

2021 SCCAP Professional Development Series



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Culturally Responsive TF-CBT via Telehealth for Latinx Youth and Families



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Learning Objectives

1. Identify common telehealth implementation barriers and the research support behind using telehealth with Latinx youth and families.
2. Describe at least five ways to adapt traditional CBT practices to a telehealth format for Latinx youth and families.
3. Describe how to incorporate cultural considerations to enhance treatment engagement for Latinx youth and families.



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Mental Health Disparities for Latinxs

- Trauma exposure is high among immigrant Latinx youth:
 - 67% experience at least 1 trauma event in their lifetime (Cleary et al., 2018)
- Latinx youth are:
 - less likely to access mental health services,
 - less likely to receive evidence-based care, and
 - more likely to drop out of treatment compared to non-Latinx White youth (Alegria et al., 2015)



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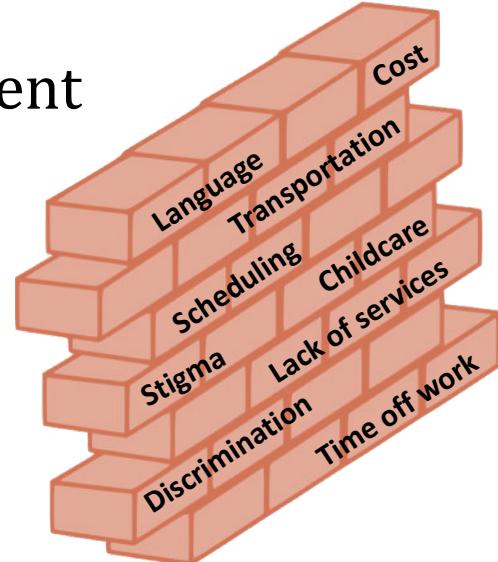
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Barriers to Treatment

- Accessibility
- Affordability
- Advocacy
- Appropriateness
- Availability

(Aguilar-Gaxiola et al., 2012; Falgas et al., 2018)



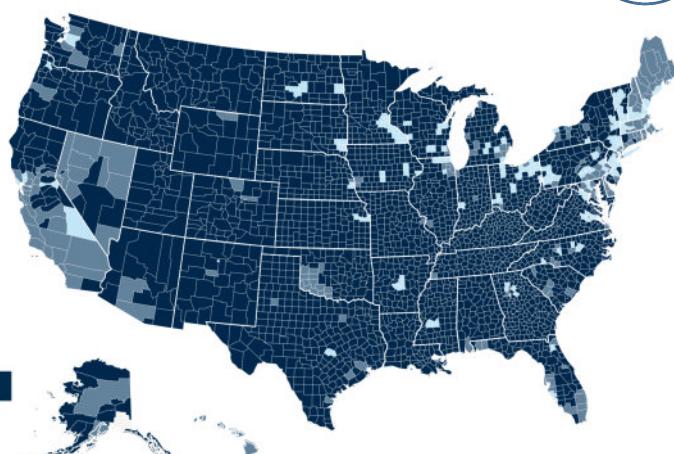
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Workforce Shortage

- Licensed Psychologists are not representative of the US population (APA, 2015).
- Only 5.5% of Licensed Psychologists speak Spanish (APA, 2015).



Source: data.HRSA.gov, January 2022

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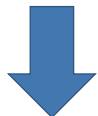
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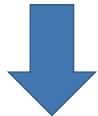
Summary:



Latinx families have more barriers accessing evidence-based mental health care.



There are few culturally-sensitive and linguistically-congruent mental health professionals for Latinx families.



When therapy is accessed, Latinx youth receive lower quality care and/or drop-out.



