#### Incorporating Cultural Factors into Assessment and Treatment with Military Populations

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### Learning Objectives

1. Strategies to assess the influence of cultural stressors on clinical presentation.

2. Identify at least 3 ways to incorporate cultural factors in the context of evidencebased psychotherapies.

3. Orient attendees to available follow-up resources related to diversity in the context of PTSD treatment, such as that National Center for PTSD Consultation Program.

#### **Overview**

- Background
  - Historical Context
  - DEI Goals
- Clinical applications
  - Assessment
  - Diagnosis
  - Treatment
    - General strategies
    - Integration with Trauma-focused EBPs
- Resources

## Historical Context of Racism in Military

- Intelligence testing
  - Immigrants and many African Americans given Beta despite being able to read (Guthrie, 1976, Murdoch, 2007)
- Military segregation preceded desegregation in rest of country
  - Officially ended in 1948 in Korean War
- History of discrimination stateside and while deployed
  - Contrast of integration in Army and segregation stateside
  - Segregated units often more assigned to services jobs
  - German prisoners allowed in Officer club
  - Could not arrest White Soldiers, even if MP
- Race-related trauma in Asian American Vietnam veterans (Loo et al., 2001)
  - Phenotypical similarity to enemy, relating to enemy, race/related assaults

## Racial Stress & Trauma in Military Populations

- POC veterans may be exposed to racial discrimination and racebased trauma in military and in daily life
  - Higher risk of developing PTSD
  - May underutilize services due to avoidance/mistrust of health care
  - Higher morbidity and mortality from chronic and acute conditions
- Often underrecognized in trauma informed care

(Carlson et al., 2018; Spoont & McClendon, 2020)

# Intersectionality: Women Veterans of Color

- Impact of male-dominated institution and patriarchy
- Women veterans tend to be more diverse than men veterans
- Disparities (American Council on Education, 2013)
  - Unemployment/underemployment
  - Homelessness
  - Single parenthood
  - Divorce
- Lack of recognition and belongingness during transition to civilian life (Saunders et al, 2021)
- Relationship b/w PTSD and discriminatory stress stronger for Black women than Black men (McClendon et al, 2021)



#### Diversity

 Representation and respect of various social identity groups

#### Equity

- Providing resources according to need
- Identifying & reducing barriers

#### Goals

#### Inclusion

- Appreciation of diversity
- Bring whole selves
- Sharing power

#### Access

• Reduction of barriers

# **Clinical Applications**

Assessment, Diagnosis, & Treatment

#### **Clinician Factors**

- Awareness of cultural identity
- Personal reactions & values
- Developing anti-discrimination stance
- Thorough understanding of sociocultural context
  - Core competencies (Williams et al, 2022)

### Assessment of Cultural Factors

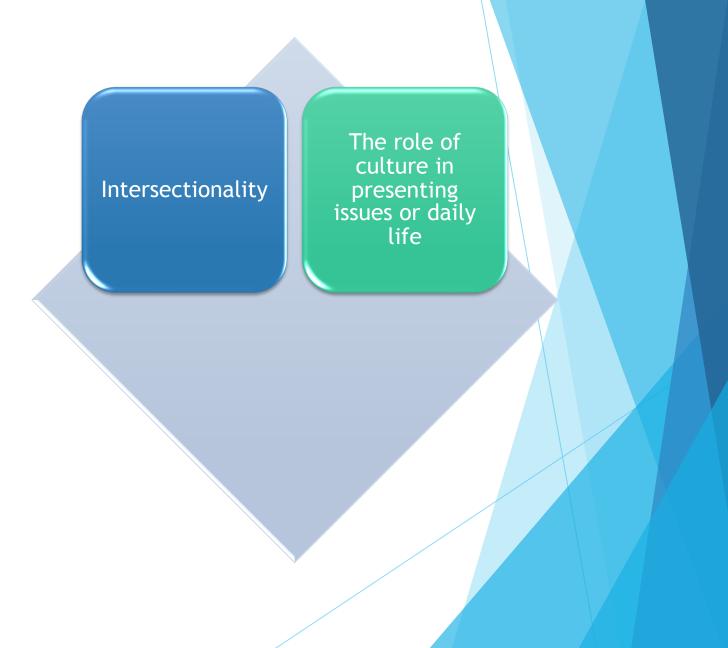
- Intake
- Ongoing assessment
- Available resources
  - Self-report measures
  - Semi-structured clinical interview

