Ethics, Competence, and Professional Issues in Cross-Cultural Counseling

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**Primary Objective**

- To demonstrate the generic relevance of multiculturalism to professional excellence in counseling

**Secondary Objectives**

- To describe examples of culturally defined bias in counseling
- To define competencies of multicultural awareness
- To discuss the ethical dilemma facing multicultural counselors
- To explore how multiculturalism is becoming a “fourth force” in psychology

Culture controls our lives and defines reality for each of us, with or without our permission and/or intentional awareness. A “culture-centered” approach to counseling recognizes culture as central and not marginal, fundamental and not exotic, for all appropriate counseling interventions. While mental health problems are similar across cultures, the complex classification of the appropriate helping responses across cultures has given rise to a global variety of counseling styles that are complex and ever changing. The increase of urbanized, modernized, and industrialized societies and the corresponding breakdown of family and village support systems have heightened the need for a global variety of counseling styles in the search for solutions to global social problems. This chapter examines the ethical and professional foundations for culture-centered counseling.
All behaviors are learned and displayed in a cultural context. Behaviors can be measured more accurately, personal identity becomes more clearly defined, the consequences of problems are better understood, and counseling interviews become more meaningful in their cultural context. That cultural context is defined broadly to include ethnographic, demographic, status, and affiliation variables. Culture-centered interventions depend on an inclusive definition of culture as well as a broad definition of the counseling process. The search for models that tolerate the complexity of broadly defined multicultural contexts and methods has become a primary emphasis in culture-centered counseling and research. For a more comprehensive discussion of ethical research with ethnocultural populations, see Trimble and Fisher (2006a).

EVIDENCE OF CULTURAL BIAS IN COUNSELING

The presence of cultural bias in counseling psychology requires, first, that all research studies address external validity issues for the populations being researched; second, that different research approaches be matched as appropriate to each population; and, third, that the psychological implications of a population’s ethnocultural belief system be considered in making comparisons across cultures: “The lack of internal validity does not allow causal inferences to be made without some degree of convinciness or credibility. The lack of external validity may render findings meaningless with the actual population of interest” (S. Sue, 1999, p. 1072). The greater the emphasis on internal validity, the more research will be dominated by a majority culture bias.

The Euro-American or Western psychological study of cultures assumed that there was a fixed state of mind, whose observation was obscured by cultural distortions and that related cultural behaviors to some universal definition of normative behavior described in counseling and psychological textbooks. A contrasting anthropological perspective assumed that cultural differences were clues to divergent attitudes, values, or perspectives that differentiated one culture from another, based on a culture-specific viewpoint. Anthropologists have tended to take a relativist position when classifying and interpreting behaviors across cultures (Geertz, 1973). Psychologists, by contrast, have linked social characteristics and psychological phenomena with minimum attention to cultural differences (Bernal, Trimble, Burlew, & Leong, 2002). When counselors have applied the same interpretation to the same behavior regardless of the cultural context, cultural bias has been the consequence. While there is clear evidence of cultural bias in American psychology, much of it is unintentionally done by people who see themselves as moral, just, and fair-minded professionals. Ridley (2005) points out that unintentional racists may be well intentioned, and they are likely to deny their racism. Toporek, Gerstein, Fouad, Roysircar, and Israel (2006) provide an excellent discussion of the implications of cultural bias for social justice issues.

Lewis-Fernandez and Kleinman (1994) have identified three culture-bound assumptions about mental health and illness based on North American values. The first assumption is the egocentricity of the self. The second assumption is the mind-body dualism, which divides psychopathology into organic disorders and psychological problems. The third assumption is the view of culture as an arbitrary superimposition on the otherwise “knowable biological reality.” Miller (1999) also looks at the norm of self-interest as it has influenced the applications of psychology: “It is proposed that a norm exists in Western cultures that specifies self-interest both is and ought to be a powerful determinant of behavior. This norm influences people’s actions and opinions as well as the accounts they give for their actions and opinions” (p. 1053).

Counseling and therapy have a history of protecting the status quo against change, at least as perceived by minority cultures, through what has come to be called “scientific racism” (D. W. Sue &
Sue, 2003). Counseling psychology has been slow to respond to evidence of cultural bias. Sampson (1993) suggests that psychology and counseling have at best accommodated add-on eclectic strategies in response to culturally different movements and special interest groups without fundamentally transforming conventional frameworks of understanding. Houser, Domokos-Cheng Ham, Wilczenski, and Ham (2006) point out the shameless neglect of “ethics” as a professional discipline of study and a further neglect of ethical decision making in non-Western cultures in the professional literature on counseling and ethics. Fowers and Davidov (2006) link the “multicultural movement” to classical writings about ethics in the philosophy literature, contrasting “virtue ethics” with merely following the rules.