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Telehealth Model of Care

Telehealth can increase access to evidence-based care and keep Latinxs in treatment (Luiselli & Fischer, 2016):

- Clients can connect from a variety of remote locations
- Cost-effective (e.g., travel time, transportation costs, missed work)
- Increases geographic coverage of service providers
- Reduces stigma



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Evidence



- Telemental health is **equally effective** as in-person treatment for children and adults, and across disorders (Barshur et al., 2016).
- RCTs for child mental health problems:
 - ADHD (Myers et al., 2015)
 - Anxiety (Himle et al., 2012)
 - Depression (Nelson et al., 2003)
- Additional pilot or non-RCT studies:
 - <https://www.div12.org/telepsychology-resources/>



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TF-CBT for Trauma Exposed Youth



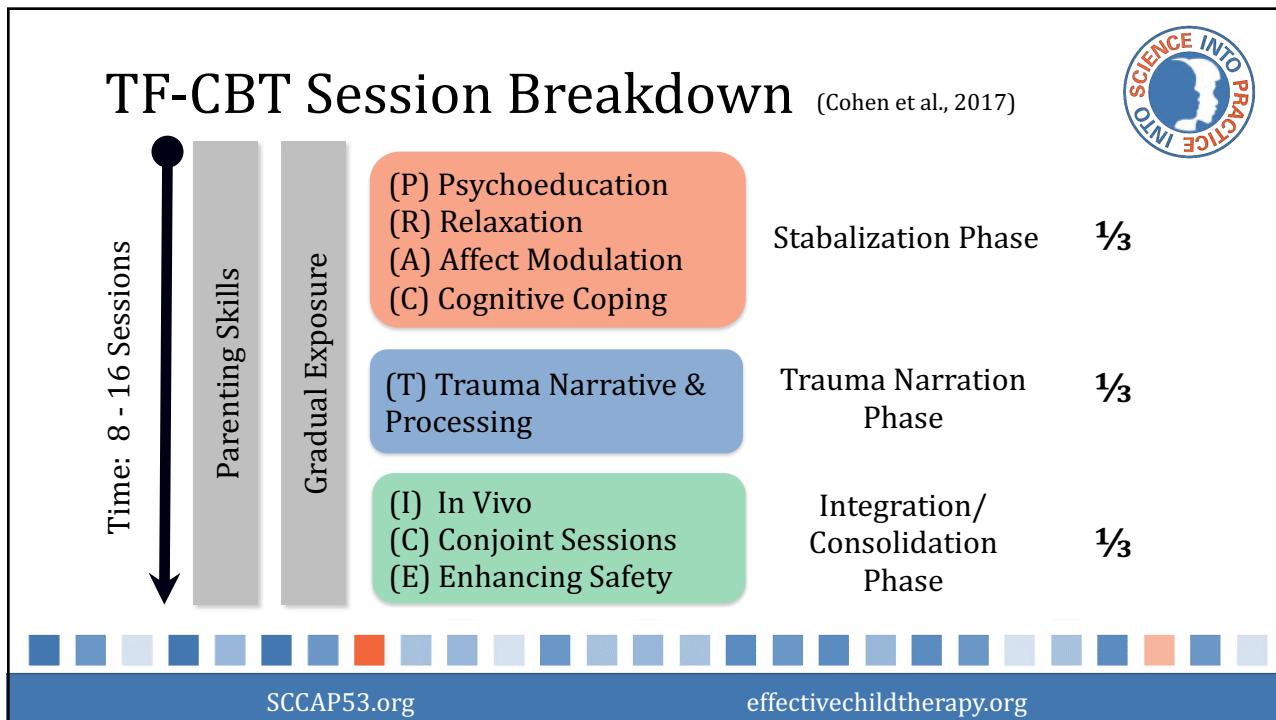
- Trauma-focused Cognitive Behavioral Therapy (TF-CBT; Cohen et al., 2012) has a strong evidence base and effective treatment for trauma in children and adolescents (Lewey et al., 2018; Mavranezouli et al., 2020).
- In addition to trauma symptoms, youth exhibit decreases in depression, anxiety, and sleep difficulties (Lenz & Hollenbaugh, 2015).
- TF-CBT has demonstrated effectiveness in residential (Joiner & Buttell, 2018), community (Cohen et al., 2011), and under resourced settings in Latin America (Oreango-Aguayo et al., 2020).



