


**Children's Hospital LOS ANGELES**

Considering Culture When Assessing and Diagnosing Young Children

Presented by Marian Williams, Ph.D. and Patricia Lakatos, PhD



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**Objectives**

<b>Identify</b>	Identify two reasons that culture must be considered in order to accurately diagnose young children
<b>Explain</b>	Explain the key components of the Cultural Formulation for Infants and Young Children in the DC:0-5.
<b>Apply</b>	Articulate the application of the Clinical Formulation when assessing a child for autism spectrum disorder

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## Self-Reflection

- What is the story/meaning of your first or last name? How were these meanings conveyed to you as a child?
- Does your first or last name reflect aspects of your social identities such as your gender, class, race or ethnicity, sexual orientation, religion?
- Do you think people assume certain things about you because of your first or last name?
- Have you ever felt discriminated against or “different from” because of your first or last name? Have you ever felt that your names provided you certain advantages or privilege?
- Anything else that is involved in the story of your name?
- How do these experiences shape you as a parent or clinician?



• Adapted from Marta Casas, LMHC

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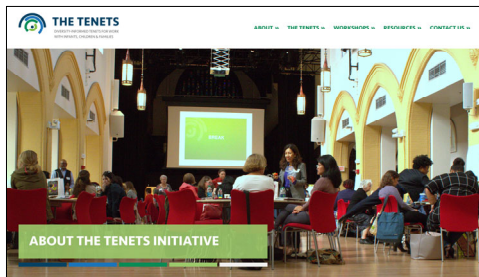
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## Diversity-Informed Infant Mental Health Tenets



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## Tenet #1: Self-awareness leads to better services for families

Professionals in the field of infant mental health must reflect on their own culture, personal values and beliefs, and on the impact of racism, classism, sexism, able-ism, homophobia, xenophobia, and other systems of oppression have had on their lives in order to provide diversity-informed, culturally attuned services on behalf of infants, toddlers and their families.

- Irving Harris Foundation – <https://imhdivtenets.org>
- St. John, Thomas, & Norona (2012)



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### Example from the Field: "Elias"

- 3-year-old boy referred due to feeding difficulties, limited communication skills, and repetitive behaviors
- Both parents immigrated from a rural area of Guatemala as adults and met in the U.S. Father has been in the US for 20 years and mother immigrated about 7 years ago.
- Mother believes Elias' difficulties are punishment from God
- Elias had an IEP but his parents removed him from preschool because he would not eat there and was in his own world.



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### Multicultural Relational Perspective (MRP)

Is a "worldview that recognizes how the nuances of culture and all of its appendages are contaminants, informants, and meaning-makers throughout virtually all aspects of our lives."

Hardy (2016)



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### What do we mean by culture ?

- Culture is a broad-based multi-dimensional concept
- Culture is a pervasive and potent organizing principle
- Culture = shared meaning
  - Shared beliefs, values, rules, and practices
- Culture as a dynamic and transactional process
  - Changes over time across generations
  - Across countries when families immigrate
- Culture is mediated by the parenting relationship



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## Culture is transmitted through parenting



In your family growing up, what did you learn about:

- How you should greet adults?
- The value of education?
- How adults should respond to a child's distress?
- Where children should sleep?

How are your experiences similar or different from families you work with?



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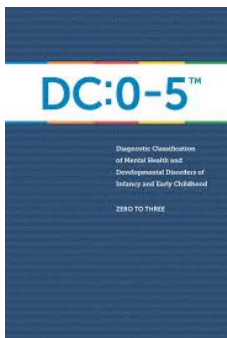
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*Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0 – 5)*

The diagnostic manual for ages 0 – 5 published by ZERO TO THREE



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## Context within infant mental health



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## Context within infant mental health

In addition to clinical disorders, DC:0 - 5 captures contextual elements including

- medical status,
- developmental functioning,
- exposure to traumatic events, and
- caregiver-child relationships



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## Cultural Formulation

- The DSM introduced a cultural formulation in 1994 to consider when making mental health diagnoses
- DC:0-5 adapted the DSM cultural formulation for young children, based on:

Sarche et al. (2019). Cultural perspectives for assessing infants and young children. In R. DelCarmen-Wiggins & A. Carter (Ed.), *The Oxford Handbook of Infant, Toddler, and Preschool Mental Health Assessment (2<sup>nd</sup> ed)*.



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## DC:0 – 5 Cultural Formulation

1. Cultural identity
2. Cultural explanations of the problem
3. Cultural factors re the environment
  - a. Life-space
  - b. Caregiving network
  - c. Caregivers' beliefs about parenting and development
4. Cultural elements of the caregiver-clinician relationship



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## Cultural Identity of Child and Caregivers

- Family's self-identified culture
- How parents intend to raise their child with respect to culture
  - Multiculturalism
  - Connection with culture of origin and host culture
  - Languages and preferences for teaching language



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## Elias: Cultural Identity of Family

- Elias' parents identify as Guatemalan
- K'iche', a Mayan language, is their first language, and Spanish is their second language. Mother is more comfortable speaking K'iche'
- Elias has learned a few English words from videos he watches on Youtube
- Family is Catholic and attends church with other indigenous families



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## Cultural Explanations of the Child's Presenting Problem

- Who first noticed the problem?
- Is there congruence or difference between the parents' and extended family members' perceptions of the problem?
- What meaning do the parents give to the child's distress?
- What do the parents think caused the child's problem?
- What do the parents believe would help?
- Who do they want to be included in treatment?



