CHEMICAL DEPENDENCY COUNSELING AND THE HISPANIC/LATINO CLIENT

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CLUES - Comunidades Latinas Unidas En Servicio

ASK YOURSELF…

• What are my attitudes towards the Latino community?
• Am I comfortable around Latinos?
• Am I familiar with terms preferred by Latinos that are unbiased and inclusive?
• Do I understand the issues that Latinos face in the workplace and community?
• Am I aware of the diversity within the Latino culture?
• Can I openly disagree with a racist comment made in my presence about Latinos?

STEREOTYPES

• Illegal
• Criminals
• Unemployed
• Government Assistance
• Taking American jobs
• Gangs
• Wetbacks
• Women Sexualized
WHO ARE THEY?

- U.S. Census Bureau uses the terms “Hispanic” and “Latino” interchangeably to identify persons of Mexican, Puerto Rican, Cuban, Central and South American, Dominican, and Spanish descent.
- “Latino” is not a race; the term relates to a culture. Latinos may be of any race.
- Mestizo or Mulatto

WHERE ARE THEY IN THE US?

- Largest and fastest growing minority in the country
- Commonwealth of Puerto Rico
- Number of states in which Hispanics are the largest minority group: Arizona, California, Colorado, Connecticut, Florida, Idaho, Iowa, Kansas, Massachusetts, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, Oregon, Rhode Island, Texas, Utah, Vermont, Washington, and Wyoming.

DEMOGRAPHICS

- Latinos make up 17.4% of the total U.S. population.
- Census projection indicates that the Latino population will double from 17% of today to 29% by 2060.
  - Mexican American – 55.2%
  - Central and South Americans – 14.3%
  - Puerto Ricans – 9.6%
  - Cubans – 4.3%
  - Other Latinos 6.8%
**LANGUAGE**

- Spanish is most common language
- Regional Spanish dialects
- Other languages spoken in Latin America:
  - Portuguese
  - French
  - Arabic
  - Indian
  - English
  - Chinese
  - Creole
  - Dutch
  - Native Indian Dialects
  - Others: Spanglish

**DIFFERENCES AMONG LATINOS**

- Languages
- Customs
- Physical Features
- S.E.S
- Sports
- Sexual orientation
- Politics

**HISPANIC/LATINO CULTURE: FAMILY**

- Family is extremely important and concept of family extends beyond immediate familial blood relationships
  - Grandparents, Aunts/Uncles, Cousins, Friends, Godfathers, Half Brothers, etc.
  
- Sharing food is an important family past-time and bonding experience ("carne asadas")
HISPANIC/LATINO CULTURE: FAMILY ROLES

• Typically, men are head of the house and the breadwinners
• Women are homemakers: cook, clean, educate children
  • Due to economic stress, more Hispanic women are starting to work outside the home
• Children typically live with parents until marriage however many who have immigrated left home at a young age
• It’s not unusual for the extended family to live under one roof

HISPANIC/LATINO CULTURE: VALUES

• Personalismo: personalizing: valuing people and having close relationships with relatives and friends.
  • Sharing food is important connection point
  • BBQ’s, family gatherings
• Relationships are of integral importance in this community and create a sense of belonging and self

• Sympatía: sympathy: avoiding conflict and striving for harmonious relationships
  • Avoid conflict especially with those of authority
  • Fear of authority/law: passive and compliant
  • In most cases authority figures are not questioned however response to authority may vary according to the person’s experience with corruption.
HISPANIC/LATINO CULTURE: VALUES

- **Machismo**: men taking responsibility, providing for and bringing honor to the family ("The Alpha Male","Male Pride")
  - Sense of pride and accomplishment
  - The Patriarch
  - "Macho" has changed throughout generations
  - Confrontational approaches should be done with tact and respectfully, do not "Attack".

HISPANIC/LATINO CULTURE: VALUES

- **Marianismo**: the veneration for feminine virtues like purity and moral strength. The ideas within marianismo include those of feminine passivity and sexual purity. There is power in marianismo that stems from the female ability to produce life.

