

## Community Counseling Models Based on Local Wisdom: Strengthening Social Relations in Traditional Communities

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### Article Info :

Accepted: June 24, 2024  
Approved: August 28, 2024  
Published: October 30, 2024

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### Keywords:

traditional counseling; local wisdom; social relations

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### ABSTRACT

**Background:** Traditional Indonesian communities maintain indigenous counseling practices rooted in local wisdom that prioritize collective harmony and spiritual wellbeing. These healing systems remain underexplored in academic literature, where Western therapeutic assumptions emphasizing individual psychology, confidentiality, and secular approaches dominate.

**Objective:** This study explores lived experiences of traditional counseling based on local wisdom and examines its role in strengthening social relations within Kampung Naga, West Java, Indonesia.

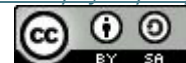
**Method:** A phenomenological study using Interpretative Phenomenological Analysis (IPA) was conducted with twelve participants who experienced traditional counseling addressing social relationship challenges.

**Findings and Implications:** Analysis revealed five superordinate themes representing interconnected mechanisms through which traditional counseling strengthens social relations. The first demonstrates cultural embeddedness through Sundanese cosmology, ritual practices, and Islamic-indigenous syncretism. The second encompasses relational mechanisms including conflict mediation, empathy cultivation, reciprocity restoration, and social identity strengthening. Traditional counseling operates from a holistic, collectivist framework prioritizing community harmony, spiritual wellbeing, and relational restoration over individual psychological adjustment. Findings offer practical implications for mental health professionals by validating indigenous healing systems as legitimate therapeutic alternatives.

**Conclusion:** This research challenges Western therapeutic assumptions about confidentiality and secular approaches while contributing to culturally responsive counseling models that authentically integrate local wisdom with contemporary practice. Findings support decolonizing counseling theory by demonstrating indigenous healing systems' effectiveness in maintaining social cohesion and spiritual wellbeing within traditional communities.

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## INTRODUCTION

The increasing complexity of social challenges in contemporary society has prompted scholars and practitioners to reconsider traditional approaches to community counseling and social cohesion. Recent studies have demonstrated that indigenous knowledge systems and local wisdom offer valuable frameworks for addressing mental health and social relationship issues within cultural contexts ([Aziz, 2025](#); [Tohari, 2025](#)). The integration of culturally responsive counseling practices has shown significant potential in enhancing therapeutic outcomes, particularly in communities where Western psychological frameworks may not fully resonate with cultural values and social structures ([Jovchelovitch, 2019](#); [Rahayu & Haryati, 2025](#)). Furthermore, the recognition of local wisdom as a legitimate knowledge system has gained momentum in academic discourse, challenging the dominance of universalist approaches to mental health and community development.

While global perspectives provide valuable context, the present study specifically examines how traditional counseling based on local wisdom operates within Indonesian communities, particularly in contexts where indigenous knowledge systems remain integral to daily life and social organization. Local wisdom, defined as accumulated knowledge, practices, and beliefs developed by communities through generations of interaction with their environment, represents a crucial resource for developing contextually appropriate counseling interventions ([Iswandi et al., 2025](#); [Pornpimon et al., 2014](#)). Traditional communities have historically maintained sophisticated systems of social support and conflict resolution that draw upon cultural values, spiritual practices, and community-based healing approaches. Research has increasingly documented how these indigenous counseling practices effectively address psychological distress, interpersonal conflicts, and community disharmony through mechanisms that align with cultural worldviews and social norms ([Jones et al., 2025](#); [Verawati & Ramdani, 2023](#)).

Social relations in traditional communities are characterized by interdependence, collective identity, and reciprocal obligations that differ fundamentally from individualistic social structures prevalent in modern societies. The erosion of traditional social bonds due to modernization, urbanization, and globalization has been associated with increased rates of mental health problems, social isolation, and community fragmentation. Contemporary research suggests that strengthening social relations through culturally grounded interventions can enhance community resilience, promote mental wellbeing, and preserve cultural identity in the face of rapid social change ([Rahmawati & Supriyadi, 2025](#)).

The integration of local wisdom into formal counseling frameworks presents both opportunities and challenges for mental health professionals working in diverse cultural contexts. Evidence suggests that counseling approaches that incorporate indigenous healing practices, traditional conflict resolution methods, and community-based support systems demonstrate higher engagement rates and better therapeutic outcomes among clients from traditional communities. However, formalizing local wisdom-based counseling requires careful attention to issues of cultural appropriation, authenticity, and the potential commodification of traditional knowledge.

Despite growing recognition of the value of local wisdom in counseling practice, several critical gaps exist in current research and practice. First, there is a lack of systematic frameworks for integrating traditional knowledge systems with evidence-based counseling approaches in ways that maintain cultural integrity while ensuring professional accountability. Second, limited empirical research examines the specific mechanisms through which local wisdom-based interventions strengthen social relations and promote community cohesion in traditional societies. Third, practitioners often lack adequate training and guidelines for implementing culturally responsive counseling that effectively bridges traditional healing practices and contemporary therapeutic frameworks.

The urgency of developing local wisdom-based counseling models is underscored by several contemporary challenges facing traditional communities worldwide. Rapid social transformations threaten the continuity of indigenous knowledge systems, creating an immediate need to document, validate, and institutionalize traditional counseling practices before they are lost. Mental health disparities persist among indigenous and traditional communities, partly due to the cultural mismatch between available services and community needs, necessitating urgent development of culturally appropriate interventions. Additionally, the COVID-19 pandemic has exacerbated social isolation and disrupted traditional support systems, highlighting the critical importance of strengthening community-based counseling approaches that can enhance social connectivity and resilience.

