

hear a play on words: that only by stooping down low and bringing our faces to the ground in devotion can we correct our hubristic stance of domination over nature. The dream demonstrates that matter *can* be enlivened with spirit, and made to hum.

A dream I had in 1981 stated the core of the problem we are grappling with today: how to restore the living connection between spirit and matter, which has been ruptured. This dream was very unusual, being in words, as if some *deus ex machina* had spoken from on high:

"During this period of history, the task is that spirit once again enter matter."

I realize that I can help with this task in my consulting room.

At the time, I was still practicing as a psychotherapist, and I was concerned about whether it was necessary to be physically in the wilderness in order to find healing for our flawed attitude toward nature, or if a resonant level of "wildness" and "nature" could be reached within the psyche.¹⁰ This dream affirms that deep psychotherapy can restore a living connection between spirit and matter.

A human lifetime is limited and we won't be able to witness the outcome of many current global problems. It can be hard to not know how things will turn out, and still do what we can. To reduce one's busyness, set aside manic denial, and emotionally face the death processes under way; to rest and renew oneself in order to sturdily withstand the collective mania—these tasks ask much of us. If we can also bow low and touch the spirit in matter to set it humming, that would be a blessing. Our natural dreaming mind may help us with these vital transformative tasks.

Creating Restorative Ecotherapeutic Practices

Mary Watkins

The work done by psychologist Mary Watkins—in session, in the world, in writing, and in academia—has consistently questioned mainstream psychology's implicit severance of the personal from the ecological and the political. In this essay she challenges therapy practitioners to move beyond such compartmentalizing into new communal experiments designed to foster transformative imagining of new ways to live.

As we practice psychotherapy, we accrue experiences that do not conform to what we have been taught to expect. At times, these experiences conflict with normative understandings within the helping professions. At other times, there is simply no acknowledgment of what we are experiencing, in the literature or in our supervisory consultations with one another. Thus there is no place to reflect together on these divergent or unarticulated experiences. Yet it is these experiences that can help us to further evolve the paradigms that ground our therapeutic and restorative efforts.

Olav Eikeland, an action researcher of organizational learning, describes a "counter-public sphere" as a place where experiences of "tensions and contradictions within 'paradigms,' 'discourse formation' or 'local traditions,' between ways of thinking, speaking, and doing, and external requirements and restrictions in people's lived professional and private lives can be disclosed, uncensored, discussed and developed. A counter-public

sphere is a forum for dialogical and experiential *learning* and *research* within organizations and professions."¹ This book is an example of creating such a counter-public sphere, holding open a space to voice our divergent experiences and misgivings, to question our theories, and to risk suggesting improvisational practices in lieu of established ones.

Such space is too rare within the helping professions. Too many conferences, books, and training programs present therapeutic theory and practice as accepted knowledge issuing from a firmly established field. To gain societal and academic credibility, therapists have been quick to present themselves with this self-assured persona. As students we are too often taught to learn the content of our field as though it were fully determined and no longer in need of the kind of radical questioning from which it originally issued, and from which it must creatively continue to evolve. When its practices and theories prove inadequate to the clinical situations we find ourselves in, we are encouraged to think of the shortfall as resulting from our own inadequacy as individual practitioners. Once we identify with this sense of inadequacy, we silence our experience of the gaps between what we know and what is required of the situation we are witnessing. We unconsciously feel that to speak of them would be to expose our own insufficiency.

When colleagues risk speaking their misgivings and propose new lenses for interpretation and innovative practices for healing, they are often censured and dismissed, in both formal and informal ways. The history of psychoanalysis is filled with such examples. Wilhelm Reich, a psychoanalyst in Freud's early circle in Vienna, died in an American penitentiary, though his work spawned much of the therapeutic bodywork that is done today. Karen Horney was shunned by her psychoanalytic association, even as her books interpreting personal symptoms in the light of culture were devoured by millions of thoughtful Americans. Psychoanalyst Harry Stack Sullivan died in financial ruin, partly as a result of his stepping outside the clinic to consider the psychodynamics of racism and militarism.² Liberation psychologist Ignacio Martín-Baró, clear on the connection between psychological suffering and social oppression, was assassinated by U.S. government-backed paramilitary in El Salvador.³ Many who are less well known suffer exclusion for voicing their doubts and critiques of ideas and practices that have become orthodoxies. Yet,

without such voicing, our experiences cannot give rise to new insight and practice.⁴ Those working in the evolving field of ecotherapy are discerning where psychotherapeutic theory and practice are themselves reflective of a severing of person and place that is not conducive to psychological or ecological well-being.

