This article argues for the need to culturally adapt mainstream psychotherapy to Latino populations. It discusses ethnic psychology as a cultural resilient practice. Examples of Latino ethnic psychology include cuento, dichos, and spirituality. The article introduces Latino healing as the integration of ethnic psychology into mainstream psychotherapy. A clinical vignette illustrates the application of Latino healing.

Keywords: Latino healing, ethnic psychology, cuento, dicho, spirituality, arpillera

Latinos are transforming the United States' ethnic makeup as they populate several geographical areas in the country. Hispanics/Latinos constitute the largest and fastest-growing ethnic minority group in the United States (U.S. Census Bureau, 2004). Between 1990 and 2000 Latinos’ presence increased by 57.9% while the total US population’s increased was only 13.2% (U.S. Census Bureau, 2004). This movement will continue, as Latinos tend to be young and have high rates of births. Latinos are not a homogenous group. A highly diverse population, Latinos comprise an ethnic rainbow—Hispanics, Latinos, Hispanics, Latinos, Central and or South Americans, to name a few—are some of the general terms used to designate this ethnic collage. Each Latino subgroup faces distinct dilemmas: Mexicans and Mexican Americans experience the pressures of legalities and legalism; Puerto Ricans confront the challenges of dual identities; Cubans face the joys and pains of economic assimilation, Dominicans are subjected to blatant racism because of their predominantly African phenotype; and countless South Americans contend with the ambiguities of detachment and belonging (Alarcon, 1999). Many Latinos prefer to politically affirm their ethnic identity by using terms such as Chicanos, Xicanos, Ricans, or Boricuas, whereas others affirm their national origins by using terms like Mexicans or Mexican Americans, Cubans or Cuban Americans, Colombians, Dominicans, Peruvians, Salvadoreans, or Venezuelans, among many others (Comas-Diaz, 2001). Moreover, some prefer the term Americanos, to embrace the syncretism of the Latin American diversity and the United States mainstream culture (Olmos, Ybarra, & Monterrey, 1999).

Notwithstanding their heterogeneity, most Latinos share a history of Spanish colonization (culture, religion, language, and worldview); experience of uprooting, separation, or immigration; and exposure to oppression. As a whole, Latin American immigration to the United States differs from European immigration. According to Gonzalez (2000), there are three main reasons for such disparity. First, Latino arrivals into the United States were connected to this country’s expansionist and imperialistic needs. To illustrate, while Cubans, Dominicans, Salvadorans, and Nicaraguans were accepted as refugees for political reasons to accomplish a foreign policy, Mexicans, Puerto Ricans, and Panamanians were viewed as necessities to satisfy labor demands of particular U.S. industries. Second, many mainstream members did not perceive Latin Americans as immigrants. Instead, Latinos acquired a racial/ethnic/linguistic caste status as a result of the United States’ history of racial and linguistic conflicts. Although such caste classification is reflected in the discrimination dark-skinned Latinos experience as opposed to light-skinned Latinos (Rodriguez, 1998), many Latinos are visible
ethnic/racial minorities, thus subjected to discrimination. Finally, Gonzales argued that most Latinos immigrated when the United States was already a world power, when the society was entering a postindustrial period, and the gap between rich and poor was growing. Hence, unskilled factory jobs that helped European immigrants become middle class were no longer a viable option for Latinos within this postindustrial stage.

Although the majority of Latinos in the United States are native born, about two in five are immigrants (Rios-Ellis et al., 2005). Regardless of acculturation to the mainstream culture, a significant number of Latino immigrants navigate through a cultural puente (bridge) connecting North and South America. As an illustration, 1 in 10 Latino children in the United States resides in a mixed-status family in which at least one parent is a noncitizen and one child is a citizen (Rios-Ellis et al., 2005). As both outsiders and insiders, many Latinos live in the “hyphen” (Stavans, 1996) while traveling through the cultural bridge. Moreover, many Latinos in the United States maintain strong ties with their countries of origin. They visit family and friends back home and send financial support. Increasing numbers of Latinos conduct business in Latin America. Thus, not only do Latinos contribute to the North American market (Suro, 1999), but they also promote a global economy. A constant infusion of Latinism into the United States and of North Americanism into Latin America transforms both the Latino and mainstream cultures. The Latino mosaic reflects a plural, dynamic, and evolving identity transformation.

This article argues for the need to adapt mainstream psychotherapy to Latino(a) clients. It discusses Latino ethnic psychology as a cultural affirmative and resilient practice. Finally, the article introduces Latino healing as the integration of Latino ethnic psychology into psychotherapy.

**La Raza: Latino Worldview**

Hispanics/Latinos carry their worldviews into the host society. La Raza (literally meaning the race), a widespread term used among many Mexican Americans, highlights mestizaje or the mixing of races to produce a new one (Ramirez, 1998). Mestizaje requires plurality, flexibility, adaptability, and permeability. In addition, La Raza connotes political consciousness, activism, and empowerment. With cries of “Viva de La Raza,” the Brown Power political movement demanded equal opportunities and rights in the 1960s and 1970s (Shorris, 1992). The term was coined in 1925 by José Vasconcelos (1997), who presented his racial theory of the future of humankind—La Raza Cósmica (the cosmic race)—as emanating out of the synthesis of Indian, White, “Mongol,” and African races through mestizaje. Vasconcelos argued that La Raza Cósmica promoted evolution and enhanced global civilization.

Under the banner of La Raza, new waves of immigrants arrive every year blending themselves and their worldviews into the mix of mainstream society. La Raza mestiza redefines the United States’ cultural identity through its amalgamation of races and cultures (Gonzalez, 2000). I use the construct La Raza to designate the Latino sociocentric worldview. Most Latinos adhere to a relational worldview that is central to their sense of identity, wellbeing, and healing (Falicov, 1998). Latinos’ relational orientation shapes their sense of self, grounding their identity in family, ancestors, community, ethnicity, spirituality, environment, and other collective contexts. Hence, Latinos define themselves within the context of a relationship to others and to a collective. They adhere to familialism, the tendency to extend kinship relationships beyond the nuclear family boundaries. Familismo leads to emotional proximity, affective resonance, interpersonal involvement, and cohesiveness (Falicov, 1998). The Latino sociocentric tradition often conflicts with mainstream individualist values. This clash frequently surfaces during Latinos’ acculturation to the mainstream society. Indeed, research has documented that Latinos who are U.S. born and long-term residents (living more than 13 years in the states) reported higher rates of emotional problems and substance abuse than those who are immigrants (Vega et al., 1998). Of course, these statistics exclude Latinos who developed posttraumatic stress disorder (PTSD) because of wars wedging in their countries of origin. The differences in mental health status between high-acculturated and low-acculturated Latinos can be partly explained by the hypothesis of the hardy immigrant. This hypothesis states that those individuals who immigrate and remain in the host country tend to be self-selected and to have higher resilience than those who do not immigrate or return to their country of origin
(Rios-Ellis et al., 2005). By the second generation, the Latino immigrant’s resilient shield is tarnished and hope vanishes in the face of discrimination and socioeconomic challenges. Whereas Latino immigrants tend to interpret barriers against them as temporary problems that they can overcome with work and or education, native-born Latinos view discrimination against them as permanent and institutionalized (Valencia, 2006).

