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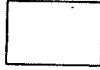
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## PREFACE

The purpose of this book is to assist therapists in their understanding of cultural issues that impact clinical treatment of Hispanic Americans. This text is about working therapeutically with people from a diverse culture. It is a book about similarities and differences, but its emphasis is on the diversity of the people that make up the fabric of what is commonly referred to as Latino culture. We use the words "Hispanic" and "Latino" interchangeably to refer to people and their descendants from countries where Spanish or Portuguese is the dominant language. We also use both terms to be respectful and inclusive of the entire population. Similarly, we use the terms "Anglo American" or "non-Hispanic White" to refer to English-speaking people. "African American," "Asian American," and "Native American" are also terms we have used although we would prefer not to group diverse peoples and cultures under such general labels. We have chosen to use culture instead of color because of the variety of hues and races within distinct countries. Culture honors personal stories in a unique way that no other concept captures. The chapters contain theory, clinical cases, and strategies for therapy. Our goal is to enrich the vision of diversity embraced by the word Hispanic. The book will be useful to psychotherapists, other professionals, and students engaged in treating Hispanic families.

We asked each of our authors, most of whom are Hispanic or bicultural, to include personal information to enhance their narratives, hoping to capture their creativity, opinions, and expertise. We invite you to attune your ear to each voice, as each has its own tenor, its own

timbre, its own musical chorus. With diversity comes a complex pattern of voices; for this reason, we have asked the authors each to use the first person at times. We ask you to train your ear to the varied styles and diversity of the authors. Each brings unique experiences and a wealth of information to the subject at hand, namely, diversity in the treatment of Hispanic families. The process of appreciating diversity requires tuning one's ear to hear not only the similarities that so often resound in clustering Latino cultures, but also the unique qualities of the "us" in the "other." Recognizing differences that count and developing that essential curiosity about the experience of another is at the heart of each author's therapeutic approach.

## OVERVIEW OF THE CHAPTERS

The chapters are organized into four sections: Part I contains three chapters focused on people; Part II is focused on the therapist; Part III contains six chapters about clinical issues, emphasizing healing relationships; and Part IV summarizes the acculturational processes and the current demographics of Hispanic people in the United States. We invite our readers to appreciate the rich diversity of the Hispanic cultures existing in the United States today: Hispanics from twenty-one nations reside in the United States. The three largest populations include Latinos from Mexico (59 percent), Puerto Rico (14 percent), and Cuba (5 percent). This book will focus primarily on these groups.

### **Part I: Focus on the People**

Chapter 1, entitled "*La Familia Latina*," written by Maria T. Flores, focuses on clinical issues useful in understanding and treating Hispanic families. Although there are similarities among most families in the United States, Hispanic families need to be understood in a cultural context. The multiplicitous distinctions among country of origin, geographical region of the United States, gender, acculturation, and socioeconomic class lead to the vast diversity seen within Latino cultures. The author discusses the reflexive process of identity formation within bicultural and familial contexts. She echoes her clients' voices as she asks, "Who am I?" "Who are we?" The chapter explores the narrative

diversity inherent in language. Case studies are used to illustrate common themes and pitfalls in working with Latino families.

Chapter 2, "*El Latino: Transgressing the Macho*," written by Gonzalo Bacigalupe, dons a distinctly postmodern lens and invites us to observe the diversity of Hispanic men. When we socially construct cultural stories, labels, definitions, and stereotypes, we can make some grave mistakes and generalizations. In becoming "culturally resonant," therapists can appreciate contemporary Latino males and transcend the myths concerning their "macho mystique." Political discussions and case studies will illuminate the clinical implications. Bacigalupe's emphasis is on a therapist's ability to have confidence in people's strengths and resources and their capacity to change. He reviews literature and research to underline his perspective.

Chapter 3, "*La Mujer Latina: From Margin to Center*," written by Yvette G. Flores-Ortiz, describes the location of and the changing role of Hispanic women in the family and in society. The traditional role for Hispanic women, as characterized by *marianismo*, was to run the household, raise the children, and take care of others. The struggles of Latinas who wish to keep cultural traditions alive while seeking to integrate career and educational goals are explored. Latinas fight oppression in the United States on a variety of levels, within the family, and on a larger societal scale. Myths and stereotypes are exposed as the diversity of women's lives are understood. Case studies and personal experiences display the diversity of Latinas and portray the implications for therapy. Family therapy is highly effective, even with Latinas who seek therapy for themselves, as the family relationships are always present in the room and interwoven in the therapeutic dialogue.

### **Part II: Focus on the Therapist**

Chapter 4, "Culture Clash or Not?" coauthored by Gabrielle Carey and Laura Manuppelli, describes interviews with therapists of different ethnic and cultural backgrounds, which yield some interesting opinions and answers to this question. The factors of importance in working with Hispanic families are debated and described. The authors argue for the necessity of examining one's own cultural presuppositions and prejudices. The need for cultural training and experience treating Latino families is growing.

Chapter 5, "Supervision and Consultation with Latino Therapists," written by Gonzalo Bacigalupe, focuses on the roles of supervisor and supervisee considered in terms of gender and cultural influences. The author outlines some basic themes that emerge when dealing with collaborative and postcolonial perspectives in supervision and consultation. Cultural sensitivity on behalf of supervisees and the ability to supervise with a culturally resonant lens are the important factors in cross-cultural supervision. Collaborative approaches open new ways of exploring any culture.

Chapter 6, "Group Psychotherapy: Adolescent Latinos," written by Cynthia de las Fuentes, explores the effectiveness of group therapy with Hispanics. Groups play an important role with adolescents who need to understand who they are and where they are going. Adolescents need support, and if the family system is not helping them, groups can help them to adjust and become what they are capable of becoming. Groups are particularly useful in preventing future problems. Examples, rationales, and techniques are presented. A group case study illustrates adolescents struggling to learn and grow from each other.

### **Part III: Clinical Issues: Healing Relations**

Chapter 7, "The Hispanic Couple in Therapy," written by Thelma H. Duffey, views the nature of intimacy as the quality of the relationship. The author explores the search for intimacy and satisfaction among Hispanics in the United States. A case study that involves a professional couple illustrates the benefits of marital therapy for negotiating conflicts that arise within a multicultural couple context. Using a theoretical model, in this case, an Adlerian model, as a base for cultural assessment can be a very useful mode of working with couples and their cultural differences. New opportunities for women and minorities along with the changing U.S. economy present unique problems for Hispanic couples and therapists who work with them.

Chapter 8, "Life-Cycle Development, Divorce, and the Hispanic Family," written by Randall R. Lyle and Flor Faure, presents a new life-cycle development model and illustrates the way in which it can inform the therapeutic process. The structure and definition of the Hispanic family is changing dramatically. This model offers a more

fluid and accepting conceptualization of family development. Intimacy through communion as well as identity through separation provides a backdrop for working with Hispanic families throughout their developmental milestones and crises. A case study involving divorce is used to portray the way the model can enhance the therapeutic process.