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### Elias: Cultural Explanations of the Child's Presenting Problem

- The pediatrician referred the child for treatment when the parents mentioned he was not eating much. Pediatrician also noticed his lack of engagement and limited language.
- Parents were not concerned about his lack of engagement or limited language. They are a family of few words.
- Elias only likes pureed foods and does not accept foods the parents eat; mother feels rejected
- Mother is skeptical re seeking help but father worries re child being taken away if they don't follow pediatrician's recommendation



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### Cultural Factors re the Child's Environment: Life Space

- Describe the child's physical space
- What community does the family live in?
- Who lives in the home and what is their relationship to one another?
- What are the sleeping arrangements?
- What do the parents perceive as social supports and stressors in their environment?



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### Elias: Life Space

- Elias' family (mother, father, Elias) lives in a 3-bedroom apartment that they share with 2 other families (non-relatives). Elias has a toddler bed in parents' room
- All three families share one bathroom and the kitchen
- The three families have different work schedules and are not close
- There is no outdoor space in their building
- There is a park three blocks away, but Elias' parents do not feel safe going to the park because Elias does not stay close to them



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### Cultural Factors re the Child's Environment: Caregiving Network

- Who are the significant caregivers in the child's life?
- Have there been changes in the caregiving network?
- What are the family's perceptions of the caregiving network?



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### Elias: Caregiving Network

- Elias is primarily cared for by his mother during the day while his father works
- Other women in home will care for him only in an emergency
- His grandparents live in Guatemala and they are not able to visit, nor are parents able to go to Guatemala, due to their immigration status
- Elias' father feels more comfortable seeking resources but regularly worries re the impact of seeking services on his application for a work visa



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### Cultural Factors re the Child's Environment: Caregivers' Beliefs about Parenting and Development

What beliefs do the caregivers have about:

- Gender roles
- Disciplinary practices
- Goals and aspirations for the child
- Beliefs about children's role in the family
- Beliefs about parents' roles in parenting
- Sources the parents turn to for advice about parenting



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### Elias: Beliefs about parenting and child development

- Mother is the primary caregiver and responsible for parenting. Father's role is to provide financial resources, but he is the one who communicates mostly with providers in the health and educational system. Mother defers to him.
- Mother grew up with use of corporal punishment but does not want to use it because of her fear of DCFS. Both parents have difficulty setting limits.
- Parents hope Elias will be able to get an education and good job in the future.



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### Cultural Elements of the Relationship Btw the Caregivers and the Clinician

- Differences in culture and social status between clinician and family
- Differences in understanding child's distress
- Communication difficulties
- Understanding of the role of others in the diagnosis and treatment process
- Parents' level of comfort with seeking help
- Caregivers' past experience with clinicians or service system



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### Elias: Cultural Elements of the Clinician-Family Relationship

- Clinician is Caucasian and learned Spanish in high school and college. She feels comfortable communicating in Spanish although at times struggles with vocabulary or when conversations are too fast.
- Clinician is originally from small town in Wisconsin and moved to California in search of better work opportunities.
- Clinician used to work for an early intervention program and believes in the value of EI services



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## Overall Cultural Assessment



Summarize the implications of the components of the cultural formulation for comprehensive diagnosis and care of the child and support of the parent/caregiver-child relationship



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## Elias: Overall Cultural Assessment

- Elias is diagnosed with the following clinical disorders from DC:0 – 5
  - Autism Spectrum Disorder
    - With global developmental delay
    - With language delay
  - Undereating Disorder
- Let's consider how the cultural assessment influences the process of making the diagnosis and the parents' response to the diagnosis



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## Cultural Missteps

If the clinician did not consider a cultural formulation, what missteps may occur in Elias' case?



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## Missteps

- In the assessment Elias says a few words to his mother in K'iche but the clinician does not understand and thinks that he is using stereotyped language
- The clinician encourages the parents to send Elias to school so he can learn English
- The parents' main worry is re Elias not eating; clinician is more worried about his social and emotional skills and feels he needs school for that. Parents don't trust school to feed him and think he'll be hungry all day



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## Integrating a Cultural Formulation

- How would a cultural formulation help this clinician and family work collaboratively?
- What pieces would be important to consider in this case?



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## Elias: Overall Cultural Assessment

We lead with curiosity . . .

Clinician explores

- What "autism" means to the parents
- Parents' expectations re Elias talking more
- Parents' thoughts about having services, and about them being in the home
- Parents' experience re service system in Guatemala and in the U.S.
- What values are important to the parents re parenting and raising children



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### Elias: Overall Cultural Assessment

- It is important to parents for Elias to be quiet, so as not to bother the other families they live with
- Parents' worries about services:
  - Will immigration status be impacted
  - Will other families in the home be bothered
  - Would they get reported to DCFS
  - If he goes to school, will he lose his cultural identity and home language
- Strengths:
  - Religious community; there is a child who behaves similarly and parents are open to talking to that child's parents and sharing experiences
  - Community of other indigenous families where Elias can be part of support and the family can talk to others in K'iche'



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### Steps to Implement

- Awareness and self-reflection
- Consider multidimensional perspective and dynamic aspects of culture
- Remember culture mediates the parenting relationship
- Cultural formulation helps us organize our thoughts and consider these aspects as we conceptualize a child and family's needs



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