

Liberation Psychology as the Path Toward Healing Cultural Soul Wounds

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Oppression resulting in soul wounding has afflicted indigenous communities and the counseling profession. Internalized oppression has become part of oppressive practices inflicted on communities served. The authors delineate a liberation psychology that leads toward the psychological and spiritual emancipation of individual clients, communities, and the counseling profession.

The most potent weapon in the hands of the oppressor is the mind of the oppressed.

—Stephen Biko (as cited in “World Cultural Geography,” 1998)

Culture is part of the soul. As human beings, we are all part of a culture and not separate from it. When the soul or culture of some persons are oppressed, we are all oppressed and wounded in ways that require healing if we are to become liberated from such oppression. When discussing these issues, it is important to realize that we have all been on both sides of the oppression/oppressor coin at different points in our lives. It is also important to become aware that a clear path toward healing must be undertaken by individual counselors as well as by the mental health professions as a whole if we are to realize new and untapped dimensions of our individual and collective health and psychological liberation. In taking the healing path, counselors will be able to provide individual clients and the world community with much-needed understanding of the way toward liberation and the fullness of life in a manner that promotes harmonious interactions within the overall web of the life-world.

From the work that we have been doing in Indian country for many years, it has become apparent that there are parallels in the soul-wounding and soul-healing processes that are manifested in the Native community and the counseling profession, of which we are a part. All people have gone through some form of historical trauma that continues to cause confusion and suffering in the present. If the historical soul wounding is not effectively dealt with, each person, as well as her or his descendants, is doomed to experience and perpetuate various forms of psychic and spiritual suffering in the future. For these reasons, it is important that counselors understand (a) how history affects the present mental well-being of persons from marginalized racial/cultural groups in general and Native communities in particular and (b) how intrusions by the counseling profession, if not done with cultural competence and respect, will predictably contribute to the soul suffering that is already pandemic in societies across the world.

Multicultural scholars have described the various ways that the mental health professions have been an instrument

of oppression from their earliest days when the power of the Church was passed on to the new priests of the society (i.e., mental health professionals) who could impose their will on people from diverse cultural groups under the guise of being healers (Duran, 2006; Foucault, 1967). The various forms of psychological oppression that continue to be perpetuated by many well-meaning and good-hearted counselors, psychologists, and social workers are by-products of broader economic, political, religious, and social mechanisms that have historically been used to colonize persons from diverse groups and backgrounds in the United States. Operating from culturally biased views of mental health and what are considered to be appropriate intervention strategies, these professionals perpetuate various forms of injustice and institutional racism by imposing helping paradigms that are often incongruent with the worldviews, values, beliefs, and traditional practices that have been used to promote the psychological well-being of persons in diverse groups (Constantine & Sue, 2006).

Similar to those religious missionaries who worked to promote and maintain a particular worldview and political status quo, contemporary mental health professionals have been criticized for primarily assisting clients from marginalized and devalued groups to conform to the social, economic, and political realities that characterize the dominant group in U.S. society (Ivey, D’Andrea, Ivey, & Simek-Morgan, 2007).

As the saying goes, “everything is political,” and psychological science and practice are no exceptions. The fact that counselors have intentionally and unintentionally used their professional knowledge and skills to support the existing power structure in ways that adversely affect the lives of many persons from diverse racial/cultural groups is an indictment of the counseling profession (Duran & Duran, 1995).

This indictment is, in part, linked to the perpetuation of ethnocentric practices in counselor education programs and counseling practices in the field. From the perspective of Native people, the use of ethnocentric practices in counselor education programs and counseling practices inadvertently results in the wounding of the souls of many racially and culturally different clients as well as those members of the counseling profession

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who have not acquired the psychological liberation or cultural competence that would enable them to work respectfully, effectively, and ethically with diverse client populations.

The psychological oppression that ensues from these practices results in various forms of injustice that are typically inflicted unintentionally by counselors who are genuinely interested in helping clients from diverse groups and backgrounds to realize new and untapped dimensions of their humanity. Despite the intention of many good-hearted and well-meaning counselors to help foster the mental health of clients from diverse racial/cultural groups in general and Native Americans in particular, a careful examination of the counseling interventions commonly implemented by culturally incompetent practitioners serve very different ends. Rather than promoting the collective dignity and psychological liberation of clients in these diverse cultural populations, Western counseling interventions are inadvertently used to promoting the types of social control and conformity that are necessary to sustain the existing political/economic/social status quo (Duran, 2006).

