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2000

Multicultural counseling with Latino youth

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Abstract

The author of this paper examined current literature reviewing Latino youth issues and considerations in counseling this population. First, the author will discuss the importance of multicultural counseling education in counselor training programs. Considerations and factors will then be identified for working specifically with Latino youth. Next, the risk of low academic achievement for Latino youth will be discussed. Then, the author will explore assessing and diagnosing members of the Latino population. Finally, she will describe conclusions about current research and implications for future counselors.

MULTICULTURAL COUNSELING WITH LATINO YOUTH

A Research Paper

Presented to

The Department of Educational Leadership, Counseling,

and Postsecondary Education

University of Northern Iowa

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

by

Amy S. Roling

May 2000

This Research Paper by: Amy S. Roling

Entitled: MULTICULTURAL COUNSELING WITH LATINO YOUTH

has been approved as meeting the research paper requirements for the Degree of Master of Arts

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Multicultural Counseling With Latino Youth

The Latino/Hispanic population is considered to be the fastest growing population in America (Gonzalez, 1997). The Latino population has grown by over 53 % in the past decade and is expected to increase at a similar rate by the year 2000. There are approximately 22. 8 million Latinos in the United States at present. The U. S. Bureau of Census (as cited in Gonzalez, 1997) stated that by the year 2050, it is estimated that there will be 96 million Latinos or 24% of the population will be Latino in the United States. Eventually, the Latino population is expected to surpass the African American population as the largest non-white ethnic group in the United States (Gonzalez, 1997).

Latino Americans may include individuals who are Mexican American, Central American, and South American, Chicano, Spanish American, Latin American, Mexican, Puerto Rican, Cuban, Guatemalan, and Salvadoran (Manning & Baruth, 1996). The Hispanic population shares a strong sociocultural, linguistic, and historical background, although it is made up of diverse groups. These diverse groups are often defined along racial, ethnic, national, or cultural lines. The term *Hispanic* delineates an ethnic group, not a racial group (R. Clemente, personal communication, January 31, 2000). The Latino/Hispanic population is a heterogeneous population, therefore differences within this population must be taken into consideration to best understand their individual life experiences (Casas & Vasquez, 1996).

The term Hispanic was adopted by the U. S. Census Bureau to define individuals who are of Spanish-speaking descent. The terms Hispanic, Chicano, and Latino are often used interchangeably (Gonzalez, 1997). The term Latino is

most preferred by individuals in this population. There are a number of reasons why Latino is the preferred term: (a) it is a reflection of language and Latin roots, not race, (b) Latino is, geographically, a more accurate term, (c) Latino is used more as a social-political label that points out the Latin roots of the language, and (d) it reaffirms Native pre-Hispanic identity (R. Clemente, personal communication, January 31, 2000). For the purposes of this paper, the term Latino will be used to identify the population discussed. In the book, Multicultural Education of Children and Adolescents, Manning and Baruth (1996) discussed the heterogeneity in this population. Latinos share history, many values, goals, and customs, but there are also many aspects that differ within the culture. When working with this population, it is necessary to consider the diversity within this culture as well as the shared characteristics.

Casas and Vasquez (1996) reported the Latino population is young. The median age for this population is 23.2, and almost one third of all Latinos are under the age of 15 Arredondo and Vazquez (1999) also stated that "the Latino population is the fastest growing cultural group with the youngest population of youth 18 years and under" (p. 30). Given this population's youthfulness and predicted sizable increase, it is vital that mental health professionals and school counselors increase their knowledge and awareness in working with this population.

Along with awareness, counselors need to implement intervention and prevention strategies with Latino youth to help them overcome the obstacles encountered as a result of being a minority. Trankina (1983) stated that there are certain variables that place youth at risk for the development of mental health

problems. These would be health variables, family-social variables, and educational variables. Many Latino youth are at risk in all of these areas.

In light of the continuous rise in population of Latinos in the United States and the high risk status of the Latino youth, exploration on effective ways to work with this population in a counseling setting is imperative. How can counselors be effective in delivering services to this population? The author of this paper examined current literature reviewing Latino youth issues and considerations in counseling this population. First, the author will discuss the importance of multicultural counseling education in counselor training programs. Considerations and factors will then be identified for working specifically with Latino youth. Next, the risk of low academic achievement for Latino youth will be discussed. Then, the author will explore assessing and diagnosing members of the Latino population. Finally, she will describe conclusions about current research and implications for future counselors.