Chapter 9, "Therapeutic Sensitivity to the Latino Spiritual Soul," written by Rosendo Urrabazo, describes how religious influences are intimately entwined in the Latino cultures. The importance of religious influences to the Latino family is examined. The author explores the immigrants' plight in searching to belong in a foreign country and how belief in God and church offers a beneficial resource. He explores ways spirituality enters the therapeutic conversation and how a therapist's perspective can help affirm healthy responses for Latinos.

Chapter 10, "Healthcare Today: Treating Hispanic Families and Children with Chronic Illnesses," coauthored by Heather J. Ambrose, Maria T. Flores, and Gabrielle Carey, is grounded in the first author's research with Hispanic families who had recently had a child diagnosed with juvenile *Diabetes mellitus*. The chapter contains several examples of clinical work with chronically ill children. Although the diseases are very different, there are many similar factors in the family's therapeutic processes. It is cost-effective to provide family therapy and to work collaboratively with others in the healthcare field.

Chapter 11, "Injustice in Latino Families: Considerations for Family Therapists," written by Yvette G. Flores-Ortiz, sketches for us a view of how violence and culture can take on distinct twists and how culture can be lost in violence, drugs, and alcohol. She offers a model to predict familial violence and ways to work with abuse in families.

Chapter 12, "A Multisystemic Look at Mexican American Gangs: Adolescents at Risk," written by Lucille Marmolejo Romeo, looks at the widespread phenomenon of Mexican American gangs in the United States. Who is a member? The author argues that a broad, multisystemic view of our society is conducive to understanding the Mexican American gang member. She helps us see how identity crises in youth create a desire to join a gang in which they find a voice. The author employs a variety of lenses to explore the history and the attraction of gangs and ways in which therapists and other mental

health professionals can collaborate with law enforcement and community groups to combat the problem.

#### ***Part IV: Hispanic Families in Acculturation***

Chapter 13, "Acculturation and Family Therapy with Hispanics," written by Cynthia Diez de Leon, explores how the forces of acculturation produce great changes over time and for each new generation of Hispanics born in the United States. The differences in first-, second-, and third-generation Hispanic families are outlined, and the implications for therapy are presented. How acculturation is manifested in behavioral, emotional, and cognitive levels of functioning is addressed.

Chapter 14, "Demographics: Hispanic Populations in the United States," written by Maria T. Flores, provides current statistics and forecasts about Hispanics in the United States. The need for culturally resonant therapy is growing. In order to gain a basic understanding of Hispanic families and their cultural realities, the author suggests therapists explore their clients' country of origin, present location, social contexts, and economic needs.

In summary, this book provides a broad clinical perspective that will help therapists working with Hispanic Americans in the United States. Our focus on clinical studies was deliberate to help therapists struggling to find treatment approaches helpful to working directly with Latinos. The voices of Hispanic therapists working with Hispanic clients and families are an important beginning to helping other therapists from different cultures understand cultural concepts and issues. Research in this area is limited, and clinical work with Latinos is even less accessible and needed. We hope that this book is the first of many books that will focus on the treatment of Latino Americans in family therapy. This text can provide a guide to professors searching for a textbook to help students grapple with the tough issues of working with another culture. Clinicians who want to expand their repertoire of skills and general knowledge of Latinos in the United States will also find the book useful. We are aware that this work is somewhat limited in depth and breath because of the lack of intense research or training being done in this area. However, our contributors present many key ideas and original concepts to help guide us on our journey toward cultural resonance.

## **ACKNOWLEDGMENTS**

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## *El Latino: Transgressing the Macho*

GONZALO BACIGALUPE

*What's a man without a family? Nothing.*  
—OSCAR HIJUELOS, 1989

People's strengths play a central role for postmodern practitioners of family therapy, especially those who espouse solution-focused psychotherapy, collaborative language approaches, and feminist relational therapies. Strengths are also important in recent organizational behavior models, in participatory research, and in the popular education models of Latin America and Africa. Practitioners of all these approaches question the status quo. One major assumption is that having more confidence in the future depends on gaining a better understanding of people's strengths and their capacity to change. Postmodern professionals believe solutions are found in collaboration with others.

In contrast, the research and clinical literature emphasize a rather pessimistic perspective concerning the roles of Latino men within the family and within the therapeutic system. A review of the literature in psychology and the social sciences shows that deficit models prevail as ways to construe knowledge about Latino or Hispanic men. Latino

men appear as deficient individuals who lack something, or who are embedded in contexts of oppression, in which they usually play a negative role as victim or oppressor.

What can practitioners learn from this research? How do the dominant discourses about men shape our therapeutic practices and affect our own discourses with this population? I must question myself. As a well-educated Latino man, with a reportedly successful, professional, and academic experience, and as a recent immigrant to the United States from Chile, what questions do I find relevant? Anyone who works with Latinos might ask these questions. In addition to questions that deconstruct ideas we take for granted or ideas we have construed as the *truth* regarding Latino men and their families, what else needs to be asked?

### THE SOCIAL CONSTRUCTION OF DOMINANT DISCOURSE

Taking an affirmative postmodern perspective (Rosenau, 1991), and, more specifically, a social constructionist perspective of family therapy (Anderson, 1997; Friedman, 1995), I struggle with the constructed *reality* of multiple oppressive discourses that inscribe Latino men. Considering that “what we focus on becomes our reality” (Hammond, 1996, p. 20), there is a wealth of ideas and questions yet to be raised. We can question the status quo and create new perspectives that appreciate the heterogeneous quality of the subject at stake. This chapter is what Bakhtin (1981) calls heteroglossic text, a critical, although incomplete reading of the socially diverse and competing discourses in this author’s experiences and in the literature on Latinos.

The construction of the social discourse about Latino men and Latino families is a joint activity carried out by hundreds of men and women writing about Latino men and by those whose lives are inscribed by these texts. Although a joint activity, the construction of these texts has not been dialogical. The authors have not entered a communal discourse. The men and Latino families have not participated equally in defining the social identities represented in the literature. Written texts contain many voices, although not all are public or present.

In listening to those who have been silenced in texts that speak of them, I join a postcolonial perspective that emphasizes the hetero-

neous nature of any text or social organization. We explore the assumptions of those who investigate, treat, evaluate programs, educate, and produce knowledge regarding Latino men. We hope to deconstruct the notion of “Latino inscribed in a model of deficit,” while bringing to light the multiple, complex, and slippery theme of Latino men in families and family therapy.

### El Latino

The Latin American men I describe in this chapter are from South and Central America, and some of the Caribbean countries. Although I have decided to focus on those men whose Hispanic heritage is hegemonic, I consider men from Latin America who speak Portuguese, French, Dutch, or other European languages Latinos. Those who speak Native American languages, indigenous to Latin America, are also considered Latinos. The observations developed in this chapter refer to all those who came from Latin America, or who have links to ancestors from Latin America.