With this backdrop in mind, this article explores the meaning of three interrelated concepts that are of particular importance in counseling persons in marginalized cultural groups in general and especially when working with members of Native communities in particular. This includes examining the meaning and relevance of *psychological liberation*, the *soul wound*, and *soul healing* in the work counselors do.

■ Psychological Liberation, the Soul Wound, and Soul Healing

It is interesting to note that the root metaphors of the counseling professional identity are historically grounded in what has been referred to as *the soul*. The term *psychology* itself literally means the study of the soul. Culturally competent counselors, who are knowledgeable of Native American perspectives of mental health, know that the primary goal of psychological helping is not only to explore issues of relevance to clients' souls but also to help them find healing and relief from psychopathology or soul suffering.

The psychological healing tradition, as practiced in the ancient world, did not shy away from soul healing. Instead, soul healing was the central interest of the priest/therapist to restore harmony to the individual's life. The distant ancestors of the counseling profession, as exemplified in the healing practices of the Asklepiian tradition in ancient Greece, approached clients in the following manner. That is, the healer (counselor) would address the individual's soul, as a path to end suffering (Duran, 2006).

Although examples of similar counseling interventions that address individuals' spiritual needs are still in existence in most traditional indigenous cultures today (Heilbron & Guttman, 2000; Mohatt & Eagle Elk, 2000; Roberts, Harper, Tuttle-Eagle Bull, & Heideman-Provost, 1998), Western counseling approaches have moved away from addressing clients'

soul wounds. Tracing the historical factors that contributed to a movement away from addressing clients' spiritual issues in general and individuals' soul wounds in particular exceeds the scope of this article. However, in our work with Native people, we have come to the opinion that many indigenous and culturally diverse communities would benefit greatly from counseling services that intentionally direct attention to these important aspects of human functioning.

By addressing issues related to clients' spiritual needs and soul wounds, counselors are better positioned to foster a greater sense of psychological health, well-being, and psychological liberation among persons in groups that continue to be marginalized and oppressed in contemporary society. To do so, counselors will need to undertake a serious self-examination of the impact of their privileged position in society that often leads them to ignore many of injustices that underlie clients' soul wounds and psychological distress.

Because the counseling profession has, in large part, held a privileged position in the United States, many counselors have been unaware of and complacent to many forms of social injustice that continue to be perpetuated in marginalized communities in this country. Becoming aware of the various forms of cultural oppression and social injustices that adversely affect the mental health of clients from devalued groups in U.S. society as well as the psychological development of many Western-trained mental health practitioners is an essential component of the process of *liberation psychology*.

The theory of liberation psychology is grounded in many tenets of *liberation theology* that have emerged from grassroots community struggles in other parts of the world where oppression reached an intolerable level. Providers of mental health and spiritual guidance in Latin American countries have been particularly vocal in bringing attention to the lamentation of the oppressed poor through the use of psychological liberation interventions in clinical practice as well as in theory development and critical pedagogy (Alcoff & Mendieta, 2000; Batstone, Mendieta, Lorentzen, & Hopkins, 1997; Dussel, 1997; Fals Borda, 1988; Freire, 1972; Gutiérrez, 1973; Kane 2001).

The Latin American liberation process is deeply influenced by Freire's (1972) idea of *conscientization*, essentially meaning a change in consciousness. Through a gradual transformation of consciousness via ongoing deconstruction of the life experiences of oppressed persons, the entire community that is adversely affected by systemic forms of oppression and injustice can begin to liberate itself and, in that process, liberate the oppressor (Duran 2006). According to Freire, the transformation of the oppressor as well as the oppressed involves a genuine act of love that has profound implications for the work in which counselors are supposed to be engaged within a culturally diverse contemporary society.

In our work with Native persons, we analyze and help clients deconstruct their cultural history in ways that liberate them from the traumatic and oppressive conditions that brought them to their present situation. The counseling profes-

sion has limited this sort of deconstruction to personal (intra-psychic) issues, thus leaving out the sociohistorical context, which is of paramount importance to clients' mental health and psychological development. In our work with Native American communities, it has also become exceedingly clear that the counseling profession's unwillingness to address clients' historical context contributes to the psychological oppression of individual clients, their families, cultural communities, as well as the helping professions themselves.

If counselors were to simply proceed with mental health practices in the fashion that has been prescribed by the counseling profession, marginalized cultural communities will simply not benefit from such culturally biased helping interventions. Unfortunately, professional counselors are too often trained to further pathologize the members of such communities by refusing to address the historical context, injustices, and subsequent soul wounds that underlie much of their psychological distress. Consequently, Native American clients are often labeled as resistant when they do not demonstrate an interest in continuing to participate in the counseling process.

