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Perspectives on Indigenous Psychology in Brazil: ethical and epistemological challenges

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Challenges of Indigenous Psychology in providing assistance to university students

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Abstract

Objective
This article aims to discuss the approach of indigenous psychology in the care of indigenous students in a university framework.

Method
Using a qualitative method, this article presents a case study detailing the formation trajectory of the *Rede de Escuta e Desaprendizagens Étnico-Subjetivas* (Network of Ethno-Subjective Listen-ing and Unlearning) to review the application of the principles of indigenous psychology in sup-porting indigenous students and their families at *Universidade Estadual de Campinas* (Unicamp, State University of Campinas), Brazil.

Results
The study highlighted the need to recognize different epistemologies for respectful therapeutic connections. Challenges were faced in the application of practices aligned with indigenous psychology, emphasizing co-authorship in sessions, valuing patients' perspectives, and continuous unlearning. The study of the cultural elements of the ethnicities involved proved crucial to avoid the pathologization of indigenous worldviews and subjectivities.

Conclusion
Indigenous psychology presents itself as a tool for the changes in the cultural struggles, highlighting the gap in clinical approaches and the urgent need for further studies to develop personalized interven-tions for the care of the diverse indigenous ethnicities.

Keywords: Mental health in ethnic groups; Mental health services; Psychology; Psychosocial support systems; Students.

Access policies geared towards indigenous students were implemented in Brazilian universities only at the end of the 1990s. Before that period, there were no specific inclusion or representation initiatives (Paladino, 2013). Although the rate of

indigenous people in universities is still reduced in relation to the total number of college vacancies, a significant growth of the presence of indigenous students in higher education institutions has been observed in recent years (Ayres, 2023; Medaets et al., 2022).

A significant milestone in this context was the review of the ethnic-racial quota policy by the Universidade Estadual de Campinas (Unicamp, State University of Campinas) in 2018, which established an exclusive admission exam for indigenous candidates, with firm reservation of two vacancies in each course (Silva et al., 2023). Currently, Unicamp has enrolled around 500 indigenous students, belonging to about 50 different ethnicities, in a total University student body of 40 thousand students. Notably, the majority of these indigenous students come from the Amazon region, located more than 3,000 kilometers away from the university (Comissão Permanente para os Vestibulares, 2023a, 2023b).

Although admission to the university is an important step, investigations highlight the additional challenge related to the retention and academic success of indigenous students. This occurs in a university environment full of cultural, economic and pedagogical divergences, in addition to continuous confrontation of stereotypes and structural racism (Bailey, 2016; Bergamaschi et al., 2018; Luna et al., 2021; Paladino et al., 2016; Ramos & Benites, 2018).

Brazilian academic literature is marked by the scarcity of studies focused on investigating the mental health of higher education indigenous students. However, international research has revealed alarming indicators, such as a high prevalence of depression and anxiety among those students, exceeding the rates observed in other student groups (Beshai et al., 2023; Chahar Mahali et al., 2020; Hop Wo et al., 2020). These findings highlight the need to implement additional care measures for indigenous university students, including the development of mental health strategies that foster both retention and academic success of this student population, as emphasized by Perez et al. (2019), Silva (2020) and Penha et al. (2020).

Although at Unicamp both indigenous and non-indigenous students have access to the *Serviço de Atenção Psicológica e Psiquiátrica ao Estudante* (SAPPE, Student Psychological and Psychiatric Assistance Service) (Oliveira et al., 2008), some indigenous students choose not to use the service. This is due to an array of reasons that involve personal issues, the structure of the service and variations in waiting time for available vacancies, as will be discussed further hereafter.

In this context, this article aims to explore the trajectory and challenges of a multidisciplinary collective created to address and/or respond to the mental health demands of indigenous students at Unicamp and their families who, for different reasons, do not use the SAPPE. These issues will be reviewed based on the principles and practices of Indigenous Psychology.

Indigenous Psychology in Brazil

Indigenous Psychology alludes to the structuring of an epistemological domain that transcends a mere attendance of individuals from indigenous communities considering their cultural and individual particularities. This psychological aspect postulates a critical perspective and intervention in relation to the colonial substrate present in the psychological discourses of a Eurocentric or American matrix. At the same time, efforts are made to develop alternative knowledge, aligned with the understanding and traditions of different indigenous ethnicities (Guimarães, 2022).

