Cultural Adaptations of EBPs in Treating Hispanic and Latinx with Mental Health Disorders

Session 4

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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

INVITING TO INDIVIDUALS PARTICIPATING IN THEIR OWN JOURNEYS

PERSON-FIRST AND FREE OF LABELS

NON-JUDGMENTAL AND AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR AND UNDERSTANDABLE

HEALING-CENTERED AND 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

Welcome to this Learning Community!

A learning community is a bit different than a regular webinar!

- During this four-week learning community, there will be opportunities to participate in break outs with co-attendees.
- It is expected that participants will participate verbally and, in the chat – this is what makes it a learning community!
- In addition to discussing participant cases, an in-depth case vignette and toolkit will be shared.

Objectives of this Learning Community

Goal: This collaborative will provide training on adapting Evidence Based Practices to assessment and case conceptualization in the ongoing work of attendees.

Objectives:

- Participants will understand cultural models available and their impact on treatment.
- Participants will describe assessment in the context of culture and how that impacts the therapeutic work.
- Participants will review a case vignette and discuss the application to assessment and preparing for treatment.

Today's Goal

During today's community, we will:

- Learn about Evidence Based Practices;
- Identify cultural adaptations to the EBPs;
- Apply this information to a case vignette.

Please have the case vignette handy! See the link in the chat!

Warming Up!



In breakout groups, discuss (10 minutes)

• What is one thing that you have found helpful in culturally adapting treatment in your work?

What would you like to talk about today?



Culturally Adapted Interventions

Meeting the client where they are requires an integration of the following concepts:

- Client's concept of health
- Client's concept of distress and suffering
- Client's and provider's cultural values
- Diagnosis and assessment of the provider



The Ecological Validity Model

There are eight areas in which you can adapt treatment to be more effective with ethnically diverse clients.

- Language
- Persons
- Metaphors
- Content
- Concepts
- Context
- Methods
- Goals









Choosing the EBP for Individual Interventions

- The framework and approach that is selected will depend on several factors, including the provider's previous training, philosophy of change, the fit of the treatment to the presenting problems, and client preferences.
- It will also depend on which individual, couples, or family issues/processes are deemed to be most proximal to the presenting complaints and the best place in which to intervene to help the family.
- In selecting a treatment, the provider must understand how the culture-related beliefs, worldview, and lived experiences impact each process and consider how different treatment options can address the cultural aspects.

Cultural Adaptation Issues...

The cultural adaptation of individual psychotherapy that is implemented with this client should incorporate attention to values that are often present in culturally traditional men such as:

- **Gender roles** that value the function of the man as provider and head of household, which often come into conflict with contemporary United States mainstream society ideas of gender equality;
- Notions of *respeto* (respect) that emphasize the inherent deference due to individuals in social contexts, including appropriate use of the formal pronoun when speaking in Spanish, and the transition to the familiar pronoun to signal a deepening of intimacy.
- Respect may be breached (falta de respeto) by interpersonal exchanges that are considered inappropriate or offensive by the aggrieved party, including unintentional slights, leading to a deep sense of umbrage and possible relational ruptures;

(continued on next slide)

Cultural Issues Continued...

Other potential cultural issues:

- The importance of personalismo (priority given to personal over institutional connections, even in professional relationships) that often depends on expressions of warmth and caring from providers; and
- The function of familismo (family orientation emphasizing the well-being of the collective over that of the individual) given Carlos' commitment to providing financial support to his elderly parents.

Considering the Ramirez Family...

- 1. What role do early experiences, migration history, family dynamics, cultural patterns of expressing distress, and adherence to specific values play in the presenting symptoms (e.g., exacerbating or buffering the stressors and reactions)?
- 2. Given the long-standing mental health and substance use issues that have emerged from the assessment, what psychotherapeutic modalities would be clinically indicated for Carlos and the rest of the family?

