Psychotherapy as Liberation:

Toward Specific Skills and Strategies in Multicultural Counseling and Therapy

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Chapter Overview

Counseling is in the midst of a revolution, but many counselors and therapists remain unaware that it is even happening. Specifically, the field is learning that our present theories and techniques are enmeshed in a narrow cultural frame. Multicultural counseling and therapy (MCT), the product of many minds, is evolving toward center stage. MCT shows us how individuals exist in contextual/cultural context. While still appreciating historical tradition, the words “culture-centered counseling” provide a marked contrast with our individually-focused educational backgrounds.

Psychotherapy as liberation is a part of the broader MCT frame. Drawing from many authorities in cultural identity theory (e.g. Cross, 1971; Helms, 1985; 1990; Jackson, 1975, 1990; Jackson & Hardiman, 1983; and Sue & Sue, 1990), liberation psychotherapy focuses on helping clients learn to see themselves in relation to not only themselves, but also cultural/contextual influences with special attention to the family. Self-in-relation replaces our traditional conception of the individual self (Miller, 1991).

As just one example of the importance of self-in-relation, consider the African-American client who comes for therapy to seek stress management techniques to control his hypertension. We know that these cognitive-behavioral techniques can be both emotionally and physically beneficial. Liberation psychotherapy would support and utilize stress management, but would consider these techniques insufficient. It is also necessary to help this client examine his cultural context and consider how the constant barrage of racist acts in society contribute to his concerns. Similarly, women who are diagnosed as depressed or “borderline” need to be helped to see family and cultural issues of sexism underlying much of their difficulty. The failure to help clients see how their difficulties are but the logical result of developmental social and contextual history constitutes a major failing of today’s psychotherapy and counseling.

This chapter is also informed by Paulo Freire (1972) whose basic work inspired the title of the chapter. Freire introduced the word conscientização or critical consciousness stating that one of the major purposes in education (and counseling, by implication) is to

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liberate people to awareness of themselves in social context. Freire also offers some
specific methods for generating critical consciousness which have practical implications
for the counseling field. Ivey’s (1986) developmental therapy helps provide even more
specific suggestions for facilitating client cognitive/emotional liberating processes.

This chapter seeks to draw together theory and practice, reflection and action and
contribute to a new praxis in the field, one which is truly sensitive and fully based on
cultural and contextual aspects of human development.

**Multicultural Counseling and Therapy: Foundations for a New Way to
Conceptualize Theory and Practice**

Liberation is a praxis: the action and reflection of (people) upon their world in
order to transform it. (Freire, 1972, p. 66)

Multicultural counseling and therapy (MCT) offers a new conceptual frame for our theory,
research, and practice. MCT demands that we reflect on the human condition in social
context and work to change inhumane systems. No longer can we “blame the victim” by
stating that personal issues are totally “in the person.” As a liberating process, MCT seeks
to inform individual as to how the social and historical past, present, and future affect
cognition, emotion, and action. In particular, the process of *conscientizacào* as defined by
Paulo Freire (1972, p. 19) is essential:

... *conscientizacào* refers to learning to perceive social, political, and economic
contradictions, and to take action against the oppressive elements of reality.

Psychoanalytic approaches have been criticized by Norman O. Brown (1959) for their
abandonment of social context in favor of social adjustment and self-actualization.
“Human consciousness can be liberated from the parental (Oedipal) complex only by being
liberated from its cultural derivatives, the paternalistic state and the patriarchal God” (p.
155).

Humanistic and cognitive-behavioral theories, too, have met with severe criticism for
similar reasons. Lerman (1992) points out humanistic theories “failed to recognize that no
person constructs their own reality without external influences” (p. 13). She criticizes
hallowed concepts such as self-actualization and autonomy as middle-class products which
simply aren’t relevant to many cultural groups, especially those for whom power rests in
others. It is difficult for one to be “self-actualized” while in the control of another culture.
While recognizing that cognitive-behavioral approaches do consider context, Kantrowitz
and Ballou (1992) comment that “individuals are expected to improve their adaptive
capacities to meet the environmental conditions, which serve to reinforce the dominant
(male) social standards” (p. 79).

In effect traditional counseling and therapy theory are White, male, Eurocentric, and
middle-class in origin and practice. Therapy can be described centrally concerned with
maintaining the status quo. Feminist theory argues that patriarchy is a central condition of
these theories. The negative effects of the controlling patriarchal metaphor are well documented by the radical feminist Mary Daly (1973, 1978). She comments in 1993:

In my analysis, racism is not exactly a “variation” of patriarchy. Rather, I see patriarchy as the root and core of all forms of oppression, including racism, sexism, classism, and speciesism. It would not be accurate to say that I “develop gender as the central issue.” I find this kind of language inadequate to describe the atrocities against women and all oppressed beings on this planet.