It is essential to highlight that the expression "Indigenous Psychology", whose roots date back to about half a century ago on the Asian continent, as documented by Hwang (2012), refers

to a field of knowledge. Although the diversity of psychological knowledge specific to each people cannot be universalized, since we use the term in the singular, but the aim is to emphasize the idea of a theoretical umbrella.

Furthermore, there is a political dimension to the term, since, according to Guimarães (2023, p. 388, our translation), "Indigenous Psychology is, then, that which builds knowledge to protect the existence of indigenous people and indigenous worlds". In the Brazilian context, it is noteworthy that a large part of the reflections in this field originate from indigenous psychologists, although there is also a contribution from non-indigenous psychologists who dedicate to work with those communities. Such considerations are often disseminated through discursive events, such as live broadcasts and conferences, although there is a minor representation in written publications directly related to the term "Indigenous Psychology". Still in this context, it is common to adopt expressions such as "indigenous mental health", "psychosocial health", "ethnopsychology" and "*Bem Viver*" to describe knowledge in this specific field.

In recent years, there has been a growing engagement of the regulatory bodies and psychology educational institutions with the indigenous movements in Brazil. This involvement represents progress, albeit slow, in the inclusion and recognition of historically marginalized groups. In 2022, a significant event marked the Brazilian Indigenous Psychology when the Federal Council of Psychology released a document entitled *Referências Técnicas Para Atuação de Psicólogas(os) Junto aos Povos Indígenas* (Technical References for the Work of Psychologists with Indigenous Peoples) (Conselho Federal de Psicologia, 2022). This publication not only incorporates the term "Indigenous Psychology" in its content, but also serves as a valuable resource for guidance and improvement of the psychologists' professional practice within the indigenous communities. Additionally, it reaffirms the Psychology's ethical-political commitment to promoting diversity and respect for different cultures and social realities. The essence of this content consists in promoting the construction of practices with a horizontal and critical perspective, seeking to enable more sensitive initiatives aligned with the values and the demands of traditional peoples.

With regard to the university environment, the document states that there is a central concern in indigenous mobilization in relation to admission and retention in higher education institutions, since access to formal education has become one of the main instruments in the indigenous peoples' claiming rights. In view of this, the handbook highlights the need for Psychology to operate in a network with other players and educational entities, aiming to create objective conditions to ensure the indigenous presence in higher education institutions. Furthermore, recommendations for the performance of Psychology in the university framework include:

• Professional guidance: assisting in the life project of young people, taking into account that this project may be linked to the collective project of their communities.

• Mediation of intra-institutionalities: advocating with the student movement, the performance of the specificities of indigenous cultures within the university, as appropriate feeding for the different cultures.

• Promotion of indigenous *Bem Viver*: creating spaces for the manifestation of the sacredness of each indigenous culture in everyday's university life.

• Intermediation of psychopedagogical processes with the teaching staff: focusing on the importance of course coordination considering ethnic-cultural care related to the body and health.

• Integration with traditional indigenous health: seeking culturally appropriate mental health solutions, such as the possibility of integrating a shaman or equivalent professional from the student's culture into the treatment.

• Support for the indigenous student movement: psychologists must engage in supporting the indigenous student movement, getting familiar with their agendas and challenges.

Despite the offer of limited guidance on clinical practices of Indigenous students in the university settings, this document highlights the importance of integrating sociopolitical guidelines and Indigenous cultural practices to improve mental health. This approach is corroborated by studies that advocate "culture as treatment" (Gone, 2013; Green, 2010; Pomerville et al., 2016; Whalen et al., 2022), where reconnection with cultural traditions, at any stage of the patients' life, brings significant therapeutic benefits, resulting in better mental health indicators. Furthermore, recent research, such as Beshai et al. (2023), also highlight the importance of adapting treatments to indigenous cultural particularities, thus maintaining the patients' cultural integrity.

Therefore, it is imperative to emphasize the need for an empathetic methodology, being aware of the complex cultural and political dynamics that influence indigenous students, both in the university setting and in their home territories. Consequently, culturally adapted clinical support can be provided. In this connection, the mental health collective discussed in this article is characterized by its commitment to the principles of Indigenous Psychology, based on a mental health practice that is congruent and adjusted to the specific needs of students.

