

UBUNTU: A THEORETICAL EXAMINATION OF THE POTENTIALITIES
OF AN EMERGENT HUMANISTIC PARADIGM

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by
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Doctor of Philosophy in Psychology

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AbstractUBUNTU: A THEORETICAL EXAMINATION OF THE POTENTIALITIES
OF AN EMERGENT HUMANISTIC PARADIGM

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This theoretical dissertation argued for the need to develop alternative humanistic paradigms that can help Euro-American psychology address issues of individualism and ethnocentrism and contribute to our appreciation of the value of interdependence. The paradigm proposed is rooted in the philosophical construct of an African belief system known in South Africa as Ubuntu. Ubuntu is known by many different names across the continent of Africa, but the underlying philosophy finds clear expression through sub-Saharan Africa. Ubuntu locates identity and meaning in the importance of human connections and an interrelated self rather than individual expression and has played a significant role in the psychological well-being and resilience of indigenous Africans for countless generations.

The potentialities of utilizing Ubuntu as a humanistic paradigm have heretofore been unexamined. In this dissertation, an interpretive hermeneutic method was employed to explore the philosophy of Ubuntu and review relevant literature from humanistic psychology, critical psychology, indigenous psychologies, Eastern philosophies/psychology, liberation psychology, African psychology, the practice of psychology as it has evolved in South Africa, and African humanism. This dissertation also examined the

differences between individualistic and sociocentric or communalistic societies, highlighting the contrasting constructs and expression of self.

In support of pragmatic application, the results of earlier research into the potential use of Ubuntu within child and adolescent residential treatment facilities were included, indicating that Ubuntu should be explored further as a tool of significant therapeutic promise. Overall findings suggested that Ubuntu offers Euro-American psychology unique opportunities to correct self-centered biases in understanding the self and provides humanistic ways of being in the world that are authentic, holistic, and relationally responsible.

Dedication

To
Nancy

My light, my life, my redemption

Acknowledgements

This dissertation is a physical embodiment of the concept of community. Without a strong supportive community—my community—this paper and my academic career would never have been envisioned, much less found fruition. It is a testament to the strength of my community that I have successfully reached the end of this journey. There are many to thank for what is wrongly perceived to be an individual success, and I am honored and humbled to have this forum to do so.

I must start with my maternal grandmother. She taught me that the greatest personal attributes are to be simple, genuine, and loyal—each of which she exemplified with grace and quiet wisdom. I would also like to thank my mother, Patsy Hanks, for modeling the value of education, service to others, and the pursuit of dreams despite overwhelming obstacles.

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Beyond my local community, I must acknowledge an extended circle of very special human beings who have guided my work from its inception. I cannot begin to offer enough thanks to my cherished mentor, Dr. Maxine Borowsky Junge. It was Max who first suggested I go on for a Ph.D. after Goddard. With loving support and sardonic wit, she nudged me beyond what I thought were my limitations. When I protested that I

would be far too old by the time I finished a Ph.D. program, she responded, “You will be an old broad by then anyway, why not be an old broad *with a Ph.D.*?” Thank you, Max. As usual, you were right.

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Lastly, I owe an incomprehensible debt of gratitude to the amazing, brave, open, loving, funny, and resilient children of Molweni, South Africa. It is because

of them I have tremendous hope that it is not too late for mankind to come together and heal.

I am who I am because of who we all are. Ubuntu.

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Chapter 1 Introduction

This theoretical dissertation argues for the need to develop an alternative paradigm within psychology that is less positivistic, ethnocentric, and individualistic than those most visible within the field today. Envisioned is an emergent paradigm that evolves from the humanistic tradition with an understanding of the global, multicultural nature of this modern world and that is rooted in the philosophical construct of an ancient African belief system and worldview known as *Ubuntu*. I have chosen Ubuntu because I believe it could be used to increase the applicability, relevance, and authenticity of therapeutic interventions, addressing the psychological needs of Western individuals as they cope with the demands of a 21st-century global community.

Ubuntu is a broad philosophical belief that locates identity and meaning within human connection, not expression of individual attributes. Rather than viewing individuals as separate, striving entities, Ubuntu advocates harmonious interactions that benefit not only the individual but the greater community as well. There are other indigenous systems of belief with similar perspectives, each with its own special history and cultural meaning. Although these systems also offer sociocentric, holistic ways of being and potential for universal application, I believe a strong argument can be made for incorporating the Ubuntu paradigm into Western life and psychological practice. The focus here on the Ubuntu tradition is intended to capture its unique contributions and show how it can offer a humanistic, paradigmatic alternative that has a greater appreciation for the importance of human connection and interdependence than most traditional Western psychologies.

Personal Experiences

My initial exposure to the concept of Ubuntu was in early 2004, when I made the first of many trips to South Africa and the Zulu nation. A typical (and ethnocentric) U.S.-American with an advanced education and many years of experience in the social services, I went to South Africa convinced that I could facilitate the adoption of at least a few of the country's 150,000 AIDS orphans. As the result of extensive research, I knew that the majority of the orphaned South African children would die before the age of 12 without significant intervention. As an adoptive parent myself, I also knew that children can flourish in trans-racial adoptions, despite cultural differences. I was aware that maintaining culture is important, but I felt that cultural differences are insignificant when the alternative to trans-racial, transnational adoption would be death. I arrived in Zululand determined not only to save the children but to address myriad social ills as well. I thought I was there to *help*.

As expected, I found many sorrows within the Zulu community, such as extreme poverty, HIV/AIDS, and an insidious epidemic of child rape. I quickly realized that many of these contemporary South African ills were symptomatic of years of colonialism, apartheid, cultural invasion, and resultant extreme poverty. This was a sobering revelation, but the true revelation came when I realized that life with these horrors did not define the majority of the Zulus that I met. Western convention would have them depressed, suicidal, angry, and blaming, but they were not. Despite the obstacles they face on a daily basis, the great majority of people I encountered on my many trips to South Africa have been what I can only describe as "happy." I was perplexed. As a resident of an industrialized, economically advanced country, I could not fathom how

these materially impoverished people could so easily possess something that is so elusive to the majority of Americans that we spend billions of dollars each year to pursue—namely, happiness.

I found the Zulus to be gracious and welcoming, loving, and open. They brought me into their homes as if I was family. I was thousands of miles away from my home, and yet I had never experienced such a sense of community. Ever pragmatic and not wanting to over-romanticize what I was experiencing, I asked, How could this be? In a land with so little, how could there be so much? Having come from a land of material excess, why was I so inexplicably drawn to this community of people with what appeared to be so little? An elderly woman explained with a single word, “Ubuntu.”

Ubuntu is a unifying principle to South African Zulu and other indigenous African peoples. It is a commitment to a communal lifestyle that values each member of the community with an emphasis on the self-in-relation-to-others as the ideal way of being. Over and over, I experienced this commitment to community firsthand as I met the villagers of Molweni township (roughly translated, *Molweni* means “Hello!”). HIV/AIDS is rampant in Molweni. No family has gone untouched, and the number of parentless children is high; yet, there were only two small orphanages and virtually no homeless children as there are in other countries struck by the disease. Most Molweni children whose parents have died are being raised by extended family or have been assimilated into other families. It is not uncommon to find four or five unrelated children living in a home that already has seven or eight members of a blood-related family. This, I was told, is because *everyone* is family in the Zulu culture that is driven by Ubuntu.

While visiting the first time, and unfamiliar with the value of the South African rand, I gave a preteen boy what turned out to be the equivalent of \$20 U.S. money. After thanking me profusely, he rushed off to the neighborhood store, returning with a huge cache of candy, sodas, and chips. He then proceeded to dole out his loot to every sibling and neighbor child in sight, only keeping for himself what was left after he was assured that everyone else had something.

On another occasion, I took a fairly significant amount of food, including 20 pounds of oranges (a rare treat in Molweni), to a family of 14. The family consisted of a mother and father, their six children, and six cousins they had taken in after their mother had died of AIDS. By local standards, the family was fairly well off. Both parents were employed, and the family's home had electricity. They had even managed to buy a second-hand refrigerator, a fact that played into my food purchases, as I bought meat that could be frozen, thinking that it would feed them for some time to come. I was surprised 3 days later when I returned to the home to find that all of the food I had recently purchased was nowhere in sight. Horrified, I asked if they had been robbed. They laughed and explained that they had shared all the food with neighbors. Not yet appreciating the nature of Ubuntu, I politely protested that I had intended the food be frozen and used to feed their family over a period of time. They were completely perplexed at the notion of hoarding food for their own use when other families had none. Ashamed of myself and the selfish, self-serving nature of my culture, I began to see that the tables were turned. I was not there to save the Zulu people. They were there to save me.

Subsequent trips brought further enlightenment—further evidence of the power of this strange thing called Ubuntu. But I continued to struggle with the contradictory facets of South African life. How could the peaceful, almost Utopian dictates of Ubuntu be reconciled with the harsh reality of epidemically high levels of child rape in the area? Logically, wouldn't the two be diametrically opposed expressions of existence? I continued to be perplexed. During one trip, I was accompanied by a friend, who is a feminist documentary filmmaker, and a very small camera crew. We were hoping that by interviewing the mothers of young Zulu girls (and a few boys) who had been raped, we could grasp why this horror was happening and initiate efforts to stop it. We filmed outside a *rondavel*, a traditional round Zulu home, for over 3 hours. One after another the Zulu mothers told the stories in broken English or through a translator of how their child(ren) had been raped. Many of the children played nearby, chasing chickens and each other, oblivious to the recounting of their violations. One, however, a very small 4-year-old named Plenty, had tired of the play and had joined our circle, first sitting with her mother, then inexplicably launching herself into my lap where she listened intently to the conversation. (Luckily, she had arrived *after* her mother had told of Plenty and her sister's rapes.) The day was viciously windy, and the stories were excruciatingly brutal. I was beginning to question whether, in addition to Nietzsche's God, Ubuntu was dead. Being a parent, I instinctively cupped my hands over Plenty's ears to protect her from the wind (and maybe subconsciously from the stories), and she looked up at me with the most open, loving look I had ever seen. I was immediately struck by the fact that this beautiful child had been viciously raped and yet she still possessed the capacity to be so open, loving, and trusting. She had experienced no counseling, no therapy, no Western

notion of healing intervention, and yet, at least for that moment in time, she was going to be okay. She hurriedly kissed me on the cheek and ran off to play again. It was at that moment that I came to believe in this thing called Ubuntu. I realized that Ubuntu is resilience; it is healing; and it is needed in areas beyond Molweni, South Africa.

Ubuntu. Since my exposure to it, that simple word has transformed the way I view things—as a student; as a scholar; as a psychologist; and, most importantly, as a human being. I have come to believe that embracing and adapting Ubuntu as a humanistic paradigm can allow us in the West to make much-needed changes within the field of psychology and our daily lives. We can do this by recognizing the sustaining properties and practical implications of Ubuntu principles and by integrating these principles into the discipline of psychology as we begin to understand the inevitability of interpersonal interactions within a global (not just a Western) context. It is with these things in mind that I proposed this exploration of the potentialities of developing a humanistic paradigm based on Ubuntu.

Although much has been written regarding the benefits of embracing Ubuntu virtues as a world view and philosophical construct (Battle, 1997; Holdstock, 2000; Ikuenobe, 2006; Mnyaka & Motlhabi, 2005; Mnyandu, 1997; Myers, 1993), there is no literature that suggests that Ubuntu could provide the foundation for a humanistic paradigm. This may be due primarily to a simple lack of exposure within the research and practice communities. Ubuntu is fundamentally an African concept that is unfamiliar to most Westerners. This fact, coupled with a widespread view of all things non-Western as nonscientific (Holdstock, 2000; Ikuenobe, 2006; Myers, 1993), has resulted in a limited number of Western researchers familiar enough with the concept of Ubuntu to adequately

examine and incorporate it into their areas of study. I believe it is time for this to change. Western psychology should address the prejudicial nature of its history and move towards acceptance of paradigms that are more inclusive, less paternalistic, and more appropriate for the needs of *global* citizens (Smith, 1999). It is my belief that there are other paradigms that reflect ways of knowing and being and healing that are just as legitimate and as valuable as those developed in the West. Western psychological theories and practices have long dismissed the rich histories of indigenous cultures that date back thousands of years (Akbar, 2003; Azbio, 1996; Holdstock, 2000; Smith, 1999). “The globalization of knowledge and Western culture constantly reaffirms the West’s view of itself as the center of legitimate knowledge, the arbiter of what counts as knowledge, and the source of ‘civilized knowledge’” (Smith, 1999, p. 63). I would suggest that any paradigm that is oppressive is by its very nature limited in application and value. Therefore, we should be open to the exploration of new paradigms that are more accepting and inclusive.

Purpose and Potential

The potentialities of utilizing the principles of Ubuntu with Western populations and within therapeutic milieus have heretofore been unexamined. Ubuntu may offer significant opportunity to overcome the limitations of Western individualistic orientation and allow for a better appreciation of the resilience and healing offered by supportive community. Whether Ubuntu should be embraced and modified for Western use, particularly for purposes of therapeutic intervention, is a question elemental to this inquiry, and the purpose of this paper is to explore that question. I will present evidence of the need to address the shortcomings of traditional Western psychology by offering

insight into the strengths and timelessness of Ubuntu philosophy, along with the viability of Ubuntu programming within a therapeutic milieu. It is hoped that exposure to the concept of Ubuntu will lead to further explorations and discoveries beyond the limitations of this initial study. I believe that Ubuntu offers tremendous potential for healing. We need only to embrace the wisdom of our connections.

Embracing a New Paradigm

Presented within the body of this dissertation is evidence supporting the inclusion and implementation of Ubuntu in Western psychological theory and practice. The first chapters explore the contention that “Western” notions of what constitutes psychology, in conjunction with a commitment to individualism, has significantly affected psychology’s abilities to serve elemental human needs effectively, perhaps to the point that the discipline is in danger of becoming obsolete. Also, the African interrelated self is explored and contrasted with the contemporary, Western concept of self and Cushman’s (1990, 1995) contention that the Western self is an *empty self*, constantly seeking fulfillment through materialistic acquisitions.

Subsequent chapters examine the intricacies of Ubuntu, the harmonic, socieocentric values espoused by communities that embrace Ubuntu, and the resiliency engendered by a commitment to Ubuntu. Other communalistic societies are also examined, highlighting the more universal aspects of Ubuntu and the fact that interrelated perspectives are not as uncommon as we in the West perceive them to be (Duran & Duran, 1995; Holdstock, 2000).

Further examination focuses not only on the philosophical construct of Ubuntu and how it has historically impacted the lives of millions of Africans, but also explores a

complementary cross-section of relevant psychological traditions and theories. Each offers a challenging alternative to the hegemony of contemporary Western psychology, which has often been criticized for failing to adequately address the needs of women, ethnic minorities, various spiritual expressions, and the psychological needs of non-Dominant World populations. Included are examinations of critical psychology, indigenous psychology, liberation psychology, Eastern psychology, the works of Trigant Burrow (which examine human needs for a primary unity), and other relevant theories and ideas that presented themselves through the course of my investigation.

Also considered is the literature on individualistic versus collectivistic or sociocentric societies, historical expressions of communalism within the United States in Native American communities, and African communalism and the practice of psychology as it has evolved in South Africa. Although by no means an exhaustive examination of all potentially germane topics, these particular categories proffer the strongest arguments to compliment my ideas regarding Ubuntu, and each is considered to offer pertinent discourse on fundamentally relevant psychological perspectives.

The final chapters investigate the applied value of Ubuntu. Because good theory should have pragmatic applied value, the results of a small earlier study have been included. Five mental health professionals were interviewed as to the viability of developing and implementing Ubuntu-informed programming within child and adolescent residential treatment centers (RTCs). Findings suggest the desire for innovative change within residential treatment facilities and a willingness by professional staff to explore new treatment modalities. These findings have been supplemented by the inclusion of pertinent literature that addresses the process of integrating new

theoretical/philosophical paradigms into service delivery models, as significant change within established systems is often met with hesitancy and/or significant resistance.

Chapter 2 Methods of Inquiry

Long before I was introduced to the concept of Ubuntu, I found myself disillusioned with traditional Western psychology. Having attended a large, impersonal undergraduate program, I found myself with a bachelor's degree in psychology but no real understanding of the discipline as it related to everyday people with everyday problems. I had learned a lot about lab rats but nothing really about people. I do not recall even hearing the term *humanistic psychology* during my entire undergraduate experience. I was so disheartened, it was 20 years before I returned to academia. In the intervening years, I worked in numerous social service jobs, with an ever-increasing awareness that there had to be other ways of relating to people beyond behaviorism and Freudian psychoanalysis. Finally, I decided to return to school. By divine intervention or sheer luck, I discovered Goddard College and humanistic psychology. At Goddard, and then at Saybrook, I awakened to a new world of possibilities. Humanistic psychology very much complimented my own thoughts and ideals, and yet I still felt that there was something more to be discovered. With my introduction to Ubuntu came the epiphany that maybe I had found the missing piece of my existential puzzle.