The counseling profession has not had the humility to critically assess the depths of the culturally biased nature of its helping methods nor the negative outcomes that commonly ensue from imposing traditional Western helping theories and practices among clients from diverse groups and backgrounds (Duran & Duran, 1995). Liberation psychology advocates encourage counselors to direct their efforts toward fostering a liberation discourse in the helping process with clients as well as in professional forums in the profession. This sort of discourse necessarily involves an exploration of clients' and the counseling profession's historical context as well as their current life and professional challenges in culturally diverse counseling interactions.

Advocates of this "liberatory" approach to helping and professional development emphasize the latter point in their work because they are keenly cognizant of the ways in which many culturally diverse persons have too often suffered from various forms of oppression in the name of traditional Western counseling and psychotherapy. Duran (2006) underscored this by pointing out the following:

Liberation discourse involves taking a crucial eye to the processes of colonization that have had a deep impact on the identity of Original Peoples; as a result, a new narrative of healing will emerge. The mental health profession has been instrumental in fostering the colonial ideation of Native Peoples all over the world. I am merely bearing witness and bringing awareness to this process, to change it. By turning a critical eye on our professional activities of healing, we liberate ourselves as well. (p. 1)

In the process of developing liberation psychology in Indian country, we have found early on that much of the available Western psychological theory was not useful and at

times irrelevant when used among culturally diverse clients unless it was retheorized using appropriate cultural metaphors. For example, the labels counselors and psychologists commonly use to diagnose clients are really metaphors for describing a condition, and these metaphors usually do not allow clients to relate to their condition. As a result, the etiological explanations for many psychological disorders, such as depression, have frequently been noted to be incongruent with the client's worldview, regardless of her or his cultural background (Duran, 2006).

When working with Native clients who are depressed, we have found it useful, instead, to provide a culturally appropriate metaphor by suggesting that the "spirit of sadness" is visiting the client. Using this metaphor allows these Native clients to relate to their psychological condition from a cultural perspective that leads to several different options for the client to find relief from that condition. In doing so, a client who is depressed is able to engage in a conversation with or actively imagine the visiting spirit called sadness. In that conversation, the spirit of sadness can reveal existential meaning to the client and therefore liberate her or him from being a victim of the problem of depression. The client may need to find balance in the relationship with the spirit of sadness as all individuals must do at different times in their lives. When the client has a relationship with the disorder instead of being the disorder, a new narrative emerges that is liberating to the individual and the community of which she or he is a part.

There can be countless etiological explanations as to why this spirit is visiting different clients, all of which necessitate taking into account the clients' sociohistorical context. Clients can trace the problem they are experiencing to a place in history where the problem originated. To successfully use this form of liberation counseling, we encourage clients to make a tribal *genogram* to find their place in history where the specific trauma occurred. By finding the historical place of this trauma, the client can stop self-identifying as a "defective Indian" and experience a greater level of psychological liberation by more accurately understanding the historical-contextual genesis of her or his experience with depression or other forms of psychic disorders (Duran, 2006).

Another example of such liberatory processes comes from the Northern Plains tribes. If a child or person in these cultural groups experiences severe abuse/trauma, it is believed that the individual's soul or spirit will leave the body, thus allowing another spirit to enter (i.e., the spirit of sadness). A specific set of ceremonies is required to call back the client's original natural spirit. Through the praxis of considering the cultural context and becoming knowledgeable as to how this praxis leads to better ways of understanding and working with Native clients, a new theory of psychological liberation counseling for Native peoples begins to emerge.

Furthermore, commenting on the process of liberation counseling, Martin-Baro (1998) pointed out that "it shouldn't be theories that define the problems of our situation, but

rather the problems that demand, and so to speak, select their own theorization” (p. 314). Such an approach to helping is a more respectful and effective way of proceeding with the work of psychological liberation and mental health care in multicultural contexts. Moreover, while working in Indian country with Native clients, we quickly learned that by simply applying existing counseling theories and practices added to the feelings of alienation felt by indigenous peoples toward mental health professionals. It is important for counselors to consider why this happens.

Many Native people believe they are living in a life-world that has been taken over by a foreign mythology. Therefore, if someone offers help using an oppressive mythology embedded within the dominant cultural group that has imposed so much historical suffering, it seems only natural that the individual or community (subjected to such oppression and injustice) would be resistant to being helped in this way. This problem becomes exacerbated when a counselor offering help from the oppressive theoretical mythology continues to label and pathologize the targeted person or community because of their reluctance to accept the help that is being offered.