Many Latinos have a high need for psychotherapeutic services. For example, Latinos’ emotional needs include issues around ethnic identity, immigration, acculturation, and discrimination (Comas-Díaz, 1989). Consequently, they contend with loss, mourning, and adaptation stress, while struggling with social, ethnic, and cultural conflicts. Moreover, research has reported that Latinos tend to suffer more PTSD than do their Anglo and African American counterparts (Pole, Best, Metzler, & Marmar, 2005). Notwithstanding these issues, numerous Latinos underutilize mental health services. There are several reasons for this phenomenon. When Latinos seek psychological assistance, they often encounter Eurocentric-based services that are insensitive to their cultural and spiritual experiences (Atkinson, Bui, & Mori, 2001; Hall, 2001; Sue, Bingham, Porche-Burke, & Vasquez, 1999). Because many clinicians lack cultural sensitivity (Sue & Sue, 1999), therapeutic encounters frequently lead some Latinos to suspect the techniques and goals of mainstream psychology to be acculturation instruments used by the dominant culture (Ramirez, 1991). Moreover, the English-only climate may prevent clinicians from appreciating bilingualism (Gonzalez, 2000). Thus, psychotherapists’ inability to communicate in Spanish can compromise the quality of services delivered to bilingual Latinos by creating a barrier to cultural understanding and misinterpretation of their clients’ communication (Santiago-Rivera & Altarriba, 2002).

**No Comprendo: Application of Mainstream Psychotherapy to Latinos**

As an internal representation with its own form of unconsciousness, culture shapes our concept of self. To illustrate, members of individualistic societies frequently view the self independently from context. Therefore, the self is predominantly defined in terms of internal features such as traits, attitudes, abilities, and agencies (Rhee, Uleman, Lee, & Roman, 1995). These unique personal agencies are conceived as assertive, competitive, self-assured, self sufficient, efficient, and direct (Church & Lonner, 1998). Likewise, mainstream psychotherapy reflects the values of the dominant culture and promotes an ideal self as unique and independent from others. Therefore, mainstream psychotherapy frequently labels normative behaviors of culturally diverse clients as resistance to treatment (Chin, 1993) and as deviant. For instance, collectivistic persons understand themselves through others, emphasize family, social, and emotional bonds and prefer communal goals above individual ones. As a result, they value harmony among the members of their group (who may have to share scarce resources), tolerate their views, and prefer indirect communication to minimize conflicts (Triandis, 1989). Consequently, Latinos adherence to familismo, simpatía (tendency to promote harmony in interpersonal relations), and respeto conforms to a sociocentric dictum. Collectivistic persons frequently contextualize, have a holistic orientation, value connectedness, and view integration as a developmental change agent (Ho, 1987). Their “coagency” is contextual and frequently rooted in spirituality and or religion (Keller, 2002). In contrast, the language of mainstream psychotherapy is infused with values that promote individualistic developmental stages, such as separation from family of origin through differentiation and individuation. Certainly, mainstream psychotherapy does not take into consideration Latino developmental stages (Ramirez, Valdez, & Perez, 2003). As an illustration, research on mother–infant interaction suggest that Latinas are more indulgent, talk more, and expressed more affection toward their offspring than their African American counterparts (Fracasso, Busch-Rossnagel, & Fisher, 1994). Consequently, individually oriented psychotherapists frequently label Latino family interdependence as enmeshment. Interestingly, research found enmeshment to correlate positively with individuals’ healthy ego development among families of color (Watson & Protinsky, 1988).

How do individualistic and collectivistic ideals of the self affect clients’ responses to psychotherapy? We can examine this question by observing cognitive styles. For example, context-independent persons may resonate with a therapy that promotes
individualistic values such as free will, personal agency, and mastery over environment. On the other hand, a therapy that emphasizes holism, connection, and harmony may be more congruent with context interdependent individuals. Consequently, whereas individualistic persons may require a mode of therapy that is verbal, works through, and affects change by externalizing (moving from the unconscious to the conscious), collectivistic persons frequently require a therapeutic mode that values holism (using meditation, contemplation, imagery, and other connective states), acknowledges nonverbal and indirect communication, and affects change by internalizing (moving from the conscious to the unconscious) (Tamura & Lau, 1992). In particular, collectivistic clients require therapeutic techniques that honor and address the mind–body connection (Chen & Davenport, 2005). As a result, applying individualistic and decontextualized psychological approaches to sociocentric Latinos is similar to receiving psychotherapy in a foreign language: “No comprendo” (I don’t understand). Regardless of English proficiency, most Latinos speak in a collectivistic tongue. Because culture is communication (Hall, 1959), the initial task of a psychotherapist is similar to the psycholinguist’s role; that is, to translate mainstream psychotherapy into a Latino cultural language. It is not surprising that many practitioners and researchers of color have questioned the applicability of mainstream psychotherapy to Latinos in particular, and to people of color in general (Matt & Navarro, 1997; Ramirez, 1991; Sue & Sue, 1999). Several multicultural scholars advocate for modifying and adapting Western psychological intervention, such as psychodynamic, interpersonal, cognitive–behavioral (CBT), as well as other psychotherapies, to the lives of people of color (Hall, 2001). For example, Bernal and Scharron del Rio (2001) recommended the addition of multicultural awareness and culture-specific strategies to CBT, person-centered, and psychodynamic forms of psychotherapy. Moreover, some psychoanalysts recommended incorporating clients’ diverse spiritual, social, and communal orientations into their practices (Altman, 1995; Foster, Moskowitz & Javier, 1996). As an illustration, Altman (1995) used a modified object relations framework, examining his clients’ progress by their ability to use relationships to grow rather than by the insights gained. Such adaptation is consistent with the Latino relational orientation. I will examine some culturally adapted psychotherapeutic orientations. Interpersonal psychotherapy (IPT) can be adapted to meet the needs of collectivistic Latinos. Initially developed as a therapy for depression, IPT focuses on interpersonal and attachment factors in mental distress, and targets grief, interpersonal disputes, role transitions, and interpersonal deficits (Klerman, Weissman, Rounsaville, & Chevron, 1984). Most of these areas are relevant to Latinos who experience losses, relational difficulties, and cultural adaptation. When culturally modified to be congruent with the relational values of familismo and personalismo (the preference of personal contact in interaction), IPT can be effective in reducing depression among Latinos (Roselló & Bernal, 1999). Research found culturally adapted CBT to be effective in reducing depression among outpatient Latinos (Organista, Munoz, & Gonzales, 1994; Roselló & Bernal, 1999), as well as in decreasing panic symptoms among Latino medical patients (Sanderson, Rue, & Wetzler, 1998). CBT’s emphasis on education is consistent with Latinos, who view life as an instructive experience whereby they learn and teach existential lessons. In addition, the CBT technique of challenging and changing negative thoughts can be adapted to be congruent with Latino cultural resilience. Cultural resilience is a host of values and practices that promote coping mechanisms and adaptive reactions to trauma and oppression within an indigenous context (Elsass, 1992). An example of cultural resilience is sobreponerse (to overcome), an active coping style characterized by Latinos’ ability to work through a problem or to overcome adversity (Cervantes & Castro, 1985).

