

#### **CHAPTER 1**

#### INTRODUCTION

#### 1.1 Overview

This chapter serves as the foundation of the study. Background information is provided, followed by the justification for the study. Thereafter, the research problem is introduced, leading towards the presentation of the research question. The researcher then discusses the delimitation of the scope of the study as well as the research goals. A brief view on the theoretical orientation of the study is offered, in addition to a section dedicated to clarifying key terms. The researcher then provides a synopsis of the research methodology and a brief structure of the research report.

# 1.2 Background

The prelude to this investigation commenced early in my clinical training during research into clinical interviewing and evaluation. The training institution is a South African based tertiary healthcare institution offering evaluative, diagnostic, and treatment interventions to patients who are directly affected with severe psychiatric disturbances. Progressively, it became apparent during my practical training, and via direct observation, that culture-related material did not feature as prominently as one would expect in a country that comprises of diverse cultures. In fact, Bhugra and Bhui (1997) made a similar observation. In this regard, Sinha (2000) is of the view that discounting culture corresponds with the repudiation of subjectivity and context. This implies a depreciation of the lived experiences of the patient. In acknowledging culture, one fosters the humanisation of patients (Kazarian & Evans, 1998). As previously mentioned, South Africa comprises many diverse cultures, but traditional African practices form a substantial part of the Black South African cultural milieu (Chick, 2000). As culture mediates psychological process (McCrae, 2001), an understanding of the way in which African culture influences psychopathological responses and experiences would potentially promote further appreciation of the experiences of a large faction of the clinical population in South Africa (see Thomas



& Bracken, 2004). Further observation and interest in this regard prompted the initiation of this study.

The topography of mental health care is currently in a process of transformation. It has become apparent that patients yearn for more than a diagnosis. They have a great need to appreciate their experiences from a cultural and social perspective (Thomas & Bracken, 2004). Culture influences views and experiences during the course of one's life, which then has an influence on behaviour. Thus, persons of different cultures may express similar behavioural tendencies, but express them according to culturally-sanctioned norms (McCrae, 2001). The logical question here, then, is: do people experience psychological distress according to culturally-sanctioned norms? This certainly lays the foundation for investigation into the field of cultural psychopathology and therefore substantiates questioning an African perspective on psychopathology.

In traditional African cosmology, the symbiosis between the seen and unseen is unquestionably acknowledged (Chandler, 1998). Of significance is culture's capacity to modulate emotional regulation (Eshun & Gurung, 2009). Numerous theories focused on the composition of emotion do not illustrate the African experience effectively (Dzokoto & Okazaki, 2006). In an attempt to illustrate the African experience, there appears to be a need for thorough assessment into African views on psychopathology. However, the need for exploring African conceptualisations of psychopathology is not new. Edgerton (1966) expressed this view by requesting that research forage within the African domain so as to inform academia in this regard. Edgerton's primary concern questioned Western nosologies as misrepresenting the cultural and social veracity of authentic African experience. The current study aims to address Edgerton's request to explore the possibility of African conceptualisations on psychopathology.

# 1.3 Justification for the study

In particular, the current investigation emphasised the current status of African perspectives on psychopathology of which a similar investigation could not be located by the author. Conducting such an investigation corresponds with Wilkinson's (2005)



guidelines to conduct a study such as the present investigation. In terms of temporal trends regarding clinical processes, it appeared that more recent literature (Gorman et al., 2004; Luck et al., 2002; McLay, Rodenhauser, Anderson, Stanton, & Markert, 2002; Pfeiffer, Madray, Ardolino, & Willms, 1998; Williams & Heikes, 1993) indicated a greater appreciation of culture, diversity, subjective experience, specificity regarding the course of psychopathology, the humanisation of clinical interviews, and acknowledging the complexity of human participants. This was in marked contrast to archaic literature (see Prince, 1915) which focused on patients as subjects and mere recipients of treatment protocols. It is therefore logical to infer that clinicians are moving towards a more holistic (inclusive) approach to understanding patients, in preference to a primarily diagnostic (reductive) system. Haidet and Paterniti (2003) also agree with this view. As such, a more holistic approach to understanding patients remains fairly contemporary. It was therefore anticipated that a large volume of the literature used in this study would comprise mainly of fairly contemporary academic articles.

Additionally, during the preliminary literature review, it appeared that literature relating to the analysis of psychopathology in the African context is broadly diffused within a variety of spheres, such as anthropology, and across transnational peripheries. As a result, it was necessary to utilise multinational and multidisciplinary resources to develop a system which was applicable in this regard. It was, therefore, beneficial to the current review to include comparative studies of literature focused on cultures in developing countries and/or literature focused on collective cultures (Kamwangamalu, 1999). Glazer (1997) was of the view that people have become multicultural beings as their behaviours are shaped by various cultures irrespective of their regional location. One may therefore understand specific cultures by juxtaposing perspectives which have a historical and/or a contemporary influence on a specific culture. Therefore, focusing on multicultural perspectives operating in Africa was extremely valuable to the current investigation. This process also serves as a foundation for not separating Africa from the Rest of the World. With these ideas in mind, it was clear that there was a need for a study aligned to the current investigation.



Wassenaar, le Grange, Winship, and Lachenicht (2000) suggest that focussing one's attention on African perceptions is extremely important, specifically if future research aims to consider cross-cultural perceptions. This study aims towards pursuing this suggestion. In addition, as suggested by Prilleltensky and Nelson (2002), it is anticipated that the study will comprehensively delve into the prevailing debates with regards to the applicability and/or limitations of mainstream psychological perspectives. For Fox and Prilleltensky (1997), this appears to be necessary in order to examine the cultural, cross-cultural, and multicultural dynamics applicable to the African context.