The fact that Native people were resistant to mental health professionals’ initial involvement in Indian country became the rationale for us to explore new narratives for therapy and counseling in our own work. In exploring new helping approaches that we hoped would be more culturally competent, respectful, effective, and liberating, it became increasingly apparent that even the manner in which the fields of counseling and psychology categorize mental health problems is culture bound and oppressive. The culture-bound nature of the diagnostic nosology used by mental health practitioners, referred to as the *Diagnostic and Statistical Manual of Mental Disorders* (4th ed., text rev.; American Psychiatric Association, 2000), serves to alienate Native people and persons from other cultural groups who do not understand or accept a Eurocentric worldview of mental health and psychopathology.

To begin the healing narrative for all diverse communities, it is imperative that the issue of history be brought into therapeutic ceremonies that are aimed at fostering clients’ psychological liberation. Once historical honesty becomes an integral part of the counseling/healing ceremony session, the fields of counseling and psychology will themselves begin the long-needed healing process that enables counselors and therapists to realize new and untapped aspects of their psychological liberation. Duran (2006) has written extensively about this important issue, noting,

Lack of understanding of the Native epistemological root metaphor (ways of being in the world which include the psychological and spiritual worlds) continues to hinder our profession. Historical narcissism (the belief that one’s own system of thinking must be used to validate other cultural belief systems) continues to be an issue in the relationship between Native/Original People and those who hold power in

the academic and clinical life-world. I use this strong language because the Native/Original person is expected to fully understand the world of the colonizer simply because the colonizer says so. When it comes to the colonizer making an effort to understand the life-world of the Native/Original person, the colonizer becomes very creative in his/her defenses in order to preserve his/her Cartesian life-world. The intention of this book is to provide a bridge between Western and Traditional Native healing worlds and in this manner bring healing to the historical trauma that all people have suffered at one time in their history. (p. 7)

■ Epistemological Hybridity

In developing a template for the work that lies ahead, we recommend that the fields of counseling and psychology implement a mind-set of *epistemological hybridity*. The epistemological hybridity that we are calling for is nothing less than the capacity to become enmeshed in the cultural life-world of the person or community seeking help. Becoming enmeshed in the cultural life-world of those persons with whom counselors are planning to work with in the future is a very different approach to professional development than has been currently implemented in the profession. This is so because much of what has been done in the area of cross-cultural and multicultural counseling training has been laden with paternalistic attitudes (Duran, 2006).

These paternalistic attitudes can best be illustrated by an analysis into how mental health professionals are deemed qualified to do cross-cultural work. Typically, it is thought that a three-unit course in cross-cultural/multicultural counseling suffices in qualifying counselors to work with persons from diverse cultures. Given the complexity of cultural issues in the counseling/healing process, it is suggested that this limited approach to multicultural counseling training needs to be supplemented with what we refer to as an *enmeshing training process* (Duran, 2006).

The third author was previously involved in implementing this sort of enmeshing training process and was thereby promoting the sort of epistemological hybridity discussed earlier in a doctoral counseling program. In his former doctoral training program, all incoming students were required to attend a cultural immersion experience before their first semester. This experience involved having students interact and engage in daily activities with Native elders and other cultural experts in the Native community.

The benefits of this immersion experience are many and probably differ for everyone, depending on her or his previous life experiences. Among the benefits reported by students participating in this enmeshing process include debunking stereotypes and establishing important relationships with community members, elders, and traditional healers. Students also quickly learn some of the basic cultural rules of etiquette that are critical to developing positive, respectful,

and potentially healing relationships with persons in the Native communities.

Following this enmeshing experience, students enroll in their first required doctoral course called “Native Ways of Knowing.” This course provides a historical context to Native issues and challenges students to thoroughly examine the epistemologies of indigenous peoples as they relate to human behavior. Both the immersion/enmeshing experience and the aforementioned course are intended to set the tone for the students’ future training because they open students up to the idea of epistemological hybridity, thus guiding them through a process of liberation from orthodox professional Western practices as are commonly taught in most counselor education programs.

As a way to foster students’ psychological liberation further, they are exposed to and are encouraged to engage in intense discussions during Talking Circles in classroom settings. These Talking Circles groups focus on many of the issues outlined earlier in this article as well as other mental health issues that are grounded in an indigenous perspective. Students are asked to reflect and comment on these issues as they relate to their professional development and the work they want to do in the future as they become the next generation of “healers.” By increasing their understanding of the ways of being in the Native life-world, students are able to begin the journey toward becoming more knowledgeable of the context of historical trauma and how this trauma affects the present lives of Native persons in the United States.