#### Guidelines for Assessment of Cultural Factors

- Validation
- Establish a safe environment
- Acknowledge cultural differences in therapeutic relationship
- Inquire about cultural identity and experiences with discrimination
- Do not question whether something was discriminatory
- DSM-5 considerations



## Assessing Cultural Factors -Intake



# WHAT IS CULTURAL IDENTITY?

# The ADDRESSING Model<sup>1</sup>

Age and generation

**D**evelopmental Disabilities

(Acquired) **D**isabilities

Religion/Spirituality

Ethnicity/Race

Socioeconomic Status

Sexual Orientation

**Indigenous Populations** 

National Origin

Gender/Gender Identity

#### **Cultural Assessment Tools**

DSM -5 Cultural Formulation Interview

#### Cultural Assessment Tools (2)

## Racial Stress and Trauma Assessment Tools

Semi-structured interview

• UCONN Racial/Ethnic Stress and Trauma Survey (UnRests)<sup>1</sup>

# Trauma Symptoms of Discrimination Scale<sup>1</sup>

- Self-report, screening measure intended to capture specific trauma-related anxiety due to fear of discrimination
- Normed on population of 123 monoracial & biracial African Americans
- 4 factors
  - Uncontrollable distress and hyperarousal
  - Alienation from others
  - Worry about safety and future
  - Perception of others as dangerous

#### Trauma Symptoms of Discrimination Scale (TSDS)

When answering the following questions, keep in mind that discrimination is defined as: Being unfairly treated due to an individual characteristic of yourself (e.g., race/ethnicity, gender, sexual orientation, religion).

#### PART 1: Frequency of Experiences

Experiencing discrimination can be very stressful, and sometimes people can feel specific types of stress due to discrimination that impact their daily lives. This can be caused by <u>one very</u> stressful experience of discrimination, or <u>several smaller</u> experiences of discrimination over the course of one's life. Based on these experiences in your life, answer the following questions. Please keep in mind that ratings should reflect whether the type of stress was <u>caused</u> by discrimination.

	Never	Rarely	Sometimes	Often
1. Due to past experiences of discrimination, I often worry too much about different things.	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often try hard not to think about it or go out of my way to avoid situations that remind me of it.</li> </ol>	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often fear embarrassment.</li> </ol>	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often feel nervous, anxious, or on edge, especially around certain people.</li> </ol>	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often feel afraid as if something awful might happen.</li> </ol>	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often have nightmares about the past experience or think about it when I do not want to.</li> </ol>	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often have trouble relaxing.</li> </ol>	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often feel numb or detached from others, activities, or my surroundings.</li> </ol>	[1]	[2]	[3]	[4]
9. Due to past experiences of discrimination, I often avoid certain activities in which I am the center of attention (i.e., parties, meetings, answering questions in class).	[1]	[2]	[3]	[4]
10. Due to past experiences of discrimination, I often cannot stop or control my worrying.	[1]	[2]	[3]	[4]
<ol> <li>Due to past experiences of discrimination, I often find that being embarrassed or looking stupid are one of my worst fears.</li> </ol>	[1]	[2]	[3]	[4]
12. Due to past experiences of discrimination, I often become easily annoyed or irritable.	[1]	[2]	[3]	[4]

