Counseling Hispanics Through Loss, Grief, and Bereavement
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Ms. Houben has lectured on a variety of topics regarding life transitions, such as grief, loss, and transformation, and aging and spirituality. A pioneer in working with Hispanics and grief, Houben contributed to the creation of the first bereavement support group in her native country of Nicaragua—PUDE, an anagram for Personas Unidas en el Dolor y la Esperanza (People United by Grief and Hope). This group has implemented The Eleven Principles of Transformation™, a system created by Houben that addresses the emotional, spiritual, and cognitive aspects of individuals facing a transition or loss. This system was originally introduced in her self-help book Transform Your Loss: Your Guide to Strength and Hope, and is presented in this book, too.

Ms. Houben is an adjunct professor at Florida International University, Miami Dade College, and Kaplan University, where she teaches courses on ethics, religion, and death and dying. She offers consulting services to individuals and organizations; her private practice is based in Miami, Florida.
Counseling Hispanics Through Loss, Grief, and Bereavement

A Guide for Mental Health Professionals

Ligia M. Houben, MA, FT, FAAGC, CPC
This book is dedicated, with all my love, to the Hispanic community living in the United States and to the wonderful people who are interested in learning more about our values, traditions, and hardships as we face transitions or losses. The purpose of this book is to serve as a guide for increased awareness of the needs of diverse Hispanic groups, with the hope that it becomes easier to offer a caring and helpful hand. It is also dedicated in a special way to my daughter Dianita, so that she can learn more about her Hispanic roots.
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Foreword

I was personally delighted and honored when Ligia Houben requested that I write the foreword to her book Counseling Hispanics Through Loss, Grief, and Bereavement. There were a few reasons that this book excited me. For my 30 years at the Graduate School at The College of New Rochelle, I have not only taught courses related to thanatology but also a regular offering on Counseling the Culturally Diverse. The goal of that course is essential to counseling—to train counselors sensitive to cultural diversity. In teaching about cultural diversity, one cannot help but bemoan the fact that there is a scarcity of resources that actually address the ways that diverse populations deal with grief and loss. Hence Houben’s Counseling Hispanics Through Loss, Grief, and Bereavement fills a needed void.

It is especially needed for two major reasons. First, the Hispanic/Latino population is growing—now representing one of the fastest growing populations in the United States. It is national in dispersion. Virtually every community—rural, suburban, and urban, North, South, East, or West—has Hispanic/Latino communities. Second, it is a diverse community—different in many ways. As Houben is so careful to acknowledge, Hispanics come from many diverse countries that, even as they share common languages and core values, have different histories and distinct cultures. Racially, Hispanics may vary from White to Black. There are class distinctions and differences in levels of acculturation. Counselors then need to be able to assess these differences and be sensitive to the nuances implied by this diversity. Houben offers tools and insights to enable counselors to engage effectively the diversity in that community.
There also is a personal reason for my pleasure. While the surname Doka suggests that my father came from Eastern Europe—Hungary—many may be unaware that my mother’s maiden name was Martín. As Houben notes, given the common Hispanic value of *familismo*, I tend to culturally identify as Hispanic. We saw my father’s relatives on holidays and special occasions such as weddings. We lived amongst my mother’s family. It was a rare weekend that the extended family did not come together. The family continues that heritage as my son’s wife is an Alvarez. This brings another cautionary note to counselors. One should never assume the cultural identity of a client. Who would identify “Doka” with Hispanic culture?

So Houben’s book is a valued resource for counselors. *Counseling Hispanics Through Loss, Grief, and Bereavement* is a book that all counselors should have on their bookshelves. Wise to the culture, Houben is sensitive to the particular issues that might arise in counseling. Two are illustrative. One value that Houben addresses is *personalismo*—or the value placed on personal relationships. The implication here is that counselors may have to self-disclose. Hispanic clients want to know not only that a counselor is competent but also who they are as individuals. Counseling can take place only in such a context.

*Machismo* is another oft misunderstood value. Outside of the culture, *machismo* is generally identified as an exaggerated masculinity—often with a sexual double standard. Yet, within Hispanic culture, this value has more layered meanings. There it means being a good man—however that is defined in a specific culture. To be *machismo* means that one fulfills responsibilities—being a good provider, an attentive husband, a caring father. Houben notes that this value can motivate counseling rather than being an impediment to help seeking.

In short, *Counseling Hispanics Through Loss, Grief, and Bereavement* is an extremely timely and welcome addition to the literature in thanatology. Counselors will find in it the tools, knowledge, and insights to respond to a growing and diverse Hispanic community as individuals cope with loss and grief.

Kenneth J. Doka, PhD
Professor, The College of New Rochelle
Senior Consultant, The Hospice Foundation of America
Preface

Facing a loss is never easy, no matter who you are, how old you are, or where you live. It doesn’t make a difference what religion you follow or what culture or group you belong to; grief can be challenging and disorienting. It can shake you up like few other life experiences. It also prompts you to call upon all of the support and resources around you. The Hispanic/Latino population has the fastest growth in the United States (Gracia, 2008), and there has been a concomitant increased interest in its traditions, customs, and values. When one explores this culture and its members within the context of this book, one must take into consideration the many meanings of loss based on Hispanics’ history (individually and cross-culturally) and the impact losses have on their lives. As a Hispanic myself, and having experienced some of the losses I discuss in this book, I feel it is my moral obligation to talk about the complex nature of loss that occurs in the lives of many Hispanics as they move to the United States.

WHY DO YOU NEED THIS BOOK, AND HOW CAN IT HELP?

Grief is not limited to particular group of individuals; loss is a universal experience. However, the way grief is expressed is greatly influenced by individual traditions and values. Despite the extensive literature on grief and loss, there is a tremendous scarcity of research on Hispanic culture and how Hispanics’ traditions and values influence their grieving process and quality of life. More information is needed so that mental health
professionals can effectively counsel Hispanics. This book will give readers the information they need regarding customs and mannerisms, and provide insights into the way numerous Hispanics express and process their grief.

**WHAT ARE THE PREMISES OF THIS BOOK?**

I am writing this book for the following individuals:

- Those who are interested in the Hispanic culture and want to expand their knowledge about the types of losses Hispanics experience when living in the United States.
- Those who work with this population and have had trouble in understanding some of their traditions, their ways of expressing emotions, or their belief system.
- Those who want to offer a better system of care to this group of people based on its needs, rather than the counselor’s own.
- Those who want to embrace diversity in their practice.
- Those who want to offer clients their best support in times of grief and loss.