From my observations at a practical level, it was also evident that psychologists who operate within specific paradigms focused on information that was applicable to their frame of reference, particularly with regards to information received as a result of the personal, cultural, and educational experiences. However, according to Miller (1999), the acknowledgement of culture is important to most of the applicable frameworks irrespective of the discipline or paradigm. The implication here is that the inclusion of the cultural dimension will probably allow for more comprehensive assessment, thus implying that more accurate diagnoses can be made (Bhugra & Bhui, 1997). Miller (1999) maintains that culture is essential to psychology. Theory in psychology is dependent on meaning-based analyses of culture. Furthermore, theory rests on the appreciation of culture as vital to individual psychological growth.

Conducting the present study may confirm or disconfirm the suitability of contemporary clinical practice and/or underscore a need for potential research. The foremost purpose of conducting such an investigation is to recapitulate research findings and, by this means, aid the audience in appraising both effects and potentialities of the research (Higgins & Green, 2008). In Trujillo's (2008) opinion, expanding the knowledge base of indigenous knowledge systems assists in the diagnostic and treatment process, particularly amongst traditional communities. Certainly, research into culture will aid the transformation of clinical formulation in its journey towards a more holistic approach. Thus the emphasis on a biopsychosocial model of psychopathology ought to become more holistic and therefore biopsychosociocultural (Trujillo, 2008).



Wohl (2000) reviewed literature regarding psychotherapy with non-Western patients. It appears that researchers and clinicians alike contend that therapists who work with various cultures must aim to attain as much knowledge about a culture as possible, so as to develop insight into a patient's cultural influences. The time is ripe for academia and clinicians to focus more on culture-fit care (Tseng, 2006). Canino and Algería (2008) implore mental health professionals to integrate culture more frequently into their clinical formulations. This study aims to accommodate this request.

### 1.4 Research problem

Ake (1993) suggests that Africa is faced with a dilemma in terms of considering ethnicity as a conception. He indicates that Africans are subjected to an integrated consciousness, but society has fostered a process whereby subdivisions are formed giving what he terms a false impression of the makeup of the unified African culture. He also points out that it is unrealistic to believe that differences in language, values, and beliefs preclude diversity in ethnicity and therefore suggests that an informed view of the differences and similarities within various cultures be explored. This implies considering the hegemonies of culture and is in harmony with the aims of the current investigation. Just as the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR) may suggest a context-specific classification system (Western), it may transpire that many people in African societies appreciate psychopathology in culture-specific modes of expression (Guarnaccia & Rogler, 1999). The current investigation, however, aims to analyse literature in order to ascertain if an African perspective of psychopathology is necessary. In so doing, it is anticipated that diverse analyses of psychopathology be encouraged. Of concern in the current investigation would be to limit the opportunity of ethnocentrism within the study. Ethnocentrism is formed when one applies one's norms as the benchmark for assessing others. This often fosters stereotypical attitudes (Eshun & Gurung, 2009). The question remains whether Ake's and Guarnaccia and Rogler's views are in disharmony with the process of the world becoming a global village.

The idea of the world becoming a *global village* is exemplified in Eshun and Gurung's (2009) work. These authors suggest that frequent patterns of migration and voyaging have fostered a process whereby the world is becoming more global. Topics



such as acculturation, therefore, demand attention in any discussion relating to cultural perspectives. Acculturation may be defined as the shift experienced when an individual adapts to, and assimilates, qualities of a different culture (Eshun & Gurung, 2009; Reber & Reber, 2001). Eshun and Gurung indicate that integration, however, refers to the process whereby a person integrates the values and beliefs of the new culture, but simultaneously preserves his/her cultural values and beliefs. The person endeavours to maintain some form of equilibrium between the two cultures. In contrast, separation pertains to espousing the perspectives of a new culture in lieu of one's own cultural perspectives. Assimilation refers to the converse of separation and suggests that the individual actively attempts to preserve his/her cultural heritage, while simultaneously discounting the perspectives of the new culture. Finally, marginalisation is defined as neglecting to embrace one's own cultural perspectives, and/or new cultural perspectives. This process is understood to represent various adjustment difficulties (Eshun & Gurung, 2009). It would be of significance to consider these influences during the investigation, and may provide some understanding of the cultural dynamics affecting people on a daily basis. This is explored further on in the thesis.

Cultural groups are not disconnected, and overlap other cultures. As a matter of fact, individuals from all cultures absorb facets of other cultures into the perception of self (Patterson, 2004). Culture-specific groups may be becoming a rarity. The permutation of cultures within every society suggests that people, especially psychotherapists, are automatically developing the capacity to work with people from various cultures. Furthermore, attempting to generate specific theories and techniques to work with each culture and/or subculture would be impossible (Patterson, 1996). In addition, shared histories cultivate a shared culture (Ritchie, 1997). This is particularly significant in a continent such as Africa, defined by multicultural influences. One ought to also take note that the researcher is cognisant that some of the perspectives presented in this thesis will have little utility for some modern and/or acculturated Black populations. Adapting the scope of this study, for future research, may certainly be valuable in this regard.

Professor Asa G. Hilliard, the teacher, psychologist, and historian indicates that one should, at minimum, acknowledge the existence of culture (Mabie, 2000). Therefore,



while respect for multiculturalism will be exercised in this study, acknowledging the traditional African culture is equally important as it considers various aspects that may form part of the Black African perspective, including some perspectives of modernised Black Africans and those in the process of acculturation (see Mbiti, 1970). However, the motive behind focusing on the multicultural dimension is to promote the appreciation of cultural diversity (Grillo, 2007). A study that incorporates this dimension may facilitate introspection on the dynamics of the patient's distress, specifically on the clinician's part (Seixas, 1993), thereby allowing the practitioner to build a comprehensive history of facets which might otherwise have been ignored (Haidet & Paterniti, 2003). This seems to serve the purpose of reflecting on dynamic influences.

