

# **MULTI-CULTURAL PSYCHOLOGY, COMMUNITY MENTAL HEALTH AND SOCIAL TRANSFORMATION**

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## **ABSTRACT**

Computer technology has revolutionized almost every facet of global society. The world wide web allows unprecedented exchanges of ideas around the world, and every discipline has been affected, including psychology. Exchanges with psychologists from other cultures has inspired discussions about the failure of psychology to champion human values and the empowerment of the poor and oppressed. Latino, African and Asian psychologists envision a discipline devoted to human liberation and the creation of a new person in a new society. These discussions are in response to what many psychologists see as the increasing use of psychological knowledge to manipulate and oppress. Psychology, they say, should be used to address human needs and promote social justice. They challenge psychology's traditional focus on minor reform because enhancing human welfare demands fundamental social change. This critical essay examines the role of psychology in mental health — both theory and clinical practice. It identifies the essence of psychology as a science devoted to individual and social transformation and suggests one approach to this fulfilling this responsibility.

### LIBERATION PSYCHOLOGY

The work of Martin-Baro, former Vice-Rector and Chair of the Psychology Department at the University of Central America in San Salvador, has greatly influenced this movement. Martin-Baro was a major force in the field of liberation psychology. Allegedly assassinated in 1989 by right-wing Salvadorian troops, he was very critical of the failure of the social sciences to address contemporary social problems. A Jesuit priest, Dr. Martin-Baro earned his Ph.D. from the University of Chicago and devoted his life to the struggles of the poor in El Salvador. Psychology he thought had become blind to many structural determinants of individual and group life. Psychology he argued has served, directly or indirectly, to strengthen oppressive structures by drawing attention away from them and toward individual and subjective factors.

Drawing on famous Brazilian social theorist Paulo Freire and his (1970) concept of *conscientização*, the awakening of critical consciousness, Martin-Baro argued that if psychologists do not develop a critical consciousness that will move them toward a new emancipatory praxis, they will never be able to make a meaningful contribution to the real problems of human liberation (Hassett and Lacey 1991). *Conscientização*, as used by Paulo Freire, describes the process of personal and social transformation experienced by the poor and oppressed people of Latin America when they learn to read the surrounding reality and to write their own history. These tasks demand overcoming "false consciousness" and achieving a critical understanding of oneself, one's world and one's place in it.

The basic assumption of *conscientização* is that man's ontological vocation is to be a subject who acts upon and transforms his world, and in so doing moves toward ever new possibilities of a fuller and richer life individually and collectively. Knowledge is not true unless it has attached itself to the task of transforming reality. This reality to which humanity relates is not a static and closed order. It is the material used by people to create history, as they overcome dehumanizing forces.

Martin-Baro (1994) contended that psychology as a discipline has not been clear about the intimate relationship between a liberated personal existence and a liberated social existence. This has contributed to obscuring the relationship between personal

estrangement and social oppression. In this paper we will examine some criticisms made by the liberation psychologists, suggest possible solutions, and discuss some social and therapeutic implications of these criticisms for multi-cultural psychotherapy in the United States.

### CRITIQUE

The major criticism of the liberation psychologists is that psychology has for the most part ignored the effects of racism, sexism, class and noxious psychosocial environments on individuals. It has instead provided victim-blaming definitions that serve power interests and attempt to fix the inner nature of individuals rather than environments (Holland 1992). Political power, they argue is, a neglected issue in psychology and attitudinal change is given much more consideration than power redistribution although a multitude of disabling human conditions are derived directly from social factors. The liberation psychologists are also very critical of psychology's incapacity to explore the realities of the poor and disfranchised. They argue that the task of therapists is to achieve the restoration of alienated persons and groups by helping them attain a critical understanding of themselves and their reality. Psychotherapy, they argue, must take aim directly at the social identity worked out through noxious social environments and shape a new identity for people as members of a human community in charge of history. To accomplish this, they contend that therapists must advocate for social structures that foster human development (Martin-Baro 1994).

