CULTURAL DIFFERENCES IN ATTACHMENT AND EMOTION:

EMOTIONALLY FOCUSED THERAPY WITH INTERCULTURAL COUPLES

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Abstract

With increased globalization, immigration, and technological advances worldwide, the number

of intercultural couples is growing rapidly in the United States. Despite the proliferation of

intercultural relationships, limited research exists to guide therapists in the treatment of

intercultural couples. This qualitative study aimed to explore couple therapists' experience of

implementing emotionally focused couples therapy (EFT), an evidence-based treatment, with

intercultural couples. Exploratory questions unveiled participants' own cultural background and

whether it informed their beliefs about EFT and attachment, when and how cultural differences

arise in treatment, whether common themes or patterns emerged among these couples, what

interventions were used to address cultural differences and whether these interventions were

inherent to EFT, how couples responded to these interventions, whether EFT is helpful in

addressing cultural differences, and what advice they would give to therapists using EFT with

intercultural couples. As hypothesized, it was found that (1) EFT was considered helpful with

intercultural couples, given its emphasis on attachment, vulnerability, openness, curiosity, and

individual uniqueness; (2) participants noticed common themes that arose among intercultural

couples; and (3) participants found it helpful to actively inquire about and incorporate into

treatment an awareness of cultural difference. Six major themes also emerged: (1) perceived

"gaps" in therapists' cultures of origin attracted them to EFT, particularly that their cultures

lacked emotional engagement; (2) intercultural couples present with common themes with regard

to cultural differences in extended family involvement, emotional engagement, gender role

expectations, and childrearing practices; (3) cultural differences impact both relationship conflict

and the therapeutic alliance, but these differences and their impact are often outside awareness;

(4) exploring cultural differences often further illuminates partners' experience of attachment

and emotion; (5) therapists are flexible when intervening to address cultural differences, and couples respond positively; and (6) therapists believe EFT is helpful in addressing cultural differences with intercultural couples because of its emphasis on an open and curious stance, accessing vulnerability, and using the attachment frame. Taken together, these study findings suggest that EFT shows promise as an effective treatment with intercultural couples, provided that EFT is enhanced by existing multicultural models that explicitly address cultural differences. A new culturally sensitive model for EFT is proposed, and limitations and implications for research are discussed.

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Introduction and Background

Statement of the Problem

The following study explores couple therapists' experience of implementing emotionally focused couples therapy (EFT) with intercultural couples. Nine licensed therapists who are certified by the International Centre for Excellence in Emotionally Focused Therapy (ICEEFT) and have been providing EFT to couples for one or more years were interviewed about their experiences utilizing EFT when working with intercultural couples. Participants were asked about their own cultural background and whether their own culture informed their beliefs about EFT and attachment, when and how cultural differences between intercultural partners arise in treatment, whether there are common themes or patterns among their intercultural couples, what interventions were used to address cultural differences and whether these interventions were inherent to EFT, how intercultural couples responded to EFT, whether EFT is helpful in addressing cultural differences, and what advice they would give to therapists using EFT with intercultural couples.

It was expected that EFT as-is would be found to be helpful with intercultural couples, given its emphasis on universal themes of attachment, in addition to its international application. It was also expected that given EFT's Rogerian, experiential basis, which emphasizes the individual's unique experience, the treatment inherently attends to cultural differences as they may appear through individual difference. However, it was also hypothesized that EFT therapists would have noticed particular themes, patterns, or conflicts that arise among intercultural couples, and that actively inquiring about and incorporating an awareness of cultural difference—particularly in relation to attachment and emotion—enhances treatment for these couples. In addition, given that (1) EFT is based on mainstream, Westernized conceptions of

attachment and emotion, and (2) there are cultural variations in attachment and emotion, it was hypothesized that then when three different cultures overlap (therapist's and each partner's), unacknowledged differences in attachment and emotion may negatively impact treatment. Therefore, in order to be most effective in using EFT with intercultural couples, EFT therapists would not only need to become aware of cultural variations in attachment and emotion between each partner, but also between him- or herself and each partner.

A qualitative study design was used to explore common themes experienced by EFT therapists in working with intercultural couples. This study explored the following questions in order to better understand how EFT therapists work with cultural differences in the context of EFT:

1) How does the therapist's cultural background inform his or her beliefs about EFT and attachment?

2) How and when do cultural differences arise in EFT with intercultural couples?

3) Are there common themes, conflicts, or patterns that tend to arise?

4) Is EFT helpful in addressing cultural differences, or does it need to be tailored to meet the needs of intercultural couples?

5) What would be helpful for EFT clinicians to know in order to work effectively with intercultural couples?

Overview

Intercultural couples and couples therapy. With increased globalization, immigration, and technological advances worldwide, individuals of different cultures are interacting with one another much more frequently, thereby increasing the probability of the formation of intimate intercultural relationships (Bustamante, Nelson, Henriksen, & Monakes, 2011). In fact, the

number of intercultural couples is growing rapidly in the United States (Killian, 2002; Pederson, 2000). In 2010, about 15% of new marriages were intercultural, which is double from 1980 (Falicov, 2014b). That same year, 24% of black males married interculturally, 36% of Asian females, and 26% of both male and female Latinos. One in 7 marriages are intercultural, and 1 in 12 marriages are interracial; and more than one-third of Americans have a family member married to somebody of a different race or ethnicity; this number is higher for interfaith couples (Falicov, 2014b). Although intercultural couples have always existed, societal changes have promoted greater acceptance, suggesting that intercultural marriages are likely to increase rapidly in the future. Evidence of this greater public acceptance is evident in that 63% of Americans say that they would be accepting if a family member married outside of their own race and ethnicity, a number that is double from the late 1980s (Falicov, 2014b). Despite the proliferation of intercultural relationships both nationally and internationally, limited research exists to guide therapists in the treatment of intercultural couples (Bustamante et al., 2011; Sullivan & Cottone, 2006). The research that does exist focuses on common stressors for intercultural couples, frameworks for conceptualizing couple conflict in intercultural relationships, and treatment implications and strategies.

Stressors. According to Hsu (2001), "intercultural couples have a greater likelihood of encountering problems because they hold even more diverse values, beliefs, attitudes, and habits than couples who are of similar cultures" (p. 225). Such vast differences lead to increased potential for misunderstanding (Waldman & Rubalcava, 2005), as each partner is often unaware that his or her assumptions and expectations are culture-bound and therefore may differ from his or her partner's assumptions and expectations (Tseng, McDermott, & Maretzki, 1997). A growing body of literature suggests that cultural differences contribute to couple distress and

should be addressed in couple therapy (Heller & Wood, 2007; Molina, Estrada, & Burnett, 2004; Waldman & Rubalcava, 2005), so that intercultural couples can confront these previously unexamined challenges related to "perceptions and meanings about their cultural similarities and differences" (Falicov, 1995, p. 232).

Some researchers have found that intercultural relationships may experience more stress and lower relationship satisfaction compared to same-culture couples (Fu, Tora, & Kendall, 2001), and many attribute this disparity to the notion that intercultural couples experience stressors not experienced by same-culture couples (Fu & Heaton, 2000; Sung, 1990). Such stressors particularly relevant to intercultural couples include: (a) negative reactions and racism from the community (Biever, Bobele, & North, 1998); (b) innate cultural-racial hostility within the relationship (McFadden & Moore, 2001); differences in values, worldviews, and expectations (Bhugra & De Silva, 2000; Falicov, 1995; Hsu, 2001; Waldman & Rubalcava, 2005); (c) distinct styles in communication and emotional expression (Bhugra & De Silva, 2000; McGoldrick, 1999; Waldman & Rubalcava, 2005); (d) religious practices (Crohn, 1998; Joanides, Mayhew, & Mamalakis, 2002); (e) migration and acculturation issues (Baltas & Steptoe, 2000; Softas-Nall & Baldo, 2000); and (f) gender roles (Bhugra & De Silva, 2000; Kim, 1998). One phenomenological study used ethnographic interviews with five intercultural couples to identify culture-related stressors and the strategies used by couples to cope with these stressors (Bustamante et al., 2011). Four stressors relevant to cultural differences were identified: (a) childrearing practices, (b) time orientation, (c) gender role expectations, and (d) extended family relationships. In addition, six primary strategies for coping with these stressors were found: (a) gender-role flexibility, (b) humor, (c) cultural deference by one partner, (d) recognition of similarities, (e) cultural reframing or blending of values and expectations, and (f) appreciation

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for other cultures.

Despite these many stressors, research suggests a number of potential strengths among intercultural couples. Directly dealing with cultural differences may enhance intimacy (Gaines et al., 1999; Troy, Lewis-Smith, & Laurenceau, 2006) and also may promote commitment, intentionality, and secure attachment (Gaines & Agnew, 2003; Ting-Toomey, 2009; Troy et al., 2006). In addition, some scholars have found that despite the commonly held belief that intercultural couples tend to have lower relationship quality, research shows that partners in intercultural relationships more often are securely attached rather than insecurely attached (Gaines et al., 1999), and report significantly higher relationships satisfaction compared to those in intracultural relationships (Troy et al., 2006). Rosenfeld (2005) found that interracial couples tend to have higher levels of education, with 53% having at least some graduate education, which may either contribute to or result in increased relationship satisfaction. Overall, the research is conflicting regarding whether relationship satisfaction among intercultural couples is higher, lower, or similar when compared with intracultural couples.

Frameworks. Another subset of researchers have focused on developing frameworks for understanding the relationship between couple conflict and cultural differences (Falicov, 1995; Kellner, 2009; Perel, 2000). While Falicov (1995) prefers the social constructionist view that cultural differences only cause marital distress if they are identified as problematic by the couple, Perel (2000) suggests that an understanding of the difference between high-context and low-context cultures serves as an ideal starting point. High-context cultures value interdependence, predictability, and saving face, while low-context cultures value independence, self-sufficiency, and direct communication (Bustamante et al., 2011). Alternatively, Kellner (2009) describes a conceptual framework for tracking cultural differences in intercultural couples. According to this

framework, cultures are mapped along a continuum from individualism to collectivism. While more individualist cultures emphasize autonomy, self-realization, personal initiative, and independence, collectivist cultures emphasize group loyalty and interconnectedness of family, community, and society. She suggests using a "cultural compass" to help bring differences along this continuum into awareness, with a particular focus on four organizational parameters: emotional expressiveness, continuum of autonomy, gender differentiation, and sexuality. Regarding emotional expressiveness, collectivistic cultures better tolerate emotional expression in the service of social harmony, while individualistic cultures value emotional self-control in the service of personal advancement. Regarding the continuum of autonomy, collectivistic cultures emphasize the needs of the extended family over the nuclear family, while the opposite is true for individualistic cultures. With regard to gender differentiation, collectivistic cultures value more rigid gender roles, while there is more flexibility in gender roles in individualistic cultures. With regard to sexuality, for many collectivist cultures, sexuality is considered a man's domain and an aspect of family well-being, while for many individualistic cultures, sexuality is considered pleasurable for both men and women, and an element of individual desire.

Seshadri and Knudson-Martin (2013) utilized ecological systems theory to explore how couples manage interracial and intercultural differences to create strong and meaningful relationships. They found that intercultural couples tended to organize their cultural differences according to four relationship structures: (1) integrated, (2) co-existing, (3) singularly assimilated, and (4) unresolved. Integrated couples organize their cultural differences by melding them together and celebrating both cultures. Coexisting couples "agree to disagree" and are able to retain two ways of carrying out their lives. Singularly assimilated couples do not highlight cultural differences; instead, one partner assimilates to the other partner's culture, such that the

former's culture becomes nearly invisible. Unresolved couples have not dealt with their differences, and as a result tend to continually conflict around these differences, though often leave them unaddressed and create tension. These scholars also found that intercultural couples tended to use four strategies that contributed to relationship success: (1) creating a "we," or a co-co-constructed reality that transcends difference; (2) framing differences, such as by being flexible and respectful or celebrating differences; (3) emotional maintenance, or communicating openly about emotions and insecurities; and (4) positioning in relation to societal and familial context, or creating boundaries around their relationship to protect themselves from discrimination.

Treatment. Scholars have also suggested specific therapeutic techniques and strategies for culturally competent treatment of intercultural couples. Gopaul-McNicol and Brice-Baker (1998) emphasize important considerations when assessing and gathering information from the couple at the beginning of treatment. Henriksen, Watts, and Bustamante (2007) developed The Multiple Heritage Couple Questionnaire, which was designed to aid clinicians in attending to the challenges unique to intercultural couples. Bhugra and De Silva (2000) suggest incorporating indigenous problem-solving techniques. Many stress that the therapist must acquire cultural knowledge and develop cultural sensitivity so that he or she can "promote cultural curiosity, knowledge, understanding and increased tolerance for the other's culture" (Hsu, 2001, pg. 241). In this way, the therapist serves as a "cultural referee," and may even encourage acceptance by reframing the couple's experience as tourists in a foreign country (Perel, 2000). Biever et al. (1998) suggest that therapy with intercultural couples should be collaborative and characterized by a curious, open, and accepting stance in which the strengths—of the couple, and of their respective cultures—are highlighted.

While most scholars tend to focus on the ways in which traditional family therapies can be just as effective with diverse couples as they are with Caucasian couples (Hervis, Shea, & Kaminsky, 2009; Sevier & Yi, 2009), some scholars have highlighted the limitations of traditional couple therapies in the treatment of all diverse couples, and suggest ways of improving these treatments to better serve minority couples. Kelly, Bhagwat, Maynigo, and Moses (2013), for example, developed a multicultural approach to adapting any traditional approach to couple therapy. Utilizing this approach entails conducting treatment as usual, but enhancing treatment by developing four therapist cultural competencies, and then using these competencies to bridge differences via four mechanisms. The four cultural competencies described in this approach are: (1) knowledge, (2) dynamic sizing, (3) culturally competent skills and interventions, and (4) self-awareness (Sue & Sue, 2008). Acquiring knowledge involves gathering information from several sources, including collective observations of therapists about race, ethnicity and culture, from the couple themselves, and from research about risk and protective factors specific to the couple's identity group(s). Dynamic sizing emphasizes the idea that individual differences within each group means that there is no one-size-fits-all factor, so it's important for the therapist to consider diversity knowledge while testing hypotheses, which determines whether or not emic or etic factors apply to the couple. Developing culturally competent skills and interventions involves using techniques that have been shown to be effective with diverse clients. Self-awareness involves the therapist's developing a deeper understanding about his or her own identity and biases, having an awareness of structural oppression and how it manifests in his or her own beliefs and behavior, and increasing awareness of the importance of and nuances related to his or her own identity so that he or she might foster strengths-based perspective-taking.

Kelly et al. (2013) also discuss four mechanisms by which the four cultural competencies may work. These four mechanisms are ones that standard, more traditional couple treatments often fail to address, leading to sub-optimal treatment, often ultimately causing couples drop out of treatment after having only one or two sessions. The first mechanism, worldview and value differences, involves acknowledging and confronting that the therapist and couple might possess different values and views of the world. The second mechanism, experiences and contexts, involves acknowledging and incorporating differences in experiences and contexts. The third mechanism, power differences between therapist and couple, involves bringing to awareness power differences that may negatively impact treatment if left unacknowledged. The fourth mechanism, felt distance between therapist and couple, involves bringing to awareness a lack of connection possibly caused by unacknowledged cultural differences, or lack of familiarity with treatment, which is common for underserved groups (Kelly et al., 2013).

Falicov (1995, 1998, 2003, 2014a) has developed an approach for integrating culture in therapy, regardless of type of therapy used, or whether with individual, couple, or family clients. Using Falicov's multidimensional, ecological, comparative approach (MECA), therapists maintain a "both/and" stance to view families in a comparative, sociocultural context through the lenses of cultural diversity and social justice. Therapists utilize four generic ecosystemic domains—(1) migration/acculturation, (2) ecological context, (3) family organization, and (4) family life cycle—to compare two overlapping cultural maps: the therapist's and the client's. When applying this approach in working with intercultural couples, three overlapping cultural maps are examined: the therapist's, and each partner's. By comparing these overlapping cultural maps, the therapist can then draw attention to similarities and differences across all dimensions,

contextualize these differences, and implement culturally attuned interventions with a view toward integrating cultural dimensions and social justice concerns.

Seiff-Haron, Sasaki, and Sonnier (2014) have identified four common injuries or invalidations when working cross-culturally with diverse couples, and four interventions to aid in reparation after these invalidations. The first injury involves making the client feel like an "other" by him or her as a representative for his or her cultural group. Their recommended repair is a *cultural disclosure*, in which the therapist discloses about his or her own culture with the intention of leveling the playing field, by stating, for example, "In my culture, it's considered disrespectful to express any negative feelings, I wonder if this might be the case for you too?" The second injury involves asking the client about their experience, which can increase feelings of alienation. Their recommended repair is a *collective reflection*, which normalizes the client's experience by introducing the collective experience of a larger group, so that the client does not feel so alone. For example, the therapist might state, "You know, I've heard this before from some of my other Asian clients, that they feel quite ashamed when they've expressed their anger out loud. I wonder if you might have a similar experience?" The third injury involves stereotyping the client such that the client feels unseen. Their recommended repair is a *cultural conjecture*, in which the therapist tentatively names a possible cultural dynamic while reflecting the data that might support it. For example, the therapist might state, "Trisha, you mentioned that it felt 'alien' to you to be asked how you were feeling, while Josh, you said it seemed 'ridiculous' that she wouldn't want to tell you how she is feeling. I wonder if these differences might have to do with your different cultural backgrounds, where in your Italian culture, Josh, being emotionally open was the norm, whereas in your Japanese culture, Trisha, such openness was unheard of. Could this have something to do with what's going on?" The fourth injury involves

exploring a client's culture when they themselves are unaware of how their cultural background has impacted them. Their recommended repair is *slicing culture thinner*, which involves slowly exploring a client's narrow windows of experience, through repetition of the client's words, slow pacing, and constant empathy and validation.

Cultural competency and therapist self-awareness. As alluded to in the models above, much of the literature on cultural competency emphasizes therapist self-awareness as an essential component of effective work with multicultural clients (e.g. Falicov, 2014b; Kelly et al., 2013; Sue & Sue, 2008). Although little scholarship exists regarding the impact of therapist self-awareness on therapy specifically with intercultural couples, as noted in Falicov's (2014b) model, such awareness is likely even more essential to effective treatment, given the inevitable presence of three overlapping cultural maps of each partner and the therapist. Kelly et al. (2013) emphasizes that all four mechanisms of (1) worldview and value differences, (2) differences in experiences and contexts, (2) power differences, and (3) felt distance between therapist and couple could be detrimental to treatment if left unacknowledged, and therapist self-awareness of biases and assumptions help to increase awareness of worldview and value differences and differences in experiences and contexts, while also decreasing power differences and felt distance.

Some scholars have asserted that self-awareness alone is not enough to effectively address cultural difference, and that the therapist must take this self-reflection further. It has been suggested that therapists espouse a stance of *cultural humility*, which entails "a commitment to critical self-reflection, self-evaluation, and self-critiquing . . . to address and redress power dynamics and imbalances" in client-therapist dynamics (Falender, Shafranske, & Falicov, 2014, p. 6-7). Notably, however, even when attempting to espouse a culturally humble stance,

therapists may not completely understand the impact of privilege and oppression enough to change their professional behavior accordingly (Falender et al., 2014). Falicov (2014a) asserts that more attention should be paid to the concept of *cultural countertransference*, which considers both client and therapist subjective perceptions of each other's cultural backgrounds, both of which impact treatment profoundly.

Comas-Diaz (2012) emphasizes that therapists must conduct a cultural self-assessment in order to increase *cultural self-awareness*, which she defines as "becoming conscious of one's reactions to culturally different individuals" (p. 15). She notes that culture can best be understood as an iceberg, in that much of its content lies below the surface. Superficial culture (above the surface) has a low emotional load, compared to deep culture, the unconscious aspects below the surface that carry a high emotional valence, and influence worldview, perception, and behavior. *Deep culture*, or a *cultural unconscious*, includes unspoken norms regulating family dynamics, intimacy, identity, boundaries, and emotional space, among other other psychological areas. It is therefore imperative that clinicians explore their own cultural unconscious as well as their clients' or otherwise run the risk that their cultural icebergs will collide and interfere with the therapeutic alliance. In addition, not only does cultural competence entail knowledge, skills, and awareness, but also *attitude*, or a stance of sensitivity, respect, humility, and empathy.

Emotionally focused couples therapy (EFT). Emotionally focused couple therapy (EFT), which was developed in the 1980s by Sue Johnson and Less Greenberg, is one of the most popular couple treatments utilized worldwide. It is particularly hailed for its empirical support, as studies have found that 70-75% of couples move from distress to recovery, and 90% show significant improvements (Johnson, Hunsley, Greenberg, & Schindler, 1999).

Theoretical background. Emotionally focused couple therapy finds it roots in a combination of attachment theory, humanistic-experiential theories, and systems theory (Johnson, 2004). In EFT, attachment, or the sense of secure dependence, is considered an innate motivating force for all human beings across the lifespan, from birth through adulthood. This attachment complements autonomy, and offers an essential safe haven and secure base from which individuals can explore and adapt to their environment. Emotional accessibility and responsiveness build bonds, as emotions direct communication to the self and others about motivations and needs. Relationship distress is therefore caused by a lack of interactions that are open and responsive. As a result, individual attachment needs are left unsatisfied, leading to deprivation and distance, and ultimately conflict and distress. Couples will only be able to resolve conflicts without threatening the relationship once they create a secure bond by establishing responsiveness to attachment cues (Johnson, 2004). EFT draws upon humanistic-experiential theories in that it focuses on process, empathy, emotion, and corrective emotional experience (Johnson, 2004). In EFT the emphasis is on how individuals actively process their experiences as they interact with the environment—in the present. A major goal of EFT is the fostering and heightening of new, corrective emotional experiences in the here-and-now of the therapy session. It also focuses on how inner and outer realities define each other, in particular, how emotions orient individuals to their world and tell themselves and others what they need and what they fear. EFT draws from systems approaches in that each partner is considered to be creating the responses of the other partner, often without even being aware of how this occurs (Johnson, 2004). These interactions are characterized by circular rather than linear causality, in that they reciprocally determine each other.

Primary assumptions. Emotionally focused couple therapy has five primary assumptions (Johnson, 2004). First, an emotional bond is the most appropriate paradigm for adult intimacy, and the key issue in marital conflict is the security of this bond, which is created by accessibility and responsiveness. Such an emotional bond addresses every individual's innate need for contact, security, and protection. Second, emotion is essential in organizing attachment behaviors in that they make the self and other aware of whether and how attachment needs are met. It is both a crucial target and an agent of change in that it guides and gives meaning to perception, motivates to action, and communicates to the self and others about needs. The creation of new, corrective emotional experience is the most important factor in intrapsychic and interpersonal change. Third, circular causality—or the way interactions are organized and the dominant emotional experience of each partner operate in a reciprocally determining manner—is what maintains relationship problems. Fourth, attachment needs are healthy and adaptive; it is how these needs are enacted in a context of perceived insecurity that creates problems. These needs need to be recognized and validated, not ignored or dismissed. Fifth, change is facilitated by accessing and reprocessing emotional experience. The creation of new elements of emotional experience and new ways of expressing that experience allows for new interactions, yielding a redefinition of the couple relationship.

The 3 stages of EFT. The change process in emotionally focused therapy is made up of three stages: (1) de-escalation of negative cycles of interaction, (2) changing interactional positions, and (3) consolidation and integration (Johnson, 2004). During step 1 of the de-escalation stage, the therapist creates an alliance and begins an assessment of the core attachment struggle within the relationship. During step 2, the therapist helps the couple to identify the negative interactional cycle. The focus of step 3 is accessing unacknowledged emotions and

attachment needs, and the focus of step 4 is reframing the problem in terms of the negative cycle, underlying emotions, and attachment needs. During stage 2, changing interactional positions, steps 5 through 7 involve promoting identification with disowned emotions and needs, promoting acceptance of the partner's experience, and facilitating expression of needs to redefine attachment. This stage is repeated for both partners. Finally, during the final consolidation and integration stage, the therapist facilitates the emergence of new solutions to old relationship problems (step 8), and helps the couple to consolidate new positions and new cycles of attachment behaviors (step 9).

Cross-cultural implications of focus on attachment and emotions. Cultural differences in expectations regarding attachment, emotional expressiveness, and the valuing of certain emotions are particularly significant in EFT treatment, because the treatment so heavily focuses on emotional expression related to unmet attachment needs. The goal in EFT is to help couples to understand how their conflicts can be boiled down to the basic attachment needs of feeling safe, secure, and essentially *loved* by their partners, and to help partners understand and express their own and each other's emotions surrounding these attachment needs. In turn, partners are then helped to change how they respond to one another—both emotionally and behaviorally—in order to better meet these needs (Johnson, 2004). If each partner *and the therapist* have different ideas of whether, how, and when to express which emotions, as well as different ideas, based on cultural norms and ideals, about what attachment looks like and how a partner should be responding to these attachment needs, then one wonders whether accomplishing the major goals of EFT might prove to be extremely difficult without a clear awareness and understanding of these cultural differences.

Cultural differences in attachment. A small body of literature has begun to explore cultural differences in attachment, in an effort to determine whether attachment is culture-bound or universal. These contrasting views are explored in more detail below.

Attachment as universal. Most scholars assert that attachment needs are universal, and that the theory can be applied to all cultures (Liu & Wittenborn, 2011). According to Bowlby's (1969/1982) original theory of attachment, a strong proximal and emotional bond to a primary attachment figure is a biological imperative essential to an infant's survival, especially in the presence of threats to security. Therefore, all human beings universally are hardwired to seek proximity to a caregiver through expressions of need, for the purposes of receiving comfort and safety. These attachment figures vary in their level of responsiveness, and this variation impacts whether and how the child utilizes this and future attachment figures as a secure base from which to explore, and a safe haven for comfort when security is threatened (Ainsworth, Blehar, Waters, & Wall, 1978). Using the Strange Situation experiment, Ainsworth et al. (1978) observed infant's reactions to separation from a caregiver and identified three distinct styles of attachment: anxious-resistant, anxious-avoidant, and secure. Secure infants were observed to become upset when separated from their caregivers, but easily comforted when reunited with their caregivers. Alternatively, while anxious-resistant infants required physical contact and were angry and difficult to comfort due to inconsistent caregiving, anxious-avoidant infants ignored their caregivers and avoided interaction due to rejecting caregiving. These attachment styles were later applied to adult romantic attachment (Hazan & Shaver, 1987). The three attachment styles were reclassified as anxious-ambivalent, avoidant, and secure.

With its evolutionary roots, attachment theory has long been considered universal, and research supports its cross-cultural validity (Liu & Wittenborn, 2011). Many studies have shown

that attachment security is normative across cultures, and attachment behaviors and processes have been observed and documented worldwide in both infancy and adulthood (van Ijzendoorn & Bakermans-Kranenburg, 1996; van Ijzendoorn & Sagi-Schwartz, 2008). In particular, across cultures, secure attachment was found to emerge from sensitive parenting, and preference toward secure attachment in both children and parents was validated across cultures, as well as the role of attachment security in increasing overall health and social competence (van Ijzendoorn & Sagi-Schwartz, 2008). In another study, Posada et al. (1995) used the Attachment Q-Sort with mothers from various cultures, and found that most of them described the ideal child as one with a secure attachment, or one who makes adaptive use of the mother as a secure base for exploration, though the mothers varied in their descriptions of what attachment behaviors looked like.

   Attachment as culture-bound. Some scholars criticize researchers who have examined attachment theory cross-culturally, suggesting that they have been off-target in that they have explored the theory's periphery rather than its core, and therefore have missed important culture-bound ideas within attachment theory itself (Keller, 2013; Rothbaum, Weisz, Pott, Miyake, & Morelli, 2000). Although attachment needs are widely considered universal, the behavior associated with attachment and the expression of attachment needs varies across cultures (van Ijzendoorn & Sagi-Schwartz, 2008). Kermonian & Leiderman (1986), for example, compared attachment behavior between Gusii and North American infants. In observing the infants in the "strange situation," they found that, upon reunification with the caregiver, Gusii infants expected a handshake, while North American infants expected a hug. Both displayed similar insecure attachment behaviors, however, when they did not receive the expected form of greeting, they pulled away from the caregiver. In essence, these and similar studies have shown that while

attachment needs are universal, expressions of these needs and expectations regarding responses to these needs vary across cultures. In addition, van Ijzendoorn and Kroonenberg (1988) have consistently demonstrated that the normative attachment style may differ across cultures. For example, in Japan, the anxious-resistant attachment style is more common, possibly a necessary adaption to the cultural expectation to suppress negative emotions (van Ijzendoorn & Kroonenberg, 1988).

Rothbaum et al. (2000) critiqued the core tenets of attachment theory, illustrating that they are deeply rooted in mainstream Western thought. Using Japanese culture as a contrast, they suggested that when applied to other cultures, the theory requires fundamental change, particularly with regard to its three core tenets: the sensitivity hypothesis, the competence hypothesis, and the secure base hypothesis.

According to the sensitivity hypothesis, whether an infant becomes securely attached depends most importantly on the mother's ability to sensitively respond to the child's signals (Ainsworth, Blehar, Waters, & Wall, 1978). This hypothesis is problematic, however, because what constitutes sensitivity likely reflects indigenous values, which tend to differ by culture (Rothbaum et al., 2000). Japanese versus U.S. parents differ in how they express sensitivity, in that the former do so with skin-to-skin contact, while the latter do so with distal contact. Japanese parents show sensitivity in *anticipation* of their infants' signals, where as U.S. parents do so in *response* to their infants' signals (Hattori, 2014). Perhaps the most important difference in sensitivity between these two cultures is in the objectives: whereas Japanese parents use sensitivity to foster dependency and emotional closeness, U.S. parents use it to foster exploration and autonomy (Hattori, 2014).

According to the competence hypothesis, securely attached children become more emotionally and socially competent than insecurely attached children (Ainsworth et al., 1978). This hypothesis is problematic, however, because different cultures have different definitions of social competence (Rothbaum et al., 2000). Attachment theorists define competence according to Western values of exploration, autonomy, efficacy, expression of both positive and negative affect, sociability with familiar and unfamiliar others, and a positive self-concept (Feeney, 1999). However, Japanese culture values the preservation of social harmony, such that social competence emphasizes dependence, emotional restraint, indirect emotional expression, clearly different norms for behaving with in-group versus out-group members, and self-criticism. As a result Japanese caregivers tend to blur the self-other distinction, such that they are one with the child, encouraging dependency (Hattori, 2014). In addition, Japanese caregivers often attempt to minimize their infants' negative emotions to avoid criticism from family and community (Hattori, 2014).

