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THErapy WITH INTERCULTURAL COUPLES: A POSTMODERN APPROACH

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ABSTRACT Intercultural couples may present many dilemmas for therapists. It is suggested that ideas from postmodern narrative therapy such as adopting a collaborative, curious stance, generating alternative understandings, encouraging a both/and stance, and searching for liberating traditions within each culture may be helpful with therapists working with intercultural couples

Introduction

Historically, interreligious and interracial dating and marriage have been socially proscribed. For example, in the United States (US), it was not until 1967 that legal prohibitions against interracial marriage were eliminated nationwide. Further, negative attitudes towards interracial dating and marriage have been slow to change. A 1993 survey by the National Opinion Research Center revealed that 20% of those surveyed believed that interracial marriage should be illegal; however, this was down from 33% in 1973. In spite of social disapproval, the number of persons who marry outside of their racial/ethnic groups has been expanding rapidly over the last two decades. United States Census statistics reveal that interracial marriages have increased from 366,000 couples in 1970 to 1,478,000 couples in 1992.

Overcoming social disapproval and negotiating cultural differences may exacerbate the stresses and difficulties in marriages. Given the growing number of intercultural couples and the difficulties they may face, the professional literature has paid surprisingly little attention to this population. There is a growing literature that focuses on multicultural counselling issues (e.g. Pedersen, 1991; Sue et al., 1992; Szapocznik & Kurtines, 1993), which primarily addresses clients who are culturally different from the therapist. Writers who have discussed intercultural couples frequently focus on one dimension of intermarriage, such as religion or race (e.g. Davidson, 1992; Gleckman & Streicher, 1990; Pope, 1986; Sung, 1990). Thus, the focus has been on specific differences between two cultural groups rather than on developing an approach to working with cultural differences in general.

Definitions of couples and culture

The literature in this area usually refers to marital partners, using the term 'intermarriage' to describe this population. For the purposes of this article, the term 'couple' will refer more broadly to two people involved in a committed romantic relationship who share a household, a history- and a planned future. Following Morris (1970), culture is understood as "the totality of socially transmitted behavior patterns, arts, beliefs, institutions, and all other products of human work and thought characteristic of a community or population" (p. 321). The term 'intercultural', rather than the more common terms biracial or intermarried, was chosen to represent the broader range of cultural variables on which couples may differ. While any number of differences (e.g.

SES, age, cohort, immigration status) between couples could be considered cultural differences, we will address differences in race, ethnicity or religion. The reader is invited to consider the application of these principles to other couples as well.

Effects of cultural differences

Cultural differences may affect couples in various ways over the course of a relationship. Initially, couples may face disapproval or social awkwardness with friends and families. In more extreme cases, financial and/or emotional estrangements may occur. Couples often encounter negative reactions in their communities. White members of interracial couples may encounter discrimination and racial hostility (ranging from stares and rude comments to housing discrimination and threats of or actual violence) that was previously unknown to them. Friends and family may infer motives for choosing a partner who is culturally different, such as rebellion, inferiority complex, or denial of one's own cultural group.

Stresses involved in setting up a household may bring cultural differences to the forefront. Potential conflict areas such as sex-role expectations, attitudes towards work and leisure, holiday traditions, expression of affection and problem-solving strategies are frequently culturally based. Disagreement about these issues may take the form of the partners' blaming each other for not understanding or being unreasonable rather than attributing the difficulties to differing cultural traditions. Similarly, parenting styles may reveal cultural differences between partners and affect interactions with extended family members and other social systems.

These problems may present a pessimistic picture of intercultural relationships. However, there are frequently overlooked advantages to such relationships. Couples may learn and grow from the reactions of family and friends. This may lead to deeper involvement between the partners and more thorough preparation as they reflect and discuss the implications of the relationship before making a commitment. The process of negotiating cultural differences may result in each partner becoming more aware, and accepting, of differences. Likewise, the children of intercultural couples may be more accepting of differences in others (Ho, 1990).

