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Latino Cultural Competency in Social Work Education: A Review of the Literature

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LATINO CULTURAL COMPETENCY IN SOCIAL WORK EDUCATION:
A REVIEW OF THE LITERATURE

by

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A thesis submitted in partial fulfillment of the requirements
for the Honors in the Major Program in Social Work
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at the University of Central Florida
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Abstract

Cultural competence serves as resource for social workers and other helping professionals to improve service delivery by using approaches that are compatible with the client's cultural values and beliefs. As the Latino population continues to grow, understanding the culture has important implications for social work practice, advocacy and research. There is a dearth of cultural competence training and educational programs that seek to effectively identify, address and meet the unique cultural and linguistic needs of Latinos. With the growing population and a lack of culturally responsive services, clinicians familiar with the Latino culture and Latino cultural competency training and education programs, disparities among Latinos will continue to steadily rise. It is important for social work students and clinicians to receive advanced training in understanding the diverse needs of Latino populations. The purpose of this thesis is to review the existing literature to identify culturally competent practice methods and examine efforts to prepare social work students and clinicians to work with the Latino population. A search was conducted using PsychINFO, PubMed, Education Resources Information Center (ERIC) and Cumulative Index of Nursing and Allied Health Literature (CINAHL) databases. Key terms used in the searches were "cultural competency training", "cultural competency education" and/or "social work/clinician" coupled with terms Hispanic or Latino. This thesis concludes with some considerations for integrating Latino cultural competency into the social work curriculum.

Keywords: Latino, Hispanic, cultural competence, social work, culture, social work education

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Problem Statement

The Latino/Hispanic population is the largest minority group in the nation. Today U.S. Latinos represent 53 million people, approximately 17%, of the nation's total population (U.S. Census Bureau, 2012). Latino-Americans are a racially diverse ethnic group composed of several subgroups with distinctive and similar cultural norms, beliefs and values. Latinos in the U.S. are often poor, at greater risk for negative health related outcomes and underserved in mental health. Latinos seldom seek mental health services, due to cultural beliefs, mistrust of the government and most because interventions typically used tend to be Eurocentric and incongruent with Latino cultural values and beliefs (Ojeda, Flores, Meza, & Morales, 2011). Because the Latino population is expected to almost double in size by 2050 (U.S. Census Bureau, 2012), social workers must have sufficient knowledge, understanding and skills to work with Latinos in order to meet their needs.

Eighty-six percent of licensed social workers are non-Hispanic Whites and have little awareness of the effects of oppression and discrimination (Walls, 2009) and know and understand very little about the culture and the many issues that frequently affect the lives of Latinos; such as policies that influence education, immigration and healthcare as well as employment. When compared to other underrepresented groups in the U.S., literature is lacking in quantity and quality in regards to preparing social workers and other helping professionals to work with Latino populations. The preparedness and ability of social workers to deliver culturally competent services is insufficient to serve the growing population (Furman, Loya, Jones, & Hugo, 2013). If social workers and like professionals are going to help the clients they work with and serve they must learn about their clients' cultural values, beliefs and family

dynamics in order to deliver effective services.

Cultural competence includes an array of skills, knowledge and abilities to identify how culture influences groups and individuals and how to best understand how clients interpret and experience the world around them. Cultural competence can be defined as understanding a client's behaviors, beliefs and values (Gelman, 2004) demonstrated through culturally respectful communication and behaviors (King, Perez, & Shim, 2013). As defined by Gelman (2004), cultural competence includes ongoing self-awareness and reflection of the effects culture has on beliefs, values and behaviors; variations across and within groups; and respect and acceptance for cultural and individual qualities. To be culturally competent is to identify and comprehend the client's cultural values and effectively use them in applying services that meet their cultural and linguistic needs (Cordero, 2008).

Cultural competence in social work helps social workers develop skills needed to understand, communicate and improve services to effectively assist culturally diverse clients. It is important to understand and conceptualize the differences in the ways clients express their needs and problems (Furman et al., 2009). When working with Latino clients, the clinician should avoid stereotypical and pan-ethnic ideas that fail to distinguish group differences by grouping similar ethnicities together. Treatment should integrate culturally responsive services and resources that retain and support positive life outcomes and

Background

The terms Hispanic, Spanish and Latino are often used synonymously. Hispanic is a term that was first introduced in 1970 by U.S. government officials who were eager to develop an umbrella term that would encompass all those who came from or who had parents who came from a Spanish-speaking country (U.S. Census Bureau, n.d.). There is a great deal of controversy surrounding the generic terminology used to describe persons of Hispanic or Latino descent. The terms Latino and Hispanic often vary in the way they ethnically define the population (Golash-Boza & Darity, 2008; Hernandez & Curiel, 2012).

Latino marginalization, enslavement and oppression (Hernandez & Curiel, 2012) first began with Spanish-European subjugation and colonization (Campesino & Schwartz, 2006). Latinos disproportionately encounter a wide variety of overwhelming injustices, including cultural and linguistic barriers, poverty, insufficient healthcare and low educational achievement (Gelman, 2004), that prevent them from accessing and receiving necessary care and services. Latinos describe discrimination based on skin color, negative stereotypes, poverty and English fluency (Edwards & Romero, 2008). Hispanic groups experience varying kinds and amounts of discrimination based on specific group stereotypes with Mexicans being viewed the most negatively, followed by Cubans and then Puerto Ricans. Latinos are often exploited for labor, are overworked and underpaid for physically demanding work (Gallo, Penedo, Monteros & Arguelles, 2009) because they are vulnerable, poor and undervalued.

Acculturation is the process in which immigrating individuals acclimate to cultural norms and practices of a new host country (Concha, Sanchez, Del la Rosa, & Villar, 2013). It is a complex process requiring tremendous change, knowledge and understanding on micro, mezzo

and macro levels. Expectations about life in the U.S. are considerably different from the harsh reality. Latinos who sustain economic stress report greater levels of acculturative stress. They have a much harder time procuring necessary resources, such as food, housing, health care and employment, to contend with internal and external demands (Archuleta & Teasley, 2013). The process of acculturation can be a difficult experience for a variety of reasons, conflicting cultural values and expectations, legal status, socio-political norms, separating from family and family conflict relating to the different levels of acculturation between generations.

Today, Latinos continue to endure stigmatization perpetuated by governments and popular media. Latinos are frequently portrayed as undereducated illegal immigrants who do not belong in America, do not contribute to American society and are criminals and prone to violence (French & Chavez, 2010). Attitudes concerning Latinos have varied over the years, but remain mostly negative (Edwards & Romero, 2008). Hispanics have been living in the U.S. since before America became America. In 2011, Latinos represented 15% of the labor force (U.S. Department of Labor, 2012) during a time when immigrants no longer accounted for the majority of the Latino workers in the U.S. More than half of U.S. Latinos are born and raised in the United States and for some time now has made up the larger portion of the population (Pew Research, 2014). Most of the information being relayed to the public is inaccurate and based on harmful stereotypes (Blair et al., 2013).

Purpose of the Study

The purpose of the study is to (1) review the existing literature to identify Latino cultural competency training used to train social work students and other helping professionals and (2) to identify recommendations for integrating Latino cultural competency education into the social work curriculum.

Research Questions

1. What are the current efforts being made to train social work students and helping professionals on Latino cultural competency?
2. What are the recommendations for working with Latinos?
3. What are the challenges in providing Latino cultural competency training to social work students and other helping professionals?