Taking into consideration the reality of many Hispanics, I believe the following:

- They are not aware of the many losses they may be experiencing and therefore do not look for counseling.
- They are used to relying on their family system to process grief.
- They experience a sense of alienation when compared with mainstream culture.
- They need to develop more trust in the counseling and social service systems and this can happen only if they feel valued and understood.
- They need to process their multiple losses to embrace the culture and find more meaning in their lives.

Rather than writing a textbook based solely on clinical research, I have chosen to offer a more intimate approach. The information presented, although it includes valuable information from reliable sources, is built on my personal experience with loss as a Hispanic and my clinical experience
as a grief counselor and thanatologist. Case studies are included to give readers the opportunity to enter the subjective world of the grieving person and to learn the tools to be utilized to provide the best care. The cases or stories come from different sources and have been edited to some extent to make them fit the frame of this volume (transcriptions of the complete interviews from which these stories have been extracted are available as a digital appendix). Some are from my clients, others are from friends, relatives, students, or just people I talk with on the street who have shared their situation with me. I have come to realize that more and more people have a need to be heard and to share their story.

HOW THIS BOOK STARTED

For several years I have presented a seminar, “Understanding How Latinos Experience Grief and Loss,” at various organizations and hospitals. In response to this seminar, many professionals working with the Hispanic population would ask me about the most salient elements embedded in this culture and how they can understand their Hispanic clients’ worldview when they are facing loss and grief. Thus, the idea of writing a book about counseling grieving Hispanics emerged, and I did not hesitate to embrace such a meaningful journey. Over a decade ago, when I decided to embark on the study of thanatology, I did not realize there was such a difference between how cultures experience death and dying and other losses. Despite having lived all my childhood and adolescence in Latin America and having experienced the death of my father at the early age of 12, I never knew there were other ways of mourning or expressing grief. It was not until I took a class on death and dying at the University of Miami (in Florida), where I did my undergraduate work, that I realized that grief from such a universal experience as death can be expressed and processed in so many ways.

As Rebecca M. Cuevas de Caissie stated in her article, “Hispanic Cultural Values Family” (2009), “There are a certain set of values in the Hispanic community that sets us apart” (http://www.bellaonline.com/articles/art31982.asp). I agree with her observation because there are some common threads that are vital elements to our culture and constitute a bond among all Latinos. For this reason, having a better understanding of this culture, in combination with your empathy, skills, and desire to help as a counselor, can help make a difference in the life of a bereaved Hispanic.
When a person is not part of the mainstream society, dealing with a major loss becomes even more difficult. The ongoing effort to adjust and adapt to a different culture is challenging enough, but when such people come face to face with their loss, they may find themselves encountering new kinds of frustration and disappointment as they seek supportive and understanding help.

In addition, it is of great importance to realize that for many Hispanics the sources of strength when dealing with loss are their family and their religious beliefs. In Latin American countries, grief counseling is not common. People are generally reluctant to talk to strangers about their personal issues, especially about the death of a loved one. It is only now that persons of our culture are opening up to counseling and bereavement support groups, which can make the grieving process more manageable and meaningful. In recent times, I have regularly traveled to Nicaragua to facilitate seminars on grief and its manifestations and the value of bereavement support groups. My purpose has been to educate people on issues that have been taboo in our society. The interest in such seminars has grown exponentially, to the point that the first bereavement support group, called PUDE (Personas Unidas en el Dolor y la Esperanza [People United by Grief and Hope]), was born. This group formed because Orali Flores Altamirano, a bereaved mother who attended my seminar, was inspired by her love for her daughter, Albalicia, who died in a car accident. This mother’s experience has shown us that grief can move us toward using unlimited resources that were likely heretofore unknown to us. The parents who created PUDE are an example of growth and transformation in dealing with loss, which is the focus of my approach to the grieving process.

THE PURPOSE OF THIS BOOK

The aim of this book is to help counselors and other helping professionals who work with Hispanics to become more skilled in understanding the perspective of this population and how to implement the tools that can help them establish and develop valuable interactions with their Hispanic clients. My main goal is to raise more awareness about the multiple losses Hispanics face, the role their values and traditions play in how they cope with these losses, and the resources available to help counselors provide the best care in a holistic manner. Because Hispanics comprise a heterogeneous population, this book provides not a strict set of rules for working
with them but valuable information that can bring readers a broader understanding of what this culture is about. Keep in mind that, as human beings, we have our own history, beliefs, and values, and although these values are influenced by our cultural heritage, they are also influenced by many external and internal factors.

Although all Hispanics speak Spanish, not all of them share the same religious beliefs and traditions. People who assume that the members of this population are all the same run the risk of stereotyping. Not all Hispanics are the same. Each of us is a unique individual with our own experiences and history, and if we embrace a multicultural perspective, we can grow as human beings and as a society. As Gary R. Howard (2006) expressed it,

Growth in multicultural awareness is possible.
Growth in multicultural awareness is desirable.
Multicultural growth can be observed and assessed.
Multicultural growth can be stimulated and promoted. (p. 102)

Before a mental health practitioner can thoroughly help a grieving person, they must have some understanding of the client’s worldview. In doing so, they must take into consideration the characteristics of the client’s cultural heritage, social norms or mores, religious beliefs, and ways of communicating. All of these are covered in Part I of this book. One of the most valuable components of a meaningful and successful relationship between the helper and the client is the intention of the helper, which, according to Clara Hill and Karen M. O’Brien (1999), includes what the helper knows about the client and how he or she can integrate this knowledge to accomplish his or her goals in the helping process. People who work in the helping professions need to be aware of their own feelings and perceptions. Therefore, at the end of each chapter I have included questions that allow the reader to assimilate the information in a more natural and encompassing manner.

WHAT THIS BOOK DOES AND DOES NOT OFFER

The majority of books about Hispanics or Latinos focus on their culture, immigration, or a sociopolitical perspective. This volume, although it takes these issues into consideration, will expand its focus to include the worldview
of this group of people as they face different life transitions and explore underlying issues of grief and loss that may not necessarily be recognized at first glance. I present several theoretical concepts on grief work and how to apply them based on the history of the individual. I also introduce my approach to helping the client move beyond loss, The Eleven Principles of Transformation. This system, which ultimately intends to empower the bereaved to live with meaning and purpose, may be adopted by the grief counselor or any other helping professional who is able to work with the client through a certain period of time, ideally for a period of 11 weeks.

I hope that this book will be a useful and valuable resource. What this book cannot offer is a complete understanding of everything related to Hispanics and their losses. As Egan (1994) stated, “All truth about helping cannot be found in one book” (p. 15). It is impossible to include everything related to Latinos in just one volume. What I do offer is an overall picture of this diverse and multifaceted culture, with an emphasis on the most salient customs and traditions embedded within it. This view provides a useful framework that integrates the principles for helping a person facing grief, loss, and bereavement.

