
The Use of Symbol and Metaphor in South Pacific Counselling

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Abstract

Western counselling theories and therapies have been the norm for viewing human nature. In the 1990s, there has been a movement to include the validity of cultural perspectives that are other than Western. There is also a challenge, I believe, to uphold both the Western and non-Western models of human development as of equal significance.

The intrapsychic organisations that influence how we process and experience the world are culture specific. There is an inner attitude and dynamic which I believe to be essential in any cross-cultural interaction. This is 'interpathy', (Augsburger: 1986). The use of symbol and metaphor in counselling Pacific Island clients is made effective by the context and attitude of interpathy that the therapist can maintain.

Introduction

I am a Pacific Islander, a Tongan who has received much from being brought up amongst Fijians, Indians, part-Europeans, Europeans and Chinese, and later nourished at the tables of formal Western educational schools. I have never felt anyone articulate my internal cross-cultural experiences as well as Augsburger has done. He considers the experience of 'interpathy', calling it the ability to:

enter a second culture cognitively and effectively, to perceive and conceptualise the internal workings of that culture into a dynamic interrelatedness, and to respect that culture with its strengths and weaknesses as equally valid as one's own. This interpathic respect, understanding and appreciation makes possible the transcendence of cultural limitation (1986: 14).

He goes on to make the important comparative distinction:

Sympathy

In sympathy, I know you are in pain and I sympathise with you. I use my own feelings as the barometer; hence I feel my sympathy and my pain, not yours. You are judged by my perception of my own feelings. You are understood by extension of my self-understanding. My experience is both frame and picture.

Empathy

In empathy, I make an effort to understand your perceptions, thoughts, feelings, muscular tensions, even temporary states. In choosing to feel your pain with you, I do not own it, I share it. My experience is the frame, your pain the picture.

Interpathy

In interpathy, I seek to learn a foreign belief, take a foreign perspective, base my thought on a foreign assumption and feel the resultant feelings and their consequences in a foreign context. Your experience becomes both frame and picture.

(Augsburger: 1986: 31)

What follows is some of my learning in the interpathic dynamic of to-ing and fro-ing between my Pacific Island world and the Western world, with specific focus on the psychotherapeutic context.

The psycho-spiritual world of the Pacific Island client

We are not human beings having a spiritual experience, we are spiritual beings having a human experience. (Teilhard de Chardin)

For the Pacific Islander, the psyche and the spirit are inseparable. Hence, a spiritual perspective has a profound impact on the personality development of such a client. The two aspects are interwoven and if there is to be a hierarchy, then the spirit element, in theory, takes precedence.

The spirit is the 'someone' out there, namely God, who will tell us when we are wrong, when we are right. The Spirit/God guides our thinking, our behaviour, our feelings and can act independently of us. This theistic perspective relates to those intangibles, those thoughts and feelings of enlightenment, harmony, inspiration, conscience and understanding (Richards and Bergin: 1997: 77). The Pacific Islander believes in the transcendent, and includes in this belief an understanding of the role of good and evil in daily living and universal happenings (Augsburger: 1986: 55).

Whilst it is true that critical theologising has been happening over a couple of hundred years and that religious belief is humanly generated, most Pacific Island people hold the traditional view that truths come from 'above'. These truths are often seen as unchangeable and beyond criticism. These spiritual maxims are similar to those contained in the other major monotheistic traditions, with a significant leaning towards the Christian tradition. They cover the themes of:

- Transcendence / deity
- Human nature
- Meaning / purpose of life
- Mortality - life and death
- Morality - values
- Organisation of the universe (Cornett: 1998).

Most believe in God the Father, God the Son and God the Holy Spirit — the Holy Trinity. God is male (generally), and can be personal too. He is the creator of all things. He is omniscient, omnipresent, all-powerful and all loving and also punitive. He has revealed himself in the person of Jesus Christ.

Human beings are 'made' by God, and we have a body and a soul/spirit. Many believe that there is something basically flawed in human nature because of Adam and Eve. This flaw can only be corrected by God's grace and the individual's personal efforts cannot free them from this bind.

God wishes that we grow physically and spiritually. The latter takes precedence. This life is to be enjoyed with other human beings only insofar as it relates to doing the will of God, being forgiven and being welcomed into God's presence in heaven. Good and evil exist in the world and we are to choose good over evil. The path to morality and righteousness is to be found in the teachings of Jesus Christ, so these include behaviours of love and service, honesty and family devotion. All the do's and don'ts of the Ten Commandments are paramount.

