formulation Interview (CFI) when providing mental health services for Hispanic and Latino populations
- Identify usefulness of cultural case formulations when working with Hispanic and Latino populations with mental health disorders



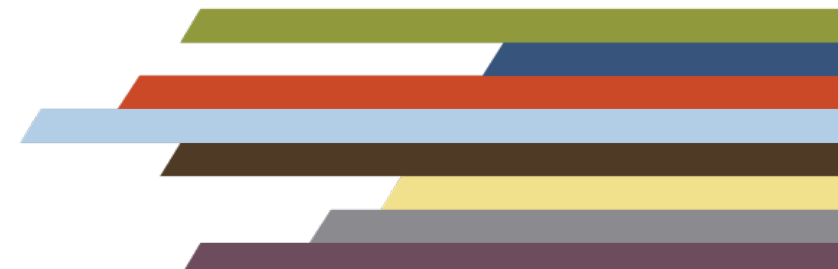
Self- Assessments

- <https://nccc.georgetown.edu/documents/ChecklistBehavioralHealth.pdf>
- https://www.samhsa.gov/sites/default/files/programs_campaigns/samhsa_hrsa/cultural-competence-self-assessment.pdf
- https://docs.ucare.org/filer_public/b8/3a/b83a12ab-281a-45a4-8eac-7806b9cc1aaa/culturalcompetenceselfassessment.pdf
- Scale of Ethnocultural Competency



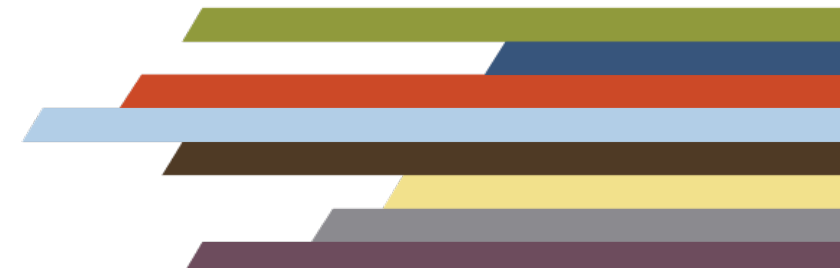
Clinical Formulation Interview

- Development



Cultural Formulation Interview

- Account for the influence of culture
- Enhance clinician-participant communication in all clinical encounters
- Improve outcomes



Culture

- Values, orientations, knowledge, and practices that individuals use to understand their experiences
- Aspects of a person's background, experience, and social contexts that may affect his or her perspective
- The influence of family, friends, and other community members (the individual's social network) on the individual's illness experience

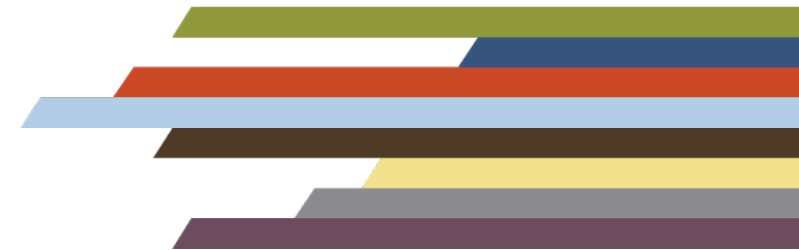
APA, 2013





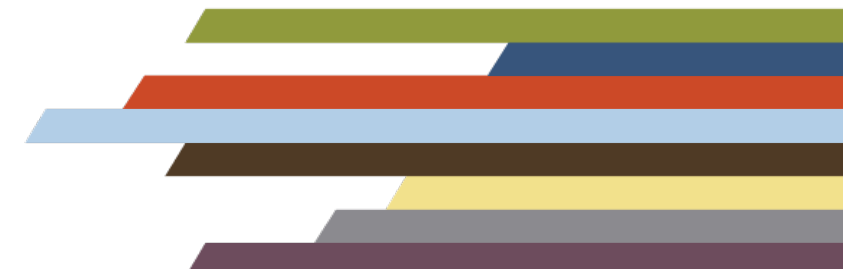
Culture may influence how we...