# UnRests<sup>1</sup>

- Supplemental assessment of racial traum within context of DSM-5 PTSD criteria
- Modeled after the Cultural Formulation Interview in DSM-5
- 6 Sections
  - Introduction to interview
  - Racial & ethnic identity development
  - Experiences of direct overt racism
  - Experiences by loved ones
  - Experiences of vicarious racism
  - Experiences of covert racism
- Racial trauma checklist
- Available in English & Spanish

Guide for Interviewer		Interview Questions
		(Instructions for interviewer are italicized.)
	A	Introduction to the Interview
Note the difference between <u>race</u> (the group society puts a person in based on their appearance) and <u>ethnicity</u> (a person's culture based on their heritage). They may be different or the same. The US Census recognizes several specific racial categories, including Black, White, Asian, and Native American. Hispanic is an ethnic group, but many consider Hispanic/Latino a race, which is acceptable for this interview.	A1	Sometimes people have very bad experiences that cause feelings of stress or even trauma. Some people have severa difficult experiences over a lifetime that are manageable individually, but together they lead to feelings of stress or trauma. I want to talk to you about some of your experiences of stress or trauma as it relates to your race on ethnicity. If patient's racial and ethnic group is unclear: How would you describe your race and ethnicity?
Ensure that discussion only includes incidents where at least one of the involved factors was race or color.	A2	People may be discriminated against or mistreated for many different reasons (e.g., gender, sexual orientation, ag disability, faith, etc.) but I am interested in experiences connected to your race – or your race as perceived by others. However, if you have experienced discrimination due to a combination of factors (i.e., gender+race, such a being called "an angry Black woman" because you stood up for yourself), we can talk about that too.
	B	Racial and Ethnic Identity Development
If yes, ask the patient to elaborate.	B2	Are there other racial or ethnic groups that people assume you belong to based on your appearance?
Ask the patient to describe this.	B3	When was the first time you became aware of race or ethnicity?
		When was the first time you remember feeling different, excluded, or singled out because of your apparent race or ethnicity?
Assess for things like positive messages from parents, racial socialization, negative messages from others, media, stereotypes, etc.	B4	What sort of things, positive or negative, did you learn about your race and ethnicity growing up? ( <i>May not apply immigrants.</i> )

Date:

Name:

<sup>1</sup>Williams, et.al., (2018)



#### **Recent Examples of Cultural Stressors**



#### NATIONAL

Buffalo shooting suspect says his motive was to prevent 'eliminating the white race'

June 16, 2022 · 11:05 PM ET THE ASSOCIATED PRESS





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#### MARKETS BUSINESS INVESTING TECH POLITICS CNBC TV WATCHLIST PRO

POLITICS

Hate crimes against Asian and Black people rise sharply in the U.S., FBI says

PUBLISHED MON, AUG 30 2021+3:38 PM EDT | UPDATED MON, AUG 30 2021+5:18 PM EDT

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The New York Times

 Hate crimes targeting people of Asian descent in the U.S. rose by 70% last year POINTS compared with the number of such incidents in 2019, the FBI said.

> That increase coincided with the outbreak in the U.S. of the Covid pandemic, which some racists have unjustly blamed on Asian Americans because the coronavirus originated in China.

 The number of hate crimes targeting Black people jumped nearly 40% last year compared with 2019 levels.

 President Joe Biden in April signed the Covid-19 Hate Crimes Act to address the rise in anti-Asian American crimes seen in 2020.

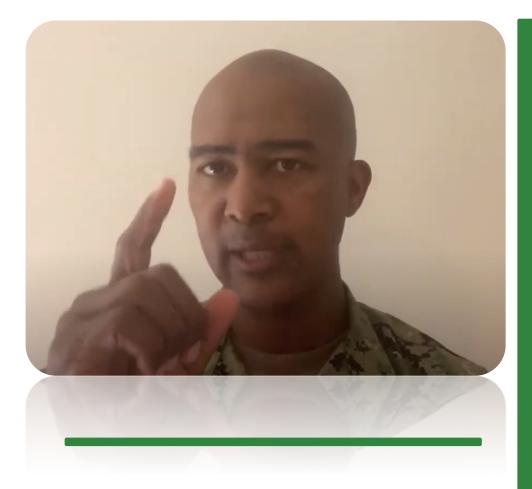


#### Biden warns of 'rising hate and violence' against LGBTQ people

The warning was issued on the International Day Against Homophobia, Transphobia and Biphobia, which is observed annually on May 17.