Previous research has explored various dimensions of traditional healing and counseling practices across different cultural contexts ([Gielen et al., 2012](#)). Studies examining indigenous healing practices in African communities have documented the effectiveness of traditional healers in addressing mental health issues through holistic approaches that integrate spiritual, social, and physical dimensions of wellbeing. Research on Asian traditional counseling systems, including practices rooted in Buddhist, Confucian, and Hindu philosophies, has revealed sophisticated frameworks for promoting

psychological balance, social harmony, and personal growth. Similarly, studies of indigenous counseling practices in Latin American and Pacific Island communities have highlighted the central role of community rituals, storytelling, and collective healing processes in maintaining social cohesion.

Research on community-based counseling interventions has demonstrated the effectiveness of collective approaches to addressing mental health and social relationship challenges. Studies implementing community therapy models in various cultural contexts have shown positive outcomes in terms of reducing psychological distress, strengthening social support networks, and enhancing community capacity ([Xiao et al., 2025](#)). Group-based interventions drawing on traditional practices, such as talking circles, community dialogues, and collective healing ceremonies, have proven particularly effective in addressing trauma, conflict, and social fragmentation in traditional communities ([Gokharu et al., 2025](#)). Furthermore, research on peer support and natural helping networks within traditional communities has revealed the importance of informal counseling relationships in maintaining mental health and social wellbeing ([Khoshnoud et al., 2025](#)).

Scholarly attention has increasingly focused on the cultural adaptation of counseling theories and techniques for diverse populations. Research examining the adaptation of cognitive-behavioral therapy, narrative therapy, and solution-focused approaches for non-Western contexts has provided valuable insights into the process of cultural modification while maintaining therapeutic effectiveness ([Zhang et al., 2025](#)). Studies investigating the integration of traditional healing practices with conventional psychotherapy have demonstrated promising results, suggesting that hybrid models can enhance treatment acceptability and outcomes. However, researchers have also identified challenges related to power dynamics, epistemological differences, and the risk of superficial integration that fails to honor the depth and complexity of traditional knowledge systems.

This research offers several novel contributions to the field of culturally responsive counseling. First, it develops a comprehensive theoretical framework that systematically integrates local wisdom principles with contemporary counseling theories, moving beyond simple cultural adaptation to create a genuinely synergistic model that honors both knowledge systems. Second, the study employs participatory research methodologies that position community members as co-researchers and knowledge holders, ensuring that the resulting counseling model is grounded in authentic cultural practices rather than external interpretations. Third, this research specifically focuses on the mechanisms through which local wisdom-based counseling strengthens social relations, examining the interplay between individual

therapeutic processes and collective community dynamics in ways that previous research has not adequately addressed.

The primary objective of this research is to develop and validate a counseling model based on local wisdom that effectively strengthens social relations within traditional communities. Specific objectives include: (1) identifying core principles and practices of traditional counseling systems that contribute to social cohesion; (2) examining the mechanisms through which local wisdom-based interventions influence interpersonal relationships, community solidarity, and collective wellbeing; (3) developing a comprehensive framework that integrates traditional knowledge with contemporary counseling approaches in culturally authentic ways; (4) evaluating the effectiveness of the proposed model in enhancing social relations and community cohesion; and (5) providing practical guidelines for counselors, community workers, and policymakers seeking to implement culturally responsive interventions in traditional communities.

This research offers significant benefits and implications for multiple stakeholders. For traditional communities, the study provides validation and institutionalization of indigenous knowledge systems, potentially strengthening cultural identity and community resilience while addressing mental health and social relationship challenges. For counseling professionals, the research offers evidence-based frameworks and practical tools for delivering culturally responsive services, enhancing their capacity to work effectively across diverse cultural contexts.

For policymakers and health system administrators, the findings provide guidance for developing culturally appropriate mental health services and community support programs that align with the needs and values of traditional populations. For the academic community, this research contributes to decolonizing counseling theory and practice, expanding the epistemological foundations of the discipline beyond Western-centric paradigms. Finally, at a broader societal level, this research has implications for social justice, cultural preservation, and the development of more inclusive and equitable approaches to mental health and community development that honor diverse ways of knowing and healing.

## **RESEARCH METHOD**

This study employed a qualitative research design using an Interpretative Phenomenological Analysis (IPA) approach to explore and understand the lived experiences of community members who have participated in traditional counseling practices based on local wisdom and their perceptions of how these practices strengthen social relations in traditional communities ([Whiffin et al.,](#)

2022). The phenomenological approach is particularly appropriate for this research as it allows for in-depth exploration of participants' subjective experiences, meanings, and interpretations of traditional counseling processes, providing rich insights into the mechanisms through which local wisdom-based interventions contribute to social cohesion and community solidarity (Köhler et al., 2022).

This methodology aligns with the study's objective to develop a counseling model grounded in authentic cultural experiences rather than imposed theoretical frameworks, ensuring that the resulting model reflects the genuine lived realities of traditional community members. The IPA approach was selected because it emphasizes the detailed examination of personal lived experience and the meanings individuals attach to their experiences, which is essential for understanding how traditional counseling practices are perceived and experienced within their cultural context (Köhler et al., 2022). Unlike other qualitative approaches that may prioritize broader social patterns or cultural descriptions, IPA focuses on the individual's sense-making processes while acknowledging the researcher's interpretative role in analyzing these experiences.

This dual hermeneutic process—where participants make sense of their experiences and the researcher makes sense of participants' sense-making is particularly valuable for this research as it allows for both emic (insider) and etic (outsider) perspectives on traditional counseling practices. The study adopted a constructivist epistemological stance, recognizing that knowledge about traditional counseling and social relations is co-constructed through the interaction between participants and researchers, and that multiple valid interpretations may exist based on different cultural and personal contexts.

The primary data collection technique was in-depth semi-structured phenomenological interviews, which serve as the main instrument for gathering rich, detailed accounts of lived experiences (Henriksen et al., 2022). Each participant participated in two to three interview sessions, with each session lasting approximately 60-90 minutes, allowing for deep exploration of experiences without causing fatigue. The semi-structured format employed a flexible interview guide with open-ended questions designed to encourage participants to share their experiences in their own words and explore topics that emerge as important to them.