It is a 22-hour flight from Durban, South Africa, to Atlanta, Georgia. After my first exposure to Ubuntu, my long flight offered me time for a great deal of reflection. Ubuntu intrigued me. It spoke to me on a very emotional, visceral level. It presented itself as a holistic alternative to the Western notions of psychology that I found so lacking, while at the same time offered parallels to supplement humanistic concepts. From that initial exposure grew an increasing interest in all things Ubuntu, and I grew to see the potential for proposing a new paradigm based on Ubuntu principles. Upon returning

home, I read everything I could find on Ubuntu. I found other critiques of traditional Western psychology that mirrored mine in feminist works and critical psychology. I discovered many parallels between Ubuntu and other sociocentric ways of being, and I realized that Ubuntu has much to offer the discipline of psychology, particularly as we move towards a time of global interaction—a time when we must learn to view others in ways beyond fear and mistrust of our differences.

As my knowledge of Ubuntu grew, I felt compelled to share my findings, and I found others interested in the possibilities Ubuntu offers. I compiled a significant amount of data on Ubuntu and conducted a small pilot study that indicated Ubuntu principles could be utilized successfully within child and adolescent treatment centers. I found a great deal of evidence to suggest indigenous psychologies have much to offer Western psychology in terms of resilience and healing. It became not so inconceivable that Ubuntu could become the foundation for my dissertation and that a dissertation on the potentialities of Ubuntu should be a theoretical one.

Theoretical dissertations develop a new theory, reconceptualize a theory, or critically amend a theory. This dissertation seeks to develop new theory by exploring the potentialities of the ancient African philosophical construct of Ubuntu as a humanistic paradigm with meta-theoretical and applied value. Because theory must advance the field of inquiry in ways that provide practical application, this dissertation also looks at utilizing Ubuntu within therapeutic settings.

In proposing new theory, one must be cognizant of fundamental standards necessary to validate good theory—standards that will allow a theory to rise beyond the plane of just a “really good idea” to a level of scientific rigor. Definitions of what

constitutes good theory vary within the research community. Yet there are certain precepts basic to theory including believability, generalizability, internal consistency, congruity with known facts, parsimony, and potential for confirmation. If one seeks to approach theory (as I have) from a humanistic perspective, additional factors must be considered. Although positivist research “assumes there is no essential difference between natural and social phenomena” (Buchanan, 1998, p. 439), humanistic research is guided by a quest for practical reason, necessitating a different approach to construction of theory. “The purpose of practical reason is not to predict, control, or change anyone, but to deepen our understanding of what it is to live a human life, to contribute to human self-understanding, and decency” (Buchanan, 1998, p. 440).

From a humanistic perspective, theory should move beyond prediction and explanation to understanding. This was elucidated by Blumer, who stated, “The point of developing theory is to outline and define life situations so that people may have a clearer understanding of their world through meaningful clarification of basic social values, modes of living and social relations” (as cited in Buchanan, 1998, p. 445). Theory should also be “sense-making,” implying that beyond the discovery process that leads to understanding, good theory creates new meaning with practical applications to those attempting to make sense of their situations. This gives theory a significant pragmatic value, as well as contributing to its generalizability.

The methodology of this study was an interpretive method utilizing hermeneutics to explore the philosophy of Ubuntu and review relevant literature. Following Glasser’s (1992) dictum, “*all is data*,” I started with the body of existing literature on Ubuntu. Academic databases such as Academic Search, Premier, Medline, ProQuest,

PsychBOOKS, Psychology Journals, and PsychInfo were searched using these keywords: *Ubuntu, African psychology, sociocentric, Indigenous psychology, self, and belief systems*. These searches resulted in examination of hundreds of abstracts, articles, books, Internet resources, and all relevant sources of prevailing literature and theory, including articles and books written by indigenous African psychologists and philosophers (Hook, 2004a; Ikuenobe, 2006; Kamwangamalu, 1999), as well as books and articles published by African presses (*South African Journal of Psychology*, UCT Press). While examining the published literature, I carefully perused all reference lists and bibliographies accompanying each article or book in order to identify related materials that could further the depth of my understanding and broaden the scope of my inquiry. This method yielded a substantial body of associated literature that I then examined in the same manner. Eventually, recurring themes and interrelated reference bases began to consistently emerge, allowing me to establish cohesive categories of importance (e.g., racism, sexism, ethnocentrism; eastern philosophies; oral traditions), and determine with a degree of confidence that I had examined all available literature necessary to establish an integrated understanding of the potentialities of Ubuntu. I also included as data personal observations and experiences I have engaged in with Zulu South Africans within the township of Molweni, as they help explicate and communicate my theoretical arguments.

Addison (1989) believes that adding hermeneutic principles to interpretive research recognizes the subjectivity of the researcher and acknowledges that his or her data collection is reflective of this fact, allowing the researcher to experience the research in richer, potentially more transformative ways. “Hermeneutic, interpretive views encourage us to embrace the entanglements of the social world” (Cushman, 1995,

p. 333). This is especially true when inquiry goes beyond literature review and takes the researcher into areas that have great personal emotional impact. My observations and assessments of Ubuntu have undoubtedly been colored by my experiences during my exposures to the Zulu culture and people. Had I merely read about Ubuntu rather than actually having experienced it, I would have encountered the same literature, but my interpretations of that literature would certainly not have been as insightful. It is my belief that this personal connection to my interpretive inquiry has led to broader theoretical understandings that are deeper, more genuine, and show greater respect to the Zulu people. In 1999, Smith commented on research, theory, and indigenous populations:

The term “research” is inextricably linked to European imperialism and colonialism. . . . Indigenous peoples have been, in many ways, oppressed by theory. Any consideration of the ways our origins have been examined, our histories recounted, our arts analyzed, our cultures dissected, measured, torn apart and distorted back to us will suggest that theories have not looked sympathetically or ethically at us. (pp. 37-38)

Within the scope of my inquiry, I made conscious efforts to avoid such ethnocentric hubris, and I believe that my personal connection has enriched not only my interpretive inquiry of the extant literature but provides greater support of my theoretical assumptions.

Chapter 3 Psychological Paradigms

Western Psychology as Anachronism

Clearly, our world is changing rapidly and dramatically. Expanding globalism, a threatened ecology, and increasing acceptance of alternative spiritualities have all imposed unique demands upon the human condition (Aanstoos, 2003) that must be addressed in ways that are effective, innovative, and perhaps even visionary. As our world is evolving, it could be argued that so too must our psychologies. By identifying the gaps left by contemporary psychology in describing the human condition, I hope to show where alternative and indigenous concepts can provide important advances.

Traditional scientific psychologies have historically studied human behaviors and motivations employing techniques and methods of inquiry taken from the natural sciences that are “mechanistic, reductionistic, causalistic, and elementalistic” (Aanstoos, 2003, p. 124). Traditional U.S. American psychologies, including social psychology, which was developed originally with an eye towards improving the human condition, have often been accused of succumbing to sexism, elitism, prejudices, and cultural biases (Kiguwa, 2004; Kitzinger, 1997; Wilkinson, 1997). This has included negating the wisdom of indigenous psychologies as pseudoscience and continuously attempting to “understand people in developing societies with reference to conceptual categories and theories developed in the West” (Mkhize, 2004a, p. 25). “The perennial crisis of traditional Western psychology is that the meaning of *science* is ascribed by culture” (Myers, 1993, p. 32).

Traditional “Western” (i.e., U.S.-American, Dominant World) psychologies have been slow to move beyond trying to understanding people in isolation, even though there

is a growing psychological imperative to understand the importance of human interrelatedness (Hook, 2004 b). However, psychology is evolving, and modern psychology is beginning to look beyond the traditions of the past to contemplate the boundless potential of the future. Humanistic psychology, in particular, has the potential to become the natural foundation from which new paradigms could arise. Unlike psychologies aligned with the absolutes of natural science, humanistic ideology suggests that complex, modern human behaviors cannot be reduced to stimulus/response patterns, generalized universally across cultures. Within humanistic psychology there has been an ongoing critique of traditional psychological models, and there is tremendous potential for psychology to evolve in dramatic, exciting, globally relevant and responsible ways. Socially relevant paradigms are being proposed and explored. There are forces within the discipline that recognize that new psychologies can be developed that move away from the natural-science perspective that has dominated our principles and practices (Aanstoos, 2003; O'Hara, 2006; Pilisuk & Parks, 1986; Schneider, 2001). For example, Pilisuk and Parks (1986) and Pilisuk (2001) advocate a “healing web” of interconnection that sees the task of therapeutic intervention as one of reweaving the social fabric and building upon the strengths of family and community networks, while Cortright (2007) and Wilber (2000) suggest an “integral psychology” that endeavors “to honor and embrace every legitimate aspect of human consciousness” (Wilber, 2000, p. 2).

Developing Ubuntu’s potential as an extension of humanistic paradigms offers a unique framework for addressing the shortcomings of positivistic psychology that have been so damaging. One needs only to look at the current state of the U.S.-American mental health care system to see that medical-model dehumanization has impacted our

ability to care for our most vulnerable populations (Abramovitz & Bloom, 2003; Hainesworth, 2001; Mosher, 2001).

U.S.-American mental health care. The ubiquity of managed care and HMOs within the U.S. American health care system, and an established medical model of care delivery, has resulted in a system that is focused on stability, maintenance, and mathematical cost analyses instead of health and healing. Such commitment to profit often usurps continuity of care. The unique essence of the individual has been reduced to a series of finite numerical codes of predictable behaviors as defined by the *Diagnostic and Statistical Manual of Mental Disorders* (DSM IV-TR; American Psychological Association, 2000), and therapeutic interactions have been limited to the number of sessions for which insurance was willing to pay. Rather than encouraging the development of supportive, therapeutic relationships, the prevailing business model of mental health provision has pushed therapy towards a dehumanizing commodity, aimed at bolstering independent, *self-sufficiency*, and *individual* functioning (Bloom, 2005).

Little attention has been paid to the potential benefits of interdependent therapeutic relationships and nontraditional models of service delivery. A few states (Pennsylvania, Nebraska, Rhode Island, and Wisconsin) have begun to mandate the provision of wrap-around services and holistic programming that incorporates alternative therapies, but alternatives to prevailing modalities are often dismissed as too “demedicalized, dehospitalized, deprofessionalized, and deneurolepticized” (Mosher, 2001, p. 399) to be routinely implemented within our current U.S. American mental health care system. There is a strong commitment to continue to view psychology, and consequently psychological services, as needing constant validation as a true science

(Cushman, 1995), therefore perpetuating medicalized systems of care. Major changes to these systems of care necessitate examination of underlying belief systems and the foundational institutions in which they are incubated.

U.S.-American academia and professional psychology. In many ways, mainstream U.S.-American psychology has yet to transcend the seminal traditions and practices of a century ago. Hundreds of U.S.-American colleges and universities offer graduate psychology programs, the majority of which still emphasize clinical training based on psychoanalytic and behavioral methodologies developed during the dawn of the discipline (Schneider, 2001). We are rapidly approaching a time when any study of psychology will have to examine the intricacies of human functioning and interaction within a global community. Yet, few U.S. schools offer more than a limited number of classes in cultural, cross-cultural, peace, and critical psychology (Schneider, 2001). No U.S. college or university to date has a graduate degree program entirely dedicated to the study of peace psychology, critical psychology, or cultural psychology (American Psychological Association, 2008).

Further complicating this pedagogical lag, North American psychologists who choose to follow nontraditional educational paths by pursuing graduate degrees at schools that emphasize the promise of alternative psychological paradigms (e.g., Goddard College, Naropa Institute, and Saybrook Graduate School) potentially face obstacles to securing academic and professional employment following graduation due to lingering prejudices against nontraditional programming that is not accredited by the American Psychological Association (APA). This may result in fewer psychologists willing to pursue alternative psychological training, as many of the U.S. states will not license

psychologists who have not completed APA-approved programs (Saybrook Graduate School and Research Institute, 2006). Advertisements of academic positions in professional psychology publications frequently specify completion of APA-approved internships as a condition of employment (American Psychological Association, 2008). Such hurdles to innovation serve to further distance U.S.-American psychology from the realistic demands of a burgeoning global community, as there is limited extrinsic incentive to pursue psychological scholarship and discourse that is unconventional (Dillon, 2008). Western psychology programs have shown little interest in the process of education as described by Carl Rogers when he stated, “I let my experience carry me on, in a direction which appears to be forward, toward goals that I can but dimly define” (cited in Dillon, 2008, p. 232). This is in sharp contrast to the scientific orientation adopted by most U.S.-American institutions of higher learning that focus on teaching psychology students what is as opposed to what could be. It could be argued that efforts to embrace new ways of viewing and teaching psychology are further hampered by lingering prejudices such as racism, sexism, and ethnocentrism. T. Len Holdstock, a colleague and friend of Carl Rogers who spent many years studying and teaching psychology in South Africa, observed in 2000:

The ethnocentric blindspot of contemporary psychology manifests all too clearly in the ignorance regarding the psychological wisdom embodied in the ancient religious practices, the philosophical treatises (oral and written), the epics, the folklores, and the ritual ceremonies derived from African, American Indian, Aztec, Buddhist, Confucian, Incan, Laotian, and Mayan traditions. (Holdstock, 2002, p. 10)

Racism, Sexism, Ethnocentrism

Western psychology, as with Western society in general, has historically been highly ethnocentric, sexist, and racist—the bastion of privileged White males of European descent (Serlin & Criswell, 2001), in terms of both those researching, developing, and providing psychological services and those receiving them. Having been cultivated primarily in the developed, Euro-American world, psychology has often been exported to non-Dominant World countries without consideration for cultural variations or societal differences (Holdstock, 2000; Myers, 1993; Nsamenang, 1995). Consequently, the psychological needs of women, persons of color, and indigenous populations have traditionally been viewed through the lenses of White male domination (Hook, 2004a; Mkhize, 2004a; Prilleltensky & Fox, 1997), serving to maintain an unjust status quo that is sexist, racist, and oppressive. South African poet Wally Serote addressed racial power differentials in 1978:

White people are White people
 They are burning the World.
 Black people are Black people
 They are the fuel
 White people are White People
 They must learn to listen
 Black people are Black people
 They must learn to talk. (cited in Holdstock, 2000, pp. 50-51)

Feminist psychologists have also written on Western ethnocentrism within the field of psychology, particularly as it is enmeshed with attitudes promoting individualism. Kiguwa (2004) and Wilkinson (1997) both see mainstream psychology as complicit in social and political oppression because it locates both pathology and responsibility within the individual, neglecting the impact of male power on social structures and ignoring gender as a cultural construct. Prilleltensky and Fox (1997) also

expressed the belief that psychology's assumptions and practices have supported social injustices when they stated,

Encouraging women, people of color, the poor, and the working class to define their problems as individual ensures that they work to change themselves rather than society. The result is reduced effort to alter the status quo—a state of affairs that benefits the privileged. (p. 12)

Individualism vs. Collectivism

“Culture, history, and geographical context are inextricably intertwined in shaping behavior and in determining the collective and the individual identity” (Holdstock, 2000, p. 81). No doubt these factors played a fundamental role in the development of the individualistic nature of U.S.-American society. The United States was founded by those seeking to separate and express their independence. It is a nation that prides itself on personal initiative and independent, individual success (Putnam, 2000). Dominant World psychology reflects this commitment to individualism and in many ways helps perpetuate a seeming inability for U.S.-America to get along with many other countries.

“Individualism, competition and materialism provide criteria for self-definition as a natural consequence of a worldview in which a finite and limited focus orients us toward such disorder that we fight one another to sustain an illusion” (Myers, 1993, p.10).

Cushman (1990) sees individualism as a core component in the development of Western psychology. Western psychology emerged as an independent social science at the same time the bourgeois Victorian era was beginning. Cushman finds it no surprise that psychology assimilated the attitudes of social privilege and gender roles common to those times, setting the modern self as an independent, interiorized unconscious that had

to be controlled and manipulated “in order for normative bourgeois society to function” (Cushman, 1990, p. 602).

Cushman (1990) postulated that, although the discipline of psychology has advanced significantly since the Victorian era, an individualized, autonomous view of the self remains a dominant perspective—a perspective that views the self as a masterful, bounded self with “an internal locus of control and a wish to manipulate the external world for its own personal ends” (p. 602). This view of the self is in sharp contrast to communalistic cultures that see the self as an interrelated entity.

Collectivistic cultures place greater emphasis on what the Vietnamese poet Thich Nhat Hahn (1998) calls “interbeing.” These cultures gain the solace and emotional strength offered by the unconditional acceptance of simple belonging (Holdstock, 2000). It is said that starving people in Africa have been known to travel great distances just so they might die with other starving people. Such a strong commitment to identification of a collective self is very much at odds with U.S.-American theories of the person as an autonomous, self-actualizing being.

The dichotomies in worldviews and behavior between individualistic and collectivist societies have been studied by social and cultural psychologists in recent years, much of the work having been done by psychologists who are themselves indigenous to collectivist, economically emerging, and non-Dominant World countries (Edwards, et al, 1983; Kamwangamalu, 1999; Mkhize, 2004b; Mnyaka & Mothlabi, 2005; Mnyanou, 1997, Nsamenang, 1995; Teffo, 1996).

Van der Walt (1997) explained the separation between individualism and communalism in relation to specific characteristics inherent in each dimension. He described communalism as emphasizing these specific elements:

- A high regard for the group elevates it above the individual.
- Dependence on other people is important.
- Group pressure is strong.
- Good human relations are a priority.
- Duties towards the community are emphasized.
- Values such as friendliness, helpfulness, hospitality, patience, and brotherhood are highly regarded.

