



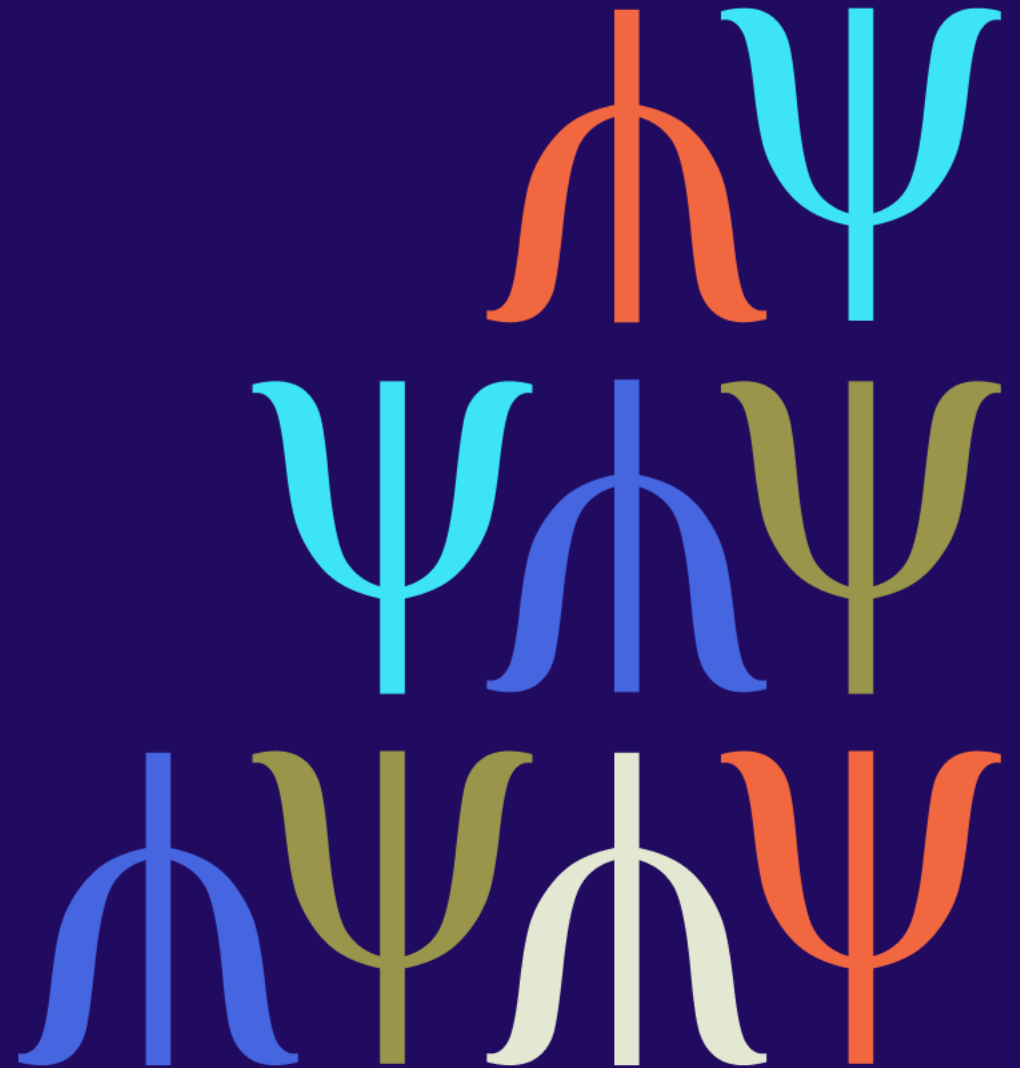
AN APS MEMBER SYMPOSIUM

2025 Festival of Psychology

16–18 May 2025

Exploring Cultural Responsiveness
in Schema Therapy

Dr Irene Martin, PhD



ACKNOWLEDGEMENT OF COUNTRY

OVERVIEW

1

**Introduction to
Schema Therapy**

2

**Cultural
Considerations for
Schema Therapy**

3

**Recommendations
for clinical practice**

ACTIVITY

Share an experience you've had, if any, of a time when culture was not addressed appropriately in your clinical and/or personal experience.



SCHEMA THERAPY

- 3 key elements (Young et al., 2003)
 - Emphasis on psychological issues originating in childhood/adolescence
 - Intimate therapeutic relationship
 - Experiential techniques → corrective emotional experiences
- Focuses on meeting core needs that were not met in childhood → healthy adult mode
- Two core concepts
 - Early maladaptive schemas (EMS) aka schemas
 - Modes – innate child, dysfunctional coping, parent/critic, healthy modes



SCHEMA THERAPY & CULTURE: EVIDENCE BASE

Support for the Cross-Cultural Validity of Schema Theory

- Development and validation of the Young Schema Questionnaire (YSQ; Young, 2005) for diverse populations – Portuguese and Brazilian (Borges et al., 2020), German (Kriston et al., 2013), Thai (Sakulsriprasert et al., 2016), Polish (Oettingen et al., 2017)
- Support for the universality of positive/adaptive schemas – Western (Louis et al., 2023, 2018), Asian (Jain & Singh, 2022; Louis et al., 2023), and African (Louis et al., 2023) populations