The spirit/soul of the human being exists after death. Those who have been faithful to the teachings of Jesus Christ will be accepted into the presence of God forever. A summary of the general notions of the Christian tradition that form a base for the Pacific Island spirituality would include:

- (a) Harmony with someone beyond this known reality (God) is possible.
- (b) The human person can choose to relate or not to relate, to act or not to act, i.e. has free will.

- (c) There are laws which we should seek out in order to live in peace.
- (d) There are paths that lead to personal and social peace, growth and happiness.
- (e) Material prosperity is a sign of God's approval.
- (f) Physical death is not the end, only a transition into life with or without God.
- (g) Through grace God holds an unfailing and steadfast love towards each human person and faithfully upholds the uniqueness and well-being of each one to the end. (Richards and Bergin: 1997)

By extension then, one can see how a theistic spiritual perspective may have a profound impact on how the Pacific Island client views growth, development and healing. However, it is more the scientific, subjective and objective world views that have a strong hold in the Western world of psychotherapy and counselling. In my psychotherapy training, spirituality was left outside the door. For me, as a Pacific Islander, it was like being asked to leave an essential part of me out in the corridor. It is this experience that strongly motivated me to complete my psychotherapy studies and to experiment out of a conviction that the Pacific Islander's view of life and the world is well suited to counselling and psychotherapy.

The Christian spiritual belief that God affirms the personal worth and being of each human person is grounded in an understanding of grace. Grace is the thorough assurance that our worth comes from the all-inclusive love of God. With grace, God can relate with us, as vulnerable, or fragile, or ambivalent, or narcissistic, or however we are. God's love is never withdrawn and abandonment is no threat. The solidarity that grace guarantees is secured by God and in that guarantee one's confidence and worth are held and contained. Where this grace and unconditional love exist, there God is present. The therapist is called to make real, to incarnate this unconditional, unending display of love. It is this dynamic that is to be experienced between the therapist and the client.

To a large extent, the Pacific Island client truly believes in the motherly/fatherly love of God. We believe that it is God's presence, God's being that makes all the difference in anything human. In the human development process of the Pacific Islander, the same child-like and sometimes infantile attitude exists. God as father, as the force guiding the universe, is unavoidably equated with the parents. The baby's total dependence on the parents, and in particularly the mother, facilitates the baby to see mother as God-like. For the

baby, mother is interchangeable with God. The baby is, of course, totally dependent on the parents for food, shelter, protection and emotional sustenance (Cornett: 1998). It is true to say too, that parents facilitate the child's imagery of God and the child's developing spirituality. In the early life of the child, Pacific Island parents are generally very affectionate and attuned to the child's all-round needs. Later, though, close to school age onwards, punishment and denigration are often acted out. There is rarely a word of praise and the child has to work very hard (Morton: 1996).

In terms of Western models of development, what is important to remember is that there is a markedly different matrix or milieu in which the stages of growth take place. From the cultural context, the Pacific Island child is trained by a large number of people — mother, father, aunts, uncles, grandparents, older siblings. The parenting figures discipline the child predominantly by threats of rejection or punishment. These may be verbal or physical (see especially Capps: 1995).

A consequence of this context is that an externally referenced personality emerges. This aspect becomes significant in the client/therapist relationship. The child is, then, unlikely to introject internal super-ego functions since control is directed by the expectation of others (Augsburger: 1986). When there is misbehaviour, shame begins to form and where there is misbehaviour and ensuing shame, the feeling of belonging and identity is threatened. Identity is threatened because the Pacific Island child is reared by many significant others, an extended family system. In the Western context, the child is usually reared by one or two parental figures.

In the Pacific Island context, the child, young adult, and adult are under constant observation by the older ranking members. External authority is always present in every sphere of life, with God being the authority par excellence. 'Hierarchy is the cultural model for communication' (Krause: 1998). A cultural understanding of the development of the self of the Pacific Islander in relation to the concept of external authority, group belonging and hierarchy is crucial to the therapeutic relationship. It is crucial because the therapist needs to have some understanding of the power they hold in the relationship and how much impact their words have, because the images of God, parents, elders, 'other' authority figures are transferred to the therapist.

