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AFRICAN SELF-CONSCIOUSNESS AND THE MENTAL HEALTH OF AFRICAN-AMERICANS

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Today we hear that conventional forms of mental illness (e.g., neurotic and psychotic reactions, drug addiction and abuse, suicidal behavior, deviant sexual behavior, and emotional stress generally) among African-Americans are approaching alarmingly high rates. Current estimates suggest that 1 out of every 20 to 25 urban Blacks is likely to encounter one of the traditional Western treatment-correctional institutions each year. Beyond these alarming statistics, consider the socio-political plight of Black people throughout the world today, amd especially in Africa and America, much of which has psychological implications itself. For example, Blacks are being oppressed by Europeans (and have been for some time) throughout the world. We are almost totally economically dependent on Europeans and our life-support resources

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AUTHOR'S NOTE: *This article expands on ideas found in James Baldwin's* Afrikan (Black) Personality: From an Africentric Framework *(Chicago: Third World Press, 1982).*

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are almost totally controlled by Europeans also. Most Black people also lack true racial-cultural consciousness, our so-called educated people are intellectually dependent upon Europeans, and our values and attitudes as well as our politics and so-called leadership itself are all merely imitative of the European community. Despite our being practically on the edge of *self-destruction* as a racial-cultural group, most of us seem unconcerned, unalarmed, and quite comfortable with this insidious form of collective pathology, genocide, or what has been called "Mentacide" (Wright, 1979).

These latter forms of problem behaviors among African people throughout the world are surely just as abnormal and dysfunctional as are the former, more conventional forms of problem behaviors. Both forms clearly epitomize just how potent a psychological force Western oppression has been in almost totally distorting (and almost destroying as well) the psychological adaptiveness of African people. It further illustrates just how far Black people's behaviors have departed from the normal-healthy realm of functioning without any widespread recognition of such a basic, contradictory state of mental health affairs. In other words, it is clear that when the concept of abnormal behavior is extended to incorporate those behaviors that pose a basic threat to the survival (physical-psychological, individual-collective) of the organism, then the true prevalence of disorder and abnormality in African-American behavior becomes clearer. Black psychologists, in fact, are now beginning to recognize the importance of broadening the context of Black mental health to encompass these more sociopolitical behavior patterns that have clear psychological implications where the welfare and survival of the Black community is concerned (Akbar, 1974, 1979; Baldwin, 1980a, 1980c, 1981; X[Clark] et al., 1975; Nobles, 1976b; Wright, 1979).

Given the complex psychological predicament that this dangerous trend in self-destructive behaviors among Black people represents, it would appear that we must begin to

generate some basic psychological models of the African reality structure that allow us to explain as fully as possible the sociocultural forces that account for such a dangerous phenomenon as is the current state of Black mental health. Additionally, we need models that will explain the psychological forces that actually define the phenomenon of Black mental health, its operation, and those preventive-intervention mechanisms that are necessary to correct and irradicate the self-destructive tendencies noted earlier. Toward this overall objective, let us first consider what the nature of the African personality is, and second, how our understanding of the African psyche allows us to explain the obvious aberration in it to account for the current self-destructive predicament of African-American mental health.

THE AFRICAN PERSONALITY

Although many attempts have been made toward articulating the nature of the Black personality, few have undertaken such explanations within the framework of the African reality structure, or what we call "African cosmology" (Baldwin, 1976). The crucial difference between the theories of the first variety (non-Africentric theories) and those of the second (Africentric theories) is that the former tend to conceptualize the Black personality as more or less the net result of Western oppression (i.e., emphasis on the Western or European reality in the nature and operation of Black personality), while the latter point to the natural and fundamental condition of the Black personality (i.e., emphasis on the African reality structure in the nature and operation of Black personality). The Africentric theories thus allow us to conceptualize not only the natural condition of Black personality but also the extent to which the Black personality has become estranged from its natural condition under the "unnatural" influence of the Western reality structure that dominates American society