There are alternatives to conventional Western therapy. Moodley and West (2005) suggest how alternative traditional healing practices can be integrated into counseling. Torrey (1986) cites numerous examples where healing approaches have been mobilized by healers and through spirits. Sheikh and Sheikh (1989) describe the breakdown of the Western "dualistic-materialistic paradigm" by a conceptual revolution in which a non-Western holistic perspective is gaining importance. Specifically, they maintain that “Western medicine has tended to look upon the body as a sort of machine that can be treated in total isolation from the mind, but even before the major paradigm shifts, it was becoming clear that this mechanical approach was simply not working. This was especially apparent in areas where psychosomatic linkages were showing that the mind does have a major impact upon bodily functions” (p. v.).

Approximately one third of the people in the United States, half of those in Europe, and 80% of people worldwide regularly use some kind of complementary or alternative health treatment, frequently originating in non-Western cultures (Micozzi, 1996). There are many reasons why alternative therapies have become more popular recently. Alternative therapies are typically less expensive, insurance companies are increasingly recognizing them for third-party payments, reverse technology transfer has become more popular, and the patient is more directly involved as a participant in healing. Alternative therapies are also less invasive, more low-tech in their application, and more gentle and natural, and they rely on self-healing capabilities and value subjective relationship aspects of the therapy process.

The psychological study of altered states of consciousness has been suppressed by a behavioral bias against internal, intangible, inaccessible mental states that do not lend themselves to experimental research (Ward, 1989). However, in recent years, the medical model has been increasingly challenged by psychosocial approaches. Walsh (1989) describes how Eastern and Western approaches actually complement one another rather than compete with one another. By defining counseling interventions broadly according to their helping functions, we develop a more inclusive framework that reflects the cultural diversity and complexity of each client’s cultural context and thus avoid cultural encapsulation. Zyphur (2006) provides a condensed explanation of how “race” and racism, having no biological basis in scientific research, have continued to be such potent constructs in their political impact.

Wrenn (1962) first introduced the concept of cultural encapsulation. This perspective assumes five basic identifying features. First, reality is defined according to one set of cultural assumptions. Second, people become insensitive to cultural variations among individuals and assume their own view is the only right one. Third, assumptions are not dependent on reasonable proof or rational consistency but are believed true, regardless of evidence to the contrary. Fourth, solutions are sought in technique-oriented strategies and quick or simple remedies. Fifth, everyone is judged from the viewpoint of one’s self-reference criteria without regard for the other person’s separate cultural context. There is evidence that the profession of counseling is even more encapsulated now than it was when Wrenn wrote his original article (Albee, 1994; Wrenn, 1985).
More examples of cultural encapsulation are evident in the counseling literature wherever the following assumptions are presumed to be true (Pedersen, 2000). (1) All persons are measured according to the same hypothetical “normal” standard of behavior, irrespective of their culturally different contexts. (2) Individualism is presumed to be more appropriate in all settings than a collectivist perspective. (3) Professional boundaries are narrowly defined, and interdisciplinary cooperation is discouraged. (4) Psychological health is described primarily in a “low-context” rather than a “high-context” perspective. (5) Dependency is always considered to be an undesirable or even neurotic condition. (6) The person’s support system is not normally considered relevant in analyzing the person’s psychological health. (7) Only linear-based “cause-effect” thinking is accepted as scientific and appropriate. (8) The individual is expected to adjust to fit the system, even when the system is wrong. (9) The historical roots of a person’s background are disregarded or minimalized. (10) The counselor presumes herself or himself to be already free of racism and cultural bias. Ponterotto, Utsey, and Pedersen (2006) take on the enormous task of “preventing prejudice,” which transcends all cultural boundaries in our society by combining all community resources in a coordinated effort, hoping to reduce our need for encapsulation. This difficult but not impossible task can no longer be ignored.

Perhaps the most urgent example of cultural encapsulation requiring our attention is the bias in tests and measures used by counselors. Paniagua (2001) reviews the problems of diagnosis in a multicultural context with particular emphasis on the accurate and appropriate use of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) with a series of case examples. The search for culture-free or culture-fair tests has failed. A culture-free or culture-fair test would need to demonstrate content, semantic, technical, criterion, and conceptual equivalence across cultures. This does not necessarily mean that those tests and measures cannot or should not be used. The skilled counselor must be trained to interpret data from culturally biased tests in ways appropriate to the client’s cultural context (Paniagua, 2001) rather than throwing out tests.

