

Latinas in Pursuit of Healing: Cultural Implications for Counseling Sexually Abused Latinas

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Elvia is a 29-year-old, married Latina and mother of three young children. She was raised in rural Mexico and is one of seven children. Her family farmed a small piece of land they rented from a landlord and sold their crops at the local market. When Elvia was to enter 5th grade, her father refused to send her to school again and she began to work alongside her parents and older siblings to help the family make ends meet.

Elvia was just a young child when her maternal uncle, Tío Jose, came to stay with her family. She does not remember much of those times, except that Tío Jose was not a “nice man.” She stated that she would often catch him following her every move and she felt uncomfortable but nobody else seemed to mind him being there. One day, when nobody else was home, he came to the room where she played and molested her. Elvia did not understand what had exactly happened, but she knew she could not tell anyone. She was terrified and did not think anyone would believe what had happened and that her family would blame her being a “bad girl” and making things up. She remembers praying every night for forgiveness, believing that she must have done something terribly wrong, but she was not exactly sure what that had been.

As a teenager, she deeply feared that if anyone found out what had happened to her, she would be “the talk of the town” and that her “family would disown [her].” She feared that she would lose her family, friends, her reputation, and ultimately, nobody would ever marry her. She had seen it happen to other girls who “sleep around.” She believed that since she was no longer pure, a “virgin”, a descent man would never want her. She would often hear her mother and her sisters say that men only married the “good girls,” and she was convinced she was no longer one of them.

Elvia did not date for a long time, although she had plenty of suitors. She was afraid that if she told them that she was not a “virgin” then they would not want her as a wife. When she was 19 years old, a young man had fallen deeply in love with her and began to court her. They married six months later in a small ceremony. She was not certain she loved him, but she believed he would not leave her. She thought that he might be her only chance to get away from it all and forget her past altogether -- her chance at a new life.

She had her first child, a girl, 12 months later and her second child a year after. She recalls feeling scared at being a mother. She felt she had to be a perfect mother and always protect her children from men like her Tío Jose. However, internally she doubted she would know how to protect them since she could not even protect herself. She felt intense guilt and believed she was an unfit mother. She reported that she struggled with bouts of depression for most of her life. She was referred to counseling by her primary care physician. She was not sure what counseling was or if it would even work. All she knew is that she wanted to follow her doctor’s recommendations.

A Cultural Context

Although traumatic sexual experiences have been documented across all ethnic/racial, educational, religious and social economic backgrounds, it is imperative that mental health professionals examine the cultural context when working with Latino/a clients in therapy, despite their levels of acculturation or time lived in the U.S. Regardless of cultural background, women can encounter a number of barriers in seeking adequate professional help when healing from traumatic experiences. Additionally, the Latino culture provides a unique set of potential barriers to seeking help which need to be understood, assessed and addressed in counseling. However, it is essential to remember that Latinos are a widely heterogeneous group including the way they address and deal with issues of abuse and trauma.

Family Values and Traditional Gender Roles

Traditional Gender Roles

Traditionally, Latinas have been expected to uphold family values above all. They are to be devoted and dutiful mothers, wives, daughters, friends and religious guides to their children. They carry a great deal of responsibility for the proper rearing of the children, the maintenance of their marriage, and the passing on of religious values. Latina women typically feel responsible for negative family events and often engage in self-blame coping. Thus, many Latinas tend to feel that traumatic events and their emotional consequences are simply their fate and their fault. For many, the fear that the family would feel ashamed, “dishonored” and blame her for the abuse is very real. They may believe they have to carry the burden and suffer in silence to keep from disrupting the family life.

Furthermore, the widely-held belief that in order to meet the cultural definition of a “morally good woman,” one must remain a virgin until marriage continues to prevail. This complicates how victims and their families respond to and cope with sexual abuse (Fontes, 2007). Regardless of level of acculturation by the individual, the cultural expectations have not radically changed within the Latino community. As a result, the emotionally and psychological implications for Latino/a children who have been sexually abused persist. Furthermore, as it is often the case for women who have been sexually traumatized, they often blame themselves for not preventing or stopping such an attack. The implications of not being a virgin, coupled with self-blame, often translates into feelings of shame, guilt and worthlessness impacting the decisions they make, which in turn can affect every aspect of their lives.

Acculturation

Acculturation or biculturalism is a complex process, not easily measured and often misunderstood. Acculturation has often been inaccurately measured by the number of years an individual has lived in a host country. Now we understand that this only gives us limited information about the person and not much insight into level of bicultural attainment (Chun, Organista, & Marin, 2003).

Furthermore, acculturation may not always serve as a protective measure for Latinas, especially if others (i.e., family, friends, partner) are acculturating at a different pace or may not even live in the U.S. It can be hypothesized that as Latinas acculturate and become exposed to different cultural behavioral models, they would be less likely to tolerate abusive situations. However, even when our clients understand that they are not to tolerate or be blamed for the abuse and/or trauma they might have endured, others in their lives may not share this view. This might create

yet another emotionally-laden divide in their lives, which can lead to another level of distress in their own attempt to heal.

