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Challenges of Indigenous psychology and stigmatization

Rethinking the training



Picture 1: This picture was taken in Mali (West African Region). These are traditional canaris usually made in households and carrying traditional heritage. Additionally, to their regular use as containers, they are important in traditional healing rituals. Picture under Creative Commons licence.

Introduction

Hegemony versus cultural diversity

---------- HOW IT STARTED

For a long time, researchers were only coming from Western societies and travelled to observe foreign cultures, from their own cultural lenses. Science and psychology in particular, were built on the principle that the normal interaction/ family model / behavior, was the Western based classic model. Those who were thinking and living out of this frame, were not counted as 'in the norm'.
So, the representation of what psychology is, has been connected to the western classic Eurocentric perspective, and other approaches were put aside as primitive, imaginary, superstitious and so on.
This Western frame has focused on rigorous methods and experimentations biased by the fact that they already assumed that "realities" like:
- Their perception of time and space
- Their representation of environment
- Their conception of family, kinship and education and anthropologic hierarchy in favor of their advance, were The Reality, ignoring other possibilities.

Eurocentric and androcentric scientists used every mean at their disposal, to support this model and elevate it to the ultimate definition of knowledge. Indeed, biology was developed to support the hypothesis of the Western human above others on the natural biological hierarchy. Omniscience of Eurocentric medicine was raised above other cultural and theoretical models, and the human seen at the center of creation and on top of the pyramid.
The multiplication of scientists, from the rest of the world has brought new perspectives and potentialities, opening the bridge to considering this knowledge formerly viewed as primitive.
The science of psychism, is deeply rooted in the reality of society. Indeed, the world evolves, so do nature and environment. Indigenous Psychology (IP) is the knowledge that is historically present in each culture and seeks to explain, balance and cure the human, social and biological environment.

Some authors have contributed to change this perspective

---------- IN SOCIAL SCIENCES

Claude Lévi-Strauss (1958) has rejected the "ethnocentrism" of social sciences and brought the concept of "cultural relativism", stating that all cultures are equal. He was inspired by structuralism, founded in linguistics, and was passionate about this idea of applying a structural lens to anthropology. His work has opened the way for significant breakthrough in social sciences and allowed cultures to be respected in their rights.
Marcel Mauss (1950) applied Levy-Strauss's knowledge to the observation of the gift and his work was the occasion to collect examples of symbolic exchanges and systems of alliance, at the basis of social balance.
Georges Devereux has initiated the acceptance of universalism in psychoanalysis with his work *Psychotherapy of a Plains Indian* (1998).
To better understand Indigenous psychology, researchers can use these authors' approaches as they observed people's reality and tried to learn from it, instead of applying their logic, and disqualifying and/or categorizing them.



Picture 2: The city of Timbuktu in Mali was an important place for the development of science and astronomy. Many researchers explored it.
Photo credit: UN Photo/Marco Dormino



Picture 3: This picture is extracted from the material Tampsy Optoa, it represents a man seeking the treatment from a traditional healer. His strange tools represent all the fears people can have about traditional healing.

What are the challenges that psychologists face when approaching IP?

Transference and countertransference

In psychotherapy, transference is what comes from the client, and influences their interaction with the therapist, and countertransference is the latter's reaction to their client in return. Both mechanisms contribute to build or break the alliance and are determining indicators of success or failure in the therapy. Devereux's approach has started a reflection about cultural diversity without falling into an evolutionary approach, putting European models as ideal, but rather providing explanations for failures of methodology in research (Govindama, 2006).

According to Devereux (1967), researchers in behavior sciences, have a subjective way of applying their own representations to phenomenon, and what they observe produce anxiety that is converted into strict rigorous methodology. The author warns them into giving attention to this countertransference and embrace it as part of their observation.

Indeed, psychologists educated in classic training, are often drawn to separate Indigenous psychology from what they have learnt as an alien body of knowledge out of the realm of science. This dichotomy can be explained by Devereux's theory, about this anxiety of the uncontrollable.