Notwithstanding mainstream psychotherapy’s cultural adaptation to Latinos, this approach is limited in addressing collectivistic needs. For example, the value of achieving individual mastery at the exclusion of the context (group, environment, or cosmos) can be counterproductive for many Latinos. Moreover, mainstream psychotherapy’s silence on the role of history and sociopolitical factors in life and in mental health (Brown, 1997) can compromise its effectiveness with Latinos. Thus, decontextualized and apolitical psychotherapy (characterized by the absence of sociopolitical analyses) may lead some Latinos to assume that they are the sole cause of their distress. Such supposition can have a detrimental impact on low income Latinos. For instance, evidence-based treatments underemphasize the role of social and cultural contexts in the delivery of clinical care to vulnerable and ethnic minority populations (Rogers, 2004). Ricardo Muñoz (1996) addressed this issue in his cultural adap-
tation of CBT for low socioeconomic status Latinos by focusing on the importance of both internal and external (i.e., poverty) realities. Indeed, he identified the core elements required for mainstream psychotherapy’s cultural adaptation to Latinos as: (a) involvement of Latinos in the development of interventions, (b) inclusion of collectivistic cultural values (e.g., familismo and interdependence), (c) attention to religion/spirituality, (d) relevance of acculturation, and (e) acknowledgment of the effects of racism, prejudice, and discrimination on mental health (Muñoz & Mendelson, 2005). Certainly, the recognition of the relationship between oppression and well-being is paramount to Latinos because they require empowerment approaches to address their psychosocial- and trauma-related experiences (Vasquez, 1998). To be culturally competent, therefore, psychotherapists need to include an empowerment component when working with Latinos. For instance, although feminist therapy can empower diverse women (Worell & Remer, 2003), it necessitates a cultural adaptation to be successful with Latinas. As an illustration, research has shown that when encased in a cultural context, assertiveness training can help Latinas become assertive in a culturally congruent manner, while exploring the cultural consequences of their actions (Comas-Díaz & Duncan, 1985).

Despite the success in culturally adapting mainstream psychotherapy, Western healing is not Latino-centered. The evaluation of psychotherapeutic progress from individualistic values such as free will (as opposed to its interaction with fate), individual mastery and agency, separation, individuation, and “objective reality” does not necessarily translate into healing for collectivistic Latinos. For this reason, psychotherapists need to complement their approach by endorsing pluralism and flexibility in both theory and practice (Hays, 1995). For example, the American Psychological Association’s (APA’s) Guidelines on Multicultural Education Training, Research, Practice and Organizational Change (APA, 2003) encouraged psychologists to recognize that culture specific treatment may require nonmainstream interventions. More specifically, the APA Multicultural Guideline 5 encouraged practitioners to develop skills and practices congruent with their clients’ worldview by striving to incorporate an understanding of clients’ ethnic, racial, linguistic, spiritual, and cultural background into treatment. Following, I will discuss Latino ethnic psychology.

Sabiduría: Latino Ethnic Psychology

I use the term Latino ethnic psychology to designate the application of cultural traditions and practices into healing and liberation. Latino ethnic psychology endorses a mestizo worldview (Alarcón, 1999; Cervantes & Ramirez, 1992; Ruiz, 1997) and attempts to restore connectedness, foster liberation, and facilitate ethnic identity reformulation. Like other ethnic psychologies, it provides resources for rescuing cultural heritage by grounding identity into a collective self (Comas-Díaz, Lykes, & Alarcón, 1998) and promotes emotional and spiritual redemption (Early, 1996). Moreover, Latino ethnic psychology validates the ethnoracial meanings in the historical and political context of oppression (Comas-Díaz, Lykes, & Alarcón, 1998). Because of Latin America’s history of colonization, ethnic psychology tends to be politically infused and to bear resilient and liberating elements in its promotion of critical consciousness (Freire, 1970; Gordon, 1973). Psychology of liberation, for instance, grew out of theology of liberation to foster socioeconomic, political, and emotional emancipation in Latin America. Consequently, liberation practitioners align themselves with the oppressed, poor, and marginalized to work against poverty, political repression, and violence (Aron, 1992; Blanco, 1998). Both liberation theology and psychology of liberation promote “calling back the spirit,” an ethnic specific form of identity reformulation. Calling back the spirit entails the development of spiritual resilience and empowerment through the affirmation of ethnic roots and practices (Comas-Díaz, in press). Essentially, Latino ethnic psychology aims at achieving sabiduría, a spiritual and existential type of wisdom. Sabiduría involves the perception of life setbacks as opportunities for spiritual development. Given that healing and sabiduría are interconnected, illness offers an opening for integration and self-improvement. As an illustration, Ricardo Muñoz identified the development of a positive meaning in life under difficult circumstances as a core belief within his Latino adaptation of CBT (Muñoz & Mendelson, 2005). The reward for living life with meaning and purpose, sabiduría exemplifies wholeness, connectedness, and evolvement (Coelho, 2003; Maduro
& Martinez, 1974). Following, I will discuss core elements that permeate Latino ethnic psychology. They are contextualism, interconnectedness, and magical realism.

**Contextualism**

Latinos are embedded in their circumstances. Their perceptions, judgments, and behaviors tend to be guided by their connection to context. Another way of viewing context relatedness is through field dependence or independence, or how much individuals take into consideration contextual factors and are influenced by them (Choi, Nisbett, & Norenzayan, 1999). We can further look at this construct through the lens of cognitive styles, such as context interdependent or context-independent thinking modes. For instance, individuals with a context-independent cognitive style tend to process stimuli as if they were unaffected by the context, whereas those with context-interdependent cognitive style tend to process information while paying attention to their surrounding context (Kuhner, Hannover, & Shubert, 2001). Research found that individualistic persons on average score higher on field (context) independence, whereas collectivistic persons tend to score higher on field (context) dependence (Berry, 1991).

Latinos have a propensity to be context interdependent. In other words, they endorse contextualism, in contrast to individualistic members who are more inclined to guide their behavior by reference to their internal repertory of independent characteristics. A theory of behavior, contextualism promotes the tendency to describe the self and other using more contextual references and fewer dispositional references (Choi et al., 1999). Thus, persons who contextualize are inclined to be more context bound, compared with individualistic persons who tend to be context-free. Contextualism permeates collectivist Latinos’ lives. For instance, it promulgates a combined locus of control. Indeed, a significant number of Latinos adhere to a combined internal and external locus of control, where the context determines which locus of control will prevail. An example of a combined locus of control is the Serenity prayer: “God, give me the grace to accept with serenity the things that cannot be changed, courage to change the things which should be changed, and the wisdom to distinguish one from the other.” Similarly, many Latinos believe that much happens in life that is outside of a person’s control (De Rios, 2001; Falicov, 1998). The saying “El hombre propone y Dios dispone” (Wo/man proposes and God decides) exemplifies this orientation. Such perspective is not represented by an external locus of control. Instead, it signifies a cosmic locus of control. Thus, many Latinos align their personal/relational agency with divine will (Coelho, 2003). For instance, regardless of degree of religiosity, numerous Latinos will add the phrase: “Si Dios quiere” (God willing) after expressing a desire. The cosmic locus of control does not necessarily involve a belief in Christianity. For example, Ismael, a successful Cuban American lawyer, was in therapy for interpersonal problems. When his therapist explored his decision-making style, Ismael replied: “I consult a Santero (folk healer from Santeria-Afro Caribbean religion) before any important decision.” “How so?” the therapist asked. “I add what my spiritual guides say to my wishes,” replied Ismael, “in order to make an informed decision.”