I am a biased observer, a writer who emphasizes the exploration of multiple discourses and the effects of these discourses on people’s lives (Bacigalupe, 1995). This article was inspired by questions about Latino men and their role in a book on the diversity of Hispanic families. The literature in family therapy has paid little attention to the subject of Latino men in families. Reviewing the major journals of family therapy is disappointing if one wants information on this theme. The topic of Latino men in families and family therapy is virtually invisible. This chapter addresses some of the ways to frame the therapeutic process when working with Latino men. I hope to offer an alternative, to take some distance from approaches that define *for* Latinos “what needs to be done.”

### Labels and Definitions

As we question the effects of creating discourses regarding Latino men in families, and in family therapy, it will be useful to agree on some working definitions. Family is a construct designed to help us understand how people live within a web of intimacy. It is a story about how individuals survive and thrive in that web where struggles of gender and power are central. Family therapy is defined as an approach that emphasizes a relational understanding of clients and

characteristic ways of carrying out therapeutic conversations with individuals or groups of people.

Some of the questions family therapists might ask are: (1) Can therapists describe and define the intersection between Latino and man without resorting to stereotypical and all encompassing descriptions? (2) How do we challenge internalized conceptions about the role, position, and power? (3) Are we reconstructing a definition of men that reproduces heterosexist, patriarchal biases (Jardine & Smith, 1987), addressing masculinity in universal terms while neglecting racial and cultural variations? or (4) How do we integrate an affirmative and dialectical practice in the treatment of Latino men?

So, what is *Latino*? Like many terms that describe groups of people, *Latino* or *Hispanic* includes men from cultures and societies that share characteristics, but show a tremendous amount of internal variability. *Latino*, *Hispanic*, *American* and other more localized terms like *Chicano* and *New Rican* are just a few of the terms suggested to label the group. Latin Americans in the United States are a heterogeneous set of groups and communities. Although we have some common internalizations about being disadvantaged minorities in the United States, not even our language is shared by all. *Hispanic* and *Latino* are language labels that evoke struggles and create specific realities for each participant in a therapeutic conversation. The labels not only pose rhetorical problems to researchers and clinical practitioners, they are the source of psychosocial and existential conflicts for Latinos.

The constitution of self is a social event and the reality of our Latino identity is constituted in imaginary and always evolving *novelas* (Bacigalupe, 1997). Clinicians, researchers, and administrators need to recognize the diversity of Latinos and of Latino men and their contexts. Latino men live in very different contexts and even one individual in a family may experience contexts that the others in the family do not experience. Some groups of Latinos do not interact with each other due to language, ethnic, or racial barriers, but most are disconnected by economic differentials that result in residential segregation. Race, social class, and the history of immigration are key factors that differentiate the experiences of Latinos in the United States.

What are the themes and images that create the reality of and about Latino men? What is the image of Latino men in the United States? I find these questions relevant since the therapeutic encounter occurs in the context of wider social relationships, and family therapy

may recreate the same social relationships that exist "outside" the clinical context. What does recent research discuss concerning Latino men, their families, and family therapy? These questions are framed differently, depending on who is the researcher, writer, or clinician attempting to define these categories. Ideally, I conceive a situation in which these researchers, writers, and clinicians take hold of their assumptions and enter into a dialogue regarding the impact of the construction of *Latino* and *La Familia* within the therapeutic conversation.

### **Statistics: The View from the Top**

One traditional but useful tool to describe Latino men and Latino families is the epidemiological study. These sometimes painstaking studies are based on data from a census or large survey and then generalized to the whole population. The results can then be revised to fit Latino populations and supposedly show reliability and validity, statistically. Quantitative studies based on large samples derive "sound and objective" conclusions by quoting statistics about the "reality" of Latino men in the United States (Bacigalupe, 1998; Dimedo, 1980). From this perspective, the relevance of the subject is defined by comparison and contrast. Latino men are defined as similar to other people under the umbrella of *Americanos*, but they are also differentiated as part of a different group: the other—the one that needs categorization. These generalizations fail to acknowledge the diversity of this other.

However, this form of research may introduce us to the U.S. Bureau of the Census (1996) statistics reporting that 10.2% of the population in this country is Hispanic. That is, about fifteen million Americans are "officially" of Hispanic origin. This research attempts to predict future patterns, like the one suggesting that by the year 2050, 22.5% of the United States population will be constituted by Hispanics. If one were to take these studies seriously, a sound conclusion is that the relevance of knowledge associated with Latinos in the United States should have increased proportionally. If more than a fifth of the population is Hispanic, social policies would have to reconsider any long-standing decision based on this dramatic population change. For example, changes in immigration, education, and tax laws, plus business and international treaties, have a direct impact on the way Latino families acculturate, enculturate, and/or transculturate in the United States.

Reportedly objective and seemingly neutral statistical research can support radical changes in the way Latino men position themselves in their families. A more critical analysis demonstrates how a superficial consideration of these statistics can have deleterious consequences and further the unjust conditions in which the majority of Latinos are placed. From a clinical perspective, statistics about income, employment, and housing can inform clinicians not only about the “issues” that may be affecting Latino men, the socioeconomic conditions will enter the therapeutic relationship in complex but comprehensive ways. For instance, there is a strong relationship between the social location of clients and income level with the relationship they may have with the larger system. This relationship will affect a central aspect of the therapeutic relationship: the confidentiality of the therapeutic relationship and the privacy of family life. The larger capacity to control economic resources, the largest the capacity to stay disconnected from social control agents that may attempt to inflict change in the family. Thus, intimacy and secrecy of the family will be ensured by income level.

## GENDERED ISSUES

We Spanish-speaking people live in a language-gendered world. We are unavoidably immersed in the world of gender characterized by oppositional terms for male and female: *el/ella, eso/esa, el/la*. Gender classifications apply not only to people and animals, but inanimate objects and abstract concepts too. The ocean and the sky are masculine, *el mar y el cielo*, the earth and writing are feminine, *la tierra y la escritura*. Using gendered descriptors for all that surrounds us does not necessarily make these objects and abstractions acquire what one might consider male or female characteristics. Yet, the roles of *El Latino* and *La Latina* are clearly defined and differentiated by gender.

Given that our language of reality is oppositionally defined by gender, the nonheterosexual world is noticeable only by its absence in the daily naming of what surrounds people. Not having a “third gender” (Morales, 1996) makes the dichotomy one that may preclude the realities of Latino gays in families and couples. Being a man in the Latino world assumes being a heterosexual male; being manly is not associated with the “nonworld” of gayness. This is so pervasive that

the “strong Latino emphasis on a masculine-feminine gender dichotomy predisposes many Latino gay men to use heterosexual relationships as templates for their own relationships” (Morales, 1996, p. 292). Despite the stigma, Stavans (1996) writes, “homosexuals have been a ubiquitous presence in the Hispanic world . . . they are the other side of Hispanic sexuality, a shadow one refuses to acknowledge—a ‘they’ that is really an ‘us’” (p. 155).