#### Stigma



# Military Microaggressions

#### Mental health

Functioning

Performance

Sense of safety

Self-esteem

Perceptions of others

Family functioning

Physical health

Stress

Attitudes towards seeking help

# IMPACT OF CULTURAL STRESSORS



#### Strengths

# Incorporatin g Culture into Treatment



#### Psychoeducation

Cultural examples in presenting symptomsImpact of cultural stressors

## Cultural information in treatment intervention

•Culturally related thoughts

•Culturally salient behavioral treatment targets

# Cultural examples when presenting rationale guidelines

•Metaphors, Values, Motivation

#### Inclusion of support systems

- Assessment
- Conjoint sessions
- Training

#### **Cognitive Work**

#### Do:

- Focus on helpfulness/utility of thought
- Validate experiences of oppression
- Explore after more trust has developed
- Focus on empowerment and flexible response
- Challenge internalized racism

#### Do not:

- Avoid sensitive topics
- Use jargon
- Challenge core cultural beliefs
- Question whether experiences were racist

## Cultural Responsiveness: **Behavioral Interventions**

## Example In Vivo Hierarchy with Race-Related Items

- 100 (seeing the child die)
- > 90- talking about safe driving with son
- ▶ 80 going to a restaurant at night with my family
- > 75 see Afghanistan on the news
- > 70 reading Black Lives Matter article
- ▶ 65- going to a restaurant during the day with my family; watching Red Tails movie
- ► 60 seeing pictures of deployment
- ▶ 55 going to grocery store when crowded
- > 50 (running late): hearing traditional Afghani music
- ▶ 40 hanging out with son; driving by military police station
- > 30 volunteering for son's sports team; reading about Buffalo soldiers
- > 20- going for a walk with my family in our neighborhood
- 10 woodworking
- 0 (sitting in backyard)

Cultural Responsiveness: Throughout Therapeutic Process Educate yourself about cultural groups with whom clients identify

Allow cultural practices to take place in therapy

Consult with respected healers/authority figures

Culturally relevant role models, metaphors, and examples

Consider value conflicts

# Overview of Integration of Cultural Factors in EBPs

#### CPT

- Trauma Interview
  - Assessment of racism
- Sessions 1-7 assimilation
  - Psychoeducation about racism
- ▶ 8+ overaccommodated
  - Safety
  - Trust
  - Esteem
  - Power/control
  - Intimacy
- Final

- **PE** 
  - Session 1
    - Assessment of racism
  - Session 2
    - Psychoeducation about racism
    - Incorporate race-related exposure
    - Self-care and behavioral activation
  - Session 3+
    - Racial themes in processing
      - Trauma-related
      - Daily life
      - Future

Final

# Healing Racial Trauma protocol (Williams et al, 2022)

- 12 session CBT protocol
- 3 phases
  - Stabilization: Stop The Bleeding
  - Healing
  - Empowerment
- Empirically supported techniques
- Responding to racism
  - Role of relationship

## Case Example

- African American, OIF/OEF Veteran
- Muslim
- Accused of sympathizing with the Taliban
- Combat trauma related to child that reminds her of her own
  - ▶ IED in marketplace
  - Peers tease her & say she's too concerned about "the Haji kid"
  - Veteran attempted to bring the child to medics for treatment but she was told supplies were too scarce
- Concerned about herself, her husband, and sons going out and being stopped by police