According to the secure base hypothesis, the secure base of the mother's presence provides protection and comfort, which in turn allows the infant to feel free to explore (Ainsworth et al., 1978). This hypothesis is problematic, however, because cultures differ as to the behaviors linked to attachment as well as what it means to adapt to the outside world (Rothbaum et al., 2000). In the U.S., the secure base provides a safe starting point for exploratory behavior, and attachment facilitates adaptation in the form of autonomous mastery of the environment. In Japan, however, the secure base provides a starting point for continued dependence, and attachment facilitates adaptation in the form of accommodation, avoidance of loss, fitting in, and loyalty. For example, during adolescence, Japanese caregivers emphasize cooperation, empathy, and recognition of others' needs, such that they prioritize harmony with

others over their own self-needs (Hattori, 2014). This often results in Japanese adolescents'
reliance on others to understand their needs and preferences, such that they do not need to
express them (Hattori, 2014).

Keller (2013) proposed that attachment theory needs to be reconceptualized to be more
culturally sensitive, particularly to account for developments in evolutionary science and
cultural/anthropological approaches of parenting and child development. More specifically, she
asserted that attachment theory is based on socialization patterns that originate from a Western
middle-class perspective. Three cornerstones of attachment theory, she argued, deviate from
cultural values of many non-Western cultures: the monotropic bond between infant and one
caregiver, stranger anxiety, and a singular mainstream definition of attachment.

Although attachment theory as originally conceptualized emphasizes the monotropic
bond between one caregiver and one infant, caregiving patterns across cultures demonstrate that
caregiving by multiple caregivers is much more common (Keller, 2013). For example, the Aka
tropical forest foragers in the Congo Basin Rainforest raise their children in cooperative
childrearing systems in which approximately twenty caregivers interact with young children
daily (Lancy, 2008). Similarly, the Efe of Zaire pass their newborns around between women who
hold, carry, and nurse the infant, such that the infant spends more times with others than with his
or her biological mother (Lancy, 2008). Also of note, West Cameroonian Nso farmer mothers
attempt to prevent their infants from forming special bonds with them by forcing them to bond
with others (Keller & Otto, 2011; Otto, 2008).

Another cornerstone of attachment theory, stranger anxiety, is considered universal and a
necessary development to ensure survival (Keller, 2013). Examples from non-Western cultures
offer a different perspective, however. The concept of a stranger is unknown to the Beng people

of Cote d'Ivoire in West Africa, who find strangers to be welcoming, and whose infants do not

show stranger anxiety (Gottlieb, 2014). Similarly, the Cameroonian Nso integrate unfamiliar

others into their social system by addressing them in kinship terms, forming warm relationships,

inviting them to a meal, and raising their children to relate to strangers in this way (Otto, 2008).

Bowlby's (1969/1982) original definition of attachment, the emotional bond between an

infant and caregiver, has been considered a universal idea. However, the definition is rooted in

meanings and conceptions rooted in Western thought, such as the conception of the self as a

separate, distinct individual (Keller, 2013). Other cultures, for example, demonstrate different

views of the self more inclusive of social group membership. In addition, while the dyadically

organized relationship between caregiver and infant is central to the definition of attachment, as

noted earlier, this definition does not account for multiple caregivers, as well as different

meanings and organizations of these various caregiver relationships. For example, in caregiving

systems wherein parents and siblings shared in the responsibilities of caring for an infant,

German children thought the mother was the best caregiver, while Cameroonian Nso children

thought that they themselves were the best caregivers (Lamm, 2002). Finally, differences in a

sense of security due to different early socialization experiences do not necessarily suggest more

or less competence in adulthood. For example:

> Infants who experience an early distal socialization environment of child-centeredness
> with exclusive dyadic interactions that are mainly channeled through face-to-face contact,
> contingent responsiveness toward positive infant signals, and elaborated conversations
> co-construct individualized psychological bonds. Conversely, infants who experience
> bodily proximity with several caregivers and contingent responsiveness to negative
> signals co-construct communal, hierarchically organized relational patterns. On the one
> hand, individual mentally based attachment relationships may result, and on the other
> hand, a generalized conception of trust in the physical availability of support may be the
> consequence. (Keller, 2013, p. 186)

In other words, different socialization experiences result in different forms of secure attachment that may or may not follow Bowlby's original model. Along the same vein, Keller (2013) suggests integrating folk theories into ideas of attachment, such as the Japanese conception of *amae*, which describes close relationships of all types—not only parent-child, but also relationships with romantic partners, teachers, and other caregivers or significant others.

To summarize, many scholars have questioned the universality of many of the core assumptions of attachment theory, namely: the sensitivity hypothesis, the competence hypothesis, the secure base hypothesis, the monotropic bond between infant and one caregiver, stranger anxiety, and a singular mainstream definition of attachment (Keller, 2013; Rothbaum et al., 2000). These scholars emphasize that cultural differences in attachment meanings, attachment behaviors, and multiple caregiving relationships necessitate a reconceptualization of the original attachment model (Keller, 2013; Rothbaum et al., 2000). In addition, measures must be altered to account for these differences (Rothbaum et al., 2000). Otherwise, individuals from non-Western cultures might be considered insecurely attached, while in their respective cultures, they would be considered securely attached. Therapists should develop an awareness of the ways in which their interventions are culture-bound; for example, that they may be utilizing interventions that value autonomy over dependence, which is a Western value (Rothbaum et al., 2000). Finally, having a more expanded view of attachment would emphasize that relationships in other cultures are not maladaptive or pathological, but instead are adaptations of different circumstances, and therefore can be considered healthy and adaptive according to those cultures (Rothbaum et al., 2000).

Cultural differences in adult romantic attachment. Some scholarship has also explored cultural differences in adult romantic attachment. In a recent study (Schmitt et al., 2004) adult

romantic attachment was assessed among an international sample of 17,804 college participants across sixty-two nations and regions as categorized by the International Sexuality Description Project (ISDP) Survey, which represented 6 continents, 13 islands, 30 languages, and 56 nations. It was found that secure attachment was more common for 79% of participants. However, preoccupied adult attachment was more common in East Asia, and fearful adult attachment was more common than secure attachment in Belgium, Indonesia, and Ethiopia (Schmitt et al., 2004). In addition, among Western cultures, higher levels of avoidant attachment were found, possibly due to the cultural expectation of expressing needs and risking harmony (Schmitt et al., 2004). In Japan, preoccupied, or anxious, romantic attachment was found to be more common, likely an adaptation to Japanese cultural emphasis on group harmony and collectivism (Hattori, 2014). In a study comparing Taiwanese and American cultural beliefs about ideal adult attachment, Taiwanese men and women were found to believe that more avoidance behaviors were ideal compared to American men and women (Wang & Mallinckrodt, 2006). A more recent study examined the impact of ethnicity, collectivism, and country of origin on cultural variation in adult attachment across sixty-seven countries (Agishtein & Brumbaugh, 2013). Higher attachment anxiety was found to be more common among those with South Asian origins, as well as those of East Asian and collectivistic origins. In addition, secure attachment was found to be associated with strong cultural ties to country of origin, as well as with strong identification with one's culture or origin or acculturation with adopted culture. Finally, in van Ijzendoorn and Bakermans-Kranenburg's (1996) meta-analysis of cross-cultural studies on attachment, the following average distributions globally among mother, fathers, and adolescents were found: 58% secure, 24% avoidant, and 18% anxious.

In conclusion, with regard to cultural differences in adult romantic attachment, the literature suggests that worldwide, secure adult attachment tends to be more prevalent. However, insecure attachment is more common among certain cultures, such as Taiwan (avoidant attachment), Japan (anxious attachment), and South Asian and East Asian countries (anxious attachment). It appears that these cultural variations are an adaptation to the values of each respective culture, rather than a relative weakness. In other words, in countries where insecure attachment is more common, such insecure attachment is viewed positively. This supports Keller's (2013) assertions regarding mother-infant attachment that different socialization experiences result in different forms of secure attachment that may or may not follow Bowlby's original model, suggestion that her ideas extend to adulthood. Thus, what is considered "insecure" attachment in another culture, might be viewed positively as "secure" attachment according to the norms of that culture.

The below table (Table 1) summarizes the problematic assumptions of attachment theory described in more detail above, giving examples of cultural variation with regard to each assumption.

Table 1

Cultural Differences In Attachment

Assumption	Problem	Examples of Cultural Variation
Expression and Expectations	Needs are universal, but how they are expressed and expectations about responses differ	American infants = a hug Gusii (Kenya) infants = a handshake
Normative attachment style	Normative attachment styles vary according to adaptations to cultural values	Secure = American Avoidant = Taiwanese Anxious = Japanese, South Asian, East Asian
Sensitivity	What constitutes sensitivity reflects indigenous values, which differ by culture	American = distal contact, in response to signals Japanese = skin-to-skin contact, in anticipation of signals
Competence	Different cultures have different definitions of social competence	American = exploration, autonomy, expression of affect Japanese = social harmony, dependence, emotional restraint

Table 1 - Continued

Assumption	Problem	Examples of Cultural Variation
Security	Sense of security varies cross-culturally	American = safe starting point for exploratory behavior; distal, individualized Japanese = starting point for continued dependence, accommodation; bodily proximity, communal
Monotropic dyadic bond	Caregiving patterns across cultures demonstrate that caregiving by multiple caregivers is much more common	Aka tropical forest foragers (Congo) = cooperative childrearing systems Efe (Zaire) = pass newborns around between women
Stranger anxiety	Considered universal and a necessary development to ensure survival, but does not exist in many cultures	Beng people (West Africa) = concept unknown, welcome strangers, infants don't show stranger anxiety Cameroonian Nso = address strangers in kinship terms

Cultural differences in emotion. While emotions and emotional experiences are widely accepted as universal and biological, there is great variation in the ways in which emotions are perceived, experienced, and influenced by contextual factors cross-culturally (Mesquita & Walker, 2002). More specifically, emotions differ across cultures with regard to the events that precede emotions, how emotions are experienced, how emotions are appraised, and how they expressed verbally and behaviorally. Regarding antecedent events, while individuals of American culture create context for happiness given that happiness is highly valued, individuals of other cultures (e.g. Japanese, Tahitian, Malaysian aboriginals) create context where anger is unlikely, given that anger is devalued (Mesquita & Walker, 2002). With regard to how emotions are appraised: While Americans are more likely to believe they have a sense of agency and value this agency, East Asians instead emphasize secondary control or adjustment to the situation or environment (e.g. fate; Mesquita & Walker, 2002). In other words, Americans are more likely than Japanese to appraise emotional situations as under their control, likely because of the value of autonomy emphasized in individualistic cultures, as opposed to the value of interdependency

emphasized in collectivistic cultures. For example, Americans tend to consider personal responsibility and control as primary predictors of pleasantness, while Japanese do not.

Regarding emotional experiencing, there is great variation between Western cultures and Asian cultures (Hattori, 2014; Mesquita & Walker, 2002; Tsai & Lau, 2012). For example, American and East Asian cultures differ in their emotional goals. Given the Asian cultural focusing on the group, the Asian experience of emotion differs greatly from the experience of emotion in Western culture. In particular, anger may be less expressed in Asian cultures, and motives are usually not self-focused, but other-focused (Hattori, 2014). Since Japanese emotional communication focuses on maintaining social harmony, Japanese highly value emotions with low arousal, such as calmness and tranquility (Hattori, 2014). Americans focus on creating positive outcomes, with happiness as a life goal, and consider each individual responsible for his or her own happiness. Conversely, East Asian cultures do not view happiness as a goal, instead emphasizing receptiveness to both negative and positive outcomes, and valuing self-criticism and self-correction as emotional goals (Mesquita & Walker, 2002). In a study comparing differences in emotion regulation between Asian Americans and European Americans, participants were asked to reflect on a personal achievement failure and reflect on an interpersonal relationship failure (Tsai & Lau, 2012). Asian Americans were found to experience more distress than European Americans in interpersonal relationship difficulties, supporting the cultural norm valuing social harmony. In addition, Asian Americans experienced higher levels of distress when reflecting on achievement failures, further supporting the cultural norm of valuing academic achievement. The study also found that while European Americans used self-enhancement to buffer against distress when reflecting on these failures, such measures were not helpful for Asian Americans in down-regulating negative emotions. In another study examining cultural

differences in emotional experience across Asian Americans, European Americans, Latino

Americans, Indians, and Japanese, significant differences were found relating to pleasant and

unpleasant emotions (Scollon, Diener, Oishi, & Biswas-Diener, 2004). European Americans and

Latino Americans showed the highest experiences of pleasant emotions and the lowest

experiences of unpleasant emotions. Conversely, Asian Americans, Japanese, and Indians

showed much greater experience of unpleasant emotions and lower levels of pleasant emotions.

Additionally, Japanese and Asian Americans reported the most guilt. The authors of this study

theorized that these cultures may focus on engaging emotions that maintain collectivism, while

European Americans and Latino Americans focus on pleasant emotions regardless of whether

they are engaging or disengaging.

Regarding how emotions are expressed, there are significant differences cross culturally

(Mesquita & Walker, 2002). In a large-scale study, Americans, Mexicans, and Japanese

participants were asked to report on a personal event that was offensive and humiliating and their

behavioral reactions to such an event (Mesquita & Walker, 2002). Americans reacted by blaming

the other person, becoming aggressive, and distancing themselves from the relationship, which

supported a cultural model of self-esteem and independence. Mexicans responded by blaming,

distancing, and moving away from the other, which supported a cultural model of avoidance of

confrontation. Japanese responded by blaming themselves, trying to be closer with the other, and

not reacting to one's feelings or to the other, which supported a cultural model of social harmony

prioritizing the group over the self. In another study comparing emotional communication,

expression, and control between Americans and Indians, participants were asked to complete

hypothetical scenarios and report their emotional expressions, method of expression, and other

related variables (Crowe, Raval, Trivedi, Daga, & Raval, 2012). Indians expressed and felt more

sadness in situations that hurt their friends and family, especially those that were centered around academic achievement, suggesting support for a cultural expectations of social harmony and academic achievement. In contrast, Americans were motivated to express emotions about themselves and about others' well-being, tending to control their emotions less than Indians. Indians were also more likely to imply their emotions or wait until someone inferred them, while Americans were much more explicit.

Cross-cultural variations in emotional meaning and expression are also notable in the context of therapy and in the context of couple relationships. For example, Japanese clients may show respect for a therapist of perceived higher "status" by responding with silence. Also, Hispanic and Asian clients may associate one's ability to control emotions and feelings with maturity and wisdom (Sue & Sue, 2008). Also of note, American couples link anger to marital unhappiness, while Israeli couples show no such link because they perceive anger as a normal emotion associated with intimate relationships (Parra-Cardona & Busby, 2006). Also, some Latino couples are influenced by cultural values emphasizing *personalismo*, or a high level of emotional resonance in interpersonal encounters. For some Latino couples, empathy is an important variable, *not* in soothing, but in shared activities and expressions of affection (Parra-Cardona & Busby, 2006). Japanese and Chinese relationships value social harmony and emphasize that each partner takes equal space in a relationship (Scherer et al., 1988). As a result, behavioral gestures and somatic activity, such as arm gestures and hand holding, are limited in these relationships, as they are seen as taking too much emotional and physical space (Tsai & Levenson, 1997). In addition, because of this emphasis on social harmony, if a partner directly criticizes, the other partner will assume the relationship is over, whereas in contrast, in Western relationships, direct communication is common and expected (Hattori, 2014). In a recent study

comparing differences in emotional expression between Canadian and Japanese couples, Japanese men and women were found to have higher attachment anxiety, were less able to communicate negative feelings, and trusted the other partner more than they trusted themselves (Hattori, 2014). Given such cross-cultural variation, it is not surprising that Elfenbein and Ambady (2003) found that people are generally more accurate at judging emotions when they are expressed by their own cultural group.

In conclusion, there is great variation in how different cultures appraise, experience, and express emotions, as well as how they consider the antecedents of emotions. Regarding emotional appraisal, while Westerners tend to appraise emotional situations are under their control, Easterners do not. Regarding emotional experience, while those of Western cultures tend to experience higher levels of pleasant emotion (due to the emphasis on independence and self-esteem), those of Eastern cultures tend to experience higher levels of unpleasant emotion (due to the emphasis on social harmony). Regarding emotional expression, Westerners tend to express emotions more freely, reflecting the value placed on independence, while Easterners tend to practice emotional restraint, reflecting the value placed on social harmony. Finally, regarding antecedents, while Western cultures tend to intentionally create situations leading to highly valued emotions (e.g. happiness), Eastern cultures (e.g. Japan) intentionally create situations in which devalued emotions (e.g. anger) are unlikely to occur.

Individualism and collectivism. Much of the literature on cultural differences in emotion compares the emotional meaning and expression between individualistic and collectivist cultures. The individualism-collectivism (IC) cultural "syndrome" (Greenfield, 2000) has been considered the most significant difference among cultures, and was referred to by Greenfield (2000) as the "deep structure" of cultural differences (Triandis, 2001). Triandis (1995) defines

the IC dimension according to four attributes: self, goals, relationship, and determinants of behavior. Thus, while collectivistic cultures promote interdependent selves, individualistic cultures foster the development of independent construals of the self (Markus & Kitayama, 1991). While in collectivistic cultures in-group goals are prioritized, in individualistic cultures personal goals are favored over in-group goals (Yamaguchi, 1994). While collectivism encourages relatedness and communal relationships, individualism instead encourages rationality and interpersonal exchange (Kim, Triandis, Kagitcibasi, Choi, & Yoon, 1994). Finally, while in collectivistic cultures norms are considered more important determinants of behavior, in individualistic cultures attitudes are considered more important determinants of behavior (Matsumoto et al., 2008).

According to Matsumoto and colleagues (2008), while in individualistic cultures emotions have greater *intra*personal meaning, in collectivistic cultures, emotions have greater *inter*personal meaning. For those in individualist cultures, personal feelings and their free expression serve as affirmation of the importance of the individual over the group. However, for those in collectivist cultures, personal feelings and their free expression are less important than the group and maintaining relationships. They are therefore considered subordinate to in-group goals, much in the same way that personal goals are subordinate. In addition, given that sacrificing one's personal goals for the group requires a great deal of personal adjustment— which could involve changing behavior, adopting group norms and expectations, and/or even assimilating to group attitudes or opinions—adhering to the collectivistic value system requires considerable regulation of emotion and expressive behavior. This suggests that collectivistic cultures are more inclined than individualistic cultures to promote emotional displays toward in-groups that preserve group cohesion and harmony. Choosing whether and how to display

emotions is likely dependent upon the particular emotion, as emotions differ in their interpersonal meaning. For example, many negative emotions, such as anger, threaten in-group cohesion, while positive emotions, such as happiness, foster closeness.

Display rules. According to Ekman (2007), emotional display rules are defined as "socially learned, often culturally different, rules about the management of expression, about who can show which emotion to whom and when they can do so" (p. 4). He theorizes that these culturally-shaped display rules often dictate whether to diminish, exaggerate, or mask emotions. More specifically, display rules may involve modifying emotional expression through: (1) amplifying, or displaying more than is truly felt; (2) deamplifying, or displaying less than is truly felt; (3) neutralizing, or showing nothing when something is truly felt; (4) qualifying, or showing an emotion in combination with another or signals that comment on the original emotion; or (5) masking, or hiding what is truly felt by expressing another emotion.

Ekman (1972) tested his theories about display rules in a series of studies in which American and Japanese participants viewed stressful stimuli: films of surgery and accidents. Participants were in one of two conditions: alone viewing and viewing with a scientist. When alone, both Japanese and Americans displayed the same facial expressions in reaction to the films. However, in the presence of the scientist, the Japanese participants were more likely to smile. Ekman interpreted these differences to have occurred because of a Japanese display rule to mask negative emotions to a higher status person.

Since Ekman's study, many other studies have documented differences in emotional display rules in many countries worldwide (e.g. Argyle, Henderson, Bond, Iizuka, & Contarello, 1986; Safdar, Friedlmeier, Matsumoto, Yoo, Kwantes, Kakai, & Soo, 2009). Hwang and Matsumoto (2012) compared Asian Americans and Americans display rules in romantic

relationships and found that Asian American express less than Americans do. Of note, they found that lack of expression does not mean lack of emotional response; instead, it was found that Asian Americans modify their emotional responses more to the target. In contrast, Americans express more and modify their emotional responses less. Novin and Banerjee (2009) examined differences in display rules in children ages 10-11 in Iran and the Netherlands, and found that Iranian children were more likely than Dutch children to use display rules to conceal their emotions. Matsumoto (1990) examined the link between IC and display rules. He found that individualism was related to the endorsement of disgust and sadness expressions in in-groups, whereas collectivism was related to the endorsement of anger expressions to out-groups.

Matsumoto and colleagues (2008) conducted a large-scale study in which 5,000 respondents in 32 countries completed the Display Rule Assessment Inventory (DRAI). The DRAI is a self-report measure of how people express their emotions in different situations, and includes 21 items covering a variety of targets and contexts. The study found several universal effects. Individuals of all cultures endorsed expressions toward in-groups more than out-groups. Contempt, disgust, and fear were the least endorsed emotions with both in-groups and out-groups. These findings indicate that particular negative emotions are disruptive to social relationships, suggesting that display rules become activated when these emotions are felt. Interestingly, fear and sadness, though also negative, did not have the same effects, suggesting that distinguishing emotions simply by valence could not account for these results. These findings suggest that different emotions may have specific social effects. Of the negative emotions, sadness was associated with the greatest degree of endorsement toward in-groups, relative to out-groups, suggesting that sadness is the most likely of all negative emotions to bond rather than disrupt relationships. The study also found effects unique to specific cultures.

Individualism was positively associated with higher expressivity norms in general, and for positive emotions in particular, compared to collectivistic cultures. Also compared to collectivistic cultures, individualistic cultures endorsed the expression of more emotions in general in in-groups. While collectivistic cultures endorsed fewer expressions of emotions in general to out-groups relative to in-groups, individualistic cultures endorsed relatively fewer expressions of negative emotions and more expressions of positive emotions to out-groups relative to in-groups.

The below table (Table 2) summarizes cultural differences in emotion described in more detail above, specifically comparing individualistic and collectivistic cultures.

Table 2

Cultural Differences In Emotion

	Individualistic (Western)	**Collectivistic (Eastern)**
Emotional Appraisal	Emotional situations are under one's control	Emotional situations are outside of one's control
Emotional Experience	Experience higher levels of pleasant emotion	Experience higher levels of unpleasant emotion
Emotional expression	Express emotions more freely More likely to express disgust and sadness to in-groups Less likely to express anger to out-groups	Practice emotional restraint Less likely to express disgust and sadness to in-groups More likely to express anger to out-groups
Antecedents of emotions	Intentionally create situations leading to highly valued emotions (e.g. happiness)	Intentionally create situations in which devalued emotions (e.g. anger) are unlikely to occur
Emotional meaning	Greater intrapersonal meaning Affirmation of importance of individual over group	Greater interpersonal meaning Less important than the group and maintaining relationships
Display rules	Less likely to use display rules, instead expressing openly	More likely to use display rules, modifying expressions to target

EFT with diverse couples. Despite a large body of outcome and process research providing empirical support for the efficacy of EFT, there is currently limited research on the application of EFT to minority couples, and no research on EFT specifically with intercultural couples. Relevant studies support its generalizability across particular presenting problems or psychological disorders, including PTSD (Greenman & Johnson, 2012); depression (Denton, Wittenborn, & Golden, 2012); cancer (McLean, Walton, Rodin, Esplen & Jones, 2011); childhood sexual abuse (MacIntosh & Johnson, 2008); and bulimia (Johnson, Maddeaux, & Blouin, 1998). In addition, EFT is used by clinicians all over the world, and the basic text on EFT for couples (Johnson, 2004) has been translated into Chinese, Korean, and Spanish. Such cross-cultural application suggests that EFT is effective with minority couples, but there is limited research to support this. In a recent study implementing a culturally sensitive EFT model with three Japanese couples, the adapted treatment was found to reduce attachment anxiety, lower marital distress, increase communication of negative emotions, increase trust in self and others, and allow partners to engage in marital conflict (Hattori, 2014). These results suggest that the culturally adapted treatment was not only successful, but that as a result, the participants decreased their cultural bias against the communication of negative emotion. Despite a general lack of research support (aside from the aforementioned study), some scholars have discussed how EFT might be applied to diverse couples, and what adjustments might be made to the treatment.

Liu and Wittenborn (2011) emphasize that EFT has roots in Rogerian theory, with a particular focus on unconditional positive regard and empathy. This stance enables clinicians to effectively enter the client's emotional world, unveiling attachment needs, while normalizing and validating each diverse client's culturally based ways of expressing these needs. The authors

suggest three guiding principles to help clinicians effectively work with cultural differences in the context of EFT. First, clinicians are encouraged to identify the meanings and functions associated with the expression of emotions and attachment behavior. In working to understand differences about eliciting and regulating emotion, as well as expressing and responding to attachment needs, therapists must be careful to monitor their own biases and assumptions and maintain a collaborative and empathic stance. The therapist should pay particular attention to possible culturally specific display rules and the impact of their use on the couple relationship. Second, therapists are encouraged to consider the ways in which the meanings of emotion might be socially constructed. For example, in collectivistic cultures, the expression of negative emotions may be considered selfish or disrespectful to the larger group. In considering the clients' social constructed meanings, therapist must be aware of how such meanings might differ from his or her own meanings, be careful not to make assumptions, validate the clients' emotional experience, and regularly check to ensure accurate understanding. Third, therapists are reminded of the importance of using the clients' words and metaphors as would be the case with clients of all cultures, all the while slicing their experiences thinner in order to ensure the client is understood and can relate. In particular, therapists should be careful when using metaphors that the client didn't use, as they may not be relatable cross-culturally. Instead, the therapists should use the client's words as often as possible, and focus on thinning the emotional experience to increase access to vulnerability.

Parra-Cardona, Cordova Jr., Holtrop, Escobar-Chew, and Horsford (2009) discuss cultural adaptations of EFT, specifically with Latino immigrant couples. During joining and assessment, therapists can attend to immigration, gender, and cultural identity issues. Throughout treatment, the therapist remains attentive to the ways that cultural identity and gender influence

the problematic interactional cycle as well as each partner's ability to become emotionally vulnerable. Attachment needs are reframed to include cultural needs, which may include, for example, feelings of sadness and loss as a result of immigration. EFT therapists can help each partner to understand, accept, and validate each other's cultural and attachment needs (Parra-Cardona et al., 2009).

Hattori (2014) created a culturally sensitive model of EFT for Japanese couples that is sensitive to Japanese cultural norms. More specifically, this adapted model focused on being sensitive to the social harmony Japanese partners maintain, educating Japanese partners on emotion and attachment, addressing the shame and guilt partners may feel about having needs and emotional expression, and having a slower course of therapy to allow more time for accessing emotions. During alliance and assessment, the therapist maintains a slow pace, and reframing in terms of attachment is a more gradual process. While identifying the negative interaction cycle, the therapist keeps in mind that pursuers may look like withdrawers, and makes sure to reference the negative cycle frequently, using visual aids. During the later stages of treatment, the therapist should expect resistance, and thus should provide psychoeducation to normalize and validate cultural norm of prioritizing social harmony. In addition, the therapist constantly looks for non-verbal, covert cues of self-expression.

Greenman, Young, and Johnson's (2009) chapter is the only published manuscript on EFT with intercultural couples. In it, they highlight the unique experiences of intercultural couples with regards to attachment, as for many such couples, attachment distress is heightened when one member comes from a collectivistic culture, while the other comes from an individualistic culture. They emphasize that EFT inherently addresses cultural differences by encouraging "the understanding of all couple relationships as unique cultures in themselves, in

which individual differences—whether they are products of genetics, upbringing, or cultural norms—can play an important part in the genesis and resolution of the core attachment struggle between partners" (p. 149). They note the importance of understanding different emotional display rules across cultures, as these rules can shape a couple's negative interaction cycle. EFT with intercultural couples recognizes the impact of culture on each person's experience of the relationship and identifies culture-specific ways of meeting attachment needs or reacting to unmet needs. During Stage 1, therapists uncover and validate cultural influences on behaviors and emotions, while also highlighting their impact on the negative cycle. During Stage 2, therapists determine culture-specific ways of obtaining attachment security, with the understanding that depending on cultural norms, such expressions may vary from dramatic to subtle.

Implications for the current study. Given the minimal research on the cross-cultural application of EFT, as well a lack of research on any form of couple therapy with intercultural couples, it is not surprising that there is no research on the application of EFT with intercultural couples. Indeed, most of the work in this area has made assumptions regarding EFT treatment of intercultural couples, basing such assumptions on the scholarly literature on attachment theory, cultural differences in emotion, and conflict in intercultural couples. These works suggest ways of adapting treatment in working with diverse couples and intercultural couples, but their strategies are not backed by empirical support. The purpose of this study is to provide a starting point for future research on the application of EFT with intercultural couples, with a specific focus on a more qualitative examination of the experiences of EFT clinicians in working with intercultural couples. To date, this study is unique in the fields of EFT, couple therapy, cultural competence, and intercultural couples. This study seeks to inform the integration of theory and

practice in these areas by examining the experiences of practicing EFT therapists who are working with intercultural couples. It is hoped that the findings will be used to aid EFT therapists in better accommodating the unique needs of intercultural couples by generating hypotheses surrounding common themes that arise among intercultural couples in the context of EFT. While themes emerging from the data enhance EFT interventions specifically, the information gleaned is of use to therapists working with intercultural couples across a variety of couple treatments.

Methods

The purpose of this study was to begin exploring the experiences of EFT clinicians when implementing EFT with intercultural couples. A qualitative research approach that emphasizes hypothesis generation rather than hypothesis testing (Strauss & Corbin, 1990) was utilized. As previous research in this area is lacking, this methodology of gathering subjective data was imperative, as it allowed for unexpected themes and questions to arise and then be further explored. The data was then analyzed and continually compared to new data to facilitate ongoing clarification of developing themes (McCracken, 1988).

This study was funded by the research fund of International Centre for Excellence in Emotionally Focused Therapy (ICEEFT), an organization that furthers the expansion and refinement of the Emotionally Focused Therapy model through process and outcome research. ICEEFT also provides certification for EFT therapists around the world. Endorsement by ICEEFT did not affect risks to participants in this study, as all participants were licensed, previously certified professionals whose status, income and referrals were not affected by the decisions of the organization. Their affiliation with ICEEFT involves their paying a fee to be listed on their website as being ICEEFT-certified, and this listing is dependent upon their payment and meeting requirements for certification, which they already have done, and the

listing does not impact the decisions and activities of the organization. In addition, the results of the study is reported in aggregate, so each individual participant's information remains confidential, and the organization has no way of knowing who participated in the study.