**Interconnectedness**

A corollary of contextualism, interconnectedness involves the assumption that the self is intertwined with the other. Interconnectedness is a central belief in Latino healing (Ruiz, 1997). As everything is connected to everything else, the Latino world maintains permeable boundaries. For example, because of familismo, boundaries are permeable enough to allow nonbiological individuals, such as godparents, compadres/comadres (coparents), and friends to become family members. Both familismo and personalismo encourage Latinos to perceive health providers as extended family members (Comas-Díaz, 1989). Hence, some Latinos may ask therapists personal questions to place them within a context (Where are you from? Are you married? Do you have children?), as well as to “check” them out (Will this person be able to understand me?). Because Latinos tend to express affection by embracing and kissing (Falicov, 1998), some clients may kiss their therapist on the cheek during greetings and farewells. Of course, gender protocol is observed. For instance, women usually initiate the kiss salutation. Likewise, many Latinos engage in plática, a period of social conversation before each personal and professional contact (Comas-Díaz, 2006). Plática is a
collectivistic act of social lubrication, not necessarily a resistance to dealing with emotional topics. However, the culturally competent therapist will be able to discern the difference between avoidance and culture. Equally, many Latinos invite their therapists to important celebrations such as weddings, graduations, quinceañeras (sweet 15), baptisms, funerals, and other family events. Therapists’ management of these requests depends on their clinical significance, as well as therapists’ orientation, style, preference, and other factors. However, declining these invitations requires cultural sensitivity to avoid missed emotive opportunities.

Latino interconnectedness and its boundary permeability may extend beyond death. The deceased continue their relationship with the living though dreams, visions, visitations, and or the intercession of folk healers (Council of National Psychological Associations, 2003; Shapiro, 1994). For instance, ancestors and loved ones may appear in dreams to convey messages and to provide solutions to problems. It is common to dream or to have a vision about a significant other announcing his or her recent death. This type of “despedida” (farewell) reinforces the spiritual connection between the living and the dead. Consider Laura, a Mexican American, who discussed a dream she had the previous night. Dressed as a physician, Laura was in a surgery room trying to save her younger brother’s life. As her therapist, I analyzed the dream in the mainstream psychotherapy fashion, examining the sibling relationship. Afterward, I provided a cultural perspective: I analyzed the dream as a premonition. Laura decided to call her parents’ home. That afternoon, a sobbing voice called my answering service: “My brother died last night in a car crash in Guadalajara.”

Magical Realism

Latinos’ cognitive style is highly reactive to imagery and fantasy. For instance, the Toltec philosophy teaches that we are in a continuous dream where we co-create our life while interacting in the dreams of others (Ruiz, 1997). This dreamlike quality infuses imagination and mystery into reality. An expression of interconnectedness, magical realism involves an alteration of reality with fantasy (Maduro & Martinez, 1974). A belief in the supernatural, magical realism is expressed through cultural forms. Indeed, research found that Latinos use more fantasy, magical thinking, and dissociation than their Anglo and African American counterparts (Pole et al., 2005). Although dissociation is clinically viewed as a dysfunctional reaction to trauma, La Raza worldview considers dissociation an adaptive response (Castillo, 1995). Indeed, individuals’ responses to racial and ethnic trauma through dissociation may not signify avoidance, poor self-esteem, or learned helplessness. On the contrary, they may indicate cultural resilience in interacting within a hostile environment. There is evidence that the use of imagery and fantasy in therapy is culturally effective with Latinos. For example, De Rios (1997) used magical realism as a culturally relevant intervention with traumatized Latino children. She found that magical realism, which attributes causality and cure to cultural heroes and villains, supported clients’ capacity to create images of safety leading to a symbolic refiguring of the traumatic event and allowing integration. De Rios argued that magical realism institutionalizes revenge/karmatic fantasies and superheroes and heroines to facilitate trauma resolution and reconciliation.

Magical realism can have a spiritual omnipresence in Latino life (Zamora & Faris, 1995). Consider the following vignette. While sunning on a Puerto Rican beach, Eda found a ring buried in the sand. The night before, Eda had a premonition that she was to receive a “borrowed” gift. The ring became her constant companion. Years later, Eda found herself consoling her friend Alfredo, who accidentally lost his fiancée’s engagement ring. Eda took off her “borrowed” ring and offered it to Alfredo. “The ring completed its mission with me,” she said. “I gave it back.” Eda stated. Yet, another example of magical penetration of reality is the belief that people will repeat the story of their namesake (Comas-Díaz, 1989). This magical belief was the central theme in the Nobel laureate Latin American novel, One Hundred Years of Solitude (García-Márquez, 1969). Within this cultural expectation, a person’s future can be “predicted” by examining his or her namesake’s past. A practical psychotherapeutic implication of this expectation is to ask Latino clients if they were named after another person and his or her story. To summarize, Latino ethnic psychology embraces three core elements: contextualism, interconnection, and magical realism. Although there are several types of ethnic psychology, I limit my next discussion to cuento
therapy, dichos psychology, and Latino spirituality.

Cuentos, Dichos y Sanación: Applications of Latino Ethnic Psychology

Cuento: Stories, Myths, and Testimonies

Many Latinos answer questions by telling a story, allowing the answer to emerge out of their narrative. Consequently, the spoken transmission of knowledge helps to preserve collective memory by maintaining history and mythology (Shapiro, 1998). El hablador(a) y cantadora(o), for instance, are storyteller icons that enlighten and teach people (Vargas Llosa, 1987). Likewise, cuento or storytelling helps Latinos to become aware of the cultural influences in their lives by creating personal narratives that lead to healing and transformation (Anderson & Jack, 1991). Interestingly, clinical case reports have reported the psychotherapeutic use of Latino literature (Bracero, 1998; Shapiro, 1998). Cuento therapy involves the use of folktales with ethnoculturally relevant stimuli in a social learning approach. Designed to present models of adaptive interpersonal behavior through a storytelling modality, cuento therapy uses modeling to promote a new synthesis of bicultural symbols and foster adaptive personality growth among Latino youngsters who live in two cultures (Costantino, Malgady, & Rogler, 1985). In this approach, clients are asked to focus on a culturally relevant hero or heroine and to use them as idealized but achievable figures (Costantino, Malgady, & Rogler, 1986). In this approach, clients are asked to focus on a culturally relevant hero or heroine and to use them as idealized but achievable figures (Costantino, Malgady, & Rogler, 1986). Cuento therapy provides a strong psychoeducational component: “What is the hero/heroine’s lesson(s)?” Latino folktales follow familismo and affirm the relational self. Therefore, traditional folktales and adapted cuentos are therapeutically used to encourage the family unit’s cultural adaptation. For instance, therapists enlist the aid of their clients’ mothers to narrate the folktales. Afterward, the mothers are engaged in group therapy along with their offspring. Research has documented the effectiveness of cuento therapy with Puerto Rican children and adolescents (Costantino, Malgady, & Rogler, 1986, 1994). This therapy was tested using a variety of methods, including paper and pencil ratings, objective standardized intelligence tests, experimental observations, and projective personality tests (measured by TEMAS, or Tell Me a Story, a Latino culturally specific projective technique to examine mental health) (Costantino, Malgady & Rogler, 1985). Empirical findings revealed a reduction in anxiety and aggression plus enhancement of social judgment among children and adolescents (Costantino, Malgady & Rogler, 1985).

