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Cultural Competence and Trauma: Applying Ethical Codes in Culturally Sensitive Ways

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Introduction

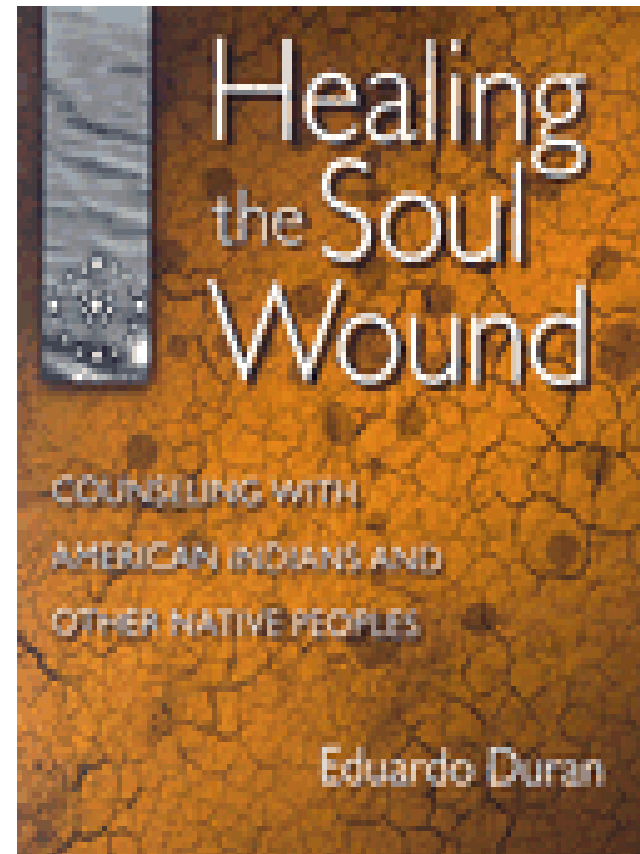
- Learning objective #1: Participants should be able to describe ways in which ethical codes are culturally embedded.
- Learning objective #2: Participants should be able to demonstrate the relevance of Christian values and worldview in working with culturally diverse persons.
- Learning objective #3: Participants should be able to explain strategies for resolving the challenges of applying ethical codes with culturally diverse persons in traumatic situations.

Introduction

- Ethical codes as culturally embedded phenomena
 - Deeply-embedded Western beliefs and values in the APA *Ethical Principles and Code of Conduct* and other ethical codes
 - Challenges to applying the APA ethical codes with culturally diverse clients
 - Challenges to applying the APA ethical codes with culturally diverse clients who have experienced trauma

Multiple Relationships

- Working with trauma in the American Indian community (Duran, 2006)
 - Intergenerational trauma (sexual abuse, suicide, alcoholism)
 - Engagement of community (elders, collaborators)
 - Multiple relationships (relationships within the community; teacher and patient)



Case Vignette

- Randy is a 45 year-old American-Indian male who initiated psychotherapy because his son was brutally murdered.
- Victor, Randy's son, who was 17 years old, had left home to live with relatives when he started hanging out with some homeless people who murdered him.
- They did not only murder him, but after killing him, they cut him into pieces and burned him in a barrel.
- Randy was mourning the death of his son who had experienced such a traumatic death.
- Before the death of his son, his relationship with him had been strained. Randy is now feeling much remorse and wished he had a better relationship with his son before he died.

Case Vignette Questions

- How would you assist Randy in dealing with the traumatic death of his son?
- What unique ways will you work with him within his cultural framework?
- What strategies will be helpful in the therapy with him?
- What ethical approaches may be challenged in working with him?

Guidelines

- Recognize that the person embedded in both native and western culture
- Determine Individualistic vs Collectivistic frameworks
- Consultation with colleagues both within and outside culture

Cultural Competence

- Culture and worldview are intertwined
- Everybody has a worldview
- Worldviews answer basic questions of life
- Worldviews come to us with our mother's milk
- Worldviews can change, sometimes with a whisper, more often with a storm (sturm und drang)
- We discuss worldview matters because worldviews matter

Cultural Competence

Worldviews answer basic questions of life

- What exists—ontology
- How we know—epistemology
- How things work—cosmology
- What is good/bad or right/wrong—philosophical ethics
- What it means to be human—philosophical anthropology

Domains	Important Ways People Differ with Respect to this Domain
What Exists	Belief in God, angels, demons, vs Strict materialism
How we Know	Appeal to scriptures or other religious documents vs Only science for human knowing
How things Work	God as active agent, work of Holy Spirit, prayer as a way to engage with God and others vs Solely material causes
Good/Bad Right/Wrong	These are based on God-given decrees vs based on social conventions. Eternal vs Only here-and now significance to what we do
Nature of Humans	Imago-Dei suggests that God takes personally the things we do to and with each other; this makes therapy a sacramental enterprise at least in some senses. Alternatively, we are living creatures, not much different from other living creatures, and bounded only by social conventions rather than divine decrees.

Cultural Competence and ethics

- The *Ethical Principle and Code of Conduct* of APA and (ethical principles for counseling and social work) are embedded in an individualistic Western cultural “ideological surround” (Watson, Morris, & Hood, 1988; Watson & Morris, 2006).
- Especially individuals from collectivist cultures, and generally culturally marginalized individuals, are uneasy with these cultural practices
 - Consent at the outset vs relationship building as a prerequisite to consent
 - Other?