(Baldwin, 1980a; Nobles, 1976b). Of this latter group of theories (Africentric theories), the one proposed by Baldwin (1976, 1980a, 1980b, 1982) is representative and will be employed to explain the problem of Black mental health in Western society.[1]

BALDWIN'S AFRICENTRIC MODEL OF BLACK PERSONALITY

According to this theory, Black personality consists of a core system called the *African Self-Extension Orientation* and *African Self-Consciousness*, and a number of basic traits emanating from the core. The African Self-Extension Orientation is the foundation of the Black personality: It is the organizing principle of the entire system. It is innate (biogenetically determined), unconscious, and operationally defined by the concept of "spirituality"—a dynamic energy that allows the self to merge (extend) into the totality of phenomenal experience. African Self-Consciousness derives from the African Self-Extension Orientation and is essentially an "undifferentiated process" from the African Self-Extension Orientation under normal-natural conditions. It is the "conscious level" expression or dimension of the African Self-Extension Orientation. Being a derivative of the African Self-Extension Orientation, African Self-Consciousness is in part biogenetically determined, and because it is "conscious" by nature, it is also subject in part to environmental determination. (This, of course, is because consciousness evolves through experience, at least in part; see Nobles, 1976a.) African Self-Consciousness thus directs and guides the African Self-Extension Orientation. The former gives the latter conscious purpose and meaning. In other words, African Self-Consciousness defines the African survival thrust inherent in the Black personality. Given the sociopolitical context of African existence today, the African Self-Consciousness dimension of the Black personality core is

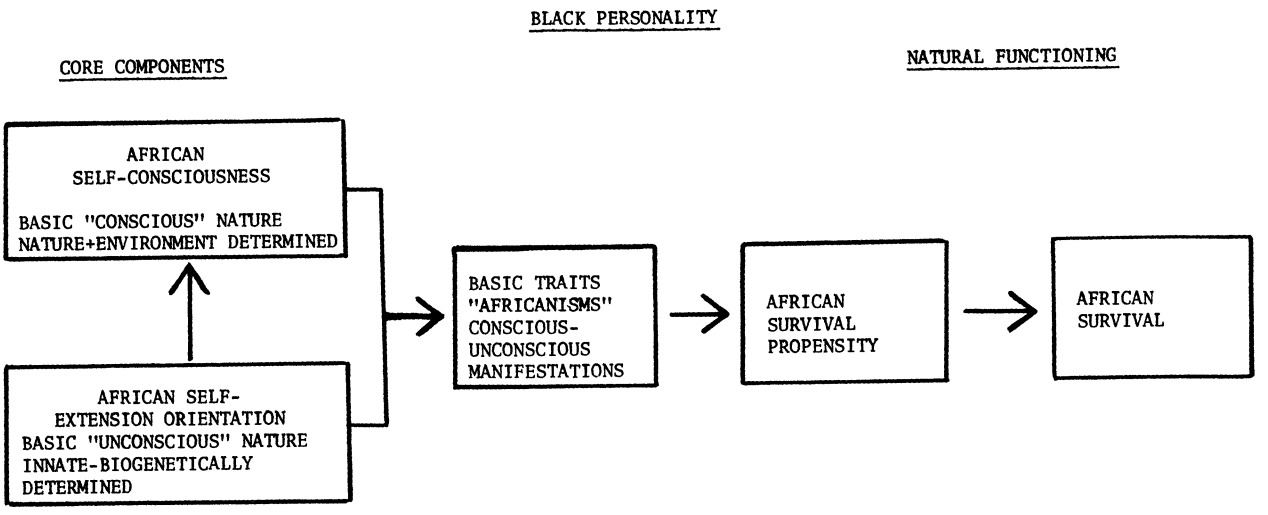

Figure 1: The African Self-Extension Orientation and African Self-Consciousness as the Basic Core of the Black Personality

