

# Latino psychology takes center stage

Psychologists highlighted Latino health disparities at the first annual National Latino/a Psychological Association conference.

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Monitor staff

Accompanied by a steady drumbeat, members of the National Latino/a Psychological Association (NLPA) stood up in turn and stated their intentions for the association's first annual conference:

"To come together and work together for the benefit of our people," one woman proclaimed.

"To get to know the field of Latino psychology and my Latino brothers and sisters," said a graduate student.

"To bring Latino family values to the field of psychology," said NLPA president Patricia Arredondo, EdD, a counseling psychology professor at Arizona State University.

Arredondo then welcomed roughly 300 psychologists and graduate students to the first meeting of the newly reinvigorated 25-year-old association, held in Scottsdale, Ariz., Nov. 18–20. Latino-focused psychology will grow in its importance as the U.S. Latino population grows, Arredondo noted.

In preparation for this demographic shift, the conference featured sessions on making therapy more effective for Latino clients—for example, by incorporating spirituality when appropriate. Conference participants also discussed behavioral health problems that disproportionately affect Latinos—such as the sexually transmitted human papillomavirus (HPV)—and strategies to educate Latinos about depression and other behavioral health problems that afflict some Latino communities.

"Health is one area [of many] where Latinos are not enjoying the same bene-



Traditional Mexican Dancers entertained the roughly 300 psychologists and graduate students who attended the National Latino/a Psychological Association's first meeting.

fits as other groups," said Tiffany Schiffner, a graduate assistant in educational psychology at the University of Illinois at Urbana-Champaign.

## Sexual health

In particular, Schiffner noted that Hispanic women develop cervical cancer up to three times more often than white women—a rate probably due to increased levels of HPV among this population, according to the U.S. Department of Health and Human Services. However, she said during one session, scientists do not know what demographic or cultural factors might contribute to this discrepancy.

To explore potential cultural factors, Schiffner recruited 16 sexually active Latinas from a college Hispanic center and formed three small discussion groups. During a two-hour meeting, the participants took a quiz testing their knowledge of HPV and discussed their attitudes about sexual health.

Schiffner discovered that 70 percent of her participants did not know any-

thing about HPV, and even after learning about it about half said they were unconcerned about contracting the infection.

A group discussion unearthed potential causes for this unconcern, Schiffner said. These women felt strong pressure from their families and community to abstain from sex until marriage, and so they shied away from buying condoms for fear of being caught—even though they were sexually active, she reported. Similarly, the women preferred not to think of sexually transmitted infections as possible, as contracting HPV would bring nearly unbearable shame upon them and their families, Schiffner found.

"They said they felt cultural pressure to remain 'decente,' decent and pure, much more than their non-Latino friends," reported Schiffner.

However, this small sample of largely Mexican Americans certainly does not represent all Latinos, or even all Mexican Americans, Schiffner noted. Future research will be needed to see if her findings hold true for larger populations, she said.



Tiffany Schiffner



Henry Acosta



Dr. Joseph M. Cervantes

Despite these limitations, discussions with the focus groups also revealed one way that health educators might raise awareness of HVP, and decrease some of the shame surrounding it. Specifically, the participants reported that their mothers strongly influence how they view sexuality and sex. And an informational campaign that encouraged Latina mothers to endorse condom use and talk about sex with their children might help decrease Latino rates of cervical cancer, said Schiffner.

### Mental health education

Indeed, a public education campaign provided the focus of another session, headlined by Henry Acosta, deputy director of the New Jersey Mental Health Institute. The education campaign—called “Family to Family”—teaches people with mentally ill family members about mental illnesses’ causes and treatments, and encourages participants to be more supportive of mentally ill family members. Graduates of the program then can lead their own “Family to Family” groups after a day of additional training—so the information travels further and faster, said Acosta.

Past research has shown this education model, which includes a structured curriculum for 12 once-a-week classes, effectively increases mental illness understanding and support. During the 2.5-hour sessions, participants learn what it is like to have different mental disorders, and discuss strategies for handling mentally ill relatives.

However, no one had tried the program with a Latino population, Acosta noted. To do this, Acosta identified Latino community leaders in nine New Jersey cities and brought them together

to discuss what aspects of the program needed to be tweaked. The leaders felt that the program’s basis in peer communication would prove effective among their family-focused constituencies, Acosta noted. However, they expressed concern over the program’s reliance on volunteers, noting that people from lower-income Hispanic communities would struggle to donate time to the effort.

“Some of these people were working two to three jobs, were single parents—how did we expect them to find a location [for the program] and do outreach when they hardly had time to breathe?” Acosta asked.

To alleviate this pressure, Acosta hired a project manager who took on some of the volunteers’ tasks, such as organizing their group educational sessions. Additionally, the program—funded by a Substance Abuse and Mental Health Services Administration grant and administered by the New Jersey Alliance for Persons Affected by Mental Illness—provided on-site child-care to participating family members and a \$350 stipend to group leaders.

In total, 200 groups formed in nine New Jersey cities through the process, and most have completed their three-month run. The next step, said Acosta, will be assessing the program’s effectiveness.

“Did putting in that additional support really make a difference?” Acosta asked. “We will know soon.”

### Latino spirituality

Along with family, religion serves as an important pillar of life for many Latinos, said Joseph M. Cervantes, PhD, a professor in the department of counseling at

California State University, Fullerton. Accordingly, practitioners may want to discuss the role religion plays in their Latino clients’ lives—for example, how often they pray, and what prayer means to them, he said.

“I ask people what they pray about to figure out what their problems are,” Cervantes said.

When working with religious clients, practitioners can encourage them to use prayer to foster a sense of serenity, and control anxiety, he noted. A practitioner may also want to help orient a clients’ prayers to increase their calming effect—for example, suggesting they seek patience from a higher power rather than asking: “Why am I suffering?”

Practitioners may also want to collaborate with a priest or faith healer—known in some Mexica-American communities as a “curandero.” For example, someone who feels overpowering guilt about having an autistic child might not feel relieved by an explanation of the biological underpinnings of autism. But a psychologist might consider referring that client to a priest, who might alleviate guilt by assigning a rosary penance for a Catholic client, said Cervantes.

Similarly, a curandero-performed purification ceremony—where sage is burned to cleanse a person of negative energy—can alleviate anxiety, especially a fear of death, Cervantes has found.

However, before making such referrals, a psychologist needs to know which alternative healers and priests have good reputations—as some curanderos run scams and some religious leaders encourage unhealthy feelings of guilt, he noted.

“What this comes down to is knowing your client and knowing the community,” said Cervantes. ❧