

The Role of Power in Wellness, Oppression, and Liberation: The Promise of Psychopolitical Validity

Isaac Prilleltensky

Vanderbilt University

In Press: Journal of Community Psychology

I wish to acknowledge the contributions of Geoff Nelson to the ideas expressed in this paper. Correspondence should be sent to Isaac Prilleltensky, Department of Human and Organizational Development, Peabody College, Vanderbilt University, Nashville, TN, 37203.

The Role of Power in Wellness, Oppression, and Liberation: The Promise of Psychopolitical Validity

Abstract

The power to promote wellness, resist oppression and foster liberation is grounded in psychological and political dynamics. Hitherto, these two sources of power have been treated in isolation, both for descriptive and prescriptive purposes. As a result, we lack an integrative theory that explains the role of power in promoting human welfare and preventing suffering, and we lack a framework for combining psychological and political power for the purpose of social change. The paper puts forth a psychopolitical conceptualization of power, wellness, oppression, and liberation. Furthermore, it introduces the concept of psychopolitical validity, which is designed to help community psychologists to put power issues at the forefront of research and action. Two types of psychopolitical validity are introduced: Type I: Epistemic, and Type II: Transformative. Whereas the former demands that psychological and political power be incorporated into community psychology studies; the latter requires that interventions move beyond ameliorative efforts and towards structural change.

The Role of Power in Wellness, Oppression, and Liberation:

The Promise of Psychopolitical Validity

Power is pivotal in attaining wellness, in promoting liberation, and in resisting oppression. Contrary to fragmentary disciplinary discourses, power is never political *or* psychological; it is always both. The same goes for wellness, liberation, and oppression; they are never political *or* psychological; they are always both. In this paper I discuss the dual political and psychological identity of power and its ubiquitous role in shaping wellness, oppression and liberation. Moreover, I offer the concept of psychopolitical validity in order to further our understanding of power issues into research and action.

However logical the integration between psychology and politics might seem, its translation into practice is ridden with challenges. This paper identifies these challenges and offers viable alternatives towards a synthesis of two complementary intellectual traditions dealing with power and well-being.

Power

Power and interests affect our human experience, our understanding of it, our definition of it, and our attempts to change it (Parker, 1999; Sloan, 2000). Discussing power in an interview, Foucault (1997) made the point that,

In human relationships, whether they involve verbal communication such as we are engaged in at this moment, or amorous, institutional, or economic relationships, power is always present: I mean a relationship in which one person tries to control the conduct of the other. So I am speaking of relations that exist at different levels, in different forms; these power relations are mobile, they can be modified, they are not fixed once and for all. (Foucault, 1997, pp. 291-292)

Unlike traditional research, in which power is regarded as a variable existing "out there," affecting the behavior of the people we study or treat, I contend that power suffuses our very own actions as psychologists. We use our power to study power! Furthermore, we sometimes use our power to define power in such a way that we are not affected by it! This is not a words game. When we read histories of psychology we find countless examples of psychologists' declaration of independence from power (Herman, 1995). They usually come in the form of claims to objectivity and value-neutrality, announcing that psychologists study people "out there" in a manner that is not affected by their own interests and power. Were they to admit their own vested interests, their legitimacy as healers and scientists would be in jeopardy. No need to rush towards conspiracy theories however, for many of us were not even aware that power would be so pervasive and invisible at the same time. Power impregnated the very ways we thought about power, psychology, and human predicaments (Henriques, Hollway, Urwin, Venn, & Walkerdine, 1984). It obviously still does. Power operates in subtle ways because it is usually hidden under a mantle of neutrality of larger discourses about science, truth and justice (Lyotard, 1984).

When caught in the web of power, we should not run away from it. It is important to understand how our own power and subjectivity influence what we do and feel and study (Walkerdine, 1997). But our objective in this exercise should not be to develop a new cadre of removed experts on power, but rather to use these insights in the pursuit of wellness and liberation.

Once we accept that power and interests affect what we do, we reject the premise that interventions are not affected by politics, and that we just serve an uncontested higher ethical purpose. The outcome of this realization is a doubting attitude towards the social goals of our activities as psychologists (Rose, 1985, 2000). We just can't take it for granted that psychology pursues human welfare in a manner that is always just and fair. Psychologists have contributed, directly and indirectly, wittingly and unwittingly, to oppressive domestic and foreign policies. In her 1995 book *The Romance of American Psychology* Ellen Herman documents the involvement of psychologists in formulating ignominious policies. Although malevolent intent cannot necessarily be ascribed, psychologists helped to shape racist and oppressive policies, in the USA and abroad. Herman documents psychologists' involvement in project Camelot. This was a project funded by the US Department of Defence in the 1960s. It was designed to use social science to fight national liberation movements around the world. While some psychologists were uncomfortable with the idea of producing knowledge for military purposes, the majority regarded the project as a research opportunity that legitimized their role in public affairs. Many, in fact, were at pains to pronounce their neutrality, even as they endeavoured to produce research for the repression of liberation movements.

The point of this story is not to inculcate the behavioural scientists who worked for Camelot, but rather to show that psychologists are capable of claiming neutrality even as they offer advice on how to dominate other countries. "Camelot's antiseptic language often emphasized the allegedly apolitical character of behavioural science, referring, for example, to 'insurgency prophylaxis' rather than counterrevolution. Even at the height of the Cold War, psychology offered a convenient way to avoid all mention of capitalism, communism, or socialism" (Herman, 1995, pp. 170-171). If we learned anything from Camelot it is to realise how much power we have as psychologists.

Camelot cannot be discounted as an aberration, for subtle and overt abuses of power are quite prevalent in psychology and the mental health professions (Parker, Georgaca, Harper, McLaughlin, & Stowell-Smith, 1995; Pilgrim, 1992). To disrupt the silence around the power of power, some psychologists devote considerable activity to understand how cultural norms and systems of social regulation shape human experience. We see this, for example, in Walkerdine's (1996, 1997) efforts to comprehend the survival and coping mechanisms of working class people, in Montero's (1994) and Martín Baró's (1995) work on power and ideology in Latin America, and in the writings of Burman (1996) and colleagues dealing with social regulation and resistance.

In community psychology, researchers explore how power may be used to enable or inhibit access to resources, to promote social change, or to maintain the societal status quo through a variety of strategies (Speer & Hughey, 1995; Speer, Hughey, Gensheimer, & Adams-Leavitt, 1995). Community psychologists have also used the concept of empowerment to examine how people achieve higher levels of control over their lives and their environments (Zimmerman, 2000). Empowerment is conceptualized in community psychology as a process and an outcome that applies to individuals, groups and entire communities.