Medicine Stories for Ecopsychological Healing

How each of us ends up working with certain psychological difficulties and within the contours of particular theories and methods arises from personal stories—stories that are largely and oddly detached from how and what most mental health professionals publicly speak and write about. It is in the context of these life stories, however, that our gravitation toward certain problems, ideas, and methods begins to make sense. And it is through the sharing of such stories that others can consider their own experiences, from which they can learn, critique, and create psychological understandings and approaches to healing.

As a discipline we are in need of what historian-activist Aurora Levins Morales calls "medicine stories."⁵ These are not the official stories we construct about the people whose lives we share through psychotherapy, those terse and often pathologizing narratives we learn to construct for insurance companies, hospitals, clinics, orthodox publications, and training supervisors. The symptom's disruption is described, the necessity for treatment established, the arsenal of approved procedures is invoked and plotted on a time line dictated by the insurance company's desires for profit. The skeleton of a heroic narrative breathes through the short phrases that promise cure through professional expertise.

No. Medicine stories are the kind of stories that bring into conversation those aspects of our history, practices, and thought that are most often formally and even informally disallowed. Without them we cannot adequately understand the suffering we witness or creatively pursue our vocation as therapists, those who care for the soul. So, for example, in the case of psychoanalyst Melanie Klein, it would not be only her case histories of working with children. A medicine story would be Mrs. Klein sharing with us why she turned to psychoanalytically treating her own son; what it was like as a mother worrying about and trying to make sense of her son's phobias and anxieties. What was her experience of

being a female analyst in training and advised by her male mentor to turn toward the provision of psychological care for children? A medicine story might have been written by Karen Horney as she reached the end of her life and the limits of psychoanalysis and began to study Buddhism. In the last year of his life Harold Guntrip, chronicler of object relations theory, gave us the gift of a medicine story, finally sharing his own struggles with a schizoid condition and his search for help in his analyses with Donald Winnicott and W. R. D. Fairbairn.⁶

Such medicine stories represent a largely missing genre in the mental health professions that would connect our theorizing with our life experiences, situating our ideas and practices. Psychotherapeutic theorizing needs to engage in a continuous process of "cultural activism," interrogating the ideas its theories advocate, and wondering aloud if there are other stories available or imaginable that would be more conducive to the creation of greater psychological understanding, healing, and well-being. Medicine stories could contribute to cultural activism, to working more consciously with the cultural ideas imbedded in our thoughts.⁷ The telling of medicine stories could help us to question official stories and histories, asking fundamental and important questions such as, What causes our psychological suffering? What are its roots? How can it be witnessed, and, when possible and desirable, mitigated against?

Here I offer a few medicine stories, drawn from my experience and that of others.

They helped open my awareness to the connective tissue between psyche and the natural and built worlds and to the need to understand this connection in our theories of human development and in our provision of therapy. I believe the importance of psyche-place relations to psychological and community well-being, once it is understood, will point many of us to restorative ecopsychological work that exceeds the individual and family therapy that is our usual daily fare. I offer some examples to quicken our imagination of the possibilities of such work.

The More-Than-Human Home and Family

As I was studying psychotherapy in the early 1970s I was also nursing myself through a depression, a precipitous drop into the underworld. Turning to Jungian and archetypal psychologies, I spent my last dimes

on Jungian analysis, recorded my dreams religiously, and hosted imaginal figures in active imagination. Studying at the Jung Institute in Zurich, I found myself walking on centuries-old cobbled streets and in patches of forest that meandered through urban areas, connecting to the surrounding countryside. On many days I encountered only two choices: lie down and submit to my gathering uncertainties or open the door of my rented room and start to wander.