Racism, a particularly virulent form of patriarchal domination, has been explored by Fanon (1963). Racism may be described as a form of colonialism in which oppressors actually inscribe a mentality of subordination in the oppressed. This enables oppressors to use the labor and life of the oppressed for their own ends. In *The Wretched of the Earth*, Fanon (1963) comments on the importance of the oppressed finding their own voice and language to name and describe their condition. Asante (1987, p. 115) also points out the importance of naming one’s self as a way to learning new actions— “it is a liberating act, the intellectual equivalent of a slave’s wave of good-bye to (the) master from the North side of the Ohio River.”

The philosophers and theorists of contextualism operate in a very different world from traditional counseling and therapy theory. Hallowed words representing old solutions such as “self-actualization” and “doing one’s own thing,” and “individualism” become new problems to be solved. From this frame of reference traditional counseling and therapy, to paraphrase Eldridge Cleaver, are more problem than solution. Even today, the most cursory review of the influential journals and texts still reveals a naive Eurocentric approach. The increasing influence of the multiculturalists is recognized, but this frame of reference is still clearly a minority voice. All one has to do is look at the number of people attending multicultural presentations at an APA convention to know where the balance of interest and power still lies. Cosmetically, things have indeed changed, but under the powder, one still finds that old reality.

Despite these issues, the field seems to be moving toward a new view, one which is culturally meaningful and relevant with many authors clearly challenging the field (Cheek, 1976; Cheatham & Stewart, 1990; Fukuyama, 1990; Ivey, Ivey, & Simek-Morgan, 1993; LaFromboise & Low, 1989; Locke, 1990, 1992; Myers, 1988; Pedersen & Ivey, 1993; Pedersen & others, 1989; Sue, Ivey, and Pedersen, (1994); White and Parham, 1990, Wrenn, 1962, 1985). The general theme of these and other authors is that cultural issues need to take their place as the center of a totally redefined counseling and therapy.

Multicultural counseling and therapy (MCT) in the past few years has come to be recognized as a new, major fourth force in the helping field. It is important to note that MCT is not going to be formed by one “famed” individual or a small group of key “gurus” as is such in the popular individualistic therapies such as client-centered, cognitive-behavioral, and psychodynamic.

This chapter seeks to elaborate on possible methods, strategies, and techniques for MCT with special attention to the issue of personal liberation. Philosophically, this chapter is
inspired by the radical contextualists Brown, Daly, Fanon, and Freire. Historically, it
draws from the many experts who are forming the new MCT. Pragmatically, for
organizing practice, it draws from Freire and the burgeoning literature on cultural identity
& Hardiman, 1983; Ponterotto, 1988; and Sue & Sue, 1991).

As we move to practice a general theoretical model based on Freire and cultural identity
theory will be presented. This will be followed by specific skills and strategies oriented to
the development of conscientização or critical consciousness. Finally, the chapter will
close with a brief consideration of the place of traditional 1st, 2nd, and 3rd Force
approaches to helping when they are reconsidered from the MCT frame of reference.

**Psychotherapy as Liberation**

Good theory manifests itself in good practice and promotes good research. It is vital the
theory, practice, and research be integrated in praxis. At issue, however is the definition of
the “good” which naturally leads us in a search for truth. The “goods” and “shoulds” of
our past history in counseling and therapy lie in the patriarchal metaphor of individualism
and domination. A psychotherapy of liberation cannot remain hierarchical with firm
distinctions between helper and helpee, counselor and client, and therapist and patient.
The term “client colleague” will be used here to suggest the importance of generating a
more mutual, culturally sensitive approach to counseling and therapy.

We often think of the helping professions as generous and giving. Freire (1972, p. 29)
states that

> True generosity consists precisely in fighting to destroy the causes which nourish
false charity. False charity constrains the fearful and subdued, the “rejects of life”
to extend their trembling hands. True generosity lies in striving so that these hands
—whether of individuals or entire peoples—need to be extended less and less in
supplication, so that more and more they become human hands which work, and
working, transform the world.

To take these theoretical ideas into practice, Freire presents the concepts of co-intentional
education which problems are posed and two people work together intentionally. More
concretely feminist theory focuses on self-in-relation (Miller, 1991) and egalitarian
relationships in which the client becomes a partner, exploring with the other.
Developmental counseling and therapy (Ivey, 1986, 1991) talks about co-construction of
reality in which two people work together to find new meaning and new ways of being.
The person who “helps” may learn as much as the person being “helped.”

“Liberating education consists in acts of cognition, not transfers of information” which
become a dialogue between and among individuals (Freire, 1972, p. 67). A liberating
psychotherapy will help individuals and groups become intentionally conscious of
themselves and conscious of consciousness itself. Freire contrasts a “banking” education in
which “deposits” are made in the student and calls for “problem-posing” education in
which we work together on presenting, discussing, and sometimes resolving contradictions and issues.

The cultural identity theorists cited earlier are central to us in elaborating counseling and psychotherapy as a liberating process. These theories are liberating in that they focus on the expansion of consciousness—learning how to see oneself and others in relation to cultural context.

