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How coloniality shapes the making of Latin American Psychologists: Ethnographic evidence from Ecuador

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7 **How coloniality shapes the making of Latin American Psychologists: Ethnographic**
8 **evidence from Ecuador**
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Abstract

This paper provides ethnographic evidence on how coloniality shapes the making of Latin American psychologists. A critical ethnography was conducted at a psychology training institution in Ecuador, consisting of twelve months of participant observation; forty-one semi-structured interviews; and analysis of academic discourse, photos, videos and relevant social media content. The research was guided by the tradition of Critical Psychology –specifically Liberation Psychology– and Critical Discourse Analysis. Findings suggest the pervasiveness of coloniality in the making of Ecuadorian psychologists and, hypothetically, of others in Latin America and the wider Global South. Interpretations also highlight the non-essentialist, non-dichotomist, ‘messy’ nature of such processes, a consideration which may advance current ethical and analytical debates on decolonisation. Echoing ongoing critical arguments, authors suggest that a ‘help-as-war’ metaphor is a category with potential value to contribute to such advancement, an approach that has important theoretical and pragmatic implications for researchers and practitioners.

Keywords: professional identity, psychology, global mental health, critical ethnography, critical discourse analysis, Latin America, Ecuador, Global South, colonial, metaphor

Introduction

The globalisation of hegemonic psychiatric and psychological knowledge can result in colonial cultural violence. This is a well-known idea within the community of critical psychiatrists (Bracken et al., 2012; Bracken, Giller, & Summerfield, 2016; Jadhav, 1995); and critical psychologists (Barrero, 2017; Parker, 2007; Pavón-Cuéllar, 2017; Teo, 2015), including those ascribed to the Latin American tradition of Liberation Psychology (Martín Baró, 1998). In fact, Liberation Psychology examines forces that oppress subjects, “many of which have their origins in histories of colonization and continue through global multinational and capitalist structures” (Moane, 2014:1079–1080). Arguments within Liberation Psychology are *relatively* consistent: epistemological and pragmatic resistance to the acritical regurgitation of globalised knowledge, and a desire to transform psychology into a field working with, and for, those oppressed by structural and cultural violence (Martín Baró, 1998). However, despite the existence of valuable armchair theorisation and reflexive accounts, there is a need for *evidence* in order to advance such agenda, including critically analysed “evidence that links the local to the global” (Fine, 2012:435).

This paper presents ethnographic data gathered at a psychology training institution in Ecuador. Data was gathered in the context of a more comprehensive ethnographic research which explored the local construction of professional identity from the perspective of Critical Psychology, with a focus on Liberation Psychology (Capella, 2019). Findings presented here relate to two research objectives of that project: providing ethnographic evidence on the diverse ways in which undergraduate and graduate psychology students construct and perform their professional identity, and propose potential analytical categories that could advance academic dialogues. When analysing the ethnographic data, authors addressed the following questions: Is the professional identity of local psychologists colonised? If so, in which ways? What analytical categories would help us to grasp the complexity such process?

Findings illustrate how the coloniality implied in the globalisation of psy knowledge from WEIRD (western, educated, industrialised, rich and, allegedly, democratic) nations into psychology training within the Global South is quite evident. Authors suggest that one of the ways through which such coloniality can be interpreted is

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3 through a ‘help-as-war’ metaphor. While findings support most critiques of
4 globalisation, they also suggest that armchair theorisations of the global versus the
5 local assume a deadlock. Evidence is needed to advance this discourse and reiterate
6 that “good ethnographic research can make a significant contribution to moving
7 beyond this impasse”(Jain & Orr, 2016, p. 688). Such evidence can potentially aid the
8 academic and ethical-political project of decolonising psy professions, this is, to
9 achieve some form of subversion of power asymmetries involving knowledge from the
10 Global North and the Global South (Martín Baró, 1998; Mills, 2013; Pillay, 2017;
11 Santos, 2014).

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20 Examining the link between the global and the local requires a conceptual clarification
21 of three interlinked concepts related to complex power relationships:
22 coloniality, psychologisation and psychologism. *Coloniality* refers to a historically-
23 rooted structural and cultural power derived from a colonial logic, which is pervasive
24 in contemporary human societies both in the Global North and the Global South
25 (Mignolo, 2017). It shapes what we should know and who we should be. In provocative
26 terms, Mignolo describes such logic as a ethnocentric western “virus” (2017:39), one
27 that can infect the minds and practice of psychologists, who may judge normality in
28 terms that disregard “its fit for local ecology” (Adams et al., 2017:14). This is
29 problematic if we accept the value of ecological approaches and intercultural respect
30 in the fields of psychiatry and psychology (Capella & Andrade, 2017; Jadhav, Jain,
31 Kannuri, Bayetti, & Barua, 2015). By *psychologisation*, we refer to processes “by
32 which psy-knowledge becomes dispersed and globalised” (Klein & Mills, 2017:1991),
33 even into “fields which are supposed not to belong to the traditional theoretical and
34 practical terrains of psychology” (de Vos, 2012:1). Finally, by *psychologism* we refer
35 to the way psychology can divert the focus from “oppressive structures” into “individual
36 and subjective factors” (Martín Baró, 1986:222).¹ These three core concepts are
37 examined in this paper, highlighting their analytical value, but also problematizing their
38 essentialist and dichotomist use.
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59 ¹ This and other quotes from Spanish sources had been translated by the first author.
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3 Processes that can be interpreted through these concepts have long reached the
4 Global South, including Latin America. For example, through a moral call by the Global
5 Mental Health Movement (GMH) to globally 'scale up' WEIRD knowledge (Patel,
6 2012). Such agenda relies upon an Evidence-Based Paradigm (EBP), which works on
7 the WEIRD assumption that the best evidence is quantitative and approached mainly
8 through the lens of orthodox epidemiology and clinical trials. While considering some
9 possible benefits for those suffering from mental illness in the Global South, many
10 critical scholars and practitioners have opposed the agenda of GMH, on
11 epistemological and ethical bases (e.g., Bracken et al., 2016). Ethnographic inquiries
12 associated with such critiques have illustrated the potential violence inherent to GMH
13 (Jadhav et al., 2015; Jain & Orr, 2016; Mills, 2013).