Most Latinas who live or have lived with a Latino experience him as participating in structures of domination at home. In most cases, this experience of domination reflects the Latino’s reaction to the lack of access to a higher status in a social milieu.

*The public/private distinction is relevant only for the white middle and upper classes since historically the American state has intervened constantly in the private lives and domestic arrangements of the working class. White feminists’ concerns about the unhealthy consequences of standards for feminine beauty, their focus on the unequal division of household labor, and their attention to childhood identity formation stem from a political consciousness that seeks to project private sphere issues into the public arena. Feminists of color focus instead on public issues such as affirmative action, racism, school desegregation, prison reform, and voter registration—issues that cultivate an awareness of the distinction between public policy and private choice. (Hurtado, 1994, p. 145)*

A majority of Latino males live within the constraints of poverty, unemployment, and blatant racism. Latino men, however, independent of their social class upbringing or actual status, are challenged in the United States by the increased demands for gender equality and feel their status is threatened by these changes (Davenport & Yurich, 1991). They feel that their sense of masculinity and their role as provider are in danger. Latinos resent the change and react in a number of ways. Some are privileged enough, like some middle-class and upper-middle-class men, not to feel the need to change. Others have partners who continue to pretend that the social context has not changed. Some Latinos threaten their female partners. Usually, the recent immigrant continues to interact with others as if he were still back home. If that role is threatened, he may resort to aggression, threats, or other forms of overt control and power.

## Gender Roles

A married couple, both graduate students, and their teenage daughter sought family therapy for assistance in parenting. This case demonstrates how those who are recent immigrants have difficulty changing their relationship in response to their new context:

### *Case Study 1: Parenting While Acculturating*

Ricardo and Marta were arguing about how to discipline their teenage daughter who refused to do chores until “everybody at home did their part.” Their daughter was raised with a firm sense of fairness and democratic values. Her experiences visiting her classmates’ homes in which fathers had a more active role at home made her more aware of the inequalities at home. However, the father could not see the value of her statement since “everybody at home is doing what we have always done.” In therapy, we listed each family member’s chores, clarified responsibilities, and defined some new arrangements.

The following week, Ricardo expressed pride in how everybody did his or her share. But, on further inquiry, Marta admitted she was covering for him. Ricardo could not let go of rules that prevailed in his home country, where men would not do chores at home or would not admit they did. Socially, Ricardo was not adapting to contexts that were different from his country of origin. In the eyes of the members of the extended families, changing his behaviors or beliefs about gender roles would jeopardize Ricardo’s dominant role. Marta’s mother-in-law accused her of lacking the strength to adapt to the new American ways. In her opinion, Marta was not a good wife and mother if Ricardo helped out with “women’s activities.” It was a sign that her daughter-in-law was too demanding and not supporting her husband.

Gender arrangements that resemble the traditional roles in Latin America are difficult to change, even if men believe their socioeconomic position to be underprivileged. It is not women working out of the home that makes the difference; most Latin American women have always worked outside their homes, in addition to maintaining the full array of household chores and management. The difference is in the perception of who should be in charge and who is construed as more important in the marital relationship. Even if the extended family is not nearby, the family’s traditional values exert a powerful influence. This is particularly true for those who emigrated without their extended families; the power of the extended family reaches be-

yond their physical presence. Memories and family myths, combined with limited contact, act as a continuous reference to how lives should be lived and thus how gender arrangements should work out.

Paradoxically, Latina women have been socialized to feel that they are spiritually superior to their men and thus able to endure the pains of their less enlightened partners. Espin (1985) has suggested that Latinas have been socialized to believe that men are both indispensable and undependable. This is part of the *marianista* code (Garcia-Preto, 1996; Montecino, 1991; Stevens, 1972). Considering the metaphor of who takes responsibility in a relationship (Bepko & Krestan, 1985), men are abusive and seemingly in control of the relationship, but the definition of the relationship relies on the women who, as a Latina therapist reported, “let the guy misbehave since he is unable to handle the complexities of life.” Reported beliefs may be concordant with patriarchal ideas, but wives may challenge that dominance on a behavioral level. What appears to happen compared to what actually happens can bewilder researchers (Baca Zinn, 1979) and therapists alike.

## MACHISMO: CHALLENGING STEREOTYPES

The term *machismo* is often employed to explain the violence that Latino men exert over women, although the dynamics of gender violence are found throughout the world. Denis, Brandt, Fand, and Quiroz (1993) suggested that *machismo* is the underlying element in the violence exerted against women. *Machismo* is an ideology that affects everybody—an expression of power that provides benefits for one group over others. She compares it with racism and classism because it sustains inequality—the power of men over women. According to Quiroz, the physical violence inside the home is an expression of a greater social violence against women and minorities in society.

## *Men, Women, and Power*

When men are oppressed by power relations at work and in the community, they, in turn, come home and oppress their wives. This *machismo* ideology immobilizes women who complain. They feel ridiculed for their attempts to fight back. *Machismo* is characterized by expressions like: “Women like to be beaten.” “She must have done

something to deserve a beating." "The man who loves you is the one who hits you." *Machismo* ideology spreads the belief that men are violent because they are "crazy, alcoholic, uneducated, poor, or from underdeveloped countries." These expressions narrow the scope of the problem so it is perceived as an issue that affects only some individuals and not others, and makes unequal gender arrangements invisible. When used to explain power dynamics, the original meaning of *machismo* is distorted.

Traditionally, *machismo* was utilized as a label to name the efforts that men make at being in charge of the well being of family. In a recent research study about masculinity and *machismo* in the Latino culture, Mirande (1997) found a complexity of patterns. "Latino men are internally diverse, so that intra-ethnic differences are perhaps as great or greater than interethnic differences" (p. 114). Utilizing a conventional, unidimensional conception of Latino men obscures their differences. And yet, "The assumption that acculturation and greater exposure to the dominant culture leads to rejection of traditional conceptions of gender and the male role was not supported by the findings. The findings suggest that there is a distinct Latino cultural ethic, surrounding masculinity and fatherhood that is radically different from dominant American conceptions (pp. 114–115).

### **Diversity versus Generalization**

Clearly, some generalizations may apply, but one must also examine diversity among individuals. Mirande's study (1997) backs up findings by others. Baca Zinn (1995) and Zavella (1991) recognize that gender is a basic organizing principle of society and "no assumption about Latino families is more deeply ingrained than that of male dominance." However, studies "found that Mexican American families exhibited many different patterns of marital decision making" (Baca Zinn, 1995, p. 182).