Conversely, Van der Walt went on to describe the elements of individualism as:

- A high regard for the individual elevates it above the group.
- Individual independence is important.
- The opinion of the group is not so important.
- Individual initiative is highly regarded—personal achievement is more important than attention to the community.
- Competition is an integral part of the culture.
- The rights of individuals are stressed.
- Values such as formality, independence, and self-sufficiency are highly regarded. (p. 31)

Echoing work by Markus and Kitayama (1991), Eaton and Louw (2000) and Oyserman, Coon, and Kemmler (2002) agree that collectivist cultures emphasize interdependence and relatedness as concrete components of their members' individual self-concepts, their personhood, and that the individual self is shaped and molded through interactions with others. Individualistic cultures place greater emphasis on the autonomous self, stressing "the inner, stable, and self-determining (i.e., abstract) nature of the self" (Eaton & Louw, 2000, p. 211).

Understanding of the radical differences of such dissimilar world views and the impact of those differences on psychological functioning and personal well-being necessitates a deeper examination of the concept of self as it is expressed (historically and

contemporarily) within these variant cultures, beginning with an examination of the history of the Western concept of self.

The Western Self

The Western understanding of the concept of self has had many incarnations across the centuries. Cushman (1990, 1995) argued that the self changes to accommodate the demands of the era in which the self finds expression. Cushman (1995) succinctly summed up the evolution of the Western self when he wrote,

There was the “nondeep” self of the ancient Greeks; the self of the Hebrews that was a communal, equal partner with God; the empty, self-loathing Augustinian self; the crusading Christian self of the Middle Ages, container for the immortal soul, which lived in a circular, enchanted world, and which healed through obedience to warrior vows and by delivering death and destruction to the infidel; the Renaissance self with a foot in both the feudal and the about-to-dawn modern era; the rational, logical self of the Enlightenment era, intent on separating from the Church and local folkways; the romantic self that valorized the autonomous, all-powerful artist-genius who naturally contained the pure truth of the universe interiorly; and the Victorian self, the culmination of the Enlightenment agenda of linearity, deferred gratification, and bourgeois calculation. (p. 29)

It is Cushman’s (1995) contention that the self of each time is fluid and is constructed based on the prevailing economic and political landscapes of the day. Hence, the rise of Freudian psychoanalysis during the bourgeois, sexually repressed Victorian era and behaviorism in the post-WWI era when people “were struggling to find meaning in a confusing world” (Cushman, 1990, p. 606), and focus moved away from concerns of the self. Cushman (1990) talked about the transient nature of the self construct in the West:

Each of these selves, all sure that they were the one, proper way of being human, all sure that their way of arranging the power relations of gender, race, community, and age was the one natural arrangement, all sure that their God was the only true God, are the antecedents of our current self. (p. 29)

The founders of humanistic psychology, primarily Abraham Maslow, Rollo May, and Carl Rogers, believed that in order to understand people's lives it was necessary to move away from psychoanalysis and behaviorism and reintroduce the idea of self into psychology. They believed that the self "is the intrinsic innate tendency to actualize one's unique potential for full human existence" (Polkinghorne, 2001, p. 82), and, although they maintained predominantly individualistic views in their conceptualizations of the self, they did realize the importance of relatedness to the healthy development of self and self-concept. "It takes culture to create self and self to create culture; they are the yin and yang of being human. There is no self except in interaction with culture" (May, cited in Holdstock, 2000, p. 107).

Yet, with humanistic psychology's inability to establish itself as a primary, sustainable force in psychological discourse (Dillon, 2008), there has been limited effort within Western psychology to continue to examine the self. Our contemporary way of being, our current self, which Cushman believes to be an "empty self," is characterized by a "pervasive sense of personal emptiness and is committed to the values of self-liberation through consumption" (Cushman, 1995, p. 6). Our whole notion of self is predicated on inadequacies—my house isn't big enough, my car isn't new enough, my teeth aren't white enough—which has led to the belief that obtaining more and more materialistically is the key to happiness, reinforcing our commitment to individualism and convictions that set us at odds with the needs or strivings of anyone other than ourselves. This consumeristic concept of self has led us into huge debt, a lack of community, international isolation, and a state of moral confusion. We have no

society-wide, shared sense of right and wrong tradition that guides us and gives us meaning. Our individualism has fragmented our society.

Yet, there are other ways of constructing the self that may offer some redemption. In Africa, the concept of self—an interconnected, interpersonally-constructed self—the self of Ubuntu, has remained fairly consistent for thousands of years (Holdstock, 2000; Ikuenobe, 2006; Tutu, 2005), offering support and resilience against myriad trials and tribulations.

African Humanism and the African Self

Cross the river in a crowd and the crocodiles will not eat you.

— African proverb

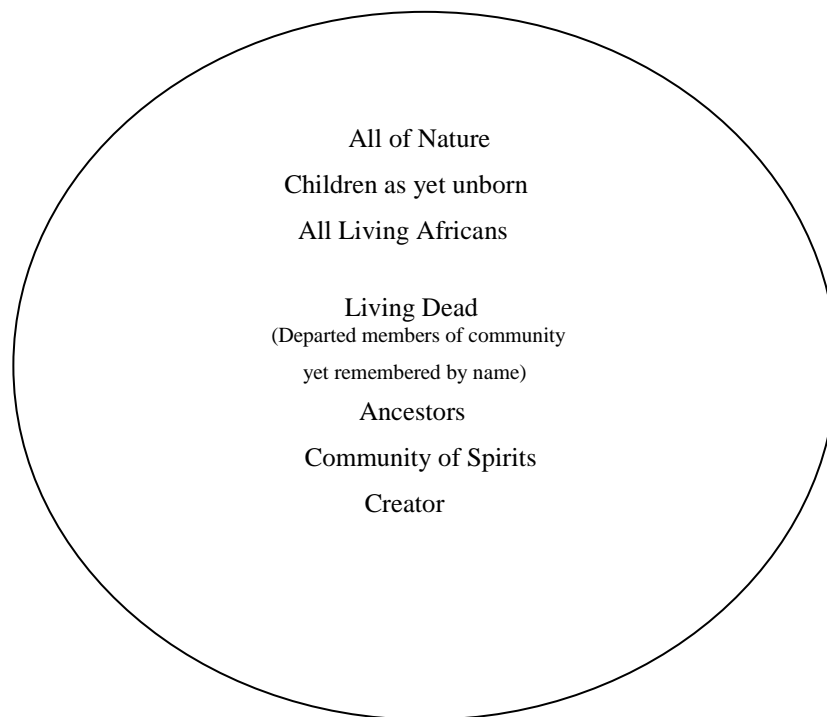
“The African personality embraces humanism and the art of being a human person” (Broodryk, 2006, p. 24). African humanism differs from Western humanism in that it embodies centuries of indigenous wisdoms and a collectivistic world view that is paramount to African survival. To understand African humanism is to understand that an African is a social being and, as such, cannot be separated from the community in which he or she belongs. Relationships with others are viewed as far more important than the individual experience (Ikuenobe, 2006). This is not to imply that the African’s individuality is negated or in any way diminished; it is merely viewed as secondary to the well-being of the community (Teffo, 1996).

The ideal African values sharing and compassion. “The individual has a social commitment to share with others what he has. The ideal person will be judged in terms of his relationship with others” (Teffo, 1996, p. 104). Africans view the self interdependently. A person is empowered and fulfilled in terms of his or her relationships

with others. Personal behaviors are viewed as intertwined with the thoughts, feelings, and actions of others with whom one shares interdependent relationships.

“In a collective society, to do wrong does not mean merely to be individually in disharmony with the order of nature, but rather to harm and disorganize this order itself” (Van Vlaenderen, 2001, p. 152). Harmony, cooperation, and interdependence are more than idealistic concepts in Africa. They are essential life skills every African child learns from a very early age.

The African self is an extended self that includes not only the entire community but the ancestors, those as yet unborn, and all of nature (see Figure 1).



Adapted from Azibo, 1996

Figure 1. Africans' extended self-concept.

Consequently, African humanism is embodied in a holistic life orientation. There is a web of interconnectedness not just between peoples but among all forms of life. A widely

held belief in the majority of African countries (particularly rural Sub-Saharan Africa) is that humans are part of the natural world, not dominant over it (Ikuenobe, 2006). African worldviews place a great deal of importance on harmony with nature. Every aspect of life, animate and inanimate, is respected and revered by the African. The African does not view himself or herself as “better than” other inhabitants of his or her universe but rather as living in harmony with all things great and small.

The worldview that everything is interdependent and integrated into the whole universe provides a necessary, almost spiritual base of knowledge from which Africans have negotiated life circumstances that are often physically and emotionally demanding. Without such complete understanding of, and devotion to, interconnectedness, human life on the continent of Africa might have ceased centuries ago.

The underlying philosophy on the subcontinent [of Africa] is directed by a unitive consciousness, a holistic dimension that is much more pervasive than anything that can be conceptualized in the West . . . in Africa, holism is a lived experience. The belief that everything belongs together is directly translated into the actualities of daily living. There is infinite respect for the invisible thread that binds all things together. (Holdstock, 2000, p. 162)

Ikuenobe (2006) sees the communalistic, collectivistic African self as a fully integrated, moral self, a “personhood” that is “attained or acquired by the complex processes of education, upbringing, indoctrination, imitation, socialization, acculturation, recognition, initiation, learning, acquiring beliefs, living and experiencing” (p. 72). This concept of the self as an evolving process of relationship is in sharp contrast to the prevailing contemporary U.S.-American perspective of the individual as a metaphysically isolated entity, standing independent of social responsibility or social recognition, and primarily concerned with personal, not collective, goals (Triandis, 1989).

The psychological significance of these contrasting conceptualizations of the self becomes increasingly pertinent as we begin to explore the nature of the burgeoning relationship between psychology and globalization—and how we will all interact in an increasingly global community. Whereas existing literature examining psychology’s role in such globalization is sparse (Arnett, 2002; Marsella, 1998), it is clear that future inquiry will necessitate a willingness to incorporate and expand upon knowledge that is currently being gleaned from discourse within critical, cultural, and indigenous psychologies. In order to effectively develop new psychologies that are globally relevant, it will become necessary to increase our understandings of how the self is manifested within cultures other than our own and to incorporate those understandings into inclusive paradigms.

Western Humanistic Psychology

“*Man is a yes that vibrates to cosmic harmonies*” [italics added] (Fanon, 1967, p. 8). Nearly two generations ago, disillusioned with what they perceived to be inadequacies of the prevailing behavioral and psychoanalytic approaches to psychology, Abraham Maslow, Carl Rogers, Rollo May, and other progressive psychologists launched what was to become known as the *third force* of psychology—humanistic psychology. It was the goal of these early humanistic psychologists to treat humans as more than ill beings consumed by neuroses, whose behaviors could be predicted by studying those of white lab rats (Moss, 2001). These pioneering psychologists aspired to create a psychology that would acknowledge, embrace, celebrate, and enhance the unique beauty of the human spirit. Humanistic psychology grew out of their commitment to offer a more affirming psychology that dismissed the “bad animal” paradigm of psychology in

favor of one that allows for the complete expression of human potential. “Humanistic psychology started as a rebellion against what was characterized as both the mechanistic, formalized, elitist psychoanalytic establishment and an overly scientific, removed, fragmenting behaviorism” (Cushman, 1995, p. 240). Humanistic psychology is unique in that by its very nature it not only allows for but welcomes new thoughts, ideas, and directions. Few other psychological disciplines have established themselves on the principle of being open (and welcoming) to the potentialities of change.

Literature, education, and philosophy all influenced the early germination of humanistic psychology, paving the way for a unique psychology that continues to embrace the nature of paradox and dialectical thinking (Rowan, 2002) and, by so doing, *intentionally* opens and welcomes avenues to change and growth (Bugental, 1987; Mahrer, 1978). It is this openness to change that leads me to believe humanistic psychology provides the historical structure from which to build new psychological paradigms. Pilisuk (2001) wrote,

There is, however, an alternate paradigm, one more prominent in some non-Western belief systems. It is the paradigm of interdependence. This paradigm regards the self as part of a larger clan and of a larger natural ecology. It views fulfillment in terms of its contribution to something greater than the enhancement of the self. (p. 26)

Human Connections and Western Psychology

Although traditional humanistic psychology has most often been associated with the pursuit of self and a quest for the attainment of an *individual's* highest potential (Jenkins, 2001), there is also a historical foundation and emphasis on human interconnectedness within the discipline dating back to the phenomenological writings of Swiss psychiatrist Ludwig Binswanger. Influencing the humanistic psychologists that

would follow, Binswanger's writings of the late 1950s emphasized the importance of what he referred to as the *Mitwelt*, which is the social world shared with others.

Binswanger argued that the *Mitwelt* was one of the essential existential structures (along with *Umwelt*—the environment—and *Eigenwelt*—personhood) that determine human experience (Moss, 2001).

Another early influence on the development of the humanistic paradigm was Martin Buber, who argued that the complete range of human potential cannot be fully developed unless one has the opportunity for engagement with others. "It is from one man to another that the heavenly bread of self-being is passed" (Buber, 1965, p. 71).

The works of Alfred Adler suggest a strong human desire to be part of a group to which we can contribute and work to ensure its well-being. And Rollo May stated, "No one can separate oneself from one's social group and remain healthy, as the very structure of one's personality is dependent upon the community" (as cited in Rowan, 2004, p. 56).

Carl Rogers said we must suspend our own beliefs in order to understand the world of the other. His humanistic call for *unconditional positive regard* and empathic understanding extends beyond the therapeutic milieu in which he originally proposed it, and his later work addresses this.

Abraham Maslow, known for his hierarchy of needs and the individual's quest for self-actualization, includes *human kinship* as one of the primary characteristics of the self-actualized person (Rowan, 2004). "The movement towards psychological health is also the movement towards spiritual peace and social harmony" (as cited in Rowan,

2004, p. 230), suggesting the full expression of self-actualization must present itself in relation to others.

Almost without exception, the early humanistic psychologists recognized that our greatest individual potential is tied to our abilities to recognize and encourage the greatest potential of others as well. So, although humanistic psychology has historically been viewed as a psychology of individual expression and growth, it has always acknowledged, appreciated, and revered the fact that we are connected to others in ways that are vital to our psychological development and well-being.

According to Vygotsky (1978), people's actions are greatly influenced by the social, cultural, and historical context of the activities that they share with the other people in their lives: interaction is key to our development. We are fundamentally social creatures, and in order to survive and thrive we are drawn to belong to groups (Brack, Hill, Edwards, Grootboom, & Lassiter, 2003). It is through our participation in these social groups and our interactions with others that we develop our sense of self. The connection is vital. "The self is part of the social world, and the social world is part of the self" (Holdstock, 2000, p. 100).

As discussed earlier, this collectivist aspect of the discipline has been overshadowed by a dedication to individual development and self-actualization, but there is a new wave of humanistic psychologists now looking beyond the emphasis on self to embrace and expand upon the importance of our human interconnectedness (Aanstoos, 2003; Holdstock, 2000; Myers, 1993).

The Vietnamese monk and poet Thich Nhat Hanh (1998) frequently stated that "we must awaken from the illusion of our separateness" (p. 20). Contemporary

humanistic psychology is leading this awakening, with a shift in our working paradigms from an emphasis on self to one predicated on self in relation to others. Pilisuk and Parks (1986) stated,

Actual human interdependence is far greater than our contemporary values recognize. Understanding this interdependence is critical to our health, our sense of belonging, and even the survival of the human community. Where interdependence is nourished, it provides a healing web with remarkable powers for regeneration of the human potential. (p. xi)

As this chapter has illustrated so far, the potentialities of psychology have historically been negatively impacted by pervasive racism, sexism, ethnocentrism, and a commitment to the self as an individually bound, autonomous being. Yet, awareness of the importance of interconnection for optimal psychological functioning and overall well-being—for the individual and the community— has been growing within the field of psychology (Hanks, 2008; Holdstock, 2000; Hook, 2004a; Myers, 1993; Pilisuk & Parks, 1986). I see sustaining this awareness and moving towards new paradigms of psychological practice as a major challenge, particularly in light of the fact that when the prevailing psychological hegemonies have been previously questioned, there has often been significant backlash. The story of Trigant Burrow offers witness to this.

The work of Trigant Burrow. Trigant Burrow was an early 20th-century psychologist who, after meeting Freud, came to believe that many of the same neuroses Freud was observing in individuals were also present within communities and society in general. “Society is hysterical, too” (Burrow, 1914, p.1877). Burrow thought that many of the mental health issues experienced by humans are due to our having lost touch with our biologically inherent solidarity and unity. Burrow was convinced that everyone and everything is connected. “We are one people, one World, one organism” (Burrow, 1949,

p. 345), calling the human species a “phyloorganism . . . a vast interlinked whole” (Burrow, 1984, p. 2). Burrow also felt that solidarity of the species is essential for human integrity. “While we all tacitly admit that there is this tribal or racial instinct extending throughout and binding together the elements or individuals of a species, we have yet to recognize it within ourselves as an organic principle of consciousness” (Burrow, 1927, p. 268).