Motivational Interviewing Elements

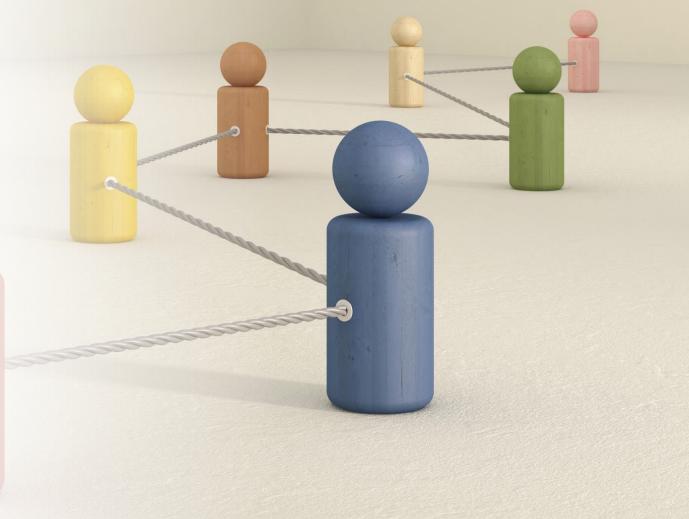
From a relational standpoint, the MI spirit consists of four interconnected elements:

- Collaboration (two individuals working together towards a common goal);
- Acceptance (viewing the client's situation non-judgmentally and empathically);
- Compassion (working in the best interest of the client); and
- Evocation (strengthening motivation for change) (Atkinson & Earnshaw, 2020).

How might you use MI with the Ramirez Family?

Application to the Ramirez Family

The interconnected elements of Motivational Interviewing can provide a relational foundation during the cultural adaptation process to address acculturative conflicts that have led to role reversal, feelings of isolation, and difficulty in communicating effectively with family members.



Considering the Ramirez Family.....

- 1. What short- and long-term interventions would best serve the family?
- 2. How will progress in the treatment goals be measured?
- 3. What criteria (e.g., need for community-based supports) will be used to assess readiness to conclude the treatment?

Individual Interventions for the Ramirez Family....MI



Culturally adapted MI has been found efficacious in reducing drinking behavior among men of Latinx descent (Lee at al., 2013; Valdez et al., 2018) and in enhancing adherence and retention in antidepressant therapy among depressed Latinx outpatients (Interian et al., 2013; Lewis-Fernández et al., 2013).



Areas to consider and explore with Carlos are the social-contextual influences that may play a prominent role in his life and how these are interconnected with the struggles he is experiencing in his relationship with his wife and children, his unemployment, loss of social support, and drinking behavior (Singer, 1992).



Motivational Interviewing is uniquely designed to value and elicit a client's own values and motivations to change.

Motivational Interviewing....

- Carlos expressed intense ambivalence about engaging in the therapeutic process.
- From an MI perspective, assessing for adherence to culturally patterned values and views can enhance the therapeutic alliance and the person's intrinsic motivation to change.
- As such, the appropriate use of the relational (MI spirit) and technical elements (open questions, affirmations, reflections, and summary statements) of MI can go a long way in developing the necessary therapeutic relationship that will allow for a deeper exploration into the concerns that have been articulated at intake (Paris & Martino, 2018).



CBT can be culturally adapted by attending to:

Cognitive Behavioral Therapy Adaptations

- (a) awareness of cultural knowledge (e.g., culture, religion, spirituality, language);
- (b) assessment of the client's beliefs (e.g., interpretation of cognitive errors and dysfunctional views);
- (c) effective engagement strategies (e.g., use of MI); and
- (d) adjustment to the therapy process (e.g., use of stories and sayings (*dichos*), therapy style, use of homework, explanation of the cognitive model, selection of therapy techniques) (Naeem et al., 2019).

Individual Interventions for Working with the Ramirez Family....CBT

- There is evidence to suggest that Carlos may be experiencing a co-occurring Alcohol Use Disorder (AUD) and PTSD.
- Other recent meta-analyses and systematic reviews have found culturally adapted CBT interventions to be more effective than non-adapted interventions for Latinx communities (Escobar & Gorey, 2018; Nelson et al., 2020; Pineros-Leano et al., 2017). T
- His treatment approach is time limited, evidence-based, cost-effective, tailored to the individual's needs, and focused (Naeem et al., 2019).



CBT Adaptations

Organista (2019) provides additional guidance on how to adapt CBT for Latinx communities, including:

- (a) use a traditional Latinx relationship protocol to engage clients;
- (b) engage in pretherapy orientation; and
- (c) recognize and address the values underlying CBT as well as traditional Latinx culture.

How might you do this with Carlos?

Working with Carlos

In the case of Carlos, the primary focus is to help identify, evaluate, and reframe some of the core beliefs and automatic thoughts that may be interfering with his ability to lead a self-actualized life.