Indeed, western concepts give the promise of certainty and measurability even though, they are regularly being opposed by new developments. Simultaneously, the subject of observation is rarely invited to actively contribute to the outcome of research, and psychologists, being insufficiently trained to decolonized approach to science, can be in a difficult position, facing their interlocutor and accepting their transference mechanisms.

When applying their methods to observation of Indigenous psychology, psychologists can easily fall into culturalism, or stigmatization. This reaction can also be understood through Devereux's theory, as manifestation of their own countertransference. Indeed, culturalism centers the explanation of all human behaviors on their culture, neglecting universal symbolism, and individual parameters. Stigmatization alienates people because of their difference, and both mechanisms are effective to keeping people at a safe distance.

One of the challenges of psychologists approaching Indigenous psychology, is for them to gain a decolonized perspective to science, and center their observation on both the phenomenon, and their experience as participants when they witness indigenous practices.

Traditional healers' interpretation of mental illness

In Senegal

----- FOR THE SEREER PEOPLE

This citation extracted from the work of Omar Ndoye (2014), in an interview with a Sereer (ethnic group in Senegal) traditional healer:

"The Sereers believe that mental illness (and indeed recovery) is never complete. According to Tékhèye (Editor's note: the traditional healer), madness is not an illness, but rather a punishment. So, there has been a fault, a wrong done to the people or to the spirits. Illness can result from a mistake, an uncontrolled runaway, a predisposition, or an inheritance. It can also precede a person's birth."
(Ndoye, 2014, p.181).

Here we can see how the invisible world has an importance in the care setting, the traditional healer is a media for their client to communicate with this world and make sense of the symptoms.



Picture 4: These shells are called "Peetaw" in Senegal and are commonly used for divination. The first stage to identifying the illness, is through divination. Traditional healers may use these tools to gain information on the past, present and future, and identify the sacrifices to be made to regain balances.

Being observers changes the phenomenon, because historical, political, and social contexts may have brought society to build the idea that psychologists and doctors have negative representations of traditional knowledge and healing techniques. People feeling judged about their inclination to Indigenous treatments may show transferential reactions because of this history. Moreover, the education in psychology in university uses other medias, theories, and interpretation, while Indigenous theories are transmitted in private spaces through oral tradition, history and nature. Therefore, psychologists working in their own countries, have not necessarily learnt in their educational training to work with both models, and frequently must put their beliefs apart from their professional identity. This can be discussed as a specific reaction toward their culture and be difficult to manage on the professional context, whereas training nor supervision do not necessarily provide responses to their questions. But this countertransference could be key to the therapeutic alliance and help understand the context of intervention if and when approached and identified.
Hence, Indigenous psychology should be integrated in the professional training, for psychologists to be educated to work with this content, understand it and evaluate their own subjectivity, before being exposed to clients. ■

Double listening and interpretation

Psychologists' methodology when approaching Indigenous psychology should be closer to the observation of a system of belief, and a retraining to understand its coherence, rather than research for correlations in their taught theories. The approach offered by traditional healers, is one of reconnection with ancestry and mythology, and their clients are invited to revisit transgenerational conflicts and transmission issues (Ndoye, 2014). The treatment targets not only the client, but their family as a system, where the illness is a manifestation of unbalance in the permanence of generations.

