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Critical Cultural Awareness: Contributions to a Globalizing Psychology

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Abstract

The number of psychologists whose work crosses cultural boundaries is increasing. Without a critical awareness of their own cultural grounding, they risk imposing the assumptions, concepts, practices, and values of U.S.-centered psychology on societies where they do not fit, as a brief example from the 2004 Indian Ocean tsunami shows. Hermeneutic thinkers offer theoretical resources for gaining cultural awareness. Culture, in the hermeneutic view, is the constellation of meanings that constitutes a way of life. Such cultural meanings – especially in the form of folk psychologies and moral visions – inevitably shape every psychology, including U.S. psychology. The insights of hermeneutics, as well as its conceptual resources and research approaches, open the way for psychological knowledge and practice that are more culturally situated.

Keywords

International psychology; cultural psychology; indigenous psychology; folk psychology; individualism; hermeneutics

As in other spheres of contemporary life, psychologists are crossing international borders with increasing frequency. Some cultural psychologists have long hoped that such increased cross-cultural contact and communication would disrupt the entrenched parochialism and ethnocentrism of U.S. psychology (e.g., Marsella, Tharp, & Ciborowski, 1979; Pedersen, 1979; Sue & Sue, 1977). Such cross-cultural contact, they believed, would necessarily result in greater reflexivity regarding the cultural roots of U.S. psychology. But this promise has not been fulfilled. U.S. psychology remains not only overwhelmingly U.S.-centric but also largely unaware of how its cultural roots shape theory and research. As Arnett (2008) has pointed out, the population from which U.S. psychologists draw their research samples

constitutes less than 5 percent of the world's population. Similarly, an analysis by Henrich and colleagues showed that most psychological knowledge is based on "WEIRD" participants (i.e., those from Western, educated, industrialized, rich, and democratic societies; Henrich, Heine, & Norenzavan, 2010). This research suggests that U.S. psychologists are prone to generalize from a narrow set of U.S.-based data.

Below, we first describe some difficulties that arise when U.S. psychologists work across cultural borders without acknowledging the cultural specificity of their knowledge and practices. We draw on first-person experiences of humanitarian relief efforts following the 2004 Asian tsunami, as well as on a broader consideration of the expansion of clinical and counseling psychology across international borders. In our view, the neglect of culture, along with the readiness to draw universal generalizations from U.S. data, is not a chance occurrence; it is a result of cultural values and assumptions of mainstream U.S. psychology. Drawing on the work of hermeneutic thinkers, we argue that, far from being peripheral, culture is central to human experience. We argue further that every psychology is necessarily culture-bound, rendering all psychologies—including U.S. psychology—indigenous psychologies. Finally, we conclude with recommendations inspired by hermeneutic thinkers for greater cultural awareness in psychology.

Reflections on the 2004 Asian Tsunami

Well-intentioned efforts by U.S. psychologists to reach beyond U.S. borders have been criticized as drawing upon U.S.-centered models, knowledge, and practices with insufficient regard for the cultural sensibilities of those they serve (Watters, 2010). Consider, for example, this brief recounting of the activities of some psychologists who rushed to Sri Lanka in the aftermath of the Indian Ocean tsunami of 2004. One of the authors (JM) was living and working in Sri Lanka when the tsunami hit this small Indian Ocean island. The massive waves, caused by an earthquake off the coast of Sumatra, devastated coastal communities along two-thirds of Sri Lanka's coastline. Over 36,000 lives and 300,000 homes were lost within minutes. Roads, railways, markets, businesses, schools, places of worship, and fishing fleets were washed away (cf. McGilvray & Gamburd, 2011).

People in the devastated areas gave priority to securing shelter, food, and clothing for themselves and their children, as well as items for daily use such as cooking utensils, sleeping mats, soap, medicine, towels, and diapers. In the makeshift tent villages, women and girls were concerned to find private places for bathing and toileting, as well as safe places where they could sleep without fear of sexual molestation (Galappatti, 2005). Tracing and re-uniting with missing family members (i.e., the extensive kin networks that count as family for Sri Lankans) was of paramount importance. Recovering the bodies of dead kin and carrying out proper funeral rites were key obligations for survivors, as well as a source of solace (Sumathipala, Siribaddana, & Perera, 2006). Settling children back into a school-going routine was also important; government schools reopened just eight days after the tsunami hit, holding open-air classes where buildings had been washed away.

Within a matter of days following the tsunami, masses of trained and untrained helpers—including many psychologists from Western high-income countries such as the U.S.—

arrived in Sri Lanka. The foreigners, though well-intended, came with priorities and assumptions quite different from those of local people. For instance, Western-trained mental health professionals presumed that post-traumatic stress disorder, depression, and suicide would reach epidemic proportions (Watters, 2010). Local experts predicted otherwise, and there in fact was not an increase in suicide or suicidal behavior, or in admissions to psychiatric services (the only available form of mental health care), in the tsunami-affected areas (Rodrigo, McQuillin, & Pimm, 2009).