Pacific Islanders identify with the collective, and when they individuate they incorporate a collective identity. With this collective self, a Pacific Islander

experiences a sense of solidarity. This is in contrast to the Western emphasis on individualising a distinct, individual identity. Because self is based on family and community, the Pacific Islander embraces the group ideal ego as a guiding principle, and conformity and co-operative affiliations are held in high regard. With conformity and co-operation, acceptance and belonging are undoubted rewards. Values are relational and not objective and intrinsic (Augsburger: 1986). The positive continuum of this self development based on communal solidarity generally brings about harmonious and unified relationships. The negative continuum can escalate rapidly to uncontrollable violence.

As God is the external and highest authority figure in the spirituality of the Pacific Islander, that same concept is transferred and applied to the parents and communal, significant caregivers. As God is viewed to be unconditional and spontaneous in his love for—his graced relationship with—Pacific Islanders, so too do the latter view their extended family system. As there is a sense of unconditional belonging and acceptance between the individual and God, so too is there a sense of the same between the individual and the collective. Deviation from these dimensions brings social judgement, distress, violence and cultural excommunication.

When Pacific Island clients walk into the consulting room, they walk in carrying the wisdom and groundedness of a theistic believer. They believe in and trust that the therapist will be benevolent, God-like, parent-like and unconditionally giving. The Pacific Island client is childlike, hurting and believing that the therapist will listen, care and guide them to a place of peace, healing and forgiveness. From the outset, the Pacific Island client offers trust, simplicity and a daughter or son-like affiliation. This attitudinal stance is potentially gold in the hands of the therapist. It can also be abused, manipulated, and the vulnerable inner world of the client be invaded. From day one the Pacific Island client welcomes the therapist to their inner world. Even though many Pacific Islanders still seek direction instead of counselling or psychotherapy, these are the kind of change processes that are in fact suitable to the mentality of Pacific Islanders and will aid their adjustment into a new country (Foliaki: 1981). The rapport is enhanced when the therapist is gracious and displays a humility that values the childlike simplicity of the Pacific Island client.

It is the trusting and childlike stance of the Pacific Island client, combined with the gracious love of the therapist, that makes therapy so disturbing, warm, human and healing. Right in the therapy room, the gratuitous love that God offers the human being is incarnated in a limited way. This is the wisdom gift

that the Pacific Island client brings, a warm simplicity that makes the counselling or psychotherapy relationship both humanly tender and demandingly responsible on the part of the therapist. In my years of experience in counselling cross-culturally in South Auckland, it is the Pacific Island client who comes with the big heart, the warm heart and the wounded heart. This is not to discount the inner stance of other clients. But the Pacific Island client's heart is easily visible, trustingly bared. With other clientele, generally speaking, I experience much more work is needed to defrost or melt down the protective covers, so the relationship is built up more slowly. I believe that this is a special edge that the Pacific Island client brings to the therapy room, the innate quality and gift of being warm and humane. In the Western therapy tradition, Kahn (1997) says that in recent years there has been a significant coming together between therapists who work with the relationship as a science and those who understand the need for the relationship to be loving, respectful and 'interpathic'. The emphasis on being in the presence of God and in the presence of the other with love and attunement is the spiritual centre of Pacific Island psychotherapy. With one or two notable exceptions, Western therapy schools are still struggling to include spirituality in their models of learning.

So the Christian belief that God loves us unconditionally and invites us to engage in whatever promotes life is to be 'made flesh', incarnated so to speak, in the therapeutic relationship. The type of conversation developed in this relationship then has to be interpathic with the client's cultural milieu. For the Pacific Island client this means using language in a particular way—one that uses metaphor, simile and story in the same way that the Pacific Islander uses them in the protocols of conversation and oratory.

Metaphorical conversation and story-telling

In the Pacific Island culture, there is a protocol to the way we language reality. In special, meaningful events the protocol used by the Pacific Island person is a manner of speaking in metaphor and simile, and in the use of story. This may be conversational as in the psychotherapeutic dynamic, or more formally oratorical. Conversation would also include reciprocity—sharing of thoughts and feelings, which does not happen in the field of oratory.