**HOW THIS BOOK IS ORGANIZED**

The book is divided into three main sections, with a variety of tools included, such as questions and exercises for the reader, interviews, and case studies. Part I covers the sociocultural aspects of Hispanic culture, including Hispanics’ identity as individuals and as a culture as well as their traditions, family values, and religion. Because there is a lack of consensus on what this group prefers to be called, I also address the difference between the terms Latino and Hispanic. The more we know about a culture, the more understanding and help we can provide.

In Part II, I explore the main focus of the book, which is loss. The concept of loss is expanded so it is not limited to just the death of a loved one. Other losses prevalent in this population that are sometimes ignored, such as losses from unemployment, immigration, and illness, are examined in chapter 5. In chapter 6, I pay special attention to end-of-life issues, including funeral practices, mourning, and the impact of religion for Hispanics coping with grief.

Because Latinos encompass a group with great diversity, in chapter 10, comprising Part III, I identify the major subgroups living in the United States
and examine the losses inherent within each group. Although these groups share common losses, there are sharp differences in how they deal with such losses. For example, older adult immigrants face losses that second-generation Hispanics do not face, such as the loss of their Spanish language and family traditions. I offer different suggestions regarding how helping professionals can help these individuals in a meaningful manner as they face their unique losses.

MY OWN STORY

In closing, I want to share my story as a Hispanic moving to the United States. This includes the losses I encountered and what helped me to transform my loss and change my life.

From the beginning of my life as an immigrant to the United States in 1979, I realized that the lifestyle in this country was very different from that in Nicaragua. I remember constantly wrestling with the decision to stay in Miami, Florida or move back to my home country. It was very difficult for me to adjust to a completely different environment, to learn a new language, and to embark on a more independent lifestyle than I was used to. I didn’t understand at that time that I was experiencing multiple losses. Back in Nicaragua, my family had been the backbone of my life. Besides my immediate family, my aunts and uncles were very much present in my life, as were my padrinos y madrinas [godfathers and godmothers].

I remember that dinnertime was special for us. My father would ask us how our day had been and would give us what I call “life lessons,” which have stayed with me after so many years. As a matter of fact, my abuelita Mamá Lola, my maternal grandmother, lived with us until she died at the age of 85. I remember we all loved and respected her. She was like a second mother to me. Many of my friends experienced similar family situations. In most cases, their elderly grandparents lived with the family, and we all enjoyed sharing time with them. I noticed that with my uprooting from Nicaragua to the United States, things that I considered part of my life were no longer there. My assumptive world had been crushed. Although I was grateful to be living in Miami, where my sisters were also living, in my mind I had the constant intention of moving back to Nicaragua. Every year I would say, “I will go back.” I was not allowing myself to embrace this wonderful opportunity to expand my world and grow as a person. I was fixated with the desire to go back. I refused to accept the “loss” of my
homeland. My mother perpetuated my tie with Nicaragua because she was still living there. It was not until she moved to Miami to live with us, and sold the family business founded by my father, that I realized the strongest of my ties had been severed. Eventually, with the passing of time, I did accept my reality, and my whole life changed. Even today, my bond with and love for my country are still very much present in my life, but I have also learned to embrace my adopted culture and the wonderful things it has to offer.

As I reflected on my personal experiences while writing this book, I wanted to be an instrument of awareness to counselors who may work with the Hispanic population and may not understand the depth of their sorrow as they speak nostalgically about their homeland. It is my experience that this sense of loss is prevalent among many Hispanics. Many may not be aware they are grieving for a past that is gone, a present that may be challenging, and a future that could be uncertain.

The content of this book goes beyond mere grief counseling for Hispanics. The goal is to provide strength-based tools that can enrich the lives of people in this group who are struggling to have a meaningful life in a country different from their country of origin. Many people react with disbelief when experiencing a loss, as if one shouldn’t be enduring such circumstances in life. However, life has its hills and valleys. For immigrants, the valleys can be very deep and seem eternal. At times, the compassionate hand of a health care professional is what they need to come out of that place and use the inner resources they possess to face their situation, transform it, and have a better future. Hispanics who work with an empathic and culturally sensitive counselor or therapist can enter a new world of opportunities. They can start accepting themselves for who they are and feel proud of being Hispanic because accepting their ethnic identification may be a great help in promoting their personal adjustment.

**AWARENESS, HOPE, AND TRANSFORMATION**

My whole experience as a Hispanic going through my loss and grief has given me the opportunity to bring this message to every person who works with the bereaved and wishes to be a transformative agent in their clients’ grieving process. Although in this book I include many losses experienced by the Latino community, I don’t intend it to be comprehensive or present a mold into which all Hispanics must fit. A recurring theme in this book
is that as individuals we are unique, and therefore our grief is unique. This book brings readers awareness of the most prominent elements of the Hispanic community, but it is not limited to those; neither does it imply that all the members of this community experience loss in the same manner.

We live in a globalized world, and because loss is a universal experience, we need to expand our awareness and open our hearts and minds to other experiences. I wrote this book with the hope of bringing some of this awareness to helping professionals who want to make a difference in the life of a Hispanic/Latino.

Transcriptions of the complete interviews excerpted in this volume are available online at springerpub.com/houben
Acknowledgments

Since the idea of this book emerged, I found the commitment to write it very compelling. It was one of those ideas that stay with you, and the more you think about it, the more you want to make it a reality. Communicating with others is essential, and knowing how to communicate the needs of a culture in times of loss can be a challenging task. It was my conviction that this challenge was an opportunity to make a difference in the lives of many Hispanics and the professionals working with this culture. It was because of this conviction that I embarked on this journey, which really made a difference in my own life. And it is because of this opportunity that I want to give special thanks to Sheri W. Sussman, executive editor of Springer Publishing, for her faith in this project, and mostly for her constant encouragement and support. She was an amazing guide and it was wonderful to work with her.

I also want to express my gratitude to the following persons who contributed to this project: Nicole Armijo for her unflagging dedication in researching and transcribing essential material for the book, Lucero Moncloa for her constant support in transcribing and organizing the interviews contained in this book, and Johnathon Pape and Hazel Hurley for their editorial assistance as I progressed through different stages of the writing process.

Special thanks go to Rev. Richard B. Gilbert, DMin, PhD, BBC, CT, for his enthusiasm and support when this book was just an idea. I also want to express my deepest gratitude to Stephen Sapp, PhD, my former professor at the University of Miami, for inspiring me to enter the rich world of thanatology. It was while sitting in his class on Death and Dying,
many years ago, that I realized I wanted to embark on this meaningful journey. To all my clients who through their own stories helped me gain insight into the challenges they encounter as they face a loss. To all the wonderful persons who shared their stories and interviews, adding value to the message of the book.