Multicultural Counselor Education

The predicted increase in the Latino population reinforces the need for multiculturally aware counselors in school and agency settings. Gonzalez (1997) reported on the underuse of mental health services by Latinos. The research described in this article indicated that the underuse of services was partly due to cultural barriers, such as limited English language skills, the lack of bicultural counseling staff, the unavailability of culturally appropriate counseling approaches, and differences in conceptualizations between counselors and Latino clients. Apparently, the more culturally responsive counselors are better able to avoid stereotypes, develop rapport, accurately assess clients and formulate

appropriate treatment plans the better the counseling experience would be for Latinos (Gonzalez, 1997). Based on these findings, it seems obvious that training counselors to be multiculturally competent could increase the use of mental health services by Latinos.

Herring (1998) discussed the future direction of multicultural counseling. This research article explored preservice school counselors' conceptualizations of the goals, implementations, and practices of multicultural counseling. The participants of this study consisted of eighty-five master's level students (69 women and 16 men), six different universities. An open-ended questionnaire designed to assess conceptions of multicultural counseling was utilized as the measure for this study. In this questionnaire, three questions were asked: (a) What, in your opinion, are two of the most important goals multicultural counseling should seek to accomplish? (b) What do you identify as multicultural practices that you have observed or used in your internship? and (c) When you think of multicultural counseling, what are two questions you would like answered before you begin counseling, and what are your concerns about the implementation of multicultural practices? Scoring was conducted by categorizing individual responses according to key words (Herring, 1998).

The results indicated that there was a lack of consensus among participants about the aims of multicultural counseling. Herring (1998) stated that the lack of consensus among the participants reflected the diversity in their experiences, rather than confusion about multicultural counseling. A single, unified plan on multicultural counseling for counselor training programs was suggested as a way to universalize the experiences of preservice counselors (Herring, 1998). This

article also indicated that graduate students in counseling programs should receive more instruction and experience in working with individuals of diverse ethnic and cultural backgrounds. Limitations to this study included lack of geographical representation and findings as a result of self-report measures. However, aside from these limitations, this research provided points on how to redirect multicultural counseling education for the future to better serve the growing diverse populations (Herring, 1998).

Steward, Wright, Jackson, and Jo (1998) researched the relationship between multicultural counseling training and culturally sensitive counselors . These researchers examined how multicultural awareness, knowledge, and skills influenced the evaluation of multicultural counseling competence. The study of the white supervisor and the white supervisee dyad was targeted specifically. There were 54 white graduate-level counselor trainees, ranging in age from 22 to 50 years old participating in this study. The Multicultural Awareness- Knowledge -Skills Survey (MAKSS), the Cross-Cultural Counseling Inventory-Revised (CCCI-R), and two 20 minute videotaped counseling sessions were utilized as measures. In this study, findings suggested that multicultural counseling training does significantly influence ratings of culturally sensitive counselors. These researchers noted several trends in their results. First, the difference between ratings of a culturally sensitive and culturally insensitive counselor were greater when white raters reported more comprehensive multicultural counseling training. Second, white raters with more multicultural training tended to evaluate a white culturally sensitive counselor more positively than did those with less training. Third, the importance of looking at the relationship between the

evaluation of counseling competence and raters' level of multicultural counseling training was further emphasized by the order effect in this study. Fourth, multicultural counseling training was found to have no effect on the evaluation of the culturally insensitive counselor.

Steward et al. (1998) reported that the scales used in this study are open to criticism as a result of the scale intercorrelations. Other limitations reported were the use of self-report methods, limited participant geographical representation, and under representation of white male counselors.

Both of the above research studies provided data that supports the importance of multicultural education in counselor training programs. Along with the importance of training, the research identified what components were valued by preservice counselors. Multicultural awareness, knowledge, and skills provide counselors with the opportunity to help culturally different clients (Steward et al., 1998). With the rise and youthfulness of the Latino population, multicultural competent counselors are a necessity. Also, considering that Latino youth are at risk for a variety of difficulties, more extensive training in working with this population would be beneficial. When working with Latino youth, multicultural counselors have many factors to consider.