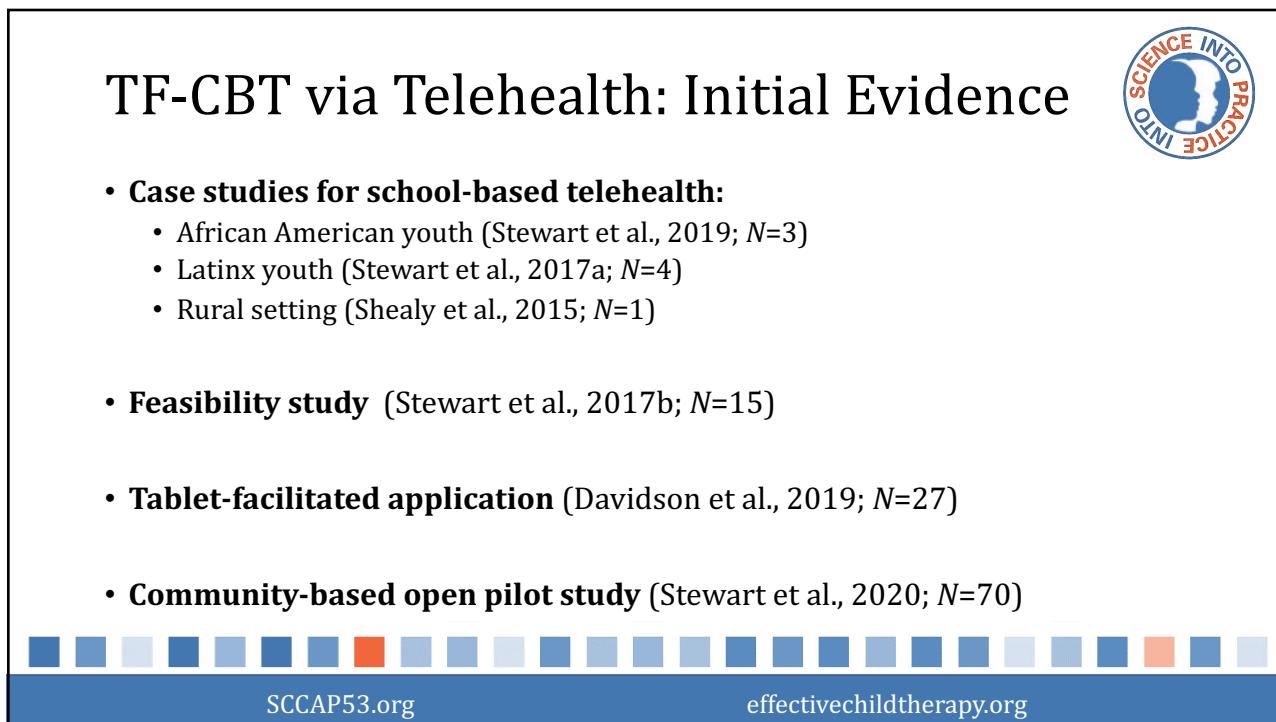
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How can we transfer the tools and techniques we use in-person to online settings?

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Tools and Resources

- <https://telehealthfortrauma.com>

- Dueweke et al. (2020). Resources and recommendations for engaging children and adolescents in telemental health interventions during COVID-19 and beyond. *The Behavior Therapist*, 43, 171-176.

