

Strengthening Effectiveness with Cultural Sensitivity and Awareness in Home Visits

David Schultz, Ph.D., M.Div., Rebecca Schacht, Ph.D., Lisa Shanty, & Carlo DiClemente, Ph.D.

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- Specialists: Alicia Wiprovnick, Elisabeth Groth, Emily Steiner, Lisa Shanty, Samantha Bento, Wendy Pinder
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The Big Picture

1. Effective Communication and Motivational Enhancement: Conversations about Change
2. Healthy Partner and Family Relationships
3. Parenting and Child Development
4. Mental Health
5. Substance Abuse
6. **Cultural Sensitivity**

Overview

1. What is culture and identity?
2. Assumptions, biases, and privilege
3. Talking to families about culture/identity
4. Culture and mental health barriers

Cultural Insensitivity



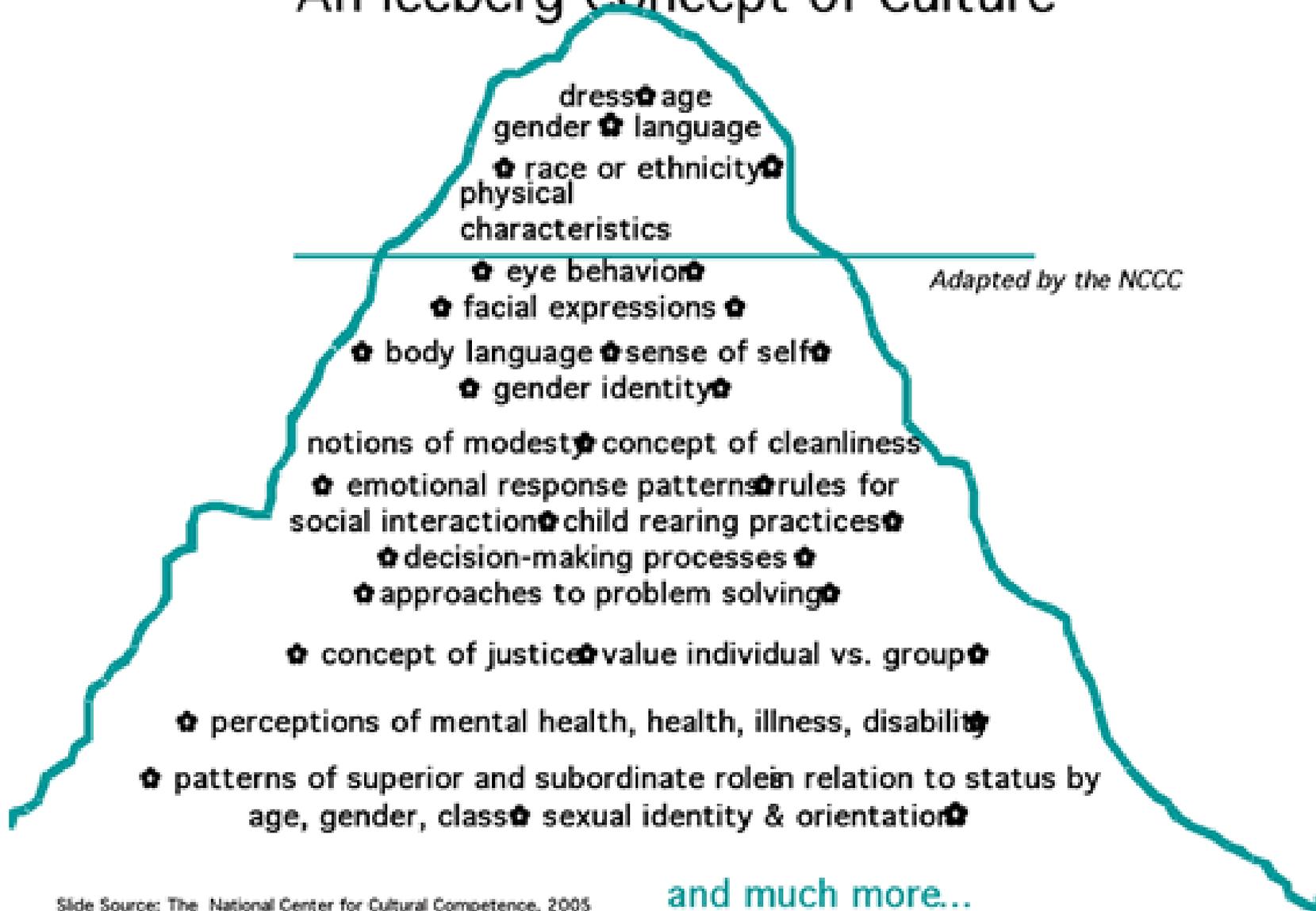
In what ways do we have
cultural or personal identities?

neighborhood
immigration
race/ethnicity
education
body type
gender
child status

In what ways do we have cultural or personal identities?