- Identify mental health condition
- Seek help
- Experience and prioritize symptoms
- Conceptualize treatment
- Participate in care

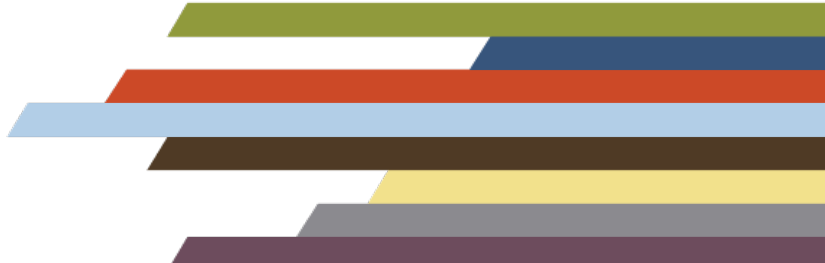


Clinical Formulation Interview

- Cultural Assessment
 - 16 questions
 - 3 versions
 - Core
 - Informant
 - Supplementary
 - Explanatory Model
 - Level of Functioning
 - Social Network
 - Psychosocial Stressors
 - Spirituality, Religion and Moral Traditions
 - Cultural Identity
 - Coping and help seeking
 - Patient-clinician relationship
 - School-aged children and adolescents
 - Older adults
 - Immigrants and refugees
 - Caregivers

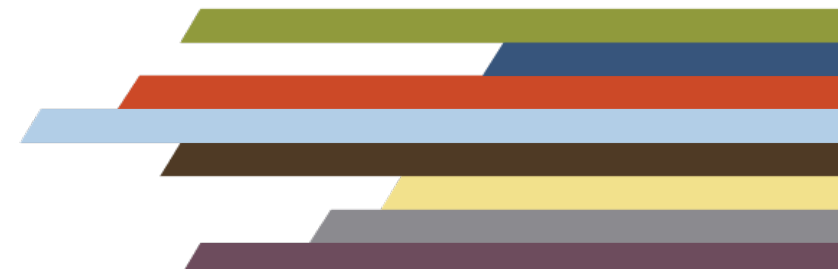


OUTLINE FOR CULTURAL FORMULATION



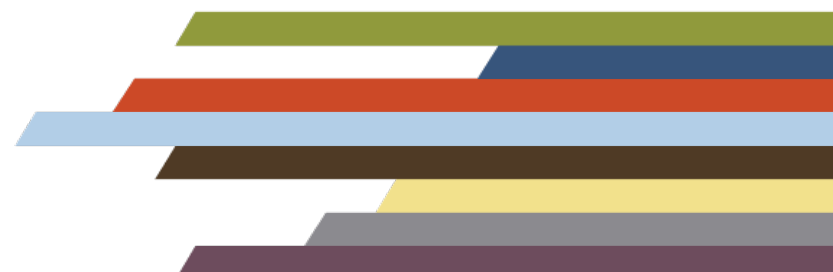
Cultural Identity of the Individual

- Should be comprehensive
- Must recognize that a person's identity may shift across time, context and expectations
- Is never one-sided
- Helps the clinician



Cultural Explanations of Illness

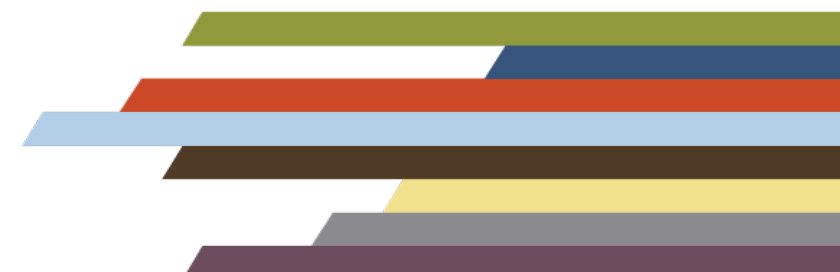
- Symptom, and severity meaning in relation to cultural norms, causes, expected course of illness, experiences with care, and treatment expectation.