Participants

Participants consisted of 9 EFT couple therapists who are certified by the International Centre for Excellence in Emotionally Focused Therapy (ICEEFT), and who have been providing EFT treatment under certification for at least one year. The process for acquiring ICEEFT certification is quite stringent, so requiring that participants have been certified for at least one year ensured that they had extensive experience in implementing EFT in its pure form, as created and developed by Sue Johnson (2004). Participants chosen have provided EFT treatment to at least three intercultural couples, in which the treatment lasted for at least three months, and occurred within the last two years, allowing for better recall. For the purposes of this study, an intercultural couple was defined as two people in a committed, intimate relationship who represent different faiths, cultures, nationalities, races, or ethnicities (Hsu, 2001; Perel, 2000).

Recruitment

Participants were recruited directly by the interviewer through a networked sample associated with several EFT-affiliated organizations in the U.S., Canada, and internationally. An advertisement (see Appendix A) recruiting potential subjects was posted on the relevant list-servs of these organizations. Since the necessary number of participants was not obtained through recruitment via list-serv advertisement, the principal investigator recruited additional participants by sending individual e-mails to certified EFT clinicians in the New York/New Jersey area (see Appendix B). There are a limited number of certified clinicians in the area,

making them easy to identify, and the contact information for these potential participants could be found via a publicly available listing of certified EFT clinicians on the ICEEFT website.

Interested participants were given the researcher's phone number and e-mail address. Participants were informed, both in the advertisement (see Appendix A) and by the researcher, that the study offered no compensation for participation. Individuals interested in the study who contacted the principal investigator were provided with information about the purpose and procedures of the study. The potential subjects were given a written description of the research in the form of a letter (see Appendix A) at the time of recruitment and were screened briefly to ensure that they meet criteria for the study. When an individual was deemed eligible, the principal investigator arranged either an in-person interview or an interview via Skype. If individuals were assessed to be exhibiting or experiencing psychological distress or conveyed that they were in need of psychological assistance, the principal investigator was to provide them with referrals to mental health professionals, though such referrals were not needed. Individuals not deemed eligible for the study due to the exclusion criteria listed above were provided with an explanation of why they were ineligible. These individuals were debriefed and thanked for their time and interest.

Measures

The Demographics Questionnaire (see Appendix C) was administered at the beginning of the in-person interview. This questionnaire requested information from the participant regarding their demographics (including age, racial and ethnic background), their understanding of and training in multiculturalism and cultural competence (including graduate and post-graduate training), and their psychotherapy practice (including number of years practicing psychotherapy,

number of years practicing EFT under certification, treatment settings worked in, and the cultural demographics of their typical and current caseloads).

A semi-structured interview (see Appendix D) was used to gather data related to the purpose of this study. The questions on the interview guide were intentionally designed to elicit data relevant to the questions targeted by this study but were also open-ended enough to allow for subjects' distinctive responses. This protocol included a series of open-ended questions and prompts related to five primary areas: 1) the therapist's own cultural background and its influence on his or her conceptualization of EFT and attachment, 2) the therapist's experience of when and how cultural differences arise in EFT with intercultural couples, and whether there are common themes or patterns, 3) the therapist's perspective on whether EFT is helpful in addressing cultural differences, 4) the therapist's experience of tailoring, changing, or adding interventions to address the needs of intercultural couples, and 5) the therapist's recommendations on what EFT clinicians should know when using EFT with intercultural couples.

Procedures

At the beginning of each in-person interview, participants signed an informed consent form (See Appendix E) agreeing to be a voluntary participant of the study and which served to remind participants of the research conditions (nature of study, confidentiality, taping, subjects' rights, etc.). For interviews taking place by Skype, participants were e-mailed an informed consent form and no interviews took place until the primary investigator received a signed copy of this form via e-mail or fax. All signed consent forms were kept separate from participant interview responses and were held in a locked file to which only the primary investigator had access. Participants were given a copy of their signed consent form for their records. All

participants answered questions from the Demographic Questionnaire (See Appendix C) and then were interviewed using the Semi-Structured interview (See Appendix D) developed by the principal investigator. All data was used to answer the research questions listed above.

All interviews were audiotaped and videotaped in entirety and were intended to be 90 minutes in duration. The principal investigator conducted all in-person interviews in settings that were private, comfortable and convenient for the interviewees. In addition, since cultural background was an important aspect of this study, the principal investigator also recorded observations of the participant regarding his or her appearance of diversity, including skin tone and any ethnicity or religion-related clothing or accessories. For those interviews taking place by Skype, the primary investigator informed the participant of the importance of finding a setting that ensures comfort, privacy and confidentiality. The subjects' confidentiality was safeguarded, as each participant's name and any identifying information was not audio-recorded, and each recording was instead by identified by a corresponding code. The audio recordings of the interviews were then transcribed by an academic transcription service who were trained in human subject research, and who protected the confidentiality of the participants. The transcription data was encrypted and securely stored, and hardcopies of transcribed material did not contain any identifying information. Transcripts were only viewed by the transcriber, interviewer, and the two members of the dissertation committee. And video recordings were only viewed by the interviewer, and the two members of the dissertation committee.

Data Analysis

The primary goal of data analysis was to identify common themes among the therapists interviewed. Based on the administration of the semi-structured interviews described above, the

data collected was qualitative in nature and described the experiences of EFT therapists working with intercultural couples.

Data was analyzed using McCracken's (1988) five-stage model. The stages of this model progress from specific analysis through the examination of each line of the transcript to more general analysis in which themes, categories, and theories are revealed. This model allows for a balance between more structured methods of analysis and interpretive freedom, as it advocates the use of both specific stages with distinct directives as well as using "self as instrument" to inform the process of analysis.

In Stage I, each utterance made by the subject is examined on its own merit, without attempting to compare it to other parts of the transcript or make any judgment about its larger significance. At this stage of analysis, certain areas or observations that seem particularly important will emerge, and should be noted as such. However, the investigator makes no conclusions about the data at this point.

In Stage II, the observations drawn from the first stage are more fully examined. The investigator first explores the various implications and possibilities of each observation. After such exploration, the investigator relates the observations back to the transcript, looking for similarities or relationships to other parts of the transcript. At this point, the investigator also compares the observations to the information gathered from the literature review.

In Stage III, the emphasis shifts from individual observations to considering each observation in relation to other observations, rather than to the transcript. The body of the transcript recedes to the background while the focus becomes the observations drawn from it. In other words, whereas in Stage II, observations are compared to the transcript, in Stage III,

observations are compared to other observations. It is at this point that patterns and themes should emerge from the data.

In Stage IV, the investigator now identifies the themes that emerged in Stage III and begins to identify consistencies and contradictions among them. Identification of dominant themes as well as sub-themes can now also be recognized and identified.

In Stage V, the final stage, the investigation shifts from the individual transcript to a comparison of themes that have emerged from all transcripts. The investigator can now attempt to understand how the themes can be brought together to form an overall thesis.

Results

This chapter will discuss the findings that were derived from the areas of inquiry developed in the research design. Specifically, the findings came from interviews with respondents in which five questions were posed: (1) How does the therapist's cultural background inform his or her beliefs about EFT and attachment? (2) How and when do cultural differences arise in EFT with intercultural couples? (3) Are there common themes, conflicts, or patterns that tend to arise? (4) Is EFT helpful in addressing cultural differences, or does it need to be tailored to meet the needs of intercultural couples? (5) What would be helpful for EFT clinicians to know in order to work effectively with intercultural couples? A summary of the themes that were developed from the data will be offered.

Demographic Questionnaire

At the beginning of the in-person interview, participants were asked questions from The Demographics Questionnaire (see Appendix C), which requested information regarding demographics, professional background, and training in cultural competence.

Participant demographics. When the Demographics Questionnaire was administered, participants were first asked questions regarding their demographics, including age, sex, race, nationality, ethnicity, religion/faith, sexual orientation, and other information regarding cultural background. Participants were asked to self-identify, rather than choose from predetermined categories. The below table (Table 3) summarizes the demographic information provided by the nine participants.

Table 3

Participant Demographics

Part	Age	Sex	Race	Nationality	Ethnicity	Religion/ Faith	Sexual Orientation	Other Cultural Background
1	43	M	White	American	Buddhist Jewish	Secular	Homosexual	Married to Singaporean Malay Muslim
2	60	F	White	American	Jewish	Jewish	Heterosexual	N/A
3	37	M	White	Canadian and American	Italian Jewish English	Catholic	Heterosexual	North American and French Canadian
4	57	F	White	Australian	English Scottish German	Protestant	Heterosexual	WASP
5	62	F	White	American	Hungarian	Jewish	Heterosexual	Multicultural: Israel, Canada, England, Hong Kong, New York
6	51	M	White and Hispanic	Mexican and American	American Mexican Jewish	Jewish	Heterosexual	N/A
7	43	F	White	American	Greek	Greek Christian Orthodox	Heterosexual	N/A
8	40	F	White	South African	White Anglo-Dutch	Christian	Heterosexual	South African
9	45	F	White	American	Eastern European Jewish	Jewish	Heterosexual	N/A

Participant ages ranged from 37 to 62, with mean age of 48.7, and three of the nine participants (33.3%) were male. Eight of the nine participants (88.9%) identified racially as White, while one participant (11.1%) identified as both White and Hispanic. Five participants (55.6%) identified their nationality as American, one (11.1%) identified as Canadian and American, one (11.1%) identified as Mexican and American, one (11.1%) identified as Australian, and one (11.1%) identified as South African. Many different ethnicities were represented among the participants, including Jewish, Italian, English, Hungarian, and Greek; and some identified with multiple ethnicities. Four participants (44.4%) identified their religion or faith as Jewish; four (44.4%) identified their religion or faith as Christian (or a Christian denomination); and one (11.1%) identified his religion as secular. Eight of the nine participants (88.9%) identified as heterosexual, and one participant (11.1%) identified as homosexual. Participants were also given the option to indicate "Other Cultural Background" to indicate any other aspects of their cultural background they considered important. While four (44.4%) participants did not have anything to add, others specified various cultural influences, while one participant (11.1%) indicated that an important part of his cultural background was that he was married to a Singaporean Malay male.

Participant professional background. Participants were also asked questions regarding their professional background, including degree and year obtained, treatment settings worked, years in practice, years ICEEFT-certified, percentage of current and typical caseload made up of intercultural couples, and average length of treatment for intercultural couples compared to intracultural couples. The below table (Table 2) summarizes information provided by the nine participants regarding their professional background.

Table 4

Participant Professional Background

Part	Degree & Year	Current setting	Years in Practice	Years ICEEFT-certified	% of <u>current</u> caseload including intercultural couples	% of <u>typical</u> caseload including intercultural couples	Average length of tx for inter (vs intra)
1	Psy.D. 2008 M.B.A. 1998	Private practice	6	1	66%	50% (specializes in intercultural couples)	14-18 months (10-12)
2	L.C.S.W. 1987	Private practice	27	3.5	40%	30-40%	17-18 months (14-15)
3	Ph.D. 2005	Private practice	9	9	20%	10%	15 sessions (15)
4	Ph.D. 2005	Academic department, private practice	11	5	30%	20%	12-15 sessions (12-15)
5	L.C.S.W. 1994	Private practice	20	3	20-25%	50-60%	2 years (1 year)
6	Ph.D. 1994 M.A. 1989	Private practice	19	8	57%	50-60%	8-18 months (8-18)
7	Ph.D. 2005	College counseling center, private practice	6	5	33%	33%	2 years (18 months)
8	M.A. 1994	Private practice	10	6	30-40%	50%	10-12 sessions (10-12)
9	M.S.W. 1994	Private practice	11	4	10%	20%	Less than 1 year (1-2 years)

Five of the nine participants (55.6%) are doctoral-level clinicians, while the remaining

four (44.4%) are masters-level. All nine participants (100%) are currently in private practice at

least part-time, one participant (11.1%) also works in an academic department, and one

participant (11.1%) also works at a college counseling center. Years in practice for the

participants range between 6 and 27 years, with an average of 13.2 years in practice. Current

caseload of intercultural couples ranged between 10% and 66%, while typical caseload of

intercultural couples ranged between 10% and 60%. One participant (11.1%) noted that

treatment with intercultural couples tended to be shorter compared to intracultural couples, while

four participants (44.4%) noted that treatment with intercultural couples tended to last longer

than intracultural couples. One participant offered a possible explanation for this difference:

> Tends to be more than eighteen months, and it tends to be on and off and it tends to be "Let's stop now, and we'll seek you out again." And they do come back. And it's always for like little differences or little arguments, or let's talk about this specific thing. So that's what I have found. It's almost like a mediation thing. You know, they're not agreeing, they're not seeing things from the same point of view and they want a third opinion.

Four participants (44.4%) noted no change in the average length of treatment with

intercultural couples compared to intracultural couples. One participant offered a possible

explanation for consistency in length of treatment regardless of cultural background: that given

he is currently in private practice, his clients come from a higher socioeconomic status than one

might see at a community mental health center or a hospital, which is the case for all nine of the

participants, who are all in private practice. He stated:

> I do not [notice a difference in length of treatment between intercultural and intracultural couples] but that may also be the result of socioeconomic status more than culture, to be honest with you, because I work with a fairly affluent population in San Francisco, private practice, self-pay. This is not an insurance operation. This is self-pay so they tend to stay longer versus if I was working with an insurance-based population. They would probably only stay maybe three months before having to pay out-of-pocket would kick in.

Participant training in cultural competence. Participants were also asked about their

graduate training in cultural competence, as well as any other training in or exposure to working

with multicultural clients. Six of the nine participants (66.7%) reported having experienced poor

training in cultural competence during graduate school. One participant described a curriculum

lacking in separate coursework on cultural competence:

What's really interesting is that at the time that I went to graduate school, it wasn't part of the graduate curriculum at the time. At most, it was discussed as part of a typical clinical psychotherapy course where they would talk about cultural sensitivity and where they would talk about considering clients that you feel more comfortable working with or less comfortable working with. That would just be part of normal coursework. There were no set-aside courses on just working with clients of different cultures or anything. I mean, there was no education back then on this subject at all. I mean, I'm not that old, but it just wasn't there even that short a time ago.

Another participant noted that despite working with a diverse population during her internship

training, cultural issues were not discussed:

You know what? Culture never came up in any of my supervision sessions, any of my practice, or my internships. Not even on internship, which is really interesting. I did one of my internships on an inpatient male unit. And it was all Hispanic and Black teenage boys, and I don't remember once talking about race or ethnicity or anything like that. It was just based on diagnosis and symptoms and that kind of stuff.

One participant expressed disillusionment in the narrow focus of her diversity training, and

expressed a desire for diversity training to include trauma and immigration:

The whole notion of collective culture versus individualistic culture dealing with anything with family, with boundaries, with emotions, was not taught anywhere while I went to my schooling. We had a course, a whole semester about cross-culture and basically it told us about poverty and Blacks and Hispanics—nothing else. There was no registration or room for anything else, which drove me crazy because I was sitting in the room and I was cross-cultural, but I wasn't poor and I wasn't Black and Hispanic. And that's what I was looking for, I was looking for someone or something that would understand the cultural background, understand the power of immigration; immigration as trauma and immigration as cross-cultural, and there was no addressing of that anywhere.

Six of the nine participants (66.6%) reported proactively seeking out additional training

in diversity outside of their required graduate training. One participant had received prior cross-

cultural training before entering graduate school, and continued with these trainings outside of

his doctorate:

I was a diversity trainer coming into the program, so I found all of the training kind of stereotypical and kind of low level. And I never really did find myself satisfied with teaching to an audience that was less aware. So the training that I really valued was like probably several, like I would say in excess of thirty weekend and weeklong immersions

that were culturally focused. So the bulk of my cross-cultural training I would say happened outside of my doctorate.

Another participant discussed having little awareness of multicultural issues until she began working as a psychologist at a university with a diverse population:

So I didn't really kind of become aware, I mean, you know, I took the multicultural counseling class and it was an interesting class, but nothing really came into play until I came here, because [university name] has such a diverse population. And that's where we started talking about it and seeing how it plays out and of course I'm supervising externs, so I had to bring it into supervision. And I'm like, how the heck do you do that? I've never had it done for me, so, and thank God, there were a lot of these professional development things that we do here and that's how I learned more about it. But it was way after my Ph.D. It was way after I was in the field, that you kind of get immersed in it. Because it comes up, you know, it's there, it's alive and you have to talk about it.

Cultural backgrounds represented in caseload. Participants were also asked to list the cultural backgrounds of the intercultural couples they have treated, as well as other cultural backgrounds represented among their intracultural couples. Participants were asked to identify according to their own descriptors of cultural background, rather than choose from predetermined categories. The below table (Table 5) summarizes this information.

Table 5

Cultural Backgrounds Represented

Part	INTERcultural Couples	INTRAcultural Couples
1	White and Filipino	Christian
	Southern Evangelical and Argentine Jewish/Chilean	Taiwanese American
	Southern Protestant Caucasian and Indian/Texan	
	First generation Chinese and White Protestant Scottish	
	Chinese and Korean	
	Israeli and Irish Catholic	
	White Buddhist/Pagan and Indian	
	Chinese American and Chinese Burmese	
	Protestant and Mexican American	
	Southern Black and Northern Black	
	Israeli American and Israeli	
	California Protestant White and Indian	
	Mexican Transgendered and Caucasian Secular	
	Jewish and Indian	
	Mexican American and White Protestant	
	Greek and Italian Catholic	
	White Californian and White Egyptian/Jewish/Arab	
	White Secular German and Filipino/Texan	

Table 5 - Continued

Part	INTERcultural Couples	INTRAcultural Couples
2	Jewish and Protestant Jewish and Catholic Jewish and Episcopalian Jewish and non-denominational Jewish and Methodist Korean and American Swedish and American	African-American
3	English Canadian and French Canadian French Canadian and Latino French Canadian and Bengali	Morrocan French German French Canadian Pakistani Muslim Cameroonian
4	Japanese and Caucasian Australian Brazilian and Caucasian Australian Croatian and Caucasian Australian Dutch and Australian Taiwanese Chinese and White Australian Maltese and White French and White Australian	Iranian Iraqi South African Hong Kong Chinese Taiwanese Chinese Pakistani Muslim
5	Chinese and Caucasian Ultraorthodox Jewish and Conservative Jewish African-American and White Mormon and Jewish Jewish Israeli and Christian American Christian and Jewish	Latino Sikh Hindu American
6	Chinese and Caucasian Latino and Caucasian American African-American and Caucasian Colombian and European Caucasian and Chinese Catholic and Jewish North American and European Mexican and Hispanic-American Jewish and Non-Jewish English	Caucasian Catholic Jewish American
7	Catholic and Jewish Catholic and Christian Orthodox Eastern Christian Orthodox American and Christian Orthodox Georgian	Jewish, Greek Egyptian, Italian Morrocan, Irish Bahrainian, Yugoslavian Greek, Slavian
8	Caucasian and Filipino Caucasian and Mexican Caucasian and Native-American Cauc Amer Midwestern and Cauc Amer Californian Caucasian and Brazilian	Filipino Korean Japanese African-American Caucasian
9	African-American and Caucasian Reformed Jewish and Syrian Orthodox Jewish Chinese and Caucasian Korean and Caucasian Italian-American and Irish Catholic	Jewish American Protestant Jewish South African Christian Irish-American

Thematic Analysis

The therapists interviewed for this study spoke at length about their own cultural background, as well as their experiences using emotionally focused couples therapy with intercultural couples. In the course of data analysis, a number of themes common to participants emerged. The 36 themes that follow are those that were common to at least one-third of participants (i.e., at least three of the nine participants). The below table (Table 6) summarizes the 36 themes, and they are described in more detail thereafter.

Table 6

Themes

Therapist Cultural Background	*Theme 1:* Therapist cultural background of two or more cultures.	8 of 9 (88.9%)
Therapist Cultural Background: Attachment Behaviors	*Theme 2:* Attachment as belonging and conforming to a group that is physically close and available. *Theme 3:* Desire to change childhood attachment behaviors in adulthood.	5 of 9 (55.6%) 5 of 9 (55.6%)
Therapist Cultural Background: Emotions	*Theme 4:* "Emotions, especially negative ones, are bad and shouldn't be expressed or responded to." *Theme 5:* "Anger is bad and should not be expressed." *Theme 6:* "Fear is bad and should not be expressed." *Theme 7:* "You don't have a right to your pain, because it doesn't compare to our trauma." *Theme 8:* "Some emotions are good and should be shared."	8 of 9 (88.9%) 5 of 9 (55.6%) 3 of 9 (33.3%) 3 of 9 (33.3%) 6 of 9 (66.7%)
Therapist Cultural Background: EFT and Attachment	*Theme 9:* A sense of safety and togetherness fits with EFT and attachment. *Theme 10:* Lack of emotional engagement does not fit with EFT and attachment. *Theme 11:* Value of independence over interdependence does not fit with EFT and attachment.	9 of 9 (100%) 5 of 9 (55.6%) 3 of 9 (33.3%)
EFT with Intercultural Couples: When and How Cultural Differences Arise	*Theme 12:* Cultural differences are the presenting problem brought in by the couple. *Theme 13:* Cultural differences arise when identifying the cycle and underlying attachment needs. *Theme 14:* Cultural differences also arise later in treatment, when going deeper into needs and fears.	9 of 9 (100%) 4 of 9 (44.4%) 3 of 9 (33.3%)

Table 6 - Continued

EFT with Intercultural Couples: Intercultural Couple Themes and Patterns	*Theme 15:* Cultural differences in extended family involvement or influence, and its impact on romantic attachment.	8 of 9 (88.9%)
	Theme 16: Cultural differences in emotional expression and engagement.	6 of 9 (66.7%)
	Theme 17: Cultural differences in childrearing.	6 of 9 (66.7%)
	Theme 18: Cultural differences in gender roles.	4 of 9 (44.4%)
	Theme 19: Cultural differences illuminating partner's positions in the cycle.	4 of 9 (44.4%)
	Theme 20: Cultural differences impacting the therapeutic alliance.	4 of 9 (44.4%)
	Theme 21: Cultural differences initially outside of couple's awareness.	4 of 9 (44.4%)
	Theme 22: Cultural differences as a defense against attachment fears or unmet attachment needs.	3 of 9 (33.3%)
EFT with Intercultural Couples: Interventions Used	*Theme 23:* EFT as-is interventions used to address cultural differences.	5 of 9 (55.6%)
	Theme 24: Direct interventions used to address cultural differences openly.	5 of 9 (55.6%)
	Theme 25: Indirect interventions used to address cultural differences subtly.	4 of 9 (44.4%)
	Theme 26: Reframing specifically used to address cultural differences in the context of attachment.	4 of 9 (44.4%)
	Theme 27: Enactments specifically used to address cultural differences.	3 of 9 (33.3%)
EFT with Intercultural Couples: Response to Interventions and Outcome	*Theme 28:* Positive response or outcome with intercultural couples.	6 of 9 (66.7%)
	Theme 29: Longer treatment with intercultural couples.	3 of 9 (33.3%)
	Theme 30: No difference in response or outcome with intercultural couples.	3 of 9 (33.3%)
EFT with Intercultural Couples: Is EFT Helpful in Addressing Cultural Differences?	*Theme 31:* EFT is helpful in addressing cultural differences because of the attachment framework.	4 of 9 (44.4%)
	Theme 32: EFT is helpful in addressing cultural differences because of its focus on accessing vulnerability.	4 of 9 (44.4%)
	Theme 33: EFT is helpful in addressing cultural differences because of its inherently open and curious stance.	3 of 9 (33.3%)
EFT with Intercultural Couples: Advice for Therapists	*Theme 34:* Adopt a curious and open stance, give clients space, and ask direct but tentative questions.	7 of 9 (77.8%)
	Theme 35: Maintain focus on attachment process when addressing cultural differences.	3 of 9 (33.3%)
Experience During Interview	*Theme 36:* Discussing the use of EFT with intercultural couples leads to new discoveries.	5 of 9 (55.6%)

Therapist cultural background. In the first portion of the semi-structured interview, participants were asked about their own cultural background, what attachment behaviors looked like, what messages they were sent about emotions, and how their cultural values fit or did not fit with the values of EFT and attachment theory. This section opened with a broad question in which participants were asked to talk about their cultural background in terms of what is salient to them.

Theme 1: Therapist cultural background of two or more cultures. Eight of the nine

participants (88.9%), when describing their own cultural background, described backgrounds

influenced by two or more cultures. One participant of Greek and American background

described the experience of feeling like an outsider whether she was living in Greece or the

United States:

> I was born in the United States. My family moved to Greece when I was nine years old,
> so I grew up in Greece until my senior year in high school. Then we moved back to the
> U.S. and I was only supposed to be here for two years, and then transition back to
> Greece, but I ended up staying. And so, when I'm here, I feel very Greek and when I go
> to Greece I feel very American.

Another participant recognized the ways in which her Anglo-Dutch heritage was also influenced

by the values of South Africa, where she was raised and where she currently lives:

> It's more of an Anglo-Dutch kind of upbringing and outlook on life, you know,
> influenced by European-American narratives and rituals I would say. But also just South
> African in the sense of values, living more in the community, extended family is pretty
> important. Just a sense of looking after the earth and kind of contributing to the country
> that you live in, with quite a strong sense of hospitality, and just sort of people centered.

One participant reflected on the evolution of his religious beliefs, stemming from his

grandparents' Orthodox Judaism to his parents' Conservative Judaism. He then described his

religion in his adulthood as more secular, but also influenced by Buddhism, as well as his

husband's Muslim practice:

> So I was raised in New York in a Jewish household. My parents were both raised
> Orthodox Jewish but I was raised in Conservative Judaism, which has fragmented into
> five different rabbinical associations. And the Conservatives are actually fairly liberal.
> So, the Conservative movement fractured off of the Orthodox largely over the role of
> women in the congregation. They wanted to give much more participation to women.
> And they've continued to be much more liberal as the decades have passed. So I was
> raised in like a liberal branch of Judaism. I would identify as secular. My parents would
> identify as religiously Jewish. And then I would at this point identify as a Jew-Bu,
> Buddhist Jewish. It's kind of a California term for Jews who meditate. And I think I feel
> more allied religiously with Buddhism than Judaism, but I would still identify as fairly
> secular. And then my husband is Muslim from Singapore so a whole other influence. I

think it's salient that I'm interracially married. It shows a lot more to you than my perspective probably than my actual physical characteristics.

Another participant, who was born in New York but has been living in Quebec, Canada, since 1998, discussed the ways in which the seemingly conflicting values of individualistic America and collectivistic Quebec equally influence his cultural makeup:

> I was born in Buffalo, New York, which is ninety-five percent Catholic, very sort of working class, blue-collar-type place. My parents were teachers, so education was always important to us. But I didn't really realize just how salient certain aspects of the American culture were until I no longer lived in it. I haven't lived in the United States since 1998. It's been a while. But I only realized now just how certain values, and not just values, but ways of being that I have are very American. For example, Quebec is a very collectivist society. The idea that people would pay for one another's healthcare, that's a given, here. The idea that if you're a citizen in the society you will share, and if you don't have much you'll benefit from that, which I think is great. But what also comes along with that is that in Quebec, in French Canada, people are very wary of anything that has to do with making money or big business, almost as if, if you were to be successful, kind of ironically, that's sort of seen as dirty money if it's from the private sector and that sort of thing. And it wasn't until living here I really realized that for me I think everyone should be rich. And so the notion that if you work hard, if you're good at something, if you have marketable skills, you should market them. These are very American ideas, right? The idea, too, that I'm not comfortable with government. Here, Quebec, everything is regulated. Some things about that that I'm very uncomfortable with and I realize, now, that has a lot to do with the culture that I grew up in, which is very individualist, which is very, "No, you do your thing. Governments govern when it's necessary." So, it's funny. I felt much more comfortable in Quebec and wanted to live in Quebec because of this sort of progressive society. But at the same time I realized there are things that I don't like. And the things that I don't like are very much because of where I grew up.

One participant described multiple cultural influences, from her parents' Israeli, Jewish, and European "café culture" background, to her Hungarian and Jewish heritage, to the impact of having lived in the U.S., Canada, England, and Hong Kong. She expressed a sense of feeling privileged by adapting to wherever she is living, such that she feels that she is "both inside and outside":

> I'm Caucasian, Jewish, American, multicultural, heterosexual. I lived in different countries and I think I'm inside in many cultures, but I'm always outside too. The way I look at it is the way I explain it, the way it makes sense to me is that I learned to feel in Hungarian. I don't know how you say it, but I learned to love in Hungarian. My

emotional core is in Hungarian. I learned to think and write in Hebrew, Israeli, and I became a professional in English in America. So part of me is very European and part of me is very connected to Israel, to the survival of Israel, to existence of Israel. The background is Holocaust parents. Culture, music, presentation, dress, everything is European, not that I do it now, but I'm just saying I think today's world it doesn't make any difference, but it was a very European home. They were always meeting for afternoon coffee, the cafés, the European café culture, it was translated to how my parents lived and how those who emigrated from Europe created this café culture. Then I moved and I lived in Canada, I lived in England, I lived in Hong Kong and in New York. So I always tried to make myself as being part of where I live. And at the same time, I always had the privilege of looking from the outside in and I'm emphasizing that I see this privilege.

One participant reflected on his upbringing in Mexico City, raised by an American mother and

Mexican father, with traditions primarily influenced by his Mexican and Jewish cultural values:

When I was born in raised in Mexico City, I never really thought of myself as Mexican or American. My mom's an American and my father is born in Mexico. My mother was born in the United States. My father was born in Mexico City. I was born and raised in Mexico City but I never really thought of myself as either being Mexican or American. Primarily, I thought of myself as being Jewish but I never thought of myself as being Jewish as a religion. It was just more like a culture. If you think about my cultural background, I don't think of it as a religion. I think of it as a way of thinking, being, stories that I've been told about the traditions. They're not religious but traditions that are not—it's blurry. For me, it gets blurry what is religious and what is tradition. I was thinking of it as more like Mexican-Jewish tradition because we would observe some of the Mexican holidays as well. I guess, the ideas that stick with me are the values of family, the values of education, the values of service. It's kind of like a Quaker type of mentality of giving back and offering service to others. I come from a family of doctors and so that was very much part of my culture, but also in my cultural background, I have a lot of teachers. There's also a strong sense that I associated with my culture of teaching. Service and teaching is, I think, very much part of my culture.