Cultural identity theory has its roots in the Black and African-American consciousness movement of the 1960’s and, more recently, the feminist, gay/lesbian, and other group liberation movements. The liberation that comes with consciousness of self-in-relation leads to a broader form of self-concept which Cross (1991) terms reference group orientation (RGO). It could be argued that the RGO provided by the Black identity movement has done more for African-American mental health than all other existing theories of human change put together. Feminist theory has done much the same for women as has the gay/lesbian movement.

Ivey and Payton (In press) have related cultural identity to early Platonic roots:

Meaning-making has been identified as a central aspect in the development of a cultural identity. Ivey (1986,1991) has generated a developmental scheme of meaning-making based on Plato (Cornford, 1941/1982). The essence of this framework is Plato’s observation in The Republic that the transition to enlightenment involves four levels of consciousness and that each level builds on previous perceptions of reality, preparing the way for the next higher level. Ivey points out that the progressions of knowledge portrayed in the “Allegory of the Cave” may be construed as a useful framework for the generation of cultural consciousness.

In connecting Plato to cultural consciousness, it may be helpful to recall that the prisoners in the Cave thought that the flickering shadows in front of them was “reality.” As one prisoner was removed from his chains and taken out of the cave, he would eventually realize that what he saw in the cave was not reality, but only a perspective. However, as Plato soberly notes that if the former prisoner were returned to his fellows with news of the new truth, “they would kill him.” The birth of consciousness is lonely and often fraught with real pain.

Cultural identity theory moves people from the cave of naive consciousness about self to awareness of self in relation to system. The parallels to the Platonic journey are not perfect, but do suggest that coming to a new view of reality may involve some difficulty. As Cornford notes, “One moral of the allegory is drawn from the distress caused by too sudden passage from dark to light” (1981/1941, p. 227).

Cultural identity theory, then, enables us to frame counseling and psychotherapy as consciousness development, the generation of more complex cognitions and behaviors as one comes to see oneself in context. Although, there are varying models within the cultural identity theory group, Ivey and Payton (1993) select five stages of consciousness-
development as central. These levels are drawn from Freire (1972) and Jackson and Hardiman (1983). Figure 1 presents the five stages as they are related to Platonic epistemological constructs.

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**Insert Figure 1 About Here**

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One seldom finds a “pure” type and most client colleagues will be mixtures of stages just as we are ourselves. Jackson and Hardiman (1993) also point out that each stage seems to have an entry point, a consolidation phase, and a time for exit as new data force the individual to accommodate to new perspectives. Parham (1989) notes also that it is possible to recycle through the separate stages several times in a lifetime as one discovers new issues of identity and discrimination. Important in his discussion is an emphasis on circularity and connection as contrasted with linearity and boundaries.

The above paragraph is particularly important as Plato talked of the “highest” forms of knowledge as those involving the dialectic. However, the cultural identity theorists, and Parham (1989), in particular, remind us that each stage or level of consciousness has special value and need not ever be fully discarded. In short, a liberation psychotherapy must, of necessity, criticize hierarchical Platonic epistemology.

**Oppressive or Revolutionary Action?**

Traditional therapy and counseling tend to be oriented toward oppressive action. Freire’s theory of oppressive action below illustrates what occurs when a therapist (“the-rapeist”) acts on clients. Note that the language of therapy orients us as a dominant elite to act on clients or patients. And, as part of the action, whether we use humanistic, behavioral, or psychodynamic formats, we tend to bring the client “back to reality.” In this typical model, the client receives knowledge from the expert. Societal context is not considered in this current frame of reference, except perhaps as therapists and counselors as “experts” may define it.

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\text{Actors-Subjects} \\
(\text{dominant elites})
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<td>the reality</td>
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<td>reality to be preserved</td>
<td>(as part of reality)</td>
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<td>for</td>
<td>Objective— the preservation of oppression</td>
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Freire (1972, p. 131)

To concretize the above diagram, consider the cognitive-behavioral therapist who meets with a holocaust survivor or a Vietnam veteran who manifest clinical depression. Fairly effective treatment procedures can be established with this framework to help these clients
feel better. Medication can also ease the process. Freire would term this type of therapy oppressive as it fails to inform the client colleagues of how the depression is a logical result of developmental history and oppressive social conditions. Effective education and therapy seek to work with client colleagues to consider how oppressive conditions contribute to present reality. This naming of social context is very much a joint act between counselor and client colleague.

Freire also talks of a theory of revolutionary action in which Intersubjectivity—a framework of equality surrounds the educator—student relationship. Feminist theory (e.g. Ballou & Gabalac, 1984) is the prime current example of how psychotherapy can become liberating rather than encapsulating. Note that the counselor or therapist work with the client colleague in this model. Both learn together how they might transform reality—interaction of the pair in the helping relationship replaces action of the therapy on the client as occurs in traditional helping models.