## 1.4.1 Research question

The research question stems from the need to develop a single point of reference for literature regarding an African perspective on psychopathology. Furthermore, the research question aims to address the debates regarding the utility of the cultural perspective in modern clinical practice, and in so doing encourage more culture-fit assessment. These areas were explored in detail in section 1.3. It appears that literature regarding an African perspective on psychopathology has increased from the year 1985. The researcher, however, decided to include literature from the beginning of that decade as a number of the sources between 1980 and 1984 seemed to contribute significantly to the scope of this investigation. Many of these sources appeared to debate the notion of African conceptualisation of mental illness, particularly with regards to modern/clinical psychiatric nosology.

It was during this observation process that the researcher developed the research question: In the academic literature, is there an African perspective on psychopathology from 1980 to 2010? The research question for this study thus addresses those aspects of literature which describe, or refute, an African perspective on psychopathology.



### <u>Sub-questions include the following:</u>

- Are etic and/or emic perspectives on psychological distress favoured in Africa?
- Do the present diagnostic and classificatory systems serve the needs of African populations?

# 1.4.2 <u>Delimitation of the scope of study</u>

The scope of this study is based in the broad sphere of clinical psychology. Thus, the focus is on theory and practice relating to psychology and the assessment and treatment of abnormal behaviour (Reber & Reber, 2001). Literature regarding psychological theory forms a substantial part of the research. This includes literature relating to underlying dynamics (Sadock & Sadock, 2007), defensive operations (Sadock & Sadock, 2007), subjective experience (Farrell, 1994; McDowell, 2003), thematic extrapolation (Smith, 2008), and systemic patterning (Becvar & Becvar, 1996), to name a few. Based on these considerations, that is to say conducting substantially extensive analyses of the literature, the research is suitable for a doctoral study as the scope suggests adding new knowledge to the current body of knowledge in the field of psychology. New knowledge, in the context of this thesis, includes constructing a single reference point for literature adhering to the inclusion criteria, as well as conducting an overt extrapolation of the universalistic and relativistic perspectives on culture and psychopathology. In other words, the investigation integrates various literature sources, but in so doing identifies if psychopathology in Africa differs from universalistic approaches. For instance, Tomlinson, Swartz, Kruger, and Gureje (2007) are of the view that no universal differences exist save for minor differences in the presentation of psychopathological symptoms. It is valuable, therefore, that this investigation considers the psychological influences on the presentation of symptoms.

This is not to suggest that every psychological view was compacted into the study, but more so that pertinent aspects relating to the dynamics of the disturbance, together with culturally sensitive considerations, were critically appraised and justified as to



why (or why not) it should form part of the review. Higgins and Green (2008) indicate that this is not a simple task as information has to be procured which can inform, as well as challenge, research regarding the inclusion and exclusion of certain information.

## 1.5 Research goals

The goal of this investigation is to identify and analyse aspects of literature that suggest an African perspective on psychopathology. The discovery of an African perspective ought to fortify the appreciation of context-specific perspectives in relation to the theoretical constructs frequently used in clinical psychology. This would aid clinical practice in Africa, particularly within the South African context. This does not preclude developing ideas for future research into theory relating to the South African context. Furthermore, this study may augment awareness into the germaneness of classification and diagnosis in South Africa, as well as add to the ideas which need to be adapted for the local populace. The findings of this study have the potential to inform the process of clinical interviewing by describing possible African perspectives on psychological distress and may thereby afford the patient to be more carefully and more considerately assessed. This view is not intended to imply that patients are not carefully assessed, but to further accent the need for culture-fit care as suggested by Tseng (2006). This is consonant with research conducted by Vatrapu and Pérez-Quiñones (2006), whose study focused on the ways in which culture influences clinical interviewing, and may thereby allow for better interviewerinterviewee relationships (Ferguson & Candib, 2002). The aforementioned is also implied by Gabbard (2005).

# 1.6 Theoretical orientation of the study

This study's theoretical point of departure is post-postmodern integrative theory which proposes that the diverse facets of various theories form a desegregated approach to theory, as well as to practice (Brooks-Harris, 2008). This suggests that diverse schools of thought are deliberated on in order to provide a comprehensive understanding of various dynamics and propositions. As a result, the study exhibits a concerted effort to search for common variables in separate schools of thought,



employing a multidirectional stance to best explore specific dynamics, integrating various perspectives to understand personalised experiences, comparing perspectives from diverse schools of thought to challenge complex phenomena, and using a multitheoretical approach to conceptualise complex information (Norcross & Goldfried, 2005). This process allows for clinicians to become more aware of the diverse exploratory processes in the interviewing process (Brooks-Harris, 2008). Thus, from a psychological perspective, areas such as psychodynamic theory, phenomenology, postmodernism, and cognitive-behavioural theory were explored in order to explain the themes within the reviewed literature.

Furthermore, these areas accommodated an African epistemology so as to facilitate greater applicability with regards to the African context (see section 2.5; cf. sections 4.7 and 4.9.4). Kaphagawani and Malherbe (2001) define epistemology as enquiry into the characteristics, and range of erudition, the assumptions and foundations of wisdom, and the analysis of knowledge acquisition. While developing an epistemological stance is universal to the human species, knowledge acquisition varies among cultures as the socio-cultural situation moulds one's way of knowing. They further suggest that the question of the existence of an African epistemology has been argued for numerous decades. The result of these arguments indicates the authenticity of an African epistemology, as well as an African philosophy. A significant view on African epistemology was offered by Appiah (1992) who suggested the construction of the African epistemology as a pre- and post-Western phenomenon as imprecise. Instead, he suggested, traditional African history shaped African epistemology. Warranting the exploration of an African epistemology in the study may be fortified by defining the ways in which the term African will be applied within this thesis. This reasserts the need for this study to explore traditional perspectives (as discussed in section 1.4), but will also be further explored in section 1.7.1.