Cultural Factors Related to Psychosocial Environment and Levels of Functioning

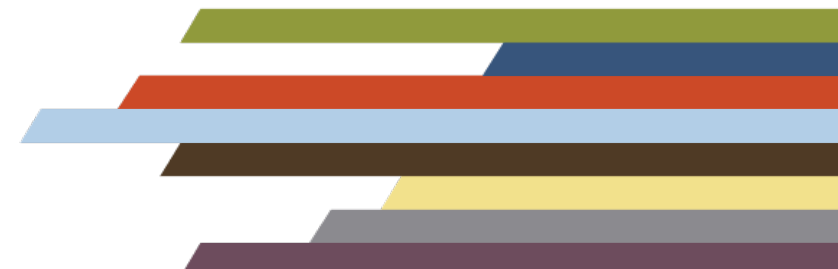


- Stressors
- Supports
- Level of functioning

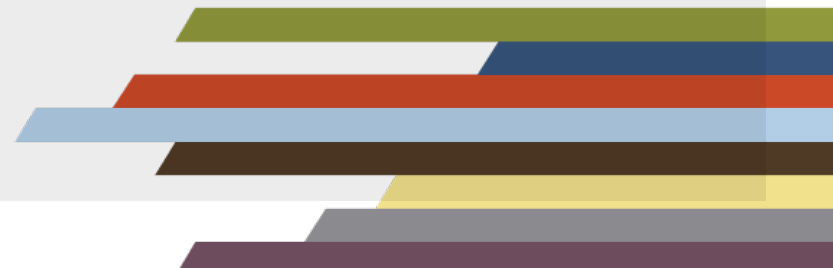


Cultural elements of the Relationship Between Individual and Clinician

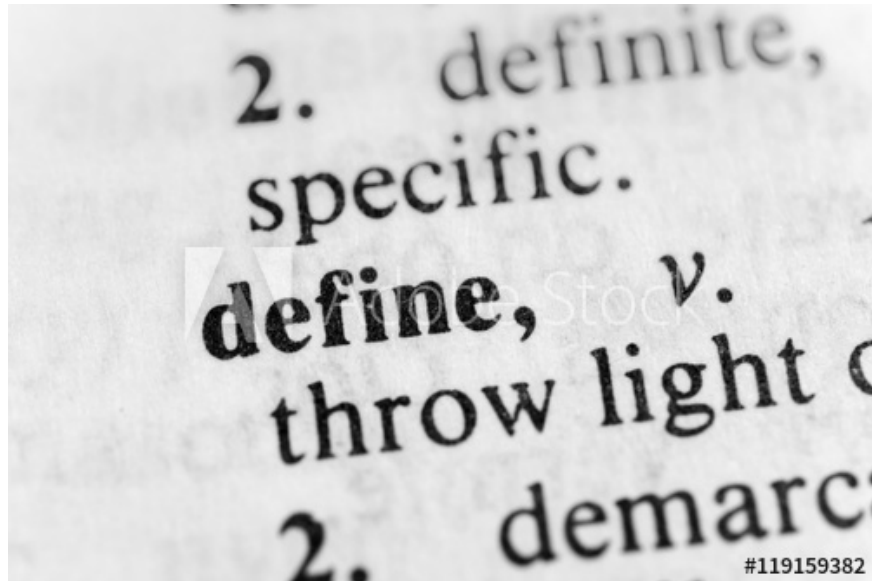
- The relationship between patient and clinician is influenced by the expectations, role definitions, and resources each bring to the encounter.



- SUPPLEMENTARY MODULES



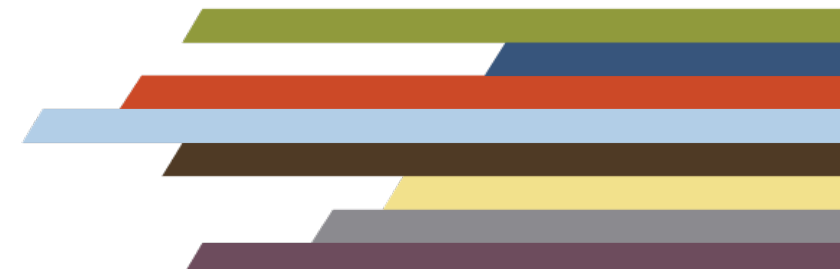
Explanatory Model



- Maximizes treatment engagement and adherence
- Increases positive expectancy
- Builds empathy and therapeutic alliance
- Addresses catastrophic cognitions
- Addresses stigma