Another example of a narrative ethnic psychology is testimonio (testimony). A verbal healing journey into a painful past, testimonio chronicles a person’s traumatic experiences and how these affected the individual, family, and community (Cienfuegos & Monelli, 1983). The therapist bears witness to this first person account of the individual and collective trauma stories. Thus, the main difference between the mainstream psychotherapy testimony and testimonio is that the latter emphasizes both the individual and communal effects of the trauma. Testimonio emerged in Chile in response to political terrorism to help Latinos overcome individual, collective, and multigenerational trauma (Cienfuegos & Monelli, 1983). Testimonio has been successfully incorporated into mainstream trauma therapy (Aron, 1992). In addition, testimonio can be used in conjunction with creative expressions to support continuity and evolution. Arpilleras are the quintessential example of cultural resilience. Originated in Chile during Augusto Pinochet’s dictatorship, arpilleras are detailed, hand-sewn three-dimensional textile pictures that illustrate the stories of oppressed Latinos (Ginaturco & Turtle, 2000). Likewise, as a form of testimonio, photo storytelling has been effective in addressing separation and dislocation issues among Latinos (Falicov, 1998). In sum, testimonio aims at healing, cultural resilience, and reconciliation by fostering political action.

Dichos: Distilled Folk Wisdom

Dichos are Spanish proverbs or sayings that capture sabiduría and address the problems and dilemmas of life (Aviera, 1996; Zuñiga, 1991, 1992). Dichos (also known as refranes) teach in a succinct and effective way (Cabos, 1985). As one-liner interventions, they provide “flash” psychotherapy. For instance, the dicho “El que canta, sus penas espanta” (The person who sings scares his or her sorrows away) articulates the value of a positive outlook in life. The dicho, “La gota de agua labra la piedra,” (A drop of water can carve a rock) can be used to illustrate how thoughts can gradually affect one’s view of life and produce
and maintain depression (Muñoz & Mendelson, 2005). Moreover, the dicho: “Cuando una puerta se cierra, otra se abre” (When one door closes another one opens) teaches the connection between adversity and opportunity.

Several authors have recommended the use of dichos in psychotherapy, (Aviera, 1996; Comas-Díaz, in press; Muñoz & Mendelson, 2005; Zuniga, 1991, 1992). The power of dichos relates to their cultural credibility and validity. Nonetheless, their therapeutic use requires a combination of clinical expertise with cultural competence. Indeed, Falicov (1998) observed that therapists’ knowledge and timely use of dichos is an invaluable communication tool. Although resources on Spanish dichos are available (see Ballesteros, 1979; Cabos, 1985; Gomez, 1994), therapists can use sayings in English because many Latinos have been socialized in this metaphorical communication. Dichos validate attaining sabiduría: “El que no sabe es como el que no ve” (s/he who does not know is like s/he who does not see). Thus, dichos are learning tools for cognitive restructuring. For instance, “Mantente tranquilo que las grandes batallas, se pierden con la mente” (Remain relaxed, that the greatest battles are lost in the mind) teaches the importance of serenity and mindfulness. Likewise, “No se le pueden pedir peras al olmo” (You cannot ask an elm tree to bear pears) highlights the need for realistic expectations. “No hay mal que por bien no venga,” (A bad thing can turn into something good.) “Lo que no viene, no conviene” (What you don’t get is not convenient) is another cognitive reframing tool. When clients obsess and ruminate, the saying “Borrón y cuenta nueva” (Erase and start a new account) can be used as a thought stop technique. Likewise, “No le busques cinco patas al gato,” (Don’t try to find five legs in a cat) can be used to challenge obsessions.

There is at least one dicho for every aspect in life. However, dichos are context-specific, in other words, they can contradict each other. For instance, the dicho: “Hijo de gato caza raton” (loosely translated as “The offspring of a cat hunts mice”), suggests that offspring will be like their parents. On the other hand, “El hábito no hace al monje” (loosely translated as “You cannot identify a book by its cover”) rejects the notion of judging a priori. Dichos are culturally accepted communications in societies that discourage direct expression of negative feelings. In this way dichos preserve collectivistic values such as simpatía familismo and personalismo. For instance, Anglo-style assertiveness is frowned upon among many Latinos. As a result, dichos allow individuals to save face during conflict. For example, “Al que le calze el zapato, que se lo ponga,” is translated as “If the shoe fits.” Therefore, dichos can be useful in managing cultural conflict. They help to combat dysfunctional gender beliefs such as bearing a cross as a Latina legacy (García-Preto, 1990). Likewise, dichos address learned helplessness by identifying and challenging dysfunctional gender-related thoughts and schema. For example,Latinas’ marianista (gender role to imitate the Virgin Mary) martyrdom can be reframed with the dicho, “Ayúdate que Dios te ayudará” (God helps those who help themselves).

Dichos promote cultural resilience among Latinos. In other words, they offer subversive strategies as they express adaptive responses to oppression, colonization, and internalized oppression. For example, “Estas trabajando para el ingles” (“You are working for the Englishman”, or “You are working for the colonizer”), acknowledges the need for political resistance. “Valgan las verdes por las maduras” (loosely translated as “You are entitled to eat ripe fruits because you have eaten green ones”) adds a socialist fervor to class conflicts. Latino dichos not only encourage cultural resilience in the face of oppression but also promote liberation. Dichos embody the premise that difficulties in living, relationships, and well-being have their origin in (and are maintained by) cognitive, behavioral, political, and spiritual factors. In sum, dichos teach the art of living by overcoming losses and celebrating life’s blessings. Within this context, dichos precede positive psychology.