DEFINING “MULTICULTURAL AWARENESS” COMPETENCIES

The multicultural competences were derived from a failure of professional ethical guidelines to maintain high levels of professional activity in counseling. Delgado-Romero (2003) describes how the issues of multicultural competency incorporate both obligatory behavior and aspirational goals for culture-centered counseling. Much of the recent literature on multicultural competencies has focused on the importance of awareness, knowledge, and skill. This three-stage developmental sequence of multicultural competency begins first with “awareness” of culturally learned assumptions, second on “knowledge” about culturally relevant facts, and third on “skill” for culturally appropriate interventions. These competencies are based on work by D. W. Sue et al. (1982); D. W. Sue, Arredondo, and McDavis (1992); Arredondo et al. (1996); Pope-Davis and Coleman (1997); and D. W. Sue et al. (1998). Dunn, Smith, and Montoya (2006) provide an excellent review of how competencies are measured with suggestions for future research.

Multicultural training programs that lack a balance of awareness, knowledge, and skill can fail for three reasons. Some programs overemphasize “awareness” objectives almost exclusively, making participants painfully aware of their own inadequacies or the inequities around them. Trainees who overdose on awareness are frustrated because they do not know what to do with their new awareness in the absence of knowledge and skill. Some programs overemphasize the exclusive importance of factual knowledge and information through lectures, readings, and information. Without awareness,
the trainee cannot see the relevance of that information or how the information could be used with skill. Some programs overemphasize skill objectives without regard for the foundations of awareness and knowledge. These participants will never know if they are making things better or worse. All three components of awareness, knowledge, and skill are required for a balanced perspective of competence. The multicultural competencies enhance ethical thinking or “ethical reasoning” (Ford, 2006) as an alternative to blind “rule following.”

Pedersen (2000) describes a framework for individuals or groups to increase their competence through a four-step training program. The first step in developing multicultural competence is a needs assessment of awareness, knowledge, and skill. Assessing the level of awareness requires the ability to accurately judge a situation both from one’s own and the other’s cultural viewpoint. Becoming aware of the assumptions being made about the other culture is a good example of awareness. If awareness helps the trainee ask right questions, then knowledge helps get the right answer to those questions. Increased knowledge and information will clarify the alternatives and reduce the ambiguity of a situation. Learning the language of another culture is a good example of how increased knowledge is important. Assessing the level of skill is the third stage of needs assessment. This involves measuring what the trainee can already do. If awareness and knowledge are lacking, the trainee will have a difficult time becoming skillful. If awareness is lacking, then wrong assumptions are likely, and if knowledge is lacking, then proper understanding is at risk.

The second stage of developing multicultural competence is to identify specific objectives at the awareness, knowledge, and skill levels. An awareness objective changes the person’s attitudes, opinions, and personal perspectives about a topic. The primary need may be to help a group discover its own stereotypical attitudes and opinions. In identifying objectives for increasing knowledge, the focus is on increasing the amount of accurate information available. The student can then test his or her new assumptions against the reality of these facts and data so that increased knowledge will also increase the student's awareness. In identifying objectives for increasing skill, the focus is on abilities indicating what the student can now do with the previously gathered awareness and knowledge. If awareness has been neglected, the student may build his or her plan on wrong assumptions. If knowledge has been neglected, the student may describe the culture inaccurately.

Techniques to stimulate awareness might include experiential exercises such as role plays, role reversals, simulations, field trips, critical incidents, bilingual observation, field placements, question asking, discussions, and other direct immersion experiences. Teaching awareness usually relies more on experiential exercises that directly challenge the person’s assumptions. Techniques to stimulate increased knowledge frequently rely on books, lectures, or classroom techniques. Guided self-study is a practical approach, as is a panel discussion with members of all cultures participating. Techniques to stimulate increased skill frequently rely on modeling and demonstrations of a particular behavior or activity (Pedersen, 2005). Supervision becomes especially important in learning skills in the other culture. The opportunity to practice new skills and behaviors will lead to increased multicultural competencies. The last step of the training sequence is to evaluate whether the persons have met the stated objectives regarding awareness, knowledge, and skill competencies. This may include “formative” evaluation regarding the stated objectives in the short term, and it may include “summative” evaluation, which determines where those stated objectives were appropriate in the long term. Evaluation methods range from informal discussions in the hallway to self-assessment or supervisor assessments of changes.