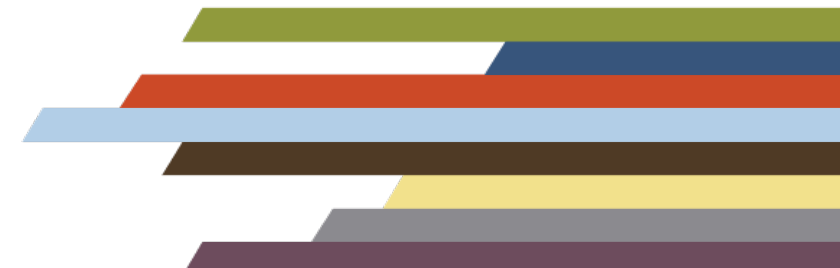
Level of functioning

- Culture and society implicitly define the value of every aspect of functioning
- Level of functioning is an important component of clinical assessment
- Can help clarify level of impairment and allows for the development of culturally sensitive interventions



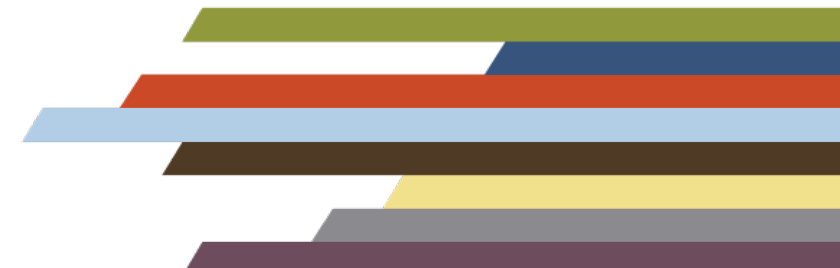
Social Network

- The level of a person's social support influences the pathways from stressful events to mental health disorders
- Exploring social networks may yield information about social supports and the person's ties to his-her cultural communities, and facilitate the development of culturally responsive approaches



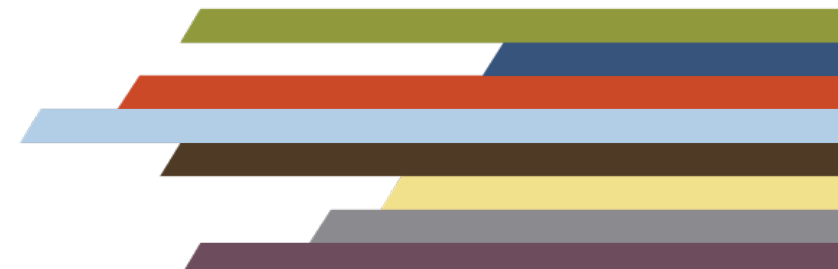
Psychosocial Stressors

- Cultural values such as individualism-collectivism continuum are central to what is experienced as stressful
- Can facilitate a better understanding about the overall situation, diagnosis and treatment planning.



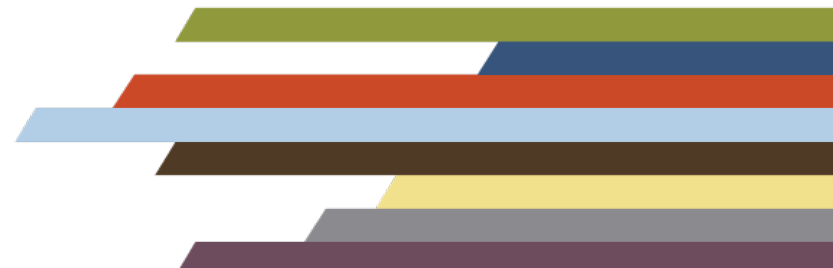
Spirituality, Religion and Moral Traditions

- Allows a patient to discuss religious, spiritual and moral beliefs, values and practices- the way these may influence treatment decision-making processes, goals, personal coping, and social resources, as well as potential sources of religious or spiritual strength or concern
- Provides a framework for exploring a person's identity, the role of spirituality, religion and moral traditions, as well as the possible relationships between these traditions and the clinical concern, and any potential stressors related to spirituality, religion, and moral traditions.