Indigenous Perspectives on Psychology

Indigenous peoples have a history marked by cultural domination by non-indigenous people, which have disqualified and subordinated their knowledge. Such cultural colonialism endures not only as a historical vestige, but as a structural one. This aspect is present in the setting of public policies and health care services. In most public universities in Brazil, despite ensuring the right of indigenous students to mental health care, this assurance is based on the epistemologies of colonizing peoples that do not take into account the specificities of indigenous students.

According to Laplantine (2000), health-related practices, beliefs and ways of interacting with the world are fundamental characteristics of all human cultures, since the sociocultural aspects directly influence health care. Psychology, inserted in this framework, often perpetuates its original European and American matrix, maintaining on several occasions its colonialist, ethnocentric and discriminatory character (Articulação Brasileira dos(as) Indígenas Psicólogos(as), 2022; Conselho Regional de Psicologia, 2016; Figueiredo, 2009; Pavón-Cuéllar, 2022), eventually called by several authors WEIRD Psychology, that is, Western, Educated, Industrialized, Rich and Democratic (Hwang, 2023; Henrich et al., 2010; Muthukrishna et al., 2020; Wong & Cowden, 2022).

In this scenario, Krenak (2000, p. 47), a prominent indigenous activist and writer, reflects on the persistent colonizing nature of the relations between indigenous peoples and Westerners:

> The time of this encounter between our cultures is a time that happens and repeats itself every day. There was no encounter between the cultures of the Western Peoples with the cultures of the American continent in a defined time that we could refer to as 1500 or 1800. We have always experienced this contact.

Complementing this perspective, the indispensability of strategies that value historical knowledge and cultural sensitivity regarding the health of indigenous populations is emphasized. This prerogative encompasses the perception of the impact of past traumas, as well as the need for initiatives that maintain the cultural identity and acknowledge the relevance of the traditional knowledge of these communities (Gone et al., 2019). Such considerations are imperative, given that the legacy of colonization, territorial expropriation and disrespect of the fundamental rights

continues to adversely affect the physical and psychological well-being of these groups, with consequences that permeate subsequent generations.

Although non-Eurocentric perspectives are present when questioning the universality of science in this field, this debate has always been marginalized. However, in recent years, the international scenario shows a greater production of knowledge that confronts European and American Psychology. Under the by-name of "Indigenous Psychology," several approaches have emerged around the world, offering alternative models and questioning the applicability of this Psychology in different frameworks (Groot et al., 2012; Jahoda, 2016). In Brazil, discussions in this field are emerging more recently and can help to think not only of a Psychology constructed by and for indigenous peoples, but a Psychology that encompasses the diversity of subjective aspects of the Brazilian people (Ribeiro, 1995/2015).

The challenge of decolonizing Psychology implies a reconfiguration that goes beyond the simple rejection of the Eurocentric and American paradigms. More than that, it requires the construction of new paradigms that value indigenous knowledge, centered on the sacredness of nature, the cultivation of spirituality and the maintenance of a harmonious relationship with the ecosystems (Ciofalo et al., 2022).

This profound transformation is imperative especially considering that the legal regulations regarding the mental health of indigenous peoples in Brazil may prove ineffective if the foundations of "knowledge" are still bound to a colonized perspective. In the wake of this argument, Castro-Gómez (2007) points out that university education often perpetuates colonial paradigms, giving priority to knowledge not for its intrinsic contribution to humanity, but for its ability to consolidate and exercise power.

This subalternization of original peoples' knowledge, as highlighted by Freire (2002), is not justified under genetic, sociological, historical or philosophical premises. Rather, it is a reflection of inadequate teaching and learning practices. In the continuous search for the evolution of knowledge, it is essential to recognize and integrate the wisdom of those who are the target of this teaching.

From this perspective, in order to truly foster healing and resilience processes in indigenous populations, the active and engaged participation of communities in defining guidelines associated to those peoples' health is essential. This implies policies and programs co-constructed with the direct collaboration of the indigenous people, genuinely reflecting their perspectives and demands. Additionally, it is imperative that health strategies, whether mental or physical, be designed in a culturally congruent way, thus ensuring accessible, respectful and truly empowering care for these communities.