This is a theme echoed by American psychologist Edmund Sullivan in *A Critical Psychology* (1984). Sullivan argues that psychologists take structural relationships of power — such as capital over labor and men over women — and change them into intrapsychic phenomena. Thus, women's inequality in relation to men for example, can be seen as precipitated by a motive called "fear of success" (Horner 1970). Black children's inequality to whites can be seen as cultural deprivation, an "ideologization" of reality that winds up consecrating the existing order as natural. Sullivan thought it important to acknowledge that class relations have profound effects. Members of the dominant class experience life as agents, while developing a sense of agency is a difficult endeavor for members of non-dominant classes. Sennett and Cobbs support this position in

*The Hidden Injuries of Class* (1972), their attitudinal study of American workers. They allege that the hierarchical nature of social relations has significant personal costs that most psychotherapies have largely ignored. Sullivan argues, that power is distributed unequally over different social groupings and this inequality is reflected in rates of mental illness.

A review of decades-old literature does show substantial evidence that adverse socioeconomic and political circumstances inflict deep physical and psychological wounds (Catalano 1991; Elder and Caspi 1988; Jahoda 1988; Mirowsky and Ross 1989; Rutter 1988; Steele and Aronson 1995; Weisband 1989). Catalano published several studies linking disabling social structures to higher rates of child abuse (1981), behavioral disorders (1980), depressive symptoms (1994), alcohol abuse (1993), and suicide (1989). Bulhan (1985) inventoried a growing body of research literature that documents the disastrous effects noxious social environments have on African American people. Elder and Caspi (1985) studied the impact of drastic income loss on children and found that, although mediated by the child's characteristics and parenting behavior, economic hardship adversely influenced the well being of children. Mirowsky and Ross (1986) reviewed the research on social patterns of distress and found that the subjective quality of social conditions can be evaluated by mapping the relationship of feelings such as fear, anxiety, frustration, demoralization and hope to specific social conditions. These examples from the past support arguments for acknowledged links between disabling social structures and individual psychological malaise that the discipline has been unwilling to address.

Further evidence of the negative psychological effects of adverse socioeconomic conditions is also seen in anthropological research of the 1970s on the "culture of poverty-learned helplessness" as a prelude to more recent work on stereotype threat. Steele and Aronson (1995) suggest that negative social stereotypes can affect negatively the intellectual test performance of members of a stigmatized group, despite their economic status. This research indicates that whenever African American students perform an explicitly intellectual task, the threat of confirming or being judged by a negative social stereotype about their intellectual ability causes them to perform more poorly. Awareness of the negative stereotype, Steele hypothesizes, redirects

attention needed to perform the task to other concerns (self-concept threat), resulting in lower test performance.

Another body of literature has been devoted to examining the iatrogenic aspects of psychological and psychiatric practices in mental health settings and a common theme here has been the contribution and consolidation of mental illness through labeling (Brown 1985; Cohen 1990; Dean, Kraft, and Pepper 1976; Grusky and Pollner 1981; Morgan 1983; Walsh 1988). Labeling is intimately related to social control. Mental illness is a negative social evaluation of norm-violating behavior rather than a value-free disease process. Sullivan (1984) suggested that a critical orientation would take a different approach. Instead of treating individual symptoms and labeling them, therapists would be more effective if they became involved in policy development and community mobilization to make corporate interests sensitive to the needs of the community.

In summary the rationale of liberation psychology is drawn from the American Psychological Association (1994) which explicitly defines the goal of advancing the field of psychology as "a means of promoting human welfare." Therefore, it is an ethical obligation for psychologists to share their expertise when such involvement would be a benefit to society. If the research indicates a link between social structures and mental health, then therapists as advocates of human welfare must encourage the development of social structures that *serve people* and psychotherapy must become an instrument of social change and transformation.

