Series Editor’s Foreword
Rodney L. Lowman

The field of consulting psychology has blossomed in recent years. It covers the applications of psychology in consultation to organizations and systems but also at the individual and team levels. Unfortunately, there are very few graduate training programs in this field of specialization, so consulting psychology roles are mostly populated by those who came to the field after having trained in other areas of psychology—including industrial–organizational (I-O), clinical/counseling, and school psychology, among others. Yet such training is rarely focused on consulting psychology and psychologists, and graduate students have to learn through on-the-job training and by reading books and articles, attending conferences and workshops, and being mentored in the foundational competencies of the field as they seek to transition into it.

After a number of years of editing Consulting Psychology Journal: Practice and Research, the field’s flagship journal, I felt that an additional type of educational product was needed to help those transitioning into consulting psychology. The Society of Consulting Psychology therefore partnered with the American Psychological Association and worked with an advisory board (initially consisting of Drs. Judith Blanton, Dale Fuqua, Skipton Leonard, Edward Pavur, Jr., and myself) to create a new book series describing the specific, fundamental skill sets needed to practice in this area of specialization. Our goal in this book series has been to identify the major competencies needed by consulting psychologists and then to work with qualified authors to create short, accessible but evidence-based texts
that would be useful both as stand-alone volumes and in combination with one another. The readers would be graduate students in relevant training programs, psychologists planning a transition into consulting psychology, and practicing professionals who want to add to their areas of expertise.

What constitutes fundamental skills in consulting psychology? The educational guidelines created by the Society of Consulting Psychology and approved by the American Psychological Association (2007) and the *Handbook of Organizational Consulting Psychology* (Lowman, 2002) provide useful starting points. Both of these contributions were organized around the concept of levels (individual, group, and organizational) as a taxonomy for identifying fundamental skills. Within those categories, two broad skill sets are needed: assessment and intervention.

As with many areas of psychological practice, the foundational skills that apply in one area may overlap into others in the taxonomy. Interventions with individuals, as in executive coaching, for instance, usually take place in the context of the focal client’s work with a specific team and within a specific organization, which itself may also constitute a client. Understanding the system-wide issues and dynamics at the organizational level usually also involves work with specific executives and teams. And multicultural/international issues suffuse all of our roles. The APA Guidelines and the *Handbook* concluded, properly, that consulting psychologists need to be trained in and have at least foundational skills and experience at the individual, group, and organizational levels, even if they primarily specialize in one of these areas.

In inviting you to learn more about consulting psychology through this book series, I hope you will come to agree that there is no more exciting or inherently interesting area of study today than consulting psychology. The series aims not only to cover relevant literature on timeless topics in consulting psychology but also to capture the richness of this work by including case material that illustrates its applications. Readers will soon understand that consulting psychologists are real-world activists, unafraid to work in real-world environments.

Finally, as one who trained in both I-O and clinical psychology, I should note that consulting psychology has been the one area in which I felt that all of my training and skill sets were both welcome and needed.
And in a world where organizations and the individuals and teams within them greatly need help in functioning effectively; in bridging individual, group, and organization-level needs and constituencies; and in coping with the rapid expansion of knowledge and escalating competition and internationalization, this book series aims to make a difference by helping more psychologists join the ranks of qualified consulting psychologists. Collectively, we can influence not only an area of specialization in psychology, but also the world.

ABOUT THIS BOOK

I can think of no better or more timely topic or book than Transcultural Competence: Navigating Cultural Differences in the Global Community to help launch the new Fundamentals of Consulting Psychology book series. Whether in providing feedback, assessment, coaching, team building, organizational consultation, or any of the large number of topics in which consulting psychologists must be competent, cultural and transcultural issues are almost always relevant. Yet, they are often overlooked. As this book makes abundantly clear, the contemporary version of cultural competence is not just about the important issue of cultural differences within a single country or area—it’s also about becoming a transculturally competent global consultant (see Lopez & Ensari, 2013; Lowman, 2013).