The use of simile, metaphor and stories in dialogue is inbred in the Pacific Island person. We hear them from birth to death. Think of Shakespearean language in daily mainstream life. The Pacific Island person learns this protocol primarily through experience, by attending formal and informal

ceremonies and participating in the rituals of significant life-events, births, baptisms, rites of initiation from childhood to adulthood. I find this manner of languaging reality a marked contrast to the Western way which I feel is set in a more scientific and clinical question-and-answer format. The use of metaphorical conversation and, more precisely, the symbolic language used in the conversation, meets the Pacific Island client where they are 'at home'. In being 'at home', the client is doubly at ease and they can describe their inner and outer world with openness and confidence. When the client experiences that the therapist is also in attunement with this symbolic manner of speaking, then mutual understanding is naturally deepened and expanded.

The Pacific Island person is born into a world (first family) that communicates in a 'talking picture' manner, not a 'pen picture', as tends to be the case in the Western context. Engaged through metaphoric form, the Pacific Island client experiences what Augsburger (1986) terms 'interpathy'. In much the same way, I interpathise with someone who comes with a Western background with a different languaging style, more linear, less circular, sometimes direct and less symbolic.

In the Pacific Island context, direct expression of feelings and thoughts about another is considered rude. It is not protocol. For example, when a person walks into a room and I hold that person in high regard, I would not say 'I really like you'. I would not give such a direct message particularly in the presence of others. Rather I would couch the message in a simile that says 'When you walk into the room it is like the sunrise, warm and bright'. To ask a Pacific Islander a question like 'can you tell me what happened?' may not be as culturally inviting as 'I wonder what it is like for you today? Is there rain or sun in your world? Which part?' and so forth. So when the therapist engages in metaphoric conversation, the client feels 'met'.

Case One

A young Tongan woman has been referred to me from a South Auckland medical clinic. She is 18 years old and a recent migrant to Auckland. I shall call her Kita. According to the doctor, Kita needed counselling as there was no physical data to show that her migraines were medically based.

In our first session, Kita and I exchange stories about where we come from, which island group, parents and kinship. This is the Pacific Island way. I offer some relevant information on the working parameters of our agency, what we offer and how I would work.

Then there is a pause, a silence and Kita's head is lowered markedly. So rather than directly mentioning her presenting medical issue of migraines, I tentatively approach her apparent world of pain.

Therapist: I feel as if there is rain in your soul, heavy rain.

Kita: Yes, there is, heavy rain like in the islands. (Voice is almost inaudible.)

Therapist: Is it raining everywhere, inside of you or only in some places?

Kita: Only in some. (Silence.)

Therapist: Tell me some more, only what you want.

Kita: In other places, there is only cloud and no rain. In another place there is a little sun. Another part, there is only hard rock and no water. And in another part there are rocks and the waves are hitting the rocks over and over again.

Therapist: (Feeling as if it's heavily raining in me too.) Where, which place do you want us to go to today?

Kita: Where it is raining, heavy rain.

Therapist: (Glancing at Kita, I notice tears dropping onto her lap. In the Pacific way, we look up and away to lessen the anxiety or intensity that may be present in the interaction. Then the encounter is not so direct, not so linear and more circular so to speak.) Is there a story to the heavy rain?

Kita: Yes. (Tears rolling down her face.)

Therapist: Tell me about the rain, the heavy rain.

Kita: My story is so long, so full, so heavy in my head.

Therapist: I'm ready. I'm listening. We'll be together there and we'll get wet together. That may not matter because you won't be alone.

Kita: (Sobbing profusely, Kita tells of how her mother left the family in Tonga four years previously. Kita was 14 years old. She is the only girl in the family of seven. Her mother had cancer and was to seek help in Australia. Her mother was to return after four weeks. Kita took on the role of mother in the family. But her mother never returned. She stayed away for two years. She died in Australia, and had no intention of returning as Kita's father was busy having love affairs with other women. Kita's sobbing intensifies as she tells of her unmet longings to see her mother,

her feelings of betrayal and anger with her mother for not returning and with her father for his love affairs.)

Therapist: I see the rain, so much rain. I feel the rain with you... so much rain, so much pain. (Silence.)

Kita: (Raising her head slowly.) My head is not so heavy. I feel light.

Therapist: We might do what we usually do back home, dry ourselves (offering her paper tissues). How will you take care of yourself during the week if more heavy rain falls on you?

Kita: I will see you beside me and then I know I won't be alone and I will come back and tell you my story.