Considerations When Working With Latino Youth

Arredondo (1998) stated that there are several considerations to make when working with multicultural populations. In Arredondo (1998), three multicultural counseling competencies were described. These competencies were suggested as guidelines to follow when working with multicultural clients. By following these

guidelines, successful cross cultural counseling would more likely occur. Counselors should assess their own awareness, skills, and knowledge before taking on a client from a different cultural background.

The first domain is counselor awareness of personal cultural values and biases. Counselors must look into their own belief systems about diverse populations, along with exploring whether their knowledge and skills are sufficient enough to be considered competent in working with multicultural populations. The second domain is counselor awareness of the client's worldview. Counselors must be aware of the client's cultural belief and value system, along with the client's life experiences that might have helped shape these. The counselor is expected to review whether he/she is able to connect with and successfully help the client. The third domain is the use of culturally appropriate intervention skills and strategies. The counselor must be aware of the client's attitudes and beliefs about culture based intervention skills (Arredondo, 1998). Once counselors have assessed their level of competency and feel they have fulfilled their obligations to give clients fair and equal services, they must next consider specific factors related to the identity of members of a specific population.

Cultural Frameworks

Manning and Baruth (1996) stated that, as children, many Latinos are taught to avoid competition or activity that will set them apart from their own group. They are discouraged from standing out among their peers because this is thought

to put them in jeopardy. Standing out from the group in the Latino culture is viewed as asking for danger or harm. Latino children are told to look to others and avoid being arrogant.

Personalismo, a term Latino's use to describe valuing and appreciating a person, is taught and reinforced from a very young age. This term is also considered a value that is internalized by members of this culture. Along with *personalismo*, there are a few other important concepts that are embedded in the Latino culture. *Orgullo*/pride, *respeto*/respect, and *dignidad*/dignity all signify the qualitative nature of interpersonal relationships (Arredondo & Vazquez, 1999).

When it comes to counseling Latino youth, counselors must consider their framework and worldview. Arredondo and Vazquez (1999) discussed the importance of considering the above frameworks when working with Latino youth. The predominate worldview of members of this culture also reflects collectivism, interdependence, and extreme regard for those in authority positions. The cultural values and beliefs that are core in the Latino culture influence individuals' interactions, communication patterns, relationships, and individual sense of self-motivation. From a very young age, Latinos learn and internalize their values. As a counselor, lacking awareness and knowledge about the role of cultural values and beliefs would be detrimental to the counseling relationship and well-being of the Latino client (Arredondo & Vazquez, 1999). The values and beliefs that Latino youth internalize are passed down through the family. The family and roles in the family are of extreme importance in the Latino culture.

The Latino Family

Sue and Sue (1999) discussed the view of family in the Latino culture:

Family unity is seen as very important, as is respect for and loyalty to the family. Cooperation rather than competition among family members is stressed. Interpersonal relationships are maintained and nurtured within a large network of family and friends. For the family, a critical element is to develop and maintain interpersonal relationships. There is a deep respect and affection among friends and family. (p. 290)

Zapata (1995) discussed a core characteristic of the Latino population, *familism*. This term was described as the degree to which people feel a strong sense of identification and belonging with their families, nuclear and extended. *Familism* is a core value to all Latinos.

Sue and Sue (1999) also discussed specific roles family members take in the Latino culture. The extended family is valued greatly among members of this culture. For Latinos, the extended family includes not only relatives, but non-blood relatives who are very close as well. Each member of the Latino family has a role to fulfill: grandparents (wisdom), mother (abnegation), father (responsibility), children (obedience), and godparents (resourcefulness) (1999). Latino youth are not only expected to be obedient, but also take on adult-like roles at a very early age. Typically, older Latino children take care of their younger siblings and the older Latino female may act as a surrogate mother to her siblings. Adolescence, for Latino children, marks an increase in their responsibilities and a time where they begin to think and act like young adults.

