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Health: Assessment And Treatment Of Diverse Populations, Second Edition discusses the impact of cultural, ethnic, and racial variables for the assessment, diagnosis, treatment, service delivery, and development of skills for working with culturally diverse populations. Intended for the mental health practitioner, the book translates research findings into information to be applied in practice.

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Health Differences and
ethnography in the frequency and
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disorders. The acknowledgement
by the mental health
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frameworks that position cultural
factors as a major determinant of
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A notable strength of this book lies in the integration of information from both science and practice on the development of culturally competent mental healthcare... This handbook appears to be an essential companion for anyone that might be interested facing that personal challenge while exploring the sociocultural influences on various mental health issues... the editors do an outstanding job of compiling works from authors that do not oversimplify the issues or lose the readers in ...

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Health (CALD) mental health consumers, their families and carers. Most Australians will be directly or indirectly touched by the impact of mental illness at some point in their lives and for people ...

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Making use of a cultural competence framework throughout, the book covers many of the classic mental health/developmental areas such as schizophrenia, mental health disorders, ASD and ADHD, but it also looks at more controversial areas in mental health, like inequalities, racism and discrimination both in practice and in graduate school training and the supervisory experiences of black ...

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discusses the impact of cultural,
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assessment, diagnosis,
treatment, service delivery, and
development of skills for working
with culturally diverse
populations. Intended for the

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Health Board Edition, the book translates research findings into information to be applied in practice. The new edition contains more than 50% new material and includes contributions from established leaders in the field as well as voices from rising stars in the area. It recognizes diversity as extending beyond race and ethnicity to reflect characteristics or experiences related to gender, age, religion, disability, and socioeconomic status. Individuals are viewed as complex and shaped by different intersections and saliencies of multiple elements of diversity. Chapters have been wholly revised and updated, and new coverage includes indigenous approaches to assessment, diagnosis, and

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treatment of mental and physical disorders; spirituality; the therapeutic needs of culturally diverse clients with intellectual, developmental, and physical disabilities; suicide among racial and ethnic groups; multicultural considerations for treatment of military personnel and multicultural curriculum and training. Foundations-overview of theory and models Specialized assessment in a multicultural context Assessing and treating four major culturally diverse groups in clinical settings Assessing and treating other culturally diverse groups in clinical settings Specific conditions/presenting problems in a cultural context Multicultural competence in clinical settings

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A major challenge for mental health professionals who seek to practice effectively in contemporary US society is the increasing cultural diversity of the population. This chapter examines the competencies required for effective mental health practice with culturally and linguistically diverse clients. It also explores curriculum development and training strategies for implementing these competencies that are crucial for preparing graduate students as well as professionals to respond to the challenges posed by the demographics in contemporary US society. The chapter proposes using the Cultural Competence Continuum as a tool for self-

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examination, and proposes an integrated etic-emic approach for addressing the domains of awareness, knowledge, and skills in cultural proficiency training.

The goal of the first part of this chapter is to understand the uniqueness of the military as a culture. Next the chapter provides an overview of sociocultural constructs associated with military culture. The second part of the chapter presents an overview of diversity elements (e.g., gender, sexual orientation) intersecting with military culture. Understanding the diversity within the US Armed Forces is clinically relevant for culturally responsive mental health service delivery to military service

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Health. The third part of this chapter addresses military cultural issues with potential to affect the mental health of military service members. We describe mental health challenges that have been experienced by military personnel in light of the conflicts in Iraq and Afghanistan and the US involvement in the Global War on Terror, and highlight the resilience of this population under stress. We conclude with recommendations for culturally competent treatment approaches for working with military service members.

This chapter begins with a discussion of general factors with a potential impact on the

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assessment and treatment of American Indian and Alaska Native people (AI/ANs). The history of AI/ANs is briefly summarized and followed by a description of the unique demographic, socioeconomic, and health characteristics of the population. Some common cultural values among AI/ANs are then outlined. The chapter concludes with a shift to specific recommendations and guidelines to aid clinicians in accurately assessing and successfully working with AI/ANs.