Lastly, one participant discussed a realization during adulthood that her parents had been from

drastically different socioeconomic backgrounds, and the impact of this difference on her

childhood:

I'm Jewish and of Eastern European descent. I'm American-born, but on my mother's side, my great-grandparents came over from Eastern Europe, fleeing pilgrims and difficulties because of anti-Semitism. And then my grandparents were both born here, lower east side New Yorkers. And then my father's family were more World War II, World War I, leaving Germany and Eastern Europe in the 1920s because of problems that were going on over there. And they're very diverse actually from each other, the two

sides of my family, because my father's side is German Jewish, which is very different than Eastern European. German Jews are classier, basically. They're way higher socio-economic status. And apparently in this country, the German Jews would not think of themselves as the same as Eastern European. Professionally there were differences, socioeconomically, culturally. So it sort of seemed even though like my father probably would have married "the wrong side of the tracks" type of thing, which is not anything I ever really knew or noticed. I mean, I noticed the differences in my family, but somebody made that comment to me when he asked about my background, and when he found out more where my grandfather's from and then where my mother's parents are from, he said something like, "Oh that must have been . . . ," and I was like, how did you know that, like who knew that? But apparently this guy knew that dynamic. So I don't think it's really that commonly known, but culturally they were, you know, like my father had linen napkins every night at dinner that were ironed and pressed and with my [maternal] grandmother, you know, we were drinking from glasses that were used for memorial candles, like the melted down. My grandmother would wash them and that became their glasses. Whereas my other grandmother had like crystal and china.

Therapist cultural background: attachment behaviors. When discussing their cultural background, participants were asked to talk specifically about what attachment behaviors looked like in their cultures, as experienced within their families.

Theme 2: Attachment as belonging and conforming to a group that is physically close and available. Five of the nine participants (55.6%), when describing what attachment behaviors looked like in their families, noted a sense of closeness resembling that of more collectivistic cultures. According to one participant of Jewish and Eastern European descent, this sense of closeness and belonging was conditional, that she felt like she belonged, as long as she "played by the rules" or conformed to "societal expectations." Another participant, of Jewish American heritage, emphasized the importance of physical closeness, such that families would plant their roots near each other, and relatives would help ensure this. "Jewish parents will throw any amount of money to have their children close," he stated. One participant of Greek and American background described matriarchal intergenerational family enmeshment that ensured a sense of community and availability, such that children were raised by both parents and grandparents:

I think people are very attached. Maybe you know, enmeshed. Especially mothers with their sons. And it is kind of like a cultural thing where one of the children, it's usually the boy, inherits the house that was built by the parents, and he stays there with his wife and his children, in this house that the parents built or owned by their parents, for example. Usually the girl leaves and they go their husband's house. But in-laws live together with the new family, and there is a matriarchy probably with the mother, you know, whoever the older mother is there, she becomes the controlling figure. And the children you know, are brought up by the parents, but the grandparents have a lot of influence on the new family and on the grandchildren. So there is, you know, I think in this country we would call it an enmeshed family. I think in Greece it's very normal to be that way and that's what's expected and it's almost like you always have a community of people to fall back on to kind of help you know, with childrearing. Or if the parents want to do something, they want to go away, the grandparents are there to pick that piece up or if the mother was working and the father was working, the grandparents will cook and pick up the kids from school. So there is that collection of people again to be available.

For another participant, this sense of closeness and belonging had less to do with physical closeness, but rather being there for each other, and knowing that each other is somewhere, even when family members live far apart:

[Attachment behaviors were about] looking out for each other. For example, classic attachment behavior is to want to know that you got home okay. My eighty-two-year-old mother still wants me to call her when my airplane lands wherever it is that I'm flying. It doesn't matter that I don't even live in the same house anymore. She still wants to know that I'm somewhere. Attachment behaviors as I experienced them were a lot about staying close, making sure that you have a good relationship with your siblings, making sure that you have a close relationship with your parents, being very protective of your children. I mean in essence, it's kind of like the idea of being there for them. Anyone in my family knows that in a time of need, they can turn to me and count on me to respond to their need, and that I will be accessible and available to them, that they can reach me and that I want to talk to them.

Theme 3: Desire to change childhood attachment behaviors in adulthood. Five of the

nine participants (55.6%) described a desire to be different from their parents in certain ways

when it came to attachment behaviors, and the ways in which they chose to be different as adults.

Although many of the participants described a sense of closeness within their families, many of

these same participants emphasized that this closeness did not involve vulnerability, open

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emotional expression, or empathy. One participant described this lack of vulnerability and openness:

> We're teaching it [attachment] now in this culture in terms of being open and talking about things. And I guess that's pretty culture specific, because I didn't grow up with that. I think that would have been allowed, but no one really ventured into those types of vulnerable conversations. I'd say the attachment was not like I understand it now in terms of the emotional closeness, didn't mean that everything was explicit and talked about.

One participant described an attempt in adulthood to change this dynamic with his mother, encouraging her to sit with her feelings instead of disconnecting:

> Because the family that I grew up in was not always so great at sitting with feelings or being empathetic, it's very important for me to exhibit holding my partner in mind, being able to hear where he's coming from without trying to make it better or fixing it, but that's not made into my family. That's more like my own challenge in terms of where I see gaps in how I was raised. It's changed a bit now, but fifteen years ago if I said that I was arguing with my sister, my mother would disconnect entirely from the conversation and say, "I'm not gonna take sides between my children," and change the subject. And it took a long time for me to be able to convey to her, "You don't have to take sides, but upon hearing that we're arguing, how do you feel?" And she'd go, "well, you know, it sucks." And I'm like, "Well, then say that!" [laughter] Just say, "Wow, that sucks. I'm so sorry you guys are fighting again." That would be fine. But it wasn't natural to them. And I was sort of in a different position a little bit. I'm much younger than my siblings. And I was also in therapy as a child, so my orientation to it is entirely different. And that creates ripples 'cause I'm not acting like the rest of the family. It's really not a coincidence that I married somebody who is religiously, racially, and nationally different. That has been my opinion. [laughter] I think I was already clear by the time I was dating age that I don't want to do this. I don't like these contradictions. I want something else. And I went about as "else" as possible to find. [laughter]

Another participant found that her pastoral care and therapy training enabled her to become more comfortable with being open with difficult feelings, which was not modeled for her by her parents in her childhood:

> I fortunately grew up and did pastoral care training, and I found it immensely liberating because I work with these beautiful colleagues who would say, "I feel really angry for that man. He's got cancer and he's forty-two and it's so unfair, and I'm feeling angry." And they were so upfront and open with their anger, and it was appropriate anger. It was a fight against injustice and what wasn't right or fair in the society. And that to me was enormously liberating to be able to say, "Yes, I feel angry too, and that's okay." And I noticed that my upbringing has had an impact on my learning EFT because my absolute

horror couples to me when I very first started were the really conflict ridden fighting, screaming couples because I was not acculturated to know how to deal with that. It was for me very novel to be so upfront against two people shrieking at each other because my parents never did that. And that's been a real growing edge for me to learn how to deal with those couples.

Another participant of Hungarian background credited the later influence of American culture with her increased comfortability with upholding boundaries with friends and family:

Now, if I bring in the American culture, which is the real contradiction to the Hungarian and the Israeli, it is more about boundaries, which I love. I love. I still have decades of people coming to visit and stay with me, friends, acquaintances, family whenever it was convenient [for them], and I never thought that I can tell [them] it's not convenient for me. It was nice and it was not appropriate, and the moment I started to say no, it liberated me. So that's my Americanization. What used to be a friend of a friend is coming to wherever I was living, Canada or England or wherever, can they stay with you for a few days. I said, of course. How can I say no to a friend?

Therapist cultural background: emotions. When discussing their cultural background, participants were also asked to talk specifically about what messages they received about emotions within their families and cultures.

Theme 4: "Emotions, especially negative ones, are bad and shouldn't be expressed or responded to." Eight of the nine participants (88.9%) felt that they were sent the message that emotions, especially negative emotions, were bad, such that they can't be expressed, must be kept under control, won't be responded to, or that their expression was considered problematic, selfish, disobedient, or punishable. For one participant, the message about emotions was loud and clear, that she was taught "not to display them. Keep them to yourself. Same goes for both positive and negative emotions. [My parents] didn't know how to deal with them, so they just pushed them away and focused on achievement and performance and stuff like that." For another, male, participant, emotions had to be kept under control, as doing so conveyed strength and independence:

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It was important to kind of be strong and be independent and not be too emotional, especially as a boy, especially then as a young man. It's important to be happy, right? It's important to keep them under control. Important not to be too scared. Yeah, so sort of the messages really kind of keep a lid, not a lid or a cap on it, but try to keep it under control.

Two participants recalled receiving the message, "children should be seen and not heard," and thus felt that they could not share their emotions. One of them learned more specifically that negativity should be kept quiet in favor of brighter, more superficial conversation:

I grew up with some of the idioms around, you know, if you can't say something nice, don't say it at all. Children should be seen but not heard. If you cried in public, your eyes were very quickly dried and then you kind of joined the group again. And so just this strong sort of a hush-hush, like very quickly reframe things, look at the bright side, you know, don't talk out loud about negative things. I would guess just because that's how other people were taught how to do it and there's just a value around not being that way, you know. So just the ability to maintain a good conversation about things that to me now seem more superficial, not sort of personal types of things. It's just quite strongly valued or something that everyone knew how to do. So you could visit with people and you would talk about politics and economics and all kinds of other things, kind of at a distance from your personal life. And that's just how people communicate.

The other participant described an apparent lack of nurturance and vulnerability with children:

You don't express them [emotions]. So it could have been a little more like children should be seen and not heard. Children aren't the focus, like the way they've become today. Kids work around the parents' schedules, there's a kids' table at meals. You know, for like holidays it's like kids eat there, the kids get the paper plates, the kids get the kids' dessert, the grownups get the good stuff. You know, that the kids will go downstairs and you won't hear them and the grownups could be together. If you have a problem it's … fix the problem, not necessarily open up space and keep it messy together. I think that, in terms of real nurturance, there wasn't … that wasn't expressed that way. Neither of my parents knew how to do that, there wasn't space to get vulnerable. I don't think that they really knew how to emotionally provide secure attachment.

One participant reported that while she learned from her parents that showing her emotions was "good," she received a very different message from her Greek grandmother, who helped to raise her—that she would be punished for showing her emotions, as doing so was selfish:

She would say to me, "If you are going to cry, we're going to hang up the phone. You are not going to be allowed to talk to your parents." And she would take the phone away and

she wouldn't let me speak to them. So, I had to hold emotions, to be able to talk to my parents and I could never say, "I miss you, when are you coming?" because I was being selfish and not a good daughter and they were doing all this for us. They were in the U.S., you know, trying to tidy up their businesses, so they can come to Greece and build us a house and all that stuff, and I was supposed to support them and not be a cry baby and show my emotions. So emotions were not a good thing, I was told.

One participant said he received contradictory messages about emotions: that they can be shared, but that they won't be responded to, especially if they are negative:

So, on the one hand, the message was everybody has them, it's okay to share them, you can be very verbal about it. I'd say there was a definite norm around, it's okay to have a little argument and I think a little bit chaotic and we'll make it through. We all love each other; we're always a family. That's one set of messages. On a much more subliminal level, the message was [that] negative emotions won't be responded to. When you convey being upset with somebody, they will tell you that they didn't mean it and it's your own problem. And I'm very estranged from one of my siblings. It's sort of the whole notion about we can sort of get into it and everything will be okay. I don't think it's actually true in my family. But some of the messages were contradictory.

Theme 5: "Anger is bad and should not be expressed." Five of the nine participants

(55.6%) felt that they were sent the message that anger should not be expressed. One participant

stated, "If you got angry about something, it was considered bad behavior." Another described a

message that children could not express their anger in favor of keeping the peace:

Anger was one that was not welcomed by the children. It was mostly okay that the parents could express anger but the children should not express anger. But not so much connected to, I don't think, to my culture. It's more a family dynamic, I think. Probably because my parents weren't able to handle it. I think they just valued that everyone got along, probably. They wanted everyone to get along, especially among the siblings. They always had a concern that we might one day end up not being close so they didn't want us to fight or to be angry with each other. They always wanted us to make peace and to express our needs and our emotions in a way that wouldn't be hurtful. Actually they, too, would model it towards us that way, not always between them. My parents sometimes fight each other but they wouldn't like us to fight each other and they wouldn't ever express anger towards us in an angry kind of way. It was modeled as well.

Two participants described a gender difference when it came to anger. They learned that

they couldn't express anger, especially as a female, or they would be perceived negatively:

It wasn't ladylike to show anger. My father showed lots of anger. He got angry and frustrated in the business world and with farmers. And I'd hear him arguing on the phone and swearing. That was all right because he was a man, but my mother would shut it down if my sister and I were ever angry or frustrated about things. She'd literally say, "Shush, shush, shush," and want us to not talk that way. It bothered her. She had a definite cultural thing about anger. She was very much a woman of the era where women were considered unladylike to show your anger. And I grew up with the distinct feeling that it was not okay for me to be angry. And of course as children you often do feel angry about things.

Anger was not so appropriate, especially for girls. There was a gender thing there. Girls don't get angry. Or if they get angry, you've got to tone it down. Because you're not going to be listened to if you're angry. So you'll have to, you know, say it with a smile or find a cute way to express, you know, what is it that you need, in order to be heard. So being pleasant, being light, about it was given a lot of emphasis, specifically for me, for girls. My brother was very allowed to express anger and throw a tantrum. So I think there's a gender thing there. I find myself even nowadays, not getting very angry. I tend to minimize things. It's really not a big deal. You know, let me put a big smile on my face, and I can convince you in a very gentle way, right, that this is not the right thing, or that it bothers me, but I will never really make it into a big deal, because it kind of goes back to that. How am I going to be perceived? Am I going to be perceived as the angry woman, as the bitch, so to say. All right, then nobody is really going to like you if you're like that. You'll just have to find the right way. And the right way is a gentle way, a slow way, minimizing it, it's not really a big deal. And if you can get over it, without saying anything to anyone, you know, how great is that?

Theme 6: "Fear is bad and should not be expressed." Three of the nine participants (33.3%) felt that they were sent the message that fear should not be expressed. One participant felt that expressions of fear would not be seen, perhaps that people would not know how to respond to them: "I think fear was just not really noticed. There's just a strong sense that in those family systems or in the culture that people wouldn't know what to do with that kind of emotion." One participant described a sense growing up that she couldn't express her fear, and instead needed to manage it internally, and receive only physical—not emotional—support. She gave an example of being fearful at the dentist's office, and her mother's response:

My mother—I have decided on reflection—I think had a lot of fear herself. She to be nice to me when I was afraid, but she certainly didn't give me permission to talk about the fear. It was more she'd sort of button the mouth, and we've got to get through it. She'd try to be brave I think. And in the process something of her attention seeped across to me.

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And I have a memory of really feeling that when I was afraid I had to more manage myself. And yet I feel a little bit guilty saying that because she was certainly not a "Well, you just go to your room" type parent. It was not like that. It wasn't like she didn't try to support me. She would come to the dentist if I was having a tooth pulled out, for example. But somehow or other her sitting with me in the dentist waiting room I didn't find comforting. I think as an adult now reflecting I think she probably felt sorry for me and wanted to be supportive but was sort of anxious for me and got herself in a knot because my sense always was that she was tense in those occasions. It was something in the way she was that I think she had her own trouble with fear. And then I was left with the feeling, well, I've got to just be brave and manage myself here. And I'm sure if she was alive now for me to talk it over with her she would be sorry that's the impact she had on me. But nevertheless, that's my adult analysis of fifty years ago.

Theme 7: "You don't have a right to your pain, because it doesn't compare to our trauma." Three of the nine participants (33.3%) felt that they were sent the message that they could not express negative emotions in large part due to the trauma experienced by previous generations in the family. One participant described feeling that she didn't have a right to her own pain, because her parents survived the Holocaust:

> I think it's a little complicated because my parents are Holocaust survivors. So do you want me to share a word about it? I was so aware of their traumas and their pain that— and I was very special. I was the first one to be born after all the losses so I felt special. I felt loved. I felt incredibly worthy and I was named after my grandmother, who died, who was a martyr and she didn't have to, but she sacrificed and died so there was a lot of specialness that came with that. But at the same time, I didn't have right to my pain. That's how I define it. It's the second generation. That's how I see the attachment injury. We were so aware of our parents' pains that what was our pain? So it was really protecting our parents, not because we were told that it's not important, but it was— nobody told me I don't care about your pain or discomfort. It was I knew that their pain was bigger so what is me experiencing whatever I was experiencing? So my own discomfort, I could cry. I could whatever came out, came out, but I also was very aware not to burden them because they already went through so much. So they were protective of their emotional equilibrium, not just because what will happen to me, but because they already suffered so much.

Another participant described a jarring experience of living with her grandparents in Greece, and sensing that because their experiences living through war and depression, demonstrations of strength were prioritized and emotions were not allowed:

For eight months, we were living with my grandparents, and those eight months were a little bit traumatic I would say for me, because my grandparents were older, they were like sixty-five or maybe close to seventy. They had lived through the depression. My grandfather was in the war. He was a merchant marine and he was away from home, had left my grandmother with the four children and he was missing in action. She didn't know if he was alive or dead. So, she was a seamstress and she had to support her family, didn't get along very well on with her in-laws, who she was living with. So there was no support from them there, and she was just a very bitter, resentful woman, who because she had to be so strong and deal with you know, the mishaps of life, emotion was not allowed.

Another participant recalled that previous generations in her family had suffered through economic crises, anti-Semitism and immigration trauma, and that she was implicitly sent the message that any suffering she endured would not be validated, and instead she should be happy:

They lived through times where their parents were dealing with economic crises, anti-Semitism, immigration, relocation. My father's father was an orphan by the time he was twelve and he lived with his grandmother who he then had to leave behind when he came to the U.S. He came by himself on a visa when he was twenty, temporary, like a vacation visa because he was suspicious about what was happening in Germany, and then he never returned. And he had to flee to Cuba until the war was over, and he met people to sponsor some of his other members of his family. But he left his grandmother and that was the last he ever saw her. And my grandmother, her father came here for the first seven years of her life to try to find a job in a home and then brought over the rest of her [family], and they were very poor. But poor like poorly treated, scary because of the kind of aggression that was happening. There was always a fear of not having enough, I think my mother grew up with that kind of insatiable like never getting enough because there was never enough emotional security. And for my father, he was really dealing with trauma, there was trauma and that never got addressed. So they were rebounding from that. So I think there was always kind of a feeling of like, what are you complaining about? I remember I'd fight with my brothers, and he'd say, he would give his right arm to have [siblings]. He was an only child and orphaned and he was like, you should be happy, you know. And I'd be like, you know really? I'm not happy. My brother just like punched me in the head and took my thing and . . . whatever it was. And it was like, I have to be happy right now about this? You know, it just never measured up. Like those stories weren't necessarily told in a way of, let me help you get to know my history better. It was more like don't feel your feelings, shut it down and be happy and shut up.

Theme 8: "Some emotions are good and should be shared." Six of the nine participants (66.7%) felt that they were sent the message within their families and culture that emotions were good, that they can be expressed, or at least that certain emotions were allowed to be expressed.

Two participants felt strongly that they were sent the message that all emotions were valuable

and could be expressed. One of these two participants, of Mexican-Jewish descent, described

learning that emotions are valued as a means for communication:

> They're [emotions are] highly valued as means for communication, for obtaining a sense
> of safety of being cared for and loved. Emotions were highly valued and used in my
> cultural background. In fact, expressed through literature, poetry, music, in my culture,
> it's okay the way that I do my culture. Not only is it okay, it's the norm to show one's
> emotions for men and women.

The other participant described a childhood in which it was okay to be emotional, and gave an

example of how open communication of emotions between family members helped her to make

a decision to move from Greece to the U.S. to attend high school and college:

> In my family growing up here, there were a lot of emotions. And it was okay to be
> emotional and you were responded to. You know, talk to us, let me know what's going
> on, what's happening. How do you feel about this? It was a totally different thing and
> then later when I was seventeen and I wanted to come to the U.S. because my dream was
> to be an English teacher, and I came here to finish my senior year in high school and
> maybe go one year to college and then I was going to go back because there was some
> special privilege for American citizens. Not everybody goes to college in Greece. Only
> the top five percent get in, because college is free. But if you wanted to be an English
> teacher and you were an American citizen and your parents still pay taxes and have a
> business or home here, there's some privileges that you have. But you have to have either
> a diploma from high school or attendance of one year of college, so if you can have these
> credits or prerequisites to go back. So when I told my parents this is what I found out and
> I would like to pursue this, they didn't stop me. They said, "Where did you get this
> information? How is this going to make you feel? If you go back only one of us can come
> back with you. It's only going to be for a year. Are you sure you want to." You know,
> there was a lot of discussion, a lot of feeling kind of thing. And then when I decided I
> wanted to stay another year, there was like a whole family conference of you know, if I
> stay another year with my dad, how does my mom feel to be in Greece with my brother?
> And maybe it would be better for all of us to be in one place together and how would
> they feel to come back here? How do I feel about going back? I mean there was like a
> whole feeling kind of thing happening.

> Some participants said they learned growing up that only certain emotions could be

shared, such as soft emotions like sadness, or positive emotions like love and happiness.

According to one participant, "I was very much allowed to be vulnerable. I was allowed to be

sad. It was all right if I cried. I was not ever ridiculed or punished or anything like that for having soft emotion." Another participant noted, "Well, happiness, you know, being polite and friendly, that was encouraged. I think looking out for other people, just being caring and sensitive was rewarded."

Therapist cultural background: EFT and attachment. When discussing their cultural background, participants were also asked how their cultural background informed their beliefs about EFT and attachment. More specifically, they were asked which values or beliefs from their culture fit or didn't fit with the values of EFT and attachment theory.

Theme 9: A sense of safety and togetherness fits with EFT and attachment. All of the nine participants (100%) reported feeling at least somewhat of an overall sense of safety and togetherness growing up in their families, and that this sense of safety and togetherness felt consonant with the values of EFT and attachment theory. One participant, of Mexican-Jewish background, felt that the notion of attachment security was consonant with the Mexican and Jewish value of the bond between mother and baby:

> I think that in some ways, in Mexican culture it is highly valued, the bond between a mother and her baby. Babies are considered just such precious beings that to keep them safe and to attend to their emotional and physical needs is very much part of the culture. You see families, and co-sleeping is very much part of Mexican culture. You see women going to work carrying their children with them all the time. They breast feed forever. I definitely feel like this notion that attachment, security and that sense that there's someone there for you when you need it is very closely matched to my Latino and Jewish identity. When in need, reach for someone. That is wired-in and that's normal.

Another participant, of Greek-American background, noted that the sense of security and comfort with emotions she learned in her family fits with EFT and attachment. As a result of this comfort, she has found that her couples develop a strong attachment to her:

> I feel that I am pretty good at sitting with emotions. I'm pretty accepting of people, even the more difficult ones. When I say to people you know, I think we're done, right, you've been with me for like two years now, I think you're doing this thing really great by

yourselves, they don't want to leave. [Laughter] They're like "Oh, we don't want to graduate, you know, we want to stay a little bit more," or you know, "Can we see you every other week" or "Can we come in once a month, just for little fine tune-ups and stuff." So I think there is something about that. I'm not exactly sure, there's an attachment right, but I don't know, is it because, you know, I do have that gentle, kind of pleasant thing that just kind of like is a magnet to people, that they don't want to leave. I mean I have the same thing here, with students, you know, what other class are you teaching next semester, because we've really enjoyed the class. So, I'm not sure. But I think yes, all the emotions are pretty okay. I can sit with them.

One participant of Australian background described an upbringing in which she felt like she had

a safe haven and a secure base, and this was consonant with EFT and attachment theory:

> Well, the best side of my upbringing is the fact that I was treated very well as a child, and I really can say I knew what it felt like to have a safe haven, and I had a secure base. So I feel that has given me a wonderful belief in the power of those relationships and the beauty and the value of love and the importance for us as humans in having close family connections and friendship connections. So I think broadly my background has been positive in terms of giving me that sense of knowing what secure attachment looks like and feels like.

For another participant, the sense of safety was a bit more subtle. Although she reported feeling a

lack of emotional engagement, she described feeling a sense of safety in the strength of her

parents' marriage, the connections she had with her grandmother and siblings, and also in that

she felt safe enough to fight for her parents' emotional accessibility—despite not always

receiving it:

> I had other areas where I felt safety under me, so that would hinder me in certain areas; I think it helped me in others. So one way that I felt safe and secure was that my parents were married to each other. And I liked that feeling of having them together. They'd fight a lot, and even though it wasn't always clear that it was a strong… I never felt it was a strong marriage… now I do. But it didn't always feel like a strong marriage. But to me, it felt, for the most part, except for a little crisis here and there, that they were in it together. That was grounding for me. I also liked living with my grandmother for a period of time. I just always felt her nurturance, just knowing you're not alone, living that part from EFT that says, we're not alone in it. I have three siblings, I always felt their presence. And I think that's the part that I… That even though you might not be able to access people easily emotionally you might have to fight for it. I would argue a lot, I would fight a lot, I'd be angry a lot. But it was because it was a safe enough space for me to do that. So I found myself kind of fighting for what I believed I deserved. So I do think there was a part of me that got the message I was worthy, otherwise I wouldn't have been fighting for

what I wanted. I was always holding out hope for it, often disappointed but sometimes getting that.

Theme 10: Lack of emotional engagement does not fit with EFT and attachment. Five of the nine participants (55.6%) reported that in their families, emotional expressiveness and/or responsiveness were not valued, and this lack of emotional engagement did not fit with EFT and attachment values. According to one participant, "The part I think that didn't work for me was not having space for people to be vulnerable and to feel. Both my parents—they just avoided any real emotion." Another participant described a similar lack of emotional closeness with her mother, and stated that as a result, learning EFT filled an internal void:

> I think I grew up missing out on that kind of emotional closeness where I think I yearned to be able to talk to my mom about things and I wasn't able to. And so discovering EFT just sort of, you know, filled a sort of a void for me internally. And so I've experienced attachment differently by doing EFT the way I'm doing it now and I find it effective and helpful.

One participant recalled her parents' inhibitions with certain emotions and their lack of comfort and language for vulnerability. She described the ways in which learning EFT helped her to heal by giving her more confidence in her emotional experience:

> I think the little bit that was not so good in terms of [what doesn't fit with EFT and attachment] was my mother's inhibitions about fear and anger. And my father I don't think has a lot of comfort with talking about vulnerability. He was certainly not a macho man who thought that you had to always be tough and strong. He wasn't like that, but he didn't have a vocabulary or comfort around talking about his own vulnerability. Though I got very close to him as he was aging. And when he was widowed I looked after him quite a bit when he was old. And I quite enjoyed that because we sort of got to know each other even more when he was old and frail. As a general rule I would have to say that I think EFT has brought quite a bit of healing to me personally in terms of being able to learn how to work with other people's emotions. It's given me more insight and confidence into my own emotional experience. It's extended me through the work with emotion.

For another participant, of Jewish descent, emotional engagement in his culture and family was typically one-sided: Emotional disclosure was highly valued, especially considering

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the trauma experienced by many; however, emotional accessibility and responsiveness was not

emphasized, which he felt was not consonant with EFT and attachment values:

> There's a quote that she [my therapist] gave me that exemplifies what I would say is not so useful about the culture or particular type of Judaism that I came from, and she did, too. And the quote was, "You know, I remember a lot of kind of the scrappy arguments like this when I was growing up in Brooklyn, too. You know, there was a lot of noise, there was a lot of people putting their feelings and opinions on the table. There was a lot of disclosure." And then she said, "I don't remember a whole lot of listening. I don't remember a whole lot of responding to." It was much more focused on putting it out and if you look at the research on that, which is difficult because Judaism is a broad tent but there is some thought, there is an emphasis on disclosure in Judaism because it's trauma processing. It's two thousand years of discrimination in pogroms and the emphasis on get it out, like don't hold it in. What to do with it has never been very interpersonal and so that doesn't fit with EFT all that well and I find it a little frustrating. There's a part that's very validating on what I would call an intrapersonal level, an individual level. Get it out, you have every right to say it, your feelings are your own. Like all of that would be culturally sanctioned. This notion of responsiveness, that somebody has your back, I think was not part of the particular slant of Judaism that I came from. It is more a part of Orthodox Judaism but that's not really where I'm from. There was much more emphasis on getting it out than what you do with it. And that just strikes me as so precisely, of course it's okay to do that and then tomorrow's a new day. That's like, I mean I didn't think it was something that had been said to me, like did you think about what we talked about yesterday and somebody in my family will say yeah, I'm kind of glad that's over now. And then I feel like I got left hanging.

Theme 11: Value of independence over interdependence does not fit with EFT and attachment. Three of the nine participants (33.3%) reported that what did not fit with EFT and

attachment values in their culture was the strong value of independence over interdependence.

Two of these participants felt that in their cultures, children were not valued as an important part

of the emotional system of the family, and instead they were encouraged to be independent. They

both felt that attachment theory instead values children's need for emotional attachment, a sense

of safety and security, and they both now espoused these values: "I'm a believer in attachment

theory. So I believe that the kind of safety net that children need in the world is what will allow

them to feel whole and be able to go out and be vulnerable and take risks." For another

participant, EFT was a welcome change from his Jewish-American and Canadian culture of

origin, because of its emphasis on needing each other:

> If I were to answer that honestly, I would say that in a lot of ways EFT goes against the grain of what I learned in my culture of origin and that's one of the reasons why I think it's so important and why I think it's so important that Sue has really popularized the EFT message. Because it's a big sort of wake-up people. We need each other. And the sooner we acknowledge this fact, because that's what it is, the better off everybody is going to be. So, I can't really say that my culture informed me of that necessarily, or I guess you could say that maybe because of where I come from, EFT and EFT values were a very welcome change.

EFT with intercultural couples: when and how cultural differences arise. In the

second portion of the semi-structured interview, participants were asked about their experiences

implementing emotionally focused couples therapy with intercultural couples. Participants were

first asked when and how cultural differences arise in treatment.

Theme 12: Cultural differences are the presenting problem brought in by the couple.

All of the nine participants (100%) reported that cultural differences tend to arise in Stage 1 of

treatment. Four of the nine (44.4%) reported that cultural differences arose in Step 1

(assessment), as intercultural couples often come in with a presenting problem related to cultural

differences. Examples of such presenting problems include conflict over extended family

involvement due to differences in cultural expectations, conflict about whether to get engaged or

married because of cultural differences, or conflict about childrearing practices due to different

cultural beliefs.

Theme 13: Cultural differences arise when identifying the cycle and underlying

attachment needs. Four of the nine participants (44.4%) reported that the cultural differences

most often arise in stage one, steps two and three of EFT, when tracking the cycle, and

identifying the underlying attachment needs. During step two, the therapist helps the couple to

determine their negative interactional cycle, focusing on each partner's action tendencies,

perceptions, and secondary emotions. One participant noted that making room for cultural differences during this step is "part of normalizing and validating that people's experiences are different" and that it "opens up a space for both of them to have their different and valid ways of doing things." (1424) Another participant emphasized that when trying to track their cycle, partners "often don't recognize that some of the ways that they disconnect are potentially influenced by culture" (2504), making it all the more important for the therapist to be mindful of cultural influences and validate them. One participant noted more specifically that perceptions in the cycle can be culture-specific, for example, "if you don't greet me the moment you open the door, then that means something specific in my culture" (8605) that differs from what it means to the partner, which impacts the cycle.