Significance of the Study

Mental health services are underutilized by Latinos for a number of reasons. Due to cultural aspects Latinos, especially men, are less likely to seek services due to family loyalty and images of machismo and marianismo (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). The size of family networks, economic and language barriers are associated with not seeking services (Koerner, Shirai, & Pedroza, 2013) or prematurely terminating services (Garza & Watts, 2010). Approaches that are incongruent with a client's cultural values and beliefs can be harmful and are ineffective when attempting to build rapport and obtain information (Ojeda, Flores, Meza, & Morales, 2011). Because Latinos are commonly marginalized, they may be unaware of services or services may be inconveniently located. Limited financial resources fused with institutional racism prevent Latinos from accessing quality mental health and health care services.

The needs of Latinos, especially monolingual individuals, continue to remain unmet because there is a shortage of proficient bilingual and bicultural mental health providers. Understanding the cultural needs of the Latino population has important implications for social work practice, advocacy and research. Communication is a crucial aspect to access and use mental health services. Language barriers exacerbate problems, not only when accessing mental health services, but also when traveling there, using public transportation, completing paperwork and even something as simple as checking in.

Theoretical Frameworks on Cultural Competency

The research of the current study was guided by the tripartite key elements of the Multiple Dimensions of Cultural Competence (MDCC) conceptualized by Sue (2001). The concept and measurement of cultural competence is based on three major concepts: awareness (beliefs and attitudes), knowledge and skills (Sue, 2001; Gelman, 2004). Knowledge encompasses the acquisition of information (Polacek & Martinez, 2009) and familiarization one obtains of other cultures' history, values, beliefs and customs (Sisneros & Alter, 2009). Awareness is the process of reflecting on one's own beliefs, values and biases of other cultures. Culturally competent skills is characterized by one's abilities and behaviors applied when interacting with culturally diverse persons (Jackson & Samuels, 2011).

Each culture has different values, beliefs and customs (Hernandez & Curiel, 2012) shaped by the elements of family and society. Culture impacts the ways individuals perceive objects and situations and how individuals react and behave with respect to gender, age, language, race/ethnicity and religion. Cultural competence goes beyond interpersonal relations. It includes an array of skills and knowledge to identify how culture influences groups and individuals and how to best understand how clients interpret and experience the world around them. Cultural competence can be defined as understanding a client's behaviors, thoughts, beliefs and values (Gelman, 2004) demonstrated through attitudes, knowledge and behavior (King, Perez, & Shim, 2013). Culturally competent practice includes the delivery of culturally appropriate and customized services congruent with cultural beliefs and values (Griner & Smith, 2006).

Self-awareness requires individuals to thoroughly examine personal backgrounds,

perceptions, assumptions, attitudes, reactions and experiences. Cultural competence comprises understanding and learning about personal cultural influences and fundamentals as well as those of others. One's own cultural background, experiences and attitudes influence positive and negative communication and behavior patterns that affect a client's treatment. In order to achieve cultural competence one must first understand personal positions of power and privilege and how experiences of oppression have shaped views, attitudes, values, beliefs and interactions and relationships with others. Personal assumptions, feelings, and presumptions about a client's narrative (Taylor, Gambourg, Rivera, & Laureano, 2006) greatly affects clinical work (Cardemil & Sarmiento, 2009). A lack of self-awareness and unrecognized implicit biases can influence interactions and interpretation of information (Ojeda, Flores, Meza, & Morales, 2011) that can harm the client.

Cultural competence provides skills that social workers need to understand, communicate and improve practice to serve culturally diverse clients effectively. Aspired outcomes and quality relationships are developed through empathy, self-awareness and client-centered care (Blair et al., 2013). Cultural competence is also about using established knowledge of a group building and then integrating it into services that are tailored to fit the individual needs of the client.

There is a lack of clinicians familiar with the Latino culture and language (Griner & Smith, 2006). The dire need for culturally informed clinicians and programs has become a major concern in the social work profession (Uttal, 2006). Language is a way for Latinos to feel understood and accepted. Using translators can complicate matters only because some phrases, words and concepts do not translate verbatim. Language functions as a channel to illustrate and convey a sense of experiences and emotions. Some concepts are sometimes difficult to translate

into the English language. Traditionally, Spanish is the primary language among Latinos, but largely relies on the individual's native origin. Without truly understanding the client, it can take longer to establish rapport and trust, which is essential most especially to newly immigrated and/or undocumented Latinos.

Review of the Literature

The United States Latino population is the largest minority group in the nation with an abundance of cultural dichotomies from a variety of national origins. The nation's demographic make-up has significantly transformed racially and ethnically over a short period of time. Today U.S. Latinos represent 53 million, approximately 17%, of the nation's total population (U.S. Census Bureau, 2012). Over a ten year period, from 2000-2010, the Latino population grew 45% (Hernandez & Curiel, 2012). The population literally quadrupled over a few decades and is estimated to reach 132.8 million (approximately 30%) by 2050 (U.S. Census Bureau, 2013). The shift in demographic trends reveals an urgent need for culturally adept service providers, programs and intervention strategies to help Latinos overcome socio-political disadvantages and oppression.

Latino vs. Hispanic

The terms Hispanic, Spanish and Latino are often used synonymously. There is a great deal of controversy surrounding the generic terminology. There are considerable variations in labels and what is deemed respectable and appropriate. For this particular reason, the author of this study prefers the use of the term *Latino* to *Hispanic*. Hispanic is a term that was first introduced in 1970 by U.S. government officials who were eager to develop an umbrella term that would encompass all those who came from or who had parents who came from a Spanish-speaking country (U.S. Census Bureau, n.d.). The terms Latino and Hispanic often vary in the way they ethnically define the population (Golash-Boza & Darity, 2008) with varying meanings (Hernandez & Curiel, 2012). There does not seem to be an established universal definition. Golash-Boza & Darity (2008) defined *Latino* as an individual from Central and South America

and Spanish speaking Caribbean Islands (excluding Spain, Brazil and Portugal). *Hispanic* also describes an individual from countries whose dominant language is primarily Spanish, including Spain, Brazil and Portugal (Hernandez & Curiel, 2012). Regardless of what term is utilized to describe a person or group from a Spanish-speaking country or Spanish ancestry, the terms “Hispanic” and “Latino” fail to reflect the cultural variations and identities between countries and how members of the population view themselves; consequently continuing to promote a false universalism (Edwards & Romero, 2008). Each Spanish speaking country has dialectical and cultural variations that also differ among regions, social class and roles. While there may be several commonalities among Latinos, it is important to understand that groups differ from one another in many ways historically, politically and socially (Campesino & Schwartz, 2006).

Race and Ethnicity

It is hard to make generalized assumptions about Latinos since the population represents a mixture of racial and ethnic groups from more than 20 different countries. The Latino population is characterized by distinct variations in language, social norms, culture and values. Latino-Americans’ self-concept of race and ethnic identity has also varied over time among various groups as well as within them. Race can be somewhat complicated for the reason that Latinos can trace their ancestry to Spanish-Europeans, Indian and Indigenous people and African slaves and be of any skin tone, dark to fair (Gallegos & Ferdman, 2007). Society has focused on Latinos as a homogeneous group without considering their distinguishing differences (Zeiders, Roosa & Tein, 2011). Latino group identities are shaped by a number of dynamics (Gelman, 2004), including acculturation, assimilation, generational status, spirituality, native origins and culture.

The United States' systematic racial and ethnic enumeration categories do not clearly differentiate the characteristics that distinguish various Latino-American groups. Latino-Americans feel they do not fit into standard racial categories used by the U.S. Census Bureau (Pew Research, 2012). During the 2010 Census, more than half of Latinos self-identified as "other race" (Pew Research, 2012). Most Latinos self-identify themselves by their country of origin.