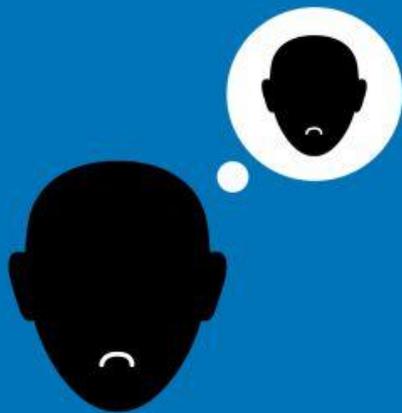
religion
age
marital status
sexual orientation
country of origin
political views
family income

An Iceberg Concept of Culture



Slide Source: The National Center for Cultural Competence, 2005

Anger



对待愤怒



An Iceberg Concept of Culture



Slide Source: The National Center for Cultural Competence, 2005

“I make a lot of poor financial decisions. None of them matter, in the long term. I will never not be poor, so what does it matter if I don't pay a thing and a half this week instead of just one thing? It's not like the sacrifice will result in improved circumstances; the thing holding me back isn't that I blow five bucks at Wendy's. It's that now that I have proven that I am a Poor Person that is all that I am or ever will be. It is not worth it to me to live a bleak life devoid of small pleasures so that one day I can make a single large purchase. I will never have large pleasures to hold on to. There's a certain pull to live what bits of life you can while there's money in your pocket, because no matter how responsible you are, you will be broke in three days anyway. When you never have enough money, it ceases to have meaning.”

An Iceberg Concept of Culture



Slide Source: The National Center for Cultural Competence, 2005

Culture and identity runs deep.

We make assumptions about people's characteristics and behaviors based on their culture and identity, much of which we don't even realize. We will most fully develop rapport with our families if we become aware of these assumptions and our families' assumptions and how they may influence our interactions.