During step three, the therapist helps each partner access underlying primary emotions and unmet attachment needs. According to one participant, cultural differences arise during this step in treatment because of cultural differences in whether, how, or which emotions should be expressed:

> I think the first time that it maybe starts to come into play where you notice something happening that could be culturally related is in Step 3 of EFT where you're trying to identify what are some of the more unacknowledged, attachment related needs or emotions that one partner may have. Some cultures, it's not so easy for a partner to open up about this, or when they open up about this, what comes out is a lot of secondary emotions, the more secondary emotions like anger.

Theme 14: Cultural differences also arise later in treatment, when going deeper into needs and fears. Three of the nine participants (33.3%) reported that cultural differences also often arise at any point later in treatment, such as in stage two, steps five and six, when further accessing attachment needs and fears. According to one participant, partners often are not aware of the impact of their cultural differences on their relationship, until the therapist brings it out

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through careful questioning. One participant noted that the deeper work later on in treatment, specifically during steps five and six, often brings cultural differences to the forefront:

> In stage two, in step five or six, where somebody might be responding, or as somebody is sharing more of themselves, they're deepening the work, they're realizing that stuff is related to how they, you know, they're talking about their families and it could just be that's how they learn to be in the world.

EFT with intercultural couples: intercultural couple themes and patterns. When discussing their experiences using emotionally focused therapy with intercultural couples, participants were also asked about common themes and patterns that tended to emerge with these couples.

Theme 15: Cultural differences in extended family involvement or influence, and its impact on romantic attachment. Eight of the nine participants (88.9%) reported that for many of their intercultural couples, there were cultural differences in expectations of extended family involvement or influence, and these differences would often negatively impact their romantic attachment. For many of the intercultural couples described by participants, conflict over extended family influence had to do with religious practices. One participant talked about a Jewish couple in which the female partner was ultraorthodox, while the male partner was modern orthodox. They each had very different ideas about whether to observe the Shabbat. For this couple, the female partner desired to observe the Shabbat, but the male partner feared that if he complied, he would lose his connection with his extended family:

> The real fear for him was that now she's asking for X as far as religion. She wants him to move to this world by observing the Shabbat. They're expected to observe Shabbat and he said Shabbat is going to be the only day I have a day off. What will happen to my family? How would I see my family? His story is that actually he has two older sisters who created a lot of havoc and chaos in the family and he just wanted equilibrium and he wanted it to be easy so that there won't be chaos in the family. So he's afraid that if he is not going to create equilibrium, but if he will ask them to come to him, that was not even a notion for him that he can ask for. He was there to give. So that's why his family—it was all in the context of how will I connect to my family. It was all him doing for them or

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responding to them. And then also there was no emotional intimacy in his family. Everything was about logistic overdrive somewhere, and goes where and meets where, which restaurant at what time. So it was all about logistic, but no intimacy. So logistically, he translated this whole thing into logistic. "If I cannot go there, I can never expect them to come to me" and it's all about doing and nothing about underneath it. So that was actually the shift for him. And an interesting piece that just came out that she always said that Shabbat is for her the day she can relax and she can recharge and she can be free and all that. And just through talking with her and everything, I sense that she might be ADD and I sent her to a psychiatrist for an evaluation for adult ADD and she is a classic ADD. So if I put that also in the context why she needed the Shabbat, it makes also sense.

Another participant described a common theme among couples in which one partner is Jewish, and the other is not. According to this participant, the non-Jewish partner often feels excluded from the family, while their children are valued and included:

One of the common themes that I see is a feeling on the part of the not-Jewish person of feeling sort of less-than, or excluded or somehow not really being welcomed, equal-to. Like the Jewish part of the family, side of the family, they don't always feel like they would be cared for just for themselves. In all those cases they have children and they feel like their children are valued more than they are because they're truly Jewish. Well, in those families the kids that have Jewish parents are Jewish from the Jewish standpoint. But the partner is not Jewish and so there is a feeling of exclusion.

While some partners in intercultural relationships feel excluded from their partner's family, other partners would prefer to spend less time with extended family, instead prioritizing the nuclear family. One participant described such a conflict in a couple in which the female partner was Brazilian and the male partner was American.

They both gave a different rating on the closeness [scale] and it was evident that the male partner was quite happy with the relationship and the female partner was really hurting and feeling very distant. And that prompted the male partner to share that his family background was very different and he grew up in Chicago with seven brothers and sisters and they were allowed to run the streets and be independent, and the parents didn't even notice when they were home. And then she was talking about her family in Brazil and how very close they are and how she wants to visit them at least once a year, and then they started talking about all the differences and this just being a cycle every time they want to go on vacation, because all she wants to do is go home and visit her family, or even visit his family because that's very important to her in her culture. And for him, it's not as important. He'd rather spend time with the nuclear family.

Another participant described a similar conflict with a couple in which the female partner was

Syrian and the male partner was Ashkenazi. For the male partner in this couple, extended family

influence was not just a matter of spending too much time with her family, but it also triggered a

fear of losing himself to the control of her family.

> She is very close to her family and the Syrian community is like all about the family, you don't really trust people outside your community, it's very insular. And she had a big family and wanted to spend a lot of time with them, and he didn't. And for her to separate from her family was really a big deal. In her community, your parents are the ones who make your decisions for you. You spend your weekends at their beach house, like you're together. Holidays you're supposed to be together and they celebrate a lot more holidays than [his does]. So he would celebrate a couple of the big holidays, you know, in the year, but her family celebrates a lot of holidays, which means it's going to be a lot of family time, and that felt like too much for him, and it felt like he was going to lose himself. She grew up kind of being controlled by this community, so how is she going to have a voice to stand up to her family and choose him. And he had a lot of anxiety and was afraid that he would lose himself. And they found themselves very stuck. So to me, that was like a cultural rift.

This same participant described another couple with a similar theme in which the American male

partner felt he was losing himself because he felt he did not have a voice in his relationship with

his Chinese-American partner. For this female partner, feeling ashamed and saving face with her

parents was such an overwhelming priority for her, that her partner felt that there was no room

for his feelings nor for her to share her feelings with him.

> Her parents are from China, she was born here, or maybe she came here when she was really small. He was born and raised in Massachusetts. So he was uncertain about getting married. Actually these two guys were very similar in terms of their losing themselves; I saw them around the same time and it was like, it was so similar, it was like scary. But this guy was just really uncertain about her and losing himself anywhere because he felt so emotionally fragile. She pushed getting engaged and so they were engaged, but he couldn't agree to get married because he wasn't sure if he really wanted to get married. And what came up for her was around shame and the disappointment it would be for her family if he didn't marry her. And then the disappointment and shame if he married her and then the marriage failed. There was just a lot of shame. The cultural piece for her was that in Asian culture, that you couldn't say to your parents, "This is what we're going through. These are our struggles." You kind of have to show that you have it together, you're doing it and everything looks good. For her and her family, it was a lot about the way things are presented and it has to be presented well because they've invested so

much in her that she owes it to them to be successful and to make them proud. And if they weren't going to be proud because this is failing, that it was extreme shame, it was all about shame for her. And she attributed that to cultural background. And then also part of immigration stories, sacrifices that parents made for more, you know, that she had more so she can't disappoint. And she had a very successful older sister, and they were two girls, and there was no boy in the family, so she felt some guilt in a way that she can't be the one that's not going to make them proud. Like she has to and it just felt like a lot of pressure for her. So it sometimes would pull out of just what was going on between them and for her to at times say, "It doesn't matter how you feel," you know, to her partner. You know, "It doesn't matter how you feel, just do this because everything's riding on it for me. And I think that was a lot of the cultural stuff that came up for her. It wasn't like they were telling her. What they would say to her is we just want you to be happy. Once in a while they would say, how is it going, and then at a certain point they said that he wasn't welcome in their house unless he stepped it up, that that was a boundary they had to put on. They were like dealing with it quietly for a long time, and then eventually they just said, maybe he's not getting invited for Christmas this year. And that was the end of the story. No more discussion. She carried the shame inside because there was no place for her to put it. It didn't feel comfortable for her to be able to really talk about it. And he was just losing himself. He didn't feel like she could share her emotions, like she was present enough for him, and that felt scary, that he would then just have to go along with things, but there being a dialogue.

Another participant described a common theme with intercultural couples where one partner comes from a collectivistic culture, and as a result, there are three different perspectives in the room: the individualistic partner's, the collectivistic partner's, and his or her extended family's. He gave an example of a couple in which the female partner was White Canadian, and the male partner was Indian:

There's two different perspectives in the room. Part of there being two different experiences in the room. For cultures that are more collectivistic, I think it's actually three. In other words, one of my white Indian couples that I'm seeing now, there's his experience, there's her experience, and then there's his experience on behalf of his parents and how that's coming in her relationship with her new mother-in-law, right? Like for example, to make that make more sense, early on in the therapy, the argument was they were trying to pick a wedding ring. And she found one that she really liked and he said well let's ask my mother, she knows a lot about gemstones. And while he was consulting with his mother and all of her sisters, the ring got sold to someone else. And so although he was sorry about it, her experience was: "I don't come first with you. There's always this consultative process with your Indian family that I'm not even really part of." And then from his point of view, he was saying, "But you should be part of it. You should join that conversation." And she said, "I don't feel comfortable to challenge my mother-in-law. Because what I would have said is, 'But I want this one. I don't care

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about the quality of the gemstone.' But I wasn't going to say that to a woman I don't know who's gonna be my mother-in-law." So there was her experience of wanting what she wants and it's his experience of feeling that it would be rude of him to go forward without checking in with his family because they have expertise. And then there's almost this representation of pressure on him from the family that might not even be real. Because his mother's perspective was never solicited. Like we don't actually know if his mother would have been okay or not with being excluded. But it's his culture, her culture, and then this sort of representation of the "Indians," if you will. So in step two, there was a lot of validating that their expectations were different and that from her cultural life it's a decision for him and her to make together. And from his cultural life, it's a decision that the whole family should be involved in. So in step two, we were kind of talking about how to validate that these were different. In step three, we were digging more into how it felt when she got, when the ring got sold to someone else because he didn't hear her. And how he felt, sorry about that and put in like an impossible position between her and his mother. He felt like he was being asked to choose between loving her and loving his family and he said I want you to be a part of my family. His family operates in a way that's very foreign to her. So I use it a lot in the early stages of EFT as part of validating and normalizing the different experiences and feelings that people have.

Thus, extended family influence was so powerful that it would enter into the therapy room, and impact their ability to make decisions together as a couple. According to participants, often with these conflicts, one partner feels strongly about family involvement in decision-making, while the other partner prefers decisions to be made together, without family influence.

   Theme 16: Cultural differences in emotional expression and engagement. Six of the nine participants (66.7%) reported that cultural differences in emotional expression and engagement was a common theme among their intercultural couples. One participant described two intercultural couples in which one partner was American and the other was Swedish. For the American partner, the Swedish partner's calm, easygoing, "wait-and-see" presence was experienced as dismissive and cold:

   In Sweden there's a very big focus on the good of the whole. And people are not sort of micromanaged the way Americans can be. And yet Sweden is the culture where they in the last generation, basically, since the 1970s, have completely turned around corporal punishment. It was not allowed, I think, starting in '79, if I remember my reading correctly. And they had an ombudsman and kids were encouraged to connect with the ombudsman. And their whole approach was not to punish people like we do here with child protective services, but to try to support the family and give what they needed in

order to change the way that they interacted with their children. And so both of the Swedish people may somewhat on the surface may appear to be a little bit more lackadaisical and more easygoing, more sort of open to different ways that people do things. But that can be experienced by the other partner as dismissive, or cold or not attentive. And they're really not that way, but they can appear that way. And so with both of those couples it's been really important to recognize that that sort of calm presence and openness is not dismissive. And where the Swedish piece sort of seems to be that if I can't say anything nice, I won't say anything. I mean, that's sort of very simplified. So, with those couples, trying to work with the Swedish person to step forward a little bit more and actually learn to talk about things that are uncomfortable or problematic or whatever, rather than kind of compartmentalizing those things. I think from what they've both said, the culture is so focused on supporting and understanding and figuring it out that sometimes they tend to have a "wait and see" sort of attitude. Then their partner feels like they're not invested or they don't know what's going on. The partner doesn't have an idea that they're even thinking about something because they're not tending to be expressive about it, even though they have really clear feelings about it. They're there. They're committed. They're totally there, but their partner doesn't always recognize that. There was one thing recently where he said to her, "I think I have more confidence in our marriage than you do because when we're at odds, I don't ever think that I want to be apart from you." And she was like, "What? You know, you said it was nicer when the kids and I were away because you could focus on your business." And he said, "Yeah, but I knew you were coming back. I'm just talking about that couple of days how I got a lot done. I wasn't saying I don't want to be with you or I want you to go away. I assume you know that." And she was like, "Well, I don't." They've been together for ten years and she was absolutely stunned when he said that. Like, she had no idea that's how he felt. And I thought that was just so amazing that he could identify that and articulate it. It was really powerful.

The American partner was surprised to discover that her Swedish husband was so invested and confident in their marriage, because it did not occur to him to express these feelings to her, as doing so did not feel congruent with Swedish cultural norms.

Another participant recalled a noticeable pattern of emotional expression with two intercultural couples in which the male partner was Maltese, and their female partners were of Anglo-Saxon or English descent. She described the ways in which the male partners' violent tempers were difficult for their female partners to take in, as such outward emotional expressiveness was not common in their own cultures:

They had violent tempers. They were really bad-tempered men, to speak frankly. And their anger in session to me was pretty startling. And I couldn't say they personally

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frightened me, but I could well understand why their wives would be quite watchful and wary of that quite vicious outburst and so forth. So I suspect there could be a theme with men of European background—now I'm talking with tiny examples, so this is huge generalization. But those two couples where the men were Maltese, and I've had two other men—I'm not sure whether they were Croatian or Serbian. They were from what used to be called Yugoslavia. A common theme across those four couples was that the wives did not like how bad-tempered and angry the men got. And so I might just wonder if there is a possible theme there with particularly women who've been brought up in a fairly Anglo-Saxon English, Scottish, Welsh kind of background where emotions are handled with a degree of caution, and there wouldn't be screaming and yelling as a routine way of communicating. If they marry into European families that are more volatile, more expressive, I could imagine that would be a problem. Now I might be wrong in drawing out the gender issue there because really that might not be relevant. Because when I think of my Brazilian girl married to the Australian boy, he sure doesn't like her anger. So maybe it's got nothing to do with gender. Maybe it's more just to do with emotional expressiveness and how much permission they actually have culturally to express anger, temper, frustration, throwing things, and banging saucepans on the kitchen sink and all that sort of stuff.

Another participant described a similar dynamic between a Brazilian female and Australian male, in which she was much more intensely emotionally expressive than he was, which caused a great deal of tension in their relationship:

> Well, if I think first of all of my Brazilian/Australian couple that I haven't actually seen for some weeks, I expect they will be coming back into therapy. He works away, and sometimes when he's away with his work there'll be gaps. She's Brazilian and came to Australia to be with him. So she's only lived here about eight or nine years. And he's Australian reared. It became very apparent to me almost in the first session that they have quite a mismatch with emotional expressiveness in that he's quite constricted and she's extremely expressive—one might say even maybe even dysregulated at times. She gets very upset about things and shouts and cries and really expresses it. And he comes from a —again, I don't know that it's because he's Australian. I take it more that it was his background. He was an adopted child, and he's never got on terribly well with his adopting parents. And I see him as a rather vulnerable man. He's sort of constricted and shut off a lot of his emotional experience. He's bright; he's educated. He's a health professional. He uses his head to try to solve problems. And that's all absolutely fine except that it doesn't link with her intense emotional experience. And this has been a lot of their tension.

One participant described a dynamic between an Irish male and a Chinese female, both of whom were similar in that outward emotional expression was not the norm in both of their

cultures. However, they both had very different ways of then managing their emotions, which

became apparent when they lost their son:

> So, the Irish does not feel anything. "It is what it is." Whatever tragedy, the lost days, their child, twenty-two, involved in a motorcycle accident. He lost half of his department in 9/11 when the tower collapsed and: "It is what it is. What can you do?" That's his emotional expression. He said something a bit horrible, a bit funny to me. He said I will never go to a Jewish funeral. It is so sad. We Irish go to the pub. Why would we want to feel sad?" So this is the way he is restricted. She comes from a Chinese background with a lot of trauma of immigration back-and-forth and abandonment and passing on to different family members, early loss of her mother as a child, not being told about it, I mean, really painful. So she was in some boarding school in China or in Taiwan and there she was introduced to his parents. Don't go downstairs at night, there are spirits. So she deals with any emotional discomfort with believing in spirits, in those spirits. And he, the Irishman doesn't believe in anything that relates to emotion. So this came up also through where they kept the ashes of his son that she couldn't go near or be in half of their home because she believed that those spirits are there because the ashes were there. It's a good story. So that's spirits versus no emotions.

Thus, while the Irish male partner refused to acknowledge his emotions at all, his Chinese wife

projected her feelings of sadness and loss onto spirits, avoiding being in the presence of these

spirits, and perhaps in essence avoiding these feelings of sadness and loss.

   Theme 17: Cultural differences in childrearing. Six of the nine participants (66.7%)

reported that cultural differences in childrearing was a common theme among their intercultural

couples. For an intercultural couple in which the male partner is Bengali, and the female partner

is Canadian, these cultural differences became an issue right after their first baby was born,

according to one participant:

> In the Bengali couple, it's very typical after the baby is born then the mother and the father of the father would be very, very present. Might even move into the home. There would be a lot of coming and going of extended family. Basically around things like marriage and childcare, cultural difference can be huge and it can be a source of stress when people don't understand those cultural differences For example, the wife who just, you know, she's just delivered a baby and doesn't necessarily want to go home from the hospital to a house full of relatives who might be very well-meaning and wanting to help her and help with the baby, but if she's French Canadian, or English Canadian, she might want some privacy. She might find that intrusive. And then her husband might find that

to be very hurtful coming from her. And then he has to explain to his family why his wife is sort of shunning them, even though that's not what she means to do.

Another participant described a conflict between a Brazilian female partner and American male partner involving whether and how long children should share their bed. For the female partner, sharing her bed with her son was the cultural norm, and was also comforting when her husband was traveling for work. The male partner, on the other hand, resented this "Brazilian bed":

> When I think of another couple where the woman is Brazilian and the man is American, the one thing that they brought up as one of his grievances is that their youngest child, who is now about nine, still sleeps in their bed a lot of the time. And he says with a roll of his eyes, "Oh well, the Brazilian bed. This is how they do family in Brazil," he says rather disparagingly her. And I've actually never asked her, "What is the norm in Brazil for beds?" But I get the impression there's a more relaxed attitude to kids sleeping in the parents' bed than there might be for some Australian or American couples. Yeah this is how Brazilians do family and beds. The kids sleep as long as they like with the parents. And he's obviously quite resentful of that. And I don't blame him. And I personally don't think it's maybe the best for a boy who's nine to have to be sleeping with his mother all the time because the man travels a lot with his work. And in the course of trying to pursue this sensitive topic with them it'd help her to disclose that.

One participant noticed a childrearing theme among her intercultural couples in which the male partner was Greek and the female partner was non-Greek, and the male partner felt strongly about their children going to Greek school:

> I think most of it has to do with the children, you know, rearing the children. And what are the values and the lessons that are going to be placed on the kids. The other big one is Greek school. Are they going to go to Greek school or not? Are they going to speak Greek in the home or not? If the father is working, what about all the hours he's out of the house. The mother doesn't speak Greek, right, so who's teaching them Greek? Even if they're going to Greek school, who's helping them with Greek homework? So that tends to be a big area of arguing, because the wife, and rightfully so, she says, "You know, if you're not going to be home, and if you have no energy to do Greek homework with them, how am I supposed to help them? I don't speak Greek, this is not my language. I don't even care if they learn or don't learn." So, that becomes an issue. And if the grandparents are not, you know, here, and in most cases, they're not, they're back in Greece, who's going to help them with that. So they either, they usually drop out after the first or second year. And then the father is very disappointed and the mother kind of is like very nonchalant about it, because she doesn't really care about this in the first place.

Yes, that she doesn't even care. And she doesn't you know, make any effort, or get a little tutor, or you know, force them to sit down and do the homework. Because you know, if you really think about it, you know, Greek homework in an after school program is not really that difficult. [Laughter] But you know, if it's not your culture right, and if it's not your language, you know, I can understand why it wouldn't really be a big deal. But there's this ego piece and men do talk about this, that they want to do the right thing by their families. They want to continue with tradition, and how they might feel that they have failed as good Greek men, if they don't continue on the language in their children and are they letting down their parents. Because although they may have grown up in New York, they were first generation Americans, but they spoke Greek and they went to Greek school, but they kind of forget, that their mothers in all these cases, the mother never worked. It was the father, the old generation, the father would carry the two jobs, the morning job and the night job, so the mother could stay at home. And of course the mother did the Greek homework with them, and spoke Greek in the home. So these kids learnt how to speak Greek. That was the first generation. But now if you marry somebody from a different cultural background, that doesn't speak the language, and you're working, and even if she's working or not working, it doesn't matter, but there is only one person, promoting the language. And if you don't have the energy to be there, then what is one person going to do? And the two of you are not speaking Greek at home, you're speaking English, because it's more comfortable and it comes easier. So it's not that the language gets promoted even orally, you know, verbally at home. You have to go to school, but the parents speak English. So the kid is not even picking up, listening wise.

Thus, for these couples, the male Greek partner desired to carry on a tradition that was typically overseen by the female partner in Greek culture.

Theme 18: Cultural differences in gender roles. Four of the nine participants (44.4%) found a common theme among intercultural couples involved cultural differences in gender roles or expectations. One participant described a pattern of conflict surrounding division of labor, and the expectation that the male partner in a heterosexual relationship would take care of the family financially, but also noted that this was not an issue in same-sex couples:

One of them [the common themes] is the notion of who does what. The division of labor often becomes problematic in cross-cultural couples. Also this notion of being taken care of, which also has to do with finances. This idea that most people want to know that they're going to be taken care of by their partner. But North American-Caucasian culture, it's not always assumed that the man is going to buy the house and pay for it as opposed to in other cultures. It's much more common to just have that assumption where there's going to be a division of labor and the husband will provide for the family. A certain gender will provide for the family as opposed to—you know. What I love about living in San Francisco is that it all that gender stuff just gets blown out of the water. It gets so

confusing. You just want to just start working with same-sex couples. It's great because you can stop dealing with all these silly assumptions, stereotypes and just really focus on the uniqueness of the culture and of the couple.

For another participant, the same issue of gender expectations arose in one of her intercultural couples, but was presented as a generational conflict, rather than due to cultural differences:

> He is Moroccan, Jewish and she is partially Italian, partially Irish Catholic. And with them, I don't see a cultural piece per se, although she is much younger, she is forty-two and he is fifty-seven. So what I see with them is a huge age and gender piece kind of coming out. But not so much the cultural piece. It's more about you know, what does a modern forty-two-year-old want from the relationship and how she wants to be autonomous, because she's never been married before. This is her first marriage at forty-two. And she's been a single mom, and she's you know, a high achiever and a go-getter, and when he restrains her and says, "Now you're my wife, and you don't need to be doing X, Y and Z, because I can support you, you don't need to be working, you know, nine to five, you can work part-time for example, because I'm the man and I can support you." It might be a cultural thing, though, as I'm thinking about it now. He's Moroccan Jewish, but very successful, you know, very businessman, this is his second marriage. He has a son from his previous marriage. She has a son out of wedlock from eleven years ago. But it doesn't get portrayed that way actually. It gets more portrayed as a generational thing. I'm fifty-seven and you're forty-two and we just have different expectations about what life is.

Theme 19: Cultural differences illuminating partner's positions in the cycle. Four of the nine participants (44.4%) noticed that understanding cultural differences often helped illuminate each partner's positions in the cycle—withdrawer or pursuer. One participant gave an example of culture "magnifying" withdrawer tendencies, particularly with Latino men:

> Sometimes culture is a way of—if someone is a withdrawer, his culture, or hers, although it's usually his, it almost magnifies that. Withdrawers would become very rational, logical, intellectual and, especially in the Latino [cultures]—and I hate it when these things are stereotypical, but he would become really angry. They really default to a point where it was almost borderline violent. So, I do think that on some level culture plays a role. We learn about how men are supposed to be in marriages. How men and women are supposed to be, in general. And these two clients learned that, you know, a man is logical, is result-oriented, and, again, we learn this in North American cultures, as well. But for them, especially then with the values that had to do with marriage in those two cultures, that made it that much more difficult for these gentlemen to really enter into their partner's world. It all sounds as if we're sort of saying negative things about

people's cultures, but, no, it's just we're the product of where we come from. There are plenty of Latinos who don't withdraw, and plenty of North Americans who do.

Thus, according to this participant, for many Latino men, taking the position of the withdrawer is common because of the cultural expectation that men should be logical and intellectual, expected to express anger, but not expected to emotionally engage with their female partners otherwise. Along a similar vein, another participant referred to this same cultural expectation of Latino men, which translates to Latino women having difficulty seeing their male partners as needing comfort and nurturing:

> When you're starting to drop down into reframing the attachment related reason for the reactivity. In some cultures, that would make a lot more sense than in other cultures. Even though attachment is universal and I really believe it, it is, seeing the partner as someone that needs. For example, for the Latin-American women to see their Latin-American males as needing comfort and security and nurturing, that's bizarre to them sometimes so the reframe doesn't stick with them as much.

Another participant described a couple in which the American Jewish male was the withdrawer, while the French female was the pursuer. For the female partner, her French background explained her preference for open communication, but also made it difficult to understand her husband's underlying fear of her unpredictability and resulting need to pull back:

> He is American Jewish and she is French. And she came to this country during her college years. She met Steven in college and you know, they've been married now for more than twenty-five years. But there's parts of me that identify with her and one part is the language. Even the language in therapy is very difficult for her. And she would even say, "I don't know what the two of you are talking about!" and then she would get mad with me or she would get mad with him, because it feels like the two of us are understanding and we are, I don't know, on the same page and she's left out. And we've talked about this, so you know. But it could be things like she doesn't understand fear. Like why is my husband fearful of this? There shouldn't be any fear. So you try to explain to her, the same way that you have fear of abandonment, or that you feel alone, or that you feel let down when Steven does this, right, Steven feels, you know, threatened by you, when you have this tone in your voice, or when you're talking a million miles a minute, or when you're not giving him space to think, so he can respond to you, or when you're really pushy and in his face and you want him to do something that now. That scares him, and he needs, right, a little bit of time, so he can process what you're telling him. And she doesn't understand. "What do you mean he needs space? Are you telling

me that I need to make an appointment with my husband?" I'm like, "No, that's not what we're talking about." So words like space, words like, you need to help him, by slowing down, you're going to allow him time to think about what you're saying, so he can respond. He can't work out things in his head as quickly as you do. She goes, "But I just want to have a conversation! I don't need him to think things out in his head. I need him to think things out with me." So now, is that cultural? And she'll say, "In my culture we just have conversations, I don't need to," and she's animated about this, "I don't need to make an appointment with my husband, or find the time, if something comes to mind, I just want to go to him and say, "Hey, this is what I've been thinking. I've been thinking about you know, redesigning the kitchen"—she's a designer—"redesigning the kitchen and this is the budget that we have and what do you think about this, this and that?" And he'll say something like "I can't think about that right now, you need to show me the numbers, so I can decide what we're doing, or how we're going . . ." "What numbers? I don't need to show you the numbers, this is the budget, just let me have the budget, bla bla bla," and then he doesn't say anything. And he'll say, "And now I go into my box." And he physically like shuts down, which drives her nuts. I mean that's part of their cycle. But in session, when you're trying to slow her down, to try to change her tone, then she becomes like, "See, he doesn't love me for who I am, I have to change." So, then that whole thing kind of comes up for her. So we've processed and we processed and processed again for four years, we're processing this stuff every time. But she'll use expression like, "In my culture, this is what we do. We just kind of blurt out things, or we're loud, or you know, we get drunk and we talk." And he doesn't go for that. Like that really scares him. He talks about her being unpredictable and not knowing what to do with her when she becomes unpredictable, like this. And she doesn't understand what unpredictable means and how unsafe [he feels]. She's just like, "In my culture that's not how we do it."

Theme 20: Cultural differences impacting the therapeutic alliance. Four of the nine

participants (44.4%) found that cultural differences impacted the therapeutic alliance. One

participant noted that expectations from the therapist can vary by culture, with some cultures

expecting the therapist to be the expert, and others preferring a more collaborative approach. He

stated that these different expectations can become problematic in the therapeutic alliance with

intercultural couples:

> The alliance building in couples of different cultures is really key. Sometimes what you notice is when you have couples of two different cultures. That one person is clear to establish a therapeutic alliance with you than the other. That, at times, is because they come from different cultures. They sometimes take a cue from the other and catch up or slow down. For example, Latin-Americans, if you were to sit with them and start asking them questions from the get-go. So, "Why are you here? Tell me about your relationship." You can't do that with a Hispanic. You have to shake hands. You have to

tell them where you're from, what region of the country, how many years you lived there, where your parents live, if you have siblings, you have any children, when you came to this country and why. We have to become kind of like friends in a way a little bit, a little bit of social interaction to establish safety and connection. Otherwise, it's too—but it does not impact respect. I could still be the doctor but it's the doctor they can respect and they can trust that they now know a little bit more about. There is this connection that happens, then they can open up to you. You can't just start, just talking about your relationship as is true with most Caucasian couples that I work with which is like, "Okay, so why are you here? Who's idea was it to come? What are some of the conflicts that you've been having?" Immediately, "Well, we just don't have sex." I'm like, you would never hear that in a Latin-American couple. You would never start with something like that. You would start with something way like, "We're having some issues with how we raise our kid," when in fact, the problem is that they're not having any sex. They walk you there from a much more meandering way. For example, very typically, the Latino culture is very much like, I think also it's true of the Asian culture in my experience, very respectful of the therapist and the therapist is viewed as the doctor. They address you that way, as the doctor versus other cultures that are way more informal. They want to immediately call you by your first name. They don't even ask if they can call you by your first name. They just do. Also even just because I was born and raised in Mexico City that I am very aware of this about Latinos. You can't just say to somebody, "Oh, just call me by your first name," because that seems impolite or disrespectful to them to be put in a position where you're invited to be disrespectful. It's not like they're waiting for permission to have a more casual relationship. They literally experience it as, "No, that's not appropriate in the culture." Where it becomes tricky is that EFT, for example, has a non-expert stance or you're just discovering with them what's going on with them and you're trying to discover with them what they need from each other as opposed to what often happens with Latino culture, also the Chinese cultures, they want your opinion and they want you to tell their partner what to do differently because you're the doctor and you know these things and so they're coming to you for advice. It's almost like going to a priest or Rabbi. It's like they want your expertise because you've gone to school. You're educated which is very different than in other cultures where being educated is pretty widespread. They don't elevate you.