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23 Discourse is key to the expression, reproduction and contestation of coloniality, and
24 metaphors are a key part of discourse. Metaphors are powerful, they shape the way
25 people think, live, and experience suffering (Lakoff & Johnson, 2003). Understandably,
26 it is an area of interest for critical discourse analysts (Fairclough, 2013). One of the
27 ways coloniality may express itself is through a 'help-as-war' metaphor (Capella,
28 2019), this is, to provide help in a way that frames the recipient as a potential adversary
29 to be 'collapsed' for their 'own good' –changing parts of their culture; destroying their
30 defence mechanisms; and extracting a hidden "truth". This echoes the idea of violence
31 "in the name of progress" (Mills, 2013:68), and, as the evidence here will suggest,
32 leads to complex ethical and clinically relevant concerns.

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43 Suffering in Ecuador is shaped by its troubled past and its contemporary reality
44 (Capella, Jadhav, & Moncrieff, 2019; Cruza-Guet, Spokane, Leon-Andrade, & Borja,
45 2009). Most people (71.9%) categorise as *mestizos* ("mixed race"),
46 7.4% *montubios* (rural coastal people), 7.2% African-Ecuadorians, 7% indigenous and
47 6.1% white. The vast majority speak Spanish, and are religious (Catholicism, followed
48 by other Christian faiths). There is salient poverty, classism, racism and gendered
49 oppression. The globalised language of epidemiology frames 'mental' suffering,
50 primarily, as 'mood disorders' and 'substance abuse', while teenage pregnancy is also
51 a major problem (Ministerio de Salud Pública, 2014; Panamerican Health
52 Organization, 2012). The State faces these and other challenges with scarce
53 resources, while declaring its interest in providing intercultural and community-

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3 oriented care. Notably, the national constitution is anti-colonial, declaring to be
4 “against all forms of colonialism” (Const., 2008), to which extent such well-intended
5 ideals had been accomplished is still a matter of debate.
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11 **Methods**

