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Treatment Of Diverse Populations contains more than 50% new material and includes contributions from established leaders in the field as well as voices from rising stars in the area. It recognizes diversity as extending beyond race and ethnicity to reflect characteristics or experiences related to gender, age, religion, disability, and socioeconomic status. Individuals are viewed as complex and shaped by different intersections and salencies of multiple elements of diversity. Chapters have been wholly revised and updated, and new coverage includes indigenous approaches to assessment, diagnosis, and treatment of mental and physical disorders; spirituality; the therapeutic needs of culturally diverse clients with intellectual, developmental, and physical disabilities; suicide among racial and ethnic groups; multicultural considerations for treatment of military



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Treatment Of Diverse Populations personnel and multicultural curriculum and training.

Foundations-overview of theory and models Specialized assessment in a multicultural context Assessing and treating four major culturally diverse groups in clinical settings Assessing and treating other culturally diverse groups in clinical settings Specific conditions/presenting problems in a cultural context Multicultural competence in clinical settings

The highly subjective nature of illness and the frequent ambiguity in diagnosis, management, and treatment require patients and providers to frame illness experiences in terms of meaningful concepts and vocabularies. For physicians this framing is based on the language of science; for patients it is often based on cultural beliefs, practices, and local

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vocabularies of distress. The ambiguity inherent in the subjective experience of disease means that researchers and practitioners must be aware, not only of culturally bounded illnesses, but of the potential impact of culture on all aspects of the experience of illness. In this chapter we review a long tradition of research that illustrates the important role that culture plays in the subjective experience of illness, and we discuss the implications of culture for epidemiology, health services research, and medical practice.

A major challenge for mental health professionals who seek to practice effectively in contemporary US society is the increasing cultural diversity of the population. This chapter examines the competencies required for effective mental

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Health practice with culturally and linguistically diverse clients. It also explores curriculum development and training strategies for implementing these competencies that are crucial for preparing graduate students as well as professionals to respond to the challenges posed by the demographics in contemporary US society. The chapter proposes using the Cultural Competence Continuum as a tool for self-examination, and proposes an integrated etic-emic approach for addressing the domains of awareness, knowledge, and skills in cultural proficiency training.

This chapter begins with a discussion of general factors with a potential impact on the assessment and treatment of American Indian and Alaska Native people (AI/ANs). The

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Treatment Of Diverse Populations history of AI/ANs is briefly summarized and followed by a description of the unique demographic, socioeconomic, and health characteristics of the population. Some common cultural values among AI/ANs are then outlined. The chapter concludes with a shift to specific recommendations and guidelines to aid clinicians in accurately assessing and successfully working with AI/ANs.

This chapter reviews research and conceptual issues involving the physical and mental health of African Americans. A summary of sociodemographic findings is followed by a discussion of the relationship of race, physical and mental health, with emphasis on the role of ethnic identity, racism, and discrimination in the prediction of the

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Treatment Of Diverse Populations trajectory of physical and mental health in the African American community. Culturally sensitive guidelines are also provided in the context of assessing and treating African American clients.

There have been significant advances in research on Asian American mental health within the past decade. This chapter discusses resources and strategies for conducting culturally responsive assessment and treatment with Asian Americans that highlight the theories and knowledge gained since the publication of the previous edition of this Handbook in 2000. The first section on assessment discusses race, immigration, and culture-related factors that affect the phenomenology of distress among Asian Americans. The

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Treatment Of Diverse Populations second section on treatment discusses theories and evidence regarding factors that increase therapeutic credibility as well as the recent advances in applying evidence-based treatment with Asian Americans.

This chapter provides a review of the literature on multicultural curriculum development, including the ethics of intersection and culturally responsive practices. We argue that the integration of the fourth (multicultural) and fifth (social justice) forces in mental health must be the epicenter of our training paradigms. Despite our best efforts to ensure that training programs continue to evolve to solidify an academic environment that reflects the environmental and contextual changes in society, many programs are unable to

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Treatment Of Diverse Populations mirror their educational efforts with the ever-evolving demographic changes. As we continue to situate our training programs and students in ways that reflect the needs of ethnocultural communities, our desire to separate the personal from the political will no longer be an acceptable approach to training. The continued challenges in bridging much needed gaps in these areas are further discussed in this chapter and specific training models are presented.

This chapter describes basic principles and processes in the clinical mental health interview of a person from any cultural group. Because of the author ' s own background and the characteristics of his clinical work, the emphasis of the chapter is on the Hispanic/Latino group, specifically Mexican

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Americans. The principles outlined can apply to many types of interviews: diagnostic, psychotherapeutic, emergency, and so on. The approach can best be described as dynamic but also available to gathering information for formal DSM diagnoses and formulations. Nuances of the cross-cultural dynamic process in the areas of language, intrapersonal attitudes/feelings, communication patterns, and other areas are covered. Specific psychotherapy techniques and explicit details about diagnostic formulation are beyond the scope of this chapter and are not examined.

A continuing evolution in both problem recognition and systematic research addressing the need for culturally equivalent and transnational versions of tests has been noted



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over the past decade. While the concerns and problem areas for cultural equivalence assessment research have remained relatively constant over the years, new variations of these problems have emerged. Additionally, the number and quality of studies addressing these concerns as well as related methodologies have improved and become more sophisticated. The present chapter reviews the current status of available methodologies for test translation and cultural equivalence, addresses the emergence and problems associated with computer and Internet technologies for cross-cultural testing, and provides recommendations regarding clinical approaches to selection of adapted tests for assessing culturally diverse clients.

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This chapter provides an introduction to social class and classism in mental health care practice (assessment, diagnosis, and treatment), and uses the Social Class Worldview Model (SCWM) as a framework from which social class may be used to strengthen clinical practice. The authors provide counseling-relevant definitions for inequality, poverty, and affluence. As presented in the Social Class Worldview Model, it is imperative that mental health practitioners have applied definitions and frameworks to use with clients. The authors also review literature on psychological diagnosis and assessment and discuss the impact of social class on these practices. Finally, the authors discuss an important bias, Upward Mobility Bias, that may influence the ways in which clients are treated.

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