In family therapy (e.g., McGoldrick, Giordano, & Pearce, 1996; McGoldrick, Pearce, & Giordano, 1982), as well as in traditional anthropological studies, men have been described within the constraints of ethnic and cross-cultural perspectives. Cross-cultural approaches generalize after careful disclaimers at the beginning of the texts, in which Latinos are initially defined as heterogeneous, but end by focusing on similarities.

Roschelle (1997) reviewed the traditional studies on Latino families based on the culture of poverty paradigm. The studies contain assumptions about Latino men that are biased, predicated on a white, middle-class, normative model.

Underlying this approach is an assumption of the superiority of white, middle-class culture and the devaluation of all other family forms (Staples & Mirande, 1980). Studies focus on male dominance and female passivity as the key to explaining Latino family disorganization. Chicano families are presented as radically different from the dominant (presumably egalitarian) Anglo American family. The primary focus of this perspective is on the debilitating effects of *machismo* (the spiritual, physical, and sexual domination of men over women). Social and economic inequality experienced by Chicanos is blamed solely on the patriarchal structure of the Chicano family (Mirande, 1985). In fact, it is argued that *machismo* produces maladaptive pathological responses in Chicano family members (Mirande, 1997, pp. 8–9). Mirande (1997) posed the need to search for a variety of masculinities and thus ways of being male among men.

### **Macho o Machismo?**

Morales (1996) noted a distinct difference between *machismo* and *macho*,

*Machismo* refers to a man's responsibility to provide for, protect, and defend his family. His loyalty and sense of responsibility to family, friends, and community make him a good man. The Anglo-American definition of *macho* that describes sexist, male-chauvinist behavior is radically different from the original Latino meaning of *machismo*, which conveyed the notion of "an honorable and responsible man." (1996, p. 274)

In my experience, when I ask graduate students, clients, clinicians, and peers, "What do you associate with being Latino?" The words *macho* and *machismo* emerge as negative descriptors. The therapist, De La Cancela (1986, 1990) questioned the concept of *machismo* as the central descriptor of Latino male behavior and identity. *Machismo* and ideas about masculinity among Latino men serve to perpetuate negative conceptions and myths of Latinos and legitimizes economic and political subordination.

An associated myth is the assumption that Latino men are more violent and aggressive than the dominant race. I found Martin Espada's writing inspirational. He writes,

*Latino males in this country are in fact no worse in that regard than their Anglo counterparts. Arguably, European-American males have set the world standard for violence in the twentieth century, from the Holocaust to Hiroshima to Vietnam. Yet, any assertiveness on the part of Latino males, especially any form of resistance to Anglo authority, is labeled macho and instantly discredited. (1996, p. 88)*

Despite the biases demonstrated in social science research, which seems stuck in the intrinsic association between Latino man and *machismo*, there are men who fight the *machismo* set of values. Shorris (1992) writes, "The venerable rules of *machismo* require that a man have some effect in the world. . . . For the lack of it men behave as if they were mad" (p. 438). In defining us by *machismo*, *El Latino* becomes another very general category that says less about the particulars of that individual.

## TRANSGRESSING THE MACHO

*To be critical of one's culture is not to betray that culture. We tend to be very righteous in our criticism and indictment of the dominant culture and we so often suffer from the delusion that, since Chicanos are so maligned from the outside, there is little room to criticize those aspects from within our oppressed culture which oppress us.*

—MORAGA, 1986, p. 180

A systemic view emphasizes contexts. The problems that Latino men present in family therapy occur in context. Context includes the nuclear family, the extended family and intergenerational stories, the neighborhood, the agencies that provide services, the work environment, and any other significant participant in the lives of these men. It also includes the belief system of each of the cultures the men have been immersed in, past and present. Finally, it encompasses some of the effects that the broader context has on the males at the

intersection of racial, gender, and economic systems. Latino men and women do not exist in isolation. We Latinos coexist, affecting others and being affected by those in the world around us. The issues described in the previous pages reflect the evolving, changing, and complex contexts in which Latino men are immersed and have a direct impact in the ways therapists engage with them.

## *Immigration and the Impact of Economic Changes*

The immigration process is a central marker in the family lives of Latinos. If Latinos have lived through generations in the United States, stories of their ancestors' immigration forge a distinctive identity for the family. Authors can rescue some of these significant stories. Our identity as Latinos is shaped by our memories of growing up and our making sense of the social conditions and struggles of our parents. Therapists who access these tales will find a wealth of diversity among their Latino clients. They will introduce a different nuance into the therapeutic conversation.

My observations refer to Latinos who come from or have links to the Latin American continent. There are those men who may not only sustain themselves and their families, but their extended family in Latin America. There are Latinos who speak little or no Spanish and/or have never visited (nor will they) their parents or grandparents in their home countries. One aspect that seems to unite them is how their psychosocial identity has been shaped by the experience of immigration and a new label that encompasses not only their country of origin, but a whole continent. This awareness is not experienced in the daily lives of Latinos in Latin America who experience themselves as belonging to one country rather than a continent. Many second- and third-generation Latino men and their families thrive in a capitalist environment and participate in the structures of power. Yet, others continue to suffer from the inherent social inequality fostered by advanced capitalism. If our families were here when the United States government expanded to the South and West, our experiences will take a particular form that will differ from the experiences of those Latinos who have recently immigrated and find themselves integrated or marginalized into a vast, undifferentiated, conglomerate of "people of color."

Structural economic shifts, the growth of service jobs, and the elimination of manufacturing positions affect Latinos and people of color in disproportionate and acute ways compared to white workers. These changes reorganize or reinforce the cultural changes associated with immigration and the way traditional gender arrangements are challenged. Thus, economic changes will have a great impact on men and their families after they adjust to some of the challenges faced in the process of immigrating to the United States. What Baca Zinn (1989) describes as the "opportunity structures decline" will foster a traumatic transformation in families and in the roles men play in families. This structural shift will separate working-class or poor males from those who constitute the middle class and move to the suburbs or better-off neighborhoods. This structure will also create further schisms that may have been challenged during the time of immigration due to exile, the search for educational opportunities, and/or better economic opportunities.

The socioeconomic schism that existed in Latin America will be reproduced in the United States. Men from distinct social classes will not get together and may not even see each other. Considering the upward mobility myth of United States society, Latinos will not have access to the networking opportunities created by the few who are successful. Those men who are successful will be disconnected from the plight or experience of those who are less able to make it in the system with the exception of those who make their work or political commitment the betterment of Latino communities independent of social upbringing.

Roschelle (1997) cautions us about the pervasive myths of the reportedly impressive support Latinos provide for each other, "the informal social support network typically found in minority communities are not as pervasive as they were in the past" (p. xi). The myth of network support or the *compadrazco* system is much more a goal to achieve through clinical interventions, as it may have little connection with the reality of isolated individuals and families boxed within the constraints of economic hardship, urban decay, hostility, and the uncertainty of immigration status in the United States. This lack of connection, or participation in support networks, undermines ingrained ideas about solidarity held by men in Latin American culture. Feeling a continuous pressure to perform, earn, and make it in America alienates Latino men from friends and family. Substance abuse, violence,

gang-related activities, and other destructive lifestyles might actually be attempts to reconnect.