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<th>Intersubjectivity</th>
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<td>Subjects-Actors</td>
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<td>(revolutionary leaders)</td>
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<td>Actors-Subjects</td>
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Interaction

Object which mediates

Reality to be transformed

for

Objective Humanization Objective

as a permanent process

Freire (1972, p. 131)

Psychotherapy as liberation demands two (or more) people working together to examine their relationship with each other and their social context. What is the affect and impact of the social environment on individual thought and action? Armed with personal and contextual information, two (or more) can work together to transform reality.

The holocaust survivor and the Vietnam veteran learn how social contextual issues of anti-Semitism and society’s denial of Vietnam contribute to their so-called emotional distress or DSM-IV diagnostic classification. In addition, the client colleagues are encouraged to work toward attacking social conditions which may be causative of their issues. It is not enough to learn that one has been a victim, one can benefit from attacking the source of victimization. If the problem is not in the individual, we also need to attack external social/contextual stressors. Both therapists and clients can benefit through a therapy which also seeks to address environmental causes of individual distress.

Conscientização: How Does One Integrate Theory With Practice?
But, how does one integrate theory with practice? It is useful to turn once again to Freire’s integration of his theory with practice—praxis. Freire did not just theorize, he developed a comprehensive method which provides us with some specifics for counseling and therapy praxis. Chapter 3 (pages 75-118) of The Pedagogy of the Oppressed outlines specifics of consciousness raising. The following paragraphs will focus on his methods.

Freire might meet with a group of peasants over a campfire. The shared objective would be literacy training in which the peasants were to select and name the words they wished to learn. Freire worked out of the peasants life experience and so reading education would naturally focus on the life of the peasant. In this way, Freire is as much a learner as our his “students.”

Freire and his students would identify objects in their natural environment and cultural surround. He stressed the importance of codification in which themes of the culture were identified. He used visual, tactile, and auditory channels as the peasants identified things in their environment. Counselors and therapists using the developmental counseling and therapy model (Ivey, 1986) would recognize this as sensorimotor questioning (“What are you seeing? Hearing? Feeling?”) in which direct experience is accessed as most fundamental. Neurolinguistic programming (Lankton, 1980) uses this type of questioning to help the client colleague anchor present and past life experiencing. However, it is most important to note that Freire was using specifics of neurolinguistic programming long before this psychotherapeutic mode became popular. Freire was key to developmental counseling and therapy’s inclusion of these concepts in its methodology, particularly as related to contextual issues.

Freire followed codification of experience with naming. His groups would describe the events of their lives and name what they saw, heard, and felt. The named words of lived experience would serve as the foundation of their reading. In psychotherapeutic terms, we want to know what the nature of direct experience and how the client colleague names this experience.

It is here that cultural identity theory can be helpful in understanding what Freire was doing. The peasants and Freire were operating in a state of naiveté and were at a stage of passive acceptance of the conditions of life on a plantation (see Figure 1). In Platonic terms, they were “imagining” life rather than truly experiencing it. The act of naming experience enabled the peasants to first know what was happening and later to reflect on their condition.

For a concrete example, Freire might ask the peasants to describe what they saw, heard, and felt during a typical day. Important would be specific sensorimotor images of events. Then, he might ask them to describe the daily life of the plantation owner as they saw, heard, and felt it, thus helping them identify and concretize contradictions. The words used in these descriptions would be the foundation for literacy training. The concrete names they used to describe their own lives and that of the plantation owner often brought them to new and more complex forms of cognition and emotion about their previously lived experience had made possible. In short the act of naming and identifying contradictions is essential to cognitive, emotional, and behavioral growth.
In the above example, the names given to life experience are primarily those of the client colleague. The names are not taken from a previously agreed on theory developed by remote experts. The names also help the leader or counselor identity new ways to conceptualize experience.

Bringing and extending these concepts to cultural identity theory and counseling practice, the task for varying cultural groups is to first identify experience as lived (what they see, hear, and feel), then the experience is named and sometimes acted on as a result of naming. As part of this type of examination, clients naturally reflect and redefine the meaning of their experience. These therapeutic and educational processes relate cultural identity theory, the Platonic epistemology, and Freire’s original thought. These comparable dimensions are outlined in Figure 2.

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**Insert Figure 2 About Here**

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Figure 2 points out that specific actions can be employed at each stage of consciousness to facilitate movement to the next level. Freire used many techniques which are similar to those used daily in counseling and psychotherapy, but his goal was equality and action in the system, not conforming individuals to the status quo. Institutional or environmental change as a result of naming also often was engaged in by joint action of the leader and the group.

The goal of *conscientizacão* is critical consciousness—the client colleague who experiences self, perhaps for the first time, and then begins to see how self was constructed in a socio-cultural relationship. Freire, Jackson and Hardiman, and the cultural identity theorists provide a diagnostic frame which can serve as a place to design helping interventions and assess their effectiveness.