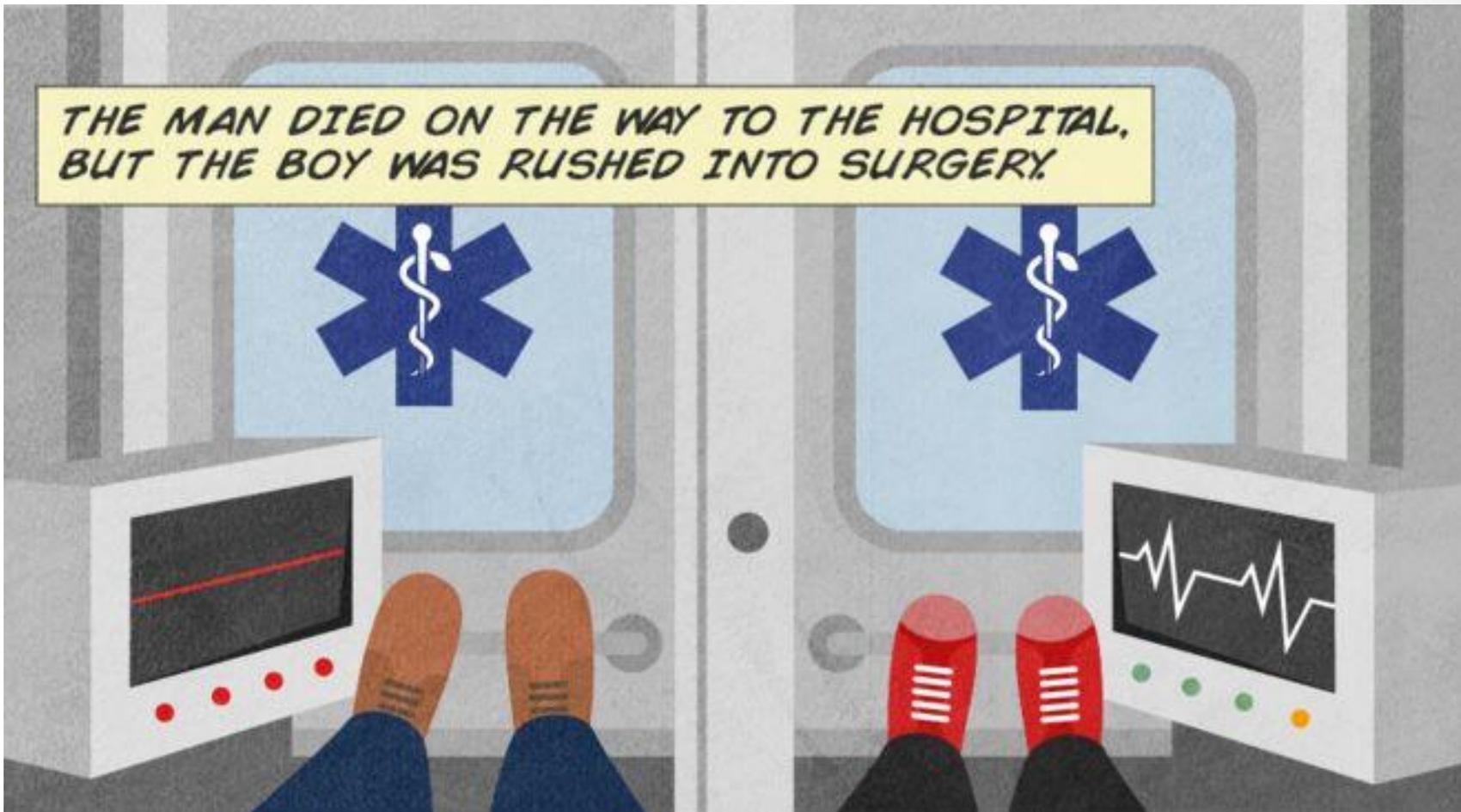
Implicit Biases



*A MAN AND HIS SON
WERE IN A CAR ACCIDENT*



*THE MAN DIED ON THE WAY TO THE HOSPITAL,
BUT THE BOY WAS RUSHED INTO SURGERY.*







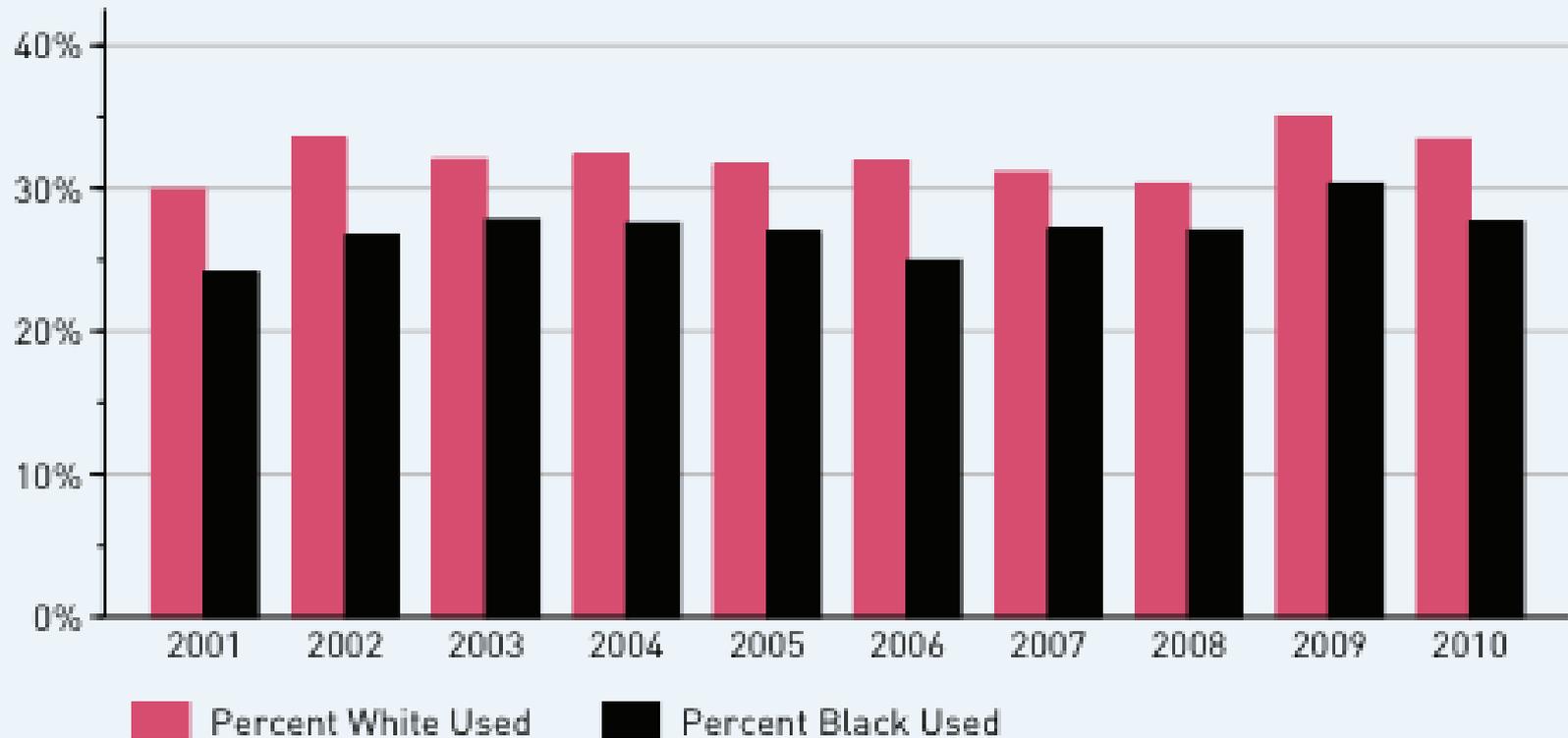
University of Rochester Medical School surgery class



Marijuana Use Among Blacks and Whites is Similar

FIGURE 22

Marijuana Use Among 18- to 25-Year-Olds by Race: Used Marijuana in Past 12 Months (2001-2010)