The cultural misunderstandings and missteps of foreign helpers were not limited to erroneous expectations regarding psychiatric disorders. Psychologists and other helpers came equipped to deliver Western-derived interventions, such as eye movement desensitization and reprocessing therapy, critical incident stress debriefing, grief counseling, exposure therapies, play therapy, and various cognitive behavioral therapy regimens. Such therapeutic technologies often flew in the face of local ways of being, local ideas of appropriate social interaction, and local norms regarding privacy, dignity, emotional display, personal comportment, and family solidarity (Wickramage, 2006). For example, some foreign psychologists organized group-based programs and therapeutic exercises in ways that violated the strictures of segregation by caste, religion, and sex that underpin local social organizations and stratification. For the most part, these violations were unwitting, but sometimes they were deliberate. (“We need to teach those people some things.”) Some psychologists, unaware of the intense personal and familial shame associated with madness (*pissu*) and mental illness (*manasika rogayak*), attempted to offer one-on-one counseling, which would have singled out individuals as mentally ill. Others, unaware that florid public displays of emotion are strictly proscribed in Hindu and Buddhist cultures, compelled people to take part in group sessions devoted to emotional catharsis. (“Cry! Cry! It will make you feel better.”) Although he was trained in Western biomedicine, Mahesan Ganesan—a local psychiatrist who served the stricken area—described the foreign helpers’ “medical model orientation” and “lack of consideration of local culture and structures” as “disappointing and sometimes shocking” (2011, p. 360).

Had foreign psychologists consulted with local psychosocial experts (or worked cooperatively with them), they could have learned about local ways of being and behaving, folk psychologies, and moral visions of those they intended to help. Psychologized views of suffering seldom figured in local understandings, and local people (whether victims, village heads, government relief officials, psychiatrists, or psychosocial workers) did not envision a need to alleviate such suffering by psychotherapeutic technologies. The *Sutta* of Kisa Gotami, a story about a mother whose child has died, was well known among local Buddhists. It teaches that “lamentation, complaint, and grieving” only increase sorrow, but by becoming composed, one can attain peace of mind. According to Ganesan, tsunami survivors were guided by this core Buddhist ethos: “To suffer is to survive. To bear it with grace and dignity is to live” (as qtd. in Norman, 2008).

Without such knowledge, a good deal of foreign psychologists’ efforts was arguably wasted. Moreover, in some instances, their actions had negative consequences for those they intended to help (Ganesan, 2006). Local anxieties were heightened by culturally inappropriate demands to disclose private information about oneself or one’s family in

community “awareness sessions.” Family conflicts sometimes arose in the wake of such disclosures. Furthermore, individuals recruited for one-on-one counseling found themselves the target of gossip and teasing. Inter-communal dissension sometimes broke out over perceptions that foreigners favored one community over another. The cavalier use of critical incident stress debriefing, some reported, exacerbated stress responses rather than relieving them (Wickramage, 2006). Indeed, as foreign helpers usurped scarce resources (such as food, clean water, petrol, vehicles, and housing), the national press came to dub them “the second tsunami” (see Wessells, 2009, p. 849).

The mismatch between foreign psychologists’ skills and knowledge and tsunami victims’ needs is perhaps not surprising when we consider the literature concerning the internationalization of clinical and counseling psychology. Thus far, this literature has given little attention to culture-specific forms of psychological suffering. Instead, U.S.-based writers have typically reported on the growth of clinical and counseling psychology across the world in terms of enrollment in degree programs, accreditation, credentialing and licensure; and organizational roles and relations with other helping professionals and non-professionals (e.g., Leung & Zhang, 1995; Stevens & Wedding, 2004). Local systems and practices for ameliorating psychological suffering (e.g., reliance on family and community networks, ritual healers, faith-based approaches, composing the mind via meditative or contemplative practice) are seldom discussed and, worse, sometimes denigrated outright. The burgeoning body of research by anthropologists, cultural psychologists, and transcultural psychiatrists concerning local healing systems and practices is often unacknowledged. Although some psychologists are indeed sensitive to such issues, an unspoken assumption is that psychology is limited to psychology as currently imagined and practiced in the U.S. (Arnett, 2008). This narrow field of vision inhibits U.S. psychologists from recognizing that *every* psychology, including U.S. psychology, is inevitably indigenous; that is, it is embedded in and a product of the surrounding culture and local societal conditions.

Even when psychologists recognize bodies of psychological knowledge other than their own, this knowledge is often appropriated for the goals and priorities of Western psychology. For example, although Uichol Kim and colleagues have made important contributions to mainstream psychology’s appreciation of indigenous psychologies, their work is framed within a (Western) positivist philosophy of science, in which the goal to “create a more rigorous, systematic, and universal science” (Kim, Park, & Park, 2007, p. 151). Furthermore, Kim et al. assert that in order for scholars to use indigenous concepts from “philosophical” and “religious” texts, they “must first translate them into psychological concepts or theories” (p. 454). This unexplained requirement reflects the scientific ideal of sharply separating psychology from philosophy and religion. This inevitably gives priority to Western psychological constructs. We worry that an agenda such as that of Kim and his colleagues prevents indigenous psychologies from being seen as beneficial in their own right, not solely for what they might contribute to a grand theoretical project adjudicated by Western-educated referees. This worry is substantiated by their curious choice of a particular U.S.-based psychological theory (Bandura’s agentic transactional model) as “*the* scientific foundation of indigenous psychology,” based on the broad claim that “people are agents

motivated to control their lives and to attain desirable goals and avoid undesirable consequences” (Kim & Park, 2006, p. 31, italics added; cf. Kim, Park, & Park, 1999; see Allwood, 2011, for an expanded critique of Kim et al.’s work).

