

Cultural Encapsulation

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In our everyday life, we naturally seek homogeneity for comfort and predictability by avoiding difference and change. How much we can control our exposure to difference and change can vary, depending on factors such as politics, social privilege, socioeconomic status, and profession, just to name a few. Counselors are no different. In 1962, C. Gilbert Wrenn coined the term *cultural encapsulation* to emphasize the natural tendency of counselors to be bound by culture and time to avoid difference and change that results from cross-cultural exposure and societal development.

The term *encapsulation* conjures up the image of a cocoon or shelter that is slowly developed over time to preserve and protect attitudes, beliefs, and assumptions (Heppner, Wang, Heppner, & Wang, 2012). Wrenn stated “...we protect ourselves from the disturbing reality of change by surrounding ourselves with a cocoon of pretended reality – a reality based upon the past and the known” (1962, p. 445). The process can happen in an unconscious manner, pulling from a human need for self-preservation, and may be implicitly agreed upon across counselors and the field in general. Wrenn (1962) warned that encapsulation allows the counselor to hold cultural assumptions and stereotypes while simultaneously being guarded from the uncomfortable confusion of cultural difference and a threatened worldview. He further warned that this process could have negative effects on the quality of counseling.

Wrenn (1962) discussed three variations on cultural encapsulation in his original essay. The first is “the tendency to be surprised or even unbelieving regarding changes in truth” (p. 446). Counselors can gradually establish a belief in stable truths based on cultural and generational factors that are hard to modify in the face of change. The danger is that the counselor is not able to adapt to change and may generalize their beliefs to the clients’ experience despite cultural or generational differences. The second variation is “the cushioning of the counselor in some academic cocoons which have little reference to our total culture” (p. 447). While counselors develop shared assumptions of human behavior during training and professional practice, these assumptions may not be applicable to all settings

and situations. The third variation is “the assumption that the counselor may safely draw upon his own education and vocational experience in counseling” (p. 448). The counselor inevitably refers to his or her past when attempting to assist with the client’s future, failing to account for the rapid rate of current change.

Furthering the concept in 1985, during the War on Drugs and the ever-present fear of nuclear war, Wrenn identified two common reactions to societal changes that can lead to encapsulation: hopelessness and denial. Hopelessness about the world can manifest in thoughts that the problem is too big for an individual to influence, too advanced to stop, or too complex to understand. Denial of the reality of change can take the form of thoughts that the change cannot be true, it is highly exaggerated, or that it will just get better with time. Hopelessness and denial can serve as a self-constructed cocoon to protect the individual from the stress and ambiguity change elicits.

In addition, Wrenn asserted that cultural encapsulation permits the counselor to be insensitive to cultural variations on reality, perpetuate cultural stereotypes without proof, avoid consideration of alternative worldviews, and remain complacent in their own cultural values. Consequently, counselors can believe that the Western model of mental health applies to all cultures and that existing counseling techniques should work across individuals, and may risk pathologizing culturally different individuals and forcing treatments that could be harmful. This dynamic results in a decrease in the effectiveness and credibility of the field.

Sanchez (2001) describes a paradox in treating clients who are culturally different from the counselor, in that the counselor is ethically bound not to work with clients outside of their competence, but it is impossible to refer every client with whom the counselor is culturally different, nor is it possible to be knowledgeable in the intricacies and nuances of every culture. The first step in avoiding encapsulation is recognizing and acknowledging one’s own cultural background and subjective viewpoint. Rather than making broad assumptions about clients based on gross stereotypes or attempting to minimize between-group differences, Sanchez suggests that broad cultural references may be treated as a point of inquiry, or an invitation to a cultural dialog.

Despite its revisions over the years, the APA Ethical Principles and Code of Conduct itself is encapsulated within the beliefs, practices, and assumptions of a specific majority culture (LaFromboise & Foster, 1989). While the document has been improved since these criticisms were made, it still lacks the language called for by Pedersen and Ivey (1987), who recommended that the code speak to the need for recognition of socio-cultural differences in all endeavors of research, writing, and practice.

The concept of cultural encapsulation has been utilized in the field of multicultural counseling for over five decades to signify the innate risk of stereotypes and ethnocentrism (LaFromboise & Foster, 1989; Pedersen, Crethar, & Carlson, 2008), but it has yet to be empirically examined. Since 1962, the field of psychology has come to an agreement that awareness and understanding of cultural differences is an essential component of counselor training and practice. Research in the field has also seen many advances in our knowledge of how human difference affects behavior (Jim & Pistrang, 2007). Yet, with the increasing changes in globalization, technology, and identity, the concept of cultural encapsulation may be more applicable, and potentially problematic, today than ever before.

See Also

Cultural Specific Therapies
Monocultural vs. Multicultural

References

- Heppner, P. P., Wang, K. T., Heppner, M. J., & Wang, L. (2012). From cultural encapsulation to cultural competence: The cross-national cultural competence model. In N. A. Fouad, J. A. Carter, L. M. Subich, N. A. Fouad, J. A. Carter, L. M. Subich (Eds.), *APA handbook of counseling psychology, Vol. 2: Practice, interventions, and applications* (pp. 433–471). Washington, DC: American Psychological Association. doi:10.1037/13755-018
- Jim, J., & Pistrang, N. (2007). Culture and the therapeutic relationship: Perspectives from Chinese Clients. *Psychotherapy Research, 17*(4), 461–473. doi:10.1080/10503300600812775
- LaFromboise, T. D., & Foster, S. L. (1989). Ethics in multicultural counseling. In P. Pedersen, J. Draguns, W. Lonner, & J. Trimble (Eds.), *Counseling across cultures* (3rd ed., pp. 115–136). Honolulu: University of Hawaii Press.
- Pedersen, P. B., Crethar, H. C., & Carlson, J. (2008). Affective acceptance: Embracing inclusion and developing empathy. In *Inclusive cultural empathy: Making relationships central in counseling and psychotherapy* (1st ed., pp. 93–113). Washington, DC: American Psychological Association. doi:10.1037/11707-005
- Pedersen, P. B., & Ivey, A. (1987). Draft recommendations for changes in the APA ethical principles. *Internationally Speaking, 12*(37–38).
- Sanchez, A. R. (2001). Multicultural family counseling: Toward cultural sensibility. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (2nd ed., pp. 672–700). Thousand Oaks, CA: Sage.
- Wrenn, C. G. (1962). The culturally encapsulated counselor. *Harvard Educational Review, 32*, 444–449.
- Wrenn, C. G. (1985). Afterword: The culturally encapsulated counselor revisited. In P. Pedersen (Ed.), *Handbook of cross-cultural counseling and therapy* (pp. 323–329). Westport, CT: Greenwood Press.