**Case Example of MCT Theory in Practice**

Assume you are working with a low-income Puerto Rican woman who suffers from *ataques de nervios*. These are best described as epileptic-like seizures which have an emotional base and function in Puerto Rican culture. U.S. psychology originally pathologized these events as hysteria or thought them actually to be physical in origin (Rivera-Arzola, 1991). We now know that such events are a normal part of dealing with trauma and grief in Puerto Rican culture. The following passage is a direct quote from Cheatham, Ivey, Ivey, and Simek-Morgan (1993, 114-115) and is used by permission. Parts which are not direct quotes are in italics.

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2 Following from Jackson and Hardiman (1983), the author believe that each cognitive-developmental stage has its useful qualities, but also some which produce dissonance and the desire to move onward to more complete development of consciousness. You will find in the following example an implicit eight-stage model of cultural identity development.
The client colleague is a single parent, twenty-five years of age with two children. (As once was common in Puerto Rico,) she has been sterilized with only minimal information given to her before she gave consent. She has suffered physical abuse both as a child and in more recent relationships. Following is an example of how multicultural counseling and therapy might use cultural identity development theory to facilitate conscientização and the generation of critical consciousness.

Acceptance—diagnostic signs. The client colleague enters counseling hesitatingly as her ataques de nervios are increasing in frequency. A physician has referred the client colleague to you believing that the fainting spells are psychological in origin as no physical reasons can be found. As you talk with the client colleague you discover that she blames herself for the failures in her life. She comments that she is “always choosing the wrong man” and she states she should have been sterilized sooner and thus fewer children would be born.

Acceptance—helping interventions and producing dissonance. Your intervention at this stage is to listen, but following Freire (1972, pp. 114-116), you can seek to help her codify or make sense of her present experience. You use guided imagery as you help her review critical life events—the scenes around sterilization, the difficulties of economic survival when surrounded by others who have wealth, and actual discrimination against Puerto Ricans in nearby factories. . . . Through listening and perturbing with dissonant images, the move to a more critical consciousness is begun. But, at the same time, your client colleague needs help. You may see that she has sufficient food and shelter, you may help her find a job. You may teach her basic stress management and relaxation, but especially you listen and learn.

Naming and resistance—Diagnostic signs. At this point, the Puerto Rican client colleague is likely to become very angry for the responsibility or “fault” which she believed was hers is now seen as almost totally in the oppressive environment. Her eyes may flash as she talks about “them.” An emotional release may occur as she becomes aware that the decision for sterilization was not truly hers, but imposed by an authoritarian physician. The woman is likely to seek to strike back wherever possible against those whom she feels has oppressed her. In the early stages of naming, she may fail to separate people who have truly victimized her from those who have “merely” stood by and said nothing.3

Naming and resistance-Interventions to help and produce dissonance. Early in this stage, you are very likely to do a lot of listening. You may find it helpful to teach the client colleague culturally-appropriate assertiveness training and anger management. There may be a delayed anger reaction to traditional sex roles. Later, this client colleague may profit from reality therapy. However, the therapy must be

3 “Not to decide is to decide.” This was a popular poster of the 1960’s attributed to the theologian Harvey Cox. MCT raises difficult issues about responsibility for change. Many good people have not victimized directly, but by their silence may also share a responsibility for the hurt of others. Reparation of one’s inaction may at times be as important as confessing complicity in direct hurts.
adapted to her relational Puerto Rican heritage. You may support constructive action on her part to change oppressive situations. In the later stages of work with her, you may want to help her see that much of her consciousness and being depends on her opposition to the status quo and that she has given little attention to her own real needs and wishes. At this point, identifying and naming contradictions between self and society may be especially important.

*Reflection and redefinition—Diagnostic signs.* It gets very tiring to spend one’s life in total anger towards society and others. The consciousness-raising theories find that at this stage that clients often retreat to their own gender and/or cultural community to reflect on what has happened to them and to others. Responsibility is now seen as more internal in nature, but keen awareness of external issues remains. You may note that the client colleague at this stage is less interested in action and more interested in understanding self and culture. There may be a great interest in understanding and appreciating her Puerto Rican heritage and how it plays itself out in North America.

*Reflection and redefinition—Interventions to help and produce dissonance.* Teaching client colleagues the cultural identity development theories can be useful at this stage as they help explain issues of development in culture. In addition, culturally appropriate theories such as . . . feminist theory may be especially helpful, although they are useful at all consciousness levels. Cognitive-behavioral, psychodynamic, and person-centered theories may be used if adapted to the culture and needs of the person. The reflective consciousness is still considered a form of naïve consciousness by Freire as much of the emphasis is on the individual with insufficient attention given to systemic roots of difficulties.

*Multiperspective integration—diagnostic signs.* The Puerto Rican client colleague draws from all previous stages as appropriate to the situation. At times, she may accept situations, at other times be appropriately aggressive and angry, and later withdraw and reflect on herself and her relationships to others and society. She is likely to be aware of how her physical symptoms of ataqués de nervios were a logical result of the place of women in her culture. She is able to balance responsibility between herself and society. At the same time, she does not see her level of conscientização as “higher” than others. She respects alternative frames of reference.