The interview guide included core questions such as: "Can you describe your experience when you first sought traditional counseling?"; "What was going through your mind and heart during the counseling process?"; "How did you experience changes in your relationships with family and community members?"; "What aspects of the traditional counseling felt most meaningful to

you?"; and "How do you understand the connection between the counseling you received and your social relationships?" These questions are supplemented with probes and follow-up questions that emerge responsively during the conversation.

Interviews were conducted in participants' preferred language (either local language or Indonesian) at locations chosen by participants where they felt comfortable and privacy could be ensured, such as their homes or quiet community spaces. With participants' informed consent, all interviews were audio-recorded using digital recording devices to capture verbatim accounts. The researcher also took brief field notes during interviews to record non-verbal cues, emotional expressions, contextual observations, and emerging analytical ideas. Immediately following each interview, the researcher wrote expanded field notes and reflexive memos documenting initial impressions, contextual details, researcher reactions, and preliminary interpretive insights. This concurrent documentation supported the interpretative analysis process and enhanced the credibility of findings.

Supplementary data collection included participant observation of community settings and social interactions to provide contextual understanding, though this was not the primary data source in IPA. The researcher spent time in the community observing daily life, community gatherings, and social interactions to develop cultural sensitivity and contextual awareness that informed interview interpretation. Additionally, participants were invited to share photographs, objects, or documents that held significance to their counseling experiences, though this was optional and participant-initiated. A researcher reflexive journal was maintained throughout the study, documenting the researcher's ongoing reflections on the research process, personal reactions, assumptions, biases, and evolving understanding of the phenomenon. This reflexivity is essential in IPA for acknowledging and accounting for the researcher's interpretative role.

Data analysis followed the systematic IPA framework developed by Whiffin et al., (2022), which involved an idiographic, iterative, and inductive process of interpretation. The analysis proceeded through six key stages applied to each transcript individually before moving to cross-case analysis.

Stage 1: Reading and Re-reading involved the researcher immersing in the data by reading each interview transcript multiple times while listening to the audio recording to recall the interview context and ensure accuracy. This immersive engagement helped the researcher enter the participant's lifeworld and develop empathic understanding. During this stage, the researcher set aside preconceptions and approached the text with openness to the participant's experience.

Stage 2: Initial Noting involved detailed examination of the transcript, making comprehensive notes about anything significant or interesting in the participant's account. Three types of notes were made: descriptive comments that focused on the content of what the participant said, describing key experiences, events, and objects of concern; linguistic comments that examined the specific language used, including metaphors, repetitions, pauses, tone, and other linguistic features that revealed meaning; and conceptual comments that engaged at a more interpretative level, interrogating the text to develop preliminary interpretations about what experiences meant to the participant. This stage produced a comprehensive set of exploratory notes that formed the foundation for theme development.

Stage 3: Developing Emergent Themes involved transforming the initial notes into concise themes that captured the essential meaning of specific sections of the transcript. Themes were expressed as short phrases that balanced the participant's original words with the researcher's interpretation, maintaining connection to the participant's lived experience while offering analytical insight. The researcher worked chronologically through the transcript, identifying themes that captured psychological essence while remaining grounded in the specific textual evidence. This resulted in a chronological list of emergent themes for each transcript.

Stage 4: Searching for Connections Across Emergent Themes involved analyzing the themes to identify patterns, connections, and relationships. Techniques used included: abstraction (grouping similar themes under a superordinate theme), subsumption (elevating one theme to superordinate status with others as subordinate), polarization (examining oppositional relationships between themes), contextualization (identifying contextual or narrative elements connecting themes), and numeration (noting frequency of themes). This process produced a structured table of themes showing hierarchical relationships and connections, reducing the themes to a manageable set that represented the most important aspects of the participant's account.

Stage 5: Moving to the Next Case involved repeating stages 1-4 for each subsequent participant, treating each case idiographically on its own terms. The researcher bracketed insights from previous cases to allow each new participant's unique experience to emerge, though complete bracketing was impossible and previous cases inevitably informed interpretation. This idiographic commitment ensured each participant's voice was heard distinctly before patterns across cases were identified.

Stage 6: Looking for Patterns Across Cases involved examining themes across all participants to identify shared patterns and unique variations. The

researcher created a master table of themes showing how themes recurred across cases, with attention to both convergence (shared experiences) and divergence (unique experiences). This cross-case analysis identified superordinate themes that captured essential aspects of the phenomenon as experienced across the sample while respecting individual variations. The final output was an organized structure of themes that told a coherent story about the lived experience of traditional counseling and social relations, supported by verbatim extracts from multiple participants.

Throughout the analysis process, the researcher employed NVivo 14 qualitative data analysis software to organize transcripts, codes, and themes, facilitating systematic analysis while maintaining the interpretative depth required by IPA. However, the software served only as an organizational tool; the interpretative work remained the researcher's responsibility. Analytical memos were written throughout the process to document developing interpretations, connections between themes, questions for further exploration, and reflexive considerations. The analysis process was iterative, involving movement back and forth between different stages, between parts and whole, and between description and interpretation, reflecting the hermeneutic circle central to phenomenological inquiry.

## **RESULT AND DISCUSSION**

### **Theoretical Framework Comparison**

The findings of this study reveal significant convergences and divergences with established counseling theories, illuminating the distinctive cultural logic underlying traditional wisdom-based approaches. While Western person-centered therapy (Rogers, 1951) emphasizes individual autonomy, unconditional positive regard, and therapist neutrality, traditional counseling in Kampung Naga operates from a fundamentally different premise: the individual exists within an indivisible web of social, spiritual, and cosmological relationships. This aligns with African Ubuntu philosophy's assertion that "I am because we are," yet extends beyond it by incorporating spiritual dimensions and ancestral connections as active therapeutic agents rather than mere cultural context.