Latinos in the United States

Historically, Latinos disproportionately encounter a wide variety of overwhelming injustices, encompassing cultural and linguistic barriers, poverty and low educational achievement (Gelman, 2004), that prevent them from accessing and receiving necessary care and services. They are often exploited for labor, are overworked and underpaid for physically demanding work (Gallo, Penedo, Monteros & Arguelles, 2009) because they are vulnerable and undervalued.

Some of the unique social challenges Latinos often encounter are tied to discrimination based on socioeconomic status, English fluency, skin color and stereotypes (Edwards & Romero, 2008). Latinos are more likely to be of the poorest poor, live in disadvantaged neighborhoods where crime, violence, drugs and gangs are a reality (Edwards & Romero, 2008). Latino students frequently attend poorly equipped, low budget schools with inadequate facilities and underqualified teachers consequently predisposing Latino students at greater risk for academic failure and school dropout (Edwards & Romero, 2008). Many Latino children come from families whose parents speak little to no English and have little educational experience (Sarkisian, Sanchez, Del la Rosa & Villar, 2013).

Latino marginalization, enslavement and oppression (Hernandez & Curiel, 2012) first began with Spanish-European subjugation and colonization (Campesino & Schwartz, 2006). Part of the process of colonization employed by Spain entailed integrating their beliefs, social structure and overall way of life with the people of the countries they invaded- Central and South America and the Caribbean Islands. This was achieved by religious and cultural domination and mixing the bloodlines of Spanish-Europeans and indigenous people (Hernandez & Curiel, 2012).

Today, Latinos continue to endure stigmatization perpetuated by the United States government and popular media. Latinos are frequently portrayed as undereducated illegal immigrants who do not belong in America, do not contribute to American society and are prone to violence (French & Chavez, 2010). Most of the information being relayed to the public is false, inaccurate and based on stereotypes (Blair et al., 2013).

Latinos experience varying kinds and amounts of discrimination related to group membership with Mexicans being viewed the most negatively, followed by Cubans and then Puerto Ricans. Attitudes concerning Latinos have varied over the years, but remain mostly negative (Edwards & Romero, 2008). In 2011, Latinos represented 15% of the labor force (U.S. Department of Labor, 2012) during a time when immigrants no longer accounted for the majority of the Latino workers in the U.S. More than half of U.S. Latinos are born and raised in the United States (Pew Research, 2014).

Mexican-Americans make up the nation's largest Latino group followed by Puerto Ricans and then Cubans (Brown & Lopez, 2013). The remaining population is made up of those originating from Central and South America and the Caribbean. More than half of the nation's Latino population resides in California, Texas and Florida (Brown & Lopez, 2013). Latino

Caribbean groups- Cubans, Dominicans and Puerto Ricans are more prevalent in Florida and along the East Coast with Cubans being the most dominant group followed by Puerto Ricans and then by Mexicans (Brown & Lopez, 2013). Florida's Latino population represents about 24% (4.6 million) of Florida's entire population and is beginning to steadily outpace Florida's non-Hispanics. From 2005 to 2011, the percentage of Latinos residing in Florida increased 3.5% and with a large percentage of the population being below the poverty level and undereducated (Brown & Lopez, 2013). Now, more than ever, it is increasingly necessary for social service providers in Florida to understand Latino cultural values and beliefs, language and dynamics.

Mexicans have endured centuries of oppression beginning with Spain and then followed Spain's successor America. Prior to the Mexican-American War, the current American Southwest from Texas to California was known as New Spain and belonged to Mexico (Duncan-Andrade, 2005). The territory was predominantly Spanish-speaking with very distinct cultures shaped by Spanish settlers and native cultures. The Treaty of Guadalupe Hidalgo in 1848 brought an end to the war. Mexico's surrender included relinquishing the greater part of its territory (Duncan-Andrade, 2005). Other stipulations included the safety and civil rights of the Mexican residents inside the new border. The stipulation of the treaty allowed the Mexican inhabitants to keep their lands. However, the flood of greedy American settlers stemmed the pervasive oppression that resulted in the annexation of the remaining Mexicans so they could assume their lands (Duncan-Andrade, 2005). By 1854, America seized Mexico's remaining territory above the Rio Grande (Duncan-Andrade, 2005).

The United States acquired control of Puerto Rico at the end of Spanish-American War (Garcia-Preto, McGoldrick & Giordano, 2005). Puerto Ricans are commonwealth citizens and do

not require visas to travel between the island of Puerto Rico and the U.S. Despite the believed advantages of U.S. citizenship, Puerto Ricans have encountered a number of hardships and discrimination. They experience higher unemployment rates and are documented as being the poorest of all the Latino groups (Garcia-Preto, McGoldrick & Giordano, 2005). Puerto Ricans are deprived of certain U.S. political and civil rights if they continue to live in Puerto Rico. They migrate to the U.S. seeking economic, educational and professional opportunities and to escape the impacts of extreme poverty. In more recent years, unemployment and the island's faltering economy have resulted in more people leaving island than arriving. About 34% of people born in Puerto Rico now live on the mainland (Pew Research, 2014). Most of the people staying are predominantly poor who cannot afford to leave and the more successful, educated residents.

Over time, Latino groups have immigrated to the U.S. for different reasons such as persecution, economic and political oppression, civil war and educational and professional opportunities. Cuban immigration to the United States exploded in the early 1960s when Fidel Castro came to power. During his reign great economic hardship ensued due to the economic system built on a communist ideology (Eckstein, 2010). Castro's government imprisoned and often times executed citizens who opposed his government. In 1966 congress passed the Cuban Adjustment Act ("wet-foot, dry-foot" policy). Under the amendment, Cuban refugees who reach U.S. soil are granted U.S. citizenship (US Citizenship and Immigration Services, 2011). The first wave of U.S. Cuban refugees were wealthy, educated professionals were not met with the same hostility, discrimination and racism later groups suffered. Cuban Americans are shown to have lower unemployment rates and are better off financially and academically than other Hispanic groups (Eckstein, 2010).

Expectations about life in the U.S. are drastically different from the reality. Latinos who sustain economic stress report greater levels of acculturative stress. They have a much harder time procuring necessary resources, such as food, housing, health care and employment, to contend with demands (Archuleta & Teasley, 2013). Acculturation is a complex process of change on various levels including individual and family. Acculturation is the process in which immigrating individuals acclimate to cultural norms and practices of a new host country (Concha, Sanchez, Del la Rosa, & Villar, 2013). The process of acculturation can be a difficult experience for a variety of reasons, conflicting cultural values and expectations, legal status, separating from family and family conflict relating to the different levels of acculturation between generations. Latinos with higher levels of acculturative stress also exhibit more somatic symptoms associated with depression and anxiety (Archuleta & Teasley, 2013). Functioning within two very distinct cultures with differences in values and expectations can be demanding and stressful. Traditional roles and the collectivistic values of the Latino culture clash with the individualistic values of mainstream America. Latino families can be a source of strength, security and identity but at the same time can produce a considerable amount of distress and pressure on family members to conform to long-established cultural roles, place the needs of the family before individual goals and/or refrain from seeking help outside of the family circle.

Traditional Latino Cultural Values

Despite being a heterogeneous group, there are fundamental cultural and social similarities among Latino-Americans. The Latino culture is rich with long-established traditions and beliefs highlighting strong family bonds, the value of personal relationships, religion and a collectivist orientation (Gallo, Penedo, Monteros, & Arguelles, 2009). These cultural similarities

can be associated with the shared history of Spanish oppression and colonization (Hernandez & Curiel, 2012), a concept previously discussed. There are five distinct concepts that emerged from the literature that authors consider “traditional core cultural values”. Cultural values familismo, personalismo, respeto, confianza (Garza & Watts, 2010) and simpatía (Campesino & Schwartz, 2006) shape and guide the lives, attitudes and behaviors of Latinos. Families and communities follow a structured social system based on gender, generation, education/profession and authority (Taylor, Gambourg, Rivera, & Laureano, 2006).