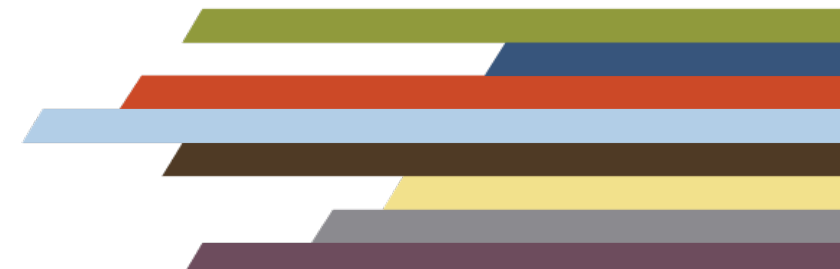
Cultural Identity

- People adopt different identities based on social relationships
- CFI and its supplementary modules contain questions to address the relevance of a person's identity to the presenting concern



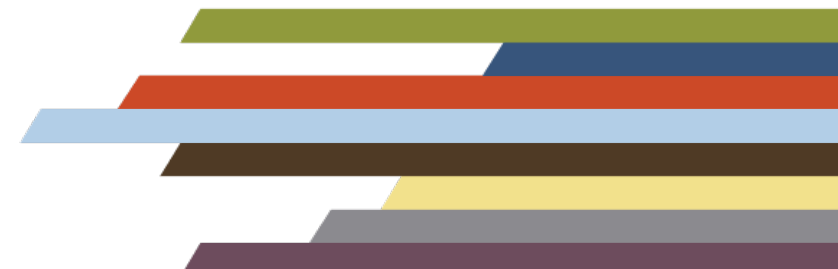
Coping and Help Seeking

- Strategies that a person may use to address difficulties
- Can reveal what has been useful for the problem, which can inform clinicians about what the person wants and expects in treatment



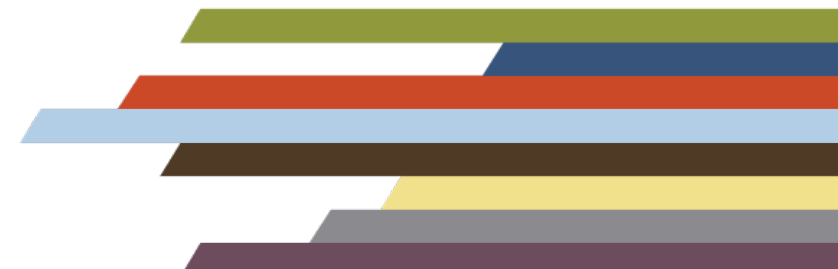
Patient-Clinician Relationship

- May promote adherence and retention
- Transference and countertransference are impacted by culture, including similarities and differences between participant and clinician
- Information in this area allows the clinician to foresee and attend to possible difficulties



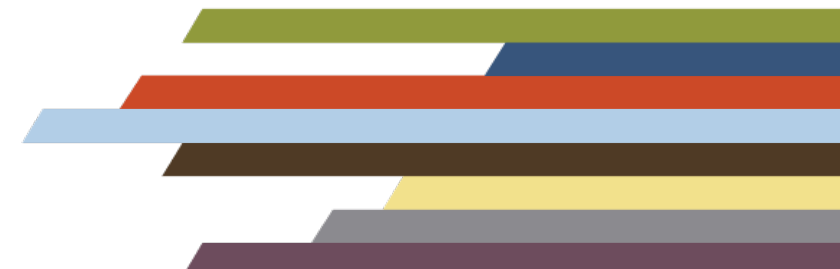
School-aged Children and Adolescents

- Should include input from family and should include other perspectives
- Through simple age-appropriate questions may help the clinician in treatment planning, and assessment