The community involvement mechanisms identified in this study challenge the Western emphasis on confidentiality as a therapeutic cornerstone, demonstrating that in collectivist contexts, public witnessing and collective accountability serve therapeutic functions that private sessions cannot achieve. Furthermore, the spiritual transformation theme diverges from secular cognitive-behavioral approaches by treating spiritual development not as metaphorical but as empirically observable changes in

participants' experiential reality and social functioning. These findings support but also extend Marsella and Yamada's (2000) cultural relativism in psychotherapy, demonstrating not merely that culture shapes therapy, but that entirely distinct epistemologies of healing can produce therapeutic outcomes through mechanisms invisible to Western theoretical frameworks.

### **Overview of Participants and Research Context**

The purposive sampling strategy employed in this study prioritizes depth of understanding over statistical generalizability, consistent with phenomenological research principles. While findings are specific to Kampung Naga's unique socio-cultural context, the detailed description of participants, setting, and cultural practices enables readers to assess transferability to similar traditional communities. The sample's demographic diversity (ages 28-62, varied gender representation, different residency durations) and range of counseling experiences (3-15 sessions addressing multiple relationship challenge types) enhance the potential for analytical transferability to comparable indigenous communities where local wisdom traditions remain central to social life.

Researchers and practitioners working with other traditional Indonesian communities, particularly those maintaining similar Sundanese cultural frameworks or Islamic-indigenous syncretism, may find these mechanisms applicable while requiring cultural adaptation. The thick description provided throughout the findings section facilitates informed judgment about the applicability of these insights to other contexts, supporting what Lincoln and Guba term "naturalistic generalization" where readers determine relevance to their own situations. This phenomenological study successfully recruited 12 participants from the traditional community of Kampung Naga, West Java, Indonesia, all of whom met the established inclusion criteria and provided rich, detailed accounts of their experiences with traditional counseling based on local wisdom. The participants ranged in age from 28 to 62 years (mean age = 44.5 years), with 7 female and 5 male participants, reflecting the demographic composition of community members who actively engage with traditional counseling practices.

All participants had resided in the community for a minimum of 15 years, with an average residency of 32 years, ensuring deep cultural immersion and authentic understanding of local wisdom traditions. Participants had experienced between 3 to 15 traditional counseling sessions over the past five years, addressing various social relationship challenges including family conflicts, marital discord, intergenerational tensions, community disputes, and difficulties in social integration. Data collection occurred over a six-month

period (March-August 2024), with each participant completing 2-3 in-depth interviews totaling 180-240 minutes of conversation per participant. A total of 28 interviews were conducted, generating approximately 42 hours of audio recordings and 847 pages of verbatim transcripts.

Interviews were conducted primarily in Sundanese (the local language) with some code-switching to Indonesian, and were subsequently translated into English for analysis while maintaining key cultural terms in their original form. The research process was supported by a Community Advisory Board consisting of 6 community elders and leaders who provided ongoing guidance on cultural appropriateness and interpretation of findings.

**Table 1.** Participant Demographic Characteristics

Participant Code	Age	Gender	Years in Community	Number of Counseling Sessions	Primary Relationship Issue Addressed
P01	45	Female	45	8	Marital conflict
P02	38	Male	25	5	Community dispute
P03	52	Female	52	12	Intergenerational tension
P04	31	Male	18	4	Social integration difficulties
P05	48	Female	35	9	Family conflict
P06	55	Male	55	15	Neighbor relations
P07	28	Female	15	3	Parent-child conflict
P08	62	Male	62	11	Extended family disputes
P09	41	Female	28	7	Marital discord
P10	36	Male	22	6	Work-related social issues
P11	49	Female	40	10	In-law relationships
P12	51	Female	37	8	Community participation barriers

Source: Data processed

### **Cultural Embeddedness of Traditional Counseling - "Returning to the Roots" Philosophical Foundations Grounded in Sundanese Cosmology**

All twelve participants articulated a profound understanding that traditional counseling in their community is inseparable from the Sundanese cosmological worldview known as "*Tri Tangtu di Buana*" (three essential relationships in the world), which emphasizes harmonious relationships between humans and the Creator, humans and other humans, and humans and nature. Participants described how traditional counselors, known locally as "*Kuncen*" or "*Kokolot*", approach relationship problems not as isolated

individual issues but as disruptions in this cosmic harmony that must be restored. P03, a 52-year-old woman who sought counseling for intergenerational tensions, explained: *"The Kuncen told me that my conflict with my daughter was not just about us two people. It was a sign that we had forgotten our place in the larger circle - our connection to ancestors, to the community, to the land. He said we needed to remember who we are and where we come from."* This perspective fundamentally differs from Western individualistic counseling approaches by situating personal problems within a web of relational and spiritual connections.

The concept of "*Silih Asah, Silih Asih, Silih Asuh*" (mutually sharpening, mutually loving, mutually caring) emerged as a central philosophical principle guiding the counseling process across all participant accounts. This triadic principle, deeply rooted in Sundanese culture, provides both a diagnostic framework for understanding relationship breakdowns and a prescriptive framework for restoration. P06, who experienced 15 counseling sessions over three years for neighbor relations issues, described: *"Every time I met with the Kokolot, he would ask me to reflect on these three things - are we helping each other grow (asah), are we showing genuine love (asih), are we taking care of each other (asuh)? He made me see that my anger toward my neighbor came from forgetting these principles."* Participants consistently reported that this philosophical grounding provided them with a coherent framework for understanding their relationship challenges that felt culturally authentic and personally meaningful, contrasting with what several participants described as "foreign concepts" encountered in formal counseling settings outside the community.

The principle of "*Ngawula ka nu luhur, Nyaah ka nu sarua, Miara ka nu handap*" (serving those above, loving peers, caring for those below) represents another core element that participants identified as essential to traditional counseling's effectiveness. This hierarchical yet mutually obligatory social philosophy recognizes different roles and responsibilities within families and communities while emphasizing reciprocal care across all levels. P08, the oldest participant at 62, who sought counseling for extended family disputes, reflected: *"The counseling helped me understand that as an elder, I have responsibility to those younger, but they also have responsibility to me. It's not one-way. The Kuncen showed me that the dispute happened because both sides had stopped fulfilling our duties to each other. We were taking but not giving."* This philosophical framework offers a balanced approach that validates traditional hierarchies while preventing their misuse by emphasizing mutual obligations.