I walked for miles, heartened and kept alive by the small, unexpected, and holy things that offered themselves to me: a luminescent red geranium blooming against a peeling dark blue door frame; a golden retriever deciding to run away from home with me for the afternoon, as attentive as an afternoon lover. Mountain runoff near where I lived gathered in a babbling brook just about the width of my body. I would sit beside it and imagine lying down in it, refreshed by the thought of water running over my naked body. On warm days I would lie down on the earth and imagine roots growing from my body into the dark and moist earth below me. I spent a great part of that year walking and wandering, lying down and imagining. Although I brought up my forays in analysis, they were not discussed or deemed important.

One night I suggested to my friends, also training to be analysts, that I thought I should divert my meager financial resources from analysis and live in the mountains for a while instead. I had a deep intuition that I would fare better psychically if I were to submit to the rhythms of nature, a simpler daily life, and the stark beauty of the surrounds. My friends chided me, convinced themselves that analysis would be far superior to a temporary move to the mountains. I noticed a critical disdain in their rejection of my idea, as though I did not yet sufficiently understand the importance of analysis. I continued on in the prescribed rituals of Jungian analysis. Half a year later, my analyst killed himself.

Thirty years later, I am still sustained by opening the front door, and feeling the width and depth of the world come to surround me. Stepping outside I slip away from the confining and tiresome bubble of self-importance that separates us from what enfolds and holds us, the Earth. Beginning to walk, I find my place within a larger whole. To this day I draw comfort from even imagining being cradled in the heart of a mountain or by actually lying down on the earth, and sensing the subtle and

permeable membrane between my body and the soil beneath me. The sounds of water, the rhythm of the ocean, retune my being, and sweep away the dross.

Euro-American psychotherapeutic practices have largely left out the relational web among person, community, and natural and built environments. In the 1970s I found only one psychology book that addressed the importance of the “nonhuman” environment in relation to psychological suffering and healing: Harold Searles’s *The Nonhuman Environment in Normal Development and in Schizophrenia*.⁸ Although few therapists seemed to have read it, I loved Searles because he was willing to break psychoanalytic protocol and admit his own fantasies and shortcomings, dissolving a false division between his “patients” and himself. He drew my attention to the importance of the nonhuman in human development. During this period, I met Teresa and Jonathan.

Teresa arrived in therapy with a misdiagnosis of schizophrenia. She suffered a rare combination of neuropsychological maladies, making work impossible, day-to-day relationships challenging, and the stigma of difference crushing. How had she survived as a child? In time she confided that her rightful parents were the trees and flowering bushes that she had discovered outside the walls of her home, a house that brewed parental depression and child neglect. Teresa was strikingly sane, generous, and good hearted in the face of pervasive neurological compromises. Twenty-five years later she could recount the contour and characteristics of each tree she had been sheltered by, the kinds of flowers that had graced her unfolding sense of beauty.

One day she was in a crisis, and she came to her appointment at my house. I had just heard that my father had had an accident that was taking his life, and unfortunately I had to leave a note on the door canceling our appointment as I rushed to the airport. Having read the note, and finding herself unexpectedly bereft of my presence during a difficult period, she hid under a bush next to my front door for several hours, gathering herself in the face of my unexpected absence.

Jonathan is a man whose way of being in the world drew my own attention to the natural world. He too struggled with psychiatric stigma (a diagnosis of Asperger’s syndrome), employment difficulties, and loneliness wrought by the toll of personal eccentricity. One day in my office

he noted a wood duck sitting in the high branches of a tree an eighth of a mile away. I would never have noticed this bird. He had a great affinity with birds and worked as a volunteer counting their dwindling numbers, documenting a corner of the devastating loss of bird population that has become common throughout the world today.

I did not “cure” Teresa or Jonathan—or even offer much insight that they had not already figured out on their own given their keen intelligences. However, I do think it was important that I grasped and acknowledged that the plant and animal worlds were a source of primary attachment, a significant contributor to their resilience in the face of great difficulties and disappointments in human life, and a wellspring of faith in beauty and goodness.