These advances notwithstanding, there are domains of power that are not yet adequately covered in community psychology. For example, not enough attention has been paid to the potential dual

identity of being an oppressor and an oppressed person at the same time. Furthermore, not enough has been written about the power to promote wellness in self, others, and collectives. There are many inconsistencies in people's behaviors as well as in settings that require more attention. We cannot treat people as consistently pursuing the well-being of others, nor can we expect them to be permanently empowered or disempowered. A more dynamic conceptualization of power is needed, one that takes into account the multifaceted nature of identities and the changing nature of social settings (Watts, 2001). Moreover, we need a definition of power that takes into account the subjective and objective forces which exert an influence on our actions as community psychologists. While community psychologists align themselves with causes of social change, as a group, we are not immune to the conservative influence of social forces or new theories such as certain brands of post-modernism (Philo & Miller, 2001) or social capital (Perkins, Hughey, & Speer, in press). Hence, we need to be cognizant of our own potential collusion with regnant forms of economic, cultural, and political power.

Power is multifarious and omnipresent. There is material and psychological power, there is the power of the psychologist and the power of the community, power of parents and power of children, power to define mental illness and power to resist labels. In light of the need for a more comprehensive conceptualization of power, I offer a few parameters for clarification of the concept. I present them as a series of complementary postulates.

- 1. Power refers to the capacity and opportunity to fulfil or obstruct personal, relational, or collective needs.*
- 2. Power has psychological and political sources, manifestations and consequences.*
- 3. We can distinguish among power to strive for wellness, power to oppress, and power to resist oppression and strive for liberation.*
- 4. Power can be overt or covert, subtle or blatant, hidden or exposed.*
- 5. The exercise of power can apply to self, others, and collectives.*
- 6. Power affords people multiple identities as individuals seeking wellness, engaging in oppression, or resisting domination.*
- 7. Whereas people may be oppressed in one context, at a particular time and place, they may act as oppressors at another time and place.*
- 8. Due to structural factors such as social class, gender, ability, and race, people may enjoy differential levels of power.*
- 9. Degrees of power are also affected by personal and social constructs such as beauty, intelligence, and assertiveness; constructs that enjoy variable status within different cultures.*
- 10. The exercise of power can reflect varying degrees of awareness with respect to the impact of one's actions.*

First, I claim that power is a combination of ability and opportunity to influence a course of events. This definition merges elements of agency, or volitional activity on one hand, and structure or

external determinants on the other. Agency refers to ability whereas structure refers to opportunity. The exercise of power is based on the juxtaposition of wishing, consciously or unconsciously, to change something and having the opportunity, afforded by social and historical circumstances, to do so. Ultimately, the outcome of power is based on the constant interaction and reciprocal determinism of agency and contextual dynamics (Martin & Sugarman, 2000). Agency and contextual dynamics always incorporate psychological as well as political dimensions. Our ability to act as agents of change for personal or collective benefit depends on subjective, cognitive, behavioural and affective variables as well as structural factors. Similarly, contexts depend on social structures as well as on the ability of people to shape them and change them over time.

Power is not tantamount to coercion, for it can operate in very subtle and concealed ways, as Foucault demonstrated in detailed historical analyses of population control (1979). Eventually, people come to regulate themselves through the internalization of cultural prescriptions. Hence, what may seem on the surface as freedom may be questioned as a form of acquiescence whereby citizens restrict their life choices to coincide with a narrow range of socially sanctioned options. In his book *Powers of Freedom*, Rose (1999) claimed that

Disciplinary techniques and moralizing injunctions as to health, hygiene and civility are no longer required; the project of responsible citizenship has been fused with individuals' projects for themselves. What began as a social norm here ends as a personal desire. Individuals act upon themselves and their families in terms of the languages, values and techniques made available to them by professions, disseminated through the apparatuses of the mass media or sought out by the troubled through the market. Thus, in a very significant sense, it has become possible to govern without governing *society* - to govern through the 'responsibilized' and 'educated' anxieties and aspirations of individuals and their families. (p. 88)

The idea of internalized social prescriptions has direct implications for the self-perception of people with psychological problems. Although coercion has not disappeared from the treatment of the mentally ill, we have today treatment methods characterized by kindness and compassion. However humanitarian, this turn is not without side effects, for it shifts responsibility for problems and solutions inward. In the absence of apparent coercion, and in the presence of overt caring, there is nobody but oneself to blame for difficulties and lack of progress. According to Parker and colleagues (1995),

The humanization of treatments of the insane encouraged the internalization of the difficulties they exhibited. The mad then had to take responsibility for cure, and the kind treatment which replaced the rods and whips would work its way inwards. The conscience of the mentally ill would act as a self-discipline all the more efficient than the social discipline of the general hospital. (Parker et al., 1995, p. 7)

A similar dilemma is faced by community psychologists wishing to promote social capital. Whereas bridging and bonding are desirable qualities of healthy communities, they can restrict opportunities for challenging power structures and for engaging in productive conflict. Although social capital can contribute to health and welfare, it can also depoliticize issues of wellness and oppression (Perkins, Hughey, & Speer, in press).

Power, then, emanates from the confluence of personal motives and cultural injunctions. But, as we have seen, personal motives are embedded in the very cultural injunctions with which they interact. Hence, it is not just a matter of persons acting on the environment, but it is a matter of individuals

coming into contact with external forces that, to some extent, they have already internalized. The implication is that we cannot just take at face value that individual actions evolve from innate desires. Desires are embedded in norms and regulations. This is not to adopt a socially deterministic position however; for even though a person's experience is greatly shaped by the prescriptions of the day, agency is not completely erased. I concur with Martin and Sugarman (2000) who recently claimed that

While never ceasing to be constructed in sociocultural terms, psychological beings, as reflection-capable, intentional agents, are able to exercise sophisticated capabilities of memory and imagination, which in interaction with theories of self can create possibilities for present and future understanding and action that are not entirely constrained by past and present sociocultural circumstances. (p. 401)

This is why we witness resistance to oppression and actions towards personal and social change. Indeed, the definition of power I propose refers to three types: *power to strive for wellness, power to oppress, and power to resist oppression and pursue liberation*. We should bear in mind that, in all cases, power ensues from the dynamics of agency and culture described above. We should also distinguish, in all cases, among *power to affect self, others, and the collective*. We can strive for *personal, and/or relational, and/or collective wellness*. All the same, we can engage in *personal, and/or relational, and/or collective oppression*. The objects of resistance to oppression can also be the self, others, or the collective. Thus, for our purposes, we need to concentrate on how power affects the experience of individuals, groups or collectives in the form of wellness, oppression, or resistance. Power works by obstructing or meeting needs. Needs is a basic construct in the definition of power because it underscores wellness.