U.S. psychologists have paid increasing attention to cultural differences in the last few decades. However, they have paid less attention to the concept of culture. As many theorists have noted, psychologists often have conceptualized (and operationalized) culture in inadequate ways (e.g., Adams & Markus, 2001; Christopher & Bickhard, 2007; Hermans & Kempen, 1998; Jahoda, 2002; Kashima, 2000; and Shweder, 1991). For example, culture is sometimes treated as a nuisance variable that interferes with the discovery of universals. Sometimes it is mistakenly rendered as a demographic variable and used interchangeably with terms such as race, ethnicity, and national identity. Cultures are often confused with countries and treated as if they were geographic territories. And culture is often granted agentic force in determining the thoughts and actions of those “in” it. By contrast, the culture theorists noted above view culture as meanings and practices that are shared by a social group and constitutive of a way of life.

We now turn to a consideration of hermeneutics, a body of thought that provides a rich set of conceptual tools and methods of inquiry for studying culture. Like the culture theorists described above, hermeneutic thinkers view culture as the meanings, significations, and practices shared by a social group. Further, they see such shared meanings as the context in which selves are inextricably embedded. Hermeneutics offers an avenue for psychologists interested in rethinking the study of culture in our discipline.

Hermeneutics and Critical Cultural Awareness

Originating among German philosophers (notably, Martin Heidegger and Hans-Georg Gadamer) and continuing with scholars in North America such as anthropologist Clifford Geertz and philosopher Charles Taylor, hermeneutics developed as an alternative to positivist social science (cf. Packer, 1985; Richardson, Fowers, & Guigon, 1999). Hermeneutics is an interpretive practice concerned primarily with developing a practical understanding of everyday lived experience. It is a counterpoint to the abstract constructs and ahistorical and acultural explanatory models that abound in present-day psychology in the U.S. Through their alternative conceptions of culture and the self, hermeneutic thinkers challenge taken-for-granted assumptions of U.S. psychology. Hermeneutic thought therefore has considerable promise for fostering more critical cultural awareness.

A Hermeneutic Model of Culture

In a hermeneutic model, culture is a set of shared meanings that structures and orients human existence, what Geertz (1973) famously called “webs of significance.” In this view, culture comprises the meanings shared by members of a social group—what they take to be “common sense.” These shared meanings make possible communication, joint activities, and relationships; and they give shape to personal identities. Cultural meanings entail layers of assumptions, pre-reflective understandings, canonical narratives, and moral visions. These meanings often are so commonplace that they are invisible; that is, they are “just the way things are.” Even something as biologically basic as sleep is configured in arrangements

imbued with cultural meanings (Shweder, Jensen, & Goldstein, 1995). The practice of infants and children routinely co-sleeping in the same bed as their parents is customary in much of the world, though it is sternly frowned upon by U.S. childrearing experts. Acceptance or prohibition of co-sleeping rests on cultural meaning, that is, shared ontological assumptions and related moral values related to personal boundaries, emotion regulation, individuation, independence training and sexual intimacy.

Two aspects of cultural meanings are particularly important for hermeneutic psychology: folk psychologies and moral visions. A folk psychology is a set of meanings concerning psychological life that is shared by a social group. Jerome Bruner (1990) defined folk psychology as

a set of more or less connected, more or less normative descriptions about how human beings 'tick,' what our own and other minds are like, what one can expect situated actions to be like, what are possible modes of life, how one commits oneself to them, and so on. (p. 35)

The term folk psychology is often invoked as a pejorative, to connote superstitious, old-fashioned, irrational, or prejudicial ideas about human behavior; its antithesis is thought to be "scientific" psychology. By contrast, in the hermeneutic view, folk psychologies entail inescapable presuppositions about self and social relations that orient people in life and enable them to function (Geertz, 1973; Taylor, 1988, 1989). As Heelas (1981) put it, "it is not possible to live as a human being without having an idea of what it is to be a human being" (p. 3). Moreover, folk psychology forms the largely unacknowledged substrate of expert psychological knowledge (including scientific psychological knowledge). Any understanding of behavior (e.g., extraversion), emotion (e.g., anger), cognition (e.g., schemas), psychopathology (e.g., delusions or depression), or complex social practices (e.g., courtship or racism) rests on a folk psychology concerning what a person is and what a person is expected to do or experience in a particular situation.