Burrow believed the individual should be the embodiment of society, not opposed to it, and that an ever-increasing emphasis on individualism was destroying American society. He viewed development of a separate sense of self, what he called the “I” persona, as setting individual interests against those of others and the wider community; and he perceived the enhancement and promotion of individualism as seriously detrimental to group survival. In 1949, Burrow wrote:

Everywhere we see sectionalism and competitiveness. Everywhere the part stands against the part, and all the parts contend against the whole. No matter what the superficial pattern, there appears to be a deep-seated dislocation within the domain of human relations. (pp. 24-25)

Burrow felt that human society could be healed by revitalizing our basic ways of relating, and he sought to counteract this perceived systematized social neurosis by developing Social Self-Inquiry (SSI), later termed *group analysis*, in 1923. At his Lifwynn camp in upstate New York, Burrow gathered family, former students, and colleagues from Cornell, and therapy patients in an extended communal living experiment that was considered very provocative and quite shocking for the times. Recognizing that the societal pathologies they were studying were manifesting individually within their group, Burrow and his Lifwynn cohorts practiced SSI as a means of shifting consciousness from a self-absorbed individual focus to one of

interconnection and human solidarity. Living and working together, all authority was questioned, and all conflicts were openly examined and discussed. The group found that by observing their own interrelational pathology, they could adjust their basic ways of relating towards what they called an “organic consciousness” (Burrow, 1927, p. 268). The group remained together for over 30 years, during which time Burrow published his findings and criticized fellow psychologists as protecting the status quo and thereby contributing to social neuroses. Burrow’s colleagues were grievously offended, and Burrow was eventually thrown out of the American Psychoanalytic Association (of which he had been a founder and past president). His writings were suppressed and shelved, his university ties were severed, and following his death in 1950 the Lifwynn camp was shuttered.

Despite being considered the father of modern group psychoanalysis, few contemporary psychologists have heard of Trigant Burrow, although many are now advocating for holistic psychological paradigms reminiscent of Burrow’s ideals. All that remains today of Burrow’s Lifwynn Foundation is a tiny office inside the home of a former follower and a small cadre of aging SSI practitioners. Yet, Burrows words from nearly six decades ago resonate today. In 1949, Burrow stated,

Today it is not only the biologist, the sociologist, the philosopher, the psychologist, and the economist who are concerned with the signs in man of social imbalance and disintegration; people everywhere are hard pressed to reconcile the inconsistencies in our human behavior with a sane program of individual and social adaptation. People are daily becoming increasingly aware of serious difficulty, of pain and impediment for which they cannot account. (p. 113)

Such pathology of the social order is a theme requiring far more attention than is available within discussion here, but it is important to note that there have long been

voices of concern (such as Burrow) within the discipline of psychology, and it is important that those voices are heard.

Critical psychology. Critical psychology posits that traditional Western psychology is oppressive in that it attempts “to understand people in developing societies with reference to conceptual categories and theories developed in the West” (Hook, 2004a, p. 25), without consideration of the languages, philosophies, or worldviews of indigenous populations. Critical psychologists argue that this cultural colonization negates the dialogical self that is fundamental to many indigenous societies, silencing any voice that challenges the hegemony of Western psychology. Critical psychology rejects the notion that psychology should be neutral and value-free and aims to establish a discipline that is politically aware and participatory, one that emphasizes human welfare and social justice and embraces diverse theoretical perspectives (Hook, 2004a). In the interest of building a more just world, critical psychologists challenge traditional psychological theory and practice (Kitzinger, 1997), maintaining that “psychology’s values, assumptions, and norms have supported society’s dominant institutions since its birth as a field of study” (Prilleltensky & Fox, 1997, p. 4).

Critical psychologists emphasize the importance of understanding psychological functioning and personal behavior by positing that they can only be understood within the context of social interactions expressed within socially created institutions and the power differentials at play in those institutions (Fanon, 1967; Hook, 2004b; Prilleltensky & Fox, 1997). “Critical psychology is exactly an investigation of the relationship between power and psychology. It is an awareness that psychology itself is powerful . . . and that

psychology plays a part in maintaining and extending existing relations to power” (Hook, 2004a, p. 12).

Psychology has historically been based on the belief systems and worldviews of Dominant World societies to the exclusion of the lived experience of non-Dominant World societies. Marsella (1998) wrote,

Human survival and well-being is now embedded in an entangled web of global economic, political, social and environmental events and forces . . . willingly or unwillingly, the world has become the fabled “global village,” and the global village is multicultural, multinational, and multiethnic. (p. 1282)

This globalization, according to Marsella, necessitates the realization that Western, individual, objectively quantified psychology is often meaningless and irrelevant to the life contexts of non-Western people living in developing countries. Marsella advocates for the development of a “global-community” psychology that recognizes the ethnocentric bias of Western psychology and encourages development of indigenous psychologies, along with the use of research methods that are naturalistic, contextual, and qualitative. Hook (2004a) also called for acceptance of indigenous psychologies that reflect the lived experiences and social and cultural realities of the participants in various societies and advocates for psychology to expand its liberatory potentials by supporting “the psychological processes, dynamics, capacities, and processes through which people may achieve emancipation, freedom, liberation, and escape from particular power structures of oppression and exploitation” (p. 20).

Liberation psychology. “There is no way to peace; peace is the way. There is no way to enlightenment; enlightenment is the way. There is no way to liberation; liberation is the way” (Hanh, 1998, p.6). Like critical psychology, liberation psychology developed

as an alternative challenge to the hegemony of traditional psychologies, seeking to give voice to the needs of people previously ignored by the discipline. Liberation psychology differs from critical psychology in that it not only emphasizes the significant psychological impact of oppression, exploitation, and power structures on the nondominant populations but often calls for the oppressed to take action on their own behalf against those seen as oppressors through resistance and collective activity (Fanon, 1967; Freire, 1973/2005). “Liberation requires praxis. The notion of praxis suggests that both reflection and action are required to effect social transformation” (Foster, 2004, p. 592).

Liberation psychologists like Martin-Baró, drawing on the *concientizacion* ideas of Paulo Freire, have called for psychology to examine the needs of historically oppressed populations. Martin-Baró believed that traditional Western psychology fails to realize the psychological significance of being an individual within a greater community, especially if that community is an oppressed one that places great importance on socioecentric ideals. Martin-Baró (1994) noted,

Individualism proposes the individual as an entity with its own meaning as the final subject of psychology. The problem with individualism is rooted in its insistence on seeing as an individual characteristic that which oftentimes is not found except within the collectivity, or in attributing to individuality the things produced only in the dialectic of interpersonal relations . . . individualism ends up reinforcing the existing structures because it ignores the reality of social structures and reduces all structural problems to personal problems. (p. 22)

Liberation psychology is built from the bottom up, reflecting the needs and social experiences of the oppressed as a central component of serving them. “Have we ever seriously asked what processes look like from the point of view of the dominated instead of from that of the dominator?” (Martin-Baró, 1994, p. 28).

Frantz Fanon said much the same thing in the 1960s as Algeria struggled to move beyond its legacy of oppression, poverty, and racism following many years of French colonial rule. Believing that most psychological problems are rooted in the problems of an individual's greater society, Fanon argued that psychology must consider context—social, historical, economic, and political—when addressing major questions such as those of identity rather than examining individuals as if their own internal psychology was all that mattered (Fanon, 1967).

Liberation psychology seeks to move psychology beyond the Manichean notions held about indigenous people and consider the context of oppression and subsequent ramifications. Traditional psychology often fails to do this, thereby negating its applicability in much of the non-Dominant World. “The schemata of psychology break down when we try to use them to respond to the needs of the people” (Martin-Baró, 1994, p. 28).

Liberation psychology is seen as a practical, not a theoretical, endeavor, aimed at questioning the power structures of exploitation and oppression and utilizing information gleaned from the findings to help people achieve emancipation and liberation (Foster, 2004). In recent years, there has been greater recognition of the need for liberatory psychologies, along with an understanding that other cultures have developed psychological constructs that lend themselves to psychological well-being within historically oppressed populations (Hook, 2004a; Wilber, 2000).

Criticism of Western psychology is not new. As discussed earlier in this chapter, Trigant Burrow and others were warning of the dangers of ignoring the importance of human connectedness in favor of individual expression (and pathology) since the

inception of psychology as a science. There still exists a “dominant view of the person [as] a self-contained individual, tightly boundaried and sharply differentiated from other self-contained individuals” (Foster, 2004, p. 568). But, there is increasing recognition of our communal embeddedness and the importance of integration of self with other, as well as a greater acceptance of psychological knowledge and philosophies of other cultures. The cosmologies of many other cultures address universal aspects of the nature of human beings and though outside what would be traditionally considered psychology, offer significant contributions to understandings of the human condition, often from a decidedly holistic perspective (Aronson, 2004; Cortright, 2007; Tsering, 2006). The contributions of liberation and critical psychologies should be viewed as necessary foundational elements of any inclusive paradigm that seeks to acknowledge the potentialities of the full expression of self as it relates to the individual within the larger, globalized community.

Chapter 4 Relational Health and Other Ways of Being

The Individual in Larger Community

“There is no person without family, no learning without culture, no madness without social order; and therefore neither can there be an *I* without a *WE*” (Martin-Baró, 1994, p. 41). The simple act of being born human launches us into a lifelong network of interrelations that offer us not only safety and physical protections but provide us with significant models for living as well. “Individuals never exist alone; every being is a being-in-the-world” (Wilber, 2000, p. 63). These interrelations teach us how to navigate our environment, as well as guide us with appropriate social supports necessary to adapt to unforeseen challenges. Pilisuk and Parks (1986) defined social support as “a set of exchanges that provide individuals with material and physical assistance, social contact, and emotional sharing, as well as the sense that they are the continuing focus of concern by others” (p. 87). If we lack those social supports, there are physical and mental ramifications that have profound impact upon our development, possibly even our very existence. The psychological significance of healthy attachments will be discussed later in this paper, but our relational health, our social connectedness, is key to our well-being (Hanh, 1998; Ikuenobe, 2004; Martin-Baró, 1996; Mosher, 2001; Putnam, 2000).

Eastern Philosophies

Other contemporary cultures, including most African and Eastern societies, place great emphasis on the individual in relation to others. As practiced in India, Nepal, Sri Lanka, Tibet, Vietnam, China, and Japan, Buddhism places a strong emphasis on interconnection. “Individual karma cannot be separated from collective karma” (Hanh,

1998, p. 46). One of the newer branches or manifestations of Buddhism, *Tiep Hien* (also known as the *Order of Interbeing*), was formed in mid-1960s South Vietnam by the monk/poet Thich Nhat Hanh. As the Vietnam war was escalating and many Vietnamese were suffering horribly, Hahn felt the violence and divisiveness that were enveloping his country could be ameliorated by a new approach to Buddhist teaching that emphasized compassionate involvement in social concerns along with traditional Buddhist morality. Hanh believed that routine Buddhist contemplative reflection was not enough, that great suffering could only be diminished through the compassionate involvement of many individuals acting in concert. “Buddhism teaches us to look at things in their nature of interbeing and dependent co-arising” (Hanh, 1998, p. 27). *Tiep Hein* emphasizes a collective commitment to the well-being of others as an essential element of individual existence and has grown to be a guiding philosophy for many Buddhists, particularly in Vietnam, France, and some parts of the United States.

Similar in many respects to *Tiep Hein*, Confucianism’s cardinal principle known as *jen* is an essential expression of humanism. “*Jen* is the main thread running through the whole system of Confucianism, and in its core, it embodies integration of one’s self with others . . . it is an all-encompassing ideal” (Yum, 2007, p. 16). *Jen* extols interdependence over independence and views the individual as embedded within a web of relationships.

This web-of-life metaphor extends far beyond Buddhism and Confucianism to aspects of Hinduism and other belief systems and religions. Native Americans speak of the Medicine Wheel, also known as the Web of Life, or “a symbol of health through

connectedness and part of the concept of the Earth, as Mother and giver of life” (Pilisuk & Parks, 1986, p. 9).

Each of these cultural beliefs emerged at different times and in geographical locations throughout the world that would have made cross-cultural exposure almost a certain impossibility. Such phenomena lends support to the belief that to be fully human, we must be psychologically and emotionally connected to others. “Interdependence, the mutual dependence of all life processes on one another, is the nature of all ecological relationships. . . . All members of an ecological community are interconnected in a vast and intricate network of relationships, the web of life” (Capra, 1996, p. 298). O’Hara (2006) sees the acceptance of our connections as key to future human development. “People will need to become comfortable in a world of fluid boundaries, understanding the world as a continuous web of relationally connected integrities” (p. 112). We cannot deny the reality of our relational connections.

A number of differing belief systems acknowledge this interdependence, which is consistent with Ubuntu philosophy. Many of the desired manifestations of humanness are also consistent across belief systems. Buddhism speaks of *wholesome mental factors* that are key to enlightenment. According to Tsering (2006), the wholesome mental factors include “confidence, optimism, joy, equanimity, friendliness, calmness, mindfulness, correct understanding of cause and effect, loving-kindness, compassion, altruism, calm-abiding, constant mindfulness of body, speech and mind, . . . non-hatred” (p. 82). These wholesome mental factors speak to the quality of our interactions with others as vital to our individual well-being.

Relational health helps sustain societies throughout the majority, socieocentric world that views the self as interdependent (Holdstock, 2000; Marsella, 1998) by establishing moral codes of conduct and behavioral expectations that ensure members' sense of safety and belonging. These societies include the Balinese; the Chinese; the Malaysian; the Filipino; the Gahuku-Gama of New Guinea; the Islamic; the Japanese; the Javanese; the Hohorong of eastern Nepal; the Maori; the Moroccan; the Zapotec of Mexico; and numerous Native American traditional tribes such as the Cheyenne, the Inuit (Eskimo), and the Ojibwa (Holdstock, 2000). It has been argued that without a cultural emphasis on interconnectedness and social solidarity, Native American plains tribes might never have survived the systematic genocide inflicted upon them in the late 1800s (Duran & Duran, 1995).

Native American Ways

The Lakota Tulalip people say *Mitakuye Oyasin*: all my relations. Included in this definition of relations is everyone that was ever born, in addition to everyone alive today. All of existence is considered family in the Native view of the world, including all animals, plants, and the mountains, as well as the sun, the moon, and the stars. "There are main themes that reverberate among all indigenous peoples in North America . . . among these recurring themes that denote indigenous kinship are communalism, egalitarianism, and reciprocity with others and with nature" (Guerrero, 2003, p. 65).

Native Americans emphasize the importance of community contributions, extended family, sharing, and cooperation. These are important factors that have contributed to the resiliency of contemporary Native populations. In conducting her doctoral dissertation, Belcourt-Dittloff (2007) investigated resiliency and vulnerability

factors within Native American communities. She found the greatest resiliency factors for Native Americans were culturally imbedded ones. “Social support, hope, general resilient coping abilities, traditional cultural and spiritual practices, ethnic pride/enculturation, and communal mastery” (Belcourt-Dittloff, 2007, p. 1) all were statistically significant indicators of the overall quality of life of her participant populations. Conversely, Duran and Duran (1995) found that Native individuals who had moved from tribal areas and had sustained few familial and tribal ties were found to be far more susceptible to physical and mental health concerns, including depression, suicide, and alcohol abuse. As Native Americans have historically emphasized collectivistic principles and the harmony of the group, the protective factors inherent in the establishment of a relational identity have proven invaluable to their overall ability to maintain cultural (and individual) survival (Belcourt-Dittloff, 2007; McGaa, 2002).

Great Plains Sioux tribes have historically viewed all *two-leggeds* as family. They are all seen as children of *Wakan Tanka* (the Great Mystery, Great Holy, Great Spirit) and as such are all people of the Natural Way (McGaa, 2002). And, unlike belief systems common to Judeo-Christians, which assume human dominion of all creations, Native beliefs emphasize “moving in harmony with the seasons, the wind, and all of creation” (Duran & Duran, 1995, p. 16). “Each winged, four-legged, and finned has a meaning to convey that can be beneficial to our intricate two-legged lives . . . these truthful ones live in harmony among and within themselves” (McGaa, 2002, p. 37).

Maintaining harmony, balance, and equality are major goals for Native Americans, and these aspirations are reflected in cultural expectations governing individual thoughts and behaviors (McCabe, 2007). As with societies that practice

Ubuntu, most traditional Native tribes have well-structured societies where roles and responsibilities are well-defined and everyone is a valued community member (McGaa, 2002). When tribal members exhibit behaviors that are inconsistent with tribal values, they are not shunned or cast out of the tribe. They are assumed to be out of balance with the natural world and, therefore, in need of restorational intervention. “There is no concept of sin, but there are concepts of being in error or out of order in one’s relations to others or to more cosmic forces” (Pilisuk & Parks, 1986, p. 185).

In the Navajo world, for example, illness is viewed as an interruption in balance and harmony, and healing practices are aimed at restoring harmony in a manner that is good not only for the individual but for the community as well (Duran & Duran, 1985; Guerrero, 2003). Native healers utilize ritual ceremonies that have historically proven successful at restoring harmony and order, allowing the individual and community an opportunity to regain holistic balance.