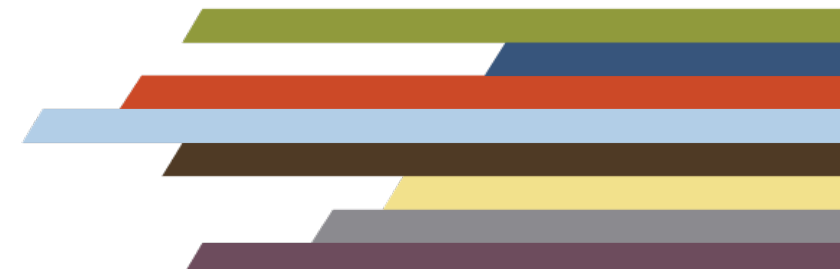
Older Adults

- Explore unique identities
- Explore medical history



Immigrants and refugees

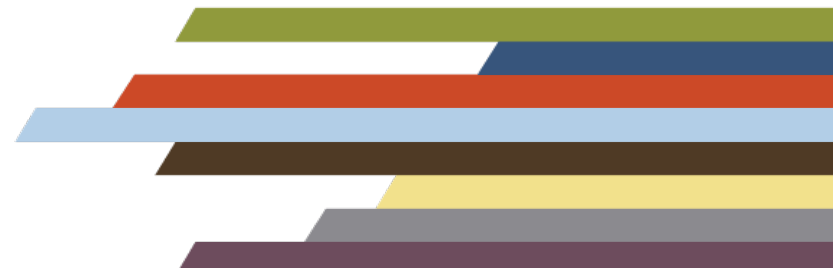
- Provides access to clinically relevant information for mental health care for migrant
- Explores premigration difficulties, exposure to violence and persecution, historical time frame of migration, migration-related losses and challenges, continued ties with country of origin, resettlement and expectations





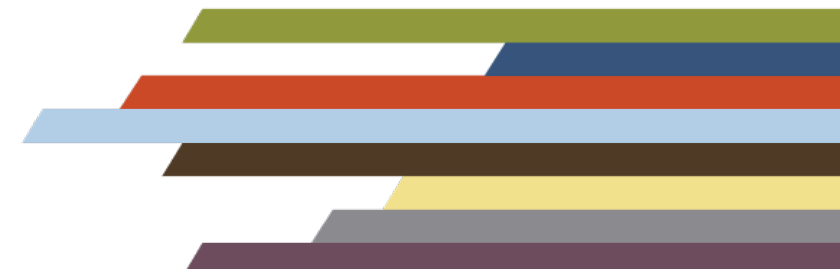
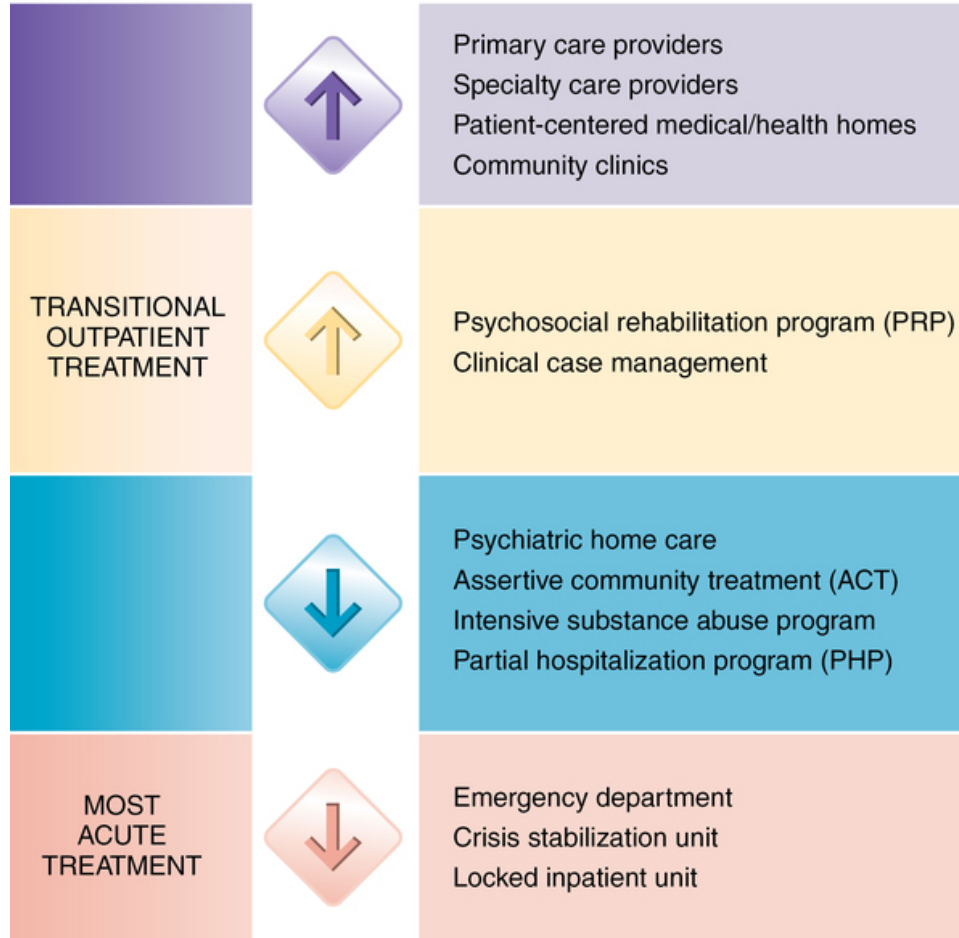
Caregivers

