Culturally Modified Trauma-Focused Cognitive Behavioral Therapy for Latino Children and Families

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Objectives

Participants will:

1. Learn about CM-TF-CBT as a cultural adaptation of TF-CBT
2. Improve cultural relevance of TF-CBT implementation with Latino families
3. Identify cultural enhancements to the trauma assessment process
4. Identify cultural modifications to enrich implementation of PRACTICE components
5. Learn about resources to use with Latino families
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Trauma and Latino Families

- Standard treatment interventions may not be sufficient
- More likely to experience traumatic events
  - Including events not traditionally assessed
- More likely to exhibit greater mental health problems
  - Environmental stressors including poverty, immigration, acculturation
- Less likely to access mental health treatment
  - More likely to prematurely terminate treatment
  - Lack of culturally competent therapists is a barrier
Trauma and Latino Families (continued)

- Differences in views of stress and coping
- Differences in manifestation of trauma symptoms
  - Somatic symptoms
  - Culture-bound syndromes (e.g., ataque de nervios)
Mental Health Engagement

- Treatment adherence, completion, and satisfaction have been linked to cultural issues in treatments
  - Premature termination more likely when:
    - Therapist is viewed as cold and distant by a Latino client (Paniagua, 1994)
    - Cultural constructs are not integrated in treatment (Sonkin, 1995)

- Goal: To increase engagement by increasing treatment relevance to the child and family
Tailoring Treatment to be More Culturally Relevant

- Assess, not assume, cultural beliefs and practices (heterogeneity)
- Use both formal and informal assessment
- Assess the child and family members
  - Be alert to discrepancies
- Assess child and family’s views of presenting problems
- Integrate culture throughout treatment
- Maintain treatment fidelity
TF-CBT PRACTICE Components

- Psychoeducation and parenting skills
- Relaxation
- Effective expression and modulation
- Cognitive coping and processing
- Trauma narrative development & processing
- \textit{n vivo} mastery of trauma reminders
- Joint child-parent sessions
- Enhancing future safety and development

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PRÁCTICA

Psicoeducación

Entrenamiento de adres

Relajación
elajación

Modulación efectiva

Procesamiento cognitivo

Narración raumático

Exposición (In) En-vivo

Sesión conjunta

Aumentar Seguridad
Culturally Modified Trauma Focused Cognitive Behavioral Therapy (CM TF-CBT)

- Developed for Latino children and families
- Based on:
  - Clinical work with recently immigrated Mexican and Mexican-American families
  - Research (Literature and studies – Focus groups, HFS, COPE)
  - Theoretical Literature (Psychology, Sociology, Anthropology)
CM TF-CBT Clinical Evaluations and Research Outcomes

- Positive clinical evaluation results
  - Reductions in behavioral and emotional symptoms
  - High client satisfaction
  - Less client drop-out
  - Improved engagement

- Positive systemic results
  - Increased referrals from previous families and service agencies

- Implemented at various NCTSN sites
Screening and Assessment in TF-CBT

- Has child experienced one or more event that was traumatic to the child?
  - Conduct thorough trauma history
  - Is child exhibiting trauma-related symptoms?
  - Use of standardized measures (UCLA PTSD Index for Children or Parent Version)
- Caregiver and other collateral reports
- Clinical observation
- Is child currently stable enough and in a stable enough environment to engage in treatment?
- Who may be an appropriate caregiver to include in treatment?
Culturally Modified Assessment: Supplemental Assessment

- Immigration History
- Migration History
- Preferred Language(s)
- Acculturation – for all family members
- Beliefs about mental health and mental health treatment
- Include all those with input into child rearing

Cultural Constructs
- Gender Roles
- Spirituality
- Folk Beliefs
- Personalismo
- Simpatía
- Fatalismo
- Familismo
Cultural Constructs Matching Game

1. **Familismo**
   - Tendency to emulate the Virgin Mary; expectation for women to be strong, morally superior, and self-sacrificing

2. **Personalismo**
   - Valuing and building warm interpersonal relationships

3. **Respeto**
   - Tendency to “take it as it comes” or as God intends it

4. **Simpatía**
   - Preference for maintaining a close connection to the family; collectivist worldview with shared sense of responsibility

5. **Marianismo**
   - The interrelationship between religion, spirituality, and faith

6. **Machismo**
   - Setting clear boundaries in relationships inside and outside the family

7. **Espiritualismo**
   - A man’s responsibility to provide for, protect, and defend his family

8. **Fatalismo**
   - The need for social behaviors that promote pleasant social situations
Culturally Modified Assessment: Recommended Instruments

- Multiphasic Assessment of Cultural Constructs (Cuellar et al., 1995)
- Acculturation Rating Scale for Mexican Americans – II (Cuellar et al., 1995)
- Spirituality and Religion Survey (Somlai et al., 1996)
- Children’s Somatization Inventory (Walker & Garber, 1992)
Integrating Assessment Results into Treatment Intervention