*Multiperspective integration—Interventions to help and produce dissonance.* You as helper may ask the client colleague to join with you and your group to attack some of the issues which “cause” emotional personal and financial difficulty. The Puerto Rican woman may establish a family planning clinic with accurate information on the long-term effects of sterilization or she may establish a day-care center. The woman is clearly aware of how her difficulties developed in a system of relationships and balances internal and external responsibility for action. In terms of introducing dissonance, your task may require helping her with time management, stress management, and in balancing the many possible actions she encounters. You may also arrange to see that she has accurate feedback from
others about her own life and work. *You do not merely encourage her to work to transform the system. You also work with her to facilitate the process. You and your client colleague are now working together to produce cultural change in oppressive conditions.*

**In summary**, MCT as presented here provides specific actions which can lead to critical consciousness and *conscientização*. The example here of a Puerto Rican woman could be changed to represent a middle-class woman, a gay male, or any of a variety of culturally distinct client colleagues. Particularly relevant for broader practice of counseling and therapy is Pfefferle’s (1989) developmental concepts of the long-term psychological problems. She states that depressed client colleagues typically see themselves as responsible for their problems in the early stages and only gradually move to awareness that depression was generated in a systemic context. Rigazio-DiGilio (1989) and Rigazio-DiGilio and Ivey (1990) found that systematic questioning of depressed clients led toward a critical consciousness. In this new state of awareness, the clients were able to balance responsibility for self and others in a more constructive fashion.

The above discussion suggests that psychotherapy as liberation has much to offer individuals and the growth process. Our problem has been that we tend to focus too much of our efforts at the Platonic belief and thinking stages—thus our emphasis on behavior and cognition. We have given insufficient attention to sensorimotor reality and direct client experience and, most seriously, we have failed to consider the systemic issues underlying the client colleague’s world.

We have restricted counseling and psychotherapy unnecessarily in our search for self-actualization and individual change. No longer is it adequate to situate problems *in-the-individual* and then use our traditional humanistic, cognitive-behavioral, and psychodynamic strategies. The time has come to increase our attention to the direct experience of the individual through immediate sensorimotor reality and consider how that reality is affected by systemic contextual/cultural issues. Armed with this knowledge it may or may not be appropriate to utilize traditional techniques as we have in the past, but certainly our present armament of techniques and strategies is inadequate by itself a new future.

Let us now turn to some example specific verbal skills and strategies which may be useful to client colleagues and ourselves in the process of *conscientização* or critical consciousness.

**The Skills and Strategies of Conscientização**

Drawing from the above theoretical framework, Ivey (1993) defines specific skills and strategies which might be used in the process of *conscientização*—helping client colleagues and ourselves achieve critical consciousness. With each client colleague, the relationship needs to be more egalitarian and less hierarchical than we usually associate with psychotherapy. It is important to note that the first task of *conscientização* is to identify where you and the other person are in terms of cultural identity and awareness of
systemic issues. If you are not aware, then your opportunity to helping your client colleague grow and develop is minimized. However, an aware client colleague can help you grow to increased awareness of the systemic issues of personal oppression underlying their personal distress.

Thus the first task and strategy of gaining critical consciousness is to examine ourselves as contextual/cultural beings. A useful part of this process uses cultural identity theory. Each of us needs to become fully aware of ourselves as racial and ethnic beings. Moreover, it is also important that we expand our awareness of issues of gender, sexual preference, degrees of physical and emotional ability, spirituality, and socio-economic issues. For some of our clients, the multicultural issue for psychotherapy and counseling may focus on sexual preference with ethnic and religious concerns prominently intertwined. For other clients, the major issue may be gender or a physical challenge. Our multicultural identity covers many facets.

Following are some specific skills and strategies to help client colleagues and ourselves to move to new and more complete levels of multicultural understanding and action:

*Helping a client colleague first understand the self-in-relation more completely and then helping them move from naiveté or acceptance to naming and resistance.* For a client colleague who comes to us at the naive or acceptant level of cultural identity, we may anticipate a good deal of self-blame, an underlying depression or hopelessness, and a sense of futility. Moreover, this person may have a false consciousness and actively accept racist, sexist, or homophobic behavior—what some terms playing host to the oppressor. To facilitate awareness and growth, it would be useful to use visualization exercises followed by naming the experience shown in the exercises. The client colleague can be asked “What are you seeing? Hearing? Feeling? Racist, sexist, homophobic, or other discriminatory experiences may be reviewed.

Ivey (1993) suggests some specific questions which may be useful in this process which may help the client colleague move from their present level or stage of consciousness to the next.

- Moving from naiveté to examination of acceptant behaviors, feelings, and thoughts. Tell me about your life. Tell me about a time when you felt one-down, out of control, depressed/oppressed, or helpless. Tell me about the others in this situation?