The ideas of the Liberation Psychology Movement are not new. In their critique of psychology and psychotherapy however they often fail to distinguish between the many different theoretical frameworks of psychotherapy. For example, the existential and Gestalt psychotherapies have always been clear about the importance of self in context. There have also been many attempts in the past to make the discipline of psychology an instrument of social change. Adler, who helped develop the field of social psychology, was a major influence in turning the focus of psychologists to the importance of social variables. He stressed the importance of human society, not only for the development of individual character, but also for the orientation of every action and emotion in the life of a human being. Adlerian psychology did not permit its practitioners to function in

isolation from social reality. It demanded from the individual psychologist a commitment to the health of society and individuals. Adler felt that psychologists had a duty to speak out when irrational forces threatened to disrupt the orderly process of society or whenever the basic values of freedom, autonomy and self-determination were threatened by political movements or institutions. The psychologist, Adler argued, must defend rational values in an increasingly irrational world. He or she must identify pathology in the political process, whether it is manifested in the person of the leader or the movement he represents.

Another early social psychological theorist concerned about social transformation was Eric Fromm. He also argued that character affects and is affected by social structure and social change. Fromm believed that society by making demands upon humans that are contrary to their nature drives people into insanity, antisocial conduct or self-destructive behavior. Some efforts for social change have even come from prominent presidents of the American Psychological Association, notably Kenneth Clark (1974) and George Albee (1981, 1986, 1990). Other initiatives to employ psychology as a tool for social transformation include community psychology (Heller and Monahan 1977; Levine and Perkins 1987; Mulvey 1988; Rappaport 1977, 1981, 1990; Sarason 1982, 1984) and feminist psychology (Allen and Baber 1992; Hare-Mustin and Marcek 1990; Holland 1992; Kitzinger 1991; Morawski 1990; Riger 1992; Wilkinson 1991).

### **Self and Society**

The critical viewpoint of liberation psychology has a well-respected history within the discipline. The arguments have however become more sophisticated and are seemingly being supported by a growing body of research. What is new are the call to advocate for the poor and disfranchised and the inclusion of psychologists from other cultures in an enlarged dialogue. Another major difference is the radical psychologists' rejection of the notion of a supreme self, a key feature of current popular psychology because they argue that it helps in the preservation of the structural status quo (Cushman 1990). The supreme self is conceived of as an entity with magnificent powers. Both success and failure are attributed to it. Themes such as the possibility of self-improvement through self-help are based on the supposed existence of this inner supreme self.

The liberation psychologists, however, argue that this notion interferes with the critical scrutiny and possible transformation of social systemic causes of happiness and misery. In this world view, self supersedes the social system; therefore changes ought to come from the former and not the latter. Thus, self-interest is promoted through stressing self help instead of stressing the need to help others. This proposition has gained further support from observations of Third World psychologists on the behavior of colonized people who, by accepting the colonizers definitions of their problems ( eg., laziness, genetic inferiority, manifest destiny etc.) cease to oppose domination (Bulhan 1985). This argument of the liberation psychologists provides the active therapist today with valuable material to clarify the nature and direction of our loyalties and responsibilities. The liberation psychology movement raises five points that are important for the active therapist today:

1. **The importance of social context and the need to be sensitive to issues of gender, class and race.** When we apply the ideas of Martin-Baros and other multi-cultural psychologists to a U.S. context, it is clear that the deep divisions in our own social structure carry profound consequences for individual and social psychology but receive inadequate attention from psychologists or other social scientists.
2. **The need to attend to the poorer sections of our society.** Therapists have a responsibility to use psychological science in the public interest. We need to move from passive receivers of information to active agents in the process of critically evaluating and integrating knowledge. This means applying psychological science to public policy questions and becoming more involved in advocacy work in the public nterest.
3. **The need for American psychologists to end their intellectual isolation** (Sexton and Misiak 1984). Psychologists in the U.S. are often criticized for knowing too little about the progress of psychology in other countries. Psychologists need to learn that the model they see in the United States is not the only possible model and that basic assumptions about the nature of psychology are questioned

in other parts of the world. This exposure would help the discipline become more self-reflexive by incorporating the diversity that exists in our global village.