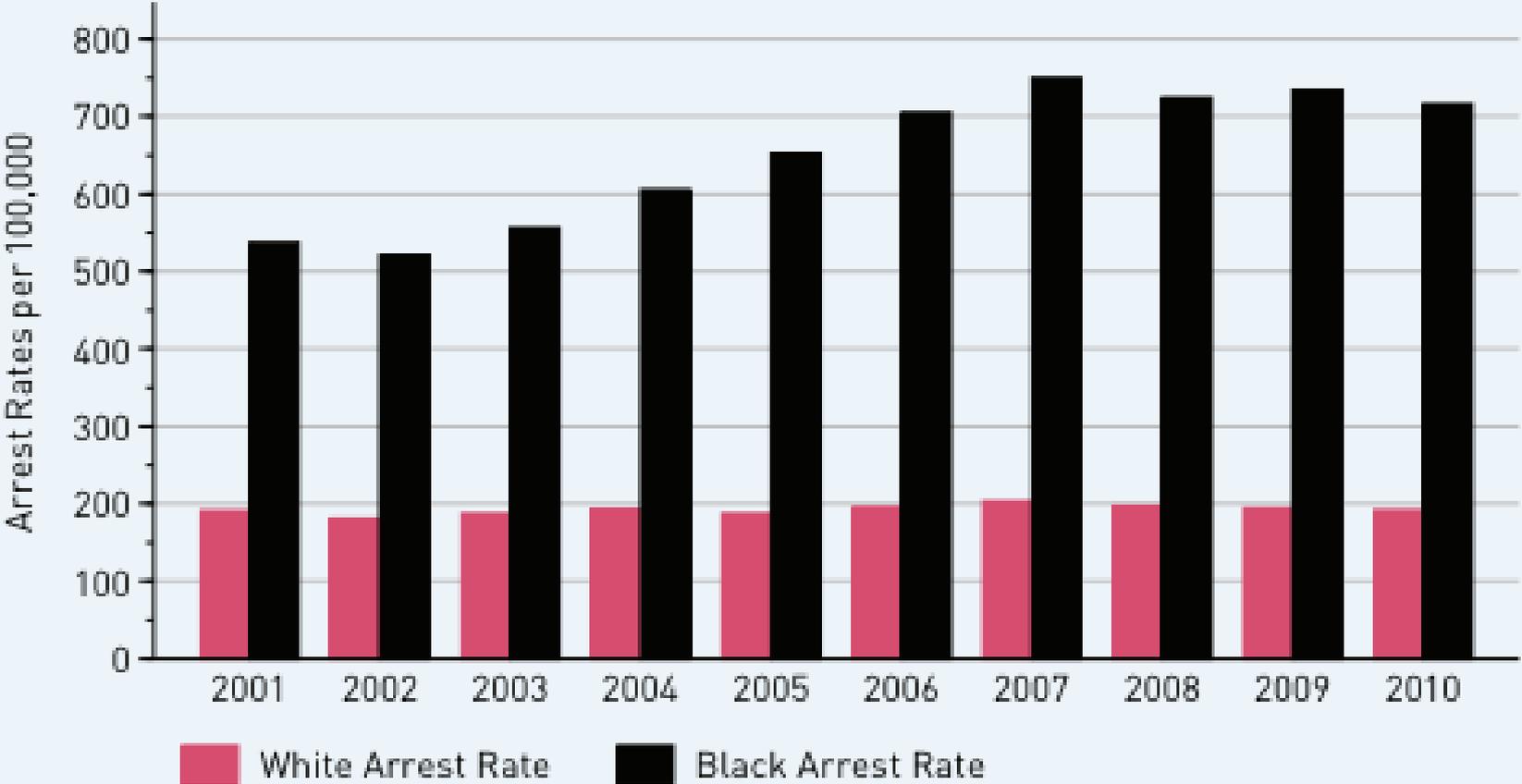


Source: National Household Survey on Drug Abuse and Health, 2001-2010

Black People Get Arrested for Marijuana Use Much More

FIGURE 10

Arrest Rates for Marijuana Possession by Race (2001-2010)



Source: FBI/Uniform Crime Reporting Program Data and U.S. Census Data

Privilege



“An organization that attempts to be culturally ‘blind’ is likely not as culturally competent as it could be.”

- HFA Cultural Sensitivity Workbook

“Bridging the communication gap [about culture] could be the most important prerequisite to building trust between visitors and family members.”

Dr. Diana Slaughter-Defoe

Home Visiting with Families in Poverty: Introducing the Concept of Culture (1993)

Developing Rapport

1. Not talking about your differences makes them bigger, not smaller.
2. Take the lead.
3. Acknowledge that your experiences have led to unique values/attitudes.
4. Give permission to talk about differences (over and over).

You are assigned to be the family service worker for a 22-year-old mother who has three children: a 4 year old, a 3 year old, and a 1 month old. You do not have any children yourself. On your first visit, as you make small talk to get to know each other, she asks how many children you have.

“I’m so glad you brought that up. I don’t have children [yet]. I know it might seem strange to have someone without children talk to you about [your children]. But, I have a lot of experience working with families with children. I haven’t ever lived with the stress of having a child 24/7, though. You’re the expert on that and many other things about [your child]. I look forward to working together with you to help you with challenges that might arise and give you some ideas to see what might work for you.”

“You’ve had a lot of experience at bringing up children.”
(affirmation)

“Being in charge of three children must be stressful at times.” (emotion-focused reflection)

“I’m so glad we talked about this. If you’re ever feeling that maybe I don’t understand the stress or pressures of caring for three children, please let me know. I won’t get upset.”
(give permission)

“What other ways have you thought of that maybe we’ll differ in how we see things?” (open-ended question)

Pretend you are a family service worker for a 17-year-old mother of an 8-month-old. On one of your first visits you ask her how her week was, and she starts to talk excitedly about a party she went to with her friends. She ends the story with, “That’s probably more than you wanted to know. I know you’re more interested in the baby.”