Another participant described an experience with a same-sex intercultural couple in which she had appeared to develop a stronger alliance with one partner because of their shared experience of immigration. Although the therapist was unaware of it, this stronger connection was apparent to the other partner, who decided to talk to the therapist about feeling "invisible" as a result:

After going to her individual world, she came back and said that she felt very invisible. And I'm saying, "I so appreciate you expressing something uncomfortable," because her story is that eternally she will lose herself rather than do something that she thinks will

upset somebody else with it, "so you did something incredible by coming in and saying you are upset with me and we had this interaction." And she said, "I also feel you are very connected to the other one [my partner] because she's also an immigrant," because we talked about it, about the resilience and about finding her way, finding her way on her own. That's what she felt so she felt, yeah, because she's aligned with her immigration story and I'm the outsider in the room. She literally said I'm the outsider in the room. And I said, "Yeah, and I can identify with her external experience, but I can be here with you for your internal experience of doing something incredibly risky by coming and telling me that you felt invisible." So that was where the immigration story came in as an alliance that the other one and I have it and she cannot have it because she didn't have immigration. So it was relating the external and internal. You're resilient, you're taking risks, you're working on something you've never worked before by addressing uncomfortable situations. So we had a whole session on reconnecting.

Once the therapist was aware of how disparities in the alliance negatively impacted her alliance with one partner, the therapist worked to repair the rupture through connecting with the partner's internal experience.

   Theme 21: Cultural differences initially outside of couple's awareness. Four of the nine participants (44.4%) found that when cultural differences came up in therapy, they had previously been outside the couple's awareness. One participant recalled an intercultural couple that had consciously given up the expectations of their cultures of origin, but in therapy became aware that these expectations were coming up in their relationship conflicts:

   Well, there was another White-Indian couple I saw where she had absorbed the notion, she was, her parents were Indian born and she had the notion that if you didn't do things relationally you were being rude. But she had directly given up Hinduism. She felt like her parents were Hindu and she was not. She was marrying a man who felt that his parents had abandoned Judaism and he wasn't Jewish either. But culturally, they started to realize that a lot of things that she would expect of him were very Indian and that a lot of the ways that he would feel pressed by that were actually very Jewish culturally, even though he was not religiously Jewish.

   Another participant described moment with an intercultural couple in which both partners, African-American male and White female, did not realize that understanding his cultural norm of extended kinship would help explain why his close relationship with another woman was not a threat to their marriage:

Talking about sort of how African-Americans experience some real differences in terms of the connections that family have with each other and the willingness of sort of an expanded definition of what is a family. And that, in this particular case, was an important part of understanding that there was a disconnect between them. Part of the fracture came from both of them experiencing this expanded kind of perception of family. But they hadn't explicitly really thought about it that way. He had a lifelong friend who had a sibling who was female and he saw her as family. And his partner saw her as potential interloper. I mean, he just didn't get it at all. And so we started to explore, well, you know, what is this and how do you see family? And then once he was able to say to her, "Well, you know, he's like my brother, she's like my sister. Like, I don't—" And she was like, "Like your sister? Oh, wow. Oh, my god. I had no idea that I just didn't make that connection. I knew she was his sister, but I just never really realized, oh, it's that kind of connection."

One participant discussed an intercultural couple in which the male partner was Mormon and the female partner was Jewish. This couple attributed his restrictive ways of interacting to his "military mentality," but further exploration in therapy uncovered a deeper story of shame originating from his Mormon background:

This couple, he comes from the Mediterranean. He was Mormon. He left Mormonhood and joined the army and then he left the army and he was with this girl, Jewish girl from Long Island. So it was the military mentality versus being the liberal free alternative culture that she identifies herself with. And the Mormon story came in. That was not something in her consciousness or anything about how it was to grow up Mormon, that it was always shaming, it was always restricted, it was always lecturing. Basically grew up with shame. So when he talks in the relationship about respect, respect, respect, which is the language of the army too, underneath it was this story that, all his life, he grew up in shaming. So he is very quick to experience her disappointment or expectation that he cannot respond to her as him being shamed, but would not have talked about how it was to grow up in his home as a Mormon, its education system and all that. We would have thought it was just the army.

Theme 22: Cultural differences as a defense against attachment fears or unmet attachment needs. Three of the nine participants (33.3%) described moments in treatment where cultural differences appeared as a defense against underlying attachment fears or unmet needs. One participant, for example, talked about a Norwegian female pursuer and an American male withdrawer:

> When he couldn't feel close or when he couldn't understand her unhappiness, or if she was pursuing and he couldn't deal with the anger, then he would just say, "Well I don't know why you can't just let that go. I think that you're just—you're not even a Christian, or you just don't even believe in God." So basically the way that he would cope and reframe things, if she wasn't able to let go of emotion or do the same kind of thing then he would attribute it to some sort of a value flaw. (8605)

Thus, unable to see her pursuit as a yearning to connect, the male partner would instead attribute it to a difference in values, even a flaw in her value system—she can't let go because she doesn't believe in God.

Another participant described a conflict between a Brazilian woman and American man, where their son would often sleep in the same bed with his mother when his father was away on business. According to this participant, the couple attributed this to cultural differences, as the female partner found this to be culturally normative, calling it "the Brazilian bed," while the husband felt resentful of this tradition. Further exploration in therapy, however, revealed that this cultural difference was cloaking his underlying feeling of disconnect from his wife when he is home, and her missing her husband while he is away:

> And in the course of trying to pursue this sensitive topic with them it'd help her to disclose that she misses the husband a lot when he's away. And she actually likes having the little boy in the bed with her at night. He's sort of like a teddy bear to her I think, someone to cuddle. And that's as far as we've got with that situation. Again, I haven't seen them for a while either because the fellow is a corporate lawyer and flies all over the world. It's all part of the drama and the saga of their lives because he's so stressed and sort of important, and she feels very much unimportant and the mother at home doing all the work and very involved in their children's lives and then resentful when he comes flying back in and zooms in and wants to have all this authority over things he actually doesn't know much about. He doesn't have much to do with the kids. And I'm sure the man means well. He's a goodhearted fellow I think, but he's a bit clumsy. I think he doesn't realize that he's sort of coming in like a bulldozer.

Similarly, another participant described a conflict between an African-American woman and white man focused on their racial differences:

> It was around not being with a person of the same race. That has come up as a theme at a certain point when somebody's getting triggered, when they're getting defensive. She had

come right out and said, "I never saw myself with a white guy. I still don't know if I could, how could I really be with a white guy," like what that means and what that means in her community and what that means in her family. She had never been with a white man before, she had always been with African-American men. And she just wasn't sure. It was about attraction, which I thought was defensive. There was a bigger crisis around the fact that they were having a baby. She wasn't sure if she wanted a partner or she just wanted a baby. She definitely wanted a baby. They were coming to therapy to figure out if she also wanted a partner. But one of the things that came up around that was do I want to partner with a white man, am I even attracted to him? Which I think that she was, and she was triggered by so many other things including becoming vulnerable with someone, that it got in the way of her really being able to see him. She had very traumatic attachment history and every reason in the world not to trust anybody. And she was extremely vulnerable being pregnant, I think that she was kind of putting that out there as a defense. Because here was one of the first times she was with a guy who was very accepting, very open, very safe for her, and that was scary.

Thus, what started as a conflict centered around the meaning of being with someone of a different race, may have also highlighted deeper attachment fears of being vulnerable and feeling safe with someone else.

EFT with intercultural couples: interventions used. When discussing their experiences using emotionally focused therapy with intercultural couples, participants were asked about what interventions they used to address cultural differences in therapy.

Theme 23: EFT as-is interventions used to address cultural differences. Five of the nine participants (55.6%) reported that they use standard EFT interventions to address cultural differences with their intercultural couples. These participants stated that EFT as-is, particularly with its therapeutic stance of attunement and openness, allowed for addressing of these cultural issues inherently. Some examples of standard EFT interventions include tracking the cycle, empathic reflection, clarification, repetition, evocative inquiry, evocative responding, heightening of affect, and validation. EFT therapists also use the acronym RISSSC to highlight core interventions in EFT: repeat key words and phrases for emphasis; use images or word pictures that evoke emotion; use simple and concise phrases; slow the process of the session to

enable deepening of emotional experience; use a soft and soothing tone of voice; and use the

client's words and phrases. One participant explained why he does not feel the need to modify

EFT to address cultural differences with intercultural couples:

> I use EFT interventions. So I'll do evocative questioning, I'll do heightening of affect. I'll say things like, "Help me understand what it's like in your culture." That's an example of an evocative question. I don't tend to integrate techniques from other approaches in to the work that I do with couples. I find that EFT model, while it can always be improved. I find that the basic steps and stages with the interventions that are already there, do get to what's most important for people. And if culture is one of the things that's really important, that's something that will come out as we're asking them about their own deep personal experiences and what it's like for them to be living in the world that they live in in the context of the relationship.

Another participant summarized how standard EFT interventions—empathic reflection,

validation, evocative questions, reframing, and enactments—can help couples move closer

toward each other despite cultural differences:

> Well, I guess basically all of the interventions of the EFT would be relevant in terms of the empathic reflection and the accurate empathy for the specific emotion that's triggered in response to the cultural difference, but heaps of validation around the couple's struggle to deal with that and how hard that can be, then the evocative questions that draw out the individual person's experience within and then the tracking of the cycle of how it can become this negative interactional pattern where one's pressing and the other's pulling back, or they're both in attack mode, or they're both in withdrawal mode. The attachment reframes: "I could see that this brings up big feelings for you, but my sense is that's because this relationship means that so much to you. It's because you're so important to each other that you had these big reactions"—reframing the stress and the struggle and the pain, the bigger picture of the importance of the relationship. Enactments in helping them talk to each other from their private experience in a non-blaming way and asking for needs to be met in a vulnerable and open way. All of those interventions would be helping couples to move hopefully closer to each other rather than be pushed further apart.

One participant gave an example of how he used a combination of EFT interventions to

address a black female's experience of having dinner with her white husband's family:

> Basically, what I would just say very simply is tracking and reflecting and the evocative inquiry approach or the evocative response intervention, I think, is a very useful way of opening up discussion of cultural differences. By reflecting back what you're hearing and saying and asking for clarification and asking for help in understanding them, Sue

Johnson does this a lot, like, "Can you help me? Can you help me understand this? I'm not getting this part. Are you saying this?" Just checking in, showing a lot of repetition. I mean, it's like the RISSSC stuff that she uses a lot in there, images, a lot of repetition. I mean, I think that's a wonderful way to not only be culturally sensitive, but to actually understand maybe what's happening that may be culturally related. My black and white couple, a Caucasian and African-American couple, appreciate when I talk about what's it like to be married to white man when you're not welcome into your husband's family or what's it like for you to be the only black woman sitting at the dinner table and at this party? Your husband's kind of like talking to everybody and you're feeling kind of out of, like kind of lonely and he doesn't notice that no one's talking to you.

It's important to note that this participant not only used standard EFT interventions such as repetition and use of imagery, but in doing so, he did not shy away from raising cultural factors—specifically the impact of racial difference in the case of this couple.

Theme 24: Direct interventions used to address cultural differences openly. Five of the nine participants (55.6%) reported that they addressed cultural differences by asking intercultural couples directly about their cultural background. One participant discussed asking direct questions about cultural background, usually in the individual sessions with each partner, encouraging each partner to educate him as their therapist, as well as each other:

I ask questions, especially if it's a culture I'm not familiar with. I mean, I have traveled. I've lived in a bunch of different places, but I certainly don't know every culture. So, I ask people to educate me, to educate each other. Tell me more about that. I'll do a lot of that in the individual sessions, too, sort of when I'm taking the attachment history. I'll ask you, "What is it like in Bangladesh growing up?" "What's it like in Mexico?" "What kinds of things did you learn?" The kinds of questions you've been asking me, right? "What did you learn about feelings and how you could talk about them or not when you were growing up?" These are, again, questions that I ask everyone, though. It's not constrained to just people who are from other cultures.

Similarly, another participant emphasized that she brings up cultural questions immediately, during the intake, and pays particular attention to possible immigration histories:

I'll bring it up. Immediately. I'll ask it in the intake. The first intake is immigration, religion, and I ask everyone. I live in New York. Everybody comes from somewhere. We're all free to do whatever we want so I'm asking those questions. I mean, you are free to be with whoever you want so I'm asking you just to find out if you are from the same religion, same culture, same country. I ask if it's a Jewish person. I ask if there is any

connection to the Holocaust in the legacy. I want to know everything about history, cultural history. I'm sensing something, what it's about, where it's coming from, is it related to this, to that. To the cultural story. Is it related to shame again like with the soldier. I brought it up. I bring it up. What was the immigration story for you? Was it something you wanted or it was put upon you?

One participant talked about taking what he calls an "inquiry approach" with his intercultural couples, a stance in which he let's them know that while he doesn't know about their cultural backgrounds, he wants to learn:

I think it's also because of my respectful nature and that inquiry approach which is very safe, which is like, "I don't know but I want to learn. I don't know about your culture but I want to learn about your culture, can you help me? You can teach me about this," as opposed to jumping to conclusions and making any assumptions which, in fact, I would assume a lot of people would have a problem with. It doesn't happen with me. I very often and respectfully will say to people of backgrounds that are different than mine— which we now see everyone is— "I want to learn about your background." I will often just ask a lot of questions about it, like, "How does this usually work out in your culture?" That's what I mean by an inquiry approach. It's that I don't make any assumptions. I ask questions to make sure that I'm understanding them, that they understand that I have curiosity of their culture and that I have no judgments or try not to have judgments and try to not follow from a place of stereotyping even if I'm probably just as susceptible as anyone. If you don't know something, to ask and to not assume that you know anything about their culture. Even if you have worked with ten couples that are the same [culture], they may just have had a different set of parents or come from a slightly different region.

Another participant observed that the EFT model does not necessarily inherently require that the therapist go deeper into each partner's cultural history, but that he finds it important to do so:

I guess maybe it's not really part of the model to when you're exploring why somebody feels what they feel and how something makes them feel, to go deeper into their history, but I definitely do that. I probably do that with all couples, as a result of some of my intercultural experiences, where the model might not itself be promoting understanding where the core of something came from, but I'm interested. And I think I bring that into my work with everyone, then. You know, trying to really help people to not sort of flip into more cognitive or behavioral place or an intellectual place and help them to stay sort of swimming around in what their experience is and what they might be able to share about where that might come from.

Theme 25: Indirect interventions used to address cultural differences subtly. Four of

the nine participants (44.4%) found themselves using indirect interventions to address cultural

differences with their intercultural couples. Examples of such indirect interventions included

cultural disclosures, cultural conjectures, collective reflections, and *leading questions*. A

cultural disclosure involves the therapist self-disclosing something about his or her own cultural

background in order to empathize with a partner and allow the partner to explore a similar theme

in his or her own culture. One participant described how using a cultural disclosure helped a

Taiwanese American couple open up about their cultural differences surrounding how conflicts

are handled:

> I had a Taiwanese American couple and both second generation Taiwanese American.
> Cultural differences within their families around the political affiliations, although both
> families were actually part of the more liberal stream of Taiwanese politics. His family
> felt that her family wasn't liberal enough. They didn't really approve of the match. Does
> that make sense? There's a ruling party that is fairly, let's say fairly dangerous and then
> there's an opposition party. And although both of their families identify with the
> opposition party, which is a big divide in Taiwan, her family wasn't seen as opposition
> enough. So within the culture there was some difference. But they were both Taiwanese
> American. And so the first intervention was one week I had said to them, you know, "I'm
> wondering if some of this for you is cultural." I can't remember what we were talking
> about. If there was something about the way that they were talking that felt like it had an
> influence that I didn't recognize. And they both said, "Oh, no, we're Americans. You can
> stereotype us if you want. That has nothing to do with it." The following week I asked the
> exact same question. I think we were talking about conflicts, how conflicts are handled. I
> asked the exact same question and I did what I call a cultural disclosure, where I said,
> "I'm a New York Jew and in family it's pretty okay to have open conflicts with people.
> What's it like for you?" And they immediately said, "Oh, no, Taiwanese families aren't
> like that" and went into a long explanation of how conflict is always indirect and through
> someone else and you never take it on directly. And so it started to validate for both of
> them that they both had culture, that both cultures are different and it doesn't have
> anything to do with faith. So I found that instead of saying oh, you're different somehow,
> let's talk about that, it was we all have cultures, we're all different in different ways. How
> is your culture different than my culture? And then they were totally fine to talk about it.
> I doubt they would remember it this way though. Like the first week they were pretty
> umbrage that I was stereotyping them and they kind of went on and on and on about how
> in a Taiwanese family you don't blank. So I call that a cultural disclosure. It's a small
> disclosure. I mean it's really like a sentence where I'm trying to just equalize. You have a
> culture, my family's like this, how about you? Like I have sometimes said, I said this to

somebody recently, well that sounds a little bit like in my family. Sometimes when I was upset, I felt like it was okay to talk about it but when people didn't know how to soothe me, is that what you mean? And the client would go no, no, no, that's not what I mean at all. So in other words, the cultural disclosure would give them [something] to bounce off of and they would go on.

Another participant used a cultural disclosure when she realized she could relate to one partner's experience of being a foreigner and having difficulty with the English language:

Sometimes I use myself, and self-disclosure, and I say, "Wow, that is so familiar to me and I can totally identify with that, because I remember bla, bla, bla, bla, bla. [sic]." Yes, actually, with [one couple, there was a] language piece. Because language has come up and the tone and everything and I have said, "I totally understand that, because as you know, I come from a Greek background and language for me, you know, the English language can be very, very different sometimes. And I need some time to think about things," and whatever, so I used self-disclosure with her and just taking, you know, French is her first language, Greek seems to be my first language, so I identified with that, and disclosed that. So, different cultures, but I just took the fact that we were both kind of foreigners.

A *cultural conjecture* involves the therapist speculating about possible cultural contexts or meanings behind one or both partners' experiences. One participant described how using this intervention helped an Afghani couple to feel validated:

I was talking to an Afghani couple and they were polyamorous and they were talking about their secondary partners, right? So I was seeing the principle couples and then there were secondary partners. And one of the secondary partners had a secondary partner that was upsetting my clients. And at some point, I just conjectured, and so I was seeing A and B and then A had sexual partner, like A had C and B had D and E but then C had F. So I conjectured to A and B. I just wondered whether C's other partner, F was white and they both went yes. And then there was this huge thing around one of these people was very different than everyone else culturally and was behaving in ways that they actually denigrated as being too mainstream. And I could just sort of feel it from the way that they were talking about it. And then I got huge kudos from them. They were very impressed that a white person would figure that out. And then one of them was very impressed and was asking me if I was bicultural. And the other one was looking a little more quiet. And I turned to that person and I said, "You know, I do get that if I wasn't white, you would expect me to have gotten that." And then she said, "You're good." [laughter] But there was a whole level of safety created that I could just hear that and they had never mentioned it. It's just straight conjecture. And I figured it was safe enough because they could always say no.

A *collective reflection* involves the therapist using his or her own knowledge about a particular cultural group to convey understanding about a partner's cultural experience. One participant described how using this intervention helped a white female partner understand that her African-American husband's female friend was not a threat to their relationship:

> He had a lifelong friend who had a sibling who was female and he saw her as family. And his partner saw her as potential interloper. She was talking about feeling like this person was threatening somehow. I mean, he just didn't get it at all. And so we started to explore, well, you know, what is this and how do you see family? So, then we went back and I said, "Can you tell me a little bit more about this connection?" and so he went over probably two or three sessions his history with this friend and his friend's siblings and their interactions as they were growing up. So, then I put it in a cultural framework. Like, so you're all a part of the African-American community that's all really interconnected and this is like part of your family. And, you know, with this sort of broader definition of family that African-Americans tend to have. And then once he was able to say to her, "Well, you know, he's like my brother, she's like my sister. Like, I don't—" And she was like, "Like your sister? Oh, wow. Oh, my god. I had no idea that I just didn't make that connection. I knew she was his sister, but I just never really realized, oh, it's that kind of connection. Oh, well, that's like shining a spotlight on something in a whole new way," you know? Talking about sort of how African-Americans experience some real differences in terms of the connections that family have with each other and the willingness of sort of an expanded definition of what is a family. And that, in this particular case, was an important part of understanding that there was a disconnect between them. Part of the fracture came from both of them experiencing this expanded kind of perception of family. But they hadn't explicitly really thought about it that way. My husband's sister is married to an African-American, so my children have been a part of that culture, also. So, I have kind of an awareness of some of what I think are sort of idiosyncratic things about that, especially being Jewish and sort of comparing the differences and similarities. So, I think that sort of helped me to be conscious of say, "Well, what is this to you guys and is there a cultural piece from being African-American?" You know, sort of bringing that in probably was partly influenced by my personal experience.

Similarly, another participant talked about drawing from his own knowledge and using a collective reflection to convey to an African-American female partner that he understood her experience of visiting Europe:

> I had a couple where a European born man had taken his African American wife home to Europe. And everybody was touching her hair. And there's a way in which I just felt it, like it wasn't going to go well to talk about how her experience is different than his experience 'cause that's not a personal experience. That's like every African-American

who's ever been to Europe. So I used what I call collective reflection to say that she was sort of shutting down on him. It's not just my experience. It's not just a personal difference. It is very important. She was sort of coming in blockaded. And so what I did was, you know, "I've heard this story before. I know a lot of African-American women complaining that in Europe, one of the things they have to deal with is people touching their hair. But everybody's different, how was it for you?" And then she would start to talk about it because I think otherwise the implicit fear with my like pink little complexion is I can't deal with him, I certainly don't want to have to educate both of you. So by putting in the collective piece that I understand that this is a common experience for people who live like her, it creates the safety for her to actually go into with him. So I see it as a step one kind of intervention, although this was further along in the therapy. She's had a micro-injury around white people not understanding and dismissing her experience. So for me to open the conversation by saying I know this is real and I've heard it before, actually kind of takes some of the traumatic fear away from entering into the conversation 'cause it's like okay, he gets it. I call that collective reflection. It's useful in any step where it comes up, but it's a response to somebody feeling micro-injured. In other words in EFT we spend a lot of time talking about how each person has their own experience, but some experiences are not your own. They're collective. So whether the stereotype is Jews are cheap or people touch black hair or Muslims are terrorists, whatever the stereotype is, if you feel like a therapist might not know the history of it, it's going to create a lot of fear about the possibility of them not knowing. So by doing the collective reflection, you're kind of saying I get it to some extent and helps the person piece together the part that isn't the same. The collective reflection kind of creates safety by saying I don't need to educate you. It's not going to become about me helping you right now.

Leading questions involve the therapist asking the couple questions about their history that are likely to lead them to talk about cultural differences. One participant described how she uses this intervention to elicit discussions of cultural differences:

One thing I want to mention, and hearing you say that made me think of this. I don't explicitly bring it up unless they do. I don't say, "Well, you know, I think this might be the result of some cultural differences that you're having." But if I do suspect that that's at work, I might ask sort of leading questions. I might ask, I call them with my students, I'll ask them trick questions. Like, "So, how do you think maybe where you grew up and what you learned about relationship might be affecting you right now?" or something like that. But I won't say, you know, "I think this is because you're from this culture or that culture" for all kinds of reasons. I might be wrong. It might have nothing to do with that, or it might have everything to do with that. So, I try to get it to come from the client. Again, I try to do that with everything in EFT.

Theme 26: Reframing specifically used to address cultural differences in the context of attachment. Four of the nine participants (44.4%) found themselves using reframing to broach

issues of cultural differences, reframing cultural differences in terms of attachment. *Reframing*

involves the therapist describing or expressing a situation in a different way to highlight a new

perspective. In emotionally focused therapy, conflicts between partners are often reframed by the

therapist to emphasize their attachment needs. One participant talked about a cultural conflict

surrounding whether to observe Shabbat, and the way in which she reframed this cultural

difference into the cycle, putting it into an attachment frame:

> I would just put it right in the cycle, right. So what's it like for you when you can't go out
> on Shabbat and why is that a problem, and what it's really about. For that guy, it was not
> really about—he actually really likes his family. But what he really felt was judgment
> and what he really felt was a worry that somebody else is going to look in and say he's
> doing someone different and that's the way he grew up. He grew up a poor kid in a rich
> community who was teased because he was different and that's formed and shaped his
> whole life. So now he's in a crisis because he can't see his future feeling that way
> anymore. So then the religion just kind of put us in a cycle and then once we're in it,
> we're in it. So it really did become the content that brings us into it.

Another participant described an approach in which she both labels cultural differences,

but also uses the attachment frame to "translate" these cultural differences:

> Sometimes I just label it as culturally different viewpoint. You know, you have a
> different experience, I just kind of explain that a little bit, ask them if that make sense, or
> you know, this is what, you know, is that what happened when you were growing up, and
> this is what happened when you were growing up, so you know, for you it make sense,
> it's familiar. This is the way that you would do it, but now you're married to somebody
> who comes from a different cultural background, who has different values and the two of
> you need to be partners and you need to co-exist, so I think what we need to find here, is
> a middle ground, where both of you might have a win-win experience rather than a win-
> lose or a lose-lose experience. So I try to frame it that way. And that kind of, you know,
> like there's some compromise that can happen there. Sometimes it's more difficult,
> sometimes it takes more than one session to get that accomplished. But I find that, that
> works. Relationships are about compromising and understanding what's it like to be in
> the other person's shoes. So, can you give a little, if you were to give a little, what would
> you give, what would you give up? So, that's one. The other one that I do a lot of is, I
> guess it is reframing. Just trying to translate, "So what you're saying is bla, bla, bla, bla,
> bla, and they usually comment that "Yes, that's exactly what I'm trying to say and I
> really like the way that it sounds coming from you." So I try to put it in attachment terms.
> I try to soften it up, so it might not sound as harsh and I call it, you know, that I'm doing
> a translation. "I'm translating for you." And they kind of like that. "So, let me just
> translate that, what he just said is . . ." And I just speak to the wife, for example. She

might say something and then "Let me just translate that for you" and it just becomes a little bit softer and somehow I am less triggering. To hear it from me is less triggering than to hear it from one another, so they're able to respond in a different way. So, I kind of like that.

Theme 27: Enactments specifically used to address cultural differences. Three of the nine participants (33.3%) found that enactments were particularly useful in uncovering cultural differences. *Enactments* in emotionally focused therapy involve the therapist helping one partner to access primary emotion or underlying needs, and then turn to his or her partner to express these emotions or needs. An enactment allows the couple to interact in a new way, guided by the therapist, in session. One participant described an experience of using an enactment between an indigenous female partner and her white Australian husband to help them each understand their experience of her drinking:

> Strangely enough my mind goes back to probably the furthest one which was the indigenous woman with the Caucasian, White Australian man. I have a memory of helping her to enact with him how, I think the word was "pressuring"—that concept anyway—that she experienced his vigilance and commenting around her drinking as a terrible pressure on her. What I really loved about this lady was back in the midst of being very upset and sometimes even quite angry she could still be very reasonable. And she would say to him things like, "I know you're just trying to help me, but when you say to me, 'So how many drinks have you had tonight?' that doesn't help me. I hate that feeling. I feel like you're being like my father, and I'm some very naughty little girl." I think that was what helped them actually that they could open up to each other more. And then of course he was able to talk to her about how afraid he felt when he would see her getting more and more intoxicated and just how scared he was of what that was going to do to her health long-term, and then how it seemed that she wasn't very responsive to the kids when she'd been drinking too much. So they were able to share quite a bit. So I would say that's an example of the whole suite of the EFT interventions in terms of empathy and evoking and validation and then enacting and sharing.

EFT with intercultural couples: response to interventions and outcome. When discussing their experiences using emotionally focused therapy with intercultural couples, participants were asked about how these couples responded when interventions addressed

cultural differences in therapy, and overall whether outcomes with intercultural couples differed from same-culture couples.

Theme 28: Positive response or outcome with intercultural couples. Six of the nine participants (66.7%) reported that when their interventions specifically address cultural differences, the response from intercultural couples has been positive. These participants stated that intercultural couples are "welcoming" and "appreciative" of interventions that highlight their cultural backgrounds. One participant stated that intercultural couples often find "it can be a relief." He stated: "They realize, okay, this isn't because, you know, I'm not crazy, but neither is he. There's a reason for this. Or neither is she. There's something that might be behind this." Another participant observed that addressing cultural differences allows couples to step out of their cycle and become curious about each other:

> When you start talking about the different cultures and helping people to understand kind of how they are because of their ethnicity, then it provides sort of a forum for the other person to learn about them in a different way and understand. People tend to be kind of curious and open about those kinds of differences. And so it's really to identify, oh, so, let's take some time and slow this down and understand what the cultural piece of this is. What did you grow up with and learn and what do you think influences you, now? It sort of takes the personal piece out, you know? Then the other person is sort of like, "Oh, that's where that comes from. Oh, that's why you do that. Oh, like that's a thing that people there do." Which is this more open, "Hey, wow, I'm curious," you know. And sometimes that's hard when you don't have a difference in culture or something like that that couples get caught in their cycle and it's hard to find a way to open them to that curiosity. I think that people just end up kind of drawing on what's idiosyncratic to their culture. So, they do that, they sort of recognize that and then both people recognize that. And then it sort of opens up that idiosyncratic nature of all kinds of differences, you know. It's sort of like the cap gets taken off because of the cultural piece, if that makes sense. Sort of that, you know, oh, well, in Sweden you grow up in this way, or in Korean culture this is the focus and what's really important. Or in my Middle America hippie culture this is what happened. Sort of really on a certain level doesn't matter why those differences are there. With all couples, those differences are there. But when you can tie them to the cultural piece people sort of slow down and they're like, "oh, I'm learning something about your people," you know? Not just you coming at me, I'm learning about your people and your culture. And so there's a way that it sort of makes it easier to start to understand the intrapsychic stuff. And easier for the partner to tolerate it, if that make sense.

Similarly, another participant noted that introducing culture into the therapy allows couples to see their cultural backgrounds as positive and valuable to their relationship and their connection:

> More often, I think it does create safety and kind of open up the space for, just to be explored as part of how it's affecting their relationship with each other. So in stage one, I'm using it very much to validate different experiences and show how cultural differences might be part of what triggers the cycle, whether they interpret behaviors in different ways to trigger the cycle. It would be very analogous to how somebody's depression might be involved in the cycle. In stage two, I think unlike something, like a co-morbidity, unlike depression, unlike alcoholism, I think it becomes something that people can value, right? They actually start to see there are positives to what they bring to the table culturally. So as we stop exploring the negative cycle and we start exploring like where they really want to connect, they just get more information about what they need from each other.