4. **The importance of being an agent for the client.** Thomas Szasz noted in *Law, Liberty, and Psychiatry* (1963) that if a psychiatrist tries to serve society and a patient simultaneously, society's needs generally take precedence unless he is constantly vigilant in protecting his patient's interest. It is very important that the primacy and importance of the basic therapist/client relationship not be lost in the often complex social situations that can arise.
5. Finally, if individual transformation occurs through the changing of one's external reality, as Paulo Freire and the liberation psychologists argue, then **therapists may need to be more active and conscious change agents in society.** Psychotherapy in the new millennium can play a greater role in promoting social change by designing interventions that enable communities to take control over environmental factors that impede individual development and growth. One area in which this is already happening is in the treatment of victims of child abuse, sexual abuse and domestic violence. As a rule, psychotherapies are shaped by the pathology that they must treat.

### New Directions

In *The Social Control of Mental Illness*, Horowitz (1982) contended that each major style of therapy naturally emerges out of the nature of social relationships in a particular society.

Within communal social groups, the style of therapeutic control tends to absorb the individual into the collective life. He argues the one-to-one relationship between therapist and patient characteristic of modern therapies is rarely found in non-Western settings.

The notion that mental illness is a problem rooted in the personality of individuals is a recent conception. Modern individualistic styles of therapy have developed within the context of social and cultural changes that are a unique feature of modern Western Societies. Foucault (1976) places this shift in Europe during the latter part of the 18th Century. To be effective, new therapeutic



paradigms for this millennium must establish a focus that connects people directly in human and practical ways.

As indicated above, research suggests that mental illness is not a culture-free phenomenon. The tendency to label an individual mentally ill varies directly with the cultural distance between the observer and the actor and successful psychotherapy occurs within a narrow cultural space. As the cultural distance between therapists and patients increases, the conditions for cooperative change diminish. Psychotherapeutic relationships are only likely to emerge when therapist and patient share a common cultural space (Horowitz 1989). The providers of psychotherapy in contemporary American society usually come from a narrow cultural and social class base, and they enforce whatever is considered the standard of meaningful reality in their own group. There is a critical need to broaden the cultural-therapeutic base if American psychology is to become truly multi-cultural. It must develop communal models and social interventions if it is to address the needs of the oppressed, cultural minorities and the poor.

The key element in liberation psychology has been the absence of a practical therapeutic method of reconnecting people. An approach, which may address the gap between psychological vision and social actualization, is the prescription of community service as a therapeutic intervention. Our hypothesis is that community service if structured properly is healing because it fosters ontological experience.

### **Community Service As Therapeutic Intervention**

The utility of service as a teaching tool is well documented in the literature. Combining service and learning in the field of education is again experiencing a resurgence after a decline of the community service movement of the 1960s and 1970s. The new initiative in service learning is promoted by the National Society of Internships and Experiential Education created under President Clinton's bill National Service Commission and AmeriCorps. The basic proposition for combining service and learning is that experience is the best teacher. The most comprehensive compilation of research on the benefits of service learning is *Combining Service and Learning: A Resource Book for Community and Public Service* published by the

National Society for Internships and Experiential Education (1990). Our present focus is on the use of service as a therapeutic technique available to the therapist as an intervention in psychotherapy. The rationale for involving clients in community and public service as a therapeutic technique is similar to the rationale for combining service and learning.

