Innovations in Counseling: Working with Minority Populations- Part 7
Session 2: Addressing Addiction Treatment Barriers in Minority Communities

Webinar Follow-up Question and Answer Session with Dr. Robert Horne

Question from Allison Gunn
Do you have any recommendations for engaging and welcoming individuals who are from multi-cultural backgrounds?

Answer from Presenter
Here are 7 recommendations I have found helpful for welcoming and engaging clients from multicultural backgrounds. They seem very simple, but they reflect several concerns that members from diverse communities have identified as hinderances to therapy.

Initial Greeting (Expect client cautiousness and do not take it personally or as a sign of client resistance.)

a. Extend a hand during initial greeting (It indicates you are willing to touch and engage the client).
b. Introduce yourself to the client and ask how the client how they would like to be addressed. Then use their name with their self-described honorific (i.e., Mr., Ms., Mrs., etc.) regardless of age (This empowers the client and demonstrates your respect for the client).
c. Take time to explain the concepts of counseling and how the counseling process works. (Many clients may have no prior experience in counseling, but may have negative ideas about counseling based on personal and/or cultural stigmas)
d. Let the client explain what brings them to counseling and talk with them about their process and decision-making. (This demonstrates an interest in the client and provides a context for understanding any potential challenges and/or support networks)
e. Honor the client's lived experiences and perspectives. (Honor their "cultural lens"(i.e., cultural mistrust, spirituality, etc.).
f. In the first few initial sessions focus on hearing how the client perceives their situation and how it fits into their social and individual narrative. (Resist the temptation to press the client into discussing their presenting concerns or changing their behavior until you have gained a therapeutic alliance.)
g. Take time to do some research about a client's culture before engaging the client. (Create a library of research for the demographic and cultural populations you serve. This will assist you understand the client's self and social schema)

Question from Sarah Payne
So many great points on this slide. How can we find agencies that have access to multiple languages, with hours people can attend and have trained competent providers?

Answer from Presenter
The best way is to find agencies that have access to multiple languages, with hours people can attend is to check with your local Managed Care Organization (MCO). The local MCO typically keeps a list of all the registered mental health agencies, their hours of operations and the services they provide. Additionally, the MCO may sponsor call-in translation services as part of their services. In these cases the counselor calls into the service during the counseling session and the translator participates in the session. You may want to review, Using Interpreters in Mental Health Counseling: A Literature Review and Recommendations, written by Tina R. Paone and Krista M. Malott (2011). Here is a link to the article https://doi.org/10.1002/j.2161-1912.2008.tb00077.x

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Question from Allen Vosburg
How do you get clients to let go of myths that they are strongly attached to?

Answer from Presenter
There is no easy answer to getting clients to detach from their beliefs, which are sometimes based on mythic conceptions or misconceptions. However, there are several general tips I can recommend:

  a. Establish a good rapport with the client prior to addressing any myth. (The trust you gain will help dilute any sense you are attacking a client's personal or cultural beliefs.)
  b. Have the client describe the belief/myth, its foundation, and the role it plays in the client's life. (This will provide the client and the therapist with an understanding of how the belief/myth impacts the client and possibly the counseling process.)
  c. Identify the most vulnerable parts of the belief/myth and then begin working with the client to help the client see the incongruences between the belief/myth and the current reality. I say current, because many beliefs/myths are based on historical factors, and we must be careful not to call a factual reality a myth (i.e., disparities in health care is a reality that has become mythic for members in some communities.
  d. The last thing I would add is review some of the literature of working with resistant clients and the techniques used to challenge client's negative cognitive thinking and/or self-talk.

While this brief list is nowhere near conclusive, I hope it provides you with a good starting point for future research.

Question from Shanice White
What are your thoughts about telemental health, as it relates to making services more feasible for those clients who work 9-5?

Answer from Presenter
I believe telemental health can play an important role in providing mental health care and my appreciation of that role increased in 2017. In 2017, I did a motorcycle ride around the country promoting mental health and addiction awareness. One of the memorable parts of that ride was stopping in a small rural town about 45 miles

east of Kalamazoo, Michigan and attending an AA meeting. The town had a population of less than 4000 people and the closest professional MH/SA treatment services were in Kalamazoo. The only local MH/SA services available was an AA group sponsored by a local church. The group consisted of approximately 15 people ranging from 22 -80. One individual indicated they use to drive to Kalamazoo once a week but could no longer do so because of the cost of leaving work for 3-4 hours (without pay) and the cost of treatment. So her only option was to attend AA for her non-alcohol substance use concerns. As I left the meeting, I thought about the role and benefits telemental health services could provide for this individual and others in similar positions. As such, I believe telemental health plays an important role in the counseling profession, and its role will continue to grow in an electronic media age. An important note is I believe counselors who engage in telemental health services should be specially trained and credentialed, similar to the standards and guidelines used for Distance Credentialed Counselor (DCC).

Question from Terri Yelle
What does "IAA" in LGBTQIAA stand for

Answer from Presenter
LGBTQIAA, stands for lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual and allies. It sometimes appears with 2 Qs one for queer and another for questioning.

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