

MANUEL RAMIREZ III

FAMILY COUNSELING



Multicultural Psychotherapy

FAMILY COUNSELING

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FAMILY COUNSELING

Innovative approaches to family therapy that have been developed for use with people who are culturally different have focused on matching the values, worldviews, and unique family structures and roles as well as special needs and personality variables such as biculturalism and/or multiculturalism. Carolyn Atteneave (1969) was a pioneer in the development of culture match approaches. Her work with Native American families living in urban settings combined the "Medicine Man" role and the strategies of Network Therapy (Speck and Atteneave, 1974). Atteneave referred to her approach as retribalization.

Minuchin and his colleagues (1967) introduced the structural approach to family therapy, which had been developed with inner-city poor families, some of whom were African American and Latino. Aponte (1974) introduced the ecostructural model of family therapy, which had been developed in his treatment approaches with African American and Puerto Rican families. He was influenced by Auerswald's (1968) ecological therapy. The ecostructural approach seeks to empower families by helping them to "navigate the system." That is, the goal of therapy is to help families interact with institutions and agencies—schools, courts, child welfare, and housing offices,

as well as health and mental health providers—that impact their lives.

The work of both Minuchin and Aponte influenced Szapocznik, Scopetta, Aranalde, and Kurtines (1978), who adapted the ecostructural approach to the values and special needs of Cuban American families at the Spanish Family Guidance Clinic in the Department of Psychiatry at the University of Miami School of Medicine. Ho (1987) introduced an ecological systemic approach for doing therapy with families of different ethnic groups. The focus of Ho's strategies emphasized sensitivity toward traditional family values of different ethnic groups and attention to acculturation processes, which are related to bicultural orientations to life. Ho postulated that his emic approach offered promise for enhancing the understanding of ethnic families and for enlarging the intervention repertoires available to the family therapist.

Boyd-Franklin (1987) argued for the use of a structural/ecostructural approach with African American families, citing the importance of unique family structures, roles, and the degree to which poor families are impacted by institutions outside themselves. She also argued for the use of Bowen's (1976) *genograms* (a family tree to help the family map its family organization and intergenerational emotional issues) in doing therapy with African American families.

McGill (1992) introduced the concept of the cultural story in his work

with ethnic minority families. The cultural story assumes that a family brings to therapy not only a story of its idiosyncratic problems, but that this story also reflects society's stories about gender, life cycle, ethnicity, class, and race. To use the cultural story in therapy, therapists need to be acquainted with the value systems and worldviews of various cultures. McGill recommended the use of diversity genograms to record the family's story, including the stories of generation, gender, ethnicity, race, class, and migration. A diversity genogram expands standard genogram methods used in family therapy.

In their work with Latino families, Cervantes and Ramirez (1995) have evolved a model of family therapy based on the Mestizo (multicultural/multiracial) worldview and the cultural value of spiritualism. Emphasizing the mestizo psychology perspective (M. Ramirez, 1983), mestizo spirituality, and the philosophy of *curanderismo* (Mexican faith healing), they evolved strategies for family therapy used effectively with Latino families in Texas. In the first edition of this book, M. Ramirez (1991) introduced an approach to couples counseling based on a values and cognitive styles match and mismatch. His focus on the cultural and personality styles of couples experiencing conflict led to expansion of this multicultural perspective for doing psychotherapy with families. The rest of this chapter describes the multicultural model of family therapy.

THE CASE OF THE ROSALES

Presenting Problems

The initial contact was with Anna, a mother who had been referred to the therapist by her church. Anna and her husband, Jesse, had been having conflicts for approximately two years, and it had gotten to the point where they were threatening to divorce. Anna felt that their marital problems were having a strong negative influence on their two children, Tati and Nancy. Tati, an eight-year-old boy, was having academic problems; Nancy, fourteen, wanted to date a student in high school; she had taken the family car without permission and had gotten into an accident.

Jesse had been experiencing symptoms of panic disorder without agoraphobia. He was also experiencing some symptoms of somatization disorder, having had several false alarms thinking that he was having symptoms of a ruptured ulcer. He was rushed to the hospital where medical tests showed that the symptoms were related to anxiety. Anna, too, was experiencing symptoms of anxiety, but she tended to be stoic about them. One incident shocked her and the rest of the family: She was driving the children to an evening school event when, without warning, she lost control of the car and drove from the parking lot into one of the playgrounds of the school. Fortunately, no one was hurt. This incident scared Anna because she suffered from some of the symptoms of amnesia; she could not remember losing control of the car or the kids screaming from the backseat warning her that

that she was driving at high speed into the playground.

General Clinical Considerations

Anna needed to be assessed for a dissociative disorder and for generalized anxiety disorder. She also needed to learn stress-reduction techniques. Jesse was assessed for panic disorder without agoraphobia. He also needed to learn stress-reduction techniques and be evaluated for any need for medication. Tati was evaluated for learning disorders to see if he needed special services such as placement in resource classes at school. Nancy was evaluated for oppositional defiant disorder.

History of the Rosales Family

A family history done with Mr. and Mrs. Rosales during the second session revealed that Anna and Jesse were likely to differ in their preferred cultural and cognitive styles and that these differences were likely related to exposure to different socialization and life experiences. Although their Latino cultural background was the same, differences in their personality styles reflected a difference in values.

Anna had been born and reared in an urban environment in Central Texas, which was predominantly Caucasian (about seventy percent) with some African Americans and Latinos (approximately twenty and ten percent,

respectively). The predominant Caucasian cultural influence in her community exposed Anna to modern values; Caucasian values in the schools and in other community institutions had the greatest influence on the development of her personality. Most of Anna's close friends in school were Caucasian, and she had also felt the influence of Caucasian culture because of her involvement in Girl Scouts. Further, her family socialization experiences had been very different from those of Jesse. She had grown up with three brothers; and her parents had encouraged her to be as independent as her brothers, encouraging the entire family to adopt flexible gender roles; Anna had been encouraged to be active in sports and was given the same freedom to date that her brothers had.

The schools Anna attended valued field independent thinking, learning/problem-solving styles, and emphasized field independent teaching styles. Anna's father was an engineer and had been the informal math tutor for all the children in the family. He encouraged all his children to excel in math and science. Anna had also been encouraged in individual competition, both at home and at school. She had participated in Interscholastic League competitions and had won several ribbons.

Jesse's socialization and life experiences had been different from Anna's. He had grown up in semi-urban small South Texas city, which was predominantly Latino (eighty-five percent) with Caucasian and African

Americans making up the other ten and five percent of the population, respectively. Almost all Jesse's close friends during childhood, adolescence, and young adulthood were Latino; others had been African American and very few had been Caucasian. In fact, Jesse had not had Caucasian close friends until he was in the service.