1. Service provides new perspectives from which to analyze oneself and one's world critically.
2. Service offers an opportunity to immerse oneself in new situations that reveal and address unmet needs and face new challenges.
3. Service demands that the individual act on previously underutilized parts of themselves.
4. Service is a way to gain affirmation from others
5. Service also a way to work through social wounds and issues surrounding culture and race
6. Service reveals truths that are both joyful and disheartening
7. Finally, the greatest power of service is that it reveals that one is not powerless, that a contribution can be given and a difference can be made.

Other lines of research have for some time established the positive impact of service on ego development, self concept, individual and social adequacy, and psychological orientation to other people (Sprinthall 1974; Usher 1977; Robinson 1975). Service may also provide an opportunity for therapists to evaluate a patient's conflict areas. The therapist's leverage and impact might be greatly increased because he or she is working with first-hand material that manifests itself during the service experience. Patients may also learn how their behavior is viewed by others, how they create their own victimization, how they avoid decisions, how their behavior makes others feel, how their failures to wish, decide, choose, and will can create limitations. It allows the client to set concrete action-oriented goals which may increase the patient's sense of responsibility for individual change. It also may help clients confront the fact that life is sometimes unfair and unjust; that there is no escape from some of life's pain; and may help clients develop a sense of potency through social action. Yalom (1980) identifies this as a strong argument for

using service as a clinical strategy to liberate the clients' will and their sense of authority over their lives.

Community service may also be an excellent setting to analyze miscarried relationships. The great diversity of feedback that one gets during the service experience may be far more powerful and informative than sporadic feedback from other sources. In most psychotherapy systems, it is important to investigate that client's relationships with others. Through relationships, clients will display their interpersonal pathologies and thus enable the therapist to use this information. The service experience, if carefully structured to be therapeutic, may give that client an opportunity to try out new modes of relating. Real relationships with real people can be healing and meaningful. Our argument would be that one is altered by the service encounter. In fact, service has been used in Eastern spiritual traditions for many years to foster spiritual growth and development. Learning to extend oneself to others in an authentic, need-free fashion may assuage social alienation and transform the individual and his or her community. The following ode by the ancient Indian mystic Rabindranath Tagore captures this Eastern attitude:

I slept and dreamt that life was joy.

I awoke and saw that life was service.

I acted and behold service was joy!

The service experience alone however does not guarantee either significant learning or healing. The service experience must have built-in structured opportunities for the client to think about and process their experience with others. Purpose, planning, preparation, care and effort are some of the needed ingredients. This reflective component is probably most useful when it is intentional and continuous throughout the experience and provides opportunities for feedback from the therapist besides the people served and the program leaders. The therapist should stress engagement rather than exposure. Detailed, explicit and comprehensive personal and social objectives are essential.

Finally, the service process would have to be designed to be demanding not only intellectually but emotionally. Clients should be asked to think about difficult social problems, personal feelings and the helping experience. The therapist must be creative in supervising the experience and should strive to enhance interpersonal

skills, like sensitivity to others, and active engagement with responsibilities. The ongoing reflective discussions between therapist and client, we think, could build social, and multi-cultural perceptiveness and an ability to listen with an open mind both to the experience one is in and to others. The therapeutic goal would be to nurture a positive and empowered relationship with society and a greater existential awareness. It is therefore important not only for the therapist to provide a clear structure in the beginning of the therapeutic process but to allow clients to identify their own problems and to design their own service solution.

As mentioned earlier the psychology of the 21st Century, especially for cultural minorities, the poor and the oppressed, must address the pressing social issues these communities face. Ironically, using community service as a social intervention has been pioneered by the court system. Today, judges routinely assign community service hours as part of court alternative sentencing programs. Yet, very little analysis has taken place. One possible solution may be the use of community-intervention research methodologies, which may help psychologists design therapeutic techniques to address problems affecting disfranchised communities. This would mean moving research and the therapeutic encounter from the office or lab into a social milieu where real people deal with real problems and where the therapist and the client struggle for empowerment not only in the intrapsychic world but also empowerment in a genuine social sense.

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