Sue and Sue (1999) explained the structure of Latino families. Traditional Latino families are hierarchical in nature. Special authority is given to the elderly, the parents, and the males. The father assumes the primary authority role within the family. Children are expected to be obedient and usually have no part in family decision-making. Children are also expected to contribute financially to the family when possible. Parents reciprocate by helping them through early adulthood and even through the beginning of marriage. The reciprocity present in the parent-child relationship is lifelong.

Latino Sex Roles

Ho (1992) discussed sex roles in the Latino culture. The Latino male is expected to be dignified, hardworking, and macho. *Machismo*/maleness-virility is the preferred combination of virtue, courage, romanticism, and fearfulness. In its most exaggerated form, *Machismo* elevates Latino masculinity to levels of complete control and dominance and to a position of privilege. The Latino female is expected to be nurturing, submissive to authority, and self-giving. *La Santita*, translated as the little saint, often refers to the sacrificing position of Latino women. The Latino women strive for perfection by adhering to every request of the Latino male and serve their families and communities continuously. The concepts of *La Santita* and *machismo* are apparent in several contexts (Barkley & Salazar-Mosher, 1995).

Latino girls are expected to be home-centered and to limit their social relationships to close family and friends. Reasons for these limitations may be based upon parental fears about sexual intercourse before marriage. Mexican boys

are encouraged to join with others of their age in an informal social group known as *palomillas*. The aim of these groups is to socialize the young Latino to become an adult male (Barkley & Salazar-Mosher, 1995; Ho, 1992).

Barkley and Salazar-Mosher (1995) recommended that because of the specific role formations within the Latino culture, youth need guidance in making decisions about their lives, including sexual behaviors. Along with being *machismo*, comes the Latin Lover myth and along with being *La Santita*, comes the idea that motherhood is the highlight of the Latino girl's life. With these two premises pervading the Latino culture, counselors must be equipped with appropriate interventions that will enhance their Latino clients' life in the present and in the future (Barkley & Salazar-Mosher, 1995). Also when working with Latino youth, counselors must respect the roles of this culture and be careful to not impose their own views on these clients (Koss-Chioino & Vargas, 1999).

Green, Trankina, and Chavez (1976) cautioned counselors on creating change in Latino clients. Green and his colleagues discussed the consequences of too much change. Counselors must try and help clients achieve change to the point that the client seeks it, but not to the point where the client is viewed by his/her culture as rejecting the ethnic group. Counselors are encouraged to carefully assess and determine the difference between personal choices and a cultural context when working with this population (Green et al., 1976).

Level of Acculturation

It is important for counselors to be aware of their client's level of acculturation when trying to bring about change. Youth tend to acculturate at a much faster rate than the elders in the Latino population. When working with

Latino youth, the diversity in the acculturative process even within the client's family must be considered. It is very common for families who have recently immigrated to the United States to expect their children to serve as the family's link to the English speaking world through their ability to translate. Counselors need to recognize that Latino youth acculturate at a faster rate than Latino adults and are expected to help the family thrive in an English speaking world (Zapata, 1995). The cultural change that takes place for Latino youth in the acculturation process is essential to understanding, assessing, and intervening with behavioral and emotional problems encountered by Latino youth (Koss-Chioino & Vargas, 1999).

Ho (1992) defined the acculturation process as the psychological and behavioral responses that occur not only in Latinos, but in any immigrant, when they are in contact with American culture. Ho (1992) additionally discussed how often the thoughts, values, and behaviors of Latinos do not prepare them for interactions in the majority culture which, in turn, may induce stress. Within the Latino culture, there is a strong correlation between a child's level of acculturation and his/her psychological and behavioral adjustment. The stronger the identification with the American culture, the more psychological distress the Latino youth may endure (Ho, 1992). Maintaining a bicultural identity was recommended for optimal adjustment among Latino youth.

Casas and Vasquez (1996, p. 162) reported on acculturation as well. They believed that "acculturation is a major contributor to the dynamic, ever-changing aspect of the Hispanic population." Casas and Vasquez (1996) described a number of factors that determine the rate and direction of acculturation. Factors

to consider are: (a) changes in racial or ethnic demographics of a community or region, (b) availability of affordable travel to the native homeland, (c) prevalent sociopolitical attitudes, (d) economic means, and (e) access to education.