The perspectives of therapist and client regarding a problem are influenced by their reference points concerning economic hardship. Any clinical, educational, and preventive program should take into account the effects of social class and lack of access to economic resources in designing services. Despite conditions of poverty, it is not unusual to find clients who lack an understanding of these issues. This is especially true for more recent immigrants or migrant farm workers, whose "pattern of identifying serious problems may reflect respondents' use of Mexican poverty conditions as a referent point. Life difficulties in the United States may be assessed as not serious when viewed in relation to experiences in Mexico" (Zambrana, 1995, pp. 96-97). This may partially explain why therapists see so few recent immigrants in their offices and agencies.

The following is an example of how economic inequality hinders Latino men's full participation in counseling opportunities. In Massachusetts as well as other states in the United States, men who are found guilty of abusing their partners are mandated to attend a domestic violence program that focuses on issues of accountability and responsibility. The men demonstrate they are accountable by regular attendance to a batterers' group and payment of the fee. Making men accountable for the violence and for being safe to others is a laudable goal. For Latinos, however, the group fee may be an added burden to a community that has little access to resources. An implicit cultural assumption of capitalism is that income is directly associated with moral worth and accountability. Yet this dominant discourse directly contradicts some core values of many Latino men.

### Dignidad

*Dignidad* (dignity), a core value, is a social agreement that may have a stronger relationship with accountability than the capacity and willingness to pay a fee. For many Latino men, the internal qualities of the person demonstrate one's worth, not one's behaviors. Financial constraints may prevent Latinos from demonstrating accountability but will not detract from their internal dignity. However, society's reaction may serve to discriminate against Latino males, silencing the difficulties they have in obtaining and maintaining jobs. This example

illustrates the need to look beyond our own taken-for-granted cultural discourses to understand people of other cultures.

Another constraint in demonstrating accountability can result from the distance between Latino communities and the services needed. Many Latinos have to travel greater distances to attend the sessions than others. Placing programs directly in Latino neighborhoods will help alleviate this problem. And, as I suggested for one batterers' program that was trying to expand its services to the Latino community, demanding a monetary fee could be replaced by other forms of accountability, such as community service. This solution has a double effect: It increases the batterer's accountability, and the payment of the "debt" aids the Latino community. Ideally, the organization or program transforms its clients into active founders of the Latino services.

### CONSTRUCTING COLLABORATIVE CONVERSEMOS

A systemic approach can be defined by its relational emphasis that can be translated into considering reality as socially constructed (Gergen, 1994). Accounts of the world, from this perspective, are embedded in social practices and thus "a critical question to be put to various accounts of the world is what kinds of practices they support. Do they enable us to live in ways we hold valuable or do they threaten these social patterns?" (p. 130). The aim of social constructionist researchers is *destabilization* by focusing with "acute sensitivity to the perspectives of other peoples and times" (Gergen, 1994, p. 137). But, the work of social science as briefly related before tells us little about the specifics of how to carry on therapeutic conversations that will move men forward toward a more just relationship in their families and with themselves. What follows is an account of therapeutic practices within the greater domain of systems work, an approach that attempts to destabilize taken-for-granted ideas held by clinicians and their clients.

#### *The Culturally Resonant Therapist*

There are excellent examples in the family therapy literature about how to introduce cultural competency in family therapy work. Dyche and Zayas (1995) and Falicov (1995) provide outstanding guidelines in

this regard. Practicing family therapy within the Latino community is not ensured by "right matches" between the therapist's and client's cultures. A Dominican therapist working with a family from El Salvador would be working cross-culturally. Within this difference exists both the potential for an enriching therapeutic process and the danger for potential misunderstandings and alienation. Believing only in similarity may obscure the differences, thus obscuring the complexity and multiplicity of worlds that exist among Latinos. Curiosity in the process of knowing the client will be balanced by exploring commonalities. These commonalities should also be acknowledged. For instance, the immigration process can be viewed as one experience rather than multiple ones, allowing for the sharing of the same media outlets, choices of code words, and so on. If the therapist draws from an ethnic perspective, some shared normative cultural values emerge (Morales, 1996). However, a position I find that fits better with a collaborative stance is to understand Latino men from a minority perspective that "uses a conflict analysis rather than culture as a focus" (Ginorio, Guitierrez, Cauce, & Acosta, 1995, p. 242).

#### *Accepting Initial Ambiguity, Listening, Advising, and Reflecting*

Instead of developing culturally specific therapies, therapists have addressed the issues of members of marginal groups by reframing them as individual problems arising from the psychology of an oppressed person (Hurtado, 1994, p. 145). Ethnic and racial political leaders fight vehemently against the use of therapeutic treatments that depoliticize and individualize their concerns. On the other hand, individuals like to be recognized. In this chapter, names and other identifying variables have been changed. When I tell my clients about including their histories in one of my writings, they show interest and feel proud of their inclusion. However, when I tell them I change their names and keep our conversations confidential, some reject this anonymity. They want to stand for their story and feel awkward about concealing their real names.

#### *Reconnecting: Case Study 2*

Juan was referred to psychotherapy while attending an in-patient alcohol treatment program, in which he was the only Latino patient in

the facility. He found access to one bilingual case worker who referred him to me, as the only male bilingual therapist in the community mental health clinic. I worked with Juan for a year and a half on a biweekly basis. Juan, who was 46 years old, had abused substances for more than two decades. The case worker described him as "always angry and paranoid" toward his peers in the recovery treatment center. Juan's perspective was that many of the patients in the treatment unit belonged somewhere else, "*están todos locos ahí*" (they are all crazy there). Juan came from a rural area of Puerto Rico to the United States after being abandoned by his wife because "he was a drunk" with little hope for recovery. He lived with friends in the streets or in homeless shelters, and he did not think about connecting with his family.

During most of our therapy sessions, Juan maintained a reserved tone and did not disclose his inner thoughts. When speaking about his daily routine in the residential facility, Juan seemed "factual" and perceptive about the actions of others. As we developed a relationship, he more readily shared his thoughts about his interactions with peers. He was able to observe himself and became more accountable for the problems arising in his relationships with others. Still, he remained physically marginal with his peers, characterizing them as less human and lacking basic social skills.

In counseling, I helped him develop skills to stay in a skills training course that would help him find work and, later, keep a regular job. In the process, he began recognizing the need to reconnect with his family and relatives back in Puerto Rico. Any question that directed his thoughts to his own impact on others was met with a mix of indifference, anger, and silence. I provided advice on "experiments" he could carry with his peers that may have allowed him to reflect on his own ways of constructing his social reality at the time. By resolving some of the interactional problems, he began to think about reconnecting with his family and establishing links between his actions and of those who "abandoned" him.