Native healers are also the providers of sacred teachings, which for the Navajo are codes of conduct (Guerrero, 2003). Healers often emphasize the interdependence of humans with all things in the universe through their sacred teachings, oral traditions, and storytelling as a way of instructing youth concerning the guiding principles of Navajo life (McGaa, 2002). For countless generations, Native Americans have passed on life symbols, belief systems, and a rich history of harmonious existence through oral representations and verbal arts—a practice not dissimilar to those of other sociocentric societies, including Ubuntu-based African cultures.

Oral Traditions

The importance of oral tradition is fundamental to understanding the transmission of knowledge, particularly among non-Dominant World cultures. Ikuenobe (2006) stated,

The oral tradition . . . represents a body of information (practices, values, history, skills, principles of action and organization, and beliefs) that are considered important to a group of people by virtue of which the core identity and cultural legacy of a group or community are perpetuated and passed down from generation to generation. (p. 141)

Similar to the Native American sacred teachings, the oral narrative is an essential feature of indigenous African life. Folklore, proverbs, parables, songs, sayings, and riddles are all utilized as a means of conveying the philosophies and values of African culture to younger members of society (Groenewald, 2003). Within a communal context and through day-to-day living, people are educated about moral principles and living in the community. Oral narrative presents morality in ways that are concrete, practical, realistic, and understandable (Ikuenobe, 2006).

Important ideas of community and personhood are communicated through oral traditions in Africa with the overall intention of providing guides of conduct necessary to obtain what is considered to be a humanistic “moral personhood.” Morality plays a significant role in African culture. Ikuenobe (2006) noted,

[African] people are educated about moral principles and their individual moral and social duties regarding the accepted moral principles in a communal context through an informal process of day-to-day upbringing and living in the community . . . the processes, methods, and context of moral education in African communities involve the informal use of different forms of narratives, folklore, proverbs, and oral tradition. (pp. 135-136)

Such concrete, understandable, and practical reinforcements of the community’s moral voice helps guide learning and provides a cultural legacy of morality that can be passed from one generation to the next (Ikuenobe, 2006).

Ties That Bind Us

This chapter has illustrated the importance and universality of oral tradition within sociocentric cultures, along with an exploration of the significance of communal ties to individual well-being and cultural survival. A sense of belonging is vital to one's being-in-the-world and often acts as a guide for moral behavior. Finally, this chapter has examined how humanistic values and a communalistic orientation have shaped the understanding of an African self and strengthened connections to a holistic worldview that has well served generations of Africans. Chapter 5 will further investigate this African worldview by exploring the African philosophical concept known as Ubuntu and its historical and contemporary significance, with particular emphasis placed on how Ubuntu principles have been expressed within the country of South Africa.

Chapter 5 The Concept of Ubuntu

Ubuntu: What Is It?

The basic meaning of *Ubuntu* is a simple respect for the fact that we are interconnected social beings. It embodies the quintessential essence of humanness, specifically a respect and love of others that guides all aspects of daily life. Human welfare is of paramount concern in traditional African morality (Bandawe, 2005).

Key to the development of the collective, humanistic identity of a majority of Africans, particularly indigenous South Africans, is what is considered the ultimate African virtue—Ubuntu. Ubuntu is the major tenet of the African world view philosophy. For generations an overarching commitment to the philosophy of Ubuntu has successfully guided the thoughts and actions of millions of Africans across the continent, providing a way of life that has nourished and sustained many communities against obstacles great and small (Mnyaka & Motlhabi, 2005).

Although it would be grossly inaccurate to romanticize Ubuntu to the point of overlooking the extreme intertribal savagery that has characterized much of African history, it can be said that Ubuntu is the glue that holds African communities together—often despite what we in the West would consider overwhelming struggles and difficulties. It is said that in traditional South Africa following any war between two tribes “war healers” from each tribe would together arrange a cleansing ceremony for warriors who fought on both sides. The ceremony was considered necessary because “the hands, hearts, and spirits of killers on each side would need to be cleansed” (Nussbaum, 2003, p. 5) so healing and reconciliation could begin.

Some variation of the word *Ubuntu* is found in nearly every language spoken in South Africa (Holdstock, 2002), and the concept is known by other names throughout the African continent. Ubuntu is *Botho* in the Sesotho (also South African) language. In Ghana, it is *Biakoye*, and *Nunhu* in Zimbabwe. Ubuntu is referred to as *Utu* in Kenyan Swahili, and *Ujamaa* in Kiswahili, which is spoken in Tanzania (Broodryk, 2006).

Ubuntu is a core value system, a unifying philosophy in Africa. Throughout the region, Ubuntu represents a guiding philosophy that dictates traditional behavior and provides a set of desired goals that communities and individuals alike strive to achieve. Based on common human traits, it is a universal doctrine of acceptance promoting the equality and dignity of all people, with an emphasis on humanness and the solidarity of mankind. Ubuntu is seen as being “the most desirable state of human life.”

Understanding Ubuntu is critical to understanding African cultures. A universal definition of Ubuntu is impossible to articulate, and the concept is often difficult for individualistic Westerners to fully comprehend. Ubuntu has been described many ways:

- “. . . as a philosophy of life, which in its most fundamental sense represents personhood, humanity, humaneness and morality” (Mokogoro, as cited in Brack, et al., 2003, p. 319).
- “Ubuntu is the desire to live in harmony with others and to submit one’s own needs for the benefit of the social framework in which one lives”(Van Vlaenderen, 2001, p. 150).
- The qualities of compassion, care, gentleness, respect, and empathy are essential elements of Ubuntu (Holdstock, 2000).

- “Ubuntu is ‘*motho ke motho ba batho ba bangwe/umutu ngumuntu ngabantu*’ which, literally translated, means a person can only be a person through others . . . the individual’s whole existence is relative to that of the group” (Brack et al., 2003, p. 319).
- “Ubuntu is not merely positive human qualities, but the very human essence itself, which lures and enables human beings to become *abantu* or humanized beings, living in daily self-expressive works of love and efforts to create harmonious relationships in the community and the world beyond” (Mnyandu, 1997, p. 81).

The essence of Ubuntu has been transmitted from generation to generation primarily via oral traditions such as fables, proverbs, riddles, and parables (Holdstock, 2000; Ikuenobe, 2006; Kamwangamalu, 1999) designed to impart the wisdom of humanness, caring, compassion and universal connection. Some common examples of this include the following:

Ngonga umwe katu udila pa mukaba (One finger cannot lift up a thing).

Bukwata nyanebe mbukuwata (Your friend’s problem is your problem).

“*Mangwani, marara sei?*” (Good morning, did you sleep well?) answered by:

“*Ndarara, kana mararawo*” (I slept well if you slept well).

African sayings often are based on observations of natural phenomena and animals (Broodryk, 2006):

- Two small antelopes can beat a big one.
- When spider nets unite, they can tie up a lion.
- Because a man has injured your goat, you do not go out and kill his bull.

- The frog wanted to be as big as the elephant, and he burst. (p. 25)

The folktale *Segwagwe le Leswafe* is told to children:

Once, a couple struggled to have children for many years. Eventually they were blessed with twins: one child was a frog and the other an albino. The albino had sores all over his [sic] body, and because of her unfortunate appearance, she was thrown in the bushes to die. The frog baby was very lazy and did not do the chores she was supposed to do during the day. She rather spent the day visiting her friend, the hippopotamus. During her absence, the albino baby would come out, clean the house and cook delicious food. The frog ate and relaxed, thinking that some magic did the house chores. The parents were very happy. One day, the father decided to remain at home to watch how the frog baby did all her chores. He was surprised to see the albino baby sneaking into the home, and doing everything. When the albino baby tried to get back into the thorn bush, her father grabbed her and held her tight so that she could not escape. The albino was welcomed back by the parents. (Broodryk, 2006, p. 17)

The moral of the story is that one should never discriminate against another on the basis of appearance, disability, or race.

Ubuntu embodies the quintessential essence of humanness, specifically a respect and love of others that guides all aspects of daily life. The best-known description of Ubuntu comes from South African Archbishop Desmond Tutu (2005) in his book titled *God Has a Dream*:

[Ubuntu] is the essence of being human. It speaks of the fact that my humanity is caught up and is inextricably bound up in yours. I am human because I belong. It speaks about wholeness, it speaks about compassion. A person with Ubuntu is welcoming, hospitable, warm and generous, willing to share. Such people are open and available to others, willing to be vulnerable, affirming of others, do not feel threatened that others are able and good, for they have a proper self-assurance that comes from knowing that they belong in a greater whole. They know that they are diminished when others are humiliated, diminished when others are oppressed, diminished when others are treated as if they were less than who they are. The quality of Ubuntu gives people resilience, enabling them to survive and emerge still human despite all efforts to dehumanize them. (p. 26)

Historically, colonialism, racism, and Apartheid in South Africa have suppressed and distorted Black African culture, but a commitment to Ubuntu has provided community

resilience that could not and would not be eradicated. Ubuntu is many things, characterized in many ways, but above all else it is a doctrine of hope.

Early African Psychology

Many African scholars, including Akbar (2003) and Azibo (1996), argue that the discipline of psychology did not begin with European ideas of the late 1800s, or even with the Greek philosophers, but rather can be traced back at least 3,000 years to the ancient Black Kemet civilization of the Nile Valley. The Greek word *psyche* actually has its etymological roots in the Kemet word *Sakhu*, or soul (Akbar, 2003). It is believed that the Kemites had a very technologically advanced, organized, socio-centric civilization that emphasized morality, social justice, human development, and self-realization (Azibo, 1996). “The Kemites practiced the cultivation of the human psyche or soul and the attendant higher mental faculties as part of a holistic, complex approach to the social universe” (Azibo, 1996, p. 5). Although the Kemet civilization did not survive, many of their views on the psychological nature of humans and communalistic interdependence survived to form the philosophical foundation of many cultures and the bedrock of African psychology.

The Discipline of Psychology in South Africa

Imported Western psychology. “. . . the bourgeois ideology that proclaims all men to be essentially equal, manages to remain consistent with itself by urging the *subhuman* to rise to the level of Western humanity that it embodies” (Fanon, 1967, p. 110). Much like other facets of colonization, the *science* of psychology was imported and imposed on Africans with little regard or adaptation to their cultural traditions and unique

sociological circumstances. In South Africa, the rigid positivism of Eurocentric psychology was far removed from the actual life experiences of the average Black South African. For example, ancestors play a large role in the day-to-day lives of indigenous South Africans. As intermediaries between the living and the dead, ancestors are seen as spirits that are still concerned with their earth-bound brethren. Their existence is not questioned, and the relationship between ancestors and the living is viewed as vital and dynamic. There is an ongoing, speaking relationship in which ancestors are consulted regarding various matters, and their advice is considered indispensable. Ancestors manifest themselves to native South Africans through dreams, visions, and voices that are seen as “real encounters of great significance” (Holdstock, 2000, p. 171). Such a strong relationship between the living and the ancestors has served to reinforce the concept of the interdependent self; yet, viewed through the eyes of Western psychological hegemony as it emerged in South Africa, it was viewed as odd, uncivilized, and even pathologic (Ikuenobe, 2006).

The emergence of Western psychology in South Africa was linked primarily to the racist ideologies of apartheid, making it further unavailable (and unattractive) to the Black majority population. Psychology’s ties to apartheid are chillingly exemplified by the fact that H.F. Verwoerd, an Afrikaans South African who would come to be considered the father of apartheid, was also a professor of applied psychology. Verwoerd (as cited in Duncan, Stevens, & Bowman, 2004) remarked in reference to the educational needs of Black South African Children in 1927:

The school must equip the Bantu to meet the demands which the economic life of South Africa will impose upon him . . . there is no place for him in the European community above the level of certain forms of labour. What is the use of teaching

a Bantu child mathematics when *it* cannot use it in practice? That is absurd.
(p. 363)

Verwoerd later became South Africa's prime minister and in 1950 passed the Population Registration Act which codified racism, clearly delineating population subgroups based on racial distinctions. The prevalent opinion supported Verwoerd's notion of inferiority of the indigenous African, and for decades South African psychologists were complicit in perpetuating this myth (Leach, Akhurst, & Basson, 2003). In the late 1950s, the South African Psychological Association asked for (and received) support of then Prime Minister Verwoerd to deny the membership of a Black psychologist simply on the basis that he was Black.

South African psychologists trained in Western ways. During the apartheid years, which lasted until 1994, education in psychology was as inaccessible to the majority of the South African population as psychological services were. It was not until the 1980s that any Black students were admitted to English-language universities in South Africa, and then schools that did admit Black students often found themselves penalized through governmental funding cuts. The majority of psychological training programs experienced by Black psychologists were ones that espoused abstract worldviews and theories of illness that were far removed from the collective view of the self they had experienced as indigenous South Africans with communal upbringings (Mkhize, 2004a). Such initiation into individualistic ways of thinking were strange and alienating—the opposite of the relational nature of personhood that they were accustomed to.

In the early 1980s, some progressive White South African psychologists attempted to realign the field towards a more socially relevant psychology—one that

would include considerations of race, class, and intergroup relations (Painter, Terre Blanche, & Henderson, 2006). As the country moved towards the end of apartheid rule, considerations of the mental health needs of the majority populations began to emerge. A South African critical psychology began to develop in the 1990s, much of it influenced by liberation psychology and the works of Frantz Fanon, Steve Biko, and Paulo Freire (Hook, 2004b; Painter et al., 2006).

Upon the end of apartheid and practices of racial exclusion in 1994, democracy and emerging Black consciousness brought about major changes in South African psychology. The Psychological Association of South Africa, long a bastion of White domination, was disbanded, and the Psychological Society of South Africa was formed with Black psychologists constituting the majority of the positions of leadership.

Contemporary psychology in South Africa continues with a very strong emphasis on critical psychology and now focuses a great deal on community psychology in response to the historical apartheid structures and their deleterious effects on native Black communities (Ngonyama ka Sigogo, Hooper, Long, & Lykes, 2004). South African psychologists are working to not only move the discipline beyond the legacy of apartheid and psychological practice as established by Verwoerd but are trying to incorporate indigenous practices into modern psychology, thereby making it less intimidating and more familiar to the larger population who bear the scars of apartheid. Programs are being developed, albeit slowly, at historically White colleges (such as the University of Witwatersrand) that are collaborating with traditional healers in ways that embrace multiple (and indigenous) knowledge systems (Ngonyama ka Sigogo et al., 2004). According to Bandawe (2005), greater emphasis is now being placed on teaching

university students not merely *head* knowledge but *hand* (practical) and *heart* (character) knowledge as well. Schuster (2005) stated,

African psychology dreams of redeeming, not only the discipline and profession of psychology, but of the entire human condition. It dreams of initiating a science that will enable us to understand the universal nature of our being, of establishing a relationship with the world around us. (p. 1)

Yet, even with these great strides towards a more holistic perspective, psychology as a discipline in South Africa today still remains unknown, unwanted, or inaccessible to the majority of South Africans (Nsamenang, 1995; Van Dyk & Nefale, 2005), and the nature of psychological services are seen as mystifying and ambiguous (Hickson & Kriegler, 2001; Leach et al., 2003). In a country of close to 45 million people, it is estimated that there are only between 5,000 and 8,000 South African psychologists, the majority of whom are White (Murray, 2002; Painter et al., 2006).

Indigenous folk psychologies.

Indigenous psychologies refer to forms of knowledge that arise out of the social and cultural realities of the people concerned. They are not imposed from the outside, they also investigate mundane (everyday), rather than experimental (laboratory) behaviors . . . indigenous psychologies aim to address the needs of the people under investigation. (Mkhize, 2004a, p. 29)

Moghaddam (1987) warned that the scientific and humanistic concerns within psychology are at odds. This is due partially to disagreement as to the role of psychology in non-Dominant (Third World) development. As in South Africa, developing countries have historically been importers of U.S.-American psychological knowledge, which Moghaddam claims has been insensitive to the importance of intergroup relations among indigenous populations. In 1987, Moghaddam anticipated the development of Third World indigenous psychologies that are more applied than U.S.-American psychology,

with greater emphasis on addressing social problems and community development and a shift away from a polarized concept of individualism versus collectivism. Moghaddam envisioned a multidimensional conceptualization where the two are no longer viewed as mutually exclusive tendencies. This is exactly what has been happening in recent years in South Africa as indigenous Black psychologists begin to increase in numbers. However, the legacy of Western psychology still maintains a strong foothold in mental health practices in South Africa (Hook, 2004b).

Among the relatively few indigenous Africans who choose to seek out and can afford the services of psychologists trained in and committed to Western psychological paradigms, most still find not only an inherent power differential but an attitude that pathologizes and dismisses the indigenous belief systems and folk psychologies that have sustained South African communities for generations (Edwards et al., 1983; Nama & Swartz, 2002). “Current psychological practices are Western in origin, imported, decontextualized, non-African and therefore inappropriate for a country which has many Third World characteristics” (Hickson & Kriegler, 2001, p. 784). This often leaves African clients seeking therapeutic services confused and conflicted, torn between culture and community offered by traditional healing and the promise of individual interventions championed by “progressive” Western therapies (Van Dyk & Nefale, 2005). African folk psychology has been dismissed by most ethnocentric Western psychologists, yet often contain insights, that although difficult to verify utilizing the rigor of Western scientific methods, are nonetheless observed to be vital and legitimate (Nsamenang, 1995).