Cultural Competence and ethics

- Individualistic conceptualizations of problem and solution vs collectivist notions
 - concern for welfare of the group
 - concern for the welfare of the world
- Centrality of emotional distance/uninvolvement and avoidance of multiple relationships is based on a cognitive-propositional conceptualization of truth vs relational conceptualizations
- Principles vs trust/respect/relational focus
- Honesty and truthfulness (Principle C) places ideas above relationships
- Justice (Principle D) vs virtue: emphasis on abstract ideas vs embodied enactments
- Self-determination (or autonomy) is an individualistic value (Principle E)
- Fairness may be a culturally-embedded concept in practice.
- Spirituality is largely ignored

Cultural Competence

Because of differences in worldviews, humans differ on:

- How we conceptualize problems (even on what we consider to be a problem: direct vs indirect communication)
- Acceptable and unacceptable forms of intervention (e.g., hypnosis among Adventists and in the military, psychotropic medications among some Christians)
- Goals toward which we wish to move (e.g., happiness/enjoyment vs duty)

To a significant degree cultural differences and religious/spiritual differences are intertwined.

Effects of Trauma on Worldviews

What it
means to be
Human

- PTSD causes doubts about human capacity for good
- PTSD causes altered views of self and others including concept of humans

Cultural Competence: Roma example

- An intake was scheduled for a 15-year old boy who had been involved as the driver in an automobile accident in which his mother's new car was seriously damaged.
- His parents were part of a Roma community. His father operated an auto sales business.
- The car was a birthday present for the mother. As part of the planning and preparation the boy and his dad had chosen and prepared the car and with dad as co-pilot the boy was driving it home for delivery when the accident occurred.
- When he entered the waiting room, the intern found 15 people, including the whole extended family, waiting to be part of the session. **What should s/he do?**

Cultural Competence: Mixed-Race Trauma Example

- The client is a 3x year old married (2nd time) woman with two children ages 12 and 5
- She presented with a mix of anxiety, depression, anger, and physical symptoms possibly linked to a motor vehicle accident five years earlier
- Initially PTSD was a rule out, but there was not clear evidence to support the Dx
- Due to complexity of symptoms, ethnic background did not come up in the intake; it was omitted on the information form as well
- The client had an olive skin tone that provided no simple ethnic clues
- At a subsequent session I asked if I could inquire about ethnicity; she said she was 1/4 white, 1/4 African-American, and 1/2 Native American

Cultural Competence: Mixed-Race Trauma Example

- The client is a 3x year old married (2nd time) woman with two children ages 12 and 5; she said she was ¼ white, ¼ African-American, and ½ Native American
- Silence and vagueness characterized much of the first three visits
- Then she informed me her first husband had abused her
- The next session she gave a general outline of what he had done and we began to talk about how I might help with the resulting PTSD

What do you make of the way this has unfolded so far?

How might the ADDRESSING model shed light on how we best proceed?

Cultural Competence: Korean-American client

- A first generation Korean-American woman, 20 years old
- She left college due to a breach in ethical conduct that she concluded would prevent her successful entry into a pharmacy career as had been planned.
- Living with parents, working at the (university) sporting goods store.
- One concern was conflict with parents over degree she was Westernized.
- More important to her was a work-related conflict in which she scheduled and managed a group of four co-workers.
- One of the co-workers tended to undermine her authority, in her opinion. She appealed to her boss for permission to change duties of the supervisee but was told to deal with it on her own without official sanctions as the boss did not wish to make waves.

What cultural issues do you see so far?

How might the ADDRESSING model shed light on how we best proceed?

Cultural Competence: Chinese-American client

- She came to me after about four years without treatment
 - a trusted female therapist moved out of town
 - she then saw a male therapist whom she described as pressing her to do some things she found troubling, including giving him her journal to read and possibly inappropriate physical contact. She quits.
- Her history included a report of ongoing physical and sexual abuse by her father and his friends through much of her childhood
- Sx included depression, PTSD, and dissociation
- Sexually inappropriate response to her son's male elementary school teacher prompted her return to treatment

Cultural Competence: Chinese-American client

- After about four years later, as was nearing the end of treatment, she requested that her therapist see her husband

How might we handle this request?

What principles and strategies/procedures should guide the decision?

What cultural issues do you see so far?

How might the ADDRESSING model shed light on how we best proceed?

Effects of Trauma on Worldviews

What Exists

- Doubts about God
- Biological and psychological functioning exist and interact—and spirituality
- Pain and fear
- Evil
- Bad/broken persons

How we

Know

- Distrust in our perceptions

Effects of Trauma on Worldviews

How things
Work

- PTSD causes loss of trust
- PTSD causes loss of self-esteem
- PTSD causes doubt the world is just
- PTSD causes change in beliefs about power/control
- PTSD disrupts intimacy
- PTSD alters locus of control away from self toward others or luck/fate/chance
- PTSD may also foster excessive self-blame (internalized locus of control)

Effects of Trauma on Worldviews

Good/Bad

- Belief that God is unfair (c.f. Job) or evil

Or

- Belief that people will hurt me

Right/Wrong

- Belief that I will hurt others
- Belief that what I did in war was murder
- Hypervigilance when in a safe place
- Hypnosis is forbidden in military and for high security personnel
- Benzodiazepines are contraindicated for Progressive Exposure therapy

Cultural Competence

- Effective therapy requires understanding my client well enough, in terms of her/his worldview, that I can:
 - Negotiate an acceptable treatment plan that describes the problem
 - Articulate what is to be done about it (treatment/intervention)
 - Identify goals or outcomes that reflect the patient/client's worldviews and concerns
 - Engage in an effective working alliance with him/her—or them