Jesse's family had encouraged traditional gender roles. He had only sisters, so when their father passed away when Jesse was in high school, he adopted several aspects of the father's role as principal breadwinner and authority figure in the home. Jesse dropped out of high school and took a full-time job to help support the family. He obtained his GED while in the service, but he had not pursued a college education.

Most of the institutions (principally the schools and the churches) in Jesse's community encouraged a field sensitive approach to learning/problem-solving. His participation in school sports was oriented toward identity with the team and the community and encouraged group rather than individual competition. His mother had been interested in history and in reading autobiographies, so she encouraged Jesse's good performance in social sciences courses at school. One of Jesse's uncles, a mural painter, encouraged Jesse to assist him with several murals he had painted as community projects.

Anna and Jesse met at a church dance held in Anna's hometown. At the time, Jesse had been in the service and stationed at a nearby army base. Both said something to the effect that it had been love at first sight and that they had felt they were right for each other from the first moment they met. A history of the courtship, which had been two years long, indicated there had been little conflict or differences of opinion between them. Both recalled that their only areas of disagreement had been about handling money and dealing with extended family. In the area of money, Anna would become upset because of Jesse's spending habits, particularly his tendency to buy watches for a collection he had.

Jesse had objected to Anna's continued closeness to her brothers and her seeming need to please them. Discussion of this topic led to revelation of a wider problem—neither's family had approved of their relationship and marriage. Acceptance had only occurred after they adopted their children. Jesse's sisters and his mother had felt that Anna was too modern and *agabachada* (Anglicized) for Jesse. While Anna's siblings and her parents felt that Jesse was too traditional *muy rancho* (member of a small, rural Latino community) and not ambitious enough because he had not gone to college.

Anna envied her brothers who were already married, had children, and had their own homes. She had hoped that marriage would lead to these same things for Jesse and her. Jesse's first goal had been to have children so that he

could pass on family history and traditions to them and so that his mother could be a grandmother before she passed away.

The first major problem the couple encountered was economics. Without the resources to buy a house, they were forced to live with Anna's parents. This put a lot of strain on the relationship and furthered Anna's brothers opinion that Jesse lacked ambition. Anna began to share this opinion. The couple's failure to have children early in their marriage was the basis of additional problems. After numerous medical tests and approaches, they were finally told conclusively that it was medically impossible for them to have their own children. Jesse perceived that it was Anna's fault. His mother and sister supported his traditional views of the woman's role—somehow Anna was less than a "complete" woman because she could not have children.

After much agonizing and discussions with their pastor, Anna and Jesse decided to adopt Nancy. Both members of the couple agreed that because of Jesse's traditional views regarding gender role, he had been minimally involved in childrearing and parental care early in Nancy's life. This resulted in a very close bond between Anna and Nancy with Jesse being an outsider. A year after this adoption, Anna was promoted to a supervisory position with a much higher salary. The couple was able to purchase their own home and decided to adopt a second child, a boy. Since Anna had established such a close bond with Nancy, it was an unspoken agreement between the couple

that the next child would "belong" to Jesse. Tati was adopted and indeed he and Jesse developed a strong bond. Jesse had been very involved in Tati's early care and socialization. The alliances were formed.

The Initial Sessions of Multicultural Counseling and Therapy with the Rosales

The Initial Session. The goals of the initial session of family therapy are similar to those of the first session in individual therapy: to establish an atmosphere of nonjudgmental or uncritical acceptance, to attempt to match the preferred cultural and cognitive styles of the clients, and to make behavioral observations to determine if the styles with which the family members present are their preferred or nonpreferred styles. The additional goal of family counseling is to observe interactions between family members in order to assess family alliances, which may be contributing to conflict.

At the first session with the Rosales family, the therapist began by welcoming them and asking them to introduce themselves. The therapist observed family dynamics immediately, determining who talked first and the degree of identification with traditional values by seeing if the clients used their first or both first and last names. He also had a chance to observe the seating patterns, and he determined that Jesse and Tati had sat next to each other while Nancy and Anna sat side by side. He observed that Anna talked first followed by Jesse, then Nancy and finally Tati. Jesse, Nancy, and Anna

seemed to be expressing their preferred cultural and cognitive styles, but Tati seemed to be uncomfortable, looking to the other members of his family for direction.

The therapist asked each family member to think of one thing that was a strength in the family and one thing that was a problem. Anna began: "The way I see it our family problem is that we have a lot of disagreements, in particular Jesse and me. The strength I see is that when we do things together as a family we seem to forget our differences and enjoy what we do." Jesse spoke next, "The problem I see is that Anna criticizes Tati and me too much. Our strength is going to church on Sundays and doing activities through the church." Nancy's response was, "Most of the time there seems to be a lot of tension, but it is fun when we go visit our cousins in the Rio Grande Valley. We seem to be a different family when we visit there." Tati finished with, "Most of the time I feel it is my fault that Mom and Dad fight; it makes me feel bad. The time I like too is when we visit with our relatives and have fun." During this exercise the therapist observed that, when Nancy talked, she looked at Anna and not at the others, while Tati looked only at Jesse when he was talking.

More intensive discussion of the problems and strengths of the family followed. After approximately one hour the therapist said, "Before I ask you to fill out some forms, I would like for each of you to think of something that is

fairly simple and straightforward, something that can easily be done by your family in the next two weeks, that would make things better for the entire family." After a short discussion and agreement on a family activity, the therapist asked each of them to complete the FAS ([Appendix C](#)), TMI ([Appendix M](#)), BOLS ([Appendix G](#)), and MEI ([Appendix A](#)). Because of Tati's problems with reading, the therapist asked him if he would like help with the forms. Tati agreed, and they went to the empty waiting room while the others completed their forms individually in the therapist's office.

While Tati was alone with the therapist and as he was responding to the items of the instruments he was taking, he became more talkative and self-disclosing, sharing that he was worried that his parents might separate. The therapist listened empathetically and indicated to Tati that the decision to come to family counseling was a good sign. Tati seemed reassured.

The therapist then met with all the family members again and said, "I will be calling you in a few days to let you know if I think I am the right therapist for you and to see if you think I m right for you. I would like you to discuss this as a family in the next two days. If I do not feel I am the right therapist or if you feel I am not right for you, I can refer you to some therapists who might be a better fit. If we all agree that we should work together, I would like to see only Mr. and Mrs. Rosales for the next session. After that I will usually see all of you together. However, there may be times

when I have to meet individually with Mr. and Mrs. Rosales again."