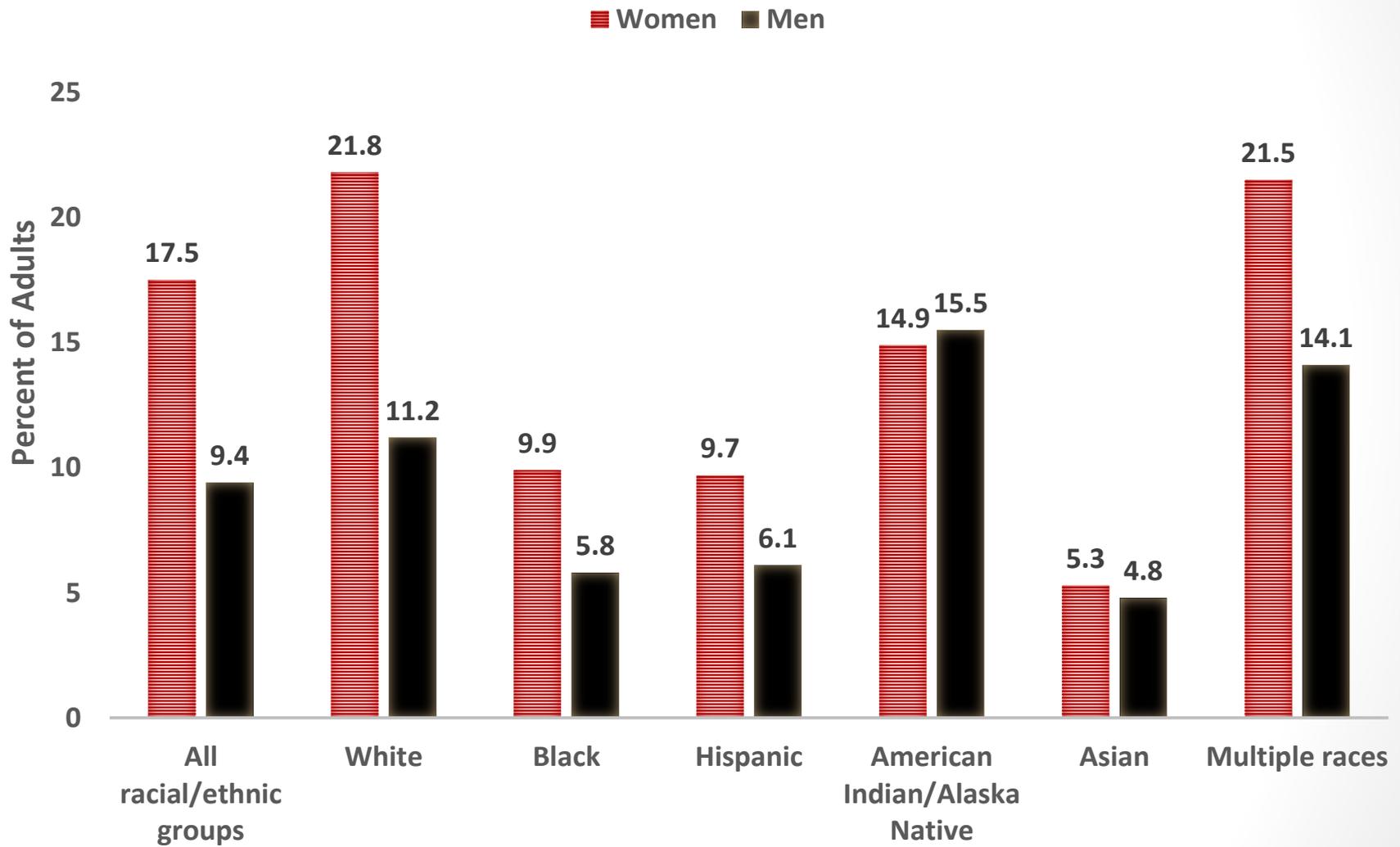
“Sounds like you love getting together with friends.” (emotion-focused reflection)

“I was 17 once, too. You can tell me about the fun stuff you do.....What have you thought about how our age difference might impact how we see things?” (normalize and open-focused question)