An overwhelming majority of South Africans still rely on folk remedies, including treatments for emotional and psychological ailments. Straker (1994) noted that

African healing is more holistic than Western psychological practices, as Africans view the world more holistically and their self-references extend beyond the individual to include the natural and supernatural worlds. Mental illness is viewed as disharmony with these interactive systems rather than an individual psychopathology. This includes the possibility of illnesses that are animistic, mystical, or magical in origin. *Umkuhlane* describes illness that is seen as having a natural causation, while *Ukufa kwabantu* refers to an illness caused by supernatural forces. *Ukufa kwabantu* literally translates as “a disorder of human beings” (Edwards et al., 1983, p. 214) and is believed to happen because the ancestors are *looking away*, due to some sort of disharmony in the individual. The services of highly regarded traditional healers, known locally as *Sangomas* are often enlisted to restore harmony and health to individuals suffering from *Ukufa kwabantu*. Sangomas provide therapies firmly rooted in centuries of tradition and reverence of the restorative powers of connection with the natural world. It is estimated that there are over 250,000 Sangomas in the country of South Africa (Cook, Edwards, & Thwala, 2005), and they hold positions of power and reverence in most villages. It is widely believed that Sangomas are chosen by the ancestors and are therefore endowed with extraordinary healing powers (Cook et al., 2005; Edwards et. al., 1983).

Despite increasing demand for Western medicine due to modernization and urbanization of Zulu populations, native South Africans still overwhelmingly value traditional interventions. Van Dyk and Nefale (2005) noted that the majority of traditionally oriented Africans, when experiencing an health/emotional problem, go to a traditional healer because:

- Traditional Africans believe that sickness (especially one of an emotional or psychological nature) originates as a punishment from the gods for evil.

- Africans can only get rid of the punishment through traditional sacrifice.
- Traditional healers work with the client and their family—not on an individualistic basis.
- Traditional healers work with the gods and ancestors in the healing process. (p. 50)

Edwards and colleagues (1983) conducted a retrospective study of 100 Zulu psychiatric patients treated at King Edward VIII hospital in Durban, South Africa, in 1980, finding that 81% sought confirmation of their psychiatric diagnosis through consultation with a Sangoma. Although these are not contemporary statistics, Edwards and his colleagues believe that they are reflective of ongoing confidence in the healing powers of Sangomas.

Belief in the abilities of Sangomas to assess illness and causation, and their subsequent ability to heal and restore harmony, highlight a societal emphasis on communalism and balance in African communities. Balance, harmony, and healing are extremely important to South Africans, and nowhere was this more prominently validated than within the proceedings of the Truth and Reconciliation Commission following the end of apartheid.

South Africa's Truth and Reconciliation Commission

Beginning in the late 1600s, South Africa was colonized by fortune-seekers from many European cultures, primarily the British and the Dutch. With colonization came massive plundering of the country's rich natural resources and violent subjugation of the majority Black native populations. Following hundreds of years of cultural, economic, and physical conquest, the all-White South African government instituted apartheid policies in the 1950s, legally codifying the inferiority of Black South Africans—clearing the way for what has been labeled governmentally sanctioned genocide. Apartheid policies continued for nearly 40 years until the African National Congress (ANC), led by

Nelson Mandela and other liberation groups, some operating from the safety of nearby countries, led the fight for liberation of South Africa's majority population. Many were killed or unjustly imprisoned. Mandela's 20+ years of incarceration are now internationally well known. The sufferings of tens of thousands of others who fought to end apartheid in South Africa are not.

Worldwide attention to apartheid began in the 1980s, and by the early 1990s South Africa and the policies of apartheid had led to widespread economic embargos and United Nations denunciations: South Africa had been cast out of the global village. In February 1990, with the South African economy in ruins, President F. W. de Klerk announced that banned political parties would be allowed to operate again. Mandela was released within 10 days of de Klerk's proclamation. A new South African democracy began with a new constitution drafted in 1993. Envisioned within the new constitution were many ideals based on Ubuntu philosophies and aimed at national unity and harmony. The new South African constitution has since been hailed worldwide as the most progressive, just, and humanistic constitution ever written (Burton, 1998). A portion of the South African constitution (as cited in Burton, 1998) states,

This Constitution provides a historic bridge between the past of a deeply divided society characterized by strife, conflict, untold suffering and injustice, and a future founded on the recognition of human rights, democracy, and peaceful coexistence and development opportunities for all South Africans, irrespective of colour, race, class, belief or sex. (p. 14)

In an effort to reconcile the horrors of the past and move forward towards unity, the new South African democratic government enacted the National Truth and Reconciliation Act in 1995—using basic Ubuntu principles as foundational elements. The Act put in motion a process by which individuals who had committed “gross human

rights violations” during apartheid could become eligible for amnesty and forgiveness by appearing before a Truth and Reconciliation Commission. It was the purpose of the Commission to address the divisions of the past in a way that acknowledged “a need for understanding but not vengeance, a need for reparation but not for retaliation, a need for Ubuntu but not for victimization” (Burton, 1998, p. 15). To receive amnesty for their violations of the human rights of others, each person appearing before the Commission had to provide full disclosure of all human rights violations to which they were a party, explain their involvement in the violations, and describe how the violation was related to an apartheid political objective.

An overall commitment to the principles of African humanness, as expressed in Ubuntu, served as a form of community restorative justice. A commitment to healing rather than retribution was seen as the path to building a new nation. Archbishop Desmond Tutu, who presided over the TRC, believed that according victims “the right to be heard and acknowledged, with respect and empathy” (Burton, 1998, p. 43) would lead to healing and reconciliation of South Africa as a strong, civil society.

Truth and Reconciliation hearings were held in large cities and small villages throughout South Africa. Victims were given the opportunity to make statements to the Commission and ask for reparations. Between the Committee for Reparations and Rehabilitation and the Amnesty Committee, over 27,000 statements were taken and assessed, resulting in findings that indicated the majority of perpetrators had committed violations on behalf of the apartheid State (Burton, 1998, p. 15). Utilizing Ubuntu within the machinations of the Truth and Reconciliation Commissions work allowed the country to let go of hate and cleanse itself (Burton, 1998).

Ubuntu continues to be a unifying philosophy in South Africa, one that emphasizes the sacredness of life; the equality of all people; the brotherhood of mankind, and, most of all, humanness. “The humanism in Ubuntu appears to be more intense than humanistic approaches in other ideologies” (Yum, 2007, p. 19). Today, Ubuntu continues to serve as a moral code of principled behavior in South Africa. Following the end of apartheid, thousands of Black South Africans ascended to management positions in both governmental and business sectors, and many corporations have instituted successful organizational structures based on Ubuntu principles (Holdstock, 2000). This has included developing business strategies that train employees on Ubuntu and organizing them into “tribes” to facilitate cohesion. Many have incorporated workplace Ubuntu-inspired codes of conduct (Broodryk, 2006). South Africa also has over 800,000 *stokvels*—economic cooperatives or collective enterprises—where profits are shared on an equal basis and everyone involved is considered to be family (Louw, 2008).

Although there clearly could be an argument made for the existence of some residual racism in South Africa today, the ANC government’s decision to rely on Ubuntu to steer them into a new democracy proved to be a wise one. Majority rule and the end of brutal apartheid were accomplished with relatively little conflict and disharmony following de Klerk’s 1990 announcement. This can be directly attributed to a national commitment to Ubuntu. If such a commitment to the principles of Ubuntu can begin to bring together a country devastated by 400 years of colonialism and 40 years of genocidal apartheid, I would argue that Ubuntu can, and should, be examined as an exciting potential new paradigm for psychology and use in the West.

Fourteen Primary Ubuntu Principles

There are many nuanced aspects to the construct of Ubuntu as it is expressed in South Africa. Different sources will acknowledge around two dozen possible qualities of humanness that are espoused by a commitment to Ubuntu (Holdstock, 2000; Myers, 1993). Primary among them are 14 virtues, or qualities of humanness, that are present in virtually all accountings of what actually constitutes persons displaying Ubuntu. These virtues are common human traits associated with universal acceptance and belonging (Mzamane, 2007). They transcend the divide of self-versus-other and foster collaborative understanding and growth. Although there are some cultural and connotational differences, including the degree to which they are internalized, each of these principles has approximately the same definitional meaning in Western cultures as in South Africa, making the transfer to Western use a relatively simple process. They are elemental human virtues for which we already possess a common frame of reference. Each offers concrete and practical application that, when combined, help to establish a foundational blueprint for an engaged and rewarding personhood that engenders an ethos of peaceful coexistence (Louw, 2008). The 14 Ubuntu virtues, or qualities of humanness, that I believe are essential to any adaptation for Western use are as follows:

- Hospitality
- Compassion
- Empathy
- Tolerance
- Respect
- Interdependence
- Collective solidarity
- Patience
- Kindness
- Reconciliation
- Cooperation
- Warmth

- Forgiveness
- Supportiveness (Hanks, 2008, pp. 131-132).

I believe that the relative universality of each of the virtues precludes the necessity to discuss them individually at length, but it is important to emphasize the role each plays in a unified expression of Ubuntu. There can be no empathy without tolerance and respect; no collective solidarity without interdependence and cooperation; no reconciliation without forgiveness and compassion. Each virtue is a thread in the fabric of Ubuntu.

This chapter has introduced the concept of Ubuntu and its primary principles, or qualities of humanness. Western psychology, imported with little or no consideration of traditional healing (and stressing an individualistic, medical model of illness) has proven to be complicit in many of the atrocities perpetrated against South African majority populations. The role Ubuntu has played in the history of South Africa and how a commitment to Ubuntu is shaping the country's future has been examined, along with the powerful influence of indigenous psychology on the practice of psychology within South Africa today. Ubuntu served as the foundational morality behind the creation of the South African Truth and Reconciliation Commission and continues to act as a moral compass, guiding the country into the 21st century.

Given the positive influence Ubuntu has had on the lives of countless Africans, the next chapters of this paper are devoted to examining the viability of adapting Ubuntu into a new paradigm of healing for *Western* populations. I believe that Ubuntu has tremendous potential in a myriad of Western applications, particularly in contained residential settings such as nursing homes and correctional facilities. An examination of all these possibilities would require commitment beyond the scope and limits of this

dissertation. Consequently, I have chosen to emphasize the potential for utilizing Ubuntu principles in an area that I am familiar with—child and adolescent residential treatment facilities (RTCs). As a mental health professional who has worked in residential treatment facilities, and as a parent of a child who has received residential services on numerous occasions, I believe Ubuntu offers a unique treatment modality to these psychological and behavioral interventions that have been often shown to be ineffective (Abramovitz & Bloom, 1997; Bloom, 2005; Hainesworth, 2001; Hair, 2005).

Chapter 6 Ubuntu: Pragmatic Therapeutic Applications

Ubuntu as Treatment Modality of Choice

Rather than continuing to differentiate African and Western healing practices, an integrative approach based on Ubuntu can be developed with the goal of adding to Western practices a more inclusive view of human connections. Such a philosophical construct seems relatively easy to conceptualize, but is it possible to translate the symbolic idealism inherent in Ubuntu into concrete programming and practical application within traditional U.S.-American organizations, institutions, and treatment facilities? Can the principal, communalistic philosophies of Ubuntu be incorporated into an innovative humanistic paradigm? Beyond the benefits that could be gleaned from embracing Ubuntu principles as a guiding philosophy for individual “being in the world,” I believe Ubuntu can also offer an excitingly alternative treatment modality for U.S.-American therapeutic milieus.

Residential treatment facilities, retirement homes, and even correctional institutions are, by their very nature, self-contained communities. Ubuntu-based programming and curricula could be developed to reframe the experiences within these facilities, positively accentuating the healing powers of community and building not only a sense of belonging but also an awareness of individual responsibility to something greater than oneself—the community. An Ubuntu-driven model has the potential to be incorporated into existing therapeutic programming or instituted as the foundational underpinnings of programs yet to be established.

Residential Treatment Centers

It is estimated that up to one of every eight children under the age of 18 in the United States has mental health issues serious enough to warrant treatment. Yet, less than half that number actually receive any form of therapeutic intervention (Hainesworth, 2001). Those who do receive treatment often receive inadequate or inappropriate services that fail to address the full spectrum of their developmental, emotional, psychological, and behavioral needs. Although current trends have emphasized community-based treatment and family services, there has historically been significant utilization of in-patient psychiatric hospitalizations and long-term placement in RTCs. Due to ever-increasing costs and lack of clear measurable benefits (Frensch & Cameron, 2002; Leichtman, 2006; Saxe, Cross, & Silverman, 1988), residential mental health treatment for children and adolescents is an area of psychological services that has been placed under increasing scrutiny in recent years.

There are in excess of 65,000 children and adolescents currently in U.S.-American RTCs (Hainesworth, 2001), and existing therapeutic models utilized within the majority of those RTCs have historically “been guided by psychoanalytic, behavioral or learning theory” (Abramovitz & Bloom, 2003, p. 121). These facilities typically focus on individually designed interventions aimed at controlling disruptive behaviors with crisis-driven protocols and short-term conflict management. Traditional RTCs prepare elaborate treatment plans for each new resident, most establishing point systems and behavioral benchmarks, along with rigid parameters of what constitutes appropriate milieu community “rules.” Oftentimes, the plans include specific punitive interventions involving physical and emotional isolation should the child violate milieu

rules (Bloom, 2005; Hainesworth, 2001), yet there is rarely discussion of why the rules are a necessary component of community life. So much emphasis on the *individual* treatment of *individual* youth often results in little attention paid to the fundamentally interactive and interpersonal nature of the therapeutic milieu—and, more importantly, the world at large to which these youth will eventually return. The youth placed in residential treatment facilities may learn to control their behaviors, overcome their addictions, and manage their emotions, but rarely will they be exposed to any therapeutic programming geared towards helping them develop empathy, caring, and authentic interpersonal concern. This is particularly ironic in that a large number of youth placed in RTCs are there not because they are mentally ill but because they have serious interpersonal difficulties (Hainesworth, 2001).

Admission to an RTC often involves a diagnosis of an Axis I disruptive disorder—Attention Deficit Hyperactivity Disorder (ADHD), Conduct Disorder (CD), or Oppositional Defiant Disorder (ODD), each of which has diagnostic criteria that includes interpersonal difficulties (Hainesworth, 2001). Often, comorbidly present with these disruptive disorders is a diagnosis of Reactive Attachment Disorder (RAD). Characterized by disturbed social relatedness and inability to “respond in a developmentally appropriate fashion to most social interactions” (DSM IV-TR; American Psychological Association, 2000), significant attachment disorders tend to be quite resistant to therapeutic change (Hughes, 1999). Few programs address attachment issues, as there is a prevailing belief that attachment therapy is extremely difficult with older children and involves a lengthy process (18 to 24 months) that far exceeds the financial commitment most insurance providers are willing to accept (Hughes, 1999).

Programs that do emphasize the importance of “getting along with others” generally do so as a tool for managing control of the milieu, not as a means of establishing interpersonal connections and group harmony. Consequently, residents may learn the superficial behavioral posturings of “how to get along” within the confines of a rigidly constructed, structured environment but have little understanding of how to engage in a genuine, mutually rewarding interpersonal relationship, especially when removed from the relatively predictable RTC environment and placed back into the “real world” (Bloom, 2005).

Longitudinal research conducted by the National Adolescent and Child Treatment Study has shown that 45% of the children placed in RTCs were readmitted to mental health facilities, and 29% were subsequently incarcerated (Hainesworth, 2001). These statistics suggest the need for a radical paradigm shift within child and adolescent residential treatment that will place greater emphasis on interpersonal interactions and successful community citizenship. Such a shift will be difficult to attain, given the historically resistant nature of organizations to change and the fact that mental health systems of care are not easily transformed utilizing organizational change precepts adapted from other arenas (Goodstein & Burke 1991; Schlesinger & Gray, 2006).

There are various forms of residential care available for children with mental health problems. These include traditional psychiatric hospitals, both private and public, and RTCs. “Residential treatment centers are out-of-home 24 hour facilities that offer mental health treatment using multi-disciplinary teams that often make therapeutic use of the daily living milieu, but are less restrictive than inpatient psychiatric units” (Hair, 2005, p. 552).

Since the adoption of the principle of least restrictive environment in the 1970s, there has been considerable effort to utilize inpatient hospitalizations and placement in RTCs only as a “treatment of last resort,” even when such placement might offer the most clinically appropriate option. As most managed care systems are unwilling to accept the level of expense associated with residential care, placement in a residential facility is generally not approved until other, less expensive outpatient treatment options have been exhausted.

Lyons, Libman-Mintzer, Kisel, and Shallcross (1988) found that the annual cost of an extended stay for a child or adolescent placed in residential treatment averages at least \$50,000 to \$75,000 per child. Since 1988, costs related to residential treatment have grown exponentially, often exceeding \$100,000 per year—far beyond what most families can afford and most insurance companies are willing to invest (Bess, Leos-Urbel & Geen, 2001). Consequently, “children and adolescents who need residential treatment . . . are forced to fail a variety of outpatient services prior to being referred” (Frensch & Cameron, 2002, p. 308).