- Should be used in the early stages of treatment, to engage the caregiver as an active participant in treatment.



Settings

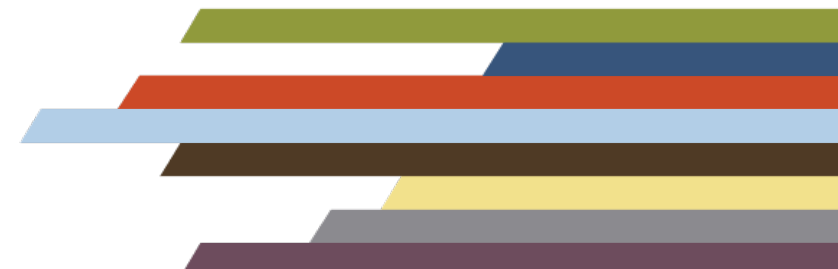
Continuum of Psychiatric Mental Health Care



Implementation Aspects

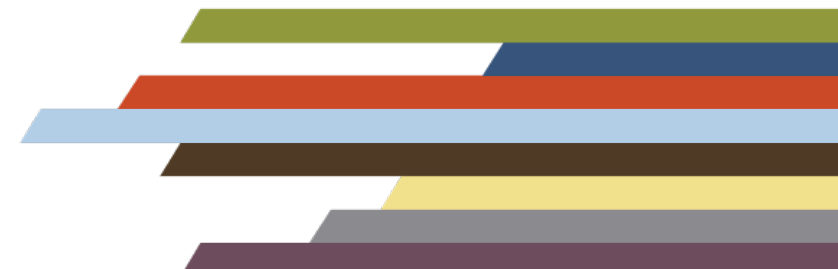
SAMHSA Resources For Peers

- Review Handouts



Demonstration of the CFI

- https://www.youtube.com/watch?time_continue=18&v=lqFrszJ6iP8





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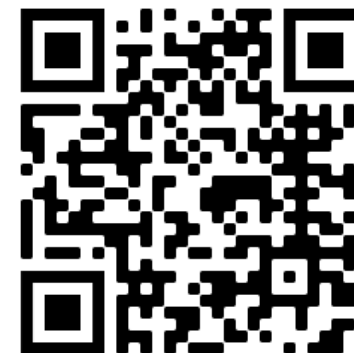
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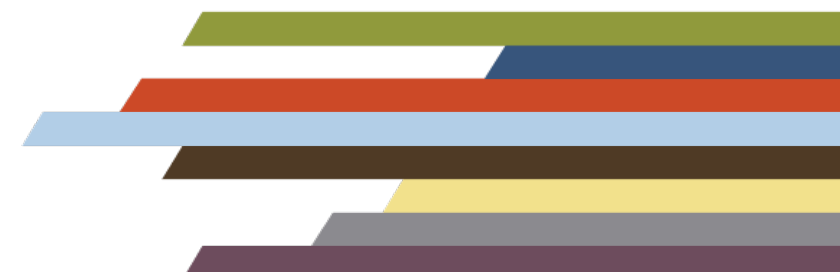


Website:

<http://www.mhttcnetwork.org/hispaniclatino/>

Email: hispaniclatino@mhttcnetwork.org

<https://www.surveymonkey.com/r/Z3DNG23>



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