- Moving from acceptance to naming and resistance. What is your image of the situation? What are you seeing? Hearing? Feeling? Locate the feeling in a specific place in your body. What is your image of the other or the context? Use the same sensorimotor questions to elaborate the image and the bodily feelings which are associated. How would you name that image, feeling, or experience?

*Helping client colleague expand their understanding of naming and resistance and to move to the next stage or level.* We usually identify a client colleague as a person who has developed a well defined anger at the system (although this anger may be injurious to
health). We also tend to find that client colleagues at this level or stage have identified their sense of self as built in opposition to the other. For example, African-Americans are not White European-Americans, women are not men, differently abled are not able—the locus of control is often external rather than internal.

Some useful techniques to help individuals survive at this stage (and the previous stage) include listening carefully to the concrete details of the stories of oppression, presenting stress management and cognitive-behavioral therapy to help the person cope with “reality.” Assertiveness training may be useful to help the client colleague start work toward reforming the system. Also, it is important to start confronting the external locus of control, thus facilitating the development of a stronger sense of self-inrelation.

Some specific questions suggested by Ivey (1993) to facilitate movement to the next stage.

Tell me a story of what happened. What happened first, next, and how did it end? Note the emphasis on linearity and cause and effect in story telling. (Here we are applying some basic principles of applied behavioral analysis and rational-emotive therapy) to client colleague images and stories so that they can understand them better. As a therapist, you can help your client colleague— “It you say X, then what is likely to be the consequence?” The skill of logical consequences may be useful as well.

After this review of the story, how would you name or think about the story now? Can your name your thought and feelings?

Have the client colleague tell several concrete stories in linear detail, then ask for reflection. As you look back on your story, what occurs for you? What meaning to you make of it?

Helping client colleague expand their understanding of reflection and redefinition and also move to dialogic, multiperspective stage or level. Whereas as the concrete naming and resistance stage tends to focus on action, this stage tends to emphasize reflective thought. Freire (1972, p. 75) discusses action and reflection as two parts of true praxis. Too extensive an emphasis on action leads to “activism” which insufficient attention to the reasons and purpose of action. Too extensive an emphasis on reflection leads to “verbalism” with little or no action.

The reflective consciousness is an important part of cultural identity theory with obvious strengths and weaknesses so well outlined by Freire. The cognitive, the humanistic, and the psychodynamic orientations are renowned for their verbalism and emphasis on thought as opposed to action. Behavioral psychology, of course, has received many attacks for insufficient reflection. Small wonder that the cognitive-behavioral revolution is upon us, but even this approach has limitations as it gives insufficient attention to experiencing the systemic issues faced in a multicultural society.
Reflection offers a time to build a sense of self-in-relation to cultural context and develop a stronger sense of internal locus of control. A woman, for example, may be expected to start defining herself uniquely as a woman rather than in opposition to men. A Latina/o will define her or himself on the basis of personal and cultural norms.

Techniques useful in expanding self and cultural awareness are group consciousness raising programs such as those widely used in the early stages of feminist or other cultural support groups. Traditional cognitive and behavioral psychological theories can be useful, but only if the theories are culturally shaped and adapted. Confrontation techniques within the interview and group are particularly important as contradictions in are identified. This is the basis of later true dialogical thought.

Characteristic questions useful at this time include:

What is common to your stories? What are the patterns?

How do we think about these stories and how could we think about them differently?

Which of your behaviors and thoughts are yours? Which are those that come from your cultural surround and past life history?

How do family stories and family history relate to your conception of self? Of your cultural background? Of how the two relate?

What parts of you are driven internally? What parts by external forces? And, how can we tell the difference?

Standing back, what inconsistencies can we identify?

Continuing and expanding multiperspective integration. Here we are looking for true praxis—the integration of thought and action. The individual or group here freely draws from and sees the value in all other stages and levels, but clearly see self in social/family/historical context. The ability to take multiple perspectives on data is central to this stage, but this contains the seed for a major problem as it is easy for the individual or group to become enmeshed in possibility and fail to act on new cognitions and emotions.

Supporting development at this stage are community and network efforts in which the individual or group seeks out new goals and actions. The individual at the multiperspective level will be able to see many points of view and take action, as appropriate to the situation. The transforming consciousness seeks to move toward action and to make a difference in the world.

Some questions which may help individuals and groups at the multiperspectival integration stage:
As we look back on all we’ve talked about and/or done, what stands out for you? How? Why? How do you/we put together all we’ve talked about? *These questions help the individual or group look back and reflect on their own cognitive and emotional operations. These questions may also help reorganize old thought patterns leading to a new perspective on old situations.*

What rule(s) were you (or the other person or group) operating under? Where did that rule come from? How might someone else describe that situation (another family member, a member of the opposition, someone from a different cultural background)? How do these rules relate to us now?

How might we describe this from the point of view of some other person, theoretical framework, or language system? How might we put it together using another framework?

What does our family, our educational, our work history say about the development and operation of oppression?

