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Black American Couples' Perceptions of the Significance of Race and Racial Conversations in Therapy

A Qualitative Study

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ABSTRACT—In this qualitative study, we used a phenomenological approach to explore five African American couples' perceptions of the significance of race and racial discussions in couple therapy. Analysis of dyadic interviews revealed two overarching themes: (1) race was an omnipresent and ubiquitous force that touched every aspect of Black American life, and (2) partnering with another Black person provided a shared cultural understanding of the impact of race and racism on the lived experience. Within this frame, subthemes emerged that pertained to the partner (e.g. "partner served as buffer") or to the therapist/therapeutic process (e.g. "self-censorship"). These findings demonstrate that some African American couples' view race as an inseparable part of their lives and can inform clinicians and researchers when considering interventions likely to be successful with this population.

KEYWORDS—Race, Racism, African American couples, Phenomenological approach

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Introduction

This article examines how a sample of Black American¹ couples viewed the significance of race and racial discussions in their couple therapy: they believed race was an omnipresent force that affected every aspect of their lives and their shared racial backgrounds provided a cultural understanding of how race informed their lived experience. Phenomenology explores the lived experiences of a phenomenon that all participants have in common to understand the essence of that experience from their point of view (Creswell, 2007). This framework was useful because it allowed these couples with a shared racial background to explore how race impacted them from their point of view and to share their perceptions of how race impacted the therapeutic process. It is important to understand how the couples made meaning of the impact of race whether or not race was addressed in their therapy.

Research demonstrates that Black American couples have the highest rates of partner distress, the highest rates of divorce, and the lowest levels of relational satisfaction as compared to all other racial groups (Bryant et al., 2010). For example, when compared to Mexican and White Americans, Black Americans experience poorer marital quality and greater risk of marital disruption (Bulanda & Brown, 2007). Black American marriages were also found less likely to endure when compared to other ethnic groups such as White, Hispanic (any race) and Asian (Kreider & Ellis, 2011). Despite these findings, there are limited couple interventions that have been designed to address the needs of these couples. Moreover, cultural contextual findings, such as those demonstrating the moderating effect of race between attachment style and infidelity in African American participants (Parker & Campbell, 2017), warrant the responsibility of researchers to test claims of universal effectiveness of interventions, developed on non-representative samples. Nonetheless, some researchers assert that empirically validated couple models, such as Emotionally Focused Therapy for Couples (EFT) are founded on universal theories, such as attachment, can address relational distress across different cultures even without attention to ethnic or cultural differences (Wiebe & Johnson, 2016). A closer review of the populations that have been studied reveal that most studies are conducted on primarily white, middle and upper class couples (Greenman & Johnson, 2013). Contrary to these assertions, a growing body of literature argues that for Black American couples, race and culture matter (Bent-Goodley, 2017; Bryant, et al., 2010).

These scholars posit that negative racial experiences are cumulative and create a racial stress unique to Black Americans that make them especially vulnerable to relationship distress (Nightingale, Awosan & Stavrianopoulos, 2019). Some examples of this unique vulnerability include: the exacerbating effect that racial discrimination has on experiences of Intimate Partner Violence among Black American couples (Al'Uqdah, Maxwell & Hill, 2016); the negative relationship between levels of reported racial discrimination and risk of psychological and physical aggression, relationship instability and relationship dissatisfaction in Black American couples (Lavner, Barton, Bryant & Beach, 2018); and the potential double burden of race-based stress—and therefore lower levels of reported mental health—for Black American wives, due to the role of providing racism-specific support (RSS) to their husbands while also coping with their own race-based stress (Smith, Williamson, Branch & Fincham, 2019). Due to nuanced experiences of Black American couples, scholars have found that empirically validated interventions that fail to address the contextual factors of ethnic minorities' lived experiences risk neglecting pertinent aspects of the Black American couple experience in couple therapy (Parker & Campbell, 2017; Smith, Williamson, Branch & Fincham, 2019) or worse, reiterating the message that suppression of one's own racial experience is necessary for survival (Hardy & Awosan, 2017). What is missing is how Black American couples view the significance of race and racial conversations and how do they think these concepts impact their therapy.