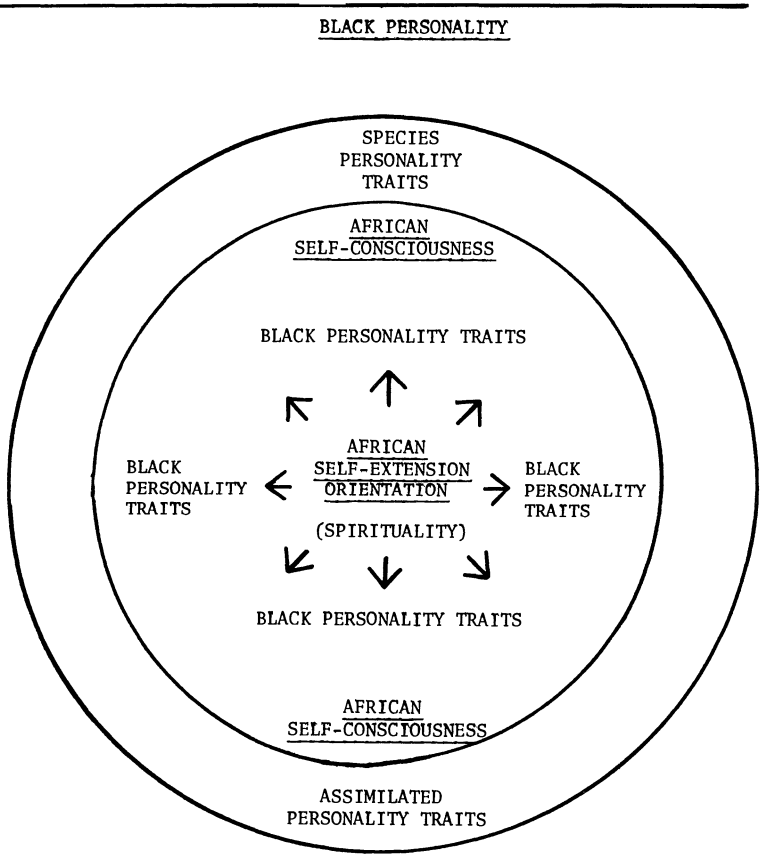

Figure 2: Spatial Illustration of the Black Personality Structure

extremely important to the effective and/or adaptive functioning of Black personality. This basic structure of Black personality based on Baldwin's model is illustrated in Figures 1 and 2.

Based on Baldwin's model, it should be clear that the African Self-Extension Orientation (its biogenetic potential) is immutable as the basic core of the Black personality. By the same token, however, it should also be clear that the same

condition does not hold for African Self-Consciousness, given its more basic dependence on experiential development. For example, *variability* in the actual manifestation of the Black personality in African people is explained in terms of experiential variability among individual Blacks. That is, it is dependent on the extent to which early socialization experiences and/or significant institutional-systemic processes actively nurture and reinforce the Black personality system. In a heterogeneous racial-cultural context or a highly socially mobile context (where an "alien cosmology" is likely to dominate the reality orientation of Black people), socialization processes that nurture and reinforce the active (and, especially, conscious) operation of this natural African disposition are likely to be lessened-distorted by such potentially mitigating circumstances, whereas a strengthening-reinforcing effect would be expected in a homogeneous racial-cultural context, and perhaps in low socially mobile contexts as well. Of course, a variety of psychologically distorting-indoctrinating circumstances of an institutional-systemic nature may also interact with and in some cases override ambiguous individual socialization conditions (such as in a multiracial-multicultural society where most of the basic institutional-systemic processes outside of the family are controlled-determined by one racial-cultural group's cosmology).

AFRICAN SELF-CONSCIOUSNESS AND BLACK MENTAL HEALTH

What all of this means is that there are circumstances that can and do interfere with or mitigate the normal functioning of the Black personality. These circumstances, where they do occur, are usually sociocultural in nature. In other words, such mitigating circumstances typically occur in a sociocultural context whereby the Black personality—its African reality structure—is superimposed upon by an alien (non-African)

reality structure. This usually occurs in a so-called multiracial-multicultural social order such as American society. In such an unnatural sociocultural context for the Black personality, the conscious-level functioning of Black personality in particular is subject to weakening and distortion from the superimposed influence of the alien cosmology. Again, this will be especially true where all institutional-systemic supports are controlled by the alien cosmology as well.