Fledgling consulting psychologists may not aspire to international consulting careers, but aspects of international and multicultural consulting roles will affect them one way or another. With the rapid expansion of technology, coaching and assessment services are increasingly being delivered on a global scale. This may or may not be a good idea from the perspective of what we reliably know and do not yet know about such delivery methodologies, but the virtual revolution is proceeding with or without psychology, and it does provide consulting psychologists the opportunity to expand their services to persons who might not otherwise have access to them. And if these psychologists are going to consult all over the world, whether in person or online, then transcultural skills must be high on the list of “must have” competencies.
Glover and Friedman, the authors of this important book, have focused their life’s work on transcultural issues in anthropology and psychology, respectively. In this volume, they distill this career-long work into its essence and incorporate theory (especially the work of Trompenaars and his associates; e.g., Trompenaars & Hampden-Turner, 2002), research, and illustrative case material to translate their wisdom into the most important points that consulting psychologists need to know to become transculturally competent consultants. The case examples, as wide ranging as whether U.S. military troops in a war zone should or should not smoke a hookah pipe with village elders and how an American fast-food restaurant should approach the design of its restaurants and menus in Japan, well illustrate the broader principles so that readers will quickly understand how important transcultural issues are to consulting psychologists. Indeed, consultants are always crossing cultural boundaries, even within their own cultures, because every organization they work with has a unique culture of its own, as do the groups and individuals within those organizations.

Transcultural Competence: Navigating Cultural Differences in the Global Community well illustrates the goals of the Fundamentals of Consulting Psychology book series. I expect that new consultants—and experienced ones as well—will be reading and applying this book for many years to come. It deserves that kind of attention and use.
The Need for Transcultural Competence

All men eat, but this is an organic and not a cultural fact. It is universally explainable in terms of biological and chemical processes. What and how different groups of men eat is a cultural fact explainable only by culture history and environmental factors. (Steward, 1972, p. 8)

The term culture is used at an ever-accelerating rate. Popular authors refer to the culture of a particular ethnic group when discussing social problems, sports announcers speak about the cultures of athletic teams, news analysts refer to the cultures of waste in governments, business pundits speculate about successful corporate cultures, and various professionals portray themselves as cultural experts. Almost everything is framed as cultural. It seems the growing use of this term has no end, as culture is finally being recognized as the significant influence on human experience and behavior that it has always been.

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Transcultural Competence: Navigating Cultural Differences in the Global Community, by J. Glover and H. L. Friedman
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CULTURE AND THE HUMAN EXPERIENCE

Steward’s quote refers to the fact that there are cultural designs and patterns for eating in all human societies. For example, when people are hungry, they make decisions about when and where to eat, what to eat, with whom to eat, and even how to eat. So, if presented with an eating situation incongruent with their cultural values, people may choose not to eat, even though they are hungry. A vegetarian may choose not to eat meat, even if it is all that is available, due to cultural values. A Catholic may not eat meat on Fridays during Lent. A Muslim may fast during Ramadan. A New York maître d’ may refuse to seat a customer in a restaurant, prohibiting eating, if a sufficient tip is not given in advance. Polynesians eat the eyes of fish as a delicacy, which most Westerners would refuse to even sample. The Maasai in Africa drink a mixture of milk and blood from their cattle, while in Thailand fried bugs are a commonplace snack sold on street corners. The examples of cultural differences in eating practices are endless. Eating practices are just one of many cultural patterns that vary around the globe and present the rich cultural diversity that characterizes humans.