Sanación: Latino Spirituality

Spirituality permeates Latino life (De La Canela & Zavala Martinez, 1983). Indeed, it comprises a significant dimension in ethnic psychology (Ho, 1987; Zea, Mason & Murguia, 2000). Spirituality differs from organized religion because it transcends religious affiliation (Padilla & Salgado de Snyder, 1988). As a way of life, spirituality helps many Latinos to deepen their sense of meaning and purpose (Muñoz & Mendelson, 2005; Tree, 2001). Problems and obstacles are interpreted as trials, where the goal is to fulfill one’s life mission (Coelho, 2003). Many Latinos learn spirituality through imitation, par-
Participation in rituals, and cultural osmosis. For instance, everyday language is filled with invocations of God, angels, and saints (Koss-Chioino & Vargas, 1999). Moreover, spirituality shapes how Latinos raise and socialize their children. It consecrates the immediate and extended family as a “protective sanctuary,” honoring ancestors and teaching the value of generational wisdom (Cervantes & Ramirez, 1992). It is common to ask elders for blessings during family gatherings and farewells. Furthermore, everything has a spirit in Latino life. Spirits can be personal, ancestral, animal, ecological, natural, divine, and or cosmic entities (Padilla & Salgado de Snyder, 1988). Furthermore, Latino spirituality has a celebratory and festive character because it teaches that despite adversity, life is full of blessings. As life needs to be celebrated, many spiritual and religious activities resemble a fiesta. In addition, Latino spirituality tends to communal. Therefore, numerous Latinos in the United States espouse a communitarian spirituality that helps them to self define by reaffirming bonds to a particular group of people (Diaz-Stevens, 1996). As an illustration, Harwood (1981) coined the concept of “ideological ethnicity” as the tendency to find meaning in life challenges by revisiting cultural beliefs and rituals. Along these lines, activities such as communal rosaries, novenas, posadas, and peregrinations strengthen Latinos’ spiritual/ethnic connection. With its popular base, Latino spirituality tends to be nonelitist (Figueroa Deck, 1995) and emancipatory. For instance, “comunidades de base” developed as hermeneutic groups with a focus on communal practice for spiritual and healing purposes. Restoring a sense of spiritual connection helps many Latinos who struggle with isolation, psychological distress, acculturative distress, and substance abuse (Koss-Chioino & Vargas, 1999).

Latino spirituality is pregnant with gender equality. Through its worship of Guadalupe, the patroness of the Americas, Latino spirituality is feminist and revolutionary. The feminine side of God, Our Lady of Guadalupe provides Latinos with sustenance, hope, a sense of belonging, and a reason to live (Rodriguez, 1996). As a syncretism of the Mexica goddess Tonantzin (our Mother) with the Spanish Virgin of Guadalupe, La Morenita (the Mexican Black Madonna) is a warrior, guerrilla combatant, and freedom fighter. Guadalupe appeals to the oppressed because she imparts dignity and energy to resist assimilation into the dominant culture (Rodriguez, 1996). Moreover, Latino spirituality promotes a theistic cosmology that connects, protects, and engages every living being (Cervantes & Ramirez, 1992). This spiritual interconnection posits that we are mirrors of each other (Ruiz, 1997). As a result, the combined self/other identity requires a relational treatment involving family, group, community (Canino & Canino, 1982), ecology, and even cosmos. Consider the following vignette. Angel invited his mother Remedios to a therapy appointment with Dr. Morales. During the session, Remedios began to address an empty chair. Soon after, Angel began asking questions to the empty chair and his mother provided the answers. At one point, Remedios turned to the therapist: “My mother thanks you. She wants you to know that...” Unbeknown to Dr. Morales, she was in the middle of a three-generational family session involving a dead ancestor.

Many Latinos believe that health is attained through the harmony of mind, body, and spirit (Dudley-Grant, Comas-Díaz, Todd-Bazemore, & Hueston, 2004; Ho, 1987; Zea, Mason & Murguia, 2000). Insofar illness is perceived as a nemesis of imbalance—a hubris against the cosmic order—a main goal of spirituality is sanación—healing. The sociocentric worldview allows Latinos to place themselves within a larger environment, including a cosmic or divine context. Indeed, spirituality is at the base of Latino healing. Such spirituality is the mestizo offspring of Native American animism, African slaves’ mysticism, and European Christianity. According to this syncretism, a disconnection from self, culture, and community results in illness (Comas-Díaz, 1989; Mehl-Medrorna, 2003). Consequently, healing occurs when we reconnect with who we are (Ruiz, 1997). Because many individuals experience regression when they become ill, healing frequently requires mothering and nurturing (Bolen, 1996). Consequently, ethnic approaches facilitate this requirement by providing a cultural holding environment (Freire, 1970). Sanación predicates a holistic pan relational worldview that involves ancestral and sacred affiliations in healing (Morones & Mikawa, 1992). For instance, the shamanic tradition views illness as a process of purification, whereas the sufferer receives a call to destroy her “sick” existence in order to experience life more fully and completely in a higher state of awareness (Kalweit, 1989). Along these lines, sanación purges, cleans,
and heals, aiming to transcend death. In this context, folk healers are recognized as the guardians of the boundary between health and illness and between life and death.

**Espíritus, Santos y Orichas: Latino Folk Healing**

Some Latinos turn to folk healing in times of crisis (De La Cancela & Zavala Martinez, 1983). This help-seeking behavior is consistent with the premise that Latinos can make contact with God and the supernatural without intervention of the clergy (García-Preto, 1982). As part of alternative medicine, folk healing has an underlying assumption of spirituality that provides sufferers with a participatory experience of empowerment, authenticity, and enlarged self-identity when illness threatens their sense of intactness and connection to the world (Kaptchuk & Eisenberg, 1998). The APA Multicultural Guidelines encouraged psychologists to learn about helping practices and healing traditions used in non-Western cultures that may be suitably included in psychological practice (APA, 2003). When deemed appropriate, Multicultural Guideline 5 encouraged psychologists to recognize and enlist the assistance of recognized indigenous folk healers. Moreover, the Surgeon General (U.S. Department of Health and Human Services, 2000) suggested that mainstream psychological interventions could benefit from incorporating core assumptions and practices of indigenous healing. Scholars and clinicians are integrating traditional healing practices into psychotherapy (Moodley & West, 2006; Yeh, Hunter, Madan-Bahel, Chiang, & Arora, 2004).

Anthropologists, social scientists, and mental health professionals have studied folk healing (Harding, 1999; Harwood, 1977; Kakar, 1985; Kiev, 1968; Ruiz, & Langrod, 1976). Although a broad discussion of this topic is beyond the scope of this article, I will briefly address general issues prevalent in Latino folk healing traditions. Frank (1973) identified the similarities between folk healing and psychotherapy as the existence of (a) a trained healer whose healing powers are accepted by the sufferer and the sufferer’s network, (b) a sufferer who seeks relief from the healer, and (c) systematic contacts between the healer and sufferer in which the healer attempts to reduce distress by changing the sufferer’s behavior. Likewise, Torrey (1986) recognized the common elements behind psychotherapy and folk healing as the acknowledgment of the role of unconscious motivation, the need for catharsis, and the therapeutic power of working through. Moreover, Latino folk healing shares similarities with psychoanalysis, group psychotherapy, psychodrama, family therapy, and crisis intervention (Comas-Díaz, 1981). Not only do folk healers work in crisis intervention and provide counseling (Ruiz & Langrod, 1976), but they also use the concepts of ego, id, and superego in their treatment (Lubchansky, Egri, & Strokes, 1970). Furthermore, the sociocentric aspect of folk healing resembles group therapy (Rogler & Hollingshead, 1961), family therapy (Ruiz & Langrod, 1976), and psychodrama (Seda-Bonilla, 1969). Notwithstanding their similarities, both systems have separate perspectives in their perceptions of definition, etiology, diagnosis, treatment, and cure of the disorder. However, the core difference between the two systems is the commitment to spiritual development prevalent among folk healers. To accomplish this, Latino healers invoke the help of espíritus (spirits), santos (saints), and/or Orichas (Yoruba deities). A cosmic treatment team assists the folk healer within a collectivistic orientation. In turn, the healer prescribes remedios (remedies), herbs, prayers, and rituals, in addition to conducting psychotherapy. Following the dictum of mestizaje, Latino folk healing is constantly evolving and incorporating new elements. For instance, a dynamic syncretism of Santeria and espiritismo is replacing a static model of the Latino folk healing (Baez & Hernandez, 2001). In sum, folk healing is consonant with collectivist societies because it restores clients’ sense of cultural belonging (Kakar, 1982) and promotes self-healing by maintaining a harmonious balance between the sufferer, family, community, and cosmos.