# 1.7 Clarification of terminology

In order to appreciate the context of this study, as well as to elucidate the delimitation with regards to the scope of the study, it seems fitting that a few concepts be clarified.



### 1.7.1 <u>Defining African</u>

South Africa comprises 11 official languages, with many African subcultures operating within the South African community. Thus, a cultural sensitivity to understanding patients in Africa appears to be adequately aimed at addressing a reasonable portion of the South African context. Furthermore, research into South African culture suggests that South Africans are on the journey to developing a multicultural national identity (Chick, 2000) and thereby suggests that universality may be more applicable than multiculturalism within the context of this study. An exploration of these dynamics will need to be further unpacked within the thesis. The roving debate as regards the definition of who is, or is not, African continues. In this regard, Nagel (1994) suggests that identity formation as an African is an individual process and cannot be answered with universal acceptance. The controversy is multidimensional in the literature, often based on various aspects including race and culture. Ndletyana (2006), for example, explores the manner in which middle-class Black individuals often come to be seen as less African. Therefore, being African may be a question which each person may need to ask him/herself.

Many have also argued whether the African American experience ought to be considered in research regarding traditional African perspectives. Mbiti (1970), for example, was of the view that an authentic African consciousness pervaded the African American experience and should therefore be included in African-focused research. Bhui and Bhugra (2001), in contrast, are of the view that African studies should not include African American data as the inclusion thereof limits the appreciation of authentic African data. If one considers the comprehensive explorations regarding the definition of African, the sine qua non of aged literature (Anise, 1974; Mbiti, 1970), as well as more contemporary literature (Nagel, 1994; Ndletyana, 2006), finds little consensus on who is African. The literature review, however, appears to suggest that many references to African perspectives appear to suggest that traditional African is often equated as African. However, the present investigation underscores traditional Black African perspectives on psychopathology, and invariably acknowledges those observations mentioned in section 1.2. As discussed in section 1.4, the researcher is certainly perceptive of the utility, and



limitations thereof, as regards traditional perspectives for modernised Black African people.

While race often coincides within various African cultures, Appiah (1992) provides evidence that genetic traits may be excluded from the definition of *African* as people from the same cultural group do not necessarily evidence diverging genetic constitutions. This is particularly significant for those persons interested in fostering a national identity, where mutuality and cultural merging is valued (Owomoyela, 1994). As a result, *African* in the present study should not automatically be assumed to imply non-Black, but rather implies persons that adhere to parallel practices as described hereunder.

Defining the term *African* may be applied in more than one way (e.g. all people that reside in Africa). However, *African* in this investigation is defined as those traditionally-inclined persons that share specific aspects such as epistemology, linguistic mores, and social practices. According to Kaphagawani and Malherbe (2001), traditionally-inclined Africans share and/or appreciate the philosophical significance of particular expressions, sentence construction, and linguistic tendencies, including axioms. Furthermore, analogous social practices are exercised, such as the way in which disputes are resolved, children are schooled, and the way in which knowledge about the world is explored and applied. Clarification of the term *African*, therefore, sheds light on the researcher's application of the term. This sort of clarification is applied to other dynamic terminology utilised in the thesis and is explored hereafter.

While published definitions were consulted, Farlex Incorporated provided apt definitions for specific terms as the organisation provides an online forum that is regularly updated with comprehensive general and medical definitions. Farlex Incorporated is a private company that supplies reference products, including online library services. To begin with, Farlex Incorporated (2008) defines a *perspective* as a way of considering an occurrence and its relative significance. Farlex Incorporated further defines *culture* as behaviour models which are conveyed within communities and are regarded as a representation of a specific society, populace, or era.



Eshun and Gurung (2009) suggest that culture, a quality which is environmentally acquired, ought to be viewed as containing beliefs, principles, standards, activities, and symbols. It therefore reflects mutual societal experiences, is conveyed cross-generationally, and transforms in due course. Culture is also self-sufficient, and consists of concrete and abstract components. Furthermore survival and acclimatisation of a population are dependent on culture. Many aspects of culture, such as cultural principles, impact the manner in which people perceive and react (Eshun & Gurung, 2009). This is explored within the literature review, and particularly in section 4.3.4.

# 1.7.2 <u>Clinical terminology</u>

In addition, it is anticipated, based on the view that culture and clinical psychology will interlace, that the term *culture-bound syndrome* also be clarified. A culture-bound syndrome is a cluster of symptoms relating to particular configurations in terms of behaviour and disturbances in experience. The experiences may be associated to specific psychiatric categories, but are deemed to be disorders in terms of local knowledge and understanding (American Psychiatric Association (APA), 2000). Kirmayer and Young (1998) are of the view that culture-bound syndromes epitomise emotional, somatic, and cultural meanings. The views regarding culture-bound syndromes will be comprehensively considered in section 5.7.

In considering culture-bound syndromes, it seems pertinent to define *psychopathology*. Farlex Incorporated (2008) defines this as the investigation of mental illness or anguish, or signs of behaviours and occurrences which may denote mental illness or psychological wounding. Hence, the terms psychopathology and serious psychological distress may be utilised interchangeably. The current investigation will focus on symptomatology and clusters of symptoms as is applicable during the investigation. The philosophical assumption here is that the aspects of psychological distress be afforded substantial weight of evidence within the review.



### 1.8 Research methodology

In my search for more comprehensive and culturally-sensitive clinical material, it became evident that information in this area ought to be more thoroughly investigated. This view is also shared by Bhugra and Bhui (1997); even though this source is more than a decade old, the paucity in literature specific to the African context appears not to have changed. Despite this obvious obstacle, even though the avenues for gathering data may be complex, some research exists in relation to any investigation. In terms of the current literature review, these avenues included consulting in-depth investigations, proposed theories, and even minor ideas which were alluded to incidentally. The avenues, therefore, delved into the formal literature networks such as libraries and academic journals; the informal avenues such as workshops, lectures, and reference tracking, and at times, flirted with grey avenues such as discussion groups so as to acquire leads with regards to both formal and informal avenues. It ought to be noted, nonetheless, that only literature that could be verified by formal avenues was included in the review itself. The dilemma was therefore not whether information exists, but rather in determining the data which was pertinent to the study at hand (Dane, 2010).