Indigenous Students at the State University of Campinas and the *Ayurí* Project

The *Ayurí* Project, developed at the Laboratório de Práticas Alternativas, Complementares e Integrativas em Saúde (Laboratory of Alternative, Complementary and Integrative Practices in Health), of the Faculdade de Ciências Médicas (Faculty of Medical Sciences) Unicamp , aimed to investigate the meanings attributed to the health-disease-care trinomial, as well as the meanings attributed to mental health by indigenous students at Unicamp, based on the co-working methodology-pedagogy (Barreto, 2021; Salazar & Walsh, 2015; Walsh, 2017). Students from different ethnicities who inhabit the university's diaspora space participated in the Project (Barros, 2023).

The Project was approved by the Research Ethics Committee under protocol CAAE 26416019.2.0000.5404, which also refers to the *Comissão Nacional de Ética em Pesquisa* deliberation.

The word *Ayurí*, chosen by the indigenous Project participants, originates from the *Nheengatú* language and basically means "acting collectively". In fact, this is the central principle of the co-working methodology-pedagogy, developed in the Project through general and thematic conversation circles, production of videos to disseminate information and holding regular weekly meetings, among other strategies. All these strategies are based on the principles of interculturality, interepistemicity and decoloniality, aiming to obtain productions with indigenous students, and not on them.

In the conversation circles, reports from indigenous students emerged: they dealt with experiences of sexual harassment and abuse, suicidal ideation, academic challenges such as procrastination and feelings of incapacity, as well as difficulties in dealing with anxiety and isolation. These and other recurring statements reveal critical aspects of the indigenous students experience in relation to mental health. A specific article is being prepared to deepen the analysis of those observations made during the project sessions; thus no further details will be brought forward in this description.

Based on the dialogues expressed in the conversation circles, the initial guidance for indigenous students included the search for support at the SAPPE. However, there was some hesitation among these students regarding the service, a trend also observed among indigenous communities in Canada (Inuit, First Nations and Métis), where resistance is often due to a concern about the adequacy of the service in connection with the indigenous cultural and social experience, as described by Tang and Browne (2008). The SAPPE's association with university infrastructure may have influenced this perception, with students expressing concerns regarding the confidentiality of information and possible repercussions on their academic records.

Over last year, students have reported a more positive view of the service, influenced by changes such as the reduction in waiting time. However, there is still hesitation regarding the establishment of a link with the service, as well as a preference among some students for services obtained outside the university. It is crucial to emphasize that these observations are based exclusively on the statements collected in our study group and do not necessarily represent the entire experience of the indigenous students at Unicamp.

The *Ayurí* Project team, upon identifying acute subjective demands among students who chose not to use conventional services, selected a number of psychologists committed to the cause. These professionals, who view the process as an opportunity for mutual learning, were chosen to provide care that complies with and adapts to the needs of each indigenous student. The services have been carried out online and face-to-face, including sessions located in some common areas of the Unicamp student housing, in a third-party's collective space called "*Tribos de Gaia*", and also during walks in the vicinity of these dorms, where most part of the indigenous students on the Campinas *campus* dwell.

Network of Ethno-Subjective Listening and Unlearning

Until mid-2022, mental health demands by indigenous students were treated in a punctual manner, without effective coordination between available health care professionals. However, during this period, some opportunities for collaboration began to emerge, in which several people offered to support the creation of mechanisms to attend those students.

Among those who offered support, the following entities stand out: individuals linked to the *Rede de Atenção à Pessoa Indígena* (Indigenous People Care Network), the *Estação Psicanálise de Campinas* (Campinas Psychoanalysis Station collective), the *Fórum do Campo Lacaniano de Campinas*

(Campo Lacaniano Forum of Campinas), the *Laboratório de Etnopsicologia* (Ethnopsychology Laboratory – USP, Ribeirão Preto campus), the *Articulação Brasileira dos(as) Indígenas Psicólogos(as)* (Brazilian Articulation of Indigenous Psychologists) and the *Comissão Assessora para a Inclusão Acadêmica e Participação dos Povos Indígenas* (Advisory Committee for Academic Inclusion and Participation of Indigenous Peoples). Faced with the growing need for organization and coordination of efforts, an indigenous mental health support network was created at Unicamp, organized through a WhatsApp group in October 2022. This initiative promotes a collaborative and integrated approach in offering appropriate psychological support, taking into account the cultural and subjective particularities of indigenous students.