After years of training in clinic and hospital cubicle offices, stuffed with dirty toys and partially dismembered plastic human figures, I began to work in a single-room cottage surrounded by woods and a lake. The children I saw felt more free than the adults to “make use” of this setting, eager to depart from my “office” to the woods. Both seven-year-old Henry and nine-year-old Anne were struggling with recent traumatic sexual intrusions and emotional betrayals by relatives. Their sense of bodily integrity, and trust of humans had been duly shaken. Connection with their embodied selves was tentative and fragile, fraught with disturbing thorns of traumatic remembrance.

Henry would run down to the sagging dock at the foot of the hill, crush fish-shaped crackers, and sprinkle them over the water. Commanding us to lie down on our tummies in the sun, he led us in quietly watching the fish nibble at the golden shards. Here in this more timeless sphere outside the dangerous arena of the home, held by the wider and less personal embrace of trees and sky, he would describe to me his worries about his body and about the people he had been entrusted to. There is no way to separate the healing of these conversations from the spacious sense of time that opened up as we watched the slow drag of snails across the sandy bottom of the lake or from the rhythm of the lake’s water that seemed to ease the tension in Henry’s young face and body as he unburdened himself.

For Anne, play therapy involved stories of an abused horse searching for a free and protected place, requiring her to hide and pretend to sleep beneath bushes and small trees. At the edges of our play together, she

intently planned the garden she wanted us to plant. She had us salvage seaweed on the lakeshore with the tips of slender oak branches, placing it outside the door of my study so the ground would become an increasingly fertile place for our seeds.

Collective Trauma and Person-Place Relations

In the situations described above, all the individuals had access to natural places that offered beauty and solitude, albeit places disrupted in their own right. But what of those who have no such access? Whose attachment to the natural and built environments has failed to develop or has been radically disrupted? What of those whose attachment has been primarily negative due to harsh or even toxic environmental conditions? In these cases life attempts to proceed without the benefit of the environment as a holding and sustaining force, without an undergirding sense of intimacy with the abiding presence of particular places. The loss of place cuts fundamentally into our experience of the continuity of life. Places hold the people important to us, the activities dear to us, and the larger cultural web of which we are a part.

In the 1980s psychiatric epidemiologists began to understand psychologically distress in the light of collective trauma, helping us to gradually perceive the magnitude of socioeconomic and political conditions that contribute to psychological suffering. Epidemiological studies revealed the impact of certain cultural pathologies on the increased incidence of psychopathology: poverty, the effects of Western capitalism on "Third World" countries and vast sections of "First World" countries, urbanization, population mobility, family fragmentation, poor and inadequate housing and education, gender inequities, racism, homophobia, torture, rapid social change and social disintegration, war, genocide, forced migration, unemployment, failures of social and community support.⁹ Environmentally related causes of psychological distress include ever-shrinking green spaces and dwindling animal populations and species, forced migration and loss of neighborhoods and homelands, sprawling urbanization without adequate centers for connectivity, rising prices for rapidly depleting basic resources like water, oil, and grain, the multiplying of toxic environments, the pairing of poor neighborhoods with environmental pollution of all kinds, and the over-

arching threat of ecological and human demise through nuclear warfare and global climate change.

To integrate this vast and overwhelming array of global issues as a clinician requires crossing boundaries between disciplinary understandings and arenas of practice. During this period I met a psychiatrist working in Chelsea—at the time a poor, white, working-class community attached to Boston by the longest bridge in New England, the Mystic-Tobin Bridge. Matthew Dumont headed the community mental health center in Chelsea.¹⁰ Over a period of years he and his staff noticed a soaring number of families seeking treatment for their children with attention and learning difficulties. Blood testing revealed epidemic lead poisoning. Lead is a neurotoxin that causes cognitive difficulties in the domains of attention, executive function, visuospatial/visual motor functioning, auditory processing, perceptual integration, and short-term memory. Dumont realized that as the government sanded the Mystic-Tobin Bridge in preparation for repainting, lead paint filings were falling on schools and playgrounds, vegetable gardens, and hundreds of back porches, poisoning children and adults.