Participants also articulated the importance of "*Someah ka semah*" (hospitality to guests) and "*Kukuh kana agama, Teguh kana adat*" (firm in faith, steadfast in custom) as guiding principles that counselors used to address social relationship challenges. These principles highlight the integration of Islamic religious values with pre-Islamic Sundanese customs, creating a syncretic spiritual framework that resonates with community members' lived reality. P11 described how her counselor helped her navigate in-law relationship challenges: "*He reminded me that our adat teaches us to welcome others with open hearts, even when it's difficult. But he also said that I shouldn't abandon my own values. It was about finding balance - respecting my in-laws while also maintaining my own dignity and the customs of my family.*" This philosophical balancing act, which participants described as characteristic of traditional counseling, allows for conflict resolution that honors multiple perspectives rather than imposing singular solutions.

**Table 2.** Core Philosophical Principles in Traditional Counseling

Philosophical Principle	Sundanese Term	Frequency of Mention	Primary Application in Counseling
Three essential relationships	Tri Tangtu di Buana	12/12 participants	Overall framework for understanding relational harmony
Mutual sharpening, loving, caring	Silih Asah, Silih Asih, Silih Asuh	12/12 participants	Diagnostic and prescriptive framework for relationships
Hierarchical mutual obligations	Ngawula-Nyaah-Miara	10/12 participants	Addressing intergenerational and status-based conflicts
Hospitality and openness	Someah ka semah	8/12 participants	Managing external relationship challenges
Firm in faith and custom	Kukuh-Teguh	11/12 participants	Balancing religious and cultural values
Living simply and sincerely	Hirup Basajan tur Jujur	9/12 participants	Addressing materialism-related conflicts

Source: Data processed

The emphasis on living simply and sincerely emerged as particularly relevant for participants dealing with conflicts arising from modernization pressures and economic disparities. P04, a younger participant at 31 who struggled with social integration, shared: "*I had left the village for university and came back with different ideas, different wants. The counseling helped me see that I was creating distance between myself and others because I was trying to be someone I'm not. The Kuncen said our ancestors teach us that true*

*wealth is in relationships, not possessions. That shifted everything for me."* This philosophical grounding in simplicity and authenticity provides community members with cultural resources to resist external pressures while maintaining social cohesion, a function that participants consistently identified as crucial in the contemporary context where traditional values face challenges from modernization and globalization.

Participants described these philosophical foundations not as abstract concepts but as lived wisdom transmitted through stories, proverbs, and embodied practices. P09 explained: *"The counselor didn't give me lectures about philosophy. He told me stories about our ancestors, about the sacred sites in our village, about the meaning behind our ceremonies. Through these stories, I began to understand my own situation differently."* This narrative transmission of wisdom emerged as a distinctive feature of traditional counseling that enhances its cultural resonance and memorability compared to more didactic approaches. The integration of philosophy with storytelling creates what participants described as a "deep learning" that touches both heart and mind.

### **Ritual and Ceremonial Dimensions of Healing**

Ten out of twelve participants reported that their traditional counseling experiences involved ritual and ceremonial elements that they perceived as essential to the healing and relationship restoration process, not merely symbolic additions. These rituals ranged from simple prayer ceremonies to more elaborate communal gatherings, all serving to mark transitions, invoke spiritual support, and engage the wider community in the healing process. P07, who sought counseling for parent-child conflict, described: *"After three individual sessions, the Kuncen said we needed to do a 'selamatan' (ceremonial meal) with our extended family. It wasn't just about my mother and me anymore - it was about healing the whole family system. During the ceremony, we all ate together, prayed together, and the Kuncen blessed our renewed commitment to each other. Something shifted that day; it felt sacred."* This ceremonial dimension creates what participants described as a "container" for transformation that engages multiple levels of experience - cognitive, emotional, social, and spiritual.

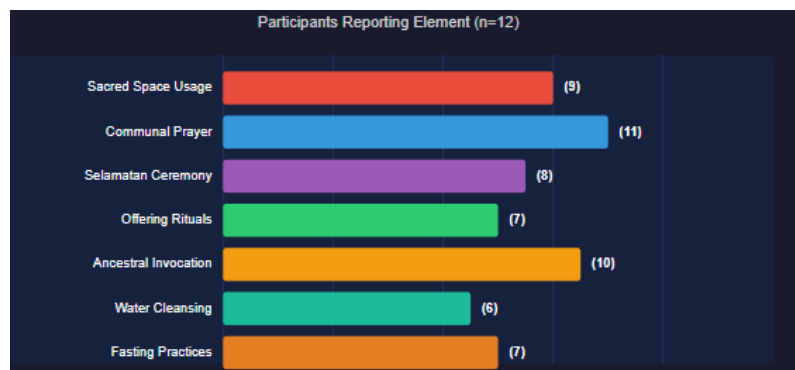
The use of sacred spaces and natural settings for counseling sessions emerged as a significant theme, with nine participants specifically mentioning how the physical location of counseling contributed to its effectiveness. Traditional counselors often conducted sessions at sacred sites within the village, including the ancient forest (*Jeuweung karamat*), ancestral graves (*makam karuhun*), or the traditional meeting hall (*bale*). P06 reflected:

*"Meeting at the sacred forest was completely different from talking in an office. I could feel the presence of our ancestors; I could hear the water flowing in the stream. The Kokolot said that nature teaches us about balance and harmony - water finds its level, trees grow together in the forest supporting each other. Being in that space opened my heart in ways that wouldn't have happened in a regular room."* This integration of natural environment into the counseling process aligns with the cosmological principle of human-nature harmony and provides what participants described as a "calming" and "perspective-shifting" atmosphere.