Personalismo is a fundamental component of the Latino culture that emphasizes the importance and value of close relationships. It is characterized as building and maintaining meaningful, close interpersonal relationships (Garza & Watts, 2010). Relatives and close friends tend to make unexpected visits to see one another to simply “chitchat” (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). Interpersonal space tends to be much closer than European-Americans (Gelman, 2004). Latinos show affection and warmth by touching and greeting one another with a hug and a kiss on the cheek. *Personalismo* embodies loyalty, thoughtfulness, respect and reciprocity which establish and reinforce mutual feelings of closeness and solidarity (Lendale & Oropesa, 2007).

Respeto (respect) is the acknowledgment of authority and respect for the hierarchy system within the family and community. Latinos typically abide by a social order which recognizes the differential treatment of others based on gender, generation and education/profession. It is instilled in children to be honorable, well-mannered and respectful to those in positions of authority such as elders. Children will often use formal titles, Señor/Don (Mr.) or Señor/Doña (Mrs.) and avoid eye contact when addressing authority figures. No matter

what age, requesting la bendición from parents, aunts, uncles, grandparents and loved ones is a gesture that mirrors respect, love and family devotedness (Garcia-Preto, McGoldrick, & Giordano, 2005). La bendición, translated to *the blessing*, is meant to give protection and/or approval from those who are respected or hold a position of authority.

Simpatía refers to the importance to maintain harmony, politeness, pleasantness and agreeableness in social relationships. Simpatía entails a balance of obedience and compassion for the feelings of others (Campesino & Schwartz, 2006). It is common for Latinos to avoid hostility and confrontation particularly with an authority figure.

Confianza is a critical component of Latino relationships. In English, it translates to the word confidence. However, the English translation does not express the cultural connotation that it embodies. It is better described as mutual trust and dependability. Respeto and confianza are reciprocal concepts that go hand in hand (Garcia-Preto, McGoldrick & Giordano, 2005). Mutual trust and respect are attributes that determine the quality of relationships.

Familismo

Despite experiencing several unique adversities, marginalization and discrimination Latinos remain resilient. Strong family attachments and quality relationships buffer the effects of negative stresses Latinos frequently experience. Family is considered the core of the Latino culture and is valued above all else (Landale & Oropesa, 2007). Familismo is defined by a profound sense of family respect, obligation and loyalty. The family fulfils a number of pertinent roles relating to well-being and is the main source of resources, socialization and support. Familismo gives sense to one's identity and purpose within the family and life in general. Family dynamics and structures tend to follow patriarchal gender roles which are defined by marianismo

and machismo (Zeiders, Roosa, & Tein, 2011).

Latinos have a different understanding of whom and what constitutes a family. Latinos integrate a number of people in their family circle (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). Families are large close-knit networks composed of people related by blood and marriage as well as non-related family members- godparents (compadrazgo), informally adopted children and close friends (Garcia-Preto, McGoldrick, & Giordano, 2005). Latinos communicate and interact more frequently with extended family members than non-Latino Whites (Comeau, 2012). Family members visit one another often and spend lots of time together. It is common to hold large-scale family celebrations for holidays, birthdays, baptisms, communions, confirmations and graduations. They live very close to one another, either in the same home or same neighborhood.

Latinos predominantly have strong family ties and obligations oriented around the needs of the family. The collectivist nature of Latinos emphasizes the importance of family relationships and mutual interdependence and often tend to have more stable marriages than the non-Latino Whites (Landale & Oropesa, 2007). Families frequently rely on one another to provide various supports against hardships. Elders are greatly respected and cherished by the entire family. They are often sought for advice, guidance and to give blessings. Caring for elderly relatives is, for the most part, culturally expected. Latinos are less likely to utilize assisted living or nursing home facilities and tend to be the primary caregiver (Koerner, Shirai & Pedroza, 2013). Family members feel responsible to help and provide other family members experiencing financial, health and other life challenges with emotional, economic and instrumental (e.g. childcare and transportation) support (Zeiders, Roosa, & Tein, 2011).

Gender roles are often customary among Latinos no matter race, country of origin or status. *Marianismo* and *Machismo* are social scripts ascribed to men and women with gender specific expectations, behaviors and responsibilities (Landale & Oropesa, 2007). *Machismo* is derived from the Spanish term macho. In traditional Latino families, males head the household, protect and provide for the family and make all major decisions. *Machismo* describes traditional attitudes about Latino males characterized by courage, honor and pride.

Marianismo describes set of behaviors and responsibilities for Latina women. The origin of *Marianismo* is conceptualized from the Roman Catholic interpretation of the Virgin Mary (Nuestra Señora de Guadalupe). The Virgin Mary is an essential religious and cultural icon symbolizing strength, pride, freedom (Campesino & Schwartz, 2006), female modesty, virtue and self-sacrifice.

Latinas are socialized and groomed to become mothers and wives (Landale & Oropesa, 2007). Latinas are responsible for taking care of household chores and children, keeping the family together and continuing family traditions (Garcia-Preto, McGoldrick, & Giordano, 2005). Latina women are heavily depended on because so much relies on her, including the unity of the family and tradition.

Language

The Spanish language is a main component of the Latino identity and is the families' primary language. Latinos place great importance on preserving the Spanish language across generations. The Spanish language plays a vital role in connecting Latinos to their culture. A large majority of Latinos are bilingual and speak English regularly. Bilingual Latinos may switch between Spanish and English especially during an emotional situation. Many phrases and words

convey a particular valence that can only be captured in Spanish (Gelman, 2004).

Spirituality and Religion

Latino spirituality is a mixture of different foundations that have evolved over hundreds of years. Catholicism continues to remain the prevailing religion of Latino-Americans. However the Catholic Latino community is steadily declining while the evangelical Protestant and unaffiliated communities are increasing. Religion is changing among Latinos and is believed to be connected to the mainstream, individualist culture of America influencing younger American-born English-speaking Latinos.

Spirituality is a fundamental aspect in the lives of Latinos. Latinos typically have an influential relationship with their conception of God (Campesino & Schwartz, 2006). Because Latinos come from a variety of diverse backgrounds and races, their spiritual beliefs and practices are influenced by a breadth of cultural dynamics. Latinos engage in a variety of spiritual practices, including traditional religion and spiritual folklore like *santeria*, *curanderismo* and *espiritismo*. Spiritual influences play a major role daily life, milestones and events. Spirituality is interrelated with the Latino culture and often expressed through *dichos*, *personalismo*, *familismo*, *simpatico*, *respeto* and *confianza*. *Dichos* reinforce everyday moral and life lessons that promote culturally appropriate behaviors (Andrés-Hyman et al., 2006). Spirituality is a source of strength and support that involves a lifelong mutual obligation for maintaining personal and family well-being. The power of faith remains a key source of hope and strength, especially during difficult times.

Social Work Cultural Competency Education

Not every individual and organization possesses the same degree of power and privilege.

Confronting the social realities of racism and oppression can be uncomfortable. Social work students need to understand the dynamics of racism and oppression and the roles they play in the lives of Latinos. Cultural competence goes far beyond the scope of understanding and identifying racism and oppression (Walls, 2009). Social work cultural competency education requires students to examine ethnocentric and stereotypical beliefs based on generalizations and false assumptions (King, Perez, & Shim, 2013).

