

# [Diversity in family counseling](https://assignbuster.com/diversity-in-family-counseling/)

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The therapy assessment approaches delineated for contextual issues like gender, culture and spirituality, have gained relevance as the world societies are fastly becoming multicultural (Lyness, Haddock and Zimmerman, p. 409-410). The major pitfall in the early therapy approaches had been that they failed “ to see relationships in their context”, that is, in the context of power relations involved, that too in connection with gender, culture, race, spirituality etc. (Lyness, Haddock and Zimmerman, p. 409-410). As the family therapy theories do not address this concern as such, many new therapy approaches have been developed (Lyness, Haddock and Zimmerman, p. 410). One such approach is based on the concept of metaframeworks, which includes domains of gender, race, culture etc. each acting like umbrellas that include all others (as cited in Lyness, Haddock and Zimmerman, p. 410). The guidelines given by American Counseling Association and American Psychological Association (as cited in Sommers-Flanagan and Sommers-Flanagan, 2004) prescribes therapists to include, “ an introductory cultural statement, cultural considerations for the use of diagnostic categories and criteria, a glossary of culture-bound syndromes and idioms of distress, and an outline for a cultural formulation”, as their therapy tools in a multicultural context. The collaborative language system therapy is one approach that allows the therapist to use the “ key language that a family uses in order to make sense of their situation” (Ponterotto, 2009, p. 679). Triangulation introduced by Bowen (1966) is a model that acknowledges the role of a third person in a problem and idiographic model is another model which approaches a family as a cultural system (as cited in Ponterotto, 2009, p. 679). Narrative therapy “ believes in each family’s unique capacity to create meaning from its presenting problem” and bi-cultural effectiveness treatment is a method in which “ clinicians make the differences in the world views between subsystems explicit and use these differences to help the family to understand the issues that lead them to present for treatment” (Ponterotto, 2009, p. 681).   
The interpersonal skills need for a multicultural therapy session for couples and families must include, ability to identify clues in the culture/s of the clients to decide upon how to present the issues to them, the ability to identify culturally defined “ treatment goals”, the ability to identify culturally defined notions of health and a good life, observation for “ culture-specific syndromes”, and the selection of “ culture-specific tests” (Sommers-Flanagan and Sommers-Flanagan, 2004). The skills needed by the therapist in a multicultural context also include:   
Implicit interpersonal valuing… implicit structure/frame for the encounter… attention to interpersonal similarities…validation, enhanced communication fluidity and accuracy, reduced interpersonal anxiety… improved expectations for outcome…willingness to engage…pledges/commitments with one another…acknowledged interdependence…demonstration of appropriate social skills…recognition and reinforcement of client strengths and coping methods…rehearsal of realistic alternatives for coping…involvement of client support networks …communal reintegration…symbolic healing…spiritual perspectives; invitations for intervention from spiritual sources…plans for/acceptance of an unknown future…description of compatible examples to emulate…acknowledgement of cultural values/principles that may guide decisions/actions” (Ponterotto et al., p. 447).   
The impact of using the different models discussed above would be that a more democratic and culturally sensitive relationship emerges out of the counselor-client interface and also a more effective therapy outcome. In the long run, this will evolve into a framework to address the complexities of a multicultural society.   
Miranda et el. (2006) have discussed the relationships among culture, the acculturation process, how the family performs and how the health of the family is connected to all these, specifically in the context of US Latin families. The definition of acculturation adopted in this peer reviewed article is that it is “ a process of culture learning and behavioral adaptation that takes place as exposure to a nonnative culture occurs” (as cited in Miranda et al., 2006, p. 269). And it is noted that “ social and psychological changes” are linked to it (Miranda et al., 2006, p. 269). The article then has described the central values of Latin culture which includes collectivism in which family acts as a buffer that absorbs the acculturation tensions (Miranda et al., 2006, p. 269). This gets transformed into individualism when members of latin community get acculturated to the Western culture and the patriarchal gender relations in the Latin community are also found to change in favor of female autonomy and independence during acculturation (Miranda et al., 2006, p. 270). Assuming that “ physical and psychological disorders are not universal but are culturally determined”, the researchers have examined selected health indices among Latinos (Miranda et al., 2006, p. 271). In the context of acculturation the researchers (Miranda et al., 2006) have found out, more negative health indices in highly acculturated groups (p. 271). And it is concluded that family counselors have to be “ well prepared to contribute to the understanding of Latino acculturation and acculturation’s relationship to health status in this population” (Miranda et al., 2006, p. 271). It is also suggested that “ clinical interventions that address the psychological and physical health outcomes and their relationships to Lations in the United States” are the need of the hour. Attention is also invited to how acculturation leads to behavior change which also leads to risks to physical well-being (Miranda et al., 2006, p. 271). For example, acculturation might lead to a Latino teenage girl indulging more freely in sexual relationships and then using crude and unhealthy methods to get rid of unwanted pregnancy. Such a situation can even turn out to be fatal for her. Similarly, a Latino man might do harm to his physical health by developing the habit of alcoholism through acculturation. I have also observed many Latino women getting divorced more frequently in the US than they would if they were in their native country. And this often leads to their living an impoverished life bringing up one or two children without a proper job.   
References   
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