Generations of Suffering

Presently in Indian country, it is well accepted that the history of violence and genocide inflicted on the indigenous persons of this land continues to have a deep impact on the indigenous peoples in the United States. This history has resulted in forms of intergenerational trauma that continues to have an adverse impact on the mental health and psychological well-being of many Native persons, contributing to much of the psychopathology that is encountered in Indian country (Brave Heart, 1999; Duran & Duran, 1995; Duran, Duran, Brave Heart, & Yellow Horse-Davis, 1998; Epstein, 1979). Slowly but surely, mental health care providers and counseling programs are modifying treatment strategies in ways that reflect a greater understanding and acceptance of the intergenerational trauma that continues to affect persons in Indian country.

Recently, researchers have collected empirical data that shed new light on what the Native American community has known for decades; that is, intergenerational/historical trauma contributes to many of the behavioral health concerns and problems experienced by Native individuals and communities (Whitbeck, Adams, Hoyt, & Chen, 2004). Reporting on these issues from their research endeavors, Whitbeck et al. pointed out that a high prevalence of historical trauma associated with emotional distress (anxiety, depression, anger) is routinely manifested in ways that undermine the individual and collective health of many persons in Indian country.

Although it is encouraging that researchers have been able to finally validate these findings empirically, it is unfortunate that such knowledge has taken so long to be scientifically proven by Western researchers when the insights gained from these investigative efforts have long been understood by Native people. Again, a case of paternalism and lack of cultural hybridity is exemplified when indigenous knowledge must be validated through Western empiricism. The lack of validation for indigenous theory and clinical methods creates a feeling of helplessness in indigenous communities and leads to untold suffering among many people in these communities at the present time.

Cultural Hybridism as Liberation

Freire (1972) described the theory of liberation as a process that, once set in motion by the oppressed, will have the profound liberating and healing impact on the oppressor as well as those victimized by various forms of cultural oppression and social-political injustices. In essence, theories of psychological liberation and cultural hybridity represent a transformation of consciousness among oppressed persons. Realization of this liberated consciousness results in the understanding that, by remaining oppressed, persons in marginalized cultural groups help to perpetuate an insane and dehumanizing dance of psychological and spiritual suffering that adversely affects the oppressor as well as the oppressed persons.

In such a dynamic relationship between the oppressed and the oppressor, the negative energy of oppression consumes the lives of the human beings involved and creates an insidious reality of self-perpetuating suffering. Through the use of counseling interventions that emerge from cultural hybridity, individuals are able to acquire a new historical-contextual awareness of their individual and collective development and problems. This awareness results in the emergence of a greater level of consciousness, psychological liberation, and soul healing that can transform the health and lives of individuals victimized by various forms of social injustice as well as those responsible for perpetuating such oppression.

Healing Versus Curing

Healing and curing are concepts that merit discussion when exploring issues related to liberation psychology. Within the Western mind-set of counseling and therapy, the main intent of therapeutic interventions is the removal of symptoms that is accomplished within a “helping” context often viewed in contradictory or adversarial terms among persons from marginalized cultural groups. The adversarial nature of such helping is reflected in the ways that many well-meaning “helpers” declare war on various human-social problems. This includes but is not limited to the war on drugs, the war on poverty, and the war on terrorism, to name a few.

Using these metaphors as a guide in their work, mental health professionals identify target populations and define specific tasks and objectives to eradicate social and psychological problems. Traditional tribal worldviews find the afore-

mentioned images of helping to be foreign, strange, inhumane, and in discord with natural processes. Healing in a traditional Native worldview is primarily concerned with helping individuals learn how they fit into the overall cosmology.

Being a productive member of society has a very different meaning in traditional indigenous cultures, which are mainly concerned with the person's relationship to the universal cosmology versus curing a culturally defined psychological disorder. From an indigenous liberation psychology perspective, individuals can be very depressed and still have a relationship with their soul and the way their soul harmonizes with the universal life force. Within Western cultures, there are revered artists, scientists, and other highly creative and productive persons who are recognized for their contributions to the world soul while dealing with their "mental disorders."

■ Empirically Tested Healing and the Future Possibilities

Presently, the mental health professions delineate how counseling/therapy/healing is to be delivered in order for counselors to practice within the scope of what the profession deems appropriate and ethical. Funding sources, including third-party payers and governmental grant sources support, have empirically tested best counseling and therapy practices. This ensures that counselors will adhere to treatment paradigms that have passed the Western empirical test while disregarding considerations of culturally appropriate interventions that are aimed at fostering soul healing.