Folk psychologies orient people not only to what *is* but also to what *ought to be* (Bruner, 1990; Geertz, 1973). The "is" and the "ought" correspond roughly to what Geertz (1973) saw as the two overarching dimensions of culture: worldview and ethos. A worldview is a model of how things are, including assumptions about what resources, faculties, and capabilities persons have; what states of consciousness are accessible to a person; and where the boundaries of the self are. Ethos refers to the moral, affective, and aesthetic aspects of human life, including the "tone, character, and quality" of life and a people's "underlying attitude toward themselves and their world" (Geertz, 1973, p. 127).

Folk psychologies function in part as *moral visions*, that is, they are constellations of assumptions and values that define what the person *is* and *should be* or *become*. Moral visions inform people about what is worthy, good, and desirable, and about what constitutes virtue, morality, health, and well-being. In this way moral visions provide guidance about how a person ought to behave, relate to others, think, and feel, as well as about what constitutes the good life and the good or ideal person. Moral visions orient people to what they should move towards—both in terms of personal qualities, characteristics, and virtues (e.g., courage and equanimity), but also in terms of social situations or societal arrangements

(e.g., volunteer organizations). Moral visions also inform people about what they should resist or avoid by laying out what is seen as unhealthy, immature, sinful or pathological. Taken together, moral visions provide the implicit criteria for people to assess who they are and how they “measure up;” in this way, moral visions are an intimate part of identity. Moral visions contribute significantly (albeit tacitly) to psychologists’ theories about children’s development, life satisfaction and happiness, gender relations, psychopathology, and effective psychotherapeutic practice (Christopher, 1996, 1999; Christopher & Hickinbottom, 2008).

Moral visions vary widely across cultural groups. Indeed, in conflicts between cultures, it is often moral visions that are in conflict. As recent events have shown, programs of social change (e.g., banning child marriage, headscarves, or circumcision, or ending female genital cutting); economic development (e.g., land redistribution or expanded educational opportunities for girls); and social reforms (e.g., declarations of universal human rights or movements to decriminalize homosexuality) necessarily engage people’s sense of what ought to be and what is good and worthy, as well as their motivations in living. When such programs of change are premised on the moral visions of high-income societies in the global North and imposed on societies in the global South, it is hardly surprising to hear accusations of neo-colonialism and cultural imperialism.

Two brief examples illustrate the practical import of cultural variation in folk psychologies and moral visions for psychologists. The first concerns suicide and deliberate self-harm. In the U.S., it is taken as common sense that suicide is a symptom of a serious psychiatric disturbance, typically a mood disorder. Virtually all textbooks of abnormal and clinical psychology assert this as an incontrovertible and universal fact, as do public education materials and prevention programs. Furthermore, the inclusion of “suicidal behavior disorder” as a condition for future study in the *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; American Psychiatric Association, 2013) suggests that suicidal behavior can be a psychiatric disorder in its own right. However, since Bruno Malinowski’s groundbreaking classic, *Crime and Custom in Savage Society* (1926), a steady stream of empirical evidence has shown that the meaning of suicide is profoundly culture-bound and not necessarily psychopathological. On the Indian subcontinent, for example, suicide and suicidal behavior, typically undertaken by individuals low in status, often serve as means of redressing grievances or protesting or evading unwelcome or illegitimate demands. The motivating force is anger, not depression, and the intention is to shame the wrongdoer (Marecek & Senadheera, 2012; Staples, 2012; Widger, 2012). Suicides in rural China have similarly been linked to familial grievances and the desire to avenge a wrong by publically disgracing the wrongdoer (Pearson, Philips, He, & Ji, 2002). In neither the Indian subcontinent nor the People’s Republic of China is suicidal behavior understood as an automatic sign of psychiatric disturbance. In fact, the diagnostic manual of the Chinese Society of Psychiatry specifically states that most Chinese individuals who commit suicide do *not* have mental illnesses (Chinese Medical Association, 1995, as cited by Pearson et al., 2002). China and India cannot be considered as exotic exceptions to the general rule, as together they comprise over 36 percent of the world’s population. Indeed, with the U.S.

comprising only about 4 percent of the world's population, one might consider the medicalized view of suicide as the exotic exception.

The second example is drawn from the research program of Peggy Miller and colleagues (e.g., Miller, Wang, Sandel, & Cho, 2002), which compared the upbringing of children in rural areas of the U.S. and Taiwan. Miller and colleagues spoke to caregivers (mothers in the U.S.; mothers and grandmothers in Taiwan) concerning their ideas about childrearing practices and goals. U.S. mothers, the researchers noted, emphasized bolstering their children's self-esteem by providing love, affirmation, praise, and opportunities for success and by avoiding shame and harsh discipline. They viewed self-esteem as the foundation for a range of positive outcomes, such as academic success, happiness, moral autonomy, and mental health. The Taiwanese caregivers offered a sharp contrast. To begin, no direct translation of the term "self-esteem" existed in Mandarin Chinese. Even after the researchers made prolonged efforts to establish common ground around the meaning of self-esteem, the concept remained unintelligible to half the caregivers. For the others, high self-esteem was not a desired developmental outcome, but was thought to lead to psychological vulnerabilities such as stubbornness, low frustration tolerance, and unwillingness to listen to elders. For Taiwanese caregivers, childrearing centered on moral education and discipline, not on affirming a child's worth. In both the U.S. and Taiwan, childrearing practices draw on and reaffirm folk psychologies and moral visions. At the same time, these practices shape the contours of the selves of both children and mothers. As the stark contrast between Taiwan and the U.S. shows, the notion that high self-regard is central to children's well-being is a local and historically specific one, not a transcultural principle.