Support for the Cross-Cultural Effectiveness of Schema Therapy

Authors	Design	Findings
Mao et al. (2022)	Qualitative interviews with therapists	Therapists' perspectives of the suitability of ST in Hong Kong & Singapore Core ST concepts generally accepted BUT significant adaptations required to ensure cultural responsiveness in an Asian cultural context – language differences, difficulties in the expression of affect, issues related to filial piety, and differences in social norms and expectations
Barbieri et al. (2022)	Single case study	Yemeni male refugee attending ST in Italy Cultural adaptations: language translations, consideration of cultural values and contextual stressors
Henry & Nasreldin (2024)	Single case study	Egyptian female client Integrated Kleinman's cultural explanatory model with ST – cultural meanings assigned to cause, severity, and prognosis of the disorder, and contextualised client's EMS in their cultural and religious contexts → enhanced therapeutic relationship and intervention effectiveness

GAPS IN THE LITERATURE

- Limited research on the cross-cultural effectiveness of ST
- A lack of comprehensive guidelines or frameworks on how to adapt ST for diverse clients
- Limited research on schema therapists' perspectives of the cultural suitability of ST
- No research on clients' experiences of the cultural suitability of ST



Study One:

Cultural Suitability of Schema Therapy: A Qualitative Exploration of Clinician Views

- Published in the Australian Journal of Psychology

Study Two:

Client Perspectives of the Cultural Suitability of Schema Therapy: A Qualitative Study

- Being prepared for future publication

“MALADAPTIVE” & “DYSFUNCTIONAL”, BUT IN WHAT CONTEXT?

- *Adaptive/maladaptive* and *functional/dysfunctional*
 - Influenced by Western cultural norms
- Cultural norms shape how schemas and modes are perceived and expressed
- Cultural values labelled as “maladaptive” or “dysfunctional” → feelings of defectiveness and frustration

“There's such an overemphasis on autonomy and connection [in ST]... in a way that *doesn't always sit very well with Chinese culture...*”
(Aang, Chinese-Australian, client)

“The biggest struggle I've had [with ST] is *the conclusions are based on this very cis-hetero white framework...* one of my other high rated [Schemas] is *Defectiveness*. And it isn't about what or why has that said that? It's that in my own cultural sense, it's like *‘I'm defective because I didn't fit in. I'm not meeting the requirements of [my culture]* or whatever.’ ”
(Ayesha, Pakistani-Australian, client)

“MALADAPTIVE” & “DYSFUNCTIONAL”, BUT IN WHAT CONTEXT?

Recommended Strategies

- Conduct culturally-informed case conceptualisations
 - View the client as the cultural expert
 - Influence of culture on schema and mode manifestation, expression, and maintenance
 - Consider the perceived adaptiveness of schemas and modes within and outside the client's culture
- Do not challenge core cultural beliefs
- Explore what a healthy adult mode looks like within the client's culture
- Engage in ongoing professional development to improve cultural competence

“Many Latina women are self sacrificing. That's perceived as respectful and as a core value... So, *where is self-sacrificing not working within the cultural context* of that person that I'm seeing? And [I try] *not to put a worldview, an American worldview, of independence and non-self-sacrifice.*”
(Isabel, Latina, Schema Therapist)

CULTURAL EMOTION DISPLAY RULES

- ST assumes that emotional exploration and expression is adaptive and necessary for a healthy functioning self
- Emotion display rules vary within and between cultures
- Some cultures value emotional control
- HOWEVER, meeting core emotional needs was viewed as beneficial despite resistance to emotional exploration and expression

“There's a lot of **emotional inhibition** embedded into **Chinese culture** around showing of emotions being, yeah, like, it's **not taught how to show emotions.**”
(Aang, Chinese-Australian, client)

“I explain the **Detached Protector [Mode]** as ‘You kind of numb your feelings, you go on autopilot, you go through the motions of each day, but you’re not really present.’... culturally, **some of these clients see that as being strong. It’s strong to be able to face adversity and get through and not think about it...** their **avoidance is functional** to a degree.”
(Alana, Maltese-Australian, Schema Therapist)

CULTURAL EMOTION DISPLAY RULES

Recommended Strategies

- Establish a strong, trusting therapeutic alliance
- Address mental health stigma – psychoeducation, self-compassion, strengths-based approach
- Encourage perspective-taking to elicit empathy and emotions
- Focus on physical symptoms
- Use of metaphors and culturally-relevant analogies
- Creative methods to facilitate non-verbal expression of schemas and modes
 - Drawings, sand-trays, mind-maps, letter-writing
- Explore schemas and modes that present in dreams

“One of the things that I tend to do is... try to **get people to empathize with other people's experiences**. Because I think it is **harder to accept it in oneself**, because that would mean to **feel vulnerable and weak** or whatever... So, it's always **easier to see it in someone else**.”
(Evelyn, Romanian, Schema Therapist)