Schedule

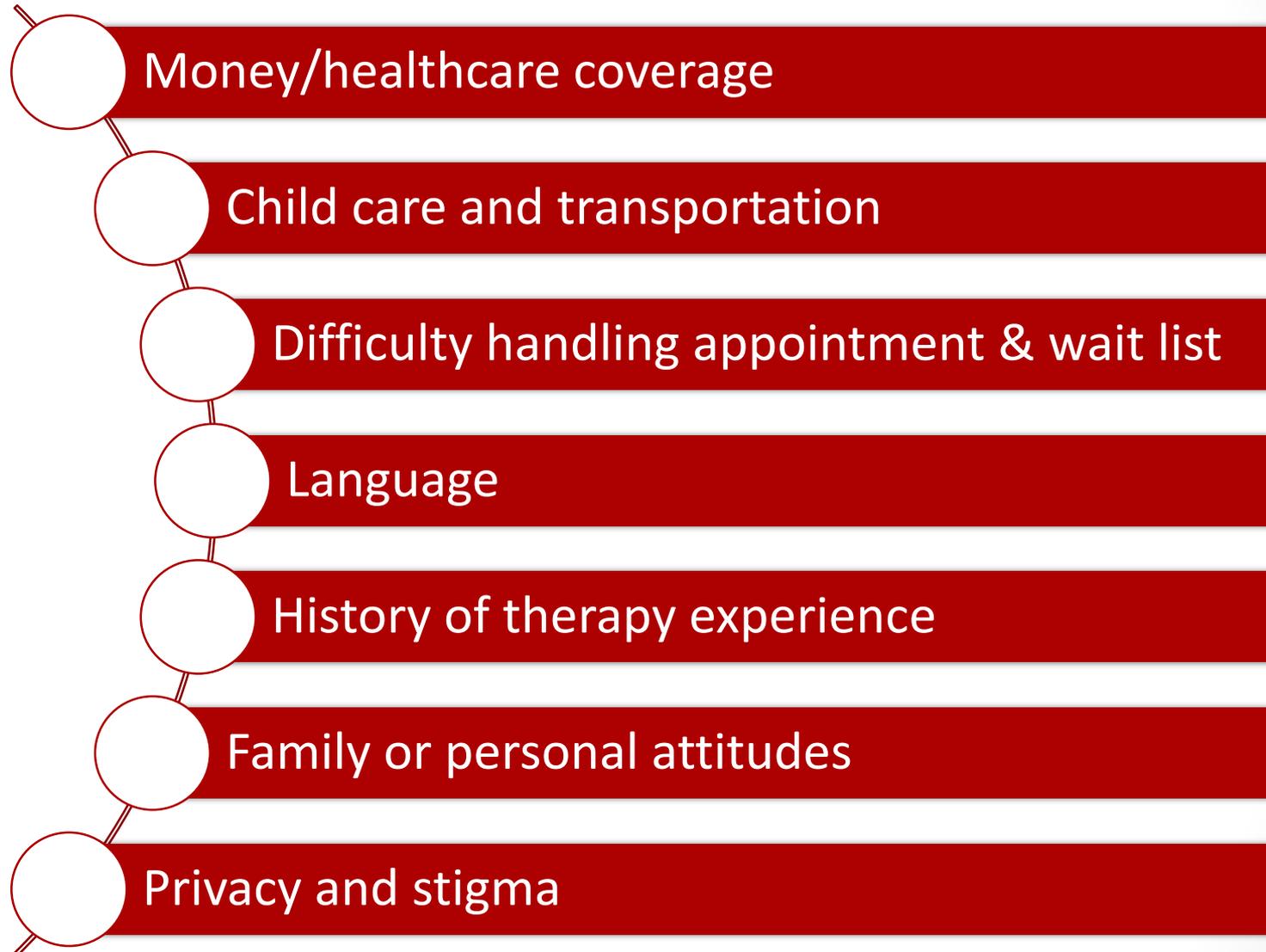
1. What is culture and identity?
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PAST MENTAL HEALTH TREATMENT AMONG 18+ YEARS OF AGE