Casas and Vasquez (1996) also identified three major dimensions of acculturation: language proficiency, preferences, and use; socioeconomic status; and culture specific values and attitudes. Evidently, when acculturation occurs in an environment which lacks sufficient support from others, it can create conflict, stress, and a reduced sense of self-esteem. Without understanding and support in the acculturation process, Latino youth may experience frustration, insecurities, moodiness, nervousness, and hypersensitivity as they try to be accepted by the dominant society.

Canino and Spurlock (1994) discussed how acculturation can be a stressor for minority and immigrant children. This is even more in evidence when the child is not fully rooted in his or her culture. Children were reported as struggling with which behaviors and values are more appropriate for them. As they become confident and gain acceptance in the dominant culture, Latino youth may lose all or part of their original culture. The acculturation process may possibly threaten their personal identity as they change into what the dominant culture expects. The stress that goes along with the acculturation process in itself could produce the need for counseling services among Latino youth (Canino & Spurlock, 1994).

In a conceptual article, Curtis (1990) reported on the consequences of acculturation to service delivery and research with Latino families. Curtis (1990) stated that the consequences of acculturation were demonstrated in four areas: causing family difficulties, the attitudes of Latinos toward speaking Spanish and

English, the status of folk healers in the Latino community, and the attitudes toward human service providers. He cautioned that failure to consider these consequences of acculturation may result in additional underutilization of mental health services by Latinos.

Vega, Zimmerman, Khoury, Gil, and Warheit (1995) conducted a study that examined the behavioral difficulties and cultural conflicts Latino adolescents experienced at home and school as a result of acculturation strains. These researchers explored two hypothesis. The first hypothesis was that low acculturation Latinos experiencing strains associated with rapid cultural and language transitions will have more behavioral troubles reported by their teachers and parents. The second hypothesis was that highly acculturated Latinos reporting more acculturation strains associated with perceptions of prejudicial treatment and internalization of minority status will have more behavioral troubles reported by their teachers and parents.

The data in this study were taken from the self reports of 2,360 Latino participants in the greater Miami area and their parent and teacher reports. The Child Behavior Checklist and the Teacher Report Form were used to measure problem behaviors. Results confirmed both hypotheses. Overall, this study found that both immigrant and non-immigrant Latino youth were likely to experience acculturative strains that could effect role performance and lower educational aspirations (Vega et al., 1995). Obvious limitations of these research findings were the use of self-report measures and generalized findings for one geographic location. After taking into consideration factors that need to be addressed to

effectively work with Latino youth, such as their cultural frameworks, the role of
family, and level of acculturation, it becomes necessary to review issues that
members of this population face.

<div align="center">Common Psychosocial Difficulties Among Latino Youth</div>

Counselors will encounter a variety of difficulties in the area of psychosocial
factors when working with Latino youth. Counselors must look at the youth's
developmental level and cultural context to be provide optimal results in
counseling (Johnson-Powell & Yamamoto, 1997).

Trankina (1983) reported that the factors that place Latino youth at risk for
the development of mental health difficulties are generally grouped in three areas:
health, family-social, and educational. As noted earlier in this paper, Latino youth
are at risk in all three of these areas. Research has indicated that the majority of
the poor are from ethnic minorities, and poverty is associated with inadequate or
lack of health care. Family discord is indicated by a high rate of unemployment,
low income housing, alcoholism and drug abuse, and high numbers of juvenile
and adult court statistics. In regard to education/school, Latino youth have the
highest dropout rate in the Southwestern United States after sixth grade, and only
60% of those who enter first grade will graduate (Trankina, 1983). Low academic
achievement is discussed frequently in the literature as an area of risk for Latino
youth.

<u>Academic Achievement</u>

Valdivieso and Nicolau (as cited in Rossi, 1994, p. 90) stated "Being
undereducated is undoubtedly the single biggest obstacle to the overall social and
economic assimilation of Hispanics in the United States." Most Latino parents

want their children to succeed in school, but most low income, newly arrived

Latino parents and, even those born in the United States, are unaware of the

expectations of American schools. As a result, many Latino youth come to school

unprepared to work at their expected grade level because their parents have not

taught them the necessary social, linguistic, and cognitive skills that the teachers

expect (Valdivieso & Nicolau, 1994).