Pope-Davis and Dings (1995) provide the best discussion of the research validating these multicultural competencies. Four different measures have been developed to assess competencies of multicultural awareness, knowledge, and skill. The Cross-Cultural Counseling Inventory—Revised
(CCCI-R), by LaFromboise, Coleman, and Hernandez (1991), directs a supervisor to rate the counselor on 20 Likert scale items. The CCCI-R aims to measure knowledge more than awareness. The Multicultural Awareness-Knowledge-Skill Survey (D’Andrea, Daniels, & Heck, 1991) includes three 20-item scales to measure awareness, knowledge, and skills that are useful for evaluating students in multicultural courses organized around the awareness, knowledge, and skill framework. The Multicultural Counseling Awareness Scale-B, described by Ponterotto, Reiger, Barrett, and Sparks (1994), includes two subscales: a 14-item awareness scale and a 28-item knowledge/skills scale, with some evidence that the subscales measure different factors. The Multicultural Counseling Inventory (MCI), by Sodowsky, Taff, Gutkin, and Wise (1994), contains four factors: skills (11 items), awareness (10 items), knowledge (11 items), and counseling relationship (8 items). The advantage of the MCI is that it includes the relationship factor, and the items describe behaviors rather than attitudes. The multicultural competencies depend on having a culture-centered theory as their foundation. The ultimate multicultural theory is based on a contextual understanding of psychology. As stated by Segall, Dasen, Berry, and Poortinga (1990), “There may well come a time when we will no longer speak of cross-cultural psychology as such. The basic premise of this field—that to understand human behavior, we must study it in its socio-cultural context—may become so widely accepted that all psychology will be inherently cultural” (p. 352). We have not, however, yet reached that stage of development.

A culture-centered perspective that developed from the awareness-knowledge-skill framework was a list of propositions about “multicultural theory” (MCT) (D.W. Sue, Ivey, & Pedersen, 1996). These six propositions demonstrate the fundamental importance of a culture-centered perspective:

1. Each Western or non-Western theory represents a different worldview.
2. The complex totality of interrelationships in the client-counselor experiences and the dynamic changing context must be the focus of counseling, however inconvenient that may become.
3. A counselor’s or client’s racial/cultural identity will influence how problems are defined and dictate or define appropriate counseling goals or processes.
4. The ultimate goal of a culture-centered approach is to expand the repertoire of helping responses available to counselors.
5. Conventional roles of counseling are only some of the many alternative helping roles available from a variety of cultural contexts.
6. MCT emphasizes the importance of expanding personal, family, group, and organizational consciousness in a contextual orientation.

As these MCT propositions are tested in practice, they will raise new questions about ethical guidelines that are more meaningful to multicultural contexts. Gielen (1994) provides examples of these questions. Under what circumstances and in which culturally circumscribed situations does a given psychological theory or methodology provide valid explanations for the origin and maintenance of behavior? What are the cultural boundary conditions potentially limiting the generalizability of psychological theories and methodologies? Which psychological phenomena are culturally robust in character, and which phenomena appear only under specified cultural conditions? Ethical guidelines and professional competencies are linked together in the multicultural perspective, and occasionally, the ethical and professional duties seem to be in conflict.
THE ETHICAL DILEMMA OF A MULTICULTURAL COUNSELOR

The ethical dilemma of multicultural counselors occurs when the counselor is forced to choose between doing the right thing ethically and bending the professional ethical guidelines, on one hand, or following the professional ethical guidelines and disregarding the client’s cultural context, on the other (Pedersen & Marsella, 1982). This dilemma has been highlighted in a trend toward ethical consciousness in culture-centered counseling resulting from demographic changes favoring minority groups, increased visibility of ethnic minorities, pressure by civil rights and human rights groups worldwide, and the economic incentives to attract minority clients (Casas, 1984). Specific examples of dual relationships, unintentional cultural bias, client welfare, bartering for services, fostering dependencies, boundaries of competence, and other potential dilemmas involving the American Counseling Association (ACA), the American Psychological Association (APA), and the National Association of Social Workers ethical codes are available in Pack-Brown and Williams (2003). All professional associations face the same challenges. Codes of ethics for the 16 largest counseling organizations are provided by Thomson Higher Education (2007) for comparison. The Web sites for all relevant professional counseling guidelines are available in Ivey and Ivey (2003).

Ridley, Liddle, Hill, and Li (2001) explain how the dilemma results from oversimplification of complexity in the existing professional guidelines. The universal “moral” issues are confused with the situational “ethical” rules, the provider’s own ethical perspective is frequently unclear, and the decision-making process is typically confusing. They provide an ethical decision-making model based on stages and process, providing clarity to the “goodness of fit” among all parties in ethical decision making by contextualizing general ethical principles. The general ethical perspectives include absolutism, where the decision is made according to absolute principles; relativism, where the decision is made according to the conventional rules; consequentialism, where the decision is based on good or bad consequences; and intentionalism, where the decision is made according to the good or bad intentions of the doer.