Constructive research will weave multiple studies together to allow clinicians the opportunity to further appreciate culture and psychological distress comprehensively (López & Guarnaccia, 2000). Draguns and Tanaka-Matsumi (2003) recommend that research focuses on linking discrete studies in such a way that greater understanding of psychological dynamics be available to academia. A literature review was selected as the methodology for this study based on the observation that studies regarding psychopathology are often dispersed and divided (Draguns & Tanaka-Matsumi, 2003; Dzokoto & Adams, 2005).

Cooper (1998) is of the view that literature reviewing offers the potential to propose much needed research in specific areas. He further indicates that theses focused on reviewing literature produce a wealth of data which serve as the academic nuclei for primary studies to be conducted in the future. As such, future research endeavours should aim to broaden the focus areas of primary research (Cooper, 1998). In this respect, literature reviewing appears competent in fulfilling this requirement. Upon



completion, the current investigation therefore has the potential to stimulate a host of empirical investigations.

The specific method of literature review will be research synthesis (Gough, 2004; Popay, 2005). Research synthesis entails outlining and integrating research (Oakley, Gough, Oliver, & Thomas, 2005; Sandelowski, Voils, & Barroso, 2006), in order to augment practice and policy (Gough & Elbourne, 2002). Given that academic knowledge corrals as research progresses, the resultant cornucopia of information defends a literature review as an efficient methodology to review recent research and structures an essential climate for further systematic knowledge construction and development (Cooper, 1989). A detailed discussion on the way in which the systematic literature review was applied as a method is available in section 3.3.

#### 1.9 Structure of the thesis

*Chapter 1* introduces the context of the investigation.

Chapter 2 centres on the theoretical and paradigmatic stance exercised in the investigation.

*Chapter 3* focuses on the research methodology employed in the study, as well as the rationale for selecting the research methodology.

Chapter 4 serves as the first part of the literature review and includes the literature aimed at responding to the research question. However, this chapter focuses on the foundational aspect for critically questioning an African perspective on psychopathology.

Chapter 5 serves as the second, and final, part of the literature review. It contains literature which comprehensively explores those aspects of an African perspective on psychopathology. The chapter may be seen as a progression from Chapter 4.



*Chapter 6* is the discussion chapter and provides an integrated account of the literature, including the implications thereof. Theory is also applied to the literature so as to further explore the reviewed literature.

*Chapter 7* is the technical report, typical of systematic literature reviews. This section reports on the salient aspects of the investigation in an abridged format.

### 1.10 Conclusion

This chapter comprised of pertinent information relating to the foundation of the current investigation. Areas such as background information, the justification for the study, and the research problem were discussed. Furthermore, research goals were identified in harmony with the structure of the research report. The chapter concluded with a brief view of the structure of the thesis. Chapter 2 will comprehensively explore the theoretical orientation of the study.



#### **CHAPTER 2**

#### THEORETICAL POINT OF DEPARTURE

### 2.1 Introduction

This chapter highlights the way in which post-postmodern integrative theory considers an African perspective on psychopathology. By applying this theoretical framework, one may be better equipped to appreciate the dynamic catalysts suggested in the literatures, as well as appreciate the many ways in which views on psychopathology can be conceptualised. The chapter begins with a brief background to the development of integrative theory. The facets of integrative theory are explored and the discussion naturally tends towards a graphic portrayal of the study's theoretical orientation (Figure 2.1 in this chapter). Thereafter, an explanation on an African epistemology and its utility with regards to the scope of the present investigation is offered. Having explored the dynamic nature of the integrative approach, as well as an African epistemology, a brief discussion on theoretical transformation is offered. The chapter also highlights those theoretical aspects which concern the scope of the current investigation. As such, this chapter includes theoretical views on psychopathology, exploring race, and integrative therapies.

### 2.2 Background to integrative theory

As this investigation embraces post-postmodern integrative theory, it may be prudent to offer a brief background of integrative theory. Integrative theory suggests the synthesis of tenets across diverse schools of thought. It diverges from postmodern eclecticism in that it discourages the extemporised use of various techniques in a single process. Instead, a concerted effort is made to apply a structured, premeditated process to particular events and experiences (Norcross & Goldfried, 2005; Palmer & Woolfe, 1999). In addition, this post-postmodern stance repudiates certain aspects of postmodernism, and is often regarded as a reaction to difficulties experienced with postmodernism. As a result, the post-postmodern school of thought developed in order to re-embrace modernistic schools, without altogether abandoning postmodern utility (Vermeulen & Van der Akker, 2010). Additionally, to some degree, there is



less focus on areas such as Derridean deconstruction. In this regard, Brooks-Harris (2008) suggests that various underpinnings and assumptions are accepted without critical analysis.

Integrative theory is relatively intimidating for many academics. To illustrate this, Sandahl and Lindgren (2006) are of the view that psychology is not yet adequately prepared for an absolute integration of paradigms. Focused Group Therapy (FGT) is an example of an integrative model, but is predominantly psychodynamic although other paradigms may be incorporated into the model. FGT requires the person to focus on personal behavioural responses with a specific focus, such as learning and action, in mind. The theory is integrative in the way it focuses on underlying processes (psychodynamic) and remedial ways in which to adjust resultant behaviours (cognitive-behavioural therapy). However, as it appears, absolute integration will take much more consideration before an inclusive paradigm may be developed (Sandahl & Lindgren, 2006).