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15 In the context of a critical ethnography on the professional identity of psychology
16 trainees in Ecuador, the first author conducted a 12-month period (2015-16) of
17 participant observation (Capella, 2019). Such technique was complemented with
18 semi-structured interviews with 41 subjects, the vast majority from low-income/middle-
19 income backgrounds (25 undergraduate psychology students; 6 graduate psychology
20 students; 5 teachers of the psychology programme, at the undergraduate level; 1
21 cleaning/maintenance staff at the psychology facility; 2 informal workers in campus; 2
22 recipients of pre-professional help in deprived areas). Analysis included academic
23 discourses, photographs, videos and social media content.
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31 The selection of participants was purposive and strategic, conducted through
32 snowballing, and based on fluid ecological interactions during fieldwork. The purpose
33 was to explore the construction of professional identity from the perspective of critical
34 psychology. Thus, the ethnographer privileged the selection of subjects who had key
35 inputs to offer (based on their roles in the field vis-a-vis the subject and critical
36 perspective of the research), and/or whose identities were disvalued by hegemonic
37 local ideology (e.g., based on place of residence, class, ethnicity and/or gender). As
38 the ethnographer attended diverse courses –mainly with one group of advanced
39 undergraduate psychology students (who also conducted pre-professional community
40 practice as part of training) and one group of graduate students (the majority of which
41 were also clinical practitioners)– he also collected data related to academic
42 discourses. For example, expressions used by teachers and trainees during class
43 sessions, but also in other locations within and outside campus, and the overall
44 approach and content of several of their textbooks and written reports. Findings
45 presented in this paper include only excerpts relevant specifically to the exploration of
46 the help-as-war metaphor, in relation to coloniality, psychologisation and
47 psychologism.
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3 Following Madison (2005), the study aspired to unpack unjust power asymmetries
4 “through the overt polemics of the researcher” (p. 6), understanding each participant
5 as an active subject, not an “artifact captured in the ethnographer’s monologue,
6 immobile and forever stagnant” (p. 10). Such polemics were salient during data
7 analyses, and much less so during most field work interactions which were driven by
8 efforts to retain an emic approach. The ethnography was conducted ‘at home’ (Dongen
9 & Fainzang, 1998), given that the first author is an Ecuadorian psychologist. The first
10 author selected a ‘strategic site’ –the training institution– from where he “followed”
11 participants into other spaces –e.g., sites for pre-professional practice (Marcus, 2009).
12 Data were considered from the standpoint of critical discourse analysis, with a focus
13 on domination and resistance. Discourse was analysed in relation to “extra-semiotic
14 elements in relevant practices, institutions and events” (Fairclough, 2013:226). A
15 social wrong was identified –associated with the potential cultural violence of dominant
16 psychology– analysing obstacles to address it, its role in sustaining the status quo,
17 and alternatives to transform it (Fairclough, 2013).
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30 As institutions of its type in Latin America, the strategic site has a turbulent political
31 past, including the influence of oppressive dictatorships during the cold war era, being
32 resisted by teachers and students (Capella & Andrade, 2017). WIERD psychology
33 began to be taught since the 1960/70s –in such political context– next to other
34 approaches associated with soviet and Cuban psychology. Since the 1980s, and for
35 over twenty years, neoliberalism became the dominant ideology. More recently (2007–
36 2017), the training institution was influenced by a national policy of ‘Good-Living’: a
37 focus on rights, equality and environmental sustainability (Asamblea Constituyente,
38 2008). Presently (from 2017), national policy has shifted again to the right of the
39 political spectrum, also influencing the strategic site. In practice, the examined training
40 programme had an eclectic and diverse approach. Despite the significant presence of
41 courses related to community psychology –including some teachings by Freire
42 (1970)– most textbooks and practices were in-tune with WEIRD psychology. Further
43 institutional details are omitted due to ethical considerations.
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55 While this paper has the main strength of contributing to international dialogues based
56 on critical ethnographic data, it also has some limitations. It does not present further
57 macro-sociological analyses, comparative ethnographic methods, nor extended
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3 discussions related to wider critical and community-focused literature. In addition,
4 other voices of subjects not formally associated with psychology are absent, and
5 require much further attention in future research.
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9 The role of *ethnographer* – gathering and analysing data - corresponded to the first
10 author, a male, *mestizo* Ecuadorian critical psychologist, with clinical and social
11 expertise, trained in Ecuador, Spain and the UK; he studied in the strategic site around
12 fifteen years ago, and currently works there as a lecturer and researcher. He did not
13 have a job association with the institution when the ethnography was conducted
14 (except for one month, towards the end of fieldwork). The second author (SJ) was the
15 primary supervisor of the research and contributed with analytical and stylistic inputs;
16 he is a male, Indian, cross-cultural psychiatrist with expertise in the UK and abroad.
17 Both authors share the view that the mental health field has an ethical imperative of
18 becoming more responsive to the experiences, culture and needs of the people,
19 especially those who had been marginalised the most, locally and globally. While
20 having particular positionalities, their own identity is related in different ways to a
21 “history of colonization and disenfranchisement” (Madison, 2005:9). In this sense,
22 findings are meant to be read as partial and situated (Martín Baró, 1998).
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34 Findings

35 Interpretations are presented under four interlinked sub-sections: ‘foreign things’ and
36 ‘third-world thinking’; the WEIRD and the local; psychologism; and help-as-war.
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40 *‘Foreign things’ and ‘third-world thinking’*

41 Training included decontextualized WEIRD knowledge, uncritically evoked vis-à-vis
42 local culture: “we have many foreign things, but little of our own”, said a student in
43 class. In the words of an interviewed student: “we Ecuadorians have a low self-
44 esteem”. What is “foreign” was quite valued: “they [foreign psychologists] are, like,
45 they study more and are more advanced. In contrast, we don’t”, said a different
46 interviewed trainee. A graduate student –who worked in a deprived urban area– said
47 during her interview:
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55 “There is not an Ecuadorian psychology. There is not much research here in our
56 country, I think. Obviously, what we read comes from abroad. From other countries,
57 other places. But, the difficult issue is to try to apply the theories we read to our setting,
58 our social reality. Many things change then”.
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3 Examples of the value given to what is 'foreign' were many. In class, a teacher
4 legitimised a Spanish instrument to screen gendered violence, essentially because it
5 was based on 'the European system'. Knowledge emerging from the World Health
6 Organization (WHO) was visible at academic fairs, open houses, and classroom
7 content commemorating 'official days' (e.g.: gender-violence day; substance abuse
8 day, etc.). A teacher told the class about an upcoming "community intervention": it's
9 "very simple", this is "a WHO model" and "you will apply this model".

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16 Time constraints, a managerial approach, and lack of reflexivity seemed to lead to
17 'simple' actions and ad-hoc use of foreign 'instruments'. There were a few minor
18 exceptions during fieldwork, usually in the context of private conversations with the
19 ethnographer. For example, a student questioned the cultural validity of a
20 questionnaire poorly translated from English; and a teacher –after the ethnographer
21 suggested the theme by the end of field work– said that the content of a recent local
22 course promoted by the WHO and the European Union was "too gringo" (i.e., culturally
23 unfamiliar).