Anthropologist Edward Hall (1981) emphasized the overwhelming importance of culture:

Culture is man’s medium; there is not one aspect of human life that is not touched and altered by culture. This means personality, how people express themselves, the way they think, how they move, how problems are solved, how their cities are planned and laid out, how transportation systems function and are organized, as well as how economic and government systems are put together and function. (pp. 16–17)

Culture is something humans have always dealt with. It is, and always has been, the means by which humans have met their daily needs and solved their problems of survival. For most of human history, culturally defined behaviors and practices by individuals and organizations have been assumed to be “the way things are done.” Culture served as the agent of the status quo, with only the most creative and brave members of organizations and societies ever attempting to understand, manage, or change it.
It is reasonable to state that culture is actually what has made us human, at least in being able to solve the problems of human existence. Other species have also used culture, but only in very basic forms; no other living species has used culture as pervasively and successfully as humans: Culture influences everything humans do and experience (including our thoughts and emotions). Whether it is a stone axe or a computer, human technology is a cultural artifact. Likewise, social artifacts such as corporations, communities, and governments are organizations built and perpetuated from foundations of cultural knowledge. Leadership and other ways in which humans interact in organizations is the result of a specific cultural context. Culture is the foundation for organizing and managing all human groups through processes such as strategy, structures, systems, and technology, which lead to organizational outcomes (see Figure 1.1).

**Yavi Rau**

Human groups, organizations, and societies may develop different responses to the same needs. As an illustration of this process, different groups in Fiji
meet some of their primary needs for obtaining sustenance through fishing, yet their secondary needs are based on varying Fijian cultural practices. In the Fijian society, there are Fijians, Fijian Indians who were originally brought to the islands as laborers, as well as expatriates from Australia, New Zealand, and other locations. Traditional Fijian culture has been based on communal village life, while the Fijian Indians’ culture has been more individualistic and commercial. Australians, and other expatriates, bring their perspectives from their home countries, usually focusing on Western economic values and practices. Once when conducting a management-training seminar in Fiji, we asked our ethnically diverse participants to explain their cultural patterns for fishing. One manager jokingly provided the following explanation: “When villagers in Fiji fish, they use Yavi Rau, urban Fijians buy their fish in the market, Indians use one person with one fishing pole and five hooks, and the Australians pay someone to catch the fish for them.” This humorous description given by the manager reflects different cultural models for doing the same activity, obtaining fish to eat. The cultural orientations of each of the four groups holding the models are quite diverse, as in the differing values toward individualism among the Australians, Fijian Indians, and urban Fijians, in contrast to the collectivism of the Fijians living in villages influenced by traditional communal values. Yavi Rau, the traditional Fijian fishing approach just mentioned, is very productive, even by modern Western standards when compared with the more individual methods for fishing. Most of the able Fijian villagers cooperate to catch fish. They go to a reef when the tide is receding, forming a human circle that forces the fish into a smaller area near the shore as the villagers move inward to shrink the circle. The fish are finally forced into a pool of water that, as the tide goes out, becomes small enough to allow the villagers to easily harvest the catch. Yet, we have heard those who do not share the traditional Fijian cultural model for fishing dismiss this as a “primitive” village practice. Such a bias from outsiders, denigrating a traditional practice that is actually quite productive, illustrates how cultural blinders can distort perceptions.
Transcultural Competence and Contemporary Professionals

Related to the term *culture* is the notion of competence in cultural matters, which is a learning progression that leads to what we call *transcultural competence*. Every human who lives as a member of a human society becomes culturally competent to the degree that he or she is socialized and learns to participate in a particular society. Humans first encounter culture when they learn their own cultural beliefs, patterns, and expected behaviors in daily living. That process of socialization is a two-edged sword: All humans learn how to survive and exist in their environment as they are socialized, but they also learn ethnocentric ways for dealing with the world around them, as all cultures tend to socialize their members to believe their ways are the best. So all humans learn a culture and, at the same time, learn that their culture’s beliefs, patterns, and expected behaviors are correct, regardless of the specific culture into which they are born.

The next time humans may need to learn a culture is when they encounter other humans who do not hold the same cultural orientations. Some people may reject these new cultural orientations, while others may try to embrace them. At this point, those who learn a second cultural orientation may be seen as having cross-cultural competence, and they begin to develop a more advanced perspective on culture, leading to increasing recognition of cultural differences.