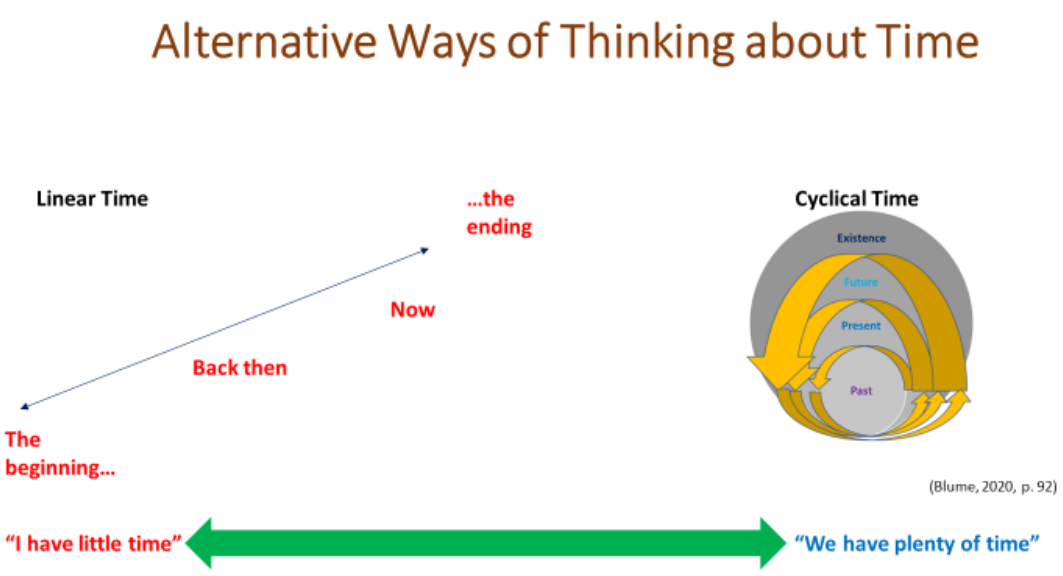
Psychologists are facing a content that they can only understand if they apply a double listening (clinical and cultural), and welcome the indigenous content, to learn about its symbolic reference. In this mutual relationship, the client is an active participant and brings his history, dreams, and theories. The family plays an important role in the search for the etiology, the application of the treatment and the organization of their lives to maintain balance between past and present generations. They are advised to get closer and united, to avoid future vulnerability. This double listening can be understood through the work of Yolande Govindama (2006); indeed, psychologists learn to understand their patients' beliefs and the meaning of this treatment for them. The symbolism of traditional healing techniques is strongly representative of people's fears, anxieties, attachment, or detachment to their lineage.

Healing rituals use specific tools, for example, the calabash in West Africa or milk in East Africa, are both reminders of primary interactions, to symbolically reconnect with ancestry and lineage. Sacrifices are also strong symbols of exchange, to alleviate guilt and restore balance, between the visible and the invisible worlds (Mauss, 1950).
Societies have different organizations, and those where traditional healing prevails have the common point to prioritize collective living and cultural transmission of rituals. Nonetheless, the evolution of societies, the installation of capitalism and the context of migration, have challenged their organization, forcing them to adopt new ways of life. In this context, traditional healing plays an important role, as it is inherent to history and culture.
Thus, the transmission of certain explanations, carrying the symbolism of these rituals might have been lost on the way, and prevent true understanding of their ancestry, traditions, and core values granting balance. Moreover, certain adaptation mechanisms specific to migration (Berry, 2000), are very challenging to transmission as they force the suppression of values that can be crucial in context of mental challenge. Psychologists have the particularity to be easily positioned at the right intersection between cultural content, and merely individual subjectivity. Their essential role is to support elaboration mechanisms, accompanying their clients to make sense of this subjectivity, enlightened by the cultural signification. ■

Perception of time and space

The cultural perception of time impacts how psychologists approach work. Indigenous peoples often have a much different perception of time that contributes to different assumptions concerning psychological processes. Western mainstream societies tend to operate on a linear sense of time linked to progress or achievements. A linear conceptualization of time reflects a reductionistic perspective that emphasizes the importance of proximal outcomes ("here and now"). With an emphasis on a trajectory of progress, linear time contributes to pressure to achieve now.
The Western understanding of time has profoundly influenced mainstream psychology where there has been an emphasis on rapid responses, brief interventions, and time-limited approaches.
Linear conceptualizations of time typically assume a beginning, an ending, and the present moment that falls somewhere in between. The continuum of linear time suggests the importance of acting and achieving quickly, contributing to a sense of urgency and often impatience with the flow of time. Acting in a timely fashion is conceptualized as very important and highly valued. Opportunities are often viewed as momentary.
Psychology rooted in linear time may offer strengths when rapid responses are required, and immediate changes needed.
However, acting with immediacy, impatience, and urgency does not consider the clinical errors that may occur when failing to account for slow and subtle changes and long-term intergenerational outcomes that may occur from those slow and subtle changes.