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31 A different type of discourse was explicit about valuing what is foreign and disvaluing
32 what was framed as local "third-world thinking". For example, the same lecturer who
33 prescribed the "simple" WHO instrument, in confidence, expressed to the
34 ethnographer some worries: Europeans "see us like Indians", as, unlike us, Europe
35 and USA have the "best universities". The teacher feared that the ethnography would
36 expose the flaws of local training. A different lecturer, during her interview, critiqued
37 local "patriotic" views: "This is third-world thinking. And because of that we continue
38 `developing`, and never cease to `develop`". A similar idea was held by a third teacher
39 –usually in private, but occasionally in class– at different times during field work:

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"I am Ecuadorian and everything, but the books written by Latin American authors are
too superficial and sometimes badly written"; in contrast, there are "more developed
countries", "more important countries" than Ecuador; science is written in English "due
to scientific reasons"; "neither Ecuador nor Latin America have made important
contributions to clinical psychology", as there is a local "scientific and professional
underdevelopment"; thus, "it is pointless that we aspire to impose a (locally designed)
format internationally"

Coloniality, and –apparently– marginal and non-conscious resistance to it, were interpreted in
these and other local discourses.

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6 *The WEIRD and the local: “No pure diagnoses”*
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8 Literature utilised in the training programme was diverse, and illustrated hybridity
9 across hegemonic and non-hegemonic sources. However, coloniality was easily
10 interpreted, as most textbooks included WEIRD content, which most teachers and
11 students considered the gold standard to be framed as knowledgeable. This included
12 content from the USA and Spain; ICD; DSM; Gordon Allport’s work on
13 personality; Diane Papalia’s work on orthodox developmental psychology; systemic
14 theory regarding family (e.g., Minuchin, Satir), among many others. The teaching of
15 history was also illustrative of coloniality. The ethnographer failed to find a student who
16 was knowledgeable on the nuanced and complex –many times, violent– history of
17 psychology. Instead, the myth of Wundt’s laboratory, and seminal figures (e.g., Freud,
18 etc.) took over the dominant narrative. When the ethnographer asked a black student
19 why she was not taught about social Darwinism or theories by any African-descendant
20 or indigenous psychologist, she said: “they don’t teach us that”. She thought it should
21 not be taught, as it would potentially lead to racist comments and jokes among the
22 student body.
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35 Two examples of WEIRD literature were salient to the ethnographer. The first, a
36 compilation of instruments for evaluation and diagnosis, mostly WEIRD tests. The
37 second, a book on ‘abnormal psychology’ originally edited in the USA (translated as
38 ‘Clinical Psychology’, with a biomedical and cognitive orientation), with ‘cases’
39 that were not always congruent with most local problems experienced by the majority
40 of Latin Americans (e.g., the suffering of USA war veterans, sexual pathologies such
41 as vaginismus, a troubled son of a wealthy banker, a teenager suffering due to acne,
42 etc.). The two WEIRD books had covers that used metaphors of the mind as a puzzle
43 or lock, and of psychologists as experts (e.g., male, white scientists in white coats)
44 who held the key to solving the enigma (e.g. through tests, psychiatric diagnoses,
45 and/or psychotherapy).
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55 In contrast, there was another type of literature, less common, which seemed to orbit
56 towards different forms of resistance. Particularly –but not exclusively– the
57 literature utilised in courses associated with community psychology, popular education
58 or human rights. Soviet cultural psychology (e.g., Vigotsky) was a major influence at
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3 the institution since the late 1990s, although its teaching –with some exceptions– was
4 not especially salient at the time of the ethnography. One radical example of non-
5 WEIRD literature was a political book entitled Writings for the 21st century youth (with
6 a picture of “Che” Guevara on the cover). Apparently no longer in use –but utilised for
7 several years before the ethnography– this artefact embodied the effervescent left-
8 wing political past of this particular institution, and the Latin American tradition of a
9 Marxist psychology. Even in courses with a very salient biomedical and cognitive
10 approach, relatively subtle forms of resistance could be interpreted. For example, a
11 lecturer teaching one of such courses said in class: “not all the criteria of the DSM-5
12 can fit the condition of the individual”; in some cases, “there is no pure diagnosis”. As
13 for explicit critiques to WEIRD theories, only once, in private, a senior lecturer –aware
14 of the ethnographer’s interest– complained that developmental psychology taught
15 locally was not predicated on indigenous experiences.
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26 Some students said they did not have enough time to read, or displayed little interest
27 in reflexive reading. This frequently resulted in some of them citing authors, but not
28 engaging with their ideas. This was the case, for example, with a book widely utilised
29 in community-related courses. It included Freire’s views regarding liberation
30 and respectful intercultural dialogue, but this seemed incongruent with the way
31 students –and teachers– were discussing and applying such ideas. Moreover, the
32 book cover depicted a group of smiling, white, blonde young people, which contrasted
33 with the non-whiteness of the local majority. The subjects on this cover actually
34 look like foreign “gringos”, as a student said when called to attend to the incongruence
35 embodied in the artefact. Again, coloniality seemed present, even domesticating and
36 instrumentalising critical Latin American authors.
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46 Literature and artefacts explicitly linked with GMH and EBP were *not* salient during the
47 ethnography. There were only two exceptions. The first, a lecture by a Spanish
48 psychologist, who invited the audience to rely on “scientific evidence” and offer
49 patients treatment that had “shown to be effective”. The second, a psychiatrist from an
50 external institution, who mentioned –at a different training programme– how EBP was
51 not based on outcomes of clinical trials with large samples, but about doing “whatever
52 works for a specific patient” (thus, evoking a meaning that is contrary to the
53 international use of the term). These –as those previously mentioned– can be
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3 interpreted as relative subaltern expressions of resistance, despite the fact that the
4 local cultural landscape seemed fertile for “foreign things” that would help Ecuadorians
5 overcome alleged “third world thinking”.
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9 *Psychologism: “Everything is up to oneself”*
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11 Psychologism was prevalent in the interpretations derived from the ethnography. One
12 example refers to the idea that poverty is an individual problem. The ethnographer
13 heard this on several occasions inside the training facility, usually during informal
14 chats, sometimes said by low-income students. Poor people, some discourses
15 highlighted, “do not aspire more”, have a “mediocrity in their thinking”, lack “motivation”
16 and a “desire to progress”, or are “conformist”. In the words of a low-income student:
17 “poverty does not exist. What exists is the delusion of poverty” (i.e., a belief of being
18 poor). A different low-income student said during her interview, when discussing
19 substance abuse in deprived settings: “Honestly, I don’t believe [the cause] is poverty”;
20 “I believe that lack of culture, the lack of self-esteem, that is what is causing the use
21 of these substances. Lack of coping [skills] regarding problems”. They finalised the
22 interview with these spontaneous and revealing views:
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33 “everything is up to oneself, (and) the decisions we make. And that is what we do
34 when we do psychology: to remind our patients - the subject - what values, which
35 [individual] structures can he have in his temperament, in his character, to help him
36 improve”
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39 As said by a bright student in class, psychology seemed to be about findings “variables
40 that are *inside the individual*”. This applied to many situations, including placing
41 violence and addiction inside the individual, rarely addressing the political and
42 economic system that shapes suffering. As put in class by the same cognitively
43 oriented lecturer who rejected “pure diagnoses”, “the environment” is important;
44 however, this:
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50 “does not imply that the psychologist will improve the environment”; instead, “it is the
51 subject’s perspective which will be modified”.
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55 There were only a few relative exceptions of resistance to psychologism. For example,
56 a psychologist-postgraduate student during an external training activity, highlighted
57 that mothers’ failure to guide their teenage daughters may result in unwanted
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3 pregnancy, but that work demands –and time constrains– placed on those mothers
4 also played a role. A lecturer shared a similar idea in class in one occasion, and a low-
5 income interviewed student said that work demands can make it difficult for parents to
6 “take care of children” properly, resulting in kids increasing their chances to joining
7 “gangs” or do “drugs. A different psychologist-postgraduate student told the
8 ethnographer during her interview, that people living in deprived areas – she had worked
9 with many of them– experience life as if “they live in a dark tunnel, and further ahead there
10 is only more darkness”. A low-income student living in one of such places, confirmed
11 during an interview that such settings can “depress you” and “make you feel bad”.
12 Despite these subtle, relative and marginal forms of cultural resistance, psychologism
13 seemed to prevail.
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23 *Help-as-war: The “weapons” of Psychology*