- Help family to identify problems that are most concerning to them
- Meet the family where they are at
- Select an intervention(s) most appropriate for the child and family based on the assessment
- Target symptoms that are most concerning and monitor throughout treatment
- Tailor intervention to address cultural beliefs and practices that may impact treatment progress
Engagement Strategies

- Establish trust
  - Barriers
    - Lack of experience or negative experiences with mental health providers or other systems
    - Shame
    - Fear/mistrust of agencies/institutions
    - Immigration concerns

- Use of personalismo

- Respeto and simpatía
Integrating Cultural Constructs

- Child-rearing practices
- Family focus (*familismo*)
- Religious beliefs and practices/spirituality
- Beliefs about sex
- Gender roles (*machismo, marianismo*)
- Views of mental health and mental health treatment
- Complementary medicine/folk healers/home remedies
- Interpersonal variables
  - Interpersonal style/*personalismo*
  - Respect/*respeto*
- Language
TF-CBT PRACTICE
Components

Psychoeducation and parenting skills
Relaxation
Affective expression and modulation
Cognitive coping and processing
Trauma narrative development & processing
In vivo mastery of trauma reminders
Conjoint child-parent sessions
Enhancing future safety and development
Cultural Modifications to Psychoeducation

- Tailor Psychoeducation
  - Information specific about cultural group
  - Prevalence, consequences, treatment information

- General mental health and mental health treatment
  - Family may have limited familiarity and may need a more comprehensive description
  - What is a therapist? What is therapy? How long does it last? What is the role of caregivers?
  - Address any myths/misconceptions about therapy

- Explore family’s beliefs about causes of trauma and symptoms and use of any folk healing practices

- Explore family’s views on talking about trauma and/or sexuality

- Address fatalismo as possible barrier
  - “A Dios regando y con el mazo dando”
Views of Mental Health and Mental Health Treatment

- Information about current treatment approach
  - Rationale
  - Course
  - Roles and responsibilities
  - Cultural modifications

- *Dichos* to instill hope: “Después de la lluvia, sale el sol”

- Be very clear about expectations
  - ONE OF THE BEST PREDICTORS OF DROP-OUT
Psychoeducation Resources

- http://www.nctsn.org/resources/audiences/Informaci%C3%B3n-en-Espa%C3%B1ol : handouts/pamphlets for caregivers and youth
- Cuidando a los Niños: Lo que Los Padres Necesitan Saber Acerca Del Abuso Sexual Infantil
- Entendiendo los Comportamientos Sexuales en la Niñez
- Fact Sheets on Child Sexual Abuse, Domestic Violence, etc.
- What Do You Know? Game
Cultural Modifications to Parenting Skills

- Latino parents report a greater preference for more active parenting strategies
  - Parenting skills can be reframed to be more active

- Cultural beliefs can pose a potential barrier (e.g., respect for parents)
  - Reframe to be more acceptable
  - Strategies to increase “respect” rather than “compliance”
Cultural Modifications Parenting Skills (continued)

Reframing to be more acceptable:

- Praise: Provide thorough rationale
  - Address concerns about reinforcing the child for doing things she/he is already supposed to be doing

- Rather than “praising,” the therapist can describe it as “Tell the child what she or he is doing that you like and provide reasons why”

(Adapted from McCabe, 2004)
Reframing to be more acceptable:

- **Active ignoring:** the therapist can emphasize that this is an active parenting skill and demonstrate how the parent can actively apply it (e.g., turn away or leave the room)

- Ignoring can be reframed as a punishment: *ley de hielo* (silent treatment)

(Adapted from McCabe, 2004)
Cultural Modifications to Parenting Skills (continued)

- Time-out: The time-out chair can be re-named the “isolation” chair

- Time-out can be called “castigo de la esquina,” “castigo de la pared,” or “castigo de aburrimiento”

- If parents report a preference for spanking, therapist can explain why “isolation” is more effective

- Emphasize that parent is in control

(Adapted from McCabe, 2004)
Resources for Parenting Skills

- La Crianza en Todo Terreno
- SOS: Ayuda para Padres
- 1-2-3 Magic
TF-CBT PRACTICE

Components

P  psychoeducation and parenting skills
R  relaxation
A  affective expression and modulation
C  cognitive coping and processing
T  trauma narrative development & processing
I  *n vivo* mastery of trauma reminders
C  conjoint child-parent sessions
E  enhancing future safety and development

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Cultural Modifications to Relaxation

Rationale: to reduce somatic complaints

Deep Breathing
  - More relevant use of imagery or objects

Progressive Muscle Relaxation
  - More relevant use of examples
    (e.g., tortilla vs. spaghetti)