Therapist: (When a Pacific Islander participates in a meaningful event, she usually leaves with something, some object, some memento.) What then, will you take away with you from our time together, something that will keep you dry and safe?

Kita: I will take you in my heart and your voice in my head. That will keep me dry and safe.

In this case, the use of language in metaphor and story is the key to 'opening the heavens' within Kita. Taking up the cue of my metaphorical questioning, Kita opens up and responds with her tears and poignant story. In the sessions that follow, Kita does lead me to the other places, in particular to the 'place where there are rocks and no water'. This is the place where she vents her anger and despair towards her parents. I assume that if I had taken the tack of directly asking Kita about the frequency of her migraines and when and where the headaches take place, I may have gone down a long, distracting route far from the place of 'heavy rain'. Knowing the protocol of another can facilitate an effortless, meaning-filled, cost effective encounter. Knowing another's protocol can be a point of contact, a point of entry into and alongside the world of the other.

Case Two

This involves a Samoan man in his early 40s. I shall call him Tia. Tia was referred from the courts because he had struck his wife violently. Tia is reluctant to see a counsellor but the thought of going to jail propels him to see one. This is not easy work for me. I'm also a woman. Culturally, the help is meant to be the other way around. Tia is resistant, proud and highly defended. After the usual Pacific Island protocol and acknowledging how difficult it is to receive assistance from a woman, I continue:

- Therapist: I have the feeling that your anger is like a covering, like a blanket ('*uni'ufi*' in Samoan), protecting something very tender. I wonder what might be there under this protecting cover.
- Tia: (Sits silent, tapping his fingers on his lap, looking out the window.) Maybe.
- Therapist: If we were to lift up the cover, what might we see underneath?
- Tia: (Whispering.) A little boy.
- Therapist: What does this little boy need right now?
- Tia: (Gulping back the tears.) The little boy needs his mother and father.
- Therapist: What will we do to make this happen.
- Tia: The little boy is running and running through the plantation. It's me. (Sobbing.) I am running and my parents are getting into a truck to go back to Savai'i. I have to go to school in Apia—stay with my grandparents. I turn and run and run and I fall to the ground and cry and the truck is gone. (There are no more words, only sobs.)
- Period of silence and connection.*
- Therapist: Tia, there is a story in the Palagi culture that says that when something really, really happy or sad happens in the past I can relive this happening in the present. How is the little boy's story, your story, connected to your anger?
- Tia: That is the only time I hit my wife. This is my first time. I love my wife but when she is late coming home — like she will say that she will come home at 6 o'clock and something happens in the factory and she only comes home at 8 o'clock, I feel worried. I feel she will not come back. I will watch the clock and watch the clock and walk up and down. But this time she wanted to go to a factory do and I ask her 'please come back early'. But she can't because it will be rude. So I ask her 'please don't go'. And still she wanted to go. I feel so silly but I am going out of my mind. I feel like my little son. I want to hang on to her.
- Therapist: Going out of your mind like...
- Tia: Like I am a little boy running and running in the plantation or a little boy hanging onto his mother's dress. (More tears and shaking of the head then silence.) That is why I hit her that night.

All these years I didn't know I have this little boy inside me. Today I find my little boy. Today I find myself.

Therapist: So your anger is like a protecting cover for your fear of being left behind.

Tia: Yes. All this time I never know.

Therapist: I'm happy with you. I'm sad with you too. Such a sad thing and a frightening thing to happen to you when you are little. The Palagi story is true.

Tia: So true. So good to know.

Therapist: What is our next step?

Tia: I will go to Court and tell my story. I will go home and talk to my wife and tell her my story and say sorry. I think a lot of our men feel the same as me.

Therapist: How will you take care of the frightened part of you when your wife has to stay out late?

Tia: I will look after my little boy inside the same way I look after my own son. I will sing to myself. I will watch a happy video or I will read a nice story or listen to my Island songs. I will not blame my wife any more.

The session ends with our putting in place some educational courses for anger management. But Tia leaves with a deep-seated relief in expressing his fear-filled feelings and story that he had so successfully protected outside of awareness over the years.

In this example the Pacific Island protocol of the use of simile and story-telling prove to be effective tools in facilitating Tia to trust and further explore the power that the past has in his present. With Tia, they seem to have enabled him to bring to the surface very directly some of the buried principles that have been governing his expressions of anger. Time and time again in my working experience, the use of these languaging tools has been effective.