From the bottom of my heart, I give thanks to my mother for being my role model of faith, hope, and strength. My heart also goes to my father because his memory has been my inspiration in helping the grieving soul. I also want to express my deepest gratitude to the members of my family and friends who throughout my writings are always present in my life. My special gratitude goes to my husband, Mario, for understanding the importance of this book and for supporting me in the process.

Finally, I want to express my heartfelt gratitude to Dr. Kenneth Doka for writing such a meaningful foreword. In sharing his personal story, he added a significant dimension to the book.
PART I

The Sociocultural Aspects of Hispanic Culture
CHAPTER 1

Counseling and Cultural Sensitivity

Counseling is a helping and caring profession, but to offer the help and care our clients need, we must value them for who they are. We live in a globalized world where people from different cultures live and interact side by side in different types of communities. Clients are diverse; however, because of a lack of education, information, or knowledge, counselors often fail to recognize and value cultures different from their own, even in the therapy setting.

When we meet a person from another culture, we may ask how this person acts, feels, or thinks. If the person looks different from us, or has an accent that is different from ours, we may wonder, “Where is he or she from?” Depending on our perceptions and biases, we may make assumptions about this person’s origin or background and interpret the answer in a negative or positive manner. Furthermore, we may project the answer onto this person, who may then feel either accepted or rejected.

As a counselor or other helping professional, it is important to be aware of your cultural perspectives and biases. How do you respond when you meet a person from a different culture? More specifically, how do you work with a client who does not share your values and belongs to what is known as a racial/ethnic “minority” group?

The multicultural perspective evolved in the social sciences field for training mental health professionals to embrace cultural differences and incorporate a perspective that values many cultures, worldviews, and traditions (Zimmerman, 2001). With the changing demographics of many U.S. communities, multicultural counseling is essential to the process of
embracing cultural differences and supporting new and effective insights into other cultures. This book can be an effective resource in understanding the importance of multicultural counseling and how best it can be applied to Hispanic/Latino clients.

**CULTURALLY SENSITIVE COUNSELING**

There is no pan-cultural response to grief and bereavement: People deal with their grief according to their specific cultural customs. Among Hispanics, these customs differ from country to country. According to the U.S. Census Bureau, the number of Hispanics living in the United States as of July 1, 2009, was estimated to be 48.4 million, and even though they share many values and traditions, a great diversity still exists in this population. Among Hispanics living in the United States are people from countries as diverse as Mexico, Cuba, the Dominican Republic, Nicaragua, Colombia, El Salvador, Guatemala, Chile, Peru, and the U.S. Commonwealth of Puerto Rico, among others. Many professional counselors who work with these clients are not aware of their culture-specific needs, which should be taken into account from the moment the initial assessment or first session is conducted. If we want to be agents of transformation, we need to be informed about our clients’ cultures, races, ethnicities, and religious beliefs. Furthermore, we must not expect an all-purpose formula that can be used with all Hispanic clients without taking into consideration their individual histories, perspectives, and personalities.

Giger and Davidhizar (2007) developed the *transcultural assessment and intervention model* to assist with transcultural nursing care, and I have found it very useful when consulting with Hispanic clients. The model encompasses four elements—(a) communication; (b) personal space; (c) social organization; and (d) environmental control—that can influence the relationship between the counselor and the client as they address how vital it is to respect diversity and acknowledge the client’s culture. The model has been adapted for working with people after a crisis and may be relevant to grief counseling with people from diverse cultures.

**Communication**

People communicate in both verbal and nonverbal ways. Hispanic people tend to be expressive as they talk. Sometimes they may talk loudly, but that doesn’t mean they are upset. I am a Hispanic myself, and this is
simply the way many of us communicate. However, some Hispanics are shy and may rarely look the counselor directly in the eyes. To them, this is a sign of respect, a topic I discuss later in this chapter. Counselors would be well advised to notice the differences among members of a culture.

If the client and counselor are from different cultures, this can at times be a barrier because we tend to express our feelings based on what is appropriate in our culture. I am reminded of Pablo, a Peruvian man who had lost his wife. He would hardly look at me and expressed that he felt *raro* [weird] talking to a counselor because he rarely expressed his feelings, even to his wife. Because I knew talking directly about grief or his emotions would be difficult, I asked Pablo to talk about his home country of Perú and how people there behaved after losing a loved one. He started talking about Peruvian funeral rites and how people mourned. Pablo felt that grief and funerals were completely different here in the United States. I asked him what he missed the most about his country, and after a moment of silence, he started crying. He said that what he missed the most was having his wife buried in Perú because he knew that there he would have been surrounded by family and friends.

**Personal Space**

The concept of personal space—how physically close one allows another person to be—differs from culture to culture. Personal space is much closer among Hispanics than among Anglos or members of some other cultures. This may cause some tension if, for example, a Hispanic client is accustomed to touching the other person when he or she is talking or would like to be hugged when feeling distraught or sad.

**Social Organization**

*Social organization* refers to the values and beliefs that are transmitted throughout a culture. These are generally learned from family, organizations, religion, or political groups inside the culture. Counselors should make note of this type of information during initial assessments of clients.

**Environmental Control**

*Environmental control* refers to the way a person takes in, or mentally processes, an event. Many Hispanics believe that things that happen to them are because of the will of God, luck, or the effect that others have on their
lives. This is important for counselors to know because the less control people may perceive they have over a circumstance, the less optimistic they may feel and, consequently, the less likely they will be willing to take action.

COUNSELING GRIEVING HISPANICS

Despite the fact that grief is a universal experience, there are some cross-cultural differences that the mental health professionals must consider if they want to help alleviate their clients’ suffering. Counselors need to realize that what one may find “abnormal” or “different” in one’s culture may be perfectly normal in other cultures.

Dr. Alex Fiuza, a Cuban clinical psychologist who specializes in grief, explained how Hispanics cope with grief:

Most Latinos are very private with their discussions of family illnesses and the way they deal with them. The only differences are that some keep it in their own family groups and others don’t even mention it. The way to educate a Hispanic person is to help them face the fact that what happens to them as an individual can happen to anyone else, and that it’s okay to grieve, cry, and to talk about it with others, that it is a normal process like eating, like sleeping, like loving. If you share with others you’re not only sharing that experience but you’re teaching, and that is what we want to make [the client] see. As a therapist I feel that this assistance will make it all worthwhile and will help the Hispanic person accept grief as a normal process and see the importance of sharing with others. (See the Appendix for the full interview.)

Among the most common emotional responses to grief are tears, screaming, sighing, and even cursing, although these reactions vary from culture to culture. In exploring the Hispanic culture, one also finds the need for personalismo, which means relationships that are warm and personal. As Hispanics experience grief, they expect health care providers to be caring, show empathy, and be respectful of their beliefs, many of which have to do with their religious and cultural traditions. They also expect health care providers to take into account the needs of the family members.