One participant stated that addressing cultural differences in therapy with intercultural couples helps these couples to feel "seen":

> It lands well with them. In many cases I hear them say, "Oh, I like the way that you say it like that. I like the way it comes from you like that. You interpret things so much more gentle than I do." So, yes, the response is positive. They're very appreciative of it. They feel more recognized. When I bring culture into focus, the couples brighten. They light up. They so appreciate it because I feel like they're living in a dominant culture that doesn't see them. They don't feel seen.

Theme 29: Longer treatment with intercultural couples. Three of the nine participants (33.3%) reported that they noticed that their intercultural couples tended to need treatment longer than their intracultural couples. One participant observed that immigration status tended to lengthen treatment, as an immigration history was common among his intercultural couples. Another participant attributed lengthened treatment to the entrenched nature of cultural differences, which she finds slows down the process of change:

> It seems to me cultural differences are pretty entrenched and that they don't shift and change easily and that my sense is anything with accommodation, tolerance, compassion, forgiveness, all those big goals that we have in couples therapy, they emerge slowly over time I think. And I guess one of my general rules of thumb would be to just try to work with any difference—whether it's cultural differences or differences in how to rear children, spend money or whatever—as this is a difference. "It's not a case of right or

wrong. It's a difference you have. And what I want to help you work with is what happens between you when the difference comes up, because couples that have a really secure, happy relationship somehow or other have managed to fold those differences into their relationship and manage it in a way that it doesn't have to push them apart. And that's what I see happening here for you at the moment. It's highly distressing because when this topic comes up it pushes you apart. You feel really alienated from each other. I want to work with you to help you understand what happens when those differences come up so that we can hopefully talk together about it in a way that draws you closer rather than pushing you apart." So that sort of process, as I see it, typically takes quite a while to actually happen—several sessions. It's often repeated use of all the interventions that gradually brings about a shift to more tolerance and understanding and acceptance of difference.

Theme 30: No difference in response or outcome with intercultural couples. Three of the nine participants (33.3%) reported that they noticed no difference, or a neutral response from intercultural couples when cultural difference was addressed in therapy. For example, one participant found that often when he has attempted to address cultural differences, couples often would not take it in. The attempts are not harmful, however, but rather considered a "tangent":

> Like some disclosures you make, the client's not interested. Some reflections the client says actually no. Some conjectures the client's like no, I don't think so. Sometimes when you ask people to slice it thinner, they don't know what to say. But all of that can happen. But I think that at the same time, you know, all of those interventions can work as well and that my experience is at worst, I'm off on a tangent and the couple kind of ignores it and we get back to what we were doing.

EFT with intercultural couples: Is EFT helpful in addressing cultural differences?

When discussing their experiences using emotionally focused therapy with intercultural couples, participants were asked whether they believed EFT was helpful in addressing cultural differences; if so, why, and if not, why not.

Theme 31: EFT is helpful in addressing cultural differences because of the attachment framework. Four of the nine participants (44.4%) stated that EFT was helpful in addressing cultural differences because of its attachment framework. These participants noted that given that attachment needs are universal, the attachment framework helps intercultural couples to see

beyond cultural differences. According to one participant: "When we talk about attachment and when we talk about fundamental needs to be held, to feel close, to feel safe and supported, that will reach anyone who's not a reptile." Similarly, another participant saw the attachment framework as useful in working with any difference, to guide intercultural couples toward closeness:

> The attachment frame I think is so important, that whole thing of being able to try to work with the difference in understanding the way it sort of jars their connection and how they might be able to work with the difference so that they can still connect and feel safe and secure together. So I think the attachment framework that EFT works from is a lovely map to help us with any of our problems to be working towards helping them achieve safety and security and closeness.

Theme 32: EFT is helpful in addressing cultural differences because of its focus on accessing vulnerability. Four of the nine participants (44.4%) stated that EFT was helpful in addressing cultural differences because of the model's focus on accessing vulnerability, or primary emotion. One participant stated that EFT "is about discovering who you are" and "being able to show up fully as a human being with your partner, being vulnerable. And so I think it gives a platform to really address these differences because once people can understand the differences and they see the vulnerability behind it." Another participant emphasized that EFT's way of invoking personal experience and accessing primary emotion helps intercultural couples to work through cultural differences:

> I really like the way that EFT helps us to invoke people's experience and let them talk about what's happening for them. And to me that's kind of crucial in how you would make headway in understanding cultural differences in terms of noticing that sometimes there's a difference here. "Could we talk about that? Would you like to tell me what happens to you when your wife wants your little boy to be sleeping in the bed with you even in the fact that he's nearly ten? What happens? What's that about for you?" That is the most totally logical way to explore the problem, is to let the partner who is being affected by what feels for him a cultural difference to explore his own experience, to be able to go deeper, to be able to talk about it. Then to be able to access the deep primary emotion that's stirred for him when he gets in touch with just how much it disturbed him and how jealous he feels or how afraid he feels or how angry he is.

One participant stated that focusing on primary emotion and vulnerability helps couples

give voice to otherwise voiceless parts of themselves:

> Part of the focus on primary emotion and explaining and thickening and slicing thinner the primary emotion means that you're often helping people give voice to parts of themselves that there hasn't been room for or they haven't felt safe to express. And so much of all of our deep down vulnerable attachment systems are wired. I mean we're all wired by attachment but the cultural pathways of expression vary so widely that I think we're often making room for somebody's deeper material to come forward. And I think culture's one of the things that affects what people are needing. And so I think EFT just naturally gets underneath some of this and helps people get what they need. So even though we don't always name it as such, like I think that the culture does influence what our needs are.

Theme 33: EFT is helpful in addressing cultural differences because of its inherently

open and curious stance. Three of the nine participants (33.3%) stated that EFT was helpful in

addressing cultural differences because of the openness and curiosity built into the model.

According to one participant, such a stance facilitates respectful exploration of cultural

differences in a culturally sensitive manner:

> I think EFT is helpful in addressing culture as it is in addressing any differences between couples. I think it's extremely helpful as a methodology for exploring culture as well as values as well as dreams as well as hopes for their children or parenting differences or sexual differences. The fact is that we have an incredible stance that communicates, "I'm here for you. I'm here with you. I want to get to know you. I want to understand you. I don't know you so I'm just going to go slow to make sure that I get you and I'm going to check with you to make sure that I'm understanding you. Would that be all right?" I mean, that's what we do in EFT. Imagine, I mean, it's brilliantly created—I mean, it's perfect for a cross-cultural situation. I don't think that there's probably—I don't know of a better intervention for working with intercultural couples than this beautiful, relational, respectful, open model. It's not like a hammer. It's not telling people how to be and what to do and give them homework assignments that are completely culturally insensitive.

Another participant observed that the model's curious, non-threatening stance makes room for

deeper emotional exploration and increased understanding:

> I worked with a number of different models and I think EFT—I mean, I just am enamored with it and love it and think it's great. But I think it does make it easier. Maybe the model doesn't specifically say, okay, if you have an intercultural couple you should

talk about this during the alliance building and all that stuff, but I think if you're a seasoned therapist you know that you would do that. And the model does make a lot of room for that and really feeds into the ability of the therapist to open up that piece and provide a context and talk about it in a way that is not threatening. I think that because of the curiosity piece about EFT, you know, yes, you get to the emotional piece of, you know, how does that make you feel when this happens. How does that make you feel? And so there's the emotional experience, which is just totally across the board the same for people. But their ability in the specific couple to really see who their partner is, to really understand and have a curiosity about them and understand them and their experiences, and how their experiences make them who they are. I think EFT really provides for that and the cultural piece is really a part of that. It really deepens people's experience, emotionally, which, you know, creates safety from my point of view. Like the more you know someone, you more you understand why they do what they do, the safer you feel. And so that's a part of EFT, but it's also a part of understanding cultural diversity.

EFT with intercultural couples: advice for therapists. When discussing their experiences using emotionally focused therapy with intercultural couples, participants were asked what advice they would give to therapists using EFT with intercultural couples.

Theme 34: Adopt a curious and open stance, give clients space, and ask direct but tentative questions. Seven of the nine participants (77.8%) advised that EFT therapists working with intercultural couples adopt a curious and open stance, slowing down and giving clients space to explore these differences, and asking direct but tentative questions when addressing these differences. One participant particularly emphasized being open and curious about culture, both during individual sessions and as cultural issues come up throughout therapy:

> Be curious. Be curious and take your time to learn about their culture. And you know, not just in the individual session, you know, when we have the individual session with them, but even as things come up, I would be asking, "So, regarding your culture, is this how it was done?" or "How was anger managed or talked about in your culture?" or you know, friends, or whatever the issue is that might be coming up. I think just be open and curious. And remember, and I guess if you have it in mind, that there is a different culture here, different than yours, ask, because it's not all the same.

Another participant noted the importance of "staying close" to each partner's experience and being aware of how impactful cultural background is on an individual's belief system:

Probably very simple advice to just try to stay close to the experience of each of their couples, to tune in carefully, to listen sensitively, to try to slow things down so that subtle issues can be noted and worked with if necessary. And yeah, definitely I suppose at a more general level is just to be aware that culture, like family of origin, has huge impact on people's beliefs about self and other, how things should be done, what's appropriate, what's good manners, and what's ethical. And all those things are shaped by culture—so to sort of have that like background back in your head, awareness that it could be coming out of cultural differences why they're getting so stuck on certain issues.

One participant emphasized talking explicitly about culture, but also holding conjectures hypothetically, to allow for partners to clarify and correct:

Hold your conjectures hypothetically because what's true for one person in the culture might not be true for another person in the culture so it's very important, like most conjectures, that you know there's a sort of wondering and you're okay to be wrong. To be open about it, address it. You know, I guess all of EFT is about kind of that piece that I was talking about. Sort of being not afraid of whatever it is, whether it's sexuality of ethnicity or emotional style or whatever. But just recognizing the people are understandable and that to talk explicitly about things that are important to people, or things that have influenced people that make them who they are is important. And that people in my experience really respond to that. And certainly, from a cultural aspect, you know, being able to talk about what their experiences are.

Another participant put it simply and concisely:

Spend more time with therapeutic alliance and invite them to be the experts about their culture and offer yourself as curious and interested in knowing how culture plays a part in their relationship and bring it into the open right from the get-go. Don't avoid it. Show that you see them and that you would want to know them.

Theme 35: Maintain focus on attachment process when addressing cultural

differences. Three of the nine participants (33.3%) advised that EFT therapists working with

intercultural couples always maintain their focus on the attachment process, even when

addressing cultural differences. One participant stated that it's important not to get "intimidated"

by cultural differences, because "ultimately it's the emotional attachment that helps couples to

feel successful and close, so that bypasses those differences." Another participant emphasized

that whether culture plays a role, attachment needs are always underneath, and these unmet needs

should be the focus of treatment:

The same advice I give to people who are working with homogeneous couples: It's about attachment and if culture is going to play a role, it doesn't mean that this person doesn't need to be held, doesn't need to feel important or doesn't need to feel safe. Everybody needs those things. If culture is playing a role in the dynamic, it's going to be about the way that they do or don't broach those topics with each other. Things like, well, attachment needs. I need you. I get scared when you're not around. You know, when I yell at you, it's because I kind of miss you. Those kinds of things.

Another participant noted that culture influences the process, so keeping a process-focus rather than building a cultural knowledgebase will lead to success in treatment:

Think of the culture as influencing the process, right? There is no way to be an expert on every culture on earth. There is no way to understand the content of what makes a culture distinct or different or surprising to you. Like there's always going to be a new culture. There's always more to know. The nature of cultures is that they have diversity within them, too, right? But if you're listening for the process of how something cultural is affecting the couples' process, the couples' cycle, you're in a better ballpark for success, even if you, yourself don't know what you're looking for. It allows you to kind of ask how does this work in your family, how was this back at home, how is what you aspire to maybe different than what you grew up with? These are all really great questions that we would kind of ask naturally in EFT if we're looking for primary affects and attributions. And all of them go towards these acculturated places. So I think if you think of cultural differences as a process that's playing out in front of you, rather than a knowledge base that you may or may not have access to, you're more than likely to have success. Because sometimes the client doesn't know.

Experience during interview. The interview concluded with a question to participants about what their experience was like participating in the interview.

Theme 36: Discussing the use of EFT with intercultural couples leads to new discoveries. Five of the nine participants (55.6%) reported that their experience in the interview was one of discovering something new about themselves, or that it made them think about things in a different way. According to one participant: "I had never thought before about how my own cultural background might predispose me to seek out EFT." Another participant found the interview difficult because it required her to think hard about issues she usually doesn't consider, though she came to some realizations about how she works with intercultural couples:

Initially it's hard questions because it's stuff you don't really think about all the time, so you have to go back to your childhood and munch on how—it's a lot of thinking work, so for me it was difficult. I'm more introverted so I don't talk a whole lot, so just had to fight feelings of oh, I'm not giving enough information, this is probably not helpful. And then I think, though, that the hard work of having to think about it and actually think about some of the couples, I think it made me realize some things that were kind of new for me and trying to get back to what it was. But I'm not so clear on the different definitions of all these things because coming from South Africa where everything's not politically correct, sometimes in the States, you're sort of scared to make mistakes around any of these things. It's like highly sensitized. So it's nice to just get a definition on all of this. And then it's also nice to realize that I am doing some things differently and then yeah, it's just interesting to think about where it comes up in the different steps.

Another participant was particularly struck by how the interview caused her to think about how her cultural background together with EFT influenced how she is in the present moment with her couples:

And what I really liked about your questions, just to kind of expand on the fact that, yes, I have this experience with clients, and yes I use these interventions, but nobody had ever asked me, what comes out, when you use your own cultural background and EFT together, what comes out. And this interview gave me the opportunity to reflect and answer that question. And I'm like, "Wow, I have never really organized it that way," so thank you for making me think about it. Because you can approach EFT just from the EFT steps and stages, right, which is very technical. But then if you put in yourself in this, the therapist, and you do the moment-to-moment and the present right here, right now, that gives a different feeling to it. Where you're more open and more curious and you know, you want to know, and kind of the steps and stages are in the background right, but right now, you're working in the present moment.

Summary of Results: Master Themes

In the course of data analysis, 6 master themes emerged. The below table (Table 7) summarizes the 6 themes, and they are described in more detail thereafter.

Table 7

Master Themes

Master Theme 1	Perceived "gaps" in therapists' cultures of origin attracted them to EFT.
Master Theme 2	Intercultural couples present with similar themes and conflicts with regard to cultural differences.
Master Theme 3	Cultural differences impact relationship conflict and therapeutic alliance, but are often outside awareness.
Master Theme 4	Exploring cultural differences often further illuminates partners' experience of attachment and emotion.
Master Theme 5	Therapists are flexible when intervening to address cultural differences, and couples respond positively.
Master Theme 6	Therapists emphasize attachment, vulnerability, openness, and curiosity when using EFT with intercultural couples.

Master Theme 1: Perceived "gaps" in therapists' cultures of origin attracted them to EFT. When participants were asked about their cultural background, all of the therapists acknowledged influence by two or more cultures. Majority of participants described an overall sense of closeness, belonging, and togetherness in their families of origin, which they found consonant with EFT and attachment theory. However, these same participants emphasized that this closeness did not involve vulnerability, open emotional expression, or empathy. They reported that within their cultures, a value of independence over interdependence and a lack of emotional engagement were cultural norms. These participants were sent the message that most emotions, especially negative ones like anger and fear, should not be expressed or responded to, while some emotions, like happiness, should be shared. In addition, these participants felt negatively about the emphasis on autonomy and lack of emotional engagement in their childhood, and a desire to change this in adulthood. These perceived "gaps" drew participants to EFT, given its emphasis on interdependence and emotional engagement.

Master Theme 2: Intercultural couples present with similar themes and conflicts with regard to cultural differences. Participants noticed particular themes or conflicts common to

intercultural couples with regard to their cultural differences. These common conflicts included cultural differences in (a) extended family relationships, (b) emotional expression and engagement, (c) childrearing practices, and (d) gender role expectations. The most common issue among intercultural couples as reported by participants was cultural difference in expectations of extended family involvement or influence. For many of these intercultural couples, this culture clash was particularly magnified when negotiating religious and childrearing practices.

Master Theme 3: Cultural differences impact relationship conflict and therapeutic alliance, but are often outside awareness. According to all participants, cultural difference tends to arise early on in treatment. Often, intercultural couples come in to therapy with a presenting problem related to their cultural differences, such as conflict over extended family involvement due to differences in cultural expectations, conflict about whether to get engaged or married because of cultural differences, or conflict about childrearing practices due to different cultural beliefs. Though sometimes cultural differences are presented by couples as influencing their conflict, more often, partners are not aware of the impact of their cultural differences on their relationship, until the therapist brings it out through careful questioning. Cultural differences were also found to impact the therapeutic alliance, and the differences and impact were often outside of therapist awareness.

Master Theme 4: Exploring cultural differences often further illuminates partners' experience of attachment and emotion. According to most participants, exploration of cultural differences often helped the couple and the therapist to better understand the negative cycle, and each partner's underlying attachment needs, fears, and emotions. As noted earlier, partners often don't recognize that their behaviors and ways of disconnecting are influenced by their cultures; thus, participants have found it essential to be mindful of cultural influences and validate them.In

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addition, many participants found that when attempting to identify unacknowledged attachment-related needs and emotions, cultural differences in whether, how, or which emotions should be expressed become quite relevant. It was also found that understanding cultural differences often helped illuminate each partner's positions in the cycle—withdrawer or pursuer. Cultural differences also often appeared as a defense against underlying attachment fears or unmet needs. Finally, participants also found that cultural differences in extended family involvement or influence would often interfere with romantic attachment and emotional engagement.

Master Theme 5: Therapists are flexible when intervening to address cultural differences, and couples respond positively. Most participants felt that the EFT interventions as they are, given the focus on the attachment framework and therapeutic stance of openness, inherently allowed for addressing cultural differences. Two specific EFT interventions, reframing and enactments, were highlighted among participants as particularly useful in addressing cultural differences. Participants found that reframing cultural differences in terms of attachment helped to decrease tension and increase empathy, as the couple are then able to focus less on their cultural difference, and more on the underlying attachment needs that they both have in common. Enactments were found to be useful in nurturing understanding and empathy surrounding the impact of cultural differences as well, as they allow the couple to interact in a new way, guided by the therapist in session. While many participants found EFT as-is to be sufficient, many participants also found it necessary to alter the treatment somewhat, by either modifying EFT interventions, or integrating other interventions. Most commonly, participants found it helpful, even necessary, to use direct interventions to openly address cultural differences, particularly during the assessment process. They reported that they asked direct questions about cultural background, either during the first session or during individual

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appointments with each partner, paying particular attention to culture as it relates to attachment, emotion, immigration, and trauma. Many participants tended to use indirect interventions to subtly address cultural differences, and many of these indirect interventions are culturally adapted EFT interventions. Regardless of type of intervention used, a vast majority of participants found that when they addressed cultural differences in EFT with intercultural couples, the couples responded positively.

Master Theme 6: Therapists emphasize attachment, vulnerability, openness, and curiosity when using EFT with intercultural couples. All participants felt that EFT is helpful in addressing cultural differences with intercultural couples because of its emphasis on (1) the attachment framework, (2) accessing vulnerability, and (3) an open and curious stance. On a related note, when asked what advice they would give to therapists using EFT with intercultural couples, the participants advised that therapists: (1) Adopt a curious and open stance, give clients space, and ask direct but tentative questions, and (2) Maintain focus on attachment process when addressing cultural difference. It therefore appears that, for the most part, the participants do not feel it necessary to depart much from the EFT model when working with intercultural couples.

Discussion

This study explored couple therapist's experiences of implementing emotionally focused couples therapy (EFT) with intercultural couples. Nine licensed therapists who are certified by the International Centre for Excellence in Emotionally Focused Therapy (ICEEFT) and have been providing EFT to couples for one or more years were interviewed about their experiences utilizing EFT when working with intercultural couples. Participants were asked about their own cultural background and whether their own cultural informed their beliefs about EFT and attachment, when and how cultural differences between intercultural partners arise in treatment,

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whether there are common themes or patterns among their intercultural couples, what interventions were used to address cultural differences and whether these interventions were inherent to EFT, how intercultural couples responded to EFT, whether EFT is helpful in addressing cultural differences, and what advice they would give to therapists using EFT with intercultural couples. This section discusses how the results of this study relate to the existing literature, as well as to the study's initial hypotheses. A culturally sensitive model of emotionally focused therapy (EFT-CS) is proposed. Also examined below are limitations of the present study and implications for future research.

Interpreting the Data

  Cultural differences impactful and outside of awareness. The study found that cultural differences impact relationship conflict and therapeutic alliance, but are often outside awareness. Although cultural differences are often presented by intercultural couples as influencing their conflict, more often, partners are not aware of the impact of their cultural differences on their relationship, until the therapist illuminates it through careful questioning. Cultural differences were also found to impact the therapeutic alliance, and the differences and impact were often outside of therapist awareness. These findings support the literature that emphasizes the importance of gathering cultural information from the couple at the beginning of treatment (i.e., in EFT, step 1, joining and assessment), given that intercultural couples are more likely to encounter problems because they hold even more diverse values, beliefs, attitudes and habits than intracultural couples (Gopaul-McNicol & Brice-Baker, 1998; Hsu, 2001). According to the literature, vast differences between intercultural couples lead to increased potential for misunderstanding (Waldman & Rublacava, 2005), as each partner is often unaware that his or her assumptions and expectations are culture-bound and thus may differ from his or her partner's

assumptions and expectations (Tseng, McDermott, & Maretzki, 1997). As such, cultural differences contribute to couple distress and should be addressed in couple therapy (Heller & Wood, 2007; Molina, Estrada, & Burnett, 2004; Waldman & Rubalcava, 2005), so that intercultural couples can confront these previously unexamined challenges regarding differing perceptions and meanings about their respective cultures (Falicov, 1995).

As many scholars (e.g. Falicov, 2014b; Kelly et al., 2013; Sue & Sue, 2008) of cultural competency have emphasized, therapist self-awareness is an essential ingredient in effective cross-cultural therapy, especially given that unacknowledged power differences and felt distance between therapist and couple could be detrimental to treatment. In particular, conceptions of attachment and emotion are encompassed within *deep culture*, or *cultural unconscious*, the highly emotionally laden portion of the iceberg that lies beneath the surface (Comas-Diaz, 2012). Comas-Diaz (2012) asserts that it is imperative that clinicians explore their own cultural unconscious as well as their clients' or otherwise run the risk that their cultural icebergs will collide and interfere with the therapeutic alliance. For example, consider a therapist that resents that her Taiwanese parents rejected her expressions of sadness in childhood, considering such expressions disrespectful to them. When working with a Japanese client whose culture emphasizes emotional restraint to maintain social harmony, this therapist might push her client to openly express her anger to her partner, which then causes the client to shut down. This intervention might be due to the therapist's lack of awareness of her own negative biases, as well as her lack of awareness of her client's cultural values of social harmony and emotional restraint. It is unclear whether the participants' lack of awareness negatively impacted treatment. However, many participants did express that the interview led them to think about their treatment

of intercultural couples much differently. This suggests that the participants' renewed self-awareness helped illuminate what is underneath the surface of their own cultural icebergs.

Perceived "gaps" in therapist's culture attracted them to EFT. The results of this study found that perceived "gaps" in the therapists' cultures of origin attracted them to EFT. While all participants felt a sense of physical closeness, belonging, and availability in their cultures of origin, for a majority of participants, this sense of belonging required an emphasis on independence and conformity, and did not involve vulnerability, open emotional expression, or empathy. The participants felt negatively about the emphasis on autonomy and lack of emotional engagement in their childhood, and these perceived "gaps" drew participants to EFT, given its emphasis on interdependence, vulnerability and emotional engagement.

The cultural incongruity between therapist culture of origin and the culture of EFT is notable for three reasons. First, as emphasized earlier in this paper, many examples of cultural variation in attachment and emotion exist, especially between collectivistic and individualistic cultures (e.g. Hattori, 2014; Mesquita & Walker, 2002; Tsai & Lau, 2012; van Ijzendoorn & Sagi-Schwartz, 2008). That many participants in this study described culturally influenced emotional and attachment experiences that they felt were not consonant with EFT's conceptions is evidence of this cultural variation.

Second, the participants viewed their cultures of origin as flawed with regard to attachment behaviors and messages about emotions, negatively judging these aspects of their cultures, instead favoring mainstream Western ideas of secure attachment. Many of the participants expressed that prior to the study interview, they had not considered how their cultural background influenced their beliefs about attachment and EFT, and its impact on treatment. In other words, the cultural incongruity—and resulting negative judgments—were

outside of awareness. Thus, as noted above, therapist self-awareness, as emphasized by many scholars (e.g. Falicov, 2014b; Kelly et al., 2013; Sue & Sue, 2008) is essential to effective treatment. Otherwise, as detailed above, negative judgments might lead to pathologizing of other cultural norms and result in distancing between therapist and client.

Third, in her multidimensional, ecological, comparative approach (MECA), Falicov (1995, 1998, 2013, 2014a, 2014b) encourages therapists to compare the therapist's and each partner's cultural maps in order to draw attention to similarities and differences, contextualize them, and tailor treatment. The model emphasizes that the therapist's cultural map not only includes personal cultural history, but also theoretical and professional cultural background. The fact that many of the study's participants described previously unexamined cultural incongruity between their personal culture and EFT theory supports Falicov's (1995, 1998, 2013, 2014a, 2014b) notion that a careful examination of these incongruities is essential to creating a complete picture of the therapist's cultural map.

Intercultural couples present with similar themes and conflicts. As hypothesized, the study found that intercultural couples present with similar themes and conflicts with regard to cultural differences. These common conflicts, in order of prevalence, included cultural differences in (a) extended family relationships, (b) emotional expression and engagement, (c) childrearing practices, and (d) gender role expectations. These same conflicts were described in the literature as common stressors for intercultural couples (Bhugra & De Silva, 2000; Bustamante et al., 2011). It is important to note that although these same conflicts are common for all couples in treatment, regardless of cultural background, these conflicts are often experienced as more distressing for intercultural couples, because they hold even more diverse values, beliefs, attitudes and habits than intracultural couples (Gopaul-McNicol & Brice-Baker,

1998; Hsu, 2001). These findings suggest that asking directly, during assessment (step 1 of EFT), about cultural differences in these particular areas—extended family relationships, emotional engagement, childrearing, and gender roles—would greatly enhance treatment, as hypothesized. For example, Henriksen, Watts, and Bustamante (2007) developed The Multiple Heritage Couple Questionnaire, which was designed to aid clinicians in attending to the challenges unique to intercultural couples. The questionnaire includes questions related to time orientation, gender roles, family context, religion, and childrearing. In addition, these findings support the use of Falicov's (1995, 1998, 2013, 2014a, 2014b) multidimensional, ecological, comparative approach (MECA), as it involves examining and comparing therapist's and each partner's cultural map with regard to four domains: migration/acculturation, ecological context, family organization, and family life cycle. The study results demonstrate that a thorough exploration of family organization might be particularly useful with intercultural couples in EFT treatment, as this domain explores diversity in family structure and in the values connected to different family arrangements (Falicov, 2014a, 2014b). Thorough examination of this domain also includes values and beliefs surrounding individualism and collectivism, connectedness and separateness, gender and generational hierarchies, styles of communication and conflict resolution, and balancing attachments to family of origin and family of procreation. It therefore appears that this domain encompasses the themes that are particularly salient to intercultural couples—extended family relationships, emotional engagement, childrearing, and gender roles.

It is not surprising that cultural difference in emotional expression and engagement emerged as a common theme for intercultural couples in this study, given the emphasis in EFT on emotional expression and engagement, and given the plethora of scholarly literature (e.g., Mesquita & Walker, 2002; Tsai & Lau, 2012; Scollon et al., 2004; Matsumoto et al., 2008) on

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myriad cultural variations in emotion described earlier in this paper. This particular finding suggest that clinicians will likely find Liu and Wittenborn's (2011) guiding principles for using EFT with diverse couples useful, given their focus on tending to cultural differences in emotional meaning, function, and social construction. Specifically, according to these principles, clinicians are encouraged to identify the meanings and functions associated with emotional expression, paying particular attention to possible culturally specific display rules and their impact on the couple relationship. In addition, clinicians are encouraged to consider the ways in which the meanings of emotion might be socially constructed, how these meanings might differ from the clinician's own meanings, as well as be careful not to make assumptions, and validate the client's emotional experience.

Exploration of cultural differences help illuminate attachment and emotion. The study also found that exploring cultural differences often further illuminates partners' experience of attachment and emotion. Exploration of cultural differences often helped the couple and the therapist to better understand each partner's underlying attachment needs, fears, and emotions, and partners often didn't recognize that their ways of connecting/disconnecting were influenced by their cultures. Greenman, Young, and Johnson (2009) suggest that when using EFT with intercultural couples, therapists focus on uncovering and validating cultural influences on behaviors and emotions, while also highlighting their impact on the negative cycle. The study results suggest that many of the participants have been using this strategy, and that doing so is useful. This finding also supports the literature questioning the universality of attachment theory, emphasizing that cultural variations in attachment exist, particularly in relation to the behavior associated with attachment and the definition of attachment (Rothbaum et al., 2000; Keller, 2013). Therefore, as suggested by scholarly literature (Kelly at al., 2013), it may be helpful for

therapists to use the cultural competencies of knowledge and dynamic sizing to (1) gather information from collective observations, research, and the couple themselves regarding attachment and emotion in their culture(s), and (2) use dynamic sizing to determine whether emic (e.g. culturally specific attachment behaviors or emotional meanings) or etic factors (e.g. universal conceptions of attachment and emotional meaning) apply to the each partner. In addition, many participants found that cultural differences in whether, how, or which emotions should be expressed become quite relevant. This finding suggests, again, the usefulness of Liu and Wittenborn's (2011) principles emphasizing that therapists identify the culturally-specific meanings, functions, display rules, social constructions behind each partner's emotional experiences. These findings also support the scholarship asserting that while emotions and emotional experiences are widely accepted as universal and biological, emotions differ across cultures with regard to the events that precede emotions, how emotions are experienced, how emotions are appraised, and how they expressed verbally and behaviorally (Mesquita & Walker, 2002), and often vary based on individualistic versus collectivistic cultures (Matsumoto, 2008). Thus, as hypothesized, given these cultural variations, EFT therapists need to become aware of such differences in attachment and emotions between each partner. As Greenman, Young, and Johnson (2009) emphasized, for intercultural couples, attachment distress is heightened when one member comes from a collectivistic culture, while the other comes from an individualistic culture, given drastic differences in emotional display rules. In addition, the findings also suggest that incorporating an exploration of these cultural differences enhances treatment by shedding light on each partner's attachment needs, fears, and emotions, and increasing understanding and empathy.