HISPANIC/LATINO CULTURE: VALUES

- **Familismo**: strong identification with family, including extended family and friends
  - Share money, time, food, resources without question
  - "What's mine is yours" mentality
HISPANIC/LATINO CULTURE: VALUES

- **Respeto**: respect to parents, elders, teachers, doctors and others in authority
  - Important to show respect in return

PERSONAL SPACE/ ETIQUETTE

- Personal space is much closer in the Latino culture
- Shaking hands, kissing on the cheek, hugging is part of greetings
- Conversations are generally loud, fast and adorned with gestures - touching is not uncommon
- More relaxed and flexible about time and punctuality
- Not being on time is a socially accepted behavior

RELIGION/SPRITUALITY

- 90% of Spanish-speakers are Roman Catholic
- Traditional Catholic values that children are not allowed to question
- Fear of “higher power”
- Confusion between religion and spirituality
- History of herbs, roots and ointment - traditional remedies
RELIGION/SPIRITUALITY

- Cuba, Dominican Republic and Puerto Rico – Santeria, Santero
- Brazil - Candomble
- Mexico and South America – Curandero
- Guatemala – Good Mashimo and Bad Mashimo

CULTURE, MUSIC AND ART

- Salsa, Merengue, Bachata, Vallenato, Punta, Ranchera, Mariachi, Tango, Samba, Bosa-Nova, Latin Hip Hop and Latin Pop.
- Literature: Julia Alverez, Sandra Cisneros, Isabelle Allende, Paulo Coelho.
- Instruments: Percussion, Marimbas etc.
- Latino Television: Univision, Telemundo

CULTURAL VIEWS ON SUBSTANCE USE

- Use of alcohol is common in all areas of culture—celebration, mourning, athletics
- More alcohol you consume, more “manly”/macho you are
- Women hide addictions; very shameful for women to drink (this depends on country of origin)
- Marijuana is not considered harmful
- Stigma to admit drug use (“eres un adicto.”)
SUBSTANCE USE IN THE HISPANIC COMMUNITY

- Alcohol is main substance of abuse/dependency
- Marijuana and cocaine are most common illicit drug choices
- Latina females use illegal drugs at younger age than males
- Compared to other racial groups, Hispanics are second in terms of use of alcohol and binge drinking

SUBSTANCE USE IN THE HISPANIC COMMUNITY

- There are cases where previous gang affiliation is root of use. In 2009 47% of gang members in the US were Latinos.
- Gang membership facilitates drug use in those individuals who were already abusing drugs before becoming a member, and the vast majority of gang members in general use drugs.

CULTURAL RISK FACTORS FOR CHEMICAL HEALTH ISSUES

- Leaving family behind—separation
- Immigration problems/anxieties
  - Exile from Civil Wars (Guatemala, El Salvador)
  - Posttraumatic Stress Disorder
- Structural changes to families once they come to the US
  - Language skills and level of acculturation
- Acculturative Stress:
  - Anxiety
  - Depression
  - Confusion
  - Interpersonal Difficulties
**STATISTICS**

- Latinos are 3 times more likely than non-Latino whites to live below poverty level.
- Less than 50% of all Latinos hold a high school diploma. Less than 12% have graduated from college.
- Latinos make up 40% of those convicted of federal crimes. 37% of those convictions are drug related.
- In 2009, the Latina rate of HIV infection more than four times the rate for white women.
- The rate of new infections among Latino men was two and a half times as high as the rate for white men.

**CULTURAL RISK FACTORS FOR CHEMICAL HEALTH ISSUES**

- Pressure on men to meet financial expectations
- Limited ability to be independent in foreign country
- Isolation of women- in home, away from family
- Role of women: co-dependency

**CULTURAL BARRIERS TO CARE**

- “El Loco”- the crazy
  - Negative stigma
- “El Criminal”- the criminal
- Children do not suffer MI
- Bad and sinful people get sick
- Legal status
- Financial resources
- Insurance coverage
CHALLENGES OF WORKING WITH HISPANIC/LATINO CLIENTS

• View on Authority
  • Counselor as teacher
  • Counselor as authority figure
  • Counselor as advice-giver
  • Counselor as “law”