As of February 2023, the group had not yet held any formal meeting. However, on that date, an indigenous student from the Limeira campus committed suicide, culminating in new movements at the institutional level and mobilization of people connected with the cause of indigenous students. The Central Directory of Indigenous Students (DCEIN), an entity representing indigenous students at Unicamp, issued a plea requesting emergency help for the mental health of college students. Simultaneously, the ATY GUASU association of the Guarani Kaiowá people of Mato Grosso do Sul, a people present in one of the territories where Unicamp promotes the application of tests for the selection of young people, wrote a letter to the university Dean, signed by the indigenous chief N. Mendes, N. V. Cárceres e V. Veron (Aty Guasu, 2023), requesting that:

> The university should maintain a different perspective regarding our sons and daughters who are currently seeking their education at this university. We are concerned about the psychological state of each and every student because they are indigenous people with their own specificities, different ways of life, who have left their villages and are moving through a world they are not used to, far from their families, isolated in their spirituality which is what strengthens our body. We understand that it is not easy to navigate the academic world where the meeting of two worlds still requires a lot of dialogue, especially the dialogue between our spiritual knowledge and science. Hence our plea for psychological assistance or any other assistance that our sons and daughters may need because they are the continuation of our existence.

Faced with the appeals and the urgent situation of acute mental health distress, combined with the understanding that the suicide movement can happen in a chain (El Kadri et al., 2021), the network began a more solid movement of meetings and proposals. It is important to highlight that, according to data published by the Ministério da Saúde (2017), the suicide rate among indigenous people is significantly higher, with 15.2 deaths per 100 thousand inhabitants, compared to the average of 5.3 per 100 thousand non-indigenous inhabitants.

Furthermore, it is essential to recognize that the suicide of an indigenous student carries specific implications and contexts that significantly differentiate it from cases involving non-indigenous students. As highlighted in the book by Campo Araúz and Aparício (2017), this phenomenon may be associated with a complex network of cultural factors. Among them, intergenerational and marital conflicts stand out, crises of male identity shaped by mythical-symbolic elements, and cultural practices that interconnect the spheres of the living and the dead. Furthermore, we ought to consider that in some cases suicide may be an act of denunciation or protest against the historic genocidal acts faced by indigenous peoples. This perspective emphasizes the need for a sensitive and contextualized approach when dealing with such situations in indigenous contexts.

After this tragic episode, the group began online meetings, the first held on March 2, 2023. In this meeting, ten people participated, with the aim of addressing the emergency nature of the actions to be taken. In addition, there was a presentation of the group members and a discussion

about their availability to provide individual and group consultations. The second meeting, on March 16, maintained the online format, but the subsequent meetings, on April 1 and April 15, were in-person meetings in order to bring the dimension of the body and physical presence in the discussion of topics that transcend the psyche.

With the transition to face-to-face gatherings, there was a greater involvement of indigenous students, albeit with a decrease in the participation of health professionals. Despite the opening of professionals' agendas and the growing proximity of patients to the collective, the need to establish a more affective connection with indigenous students was perceived with view at optimizing the relationship between them and the professionals involved. In this context, several initiatives were designed, such as lunches, soirees, conversation circles and group presentation booklets. However, such initiatives faced difficulties in practice, as they demanded time and resources from those involved, which caused the initiatives to be postponed.

Although the group was in the process of getting structured through those meetings, the cycle of referrals for indigenous students was already in operation. Previously, demands occurred on an *ad hoc* basis, with students or teachers linked to them, who knew psychologists and recommended them for the necessary assistance. However, as the group developed and organized itself, this approach was replaced by a more collaborative model. When a demand for psychological assistance arose, the indigenous students in the group or the teachers involved with those students shared that demand within the group. In response to these calls, one of the group's psychologists volunteered to provide attendance and continued providing care to the patient. With this new process seeking help became more accessible and efficient for everyone involved.