For decades, couple research focused on the behaviors of white couples and used their relational patterns as a standard from which to compare relational patterns of all other couples (Awosan & Opara, 2016). In these comparison analyses, African American couples were pathologized when they failed to meet the standard (Chambers & Kravitz, 2011). Thus, the consistently poor showing of Black couples led some to conclude that the problem with African Americans might be indicative of higher levels of individual pathology (Amato, 2011). Scholars argue that this distorted view masks the racial oppression that exacerbates relational problems for Black couples (Johnson & Losococco, 2014). In reaction to the “Black marriage crisis”, or “Black dysfunctional relationships”, policies, programs and myriad “fixes” have been promoted including “effective relationship and marriage education programs” (Bent-Goodley, 2017) to ostensibly “close the gap” in marital quality between Black couples and their white counterparts (Amato, 2011).

However, Black scholars have rejected the comparative analyses and found that for Black couples, race matters (Bryant et al, 2011).

Race scholars assert that racial oppression is an organizing principle that affects every aspect of African American life, including one's intimate relationships (Hardy & Awosan, 2019), not the least of which are their intimate relationships. The cumulative amount of racial stress amassed over a lifetime, does not dissipate once adults enter into a relationship. Research has demonstrated that racial stress for African Americans uniquely exacerbates the problems all couples face including arguing, fighting, parenting, and struggles with managing finances. (Awosan & Hardy, 2017; Awosan & Opara, 2016; Johnson & Loscocco, 2014; Bryant et al., 2011). Nightingale, Awosan & Stavrianopoulos (2019) argue that the need to address the impact of racial stress on Black American couple functioning is so critical, that failure to do so may border on malpractice.

Distressed Black American couples are more likely to seek support from religious leaders, family and friends than mental health professionals because of historical mistrust of medical professionals or general cultural mistrust (Davey & Watson, 2008; Vaterlaus, Skogrand & Chaney, 2015). This distrust sometimes stems from fear that clients will be judged by white clinicians who question whether clients stories of negative racial experiences and ongoing oppression are real or exaggerated (Nightingale et al., 2019). The therapist that assumes race plays no role in their relationship may miss a critical part of the lived experience of the couple and may unintentionally blame couples for their reacting to situations over which they have no control (Nightingale, et al, 2019). Additionally, if the clinician does not address these issues for Black American couples, the intervention may miss critical social and personal concerns that significantly impact relational functioning (Chambers & Kravis, 2011:Smith, Williamson, Branch & Fincham, 2019).

While the literature highlights the therapeutic significance of addressing racial issues, what remains unclear is how couples perceive the significance of race and/or racial conversations? Do couples believe addressing race is an important part of the treatment and does this change depending on the race of the therapist? This phenomenological study aims to answer those questions. We explore Black American couples' perceptions of the significance of race and racial conversations to their therapy.

Method

Recruitment

Approval from the Institutional Review Board at the first author's affiliated institution was obtained. This institution also provided research space for data collection. Participants were recruited using a flyer, presentations at local places of worship, and word of mouth. Recruitment materials described the research as a study about how African American couples consider the impact of race in therapy and verbiage about how the study would be conducted (i.e., interviews with both members of the couple). Couples met eligibility criteria for the study if: (a) both members of the couple identified as Black or African American, (b) the couple was comprised of one man and one woman, and (c) the couple had previously attended couple therapy or counseling. Notably, couples could have received formal therapy from a mental health provider or counseling through their religious institution.

Participants

Recruitment efforts resulted in a sample of five Black American couples. The couples varied in age, marital status, and length of relationship, educational background, and number of biological children. Demographic characteristics for the sample are presented in Table 1. Importantly, one of the five couples received their couple therapy from the first author; however, the course of therapy ended several months before the interview for the current study.