Figure 5



Indigenous perceptions of time are often cyclical rather than linear (see figure on this page). An Indigenous perspective of time is conceptualized from observations derived from the natural world where cycles are important. Cyclical time views the patterns of time as repeating, like the patterns of seasonal change or the phases of the moon. Every full moon is slightly different, but the gestalt of the full moon has significant commonalities across time. The cycles of the moon allow us opportunities to enjoy the pattern of the full moon regularly.

Time is a reliable ally rather than something to be feared. The repeating patterns allow for greater patience. The familiar repeating patterns of the cycles allow multiple opportunities to learn life lessons from those similar events over the course of one's lifetime.

The patterns of time also have the ability to merge the present moment with both past and future, in such a way that people have connectivity with past, present, and future.

The cyclical perception of time provides multiple opportunities to heal psychologically, to draw healing strength from the ancestors and from those who are not yet with us.

People can anticipate that restoration happens regularly in the cycles of time, opportunities that often repeat. An Indigenous perspective of time allows for the possibility of multiple chances to get things right and for healing to occur over the course of one's lifetime. ■

Perception of individual and environment

Western Cartesian understandings of the human condition emphasize reductionism, conceptualizing individuals (the "self") as the foundational unit for understanding human behavior. Western societies have developed a hierarchical understanding of reality in part due to the emphasis on the individual, making social comparisons between self and others much more likely.

Social comparisons inevitably involve hierarchical interpretations along a continuum of superior to inferior, often resulting in exceptional and supremacist values.

Stigmatization typically results from these hierarchical, exceptional, and supremacist perspectives. Western societies have also prioritized the human world above the rest of the natural world, assuming the superiority and autonomy of human existence.

Anthropocentrism has made it easy to devalue and stigmatize the natural world as inferior, a lower priority for protection, and easy to overlook. This hierarchical treatment of the natural world has resulted in significant negative consequences to global health and well-being.

Western psychology gravitated toward hierarchical belief systems, assuming the Western orientation of psychology is superior to other cultural belief systems. Many Western psychologists today continue to judge, stigmatize, and be skeptical of non-Western psychology, viewing anything outside the mainstream as suspect and inferior.

Western self-psychology assumes that individual independence and autonomy are signs of psychological health. In addition, Western anthropocentric psychology largely ignored the well-being of the natural world for most of its history until the global climate crisis became an obvious threat to human well-being.

Western psychology's emphasis on reductionism has resulted in orientations toward self-psychology and anthropocentric psychology.

Picture 6
Photo by A.B.



The moon is an interdependent member of the solar system, thankfully. An independent and autonomous moon might be a risk to the rest of us!
Indigenous psychology uses observations derived from the natural world to arrive at different assumptions concerning psychological wellness.

Indigenous worldviews tend to be holistic rather than reductionistic and focus on the interdependence of all things in the natural world rather than assuming that independence and autonomy of human creatures is healthy.

In Western psychology, stigmatization is conceptualized as a problem between individuals, and healing as a form of psychological first aid to treat the individual traumas of stigmatization.

However, in Indigenous psychology, stigmatization is conceptualized as an interdependent problem that has the capacity to psychologically harm the whole of the natural world through the connectivity of all entities, including harm to those who perpetrated the acts of stigmatization.

Healing from stigmatization becomes a collective restorative process. Addressing systemic stigmatization becomes an important part of that collective healing from an Indigenous perspective.

Indigenous psychology views the treatment of stigmatization not as psychological first aid, but rather as healing for the whole person, the whole society, the global community, and the rest of the natural world to attain collective wellness. ■

Useful tips to keep in mind about IP

1

Indigenous psychology is not a science of third world countries or “primitive people”, it is a body of knowledge that is part of a culture, before the importation of any foreign treatment technique.

2

Traditional healers do not operate randomly, they have a method, and they use specific tools. Psychologists can try to understand the symbolism of their technique, without trying to replace or exclude them.