Rather than focus on external force to impose ethical directives, Trimble and Fisher (2006b) focus on internal resources such as “trust” and “respect” as necessary conditions for a “goodness of fit” between the interests of providers, consumers, and the community. The emphasis is not on virtuous acts but on virtuous persons. Goodness is not just something we do but something we are. “It is the virtuous person that creates good acts, not good acts that add up to a virtuous person” (Boeree, 1999, p. 5). Trimble and Mohatt (2006) go on to describe prudence, integrity, respectfulness, benevolence, trustworthiness, and reverence as our ethical guidelines. Without these inner resources as a foundation, the enforcement of ethical behavior is likely to fail. This becomes a dilemma when the external forces recommend an action different from virtue-driven inner resources, which may often happen in a multicultural context. This perspective makes the task of ethical decision making especially difficult in a multicultural context. Both parties may share a belief in the same virtues but disagree on the appropriate behavior to express those virtues. In such a case, the beliefs and values need to be understood separately from the culturally learned behaviors used to express those beliefs and values in each particular cultural context. If two people share the same beliefs and values, there may be common ground for discussion and mediation, even though their behaviors are very different.

Herlihy and Corey (1996) distinguish between mandatory ethics, which means functioning according to minimum legal standards, and aspirational ethics, which means to function at a higher standard in accordance with the spirit behind the literal meaning of the code. In this way, fundamental
values are identified while recognizing that different cultures may express those values through their own different culturally learned behaviors. Jordan and Meara (1990) distinguished between principle ethics—which focus on rational, objective, universal, and impartial principles mandating actions and choices—and virtue ethics, which focus on the counselor’s motives, intentions, character, and ethical consciousness that recognize the need to interpret principles differently in each cultural context. Houser et al. (2006) present a hermeneutic framework to demonstrate the importance of contextual issues in ethical decision making. Ford (2006) likewise believes that ethical issues in counseling should be more grounded in the context of philosophical approaches to thinking about ethics as an alternative to abstract, code-based legalistic discussions about ethical issues.

The danger of any ethical code is that it might enforce the moral standards of the group in power (Opotow, 1990). A fair and just code of ethics needs to do more than reflect the cultural values of those who wrote the code. Kitchner (1984) described four of the basic moral principles that provide a foundation for the ethical code of counselors as autonomy, beneficence, nonmaleficence, and fairness. These four principles are presumed to be universally valued regardless of the cultural context. Autonomy refers to client’s freedom for self-determination. Beneficence refers to actions that promote the growth and development of the client. Nonmaleficence means refraining from hurting clients. Justice or fairness refers to equal treatment of all people. While all clients and counselors may believe in these four psychological principles, this chapter takes the view that these general principles are defined differently in each cultural context (Pedersen, 1995).

Toporek and Williams (2006) examined ethics documents by professional organizations to explore their potential to guide counselors toward social justice in their decisions and found a need for clearer guidance. “For counseling psychology to truly demonstrate a commitment to positive social change, ethical codes and guidelines should reflect the issues inherent in this work. Related professions, organizations and specializations that have historically centralized social justice should be considered as resources in the pursuit of more relevant guidelines” (p. 32).

Welfel (2006) identifies specific limitations and oversimplifications in professional codes of ethics and aspects of multicultural ethical decisions not yet addressed by those codes. “Its central theme is that ethics requires counselors to break free from cultural encapsulation and develop a set of competencies and commitments for productive work with diverse populations” (p. 223). Defenders of the APA ethical code assert that the problem is not with the principles but with their interpretation. If the problem is not the principles but their appropriate application in practice, then this should be stated in the standard on education and training. This pattern implies a “one-size-fits-all” perspective of psychology in general and counseling in particular.

Corey, Corey, and Callanan (2007) point out that all of the contemporary therapeutic models need to recognize the cultural contexts in which behaviors are learned and displayed. Each therapy—and each ethical code—will reflect the values of its cultural context. This statement seems to imply that each Western-based code of ethics is based on a preference for individualism rather than collectivism as the preferred worldview. Individualism applies to societies in which everyone is expected to look after themselves, whereas collectivism applies to societies in which people are integrated into cohesive groups and/or relationships that protect the members of the group in exchange for their loyalty. A comprehensive code of ethics needs to respect the values of both individualistic and collectivistic cultural contexts. If that is not possible, the code of ethics at least needs to make its dependence on individualistic values explicit for the benefit of those who do not share the assumption about the importance of the individual over the group. Corey et al. describe a useful test of multicultural effectiveness in making ethical decisions. “When counselors are overly self-conscious about their ability to work with diverse client populations, they may become too analytical about what they say and do. Counselors
who are afraid to face the differences between themselves and their clients, who refuse to accept the reality of those differences, who perceive such differences as problematic, or who are uncomfortable working out these differences are likely to fail” (p. 136).