When we perceive that we are being accepted and trust the person who is offering his or her support, we feel safe enough to open up and
show our vulnerability. We can express our feelings without concern about being judged, ridiculed, or rejected. We can be ourselves. This is especially true of Hispanics, who tend to expect warm, trusting responses to their situations.

In her book *Latino Families in Therapy: A Guide to Multicultural Practice* (1998), the Argentinean Celia Jae Falicov offered an interesting approach for working with Latinos, a cultural generalist framework that helps both the client and the therapist to bring with them their own perspectives, which she called cultural maps (p. 18). Each person carries a “map” that represents his or her perception of reality; however, as the saying goes, “The map is not the territory.” We may see a map and understand that it depicts the layout of a city, but it is not actually the city itself. The same concept applies to the cultural maps that the counselor and client bring to the session. Each person’s map comprises his or her set of beliefs based on that individual’s culture and life experience. Even though I am Hispanic, I never assume that my perspective is the same as a Hispanic client. For example, if a client says, “I am not a happy person,” I would ask the client to describe a happy person to me, or if a client says, “I have been grieving for a long time,” I ask, “What is a long time for you?”

One of the reasons that Hispanics may be reluctant to seek therapy is the fear that the counselor won’t be sensitive to their needs; indeed, most counselor training programs in the United States are based on a European American model (Smith & Montilla, 2006). Smith (2004) asserted that many Hispanics consider counseling a stigma or something that doesn’t resonate with them. Although I agree with this at a certain level, I also believe that attitudes have changed in recent times. Many of my clients are Hispanics, and although they do not always know what to expect in counseling, they are willing to explore the possibility of getting outside help.

Something common to bereaved Hispanic clients is the familial hierarchical rule of respeto, or “respect,” which can play a vital role in the grieving process. One of the reasons Hispanic individuals may seek outside help is that they do not want to be a burden to their family, so they want to feel better. Another reason is that in the presence of their family members they pretend to be strong, when in reality they feel a tremendous pain in their hearts.

Each Hispanic/Latino person displays unique responses and engages in unique practices regarding his or her loss. I have witnessed these differences when I conduct training workshops on how to establish bereavement
support groups. The participants are from different countries, and although they share their traditions regarding bereavement and mourning, the diversity is huge. It is virtually impossible for one to know all of these customs, even among the various Hispanic groups.

As the world becomes more and more a global society, certain cultures are influenced by other cultures, and this is true of counseling too. Even in Latin American countries, where counseling was once unheard of, counseling is accepted by many people today because it has been accepted in other Hispanic countries and cultures. When I travel to my native country of Nicaragua, I have the opportunity to see this shift in perception about talking to “a stranger.” This is very interesting for me because I remember that when my father died, 39 years ago, counseling was not common in Nicaragua. If you had suggested then that someone see a psychologist, they would have responded “¡Yo no estoy loco!” [I am not crazy!]. Emotional support was offered by the family puerta cerrada, por el que dirán [behind closed doors because of what people would say]. Now, things have changed, and it is frequently the case that Hispanics are going to therapy and are more willing to share their family matters. However, I find it vital when working with Latinos to explain what counseling is and what to expect in the counseling session.

I met one of my clients, Lily, a Nicaraguan in her 50s, at a workshop I conducted on Alzheimer’s and spirituality. Lily was the caregiver of an elderly woman and felt an immediate connection with me when she learned I was also from Nicaragua. She asked for my business card to make an appointment with me. When she came to see me, she was ecstatic, saying, “¡Que felicidad que sos Nica!” [What a joy that you are a Nica (a diminutive of Nicaraguan)!]. I, too, felt the connection, and although I do not think a Latino need necessarily be counseled only by another Latino, I believe that, for some people, the fact that one shares the same language and values can make a difference in building the therapeutic alliance. As Lily stated, she felt at home: “Con vos me siento como que estuviera en Nicaragua” [When I am with you I feel I am in Nicaragua].

Falicov (1998) considered it irrelevant whether the therapist is Hispanic and offered the following observation:

Good therapists have always explored individual complexity with various degrees of sensitivity to cultural and social factors in their clients’ lives. I don’t believe, however, that there is a Latino therapy or a Latino way of doing therapy or that only Latinos can adequately treat Latinos. (p. 6)
On the other hand, Adriana, a Colombian marriage and family therapist whom I interviewed, has a different opinion regarding the relationship between the client and counselor if they belong to the same culture:

I think it makes a difference if they are both Latinos and especially if they’re both from the same country, because the client manifests this. For example, they may say, “How nice that you’re also Colombian.” It’s like you’re matching, you’re identifying with the client and that motivates the client. They may be open . . . to change. They feel like there is an understanding there. When the person doesn’t feel understood they’re more resistant to change. (See Appendix for full interview.)

From her own cultural perspective, Adriana advised how a counselor can approach a Latino client:

I would say not to rush to find the problem; take some time with the client. Try to find out more about the client’s life, their culture, what country they’re from, if what you know from the news holds any validity. That initial chitchat is so important for Latinos. They feel valued if you know about their culture. There is already a wall placed just knowing that you are from two different cultures, and the client will most likely not be receptive. The Anglo therapist must be sure that they have their Latino client engaged, motivated, and ready for change. (See Appendix for full interview.)

In writing this book, I have performed a balancing act between generalizing as to how Latinos experience grief and offering a background on the uniqueness of this ethnic group in relation to its members’ values and mores. The idea is not to present a collective identity that overlooks each client’s individual qualities but to increase the reader’s awareness of salient commonalities among these people.

Santiago-Rivera, Arrendondo, and Gallardo-Cooper (2002) offered the following Latino-specific competencies that can provide counselors with insightful guidelines when working with Hispanics:

- **Awareness.** Culturally skilled counselors are aware of competency-based models and guidelines relevant to working with clients in general and with Latinos specifically.
- **Knowledge.** Culturally skilled counselors have knowledge about the historical and political contexts for the development of multicultural
and culture-specific competencies and guidelines in the fields of counseling and psychology. Culturally skilled counselors are able to describe Latino-specific models and frameworks that can serve as reference points when working with Latino clients.

• **Skills.** Culturally skilled counselors are able to conceptualize the dimensions of personal identity model for working with individuals from different Latino groups. Culturally skilled counselors can identify specific [multicultural counseling competencies] and guidelines that can be resources for their work with Latino clients and institutions that serve them. (p. 4)

Santiago-Rivera et al. (2002) also used the following model, which includes different dimensions that counselors can use when assessing clients. I find it helpful when working with Latinos because it is holistic in its approach and can provide insightful information.