Conclusion

What might a cross-cultural psychotherapist be like?

They will have a clear and sound understanding of their own values and basic assumptions. They will validate, and not necessarily agree with, different values and assumptions that the client holds. This understanding has been

transmuted into insight (cognition) and awareness (affect) so that the therapist does not unconsciously impose values that are not authentic to the client.

They will go beyond empathy, and engage interpathically. They take on a cultural stance that feels at home on the edge of two world views. They can enter the client's world, taste it and treasure it without losing themselves and their uniqueness.

They have some understanding of the impact history, religion, politics, economics and ethnicity have on the client. The client's cultural environment is respected, welcomed and dynamically woven into the therapeutic work.

They are open to interacting and working in formal and informal settings, they engage in bilingual and bicultural supervision, and are willing to present their work in cross-cultural settings. They are able to take the risk of being creative with mainstream therapeutic theory, orientation or techniques and remaining authentically human and loving. They recognise that no one school of therapy is perfect and are open to new learnings and dialogue.

They see themselves as connected to all humans as well as remaining distinct from them. They refuse to allow what is mainstream to be valued as 'fitting' all peoples, nor do they trivialise the wisdom that may be present in the mainstream. They are at home with differences and similarities, with uniqueness and commonality.

As it has been the process of my life to move from a very young age between the worlds of the Fijian, Tongan and European (mainly), I have come to normalise this development of a cross-cultural stance. Yet it is a very complex process which I observe often proving very difficult for those belonging to a monocultural environment. Even so, any tools can be effective in the hands of the genuine, humble practitioner who weaves between the two worlds of the client and the therapist. They are mute and blunted, ineffective, where the therapist has not developed a cross-cultural ground or soul, because it is this that facilitates the client to discover their own sacred ground and then look into their own chaos and find some life-giving form emerging.

It is also worth considering:

Any tool used beyond its point of effectiveness and out of its context loses its potency. Where the Pacific Island client is highly trusting of the therapist or elder and shows little defensiveness, an unhealthy dependence can develop on the part of the client. This can diminish the client's

initiative and sense of confidence. The parent/child cultural dynamic is compounded and enmeshment can follow.

In using metaphor, story telling and simile the Pacific way, the therapist can become stilted and too preoccupied with the tools. The relationship then becomes more artificial, more of a performance and less genuine.

Where the Pacific Island client can access her affect readily and easily, she can also be prone to losing herself in her feelings and get stuck in the 'mire'.

The protocol of using metaphor, simile and story telling can lead the Pacific Island client to deflect her hidden, real feelings and/or use the oratorical protocol to cover over or defend against her pain, fear, rage or any other associated affect. Culture is then used as a mask or camouflage (Culbertson: 1999).

To know only one culture can mean that I know no culture. In knowing a second and third culture I discover the enriching wisdom of paradox: things assumed universal are also specific, things absolute are relative, things simple are also complex (Augsburger: 1986).

The Pacific Islander believes that all healing is grounded in grace and the therapist or the elder is the healing touch of God in human form. The Pacific Island clients who have graced me with their trust and poetical language in the therapeutic relationship will never know how transformational their presence has been and still is for me. I honour them here.

References

- Augsburger, D. (1986). *Pastoral counselling across cultures*. Philadelphia, PA: Westminster.
- Capps, D. (1995). *The child's song: The religious abuse of children*. Louisville, KY: Westminster/John Knox.
- Cornett, C. (1998). *The soul of psychotherapy: Recapturing the spiritual dimension in the therapeutic encounter*. New York: Free Press.
- Culbertson, P. (1999). Listening differently with Maori and Pacific Island clients. *Forum: The Journal of the New Zealand Association of Psychotherapists*, 5: 64-82.
- Foliaki, L. (1981). Pacific Island counselling. In F. Donnelly (Ed.), *A time to talk: Counsellor and counselled*. Auckland: George Allen & Unwin.
- Kahn, M. (1997). *Between therapist and client: The new relationship*. New York: W. H. Freeman.
- Krause, I.-B. (1998). *Therapy across culture*. London: Sage.
- Morton, H. (1996). *Becoming Tongan: An ethnography of childhood*. Honolulu, HI: University of Hawaii Press.
- Richards, S. & Bergin, A. (1997). *A spiritual strategy for counselling and psychotherapy*. Washington, DC: American Psychological Association.