While one could refer children for lead testing, treat them for lead poisoning, and work with parents and teachers on how to parent and educate children whose cognitive processes have been catastrophically affected, the problem remained that the Massport transportation agency *continued* to blast lead paint off the Tobin Bridge, adding more children to the rosters for treatment. Following the children's symptoms to their root cause led Dumont out of the consulting room, through the clinic doors, to meetings with the community, public meetings with Massport, and continued advocacy for responsible environmental stewardship. Dumont did exactly what depth psychology teaches you to do. He had followed the symptoms, in this case hyperactivity and poor learning of the children. This following slowly but surely placed him and other protesters in the way of sandblasters on the Tobin Bridge, eventually terminating the spread of lead onto the community below.

More recently, psychiatrist Mindy Fullilove also followed symptoms out the door of her clinic into research conversations and archives across America, helping her understand the vast destruction of African American neighborhoods during the period of "urban renewal" in American cities

that took place from 1949 to 1973. Fullilove was attentive to the spatial aspects of trauma as she listened to community members. Apprenticing herself to people like David Jenkins, who spent the first eleven years of his life in the Philadelphia neighborhood of Elmwood, she became aware of how we compensate for life's difficulties through the web of human and other-than-human relationships that neighborhoods provide.

Vicious scapegoating in his family, and sexual abuse outside the family left David's sense of intimacy twisted and stunted. By contrast, the unrestrained love within the tight circle of the neighborhood gave him a sense of optimism that has never deserted him. The enormous endowment of love he received from the neighborhood—"everyone tried to give me as much love as they could"—did not undo the curse put on him by his dysfunctional family. But it did create a buffer that prevented the abuse from becoming the entirety of his world. This buffer did give him reason to live while he healed as best he could.¹¹

Many years later David Jenkins could still point out on a map of his neighborhood where home cooking was to be found, where the roses grew that he took to his teachers, the nearby marshland that was home to the turtles and other animals he admired, and where particular people lived who sustained him on his daily path. Jenkins's neighborhood was seized for urban "renewal" and destroyed, causing the destruction of the places he visited, dispersing across Philadelphia those who had loved him, and utterly disrupting the nodes of gathering so important to cultural preservation, particularly of a people once enslaved, and multiply displaced.

Fullilove walked the area with Jenkins to learn more about the multitude of his losses, as well as those of many others across the United States in similar situations of displacement. She pieced together the systematic destruction of 2,500 neighborhoods in 993 American cities during the period of urban renewal, 80 percent of which were neighborhoods of color. Her work, *Root Shock: How Tearing Up City Neighborhoods Hurts America, and What We Can Do about It*, is a testament to all that is lost when people are required to disperse:

Root shock, at the level of the individual, is a profound emotional upheaval that destroys the working model of the world that had existed in the individual's head. Root shock undermines trust, increases

anxiety about letting loved ones out of one's sight, destabilizes relationships, destroys social, emotional, and financial resources, and increases the risk for every kind of stress-related disease, from depression to heart attack. . . .

Root shock, at the level of the local community, be it neighborhood or something else, ruptures bonds, dispersing people to all the directions of the compass. Even if they manage to regroup, they are not sure what to do with one other. People who were near are too far, and people who were far are too near.¹²

If one group wants to weaken another group's community and culture, a sure tactic is to remove it from its land or poison its natural resources. This evil recipe is being followed on every continent. Whether it is paramilitary groups spraying Agent Orange on indigenous communities and their land in Chiapas, Mexico, to force their eviction from resource-rich areas or the burning of houses and stores of opposing ethnic groups in the United States,¹³ El Salvador, Rwanda, or Kenya, the cumulative result is a planet where over 21 million people are formally designated as refugees. Countless millions more are on the move in a struggle to secure basic survival and human rights for themselves and their families.

When one community or culture is devalued by another, environmental risks taken for the sake of profit can create devastating environmental and social consequences, such as Dow Chemical's actions in Bhopal, India, Texaco's dumping of 18.5 billion gallons of wastewater in the Ecuadorian rainforest causing illness and destruction of the water supply, or irresponsible dumping of industrial toxins by *maquiladoras*, manufacturing plants created in the wake of NAFTA.

If we follow the symptoms we are working with most directly in ourselves and others, we too might need to cross the threshold of the consulting room, as well as the disciplinary and paradigmatic boundaries we often work within. What seemingly unlikely situations would we be placed in, as psychotherapists who are true to what we are coming to understand causes the psychological suffering we are witnessing?