Fuligni (1997) conducted a research study to determine the impact of family

background, parental attitudes, peer support, and adolescents' attitudes and

behaviors on the academic achievement of students from immigrant families.

Approximately 1,100 adolescents with Latino, East Asian, Filipino, and European

backgrounds reported on their own academic attitudes and behaviors as well as

those of their parents and peers. Scales were created to measure perceived

parental values, expectations, and aspirations of academic success. Scales were

also created to measure adolescents academic attitudes and study time, along with

peer support for academics. Also, students' course grades were obtained from

their official school records. Results indicated that first and second generation

students received higher grades in math and English than their peers from native

families. Only a small portion of their success could be attributed to

socioeconomic background. A more significant relationship was found when a

strong emphasis on education was shared by the students, their parents, and peers

(Fuligni, 1997).

This research suggests that it is important for Latino youth to have their

parents' involvement in their education. Latino parents focus on instilling values

in their children and leave education up to the teachers. This research article's

findings are very limited because the researchers did not control for socioeconomic status, nor did they separate the minority groups. Cultural differences between the participants were not considered in regard to educational achievement either. When working with the Latino culture, their values, expectations, and psychosocial background must be considered to provide an accurate conceptualization of their issues.

Howe (1994) conducted a review of the literature on ways to improve the academic achievement of Latino students. A big portion of his review focused on the importance of being culturally competent when working with diverse cultures. Understanding the values, beliefs, attitudes and the barriers that exist for members of this population, including the language barrier, is very important. Strong personal outreach, nonjudgmental communication, and the ability to convey respect for the parents' feelings and concerns were other suggestions. Because the research shows time and again that low academic achievement is an area of concern for Latino youth, those working with this population need to step in and consider methods as listed in this article to better help these students. Counselors may see Latino youth who are suffering from behavioral and emotional difficulties, but this could possibly be prevented by intervening at the academic level. Because educational achievement parallels better mental health, accommodating the educational needs of Latino youth may result in better adjusted individuals. Taking into consideration the differences between Anglo and Latino values, along with their cultural context, may reduce the risk this population faces for being undereducated (Howe, 1994).

Koss-Chioino and Vargas (1999) discussed Latino youth and school success. They reported that many parents, having little education themselves, feel intimidated by school tasks and cannot realistically provide support for their children's scholastic efforts. Immigrant families and their children face a number of issues related to school experiences, the biggest issue being language. Parents are typically speaking Spanish at home, therefore their contacts with school are usually unsatisfactory because they may lack the ability to speak or understand English. These contacts can also be embarrassing for the Latino children.

Counselors must recognize that many Latino youth wish to blend with their English speaking counterparts and therefore selectively detach themselves from their parents (Koss-Chioino & Vargas, 1999). The Latino youth's desire to be like his/hers peers may cause conflict in the family, which in turn could also contribute to low academic achievement. All of these factors must be explored when working with members of this population. There can be many different reasons why the Latino student is underachieving. It is up to counselors to consider all dimensions of the problem before effective counseling can occur. Because low academic achievement among the Latino population is so prominent and also indicative of other underlying issues, it is imperative that mental health professionals know how to accurately assess and diagnose this population.

<div align="center">Assessment and Diagnosis With Latino Youth</div>

Assessment Strategies

Gopaul-McNicol and Thomas-Presswood (1998) discussed how culture and language influence psychological assessment and treatment. They defined assessment as, "the process of collecting data for the purpose of (a) specifying

and verifying problems and (b) making decisions about a person" (p. 45).
Assessment strategies are used to help the clinician with the diagnostic process.
The mental health professionals who work with Latino youth and families need to
choose assessment approaches carefully. Consideration of strategy, interpretation,
the cultural background of the child, and bias prevention are imperative.

When assessment results are discussed with the test taker and family, the
clinician should introduce the topic by identifying and elaborating on the different
types of intelligence: social, scientific, mathematical, creative, linguistic,
mechanical, and motor (Gopaul-McNicol & Thomas-Presswood, 1998). Strengths
should be addressed first, and when vulnerabilities are addressed, interventions
should be suggested. The clinician also needs to respect and address the family's
expectations and explore the meaning of the test results with the family members,
including any possible misinterpretations.