Cultural competence in social work education helps students develop skills needed to understand, communicate and improve practice to serve culturally diverse clients. When working with Latino clients, the clinician should integrate a culturally sensitive treatment plan to retain, promote and support positive life outcomes. It is important to understand and conceptualize the differences in the ways clients express their needs and problems (Furman et al., 2009) to prevent misdiagnosis and compliance challenges.

Teaching social work students to be culturally sensitive and conscious of inherent cultural issues plays a critical role in professional development and practice with diverse groups. Several social work education programs integrate cultural competence content in social work courses to compel students to explore their social identity through self-awareness (Pernell-Arnold, Finley, Sands, Bourjolly, & Stanhope, 2012). Each student is forced, in a sense, to acknowledge the dynamics of their own identity, like gender, race, ethnicity and/or age. It is intended to help students understand and develop interpersonal and intrapersonal strategies for addressing prejudices towards disenfranchised groups. Because eighty-six percent of licensed social workers are non-Hispanic Whites (Walls, 2009) and have little awareness of the effects of oppression and discrimination (Walls, 2009), it becomes necessary for students, faculty and licensed

professionals to identify and recognize their cultural background and address their biases. The more students learn about themselves, the easier it will be to understand and work with diverse clients. When compared to other underrepresented groups in the U.S., literature is lacking in quantity and quality in regards to preparing social workers and other professionals to work with Latino populations. Many social workers know and understand very little about the culture and the many issues that frequently impact the lives of Latinos such as policies regarding education, immigration and healthcare as well as employment. The number of bilingual social workers familiar with the Latino culture is insufficient to serve the growing population (Furman, Loya, Jones, & Hugo, 2013). Considering some of the key points previously discussed, such as the Latino population is expected to account for almost 30% of the nation's population by 2050, the majority of Latinos encounter and suffer from a number of maladies, including marginalization, discrimination, chronic health conditions and low educational achievement, it is exceedingly crucial for social workers to have sufficient knowledge, understanding and skills to effectively meet the needs of Latinos, culturally and linguistically (Cordero, 2008).

Some of the challenges many programs encounter is determining in which way their courses and teachings can cultivate cultural competencies related to self-awareness and prejudice reduction (King, Perez, & Shim, 2013). Cultural competence training in universities is a transformative approach that encompasses cultural values, experiences with oppression, resiliency and developing cultural interviewing skills (Cordero, 2008). Educators report using a variety of references, lectures, class discussions, assignments and presenters to enhance the learning experiences of social work students (Wehling, 2008).

Cultural Competence Training for Professionals

Cultural competence training and education are often regarded as being an effective approach for enhancing cultural skills, knowledge, attitudes and awareness (Delphin & Rowe, 2008). Cultural competence training for professionals has been implemented in a number of ways: interactively, workshops, post-graduate courses and seminars. Cultural competence training differs in the ways and length it is implemented with some ranging from 9 hours to 10 months and provides varying results. Similar to students, the process of becoming culturally competent entails the development of cultural awareness, knowledge, and skills to effectively and respectfully serve, collaborate and treat diverse clients/patients.

Articles reported mostly positive effects of cultural competence training such as less judgmental attitudes and beliefs (Kutob, Bormanis, Crago, Harris, & Shisslak, 2013), reduced ethnocentric thinking (Pernell-Arnold, Finley, Sands, Bourjolly, & Stanhope, 2012), improved patient satisfaction (Stanhope et al., 2008), developing appropriate intervention strategies (Delphin & Rowe, 2008), and increased cultural and self-awareness (Williams, 2005). Researchers often measure and evaluate these outcomes using a baseline or a test prior to the commencement of cultural competence training and a posttest following the completion of training (Kutob et al., 2013; Delgado et al., 2013), assignments (Pernell-Arnold et al., 2012; Delphin & Rowe, 2008), interviewing (Stanhope et al., 2008), self-reported surveys (Polacek & Martinez, 2009) and comparing groups methods (Williams, 2005; Kutob et al., 2013). Although the existing literature reports improved cultural skills, knowledge and attitudes, the literature fails to disclose how those improvements transform into better service delivery (Williams, 2005; Stanhope et al., 2008).

Methodology

Beginning in June 2014 an electronic literature search was conducted using PsychINFO, PubMed, Education Resources Information Center (ERIC) and Cumulative Index of Nursing and Allied Health Literature (CINAHL) using terms such as “cultural competency training”, “cultural competency education” and/or “social work/mental health” connected with Hispanic or Latino. The following criterion was applied to exclude articles that did not meet the following inclusion criteria:

- Articles published prior to 2004
- Research conducted in the U.S.
- Articles available as full-text, in the English language and peer-reviewed
- Articles that focused on training social work students and similar professionals on Latino cultural competency

Article reference pages were also searched for additional articles that met the inclusion criteria.

The initial search using general terms in the mentioned databases and key terms produced a total of 5,576 articles. After applying the inclusion criterion, 336 articles remained. A detailed review of the articles was performed leaving only 35 studies. The others were excluded for not fully meeting the criteria.