To reiterate, power refers to the ability and opportunity to fulfil or obstruct personal, relational, or collective needs. Personal needs for empathy, caring, social and emotional support illustrate psychological ingredients of wellness; whereas respect for diversity and democratic participation in matters affecting one's life relate to relational well-being. Accessible health and educational services, social justice policies, and an effective social safety net are examples of collective needs that benefit the community as a whole (Prilleltensky, 1997).

Conceivably, a person can endeavour to promote his or her personal and relational needs, but may be opposed, because of privilege or political ideology, to advance the needs of the collective. As an example, a wealthy man who can afford private medical insurance may not wish to pay more taxes for a national medical insurance plan. Conversely, we may think of women who forego personal needs for the benefit of their children or community.

Power, however, is not only about wellness, but about oppression as well; and regardless of motives, some people oppress others. Oppression can be directed inwards, towards oneself, towards family members, or towards others in the community. Finally, power can be used to resist oppression and pursue liberation.

In psychological practice, we may wish to see ourselves, as community psychologists, as always promoting wellness and helping people resist domination. But this is not always the case. Great care should be exercised in working with community members to ensure that we do not, however innocently, contribute to practices and discourses of oppression and conformity (Prilleltensky, 1994). We may also wish to see our clients and community partners as caring and compassionate, invested in promoting personal and family wellness. But this is not always the case either (Doherty,

1995). Hence, we need to reflect on what is our role vis a vis clients and community partners who engage in oppression of others. Not an easy question, for we tend to medicalize the problem and avoid the difficult moral dilemmas.

The potential outcomes of the exercise of power are numerous, and they involve a variety of actors. As community psychologists, we are interested in our professional and civic role in promoting wellness, and in the part our community partners play in the same. Our power, as well as the power of our partners, is largely determined by material and cultural circumstances related to privilege. Internal variability within community members and within community psychologists, stemming from class, gender, background, race, and ability will determine the latitude each person can exercise in procuring personal and collective wellness. Psychologists and community stakeholders can have varying degrees of power in different contexts. We may be privileged in our homes, but feel threatened in conferences; whereas our community partners may be powerful at home but vulnerable at work. Power is not a fixed attribute. But power changes not only across contexts, but also across time: oppressor at one time, liberator at another.

My working definition of power alludes also to levels of awareness. If our goal is to enhance wellness and fight oppression, awareness of our actions and those of our students, clients, and community partners is crucial. It is entirely possible that people may be aware of being oppressed, but not of being oppressors. We may wish very strongly, and consciously, to liberate ourselves from social regulations, but we may be buying, less consciously, into oppressive cultural norms. Young women may think that dieting is fashionable and will help them achieve popularity, but with dieting come the risks of eating disorders and perpetuating commercialism and consumerism. Contradictions abound. Humanists, for instance, wished to promote individual well-being without recognizing their contribution to the status quo by individualizing sources of suffering (Prilleltensky, 1994). They wished to advance personal liberation without changing social oppression. Community psychologists may wish to promote social capital, without realizing that they are depoliticizing conflicting interests and masquerading power differentials as deficiencies in the density of social networks.

Power and interests, then, are difficult to ascertain because there are unconscious subjective forces as well as socially constructed interests that are hard to disentangle. In the light of this, our job is to try and comprehend how power operates and how it can be channelled towards the promotion of wellness, of self, other, and the collective.

Wellness

My first concern is with the role of power in wellness. *Wellness is achieved by the simultaneous, balanced, and contextually-sensitive satisfaction of personal, relational, and collective needs.* Wellness entails the simultaneous fulfilment of the three types of needs. Personal needs (e.g., health, self-determination, meaning, spirituality, and opportunities for growth), are intimately tied to the satisfaction of collective needs such as adequate health care, environmental protection, welfare policies, and a measure of economic equality; for citizens require public resources to pursue private aspirations and maintain their health. There cannot be caring without justice, and justice without caring (Dokecki, Newbrough, & O'Gorman, 2001; Newbrough, 1992).

Personal and collective needs represent two faces of wellness (Keating & Hertzman, 2000; Marmot & Wilkinson, 1999). The third side of wellness concerns relational needs. Individual and group agendas are often in conflict. Indeed, like power, conflict is immanent in relationships. To achieve

wellness, then, I claim that we have to attend to relationality as well. Two sets of needs are primordial in pursuing healthy relationships among individuals and groups: respect for diversity and collaboration and democratic participation. Respect for diversity ensures that people's unique identities are affirmed by others, while democratic participation enables community members to have a say in decisions affecting their lives (Prilleltensky & Nelson, 2000).

The present definition of wellness parallels Newbrough's (1992, 1995) usage of the values of the French revolution: liberty, equality and fraternity. In advancing the Third Position for community psychology, Newbrough also advocates for complementary attention to personal (liberty), collective (equality) and relational (fraternity) needs. The present conceptualization builds on Newbrough's ideas and suggests that singular attention to any one of these values would likely have negative repercussions for the advancement of others. In a context where liberty is the supreme value, relationality and collectivism are bound to suffer because individual needs will come prior to any others.

In my view, there is a need to establish a contextually-based, creative balance among the three components of wellness (Prilleltensky, 2001). If any one of the values is undermined, our role should be to foreground the neglected principles (Prilleltensky, 2000). Communities invariably differ in their configuration of values. This is why we cannot predetermine which values are overexposed and which ones are forgotten. Communities have different starting points in their quest for balance and wellness.

The question of whether this tripartite conceptualization of wellness and values is universally applicable is an open one. Nevertheless, extensive research indicates that people across societies experience similar needs for personal, relational, and collective wellness. A major recent study involving over 60,000 participants reports that poor people of various cultures and continents yearn equally for the presence of the three domains of wellness. (Narayan, Chambers, Kaul, Shah, & Petesch, 2000; Narayan, Patel, Schafft, Rademacher, & Kocht-Schulte, 2000). While contextual nuances differ, the overwhelming evidence is that the three domains of wellness must co-occur for life satisfaction to ensue. While the precise dosage of each domain of wellness needs to be culturally and historically bound, the overall aim of reaching a balance cannot be forgotten.