WORKING WITH PARENT/CRITIC MODES

- Parent mode – internalised parent or negative attachment figure
- Clients are expected to express anger at the imagined parent → meet core emotional needs
- Culture influences the expectations within parent-child relationships

“...people from the **collective cultures** find it a bit more disturbing. **Me stepping in [during imagery rescripting]** shows **disrespect**”
(Hanna, Polish, Schema Therapist)

“...when we found the **limited reparenting** and chair work and imagery rescripting is **going well with him** and he [felt] like that I am a **caregiver for him**, he [started] **talking punitive[ly] to himself**, or **blaming himself** because **he let himself get closer to me**. Because it's **not right**. It's **not allowed**.”
(Edwin, Egyptian, Schema Therapist)

“I felt that I was **betraying my own parents** by filling that hole with someone else.”
(Anna, Dutch, client)

“I feel completely **okay to express my feelings to my friends**... it's normal... but my **parents are not like that**.”
(Branko, Serbian, client)

WORKING WITH PARENT/CRITIC MODES

Recommended Strategies

- Explore cultural expectations within parent-child relationships
 - How is care and affection expressed?
- Use “Critic” mode, instead of “Parent” mode
- Pros and cons of addressing Critic modes
- Balance personal needs with family needs
- Compassionate and empathic approach during imaginal confrontation of Critic modes
- Alternative meaningful healthy adult figure to act as a “good parent” for the client

“When we talk about **imagery rescripting**... when the therapists need to **talk with the parents**, we need to **be polite**.”

(Aarav, Thai, Schema Therapist)

“...we're **not rejecting the parental mode**, we were just **softening it**. Changing it to a **more loving, caring voice rather than rejecting it** totally.”

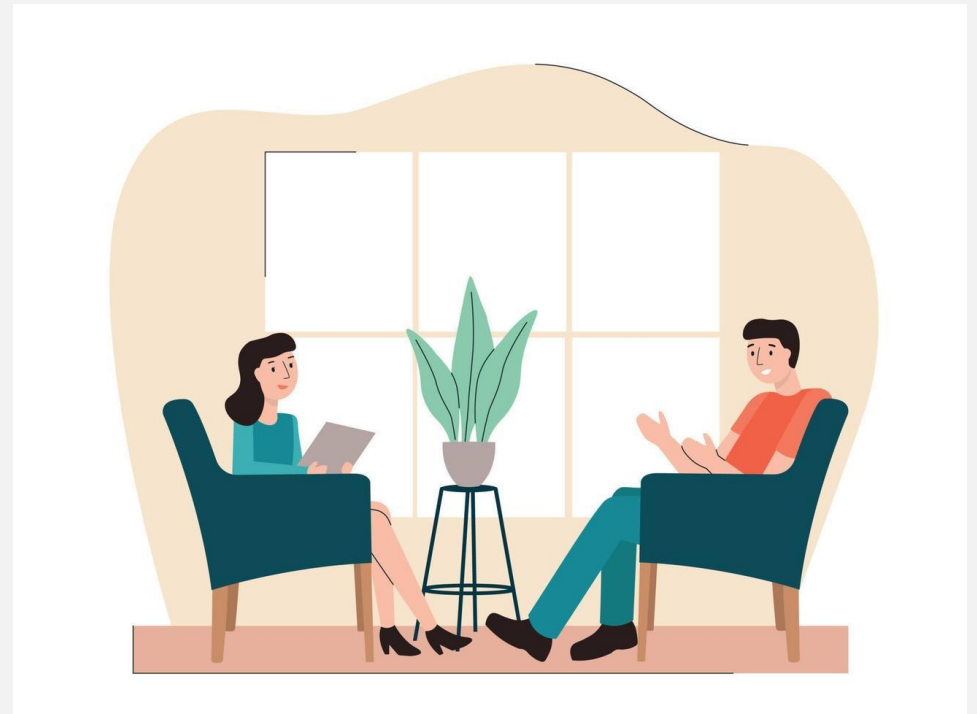
(Hanna, Polish, Schema Therapist)

“...my **sister** who is **12 years older** than me... she's my **Healthy Adult equivalent**”

(Gabija, Lithuanian, client)

FINAL REFLECTIONS

- Schema Therapy is not a one-size-fits-all approach
- Clinicians are well-advised to:
 - Consider the perceived adaptiveness of schemas and modes
 - Understand cultural emotion display rules
 - Respect cultural differences in family values



Get in touch with me:

LinkedIn: [linkedin.com/in/irene-martin-6862231b3](https://www.linkedin.com/in/irene-martin-6862231b3)

Email: irene.martin@monash.edu

Instagram: [dr.irenemartin](https://www.instagram.com/dr.irenemartin)



#APSFestival25

AN APS MEMBER SYMPOSIUM

2025 Festival of Psychology

16–18 May 2025

Gold Coast, Queensland