Therapy with intercultural couples presents challenges. Like others, intercultural couples may be polarized and expect a therapist to determine which partner is right. As mentioned above, difficulties in the relationship may be mistakenly attributed to personality or emotional problems of one or both partners rather than stemming from cultural differences. Difficulties in understanding may be exacerbated when the therapist is culturally similar to one of the partners. There are few theoretical or practice guidelines available for the practitioner, but Gonzalez et al. (1994) argued that some postmodern therapies may be particularly suitable for multicultural counselling. One such approach will be discussed below and the ideas will be applied to work with intercultural couples.

Social constructionism

Postmodern ideas are becoming increasingly influential in academic disciplines such as art, literature and the social sciences. Postmodernism refers to an intellectual movement away from the belief in, and search for, foundational truths. Some have described this movement as a result of the evolving complexity of our understanding: "...the postmodern Mind is one which... has come to question whether it [reality] is ordered in a way in which man's reason can lay bare" (Smith, 1989, p. 7). Postmodernism has also been described as "...a linguistic theory that proposes that the social world cannot be treated as an objective system" (Pardeck et al., 1994, p. 343).

One postmodern theory that has some influence in psychotherapy is social constructionism. Social constructionism suggests that what we know as reality is constructed through interactions with others (Gergen, 1985). Understandings or meanings that individuals attach to any given behaviour, interaction, or event will be determined by the social and cultural contexts in which they occur. Relevant social contexts could include: family, racial/ethnic group, religious identification, work setting, place of residence, and others. From this position, psychological theories are merely agreed upon understandings which have proven to be useful in one or more contexts (Howard, 1991). As no account or interpretation of reality can be considered more accurate than any other, the focus is on how or when ideas are useful.

Application to intercultural couples

Social constructionism offers unique invitations to providing therapy to intercultural couples. The following principles, drawn from social constructionism, are illustrated with examples of our work with intercultural couples.

Collaborative, curious stance. Therapy from a social constructionistic perspective is a collaborative effort between clients and therapists. Therapy begins by exploring clients' unique understandings and theories about the problems that brought them to therapy instead of assessing how the client fits into the therapist's theories about psychological problems, diagnostic categories and change. Therapists ask questions that are based on a need to know more about what has been said or what is not known. Thus, clients might be asked how cultural differences have benefited and hindered their relationship. The understandings that are created about the clients' situations and the culture arise out of a mutual, collaborative construction of meaning. Therapists

are always aware that the meanings constructed are not the only ones that could be constructed.

Openness and the generation of alternative understandings. A common goal in social constructionist therapy is expanding descriptions and understandings about the presenting concerns. Andersen (1991), in discussing reflecting teams, suggests that observing therapists keep two questions in mind: 'How else can this situation/behavior/pattern be described?' and 'How else can it be explained?' These questions are useful, as well, for therapists who work alone. By asking such questions, therapists may remain open to, and help generate, new possibilities. This contrasts with many conventional therapies, which encourage the therapeutic process to 'uncover' the correct understanding and explanation for clients' situations. By asking themselves and clients 'How else?' therapists create opportunities for new and different understandings. These new ideas may lead to new problem solving strategies.

Anderson and Goolishian (1992) caution therapists not to understand clients 'too quickly.' When therapists 'understand' clients, the possibilities for expanding and creating meanings become limited. Social constructionistic therapists present ideas tentatively, acknowledging that there are many possible helpful ideas. Offering ideas in a tentative manner invites clients to offer their own thoughts and ideas more freely. Tentativeness also promotes a spirit of mutual collaboration in the therapeutic conversation. Anderson (1995) suggests that tentativeness may be conveyed by the use of unfinished sentences or hanging words and phrases such as 'wondering', 'kind of', or 'maybe'.