The initial and all subsequent sessions were one and one-half to two hours in length. The initial session, in summary, included the following:

- Observing family interactions through seating pattern, verbal and nonverbal behaviors, and the communication patterns suggesting alliances based on match and mismatch.
- Having each member give a family strength and a family problem.
- Observing for preferred cultural and cognitive styles of individual members using the Preferred Cultural and Cognitive Styles Checklists (Appendices E and F).
- Establishing one change the family members would like to see in the family during the next two weeks.
- Administering the FAS, TMI, BOLS and MEI instruments.

Session 2. The therapist opened the session by asking Anna and Jesse to complete the Dyadic Adjustment Scale (DAS). After they completed this instrument, the therapist asked the Rosales to relate the history of their relationship and their family as they saw it, beginning with how they met. As they told the early history of their relationship, the therapist asked how things went when they were dating; how they felt from the start about their fit with one another; when they decided to marry; what hopes they each had

for the marriage. He then asked about their history of sexual intimacy and whether it had changed from early in their relationship. He finally explored how their families had felt about the marriage and early problems.

From the Rosales' responses to these questions and from their responses to the DAS, the therapist determined that their expectations for marriage were similar, but did show some differences in what they considered problem areas in the relationship, particularly with finances, dealing with relatives, and household chores. The couple and therapist discussed these.

At the conclusion of the session, the therapist summarized by saying, "You have agreed to spend more quality time together as a couple—a date night during the week. You both agreed to discuss your concerns about your adjustment to the sexual relationship more openly." The second session (parents only), in summary, included the following:

- Introducing the goal of session—to learn about the relationship and its history.
- Administering the DAS.
- Learning the history of the relationship and of the family.
- Providing feedback on findings of the DAS and the history.

- Offering suggestions for improving the relationship between partners.

Session 3. The therapist began the session by asking all the family members to report on how they had perceived progress toward attaining the one goal they had jointly selected for improving the well-being of the family. He started with Tati's and Nancy's goals and then moved to those of Jesse and Anna. All in all, the members felt that there had been significant improvement in their feelings toward each other and that Anna and Jesse had done less arguing during the two weeks since the last session with the entire family.

The therapist introduced the cultural and cognitive flex model to the Rosales, using the approach described in Chapter 7. This included a discussion of the importance of values and cognitive styles, match and mismatch, and how these can lead to family conflict. He gave the family feedback on the findings of the assessment instruments they had taken. He began with values indicating how similar Tati and Jesse were, contrasting this with the similarities between Anna and Nancy. The discussion that followed centered on selecting a cultural styles goal that the family would focus on during the next session. They all decided they wanted to work on the definition of gender roles and division of labor in household chores.

The therapist asked Anna and Tati and Nancy and Jesse to work together as pairs in scriptwriting. Mother and son moved to a different part of

the room so that they could concentrate on their scripts. The specific goal of the scripts was how to encourage Jesse and Tati to help with the vacuuming and the laundry and how to get Nancy and Anna to help with washing the cars.

An important issue surfaced during this session: Jesse's reluctance to participate in role-playing. He said he felt embarrassed to participate in something that seemed like a game for an adult (a traditional value) and that he feared his children might lose respect for him if he participated (also a traditional value in Latino culture). A discussion with the family about the values related to Jesse's reluctance ensued and in the process he agreed to serve as Nancy's coach during role-playing; the other family members felt it might be good to have an outside observer in addition to the therapist when they were role-playing. About two-thirds of the way through the session, Jesse became so involved in giving direction to all the family members that essentially he became involved in the role-playing himself.

The therapist moved back and forth between the two pairs as consultant. From suggestions given by Tati as to how best to approach Jesse on the housecleaning chores, Anna realized that she had usually compared Jesse negatively to her brothers when she had asked him to help out with the housework. She realized that this usually led to Jesse becoming defensive and resulted in an argument between them. Jesse, on the other hand, with Nancy's

help, arrived at the realization that he usually assigned the menial tasks of cleaning the hubcaps and the tires to Anna and Nancy, never allowing them to do what they really enjoyed—waxing the cars. He had always reserved this task for Tati and himself, usually saying, "They are not very good at this because they don't have the arm and hand strength it takes to do it right." This would alienate Nancy and Anna.

Gender Roles and Division of Labor on Household Chores, Scripts

JESSE AND NANCY'S SCRIPT: At least one day before he planned to wash the cars, Jesse was to say to Nancy, Anna, and Tati, "I would like for us to wash the cars tomorrow afternoon. Who would like to help and what jobs do you want to do?" It was agreed that if Anna, Nancy, and Tati wanted to participate in the activity, Anna and Tati would wax one of the cars while Nancy and Jesse concentrated on the hubcaps and tires; the roles for the pairs would be reversed for the other car.

TATI AND ANNA'S SCRIPT: A day before she planned to do housecleaning, Anna would say to the family, "I would like for us to clean the house tomorrow. Can we all do it together?" She agreed not to compare Jesse unfavorably with her brothers. Following housecleaning, they all agreed to do something that Tati wanted—for the family to see a movie together.

The scripts were role-played, with all members participating, with the assistance of the therapist. This was followed by a family discussion as to how they had benefited from the exercise.

Homework Assignment. The therapist gave a homework assignment. Anna and Jesse would both ask the family to participate in housecleaning and

car-washing chores. The entire family was to discuss how the assignments had gone and to report back to the therapist at the next session.

The third session, in summary, included the following:

- Obtaining individual family members' perceptions of degree of success in accomplishing change goals identified at the end of the initial session.
- Introducing the cultural and cognitive flex model.
- Obtaining feedback on the findings of the assessment instruments administered during initial session.
- Selecting a cultural styles goal.
- Assigning scriptwriting in pairs.
- Writing scripts.
- Role-playing.
- Discussing role-play and, if necessary, making script changes and role-playing again.
- Assigning homework.

Session 4. The therapist began the session by asking the family members about the outcome of the homework assignment and improvements

and problems they had noticed in their family during the past week. They made necessary changes to the script and replayed the roles, focusing on the cultural goal. The therapist then reviewed the major concepts of the flex model, indicating that the primary goal for this session would be to identify a common cognitive styles goal and to again proceed to write a script and to do role-playing. The cognitive styles goal on which members of the family agreed was communication style.

They decided to work on this in the context of the basis of the majority of the arguments between Jesse and Anna—his spending habits and her frequent business trips. Again, assignment for scriptwriting was made to the pairs. They were asked to focus on both goals, writing scripts for both. Again, Anna and Jesse were surprised by the insights provided by their children. Jesse realized that his frustration over arguments with Anna concerning one of her trips led him to start shopping for an addition to his watch collection.