In today’s culturally diverse global community, needs have emerged for many people to develop a third level of cultural learning called *multicultural competence*. This has become a well-recognized need for travelers, business executives, health care providers, government and community change leaders, mental health providers, educators, military professionals, and many others who deal with multiple cultures. In particular, it is becoming increasingly recognized that those people who communicate with and encounter many other cultures, both domestic and international, need to develop competence so that they can operate successfully when they cross multicultural boundaries. This includes a more heightened awareness of one’s own culture as one way of doing things among many varying cultural possibilities.
The focus of this book is on a fourth level, namely, transcultural competence. This requires the learner to develop perspectives and skills for dealing with cultural differences that are beyond the first three levels described. Transcultural competence involves being able to adapt to various sociocultural settings anywhere in the world, with or without prior knowledge of the cultural orientations of those people and societies they are encountering. This general cultural adaptation requires more sophistication and a greater level of awareness and understanding of how culture works, regardless of the specifics of the sociocultural encounter.

Of the many professionals who employ the term culture, including those trained in the basic academic disciplines traditionally associated with culture (i.e., anthropology, psychology, and sociology), as well as those trained in various applied fields often dealing with culture (e.g., management, organizational behavior, organizational development), there is no shortage of people fashioning themselves as cultural experts. However, we have observed that few of these professionals claiming cultural expertise seem to really have a deep understanding of culture. Yet the need for understanding and applying knowledge of culture is pervasive across almost all professional disciplines. Transcultural competence, the ability to successfully deal with and develop solutions to issues and problems created by cultural differences within any cultural setting, is sorely needed in the contemporary global community.

Trompenaars (in Brotherton, 2011) referred to transcultural competence as going beyond being able to adapt to any specific culture, which can never be fully understood by a cultural outsider. Instead, transcultural competence involves being able to take advantage of diversity regardless of whether it relates to one specific culture or multiple differing cultures. Transcultural competence, according to Trompenaars, consists of four elements, which he called the “4Rs” of transcultural competence (see Figure 1.2):

First, recognition: what is the dilemma? Second step is respect: there’s a dilemma, and both sides have legitimate opinions. Third is reconciliation: the art of coming to some sort of agreement; the fourth is realization: actually translating it into actual behavior.
Transcultural competence enables those who possess it to recognize, respect, reconcile, and realize cultural dilemmas.

Psychologists, sociologists, anthropologists, organizational development and change professionals, management, and organizational behavior professionals, as well as educators, social workers, health care professionals, economists, and political scientists, are only a few of those needing transcultural competence. Social institutions in which professionals operate also need to foster transcultural competence, including business, government, health care, mental health, military, education, and community development. These are just a few of the many professional and institutional contexts in which there is a need to effectively apply cultural knowledge, regardless of location or situation. We provide the following cases to illustrate this need.
The New Waiter

Socialized values are in every organization, regardless of who their leaders are and what their approaches might be. In consulting in the Bahamas, we encountered an expatriate hotel manager who had inherited an organizational culture he did not understand. Having a successful management track record in England, he had been recently reassigned and asked for our assistance in solving labor problems at one of the hotel’s restaurants. As he explained:

We took over this restaurant three months ago. The former management company left us with a mess. Employees are surly, rude to customers, and close to a union walkout. Customers complain continuously about the service. Even our own hotel supervisors are afraid to go in there!

He was clearly baffled by the situation. The expatriate suggested that we continue the discussion while having lunch in the restaurant.

When we arrived at the restaurant, a young waiter warmly introduced himself and politely explained the menu options. As he walked away to place the order, Glover remarked to the manager, “I thought you said there were problems with the employees here, yet our waiter is doing everything you could expect for quality service.” The manager grimaced and replied, “Yes he is, but today is his first day on the job. He has not yet learned to be like all the other employees.”

Two weeks later, we returned to the restaurant for a follow-up meeting with the manager and encountered a very different response from the same waiter. He was not attentive, seemed unmotivated, and on one occasion bordered on rudeness. The waiter had obviously learned the behaviors of his more experienced coworkers. He now behaved like his other, less motivated, coworkers: He had become socialized as one of them.