Procedures

Data collection consisted of conjoint semi-structured dyadic interviews (Guest, Namey, & Mitchell, 2012), which were audiotaped via digital recorder and lasted approximately 45 to 60 minutes. The first author (a Black American woman) served as the interviewer. The questions within the interview were derived from the literature on Black American couples as well as consultation with expert scholars in the field on these same topics. Examples of the types of questions asked were: (a) how do you think race affects your relationship? (b) Did race have any impact on your decision to seek therapy?; (c) Was the race of the therapist important to you?; and (d) Do

Table 1. Descriptive Statistics of Dyadic Interview Sample

| <i>Couple</i> | <i>Sex</i> | <i>Age</i> | <i>Years Together</i> | <i>Children</i> | <i>Educational Status</i> | <i>Relationship Status</i> | <i>Length of Couples Therapy</i> |
|---------------|------------|------------|-----------------------|-----------------|-----------------------------|---------------------------------------|----------------------------------|
| 1 | F | 24 | 5.0 | No | Bachelors; Some Graduate | Committed Relationship/ Cohabiting | 14 sessions |
| | M | 23 | | | Bachelors; Some Graduate | | |
| 2 | F | 40 | 9.0 | Yes (5) | Master's Degree | Married | 10 sessions |
| | M | 37 | | | Some College | | |
| 3 | F | 35 | 8.5 | No | Some College | Married | 20+ sessions (ongoing) |
| | M | XX | | | XX | | |
| 4 | F | 57 | 37.0 | Yes (2) | High School Diploma | Married | ~15 sessions |
| | M | 62 | | | Some College | | |
| 5 | F | 34 | 11.0 | Yes (2) | Master's Degree | Married | 6 sessions (ongoing) |
| | M | 41 | | | Some College | | |

Note. F=Female, M=Male; Unable to get demographic information for Male in couple #3

you think it important to talk about race in therapy? Probes and follow-up questions were used for clarification of participant's responses. Depending on couples' experiences, some questions were modified to be hypothetical in nature so as to still capture perceptions of the importance of race in the couple and in therapy. In addition, care was also taken to ensure that both partners were given an opportunity to speak on a topic if they desire. This was often by using the probes "how do you see that?" and "anything else to add?" Each couple received a \$100 gift card at the conclusion of the study.

Data Analysis

The semi-structured interviews were audiotaped, transcribed, and analyzed, with personal identifying information removed from each transcript. Data analysis progressed in the following manner: First, the authors read each transcript independently, making notes in the margins of each manuscript to elicit ideas for emergent codes. In addition, brief memos were completed after each transcript to note broader themes and patterns (Saldaña, 2016). Next, the authors met to discuss their notes and memos, leading to identification of major themes and subthemes. Following this meeting, transcripts were read a second time, with themes in mind, and textual support for these themes and subthemes were placed in a shared document. The authors then met for additional round of discussion regarding both the emergent themes and the textual support for those themes. Notably, all coding occurred using paper-and-pen methods, consistent with the *Coding Manual for Qualitative Researchers* (Saldaña, 2016). Notably, this coding process resulted in several subthemes, some that pertained to the couple (e.g., “partner as a buffer”) and others that pertained to the therapist or the therapeutic process (e.g., “Self-censorship”). Notably, there were two overarching themes that nearly every couple described whether referring to the couple or the therapeutic process. These major themes were “the omnipresence of race” and “significance of a shared cultural understanding”. These major themes are presented first, followed by the context-specific (couple or therapy) subthemes.

Data Validation. Validation is an important aspect of qualitative research but differs dramatically from indices of validity used in quantitative analyses (Creswell & Plano Clark, 2011). Research supports the use of dyadic interviews as a form of validation and triangulation (Eisikovits and Koren, 2010; Morris, 2001). By having both partners comment on the importance of race in couples’ therapy, discrepancies are identified, explored, and captured in the moment. However, as an added form of data validation, we also presented disconfirming evidence for the themes that were identified.