https://services.abct.org/i4a/doclibrary/getfile.cfm?doc_id=10

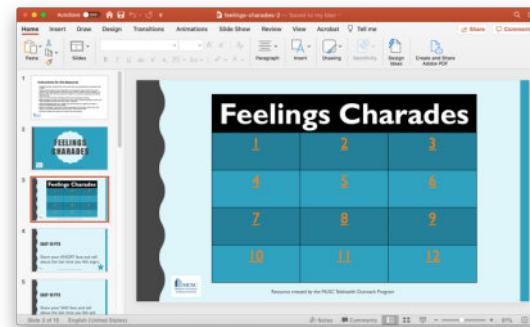
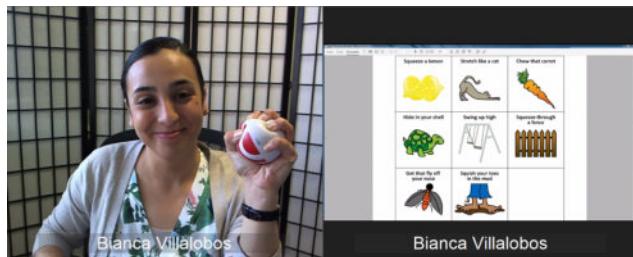
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Recommendation #1: Use interactive activities



- (P) Psychoeducation
- (R) Relaxation
- (A) Affect modulation



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1	2	3	
4	5	6	
7	8	9	
10	11	12	

FOR EVERY...

Red		Tell me about a time you felt ANGRY
Brown		Tell me about a time you felt SURPRISED
Green		Tell me about a time you felt EXCITED
Yellow		Tell me about a time you felt HAPPY
Blue		Tell me about a time you felt SAD
Orange		Tell me about a time you felt SCARED

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Recommendation #2: Utilize physical things in the child's environment



- (R) Relaxation
- (A) Affect modulation
- (T) Trauma narrative

- Consider mailing items to the home or school so that the child can physically manipulate objects during sessions.
 - stress balls
 - mindfulness cards
 - bubbles
 - markers and paper
 - fidget toys



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Recommendation #3: Tailor activities to each child's interests to enhance engagement



- (R) Relaxation
- (A) Affect modulation
- (C) Cognitive coping
- (T) Trauma narrative



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Recommendation #4: Adapt worksheets and activities for digital use



- All modules (**PRACTICE**)



Activity (location, date, time)	Depression	Pleasure	Achievement
(Go for a walk, next Tuesday, 10:00AM)	Before: 5 After: 3	Before: 2 After: 5	Before: 1 After: 5
Clean bedroom, tomorrow (Friday): 1:00pm	Before: 5 After: 2	Before: 0 After: 2	Before: 0 After: 7

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Recommendation #5: Use technology to your advantage



- (**P**) Parenting Skills
- (**I**) In Vivo Exposures



- Teach parenting skills live when disruptive behaviors occur
- Taking telehealth device on in-vivo exposure assignments
- Chat function to send clients links to videos, webpages, and files