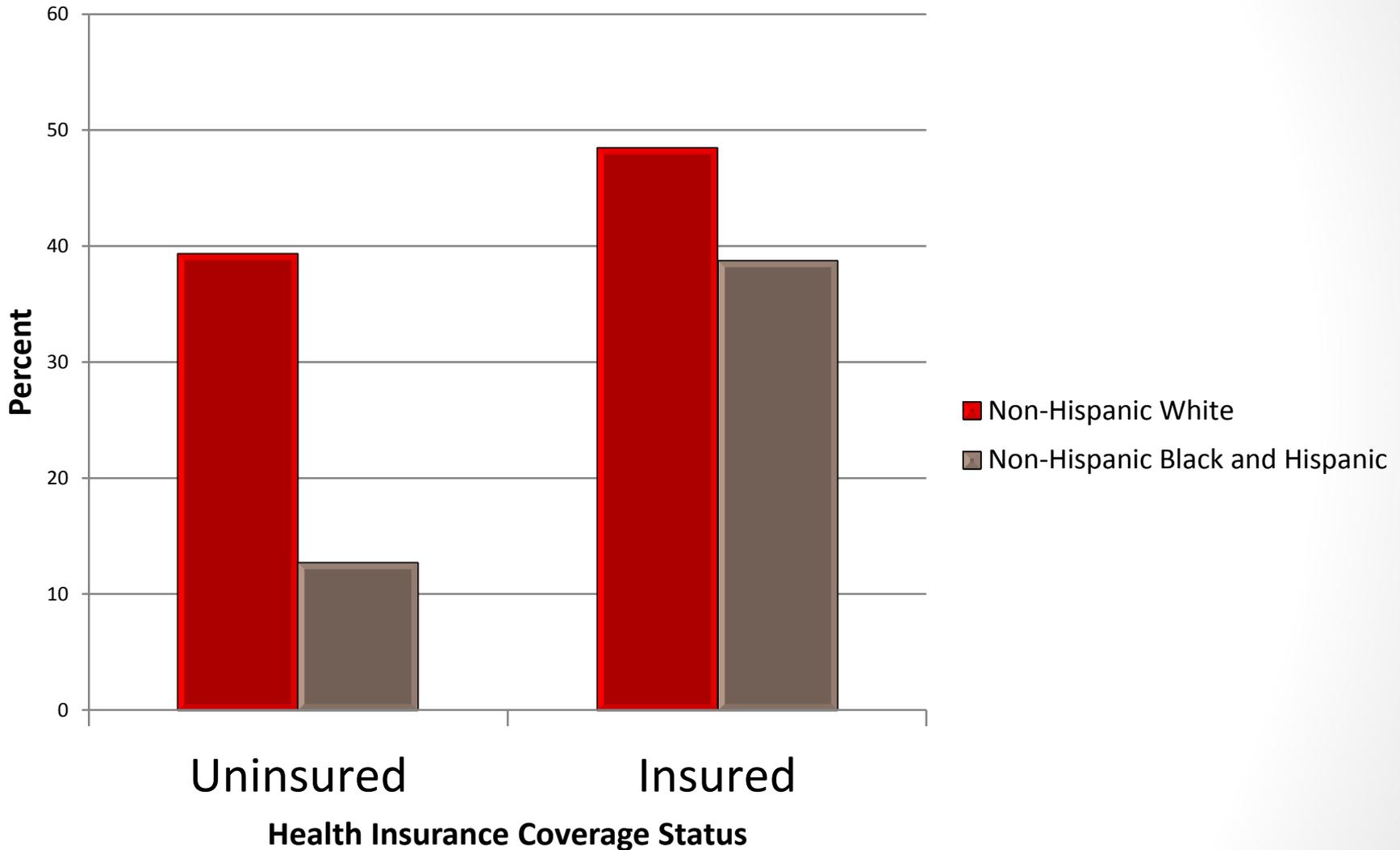


Source: US Census Bureau

Barriers to Seeking Mental Health Help



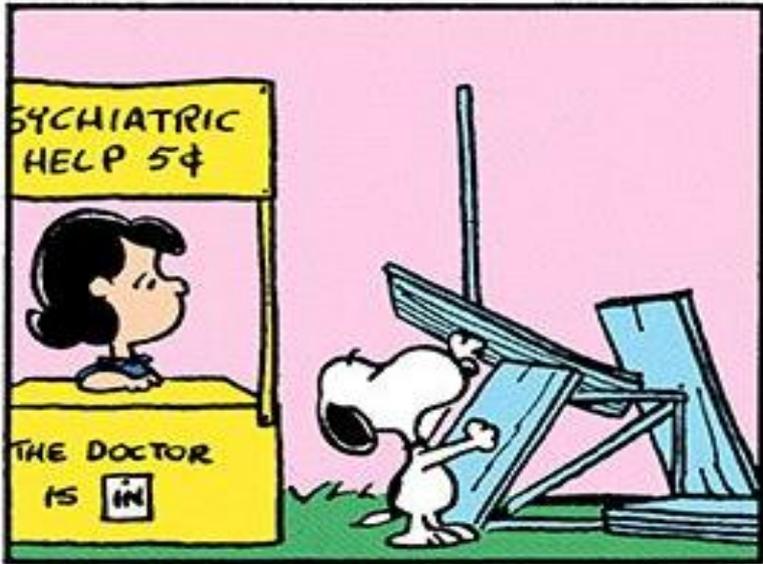
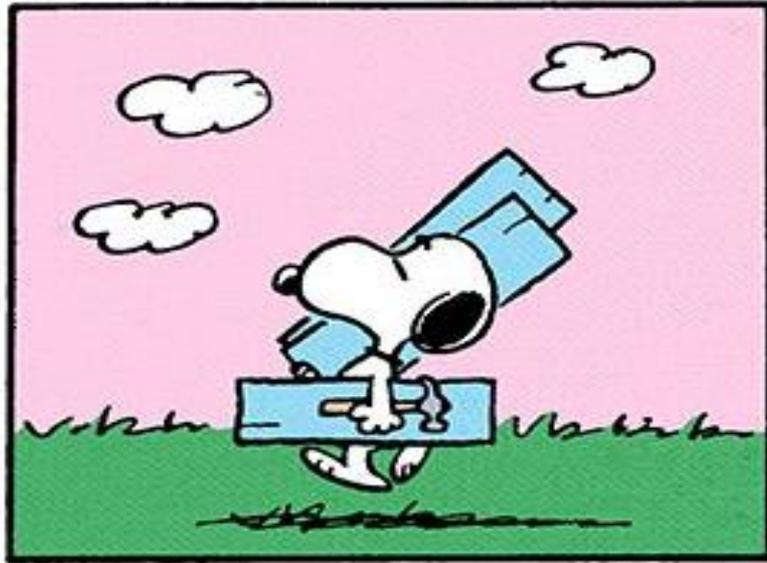
Men Feeling Anxiety or Depression Every Day Who Received Professional Help