In other instances, when their perception of self is that of a highly competent, assertive woman, a history of abuse and the messages they might be giving to themselves (i.e., “you knew better than to let that happen,” “why didn’t you put him in his place,” “you should have seen it coming”) seem incongruent with their sense of self. This disconnect creates a level of distress that may lead them to not trust themselves and/or others in their lives.

The Counseling Process

According to Dingfelder (2005), for a large percentage of Latinos who seek psychotherapy, “their first contact with a mental health professional is also their last--50 percent never return to a psychologist after the first session,” (p. 58). One important cultural aspect to remember is that talking to anyone outside of the family might be perceived as a form of betrayal. Additionally, the stigma of being labeled as “loco” (crazy) is still pervasive within many of the Latino communities. Thus, seeking psychological help is often seen as threatening and as the last resort.

Many adult Latinas come to counseling only after being referred by their doctor and/or after years of psychological distress. It has been documented that adult survivors of maltreatment in childhood are more likely to experience post-traumatic stress disorder, as well as depression, anxiety, substance abuse, suicidal ideations, personality disorders, and physical ailments (Chapman, Dube & Anda, 2007; Ford, 2005).

Latinas might come to their first and subsequent counseling appointments accompanied by a family member, often their partner. It is important to acknowledge their partner’s presence and to provide the choice of having them present in session if the client so prefers, especially at the onset of counseling. Of course, a third party presence can lead to mixed results. On one hand, not creating an artificial partition between the psychologist and the client’s partner might help demystify the counseling process for both client and partner. Furthermore, the psychologist might find an ally in their partner, who might see the benefits of having a professional health care provider address the concerns that might have been present for years. It is also congruent with the Latino culture to be inclusive of family and significant others in important matters in the individual’s life, like seeking counseling. Moreover, their partner or family might have a great deal of influence on whether or not she returns to counseling. Creating an “us against them” dynamic may only decrease the likelihood that they (an ultimately she) engage in the counseling process.

On the other hand, how and what information is reported by the client might be influenced by having a third party present. The client may feel reticent to engage in full-disclosure self-reporting about certain life experiences and/or current emotional states. Thus, it is important to revisit and revise the information gathered as the counseling advances and the client feels more ready and willing to elaborate on her life experiences and the emotional sequelae. Once trust is established, the presence of their partner or family member in the sessions will become less central to the counseling process and thus curtailed.

It might be important to provide Latina clients with some psycho-education early in therapy to normalize some of the psychological reactions to the traumatic experiences, as appropriate. They may not be aware if or how these traumatic experiences still play a role in their lives and perhaps

even in some of the decisions they have made in their lives or even continue to make. They may believe that they should be over the abuse by now and, at first glance, not see any connection between their early experiences and their current life. Providing information about the counseling process – what it is and what it is not, can help set realistic expectations and offer a general template of how therapy works. It is important to highlight that the counseling process is not a quick fix, but that over time it can significantly improve the quality of life for all involved. In some Latin American countries seeking counseling is a common practice. Therefore, avoid making assumptions that the client might not be familiar with the counseling process or have never sought out counseling previously.

If the client has the opportunity to receive counseling in their first language, always provide that as a viable option, but be cautious not to assume that the client would want or prefer one or the other. For some clients, receiving counseling in their first language might be too close for comfort. However, for most clients, the opportunity of receiving counseling in their first language might lead to a more detailed, in-depth expression of their emotions and thoughts, potentially providing greater insights in the healing process (Altarriba, 2003; Biever, 2002). However, for the same reason that it is powerful, it can also be threatening for some. Thus, ultimately it needs to be the client's decision depending on their comfort level at any given time.

As Latinas begin to better understand the process of healing – including the need to set better limits or to express their own needs; these changes might not always be welcomed by family and friends. Personal growth and empowerment as defined by the majority culture, might be perceived as selfish, becoming too “Americanized” or even labeled as a “sell out” of their own culture. Therapists must work within the reality of their context and to help empower them within those boundaries or risk losing them in therapy and even doing more harm than good. Mental health providers should always be aware of the spoken or unspoken expectations that might derail the therapeutic process.

Lastly, a lack of perceived radical or immediate change in Latina clients should not be prematurely interpreted as resistance. If she continues to come to counseling, this may speak to the trust that she has placed in the counseling process and should not be underestimated or in anyway undermined.

Counseling Latinas who have been abused present mental health providers with unique challenges and issues that need to be addressed collaboratively with the Latina client. As barriers to counseling are gradually removed, mental health providers will likely encounter a greater number of Latina clients with histories of abuse and trauma. The provider's level of cultural sensitivity can make a world of difference in their search for psychological healing.

**This article focused solely on the cultural implications for Latinas who have been sexually abused. However, it is important to acknowledge that there are just as many unique cultural challenges and psychological implications for males who have also been sexually abuse.*

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