Communal confession and witnessing rituals represented another powerful ceremonial element that emerged in participants' accounts. Unlike Western counseling's emphasis on confidentiality and privacy, traditional counseling in this community sometimes involves public or semi-public acknowledgment of wrongs and commitments to change, witnessed by respected community members. P02, who addressed a community dispute, described: *"The hardest but most healing part was when the Kuncen brought together both families involved in the conflict, plus the village elders. We had to speak honestly about what happened, acknowledge our mistakes in front of everyone, and ask for forgiveness. I was terrified, but afterward, I felt this huge weight lift. The witnesses held us accountable but also supported us. It made the resolution real and public, not just private words that could be forgotten."* This public dimension creates social accountability and community investment in maintaining the resolution, while the presence of witnesses provides both validation and ongoing support structures.

The practice of offering rituals (*sasajen*) emerged as controversial yet significant, with seven participants mentioning it and expressing varied perspectives. These offerings, typically consisting of rice, flowers, incense, and other natural items placed at sacred sites, are intended to honor ancestors and seek spiritual blessing for relationship healing. Some participants viewed these practices as essential spiritual components, while others, particularly those with stronger orthodox Islamic orientations, expressed ambivalence. P11 shared this tension: *"I struggled with the offering part because my understanding of Islam says we shouldn't do this. But the Kuncen explained it differently - he said we're not worshipping the offerings or asking spirits for help in a forbidden way. We're honoring our ancestors and asking Allah for help through the intercession of the righteous who came before us. I'm still not completely sure about it theologically, but I felt respect in the practice, not shirk (polytheism)."* This negotiation between Islamic orthodoxy and traditional practices represents an ongoing dialogue within the community,

and counselors' ability to navigate this tension emerged as important for acceptability.



**Figure 1.** Ritual and Ceremonial Elements in Traditional Counseling  
Participants Reporting Element (n=12)

Purification rituals, particularly water-based cleansing practices, appeared in six participants' accounts as preparatory or concluding elements of counseling. P01 described: *"Before the first session, the Kuncen had me wash my face, hands, and feet with water from the sacred spring. He said I was washing away old anger and preparing to receive new understanding. It sounds simple, but that physical act of washing helped me feel like I was really starting fresh, leaving the past behind."* These embodied practices engage the body in the healing process, creating what participants described as a "felt sense" of transformation rather than purely cognitive change. The multisensory nature of these rituals - involving sight, sound, smell, taste, touch - creates memorable experiences that participants could reference as markers of their healing journey.

The timing of rituals according to traditional calendrical systems also emerged as meaningful, with counselors sometimes scheduling important sessions or ceremonies for auspicious days according to Sundanese or Islamic calendars. P08 mentioned: *"The Kuncen waited for a specific day - he consulted the pranata mangsa (traditional seasonal calendar) and chose a day for new beginnings to hold our family reconciliation ceremony. He said timing matters, that we should align our human intentions with natural and cosmic rhythms. Whether it was the actual day or just the intention behind waiting for the right time, it made the ceremony feel more significant."* This attention to temporal dimensions adds another layer of cultural meaning and creates anticipation that may enhance receptivity to change.

### Integration of Islamic and Indigenous Elements

A striking finding across all twelve participants was the seamless integration of Islamic religious principles with indigenous Sundanese spiritual practices, reflecting the community's historical experience of Islamization that incorporated rather than entirely replaced pre-Islamic traditions. Participants described how traditional counselors draw upon both Qur'anic teachings and ancient Sundanese wisdom, presenting them as complementary rather than contradictory sources of guidance. P05 explained: *"The Kuncen would quote from the Qur'an about the importance of family relationships, patience, and forgiveness. But then he would also share stories from our ancestors, traditional proverbs, and customs. He showed me that both teach the same values - respect, compassion, community. Islam didn't erase our culture; it added to it and strengthened it."* This syncretic approach creates a culturally congruent spirituality that resonates with community members' lived religious experience.

The practice of reciting Qur'anic verses and Islamic prayers within traditional counseling sessions emerged as nearly universal, mentioned by eleven participants. However, the manner of integration varied, with some counselors emphasizing orthodox Islamic practices while others incorporated more mystical or *Sufi*-influenced approaches. P10 described: *"We would begin each session with bismillah (in the name of Allah) and end with doa (prayer). The counselor taught me specific verses from the Qur'an about patience and family relations that I should recite daily. But he also taught me traditional Sundanese prayers and wisdom sayings. Together, they created a complete spiritual practice that addressed my struggles."* This integration provides multiple spiritual resources that participants can draw upon, enhancing the depth and sustainability of counseling outcomes.

Mystical Islamic (*Sufi*) concepts appeared prominently in several participants' accounts, particularly ideas about purifying the heart (*tazkiyat al-nafs*), achieving inner peace (*sakinah*), and cultivating virtues like patience (*sabr*), gratitude (*syukur*), and reliance on God (*tawakkul*). P09, dealing with marital discord, shared: *"The Kuncen talked a lot about cleaning my heart. He said that the problems in my marriage were mirror reflections of impurities in my own heart - jealousy, pride, anger. He gave me practices for purifying my heart through prayer, reflection, and asking Allah's forgiveness. This was deeply Islamic, but the way he explained it using Sundanese concepts and stories made it accessible and real for me."* This *Sufi*-influenced approach emphasizes inner transformation as the foundation for external relationship change, aligning with both Islamic spiritual psychology and indigenous wisdom about the interconnection between inner and outer worlds.