From Separate Selves to Interdependence

Might not the Earth itself call out to us? In the *Duino Elegies* the poet Rainer Maria Rilke says that the Earth has need of us, that it requires us.¹⁴ Some years ago, I was working as a long-term individual psychotherapist, using

object relations, Jungian and archetypal ideas and practices. To my surprise and horror I found myself being called by the nuclear peril we have created. Unbidden scenarios of nuclear holocaust bled through my nightly dreams into my daily consciousness, leading me to attend to this dilemma in ways I would not have anticipated. My nightmares were insistent and resistant to being interpreted on only a personal level. As I began to acknowledge my awareness of the vulnerability of our situation and of the horrific nature of our stockpiled weapons, I came to understand psychiatrist and psychohistorian Robert Jay Lifton's concept of "psychic numbing."¹⁵

We are each aware of much that is tragic and highly problematic in the world. We live a double life: one part of us is aware, while another part of us lives without reference to this awareness. For instance, we may know that greed and the inequalities it breeds in health, longevity, housing, safety, and psychological well-being lead to violence, and even to genocide and war. Yet this radical acknowledgment may not alter the day-to-day decisions we make regarding our own material consumption. When we live such a divided existence, our emotional life, as well as the clarity of our thinking, is numbed, dulled. In exchange for a measure of illusory protection, we sacrifice the integration of our insight with our actions and the emotional vibrancy that spawns.

Hosting small and large groups, I began to explore how people live out this kind of double consciousness and psychic numbing, opening a space in which people could express their thoughts about this and have their choices and actions supported. While I continued to suffer from my response to nuclear peril, each of the people I worked with had his or her own call from the world, his or her own area of sensitivity, to what has been called the *anima mundi*.¹⁶ These calls from the world disrupted the pattern of passive acceptance of the difficult situations we live in. Through activities of witness and restoration it became clear that encouraging people to pursue insight about what is wrong yields in time to prophetic visions of what is deeply desired. Acting to bridge the present reality with the desired possibilities of the future, the therapist may well find herself working on other fronts in addition to individual or family psychotherapy.

During this time, however, I was struck by the absence from psychotherapy sessions of almost every concern, troubling thought, and deep desire that was voiced in the context of this group work. Noting this ab-

sence, I began to study how I might be contributing to it. As a client expressed her concerns at the beginning of a session, which ones did I ask questions about and attentively pursue? Which did I allegedly "give space to"—but "space" lacking the engagement that fuels further exploration? Given my psychoanalytic and developmental training, it should not be surprising that conversations about mothers brought forth animated questioning from me. Yet my responses to topics brought forth such as inadequate schooling, absence of health care, anger at the elections, or fears of environmental were limited. I had been taught to withhold any comment on things considered political: to question them as resistance, as efforts to turn attention away from intimate, private, familial concerns. But how had "intimate" and "private" been constructed? While I was aware that my intimate, private thoughts had become suffused with the cultural, the environmental, and the public, I had not yet learned a way to help my patients travel between the private and public, the personal and cultural.

Slowly I began to see that psychotherapy as an institution was an expression of the dominant cultural paradigm of the self: individualism. This form of self entails increasing separation from others, nature, and community. It believes it enjoys its own locus of control, and sees its triumphs as achievements deserved by virtue of its own merits. Its failures are interpreted as the result of personal inadequacy or dysfunction in early family life.

If we start from a different paradigm of the self, an interdependent paradigm, what are the implications for how and what we witness, mend, and heal?¹⁷ What if we imagine that each of us is not a bounded self, but what Edward Sampson calls an "enssembled self" or what Arne Naess calls an "ecological self"?¹⁸ What if our interior ecology, the voices we negotiate in thought, reflects the multiplicities of the wider world? What if in addition to internalizing the multiple voices of other people, we also find within us the echoes of wind in the leaves of trees, the sleeping habits of animals curled next to each other, and the thoughtless pollution of water? What if trying to effect our own development without regard for the development of our neighbors and the places we share, as well as those half a world away, is a dangerous illusion, providing a temporary sense of control while ultimately imperiling us?