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26 “So, in all places: the psychologist. In all social areas they need a
27 psychologist” (Psychologist, high-rank Faculty manager, during a formal
28 ceremony).
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30 As illustrated by the preceding quote, there seemed to be a dominant institutional
31 ideology which justified psychologisation; even if those being “helped” by psychology
32 did not request it or even resist it. The ethnographer interpreted this as a *help-as-war*
33 metaphor. Such metaphor will be unpacked in the following paragraph, through
34 verbatim expressions stated by students and teachers during fieldwork.
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40 Driven by altruism, powerful psychologists use certain “weapons” against “service
41 users”. The aim is to destroy “resistances”, make subjects “collapse”, “force them” to
42 reveal information which is “extracted” in order to unveil “the truth”, and/or to persuade
43 them to “change” for “their own good”. “Weapons” are used in diverse ways, requiring
44 various “communicational skills”. For example, children’s distress can be
45 instrumentalised to lead carers into accepting their parenting mistakes. As in a violent
46 “boxing match”, psychologists can make a “head-to-toe screening” for diagnosis. As a
47 spy, psychologists can bond –“by any means” necessary– with a child to extract data
48 about her mother (a child in this position was referred to as “the secret weapon” by
49 one student). They can act like “friends” with patients, or being more dominant with
50 them, keeping “control” of the session (“techniques as to not let myself be put down”,
51 as put by an experienced therapist lecturing a course). Beneficiaries of help (“patients”,
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3 “service users” or “clients”) are also antagonists to be proven wrong; as expressed by
4 a meme shared by a student on social media: “Psychology is the only business where
5 the client is never right”. A practicing psychologist said that in order to help patients to
6 “develop”, professionals need to generate in them a “type of crisis”. Those not
7 accepting psychology’s help, need to be somehow forced to do so, “for their own
8 good”, so they can “develop” by taking them out of their various deficits. If there is any
9 disrespect for their subjectivity, needs or culture, this is just a mere casualty of the
10 war.
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18 On a few occasions, the ethnographer heard an institutional rhetoric praising and
19 prescribing intercultural respect. This is, to respectfully consider subjects’ language,
20 gender, ethnicity and daily schedule. However, this well-intended discourse only
21 occasionally translated into practice. In fact, the opposite seemed to be the unwritten
22 norm.
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27 Most teachers and trainees seemed to share a narrow concept of “culture”,
28 considering some cultures “lower” than others. For example, there were at least a few
29 trainees from rural and/or low-income backgrounds who stated that their own
30 communities were “ignorant” and lacked “psychological culture”. A different example
31 was that of a teacher who praised intercultural respect, but also demanded their
32 students to “get”, “extract”, and “capture” data from subjects, even if the later refuse to
33 “collaborate”. The teacher, good intentions notwithstanding, once said in class that
34 “the community” would be grateful for whatever “psycho-social” help that is provided:
35 “for them, everything is good”, and they will overlook any “mistakes”, as lay people are
36 not familiar with “academic indicators”. A different example highlights the “higher”
37 place of WEIRD biomedical culture. As put by a clinical teacher, referring to ICD10
38 and DSM5 diagnoses: despite the existence of “cultural variability”, it is “not so serious
39 as to invalidate diagnoses and treatment”, thus, there exists “certain universality in the
40 disorders”. The same teacher, on a different occasion, echoed this idea by saying that
41 a hypothetical indigenous patient (from the USA) who reported “sadness”, really had
42 “depression”, but was either unwilling to “express it” or unable to “identify it”. On a
43 health-related course, another teacher asked students to delete the only item about
44 respondents’ ethnicity from an ad-hoc questionnaire. His reasoning illustrated how
45 notions of cultural identity were superficially approached:
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3 “Let’s erase that item, please. Because we are not making a study about the
4 characteristics of the different ethnicities”.