We can apply the current definition of wellness to a number of social and psychological problems. What we find is that an imbalance in the attention to the different sets of needs results in difficulties to either the person or the collective. Too much attention to personal needs is often at the expense of social values such as justice, fairness and equality; resulting in poorly equipped communities. Such is the case in most western societies, where liberal messages of personal responsibility for happiness flood the media. In light of scarce social resources, the outcome of the ensuing competition for success is isolation and alienation. Conversely, radical collectivist societies which attend primarily to what is good for the nation tend to neglect the individual needs of their members. The outcome of this extreme position is lack of opportunities for growth, conformity, and denial of autonomy. It is indeed hard to find societies where the needs of the collective are balanced with the needs of its members. It is harder yet to find a society where equal attention is paid to relational needs for tolerance and democratic participation (Marsh, 1995). Sen (1999a, b) found that in the absence of democratic structures and respect for diversity, national wealth is bound to concentrate in the uppermost tip of the economic elite.

We require "well-enough" social and political conditions, free of economic exploitation and human rights abuses, to experience quality of life (Marsh, 1995). All the same, we expect interpersonal

exchanges based on respect and mutual support to add to our quality of life. Eckersley (2000) has shown that subjective experiences of well-being are heavily dictated by cultural trends such as individualism and consumerism; whereas Narayan and colleagues have claimed that the psychological experience of poverty is directly related to political structures of oppression (Narayan, Chambers, Kaul, Shah, & Petesch, 2000; Narayan, Patel, Schafft, Rademacher, & Kocht-Schulte, 2000).

Much like the present definitions of power and wellness, Sen (1999a, b) describes power and well-being in terms of both capabilities and entitlements. In both cases capacities and resources are at once intrinsically meritorious and extrinsically beneficial. This means that a sense of mastery and control is both an end in itself as well as a means of achieving well-being. Access to preventive health care and educational opportunities are not only means to human development but also ends on their own right.

Sen (1999a, b) articulates the complementarity of diverse social structures in fostering what I call wellness and what he calls human development. Sen invokes the interaction of five types of freedoms in the pursuit of human development: (a) political freedoms, (b) economic facilities, (c) social opportunities, (d) transparency guarantee, and (e) protective security.

Each of these distinct types of rights and opportunities helps to advance the general capability of a person. They may also serve to complement each other....Freedoms are not only the primary ends of development, they are also among its principal means. In addition to acknowledging, foundationally, the evaluative importance of freedom, we also have to understand the remarkable empirical connection that links freedoms of different kinds with one another. Political freedoms (in the form of free speeches and elections) help to promote economic security. Social opportunities (in the form of education and health facilities) facilitate economic participation. Economic facilities (in the form of opportunities for participation in trade and production) can help to generate personal abundance as well as public resources for social facilities. Freedoms of different kinds can strengthen one another. (Sen, 1999b, pp. 10-11)

The presence or absence of health-promoting factors at all levels of analysis can have positive or negative synergistic effects. When collective factors such as social justice and access to valued resources combine with a sense of community and personal empowerment, chances are that wellness will ensue. When, on the other hand, injustice and exploitation blend with lack of resources, social fragmentation, ill-health, suffering and oppression will emerge (Kim, Miller, Irwin, & Gershman, 2000; Marsh, 1995).

The challenge for community psychologists is to create spaces in communities, government, clinics, schools, families, workplaces, classrooms, and society at large where this delicate balance among personal, relational, and collective needs can be pursued. This is an extremely difficult task that requires concentrated attention on our part. Specific suggestions follow in the section on psychopolitical validity.

Action is further complicated because wellness is not only a multidimensional concept, but, as can be seen in Figure 1, a hierarchical one as well (Prilleltensky, Nelson, & Peirson, 2001). The wellness of the individual is predicated on the wellness of the immediate family. Family wellness, in turn, is related to community and social well-being. Parental well-being, in turn, is closely tied to employment opportunities, communal support, and adequate social services. These societal resources are largely dictated, in turn, by social and economic policies established by the government of the day. Personal wellness, then, is not unrelated to family and social wellness (Cicchetti, Rappaport, Sandler, & Weissberg, 2000; Cowen, 1991, 1994, 2000; Prilleltensky, Nelson, & Peirson, 2001). Wellness is like a pyramid where the top is occupied by the individual and the bottom by society, with its economic infrastructure and cultural superstructure. The middle of the pyramid is inhabited by meso-level structures such as family, schools, workplaces and religious congregations. This conceptualization makes intuitive and theoretical sense, but it is hard to translate into practice.

"Optimal development of wellness. . . requires integrated sets of operations involving individuals, families, settings, community contexts, and macro-level societal structures and policies" (Cowen, 1996, p. 246). Despite what we know about the impact of various systems and levels on families, most interventions in psychology and mental health deal with individuals, dyads (e.g., parent-child or marital relationships), or families (Prilleltensky, 1997). Our actions seriously lag behind our understanding of wellness. Much evidence points to the powerful impact of socioeconomic, cultural, and contextual factors in shaping the lives of children, adults, families and communities (Basic Behavioral Science Task Force of the National Advisory Mental Health Council, 1996; Keating & Hertzman, 2000; McLoyd, 1998), yet in apparent disregard for this knowledge, many of us continue to focus on counselling, therapy, or person-centred prevention as the main vehicles for the promotion of wellness (Albee, 1996).

The causes for maintaining an individualistic and intra-psychic orientation in psychology are many and have been reviewed elsewhere (Fox & Prilleltensky, 1997; Prilleltensky, 1994; Prilleltensky & Nelson, 2002). In essence, a culture that emphasizes individualism and blames victims for their misfortune is bound to fix people and not structures. Crossing boundaries and working across levels of the pyramid of wellness is antithetical to professional specialization. We are either clinical, school, or community psychologists; child, adult, or family therapists; social workers or clinicians; economists or psychologists. Traditional divisions have partitioned for all practical purposes the human experience. Although we tout systemic thinking, we revert to fragmentary practice.

The question that immediately springs to mind, then, is how to intervene at different levels of the pyramid. Each layer of the pyramid, as can be seen in Figure 1, comprises values, resources, policies and programs. Values are the principles that inform the resources, programs and policies that have to be in place to meet personal, relational and collective needs. If we think of means to promote wellness at the child and family levels, there are effective programs to prevent child abuse, to promote family cohesion, to enhance social skills, and even to promote sociopolitical consciousness in children and youth (Cicchetti, Rappaport, Sandler, & Weissberg, 2000; Watts, Griffith, & Abdul-Adil, 1999; Watts, 2001). What is required of the psychologist is to venture into the community and identify partners with whom to collaborate on these programs. The same applies to programs at the community and societal levels, where programs and policies to prevent violence and discrimination, for instance, are sorely needed.