CHALLENGES OF WORKING WITH HISPANIC/LATINO CLIENTS

 Religious Beliefs
  • Unwavering beliefs
  • Clients DO NOT challenge beliefs and/or religion
  • “God” is cure
  • Regularity of religious practices are important indicator
  • May be shameful if they don’t attend often

CHALLENGES OF WORKING WITH HISPANIC/LATINO CLIENTS

• Economic/Employment Issues
  • Seasonal workers and need to work during these times to make money for family (summer)
  • Send money back to family- motivation to work long, hard hours
  • Pride in making money and supporting family
  • Often put employment over treatment
  • Exploitation
CHALLENGES OF WORKING WITH HISPANIC/LATINO CLIENTS

• Limited Access to Health Insurance/Care
• Unable to navigate medical system
• Lack of funds to pay for health care
• Fear of being reported to INS
• Limited access to health education/prevention programs
• Limited resources in MN

CHALLENGES OF WORKING WITH HISPANIC/LATINO CLIENTS

• Fear of the treatment process
  • Treatment centers in other countries use shaming methods, religion or other themes that are “fear” or “shame” driven
  • Don’t trust counselor will not use violence or threats
  • First day, clients are extremely anxious
  • Treatment as a last resort- after family, social network and natural remedies are exhausted

Hogares Crea (Puerto Rico)  Los anexos
CULTURALLY SENSITIVE PRACTICES: CLINICAL IMPLICATIONS FOR PRACTITIONERS

• Trust is imperative to build strong practitioner-client relationship
  • Need to form relationship with client before providing information
  • Not trusting of the system - give clear orientation and explanation of treatment process
  • Listen and ask questions
  • Group setting - need time to get to know other participants before sharing personal information

CULTURALLY SENSITIVE PRACTICES: CLINICAL IMPLICATIONS FOR PRACTITIONERS

• SENSITIVITY and UNDERSTANDING
  • Understand client’s background, immigration status, family history, social support
  • Comprehensive diagnostic assessment is imperative - include culturally-focused questions (childhood abuse/trauma, exposure to community/civil violence, separation of family)

CULTURALLY SENSITIVE PRACTICES: CLINICAL IMPLICATIONS FOR

• DSM 5 Other Specified Anxiety Disorder 300.00 (F41.9)
  Ataque de nervios (attack of nerves):
  May involve trembling, uncontrollable screaming or crying, aggressive suicidal behavior, depersonalization or derealization – Can last several minutes.
**CULTURALLY SENSITIVE PRACTICES: CLINICAL IMPLICATIONS FOR PRACTITIONERS**

• **Professionalism vs. Formalism**
  - Maintain professional boundaries without being formal
  - Personalismo
  - “Dress it down”

• **Collectivism in Group and Individual Therapy**
  - Shared experiences among a group
  - Group goals can reinforce individual goals
  - Don’t want to disappoint group members - feel responsible to other members
  - Gain trust of counselor and group members

• **Language Barriers**
  - Focus on meaning and interpretation of behavior (Gestalt)
  - Body language, eye contact, behavior
  - Some behaviors may be culture-specific
  - Using interpreter is not the same as fully understanding client’s language, background and cultural needs/issues

• **Legal Implications**
  - Understand immigration process and fears
  - Clients may have
  - Clients are unaware of U.S. legal process
  - Arrest, probation, parole, violation etc.
  - Laws are not the same in their countries
  - Lack of understanding of why they were arrested
  - Can be misinterpreted as resistance or non-compliance
CULTURALLY SENSITIVE PRACTICES:
RECOMMENDED INTERVENTIONS

• Integration of the 12 steps
• Education is key
• Lack of knowledge on the 12 steps and their purpose
• Spirituality and Religiosity
• Very set in views - be careful to not offend
• Inventory and admitting nature of wrongs can be difficult
• Shame (Machismo is Barrier)
• 12 step group participation increases chances of success
• Collectivism