Given the importance of African Self-Consciousness to defining and directing the African survival thrust (i.e., in actualizing the African survival thrust potential of the Black personality system), the crucial relationship between this construct and the phenomenon of Black mental health should also be clear. This is because the condition of "disorder" in Black personality occurs at the level of African Self-Consciousness, not at the level of the African Self-Extension Orientation. In other words, where socialization and/or experiential indoctrination processes are reflective of an alien cosmology (as is the circumstance of most African-Americans today), to the extent that such an experience is experientially dominant (e.g., significant others in the form of persons or institutional processes) for the African person, then African Self-Consciousness is vulnerable to distortion/"misorientation" by the alien influence. When the alien cosmology is in fact anti-African, as in Western society, where the dominant cosmology is "European cosmology" (Baldwin, 1980a), then the nature of the distorting and misorienting influences on African Self-Consciousness becomes "anti-African" as well. In short, under such a condition of disorder in Black personality, the natural African survival thrust of African Self-Consciousness becomes distorted to an anti-African/self-destructive "alien survival thrust." In the case of African-Americans specifically, a *pseudo-European self-consciousness* comes to dominate their natural African Self-Consciousness. This complex condition of disorder based on Baldwin's model is illustrated in Figure 3.

The broken lines in this diagram indicate the unnatural weakening in the unity of functioning between African Self-

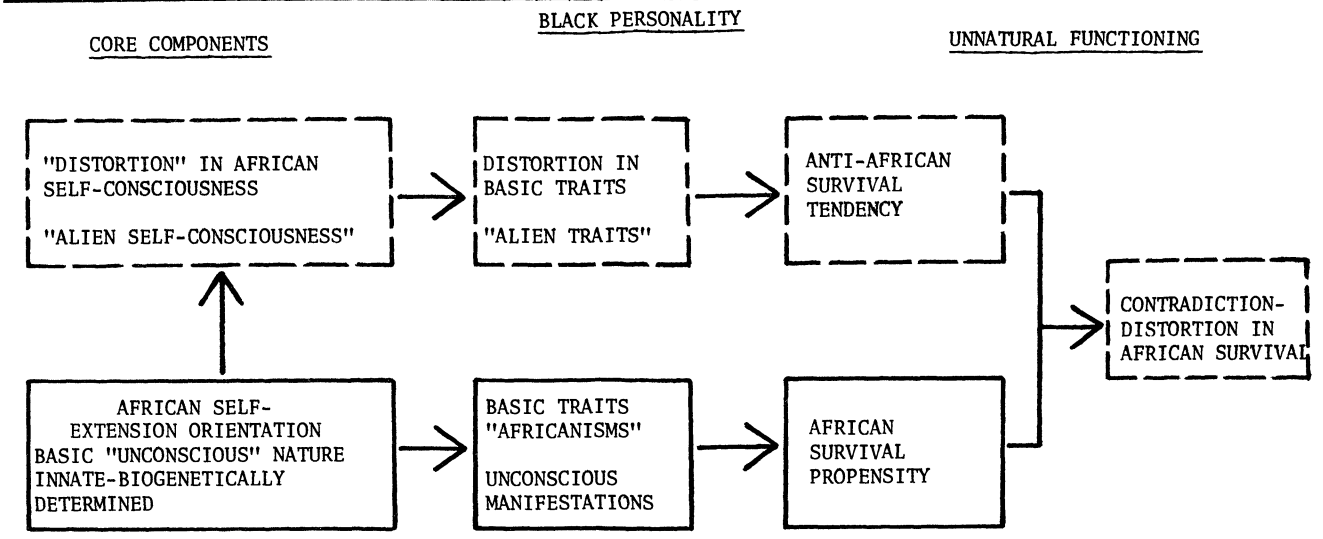

Figure 3: Illustration of "Disorder" in Black Personality at the Level of African Self-Consciousness (resulting from the distorting influence of Western cosmology)