These examples of suicide and child-rearing indicate the power and pervasiveness of culture. Hermeneutics offers tools that enable one to trace the interplay between cultural meanings and subjectivity. From a hermeneutic standpoint, selves are constituted through everyday activities and the meanings that are invested in those activities. The next section describes the hermeneutic view of self as embedded in and inseparable from culture. This is a view of self that differs considerably from that of conventional U.S. psychology. Insofar as the self is "an expression of culture" (Bruner, 1990), hermeneutics also provides tools to examine the interplay between cultural meanings and psychological theories, research, and practice.

A Hermeneutic View of Self

From a hermeneutic perspective, self and culture are inextricably linked. Indeed, selves are saturated with meanings based in the folk psychologies and moral visions of the surrounding culture. This is in sharp contrast to the individualist orientation that has dominated much of U.S. psychology, an orientation grounded in philosopher Rene Descartes' assertion that what is most fundamental to the self is the "I"—the *cogito* or thinking subject. The Cartesian "I" emphasizes the rational, conscious, and deliberative mind, which is sharply separable from the society and culture that surround it. Following Heidegger's lead (1927/1962), hermeneutic thinkers have challenged the Cartesian emphasis on the rational, conscious, and deliberative mind. In place of the "I" set apart from the world, Heidegger used the term *being-in-the-world* to argue that self and culture are inextricable—that human existence is

embedded in and constituted by social practices that are always already imbued with meaning.

Offering the example of a craftsman, Heidegger endeavored to describe being-in-the-world without invoking the usual Cartesian dualisms (e.g., self vs. object; self vs. other; thinking vs. feeling; mind vs. body). A craftsman, he observed, does not spend his day as an “I” that is fundamentally separate from the objects (e.g., tools, wood, and workshop) with which he is engaged. Instead, a craftsman works in a way in which his tools are an extension of himself. A hammer is not a separate object but something seamlessly connected to him in the way he works. At work, a craftsman is not rationally deliberative, nor does he perceive himself as detached from his work. Indeed, a craftsman regards a hammer as an “object” only if it breaks or no longer suits the task. Although a craftsman certainly is capable of thinking about his work in an abstract or deliberative mode, this is not his usual way of working. In Heidegger’s parlance, the craftsman is not “set over and against the world;” he is an engaged participant in a task given meaning by culture.

From a hermeneutic standpoint, much of what transpires in everyday life is best described as engaged practical activity, akin to that of the craftsman. Such activities are based on procedural knowledge that is typically pre-reflective and pre-conceptual. Although humans can develop some capacity to consciously define themselves and select their ways of living, this individual consciousness is only the tip of the iceberg. Humans come to know a world that is already imbued with value and meaning. In the U.S., for instance, middle-class parents routinely ask their children to indicate their own preferences regarding food, clothing, and toys; this culture-specific child-rearing practice inculcates a self that is marked by individuality. More generally, selves are already deeply formed by social practices and the cultural meanings and moral visions implicit in them before they develop the cognitive capacities to partially define themselves. In this way a hermeneutic account of how the self is formed is in contrast to the Cartesian view that people imbue the world with value and meanings that reflect their individual preferences. This hermeneutic view of the self is, in effect, the flip side of its view of culture. This is as it should be: For hermeneutic thinkers, self and culture are inseparable.

Individualism: A brief history—The Cartesian view of the self informs and inspires the individualist ideology that is core to the folk psychology and moral visions of present-day middle-class Americans. This ideology construes the self as separate from others, society, culture, and nature. In this construal, individuals are akin to atoms or billiard balls, in dynamic interaction but fundamentally independent (Bishop, 2007). U.S.-based psychology is permeated by individualism, as many observers have noted (e.g., Baumeister, 1987; Cushman, 1995; Richardson, Fowers & Guignon, 1999; Sampson, 1977).

Before we take up some ways that individualism inflects disciplinary thought as well as clinical practice, we set the stage by briefly describing the historical rise of individualism during the Renaissance, the Reformation, and the Enlightenment in Western Europe. In those eras, individualism served as an ideological resource that helped to emancipate people from the hierarchical, patriarchal, and authoritarian excesses of the Middle Ages (Macpherson, 1962; Taylor, 1989, 2007). Historically, individualism developed in parallel

with two related ideological shifts. One was the gradual rejection of the view that human life was part of an “enchanted,” purpose-laden universe or cosmos, for instance God’s plan (Lukes, 1973; Morris, 1987; Ullman, 1966). The emerging scientific view instead reduced the world to matter, which operated according to mechanistic natural laws. In the “disenchanted” scientific view, deeper purposes and meanings, including the intervention of supernatural powers, were rejected. The mature individual came to be seen as one who could create meanings rather than project worth and value onto the universe.