A warning, however, is called for: It is entirely possible to venture into the community, into schools, and even into government, and to be welcomed with open arms to institute programs and

policies that concentrate on changing individuals and not structures. This has in fact occurred with many preventive interventions, that even though took place in community settings, were devised to change individual behaviour, and not structures of oppression or domination. As Albee (1996) points out, this is still the case with many preventive initiatives.

The achievement of wellness is predicated on the fulfilment of personal, relational, and collective needs, but specific needs within these domains will invariably differ across cultural contexts. Hence, it is crucial to attend to the experience of the people themselves before we try to prescribe a dose of either personal or collective wellness. This applies to work with individuals, groups or collectives alike.

Oppression

We already know what are the main precepts underlying wellness. In this section I explain what I mean by oppression and the role of power in its creation and perpetuation. Oppression can be regarded as a *state* or a *process* (Prilleltensky & Gonick, 1996). With respect to the former, oppression is described as a state of domination where the oppressed suffer the consequences of deprivation, exclusion, discrimination, exploitation, control of culture, and sometimes even violence (e.g., Bartky, 1990; Moane, 1999; Mullaly, 2002; Sidanius, 1993). A useful definition of oppression as process is given by Mar'i (1988): "Oppression involves institutionalized collective and individual modes of behavior through which one group attempts to dominate and control another in order to secure political, economic, and/or social-psychological advantage" (p. 6).

Another important distinction in the definition of oppression concerns its *political* and *psychological* dimensions. We cannot speak of one without the other (Bulhan, 1985; Moane, 1999; Walkerdine, 1997). Psychological and political oppression co-exist and are mutually determined. In Bartky's words,

When we describe a people as oppressed, what we have in mind most often is an oppression that is economic and political in character. But recent liberation movements, the black liberation movement and the women's movement in particular, have brought to light forms of oppression that are not immediately economic or political. It is possible to be oppressed in ways that need involve neither deprivation, legal inequality, nor economic exploitation; one can be oppressed psychologically--the 'psychic alienation' of which Fanon speaks. To be psychologically oppressed is to be weighed down in your mind; it is to have a harsh dominion exercised over your self-esteem. The psychologically oppressed become their own oppressors; they come to exercise dominion over their own self-esteem. Differently put, psychological oppression can be regarded as the "internalization of intimations of inferiority". (Bartky, 1990, p. 22)

Following Prilleltensky and Gonick (1996), I integrate here the elements of state *and* process, with the psychological *and* political dimensions of oppression. *Oppression entails a state of asymmetric power relations characterized by domination, subordination, and resistance, where the dominating persons or groups exercise their power by the process of restricting access to material resources and imparting in the subordinated persons or groups self-deprecating views about themselves. It is only when the latter can attain a certain degree of conscientization that resistance can begin* (Bartky, 1990; Fanon, 1963; Freire, 1972; Memmi, 1968). Oppression, then, is a series of asymmetric power relations between individuals, genders, classes, communities, and nations. Such asymmetric power relations lead to conditions of misery, inequality, exploitation, marginalization, and social injustices.

The dynamics of oppression are internal as well as external. External forces deprive individuals or groups of the benefit of personal (e.g., self-determination) collective (e.g., distributive justice) and relational (e.g., democratic participation) wellness. Often, these restrictions are internalized and operate at a psychological level as well, where the person acts as his or her personal censor (Moane, 1999; Mullaly, 2002; Prilleltensky & Gonick, 1996). Consequently, we can define political and psychological oppression as follows: *Political oppression, which is the creation of material, legal, military, economic, and/or other social barriers to the fulfilment of self-determination, distributive justice, and democratic participation, results from the use of multiple forms of power by dominating agents to advance their own interests at the expense of persons or groups in positions of relative powerlessness. Psychological oppression, in turn, is the internalized view of self as negative, and as not deserving more resources or increased participation in societal affairs, resulting from the use of affective, behavioural, cognitive, material, linguistic and cultural mechanisms by agents of domination to affirm their own political superiority* (cf. Prilleltensky & Gonick, 1996).

Some political mechanisms of oppression and repression include actual or potential use of force, restricted life opportunities, degradation of indigenous culture, economic sanctions, and inability to challenge authority. Psychological dynamics of oppression entail surplus powerlessness, belief in a just world, learned helplessness, conformity, obedience to authority, fear, verbal and emotional abuse (for reviews see Moane, 1999; Mullaly, 2002; Prilleltensky, in press; and Prilleltensky & Gonick, 1996). Among others, these dynamics contribute to the state of oppression.

Liberation

In the context of my definition, power may be invoked to promote wellness, engage in oppression or liberation. *Liberation refers to the process of resisting oppressive forces. As a state, liberation is a condition in which oppressive forces no longer exert their dominion over a person or a group.* Liberation may be from psychological and/or political influences. Following from the previous interpretation of oppression, there is rarely political without psychological oppression, and vice versa. Repressive cultural codes become internalized and operate as self-regulatory, inhibiting defiance of oppressive rules (Moane, 1999; Mullaly, 2002).

Building on Fromm's dual conception of "freedom from" and "freedom to" (1965), liberation is the process of overcoming internal and external sources of oppression (freedom from), and pursuing wellness (freedom to). Liberation from social oppression entails, for example, emancipation from class exploitation, gender domination, and ethnic discrimination. Freedom from internal and psychological sources includes overcoming fears, obsessions, or other psychological phenomena that interfere with a person's subjective experience of well-being. Liberation to pursue wellness, in turn, refers to the process of meeting personal, relational, and collective needs.

The process of liberation is analogous to Freire's concept of conscientization, according to which marginalized populations begin to gain awareness of oppressive forces in their lives and of their own ability to overcome domination (Freire, 1975). This awareness is likely to develop in stages (Watts, Griffith, & Abdul-Adil, 1999). People may begin to realize that they are subjected to oppressive regulations. The first realization may happen as a result of therapy, participation in a social movement or readings. Next, they may connect with others experiencing similar circumstances and gain an appreciation for the external forces pressing down on them. Some individuals will go on to liberate themselves from oppressive relationships or psychological dynamics such as fears and phobias, whereas others will join social movements to fight for political justice.