# 2.3 Integrative theory

This section elaborates the ways in which various psychological perspectives such as psychodynamic theory, phenomenology, cognitive-behavioural therapy and so forth are consulted so as to animate the findings of the review. Furthermore, an African epistemology is also accommodated (as discussed in section 2.4), where necessary, so as to facilitate greater applicability with regards to the African context.

In an attempt to (re)integrate theory and paradigm, establishing cognisance of the diffused interactions between ontological, epistemological, and disciplinal dimensions must be appreciated. Mutual systemic stimulation between disciplines in the clinical field, for example, appears to be an area of interest that may profit the scope of the current investigation. Essentially, one ought to consider those disciplines which are implicitly and explicitly identified within the literary discourses as having some persuasive impact. Certainly, defining the term *discipline*, will aid during the research process in identifying these fields.



The term *discipline* is an indistinct one. Disciplines suggest the allotment of knowledge in terms of discrete epistemology, as well as forms of authority and ways in which particular systems of control are employed to guarantee perpetual control (Hook, 2004a). According to this definition, disciplines relating to the clinical field are not exclusive of psychology and psychiatry, but may certainly include anthropology, philosophy, and indigenous views, among others. Consequently, the critical frame justifies disciplinary collaboration.

To support this, Hook and Howarth (2005) are of the view that one ought to disallow consternations associated with including the ambit of fiction, life narratives, cultural views, and common knowledge. Many of the essential perspectives, operating within cultures, appear to be underdeveloped, often denying disciplinary collaboration. Disciplinary collaboration allows one the occasion to comprehend the interchange between psychological subjectivity and subjectification (Hook & Howarth, 2005).

Integrative theory continues to be emergent and therefore challenging for many professionals and academics to imbibe. Grounds for this difficulty include the separatist vocabulary used in literature to secede psychological and neuroscientific expressions, for example. More importantly, modernistic sciences have been inclined to broach psychotherapy mainly on declarative, vocalised, and cortical levels. In this regard, a reduced amount of consideration has been afforded to those processes which are subliminal and indirectly inaccessible in conventional psychotherapy (Seltzer, 2005). While Sandahl and Lindgren (2006) do not explicitly proclaim the reaction of some academics as regards integrative theory, one is left with the sense that many opponents of integrative theory experience panaphobic anxiety due to the diversity suggested within the theory.

Perhaps preferential analysis is awarded to the collaboration of psychotherapy and the neurosciences in this exposition. However, it appears to adequately illustrate the intensities suggested in the ways in which collaboration is shied away from, irrespective of the paradigm or discipline. According to Seltzer (2005), literature that exhibits the interdependent nature between neuroscience and psychotherapy is currently in its early stages. While developing vocabulary to conceptualise precognitive processes may expand the field of psychotherapy, the current state of affairs



as regards the coexistence of psychology and neuroscience has obstructed the practice of perceiving patients as phenotypical, genotypical, existential, and phenomenological beings (Seltzer, 2005). At this point, it may be valuable to reflect on similar dynamics as they interact with critical theory.

Critical theory centres on tacit wisdom and may therefore be placed alongside psychoanalysis. The two frames attempt to render unconscious dynamics into conscious awareness. Furthermore, both frames aim to translate perceptions of repression. These are illustrated as dissociating encounters of personal realities. In Freudian terms, one is made aware of the process of disengaging the quota of affect from the perception it epitomises. From this point of view, Freud's assertion on the authentic *groundedness* of seemingly unanchored angst is particularly significant as this view sheds light on the idea that one's perception of another's *groundlessness* stems from one's own irrationalisation of his/her anxieties by de-objectifying them. As such, the person employs mechanisms to encumber and alter that which the other person's truth proposes (Osterkamp, 2009).

Scientific and academic homily are in the field of, stimulated, and constructed by social configurations and interfaces. The structure, depiction, and vindication of theory are positioned in the socio-political domain and consequently intrinsic to the discourse analytical endeavour. As a result, such interaction must be examined in order to deepen insights into seemingly atypical views (van Dijk, 1998). Erudition in this regard amplifies the range of influences impacting on the psychological dynamics operating within, and between, systems.

Stetsenko and Arievitch (2004) provide an inclusive justification on this matter. Erudition is functional since it stems from dynamic revolutionary systems and is able to return to those systems. The function of this action is of great consequence as it accomplishes its functions within the ambit of expansive renovation rituals, such as political, ideological, and ethical systems of practice. In addition, erudition exemplifies historical perceptions in conjunction with prospective perceptions. These multifaceted configurations regulate the systems in concert with ethical and political opinions relating to the culture's aims and perceptions of realism. As such, erudition must be understood as a process that is active, productive, and greatly historical.



Knowledge, in all its animations, is permeated with human principles that network all three tenses of time. That knowledge is misrepresented to represent an abstraction of reality is evidence of the vestiges of authentic historical processes that fostered the mind/body divide. These same processes reinforced the perceptions of knowledge, action, individualism, and collectivity. These divides are anchored in deficient comprehension of systems that shape and cause this practice, since these dynamics are concurrently structured and generated by action in the uninterrupted course of collective living (Stetsenko & Arievitch, 2004).

The framework applied in this thesis is diagrammatically represented below in Figure 2.1. As the paradigmatic approach is post-postmodern integrative theory, diverse facets of psychological theories are embraced. Where applicable to the literature, existential, psychoanalytical/psychodynamic, phenomenological, cognitive-behavioural (CBT), critical, and postmodern views are applied. However, these views are contrasted with the African epistemology (Kaphagawani & Malherbe, 2001) so as to gauge potential strengths and limitations within the arguments under discussion. This framework, therefore, allows for fluidity in integrating diverse approaches, without discounting potentially constructive views. Here, a discussion on the psychological theories applied in integrative theory appears to be indicated.