Literature Search Results

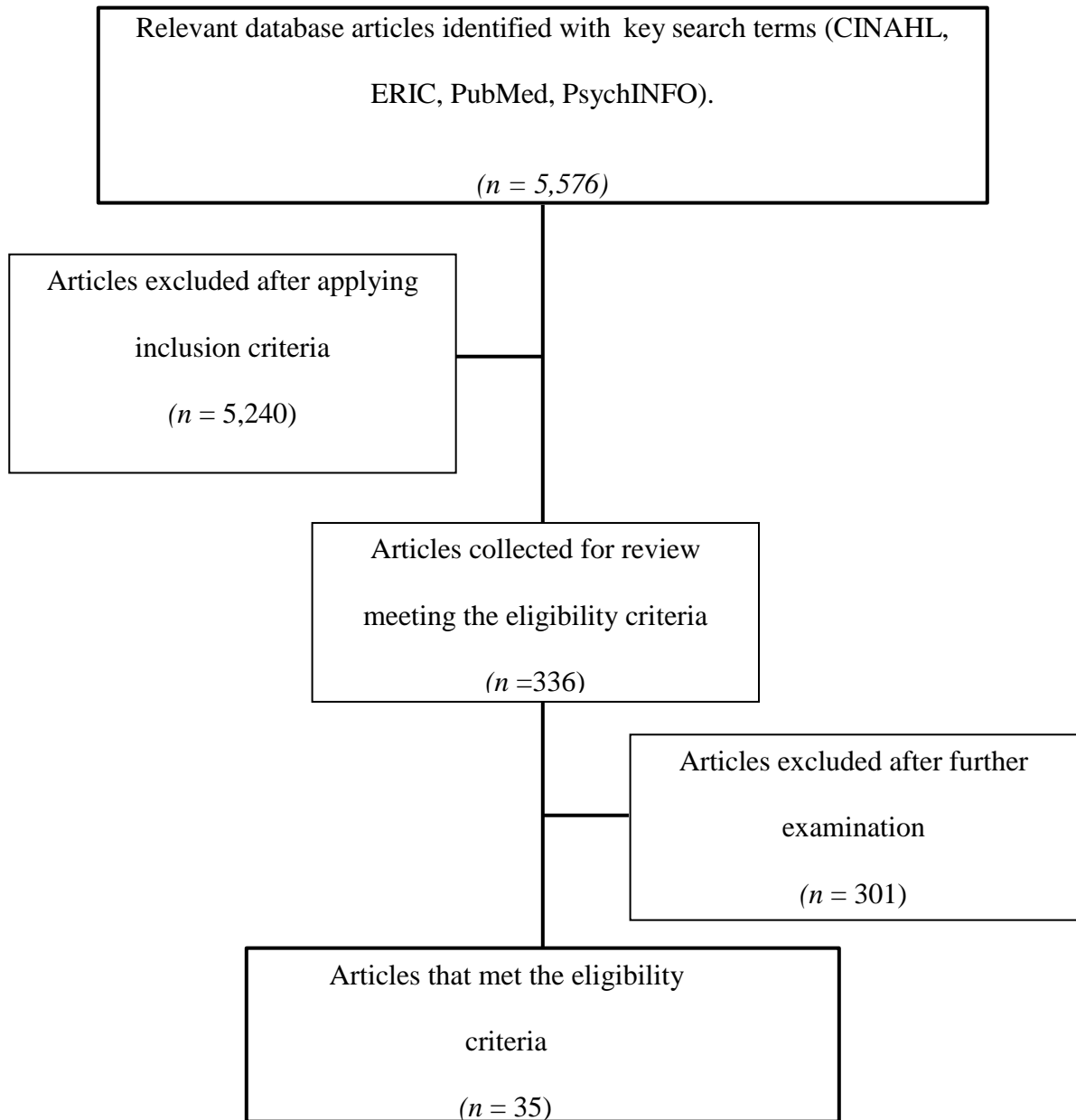


Figure 1 Literature search results

Analysis of the Articles

A total of 35 articles met the eligibility criteria. Additional analysis of the articles demonstrated the following distribution: 17 (49%) were conceptual studies, 6 (17%) were qualitative studies and 12 (34%) were empirical studies. Of the empirical studies 6 (17%) were quantitative and 6 (17%) were mixed mode studies.

The studies are grouped by categories pertaining to training, recommendations for working with Latino clients and the challenges of providing cultural competency training to students and professionals.

1. What are the current efforts being made to train social work students and helping professionals on Hispanic/Latino cultural competency?
2. What are the recommendations for providing culturally competent services to Latino clients?
3. What are the challenges in providing cultural competency training to social work students and other helping professionals?

Current Efforts to Train Social Work Students and Helping Professionals

To be culturally competent is to understand the fundamentals of a client/patient's culture (Cordero, 2008), having an awareness of and respect for yourself and others and the application of appropriate cultural knowledge and skills (Kutob, Bormanis, Crago, Harris, & Shisslak, 2013). Data was collected using both qualitative and/or quantitative instruments to measure skills related to cultural competence and the effectiveness of cultural competence training (Pernell-Arnold, Finley, Sands, Bourjolly, & Stanhope, 2012; Delgado et al., 2013; Delphin & Rowe, 2008). Cultural competence was widely discussed as a means to reduce disparities and improve

outcomes of diverse clients and patients (Stanhope et al., 2008; Williams, 2005; Delphin & Rowe, 2008). The main purpose of these studies was to increase the participants' cultural competence levels by broadening their perspectives on culture and enhancing their awareness, knowledge and skills (Williams; 2005; Delgado et al., 2013; Delphin & Rowe, 2008; Kutob et al, 2013). The studies reported an increase in the participants' cultural competence in at least one or more target areas after completing the prescribed training. However, it is still unclear what cultural competence content, frequency and duration is most beneficial to trainees.

Delgado et al. (2013) used Inventory to Assess the Process of Cultural Competency (IAPCC-R) based on Campinha-Bacote's model of cultural competence (2003) to measure the change of health care providers cultural competence levels over a six month period. The training was a single one hour lesson. The IAPCC-R was administered prior to the training (baseline) and then at a three and six month follow-up. The IAPCC-R measured five levels of cultural competence desire, awareness, knowledge, skills and encounters (Delgado et al., 2013). The results suggest the participants made the most progress between the baseline and three month follow-up which increased from 9.2% to 12.5%.

As anticipated by Sue (2001), Stanhope et al. (2008) and Delgado et al. (2013), the more cultural competence training and education students and professionals receive the more culturally aware, knowledgeable and skillful they become. Nevertheless, as reported by Walls (2009) and Stanhope et al. (2008), training efforts did serve as an effective means to increase and improve the participants' cultural knowledge, awareness and skills, however the overall level and change in cultural competence was less than expected.

The study conducted by Walls (2009) measured multicultural competence levels of entry

and senior-level BSW students and senior-level non-BSW students. The reported findings indicated senior-level BSW students scored significantly higher on all three subscales of the Multicultural Awareness-Knowledge-Skills Survey (MAKSS) measuring multicultural awareness, knowledge and skill than entry level BSW and senior level non-BSW students. Though senior-level BSW students scored higher than other participants, their scores were still low as a whole (Walls, 2009). The findings also indicate a greater need for more in depth research and training encompassing cultural competence (Stanhope et al., 2008; Williams, 2005; Delgado et al., 2013; Delphin & Rowe, 2008).

Kutob et al, 2013 (2013) used a Cultural Competence Assessment Tool (CCAT) to measure cultural self-awareness and knowledge, nonjudgmental thinking, nonverbal communication, empowerment and explanatory model elicitation. The study participants were divided into two groups. The intervention group was required to complete a nine hour interactive course of “virtual office visits” (case studies). The control group did not receive any training. According to the results, the intervention group scored higher on the nonjudgmental thinking and explanatory model elicitation subscales. Social workers are required to maintain the professional values, principles and standards set forth by the NASW Code of Ethics. Remaining supportive and nonjudgmental is beneficial to the client-worker relationship and the client’s outcome (Kutob et al, 2013).

Cultural Competency Training Programs

Pernell-Arnold et al. (2012) implemented a training program to improve cultural competence skills, awareness and knowledge of mental health clinicians and like professionals. Participants attended training two days per month over a ten month span. The training consisted

of five phases that included lectures, small group assignments, discussions, videos, guest speakers, role plays and presentations on topics relating to cultural fundamentals, racial and cultural identities, discrimination, and cross-cultural interventions. The study required participants to submit reflection papers (journal entries) on a monthly basis. The reflection papers were then coded according to the stages of Bennett's Developmental Model of Intercultural Sensitivity (1993). The significant shift from ethnocentric thinking to ethnorelative occurred after modules discussing racial identity and discrimination. The training reportedly provided participants with a better understanding and awareness of themselves and others.

Cultural competence training and education has become such an important asset in providing mental and health care services when considering the significant shift in demographics the United States has experienced over only a few short decades. The changing culturally diverse population is outnumbering the non-Hispanic Whites in the mental health (Walls, 2009; Furman, Loya, Jones, & Hugo, 2013) and health care fields (Delgado et al., 2013; Vega & Lopez, 2001).

Mental health services are underutilized by Latinos for a number of reasons. Due to cultural aspects Latinos, especially men, are less likely to seek services due to family loyalty and images of machismo and marianismo. The size of family networks, economic and language barriers are associated with not seeking services (Koerner, Shirai, & Pedroza, 2013) or prematurely terminating services (Garza & Watts, 2010). Because Latinos are commonly marginalized, they may be unaware of services or services may be inconveniently located.

The lack of bilingual social workers familiar with the Latino culture indicates that more needs to be done to recruit, retain and train social workers including students and faculty on Latino cultural competency to meet the needs of the growing Latino population (Furman, Loya,

Jones, & Hugo, 2013). A small handful of professionals and education programs around the nation have developed courses intended to prepare students to effectively work with Latino clients and/or patients (Bernal De Pheils & Saul, 2009; Cox, Falk, & Colon, 2006). The programs enable undergraduate and graduate level students to enhance their language and communication skills, Latino cultural knowledge, awareness and sensitivity to better serve and meet the needs of Latino clients and patients. The effects of the learning experiences significantly increased the students' linguistic and cultural competency skills which helped them to effectively communicate and better treat and care their Latino patients and/or clients (Lusk & Baray, 2014; Sisneros & Alter, 2009). Cultural and immersion experiences enhanced students' self-awareness and knowledge which directly influenced their cultural competence levels and comfort levels.