Jesse also came to realize that his stated reasons about why he did not like Anna to travel so much were very broad: "It's not good for the family for you to be gone so much." Nancy helped him to identify some of the specific reasons for his opposition to the frequency of her business trips: He felt Anna valued her job and career advancement opportunities more than she valued the family and his jealousy about the male coworkers who went on the trips with her. On the other hand, Anna's criticisms of Jesse's spending habits were

always focused on too much detail and usually included dire predictions about family finances, which made Jesse resentful. When the scripts were completed, role-playing was done with discussion following.

TATI AND ANNA'S SCRIPT: First Anna was to be very specific about the reasons for her trip and about which coworkers would be going on the trip. The family discussed when Anna would call while she was gone and how long she would be gone. When she returned and learned that Jesse bought a new watch for his collection, she would say: "Can I see your new watch? How does it fit into your collection?"

The role-playing was followed by an extensive discussion concerning communication style conflicts in the family; some of these concerned arguments between Nancy and Tati, particularly when Tati relayed phone messages to Nancy. She was always upset that he failed to give her enough specific information. The family agreed to buy a message pad to use for this purpose.

JESSE AND NANCY'S SCRIPT: Jesse would be more explicit about his concerns about her trips. He explained, "In movies and on TV I see people who work together and travel on business trips falling in love. I get jealous." Tati would say, "I miss having you around because Dad and Nancy get into more arguments when you are away." They then allowed Anna to respond.

During the role-playing, Anna was surprised to learn that Jesse was jealous. She had never considered this and had seen his opposition to her business trips as an attempt to curtail her freedom. She was even more surprised by Tati's observation that Jesse and Nancy would argue more while she was

away. A long discussion ensued about communication style conflicts that led to disagreements and arguing between Nancy and Jesse.

Homework Assignments. The therapist made a homework assignment. Both pairs would try out what they had learned at least once in their teaching-learning efforts during the week. Again, they would discuss the successes and the problems of their efforts.

The fourth session, in summary, included the following:

- Assessing the outcome of the Session 3 homework assignment and giving suggestions, if necessary.
- Identifying a cognitive styles goal.
- Writing scripts.
- Role-playing.
- Discussing the efforts and making any necessary changes in scripts and replaying them.
- Assigning homework.

Session 5. Again the therapist started the session by asking how each member of the family perceived things had gone the previous week and asking them if they had any questions. They then worked on another

cognitive style goal that the family had identified as very important. This one focused on learning-teaching style—this time on the need for Anna to tutor Tati on math without losing her patience with him and the need for her to match her teaching style to his preferred learning style. The therapist had Anna and Tati focus on the characteristics of field sensitive learning/problem-solving on a Child Behavior Observation Checklist (Cox, Macaulay, and Ramirez, 1983).

TATI AND ANNA'S SCRIPT: After reviewing and discussing the Child Behavior Observation Checklist, Tati and Anna worked on the teaching styles script. Anna would say, "How would you like me to help with your homework?" She also agreed to give more social rewards when Tati succeeded and to use more modeling and less of the discovery approach when teaching. She would say, "Would you like me to show you how I learned to solve that type of problem?" Tati agreed to be less passive and to take more initiative in what he was doing.

Jesse and Nancy focused on the techniques used to teach Nancy to drive. The therapist had them focus on the learning behaviors of a field independent style and on the field sensitive teaching styles. He assisted them in writing a script in which there would be a better match between learning and teaching styles.

JESSE AND NANCY'S SCRIPT: Jesse agreed to be more responsive to the way Nancy preferred to be given driving lessons. She would say, "I would like for you to have more confidence in me and let me try it my own way. When you are going to show me how to do something new, tell me about it and then just let me try it. If I have any questions, I can ask you." Jesse also agreed to be more explicit and attentive to detail in his explanations. For example, in teaching Nancy to parallel park, he would say, "The idea is to

use the car that will be in front of you for alignment when you are backing into the parking spot. You turn the wheel so that the rear end of the car goes toward the curb. Once you are far enough in, turn the wheel the other way to get the front end of the car close to the curb."

Homework Assignments. Both pairs would try out what they had learned at least once in their teaching-learning efforts during the week. Again, they would discuss the successes and the problems of their efforts.

Assessment of Progress. All four family members again completed the FAS, TMI, and BOLS. Jesse and Anna took the DAS again. To identify areas in which progress had been made, as well as areas that still required work, these scores were compared with those from the first administration.

The fifth session, in summary, included the following:

- Assessing outcome of homework and giving suggestions, if necessary.
- Identifying a second cultural or cognitive styles goal.
- Writing scripts.
- Role-playing.
- Discussing scripts and role-playing, making changes, if necessary.
- Assigning homework.
- Assessing progress by readministering the assessment instruments.

Session 6. The therapist started the session by asking about the outcome of the homework assignment. Family members then identified a second cultural goal they wanted to work on. After a short discussion, the Rosales settled on the goal of how relationships with members of the extended family had an influence on their family. In particular, Tati and Nancy felt that Jesse and Anna were influenced by their aunts, uncles, and parents with respect to childrearing behaviors. This frequently led to conflict between Jesse and Anna and to Nancy and Tati feeling they were being treated unfairly, particularly by the parent to which they were mismatched in terms of cultural and cognitive styles. More specifically, Jesse would be criticized by his mother and sisters as too *Modern* or *agabachado*, because he and Anna were considering allowing Nancy to date at age fourteen. Anna, on the other hand, was being criticized by her parents and brothers for what they referred to as "Jesse's macho influence" on Tati. They felt this would make it impossible for Tati to become a "good American" and to be able to compete in high school and college. The family members perceived this problem differently. What follows is what they had to say.

NANCY: A lot of arguments at home start when we visit my grandparents and aunts and uncles. Dad becomes stricter and Mother wants to give us more freedom. We become confused.

TATI: I think that our family is different, but our parents want us to be like my cousins.

ANNA: It is embarrassing to me that my brothers, my sisters-in-law, and

parents think that we are not being good parents.

JESSE: Every time we visit with my family, I come away thinking that my mother and my sisters know the best way to bring up children. After all, my sisters and I came out okay and my nieces and nephews are all doing well in school.

The therapist asked the family to break up into two scriptwriting pairs, but this time he asked if they were ready to change partners—Tati and Nancy together and Jesse and Anna together. The family members were enthusiastic about this idea. The pairs went to different areas of the room with the therapist again circulating between them serving as a consultant. Once the scripts were ready, the therapist encouraged the pairs to reassemble as a family; at this time the script for what Jesse and Anna would say when their family was criticized by members of the extended family began.

