

# Culturally Sensitive and Creative Therapy With Latino Clients

By Aaron Aviera, PhD

## Introduction

Latino or Hispanic individuals represent a diverse and heterogeneous group of people (Padilla & Salgado de Snyder, 1992; Paniagua, 1998; Laval, Gomez & Ruiz, 1989). In this article I will primarily address the needs and experience of less acculturated Latino clients who are mostly from Mexico and Central America, and represent a large segment of the Latino community in Southern California.

## Increasing Cultural Sensitivity in Existing Treatment Approaches

For Latinos, interpersonal warmth is very important, and when a therapist is experienced as "cold" or distant, attrition is likely to be high (Klein, 1969; Paniagua, 1998). It is also likely that the selection of a therapist will be heavily influenced by the therapist's willingness to self-disclose minor personal information (Paniagua, 1998), which helps the Latino client feel that the therapist is a caring and real person. An associated concept is that of *formalismo* (formalism), in which proper respect is shown (i.e., initially using formal titles, and showing *respeto* (respect) based on age, social status and gender). Consultation with Latino therapists would be helpful in understanding how to balance these in therapy.

Initially a Latino client, especially one who is not highly acculturated, may present with a "speak to when spoken to" approach, and may avoid direct eye contact, both of which may be signs of respect. In an assessment, attention should be paid to the role of religion in the client's life, as many Latinos have strong religious beliefs, and these may have a central influence on the view of mental illness as well as cure, which in turn impacts how the therapist is viewed. An associated concept is that of *fatalismo* (fatalism) which refers to the belief that divine providence governs the world, and that an individual cannot control or prevent adversity (Paniagua, 1998). Exploring an individual's possible "magical explanations" of mental or emotional problems is also important, as emotional problems may be seen by some as being caused by bad spirits or witchcraft.

## Engaging Latino Clients in Therapy

Engaging Latino clients in therapy is a process that should not, or rather cannot, be rushed. Of essence to the therapeutic relationship is respect for *cultural etiquette*, the socially and culturally learned set of unspoken rules for engaging with strangers. Romero's (2001) concept of *conocimiento* (knowledge) encourages the therapist to draw on naturally occurring cultural etiquette for engaging and developing a relationship. Latino clients will view a relationship as positive in part when it has elements of being mutual and reciprocal. The *compromiso* (commitment) that develops brings expectations of mutual behavior such as "responsiveness," *respeto* (respect), *confianza* (trust), *dignidad* (dignity), as well as an allowance for ample space and time. Mutual self-disclosure is expected, and *personalismo* (being personable) is a part of the foundation of the relationship.

## Dichos: A Novel Treatment Approach Utilizing Themes from Latino Culture

In her recent book *Brief Psychotherapy with the Latino Immigrant Client*, de Rios (2001) describes her finding that *dichos* (proverbs and sayings) "can link the phenomenological world of the Latino immigrant with the symbols and metaphors available" to psychotherapists in the process of addressing and reframing emotional struggles.

From my earliest clinical experience with *dichos*, I appreciated the ability of these sayings to create a comfortable environment, facilitate rapport and communicate to Latino clients that their needs and identities would be respected. A few of the *dichos* I have found especially helpful in this regard include: "No hay mal que por bien no venga." (There is no bad from which good does not come. or Every cloud has a silver lining.) (Galvan & Teschner, 1985); "La esperanza no engorda pero mantiene." (Hope does not make you fat, but it sustains you.), (Aranda, 1977); and "Despues de la lluvia, sale el sol." (After a rainstorm, the sun will shine.), Aranda, 1977).

As can be seen from these examples, *dichos* can be adapted to the therapeutic endeavor in countless

ways. They can also be selected to assist in addressing specific issues. For instance, de Rios (2001) discusses her use of particular dichos with couples and families, with anger management, and as a cognitive restructuring technique to help clients become more flexible in their approach to life. Zuniga (1992) describes her clinical use of dichos to acknowledge feelings, to address culturally based and other forms of resistance, and in her work with battered women. She emphasizes that the use of dichos allows the therapist to "transform what could be a foreign experience for the client into a culturally palatable and less alienating service." In reviewing the implications of using dichos in therapy for both Latino and non-Latino clinicians, she encourages the non-Latino (and non-Spanish speaking) clinician to use dichos in therapy with Latino clients, but to consult with a Latino clinician for guidance.

### **Concluding Remarks**

One of the goals, or rather requirements, of therapy is to create a trusting relationship and healing environment in which our clients can reveal themselves and engage in what is often challenging and difficult work. When working with Latino clients, one must come to know and respect the unique expectations that are in part shaped by culture and world view, and integrate this understanding into the therapeutic approach. The use of dichos is one example of how this can be facilitated, and in a sense is much like a "spoon" which can be helpful in "bringing out what the pot contains." When a therapist makes an effort to respect and integrate the culture of their client, the therapy becomes more of a collaboration, which might be described by the dicho: "Una mano lava la otra y las dos lavan la cara." (One hand washes the other and both wash the face.), (Cobos, 1985)..

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