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6 By “erasing” cultural identity of its technology, dominant local psychology embodied
7 the universalism inherent in most orthodox WEIRD biomedical epistemologies.
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10 Certain “instruments” were utilised as necessary “weapons”. Most of these were
11 “foreign things” –especially from Spain and the USA– used with no discussion on their
12 validity, including their cultural and psychopolitical validity. For example, a teacher
13 once referred to the “D-48” intelligence test in class as a “culture free test”, because
14 solving its numerical progressions –presented through domino chips– required no
15 “vocabulary”. Obviously, an instrument like the D-48, which “measured” a construct
16 like “intelligence”, created in a British military context from the 1940s, and influenced
17 by eugenic and positivist ideas, was not “culture free” (Domino, 1968).
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25 The ethnographer interpreted that most local instruments were shaped by, and
26 shapers of ‘help-as-war’. The same seemed to occur with a sort of *meta-instrument*:
27 that of thinking through WEIRD theories which exclude non-logical dimensions of
28 professional selves. For example, a post-graduate student shared in class how, in the
29 past, and as part of an academic assignment, she tried to ignore her rational
30 assumptions when seeing a patient, and open up to her own “feelings” instead. The
31 psychologist said to the classroom: “I don’t know what failed, when I first started to
32 apply it, I felt I became, like, *unarmed* as a psychologist”.
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40 The influence of coloniality in the meta-instrument of thinking about subjectivity
41 included a major implication: help-as-war shaped the way most teachers and trainees
42 understood “education” and “psychoeducation”. Two examples illustrate this, referring
43 to health and community-oriented courses respectively.
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48 **Example 1**

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51 On the rare occasions when non-professional healing cultures were mentioned on a
52 health-oriented course, it was usually to reinforce its “lower” status. The teacher stated
53 in class that professionals should be familiar with “curanderos” (local folk healers), not
54 as equals, but in order to, instrumentally, “understand the idiocracy of the people”, and
55 be associated with some of the “trust” people had in them. Assuming that non-
56 professional healing was irrational, the lecturer argued –relying on reason, “science”
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3 and psychiatric diagnoses– that “we must question many things from popular
4 knowledge”. For instance, he argued that new-borns “suffer less” with C-sections
5 compared to less “scientific” indigenous birth giving practices. Teacher and students
6 once laughed at the possibility that folk rituals could be effective to treat experiences
7 of mental illness. Answers during interviews seemed to reflect this view. A student, for
8 example, said that if a patient held folk beliefs, she would explain that there “is no
9 significant basis to believe in that”. In other cases, students would tolerate such beliefs,
10 as long as they do not interpret them as doing harm, or as a threat to their professional
11 power. As put by a different student: folk healing is “respect-worthy”, but “is wrong
12 when it interferes with the role of the psychologist”. Psychoeducation –as health
13 promotion and prevention, and as part of therapy– is supposed to change “lower”, non-
14 professional beliefs.