The Western Businessman and the Arab Official

A business executive from the United States was working in a Middle Eastern nation to build a Western-style hospital (Copeland & Griggs, 1985). It was part of a community-development effort initiated by a local
government. The executive went to a meeting with an Arab official to finalize the plans to open the hospital. During that meeting, he intended to obtain a permit from the official that would signify the government’s approval to open the hospital. After arriving at the official’s office, the executive appeared rushed and almost impatient with the official’s insistence on making “small talk.” He wanted to get to the point and appeared to anger the Arab official when he immediately asked for the permit to be signed. The American also was uncomfortable with the Arab official’s multitasking activities, as the official answered his phone while speaking with the executive, was interrupted several times by his assistant, and was apparently not ready to discuss the permit until later in the meeting. The meeting ended without the permit being given to open the hospital. The executive was frustrated that the official did not share his urgency to open the hospital and expressed concern about how many people might not receive medical treatment due to this delay. But the official found the outsider to be rude and disrespectful of how things were done in that country. He was heard to say that his people had survived many years without this hospital, and they could survive a little longer.

**Technology That Decreases Productivity**

A casino-hotel general manager in Puerto Rico asked Glover to determine the cause of a “labor issue” in one of the property’s restaurants. Upon his arrival, Glover spoke with the general manager to assess the problem. The general manager related that, for the past 6 months, what had historically been a well-managed and high-quality food outlet in the hotel had recently become a problematic and troublesome enterprise. Customer complaints regarding the service and the attitude of the employees had greatly increased during that period. Several long-time employees had resigned. Many others had complained about having too much work to do. There were even rumors of a possible grievance against management.

Glover next met with the waiters in the restaurant. After gaining their confidence, he learned from the waiters the source of their frustration in the workplace: “We work twice as hard now. Ever since the new
computer (a point-of-sale terminal located in the customer service area) was installed six months ago, we don’t have the time to do our jobs.”

“But I thought the new technology was designed to make your life easier,” Glover responded.

The waiters explained to him that since the new computerized system had been installed, they took the customers’ orders, entered them in the terminal in the service area, and then went to the kitchen to tell the cooks what they had entered.

“Wait a minute,” Glover responded. “Why do you have to go to the kitchen to tell the cooks what order you placed in the terminal? I thought they had a visual display terminal in the kitchen to tell them the orders placed from the service area.”

After a few anxious moments, one of the senior waiters revealed the waiters’ secret to him. “Yes, that is true, but the cooks can’t read.” The waiters had been hiding the fact that the cooks, often their relatives or long-term friends, could not read. They feared the cooks might lose their jobs if this fact was discovered.

**Multicultural Teams Provide Challenges**

Friedman once served as a psychological consultant for a hospital where, to establish differential status and power across disciplines, a prominent neurosurgeon insisted on referring to him as “Nurse Friedman.” This obvious attempt by the neurosurgeon to establish a favorable pecking order is an example of how the culture of that hospital was expressed in team meetings and how each discipline had its own culture. Health care organizations consist of many professional cultures. Patient care teams may include medical doctors, nurses, administrative staff, and social workers. In some cases, psychologists, occupational therapists, and other specialists may join these teams. Each of these health care specialists has a specific cultural approach, based on their socially defined roles, disciplinary education, credentialing process, and the shared expectations with others in their profession. To add to this, there may be a multicultural mix whereby the professionals and patients may be from different cultural backgrounds and approach the provider–patient relationship with different cultural
orientations regarding health and well-being. In some cases, service providers and patients may not even share the same worldviews and beliefs about the nature of disease and acceptable treatments with Western-trained health care providers. These differences in worldviews and cultural values may be the source of problems, such as treatment team relationships, patient compliance, and medical malpractice.