An interdependent paradigm of the self opens us to a deeper and wider understanding of the cultural and ecological context of our psychological disarray and suffering. In addition to changing the way we work with individuals and families, it challenges us to work in community to change the systems that create psychological suffering. A psychiatrist's struggle with a Massport decision about lead paint on an urban bridge, or another's research on urban renewal policy and the systematic destruction of neighborhoods of color in the United States, or a psychologist's addressing the psychic residue of nuclear weapons need to be included under the umbrella of therapeutic action. Crossing interdisciplinary boundaries and modes of practice, such work is recrafting our understanding of the psychological and the therapeutic.

Practicing Creative Restoration

For the past decade I have been working with psychology graduate students who are keenly aware of the psychological suffering arising from environmental problems. Their work is opening our imagination about the forms such restorative work could take in the future. These students are released from formal clinical requirements in order to pursue a greater understanding of human well-being in the contexts of culture and the environment. As they learn depth-psychological theory, ecopsychology, and psychologies of liberation, they study their own experience and that of others to discern the roots of suffering in their own communities. Unbound by traditional therapeutic practices and free to cross disciplinary boundaries and levels of organization, they work to gain a more complex and multilayered analysis of the issue. From that understanding they can begin to improvise practices through which they and others can witness and mend.¹⁹ I will give a few examples.

Mending or reimagining person/place relations: Deborah MacWilliams, unexpectedly overwhelmed at midlife by grief at the desecration of places, began to meet with others in Bend, Oregon, to study their relationship to specific places, to express their place-based grief, and to begin to mend the mind-set and practices that wipe away what is wild and beautiful in our world. Jayria Ward has created a retreat preserve where people can interact with elders familiar with indigenous person-place relational practices,

relearning how to be attentive to the natural world.²⁰ Matt Cochran has placed himself at the U.S./Mexico border, where wildlife and people suffer from the imposition of fences and walls. Joining others around the world, he is attempting to create a transboundary wildland conservation area that testifies to a different way of being neighbors in our world together.

Exploring the effects of place on psyche: Craig Chalquist made a pilgrimage throughout California, visiting each of the original Spanish missions and studying the effects of the early history of California conquest on the psyche of contemporary Californians. Elizabeth Perluss studied the relationships between people and the landforms of island, valley, mountain, and desert, and the symbolic universe spawned by each. Addi Brooks explored the effect of desolate places on the psyche.²¹

Advocating for the preservation of places: Laura Mitchell, in love with the valley she lives in, apprenticed herself to the creek bed, the dwindling creatures, the fauna, and earth and rock formations. As a result of her careful attention, her advocacy for the place deepened, causing her to participate with local groups that were debating and determining the fate of the land. Tim LaSalle worked with environmental activists to better understand human ecocidal tendencies.²²

Learning to listen to place: In her fieldwork Rosmarie Bogner extended her practice of listening to landscapes (part of her professional work as a consultant to architects) to carefully listen to the buildings and architecture of Ketchum, Idaho. Such listening formed the basis of her attempt to harmonize human dwelling with the surrounding ecosystems. She meditated on buildings, spending time with them, taking pictures of them. She found herself in reverie with these structures, listening to their sense of being crazily juxtaposed to surrounding buildings, inquiring into history. This kind of listening, where noticing joins forces with reverie, was necessary before she could undertake meaningful consultation on the architectural planning process in her town.²³ Others have apprenticed themselves to community gardens, Zen gardens, atomic waste, the Golden Gate Bridge, and particular neighborhoods, in efforts to learn how to listen to and restore intentional human connection with particular places.

Memorializing loss of place and studying its psychological effects on people, animals, and communities: Marcy De Veaux is studying the great migration of African Americans from the South to the North, attentive to the double loss of places in their history, of Africa and the Deep South. Paola Irias noticed the absence of conversation in her and others' families who had immigrated in the midst of Central American wars. She explored the loss of place and community through oral history with elders in her Nicaraguan immigrant community. Isabel Bradshaw, studying elephant communities, used human-trauma theory to understand the effects of loss of habitat on animal communities.²⁴

Creating dialogical practices regarding the fate of places: Paul Jones, an urban planner in Flagstaff, Arizona, realized how few people in the community were actually involved in the planning processes of Flagstaff.²⁵ Who was being left out? How did those who were marginalized experience their town? What dreams did they have for it? He engaged in unfamiliar conversations and experiences, understanding Flagstaff from points of view that he had never considered in his earlier years as a planner.