25 **Example 2**

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27 The second example of psychoeducation interpreted as help-as-war, was that of a
28 two-module community-oriented course, with a theoretical and a practical component
29 (the later taking place through NGOs, in urban neighbourhoods considered
30 “vulnerable”). While the course included some content based on the Latin American
31 critical tradition (e.g., intercultural respect), it also seemed influenced by WEIRD
32 knowledge (e.g., orthodox epidemiology, the “WHO model”, a language of
33 “psychosocial” professional “intervention”, “empowerment”, “risks” and “vulnerability”).
34 During a small informal lunch with trainees held in one such location, before the first
35 “practical” session, the ethnographer asked what was the goal of such intervention. A
36 student replied, with certain resignation and cynicism: “they [teachers] want us to make
37 them [community members] unlearn what they have learnt in their culture”. Another
38 student echoed such a view when she was interviewed by the ethnographer, stating
39 that a psychologist “is the only one who can, through ‘psychoeducation’, teach and
40 help individuals to change perceptions, and those wrong structures, those wrong
41 beliefs that we have”. Note the use of “we”, which highlights how coloniality was
42 probably influencing the way she thought of her own –allegedly “lower” and “wrong”
43 culture. In this sense, help-as-war was also against herself, and allegedly for her
44 benefit. Paperwork and instrumentalisation were pervasive during the course. As put
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3 by a student, joking during an informal chat, such activities would turn trainees into
4 “PhDs in sociodemographic questionnaires”.
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8 Lecturers at the health and community-oriented courses both expressed ideas in class
9 that echoed help-as-war. For example, the health lecturer, said that psychoeducation
10 was also an opportunity to “promote psychology itself”. The promotion occurred even
11 if people resisted the WEIRD healing culture of psychology. The community lecturer –
12 who had taught in class about some community members as people with “low cultural
13 level”– sometimes seemed more worried about students completing a set number of
14 “cases”, than about social change. On one occasion, a student reported that some
15 “cases” had not attended a particular “talk” because of their work schedules: “we tell
16 them they have to come, and they just have to come”, said the trainer, with a firm
17 voice, reinforcing professional power. Psychoeducation, even that of “community
18 psychology”, was in place to help people “unlearn” parts of their culture for their own
19 good, even if they did not want to.
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30 Help-as-war was quite influential during the “practical” component of the community-
31 oriented course. Most of the subjects in a community “visited” by students were
32 working class women with busy schedules, which included paid and unpaid (i.e.,
33 domestic) labour. Most would “collaborate”, accept being interviewed and answered
34 socioeconomic and psychosocial questionnaires. In some cases, this meant asking
35 permission from their bosses to skip a day’s work. An absolute minority of the women
36 would not “collaborate”. One of them said to a trainee, who waited at her doorstep: “I
37 do not want you to come in, because you are going to take away my time”. This was
38 interpreted through psychologism during supervision: the woman was said to be
39 “hostile” because of “shame” and “fear” of talking about her problems. The student
40 expressed at the supervision session: “I feel like I am *forcing* her”, “It was
41 awkward”. Most teachers and students, especially when they did not find any explicit
42 “resistance” from people, did not seem troubled by this relationship of “help”, one that
43 may have deeper implications than those perceived by local performers.
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57 **Discussion**

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Coloniality –and a lack of reflexivity regarding its working– can certainly be interpreted from the evidence presented here, sometimes in very explicit ways. Such evidence supports many international critiques in the fields of psychiatry and psychology (Barrero, 2017; Bracken, Giller, & Summerfield, 2016; Bracken et al., 2012; Callaghan, 2014; Jadhav, 1995; Parker, 2015; Pavón Cuellar, 2017; Teo, 2015). Moreover, coloniality seems to shape the way “community psychology” is locally taught. Thus, it domesticates the critical Latin American tradition, which becomes “formalised and incorporated into conservative ‘community psychology’” (Parker, 2007:164). These expressions of coloniality can be interpreted as a type of war “in the name of progress” (Mills, 2013:68), which finds little or no criticism by the very agents who –usually inadvertently– embody it. Well-intended psychologists may well collude with this cultural violence, but probably view themselves as benevolent altruists.

It may also be the case that some of the culturally violent practices observed in Ecuador were not the result, mainly, of WEIRD psychological theories shaping rhetoric and practice *per se*, but of institutional lack of funding in the Global South, specially, in institutions funded by the State. Better funding enhances the prospects of improving the technical and ethical qualification of teachers, and enable access to international databases which include both hegemonic and critical literature, among other forms of necessary capital to gain cognitive democracy (Santos, 2014). Existing asymmetries in this sense can also be interpreted as a form of coloniality. As put by Pavón Cuellar (2017), the wealth available in the Global North has been gathered, partially, at “our expense” (p.21), by taking resources that Latin America could have used to improve funding for education and health, among other human rights.