With intercultural couples, therapists may ask each partner how persons from their cultural background would typically approach or understand a particular situation. For example, the therapist might say, 'I'm wondering if there are differences in how each of your families would view this situation?' Or the therapist might ask if other ideas or explanations had occurred to them.

Exploration of clients' ideas about cause of problem. Client understandings and explanations are valued because of their potential usefulness; not because of their theoretical (or political) 'correctness'. Furman and Ahola (1988) describe interviewing techniques that explore clients' causal explanations or their impressions of others causal explanations. They note that clients often infer therapists' explanations from the type of questions that are asked. Thus, if therapists spend much of the first session asking about childhood experiences, clients are likely to infer that these early experiences led to the current symptoms. It is important for therapists to understand clients' own causal explanations and clients' impressions of the therapists' explanations. Furman and Ahola highlight the need for therapists to display curiosity and to avoid expressing agreement or disagreement with the clients' explanations. Using the client's explanations may lead to more efficient therapy.

View cultural differences as one explanation of conflicts. Therapists may use knowledge of cultural differences to recognize patterns when present, but should not assume the presence of a pattern until it is evident. The dangers involved when therapists have limited knowledge of clients' cultures have been discussed extensively (e.g. Rogler et al., 1987; Solomon, 1992; Szapocznik & Kurtines, 1993). However, making assumptions based on stereotypical cultural patterns can cause problems as well. There are frequent intragroup differences that can easily be overlooked if therapists assume that they are familiar with clients' cultural groups (Sue et al., 1992; Szapocznik & Kurtines, 1993). For example, a Mexican-American couple seen at our university training clinic did not identify cultural differences as contributing to their marital difficulties. However, the interview revealed that the husband was a fourth generation, middle-class, Catholic, Mexican-American. He strongly identified with the Mexican-American community. The wife was a second generation, wealthy, Jewish, Mexican-American. Her religious beliefs were far more influential than the nationality of her parents. Religious and social class differences permeated this couple's difficulties, yet could have been overlooked in therapy had the therapists assumed that similarity on one cultural dimension meant similarities on all dimensions.

A danger in defining behaviours as originating in culture is that the behaviours may be seen as unchangeable. Thus, problems that are attributed to the cultural characteristics of the partner rather than to interactions between the partners may easily escalate into a standoff as to who is 'right' and perhaps, even arguments about which cultural group is 'better'. Therapists must balance the usefulness and disadvantages of cultural explanations. For example, a white woman became increasingly depressed over several years after discovering her Cuban-American husband had been involved with another woman. In her mind, her husband's affair meant that he did not love her. However, viewing his behaviour in the context of his family's culture (his brothers and father all had numerous affairs) allowed her to understand that, for her husband, having an affair had little to do with love for his wife. She was also encouraged to see how her husband was different from his family, because as soon as her husband realized his behaviour was causing her pain, he ended the affair and promised to be faithful in the future.

Encouraging a both/and stance. Anderson (1986) suggests that therapists adopt a both/and stance. The both/and stance flows from the postmodern idea of multiple, socially constructed realities and the valuing of diversity. Both sides of a dichotomy are prized. For example, one distinction frequently made by therapists is that of intercultural differences and intracultural similarities. From a postmodern perspective, it may be more useful to assume that all cultures are both similar and different. This both/and perspective helps the therapist focus on two useful ideas. One is that there are both similarities and differences between cultural groups. Secondly, and invariably, there are both similarities and differences within a particular culture.

The both/and stance extracts therapists from the position of judging who is right in family disagreements. The therapist can focus on how both positions are 'right' by exploring how each position came into being and when each is useful or not useful.

For instance, one parent may want to use punishment to discipline the children, while the other prefers praise. The challenge for the therapist is to adapt a position where both punishment and praise are viable alternatives for the couple. Therapists can explore in which contexts punishment or praise have been most useful and why. Exploring intents or underlying meanings provides a way out of either/or standoffs. When therapists take this stance, even logically inconsistent ideas can co-exist. In the situation mentioned above, the therapist may encourage the couple to explore what behaviours they are hoping to teach their children. If the couple agree on the end goal, then they may be willing to negotiate the means or at least experiment with various parenting strategies and observe the results. Therapists may also ask questions that elicit examples of past parenting successes and the parenting strategies that led to these successes.