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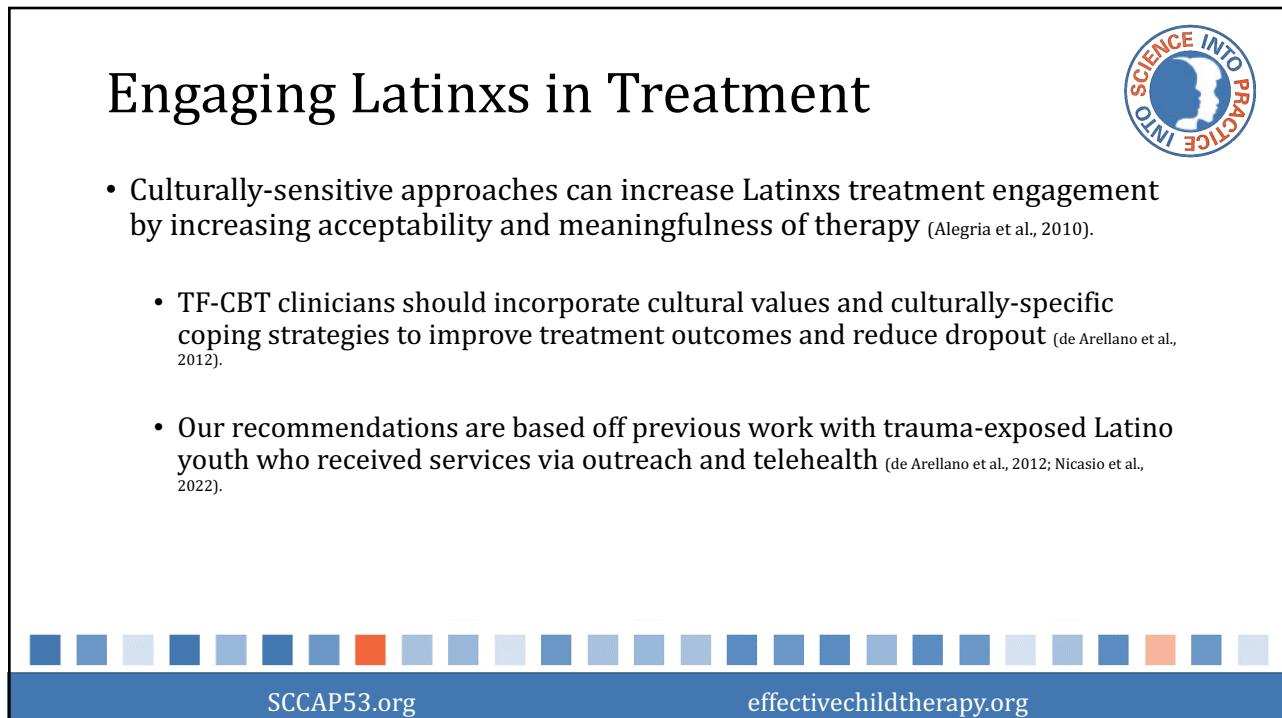
Cultural considerations for telehealth therapy

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Engaging Latinxs in Treatment

- Culturally-sensitive approaches can increase Latinxs treatment engagement by increasing acceptability and meaningfulness of therapy (Alegria et al., 2010).
 - TF-CBT clinicians should incorporate cultural values and culturally-specific coping strategies to improve treatment outcomes and reduce dropout (de Arellano et al., 2012).
 - Our recommendations are based off previous work with trauma-exposed Latino youth who received services via outreach and telehealth (de Arellano et al., 2012; Nicasio et al., 2022).

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Recommendation #1: Orient clients to culturally responsive therapy



- Stigma and mental health literacy can impact whether clients decide to stay in therapy
 - Ask about beliefs related to mental health, therapy, and resilience
- *Respeto* and *simpatía* can keep some families from openly voicing concerns or disagreement
 - Give clients permission to provide feedback



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Recommendation #2: Assess and incorporate cultural values into therapy



- Assess shared family values and client-specific values/identities
- Approach/style
 - Development of trust and building rapport via telehealth – *Personalismo* to develop *Confianza*
 - Telehealth communication style – *Respeto*
- Enhancing therapy
 - Family involvement in telehealth – *Familismo*
 - Incorporating religious beliefs – *Spiritualismo*



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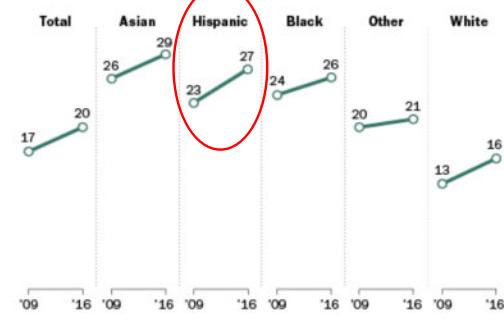
Recommendation #3: Assess acculturation and differences between caregiver and youth



- Multigenerational/multifamily households
- Consider how acculturation differences can impact family dynamics
- Therapist can be a cultural broker between caregiver and youth
- Shared culturally-focused activities can help enhance understanding and communication