In the past Nancy and Tati overheard many of the conversations between their parents, grandparents, aunts, and uncles, so they were effective in playing these roles. Now they enacted the scripts they wrote regarding their behavior should their parents be influenced by the members of the extended family. The role-playing led to an extensive and animated discussion. Toward the end of the session, the therapist asked each of the family members to share their views regarding what they had learned and what they felt the exercise had done for the family.

All the family members felt that what they were learning during the

sessions had extensive carryover to their daily interactions. They all reported that their relationships with each other had improved dramatically. They also reported that the role-playing and scriptwriting had helped them to understand the family member who was most mismatched to them and had helped them achieve an empathy for that member that they had never had. The sixth session, in summary, included the following:

- Assessing the outcome of homework.
- Identifying a second cultural or cognitive styles goal.
- Reassigning pairs—exchanging partners and writing new scripts.
- Role-playing.
- Discussing and changing scripts, if necessary, with the therapist assuming a nondirective role.
- Reporting by family members about what they have learned from therapy thus far, with their individual assessment of progress made to this point.

Sessions 7 through 10. The following is a summary of four procedures and activities used for the Rosales's multicultural family therapy sessions:

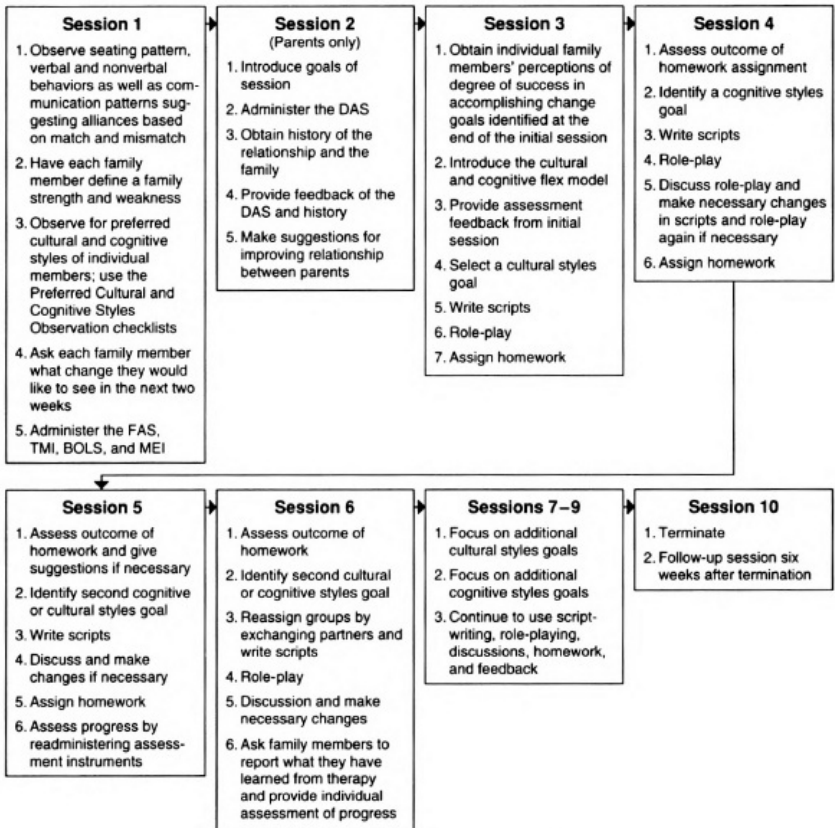
1. Identifying additional cognitive (types of rewards given by the parents to the children) and cultural styles (achieving a better balance between career and family goals for Anna and

between spirituality and family for Jesse) goals with accompanying scriptwriting, role-playing, discussions, and changes, as necessary.

2. Assigning homework after each session and assessing degree of success at the next session.
3. Wrapping up and terminating at the end of Session 10.
4. Following up six weeks after termination of therapy.

A graphic summary of the different sessions of multicultural family therapy is presented in Figure 12.1.

FIGURE 12.1 Multicultural therapy with families



MULTICULTURAL THERAPY WITH THE SINGLE-PARENT FAMILY

Practitioners and researchers have long recognized that single-parent families have needs and problems of adjustment that differ from those of intact families. As early as 1974, Minuchin observed that the absence of the father from the family requires renegotiation and restructuring of family

system boundaries. Ho (1987), focusing on culturally different families, concluded that immigration and acculturation stressors, increasing separation and divorce, and decisions to have children outside of marriage were all related to the rise of single-parent families. He further observed that the traditional closeness of the mother-child relationship within ethnic minority families could contribute to enmeshment and parent-child structural relationships.

The clinical and research experiences of this author in his work with culturally different, single-parent families has led to identification of the following five problems, which need to be addressed in therapy (Ho, 1996, p. 14):

1. The influence of the nonresident parent and that partner's extended family on interactions between the members of single-parent families.
2. The effects of continuing conflict between the parents and involvement of the children in their cultural and cognitive styles mismatch struggles.
3. The influence of the nonresident parent's remarriage and, in particular, the positive and negative impact of stepparents on the single-parent family.
4. The effects of economic pressures on the single-parent family when there is a decline in family income following separation

and/or divorce.

5. The influence of differences in cultural and cognitive styles between the estranged parents, as well as between extended family members, on the degree to which children are encouraged or discouraged from identifying with the culture of the nonresident parent.

Johnson (1994) has found that identification with the culture of the nonresident parent is a central issue in the development of mixed-race children.

The Case of Camilla and Her Two Daughters

Initial Contact and Presenting Problems. Camilla is a Latina who married Robert, a Caucasian. They have two biracial daughters, Tracy and Lavis. Robert and Camilla have been divorced for two years; Camilla has custody and Robert has visitation rights. It had been an acrimonious divorce with many unresolved issues related to the breakup of the marriage.

Camilla contacted the therapist because of conflict with her older daughter. She felt these conflicts were exacerbated whenever the children visited with their father. Camilla also reported that her younger daughter, Lavis, complained of feeling left out whenever the two girls were with their father. Lavis was also uncomfortable during these visits when Tracy and her father would criticize Camilla. A pattern had developed: Following the visits,

Camilla would call Robert to complain and end up in an angry confrontation characterized by accusations, insults, and discussion of unresolved issues related to the failed marriage. Camilla had discussed the possibility of family therapy with Robert, and he had agreed to participate if the therapist felt it was necessary.

Camilla and Robert had met at the community college they were both attending. They were introduced by Camilla's sister, who was married to Robert's best friend. Camilla had dated only one other person before Robert and was quite sheltered. Their dating had gone well, but Camilla admitted that, because of her lack of experience in relationships, she had mainly done whatever Robert had wanted to do and failed to assert herself, even to the point of agreeing to marriage before she completed her college degree. This went against a promise Camilla had made to her parents—that she would complete her education before marrying. Neither Camilla's nor Robert's extended families approved of the marriage; both sets of parents' reasons for opposing the union had been the same: "You are too different. You should marry someone whose background and experiences are more similar to yours."