Walls (2009) assessed senior-level BSW students' cultural competence to determine the effectiveness of BSW cultural competence education. Senior-level BSW students scored higher on awareness than other senior-level non-BSW and entry-level BSW students. Senior-level BSW students scored higher on the Multicultural Awareness, Knowledge, and Skills Survey (MAKSS) when compared to other students, BSW seniors' scores were still low overall.

Furman, Loya, Jones, & Hugo (2013) addressed the reasons why social workers as a whole are inadequately prepared for practice with Latino clients. Only a small number of social work programs are attempting to integrate Latino cultural competency content in to social worker programs.

Challenges to Cultural Competency

There are a number of barriers hindering the progress of professionals' cultural

competence training which includes a lack of training opportunities (Vega & Lopez, 2001) and organization support (Delgado et al., 2013). A significant issue in providing cultural competency training and education is related to the lack of diversity among social workers and health care professions (Walls, 2009; Polacek & Martinez, 2009). They are not as diverse as the clients they typically serve in terms of race and ethnicity (Polacek & Martinez, 2009). Educators may lack experience, knowledge and training to deal with the effects of engaging in discussions encompassing racism and oppression; therefore omitting content altogether. Furman et al. (2013) recommends universities and higher learning programs redesign and adopt new strategies to meet the unique needs of the Latino population like encouraging bilingualism, biculturalism and provide incentive and financial support for students who identify as Hispanic and Latino. When working with culturally diverse clients such as Latinos who deeply depend on a non-English language, training should include the development of basic linguistic skills (Delgado et al., 2014). Providing learning opportunities such as Spanish immersion, service-learning and volunteer programs compels students to enhance their linguistic skills by directly engaging with Latinos in cultural settings (Furman et al., 2013; Westboork-Sherrill & Mayo, 2014) and have proven to be more effective than indirect approaches (Mama, 2001; Cox, Falk & Colon, 2006).

Literature on social work practice with underserved groups is lacking in social work education (Walls, 2009). Inclusion of content on diverse populations in social work education may be contributed to the lack of racial and ethnic diversity among the faculty and staff that may lack an understanding of the effects associated with oppression and racism (Uttal, 2006; Walls, 2009). Social work students are more likely to receive content on topics related to women, LGBT (Walls, 2009) and non-Hispanic African American groups (Cox, Falk, & Colon, 2006).

Westboork-Sherrill & Mayo (2014) analyzed provider perceptions and comfort levels when treating Latinos. Students largely reported having insufficient knowledge and skills to adequately serve Latinos as well as some discomfort when communicating and treating Latinos. Comfort levels were correlated with language proficiency and experience with Latinos. The more experience students had with Latino patients, the more confident and comfortable they were in treating and communicating with Latino patients and their families. Rojas-Guylar, Wagner, & Chockalingam (2006) discussed the lack of bilingual health care staff and identified commonly faced barriers: support, funding and resources. Recommendations to educate and enhance professionals' and students' Latino cultural competence include providing more continuing education opportunities, developing partnerships with the Latino community, study abroad programs and service learning.

Recommendations for Providing Culturally Competent Services to Latino Clients

Griner & Smith (2006) compared the outcomes associated with culturally modified mental health interventions. Services provided in the client's preferred language and ethnically matching the client and clinician were two times more effective (Gelman, 2004; Griner & Smith, 2006). Latino clients are more likely to follow through and comply with treatment when they feel understood and interventions are congruent with cultural values and beliefs (Garza & Watts, 2010; Griner & Smith, 2006).

In order to establish rapport and positive communication, vital relationship components respect and trust must first be established (Gelman, 2004, Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). Services should include culturally appropriate behaviors and interventions that integrate cultural knowledge and skills into practice and services. Personalismo serves as a

channel to introduce other cultural values such as *simpatía*, *confianza* and *respeto*. Latinos talk and take some time to get to know one another as a way of establishing trust and demonstrating respect (Garza & Watts, 2010). Gift giving, making less eye contact and more frequent physical contact are common when working with Latinos and their families. Social workers will more than likely find themselves shaking hands and/or giving a pat on the back more frequently with their Latino clients (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006; Gelman, 2004). Informal conversation, using appropriate titles such as Señor/Don (Mr.) or Señor/Doña (Mrs.) and closer conversation proximity demonstrates warmth, respect and a genuine interest (Garza & Watts, 2010, 2006; Taylor, Gambourg, Rivera, & Laureano, 2006). It is also important to explore the client's spiritual and religious belief (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson). Traditionally, Latinos' conception of God and spiritual communities are a source of strength and support (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006; Gelman, 2004). The recommended practices with Latinos is more time consuming and may require social workers to disclose more personal information; however it is more effective to obtain needed information and more likely the client will not prematurely terminate services (Gelman, 2004; Griner & Smith, 2006).

Latinos traditionally have a strong sense of family obligation and bonds (Garza & Watts, 2010). Both immediate and extended family members are major sources of support and influence (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). Including family members in the treatment process and providing additional information, support and/or resources to the family may help to establish rapport and to better engage the client (Gelman, 2004; Taylor, Gambourg, Rivera, & Laureano, 2006).

Key Themes in the Literature

- A need for effective Latino cultural competency training and education.
- Urgent need for social workers familiar with the Latino culture and language.
- Cultural competency training and education is effective in regards to self-awareness; however more research is needed to determine what training frequency, duration and content is most effective in regards to Latino cultural competency.
- There is a correlation between culturally competent practice and positive client outcomes.
- There is a correlation between comfort levels and exposure/experience with Latino clients/patients.
- Cultural competency is measured by one's cultural awareness (attitudes and beliefs), knowledge and skills.

Quality of the Methodology Used in the Existing Literature

Most of the research lacked rigor because of small samples sizes which prevented the randomization of participants. Many of the research articles, for instance Walls (2009) and Taylor, Gambourg, Rivera, & Laureano (2006) used non-probability sampling methods. Unlike probability sampling techniques, non-probability sampling, such as convenience sampling utilized by Walls (2009), do not accurately measure and represent the population of interest. Others (Bernal De Pheils & Saul 2009; Cox, Falk, & Colon, 2006; Sisneros & Alter, 2009) utilized program evaluation formats with non-probability sampling that examined and evaluated the learning experiences of students' in a single college course. Quantitative research methods use inductive reasoning and analyze specific relationships to prove or disprove hypotheses. Because most of the research designs were not quantitative studies and samples were not a direct

representation of the population, the generalizability and transferability to future situations and research is limited.

Discussion

Policies and practices are often related to the values of the dominant culture. Cultural competence helps increase mutual respect, trust, equality and cooperation, decreases generalized assumptions and helps debunk stereotypes and biases. Becoming culturally competent is a lifelong development which begins with understanding and appreciating your own identity. Cultural competence involves being aware and respectful to the norms, values, traditions of clients. It is about obtaining cultural information, developing and applying culturally informed skills and exposing oneself to new and diverse environments and people rather than making others conform to your values and beliefs. It is a key element for improving the quality of service delivery and positive client outcomes. If social workers and other helping professionals are going to be helpful, engage and work effectively to address and meet the needs of Latino clients they work with and serve, they must understand and learn about the culture, values, beliefs and family structure. It is essential for social workers to be aware of the role culture plays in the lives of the clients they serve and must be prepared to address culture specific issues that tend to occur in a number of contexts. Culture affects how people behave, interact and understand, interchange and use information. It determines and shapes values, experiences, beliefs, attitudes and social structures. It is important to understand how diversity contours life experiences, identity, influences the choices a person makes and determines how they view themselves, others and perceive the world around them. By understanding the impacts of one's culture, social workers are better prepared to understand the client's problems within a cultural context and culturally adapt services and interventions to meet the needs of the client.