The second ideological shift—an outgrowth of the first—was a new way of imagining the self. Historically, most people have lived in “worlds of fate” with roles laid out for them before they were born (Berger, 1979). Identity was a matter of location in a social order: The son of a baker became a baker. In the Middle Ages, common people were believed to be lacking sufficient intelligence, faith, and courage to choose their own destinies or rule their own lives. They were expected to obey and trust religious, social, and political hierarchical orders. By recasting the individual as the possessor of his or her own being, Enlightenment philosophers helped to undermine such hierarchies and reduce their abuses of power (Macpherson, 1962).

As heirs to the legacy of individualism, people in the U.S. typically embrace a moral vision that places a high value on liberty, equality, autonomy, and privacy in both the political and personal domains. They esteem separation, individual expression, and differentiation as virtues (Kirschner, 1996; Lukes, 1973). Particularly if they belong to the middle class, they are urged to put aside received norms, values, and beliefs and instead “march to the beat of their own drum.” This is often deemed a quest for authenticity, and psychotherapists, counselors, and life coaches often assist clients in quests to determine what they as individuals want, need, believe, and value (Bellah, Madsen, Sullivan, Swidler, & Tipton, 1985). Maturity, in this view, involves being *self-defining*, that is, able to detach oneself from cultural binds and to choose who one will be and with whom one will associate (Taylor, 1989). For many, social groups are little more than arenas where self-contained individuals, who have already determined their interests, needs, desires, potentialities, and rights, express and act upon them. Without a social or cosmic order to define the good life, individuals are free to choose their beliefs, moral standards are no more than personal preferences, and well-being is no more than personal fulfillment or private gratification (Christopher, 1999; Christopher & Hickinbottom, 2008). It is not surprising that this moral vision downplays the import of culture.

Individualism in U.S. psychology—U.S. psychology, cut from the mold of a folk psychology of individualism, is likewise the heir to individualist ideology and a disregard for culture. U.S. psychologists are inclined toward what Geertz (1973) called stratigraphic models, which portray human existence as a series of concentric rings, much like an onion. Invariably, the innermost ring is biogenetic, with psychological, interpersonal, societal, and (finally) cultural domains successively layered onto it. Biopsychosocial models usually take this form. The implication is that the outer rings can be peeled off, leaving the core intact: The “bio” is the cake; the rest is frosting. Moreover, when culture is relegated to the outermost periphery of human experience, it is easy to disregard it. Indeed, stratigraphic models go hand in hand with a disciplinary division of labor that assigns the study of social

practices and structures to sociologists and the study of culture to anthropologists. Psychologists whose work crosses those boundaries (e.g., some feminist psychologists, critical race scholars, and proponents of indigenous psychology movements) are often subject to disciplinary policing (e.g., “That’s not psychology, it’s anthropology,” or “That’s politics, not psychology”). The disregard for culture is in contrast to a hermeneutic view in which culture inescapably and inextricably permeates human existence; it cannot be stripped away. Nothing in the social world or in what is mistakenly thought of as an inner self exists apart from culture. It is culture all the way down.

Contemporary therapies in the U.S. promulgate a moral vision steeped in individualist goals of self-reliance, autonomous choice, and self-realization. This moral vision shapes, *inter alia*, definitions of maturity, well-being, and mental health. Although this moral vision has long been criticized by feminists, critical theorists, multiculturalists, and others (e.g., Hare-Mustin & Marecek, 1986; Sampson, 1977; Sue & Sue, 1977), it remains in force among mainstream psychologists. Moreover, many U.S.-trained psychologists appear to be unaware that in many societies, the pursuit of self-defined desires, wants, and needs is neither a moral imperative nor a marker of mental health (Dueck, Ting, & Cutlioneo, 2007; Markus & Kitayama, 1991). Indeed, for most of the world (and throughout most of history), sources of meaning and visions of the good life are not a matter of purported “inner” dictates; rather, they come from external sources (Bellah et al., 1985; Taylor, 1989, 2007; Ullmann, 1966): harmonizing with extended family, kin networks, or society; obedience to or faith in a supreme being (as in Judeo-Christian-Islamic traditions); or aligning with the natural order of the cosmos (as in Taoism, Confucianism, Platonism, and many Native American traditions). In many traditions, the good or moral or religious life involves subordinating, dissolving, or transcending the self (as in Buddhist traditions), not amplifying it (Taylor, 2007). Perhaps it is not surprising that philosophical and religious thinkers often look askance at the humanistic strains of U.S. psychology; in their view, these versions of “humanism” excessively privilege the self (Levinas, 1961/1969; Marion, 1991).