As to the group being structured through meetings, relevant information related to Indigenous Psychology and courses focused on indigenous health also occurred with view at improving the psychologists' efforts. Furthermore, data regarding indigenous students and events related to their demands were disclosed, with the aim of fostering knowledge and sensitivity about issues that affect that community.

After frustrated attempts to create ways of bringing the collective closer to students through event organizations, the collective chose to align its initiatives not with the creation of new connection strategies, but rather through the participation in already consolidated events that counted with the active presence of indigenous students.

The integration of the indigenous students' mental health network through events such as camps and political demonstrations, in addition to social and sporting activities, is fundamental. This engagement in indigenous political issues, as indicated by Achatz and Guimarães (2018) and by the Conselho Federal de Psicologia (2022), is essential to develop less colonizing mental health work, an approach also supported by *Articulação Brasileira dos(as) Indígenas Psicólogos(as)*. This proximity to students also makes collective values more robust, opposing the individualism of Western practices (Pavón-Cuéllar, 2022), and enhances the indigenous students' trust in the health professionals, in addition to reaping effective support for the causes in question.

Furthermore, the group of professionals dedicated to assisting indigenous students organized fortnightly horizontal supervision sessions, a practice recognized by Ávila et al. (2023) as effective in promoting knowledge among peers. Characterized by horizontality and joint reflection, this approach provides valuable technical support and guidance. Aligned with the principles of Indigenous Psychology, horizontal supervision is crucial for the development of techniques adapted to the specific needs of these students. The inclusion of professionals with experience in indigenous contexts brings crucial insights to the group, facilitating theoretical and clinical improvement, and consequently, increasing the quality of care.

The group, which was named *Rede de Escuta e Desaprendizagens Étnico-Subjetivas* (Network of Ethno-Subjective Listening and Unlearning), currently includes 40 members, and their activities are reported in Table 1. Among the members, 10 mental health professionals, including nine psychologists and a psychiatrist, are actively engaged in clinical care for indigenous university students and their families. To date, 23 indigenous students have been attended by these professionals. Out of these students, 5 discontinued treatment after one or two sessions, 4 maintained their treatment for more than two months before discontinuing it, and one student's treatment was interrupted due to the health professional's personal problems. One patient received three-session emergency care. Currently, 12 patients are in active care with the group's health professionals, including 2 indigenous family members of college students.

Table 1
Activities of collective members

Occupation	Quantity	Activity in the Project
Indigenous student mediators	10	They help to think about the structure of the collective and guide students
Psychology Professionals	18	They provide opening hours and/or help to think about more appropriate services and/or observe the content to arrange time when they feel prepared
University professors	8	Refer students and/or think about strategies related to the institutional scope
Health professionals (psychiatrists, doctors from other areas)	4	They assist with therapeutic protocols and provide services

Furthermore, a therapeutic group targeting indigenous people living in the city of Campinas has been attending in-person at the Tribos de Gaia space, located close to the Unicamp student housing. This group holds biweekly meetings, supported by 2 psychologists from the network. The group remains open to new members' admission and allows patients to freely come and go, facilitating access and flexibility in meeting the needs of the participants.

Challenges of the Network in the Light of Indigenous Psychology

As previously mentioned, formulations within the scope of Indigenous Psychology encompass deep considerations and unique nuances. It is crucial to acknowledge that health care practices are not universal, and it is necessary to understand and apply them taking into account specific historical, social and cultural contexts, while being careful to avoid colonizing practices (Langdon, 2007; Walsh, 2007). The following discussion will focus on the analysis of how the Ethnic-Subjective Listening and Unlearning Network has sought to steer by these unique requirements.

The dominance of the Euro-American psychological paradigm, propagated through colonial mechanisms, limits the understanding of subjectivity of diverse cultural origins, neglecting the rich complexity, depth and breadth of indigenous knowledge. This limitation demands a new radical guidance of psychological practice to respect and incorporate indigenous knowledge and practices, processes that imply significant "unlearning". Martins (2021) highlights this urgency when describing her experience of working with the Guarani and Kaiowá people, stating that the psychologist's work with indigenous peoples involves "unlearning eight hours a day" (Martins, 2021, p. 196). This approach challenges professionals to face and overcome barriers, sustaining the tension of lack of understanding and ignorance. This implies not only consideration of the individual circumstances of the person in focus, but also valuing the realities and perspectives that are significant to the

interlocutor and converging with the findings of Achatz and Guimarrães (2018), which show the power arising from the possibility of creating new understandings through this tension.