As CBT is culturally adapted to support Carlos in processing his thoughts, it is important to frame these in the context of the cultural values he may adhere to and his unique lived experiences (e.g., migration history, acculturative stressors).

What might you add?

Couples and Family Therapies



Deciding on an appropriate intervention...

There are also significant *relational issues* that have emerged in the couple and in the larger family that include the children.

To consider:

Did relationship issues exist before the individual symptoms and contributed to their emergence and maintenance, or are the relational issues are simply a consequence of Carlos' symptoms and difficulties?

Couple's therapy works under the assumption that the stress in the couple's relationship (and the protective factors that are being weakened by the conflict) are contributing significantly to both partners' emotional suffering and specifically to Carlos' behaviors and symptoms. Are Carlos' controlling and aggressive behaviors potential precursors to domestic violence?

By addressing the stress and emotional injuries, and by mobilizing the positive factors in the couple, the symptoms may be significantly improved.

Integrative Behavioral Couple's Therapy

Integrative Behavioral Couple's Therapy (IBCT) has worked on enhancing the

(IBCT) has worked on enhancing the traditional approach (Christenson & Doss, 2017).

IBCT uses the acronym DEEP to represent work on:

- (a) <u>D</u>ifferences between partners in personality, interests, and goals;
- (b) Emotional sensitivities or vulnerabilities;

(c) External circumstances such as that may highlight or exacerbate existing issues in the couple, and

(d) <u>Pattern of Interaction that may be</u> maladaptive and rigid when couples are distressed.

Considerations with the Ramirez Family

The adolescents are feeling conflicted about loyalty commitments and are taking opposite sides in the argument; Antonio is feeling pressure to jump in to defend his mother, which would be a dangerous development, especially when alcohol is involved;

At least one of the adolescents is feeling a sense of loss and a desire to return to their home country;

Both adolescents are coping with the worry that the parents may separate or divorce, also raising a lot of anxiety; and

Difficulties have emerged at school, prompting a counselor to contact the parents.

How might you address these issues?

Multidimensional Family Therapy

Multidimensional Family Therapy (MDFT) is one of the best-known and empirically established interventions that include adults and adolescent clients (Liddle, 2016). Although the focus is often primarily on adolescent symptoms, MDFT addresses symptoms in all family members and, most importantly, on the underlying family interactions that impact multiple symptoms.



Applying MDFT

MDFT is a multicomponent therapy that provides individual work with adolescents and adults (e.g., establishing goals, improving parenting, strengthening self-esteem) and family work (e.g., improving communication, repairing ruptured relationships). The focus is on changing family processes that can either trigger and maintain symptoms or on enhancing family processes that promote well-being.

What process change would be most impactful for the Ramirez family?

Benefits of Systemic (Couple's and Family) Therapy

Disadvantages of Systemic (Couple's and Family) Therapy

- Facilitates the detection of systemic/contextual triggers (e.g., discrimination, racism) for the presenting symptoms
- Allows enhancement of contextual protective and resiliency factors (e.g., familism, religiosity) that can buffer individuals from stressors
- Can help identify family-level values and worldviews that impact distress in one member
- Can enhance family member acceptance and validation of the struggling individual client
- Having family in the therapy room facilitates a more complete evaluation of the conflict and negativity at home
- Provider can work DIRECTLY and "in-vivo" on communication, conflict, relationships, and boundaries
- Having multiple members in treatment makes it easier to see distortions by one family member
- Can assess negative impact of one person's behavior on children and other family members and mitigate the impact

- It takes considerable training to effectively handle negativity and conflict that emerge in the therapy room
- It is difficult to juggle therapeutic alliances with multiple family members
- It is more difficult to give 1:1 time to focus on an individual family member's concerns
- Some very sensitive feelings or thoughts might not be expressed in front of other family members
- Engagement and scheduling of multiple family members, some of whom may be reluctant to attend, is a complex task
- Confidentiality can be more difficult to maintain
- It may be more difficult to select a client agenda that will guide treatment
- It may be more challenging to explain why couples or family therapy is optimal for a problem presented as an individual's problem

Your Thoughts?

 What factors within the Ramirez family might influence your choice of interventions?

• Which EBP do you feel would be more, or less effective?

You made it!

Thank you for attending! Don't forget your survey!

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