Psychologists trained in mainstream U.S. psychology face a further obstacle to recognizing how culture shapes psychological knowledge and practice. Resting assured that rigorous scientific methods ensure objectivity and value neutrality, psychologists have paid little heed to the ways that their worldviews and moral visions influence theory development, research, practice, and therapeutic processes (Cushman, 1995; Danzinger, 1990; G. Richardson, 2010). Consequently, psychologists in the U.S. have devoted scant effort to developing the intellectual resources necessary to discern the impress of culture on the discipline.

Concluding Recommendations

Relegating culture to (or beyond) its margins has left three lacunae in U.S. psychology: First, whether in theories or in the extant knowledge base, little attention is given to the cultural grounding of human experience and social relations. Second, psychologists’ training does not provide them with the conceptual tools and research skills that would enable them to discern folk psychologies and moral visions that differ from their own. Third, because there is little acknowledgement (and sometimes adamant denial) that the discipline is grounded in the folk psychology and moral visions of a particular time and place, U.S.

psychology has only a limited set of self-knowing structures that would enable disciplinary reflexivity. Inspired by hermeneutic views of culture and self, we offer several recommendations to begin to address these gaps.

First, increasing globalization raises the need for psychologists to learn about other folk psychologies, worldviews, and moral visions. Every society has a folk psychology consisting of characteristic ways of construing development, personality, group relations, psychological disturbances, and so on. Gaining knowledge of other folk psychologies is far from easy; it requires disciplined ability, time, and reliance on interlocutors. Yet, such knowledge is a prerequisite for doing meaningful and effective work across cultural boundaries, as well as for avoiding harm, as the example of the Asian tsunami relief efforts illustrated.

Second, clinical and counseling psychologists need to cultivate critical cultural awareness in order to devise appropriate and acceptable psychological interventions that can be applied across international boundaries or across cultural boundaries in the U.S. Viewing psychological theories and practices in cultural and historical perspective can lead to awareness of how radically alien these may be for others and raise questions about their appropriateness. For instance, within the U.S., immigrants and members of ethnic minority groups use mental health services less than native-born Whites; they also have higher rates of early termination (Vasquez, 2007). No doubt many factors contribute to this disparity, but a clash of moral visions—often involving resistance to the individualistic orientation of mainstream psychotherapists—is one such factor (Christopher, 1996). Such an orientation may color therapists' views regarding pivotal issues such as familial obligations and loyalty, proper methods of childrearing, developmental milestones, conceptions of marriage; ideals of femininity and masculinity; ideals of honor and the necessity of protecting the family's reputation; and acceptance of psychic suffering as God's will or karmic retribution.

Critical cultural awareness goes far beyond multicultural sensitivity as it is often defined. Ideals of multicultural competence typically concern the actions of individual clinicians and demand only modest accommodations. ("Don't offer to shake hands with a Muslim woman.") At its worst, training in multicultural competence risks presenting little more than a Baedeker of ethnic stereotypes. In comparison, critical cultural awareness demands a consideration of the moral visions and ideas of personhood that underlie clinical interventions, along with the recognition that any psychotherapy – however tailored or adapted by an individual therapist – is a cultural artifact (Marecek, 2006; Wendt & Gone, 2012). As Kirmayer (2012) noted, the literature on evidence-based practice is "grounded in individualistic notions of the person" and the "categories used to identify problems, measure outcomes, and organize interventions may not fit specific cultures well" (p. 251).

Third, it is time to set aside the "rhetoric of objectivity" that pervades much of U.S. psychology (Dillon, as qtd. in Madigan, Johnson, & Linton, 1995, p. 433). Philosophers from many traditions concur with the hermeneutic position that cultural values and assumptions are present in *all* forms of knowledge production (Bernstein 1978; Bishop, 2007; Fleck, 1935/1979; Hacking, 1999; Taylor, 1989). Critical psychology movements in the UK, South Africa, Canada, India, the Nordic countries, and elsewhere have begun to

delineate how ideologies and folk psychologies shape all psychological theories. For too long, U.S. psychologists have dismissed non-Western psychologies out of hand as culture-bound. Once we acknowledge that U.S. psychology too is culture-bound, little justification remains for maintaining the firewall between “them” and “us.” By tearing down this firewall, U.S. psychologists can take a first step toward engaging respectfully with psychologies other than their own.

Fourth, beyond learning *about* other psychologies, psychologists need to be open to learning *from* them—that is, to re-assessing or even revising their own ways of thinking. The psychologies of Buddhism and Yoga, for instance, blur the sharp distinction that Western thought has drawn between religion and philosophy, on the one hand, and psychology, on the other. Moreover, other cultures may yield practices that have useful applications in clinical psychology and behavioral medicine in the U.S. Meditation and mindfulness-based practices are ready examples. Learning from other cultures involves being open to practices that may not involve professionalized services, credentialed clinicians, or medicalized or “health”-oriented frameworks (e.g., Csordas, 1997; Echo-Hawk et al. 2011; Gone & Calf Looking, 2011; Kakar, 1982).