Getting to Know You

In the 1980s, Glover worked as a consultant for Japan Airlines (JAL) when the company began to expand their hotel operations in North America. For 3 years, Glover went to the Essex House Hotel in New York City, the headquarters of the JAL hotel division, to serve as the consultant for a change process designed to transform the company from a Western management culture to a Japanese quality management system. During each visit to the headquarters, Glover had lunch with the JAL Development CEO for North America, Yasuki Muira. When they met for lunch at Spaghetti Lovers Pasta House each month, the conversation was never about the change initiative Glover was directing. Instead, the two discussed philosophy, politics, and other topics apparently unrelated to the change initiative. Finally, after a year of these lunch meetings, Glover asked, “Muira-san, why do we never discuss the project?” Muira smiled and said, “I have been getting to know you, your beliefs, your values, and how you think. If I like what I know about you, then I trust that you are doing a good job with the management culture changes.” Glover found this leadership philosophy and approach to be quite different from those of the CEOs in the United States, who often focused on what was going to be done, when it would be done, what the results would be, and how much would it cost, while rarely wanting to establish a diffuse relationship with him. Muira, as a leader who had extensive multicultural experiences, is someone we consider to exemplify transcultural competence.

Western Notions of Progress May Not Be Shared

There are numerous cases to illustrate the need for understanding culture in the application of community development programs. Technology
transfer, epidemiology, mental health, and literacy programs all have stakeholders with different, often competing cultural orientations. Add to that cultural mix the fact that development agents and political officials often have different values as well. For example, international aid projects have often provided what was thought to be an improvement, such as a tractor to increase farming yields or modern sanitation practices to better community health, only to find that these innovations were not adopted because they did not fit the local culture. A tractor might not fit into the collective work dynamics and might not have spare parts available to the farmers. Development agents would be disappointed to find, upon returning to a village after leaving a tractor with its farmers, that the tractor had not been used.

These cases illustrate the wide-ranging need to understand and work with cultural differences. Transcultural competence is important in all professions that work in the global community. We conclude Chapter 1 with a dilemma reported to us by U.S. soldiers operating in Afghanistan. This case illustrates how seemingly opposing values of participants in a meeting of culturally diverse stakeholders can have important implications for all people involved in the situation.

**CASE ANALYSIS: THE HOOKAH-PIPE DILEMMA**

We recently elicited a perplexing dilemma from actual experiences of U.S. soldiers who had missions to build rapport with the elders of a traditional rural village in Afghanistan (Friedman et al., 2013). The village was located in an important area of a region occupied by so-called insurgents. Winning the support and cooperation of the village elders was critical to the security of the region. Also, the soldiers’ immediate mission was to find weapons that were suspected to be hidden in the vicinity of the village.

When arriving to search for hidden weapons, the soldiers met with the elders, following the appropriate protocol for entering a village. After brief introductions, they were offered a hookah pipe by the Afghan elders. The interpreter explained that the elders would be insulted if they refused to participate in this ritual, but the pipe probably contained hashish, which
is against U.S. military law. If soldiers did not smoke, then lives could be lost through not finding the hidden weapons, but to smoke could result in dire consequences for the soldiers via their own military-justice system.

When presented with this dilemma, members of all service branches in the focus groups were evenly split in their responses, with about half claiming they would have smoked and half that they would not have smoked from the pipe, suggesting it is a valid dilemma without a clear right or wrong answer. This dilemma involves the cultural-value dimension of specific-diffuse, namely, the soldiers might tend to express specific U.S. values to get down to business (as in finding the weapons), while the values of the elders might be more diffuse, demanding time to first build a trusting relationship through the hookah ceremony before revealing where the weapons were hidden. Further, should the soldiers decide to smoke or not smoke the hookah pipe, their commanding officer, and even the “brass” in the Pentagon, would hold their own values and expectations of how soldiers should respond in this culturally diverse situation.

Using cultural dilemmas provides a practical avenue to developing and employing transcultural competence, as well as for researching it. We have used dilemmas to assess, train, and intervene. For example, the hookah pipe dilemma was presented as one of the items in a dilemmas-based cultural-assessment instrument to military trainees with extensive experiences in international missions.