Whites less likely than other racial and ethnic groups to live in multigenerational households

% of population in multigenerational households



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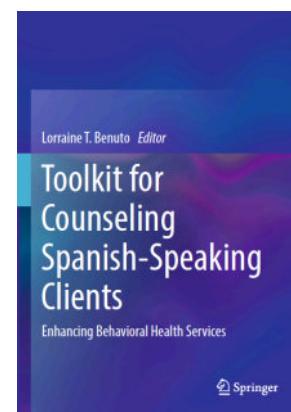
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Recommendation #4: Assess language proficiency, preference, and patient-caregiver language discordance



- Youth and parents can have different language preferences
- Consider the structure of conjoint sessions to accommodate languages
- Some clients may speak indigenous languages (e.g., Mam, K'iche')
 - Interpreter services
 - Translation apps



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Common Cognitive Behavioral Therapy Tools

- Self-report measures
- Self-monitoring forms and thought records
- Client worksheets
- Activity scheduling for behavioral activation
- Writing on a whiteboard
- Creating exposure hierarchies
- Instructions for relaxation techniques
- Handouts for psychoeducation
- Safety plans

Many CBT tools require some degree of literacy for clients.



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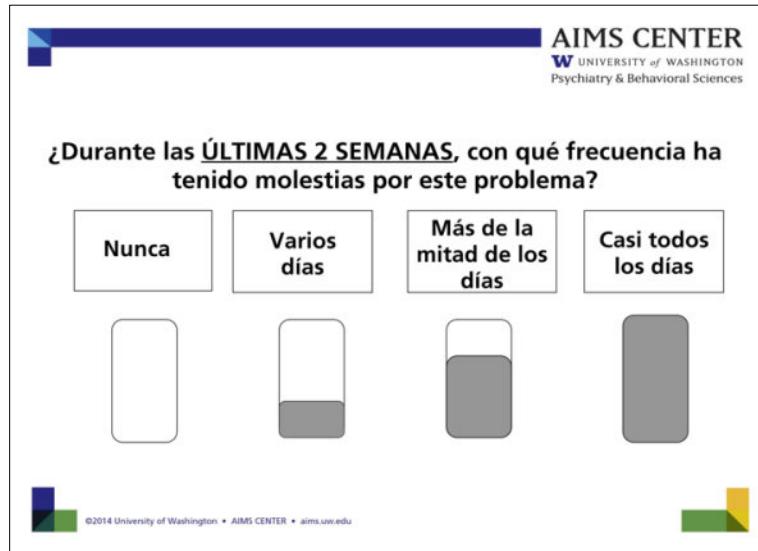
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Literacy Considerations: Trauma Assessment (UCLA PTSD Reaction Index for DSM-5)

FREQUENCY RATING SHEET

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Literacy Considerations: Symptom Measures (PHQ-9)



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Recommendation #5: Use technology to enhance cultural relevance



- Adapt therapy materials to be more representative of your client and their community
- Incorporate the client's own words/phrases into handouts
- Include images that resemble the physical and cultural characteristics of the child



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Thoughts → Feelings!

What feelings would follow this thought?



A black and tan dog is sitting on the left. A thought bubble originates from its head, containing the text: "That dog is staring at me. He looks mean. I bet he wants to jump on me or bite me!" To the right, a young girl with dark hair in a ponytail, wearing an orange shirt and a striped skirt, stands with her hand on her chin, looking thoughtful. A blue arrow points from the dog's thought bubble to a box labeled "FEELING = Scared, worried".

Resource created by the MUSC Telehealth Outreach Program

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Remember...

Telehealth can address barriers that Latinxs have when accessing traditional office-based services.

Therapy tools can be adapted for use online. Be creative and know your technology.

Cultural and linguistic factors will impact your approach to telehealth with Latinx clients.

Share your ideas and resources with others!

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Thank you!

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www.reachlab.squarespace.com

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Without website link

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