The Latino-American population is the largest minority group in the U.S. (Bernal &

Sáez-Santiago, 2006). The Latino population is especially diverse and composed of a number of races and cultural backgrounds (Cardemil & Sarmiento, 2009). Latinos disproportionately encounter a number of disparities that prevent them from accessing and receiving necessary care and services. It is essential for social workers and mental and health care professionals to be knowledgeable of key cultural variables, challenges and strategies need to be taken into consideration when developing and implementing in order to deliver effective culturally competent services (Calzada & Suarez-Balcazar, 2014).

Cultural competence training and education is a major source of delivering effective mental health and health care services to Latino clients. The social work profession does not represent the clientele they serve (Furman, Loya, Jones, & Hugo, 2013) The lack of bicultural, bilingual, culturally competent social workers indicates a dire need to train more qualified personnel to meet the needs of the rapidly increasing Latino population (Westboork-Sherrill & Mayo, 2014). As an attempt to supply the demand, education programs around the nation have developed pilot programs to address the shortage of available linguistic and culturally competent professionals. The programs provide undergraduate and graduate level students with the opportunity to develop and enhance their language skills, cultural awareness and cultural sensitivity skills to better serve the Latino community. These programs were highly esteemed by participants who went on to serve the Latino community and felt fully confident in doing so.

Social work is heavily influenced by the strengths perspective and person-in-environment theories. The person-in-environment is used to analyze and highlight behaviors, relationships and internal and external influences of the individual and environment that mutually affect one another. The strength perspective seeks to identify and employ potential and available strengths

of the individual and their environment to foster change and quality of life. There are prevalent cultural strengths that are shared among many Latino populations and serve as protective factors and buffers. Without a true understanding of clients and how they and their various systems interact and function, treatment and interventions will be ineffective.

Implications for Education

This study has revealed several implications for social work education. Culturally Competent practice with Latinos includes becoming familiar with and knowledgeable of culture (values, traditions and norms), history, language, and oppression (Jackson & Samuels, 2011). Social work programs at undergraduate and graduate levels need to seriously consider how Latino cultural competency can be achieved by students and faculty. Social work students and faculty members need to be better trained to distinguish and understand the unique and subtle cultural nuances and the emotion laden words in the Spanish lexicon in order to improve the quality and adherence of care (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). The results of this study suggest that social work education programs may want to contemplate how Latino cultural competence can be achieved by both educators and students. A more comprehensive approach needs to be taken to better prepare students to work with diverse groups, specifically Latinos (Peters, Sawyer, Guzman, & Graziani, 2013). Educators are also in need of increased opportunities to learn about and understand Latino cultural dynamics. Ongoing training such as continuing education and workshop opportunities that enable educators to increase their Latino cultural competency levels will benefit educators deliver culturally competent content relating to Latinos and help keep both students and faculty members up to date on current research, policies and literature.

To accommodate the increasing numbers of Latinos across the country and especially in border-states, such as Florida, schools of social work may want to consider developing a Latino specific cultural competency course. This course would include cultural competency content on traditional values and beliefs, family dynamics, gender roles, spirituality and religion and

communication patterns. It would be important that this course also incorporate basic Spanish language acquisition content, thereby increasing Spanish language skills of non-Latino social work students. Other opportunities include research developments, language immersion training, service learning and internships in Latino communities and study abroad prospects.

According to the Indicators for the Achievement of the NASW Standards for Cultural Competence in Social Work Practice “Social workers shall support and advocate for recruitment, admissions and hiring, and retention efforts in social work programs and agencies that ensure diversity within the profession” (National Association of Social Workers, 2006, p. 5). Because of the under-representation of Latino social work students and social workers in general, education programs may want to seek out effective ways to recruit and retain students with Latino backgrounds such as providing more scholarship and fellowship opportunities.

Social work instructors control the flow of information and content delivered thus playing a pivotal role in the development of students’ cultural competence. Content on Latino cultural competency is not adequately integrated within social work education (Sisneros & Alter, 2009). This may be a result of biases, comfort levels, lack of knowledge and competency and conflicting personal views (Furman, Loya, Jones, & Hugo, 2013). An annual survey administered in 2011 by The Council on Social Work Education (CSWE) included an examination of full-time and part-time faculty demographics. The survey response rate was nearly 94% of the 1,270 invitations sent to the directors of all CSWE accredited social work programs (Council on Social Work Education, 2011). According to the results Latino social work educators account for approximately 5.8% of full-time faculty members and 4.8% of part-time faculty members (Council on Social Work Education, 2011). Educators must be

knowledgeable and confident in their ability to present content pertaining to Latinos if they are going to be successful in improving cultural competency levels of their students.

Implications for Practice

Culturally competent practice facilitates an increase in positive outcomes that in turn improves the lives and well-being of the individual(s) receiving services. When treatment is provided in a way that corresponds with the needs of the client, it is more relevant and effective. Culturally competent practices (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006) and the quality of communication between care providers and clients (Westboork-Sherrill & Mayo, 2014) have a significant impact on treatment compliance and client outcomes. Integrating cultural values, such as personalismo, respeto, confianza, familismo and simpatía, in the treatment process can have a positive impact on the level of client involvement and commitment.

Personalismo may require social workers to disclose more personal information to relate to the client on a more personal level (Gelman, 2004). Personalismo functions as the foundation that introduces other vital cultural values such as simpatía, confianza and respeto (Garza & Watts, 2010). Take the time to get to know your client on a more personal, informal level (Andrés-Hyman, Ortiz, Añez, Paris, & Davidson, 2006). Warm, personal relationships are of more importance and value than traditional professional relationships. Latinos talk and take some time to get to know one another as a way of establishing trust and showing respect. Using appropriate titles such as Señor/Don (Mr.) or Señor/Doña (Mrs.) and making less eye contact are also demonstrations of respect (Griner & Smith, 2006; Taylor, Gambourg, Rivera, & Laureano, 2006).

Gift giving and physical contact are common when working with Latinos and their families (Gelman, 2004). Family in its many forms continues to be the central social institution of Latinos at large. Including family members in the treatment process and providing additional

resources and information to the family may help to establish rapport and to better engage the client.

Implications for Research

Much to this writer's surprise, the health care community has taken more of an interest and active approach in Latino cultural competency training and education. Health care educators have developed more successful programs designed to develop and improve students' cultural competency skills to adequately prepare for both students and professionals for working with the Latino population than the social work profession. Being that the social workers are guided by an unwavering set of professional values and principles that obligate them to "advocate for and participate in educational and training programs that help advance cultural competence within the profession," (National Association of Social Workers, 2006, p. 5) it is more than just a little puzzling as to why the majority of social work education programs are not placing Latino cultural competency training on the forefront with African American and LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer) studies.

The existing literature focusing on social work students' Latino cultural competency development is very limited in quality and quantity. The majority of research and literature concentrates on cultural competence in general and fails to target any one specific group. Only a very small number of studies, researchers and professionals are actively analyzing, pursuing and developing training and educational programs with the sole purpose of training helping professionals such as social work students to meet the unique linguistic and cultural needs of the Latino population. More research is needed to aid in the understanding of cultural dynamics, values and experiences of Latinos to better serve and address the disparities and barriers the population commonly encounters. It will be helpful if more research were conducted to focus on the responsiveness of culture-specific interventions. Future research efforts may want to

incorporate surveys to analyze the client's experience and perceptions of the clinician and services received.

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