Findings suggests coloniality is not best analysed as a purist and dichotomist matter. For example, the international trend of GMH and EBP seemed rather absent at the strategic site, although –giving the influence of DSM and ICD frameworks– these may permeate the local landscape in the future. No less important, many local professionals may accept there is no “pure diagnoses”, and some cultural resistance is present, even if it seems to be relative, possibly marginal, and frequently non-conscious. As subjects become psychologists, they dwell in an acceptance-resistance continuum regarding coloniality –the first being the choice by default (Prilleltensky & Stead, 2012). Sometimes, they may hybridise aspects of both poles. A discursive and

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3 analytical device such as help-as-war may aid the task of complementing and deepen
4 armchair theorisation with ideographic research on subject-bound and context-bound
5 construction of specific professional identities.
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9 As with any help and any war, coloniality, its metaphors, and ways of resisting it, are
10 subject to ethical and analytical debates. We suggest that framing coloniality as a
11 “virus” (Mignolo, 2017), is probably unfruitful, unless we assume that viruses operate
12 in complex ways, and also include potential vaccines. This may open up new analytical
13 pathways, and overcome dichotomist categorisations of entire settings, institutions
14 and subjects as absolute agents of either coloniality or decolonisation. A similar
15 approach may be relevant for debates regarding radical politics and intercultural
16 respect. Martín Baró (1998) critiqued certain “extremist postures regarding academic
17 training that in no way make a change possible” (p.147). He also suggested that
18 updating theory can be necessary: as “other information is acquired, some estimations
19 are modified” (Martín Baró, 1990, p. VI). Evoking this idea is *not* meant to
20 decontextualize his critical vein, nor is it a call to neglect psychopolitical validity
21 (Prilleltensky, 2008), or to turn away from ‘macro’ structures (Ratner, 2015) or even
22 ‘radical politics’ (Parker, 2007). Instead, it is an invitation to epistemological humility,
23 and to consider diverse ways to analyse and pursue social change (Campbell, 2013).
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36 Many Latin American voices have called for decolonisation (e.g., Mignolo, 2017). In
37 the case of Ecuador, its constitution is explicitly anti-colonial, yet it seemed to have
38 failed to decolonise its knowledge production in a radical sense. This speaks, again,
39 of the complexity of the help-as-war metaphor, and the role of the colonial matrix of
40 power. Powerful institutional structures sustaining the status quo make
41 decolonisation a remarkably difficult process (Dudgeon, Bray, Costa, & Walker, 2017).
42 Thus, many professionals avoid a serious engagement with it, and simply mention
43 “decolonisation” as an empty “evocative and provocative term” (Pillay, 2017:136). In
44 the context of the ethnography reported here, such concepts were not explicitly evoked
45 by participants.
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54 It seems that, mostly, teachers and students in such Ecuadorian institution –as,
55 hypothetically, others in the Global South– seem to be thinking and performing through
56 the influence of the help-as-war metaphor, non-consciously and with scant criticism.
57 Contributing to something close to liberation, and decolonisation, may benefit from
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3 enhancing group consciousness (Freire, 1970), with the possibility of utilising the help-
4 as-war metaphor itself as a re-signified strategy for resistance, if specific groups of
5 psychologists in each particular setting decide to do so. Given the complexity and
6 open-ended nature of the ethnographic evidence presented here, this is expected to
7 enable constructive dialogues and actions, both globally and locally.
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13 We agree with a pragmatic approach to the decolonisation of society in general, and
14 the decolonisation of psychiatry and psychology in particular. This implies accepting
15 “enabling contradictions” (Santos, 2014): North-South and South-South dialogues
16 which may include integrating diverse –sometimes contradictory– theories and
17 practices with the goal of achieving social and cognitive justice. In order to do this, we
18 may need to embrace “messy pragmatics” (Pillay, 2017:139), avoid the idealisation of
19 “precolonial realities” (Teo, 2015:249), and take seriously the difficulty of any type of
20 liberating decolonial project in spaces for psychology (e.g., Carolissen et al., 2017),
21 and other professionals related to mental health. By doing so, we may “amplify short-
22 term resistances and do things differently”, including a critical scrutiny of higher
23 education structures and processes (Pillay, 2017:136-137). In fact, such an approach
24 is key, if we agree with the rather provocative view that any university can operate as
25 a “postcolonial fortress” (Pillay, 2017:139). In order to advance such a project, there
26 is an urgent need for more situated evidence that allows the emergence of new
27 analytical pathways.
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42 **Conclusion**

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44 Relying on ethnographic data, the authors of this paper interpret the salient presence
45 of coloniality in the field of Latin American psychology. Such coloniality manifests itself
46 in diverse ways, including the training of Ecuadorian psychologists and, hypothetically,
47 of other professionals concerned with mental health in Latin America and the wider
48 Global South. While facing this major challenge, findings also highlight how coloniality
49 involves complex, non-essentialist, non-binary, subject-bound and context-bound
50 processes shaped by power. Thus, echoing existing arguments, the metaphor of help-
51 as-war is proposed as a discursive and analytical tool to address such complexity.
52 Critical theory is vital to unpack cultural processes related to psychiatry and
53 psychology, in Latin America, and elsewhere. While acknowledging this, findings also
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3 underline the value of situated evidence –with sufficient cultural and psychopolitical
4 validity– as a means to address analytical and ethical deadlocks derived from purist
5 armchair theorisation. Such a project may contribute to a pragmatic approach to
6 decolonisation and related processes of liberation, while accepting a diversity of
7 analyses and practical actions with potential for advancing the construction of global
8 and local cognitive justice.
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17
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30 Details on the reported data have been anonymised due to ethical requirement. The
31 authors alone are responsible for the content and writing of the paper This research
32 was approved by UCL Research Ethics Committee and by the local training institution
33 where the ethnography was conducted.
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