### **Personal Confidences**

Certain conversational practices are contradictory to Latino values. Contrary to popular brief and solution-focused therapies (Berg & Miller, 1992; Cade & O'Hanlon, 1993; de Shazer, 1991; O'Hanlon &

Weiner-Davis, 1989; White & Epston, 1990), it may not be necessary to set clearly defined goals at the outset of therapy. A therapist who can accept a lack of initial historical information and an ambiguous initial goal will be more successful at joining and engaging Latino men in family therapy. In general, within the Latino culture, therapists and researchers may find it difficult to gather information, because some groups believe certain data about "family matters" are "not to be shared with strangers" (Zambrana, 1995, p. 97).

In my own experience with clients, and in the experience of those therapists I consult or supervise, Latino men often appear to dominate family conversations, limiting the topics discussed. They are reluctant to disclose personal information, share "deep feelings," or submit "to a situation in which they perceive themselves as helpless and weak" (Torres, 1998, p. 21). In the Puerto Rican culture, several assumptions concerning psychotherapy "are inconsistent with Puerto Rican values, particularly among those who are bicultural or of low acculturation levels. Among these is the view that it is appropriate and beneficial to discuss personally sensitive issues, and the belief that achieving an intellectual understanding of a problem is likely to reveal a course of action that can rectify it" (Torres, 1998, p. 21). Men may dominate the conversation by speaking for other members of the family, by explaining it all, by staying silent, or by being *amurrados* (a complex mix of anger, indifference, silence, and a controlling gaze).

### **Personal Style**

Speaking with men in family therapy may not be easy due to a "familyocentric" style of speech (Castaneda, 1996) that can be defined as the "impulse to speak with fervor, loudly, state things clearly and without hesitation, expecting a vigorous exchange of ideas that has no winners or losers but solutions to problems communally obtained" (p. 38). This style is rejected or misunderstood in the United States and seen as motivated by negative intentions.

In teaching, Castaneda and his colleagues have found this ferocious style circumvents issues and intimidates students. Students may accuse professors of not being nurturing. This same style silences children and women who witness the man of the house speaking forcefully and surely about almost everything. If he is not knowledgeable

about the topic, he will correct others about a detail he may know something about. Frequently, he will interrupt others to establish a conversation on the side, behaving as if he was unaware of the conversation with the other members. On a positive vein, passionate speech is useful during political campaigns, festivals, and other ritualistic occasions. "Yet the underlying cultural code for this way of speaking manifests itself in daily conversations with enough frequency that Anglo-Americans often believe Latinos are aggressive, arrogant, or blustering speakers" (Castaneda, 1996, p. 44).

Familiocentric speech is opposite to the "nurturing" style that may prevail among Whites. Castaneda believes that the latter style is more presumptuous and arrogant because it assumes that we can know the psychology of the other and thus protects the interlocutor from what may be seen as too intrusive. "The Anglo-American speaking style is arrogant, by psychoanalyzing the listener, and it is aggressively intrusive, by attempting to manipulate the listener." From his perspective, the Latino style assumes the listener is positioned on equal footing, "able to hear anything and able to respond freely" (Castaneda, 1996, p. 45). Finally, another characteristic that is common to conversations among family members is that of addressing a larger issue (philosophical, political, community related, etc.) that is not just located in the specifics of a family problem. These conversations may seem "strange" to therapists who may perceive this as a form of indirectness or plain avoidance of the internal family problems.

Engaging in conversation may be more effective if it is based initially on giving "expert advice" at the request of the men and not necessarily exploring the inner interpersonal aspects of the conflict. The therapeutic work is further enhanced if the therapist is willing to offer direct advice and engage actively with the larger system at the beginning of the therapeutic work. It is useful to help clients develop strategic alliances with others rather than fostering the finding of a mentor, a task that can be too difficult because successful Latinos may be overwhelmed by requests for mentoring and support. In sum, a conversational and collaborative approach is reachable if men are given advice within the context of choices and as a commentary rather than direct directive. Being direct may not necessarily mean being directive.

Predicting, understanding, emancipating, and deconstructing (Hindmarsh, 1993) are intertwined practices in family therapy with

Latino men. These practices have differential effects in the kind of services provided. Including rather than excluding questions can move the therapeutic conversation beyond a relativistic apolitical stance that does not acknowledge the social construction and the "real" effects of what therapists and clients construct. That is, having the world be socially constructed is not to say that that category has no significance in our world (Crenshaw, 1994). Like the *mestiza* consciousness (Anzaldúa, 1990), this kind of therapy simultaneously rejects and embraces—so as not to exclude—what it rejects: "It is a *mestiza* consciousness that can perceive multiple realities at once" (Hurtado, 1994, p. 148).

### **Reflecting in Public and about the Public**

Anderson's (1997) notion of reflecting in public is useful. I encourage a reflexive process in sessions that foster the sharing of different voices within the client, the therapist, and the family members (Hoffman, 1993), but particularly in terms of how others in the community and in the family may be perceiving and creating opinions about the client. There are few opportunities for Latino men to obtain constructive criticism in the social arena, that is, without having to defend themselves. There are few opportunities to listen to what others are thinking or their assumptions. Therapy becomes a way of reflecting about those voices that have a concrete impact on the lives of these men. Later on, the reflective process turns to how they are shaping their relationships with those they love, and finally with their own selves.

This reflexive process is rewarding and painful because it may lead men to recognize patterns of racism, classism, sexism, and discrimination, patterns in which they actively participate as victims, survivors, and perpetrators. Thus, they are subjected and powerless as well as responsible and accountable. This polyphonic (Bakhtin, 1981) perspective allows for the sincere exploration of strong biases and difficult themes and at the same time keeps all the statements provisional and ready for further review. This provisional approach deviates from the usual structural attempt at changing what men say in families and instead invites them to consider these ideas and then to acknowledge or construe those ideas in different contexts and realities.

Learning about these men and thus about myself occurs within that sort of dialogue in which tentativeness coexists with a forceful exchange of ideas. It is a dialogue in which acceptance of different voices is balanced with the best of political exchanges in which each participant is absolutely convinced of the truthfulness of his or her political perspective. Client and therapist enter into therapeutic conversations bringing into the session the identities assumed in their daily lives, and within the context of social and economic realities, they influence each other as participants of these contexts, and although they may not expect it, they will affect each other.

### ***Ghostly Guidance: Case Study 3***

Carlos was an unemployed twenty-year-old Puerto Rican man who had lived in a small city in Western Massachusetts for the last three years. He complained of insomnia and was afraid of becoming aggressive toward his wife or other adults. He slept with a knife under his pillow because he believed that someone could break into his house at any moment during the night—a real possibility in housing projects. Yet, most of the time, he talked about his abusive father whom he left three years ago in Puerto Rico.