Consciousness and the African Self-Extension Orientation. Disorder in the Black personality thus occurs whenever the normal and natural relationship (unity or undifferentiated form) between African Self-Consciousness and the African Self-Extension Orientation is no longer maintained (i.e., these basic processes become "differentiated"). Consequently, when an abnormal-unnatural relationship (incongruence or differentiation) characterizes the operation of the core components of the Black personality, we have a case of basic disorder. Given the fundamental "oppositional" nature of African and European cosmologies (Baldwin, 1980a, 1982; Nobles, 1976a, 1976b), under conditions where European cosmology achieves dominance over the natural African cosmological orientation of Black people, as in Western society (which defines an abnormal-unnatural condition for the Black personality), the result is a state of disunity in the operation of African Self-Consciousness relative to the African Self-Extension Orientation.

Note that this model of Black personality provides us with an entirely different framework for conceptualizing the phenomenon of Black mental health. Here the notion of mental health is clearly grounded in the universal principle of "Organismic Survival Maintenance" (Baldwin, 1980b), which assumes that all functionally normal organisms strive to secure, protect, and maintain their own survival.

DISORDER IN BLACK PERSONALITY: APPLICATIONS OF BALDWIN'S MODEL

Consistent with Baldwin's model, Na'im Akbar (1979) has proposed a classification system of mental disorders among African-Americans. Akbar has three classifications relating directly to Baldwin's model: (a) the Alien-Self Disorders; (b) the Anti-Self Disorders; and (c) the Self-Destructive Disorders.

The Alien-Self Disorders. These are essentially African-Americans who have become oriented toward materialistic goals. They see themselves as material and evaluate their worth according to the prevalence of material accumulations. Such persons are preoccupied with materialistic values, social affluence, and rational priorities (to the exclusion of moral imperatives). They have also come to deny the realities of race, racism, and oppression, and strive to emulate those behaviors reinforcing of European cosmology. The lives of persons characterized by these disorders represent a blatant rejection of their natural dispositions. Consequently, these African-Americans have become alien from their African Self-Consciousness.

The Anti-Self Disorders. These are African-Americans who, while possessing similar characteristics to the Alien-Self Disorders, also display both overt and covert hostility toward anything African. They have come to identify with and emulate European cosmology to the point of projecting direct hostility and negativism toward Africanism (i.e., themselves). Unlike the Alien-Self Disorders, however, this group feels quite comfortable with its alien identification and usually epitomizes normal-healthy functioning as defined by European cosmology. Many African-Americans who are victimized by this class of disorders even reach the apex of self-rejection by choosing marriage partners from the alien group. This class of disorders is therefore more severe (more out of touch with African Self-Consciousness) than the Alien-Self Disorders.

The Self-Destructive Disorders. These are African-Americans who, upon encountering the brutality and dehumanizing thrust of Western oppression, have struggled to adjust and survive this unnatural condition in the best way they knew how—usually faulty and destructive ways. Unlike the other two classes of disorders, these are persons who either have not had the opportunity to identify with European cosmology or,

through great struggle, have resisted-rejected some of the basic aspects of it. African-Americans suffering from this class of disorders are more or less the direct victims of Western racism. They have become caught up in a vicious cycle of "survival at any cost" that is so obscurely defined that they end up engaging in personally destructive behaviors (e.g., pimps, pushers, prostitutes, addicts, and psychotics). Members of this group, much like those in the other classes of disorders, have lost touch with basic aspects of their natural African Self-Consciousness.

Based on Akbar's (1979) scheme, we can clearly see the variety of anti-African tendencies that result from the unnatural influence of European cosmology on African-Americans. This unnatural condition, when effective in affecting the psychological functioning and behavior of Black people, obscures and distorts the natural African survival thrust of Black people as dictated by African cosmology. Thus, consistent with Baldwin's model, Akbar's classifications of mental disorders among African-Americans clearly point to the existence of severe distortion in Black people's African Self-Consciousness.