3

Clients referring to TH should be heard and accepted, for the benefit of their care, otherwise they will not believe in the benefits of psychotherapy either. Trust should go both ways



Picture 7: Psychotherapy session in Senegal, the psychologist is having a conversation with two female clients. Photo credit by Tampsy Optoa

Clinical case example

--- HOW PSYCHOLOGISTS HAVE MANAGED TO APPROACH IP

In Senegal, the usage of traditional healing is very common, and various ethnic groups have their specific way to understand and manage individual and social balance.
One of those treatment is called the *Ndëp* and is the traditional healing technique mastered by the Lebou people, native inhabitant of the region of Dakar.
Mental illness is commonly understood as the doing of *Rabs*, invisible ancestral spirits. Govindama (1999) defines them below:

> *"In Wolof and Lebou conception, the Rab is a spiritual being who symbolizes both an ancestor, in reference to the founding ancestor, and the pact that enabled the latter to occupy mythical space. They represent everything that enables the individual to situate oneself in the social and symbolic order: tradition, law, organization of the world and cosmos, etc." (1999, p.280)*

This citation captures the representation of both mental illness, and family transmission. Hence, patients seeking psychotherapy, often mention this reason for their trouble, and ask for clinical support to go through this difficult and sometimes stigmatizing experience.
Here we will present a clinical case extracted from a psychotherapy made in Dakar, Senegal.
The client is named Marian (fictional name) a woman in her late 30's.

She is single and lives at her parents', she was referred by her physician, because since she was an adolescent, she has been suffering from multiple physical pains and tantrums crisis, with no clinical explanations.
Additionally, she dropped out of high school, after several failures, because she had learning difficulties since early childhood. Marian explains this series of failures by the existence of a male *Rab*, who has chosen her, and will not let her go. Her schooling difficulties are explained by the fact that the *Rab* is taking her intelligence, for her not to succeed.
This situation is very hard for her family, as her mother was a schoolteacher, and she never understood her daughter's inability to pursue a normal educational path. Her mother being distant, Marian's father is completely absent, and she regrets it, as she feels like they do not realize how hard this situation is for her.
In her social life, she mentions many toxic friendships, with girls who were always jealous of her, and one of them might be the one who invoked the *Rab* on her. Her romantic life is also poor, as men are not showing much interest, and since the *Rab* will not allow her to marry, he drives them away and they always suddenly lose touch with her.

It seems like *Rabs* were already gravitating around her, as she is Lebou, and they have always had them around the family at every generation. One of her brothers was born with a disability, and died at age 20, because of them.
An uncle has shown violent signs of possession and only gained fragile control of his life at age 40.
In this context, Marian is very worried that she will not be able to have the life she wants, and that the *Rab* will maintain her in that dependency to her family.

During the psychotherapy, she evokes key moments, when the *Rab* showed his presence, and it was always when she was feeling lonely and was disappointed by her father's behavior. Indeed, he was not behaving as an honorable family man, as she found that he was having affairs, and could not tell her mother. Her psychotherapy is a moment when she gets to openly say her truth about him, as she never allowed herself to do so, because as a daughter she cannot think about him with disrespect.
Through this psychotherapeutic path, where she is relieved from her guilt of not being the right daughter for her mother, having witnessed things that she should not have, she learns to imagine a future for herself, and gains confidence. With the help of her older brother, she opens a shop and finally starts her career.

This psychotherapy did not aim to undermine the traditional healing treatments she was pursuing simultaneously or disqualify the explanation she had for her problems. But rather offer a safe space to elaborate symbolic references that the *Rab* represented. Indeed, this ancestral spirit acted as a reminder of the Law of the ancestors, warning them through her, of the loss of cultural values. Being the vehicle of this sanction, Marian's illness called the family into questioning how they got away from traditional rules, and her father's wrong behavior. When speaking about the events that caused the possession, we discuss about the recurrence of female enemies, viewed as sources of her misery. This rivalry actualizes her anger, and this psychotherapy allows her to elaborate on it.

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