**Dimensions of Personality Identity**

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SPECIAL ISSUES TO CONSIDER WHEN COUNSELING HISPANICS

Grief changes the way we experience the world. It can turn a sunny day into the darkest night and turn our world inside out. One of the most crucial needs of bereaved individuals is companionship and comfort during their mourning.

Lack of Communication and/or a Language Barrier

Good communication is essential between a counselor and the client. When sociocultural differences, such as language, culture, and social status, exist, difficulties may arise. Clients who perceive many differences may be cautious about trusting the counselor, which can interrupt the development of a good therapeutic relationship. Hispanics who do not have a good command of the English language will likely have difficulty expressing their feelings in an appropriate manner. It is very difficult for a person to share “intimate and personal matters that are emotion laden with subtle cultural nuances . . . [that] are more readily expressed in one’s first language” (Smith, 2004, p. 170). Furthermore, as Aponte, Rivers, and Wohl (1995) asserted,

Some individuals who seek treatment and services may speak a language or dialect that differs from that of the clinician or service provider. These differences may lead to confusion, frustration, and an inappropriate diagnosis. In addition, the lack of professionals who are a part of the individual’s ethnic culture may result in an unwillingness to seek or accept services. (p. 256)

Hence, when language is a challenge, it is best that counselors who are not proficient in Spanish be willing and be able to refer clients to a Hispanic colleague. If a client cannot adequately express his or her grief to a counselor when he or she has experienced a loss, how can he or she possibly process that grief? We naturally express our grief in our native language; I can attest to that. If we need to search for words that can describe how we feel, we may lose the connection with our self and consequently deviate from the whole experience of grieving. There are some words that Hispanics use that cannot be translated to another language, and if clients feel that they are not communicating to the counselor what they want to express, the flow of the counseling is interrupted. Attention becomes focused on the language itself instead of the content. Furthermore, many
Latinos feel embarrassed to speak English because of their accent, and they may be too preoccupied with how their words sound instead of focusing on openly expressing their grief or concerns. As a person whose native language is Spanish, I have found myself in situations where I haven’t been able to use a specific English word to express what I want to convey, and it is truly a frustrating situation.

Biased Interpretations of Rituals and Traditions

Our culture is the background from which we interpret the behavior and worldviews of others—specifically cultures with customs that differ from our own. To give an example, Brammer (2004) posed the following question: “[What] would you think of a Latina who believed the ghost of her [m]other spoke to her regarding the inappropriateness of her pending marriage?” (p. 9). Brammer suggested that if this were considered a hallucination, then there would be more Hispanic women suffering from schizophrenia than are reported because such paranormal experiences are common among them. Most non-Hispanic counselors are likely to be skeptical about such a “strange” occurrence on the part of their client and possibly dismiss it.

Although many Hispanics may use alternative resources when experiencing emotional distress, in recent times more and more have been accepting counseling more readily. This is owing to increased education regarding the benefits of counseling and the greater availability of psychological services. For example, more than 60% of my clients are Hispanics. Nevertheless, many Hispanics reject traditional Western medicine, including mental health services, and at times adopt what is simply known as “folk medicine.” A classic example is when many bad things happen to a person with no apparent reason. A Hispanic might say “Te echaron mal de ojo” [You have evil’s eye], or at times “Necesitas una limpieza” [You need a cleansing; this means visiting a curandero, a folk medicine healer]. I discuss healing with folk medicine or nontraditional practices and the effect they may have on the therapeutic relationship in more detail in chapter 4.

Cultural Differences in Physical Social Distance

Among most Hispanics, the physical social distance between people is less than that of other groups in North America. It is our custom to greet a person with a kiss and/or a hug, touch each other’s arm or hand, and feel comfortable with proximate distance. Adriana, the therapist I
interviewed, commented on how these gestures are not well received by North Americans at her place of work:

As you know, many times [we] greet each other with a kiss, something that isn't done in the Anglo culture. This way of making physical contact with someone is the norm with us, but may not be in different settings here. For instance, you would not greet a client this way, but among friends you would. If you did this with a client, the first word out of someone's mouth [might] be “harassment.” I think people start to fear, even the Anglo American feels fear that he/she may have compromised their job or broken the law somehow (by doing this). Anglos tend to be more “by the book,” and strict with their laws and customs, including keeping social distance.

I agree with Adriana’s assertion. When I receive Hispanic clients, they expect I greet them with either a hug or a kiss. They feel welcome and en casa [at home].

**Lack of, or Inadequate, Multicultural Training for Counselors**

According to Sue and Sue (2003), many mental health professionals' multicultural training is inadequate. The focus of counseling is primarily from a White perspective and is generally not supportive of racial/ethnic minority groups, including awareness of their religion, culture, ethnicity, or economics. This can perpetuate, or even produce, stereotypes in individuals who are training to be mental health professionals. Sue and Sue recommended that mental health professionals have “educational experiences that generate sensitivity and appreciation of the history, current needs, strengths, and resources of minority communities” (p. 51). Although for three decades many mental health professionals have acknowledged their limitations regarding the best type of therapy (e.g., person centered, cognitive behavioral) to use with culturally diverse clients, there is still no consensus on which therapy works the best.

A challenge that counselors may encounter is when their clients exhibit values that differ from their own but may have a close relationship with their culture as the following case, told by a non-Hispanic counselor, reveals:

Brenda arrived at therapy with her eye covered with a patch. Carolyn, an Anglo American therapist, asked her what happened. Being an advocate of women’s rights, Carolyn feared the worst—that Brenda had been hit by that machista of a husband. Unfortunately, she was right. Pablo had come to the house drunk, and Brenda didn’t have dinner ready, so he hit her out of anger.
Brenda quietly took her children and left for her mother's house. When she told her mother she wanted to leave Pablo, her mother told her “Esta es tu cruz” [This is your cross]. Brenda then remembered that her mother was a submissive woman who never had [words] with her husband; therefore, she expected the same from her daughter. Confused, angry, and scared, Brenda went back home, where Pablo was already sleeping. Brenda ended up staying with her abusive husband, feeling depressed and desperate.

Brenda shared with her therapist that she wanted to leave her husband but didn’t want to disappoint her mother. Also, she was afraid of el que dirán [what would people say] if she got divorced. Carolyn felt like telling her client to leave her husband immediately and argued against [Brenda’s] concern for her mother, but then remembered the value Hispanics place on family and respect for elders. After Brenda left, [Carolyn] continued to reflect on which approach to use with her and decided she would try to empower her first, based on her strengths, so that she could become more assertive and able to communicate in an open manner with her mother and stand up for her rights. What Carolyn didn’t know was that Brenda didn’t have los papeles [legal documents] to live in the United States, so basically she depended on her husband to support her.