Relaxation Techniques CD for Kids and Teens in Spanish

Prayer
  - If spirituality is important to client
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Cultural Modifications to Affective Expression and Regulation

Potential factors affecting feelings identification and expression:
- Simpatía
- Gender roles
- Respeto
- Language

Possible coping styles:
- Avoidance/escapism (*No pensar*)
- Value placed on tolerance of adversity
- Fatalismo
Resources for Affective Expression and Modulation

- Todos Tenemos Sentimientos
- Vegetál Como Eres: Alimentos con Sentimientos
- Así me Siento Yo
- Un Día de Aquellos
- Bright Spots: Thoughts and Feelings Cards
- Sopa de Lagrimas
- Healing Images for Children Activity Book
- Telenovelas
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Cultural Modifications to Cognitive Coping

Addressing beliefs that can serve as barriers to positive self-talk
- Fatalismo
- Marianismo

Use of spirituality in Positive Self-Talk
- “Dios aprieta pero no ahoga”
  (God squeezes but does not choke)
- “Dios ayuda a los que se ayudan”
  (God helps those who help themselves)
Cultural Modifications to Cognitive Coping

Use of Dichos for Reframing:

- “Quien canta, su mal espanta” (Those who sing every day chase the blues away)
- “No hay mal que por bien no venga” (There is not a bad thing from which a good thing does not come/Every cloud has a silver lining)
- “Después de la lluvia, sale el sol” (After a rain storm, the sun will shine)

Use of Cuentos for Cognitive Restructuring

- Little Red Ant
- Laughing Skull
- La Pequeña Locomotora que Sí Pudo
Cultural Modifications to Cognitive Coping

- Need to respect cultural values and beliefs while still challenging distortions

- When beliefs are taken to an extreme, can be harmful and/or can conflict with other cultural values or values (e.g., suffering or tolerating so much adversity can interfere with the value of the importance of caring for your children/family)

- Can reframe thoughts to be more culturally congruent. (e.g., teach skills to better tolerate adversity)
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Cultural Modifications to the Trauma Narrative

- Present more relevant rationale
- Appropriate examples (“Por Favor Di,” “Ayudar a Sanar a las Familias”)
- Stories/vignettes that children can relate to
  - Cuento: *Tossing Eyes*
- Use of music

- Address potential barriers
  - Conservative beliefs about sex
  - Not sharing “family business” outside family
  - Hearing the narrative may trigger parent’s own trauma history
Help identify unhelpful thoughts that may be culture related:

- Shame
- No longer a virgin
- Gender roles
- Responsible for negative impact on the family
- This happened to me as a punishment
Cultural Modifications to Processing the Trauma - Caregivers

- May cue caregivers’ own victimization
- Latino adults are less likely to have received mental health treatment for their own abuse experiences
- Provide psychoeducation and support
- Assess caregivers’ need for their own treatment
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Cultural Modifications to *In Vivo*

- Explore cultural associations related to triggers, fears, and avoidant behavior
- Desensitization plan takes into account and incorporates family’s cultural beliefs and practices
- Use of encouraging *dichos* (e.g., “*Poco a poco se anda lejos*”)
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**C  conjoint child-parent sessions**

E  enhancing future safety and development
Cultural Modifications to Conjoint Sessions

- Address any culture-related concerns about direct discussion of trauma in family prior to conjoint session
- Enlist parent support in challenging culture-related distortions (as appropriate)
- Language issues
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Cultural Modifications to Enhancing Safety

- Address any cultural values that may interfere with safety planning (i.e., respeto, simpatía)
- Psychoeducation around sexual development
  - Be sensitive to and respectful of conservative beliefs about sex
- Discuss safety strategies that were in place in country of origin
Resources for Enhancing Safety

- Mi Cuerpo
- Mi Cuerpo es MíO
- Workbook about Taking Care of Me!
Enhancing Safety Case Scenarios

1. Alejandro is an 8-year-old Mexican-American boy who lives with both parents. There is a history of DV and continues to be a lot of conflict between the parents.

2. Julia is a 14-year-old girl who was raped prior to emigrating from El Salvador. She likes to wear revealing clothes and is interested in dating but her parents have strict, traditional beliefs about premarital relationships.

3. Chris is a 16-year-old Mexican-American boy who was severely beaten by a group of gang-affiliated boys at school. His parents are in disagreement over whether to transfer Chris to a different high school.
Cultural Considerations for Termination

- Encourage parents to continue to utilize parenting skills learned in therapy; reinforce ways in which skills are consistent with cultural beliefs and parents’ goals for the child.

- Solicit feedback from family regarding cultural appropriateness of treatment.

- Address cultural beliefs that may serve as challenges to understanding termination of therapeutic relationship.
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