Robert wanted a stay-at-home wife who would take care of the children and support him in his career. He felt that Latino culture encouraged this type of behavior and his sister-in-law, Camilla's sister, had supposedly adopted

that role. Robert's cultural expectations of the marriage were reflected in his responses to the FAS and TMI.

Camilla decided to continue her college education once her children were old enough to go to a day-care facility. She wanted to work with adolescents who were having problems of adjustment. She married Robert because she believed that, unlike Latinos, Caucasian men would be more egalitarian in their relationships and more likely to help with housework and with rearing the children. Camilla's expectations were confirmed in what she perceived to be the role of her brother-in-law in his relationship with her sister.

History of Marital Problems. Both Camilla and Robert agreed that the first four years of the marriage had been good. Camilla fulfilled Robert's expectations of the stay-at-home wife and mother. Robert was advancing in his career and providing well for the family. Camilla, however, started to become resentful when Robert did not help on household chores and with childrearing. Robert became unhappy when Camilla returned to college and started to do volunteer work. The conflicts between them became more frequent. As she became more involved in her college work and volunteer efforts, Robert felt that Camilla had changed too much.

Robert felt uncomfortable attending social activities in the Latino

community: "They look at me as if I don't belong—like I am the white male enemy they hate." Camilla felt she did not have much in common with Robert's work friends or with their wives. She also felt that they were insensitive to social problems and were materialistic. Camilla's values and cultural expectations of her marriage were revealed in her responses to the FAS and TMI given during Session 2.

Session-by-Session Presentation. The first session included Camilla, Tracy, and Lavis. The therapist greeted the family in the waiting room, introduced himself and escorted them to his office. The office offered a variety of possible seating patterns, so the therapist had an opportunity to observe: Lavis and Camilla sat next to each other while Tracy sat next to Lavis but at a distance from her. The therapist also observed the interactions of the three—who was talking and what facial expressions and eye contact were taking place. He saw that Camilla did most of the talking and that Tracy contradicted her mother frequently and took what she perceived was her father's side on issues. Lavis was silent until addressed by the therapist. The therapist used the observation instruments discussed in Chapter 7 to observe cultural and cognitive styles.

Before the session was over, the therapist asked if all three would agree to have the father involved in a session; they did. The therapist agreed to contact Robert about this. He let the mother and daughters know that for the

next session he would like to meet with Camilla and Robert only to ask about the history of their relationship: how they met, why they had decided to marry (including cultural expectations), and how problems had developed in the relationship and the family. He ended by assigning homework like that given during the initial session with the intact Rosales family.

The initial session, in summary, included the following:

- Looking for possible alliances by observing seating patterns, verbal and nonverbal behaviors, and communication patterns based on match and mismatch.
- Assessing the preferred cognitive and cultural styles of individual members by using the Preferred Cultural and Cognitive Styles Checklists.
- Deciding whether to include a nonresident parent in sessions.
- Assigning homework.

Session 2. The second session for this family included only Camilla and Robert and lasted between an hour and a half and two hours. During this session, the therapist introduced himself to Robert and outlined the rules of the session to both Camilla and Robert: No interruptions, no raised voices, and no personal insults.

The therapist asked the clients to give the history of their relationship.

He realized that they would each have different perspectives but that listening should be valuable because it might contain keys as to why they cannot communicate without conflict. "I would like you to start with the time you met and go to the time you broke up. Who would like to go first?" After the history, prior to end of the session, the therapist administered the same instruments used for intact families: first the Dyadic Adjustment Scale to reflect how they each felt prior to their separation and divorce, followed by the FAS, the TMI for cultural styles, and the BOLS for cognitive styles preferences and assessment of degree of flex.

At this time the therapist also discussed expectations based on cultural stereotypes, proposing how these could have contributed to conflict and disappointment in the marriage. Before the end of the session, the therapist asked Robert if he would be willing to participate in the next session, which would also include the children. Robert agreed.

The second session, in summary, included the following:

- Outlining the rules for the sessions.
- Learning the history of the relationship and the family from each parent's point of view.
- Completing the DAS and other assessment instruments.
- Providing feedback about the findings of the DAS and the histories.

Session 3. This session included Camilla, Tracy, Robert, and Lavis. Once again, the therapist observed the seating pattern. As expected, Lavis and Camilla sat next to each other while Robert and Tracy sat together. The therapist continued to observe the interaction of family members.

The therapist identified goals for therapy—first a cognitive style goal (communication styles when discussing problems the children were having in school): Camilla was too global and Robert too detailed-oriented. The second goal addressed cultural styles—Robert's suspicions that Camilla's extended family was turning the girls against him, and Camilla's belief that Robert was too self-centered and spent money on himself that he should be giving to the children. The therapist assigned the scriptwriting pairs: Camilla and Tracy, Robert and Lavis. The scriptwriting, role-playing, feedback, and discussion were conducted as with the intact family.

- The third session, in summary, included the following:
 - Observing communication patterns, as suggested by seating, verbal and nonverbal behaviors, and alliances based on match and mismatch.
 - Identifying the most important cultural and cognitive styles goals.
 - Scriptwriting.
 - Role-playing.

- Leading feedback and discussion.
- Making changes in scripts and role-playing again, if necessary.
- Assigning homework.

Sessions 4 and 5. Scriptwriting and role-playing for additional cultural and cognitive styles goals continued in Sessions 4 and 5 also. By the conclusion of Session 5, the family members were familiar with the procedure and with the cultural and cognitive flex model. They selected one additional goal and worked on it.

The fourth and fifth sessions, in summary, included the following:

- Assessing outcome of the homework assignments.
- Using the same procedures used during previous sessions for addressing a goal selected by the family members.

Session 6. The clients were sufficiently familiar with the procedure. They no longer needed to consult with the therapist. The therapist merely directed discussion following the role-plays. Toward the end of the session, the therapist assessed progress by readministering the various instruments. Camilla, Tracy, and Lavis requested two more sessions. Robert agreed that these sessions should be done without him, although he was willing to return to the family sessions should it become necessary in the future.