From a multicultural/social justice perspective, it is suggested that such an approach to counseling is largely designed to ensure that clients become a productive and conforming member of society in ways that enhance the corporate structures that operate behind the scene. These structures represent supraordinate societal forces that significantly dictate what people in the general citizenry are conditioned to believe are appropriate ways of thinking and acting in the world. Although it is not often discussed in mainstream professional counseling and psychology publications, this mass psychological conditioning is clearly grounded in a social-political ideology that promotes generalized notions of mental health and illness. It is further asserted that this general psychological ideology influences both the empirically tested interventions counselors are required to use, for reimbursement by third-party payers, and the assumptions and beliefs that underlie the diagnoses counselors make of clients' mental health status.

In making these statements, we are not suggesting that we are opposed to empirically supported therapies. However, we do believe that just because a counseling approach has gone through the filters of empirical testing does not make a particular helping theory a theory of choice for all or even most clients whom counselors are called upon to serve. Indeed, the efficacy of many counseling theories is supported by clinical trials and empirical testing. However, if an empirically validated approach to helping is not culturally relevant to clients from different

groups, the use of that particular theoretical approach is not likely to be effective or beneficial for those persons. Cognitive-behavioral therapies represent important counseling approaches that are supported by much empirical research. From a multicultural research perspective, it is acknowledged that there is merit in using cognitive-behavioral approaches with persons from diverse cultural groups in general and Native populations in particular (McDonald & Gonzalez, 2006; Renfrey, 1992; Trimble, 1992). However, from a multicultural/social justice counseling perspective, it is emphasized that such helping strategies should never be used "off the shelf" without some cultural metaphor modification.

The potential benefits of cognitive-behavioral counseling approaches that have been modified to complement the cultural worldviews of diverse clients are underscored by the recognition that these helping concepts have been promoted by many cultural groups for thousands of years. For example, the Buddhist system uses the concept of *Vipassana* (seeing clearly) meditation (a method of observing the mind and thoughts as they move across the landscape of one's consciousness) to foster mental health and psychological well-being.

Similar Western cognitive-behavioral therapy strategies are often used with clients as a way of helping individuals cope more effectively with stress and alleviating mental disorders. One of the central differences between the aforementioned Buddhist approach and Western cognitive-behavioral counseling strategies is that the former method is practiced to promote mental liberation and psychological health, whereas the latter is often aimed at ameliorating symptoms of psychological distress and disorder.

Many Native American tribes subscribe to what Western mental health professionals call "cognitive-behavioral techniques" by following cultural precepts that encourage them to "watch their thoughts" so that they can change those cognitive processes and ensuing behaviors that are not conducive to positive and liberating psychological outcomes. If counselors were to proceed to use cognitive-behavioral helping strategies in ways that accommodate this and other relevant cultural metaphors (e.g., by encouraging Native American clients to watch their thoughts), they are likely to experience a greater level of effectiveness in fostering the psychological liberation of clients in this cultural group than if they were to use more orthodox Western cognitive-behavioral counseling approaches (Duran, 2006).

■ Moving Beyond Western Scientific Models of Research and Theory Validation

When it comes to testing the effectiveness of a new therapy or counseling intervention, it is crucial that the testing process include research methods and ways of knowing that characterize the diverse client populations that will ultimately become the recipients of such helping services (Allen et al., 2006; Fisher & Ball, 2002; Mohatt, Hazel, et al., 2004). Unfortunately, most

research that is done in this area is conducted via Western scientific methods of inquiry. These research methods have historically relied on quantitative methods of investigation to verify the effectiveness of various approaches to counseling and psychotherapy.

As a result of adapting these research methods to determine the best practices in counseling, counselors and other social scientists have accepted the idea that if numbers are involved in assessing the effectiveness of a theoretical approach, there must be objectivity and truth in these interventions. Many practitioners who view themselves as being multicultural counseling advocates have sacrificed their souls on the 12-step scientific method "altar," forgetting that there are other prescribed ways of knowing the life-world that transcend the Western research methods that are taught in graduate school.

