

# THE ROLE AND RESPONSIBILITY OF THE THERAPIST IN MULTI-CULTURAL COUNSELING

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## Abstract

*As a therapist, the therapeutic alliance formed in the relationship building phase of counseling is of critical importance in setting the stage for the future success and outcomes of treatment. When working with an ethnic minority population, it is imperative that the therapist take into consideration aspects of the client's culture, such as language and socio cultural norms. At times the therapist must also accept that he/she is not the majority culture represented, but rather he/she is the minority. Therapists must also remember that they themselves are not the client and, as such, must switch their perspective to those of the individual with whom they are working. With this comes the question of how cultural diversity fits into this need for therapists to switch therapeutic modalities. The United States has traditionally been known as "the melting pot" of the world. Increased immigration into the country has caused several subcultures within the larger American culture to develop, which is evidenced by areas in large cities known as "China town", "Little Italy" etc. While there are several ethnic subcultures contained within the United States, the focus of this paper will be on the Hispanic culture. However, please note that the research and ideas contained within this document can and should be applied to other cultures as well.*

A psychological anthropologist or researcher working in a community and culture outside of his/her own must and should adjust and assimilate to the societal norms and mores of that particular culture. A failure to do so results in skewed research or findings based on incorrect interpretations that are grounded in cultural misunderstandings. Evidence of this mistake is found in the case examples cited in Darou, Hum and Kurtness's 1994 examination of psychosocial research with The Crees of Northern Quebec ("An Investigation of the Impact of Psychosocial Research on a Native Population"). The researchers illustrate how culturally sensitive instruments and interviews, honesty, a willingness to learn the native language, careful interpretation on motives for behaviors and avoidance of generalizations based on impressions can help in the true understanding of a culture and its norms. However, it can and should be argued that these same practices be employed when working with a minority subculture within a larger majority culture and not just when one is a "guest" in another country.

It is estimated that by the year 2020, the Hispanic population within the United States will increase from 9% to 15% (Altarriba, Santiago-Rivera, 1994; Rosado, Elias, 1993). Although this increasing immigrant Hispanic population resides within the larger American cultural context, the lessons learned through the experiences with The Cree should be applied when counseling members of this ethnic minority. The ethnocentric individual might argue that immigrants should fully assimilate to American culture; that is, learn the English language, American customs and traditions. While this is an understandable viewpoint; to want those within your culture to participate in your language and heritage; cultural assimilation does not happen quickly. Rather, it can take years for a first generation ethnic

minority to feel like a part of the American culture, if at all. To expect acculturation to happen immediately will be a disservice to any client struggling with this process. Whether an individual chooses to leave his/her native country or is forced through political upheaval, the process of acculturation can be arduous and one that can lead people to therapy. It is important to remember that when working with any client, it is the duty of the therapist to meet the individual where he/she is emotionally, cognitively and behaviorally. This same “therapeutic courtesy” and expectation should also be afforded to those individuals who are struggling with the issue of acculturation; “to service clients fairly and ethically, psychologists must develop an investigative, non assumptive and flexible stance concerning the characteristics of the various Latino groups with whom they work” (Rosado and Elias 1993, p. 2).

Individuals living within the United States who are not native to the country may begin the process of acculturation by learning the English language. However, despite these efforts, English is still not the individual’s native language, and thus there may be much that is lost in the translation. In the initial intake with a non-native English speaking client, such as someone of Hispanic descent, it is essential to know that “a Hispanic client who has cultural values, beliefs and customs that differ from those of the counselor might attach a different meaning to symptoms and express them in a way that can be easily misunderstood” (Altarriba, Santiago-Rivera, 1994, p. 2). Thus, there may be gross inaccuracies in the presenting problem and in diagnoses based upon the therapist’s interpretations. Additionally, there may be words and expressions within the Spanish language that do not readily or easily translate into English. Under these circumstances it is difficult to see how a native Spanish speaking client would be able to accurately or effectively communicate what is happening in his/her emotional world. Rosado and Elias (1993) further elaborate that “the current psychological service delivery systems do not adequately identify or reflect ways in which value orientation, ethnic identity, indigenous supports, bilingualism and biculturalism, socio-ecological conditions, religious beliefs, acculturation forces and Latino family structure must moderate the planning, implementation and evaluation of mental health programs for Hispanic families, children or adults” (p. 3). Without this understanding, there is a great disservice being done to mental health clients who do not fit the white, English speaking, Anglo-Saxon mold as the majority of Americans do.

It is important for therapists working with a multicultural population, such as Hispanics, to adapt to understanding the culture, language and body language of their clients. A therapist can theoretically do this in a variety of ways but perhaps the most honest reflection of the desire to learn the person’s culture is through asking that client. This is particularly important because those traditions and norms that are common in a specific culture still differ from cultural subset to subset and from individual to individual. Additionally, as Altarriba and Santiago-Rivera (1994) indicate, learning the language of a particular culture can be equally as important. Clients who do not possess English as a native language may show reservation in counseling sessions simply because they do not know how to express what they are feeling in a language that is not native to them. In these instances, to expect a client to articulate his/her thoughts and feelings accurately is unrealistic. Again, it is important for the therapist to meet their client where he/she is and not expect the client to adapt to the therapist’s way of interacting and communicating. The use of an interpreter in this purpose could be very useful; however, the presence of a third party in the therapeutic process can present a host of difficulties such as inaccurate translation, loss of or limits on confidentiality and detriments to the formation of the therapeutic alliance through the need to converse through someone else (Altarriba, Santiago-Rivera, 1994). Given these factors, it may be useful for therapists who commonly work with a certain ethnic population to learn the language of that particular group. While this may not always be practical; as it is not realistic to expect every

therapist to learn every language; it is a sensible consideration for many therapists with a desire to serve a multicultural and diverse population of clients.

It is clear that current demographic changes in the United States demand that counseling professionals employ pluralistic therapeutic modalities. By doing so, counselors will improve the services that they are able to provide to their clientele and, can realistically, predict improved outcomes for those individuals they serve. By remaining aware of the importance of meeting clients where they are, regardless of their culture or ethnicity, we, as therapists, can hope to move closer to that pluralistic vision.

## **References**

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