Brenda’s story is the experience of many Hispanic women, and demeaning situations such as hers often contribute to their loss of self-esteem and hope. However, mental health professionals should not assume that simply because a client is Hispanic he or she will behave in a certain manner—that would be stereotyping. I believe the best approach is to be present as a counselor and to be careful with your body language and facial expressions because oftentimes we may say more with our nonverbal communication than with our words.

THE COUNSELOR’S APPROACH

Therapists who want to establish an effective bond with their clients can use social influence to their benefit. The theory of social influence, developed by Strong (1969), includes the following three dimensions: (a) attraction; (b) trustworthiness; and (c) expertise/competence. Each of these dimensions, applied to counseling, can enhance the relationship between the counselor and client. Brammer (2004) described these elements as follows:

- **Attraction.** This goes beyond physical attractiveness to include finding something appealing in the other person. It encompasses the
ability not only to establish a feeling of familiarity but also to correctly perceive the client's nature without prejudice but instead with warmth. Attraction, by definition, is the power that draws two entities to one another.

- **Trustworthiness.** Besides believing that the person will keep the information confidential, trustworthiness also implies a feeling of safety produced by the knowledge that this relationship won't cause them any harm. A counselor who is regarded as trustworthy by the client will permit deeper feelings of trust to blossom and provide a greater ability for the client to open up because the client will not perceive imminent danger to himself or herself.

- **Expertise/competence.** Expert/competent counselors are able to effectively and impart their training and professionalism to help their clients.

Although all these dimensions are fundamental to the counselor–client relationship, they may have a different interpretation when working with clients from other cultures. The most important seems to be trustworthiness. A counselor must have sufficient knowledge of issues concerning members of racial/ethnic minority groups, and sufficient experience working with them, as well as an awareness of issues specific to various cultures. I suggest that counselors who work with a specific cultural group become educated about the various elements of that culture, including its history and the social issues the members of this group face, such as employment, housing, and/or immigration.

Counseling is a process in which interpersonal interaction as well as communication and social influence occurs (Sue & Sue, 2003). For a good communication, the messages sent and received by the counselor and client should be exchanged with accuracy; otherwise, this could prevent the development of an effective therapeutic relationship as well as inhibit trust and rapport. The therapist should also encourage clients to take time for inner reflection so that they can act based on their self-exploration.

Because of the discrimination or prejudice that many members of racial/ethnic minority groups experience, some clients may be defensive if a counselor implies that what happens to them is their responsibility. Often our behavior is the result of our treatment by others; as Thomas (2000) observed: “Frequently people's failure to enjoy optimal development is the result of their being treated in prejudicial ways by others” (p. 15). This may be the case, for example, when a Hispanic client is suffering from loss of self-esteem (discussed in chapter 5). Clients experiencing low self-esteem, who perceive
that there is some prejudice or bias against them because of their ethnicity, can be even more frustrated and upset. Our clients have their own worldviews and unique frames of reference. An empathic counselor tries to understand their clients’ experience if they want to enter those worldviews.

Nonverbal communication differs from culture to culture. For example, a conflict may arise between an Anglo American therapist working with a Hispanic client who does not look the therapist in the eye. The counselor may assume that the client is hiding something, when in actuality, out of respeto [respect] for authority (the counselor), the Hispanic client may avoid direct eye contact. Because respeto is a virtue that is distinctive in Hispanic cultures, I think it is necessary for the counselor to have an accurate understanding of what it means:

Respeto is more than the tone of social relations, it is the relation of one person to another, child to parent, student to teacher, citizen to police officer, worker to boss, and neighbor to neighbor. Ideally, respeto does not operate in only one direction; ideally respeto serves as a brake on the driving individualism of Anglo society and makes a person more familial, more communal in his orientation. (Shorris, 1992, p. 106)

QUALITIES OF A SENSITIVE COUNSELOR

When conducting grief counseling with culturally diverse persons, counselors should listen attentively and quietly, make sincere eye contact, project acceptance of the clients, and help the clients identify and express their emotions. It is best to avoid saying to clients that you know how they feel and what they are going through. It is a better idea to use open-ended statements such as “I hear that you. . . .” Mental health professionals need to be aware of their clients’ values so that they will be alert to cues that will reveal what is most important to a particular client. I believe that the best thing you can do as a counselor is to be present in both body and spirit and to be aware of how you express your responses to issues that may sound alien or unacceptable to your values or beliefs. Be careful with your body language and facial expressions.

Helping the Client to Have Hope

When we face a loss or a difficult transition in our lives, we need inspiration to keep going, which can be ignited by hope. Ronna Jevne, in her foreword to Cutcliffe’s book The Inspiration of Hope in Bereavement Counseling (2004),
expressed the immense value of integrating hope into the counseling setting. Counselors should conduct their assessments of how they find themselves integrating hope and positive psychology into their work with clients. Keep in mind, as Jevne stated, that “not only do we assess the hope and hopelessness of our clients but they indeed are assessing whether we are hopeful enough to be useful to them” (p. 10). The more I work with clients, the more I realize how counselors tend to project their expectations onto them. If one is not hopeful regarding a particular client’s situation, he or she will perceive this, and this can impair the therapeutic relationship and the outcome of therapy.

There are several questions counselors can pose to themselves: How do my views of hope influence my practice? How does my practice influence my views of hope? How culturally bound am I in terms of my perceptions of hope? (Jevne, 2004, p. 10). This last question has a strong relationship to being culturally sensitive and being sure that your own cultural parameters do not interfere with your clients’ worldviews.

**Showing Compassion**

In recent times, the concept of integrating compassion into the therapeutic alliance has been brought to counselors’ awareness. This has to do with how counselors relate to their clients, especially at the beginning of therapy, including the emotions the counselor conveys and how effective he or she is in showing empathy for the client. Because as counselors we want our clients to feel safe and cared for, we need a better understanding of compassion. Gilbert (2005) emphasized that being compassionate makes us “open to the suffering of self and others, in a non-defensive and non-judgmental way” (p. 1). When we are compassionate toward others we visualize ourselves in their place and respond to their pain and suffering in a more caring manner. In working with clients—both Hispanics and non-Hispanics—I have come to realize that this is the most valuable skill that we as counselors can possess.

Before a therapeutic alliance can be developed, the counselor must establish a connection with the client, and a compassionate counselor will be able to provide a sense of safety for the client so that the client will have the desire to work with the counselor and establish a meaningful bond. In addition to specific techniques or therapeutic tools, showing genuine care and compassion toward clients can make an enormous difference in their lives. Therapists who are able to collaborate with their clients and are able to show compassion, empathy, can provide more hope to clients than most
formal or sophisticated psychological interventions. (Greenberg, Elliot & Pos, 2007).