Kendler (1993) described the dilemma facing the profession. “Natural science psychology, to be successful, must abandon two seductive myths: (1) Psychology is able to identify ethical principles that should guide humankind and (2) the logical gap between is and ought can be bridged by empirical evidence” (p. 1052). On the other hand, psychology can help identify the culturally different empirical consequences of different policy choices and thereby help counselors make better-informed decisions.

The tendency of contemporary professional ethical guidelines for counselors is to emphasize the responsibility of individual counselors for “following the rules” laid out in the ethical guidelines rather than teach the counselor to “think ethically.” The differences between the cultural context in which the APA and ACA ethical codes were developed and the multicultural contexts where they are being applied create a serious discrepancy. This discrepancy has resulted in patterns of implicit cultural bias that may require the counselor to choose between being ethical, on one hand, or following the codes, on the other.

MULTICULTURALISM AS A “FOURTH FORCE”

The field of counseling psychology has been a monocultural science, even though it was born in Central Europe and has spread throughout much of both the Western and non-Western world (Pedersen, 1998). There are contemporary global changes that are having increased influence in psychology, demonstrating the positive consequence of a culture-centered perspective. First, the ratio of non-American to American psychological researchers is gradually but steadily increasing (Rosenzweig, 1992), suggesting that psychology is growing faster outside than inside the United States. Second, all fields are becoming more global in their focus as a result of technological innovations. Third, there is a multicultural movement, particularly in the social sciences, that has raised sensitivity to cultural variables. Fourth, the topic of cultural and multicultural issues is becoming more widely accepted in psychology. Fifth, there is a reexamination of cultural bias in psychology so that instead of assuming values and beliefs, there is more emphasis on discovering each population’s unique explanation of their behavior and meaning.

Psychology has been an “imported discipline” for most of the world’s cultures that have adopted and transferred Western psychology’s theories and problems to a quite different cultural milieu. Kagitiçibasi (1996) points out the limitations for psychology as an imported discipline. She argues:

What is common in the ideographic, hermeneutic, emic, indigenous, relativist, cultural approaches is an emphasis on the uniqueness of concepts in each cultural context, because they derive their meanings from these contexts. There is also a stress on the variability and the uniqueness of the individual case (person, culture, etc.) that requires its study from within and in its own right, defying comparison. In contrast, the nomothetic, positivist, etc. universalist, cross-cultural approaches study the “typical” not the unique. The emphasis is on the underlying similarities that render comparison possible. (p. 11)

A balanced perspective needs to consider both similarities and differences at the same time.

Wrightsman (1992) describes best the need to look outside the envelope for new approaches to management of social problems. He points out that
we are living in a time when the conventional wisdom about human nature and the nature of society is under attack. Technology has run amok; many now question our ability to bring technology under manageable control. Bureaucracy—a social structure originally established to provide for personal growth—now stifles human development and generates a philosophy that human nature is lazy, irresponsible and extrinsically motivated. The communal movement has challenged a pessimistic drift in our society. Through study of the movement's assumptions, aims, procedures and outcomes, we may gain an understanding of the future of philosophies of human nature. (p. 293)

We are only beginning to understand the ways that psychology has been changed in the past two decades (Mahoney & Patterson, 1992) in what has come to be called a paradigm shift. The underlying assumptions about psychology are moving from a monocultural to a multicultural basis with profound consequences for counseling. The old rules of psychology focused on dissonance reduction by providing simple explanations of human behavior. The new rules focus on the tolerance of ambiguity and accept complexity as a necessary feature of human behavior.

Smith, Harre, and Van Langenhove (1995) contrast the new with the old paradigms. The new paradigms emphasize (1) understanding and describing a context more than just measuring variables, (2) predicting consequences more than finding causation, (3) social significance more than statistical significance, (4) language and discourse more than numerical reductionism, (5) holistic perspectives more than atomistic trivia, (6) complex interacting particulars more than simplistic universals, and (7) subjectively derived interpretations more than objectively imposed meanings. The new rules accept greater complexity as necessary to psychological interpretations and provide a flexible alternative more appropriate across cultures than the traditionally rigid perspective.