Findings

Analysis of the transcripts revealed two overarching themes that framed the discussion for all couples (n=5): a) Race is a ubiquitous force that is omni-present in the lives of Black Americans and touches every aspect of Black American life, and b) The lived experience of being Black provides a

shared cultural understanding of racism and how it impacts people of color. These two themes were present whether the couple was talking about their relationship, the therapist or therapeutic process. These couples described race as always lingering in the background informing conversations, thoughts or actions even when it was not directly addressed. For them, the impact of race is not something to consider *after* discussing a topic—like their relationship, but it is intertwined in how they see and experience life, at work, at home, and in their intimate partnerships. They viewed race as an organizing principle of their identity that cannot be ignored. Consequently, having a partner who was also Black provided a shared understanding of what it is like to live in Black skin. This appeared to serve as cultural shorthand eliminating the need to describe in detail why racial experiences mattered when talking to each other. Couples extended the importance of this cultural shorthand by preferring Black therapists who they believed would “get it” and not judge, doubt or question their racial experiences. What follows is an in-depth description of each of these themes and resulting subthemes related to the couple relationship dynamics and the therapist/therapeutic process. We note that we present these themes separately for clarification, however, the couples’ real world racial experiences are not as neatly categorized. Many of the participant descriptions are fluid, overlapping and connected. Thus, the same experience may fall into more than one category.

Race is a ubiquitous force that is omnipresent in the lives of Black Americans and touches every aspect of Black American life.

The subthemes that emerged unique to the couple relationship included partners leaned on each other to manage negative racial experiences they had outside the relationship, and the intersection of race and gender often defined relational roles. All participants (n=10) believed that negative racial experiences were common for Black people. Every couple described multiple micro-aggressions they experienced on a regular basis, with the common theme of being ignored or talked down to by white strangers in public settings (like grocery and department stores) while observing that white people and other (non-Black) minorities were acknowledged. Others described blatant racist remarks and actions being ignored, minimized or excused even if it was directed at children in a school. One woman remembered her experience in the 4th grade

when her family had moved to Alaska for her father's job and she was the only Black child in the school. At the time, she had braids in her hair and was brutally teased by the other children while teachers and administrators looked on without comment. Couples reported these types of experiences in a variety of settings, however, four of five couples described the workplace as a particularly oppressive environment for unchecked racism.

I worked for the company for almost 15 years. I was passed over for a promotion 3 or 4 times and it was always given to a white male even though I was the one with the experience. Even other white men said "she should get it." I was still passed over, and over again. I did everything possible like, 'Hey, I'll do twice the job at less money', and they still wouldn't give it to me. It got really bad towards the end and I don't think I realized how much stress it was [on me] until I wasn't working there. (Couple 2, female age 40)

Her husband remembered feeling "powerless to protect her." (Couple 2, male, 37). He would often tell her to quit or threaten to "come up there to tell them not to treat my wife this way." His wife, sighed and said, "Yes, and I told him not to because I needed to work." Couples (n=4) described being treated unfairly, being targeted for behaviors such as taking breaks, sick days or vacations that went unquestioned by white colleagues. One female partner said that a white female colleague "took off a whole summer because she was stressed, and nobody questioned it. Meanwhile, I couldn't catch a cold." (Couple 3, female, 35)

The only couple that did not report negative experiences were full-time graduate students who had never worked full-time. They attended two different predominantly white universities, but both reported negative racial experiences on each of their campuses. Both reported being careful to control their emotions in the classroom and with their peers.

I feel angry, but I can't get as angry as I like, because I don't want to give them the satisfaction {of saying} 'oh, she's just an angry Black girl'. But, sometimes I am an angry Black girl, but I can never be fully angry because I don't want to go to jail, or get labeled. (Couple 1, female, age 24)

This couple reported that they frequently heard racial stereotypes being used by professors and by their peers on campus, particularly white students, but were most surprised at hearing racist remarks from non-Black minorities.

As a result, they described sharing their racial experiences with each other as often as “6 times a day.”(Couple 1, male, age 23). Race and racial experiences consumed a large amount of the time that this couple spent with each other even though they had limited time together because of the rigor of their respective studies. The male partner described race as being “always present” and lingering in the air between them.

One couple described how their different skin colors dictated the different ways in which they saw themselves and were treated by others. The male partner has a deep dark chocolate brown complexion and said that his nickname was “darkie” and “blackie” and that his skin color defined how he saw himself for much of his life. (Couple 4, male, age 62)

I heard that until you are the blackest in your own Black class, then you don't know what struggle is. I kind of took that personally. So, it has always been a part of me until I got really culturally aware. But for me, to a certain degree I also think it filtered into, you know some deep mindset . . . I've always been attracted to light skinned women. When you're that dark, so you're going to be with the closest thing to Caucasian, so I think that was there. (Couple 4, male, age 62)

His wife is very light with green eyes and had a very different experience.