The sixth session, in summary, included the following:

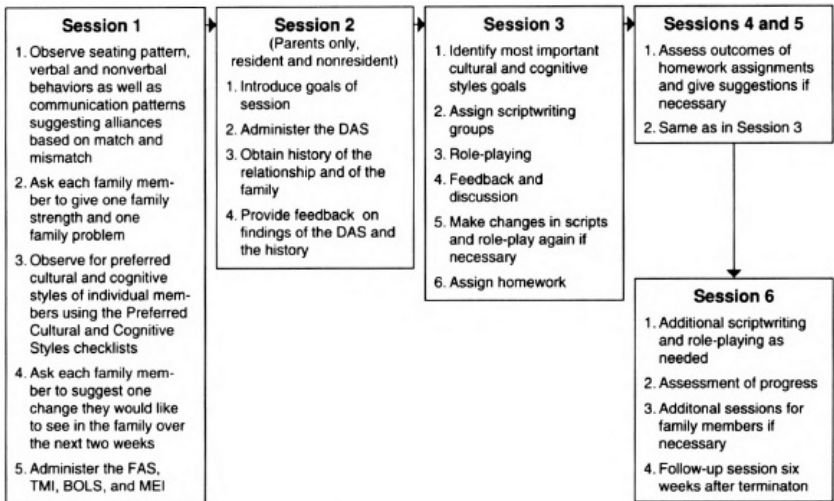
- Additional scriptwriting and role-playing, as needed, with the therapist assuming a nondirective role.
- Assessing progress.
- Scheduling additional sessions for resident family members, if necessary.
- Following up six weeks after termination.
- Working on problems related to homework: spending time with friends, housekeeping assignments, and dealing with the girls' feelings that Camilla does not give them enough quality time at home.

Termination at End of Session 9. Six weeks later the therapist conducted a follow-up session with all the family members present. The clients reported that they were well satisfied with the progress that had been made. Robert and Camilla were able to communicate without conflict. Tracy and Lavis were getting along well, and they had established closer relationships with Camilla and Robert, respectively. At the close of this session, the therapist agreed to check the family's ongoing progress by phoning Camilla and Robert periodically.

Figure 12.2 is a graphic summary of multicultural therapy for

singleparent families.

FIGURE 12.2 Multicultural therapy with single-parent families



Nonparticipation by Nonresident Parent

In some situations nonresident parents may be unable or unwilling to attend the sessions. In other cases the resident parent may object to the inclusion of the nonresident parent. In those instances, the initial session is conducted the same as for single-parent families and held with the resident parent and the children. The session's goals are the same but it is critically important for the therapist to determine the impact of cultural and cognitive styles differences, expectations based on stereotypes, and continuing conflict between the

parents on the dynamics of the single-parent family. Also critical here is determination of potential alliances between children and the nonresident parent and his or her extended family members. This is particularly difficult in situations where the resident parent will not allow the therapist to contact the nonresident parent or in those situations where the nonresident parent is unavailable or unwilling to participate.

The sessions mirror those with the single-parent family with a participating nonresident parent. However, during the second session, the therapist meets with the resident parent only. In those cases where the resident parent refuses to allow the nonresident parent to participate and when alliances with the nonresident parent are contributing to significant family conflict, the therapist should attempt to explain the potential implications of this decision on the likely success of the family therapy sessions. During this session, the therapist learns the parent's perspectives on the history of the relationship and, if appropriate, of the marriage. If the resident parent has not allowed the other parent to participate in the history-taking, then the therapist has the difficult task of attempting to obtain a balanced historical picture from what is said by the children during family sessions.

Procedures and strategies of the remaining sessions are the same as for Camilla's family but, if the family agrees, the therapist might play the role of

the nonresident parent in the role-playing situations.

SUMMARY

Family therapy models and strategies developed for use with culturally different families have focused on matching values, worldviews, family structures, and roles, as well as addressing special needs and personality variables such as biculturalism/multiculturalism. The multicultural model of family therapy is an extension of the model used for doing therapy with couples. The focus is on cultural and cognitive styles match and mismatch and how these are related to family alliances and misunderstandings that contribute to conflict. In addition, the model also encourages identification of false expectations of parents based on cultural stereotypes.

Scriptwriting, role-playing, and homework are the important therapeutic strategies employed, along with preferred cultural and cognitive styles assessment instruments. The multicultural model of therapy has also been used to address the special needs and dynamics of single-parent families.

GLOSSARY

Attitude of Acceptance a nonjudgmental, positive, accepting atmosphere devoid of conformity or assimilation pressures. In therapy this enables the client to express his unique, or true, self.

Bicognitive Orientation to Life Scale (BOLS) a personality inventory composed of items that reflect the degree of preference for field sensitive or field independent cognitive styles in different life domains. Assesses cognitive flex by determining the degree of agreement with items that reflect preference for either field independent or field sensitive cognitive styles. A balance or bicognitive score is also attained.

Bicognitive Style a cognitive style characterized by an ability to shuttle between the field sensitive and field independent styles. Choice of style at any given time is dependent on task demands or situational characteristics. For example, if a situation demands competition, the bicognitive person usually responds in a field independent manner. On the other hand, if the situation demands cooperation, the bicognitive individual behaves in a field sensitive manner. People with a bicognitive orientation also may use elements of both the field sensitive and field independent styles to develop new composite or combination styles.

Bicultural/Multicultural Style a cultural style characterized by an ability to shuttle between the traditional and modern cultural styles. Choice of style at any given time is dependent on task demands or situational characteristics.

Change Agent a person who actively seeks to encourage changes in the social environment in order to ensure acceptance and sensitivity to all cultural and cognitive styles.

Cognitive and Cultural Flex Theory (or Theory of Multicultural Development) the theory that people who are exposed to socialization agents with positive attitudes toward diversity, participate in diversity challenges, interact with members of diverse cultures, maintain an openness and commitment to learning from others, and are more likely to develop multicultural patterns of behavior and a multicultural identity. People who have developed a multicultural identity have a strong, lifelong

commitment to their groups of origin as well as to other cultures and groups.

Cognitive Style a style of personality defined by the ways in which people communicate and relate to others; the rewards that motivate them; their problem-solving approaches; and the manner in which they teach, socialize with, supervise, and counsel others. There are three types of cognitive styles: field sensitive, field independent, and bicognitive.

Cultural and Cognitive Flex (Personality Flex) the ability to shuttle between field sensitive and field independent cognitive styles and modern and traditional cultural styles.

Cultural Democracy (1) a philosophy that recognizes that the way a person communicates, relates to others, seeks support and recognition from his environment, and thinks and learns are products of the value system of his home and community; (2) refers to the moral rights of an individual to be different while at the same time be a responsible member of a larger society.

Cultural Style an orientation to life related to or based on traditional and modern values or a combination of these values. Assessed by the Traditionalism- Modernism Inventory and the Family Attitude Scale.