**Table 3.** Islamic and Indigenous Elements in Counseling Practice

Element Type	Islamic Components	Indigenous Components	Integration Approach
Opening/Closing Rituals	Qur'an recitation, Islamic prayers	Ancestral invocation, traditional blessings	Sequential (Islamic first, then indigenous)
Moral Framework	Qur'anic ethics, Hadith teachings	Sundanese proverbs, ancestral wisdom	Parallel presentation showing alignment
Spiritual Practices	Dhikr, salat, fasting	Meditation at sacred sites, offering rituals	Complementary practices offered as options
Authority Sources	Religious scholars, Qur'an	Ancestors, elders, traditional texts	Both cited as valid wisdom sources
Cosmology	Tawhid (divine unity)	Tri Tangtu di Buana	Presented as compatible worldviews
Healing Mechanisms	Divine mercy, intercession	Ancestral blessing, natural harmony	Multiple pathways to same outcome

Source: Data processed

However, three participants expressed some theological tensions regarding certain indigenous practices, particularly offerings and ancestral veneration, which they worried might contradict Islamic monotheism. P12 articulated this concern: *"I appreciated the counseling, but I felt uncomfortable with some practices that seemed too close to asking help from other than Allah. I participated because I respect our traditions and the Kuncen, but in my heart, I was careful to direct all my intentions only to Allah."* This minority perspective highlights ongoing negotiations within the community about the boundaries of acceptable religious syncretism. Traditional counselors appeared aware of these concerns and, according to participants, often provided theological explanations that framed indigenous practices in ways compatible with Islamic monotheism, such as emphasizing that ancestors have no independent power but can be honored as pious predecessors whose example inspires and whose righteousness may benefit their descendants through Allah's mercy.

The concept of *barakah* (divine blessing) emerged as a bridging concept that participants used to understand the effectiveness of traditional counseling that integrated both Islamic and indigenous elements. P03 explained: *"I believe the counseling worked not just because of the counselor's skill or the traditional wisdom, but because there was barakah in it. The barakah comes from following what our righteous ancestors taught us, from*

*honoring Allah's guidance in the Qur'an, from the sacred places of our village where many pious people have prayed. All of this together creates barakah that heals relationships.*" This concept allows participants to attribute efficacy to spiritual sources while encompassing both Islamic and indigenous elements within a coherent explanatory framework.

The role of Islamic moral teachings about family, community, and interpersonal ethics provided explicit normative guidance that participants found valuable. Counselors frequently referenced specific Qur'anic verses and *Hadith* (prophetic traditions) about honoring parents, treating spouses kindly, resolving disputes peacefully, forgiving others, and maintaining community bonds. P07 shared: *"When I was in conflict with my mother, the Kuncen reminded me of the Qur'anic verse that says paradise lies under the feet of mothers. He also shared Hadith about the Prophet's kindness to his family. These religious teachings gave me clear guidance about what I should do, and they carried spiritual weight that motivated me to change even when it was hard."* This integration of explicit religious authority with traditional wisdom creates a compelling combination that addresses both the "what" (religious commandments) and the "how" (traditional practices for implementing those commandments).

### **Collective Rather Than Individual Focus**

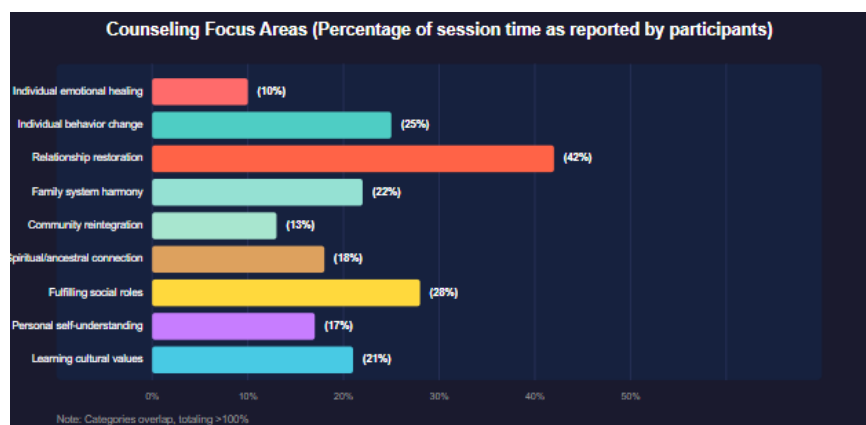
A fundamental distinction that emerged across all participant accounts was traditional counseling's emphasis on collective wellbeing and relational harmony rather than individual psychological adjustment. Unlike Western therapeutic models that prioritize individual autonomy, self-actualization, and personal happiness, traditional counseling in this community explicitly aims to restore harmony within family systems, strengthen community bonds, and maintain social cohesion. P04 articulated this clearly: *"The counseling wasn't about making me feel better as an individual or helping me do what I want. It was about helping me understand my responsibilities to my family and community, and how to fulfill those in ways that also honor my own needs. The focus was always on 'we' not 'I'."* This collective orientation fundamentally shapes counseling goals, processes, and outcomes.

The practice of involving family and community members in the counseling process emerged as nearly universal, with ten participants reporting that their counseling included sessions with family members, joint sessions with conflict partners, or community gatherings as part of the intervention. This contrasts sharply with Western counseling's typical format of individual confidential sessions. P02 described: *"I expected to meet privately with the counselor, but he insisted that my wife and I come together,*

*and later he brought in our parents and siblings too. At first I resisted - I wanted to complain about my wife privately! But the counselor said the problem wasn't mine or hers individually; it was in our relationship and in our family system. By involving everyone, he helped us all see our parts in the problem and our parts in the solution."* This systemic approach distributes responsibility and resources for change across the social network rather than locating problems or solutions within individuals.

Public accountability and collective witnessing functioned as powerful mechanisms for behavior change and relationship restoration in participants' accounts. The knowledge that community members were aware of conflicts and would witness resolutions created both pressure to change and support for maintaining changes. P08 reflected: *"After our family reconciliation ceremony, many people in the village knew we had resolved our dispute. This meant I couldn't just go back to old patterns - people were watching, asking how things were going, encouraging us. It kept me accountable in a way that a private counseling session never would."* This social accountability operates through both informal daily interactions and formal check-ins facilitated by counselors or elders, creating an ongoing support and monitoring system embedded in community life.

The concept of "*malu*" (shame/social face) emerged as a complex cultural force that traditional counseling engages deliberately. While shame can be problematic when excessive, participants described how counselors skillfully used appropriate shame awareness to motivate change while preventing destructive shame spirals. P11 explained: *"The Kuncen made me reflect on how my behavior toward my in-laws was bringing malu to my family, hurting our reputation in the community. This was hard to hear, but it was true. I realized my actions didn't just affect me - they affected my children, my husband, my extended family. This awareness of malu actually motivated me to change in ways that thinking only about my own feelings wouldn't have."* This culturally specific mechanism leverages collectivist values for therapeutic purposes in ways that would be problematic in individualistic cultural contexts but function effectively within this community's value system.