Counseling researchers who are open to alternative research methods (e.g., including using a variety of qualitative research models that have emerged in the profession over the past decade) are better positioned to help liberate themselves and the profession from the narrow and culturally biased information that is typically generated from quantitative methods of inquiry. By breaking the chains that imprison their minds as a result of unquestionably accepting a logical positivist approach to counseling research, counseling researchers are able to transcend into a world in which there are no boundaries as they use multiple research methods that help uncover the multiple truths persons from diverse cultural groups embrace when it comes to defining effective helping strategies that foster their constructions of mental health and psychological liberation.

Counselors can begin doing this by including qualitative methods in all research endeavors in which they are involved—from the evaluation of professional training programs to counseling efficacy and outcome research. Although they are not perfect, qualitative research approaches can yield information that quantitative research approaches cannot match. It has also been noted that qualitative approaches are much more congruent with Native and indigenous ways of knowing than the quantitative research strategies that continue to permeate the fields of counseling and psychology (Hill, Thompson, & Williams, 1997; Mohatt, Rasmus, et al., 2004).

One example of the positive lessons learned from using qualitative research methods to evaluate the efficacy of mental health services provided to Native persons comes from the People Awakening Project, which was implemented among indigenous people in Alaska (Mohatt, Hazel, et al., 2004). This project included the recording of clients' life stories that were gathered in narrative format as a way of identifying the pathways to sobriety and the protective factors that help Alaska Native people deal with alcohol problems. Further work is being conducted by the People Awakening Team to develop and test culturally grounded therapies and counseling interventions based on empirically derived pathways and protective factors. Similar methods need to be used in other cultural communities and Native tribes as the counseling profession strives to realize a greater level of its own psy-

chological liberation by moving beyond traditional forms of empirical research methodology.

Conclusion

We have briefly delineated helping processes that encompass a different approach to healing and counseling in the life-world. Soul wounding has been offered as a pivotal issue that is asserted to be at the root of many of the psychological problems facing society and the counseling profession. In order to heal the soul wound, it is suggested that the notion of soul healing needs to become a central metaphor that guides the daily activities of counselors and therapists. If counselors remain courageous in striving to change the way mental health professionals have been traditionally taught, by operating in the counseling life-world and by including the notion of soul healing, they will be able to create a liberating psychology that will slowly begin to transform the clinical and research areas of the counseling profession as well as positively affect society at large.

In order to move toward a more humane method of soul healing and psychological liberation, counselors will need to create a certain level of chaos in the existing armamentarium of counseling theories, treatment strategies, and research methods. Recognizing that counseling interventions continue to be commonly implemented by practitioners who are not respectful of nor responsive to the worldviews, expectations, values, and needs of persons in culturally diverse communities, we urge counselors to stop, reinvent, and modify what they have been trained to do and to develop new helping strategies that focus on soul healing through psychological liberation.

Implementation of these new methods and interventions may seem random and chaotic for some persons in the counseling profession whose psychological liberation is constrained by their own cultural history and professional training. However, if the counseling profession is genuinely committed to its own ongoing development and practitioners are willing to demonstrate the courage necessary to create new clinical and research paradigms that more effectively and respectfully foster healthy human development from a multicultural perspective, the need to create temporary chaos in the profession will be viewed as positive necessary steps in promoting soul healing and the liberation of individual and collective psychology. We hope that the suggestions presented in this article, regarding the need to foster counselors' and clients' soul healing and psychological liberation, will help other members of the counseling profession better understand ways in which they can assist in the transformation of the mental health professions in ways that stimulate a greater level of human dignity and development through cultural diversity.

References

- Alcoff, L., & Mendieta, E. (Eds.). (2000). *Thinking from the underside of history: Enrique Dussel's philosophy of liberation*. Lanham, MD: Rowman & Littlefield.