**Latino Healing: Sanación and Liberación**

I use the term Latino healing to designate the syncretism of ethnic psychology into mainstream psychotherapy. Besides incorporating the role of cultural interpreters, psychotherapists working with Latinos can benefit from adopting an emancipatory and holistic perspective. Cane (2000) provided an example of such perspective. She used holistic techniques combined with an empowerment therapy. Cane used self-healing practices such as Tai Chi, Pal Dan Gum, acupressure,
visualization, breath work, ritual, polarity, massage, labyrinth, body movement, and intuition with traumatized Latinos. Her findings showed a reduction of symptoms related to traumatic stress and PTSD. Cane concluded that the mind-body-empowerment intervention was an effective way to promote the inherent healing capacity of the person and the community. Latinos are not the only clients that benefit from these kinds of holistic interventions. A study investigating the use of complementary and alternative medicine (CAM) by psychotherapy clients in the general population found that about one third of the clients admitted using CAM to their clinician (Elkins, Marcus, Rajab, & Durgam, 2005). The results indicated that participants most often used mind body approaches (relaxation, imagery, meditation, hypnosis, or biofeedback), followed by herbal therapies (herbs, supplements), physical modalities (yoga, acupuncture, or massage), spiritual healing (folk healers), and special diets. The researchers concluded that CAM use is an important consideration in providing psychotherapy to a segment of the general population (Elkins, Marcus, Rajab, & Durgam, 2005).

The integration of Latino ethnic psychology into psychotherapy frequently requires a combined mind–body approach. Latinos are more likely to integrate and express mind–body experiences than other ethnic groups (Canino, Rubio-Stipec, Canino, & Escobar, 1992). When compared with other clients in my practice, Latinos tend to prefer imagery and visualization. Moreover, many of my highly acculturated young professional clients frequently espouse a syncretism of Christianity, Eastern mysticism, and “New Age.” For instance, Rosario, a 22-year-old architecture graduate student came to see me after a breakup with her boyfriend. She requested a leave from school and was working as a house designer. “I’m New Age,” Rosario declared during our first session. “I believe in feng shui” (Chinese art of positioning houses, buildings, and objects based on the energies of yin and yang). Rosario asked for traditional healing to address her concentration and attention problems. I suggested creative visualization, guided imagery, and breathwork. After Rosario completed treatment she referred most of her Latino friends to my practice.

A sensible way to discuss the integration of ethnic psychology into psychotherapy is through the discussion of clinical material. I focus on issues and dynamics relevant to the use of Latino healing in the following case discussion.

Alma

“It is because my roots are so strong that I can fly.”
—Mira Nair, (2006, p. 49)

Alma—a 35-year-old single lawyer—entered therapy a year after her grandmother’s death. A bilingual Mexican American, Alma frequently traveled to Mexico for business and pleasure. “I’m dead inside,” was her presenting problem. Blanca, her grandmother, had been a positive maternal figure. Consequently, Alma felt guilty for “not being there” when Blanca died. “I’m an emotional orphan,” Alma said. “My mother has been suffering from Alzheimer’s for the past 10 years.” Alma’s parents divorced when she was six and her father kept no contact with them. She seemed to express her complicated bereavement through self-destructiveness. Alma experienced relational difficulties, drank too much alcohol (a bottle of wine with dinner), and smoked a pack of cigarettes daily. Suicidal and homicidal assessments were negative. Alma revealed that her grandmother Blanca, who drank alcohol and smoked “too many cigarettes,” died of lung cancer. She connected the source of her self-destructive behavior to her identification with Blanca. During the initial stages of therapy, Alma became receptive to anxiety-reducing techniques.

I used relaxation techniques and systematic desensitization to help Alma regain a sense of agency and balance. Afterward, we addressed her negative cognitions regarding not being there for Blanca. Alma’s self-destructive behavior decreased significantly. She seemed to develop trust in me (a middle-aged Latina psychologist) and in the psychotherapeutic process. At this point, Alma revealed that she had been self-medicating her sleeping problems with NyQuil made by Vicks. Her sleep improved with the deep relaxation, and she stopped the over the counter medication. “No hay aguacero que no escampe,” Alma said when describing her mood. This dicho (The rain will eventually stop) signaled the beginning of Alma’s recovery. Afterward, I suggested completing a cultural genogram (Hardy & Laszloffy, 1995). Among other things, the genogram revealed that Alma was named after Blanca’s mother. The family genogram unfolded that Doña Alma immigrated when she was 20, married a Mexican American, gave birth to five chil-
dren, and became a successful businesswoman. “I’ve not done enough,” Alma concluded upon describing her great grandmother’s accomplishments. I invited Alma to give a testimonio. She identified the burden to succeed created by bearing the name of her great grandmother. However, the narrative experience seemed to liberate her. Alma’s testimonio helped her to “individuate” from the family expectation of being like her namesake. Interestingly, Alma was successful at work; she was partner at a prestigious law firm. Nevertheless, “I carry too many battle scars,” she said, referring to her struggle against racism and sexism on her way up the corporate ladder. We addressed her battle scars with CBT desensitization approaches. However, Alma did not find her career fulfilling. I used schema work combined with mindfulness (Bennett-Golman, 2001) to address this issue. We identified fear of abandonment and feelings of inadequacy as her main negative schema. Out of this experience, Alma started a daily mindfulness practice. She identified a lost love—volunteerism—and decided to reclaim it. “I have to give back to my community.” Alma began to do legal pro bono work for immigrant Latinos. Beatriz, one of her pro bono clients, gave Alma an arpillera—a Latin American weaving. The tapestry was a rendition of a dream. She saw her Abuela transform herself into a crone. We analyzed the dream from different perspectives. Alma preferred a cultural interpretation: Blanca appeared as the Aztec goddess Coatlicue, who represents the cycle of creation and destruction of life, death and rebirth (Cisneros, 2001; Tree, 2001). Alma interpreted her Abuela’s manifestation as a message: “Vive tu vida” (Live your life). The dream analysis helped Alma with her fear of abandonment. She expressed feeling connected to Blanca in a deeper way. Through cultural resonance, I felt that something was missing and remembered Alma’s godmother. Cultural resonance involves the ability to understand clients via clinical skill, cultural competence, and intuition (Comas-Díaz, 2006). While completing her cultural genogram, Alma revealed that Guadalupe, her madrina (godmother), was a folk healer. I explored if she wanted to contact Guadalupe for a consultation. “How did you know also I had a dream with Madrina?” Alma replied. Indeed, Guadalupe had a message from Blanca to Alma. Blanca wanted her granddaughter to visit the Sanctuary of Chimayó, a peregrination site in New Mexico. Pilgrims complete a ritual of eating some of the church’s dirt (earth) floor. Spiritual rituals and ceremonies reaffirm ethnic identity grounded in a collective self (Duran & Duran, 1995; Mehl-Medrorna, 2003). According to Bolen (1996), a ritual is an empowering outer expression of an inner experience that infuses an act with deeper meaning. Along these lines, the ritual of Chimayó symbolizes the seeker’s reconnection with mother Earth. Alma returned renewed from Chimayo. “I did not eat dirt, but felt connected to Abuela,” she reported. Around that time, Alma consulted a Toltec oracle (Sanchez, 2004) where she received an instruction to reconnect with mother Earth. We continued to work on her complicated bereavement.