Fifth, U.S. textbooks in many areas of psychology are rife with claims stated in universal terms that are in fact particular to the U.S. Those claims often presume that the organization of the life course, gender arrangements, societal and family structures, and value orientations are universally shared. Textbooks, of course, cannot document the full extent of cultural variation across the world; however, their accuracy would be substantially increased if writers acknowledged the cultural specificity of their evidence base. Such an acknowledgment would also foster students’ cultural awareness.

Sixth, interdisciplinary training is an important way to provide psychology students with a robust and sophisticated knowledge of culture. A genuinely liberal arts education provides conceptual tools to think about alternative systems of meanings, as well as the perspective to engage in disciplinary reflexivity regarding psychology. For instance, knowledge of other disciplines (e.g., anthropology, history, sociology, philosophy, and religious studies) can help situate the discipline of psychology historically and culturally. At the same time, these disciplines offer tools for research and conceptual analysis that reach beyond experimentation and quantification.

Seventh, psychologists who wish to study people in culture would do best to incorporate empirical methods that move outside traditional laboratory experiments and quantitative measures. As Geertz (1983) put it, the goal of research is to understand “what [people] perceive ‘with’—or by means of, or ‘through’” (p. 58). Such shared meanings and their import for subjectivity and social relations are best observed by “catching sight of [people] as [they] are engaged and preoccupied in everyday living” (Guignon, 1984, p. 232), as well as through trying to understand participants in their own terms. Qualitative research methods are particularly well suited for these kinds of inquiry, and also are more likely to be utilized in partnership with local communities. Qualitative methods that have been used or developed within a hermeneutic framework include ethnographic observation (Geertz, 1973), interpretive phenomenological analysis (Smith, Flowers, & Larkin, 2009), and a

family of methods developed by discursive psychologists (Magnusson & Marecek, 2012; Potter, 2012; Wetherell, 1998), among many others. In addition, contemporary qualitative inquiry in the social sciences has included “indigenous methodologies” that prioritize community control and participation in the research process (Kovach, 2009; Smith, 1999; Wiggins, Ostenson, & Wendt, 2012). The urgent need for critical cultural awareness among psychologists suggests the time is ripe for qualitative inquiry to have a much more prominent and visible role in U.S. psychology, alongside quantitative methods.

Eighth, we urge readers to realize that critical cultural awareness may be a demand in the near future rather than an optional add-on. Indigenous self-determination movements, which demand greater local control of research and health care services, are growing (McFarland, Gabriel, Bigelow, & Walker, 2006). In Canada, for example, First Nations have established institutional review boards that are likely to require researchers to share decision-making with the community and justify their goals, theoretical commitments, and procedures (cf. Canadian Institutes of Health Research, 2007); in the U.S., Tribal Nations and Native Hawaiians are beginning to do the same. As another example, the *Pondicherry Manifesto of Indian Psychology* (2002), drafted by three leading (Asian) Indian psychologists and signed by more than 150 others, excoriated Indian psychology as a “Western transplant, unable to connect with the Indian ethos and concurrent community conditions.” As a result, according to the *Manifesto*, Indian psychology had been unable to “play its necessary role in our national development.” Proponents of indigenous movements from other parts of the world too have objected to the Western values and assumptions that are imported with research and interventions (Alfred, 1999; Battiste, 2000; Smith, 1999). In short, although the utility, worth, and beneficence of their theories, models, and interventions may seem self-evident to U.S. psychologists, their presumptions may not be shared by those from different cultural backgrounds.

Ninth, regardless of the scientific and pragmatic issues involved, it is an ethical imperative to take seriously the perspective of the other (Christopher, 1996; Teo, 2010). Neglecting the moral visions of other peoples risks dehumanizing them or pathologizing them—treating them, to use Buber’s (1970) terms, as an “it” instead of a “thou.” As hermeneutic thinkers have pointed out, truly engaging with others requires a radical openness to them that can lead to a “fusion of horizons”—a melding of outlooks that transforms participants (Gadamer, 1960/1975, p. 358). Hermeneutic dialogue demands that we encounter others as if their ways of life, beliefs, and values are potentially on an equal footing with our own. Such a radical openness reaches far beyond multicultural competence, with its connotation of mastering a skill. It demands instead what Tervalon and Murray-Garcia (1998) have called *cultural humility* or, as Bullock (2011) put it, a “learning attitude, including reflection, humility, appreciation of privilege, and appreciation of cultural contexts and explanatory frameworks that stretch boundaries” (p. 9).

In conclusion, as U.S. psychologists and psychologies traverse international boundaries, it is imperative that they no longer imagine themselves to be value-free or capable of rising above culture. Science—whether in the form of methodological controls or evidence-based practice guidelines—cannot produce “pure” forms of knowledge unaffected by the knowers’ place in historical time and geographic space. Because global connectedness is projected to

increase dramatically in the foreseeable future, U.S. psychologists need to apprise themselves of the moral visions and folk psychologies that are embedded in their own assumptions, methods, and practices. Hermeneutic thought, along with the research methods it has inspired, provides tools for examining the ways that culture shapes human experience, and the ways that culture—in the form of folk psychologies and moral visions—shapes every psychology.

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