- Allen, J., Mohatt, G. V., Rasmus, S. M., Hazel, K. L., Thomas, L., & Lindley, S. (2006). The tools to understand: Community as co-researcher on culture-specific protective factors for Alaska Natives. *Journal of Prevention and Intervention in the Community, 32*, 41–59.
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text rev.). Washington, DC: Author.
- Batstone, D., Mendieta, E., Lorentzen, L. A., & Hopkins, D. N. (Eds.). (1997). *Liberation theologies, postmodernity, and the Americas*. New York: Routledge.
- Brave Heart, M. Y. H. (1999). Oyate Ptayela: Rebuilding the Lakota Nation through addressing historical trauma among Lakota parents. *Journal of Human Behavior in the Social Environment, 2*, 109–126.
- Constantine, M. G., & Sue, D. W. (Eds.). (2006). *Addressing racism: Facilitating cultural competence in mental health and educational settings*. Hoboken, NJ: Wiley.
- Duran, E. (2006). *Healing the soul wound: Counseling with American Indians and other Native peoples*. New York: Teachers College Press.
- Duran, E., & Duran, B. (1995). *Native American postcolonial psychology*. Albany: State University of New York Press.
- Duran, E., Duran, B., Brave Heart, M. Y. H., & Yellow Horse-Davis, S. (1998). Healing the American Indian soul wound. In Y. Danieli (Ed.), *International handbook of multigenerational legacies of trauma* (pp. 341–354). New York: Plenum Press.
- Dussel, E. (1997). *The architectonic of the ethics of liberation*. In D. Batstone, E. Mendieta, L. A. Lorentzen, & D. N. Hopkins (Eds.), *Liberation theologies, postmodernity, and the Americas* (pp. 273–304). New York: Routledge.
- Epstein, H. (1979). *Children of the Holocaust*. New York: Putnam.
- Fals Borda, O. (1988). *Knowledge and people's power: Lessons with peasants in Nicaragua, Mexico and Colombia*. New York: New Horizons Press.
- Fisher, P. A., & Ball, T. J. (2002). The Indian Family Wellness project: An application of the tribal participatory research model. *Prevention Science, 3*, 235–240.
- Foucault, M. (1967). *Madness and civilization*. London: Tavistock.
- Freire, P. (1972). *Pedagogy of the oppressed*. New York: Penguin Books.
- Gutiérrez, G. (1973). *A theology of liberation* (C. Ina & J. Eagleson, Eds. & Trans.). Maryknoll, NY: Orbis Books.
- Heilbron, C. L., & Guttman, M. A. J. (2000). Traditional healing methods with First Nations women in group counselling. *Canadian Journal of Counselling, 34*, 3–13.
- Hill, C. E., Thompson, B. J., & Williams, E. N. (1997). A guide to conducting consensual qualitative research. *The Counseling Psychologist, 25*, 517–572.
- Ivey, A. E., D'Andrea, M., Ivey, M. B., & Simek-Morgan, L. (2007). *Theories of counseling and psychotherapy: A multicultural perspective* (6th ed.). Boston: Allyn & Bacon.
- Kane, L. (2001). *Popular education and social change in Latin America*. London: Latin America Bureau.
- Martin-Baro, I. (1998). *Psicología de la liberación* [Psychology of liberation]. Madrid, Spain: Editorial Trotta.
- McDonald, J. D., & Gonzalez, J. (2006). Cognitive-behavior therapy with American Indians. In P. A. Hays & G. Y. Iwamasa (Eds.), *Culturally responsive cognitive-behavioral therapy: Assessment, practice, and supervision* (pp. 23–46). Washington, DC: American Psychological Association.
- Mohatt, G. V., & Eagle Elk, J. (2000). *The price of a gift*. Lincoln: University of Nebraska Press.
- Mohatt, G. V., Hazel, K. L., Allen, J. R., Stachelrodt, M., Hensel, C., & Fath, R. (2004). Unheard Alaska: Culturally anchored participatory action research on sobriety with Alaska Natives. *American Journal of Community Psychology, 33*, 263–273.
- Mohatt, G. V., Rasmus, S. M., Thomas, L., Allen, J., Hazel, K., & Hensel, C. (2004). “Tied together like a woven hat:” Protective pathways to Alaska Native sobriety. *Harm Reduction Journal, 1:10*. Retrieved March 13, 2008, from <http://www.harmreductionjournal.com/content/1/1/10>
- Renfrey, G. S. (1992). Cognitive-behavior therapy and the Native American client. *Behavior Therapy, 23*, 321–340.
- Roberts, R., Harper, R., Tuttle-Eagle Bull, D., & Heideman-Provost, L. (1998). The Native American medicine wheel and individual psychology. *Journal of Individual Psychology, 54*, 135–145.
- Trimble, J. E. (1992). A cognitive-behavioral approach to drug abuse prevention and intervention with American Indian youth. In L. A. Vargas & J. D. Koss (Eds.), *Working with culture: Psychotherapeutic interventions with ethnic minority children and adolescents* (pp. 246–275). San Francisco: Jossey-Bass.
- Whitbeck, L. B., Adams, G. W., Hoyt, D. R., & Chen, X. (2004). Conceptualizing and measuring historical trauma among American Indian people. *American Journal of Community Psychology, 33*, 119–130.
- World cultural geography: CRY FREEDOM project. (1998). Retrieved from Fairfield Junior High School Web site: <http://ffjh.davis.k12.ut.us/CARPER/CRYFREE.htm>