I went to a school that was all Black, so it wasn't a big deal, until I got to middle school and got in fights with girls trying to pull my hair out and a boy who liked me because he thought I looked like Barbara Streisand. My mother's mother and all the siblings, everybody was fair. Everybody had light eyes . . . all I saw was my cousin, except for one cousin who was dark and her mother gave her away at birth. When she asked her mother on her dying bed, 'Why did you give me away?' She said, 'because I didn't want your black you know what'. As for my husband and his skin complexion, I never really thought about it. He didn't think I looked like Barbara Streisand, so I liked him. We've been married 34 years, so I guess I like dark skinned men. But, I have not had some of the negative experiences my husband has. (Couple 4, female, age 57)

At least one member of each couple remarked that racial tensions have been inflamed by the current political administration's conservative shift in national politics and apparent endorsement of white nationalism. In couples

where one of their children is male (n=3), all of the mothers express fear and concern about police harassment and/or violence against black men.

You can tell them all the right things and they can be doing all the right things, and still, If it's a bad cop, he's a bad cop. He wants to make a name for himself or whatever and they can shoot you, beat you, whatever and you didn't do anything wrong. You know that's always in me. (Couple 3, female, age 35)

The lived experience of being black provides a shared cultural understanding of racism and how it impacts people of color.

All of the couples (n=5) described the comfort of being partnered with someone who was also black and the ease in which they could talk about their negative racial experiences without having to explain themselves. They described using their shared racial background as cultural shorthand for understanding the impact of racism without much explanation.

I think us both being Black, it's sort of gets rid of a lot of conversations, like a lot of explaining things. So, I don't have to explain why I'm upset with someone [white]. I can just say what happened and she just gets it. (Couple 1, male, age 23)

Some participants felt supported when the partner joins in their anger.

[My partner] is a perfect friend to talk to when you're angry about something because we both can be angry, but then he gets angrier than me. And I'm like, yes, someone else is angry. And they see why I'm angry. I don't want to take up arms . . . I can just talk about it, even if everything does not have a solution. (Couple 1, female, age 24)

Another participant agreed with this sentiment. "It's like a release, we don't have to carry it because we can go home and talk to the partner." (Couple 3, female, age 35)

Although couples used each other as a buffer to "unload" (n=4) but even an understanding partner with a shared racial history was not always enough to blunt the effects of persistent negative racial experiences. A few couples (n=3) admitted that the racial stress overwhelmed them and on oc-

casation they did not share their experiences. One female partner concluded that the cumulative effect of daily micro-aggressions sometimes interfered with “little things, like who will wash the dishes.” (Couple 2, female, age 40) One couple, who met at work described their shared experience in the workplace.

When I worked in corporate America, I always felt like I could easily be on the chopping block because I was black. Always having to be on. Like how we talk, even to coworkers. You have to speak a certain type of way. You have to dress a certain type of way. You can't have your hair certain type of way . . . it's exhausting! (Couple 2, female, age 40)

Her male partner adds, “I was actually good at that. I was good at keeping up the expected black happy guy, not saying anything too edgy. I didn't sell out or anything, but I didn't give anyone anything bad to say about me. Because we wanted to keep my job.”(Couple 2, male, age 37) His wife sighed, “Yes, when [black] people were 100% themselves, dressed a certain way, or talked a certain way, some of them got fired.”

Couple Specific Subthemes

The intersection of race and gender defines relational roles. For some couples (n=3) the intersection of race and gender defined their relational roles. Couples (n=2) talked about how black women are looked down on for being “strong” or “talking too much” and how unmarried women are “looked down on”, even though they acknowledge that “many black women are raising children.” Couples (n=4) explained that white people harshly judge black women who are “expressive”, and negative characterizations of “loud black women” are reinforced in the Black community, especially Black men.