What shall we do? How shall we do it together? What is *our* objective and how can we work together effectively? Or, equally likely, perhaps the client colleague wishes to manage his or her own affairs and take action as a leader in her or his own right.

Perhaps the last question is the most important. It is the one which reminds us most specifically of praxis—the importance of integrating our thoughts with specific actions.

*Summary.* The questions above can be introduced, as appropriate, to any counseling or therapeutic situation. The goal is to help the client colleague see her or his issues in social and historical context. This is not to take responsibility for action away from individuals, but to help them understand that they are not alone in their issues and that full resolution of conflicting situations usually involves some action and awareness of social context. The stoic model — “it is not things, but what we think of things that is important” — clearly does not hold here. Thought and action must become a unified whole.

You will also find that working with a client colleague systematically through these questions may result in a beginning change in consciousness. We have become so enamored of individualistic psychology that even working carefully with questions of this type can result in major changes in thought patterns, which in turn can lead to new actions.

The egalitarian, dialogical touch is also important in this framework. With clearly defined goals, specific techniques and questions, it would be all too easy to fall into a hierarchical client-counselor or patient-therapist model. Thus, as often occurs in feminist therapy, goals should be established jointly with the client colleague, constant joint review of the value of each session needs to be undertaken and goals jointly rewritten as needed. The dialogical therapist or counselor tends not to be formally wedded to a specific procedure and all techniques and strategies are open to the client colleagues review and modification.
In a sense, counseling and psychotherapy become less predictable we join with client colleagues in co-constructing a new vision.

Some Final Words

Psychotherapy as liberation entails a radical revision of helping theory. The developmental psychology of cultural identity theory is basic to the framework. It is a framework which focuses on self-in-context and self-in-relation. The individualism usually associated with traditional psychology is not eliminated, but is recognized for what it is—a cultural variant, most likely appropriate for those from a European-American background. But, even here, there is a question of excessive individualism. The failure of American and Western psychology to see the individual in cultural context suggests that considerable effort and thought needs to be given to revising our traditional modes of helping.

Humanistic, psychodynamic, and cognitive-behavioral theory have brought us many ideas and innovations. We need not discard them, but we need to review them anew as culturally derived phenomena. How can we change, shape, and adapt for the culturally diverse future we all face?

Psychotherapy as liberation has been presented here as a beginning step toward integrating cultural identity theory more directly into helping practice. I hope that the ideas here may be useful in some small way toward a more culturally-sensitive approach to the profession of helping.

REFERENCES—Partial List. Needs to be completed.

Alschuler, A. (1986) Creating a world where it is easier to love: Counseling applications of Paulo Freire’s theory. Journal of Counseling and Development. 64, 492-496.


Fanon, F. *The Wretched of the Earth.* (1963) New York: Grove Wheatland.


Cultural Identity Theory and Platonic Epistemology

<table>
<thead>
<tr>
<th>Cultural Identity Theory</th>
<th>Plato</th>
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<tbody>
<tr>
<td>Naiveté</td>
<td>Imagining</td>
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<td>Acceptance-passive or active</td>
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<tr>
<td>Naming and resistance-passive or active</td>
<td>Belief</td>
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-----The Line between the world of appearances and the intelligible world-----

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<thead>
<tr>
<th>Redefinition and reflection</th>
<th>Thinking</th>
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<td>Multiperspective integration</td>
<td>Dialectic</td>
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### Figure 2

**Three Alternative Frames Compared as They Relate to Cognitive, Emotional, and Behavior Change**

<table>
<thead>
<tr>
<th>Cultural Identity Theory</th>
<th>Plato</th>
<th>Freire</th>
<th>Actions Needed to Produce Change to Next Level/Stage</th>
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</thead>
<tbody>
<tr>
<td>Naiveté</td>
<td>Imagining</td>
<td>Magical Consciousness (Conforming) (^4)</td>
<td>Describe life experience</td>
</tr>
<tr>
<td>Acceptance</td>
<td></td>
<td>Naive Consciousness</td>
<td>Name and note contradictions in experience with emphasis on contextual issues</td>
</tr>
<tr>
<td>Naming and resistance</td>
<td>Belief</td>
<td>Beginning of critical consciousness (Reforming)</td>
<td>Encourage examination and reflection on contradictions in system</td>
</tr>
<tr>
<td>system</td>
<td></td>
<td></td>
<td>Major emotional change frequently occurs, often anger.</td>
</tr>
<tr>
<td>Redefinition and Reflection</td>
<td>Thinking</td>
<td></td>
<td>Encourage examination of self and self-in system Emotional pride in self and culture.</td>
</tr>
<tr>
<td>Multiperspective Integration</td>
<td>Dialectic</td>
<td>Critical consciousness (Transforming) Conscientizacão</td>
<td>Continue emphasis of on dialogic thought and co-investigation of reality and joint action to transform reality.</td>
</tr>
</tbody>
</table>

\(^4\) Conforming, reforming, and transforming are terms coined by Alschuler (1986) which are helpful in defining the changes which occur with critical consciousness.