Carlos repeatedly discussed his efforts in “rescuing” each of his siblings from the abuse of his father. Although he was the emergent “leader” in his extended family, he was virtually powerless in his daily life. After three to four months of discussing his story, he began to pay attention to his own needs, as well as that of his family. He realized how restrained he was becoming in his role.

During one session, I asked him to write to some of the people who had been important to him while he was growing up. It was a difficult task because he could not focus on getting in touch with his relatives until he told me the story of his sister. She had been murdered by her husband the year before. At that moment, it was important for me to point out the connection between the unacknowledged grief and sadness, and the connotation of a “manly” behavior in the Latino culture. Despite this conversation in which he understood that the roles given to men in his particular culture were keeping him from exploring important emotions, he was caught up in the idea of taking revenge instead of experiencing his inner pain. Later on, he was able to report, in a more specific way, what was happening at home. I asked

him, “If a healthy ghost entered your house for a day or two, what would it report to us in a session?” “If I were invisible and I were visiting your home, what would I see?” “If you were to join me and share your thoughts at that moment, what would strike you?” These questions facilitated a conversation between his wife and himself and his brothers concerning stereotypical Latino roles. The questions were not threatening to his sense of manhood, although they accounted for his feelings. In addition, they were mediated by a fictionalized or “unreal” companion. The conversation integrated the spiritual aspects of Carlos and his family’s beliefs. The ghost was transformed into a spiritual guide that he could “control” and attune to his family and individual needs each time he needed to reflect on his problems.

In therapy, the telling of stories about ourselves is not trivial because stories constitute and actively shape our lives by specifying our psychological identities and location in the larger social context (Bacigalupe, 1990; Roberts, 1994). What I have learned in accounts provided in supervision, clinical meetings, professional videotapes, and in discussions with peers is that the way the stories about Latino men are told and the way therapists listen to them—the context of the telling—can affect the quality of the therapeutic relationship and its effectiveness.

### ***Weaving Conversations with Men into Family Therapy***

In my experience, there is at the core of the clinical work a high level of reflexivity in the process of redefining what is considered as the problem and/or the solution. In this framework, the therapist may need to deal with higher degrees of ambiguity as the relationship develops since there is no particular pattern to follow and no “fill in the blanks interview.” Many would agree with the assertion that developing a collaborative relationship is a difficult task, thus many authors bypass this crucial aspect by assuming that the only possible relationship with Latino families implies reproducing a hierarchical therapeutic system as in the structural family therapy approach or modified psychoanalytic approaches. Our challenge is to develop a more democratic relationship to sustain a truly therapeutic opportunity for Latino men. Finding rigid hierarchical decision-making

processes in Latino families does not call for a method characterized by the same features; the process should parallel the desired outcome.

Many practitioners assume that Latino families do not like to be in a reflexive therapeutic context and need to be directed, making the therapist an expert on what well-adapted families should look like. Others have proposed that exploring intergenerational legacies is a useful paradigm to help families connect with their larger heritage and address their need to feel connected and supported. In both cases, the notion that "familism" is common in every family is at stake, as well as the idea that Latinos "are more action-oriented." With these notions, therapists will find that control and manipulation can become the center of the process. In these approaches, the expert technical psychotherapist defines the problems to be resolved by the family or explains how to resolve them.

In contrast, although I find these approaches problematic, elements of them could be useful in some circumstances, since families and clients may need different kinds of relationships that may take diverse timelines and forms. Moreover, as I have written elsewhere, some families will require the therapist to actively engage with the larger system and become an advocate and cultural mediator. Those who can obtain clear results will win the trust of the family and deepen the therapeutic work. As therapists we have the opportunity to introduce the novelty of reflexivity in conversations in the therapeutic arena. In other cases, safety will develop as the therapist witnesses how the story unfolds without expecting immediate changes.

I find it useful to define clear and collaborative relationships with those who referred the family, since they will probably become important players, if they are not already important in the lives of the families. This is particularly relevant in cases in which protective services, the courts, or the schools are involved since decisions made by these entities affect the maintenance of the family. Weaving connections among all potential participants seems like an effective collaborative position for the therapist and those involved in addressing identity markers like racial and ethnic background, religion and popular religiosity, immigration stories, assimilation and integration, alien status, background of clients and therapists, income history, social class and cultural status, history of political struggle and level of alienation, language and bicultural status, health, gender, her/story and history in the context of the family and in the world at large.

In the clinical context, although I am curious about these identity markers, I make no assumptions about the specific connection between identity markers and the experience of Latinos or the way they present their problems. I believe that identity markers can potentially affect clients, but each client will be affected differently. Thus, I am curious, approach it from a nonexpert position, and ask questions about stories I do not know instead of filling in the blank questions with my expected answers.

As in critical historical accounts, I prefer a collaborative and reflexive approach in order to prevent "silencing the past" (Trouillot, 1995). Since stories by Latino men in families are packed with secrets, shame, silences, and oppression, it would be antithetical and unethical to suggest a therapy that only enforces the therapist's discourse. A critically reflexive and reflective listener describes what I believe are the significant characteristics of an effective and ethical therapist working with Latino families.

An effective therapist puts emphasis in social and dialogical participatory processes, and in the recognition of how power struggles are contested in each interaction, even the ones defined as therapeutic. Another important aspect of the therapeutic process compels us to reauthor our clients' lives by working directly with their sense of agency so that they can shape their lives and build a supportive community anew. This cannot be done only "in the minds" of clients. Clients and their families need to develop coalitions to challenge institutional practices aimed at people's disempowerment. A coalition could start by asking clients to participate in as many institutional spaces as possible in the agencies, as well as in the process of creating policies. Finally, the therapist recognizes the multiplicity and alternative meanings that can be relevant in the lives of clients influenced by those who live with the client, the client's communities, as well as those who attempt to listen to their stories.

## CONCLUSION

If, in writing this chapter, I have generated more questions than I answered, I have achieved my purpose. In questioning the nature of difference we embrace a more humane, critical, and reflexive clinical practice with Latino men in family therapy. What I find relevant is

not, "What is a Latino?" or "What is a Latino characteristic or even a Latino identity?" but rather, "What are the relationships between Latinos and others?" and "How do others construct their relationship with Latinos and their world?" Latino men become who they are in the relationships they and others believe they inhabit. Family diversity grows as part of a constellation of social, economic, migratory, and racial patterns rather than as the sole result of ethnic characteristics. An effective therapist listens to the variety and array of voices because clients are at the intersection of numerous of these "variables" as they develop their own agency.

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not, "What is a Latino?" or "What is a Latino characteristic or even a Latino identity?" but rather, "What are the relationships between Latinos and others?" and "How do others construct their relationship with Latinos and their world?" Latino men become who they are in the relationships they and others believe they inhabit. Family diversity grows as part of a constellation of social, economic, migratory, and racial patterns rather than as the sole result of ethnic characteristics. An effective therapist listens to the variety and array of voices because clients are at the intersection of numerous of these "variables" as they develop their own agency.

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