Psychodynamic theory aims at illuminating unconscious material, with the intention of reducing psychological distress. Although classified as a form of depth psychology, the actual process of unearthing unconscious tension is via the relationship between the therapist and the patient (Sadock & Sadock, 2007).

The experiences of being human, as opposed to being exclusively thinking beings, are embraced within the existential school of thought. Largely influenced by the discipline of philosophy, existentialism regards the affective, behavioural, and experiential processes involved in being human. The focus area of existentialists is to search for meaning (Breisach, 1962; Kaufmann, 1956; Macquarrie, 1972; Solomon, 1974). A significant approach to excavating richness in experience and meaning is the break away from mechanistic and deterministic psychological principles, which were often associated with psychoanalytical principles (Yalom, 1980). Like existentialism, phenomenology embraces the discipline of philosophy (Giorgi, 1970). With



significant reference to philosophers such as Husserl and Merleau-Ponty, phenomenologists explore the process of being in the world and the associated qualities thereof. In the therapeutic space, the intersubjective experience becomes the arena where therapeutic process unfolds (Langdridge, 2006).

Cognitive-behavioural theory focuses on systematic processes which facilitate dysfunction in affective, behavioural, and cognitive processes. These systematic processes are often the result of deep-seated patterns of thought, and belief blueprints which are established and maintained within the person's environmental framework (Swift, Durkin, & Beuster, 2004).

Postmodernism is a school of thought that established itself as a result of the philosophical manacles created by modernistic paradigms. The major hindrance for postmodernists is the philosophical assumption regarding the existence of a universal truth. Furthermore, that reality is socially constructed lays the foundation for postmodern thinkers to critically evaluate the restrictions in the construction of language and power relations, for example (Anderson, 1998).

Blatner (1997) is of the view that an integrative approach is also congruent with postmodern philosophy. Within this framework, one considers the current epoch of the social structures which one investigates and appraises the transformations of the data based on local modes of expression in lieu of wide-ranging generalities (Lindlof & Taylor, 2002). The framework further encourages alternative understandings of psychological dynamics (Parker, 1999). This view is propounded in the current chapter. According to Blatner (1997), this position appreciates that culture and history exist in relation to assumptions which may not be unconditional. In employing postmodern theory, Blatner further recommends eight considerations. These include: creativity as a core quality; composing and understanding subjective reality; the transpersonal position as a foundation; an integrative, philosophical outlook; cultural appreciation; diverse perspectives; metacognition; and developing reflexivity. These considerations form a significant part of the theoretical point of departure, and are applied throughout the thesis. Additionally, such a philosophy is congruent with integrative theory as this viewpoint consistently builds a connection with diverse areas of knowledge (Brooks-Harris, 2008). Seltzer (2005) suggests that integrative



theory underscores the trends in psychological formulation. An example of a trend, although not a universal trend, includes the shift from classical postmodern theory to post-postmodern integrative theory. This chapter underscores these trends, and their applicability to the subject matter under investigation.

Finally, critical theory reviews and analyses mainstream psychology with the intention of recommending and applying progressive ideas to better explain certain phenomena. Often, the idea that social transformation facilitates the aptitude to inhibit and/or doctor psychological distress plays a significant role in communicating the philosophical schemata of critical psychology. Additionally, proponents of this school of thought emphasise the ways in which mainstream psychology fails to address the socio-political forces which impinge on the physical and psychological health of individuals and groups (Prilleltensky & Nelson, 2002).

# 2.4 An African epistemology

Epistemology signifies the character, condition, and creation of knowledge. It also refers to the way in which one perceives and appreciates his/her world (Harding, 1987). Epistemology ought to be viewed as a system of knowledge. The emphasis being on the word *system*, and is unreservedly associated with worldviews founded on the contexts within which people subsist (Ladson-Billings, 2000). Here, African epistemology is defined as the African spiritual-focused acumen, an explicit paradigm, valued in many African subcultures. In other words, the African epistemology may be referred to as African approaches to interpretation (Ngara, 2007).

This section is included in the theoretical chapter so as to accommodate Ngara's (2007) view that African ways of knowing denote a definite paradigm. As an extension to this view, inclusion of a discussion on epistemology may also assist in contrasting African and Western epistemology. As a result, one is afforded with the opportunity to explore the diverse ways in which illness is constructed.

In terms of Western epistemology, Western modernism refers to a system of extensive beliefs constructed by, and founded on, perceptions of the nature of being from the



Western cultural point of view (Foucault, 1979). To be aware of the idea that Western epistemology represents only a portion of available views, indicates a call for epistemological vigilance. To exercise epistemological vigilance means to object to the intimation that so-called Western perspectives are commensurate universal truths (Mudimbe, 1988).

Truth has many dimensions, as has rationality (Du Toit, 1998). That psychiatric diagnostic process universalises mental process is a truth that is not universally realised. The literature review will provide much evidence with regards to the way in which certain populations construct and reframe psychopathology. Psychiatric nosology suggests that the tenets of pathology are constructed, instead of uncovered. In so doing, psychiatry has come to construct symptoms of psychopathology (Draguns 1997; Lupton, 1994). Similarly, the diagnosis of pathology is based on symptomatology, and not on disease. Diagnostic criteria are therefore subject to revision, fortifying the observation that these disorders do not epitomise naturally occurring diseases. Due to the universalistic approach applied in Western classifications of psychopathology, cultural epiphenomena are often discounted in the assessment process thereby limiting a contextualised appreciation of the dysfunction as a psychopathological state. In this regard, it ought to be appreciated that truth does not equal psychiatric truth, particularly when truth comprises abstract conceptions such as psychological distress (Kwate, 2005). Psychiatric nosology, from a Western perspective, presupposes rationality, signifying the marginalisation of truth as it operates from alternative perspectives. Psychology has had a history which is comparable to mainstream epistemology in psychiatry. As a result, conceptualisations and formulations relating to psychopathology often fall within the Western epistemological framework (Kwate, 2005).