# Case Example 2

- Female, Latina Major
- Peers have accused of sleeping her way to the top and advancing because of affirmative action
- Worries that she is not taken seriously and that her work is not recognized
- Regularly experiences sexual harassment
- Has done tours in Iraq and Afghanistan and witnessed combat trauma
- MST occurred during first tour
- Perpetrator used racial slurs and accused her of flirting with him
- Others know about the rape but perceived as consensual sex
- Isolates and spends most of her free time in her home
- Has frequent intrusive memories about the MST and false accusations
- Avoids forming new relationships

#### Discussion

- How might you begin to explore and challenge the thought?
- What behavioral interventions (including exposure) would you include?
- What processing directions would you explore?
- What empowerment strategies can you consider?

# Responding to Discrimination

- Strategies can vary according to
  - Environment
  - Relationship
  - Power dynamics
- Develop & practice key messages to convey

#### Microintervention Strategies<sup>1</sup>

## 4 Strategic Goals:

Make the Invisibl Visible	e Disarm Microaggressions	Educate the Perpetrator	Seek external support and reinforcement
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Empower targets of microaggressions Helpful for bystanders and allies as well

### Goals of Microaffirmations

Active Listening

Affirming Emotional Reactions

Recognizing and Validating Experiences

Empowering

Welcoming

Reparative

Enlightening

#### Layers of Microaffirmations

Microprotection

#### Microtransformation

Microvalidation

#### Microrecognitio

n

Boyce-Rosen & Mecadon-Mann (2023)

## What if I offend someone?

- Express appreciation for the feedback
- Keep an open mind
- Listen nondefensively
- Seek clarification and understanding
- Take some time to reflect
- Take appropriate responsibility

## BEING AN Ally

#### Continuing education

Awareness of blind spots & growth edges

Attending diversity-oriented discussions

Verbal & non-verbal support of diversity

#### **A**DVOCACY

Addressing harmful treatment

Participation in rallies

Educating others

Leveraging privilege

Empowerment

Diversity-oriented Special Interest Groups

#### Resources

# Race-based Stress and Trauma Empowerment Groups

- Carlson et al. (2018)
- Currently 25 groups at VAs across the nation
- Consultation group to facilitate implementation
- Contact: Maurice.Endsley@va.gov



#### National Center for PTSD Resources

Racial trauma page: <u>https://www.ptsd.va.gov/understand/types/racial\_trauma.asp</u>

- Lecture Series: https://www.ptsd.va.gov/professional/consult/lecture\_series.asp
  - The Elephant in the Room: Treating PTSD When Clinicians Have Negative Reactions to Patients' Sociocultural Views Abigail Angkaw, PhD and Brittany Hall-Clark, PhD Audio Recording (MP4)
  - October 21, 2020: Culturally Responsive PTSD Care 101: The Role of Case Formulation Gayle Iwamasa, PhD Audio Recording (MP4)
  - September 16, 2020: Racism-related Stress and Trauma: Definitions and Interventions Juliette McClendon, PhD Audio Recording (MP4)
  - September 15, 2021 Cultural Considerations for Conducting Trauma-Focused Treatment with Latinx Patients Natalia Garcia Gonzalez, PhD and Agustina Colombo Eiff, MSW Audio Recording (MP4)
  - January 18, 2023
     Understanding Native American History as a Foundation of Culturally-Aware PTSD Treatment Charlotte McCloskey, PhD
- About Face
  - https://www.ptsd.va.gov/apps/aboutface/race-culture-and-ptsd/

# PTSD Consultation Program We can help

- Assessing and treating Veterans with PTSD
- Addressing racial trauma and racism experiences in PTSD treatment
- Treating PTSD with patients from historically marginalized groups
- Treating patients who hold beliefs or values that are different than yours



# Laboratory for Culture and Mental Health Disparities

- https://www.mentalhealthdisparities.org/trauma-research.php
  - Assessment tools
  - Empirical articles
  - Clinically oriented articles and podcasts