According to the literature, Black men hold on to the patriarchal ideal that casts men as providers and women as caretakers of the children more so than any other racial group (Johnson & Losococco, 2014). However, one couple described the negative pushback from other Black people when they decided that the female partner would leave her paid work to stay home with their newborn. Later when they sought support for relational problems, not related to finance, they were told by family and friends they had “white people problems.” (Couple 5). The couple described this as being concerned with the relationship when they had no economic concerns. However, due to the couple's ability to uphold traditional gender roles regarding

employment, family and friends perceived their *relationship* problems to be insignificant, in light of a privilege that is more often afforded to White people. They had a difficult time explaining why an educated, able bodied black woman was choosing not to work. They offered that, at one point, they wondered if a Black therapist would downplay their relational problems, as their family members did, because they were economically secure. Although this couple's experience seems to contradict research findings about patriarchy and Black men, this might partly be explained by Nightingale et al.'s assertion that Black men's thinking often does not align with the reality of black life (2019).

These couples suggest that race is always a factor, whether or not the therapist considers it significant to the intervention. We now turn our attention to how couples viewed the impact of race on the therapeutic process.

Therapist/Therapeutic Process-Specific Subthemes

The main subtheme that emerged uniquely with regard to the importance of race in therapy centered on the impact of race on "Trust and Fear." Couples described the role of historical mistrust in impacting engagement with therapy within the Black American community. Also subsumed under this subtheme were several instances of how the race of the therapist could negatively impact the couple therapy process in terms of how comfortable the couple felt (or would feel hypothetically), as well as potential solutions for navigating this discomfort and mistrust.

Cultural stigma around therapy. Couples (n=2) discussed a sense that there remains a cultural stigma around seeking therapy, both generally, and in the specific instance of relational issues. For example, one partner noted simply, "I was against therapy. We don't need no therapy." (Couple 5, male, age 41). Another remarked on acknowledging stigma around help-seeking for couple therapy, while still seeing her own attendance in couple therapy as "breaking the cycle":

I know black people don't go to therapy. We have uncles and grandparents that are scared to, who have rocky marriages, or they go through a lot of stuff. If they would have gone to therapy at any point in their life, maybe talk . . . maybe that would be helpful and prevent a lot of issues. So I felt good we went. (Couple 1, female, age 24)

Trust and Fear. Even when cultural stigma was not mentioned directly, couples (n=3) spoke to a potential sense of being judged or seen in a ste-

reotypical manner. Notably, this fear of judgment of stereotyping was often seen as the converse of feeling of a shared cultural experience and was often discussed as a reason as to why the importance of having a Black (or minimally, a non-black minority) therapist was important. The notion of judgment referred to a couple's concern that a white therapist may find some fault in the way Black couples lived. Importantly, as was mentioned earlier most partners and couples did not feel that there would be the same or similar level of judgment if any at all from a therapist that shared the same racial background as the couple.

For me, it was just that I could not see someone from the predominant culture trying to identify with my particular situation. In order to counsel me on something you would have to have lived some of my experiences. So, I just could not see sitting down with someone from the predominant culture and discussing African American issues. (Couple 5, male, age 41)

While discussions around judgment seemed to stem from individual interpretations or extrapolations of one's behavior, the code of *stereotyping* concerned the notion that there a collective notion of what blackness or being an African American meant based on what was discussed in the therapeutic context. Notably, a desire to not want to confirm or disconfirm racial stereotypes or re-live racist experiences encountered on the job.

Sometimes subconsciously, when you are talking to someone of a different race, you don't want them to look down on you based on some of your challenges and shortcomings . . . as black people, we can talk to each other about anything. (Couple 2, female, age 40)

This female partner described how white people are portrayed in the media as doing things "in order" (e.g. graduating from high school, going to college, getting a job, getting married and having children). She feared judgment of Black families because "that's usually not the order in which we do things. If I had my children young, and I wasn't married, I don't know how comfortable I would be." (Couple 2, female, age 40)

Self-disclosure/self-censorship. Perhaps due partly to fears around judgment and/or stereotypes, all couples discussed either a real or hypothetical need for censorship of themselves, either in regards to the comments that were made (jokes or the types of contacts) that may be brought in to the therapeutic room. Importantly, this feeling around apprehension for self-disclosure and censorship even extended to potentially relevant material for

the relational healing process. Finally, perhaps in a proactive attempt to mitigate these concerns around judgment stereotyping and censorship some members of the couples also discussed or considered a process described as vetting of the therapist. For example, some articulated this vetting would take the form of accessing perceived cultural competence that a therapist has for their ability to hold their experiences as valid or to “get it”.