Spirituality and culture are both recognized as important elements for providing culturally competent mental health services to ethnically and religiously diverse

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populations. They rarely, however, are considered together within a common conceptual framework. In this chapter, relationships between religiousness, spirituality, acculturation, and theological understandings of inculturation (e.g., how religious/spiritual beliefs and practices cannot be understood apart from their cultural context) are explored. Empirical evidence regarding the influence of religion and spirituality on mental health, as well as the effectiveness of spiritually and culturally accommodative approaches to treatment is also examined. Finally, the impact of spirituality and culture on mental health interventions is considered within

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two different paradigms: (a) how psychotherapy may be adapted to be more culturally sensitive to diverse populations, and (b) how indigenous notions of well-being, illness, and healing may help mental health providers broaden their notions of interventions.

The highly subjective nature of illness and the frequent ambiguity in diagnosis, management, and treatment require patients and providers to frame illness experiences in terms of meaningful concepts and vocabularies. For physicians this framing is based on the language of science; for patients it is often based on cultural beliefs, practices, and local vocabularies of distress. The ambiguity

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experience of disease means that researchers and practitioners must be aware, not only of culturally bounded illnesses, but of the potential impact of culture on all aspects of the experience of illness. In this chapter we review a long tradition of research that illustrates the important role that culture plays in the subjective experience of illness, and we discuss the implications of culture for epidemiology, health services research, and medical practice.

This chapter provides an overview of research on the mental health of Latinos in the United States with emphasis on the cultural constructs and

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theories with relevance for assessment and intervention with this population. A distinction is made between factors that confer advantages and those that may increase vulnerability at both the individual and environmental levels. This chapter suggests that treatment considerations need to be tailored based on individual needs that incorporate complexities of culture and gender so that clients are not viewed in a stereotypical manner. This discussion is followed by a summary of contemporary research rooted in positive and resilience psychology in order to build on strengths within the culture, such as positive ethnic identity, civic engagement, family support, bicultural teaching in the

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This chapter reviews research on psychotherapy effects and treatment engagement for ethnically diverse youth and families. Evidence supports several methods for increasing treatment engagement for ethnic minority youth and families, including written and verbal prompts, and targeting barriers to treatment attendance (by phone or in person). Over 30 efficacious interventions were identified for treating ethnic minority youth and families, and the effect size magnitude was in the small to medium range. However, most of the evidence was found for Latino and African American youth, with

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limited to no evidence supporting psychosocial treatments for Asian, Native American, or other non-White youth. Research evaluating ethnic differences in treatment effects was equivocal, with most studies suggesting that White and non-White youth benefit equally. There was evidence supporting the efficacy of culturally tailored interventions over control groups, but it is unclear whether cultural tailoring enhances outcomes above and beyond generic treatment effects. The chapter concludes with recommendations for improving psychosocial intervention research with diverse youth and families.

This chapter describes basic

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Health Second Edition in the clinical mental health interview of a person from any cultural group. Because of the author's own background and the characteristics of his clinical work, the emphasis of the chapter is on the Hispanic/Latino group, specifically Mexican Americans. The principles outlined can apply to many types of interviews: diagnostic, psychotherapeutic, emergency, and so on. The approach can best be described as dynamic but also available to gathering information for formal DSM diagnoses and formulations. Nuances of the cross-cultural dynamic process in the areas of language, intrapersonal attitudes/feelings, communication patterns, and other areas are

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Health. Specific psychotherapy techniques and explicit details about diagnostic formulation are beyond the scope of this chapter and are not examined.

This chapter provides a review of the literature on multicultural curriculum development, including the ethics of intersection and culturally responsive practices. We argue that the integration of the fourth (multicultural) and fifth (social justice) forces in mental health must be the epicenter of our training paradigms. Despite our best efforts to ensure that training programs continue to evolve to solidify an academic environment that reflects the environmental and contextual

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changes in society, many programs are unable to mirror their educational efforts with the ever-evolving demographic changes. As we continue to situate our training programs and students in ways that reflect the needs of ethnocultural communities, our desire to separate the personal from the political will no longer be an acceptable approach to training. The continued challenges in bridging much needed gaps in these areas are further discussed in this chapter and specific training models are presented.

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