The evolution of critical consciousness can be charted in terms of the relationship between the psychological and political dynamics of oppression. Based on the definition of political and psychological oppression proposed earlier, I suggest that the level of critical awareness of a person or group will vary according to the extent that psychological mechanisms obscure or mask the external political sources of oppression. In other words, the more people internalize oppression through various psychological mechanisms, the less will they see their suffering as resulting from unjust political conditions. At times, the internalized psychological oppression will almost completely obscure the political roots and dynamics of oppression, even in repressive regimes like those of Latin America in the seventies (Hollander, 1997). Walkerdine (1996, 1997) documented how these processes of internalized oppression affected the lives of working class women, whereas Allwood (1996) detailed the personal blame discourse of depressed women. In all cases, personal suffering and struggles are explained in terms of private ineptitudes divorced from systems of domination and exclusion. This dynamic may apply as well to some gay and lesbians and ethnic minorities subjected to discrimination. Eventually, and ideally, people discern the political sources of their psychological experience of oppression and rebel against them. However, research on the process of empowerment indicates that individuals do not engage in emancipatory actions until they have gained considerable awareness of their own oppression (Kieffer, 1984; Lord & Hutchinson, 1993). Consequently, the task of overcoming oppression should start with a process of psychopolitical education. It is through this kind of education that those subjected to conditions of injustice and inequality uncover the sources of their diminished quality of life (Hollander, 1997; Watts, Griffith, & Abdul-Adil, 1999). This ideal outcome, however, should not be idealized too much because, as claimed earlier, it is quite likely that people may gain awareness of some facets of oppression and not of others. Liberation is not a fixated state at which people arrive and claim nirvana. New sources of oppression may emerge, or they may become oppressors themselves. The progression towards liberation is far from linear.

I believe that the preferred way to contribute to the liberation of oppressed people is through partnerships and solidarity. This means that we approach them in an attempt to work with them and learn from them at the same time that we contribute to their cause in whichever way we can (Nelson, Ochoka, Griffin, & Lord, 1998; Nelson, Prilleltensky, & MacGillivray, 2001).

To promote liberation, we need to engage with the political and the psychological at the same time. As Ussher (1991) pointed out, "we need to operate on the level of the political and of the individual: at the level of discursive practices, and individual solutions for misery. The two must go hand in hand if we are to move forward" (p. 293). Martín-Baró (1994), Moane (1999), Hollander (1997) and others, began to sketch the aims and methods of a liberation psychology. "A liberation psychology aims to facilitate breaking out of oppression by identifying processes and practices which can transform the psychological patterns associated with oppression, and facilitate taking action to bring about change in social conditions" (Moane, 1999, p. 180).

Psychopolitical Validity

So far I've argued for a psychopolitical conceptualization of power, wellness, oppression and liberation. By themselves, neither psychological nor political explanations suffice in accounting for the sources of suffering and human welfare. By the same token, neither political nor psychological interventions alone can improve human welfare. It is only when we achieve an integrated political and psychological understanding of power, wellness and oppression that we can effectively change the world around us. The pressing question now is how to convert the psychopolitical insights gained so far into research and practice.

Power is ubiquitous; it exists in all practice settings, and it pervades the way we think about and treat the people we work with. In all our interactions with community members we use our power with wellness-enhancing or oppressive effects. Which practices promote wellness and which assumptions perpetuate oppression is not always clear. This is because even with best intentions we can cause harm. A primary challenge, then, is to reflect on our own existing practices and scrutinize their effects. A subsequent challenge is to incorporate lessons about power, oppression, wellness and liberation into everyday practice. To meet these challenges, I propose the use of epistemic and transformational psychopolitical validity (Prilleltensky, in press).

The main objective of psychopolitical validity is to infuse in community psychology and the social sciences an awareness of the role of power in wellness, oppression, and liberation at the personal, relational, and collective domains. In order to attain psychopolitical validity, investigations and interventions would have to meet certain criteria. These criteria have to do with the extent to which research and action incorporate lessons about psychological and political power. To narrow the gap between rhetoric and action in community psychology, I propose that we assess all our activities against epistemic and transformational validity. This will enable us to concretize our concern with power differentials in discourse and practice. As power penetrates both research and action, I suggest that we consider both epistemic and transformational validity.

Psychopolitical Validity I: Epistemic

This type of validity is achieved by the systematic account of the role of power in political and psychological dynamics affecting phenomena of interest. Such account needs to consider the role of power in the psychology and politics of wellness, oppression and liberation, at the personal, relational, and collective domains. Guidelines for epistemic psychopolitical validity are presented in Table 1.

Table 1 offers criteria for establishing epistemic validity in nine domains which I consider central to the mission of community psychology. Although for practical and pedagogical reasons I distinguish among the nine cells, in effect they are interconnected and mutually influential.

It might be argued that my definition of epistemic psychopolitical validity limits the field of community psychology, potentially excluding studies that fall outside the nine cells of Table 1. This is a source of tension. On one hand, I wish for the field of community psychology to be pluralistic and accepting of diverse paradigms. On the other hand, I feel that such pluralism may lead to relativism, which, in turn, may dilute the field's mission and concern for the well-being of the oppressed. Perhaps, like wellness, it is a matter of balance among competing orientations. And also, like wellness, the preferred position depends on the cultural and temporal context of the decision. In the current climate, I think that we should refocus on the role of power in wellness, oppression, and liberation. Hence, the prescribed role for epistemic psychopolitical validity.

Should this innovation outlive its use in the future, surely it will be replaced by a more contextually sound alternative. However, until such time that we exhaust our understanding of power issues in well-being and suffering, I choose to pursue this type of validity in research. The implications for community psychology research are easily drawn from the Table. I advocate for research that illuminates the role of power in the nine cells. This does not mean that investigations have to do exclusively with power, but rather with the role of power on the phenomena of interest.

Psychopolitical Validity II: Transformational

Transformational validity derives from the potential of our actions to promote personal, relational, and collective wellness by reducing power inequalities and increasing political action. Table 2 presents guidelines for establishing transformational validity at the various intersections of wellness, oppression and liberation in personal, relational, and collective domains.

It might be argued that all community psychology interventions aim to enhance wellness and reduce oppression, but I beg to differ. As Geoff Nelson and I have argued (Prilleltensky & Nelson, 1997; 2002), many community psychology interventions, however well intentioned, do not alter structures but rather help their victims. Along a continuum of amelioration to transformation, our actions contribute primarily to the former and only peripherally to the latter. Hence, the need to concentrate on political action.

As in the case of epistemic validity, transformational validity might narrow the justifiability of community psychology interventions. Actions that do not concern themselves with power, inequality and political change might be ascribed lesser importance in the field. It is a matter of priorities. Again, I look at the context to determine what interventions might be preferred. In the current context, I would argue that most resources are allocated to ameliorative, person-centred interventions that contribute only marginally to social change (Albee, 1996; Prilleltensky & Nelson, 2002). When the context varies and political equality for oppressed groups is achieved, we might justifiably focus on interventions that increase self-esteem, social support, and social skills.