Diagnosis

Diagnostic assessment is a complex process for clinicians, but its complexity
increases when clinicians evaluate individuals from different ethnic or cultural
groups. The *Diagnostic and Statistical Manual of Mental Disorders*, 4th edition
(American Psychiatric Association, 1994) is the primary tool used in the United
States to diagnose mental disorders. A clinician who is unfamiliar with the
differences of an individual's frame of reference may incorrectly judge normal
variations in behaviors, beliefs, or experiences in the individual's culture as
psychopathology (Gonzales, Castillo, Tarke, Soriano, Garcia, & Velasquez,
1997).

Cervantes and Arroyo (1994) reviewed the existing literature on guidelines for diagnosing Latino youth. This article was written while the latest edition of the DSM-IV was being printed. They chose to write about the implications specifically for Latino youth because Latinos account for a significant portion of the recent populations growth in the United States. Also the Latino population, as noted earlier, tends to be younger and the fastest growing population of youth (Cervantes & Arroyo, 1994). They defined clinical diagnosis as "the process for categorizing the symptom experiences of persons identified as suffering from internally or externally induced psychological distress" (p. 10). This diagnostic process becomes increasingly more difficult with younger populations and even more complicated when there are issues of language proficiency of the counselor, the parent, and the child, along with cultural values and beliefs surrounding the causes and cures for the psychological distress. Often, when clinicians do not take all of these issues into consideration, misdiagnosis occurs (Cervantes & Arroyo 1994).

In a recent study conducted by O'Donnell, Stein, Machabanski and Cress (as cited in Cervantes & Arroyo, 1994). These researchers examined dimensions of behavioral problems in Latino preschoolers and concluded that diagnostic classification systems should include culturally relevant patterns to achieve cross cultural suitability and diagnostic correctness. Recommendations were made regarding the studying and diagnosing of Latino youth. Considerations must be made on the youth's developmental age group and the role of acculturation in the youth's developmental process when diagnosing minority youngsters.

Cervantes and Arroyo (1994) discussed the diagnostic categories that are considered to be most susceptible to cultural bias given the cultural and linguistic differences found among many Latino youth. Many diagnostic categories rely on data that is gathered from intellectual and cognitive tests as well as assessment of socialization. Dependence on these tests, where little normative data are available for Latino youth, presents a sizable source of bias and possibility for inaccurate diagnosis. Mental retardation, conduct disorder, separation anxiety disorder, and selective mutism are a few diagnostic categories that rely on these methods of assessment. These authors suggested that before determination is made on any of these diagnoses, the clinician should first assess these elements of the child and parent in regard to both English and Spanish. Socialization processes differ for individuals and are strongly culturally determined.

As Cervantes and Arroyo (1994) have discussed, inattention to cultural factors in the diagnostic process can lead to inaccurate diagnosis and future errors in the treatment of Latino youth. The guidelines this article provided focused on the impact of culture on the diagnostic process for Latino youth. It was suggested that future research explore the needs for improvement in diagnosing this population. Gonzales et al. (1997) reported on more current research regarding diagnosis with the Latino population.

Gonzales and her collegues (1997) presented an article which outlined a series of personal guidelines for promoting cultural sensitivity in the psychiatric diagnosis of Latino clients. The authors of this article reported on specific observations that they have reviewed in the current literature about diagnosing Latinos. The first observation focused on counselors assuming that the majority of

Latinos possess a limited group of mental disorders. These authors cautioned counselors on using stereotyped mental disorders for this population. They stated that counselors must recognize that Latino clients are eligible for a variety of diagnosis in the DSM-IV, just as all clients are (Gonzalez et al., 1997).