These findings also suggest that the EFT therapist should be particularly attuned to cultural differences not only during joining and assessment (step 1) as discussed in previous sections, but also when identifying the negative interaction cycle (step 2), and accessing unacknowledged feelings and attachment needs and fears (step 3). It is during these two steps that cultural differences in emotions and attachment are likely to arise, given the emphasis on exploring the interactions between partners and each partner's underlying feelings. As suggested by the literature on cultural differences in attachment, the therapist should pay particular attention to culturally specific ways of connecting and disconnecting, as well as the culturally specific meanings of sensitivity, competence, and security (Keller, 2013; Rothbaum et al., 2000). As suggested by the literature on cultural differences in emotion, the therapist should be particularly attuned to cultural influences on appraising, experiencing, and expressing emotions, as well as culturally specific antecedents, meanings, and values regarding certain emotions (Mesquita & Walker, 2002; Tsai & Lau, 2012).

Therapists are flexible when intervening to address cultural differences, and couples respond positively. As hypothesized, most participants felt that the EFT interventions as they are, given the focus on the attachment framework and therapeutic stance of openness, inherently allowed for addressing cultural differences. This view supports Liu and Wittenborn's (2011) assertion that EFT's Rogerian roots, with its particular focus on unconditional positive regard and empathy, enables clinicians to effectively enter the client's emotional world, unveiling attachment needs, while normalizing and validating each diverse client's culturally based ways of expressing these needs. Similarly, Greenman, Young, and Johnson (2009) emphasize that EFT inherently addresses cultural differences by encouraging "the understanding of all couple relationships as unique cultures in themselves, in which individual differences—whether they are

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products of genetics, upbringing, or cultural norms—can play an important part in the genesis

and resolution of the core attachment struggle between partners" (p. 149). This also supports the

study's hypothesis that the treatment inherently attends to cultural differences as they may

appear through individual difference.

It is important to note that although many of the study participants said they found EFT

as-is inherently useful in addressing cultural differences, when describing their use of EFT

interventions in this regard, it became apparent that they were careful to explicitly address

cultural differences. For example, when using reframing, a core EFT intervention, many

participants used it to specifically reframe cultural differences in terms of attachment. As another

example, when one participant described using a combination of EFT interventions such as

repetition and imagery, in doing so he did not shy away from explicitly raising cultural factors—

specifically the impact of racial difference with a black-white couple. It is therefore not

surprising that many participants found it necessary to modify EFT when using it with

intercultural couples, most commonly by using direct interventions to openly address cultural

differences, particularly, but not exclusively, during the assessment process. This view that it is

necessary to use direct interventions to address cultural differences directly supports this study's

hypothesis that actively inquiring about and incorporating an awareness of cultural difference

enhances treatment for these couples. Many participants tended to use indirect interventions to

subtly address cultural differences, and many of these indirect interventions are culturally

adapted EFT interventions. Some participants used interventions described by Seiff-Haron,

Sasaki, and Sonnier (2014), used to repair after a cross-cultural injury or invalidation, such as

cultural disclosure, *collective reflection*, and *cultural conjecture*. All three of these interventions,

which are standard EFT interventions that have been modified to account for a cultural lens,

indirectly guide couples toward exploring cultural differences by disclosing something of

therapist's own cultural background (*cultural disclosure*), normalizing by introducing the

collective experience of a larger group (*collective reflection*), or tentatively conjecturing a

cultural dynamic using data gleaned in the session (*cultural conjecture*). Regardless of type of

intervention used, a vast majority of participants found that when they addressed cultural

differences in EFT with intercultural couples, the couples responded positively.

Overall, the participants' use of culturally sensitive interventions, the resulting positive

response, lends support for using a multicultural approach to adapting any traditional approach to

couple therapy (Kelly et al., 2013). The direct interventions of the inquiry approach as well as

the indirect interventions of cultural disclosure and leading questions, are examples of the

cultural competency of knowledge, specifically gathering cultural information from the couple

themselves. The other indirect interventions of collective reflection and cultural conjecture are

examples of therapists using the cultural competency of dynamic sizing to determine whether

universal or culture-specific factors apply to the couple. Given the positive response to

addressing cultural difference in therapy, it is likely that the therapists were at least partially

successful in addressing at least some of the four mechanisms that traditional couple treatments

often fail to address: worldview and value differences, differences in experiences and contexts,

power differences between partners and between therapist and couple, and felt distance between

partners and between therapist and couple. These "culturally attuned interventions" (Falicov,

2014b) allowed the therapist to "promote cultural curiosity, knowledge, understanding and

increased tolerance for the other's culture" (Hsu, 2001, pg. 241).

When using EFT with intercultural couples, therapists find it helpful to emphasize

attachment, vulnerability, openness, and curiosity. All participants found EFT helpful in

addressing cultural differences with intercultural couples because of its emphasis on attachment, vulnerability, openness, and curiosity. It therefore appears that, for the most part, the participants do not feel it necessary to depart much from the EFT model when working with intercultural couples. This also supports the popular claim, and this paper's hypothesis, that in many ways, EFT inherently attends to cultural difference given its Rogerian focus on curiosity about individual experience and universal attachment themes. Additionally, the particular emphasis on curiosity, openness, and acceptance has been noted to be essential in working with intercultural couples regardless of treatment used, such that the strengths—of the couple, and of their respective cultures—are highlighted (Biever at al., 1998).

Toward a Culturally Sensitive Model of EFT (EFT-CS)

Taken together, the overall literature and the study results provide support for a culturally sensitive model of emotionally focused couples therapy (EFT-CS). The below table (Table 8) summarizes the proposed model, and it is described in more detail below.

Step 1: Joining and assessment via the multidimensional, ecological, comparative approach (MECA). During the first step of EFT-CS, the therapist joins with the couple by embarking on a careful exploration and comparison of three overlapping cultural maps: each partner's, and the therapist's, thus applying the multidimensional, ecological, comparative approach (MECA; Falicov, 1995) to emotionally focused therapy. In examining the overlapping maps, the EFT-CS therapist is enhancing treatment through three therapist cultural competencies of knowledge, culturally competent skills, and self-awareness (Kelly et. al, 2013). The therapist is acquiring knowledge by gathering information from the partners themselves about their cultural backgrounds. The therapist is using culturally competent skills by applying the MECA model for diverse clients in order to directly address cultural differences in treatment. The

therapist is also increasing self-awareness by developing a deeper understanding about his own

cultural background.

Table 8

Culturally Sensitive Model of Emotionally Focused Couples Therapy (EFT-CS)

EFT Steps	EFT-CS Modifications	Considerations
1: Joining and Assessment	Using the multidimensional, ecological, comparative approach (MECA)	- Individualism and collectivism (e.g. does your culture value independence or interdependence?) - Attachment behaviors (e.g. how do people connect with each other in your culture?) - Extended family relationships (e.g. how important is extended family in your culture?) - Emotional expression and engagement (e.g. what messages did you receive about emotions in your culture?) - Childrearing practices (e.g. how are children raised in your culture?) - Gender roles (e.g. what the expectations of men and women in your culture?)
2: Identifying the negative cycle **3: Accessing unacknowledged feelings and attachment needs**	Attending to cultural variations in attachment and emotion	- How does each partner connect or disconnect? - What does sensitivity look like for each partner? - What does competence look like for each partner? - What does security look like for each partner? - Messages about emotions? - Values about emotions? - Emotional expression? - Which emotions expressed? - Meanings behind emotions? - Appraisal of emotions? - Experience of emotions?
4: Reframing the cycle in attachment terms	Incorporating cultural influences into attachment cycle	- Couple now sees that they long for connection but are crippled by underlying fears - Couple sees how each are influenced by their individual and cultural histories in the ways they hope and seek to connect
5: Promoting identification with disowned needs **6: Promoting acceptance of partner's experience** **7: Facilitating the expression of unmet needs**	Restructured interactions are culturally appropriate	- Each partner helped to understand, empathize with, and validate the other's culturally specific ways of interacting - Couple helped to restructure interactions in ways that are culturally appropriate for each partner

The therapist and couple examine all three maps through the four ecosystemic domains of migration/acculturation, ecological context, family organization, and family life cycle, noting similarities and differences among all three individuals across all dimensions. Particular attention is paid to the family organization domain, given its emphasis on family models, obligations, loyalties, and balancing attachments to family of origin and attachments to family of procreation (Falicov, 2014a). Given that cultural differences are often outside awareness, the therapist asks explicitly of herself and each partner about issues that are likely to become relevant in treatment, such as individualism and collectivism (e.g. does your culture value independence or interdependence?), attachment behaviors (e.g. how do people connect with each other in your culture?), extended family relationships (e.g. how important is extended family in your culture?), emotional expression and engagement (e.g. what messages did you receive about emotions in your culture?), childrearing practices (e.g. how are children raised in your culture?), and gender roles (e.g. what the expectations of men and women in your culture?). It's important to note that it is often difficult for individuals to determine what from their upbringing has cultural origins, as opposed to familial origins. To help each partner (and the therapist him/herself) to differentiate this when asking about each issue, it may be helpful to ask whether such beliefs and values were similar or different to those of other families of the same cultural background. In addition, when examining her own cultural map, the therapist is also careful to consider her theoretical background, particularly the beliefs and assumptions of emotionally focused therapy with regard to attachment and emotions, and how these beliefs interact with her own cultural background. In doing so, the therapist considers the extent to which EFT is consonant with her own culture, and whether any dissonance has been resolved or whether tensions exist, and how any tensions might impact cross-cultural treatment.

Steps 2 and 3: Identifying the negative interaction cycle and accessing unacknowledged feelings and attachment needs, focusing on cultural variations in attachment and emotion. During the second step of EFT-CS, the therapist guides the couple in identifying their negative interaction cycle, paying particular attention to possible cultural variations in attachment. As the therapist tries to understand the negative cycle, she might consider the following: (1) how does each partner connect or disconnect? (2) what does sensitivity look like for each partner? (3) what does competence look like for each partner? (4) what does security look like for each partner? During the third step of EFT-CS, the therapist helps the couple to access unacknowledged feelings and attachment needs, paying particular attention to possible cultural differences in emotion. As the therapist attempts to access these underlying feelings, needs, and fears, she might consider the following: (1) what messages did each partner receive about emotions? (2) what are each partner's values about emotions? (3) how are emotions expressed for each partner, if at all? (4) which emotions are expressed or not expressed for each partner, and why? (5) what do emotions mean to each partner? (6) how does each partner appraise emotions? (6) how does each partner experience emotions? As noted in the previous step, it will also be helpful during this step to differentiate between what of the experiences and beliefs surrounding emotions have cultural origins, as opposed to familial origins, by asking ask whether such experiences and beliefs were similar or different to those of other families of the same cultural background.

Step 4: Reframe cycle in terms of underlying emotions and needs, while acknowledging cultural influences. During the fourth step of EFT-CS, the therapist reframes the cycle in terms of underlying emotions and needs, while acknowledging cultural differences. At this point in treatment, the therapist now helps the couple to understand their negative

interactional cycle by reframing the cycle, along with its cultural influences, in attachment terms. The therapist brings together all of the information gathered in previous steps to help the couple see that they both long for connection, but are crippled by underlying fears, and are influenced by their individual and cultural histories in the ways they hope or seek to connect.

By this point in treatment, the therapist has begun to use all four therapist cultural competencies of knowledge, dynamic sizing, culturally competent skills, and therapist self-awareness. The therapist continues to acquire knowledge from the couple and from other sources about the cultural backgrounds of each partner, with a particular emphasis on cultural differences in attachment and emotion. The therapist uses dynamic sizing to take her knowledge, for example, of differences in emotional expression in collectivistic versus individualistic cultures, to determine whether emic or etic factors apply to each partner, given their respective cultural backgrounds. The therapist uses culturally competent skills and interventions by using indirect interventions such as cultural disclosures, cultural conjectures, and collective reflections to illuminate the impact of culture on the negative cycle and underlying feelings and attachment needs. The therapist maintains self-awareness by ensuring that her own biases regarding emotions and attachment do not negatively impact treatment.

Steps 5-7: Restructuring to promote identification, acceptance, and expression of unmet needs in a culturally appropriate manner. During these final steps of EFT-CS, the therapist helps each partner to identify his or her own disowned needs, accept the other partner's experience, and ultimately facilitate the expression of these needs in a way that is culturally appropriate to each partner. In guiding the couple in finding new ways of interacting in order to meet each other's unmet needs, the therapist is careful to maintain self-awareness and not impose her own ideas of how these unmet needs should be expressed and accepted. Instead, the therapist

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continues to follow each partner's lead, continuing to apply previously gathered knowledge of each partner's cultural background. Culturally influenced ways of connecting and expressing emotion become particularly relevant during this stage, as the couple is now being asked to restructure their culturally influenced interactions to meet each other's needs. Thus, each partner needs to completely understand, empathize, and validate the other's culturally specific ways of interacting, such that each can adapt for the other.

The above proposed model, a culturally sensitive model of emotionally focused therapy (EFT-CS) integrates ideas and concepts from the original model of EFT (Johnson, 2004), the multidimensional, ecological, comparative approach (Falicov, 2014a, 2014b), and the multicultural approach to adapting traditional couple therapy (Kelly at al., 2013). It was developed for application with all couples, but particularly intracultural and intercultural couples of all cultural backgrounds. Further research is needed to determine whether this model is effective with diverse couples.

Limitations of the Study

The qualitative, exploratory methods chosen for this study were selected to ensure in-depth and rich qualitative descriptions about the unique experiences of EFT therapists working with intercultural couples. However, breadth was sacrificed for depth, and as a result, there are limitations that should be kept in mind when considering the results of this study. Because of the small sample size of 9 participants, and the variability across participants' experiences, and the fact that the participants were not chosen at random, it is important to exercise caution in generalizing these findings to the larger population of therapists implementing EFT with intercultural couples.

Although participants were drawn several sources of advertising distributed via e-mail listservs nationwide, it is likely that the participants of the study sought out participation because they are highly interested in the issues raised by the research. In addition, all participants are ICEEFT-certified EFT therapists, and some of them are certified supervisors, suggesting a bias that might have prevented them from viewing EFT through a critical lens. The responses provided by the participants may relate to self-serving bias.

In addition, the study was limited in the demographics of the research participants. Eight of the nine participants identified as White, and five of the participants identified as American, and eight of the participants identified as heterosexual. Participants ranged in age from 37 to 62, and all were currently in private practice, suggesting middle to upper class socioeconomic status. Additionally, given that all participants discussed intercultural couples who were currently being treated or were recently treated at their private practice, it is likely that these couples were also of a similar socioeconomic status, between middle and upper class. Further research is needed to understand the experiences of diverse therapists using EFT with intercultural couples, as well as EFT therapists who treat intercultural couples of lower SES.

The qualitative research methods used for this study also posed some possible limitations regarding validity of the study results. As this was an exploratory study, there was no control group, making it difficult to understand how other factors might have impacted the themes. In addition, the use of a semi-structured interview as its limitations. As expected, the investigator would often ask questions in a different order or in different ways for each participant, for the purposes of allowing the participants to engage in lengthier in-depth narratives. This may have threatened validity, however, as it is possible that the investigator incorporated bias into the research questions, resulting in biased results.

Implications for Research

The present study explored the experiences of ICEEFT-certified therapists in implementing emotionally focused couples therapy (EFT) with intercultural couples. There is currently no existing research on EFT with intercultural couples, and limited research on EFT with diverse couples. This study showed that overall, EFT therapists noticed specific themes unique to intercultural couples, addressed cultural differences using a variety of EFT and non-EFT interventions with positive response from the couples, and overall found EFT to be helpful with intercultural couples. Nonetheless, the limitations of the study suggest that further research is needed to fully understand the implementation of EFT with intercultural couples. Given the limited demographic range of the study participants, further research is needed to understand the experiences of diverse therapists using EFT with intercultural couples, as well as EFT therapists who treat intercultural couples of lower SES. Further research also could include a larger sample of EFT therapists. Additionally, this study began to explore the therapist's own cultural background as it relates to EFT, but further research could examine more specifically the impact of the therapist's self-awareness (or lack thereof) of his or her own cultural background on EFT treatment with intercultural couples. In particular, further research is needed to understand how the therapist's culturally influenced experiences and beliefs regarding attachment and emotion influence the implementation of EFT with diverse couples. Finally, although the participants felt that EFT as-is was useful with intercultural couples, there exists no empirical data on whether EFT is effective with diverse couples in general, let alone intercultural couples. Further research could explore the effectiveness of EFT, as well as ways to modify treatment if necessary to ensure effective treatment with diverse couples.

Conclusion

With increased globalization, immigration, and technological advances worldwide, the number of intercultural couples is growing rapidly in the United States (Killian, 2002; Pederson, 2000). Although intercultural couples have always existed, societal changes have promoted greater acceptance, suggesting that intercultural marriages are likely to increase rapidly in the future (Falicov, 2014b). Despite the proliferation of intercultural relationships both nationally and internationally, limited research exists to guide therapists in the treatment of intercultural couples (Bustamante et al., 2011; Sullivan & Cottone, 2006).

This qualitative, exploratory study aimed to explore couple therapists' experience of implementing emotionally focused couples therapy (EFT) with intercultural couples. This particular approach to couples therapy was selected given its focus on universal themes of attachment and emotion, as well as its international application, suggesting that it is particularly useful with diverse couples. Exploratory questions unveiled participants' own cultural background and whether their own cultural background informed their beliefs about EFT and attachment, when and how cultural differences between intercultural partners arise in treatment, whether there are common themes or patterns among their intercultural couples, what interventions were used to address cultural differences and whether these interventions were inherent to EFT, how intercultural couples responded to these interventions, whether EFT is helpful in addressing cultural differences, and what advice they would give to therapists using EFT with intercultural couples.

With regard to the study's original hypotheses, as hypothesized, it was found that EFT was considered by the participants to be helpful with intercultural couples, given its emphasis on attachment, vulnerability, openness, and curiosity, as well as given its Rogerian stance focusing

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on individual uniqueness. As hypothesized, participants noticed particular themes that arose among intercultural couples, such as cultural differences in extended family involvement, emotional engagement, gender roles, and childrearing. Also as hypothesized, the participants found it helpful, and even necessary, to actively inquire about and incorporate into treatment an awareness of cultural difference, particularly in relation to attachment and emotion. Further research is necessary to further explore the hypothesis that therapist awareness of his or her own cultural background, particularly in relation to attachment and emotion, impacts treatment.

Six major themes also emerged in the study. First, it was found that perceived "gaps" in therapists' cultures of origin attracted them to EFT, particularly that their cultures lacked emotional engagement. Second, it was found that intercultural couples present with similar themes and conflicts with regard to cultural differences, namely differences in extended family involvement, emotional engagement, gender role expectations, and childrearing practices. Third, the study also found that cultural differences impact both relationship conflict and the therapeutic alliance, but these differences and their impact are often outside awareness. Fourth, the results found that exploring cultural differences often further illuminates partners' experience of attachment and emotion. Fifth, it was found that the therapists are flexible when intervening to address cultural differences, using a variety of interventions, and couples respond positively. Finally, it was found that therapists emphasize an open and curious stance, as well as a focus on accessing vulnerability and using the attachment frame, when using EFT with intercultural couples. Taken together these study findings suggest that EFT shows promise as an effective treatment with intercultural couples, provided that EFT is enhanced by existing multicultural models that explicitly address cultural differences.

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Appendices

Appendix A
Advertisement/Invitation to Participants
Participate in an exciting new study on Emotionally Focused Couple Therapy (EFT) with intercultural couples!

If you are . . .

- A licensed clinician who provides Emotionally Focused Couple Therapy (EFT)

- Certified by the International Centre for Excellence in Emotionally Focused Therapy (ICEEFT)

And also have provided EFT . . .

- Under ICEEFT certification for at least 1 year

- To at least 3 intercultural couples (defined as *2 people in a committed, intimate relationship who represent different faiths, cultures, nationalities, races, or ethnicities*)

- To these couples within the last 2 years and for a minimum of 3 months

. . . You may be eligible to participate in a research study on Emotionally Focused Couple Therapy (EFT) with intercultural couples!

This study focuses on the impact of cultural differences between partners on the implementation of EFT, any common themes, patterns, or conflicts that arise in the context of treatment, and ways in which treatment can be enhanced or adapted for intercultural couples.

This research study will serve as my doctoral dissertation in clinical psychology at the Graduate School of Applied and Professional Psychology, Rutgers, the State University of New Jersey. Confidentiality will be strictly observed, and participants will be encouraged not to disclose any information they are not comfortable sharing.

To participate, you will complete one short questionnaire and an interview that will last approximately 90 minutes. An effort will be made to interview participants at a time and location convenient to them. Interviews will be audiotaped and videotaped, and only the audio recordings will be transcribed by an academic transcription service who will not have access to any identifying information of participants. Every effort will be made to retain the confidentiality of participants. All identifying data will be removed from the hard copy of the transcript. No deception will be used in this study.

If you would like to participate, please contact Traci Maynigo, Ed.M., by phone at

(347) 413-1852, or by e-mail at tracimaynigo@gmail.com for more information.

Thank you for your interest.

Appendix B
Individual E-mail to Participants

Dear [NAME],

My name is Traci Maynigo, Ed.M., and I am a doctoral candidate in the department of clinical psychology at the Graduate School of Applied and Professional Psychology at Rutgers University, and I am conducting interviews for my dissertation studying the experiences of certified EFT therapists in working with intercultural couples. I found your name and contact information on the ICEEFT website, and thought you would be perfect for this study.

You are eligible to participate in this study if you are . . .

- A licensed clinician who provides Emotionally Focused Couple Therapy (EFT)

- Certified by the International Centre for Excellence in Emotionally Focused Therapy (ICEEFT)

And also have provided EFT . . .

- Under ICEEFT certification for at least 1 year

- To at least 3 intercultural couples (defined as *2 people in a committed, intimate relationship who represent different faiths, cultures, nationalities, races, or ethnicities*)

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To participate, you will complete one short questionnaire and an interview that will last approximately 90 minutes. An effort will be made to interview participants at a time and location convenient to them. Interviews will be audiotaped and videotaped, and only the audio recordings will be transcribed by an academic transcription service who will not have access to any identifying information of participants. Every effort will be made to retain the confidentiality of participants. All identifying data will be removed from the hard copy of the transcript. No deception will be used in this study.

If you would like to participate, please contact me via phone at (347) 413-1852, or by e-mail at tracimaynigo@gmail.com for more information.

Thank you for your interest.

Appendix C
Demographic Questionnaire

Age: ____   Gender: _____
Race: _____   Sexual Orientation: _____
Ethnicity: _____   Nationality: _____
Other Cultural Background: _____   Religion/Faith: _____

Professional degree(s) & year(s) attained: _____
Professional settings worked in throughout career (hospital, community health center, college counseling, high school, private practice, academic department, etc.):
_____
_____
_____

Years in practice: ____   Number of years practicing EFT as certified by ICEEFT: ____
Percentage or number of current EFT couple caseload that includes intercultural couples: ____
Percentage or number of typical EFT couple caseload that includes intercultural couples if different than above: ____

List the cultural backgrounds of couples you have worked with, both intracultural and intercultural, and indicate the kinds of cultural differences if applicable (e.g. "Filipino & Italian" or "Catholic & Jewish"):
_____
_____
_____

What is the average length of treatment for your typical EFT couple clients? Does the average length differ in any way for intercultural couples than for intracultural couples?
_____
_____
_____

Please list experiences you completed during your graduate education addressing cultural differences in treatment and working with clients from different cultural backgrounds than your own (didactic/non-practicum, supervision, practicum, coursework, personal).
_____
_____
_____

Please list experiences you completed during your post-graduate education addressing cultural differences in treatment and working with clients from different cultural backgrounds than your own (didactic/non-practicum, supervision, CEUs, personal).
_____
_____
_____

Appendix D
Semi-Structured Interview

Culture, Emotions, Attachment, and EFT from the Therapist's Perspective
1) Tell me about your cultural background in terms of what is salient to you.
    a. Prompts: What do attachment behaviors look like in your culture? What were you taught regarding emotions? What emotions were you taught to display? Not display? And why?
2) How does your cultural background inform your beliefs about EFT broadly and attachment specifically?
    a. Prompts: What fits with EFT? With attachment? What doesn't? What's positive about your cultural influence on these beliefs? Negative?

EFT with Intercultural Couples and Cultural Differences
3) When do cultural differences arise in EFT with intercultural couples?
    a. Prompts: Which steps/stages?

4) How do cultural differences manifest in EFT with intercultural couples?

5) Are there any common themes, conflicts, or patterns that tend to arise?
    a. Prompts: Interactional cycles? Attachment themes/styles/behaviors? Emotional display rules/meanings/expectations? Recurring conflicts?

6) Is EFT helpful in addressing cultural differences with intercultural couples?
    a. Prompts: If not, why not? If so, in what ways?

7) What interventions do you use to address cultural differences?
    a. Prompts: Change/tailor EFT interventions? Examples?

8) How have your intercultural couples responded to these interventions?
    a. Prompts: Dropout? Challenges? Outcome?

9) What advice would you give to EFT clinicians who are working with intercultural couples?

10) What has been your experience of participating in this interview?

Appendix E
Consent to Participate in an Interview

I am a doctoral candidate in the department of clinical psychology at the Graduate School of Applied and Professional Psychology at Rutgers University, and I am conducting interviews for my dissertation in partial fulfillment of the requirements of the degree of doctor of psychology. I am studying the experiences of Emotionally Focused Couple therapists in working with intercultural couples.

During this study, you will be asked to answer some questions as to common themes, patterns, or conflicts that arise in the context of EFT treatment with intercultural couples. This interview was designed to be approximately 90 minutes in length. However, please feel free to expand on the topic or talk about related ideas. Also, if there are any questions you would rather not answer or that you do not feel comfortable answering, please say so and we will stop the interview or move on to the next question, whichever you prefer.

This research is confidential. Confidential means that the research records will include some information about you and this information will be stored in such a manner that some linkage between your identity and the response in the research exists. Some of the information collected about you includes demographics, professional background, and educational background. Please note that we will keep this information confidential by removing all identifying information from all hardcopies of transcribed material, limiting individual's access to the research data, keeping it in a secure location. Interviews will be audiotaped and videotaped, and only the audio recordings will be transcribed by an academic transcription service. The audio recordings will not include your name or any identifying information, so the academic transcription service will not have this information, and the transcription service is trained in protecting the confidentiality of the participants and all associated transcription data.

This study is funded by the International Centre for Excellence in Emotionally Focused Therapy (ICEEFT) Research Fund. The results of this study will be reported to ICEEFT in aggregate; therefore participation in the study and identifying information of all participants will remain confidential.

The research team, academic transcription service, and the Institutional Review Board at Rutgers University are the only parties that will be allowed to see the data, except as may be required by law. Upon completion of this project, all data will be stored in a secure location for at least three years. If a report of this study is published, or the results are presented at a professional conference, only group results will be stated.

You are aware that your participation in this interview is voluntary. You understand the intent and purpose of this research. If, for any reason, at any time, you wish to stop the interview, you may do so without having to give an explanation.

The risks of the study are minimal, as you will be interviewed about your clinical experiences, and will not be physically harmed, but it is possible that the questions will disturb you emotionally or produce stress or anxiety. If you are assessed to be exhibiting or experiencing

psychological distress or convey that you are in need of psychological assistance, the interviewer will provide you with referrals to mental health professionals.

You have been told that the benefit of taking part in this study may be improving your own understanding of the implementation of Emotionally Focused Couple Therapy with intercultural couples. However, you may receive no direct benefit from taking part in this study.

The data gathered in this study are confidential with respect to your personal identity unless you specify otherwise.

You understand if you say anything that you believe at a later point may be hurtful to you or damage your reputation, then you can ask the interviewer to rewind the tape and record over such information or ask that certain text be removed from the transcripts. The interviewer will then ask you if you would like to continue the interview.

The recordings will be used for analysis by the research team. The recordings will not include any identifying information. The recordings will be stored in a locked file cabinet and linked with a code to the subjects' identity and will be retained indefinitely.

If you have any questions about the study or study procedures, you may contact myself at:

Traci Pacita Maynigo, Ed.M.
605 Morgan Ave. #2
Brooklyn, NY 11222
Tel: (347) 413-1852
E-mail: tracimaynigo@gmail.com

Or you can contact my advisor at:

Shalonda Kelly, Ph.D.
Graduate School of Applied & Professional Psychology
Rutgers, The State University of New Jersey
152 Frelinghuysen Road, Piscataway, NJ 08854
Tel: (848) 445-3922
E-mail: skelly@rci.rutgers.edu

If you have any questions about your rights as a research participant, you can contact the Institutional Review Board at Rutgers (which is a committee that reviews research studies in order to protect research participants). The IRB Administrator at Rutgers can be reached at:

Rutgers University, the State University of New Jersey
Institutional Review Board for the Protection of Human Subjects
Office of Research and Sponsored Programs
3 Rutgers Plaza
New Brunswick, NJ 08901-8559

Tel: 848-932-0150
Email: humansubjects@orsp.rutgers.edu

You will be offered a copy of this consent form that you may keep for your own reference.

Once you have read the above form and, with the understanding that you can withdraw at any time and for whatever reason, you need to let me know your decision to participate in today's interview.

Sign below if you agree to participate in this research study:

Subject (Print) _____

Subject Signature _____   Date _____

Principal Investigator Signature _____ Date _____

AUDIO/VIDEOTAPE ADDENDUM TO CONSENT FORM

You have already agreed to participate in a research study entitled: **Cultural Differences in Attachment and Emotion: Emotionally Focused Couple Therapy with Intercultural Couples** conducted by Traci Pacita Maynigo. We are asking for your permission to allow us to both audio and videotape as part of that research study. You do not have to agree to be recorded in order to participate in the main part of the study.

The recordings, both audio and video, will be used for analysis by the research team. The audio recordings will be transcribed by an academic transcription service who are trained in human subject research, and will protect the confidentiality of the participants.

The recordings, both audio and video, will <u>not</u> include the subject's name or any other identifiers, and each recording will instead by identified by a corresponding code. Given that cultural background is an important aspect of this study, video recording will include full facial pictures so that the research team can make observations regarding diversity. Video recordings will be viewed only by the interviewer and by the two members of the dissertation committee.

The recordings will be stored in a locked file cabinet and linked with a code to the subject's identity and will be retained indefinitely. The transcription data from the audio recordings will be encrypted and securely stored, and hardcopies of transcribed material will not contain any identifying information.

Your signature on this form grants the investigator named above permission to record you as described above during participation in the above-referenced study. The investigator will not use the recording(s) for any other reason than that/those stated in the consent form without your written permission.

Subject (Print) _____

Subject Signature _____ Date _____

Principal Investigator Signature _____ Date _____