Alma discussed another recurrent dream after completing her bereavement. She reported that she was taking a bath at the top of an Aztec temple. Again, we analyzed the dream from diverse perspectives, but Alma preferred a cultural interpretation. Instead of being a sacrificial place, the top of the Aztec temple was the site of her initiation. “I felt baptized,” she said. “Although I share the same name with my great grandmother, I have to honor my self,” Alma said. “I need to take better care of my soul.” Incidentally, the word alma means soul in Spanish. Besides doing mindfulness, Alma developed a spiritual practice blending Catholicism with Toltec philosophy. “It’s a rebirth,” she concluded. Alma expressed interest in working on romantic relationships. She discussed her breakup with Carlos, her ex lover. “When I first met him, he told me he was divorced. I was suspicious” Alma said, with tears in her eyes. “We even discussed marriage,” Alma continued. “Later on, I found that Carlos was still married and living with his wife!” I replied: “A la major cocinera se le escapa un tomate.” The dicho, loosely translated as “Even the best cook can lose a tomato,” conveys that we all make mistakes, even the experts. This dicho facilitated a culturally sensitive therapeutic intervention—it is okay to miss something without feeling guilty, you don’t have to be perfect (like Doña Alma appeared to be in her granddaughter’s eyes) in order to be good. In response, Alma laughed and took a tissue from the box. “You’re right,” she said while blowing her nose. “Help me break the negative cycle with men.”
I suggested the completion of a relationship inventory. Based on interpersonal approaches, this tool examines past relationships to ascertain patterns, dynamics, and other relevant issues (Klerman et al., 1984). Alma’s inventory yielded that she had replicated two types of romantic relationships: symbiotic and distant. Seeing her inventory’s “checks and balances,” as Alma put it, gave her the emotional stamina to initiate change in choosing potential partners. We continued our work to help Alma live her own life in the context of her family and community. “I want to fly,” Alma declared at this point. Upon exploration, Alma revealed that she felt stagnated in her spiritual life. To address this issue I suggested guided imagery. Alma received this suggestion with enthusiasm and read several books on the topic. During one experiential session, she saw herself as Icarus with artificial wings. She became terrified of being burnt by the sun. “What do you need?” I asked her. “Reconnect with the Earth,” she said. In her visualization Alma saw Quetzalcoatl, the Aztec feathered snake. The god asked Alma to plant her feet deeply into the earth. At that moment, Alma visualized herself growing real wings. She began to soar. “I’m alive inside,” Two years into psychotherapy Alma met Miguel, soon after we completed treatment. A year and a half later, I received an email announcement: “Join me in welcoming my daughter Blanca Alma. Thanks for being my comadre.”

**Renacer: Healthy Mind in Healthy Body and in Healthy Soul**

I envisioned Alma’s presenting complaint (I am dead inside) within a holistic perspective: Mente sana en cuerpo sano y en alma sana (Healthy mind in healthy body and in healthy soul). CBT approaches facilitated the development of our therapeutic relationship. Within this context I was able to “give” to Alma by helping her to reduce her anxiety. Additionally, I looked through La Raza’s lens to conceptualize her treatment. In other words, instead of promoting personal agency and mastery, I encouraged integration and development. For instance, the teaching of relaxation and desensitization techniques was consistent with striving for sabiduría. Moreover, Alma’s familismo allowed her to perceive me as a member of her extended family and thus, cemented the therapeutic alliance. Latino healing helped to integrate Alma’s spiritual beliefs into therapy. Cultural communication with her dead grandmother allowed Alma to complete her complicated bereavement. I integrated magical realism into family therapy with one person. Alma’s ability to mourn losses was previously compromised by unrealistic gender role expectations. Her namesake, Doña Alma, was an unreachable star in the family’s firmament. Her message, “Vive tu vida,” (Live your life), promoted Alma’s consciousness. She challenged internalized expectations and reformulated her identity. My use of Latino healing facilitated Alma’s ability to call back her spirit. The cultural interpretation of dreams was catalytic in her spiritual development. It helped Alma to connect with her ancestors through magical realism. Acting upon her grandmother’s message, Alma visited Chimayó, a ritual that facilitated purification and reconnection with her ethnic roots. The mind-body approaches encouraged healing and liberation. More specifically, experiential approaches promoted Alma to transverse her spiritual path. Her dreams—spiritual initiation and “growing” real wings in order to fly—were emblematic of her liberation and spiritual growth. Moreover, the concept of renacer, (rebirth) became a banner in Alma’s spiritual journey. Alma reformulated her identity from a sufferer to a seeker. I often function as a comadre to my clients. As her comother, comadre, I assisted her in her rebirth.

Alma’s case illustrated the integration of ethnic psychology into mainstream psychotherapy. To increase their cultural competence with Latinos, therapists need to become familiar with collectivistic constructs such as familismo personalismo and others. In addition, they can complement mainstream psychotherapy with ethnic psychological approaches, such as dichos, testimonio, and Latino spirituality. Furthermore, when deemed appropriate, collaboration with folk healers could prove useful. In conclusion, therapists can enhance their cultural competence with collectivistic Latinos by working within contextualism, interconnectedness, and magical realism, while acknowledging the importance of spirituality.

**Arpillera: Composing a Life**

Latino healing promotes transcendence and rebirth. I use the concept of arpillera as a symbol of this rebirth. Literally meaning cloth or weaving, arpilleras are folk tapestries that illustrate the
stories of oppressed Latinos (Ginaturco & Turtle, 2000). To illustrate, Chilean women weaved their trauma stories of political repression and torture into these beautiful folk expressions (Agosin, 1996). Arpilleras embody Latino resistance, cultural resilience, and transformation. They sublimate suffering into conscious art. To create an arpillera is empowering. Nowadays, arpilleras tell stories of all aspects in life (Ginaturco & Turtle, 2000).

For me, arpilleras symbolize the creative expression in composing one’s life. Just as Mary Catherine Bateson (1990) found that women compose their life based on their gender-specific circumstances, many Latinos compose theirs by creating arpilleras. Latinos craft emotional tapesries in response to the challenges of living in the “cultural hyphen.” Identity issues, cultural conflict, discrimination, and oppression are some of the threads in their weaving. Latinos weave arpilleras as they travel back and forth through the cultural puente connecting North and South. In their journey, they impart resilience, mestizaje, and creativity into the building of the American arpillera.

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