Most youth entering RTCs have experienced an average of six prior placements, including more than one psychiatric hospitalization (Rivard et al., 2004), and contemporary research indicates that they are more psychologically damaged and emotionally troubled than those previously admitted to residential facilities (Bloom, 2005; Hainesworth, 2001). Today, “children entering residential treatment have typically experienced a history of failed placements, are more seriously disturbed, act out more aggressively, and have more complex abuse-related symptoms” (Rivard, et al., 2004, p. 530).

Residential treatment center efficacy. It has been suggested that placement in an RTC often offers little more than a period of respite for troubled youth and their primary caregivers (Currie, 2003; Hair, 2005; Lyons et al., 1998). Residential treatment seeks to provide a structured “safe haven” that is consistent and nurturing for troubled youth who have often come from environments that are chaotic and unsupportive. Having a disturbed child leave the home for a residential stay can offer an emotional reprieve to caregivers struggling with the unpredictable and often violent outbursts of children with externalizing behavioral disorders. There is little evidence, however, to suggest that any treatment gains or self-regulation skills learned in the RTC environment are being transferred and sustained once the child or adolescent transitions back to the home environment (Hainesworth, 2001).

Often, children make significant strides within the confines of the RTC, only to return home to flawed family systems, serious environmental stressors, and a lack of aftercare services. “Improvement within treatment is not predictive of adaptation at followup” (Frensch & Cameron, 2002, p. 335). Hoagwood (as cited in Hair, 2003) found that 90% of clinical services provided could not be empirically proven to have been effective with youth who had completed residential treatment.

The lack of noteworthy empirical research finding residential treatment to be an efficacious long-term solution for youth with significant behavioral disorders has led many to question the continued utilization of such facilities (Frensch & Cameron, 2002; Hainesworth, 2001; Leichtman, 2006; Stroul & Friedman, 1996). Research on the efficacy of residential treatment for youth is poorly funded and often suffers serious methodological flaws. Given the wide range of opinions as to what components actually

constitute residential treatment, studies of treatment facilities and therapeutic modalities often fail to demonstrate what treatments are effective for what youth (Frensch & Cameron, 2002; Hainesworth, 2001). Saxe et al. (1988) noted:

It is practically impossible to separate what success is due to treatment modalities and what is due to treatment settings . . . the effectiveness of residential treatment cannot be considered in isolation, but must be evaluated in conjunction with the quality of posttreatment environment, follow-up care, or both. (p. 9)

A wide spectrum of facilities that claim to be “residential treatment centers,” ranging from small group home settings to large institutional programs, have a great deal of variance as to what services they offer, what populations they serve, and what treatment modalities they employ (Leichtman, 2006). RTCs, according to Abramovitz & Bloom (2003),

. . . still lack criteria that rationally link diagnosis, etiology, prognosis, and criteria for specific forms of residential treatment . . . and the proliferation of therapeutic approaches complicates residential work. For example, at one and the same center, staff may be conducting individual therapy based on classical psychoanalytic, ego psychology, object relations or cognitive behavioral theory as well as using reality based techniques and medication. (p. 127)

Residential programming for child and adolescent treatment centers can be predicated on short stays dictated by perceived acuity levels or long-term interventions lasting a year or more. There are no overarching industry guidelines that all facilities adhere to, no set standards dictating what treatments are to be provided to which residents under what therapeutic conditions. The one denominator common to all RTCs is that treatment requires the child or adolescent be removed from his or her home environment and placed in a nonfamily setting (Frensch & Cameron, 2002).

Residential treatment center modalities. There is not a single, cohesive, and comprehensive treatment model that dominates the system of care offered to children and adolescents living in RTCs. Abramovitz and Bloom (2003), noted,

More than seventeen approaches—including individual treatment, group therapy, milieu therapy/therapeutic community—have been found operative in most residential treatment centers around the country . . . most residential treatment centers try to cobble these approaches together in order to have a coherent treatment model. . . . Complications arise because each of these approaches is based on theories that contain different underlying assumptions. (p. 127)

Early RTCs took psychoanalytic treatment models and, without much modification, began utilizing them in the residential environment. Psychoanalytically oriented RTCs viewed individual and social problems as primarily the result of internal psychological conflicts, with little concern given to the effects of daily routine and the residential environment on individual progress. This failure to recognize the importance of cohesive care across all program domains—individual therapy, educational programming, and communal living—led to inconsistencies in service provision that still plague many RTCs today (Abramovitz & Bloom, 2003).

With the emergence of social and community psychiatry in the 1960s, and the recognition that individual functioning can be affected by a complex social matrix of external conditions such as poverty, discrimination, and other social problems, the dominant use of psychoanalytic models of treatment came under serious scrutiny (Bloom, 2005). Cognitive and cognitive-behavioral models emerged as the treatment of choice for a significant number of RTCs in the 1970s and 1980s. Focusing on existing maladaptive behaviors, the goal of cognitive-behavioral therapies was to replace those behaviors with “more effective, appropriate behavior patterns” (Munson, Klein, & Delafield, 1989, p. 817).

A common manifestation of a cognitive-behavioral model has been the “token economy.” Based on Skinner’s operant conditioning principles, the token economy was originally designed to be used with seriously mentally ill patients as a means of prompting behavioral improvements. After some initial success with mentally ill populations, the concept of a token economy was adapted for use with childhood behavioral issues (Lieberman, 2000). Utilizing principles of behavior modification, token economies establish a point system whereby residents are rewarded with “tokens” as a means of reinforcing positive behaviors. Tokens or points can be exchanged by the residents for extra privileges, home visits, candy, sodas, or other items that hold particular value to individual residents. The potential loss of tokens or points is utilized as a consequence for engaging in behaviors that are deemed negative or inappropriate (Lieberman, 2000; Mann-Feder, 1996). Cognitive behavioral methods are still utilized in many RTCs, and some variant of a token economy can be found within myriad therapeutic settings. These methods have proven particularly effective for children with conduct disorder during the course of their treatment but have failed to prove sustainable following completion of the residential stay (Saxe et al., 1988). As discussed earlier, these methods offer little in the way of providing youth with interpersonal skills or the ability to empathetically conceptualize.

Living in a contained milieu environment offers unique opportunities to explore the potential for healthy and holistic interactional patterns that few RTCs have chosen to employ. There are, however, a limited number of RTCs that eschew medical-model modalities in favor of more humanistically oriented healing communities based on the concept of “therapeutic community” (Bloom, 2005).

Therapeutic community. The concept of therapeutic community originated in 1796, when the Quakers developed The Retreat in York, England, to treat the mentally ill. Embracing a quite radical way of dealing with the mentally ill, residents of The Retreat were treated with gentleness, humanity, and respect (Kennard, 2004). Priority was placed on personal relationships and the therapeutic benefits of physical environment. Residents were encouraged to participate in decisions that affected the facility, and staff and patients were considered to have equal status.

Therapeutic communities for youth are thought to have their genesis in 1913, with the development of the Little Commonwealth, a treatment center for delinquent adolescents in southwest England. There, adolescents shared responsibilities, rules were developed by the residents, and there was no overt adult authority (Kennard, 2004). In the 1930s, Marjorie Franklin and David Wills developed Planned Environmental Therapy, emphasizing the therapeutic value in unconditional love combined with shared responsibility. Kennard (2004) found that Franklin and Wills believed,

. . . that the child's social needs could be addressed through the experience of shared responsibility within the community; their emotional needs through attention to relationships with staff members and through individual psychotherapy; and their educational needs through measures designed to increase motivation for learning such as voluntary lessons and an emphasis on creative work. (p. 297)

It was this emphasis on relationship as therapeutic focus that became the accepted model for therapeutic community, but it was not until the 1960s that such residential work with children was termed *therapeutic community*.

Therapeutic communities today endeavor to provide residents with a model of care that is both humane and egalitarian (Kennard, 2004). Therapeutic communities strive to provide an atmosphere that promotes the community as a place that is safe, tolerant,

and healing. The community itself is seen as a critical factor influencing treatment.

Attention to relationships and shared community responsibility that is democratic and participatory deemphasizes hierarchal structures, allowing youth to actively participate in their own treatment while simultaneously facilitating the treatment of others. Kennard (2004) stated that therapeutic community,

. . . provides a wide range of life-like situations in which the difficulties a member has experienced in their relations with others outside are re-experienced and reenacted with regular opportunities in groups, community meetings, everyday relationships, and, in some communities, individual psychotherapy—to examine and learn from these difficulties. (p. 296)

Sanctuary. A meta-analysis of available studies conducted by Rivard et al. (2004) found that up to 56% of children with serious emotional disturbances have histories of physical and sexual abuse and/or significant neglect. Chronic maltreatment leads to developmental disruptions in many life domains, including the development of problem-solving skills, emotional regulation, self-perception, and forming healthy attachments. “These injuries to the body, mind, and soul often exacerbate each other, so that the optimal treatment environment must be directed at healing all of them simultaneously” (Abramovitz & Bloom, 2003, p. 131).

Rivard et al. (2004) suggested that the majority of youth in RTCs have experienced these significant early childhood traumas and that the organizational culture of traditional RTCs serves to exacerbate, not eradicate, the traumatic experiences of their residents. Acknowledging the potentialities of combining therapeutic community with trauma-informed treatment, Rivard et al. proposed the adaptation of the Sanctuary model (originally developed by Bloom in 1997 to treat adults trauma victims in an inpatient

setting) as a coherent and comprehensive alternative to psychoanalytically oriented, crisis-driven residential treatment for children.

The Sanctuary model views exposure to significant violence, maltreatment, and trauma as a “central organizing life experience” (Abramovitz & Bloom, 2003, p. 130) that must be addressed in a culture that is democratic, nonviolent, and trauma sensitive, where residents can develop communication skills, social responsibility, and healthy attachments. Youth institutionalized in Sanctuary RTCs are not viewed as “sick” or “bad,” but rather as individuals who have experienced significant traumatic injuries to their bodies, their minds, and/or their souls in need of *healing* and the development of affect management skills. Bloom (2005) wrote,

The Sanctuary model represents a trauma-informed whole system approach designed to facilitate the development of structures, processes, and behaviors on the part of staff, children, and the community-as-a-whole that can counteract the biological, affective, cognitive, social, and existential wounds suffered by the children in care. (p. 65)

The Sanctuary model is also unique in that it suggests that short-term treatment can be more effective than longer residential stays (Bloom, 1997), especially if residents are allowed to return to the RTC for occasional, post-release “tune-ups.” Echoing this belief, Hair (2005) found evidence to support the efficacy of shorter, repeatable treatment stays that are less expensive and remove the expectations often associated with out-of-home placements as a once-and-for-all cure. “The expectation of a cure in residential treatment implies lack of continuity between pre-residential and post-residential environments. It must be understood that most youngsters in residential treatment require ongoing supports” (Small, Kennedy, & Bender, 1991, p. 338).

As we have seen in this section, traditional residential treatment for adolescents and children has often failed to provide long-term, sustainable amelioration of serious interpersonal disorders. A therapeutic community approach with follow-up supports offers tremendous potential, especially if the child or adolescent resident can establish interpersonal connections and core relational understandings while living within the community. I believe therapeutic communities and Sanctuary-oriented RTCs offer the most appropriate environments for establishing programming based on Ubuntu's principles, as many of them currently employ some Ubuntu-like programming. Therapeutic communities focus on inclusion within the community, and Sanctuary emphasizes healthy attachments and social responsibility—all hallmarks of Ubuntu. Sincerely embracing the Ubuntu principles of hospitality, compassion, empathy, tolerance, respect, interdependence, collective solidarity, patience, kindness, reconciliation, cooperation, warmth, forgiveness, and supportiveness within the confines of therapeutic community could offer these children a cocoon of resilience from which to emerge as healthy, holistically actualized adults.

Ubuntu's Therapeutic Potential

As human beings, we have emotional and biological needs to connect, to belong to something greater than ourselves (Brodzinsky, Smith, & Brodzinsky, 1998). Addressing the intrinsic needs of children and adolescents in RTCs necessitates that we pay homage to these inherently human desires. An Ubuntu-based treatment modality could allow us to do precisely that, as the basic tenet of Ubuntu is a simple respect for the fact that we are interconnected social beings. Learning to accept that their welfare is “dependent upon the welfare of all” (Kamwangamalu, 1999, p. 28) could help narcissistic

children and adolescents establish prosocial attitudes and reinforce a spirit of cooperation and togetherness. Learning that each individual is an equal member of the community, with obligations and responsibilities, could help foster a sense of acceptance. No one, regardless of any past or present transgressions, would be isolated or shunned from the community. “Everyone belongs and there is no one who does not belong” (Mnyaka & Mothabi, 2005, p.221). For children and adolescents who have experienced multiple traumas, psychic insults, and repeated rejections (both physical and emotional), the prospects of attaining such unconditional positive regard could have profoundly life-altering effects.

The paradigms of choice in traditional residential treatment programs are failing to adequately address the needs of youth dealing with serious mental health issues, and managed care is demanding shorter stays or alternative (and less costly) interventions. There is a pressing need to develop new treatment modalities and systems of care that offer opportunities for sustained success to children and adolescents with severe emotional and behavioral disorders. The challenge is to provide multimodal services that are tailored to the needs of individual youth, while also addressing the commonalities of disturbance and the amelioration of the culture of maltreatment that has led to the current levels of disturbance. If RTCs are to survive and be efficacious, there must be, in my opinion, a radical paradigm shift from providing passive, reactionary systems of care to engaging in proactive, innovative ones. RTCs must discard failed interventions and assume new responsibilities. This will not be an easy task, as funding becomes a major issue. Insurance companies and governmental programs such as Medicaid are constantly seeking ways to cut costs, and mental health programming is often first to be cut for

myriad reasons (Hair, 2005). Programs that seek to implement innovative strategies and techniques rarely find support (or funding) for unproven interventions. One solution that has been proposed (L. Burns, personal communication, October 12, 2007) is to circumvent insurance and Medicaid issues by establishing alternative RTCs as nonprofit organizations, funded completely by donations and grants. This would render Medicaid and insurance reimbursements a moot issue, as all services would be provided free of charge under the umbrella of nonprofit status. Clearly, this would require setting up a new RTC as opposed to implementing Ubuntu programming within established facilities. For existing facilities, financial considerations would need to be addressed, as would implementation of new concepts to staff already entrenched in the day-to-day machinations of established treatment modalities.

Potential Acceptance of Ubuntu by RTC Professionals

Prior to undertaking this dissertation, I conducted a very basic preliminary study to examine the potentialities of Ubuntu (as a philosophical construct and treatment modality) within the design of child and adolescent treatment facilities. It was my belief that such an Ubuntu program would allow residents exposure to the qualities and characteristics of personhood that define the African concept of being fully and completely human, in the hopes that they would then incorporate these qualities and characteristics into their behavioral patterns. In such a program, I envision that residents and staff would be encouraged to embrace and embody the 14 Ubuntu virtues, or qualities of humanness, outlined above.

These Ubuntu virtues could become the guiding principles of interpersonal interaction within an Ubuntu-based facility and could be woven together into integrative

programming consistent across all three components of the RTC community—therapy, schooling, and housing milieus. Implementation of Ubuntu programming could align treatment towards a symbiotic, highly interactive therapeutic approach. I believe that such therapeutic attunement could serve to make RTC milieus safer, stronger, and ultimately more holistic communities, capable of facilitating successful, long-term therapeutic outcomes.

To test the potentialities of Ubuntu within RTCs, I interviewed five mental health professionals. Each of the five was asked to participate based on his or her experience and association with RTCs for children and/or adolescents. Three participants (an administrator, a therapist, and a milieu counselor) were associated with a 32-bed adolescent RTC located in a large Southwestern city that has historically utilized a cognitive-behavioral model of service with a token economy. The other two participants are founders (who will also eventually act as therapists) of a 16-bed Sanctuary model facility currently in the early stages of program development in rural Colorado.

Interviews began with a verbal introduction to the concept of Ubuntu (see Appendix) followed by three open-ended questions:

1. What factors would *facilitate* your ability to implement Ubuntu-based treatment within your facility?
2. What factors would *inhibit* your ability to implement Ubuntu-based treatment within your facility?
3. How do you anticipate implementation of Ubuntu-based treatment would affect therapeutic outcomes?

Individual responses were not constrained in any way. Tangential narrative was not discouraged, as it revealed participants' subjective experiences. Excerpts from these narratives are included here, as they address issues of programmatic importance beyond the scope of the original research questions. Acknowledging the limitations of this study—a very small pool of interviewees with limited exposure to the (foreign) concept of Ubuntu and little discussion of *how* it could be adapted with existing institutional restraints—I believe that the results indicate an overall positive consensus as to the potentialities for the utilization of Ubuntu programming within residential treatment milieus.

All five participants were intrigued by the concept of Ubuntu, particularly as it would apply in an RTC setting. Interview results indicate an overall positive acceptance of the philosophical nature of Ubuntu programming, along with agreement that the principles espoused by Ubuntu would be beneficial to residents who choose to embrace them. The concept and ideals of Ubuntu were lauded as innovative and desirable, but the practical implications of developing Ubuntu-based programming were viewed as far more problematic issues.

(Participant #1): “They [the RTCs] are very resistant to change.”

Participants were able to elucidate many more obstacles to implementation than examples of things that might facilitate implementation. Concern was expressed regarding funding issues and staff training, as well as how such a curriculum would be structured and how success would be measured.