Uninsured Women by Race/Ethnicity

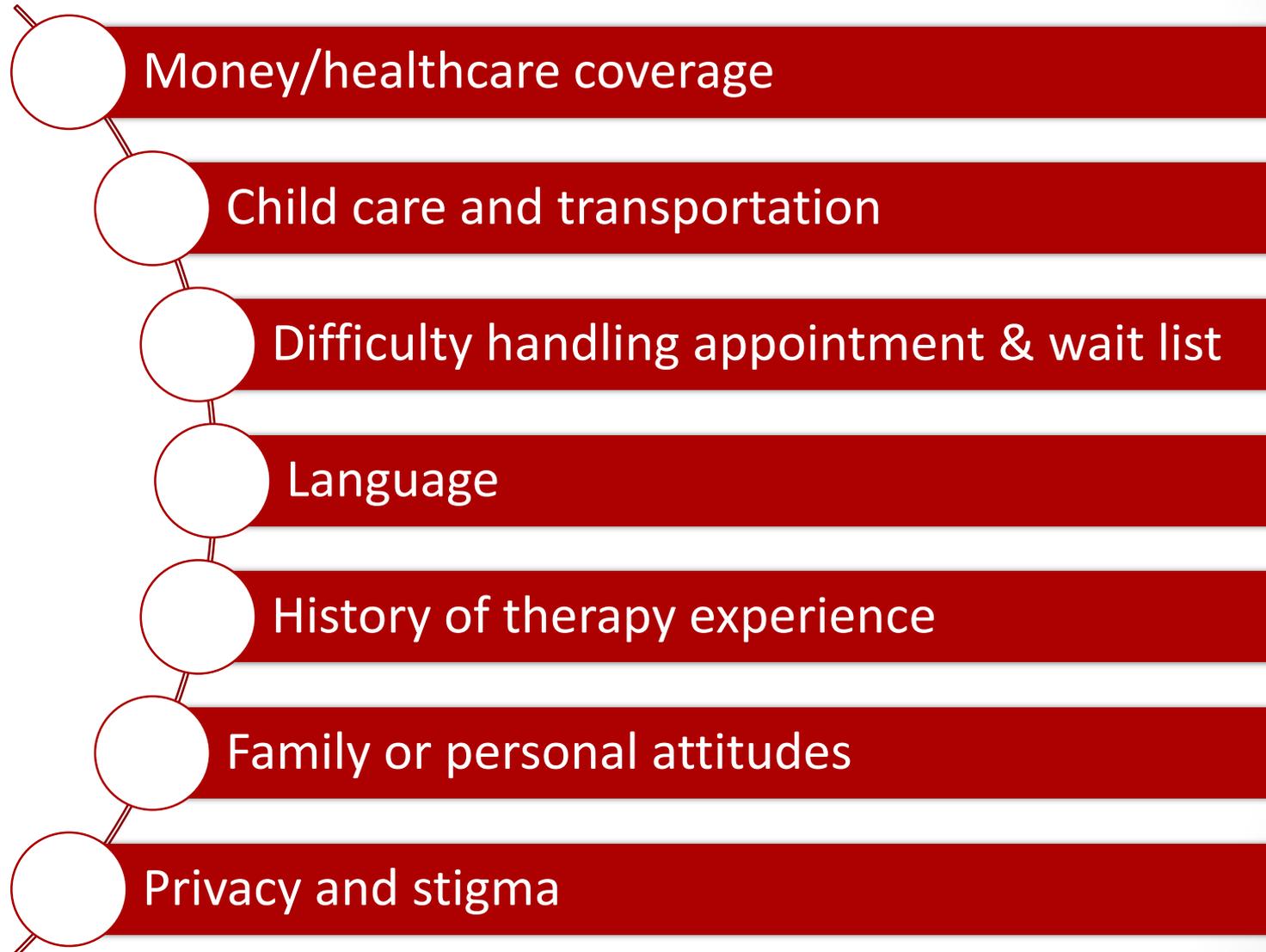
(U.S. Census Bureau, 2011)

Race/Ethnicity	Uninsured
Asian	20.6%
Black	22.9%
Latino/a	37.4%
Native American	30.0%
White	14.2%



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Barriers to Seeking Mental Health Help



Ana is a young bilingual Hispanic mother, who emigrated from El Salvador 3 years ago. Ana now has a 2-month-old infant and is raising the baby on her own. Recently, you've observed that Ana has been exhibiting signs of depression such as consistent fatigue, negative outlook on life, and disinterest during home visits. After completing the postpartum depression screening with Ana, you suspected that Ana might need professional help.

“I don’t think I have depression. I do feel sad sometimes, but I don’t need therapy. That’s for people with really serious problems. I can handle this on my own.”

Beliefs/Values:

“Tell me about other people you know that have had depression or gone for counseling.” (open-ended question)

“What would it mean to get help from another?” (open-ended question)

“You feel sad sometimes.” (simple reflection)

“A lot of people feel sad sometimes.” (normalize)

“A lot of people hesitate before seeking treatment.” (normalize)

“I had a cousin who saw a counselor once, and it didn’t help her. She still gets depressed. So, I thought I would try to make some changes myself and see if that worked. But it doesn’t seem to be working. I need to try something else.”

Beliefs/Values:

“Tell me more about why your cousin’s therapy didn’t work.” (open-ended question/statement)

“You want to try something else.” (reflection of change talk)

“Sounds like you’re a little burnt out about trying it on your own.” (emotion-focused reflection & reflection of change talk)

Summary

1. Know your assumptions and biases
2. Talk early and often about differences
3. Search for beliefs and values
4. Keep doing the great work you do!

Application

What is one way you could use the concepts you learned today with a family currently on your caseload?