Transpersonal psychology (Tart, 1975) was the first branch of psychology to claim a “fourth force” status based on the spiritual revolution in modern society. Since that time, many of the principles of transpersonal psychology have been subsumed into the larger and more diffuse multicultural movement. Mahoney and Patterson (1992) describe the new paradigm as a “cognitive” revolution with an interdisciplinary perspective in which human behavior is described as reciprocal and interactive rather than linear and unidirectional. Wrightsman (1992) describes the new paradigm as beginning with George Kelly’s personal construct theory based on collectivistic and non-Western indigenous psychologies. Smith et al. (1995) describe the new perspective of psychology as advocating tolerance of ambiguity rather than dissonance reduction, multidimensional reality rather than unidimensionalism, the validity of subjective as well as objective proof, and the recognition of cultural bias by the dominant culture in the applications of psychology (Rosenzweig, 1992).

Because a culture-centered perspective is complicated, it makes research, teaching, and direct service more inconvenient, which has caused cultural differences to be overlooked or viewed negatively. The monocultural perspective of psychology has served the purposes of a dominant culture in many specific ways. Counseling in particular has often been guilty of protecting the status quo system against change. With the increase in political activism, affirmative action, and articulate special interest groups, the cultural biases of conventional psychology have been illuminated (D.W. Sue & Sue, 2003). This will ultimately increase the accurate, meaningful, and appropriate competence of psychologists, but this will only occur after the painful process of reexamining our underlying culturally biased assumptions.

Thompson, Ellis, and Wildavsky (1990) described “cultural theory” as providing the basis of a new perspective, dimension, or force in psychology and counseling. They argue that social science is steeped in dualism: culture and structure, change and stability, dynamics and statics, methodological individualism and collectivism, voluntarism and determinism, nature and
nurture, macro and micro, materialism and idealism, facts and values, objectivity and subjectivity, rationality and irrationality, and so forth. Although sometimes useful as analytic distinctions, these dualisms often have the unfortunate result of obscuring extensive interdependencies between phenomena. Too often social scientists create needless controversies by seizing upon one side of a dualism and proclaiming it the more important. Cultural theory shows that there is no need to choose between, for instance, collectivism, values and social relations or change and stability. Indeed, we argue there is a need not to. (p. 21)

In discussing these sources of resistance, Stanley Sue (1998) pointed out the tendency to misrepresent or misunderstand the notion of multiculturalism and the dangers of that misunderstanding. Labels—such as multiculturalism—tend to oversimplify complicated relationships, and to that extent, they are dangerous. The sixth edition of Counseling Across Cultures has attempted to call attention to the ways in which a multicultural perspective is better able to address the complicated and dynamic cultural context in which psychology is practiced than the alternative monocultural models. Whether or not multiculturalism emerges as a fourth force in psychology and/or counseling psychology at a level of magnitude equivalent to that of psychodynamic, behavioral, and humanistic theories of culture, it will continue to provide a valuable metaphor for understanding ourselves and others. It is no longer possible for psychologists to ignore their own cultural context or the cultural context of their clients.

CONCLUSION

Until the multicultural perspective is understood as having positive consequences toward making psychology more rather than less relevant and increasing rather than decreasing the quality of psychology, little real change is likely to occur. This chapter demonstrates the importance of culture centeredness to professional issues of culture-centered counseling and the relationship of professional competencies to ethical obligations. Pedersen (1997) summarizes more than a dozen positive “up-side” advantages of making culture central to counseling as follows:

1. Recognizing that all behavior is learned and displayed in a cultural context makes possible accurate assessment, meaningful understanding, and appropriate interventions relative to that cultural context. Interpreting behavior out of context is likely to result in misattribution.

2. People who express similar positive expectations or values through different culturally learned behaviors share the “common ground” that allows them to disagree in their behaviors while sharing the same ultimate positive value. Not everyone who smiles at you is your friend, and not everyone who shouts at you is your enemy.

3. By recognizing the thousands of “culture teachers” each of us has internalized from friends, enemies, relatives, heroes, heroines, and fantasies, we can better understand the sources of our identity. As we encounter problems, we are likely to imagine how one or another culture teacher might respond.

4. Just as a healthy ecosystem requires a diversity in the gene pool, so a healthy society requires a diversity of cultural perspectives for its psychological health. By considering many different perspectives in problem solving, we are less likely to overlook the right answer.
5. Recognizing our natural tendency to encapsulate ourselves, cultural diversity protects us from imposing our self-reference criteria inappropriately by challenging our assumption. We see the dangers of a one-size-fits-all psychological perspective.

6. Contact with different cultures provides opportunities to rehearse adaptive functioning skills that will help us survive in the diversified global village of the future. By learning to work with those different from ourselves, we can develop the facility for our own survival.