(Participant #1): “It sounds like something that is best approached on a structural level, and I am not really sure how that would fit in with individual treatment plans, billing, that sort of thing.”

(Participant #2): “I guess my main concern would be, how are you going to get them to pay for it? Medicaid reimbursement would be difficult until you could establish empirical results.”

Some questioned the ability to provide necessary individual treatment to particularly disturbed residents within a community-oriented atmosphere. Getting the residents to “buy in to” Ubuntu was seen as an obstacle, along with whether or not commitment to Ubuntu ideals could be sustained once residents return to environments that do not necessarily advocate similar ideals. Difficulties were anticipated with traditional systems (such as juvenile justice and foster care) that “feed clients into” RTCs not understanding or supporting such a radical paradigm shift.

The participants also expressed some reservations regarding the actual Ubuntu virtues. The virtues were viewed as perhaps too idealistic, too community oriented, or even too many in number to adequately address during short residential stays. One participant believed that tolerance is not a virtue and that collective solidarity is a tool rather than a virtue and, as such, can be used to undermine individuals. Overall, opinions were favorable as to potential therapeutic outcomes should practical obstacles be adequately addressed and Ubuntu-based programming actually implemented. Ubuntu was viewed as a positive healing model that could potentially build self-esteem, develop connections, and “give these kids the tools to be better citizens.”

(Participant #5): “Ubuntu could definitely work symbiotically within a Sanctuary environment . . . to build a self and to reintegrate that individual back into a fully functioning mainstream community with an awareness of social responsibility and connection.”

(Participant #3): “Well, if we could keep the kids long enough to really get it through to them, and if we could have an aftercare program that keeps reinforcing it, over and over, it might work. If it worked, that would be great.”

Clearly, the preliminary study revealed areas of Ubuntu programming that need further analysis, but the establishment of RTCs based on the philosophical constructs of Ubuntu potentially offers an excitingly alternative treatment modality for U.S.-American therapeutic milieus. Although cautionary, findings of this preliminary study suggest there may be an interest and willingness by residential treatment professionals to consider Ubuntu as the foundational underpinnings of a new treatment modality. An Ubuntu-driven model could be incorporated within existing therapeutic programming or instituted as the philosophical building blocks of programs yet to be established. With the potential to significantly reshape and rehumanize the residential treatment of children and adolescents, Ubuntu-based programming and curricula needs to be further developed, implemented, and evaluated, especially in terms of widespread feasibility. It appears that the greatest obstacles to implementation of Ubuntu within RTCs would center around issues of organizational change and staff resistance.

Changing Systems and the Process of Organizational Change

Motivation based on internal need or desire to change is rarely the reason an organization will change. Most organizational change has as its catalyst external pressure based on new regulations, economic conditions, or increased competition (Goodstein & Burke, 1991). Although there is a great deal of organizational development literature advocating the need to build in mechanisms for adaptation to feedback from clients and employees, fundamental resistance to change is quite common. As homeostatic systems, organizations continuously work to maintain a steady state. This is why “organizations require external impetus to initiate change and why that change will be resisted even when it is necessary” (Goodstein & Burke, 1991, p. 20).

In this era of privatization and HMOs, change to mental health care often comes as a spillover of changes in health and social services delivery systems (Schlesinger & Gray, 2006). Consequently, RTCs and their adjunct service delivery systems have experienced considerable external pressure to change but not generally in ways that provide better, more holistic services to their clients. Instead, RTCs have faced increased pressures for fiscal responsibility, structural reorganization, shorter services, and empirically measurable outcomes. The issue of outcome is particularly daunting for RTCs because “mental health treatment does not result in the same kind of measurable outcomes as does the treatment for physical diseases” (Scheid & Horwitz, 2006, p. 389). Therefore, it becomes difficult to justify residential treatment programming—particularly innovative, untried, and nonconventional programming such as Ubuntu—when treatment providers feel threatened by managed care plans anxious to drop them if they do not conform to specified outcome rubrics. This reality must be addressed if Ubuntu is to be implemented into existing residential treatment facilities.

Another hurdle inherent in creating new programming within an established organization is resistance to change. According to the pioneering work in organizational change by Kurt Lewin (1958), resistance to change must be dealt with by unblocking current patterns of behavior within the organization. Lewin believed that organizations work to maintain a steady, homeostatic state and that to initiate change, the homeostasis must be “unfrozen.” This can be accomplished in several ways, the first of which involves producing new behavioral responses to replace habitual ones, thereby moving the organization to another level by actually initiating the changes (Goodstein & Burke, 1991). This could be accomplished within a residential treatment organization by

introducing Ubuntu within the *facility's own* organizational structure prior to utilization with the client population. Replacing a hierarchical structure with one based on the communal caring and sharing of responsibility, along with a systemic commitment to Ubuntu virtues, would ensure staff familiarity and acceptance of the concept, as well as providing them with the benefits of a more egalitarian workplace environment.

Although a commitment to Ubuntu has had tremendous success in the structuring of post-apartheid South African government, corporations, and organizations (Mangaliso, 2001), bringing such a foreign concept to fruition in a traditional (Western) residential treatment setting would be difficult without revisioning systems of care. This would necessitate a restructuring of managed care and the existing hierarchal culture of service delivery systems. Such change would require significant support and reinforcement from the larger society outside the auspices of health care provision. Given the current political climate and emerging call for an end to for-profit managed care in favor of universal health care, it is not inconceivable that such significant support for new systems of service delivery could soon emerge. “The mental health system will change as social factors change” (Scheid & Horwitz, 2006, p. 377).

The implications of bringing Ubuntu into not only therapeutic arenas but larger society are myriad. Ubuntu has the potential to bring healing and relief from the predatory individualism and disconnected self that has left many in the West longing for a different life, a better path, a clearer purpose, and a deeper meaning. Where better to start the transition to healing and hope than with our most wounded children?

Chapter 7 Conclusion

Ubuntu as Promising New Paradigm

“Will psychologists continue to be peripheral to our society, or will we risk the dangers of being a significant social factor?” (Rogers, 1980, p. 257). If we are to advance psychology in ways that have a strong and positive impact upon the human condition, it is imperative that we explore new paradigms. We must be open to what we find, regardless of where we find it—be it in the expanses of outer space or the simplicity of ancient cultures. It is imperative that the psychology of the Western world reflects the limitations of that dominant culture, acknowledging that our ways are not necessarily the best or only ways.

We need only look at the state of our U.S.-American world to realize that our commitment to technology and individualism has left us with an ersatz sense of fulfillment and a longing for authentic connection. We yearn for the as yet unnamed, and we know deep in our hearts that there has to be *more* (Manheim, 2007; Putnam, 2000).

In 1990, Cushman stated,

Our terrain has shaped a self that experiences a significant absence of community, tradition, and shared meaning. It experiences these social absences and their consequences interiorly as a lack of personal conviction and worth, and it embodies the absences as a chronic, undifferentiated emotional hunger. (p. 600)

Perhaps in our zeal for advancement, we have overlooked the obviously simple and elemental pathways to enlightenment and abdicated our opportunities for actualization and enlightenment in favor of the material comforts of conformity. If this is true, then we must passionately and collectively seek out new pathways or face the inevitable consequences of our complacency. “We cannot expect a new world order to come about

if we continue to endorse a concept of the self as a closed and self-sufficient unit of the social system” (Holdstock, 2000, p. 204).

This dissertation has presented the theory that the African philosophical worldview known as Ubuntu can be a foundation for a humanistic paradigm that is less positivistic, ethnocentric, and individualistic than those most visible within Western psychology today. Throughout the course of my investigation, I was presented with emerging information supporting the importance of interconnection and relational health to the well-being (and even survival) of humans. This theme emerged repeatedly across cultures and continents, lending support to the belief that much can be gained by embracing harmonious, interactional principles—principles such as those espoused by Ubuntu.

Also discussed within this dissertation have been numerous examples of what I believe to be the shortcomings of Western psychology to effectively address contemporary issues that are increasingly presenting themselves as our world races towards a global community. There are many others who have raised similar concerns, and the field of psychology can only be strengthened by the scrutiny and accompanying alternatives that are emerging. The values and traditions inherent in humanistic orientations appear to offer a natural path of transition between the positivist Western psychology of our past and more globally relevant, inclusive, and holistic psychologies of the future. Akbar (2003), although not directly advocating for the embrace of Ubuntu, spoke of a similar need for paradigm shifts within the discipline of psychology, suggesting,

The paradigm that must emerge to structure our models must be one which facilitates the best of development for all human beings. It must be a natural or

generally human paradigm rather than the narrow ethnocentric paradigm that describes a particular group of humans . . . the paradigm suggests that the ideal or model human being should be those people who represent consistent and harmonious relationships with nature. It adopts the basic ontological position of the Africentric world view, “I am because we are.” (pp. 44-45)

Theoretical Application

Opportunity for Ubuntu to supplement and support existing humanistic theoretical perspectives also exists. For example, Ubuntu has the potential to enhance the person-centered approach developed by Carl Rogers because the principles of Ubuntu are very much in line with the human values of unconditional positive regard, respect, caring, authenticity, and compassion originally described by Rogers (1961, 1980) as being necessary components of a successful therapeutic relationship. “On the basis of my experience I have found that if I can help bring about a climate marked by genuineness, prizing, and understanding, then exciting things happen” (Rogers, 1980, p. 43).

Rogierian principles and Ubuntu principles both emphasize knowing another person through connection, and both draw attention to the importance of processes that go on between (rather than just within) persons. The person-centered approach of Rogers dictates that the most crucial aspect of therapy is the *therapeutic relationship* (Rogers, 1980), while Ubuntu dictates that the most crucial aspect of our humanness is tied to the power of our interrelatedness. Both are relatively simple concepts—as evidenced by the fact that Rogers was often attacked for the simplistic, bottom-up methods he employed (Rowan, 2001).

Sensitivity to the Ubuntu principles and philosophy can further encourage humanistic psychologists to recognize our relatedness and common humanity to promote more collective modes of healing. Rogers’ person-centered *empathetic understanding* is a

way of knowing another person through connection. Ubuntu takes that connection and expands it beyond the dyad to include greater community with broader results—a person-centered *society*. Rogers (1980) anticipated the need for such an expansion of his original theoretical perspective by stating, “No longer am I primarily interested in individual therapeutic learning, but in broader and broader social implications” (p. 67). In keeping with the spirit of Rogers’ aspirations, Ubuntu can offer a pathway to broader social implications and healing on a greater scale. Utilizing Ubuntu, either as a supplement to another humanistic theoretical application or as a stand-alone, philosophy-of-life paradigm, can work toward furthering the goals of contemporary humanistic psychology. Rogers (1980) stated,

I am no longer talking simply about psychotherapy, but about a point of view, a philosophy, an approach to life, a way of being, which fits any situation in which growth—of a person, a group, or a community—is part of the goal. (p. xvii)

Limitations

Any presentation of a theoretical dissertation would be remiss without acknowledging the unique and often significant limitations inherent in such an undertaking. Theoretical, or emergent, philosophical dissertations “tend to be rare in the social and behavioral sciences” (Krathwohl & Smith, 2005, p. 137). This is in part due to the fact that a theoretical dissertation presupposes that the researcher believes that he or she has a unique contribution to make, a new theory that will advance the discipline and open up new frontiers of inquiry and/or practice. Such a belief comes fraught with potential for disaster, including academic hubris and a lack of experience and ability to competently explicate previously unexamined ideas.

Another limitation concerns selection of source materials. My selection of source materials no doubt reflects my personal biases surrounding the subject matter. “Every researcher holds preconceptions that influence, but may not determine, what we attend to and how we make sense of it” (Charmaz, 2006, p. 67). Researcher awareness and a conscious effort to avoid such biases hopefully served to ameliorate any potential limitations due strictly to researcher bias; yet, I humbly admit a deeply personal connection to my subject matter.

With limitations of time and space, I acknowledge that I could not possibly address all of the existing literature pertaining to every topic and subtopic explored. But I believe that all available literature pertaining to Ubuntu was carefully examined for purposes of this dissertation.

Why Ubuntu?

I started this dissertation with the theory that Ubuntu can and should be modified for Western use. Through the course of my investigation, I was surprised to find many parallels to the philosophical constructs associated with Ubuntu represented in the beliefs and worldviews of many other cultures. This gives me great hope for not only the future of psychology but for the family of mankind as well.

This dissertation also explored the pragmatic value of Ubuntu by examining whether or not it is conducive to implementation within child and adolescent RTCs. Although a great deal more investigation is needed before the answer can be a resounding yes, initial analysis is encouraging. It is important to note that introduction of such radically different paradigms within existing treatment structures will undoubtedly be met with significant resistance and potentially disruptive consequences. Importing what might

be considered somewhat “alien” cultural beliefs into institutional systems built on individualistic values and hierarchical power structures will not make for smooth transition. These are obstacles that should be addressed in greater detail within future research and practical application.

The Ubuntu paradigm is not a panacea. Embracing it as a new force in the field of psychology will not immediately lead to widespread, loving communion among all peoples of the earth. It will not end disease and famine and war and corruption. We have simply to look at the African tribal genocides of the recent past and the daily African-upon-African horrors (such as the South African epidemic of child rape) to see that a commitment to Ubuntu cannot cure, or prevent, all ills. Some would even question how these violent acts can be reconciled with a supposed community commitment to Ubuntu. Just as all people who call themselves Christian do not act in Christ-like ways, not all who espouse Ubuntu’s virtues actually live up to them. Louw (2008) addressed this:

The apparent anomaly posed by the occurrence of such violent conflicts fades once one concentrates on the many counter examples. African examples of caring and sharing, and of forgiving and reconciling abound. The relatively non-violent transition from a totalitarian State to a multiparty democracy, is not merely the result of the compromising negotiations of politicians. It is the result of the emergence of an ethos of solidarity, a commitment to peaceful co-existence amongst ordinary South Africans in spite of their differences. Ubuntu serves as a cohesive moral value in the face of adversity. (p. 6)

Why Ubuntu? Why did this dissertation advocate for Ubuntu rather than one or more of the other traditions offering similar beliefs and comparable merits? Clearly, each of these traditions—Native Ways, *Jen*, Buddhism, and others—have much to offer. I do not pretend to know what is best for every person in every situation. I will, however, justify my assertion that Ubuntu should be embraced and modified for Western use by

emphasizing why I was drawn to Ubuntu in such a deep and profoundly personal way: Ubuntu is simple, it is elemental, and it speaks to that which is the best of human nature. Ubuntu embodies principles of humanness that we can understand; relate to; and, quite frankly, achieve. Ubuntu is not a striving or preparation for a next world, another lifetime, or a future enlightenment. Ubuntu is of *this* world. It is here and now. It is fundamental. It is a personhood that we already possess—a practical, concrete realization of the best of our nature that needs only awareness and commitment to be awakened. “Ubuntu is not codified and written on stone tablets like the Ten Commandments; it is implanted in your heart throughout life. It is a garden that you tend with love and care to yield floral melodies” (Mzamane, 2007, p. 12). I was also drawn to Ubuntu because it is a “doctrine of eternal hope” (Mzamane, 2007, p. 11). Despite thousands of years of turmoil, colonization, apartheid, extreme poverty, HIV/AIDS, and overwhelming odds, the African people and Ubuntu have survived.

Ubuntu’s message is universal. It can provide us with a layer of compassionate understanding that is nurturing and protective—a holistic cocoon of interconnection that will help us surmount the trials and tribulations of the modern world, allowing us and our fellow travelers to successfully navigate a future ripe with uncertainties. “*My humanity is bound up in yours, for we can only be human together*” (Archbishop Desmond Tutu, cited in Jones, 1999, p. 168).

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Appendix Verbal Introduction to the Concept of Ubuntu

Prior to each individual interview, participants were introduced to the concept of Ubuntu by the researcher. The script for this introduction was as follows:

The purpose of this interview is to obtain your personal opinions as to the viability of introducing the principles of the African philosophical worldview known as Ubuntu into treatment programming within child and adolescent residential treatment facilities. I would first like to acquaint you with the concept of Ubuntu.

Ubuntu is primarily about communalism and community. Within an Ubuntu community, there is sharing and compassion. Each individual has a social commitment to share what s/he has with others. Each person is judged in terms of his or her relationships with others. A person is empowered and fulfilled in terms of his or her relationships with others, and his or her behaviors are intertwined with the thoughts, feelings, and actions of others with whom the person shares interdependent relationships.

A key goal of Ubuntu is to live in harmony with all beings great and small.

Ubuntu is a guiding philosophy that dictates behavior and provides a set of desired goals that the individual and community alike strive to achieve.

Essential to Ubuntu are the qualities of respect, empathy, compassion, and care. The welfare of an individual is, to a large extent, dependent on the welfare of all. Each individual is a member of the community—“everyone belongs and there is no one who does not belong”—but with membership comes obligations and responsibilities.

The ultimate goal of Ubuntu programming is to “become fully and completely human” by embracing and embodying 14 Ubuntu virtues, or qualities of humanness. These virtues are:

- Hospitality
- Compassion
- Empathy
- Tolerance
- Respect
- Interdependence
- Collective solidarity
- Patience
- Kindness
- Reconciliation
- Cooperation

- Warmth
- Forgiveness
- Supportiveness

I want you to consider Ubuntu and these virtues as you answer the questions I pose to you during the interview process.