If I'm going to talk about my innermost self, and lay it all out there, I feel more comfortable in dealing with an individual whom I have seen all my life and who has been a part of all my life. So, and then being so Afrocentric I just couldn't see me opening up to somebody who did not look like me. (Couple 2, male, age 37)

Another added, “I just know for me, it would be one of those things where you may not be as open to share.” (Couple 5 male, age 41.)

One couple having worked with a white female therapist, then a black female therapist, shared why they preferred the black female.

She is very relatable. I don't feel the need to hold back, even if it's something I'm not proud about. Because when you are talking to another Black person, you know they are not judging you based on your color. I know she doesn't have preconceived notions about us already. (Couple 5, female, age 34)

Some couples (n=3) described speaking freely with Black therapists without thinking about what they were saying. Another described talking to white therapists in the same way they talked to white co-workers. “I'm not going to be like free- she might think I'm ghetto. I have to talk like I have that degree.” (Couple 2, female, age 40) Her husband talked about censoring what he said. “After the session, they might look down on us and all that. So, I might sugar coat it to see if this therapist is really for us.” (Couple 2, male, age 37). Although this male partner also admitted that he would self-censor even if the therapist was black. “I'm not going to tell my whole background. I didn't tell the black therapist. I picked the truth I wanted her to know.” This man explained that it is a code of the “street” for black men to keep some things to himself, especially if those things made him look “weak.”

Racial vetting At least one member of all couples (n=5) considered race as a primary factor for choosing a therapist. Some couples (n=3) had more power to choose their therapist than others because of the constraints of their health insurance and who was available in certain communities. Sev-

eral couples expressed that they wanted a black therapist to avoid having to explain how negative racial experiences impacted their lives. Others were concerned that white therapist would think them “too sensitive” to issues of race.

I would have to explain . . . that’s why my mom was this way . . . or that’s how my grandmother is . . . it would be too much. Like [a white female therapist] wouldn’t understand the cycle whereas a black therapist would. (Couple 1, female, age 24).

However, whether they could chose by race or not, all couples discussed the race of the therapist as a potential concern. “I want somebody that I can relate to . . . we would be talking about how we were treated and stuff like that and I didn’t want to have an extra component, having to explain.” (Couple 3, male, age unknown). Some couples (n=3) said that if they were forced to have a white therapist, they assumed that a white woman would be more understanding of their racial experiences than a white man. Couples who chose to work with a black therapist were asked if, on reflection, they think they could have worked with a white therapist.

I don’t know that a white person would have been able to relate to some of the issues we had . . . it would have been a conflict. Just because either the language that we use or the situations we’ve gone through that someone that’s not black would not be able to possibly relate to. (Couple 3, female, age 35).

Other couples considered “testing” a white therapist “I probably had to get a session to see. The questions, how they would view us. How they’re talking to us. How they’re taking how we are talking to them.” (Couple 3, male, age unknown). Another couple had not considered the race of their therapist in advance as they were referred by their church and assumed that the therapist would also be black. But, after considering it, one woman thought it would have been a problem. “I think there are some experiences that are unique to African American couples and I would prefer to be counseled by someone who has gone through it or is in it and can speak to those experiences.” (Couple 2, female, age 40). “It’s about trust. Trust in that the information I will share with my brother or sister will held in a certain level of respect and dignity. When we first went . . . there were some questions

I asked . . . some scenarios I created, that when they feel okay, I see where you're coming from." (Couple 5, Male, age 41).