Become very attached to group

CULTURALLY SENSITIVE PRACTICES:
RECOMMENDED INTERVENTIONS

• Integration of the 12 steps
• AA Spiritual Principles as guide
  • Honestidad (Honesty)
  • Esperanza (Hope)
  • Fe (Faith)
  • Coraje (Courage)
  • Integridad (Integrity)
  • Voluntad (Willingness)
  • Humildad (Humility)
  • Amor (Brotherly love)
  • Justicia (Justice)
  • Perseverancia (Perseverance)
  • Espiritualidad (Spirituality)
  • Servicio (Service)

CULTURALLY SENSITIVE PRACTICES:
RECOMMENDED STRATEGIES FOR PRACTITIONERS

• Family Systems
• Family Involvement
  • Latino clients have better tx compliance, participation and outcome if family is involved and supportive of program and recovery
  • Verify if client has family here and country of origin first.
  • Family education on addiction, co-dependency, community resources, and supportive recovery environment
  • BE AWARE OF OWN VALUES: clients may have two families.
CULTURALLY SENSITIVE PRACTICES: RECOMMENDED STRATEGIES FOR PRACTITIONERS

• Emphasize Confidentiality
  • Combat fears of breaking family trust
  • Reiterate purpose of ROI and what information can be released
  • Group confidentiality and client-counselor confidentiality is imperative to gain trust
  • Confidentiality of immigration status
  • Social security numbers, legal names

• Involve local communities and resources
  • Clients are unaware of access to resources and often don’t initiate contact
  • Families, churches, clinics
  • Collaborate with systems in which client is already involved
    • Church groups, employment, probation, CPS

Agency for Bilingual MH and CD in Twin Cities
http://www.clues.org

CULTURALLY SENSITIVE PRACTICES: RECOMMENDED STRATEGIES FOR PRACTITIONERS

• Use cultural values to focus on strengths/weaknesses and impact of use on self and others
  • Familismo: How is your use affecting family? How is it helping/hurting them?
  • Machismo: Focus on strength of this value-importance of being male role model
  • Respeto: For others and for self. Talk about boundaries.
CULTURALLY SENSITIVE PRACTICES: RECOMMENDED STRATEGIES FOR PRACTITIONERS

• Avoid over-generalization  
  • Inter-cultural differences  
  • Knowing one is NOT knowing all  
  • Understand possible conflicts between cultures

CULTURALLY SENSITIVE PRACTICES: RECOMMENDED INTERVENTIONS

• Cognitive-Behavioral Approach  
• Solution-Focused  
• Narrative  
• Motivational Interviewing  
• Psychodynamics/Psychoanalysis

CULTURALLY SENSITIVE PRACTICES: RECOMMENDED INTERVENTIONS

• Psycho-educational  
  • Helpful for recent immigrants or those who have little to no education on addiction  
  • Concept of addiction as a disease  
  • Group setting offers a collaborative effort and understanding  
  • Help client feel comfortable asking questions and sharing history  
  • Education on nutrition  
  (Some native foods may be high in fat and salt)
CULTURALLY SENSITIVE PRACTICES: RECOMMENDED INTERVENTIONS

- Attention to Psychosomatic Symptoms
  - Headaches, stomach aches
  - MI can manifest as psychosomatic symptoms
  - Be aware of identification of symptoms during assessment process
  - “Nervios” - about legal issues, immigration issues, assessment/treatment process
  - Address and acknowledge if client believes he is cursed or has a “bad spirit” affecting him
  - Make appropriate referrals

CULTURALLY SENSITIVE PRACTICES: RECOMMENDED INTERVENTIONS

- Explore underlying emotion that maintain addictive behaviors
  - Depression, anxiety, fear, shame
  - Cultural Risk Factors: separation, “nostalgia”, acculturation
  - Referral to mental health to deal with negative emotions

CLUES SPANISH OUTPATIENT TREATMENT PROGRAM

- Closed Groups
- 13 week program
- Holistic Approach
- New Curriculum
  - Latino Cultural Values
  - Acculturation Stress
  - Depression and Anxiety
  - Biocultural Dimension
  - Affect Regulation
  - Trauma
  - Biology of addiction
  - Psycho emotional in additions
  - Social environment: Family, Friends and Others
  - Strengths
  - Relapse prevention
  - Healthy Living
THANK YOU!