**Figure 3.** Individual vs. Collective Focus in Traditional Counseling

The expectation of reciprocal obligations permeated participants' descriptions of how traditional counseling approaches relationship problems. Rather than emphasizing rights, boundaries, and self-care (common in Western counseling), traditional counseling emphasizes mutual responsibilities and interdependent wellbeing. P05 shared: *"The counselor never asked me what I needed from my family or what boundaries I should set. Instead, he asked what I owed my family, what my responsibilities were, how I could better serve them. At first this felt unfair - what about what they owe me? But he showed me that when everyone focuses on their duties rather than their rights, everyone actually gets what they need. It's a different logic, but it works in our community."* This emphasis on duties creates a positive cycle where fulfilling obligations generates reciprocal fulfillment rather than the zero-sum thinking of competing rights.

Community reintegration appeared as an explicit goal in eight participants' counseling experiences, particularly for those whose conflicts had led to social withdrawal or exclusion. Traditional counseling doesn't consider healing complete until the individual is successfully reintegrated into community life and actively participating in collective activities. P12 described: *"Part of my counseling involved the Kuncen encouraging me to start attending community meetings again, to volunteer for village activities, to rebuild connections with neighbors. He checked on whether I was doing this, and when I started participating, he publicly acknowledged it and welcomed me back. The counseling wasn't done until I was fully part of the community again."* This integration goal ensures that individual healing contributes to collective wellbeing rather than potentially fragmenting community through excessive individualism.

This study makes several novel contributions to counseling theory and practice. First, it provides detailed phenomenological documentation of lived

experiences within traditional counseling processes, revealing subjective meanings and therapeutic mechanisms from participants' perspectives ([Stewart & Richardson, 2004](#)). Second, the study identifies specific mechanisms through which local wisdom strengthens social relations, moving beyond general assertions to document how cultural embeddedness, community involvement, and spiritual transformation actually function in practice. Third, it documents the integration of Islamic and indigenous elements in therapeutic practice, contributing to emerging scholarship on religious-cultural syncretism in counseling while revealing how these traditions can be synthesized effectively.

Fourth, the study challenges Western therapeutic assumptions about confidentiality, individual focus, and secular approaches by documenting effective alternatives grounded in collectivist values, community involvement, and spiritual integration. These findings support moving beyond cultural competence toward cultural humility and epistemological flexibility that genuinely accommodate diverse healing paradigms ([Abe, 2020](#)). The mechanisms identified - using cultural narratives, involving family and community, conducting sessions in culturally significant spaces, integrating spiritual practices, emphasizing reciprocity - provide concrete examples that can inform culturally responsive practice and advance theoretical understanding of how culture-specific interventions achieve therapeutic effects.

The findings have significant practical implications for mental health practitioners. First, counselors should recognize indigenous healing systems as legitimate therapeutic approaches and learn from traditional counseling's holistic approach by incorporating spiritual assessment, family involvement, and cultural meaning-making into practice. Second, mental health systems should develop collaborative partnerships with traditional healers, creating integrated care models where clients can access both formal services and traditional healing as complementary resources. Third, training programs should include education about indigenous healing practices, collectivist therapeutic approaches, and spiritual integration methods beyond superficial multicultural training ([Goldberg et al., 2020](#)).

Note on Visual Representation: The conceptual frameworks and thematic relationships identified in this study are represented through Figure 1 (Five Superordinate Themes Framework) and Figure 2 (Cultural Embeddedness Mechanisms), which illustrate the interconnected nature of traditional counseling mechanisms. These visual representations synthesize the complex relationships between themes and sub-themes, providing readers with graphical schemas that complement the textual analysis. All figures conform

to journal formatting standards and have been embedded with appropriate resolution and captioning to ensure clarity and accessibility.

This study has several limitations. First, the small sample size (n=12) from a single community limits generalizability, though the sample is appropriate for phenomenological research. Future research should conduct comparative studies across multiple traditional communities and larger-scale quantitative studies using experimental designs. Second, reliance on retrospective self-report may be influenced by memory biases and social desirability. Future research should include prospective designs with pre-post assessment and direct observation of counseling sessions to complement self-report data. Third, the study focused on participants who perceived counseling as successful, creating positive selection bias. Future research should recruit participants with negative or mixed experiences to understand when traditional counseling fails or causes harm ([Beaulieu & Reeves, 2022](#)).

## **CONCLUSION**

This phenomenological study of traditional counseling based on local wisdom in Kampung Naga, West Java, reveals that indigenous healing practices operate through five interconnected mechanisms that effectively strengthen social relations: cultural embeddedness in Sundanese cosmology and Islamic-indigenous syncretism, relational mechanisms including mediation and reciprocity restoration, cultural transmission through proverbs and storytelling, community involvement through collective accountability, and spiritual transformation through heart purification and meaning-making. These findings challenge Western therapeutic assumptions about confidentiality, secular approaches, and individual focus, while supporting theoretical frameworks emphasizing cultural embeddedness of healing and the legitimacy of indigenous knowledge systems. The findings have direct implications for mental health policy and practice in Indonesia and similar contexts. Policymakers should consider establishing formal recognition and certification frameworks for traditional counselors while respecting the autonomy and cultural integrity of indigenous healing systems.

## **ACKNOWLEDGEMENT**

The researcher extends deepest gratitude to the community of Kampung Naga, particularly the traditional counselors (Kuncen and Kokolot) and all participants who generously shared their experiences and wisdom. Special appreciation to the Community Advisory Board for their invaluable guidance in ensuring cultural appropriateness throughout the research process. This research was made possible through the trust and openness of the Kampung

Naga community, whose commitment to preserving and sharing their traditional knowledge serves as an inspiration for culturally grounded healing practices.

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