Assuming that Latino clients have similar mental disorders as diagnosed in the Asian or African American populations is also a danger (Gonzalez et al., 1997). Each ethnic minority group has its own unique characteristics. It can not be assumed that risk factors such as poverty, racism, low educational achievement, unemployment, immigration, and linguistic barriers cause the same mental disorders in all ethnic minority groups. Counselors must recognize that acculturation problems do exist and although they are a V code in the DSM-IV, they are conditions that often accompany many disorders in Latinos. Gonzales and her colleagues suggested that acculturation problems be used as specifiers or modifiers to disorders such as dysthmia, schizophrenia, or adjustment disorder.

Recognizing that culture-bound syndromes exist in this population is another recommendation by these authors (Gonzalez et al., 1997). As with the acculturation problems, culture-bound syndromes are often under-diagnosed. Counselors often assume that culture-bound syndromes like *ataques de nervios* or *susuto* can only exist for beginning generation immigrants. This is not the case.

Language also plays a prominent role in the expression of psychopathology of Latinos. This includes the specific language of the client English or Spanish, the idioms of distress that are used, especially in Spanish, and the language the client is evaluated in by the counselor (Gonzales et al., 1997).

Gonzales et al. (1997) stated that counselors must recognize that the diagnosis of Latino clients is multidimensional, as it is with other clients. Counselors must not focus all of their attention on Axis I and II. Axis IV is considered to be a very important aspect of the multiaxial diagnosis with Latinos because it identifies key psychosocial and environmental stressors that might help clarify Axis I or II disorders. Axis V's Global Assessment of Relational Functioning (GARF) is also considered important in diagnosing. The GARF has been invaluable in understanding the role of the Latino family in the client's life. Finally, these authors suggested every counselor utilize the DSM-IV cultural formulation with Latino clients. This formulation helps take into perspective the cultural identity of the client, the cultural explanations of the illness, the cultural factors related to the psychosocial environment, the cultural element of the relationship between the counselor and client, including cultural and linguistic barriers, and the overall assessment for diagnosis and treatment with the Latinos.

Conclusions

With the increase and youthfulness of the Latino population, it is crucial that counseling professionals enhance their cultural awareness, knowledge, and skills to provide these individuals with beneficial mental health services. The author of this paper discussed the relevance of multicultural competency when working with Latino youth and their families. Gonzalez (1997) discussed the underutilization of mental health services by the Latino population. Explanations for this were suggested: limited use of the English language, lack of bicultural counselors, unavailability of culturally appropriate counseling techniques, and differences in the conceptualizations between the counselor and client. Gonzalez

(1997) explained that counselors who have been through multicultural training have the tools necessary to avoid stereotypes, develop rapport, accurately assess clients and formulate appropriate treatment plans.

Competent counselors must consider many factors when working with Latino youth. They must recognize specific cultural frameworks, specifically, the beliefs and values that are core in the Latino culture. These beliefs and values could influence the counseling relationship and interactions between the Latino client and counselor. As stated earlier, the core values and beliefs in this culture are passed down by the family and internalized by the youth (Arredondo & Vazquez, 1999).

The Latino family structure and expectations were also discussed in this paper. Counselor awareness on how the Latino family operates, including sex roles and expectations, is pertinent in understanding Latino life dynamics (Sue & Sue, 1999). *Familism*, a strong sense of identification and belonging to one's family, blood and non-blood, is a common theme throughout this culture (Zapata, 1995). Green and collegues (1976) cautioned counselors on creating too much change in Latino clients. They discussed the consequences of too much change. Counselors must only help clients achieve change to the point clients seek, without being rejected by their culture (Green et al., 1976).

Counselors must be aware of their client's level of acculturation as well. The process in itself is stressful and as stated earlier, lacking support from others induces more stress for the Latino youth (Casas & Vasquez, 1996). The source of many behavioral and emotional difficulties were stated as resulting from acculturation difficulties.

Latino youth are at risk in a number of areas. One area specifically, low academic achievement, was frequently discussed in the literature. Researchers stated that low academic achievement was Latino youth's biggest obstacle (Valdivieso & Nicolau, 1994). Howe (1994) discussed how educational achievement parallels better mental health. Those working with this population must consider all factors contributing to low achievement in the academic arena.

Culturally competent counselors should be able to begin their journey on understanding the dynamics of working with Latino youth. The need is there, and with multicultural awareness, skills, and knowledge, counselors will be able to provide effective services to this growing population.

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