This turn does not exclude ameliorative strategies though. Rather, it proposes to enrich them by incorporating into them sociopolitical development, consciousness raising, and social action. We need not see health promotion as exclusively health-related, nor should we see social and emotional learning in schools as exclusively interpersonally. We need to see how our health and our relationships are affected by power inequalities at all levels of analysis. In making the time-honored feminist connection between the personal and the political, we can advance political change in all our interventions. Therefore, I do not propose a reduction of social skills, self-concept, self-help, home visiting, job training opportunities. Instead, I propose to refocus them to tackle the sources of inequality and exploitation. It is not a reduction but a redirection that I am proposing.

When participants in any type of community psychology intervention learn about the societal and political origins of oppression and wellness, there is a chance that they will contribute to changing

these inimical conditions. But learning about sources is not enough. Participants need to be activated to become agents of social change. Time is short and the suffering vast. Resources are limited and we must be accountable to oppressed populations who suffer because of inequality. Limited resources means choices. If we continue to use our limited community psychology resources only to ameliorate conditions and to tend to the wounded, who will work to transform the very conditions that create exploitation and distress in the first place?

Conclusion

Psychopolitical validity oscillates between two risks. A diluted version of it risks perpetuating the status quo, whereas a rigid form risks dogmatism. In the former case not much changes in community psychology and we go about our business without realizing the urgency of present social configurations of power for the poor and the oppressed. In the latter, we impose inflexible boundaries around what is and what is not justifiable community psychology practice. Somewhere in the middle there is a path towards the main mission of community psychology: to enhance wellness for all and to eliminate oppression for those who suffer from it and its deleterious mental health effects.

Psychopolitical validity requires setting priorities, concentrating on targets, and avoiding distractions. This is my way of restoring the vision of community psychology to the forefront of its agenda. The preceding sections offer concrete ways to look at power issues at multiple levels of analysis. Moreover, they offer strategies for transformative work. It is time we drew direct links between our research and action and their transformative potential. Tenuous connections cannot undo the damage of globalization, violence, and internalized oppression.

References

- Albee, G. W. (1996). Revolutions and counterrevolutions in prevention, *American Psychologist*, 51, 1130-1133.
- Allwood, R. (1996). "I have depression, don't I?": Discourses of help and self-help books. In E. Burman et al., (Eds.), *Psychology discourse practice: From regulation to resistance* (pp. 17-36). London: Taylor & Francis.
- Bartky, S. L. (1990). *Femininity and domination: Studies in the phenomenology of domination*. New York: Routledge.
- Basic Behavioral Science Task Force of the National Advisory Mental Health Council (1996).
- Basic behavioral science research for mental health: family processes and social networks, *American Psychologist*, 51, 622-630.
- Bulhan, H. A. (1985). *Franz Fanon and the psychology of oppression*. New York: Plenum Press.
- Burman, E., Atiken, G., Alldred, P., Allwood, R., Billington, T., Goldberg, B., Gordo Lopez, A. J., Heenan, C., Marks, D., & Warner, S. (1996). *Psychology, discourse, practice: From regulation to resistance*. London: Taylor & Francis.

- Cicchetti, D., Rappaport, J., Sandler, I., & Weissberg, R. P. (Eds.). (2000). *The promotion of wellness in children and adolescents*. Washington, DC: CWLA Press.
- Cowen, E. L. (2000). Community psychology and routes to psychological wellness. In J. Rappaport and E. Seidman (Eds.), *Handbook of community psychology* (pp. 79-99). New York: Kluwer Academic/Plenum Publishers.
- Cowen, E. L. (1996) The ontogenesis of primary prevention: lengthy strides and stubbed toes. *American Journal of Community Psychology*, 24, 235-249.
- Cowen, E. L. (1994) The enhancement of psychological wellness: Challenges and opportunities. *American Journal of Community Psychology*, 22, 149-179.
- Cowen, E. L. (1991) In pursuit of wellness. *American Psychologist*, 46, 404-408.
- Doherty, W. J. (1995). *Soul searching: Why psychotherapy must promote moral responsibility*. New York: Basic Books.
- Dokecki, P., Newbrough, J, & O'Gorman, (2001). Toward a community-oriented action research framework for spirituality: Community psychological and theological perspectives. *Journal of Community Psychology*, 29, 497-518.
- Eckersley, R., (2000). The mixed blessing of material progress: Diminishing returns in the pursuit of progress. *Journal of Happiness Studies*, 1, 267-292.
- Fanon, F. (1963). *The wretched of the earth*. New York: Grove Press Inc.
- Foucault, M. (1997). The ethics of the concern of the self as a practice of freedom. In P. Rabinow (Ed.), *Michel Foucault: Ethics, subjectivity and truth* (pp. 281-301). New York: The New Press.
- Foucault, M. (1979). *Discipline and punish*. Harmondsworth, England: Penguin.
- Fox, D. & Prilleltensky, I. (Eds.). (1997). *Critical Psychology: An Introduction*. London: Sage.
- Freire, P. (1972). *Pedagogy of the oppressed*. New York: Herder and Herder.
- Fromm, E. (1965). *Escape from freedom*. New York: Avon Books.
- Henriques, J., Hollway, W., Urwin, C., Venn, C., & Walkerdine, V. (Eds.). (1984). *Changing the subject: Psychology, social regulation and subjectivity*. London: Methuen.
- Herman, E. (1995). *The romance of American psychology: Political culture in the age of experts*. Berkeley, CA: University of California Press.