Witnessing the pain of conflicting claims to particular places: Aviva Joseph worked with the Israeli Committee Against House Demolition, compassionately witnessing the destruction of Palestinian houses in East Jerusalem and working to rebuild homes. An Israeli herself, she had never before been to East Jerusalem. For the first time she heard directly from Palestinians about the tragic disruption of their relationship to place, community, and history.

Each of us by virtue of our individual histories and sufferings is aware of particular environmental issues in our community and in the larger world. If we make the effort, we can locate their psychic effects. Like the Greek goddess Ariadne, our task is to follow the strings that connect these intimate effects past the door to the consulting room and into the related realms of community action; local, national, and global policy making; environmental education; and healing of person/place relations.

Such critical practices constitute both individual and cultural therapeutics,²⁶ returning psychology to a practice that belongs on the margins

of culture, questioning its norms, and imagining alternatives. Such a practice does not fit neatly into an unquestioning use of the DSM (*Diagnostic and Statistical Manual of Mental Disorders*). It cannot rest in the persona of the expert. It cannot provide simplistic pat answers to the questionnaires created by managed care. It cannot always contain itself within the fifty-minute hour, or within suburban offices. It is not on easy footing with the status quo when the status quo arrangements create psychological and environmental suffering. Thus it is not a path that is always financially secure. Its practice of insight and its integration of insight and action may serve to undermine its professional stature, even putting itself out of business. At some junctures, we will need to learn new skills appropriate to our evolving understanding of what ails us. We may find ourselves outside of the role definitions to which we are accustomed as we honestly respond to the suffering that we witness. This may range from planting a small garden with a girl who desperately wants to see something grow in the wake of being sexually abused, to being politically active to restore land that has been polluted in the wake of human greed.

The critical practice of psychotherapy is a moral adventure that takes us past what we have been taught, releasing us from the confines of what Mary Belenky and her colleagues call "received knowing."²⁷ It asks of us that we be engaged in constructed knowing, aware that we can create with ideas, question them, play with them, see who they serve, and advocate for the values we hold dear as we are involved in therapeutic thinking and practice. Critical practice throws open the windows and doors of the consulting room. Whether we choose to come and go into the larger community or remain in the chair we hold dear, it allows us to more clearly see and hear how culture, ecology, and psyche interpenetrate each other, opening our eyes to understand the wider interconnections of which we are a part.

These are large shifts but they start from small, often persistent inner voices, voices of doubt, misgiving, and discomfort about a clinical practice, an interpretive move or behavioral prescription that is too easy, a misreading of dynamics. We can build our practice on top of the quicksand of these misgivings, or we can turn to face them, allowing them to provide the energy for our critical explorations and our creative improvisations regarding theories and the practices of healing. If we do so, I

believe we can align ourselves with the kind of "revolt" that Julia Kristeva says is at the heart of psychoanalysis: one that continuously questions, probes appearances, and moves past established confines.²⁸



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5 ECOSPIRITUALITY AND ECOTHERAPY

IN OUR TIME OF RELIGIOUS INTOLERANCE AND EXTREME POLARIZATION, IT IS easy to forget that the creations of nature remain potent expressions of the sacred, and that the first temples were to be found outdoors. Some would say that Earth itself is a vast temple where, with faithful practice, humans can regain spiritual grounding and come home to a world ensouled.

Mary Gomes writes about ways we can appropriately mourn when other species who inhabit this temple with us perish in what scientists refer to as an ongoing mass extinction. By contrast, Joanna Macy and Malidoma Somé explore the profound shift in identification that takes place when we extend our limited sense of self to encompass the things and beings of the natural world we depend on. Ralph Metzner enlists shamanic methods of healing and ritual in this expansion of the human spirit, and Stephen Aizenstat invokes and unfolds the ancient understanding of dreams as emanations of the soul of the world. According to K. Lauren de Boer, all such practices offer hope for the creation of a new collective story that locates the source of our own healing, and of regenerating our bonds with the Earth community, in the living world itself. 