Overall, this theory allows us to explain nearly all of the distortions, pathologies, and self-destructive tendencies that are prevalent in African-American behavior today. For example, the vivid psychological pathologies among Blacks as captured by Carter G. Woodson (1933), E. Franklin Frazier (1957), Nathan Hare (1965), Frantz Fanon (1967), Grier and Cobbs (1968, 1971), Jafotito Sofola (1973), Paul Smith (1975), Braithwaite et al. (1979), and Malcolm X's autobiography (among many others) and the countless novels that depict various hypothetical portrayals of self-destructive behaviors in contemporary African-American life (albeit most are actually based on real-life situations) all serve to confirm the existence of severe distortions in African Self-Consciousness among Black people.[2] Whether one observes our so-called political life (where the emphasis is placed obsessively on voting, inte-

gration, and simple participation rather than on self-determination), our religious life (in which we absurdly worship God and other dieties in the images of our enemies, among many other gross contradictions of historical fact), or our educational life (where our education itself is controlled by our enemies), the blatant pattern of distortion in our African Self-Consciousness is clear. In fact, the very nature of Black people's "blanket dependency" on Europeans (for our psychological-intellectual existence as well as our physical-material existence) clearly reveals that African-Americans by and large have assumed a European self-consciousness (an anti-African self-consciousness) that has been superimposed upon, and thereby severely distorted, their natural African Self-Consciousness (Akbar, 1974, 1979; Baldwin, 1980a, 1980b, 1980c; Nobles, 1976b; Smith, 1975; Wright, 1979). Descriptively, this distortion in African Self-Consciousness manifests itself in terms of a phenomenon that I refer to as "Psychological Misorientation" (Baldwin, 1980a, 1980b). Psychological Misorientation is an incorrect orientation to reality. It appears functionally normal within the framework of European cosmology because, among other things, all of the social cues and institutional support systems throughout Western society reinforce the European survival thrust only. Thus African-Americans who think, feel, and act like Europeans (i.e., operate according to the European survival thrust, which is anti-African and anti-self for Blacks) are defined as "normal" and healthy by European cosmology. These African-Americans experience no overt anxiety or confusion over their identity or their normalcy because all social institutional processes in American society reinforce such pathology in Black people. Hence "Psychological Misorientation" refers to a grossly pathological condition in Blacks masquerading as functional normalcy.

The utility of this model in explaining African-Americans' blatantly self-destructive pattern of mental health is therefore clearly supported by the mass of data all around us. In

particular, Baldwin's model enables us to understand and explain most of these basic pathologies in Black mental health. In short, distortions in African Self-Consciousness define the basic nature of "disorder in the Black personality," and thus pose one of the greatest threats to African-American mental health.

PREVENTIVE INTERVENTION IN BLACK MENTAL HEALTH

Where implications for the treatment and prevention of these types of disorders in Black personality are concerned, Baldwin's model suggests that the primary focus lies in the area of African Self-Consciousness. The evidence again clearly suggests that most African-Americans exhibit severe distortion in their African Self-Consciousness because of their basic acceptance of the "anti-African survival thrust" of European cosmology (psychological assimilation). Thus African- Americans are in serious need of therapeutic intervention that is directed toward reestablishing the natural-harmonious relationship between the African Self-Extension Orientation and African Self-Consciousness. These frustrated natural tendencies in the Black personality long to be "reunited," and appropriate intervention measures are necessary to reinstitute this natural union of oneness in nature and function among these core processes.

Within the framework of African psychology, our approach to the treatment and prevention of disorder in Black personality must therefore focus on the restoration of African Self-Consciousness; this should occur in a context or milieu that is consistent with African cosmology. Hence functionally relevant preventive intervention in African-American mental health must involve the implementation of social-communal-level therapeutic procedures in terms of the creation of "institutional-level" processes that define, support, and reinforce

our African Self-Consciousness (i.e., the creation of African institutions). These types of institutional-level processes can occur in many forms, of course. Some examples are educational institutions, religious and economic institutions, and social activities/celebrations/rituals (see Asante, 1980; Karenga, 1965, 1978; Madhubuti, 1973).