7. Social justice and moral development require the contrasting cultural perspectives of multiculturalism to prevent any one dominant group from holding the standards of justice hostage. Every social system that has imposed the exclusive will of the dominant culture as the measure of just and moral behavior has ended up being condemned by history.

8. By looking at both cultural similarities and differences at the same time, according to a quantum metaphor, it becomes possible to identify nonlinear alternatives to rigidly absolutist thinking. It is not just the content of our thinking but the very process of thinking itself that can become culturally encapsulated.

9. We are able to continue our learning curve to match the rapid social changes around us by understanding all education as examples of culture shock. Education is a journey through many different cultures.

10. Spiritual completeness requires that we complement our own understanding of Ultimate Reality with the different understandings others have in order to increase our spiritual completeness. All trails do indeed lead to the top of the mountain.

11. The untried political alternative of cultural pluralism provides the only alternative to absolutism, on one hand, and anarchy, on the other. Our survival in the future will depend on our ability to work with culturally different people.

12. A culture-centered perspective will strengthen the relevance and applicability of psychology by more adequately reflecting the complex and dynamic reality in which we all live. The multicultural perspective resembles the fourth dimension of time as it complements our understanding of three-dimensional space.

This chapter has reviewed the importance of professional, ethical, and competency issues as the foundation argument for taking a culture-centered perspective. The chapter further suggests that a paradigm shift is occurring in counseling psychology toward giving more attention to multiculturalism. Kuhn (1970) expressed the belief that a major paradigm shift will occur when scientific theories cannot adequately account for ideas, concepts, or data and when some new competing perspective better accommodates these data.

Counseling has become a powerful force for psychological change through culture-centered counseling. The primary professional issue for counseling is rooted in the understanding of “self.” Western counseling and psychology have promoted the “separated” self as the healthy prototype across cultures, making counseling and psychology part of the problem through an emphasis on selfishness and lack of commitment to the group rather than part of the solution. Elements of analytical reductionism in psychology and counseling seem to be moving toward a more holistic, culturally inclusive, and integrative approach that recognizes how people from all populations are both similar and different at the same time.
The Unintentional Violation

A well-known leader in the field of counselor education was accused by a student of violating her rights and disregarding her cultural values. The student’s complaint was sent to the ethics committee of the professional counseling association for action.

The student complained that she was being required to self-disclose more of her personal feelings and activities in class than was comfortable for her. She felt that she was being pressured by the teacher and by her peers to talk about herself in a way she might only disclose to her own family under extreme conditions. These things were just never discussed in her home culture. Moreover, she had not been warned ahead of time that this embarrassing situation was likely to occur in her class. The class was a required one for her, so withdrawing from the class would mean sacrificing all the time and money she and her family had invested in her education. This was not an option for her. She had talked with her teachers but did not feel her concerns were being taken seriously enough. Her only choice was to file a formal complaint with the ethics committee.

The teacher’s position was that he had been teaching this required counseling class for many years without any complaints from other students and that he was not requiring anything from her that he did not require from these other students. The ethics guidelines required him to treat all students alike, regardless of their ethnocultural background. He was sorry to hear that the class experiences had been embarrassing to the student, but he did not feel he could give her any special privilege that he could not give to any of the other students. Favoring this one student would not be fair to the other students and would deprive this student of the opportunity to learn essential insights about counseling through self-disclosure and feedback. He felt he had an ethical obligation to the complaining student and to all his other students to maintain his standards of excellence. From the student’s viewpoint, the cultural differences between herself and other students in her classes were important and needed to be respected.

The incident occurred in the ethics committee meeting, where the accused teacher was well known and respected but the rights of the student were also respected. The ethical infraction was certainly not intentional, and a certain degree of self-disclosure is required in counselor education classes. After considering the rights and responsibilities of both the student and the teacher, the committee decided against the teacher for not forewarning his students that a high degree of self-disclosure might be required in this course. While self-disclosure would be easy and natural for students from some cultures, it would be very painful for students from other cultures. The teacher was instructed to include a warning in his syllabus for future courses indicating that a high degree of self-disclosure may be required.

DISCUSSION QUESTIONS

1. To what extent does the course syllabus function as a legal contract?
2. Should all students enrolled in counselor education classes be expected to accept the norms of the majority culture?
3. Should the teacher modify his course to fit the needs of each and every culture represented by all the different students in his class?
4. Should the student be expected to bring her problem to the teacher directly, however embarrassing that might be, before complaining to others?
5. What are the likely consequences for the student and for the teacher?
REFERENCES