Discussion

We explored Black American couples' perceptions of the significance of race and racial discussions in therapy using a phenomenological lens. Qualitative data analysis revealed two major themes: Couples believe that race is an omni-present force that affects every aspect of their lived experience and having a partner that is of the same race provides a shared cultural understanding of the impact of that lived experience. Results from this study suggest that race matters in the therapy room whether or not the therapist considers it to be significant and whether or not the therapist engages in racial conversations. The couples talked about race—a lot. The sheer volume of racial discussions within couple relationships for most of the couples demonstrates fairly conclusively that this contextual factor is a substantial part of their lived experience. This study confirms previous research that concludes that race impacts all facets of Black American life including intimate partner relationships (Awosan & Opara, 2016).

Race as an Omnipresent Force

Our study found that for these couples the workplace appears to be a place where couples encountered some of the most egregious experiences of racial oppression. This is an important finding—given that most Black people work. The couple's descriptions of disparate treatment spanned the range from being passed over for promotion to enduring daily micro-aggressions from bosses and co-workers. One of the most striking aspects of the negative workplace experiences are the female partner's efforts to control their emotional reactivity for fear of the "angry Black woman" label. Even the one non-working graduate student talked about learning to avoid this label—on campus and before she enters the workplace. The "angry Black woman" is a label that has been used historically to silence Black women and to "keep them in their place" (Watson, 2013). According to the literature, it is these efforts to control seething anger from negative experiences that gets redirected to partners at home (Nightingale, et al, 2019). Additionally, the powerlessness described by one male partner at his inability to protect his wife's workplace racial harassment may highlight his inability to fulfil his

patriarchal role of “protector” that researchers have found to be problematic in many Black relationships (Stanik & Bryant, 2011).

Race Provides a Shared Cultural Understanding

Couples in our study believed that sharing the same race of their partner provided a shared cultural understanding that serves as a type of shorthand for their lived experiences. Several couples talked about unloading their negative experiences without having to “explain” how those experiences made them feel. The ability of the partners to “get it” served to buffer some negative experiences even when they admitted nothing changed. Many couples found comfort in knowing that their partner may have had similar experiences.

This sense of shared cultural understanding was extended to working with Black therapists. The couples believed that Black therapists would not judge their imperfect lives in the ways that they assumed white therapists might. Additionally, couples described the pain in needing to explain Black life to therapists they thought might see their experiences as confirmation of negative Black stereotypes. Additionally, some couples discussed needing to speak in the same careful and constrained way with white therapists that they speak in the presence of white co-workers. Many couples admitted that they would edit and “sugar coat” what they shared with white therapists.

Conclusion

Race matters to these couples. It matters in their lives and should matter in their therapy. This study contributes to the small but growing body of literature that presents African American couples as a unique group with unique needs. While the small sample size and the qualitative nature of this exploration limit generalizing our findings, we assert that the findings are meaningful in that all of the participants in each of the couples underscored that race is an important part of their lives. It is also instructive just how much these couples talk about race and negative racial experiences, either their own, those of people they know or those they witnessed in media. It would be naïve for clinicians working with this population to assume that race does not matter to the therapeutic intervention. Embedded in this position is an unspoken assumption that therapeutic interventions are “colorblind”

even though few, if any, have been created for or tested on diverse populations. This renders race unimportant and elevates process over authentic understanding of clients' lived experiences. The couples say otherwise. They have made it clear that building a successful therapeutic relationship depends on the therapist's ability to meaningfully address race as a part of any intervention. We assert that researchers and clinicians alike have a responsibility to test the idea of universal interventions, by seeking results from universally representative samples. Black Americans and other minorities, at varying locations of intersectionality, are most often underrepresented in research and therefore, the nuances of their lived experiences cannot possibly be accounted for as we move forward with the development of evidenced based interventions. Due to the risk of harm and neglect of client care, evidenced by past research as well as the voices of Black Americans represented in this study and others, an assumption of universality is less than due diligence. Race colors the human experiences of our clients in every aspect of life and the therapy room is not exempt. We acknowledge that our sample was recruited mostly from one Black church in Philadelphia. Future studies might benefit from the perspectives of a more diverse group of Black American couples.

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Note

1. In this paper, Black American refers to individuals from the African diaspora (e.g., African American, continental African, Afro-Caribbean, Afro-Latinx) residing in a U.S. context.

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