Thus, "not knowing" is not only presented as a gap, but also as a stimulus, an opening for recognition of the unknown in therapeutic processes. This unknown appears as the basis for building knowledge in the mental health network.

During the horizontal supervision, cultural elements of the ethnicities attended are explored, with view at seeking knowledge that contributes to the synergy of expertise during clinical visits. One of the group's psychologists often expresses the idea of encountering the unknown through the phrase: "I don't know what it is, but I know it's not that." Based on psychoanalytic theory, she builds subjective knowledge based on the patients' language. However, when you do not share the same culture as the patient, many elements of communication may be lost, leaving gaps between what is said and what professionals can understand. The lack of familiarity with cultural symbols of each student and their families requires additional effort to establish a therapeutic connection.

These indigenous students have a rich and complex subjectivity, learned within their communities and families. As Pavón-Cuéllar (2022) points out, this knowledge arrives with university students; it is often an intuitive and fragmented knowledge and may be implicit or even vague, but it reflects an understanding of the world that transcends the formal structure of subjective knowledge.

In the academic scenario at Unicamp, the presence of students from the Baré ethnicity people stands out; this is an ethnic group that has the largest number of students at the institution, according to data from Comissão Permanente para os Vestibulares (2023a, 2023b). In the clinical supervisions, we include studies on the culture of these people, the number of patients from this ethnic group who passed through the network and the identity issues of this community. The Baré people are characterized by deep miscegenation, in addition to their historical role as traders in the Rio Negro region (Instituto Socioambiental, 2024). The majority of students from this ethnic group came from the urban setting of the municipality of São Gabriel da Cachoeira. In the university, we face the challenge of recognizing the indigenous identity of some students whose physical characteristics were more influenced by miscegenation, presenting "white" features and diverging from traditional indigenous stereotypes. Furthermore, knowing that the construction of identity is a dialectical process that is shaped in response to the surrounding sociocultural reality, joining self-knowledge and social recognition (Hall, 2003), we observed that these students often find themselves victims of structural racism that, in their regions, were more focused on indigenous people from a rural context or with recent contacts, such as with the Yanomami or Hupda.

Another significant example discussed in the horizontal supervision involves the cultural complexity of the Ticuna people, the second ethnic group with the largest number of students at Unicamp (Comissão Permanente para os Vestibulares, 2023a, 2023b). Ticuna society is organized in a clan system, in which the transmission of clans from father to son plays a fundamental role in the formation of individual identity. In this specific sociocultural context, there are traditional clans with "feathers" (bird clans) and "featherless" clans (animals and plants), but some students belong to non-traditional clans, such as the Ox and Chicken clans, which are the children of indigenous mothers with non-indigenous fathers, changing their positions within the cultural dynamics. A lack of understanding of this Ticuna clan system can result in a superficial psychological analysis, without capturing the essential nuances to begin an understanding of the patient's subjectivity. Additionally, the Young Girl Ritual, a passing ceremony that marks the transition from childhood to adulthood, plays a key role in preparing young women to assume their future roles and responsibilities in the

community. Considering whether the student has participated in this ritual is relevant to understand her subjectivity and cultural context (Matarezio Filho, 2020).

Another scenario discussed in horizontal supervisions is the reality of wars in the territories of Guarani and Kaiowá in Mato Grosso do Sul to which some students belong. These areas are often under threat from the agribusiness, which attacks both prayer houses and community self-organizations to retake the territories expropriated by the State and/or by farmers. Being aware of the struggle of these students' families broadens the understanding beyond the individual and academic scope, taking into account the subjective challenges faced in the therapeutic setting, in addition to highlighting the importance of the territory as a central component in maintaining the mental health of indigenous peoples (Faria & Martins, 2023).

For professionals who work with diagnostic manuals, psychological tests, more or less structured interviews and other similar tools, the gaps in the methodological application are even greater. Establishing an International Classification of Diseases in Psychology for indigenous people has not proven to be feasible in the network's experience, as it can lead to the pathologization of something as complex and transcendental as the cosmologies of indigenous peoples.