Search for liberating traditions within each culture. Waldegrave (1990) suggests that therapists search for 'liberating traditions' within each culture. This idea is based on the belief that some less desirable behaviours may reside within larger cultural traditions, which have value and can be used positively. Searching for larger cultural meanings expands the possibilities that may be available for clients. In the extreme, therapists can look for the 'less bad' of cultural traditions within a given area. For example, when working with clients from cultures that have rigid gender roles, therapists may focus on valuing the skills involved in the traditional roles or developing a new meaning for a given behaviour. For example, an Anglo woman married to a Mexican-American man became angry when she was expected to serve her husband's dinner when they dined at his parents' house. However, when she began to think of this as a sign of respecting her in-laws rather than subservience to her husband, she began to use serving her husband as a way of connecting with the women in his family.

Another strategy is focusing on those aspects of a culture that present the most possibilities for change. What does each partner admire in the extended family of the other? If there are aspects of one partner's culture that are particularly bothersome for the other, therapists may focus on discovering positive intents or effects of those traditions over history.

View impasse as an attempt to impose beliefs/values on others. Harlene Anderson (1986) suggests that therapeutic impasses occur in conversations where each of the participants believes that their own description, or explanation, of a situation is correct and tries unsuccessfully to persuade others to adopt their position. This competition of ideas results in participants becoming increasingly committed to their initial positions. Thus, the conversation becomes 'stuck' with little opportunity for the development of new ideas or behaviours. Such impasses may occur among the various members of the client system or between therapists and one or more members of the client system. This view of impasse reminds therapists to look for the attempted imposition of one or more ideas when therapy seems 'stuck'. Therapists may want to ask themselves questions such as 'Who is trying to convince who of what?', 'What is feared?', 'What is hoped for?', 'Are there beliefs which constrain acceptance of differences?' One way to overcome impasses that involve only one member of the couple is for a therapist to focus on learning more about that person. Of course, impasses may also occur between the therapist and one or both members of the couple. When this occurs, it is useful for therapists to ask themselves what understandings are they imposing on the clients.

Working with stories. A focus on stories or narratives is common in postmodern therapies. For instance, Lynn Hoffman (1990) has described problems as stories people tell themselves. Generally, viewing the presenting problem as a 'story' presupposes that it is possible--perhaps inevitable--that the story will change with each telling. Changing the story changes the meanings that are attached to events, behaviours and interactions. The manner in which stories are used in therapy differs among therapists. White (White 1993; White & Epston, 1990) focuses on the ways in which clients' stories are constrained by dominant narratives such as patriarchal or oppressive stories.

Sluzki (1992) focuses on transforming the structure of clients' stories to change narratives by attending to the dimensions of time, space, causality, interactions, values and the telling of the story. Each of these dimensions is viewed as a continuum. It does not matter where on the continuum a story falls; the therapist's job is to shift the story to another position. For example, if a couple attributes their problem to cultural differences, the therapist may attribute the differences to personal characteristics. Finally, in the collaborative languaging approach developed by Anderson and Goolishian (1988,1992), the focus is on developing new stories rather than on providing frameworks for changing stories. Therapy is seen as an opportunity for clients to explore a variety of stories while discouraging, commitment to any one story as the truth (Gergen & Kaye, 1992).

Conclusions

Working with intercultural couples presents challenges for therapists as cultural differences may exacerbate the stresses inherent in relationships. Postmodern therapies such as those based on social constructionism provide a framework for approaching the complexities of intercultural relationships, which is culturally sensitive, collaborative, and strength-based. However, the efficacy of this approach with intercultural couples has yet to be examined.

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