Offering Empathy

Empathy is a value that is highly recommended when working with clients who belong to a different culture, but at times it can be challenging to express because there may be few shared qualities between the client and the therapist. Therefore, it is fundamental that the counselor “transpose[s] [him or herself] into another, rather than [intrude] upon one’s own feelings, and in this way achieve a more complete understanding of culturally varied predispositions, personal constructs, and experience” (Jones, 1985, p. 178). Egan (1994) stated that empathic counselors should be able to do the following:

- **Build the relationship.** Counselors who are able to get inside the worldviews of their clients demonstrate respect, and this by itself helps build a therapeutic bond.
- **Stimulate self-exploration.** Clients who perceive that they are understood will feel inspired to continue exploring their inner self, which is one of the vital elements for the progression of the therapeutic relationship.
- **Check understandings.** Empathic counselors are open with clients and make sure clients understand what they mean.
- **Provide support.** Clients feel understood if the counselor lets them know whether he or she can get into their frame of reference.
- **Lubricate communication.** Empathy facilitates the dialogue and thus smooth communication between the counselor and client.
- **Focus attention.** This is a valuable skill that enables the counselor and client to focus on core issues, or what is important to the counseling session.
- **Restrain the helper.** Empathic counselors know that helping is not about giving advice but about motivating clients to take action.
- **Pave the way.** Empathy lays the groundwork for eventually working with clients to begin addressing issues that are more challenging and helping them set goals for themselves so they can move into action and growth.

Among the best ways I have found to show empathy is to consciously listen to my clients without judgment and to keep my internal dialogue and
self out of the way. According to O’Connor and Lages (2004, p. 72), counselors need to pay attention to the three roadblocks to conscious listening:

1. **Internal dialogue.** Counselors should avoid having an inner conversation with themselves instead of listening to the client, including having an internal dialogue about what the client is saying.

2. **Muscle tension.** To be fully present, we need to be relaxed. In the case of working with clients from another culture, we may tense up, worried that we might show bias, or realizing we do not really know much about their values and/or traditions. Tensing up does not help with establishing rapport. If you find you are getting tense, take a deep breath and relax. Actually, you could do this with your client at the same time, which could give you both a sense of relief and connection.

3. **A focused stare.** When gazing at your clients, it is better to soften the way you look at them. Do not always look at them directly in the eye (some Hispanics feel uncomfortable with staring, because they may find this disrespectful); instead, expand your vision to other visual fields.

Furthermore, to provide the best care, the counselor should be aware of any of his or her own emotions, biases, or conflicts and develop self-awareness regarding race and ethnicity. Do you overgeneralize? Have you had a negative experience with any Hispanic that may influence your relationship with your client? Do you have a strong affiliation with a particular ethnicity or culture? This is considered as countertransference, and it could negatively influence your perception of the client, preventing a successful therapy outcome.

Hays (2001) believes that to develop self-awareness therapists need to do some personal work that includes certain exercises, as in the ADDRESSING approach comprising the following elements: Age-related issues, Disability, Religion, Ethnic identity, Socioeconomic status, Indigenous heritage, National identity, and Gender-related information (p. 6).

With the ADDRESSING approach, counselors can evaluate their knowledge and awareness of each component. Hays (2001) also advised using this framework when assessing clients, to “avoid making inaccurate generalizations on the basis of a client’s physical appearance, language abilities, and/or family name” (p. 6). The ADDRESSING framework can provide a counselor with greater awareness of his or her history. I consider the last two guidelines (i.e., national identity and gender-related
information) to be fundamental to helping clients resolve loss-related grief issues and to empower them when confronting a crisis.

As we have seen, with the large variety of cultures in the United States, therapists are expected to be aware of the values and traditions of a number of ethnic groups. This book was born to facilitate this task; however, my purpose in writing it was not to give counselors all the information pertaining to Hispanics. That will be impossible, for three reasons: (a) space limitation does not allow me to integrate all the aspects of this very diverse culture; (b) Hispanics are a heterogeneous group comprising a variety of subgroups, each with its values and traditions; and (c) although I am a Hispanic, I don’t know everything about my culture. Furthermore, I don’t know all the differences among the various Hispanic groups. I can write only on the basis of my personal experience as a Hispanic counselor, born in Nicaragua, who works with people going through losses and life transitions.

THE COUNSELOR AS A TRANSFORMATIVE AGENT

Wainrib and Bloch (1998) advocated encouraging clients to move away from the perspective of being a victim to one of becoming an empowered individual. They favored an approach that focuses on the clients’ strengths instead of just their difficulties or weaknesses so that they, like the mythic phoenix that rose from its ashes, can be resurrected to a new life. I embrace this philosophy because it resonates with my own. Mental health professionals working with clients who are facing a loss can act as transformative agents in guiding and supporting them through the grieving process and helping them find meaning in life again.

One of the most powerful ways we can guide and support our clients through their grief is simply by being a healing presence. It is our choice to create this for our clients and ourselves. As transformative agents, we also engage in our own process of transformation:

To create [a] healing presence, we fine tune our inner experience to the inner state of the other person. We transform ourselves in response to the basic needs of the person we are trying to heal and to help. Ultimately, we find within ourselves the psychological and spiritual resources required to nourish and empower the other human being . . . [a] [h]ealing presence is a
way of being that by its very nature tends to reassure and encourage people, to lend them moral and spiritual strength, to provide confidence that they can overcome suffering and continue to grow. (Breggin, 1997, pp. 5–6)

If we feel the depth of our clients’ grief, we will be able to connect with them at a profound level and accompany them on their journey of spiritual and personal growth. Until we sense deeply how people are feeling inside, we cannot be agents of healing and transformation.

HELPFUL SUGGESTIONS

• Be mindful of the fact that you might experience countertransference based on your cultural or ethnic affiliation. The more aware you are of your ethnicity and how this influences the way you see other cultures or ethnic groups, the better service you will provide your clients.
• Develop your listening skills and be present. If you do not agree with some of the issues or concerns your Hispanic clients share with you, try to keep your values and opinions to yourself. If you confront clients or disregard traditions that have been passed from generation to generation, they will not feel they are in a safe place, and you may risk them not returning to therapy or finding another counselor who accepts them for who they are.
• Be more than a counselor: Be a transformative agent in the lives of your clients. Be the springboard they need to help them go through the grief they are experiencing and become the unique persons they are.

PERSONAL REFLECTIONS FOR THE COUNSELOR

• Are you aware of some of the traditions and values of your Hispanic clients?
• Are you able to enter your clients’ worldviews and integrate different modalities besides the traditional mental health approach?
• Do you believe that your Hispanic clients have strengths that, despite their losses and difficulties, they could use in their growing process?