Even when students and their families arrive with pre-existing clinical diagnoses, such as depression or borderline disorder, we noticed that the health professionals must go beyond these illness categories to truly understand who presents. Since, as Pavón-Cuéllar (2022) highlights, the perspective of Euro-American Psychology can lead to misinterpretation, such as, for example, the inadequate identification of symptoms of schizophrenia in individuals with diverse relationships between the spiritual, the animal and plant kingdoms and even the mineral kingdom. Likewise, behaviors that reflect humility and detachment in indigenous contexts may be misinterpreted as symptoms of depression. Thus, indigenous forms of subjectivation run the risk of being misunderstood, pathologized and even criminalized when assessed through conventional psychological categories.

Therefore, the decolonization of Psychology and its convergence with Indigenous Psychology demand the respectful inclusion of indigenous people as subjects and teachers of specialized knowledge, in a relationship of epistemic and political equality. In this context, we see the therapeutic intervention as a co-authorial endeavor, where both the professional psychologist and the patient position themselves as active collaborators in outlining the therapeutic process. The exercise of establishing affective constructions between interlocutors stands out, after acknowledging that emotional foundations emerge as an essential substrate in the establishment of collaborative interactions and in the production of knowledge deeply aligned with the community needs (Guimarães, 2020). The emerging interepistemic paths, guided by collaborative practice, drive the intricate network of relationships, approximations and dissonances present in the therapeutic processes to the epicenter of the discussion. The incorporation and reflection on such nuances in clinical practice enhances the dialogue between therapists and patients, subverting hegemonic paradigms and recognizing patients as protagonists of their own recovery process.

In view of the above, we observed that the mental health network that has been formed in recent years operates along the guidelines established in the Federal Council of Psychology document helping to foster the retention of indigenous students at the university, while encouraging reflection on their aspirations and life projects. In this way, active psychologists have been guided in their interventions by the plural spectrum of indigenous peoples, considering the different trajectories, experiences and heterogeneity of the student body, including university experiences and plural life projections and favoring multiple sharing.

Additionally, in line with what is proposed in the aforementioned manual and the overlap with academic issues, the feasibility of developing, in collaboration with students, strategies that enable a university that honors and incorporates indigenous cultural specificities is postulated. We are talking of an academic institution where indigenous students can mirror Daniel Munduruku's (2012, p. 43) assertion: "I can be who you are, without ceasing to be who I am". This perspective corroborates the concept of hybrid identity proposed by Hall (2003), where the diasporic subject configures his identity through clash and diversity, and not in their absence.

We believe that the indigenous mental health support network has been beneficial to indigenous students and their families, as referrals for care continue to occur and several treatments initiated through this dynamic have been maintained over time.

Conclusion

Indigenous Psychology emerges as a powerful vector of change in the scenario of disputes over dominant cultural narratives. Within this framework, universities assume a primary responsibility for establishing dialogues and promoting interactions between different cultures and knowledge systems. The study carried out with the collaborators' collective set up at Unicamp not only enriches the debate in the field of Indigenous Psychology, but also highlights the power of a perspective that gives priority to interepistemicity and collaborative work. Therefore this study, can serve as a reference for the development of supporting strategies, promoting a more comprehensive understanding of the psychological phenomena in question.

It is essential to highlight that the collective's intervention with indigenous students, although still recent, already offers valuable insights. Therefore, continuity of observation and analysis over time are considered essential to assess in greater depth the effectiveness of the practices of this collective guided by Indigenous Psychology. This extended follow-up will allow for a more comprehensive understanding of the impacts and results of these interventions.

Our investigation consolidates its relevance within the scope of Psychology by providing a critical reflection on the psychological science as an analytical and interventional instrument of a universal nature. Furthermore, it highlights the dynamics and adaptability of indigenous knowledge, which, contrary to preconceived notions, is not fossilized, but rather is the result of the construction and self-definition of peoples inserted in a global history.

Finally, the existing gap in the clinical approach to Indigenous Psychology signals a pressing need for further studies, especially considering the clear demand from individuals of different ethnicities for personalized psychological interventions.

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