Diversity Challenges a catalyst for multicultural development such as cultural and linguistic immersion experiences, new tasks, and activities that encourage the process of synthesis and amalgamation of personality building blocks learned from different cultures, institutions, and peoples.

Empathy Projection the process whereby a person tries to understand the point of view and feelings of others whose cognitive styles and values are different from his own.

False Self the identity developed as a result of attempts to conform to cultural and cognitive styles of authority figures, institutions, and majority cultures.

Family Attitude Scale a personality inventory to assess a person's degree of agreement with traditional and modern family values.

Field Independent a cognitive style characterized by independent, abstract, discovery-oriented learning preferences, an introverted lifestyle, a preference for verbal

communication styles, and an emphasis on personal achievement and material gain. People with a preferred field independent orientation are likely to be analytical and inductive and focus on detail. They also tend to be nondirective and discovery-oriented in childrearing, and in teaching, supervising, and counseling others.

Field Sensitive a cognitive style characterized by interactive personalized learning preferences, an extroverted lifestyle, a preference for nonverbal communication styles, a need to help others. People with a preferred field sensitive orientation tend to be more global, integrative, and deductive in their thinking and problem-solving styles, and they tend to be directive in childrearing, and in teaching, supervising, and counseling others.

Life History Interview focuses on the development and expressions of cultural flex during different periods of life: infancy and early childhood, early school and elementary school years, middle school years, high school years, and post- high school period. The life history interview also focuses on the extent of an individual's actual participation in both traditional and modern families, cultures, groups, and institutions. The life history identifies the type of cultural flex by examining the degree to which a person has been able to combine modern and traditional values and belief systems to arrive at multicultural values and worldviews.

Match and/or Mismatch refers to person-environment fit with respect to the degree of harmony or lack of harmony between cultural/cognitive styles and environmental demands. Two types are cognitive mismatch and cultural mismatch.

Mismatch Shock an extreme case of the mismatch syndrome.

Mismatch Syndrome a lack of harmony between a person's preferred cultural and/or cognitive styles and environmental demands. This occurs when people feel at odds to the important people and institutions in their lives. They feel alone, hopeless, and misunderstood; they may exhibit a number of symptoms, including self-rejection, depression, negativity, rigidity, and attempts to escape reality.

Model a person whom the client admires and who is dominant in the cultural/ cognitive styles the client wants to learn.

Modeling the process whereby people learn unfamiliar cognitive and cultural styles through imitation and observation of others, through reading and through travel.

Modern a value orientation that emphasizes and encourages separation from family and community early in life. It is typical of urban communities, liberal religions, and of North American and Western European cultures. People who are identified as having a modern value orientation tend to emphasize science when explaining the mysteries of life; they have a strong individualistic orientation; they tend to deemphasize differences in gender and age roles; and they emphasize egalitarianism in childrearing practices.

Multicultural Ambassador a multicultural person who promotes the development of multicultural environments which encourage understanding (multicultural education) and cooperation among different people and groups.

Multicultural Educator a multicultural person who educates others about the advantages of cultural and cognitive diversity and multicultural orientations to life.

Multicultural Experience Inventory (MEI) an inventory that assesses historical and current experiences. It focuses on personal history and behavior in three areas: demographic and linguistic, socialization history, and degree of multicultural participation in the past as well as the present. The MEI consists of two types of items: historical (reflecting historical development pattern—HDP) and contemporary functioning (reflecting contemporary multicultural identity—CMI). Includes items that deal with degree of comfort and acceptance.

Multicultural Model of Psychotherapy a model of therapy that emphasizes multicultural development by maximizing the client's ability to flex between cultural and cognitive styles when faced with different environmental demands and development of a multicultural orientation to life characterized by serving as a multicultural educator, ambassador, and peer counselor.

Multicultural Peer Counselor a multicultural person who provides emotional support and facilitates change and development of empowerment in those of his or her peers who are suffering from mismatch.

Multicultural Person-Environment Fit Worldview a worldview that is based on the following

assumptions: (1) There are no inferior people, cultures, or groups in terms of gender, ethnicity, race, economics, religion, physical disabilities, region, sexual orientation, or language; (2) problems of maladjustment are the result of mismatch between people, or between people and their environments rather than of inferior people or groups; (3) every individual, group, or culture has positive contributions to make to personality development and to a healthy adjustment to life; (4) people who are willing to learn from others and from groups and cultures different from their own acquire multicultural building blocks (coping techniques and perspectives), which are the basis of multicultural personality development and multicultural identity; (5) synthesis and amalgamation of personality building blocks acquired from different people, groups, and cultures occur when the person with multicultural potential works toward the goals of understanding and cooperation among diverse groups and peoples in a pluralistic society; and (6) synthesis and amalgamation of personality building blocks from diverse origins contribute to the development of multicultural personality development and psychological adjustment in a pluralistic society.

Preferred Cultural and Cognitive Styles Observation Checklists observational rating scales that list field sensitive and field independent behaviors in five domains: communications; interpersonal relationships; motivation; teaching, parenting, supervising, and counseling; learning and problem solving. The checklists can be used to assess modern and traditional cultural styles and values.

Preferred Styles the dominant cultural and cognitive styles of a person.

Scriptwriting a therapy strategy used, along with role-playing, to promote cultural and cognitive flex development by matching the cultural or cognitive styles of a person or institution.

Theory of Multicultural Development see Cognitive and Cultural Flex Theory.

Traditional a value orientation that emphasizes close ties to family and community throughout life. It is typical of rural communities, conservative religions, and of minority and developing cultures. People identified as having traditional value orientations tend to have a spiritual orientation toward life, are strongly identified with their families and communities of origin, usually believe in separation of gender and age roles; and typically endorse strict approaches to child-rearing.

Traditionalism-Modernism Inventory (TMI) a personality inventory that assesses the degree of identification with traditional and modern values and belief systems. The instrument yields scores indicating the degree of agreement with items reflecting traditionalism or modernism. The degree of flex can be determined by examining the differences between the total traditionalism and total modernism scores (balance score) as well as by looking at the degree of agreement with the traditional and modern items across the different domains of life: gender-role definition; family identity; sense of community; family identification; time orientation; age status; importance of tradition; subservience to convention and authority; spirituality and religion; attitudes toward issues such as sexual orientation, the death penalty, the role of federal government in education, benefits to single mothers and noncitizens, and abortion. Type of flex can be determined by examining the degree of flex within each domain.

Tyranny of the Shoulds an individual's perception of the self based on what she believes others expect the person to be like. The pressure to conform could contribute to psychological maladjustment—the individual develops a false self based on the "shoulds" of parents, important others, and societal institutions.

Unique Self a person's preferred cultural and cognitive styles before he has been subjected to the pressures of conformity.

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