- Hollander, N. C. (1997). *Love in a time of hate: Liberation psychology in Latin America*. New Brunswick, NJ: Rutgers University Press.
- Keating, D., & Hertzman, C. (Eds.). (2000). *Developmental health and the wealth of nations*. New York: Guilford.
- Kieffer, C. (1984). Citizen empowerment: A developmental perspective. *Prevention in Human Services*, 3, 9-35.
- Kim, J., Millen, J., Irwin, & Gersham, J. (Eds.). (2000). *Dying for growth: Global inequality and the health of the poor*. Monroe, ME: Common Courage Press.
- Lord, J., & Hutchinson, P. (1993). The process of empowerment: Implications for theory and practice. *Canadian Journal of Community Mental Health*, 12(1), 5-22.
- Lyotard, J. F. (1984). *The postmodern condition: A report on knowledge*. Minneapolis, MN: University of Minnesota Press.
- Mar'i, S. K. (1988). Challenges to minority counselling: Arabs in Israel. *International Journal of the Advancement of Counselling*, 11, 5-21.
- Marmot, M., & Wilkinson, R. (Eds.). (1999). *Social determinants of health*. New York: Oxford University Press.
- Marsh, J. (1995). *Critique, action, and liberation*. Albany, NY: State University of New York Press.
- Martín-Baró, I. (1994). *Writings for a liberation psychology*. Cambridge, MA: Harvard University Press.
- Martin, J., & Sugarman, J., (2000). Between the modern and the postmodern: The possibility of self and progressive understanding in psychology. *American Psychologist*, 55, 397-406.
- McLoyd, V. C. (1998). Socioeconomic disadvantage and child development, *American Psychologist*, 53, 185-204.
- Memmi, A. (1968). *Dominated man: Notes towards a portrait*. New York: Orion Press.
- Moane, G. (1999). *Gender and colonialism: A psychological analysis of oppression and liberation*. London: Macmillan.
- Montero, M. (1994). De-ideologization, conversion, and consciousness raising. *Journal of Community Psychology*, 22, 3-11.
- Mullaly, B. (2002). *Challenging oppression: A critical social work approach*. Toronto: Oxford.

- Narayan, D., Chambers, R., Shah, M., & Petesch, P. (2000). *Voices of the poor: Crying out for change*. New York, NY: Oxford University Press.
- Narayan, D., Patel, R., Schafft, K., Rademacher, A., Koch-Schulte, S. (2000). *Voices of the poor: Can anyone hear us?* New York, N.Y.: Oxford University Press.
- Nelson, G., Ochoka, J., Griffin, K., & Lord, J. (1998). "Nothing about me without me:"
- Participatory action research with self-help/mutual aid groups for psychiatric consumers/survivors. *American Journal of Community Psychology*, 26, 881-912.
- Nelson, G., Prilleltensky, I., & MacGillivray. (2001). Value-based partnerships: Toward solidarity with oppressed groups. *American Journal of Community Psychology*, 29, 649-678.
- Newbrough, J. (1992). Community psychology in the post-modern world. *Journal of Community Psychology*, 20, 10-25.
- Newbrough, J. (1995). Toward community: A third position. *American Journal of Community Psychology*, 23, 9-37.
- Parker, I. (1999). Critical psychology: Critical links. *Annual Review of Critical Psychology*, 1, 3-20.
- Parker, I., Georgaca, E., Harper, D., McLaughlin, T., & Stowell-Smith, M. (1995). *Deconstructing psychopathology*. London: Sage.
- Philo, G., & Miller, D. (Eds.). (2001). *Market killing: What the free market does and what social scientists can do about it*. London: Longman.
- Pilgrim, D. (1992). Psychotherapy and political evasions. In W. Dryden & C. Feltham (Eds.), *Psychotherapy and its discontents* (pp. 225-242). Bristol, PA: Open University Press.
- Perkins, D., Hughey, J., & Speer, P. (in press). Community psychology perspectives on social capital theory and community development practice. *Journal of the Community Development Society*.
- Prilleltensky, I. (1994). *The morals and politics of psychology: Psychological discourse and the status quo*. Albany, NY: New York University Press.
- Prilleltensky, I. (1997). Values, assumptions, and practices: Assessing the moral implications of psychological discourse and action. *American Psychologist*, 47, 517-535.
- Prilleltensky, I. (2000). Value-based leadership in organizations: Balancing values, interests, and power among citizens, workers, and leaders. *Ethics and Behavior*, 10, 139-158.
- Prilleltensky, I. (2001). Value-based praxis in community psychology: Moving towards social justice and social action. *American Journal of Community Psychology*, 29, 747-778.
- Prilleltensky, I. (in press). Understanding, resisting, and overcoming oppression: Towards psychopolitical validity. *American Journal of Community Psychology*.

- Prilleltensky, I., and Gonick, L. (1996). Politics change, oppression remains: On the psychology and politics of oppression. *Political Psychology*, 17, 127-147.
- Prilleltensky, I., & Nelson, G. (2000). Promoting child and family wellness: Priorities for psychological and social interventions. *Journal of Community and Applied Social Psychology*, 10, 85-105.
- Prilleltensky, I., & Nelson, G. (2002). *Doing psychology critically: Making a difference in diverse settings*. London: Palgrave.
- Prilleltensky, I., Nelson, G., & Peirson, L. (Eds.). (2001). *Promoting family wellness and preventing child maltreatment: Fundamentals for thinking and action*. Toronto: University of Toronto Press.
- Rose, N. (2000). *Power and subjectivity: Critical history and psychology*. Available from Internet site
- Rose, N. (1999). *Powers of freedom: Reframing political thought*. New York: Cambridge University Press.
- Rose, N. (1985). *The psychological complex: Psychology, politics and society in England 1869 - 1939*. London: Routledge and Kegan Paul.
- Sen, A. (1999a). *Beyond the crisis: Development strategies in Asia*. Singapore: Institute of Southeast Asian Studies.
- Sen, A. (1999b). *Development as freedom*. New York, NY: Anchor Books.
- Sidanius, J. (1993). The psychology of group conflict and the dynamics of oppression: A social dominance perspective. In S. Iyengar & W. J. McGuire (Eds.), *Explorations in political psychology* (pp. 183-219). London: Duke University Press.
- Sloan, T. (Ed.). (2000). *Voices for critical psychology*. London: Macmillan.
- Speer, P. & Hughey, J. (1995). Community organizing: An ecological route to empowerment and power. *American Journal of Community Psychology*, 23, 729-748.
- Speer, P., Hughey, J., Gensheimer, L., & Adams-Leavitt, W. (1995). Organizing for power: A comparative case study. *Journal of Community Psychology*, 23, 57-73.
- Walkerdine, V. (1997). *Daddy's girl: Young girls in popular culture*. London: Macmillan.
- Walkerdine, V. (1996). Working-class women: Psychological and social aspects of survival. In S. Wilkinson (Ed.), *Feminist social psychologies* (pp. 145-162). Philadelphia: Open University Press.
- Watts, R. (2001). Exploring liberation psychology. *The Community Psychologist*, 34(1), 27- 28.

Watts, R., Griffith, D.M., & Abdul-Adil, J. (1999). Sociopolitical development as an antidote for oppression - Theory and action. *American Journal of Community Psychology*, 27, 255-272.

Zimmerman, M. A. (2000). Empowerment theory: Psychological, organizational, and community levels of analysis. In J. Rappaport & E. Seidman (Eds.). (2000). *Handbook of community psychology* (pp. 43-63). New York: Kluwer Academic/Plenum Publishers.