Given the nature of African cosmology and the prevalence of personality disorders among African-Americans, preventive intervention in Black mental health must occur as much at the broader community-institutional level as at the more traditional small groups level. Thus Black community mental health programs must be about *Black community development* if they are to be functionally relevant to the true needs of African-American people in the area of mental health preventive intervention. Of course, this requires first of all that African-American psychologists and mental health practitioners must begin to adopt an "Africentric" posture in their work if we are ultimately to understand the true nature of the Black personality and facilitate the "natural order" of its functioning.

CONCLUSIONS

It is hoped that this *Africentric* model of Black mental health will enable us (the Black community) to better understand the great complexity of subtle and insidious expressions of psychological genocide or self-destructiveness that are prevalent in the African-American lifestyle today. The recent upsurge in Black homicides, drug use, crimes against each other, the increased adoption by Blacks of the European reality orientation (i.e., a European self-consciousness) with its basic anti-African thrust and concomitant high incidence of neurosis, depression, suicidal behavior, and other deviant and psychotic patterns in general suggests the growth of a serious condition of pathology in contemporary Black mental health. Thus the Black personality that ostensibly has adjusted to Western society (an unnatural

process itself) is therefore characterized by a blatantly contradictory and self-destructive psychological state of affairs. The model presented herein has attempted to articulate exactly where in the Black personality structure this condition of "disorder" occurs, what its nature and manifestations are, and some appropriate intervention approaches toward rectifying and preventing this pathology of the African-American mind.

This theory of Black mental health thus takes us well beyond the narrow and Eurocentric approaches of traditional Western conceptions of psychological disorder to encompass such criteria as African identity, integrity, and survival priorities; African self-determination; and the proactive development of the total Black community. These more Africentric criteria characterize much of what has been defined herein as "African Self-Consciousness." Hence the development of the construct of African Self-Consciousness within the conceptual framework of African psychology allows for this type of reconceptualization of the construct of Black mental health.

In conclusion, it should be noted that, given the sociopolitical realities of the African world today (in particular, the African mind's "incarceration" to European cosomology throughout the world), our basic—functionally relevant—models of Black personality and Black mental health must have liberating implications for the African psyche itself. This theory purports to have such liberating implications for African people. We as Black or African psychologists must be about the liberation of the African mind from the self-destructive influences of European cosmology, and about its placement back within the natural confines if its own reality structure. This theory should facilitate our efforts toward this end.

NOTES

1. Baldwin's (1980b, 1982) theory actually represents the only difinitive model of the Black personality that has been developed thus far (firmly anchored) within the

Africentric category. Also note that the concept "Africentric" (as opposed to "Afrocentric") was chosen by a national group of Black psychologists (Black Psychology Task Force, SREB, Atlanta, Georgia, September 1979) in order to depart from the "surplus meanings" (commercial as well as other meanings) associated with the highly popular prefix, "Afro." The term "Africentric" otherwise carries essentially the same meanings as that inherent in the term "Afrocentric" as the latter is used by contemporary Black theorists). "Afrocentric," popularized by Molefi Kete Asante, has been adopted by the Buffalo School of Communicationists, and should be considered the equivalent of "Africentric."

2. The point is that most of the descriptions of pathology in Black psychological functioning and behavior that are portrayed in these various works can be explained by Baldwin's theory. In fact, these kinds of literary and so-called scientific portrayals of Black psychopathology were developed without the aid or guidance of an Africentric theoretical framework. Thus Baldwin's model of Black mental health provides these otherwise "non-Africentric observations" with a basic Africentric conceptual framework so that we can better evaluate their actual value in describing the symptomatic picture of disorder in the Black personality.

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