By and large, the discipline of psychology has overemphasised individualistic, psychological, and psychopathological phenomena in lieu of societal, historical, and economic influences. Within this process, psychology has fashioned sweeping oversimplifications, observably consistent with US and European theories and assumptions. As a point of note, it appears that Eurocentric approaches have employed universalistic genre to reassert itself in postcolonial frameworks. As such, culture- and context-specific perceptions are annihilated at the highest levels, often

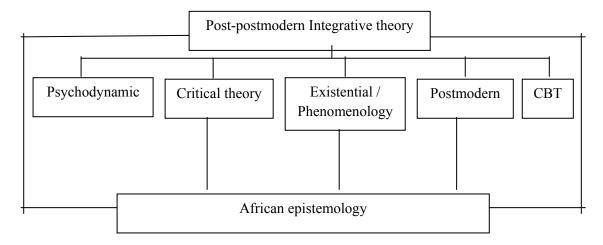


being criticised as essentialist and often remaining, in the main, dissonant with universalistic and Eurocentric approaches (Hook, 2004a).

The critical realist epistemological view, as a component of integrative psychology, and as considered in this thesis, reunites the physical and abstract dynamics of experience, but also recognises the cultural and historical framework(s) within which significance is constructed (Ussher, 1997). Critical realism asserts physical and collective realities as justifiable areas of investigation, but appreciates that reality is mediated by language, culture, and politics (Bhaskar, 1989). The latter includes discourses regarding race and gender, for example (Pilgrim & Rogers, 1997).

At the outset, it appears fitting to state that the author is not oblivious to, nor will deny, those literary tensions which appear to sometimes be endemic to studies focused on areas such as African epistemology, Africanity, and the like. Owomoyela (1994), for instance, suggested that some researchers focusing on bringing African insights into the academic sphere would almost invariably propagate a distinctly pro-African picture. The author of this thesis is compelled, therefore, to categorically state that the seemingly pro-African stance in this study is in no way intended to suggest opposition to non-African views. In an attempt to supply the academic fraternity with a comprehensive picture of the ideas that deliberate on African perspectives on psychopathology, various contextual sources were consulted. However, that this stance constitutes specific challenges to non-African perspectives, and by implication may suggest methodological complexity, was certainly a consideration which was carried throughout the research process. This will be discussed towards the end of the thesis.





**Figure 2.1.** Theoretical framework employed in this study

#### 2.5 Theoretical transformation

More recent inclinations in psychological theory have embraced more holistic modal frameworks. This is particularly useful in the context of the present study where the focus is on developing diverse insights with regards to a cultural perspective. The form and application of psychological descriptions are being continuously confronted by meaning-based approaches to culture. The context, therefore, requires the consideration of collective views as opposed to specifically objective limits. Psychological explanations of culture, from a meaning-based approach, may be appreciated trilaterally. This includes reflecting on the individual, the ecological context, and the culture (Miller, 1999).

However, meaning-based approaches to culture, such as ecological perspectives, have not adequately confronted the dualistic form, typical of psychological dynamics. Ecological perspectives have played a vital role in enlightening theory and research, particularly with regards to behavioural, genetic, environmental, evolutionary, and cross-cultural approaches. These views are based on practical requirements in the social structural and physical environment. Culture is appreciated as influencing a causal link to personal psychological dynamics as is the context to which these dynamics adapt. Furthermore, culture is acknowledged as a mode which in itself is adapted to personal psychological needs (Miller, 1999).



Proponents of social constructionism often offer fairly insipid approaches to the alteration of racial discrimination, for instance. While some appear less distressed due to the engrossment with meticulous analyses, others are consumed with *perturbing* the conventional models to the extent that other, perhaps more active, lines of attack are disregarded. Some of those who appear to confront the Marxist tradition display explicit antagonism to the so-called grand narratives. However, in favouring the expressive, descriptive, and discursive directives, social constructionism has the potential to be politicised as idealist, equal in measure to those mainstream contenders it often censures (Foster, 1999).

Nevertheless, some of the social constructionists appear to be enthusiastic with regards to the assimilation of progressive components of discourse and intergroup models, or at least with acumen derived from post-structuralism and Marxism (Parker & Spears, 1996). Structural approaches such as those proposed by Minuchin (1974), for example, appear to allow for such assimilation. In family therapy, the therapist draws attention to the interplay between the family context and the individual's perception. As the context adapts, so does the person's experience. These adaptations are recreated within the therapeutic process with a focus on reanimating alternative interactions and thereby facilitating altered interpersonal relating within the family therapy situation. The altered methods act as a catalyst within the family system and are transferred to systems outside the therapy context (Minuchin, 1974). By employing different modes of interaction, family arrangement is transformed at a foundational structural level (Wohl, 2000).

Integrating the strengths of these approaches appears to offer a more holistic view on the dynamics at play. Integrating systemic patterns into the interpretative process allows for attending to intergenerational conflicts, for example. This appears to be useful in light of patterns of interaction that occur from one generation to the next, but also by exploring perpetual patterns regardless of the possibility that a modernised, multicultural generation may be emerging.

Another framework that lends itself to meaning-based insight is the existential-integrative (EI) paradigm. According to Schneider (2007), James Bugental and Rollo May inspired EI. The EI paradigm allows psychotherapists to organise therapeutic



intervention within an overarching metaphysical and experiential framework. Under the umbrella of the EI framework, one may appreciate the integration of analytic, cognitive-behavioural, and pharmacological frameworks (Schneider, 2007).

Perceptual Control Theory (PCT) is also an integrative approach to understanding psychopathology. Within this context, psychopathology is precipitated from unresolved conflict involving personal ambition and negative feedback cycles that manipulate perception via control of the external world (Mansell, 2005). PCT presents a creative portfolio with regards to the functions of goal conflict, imagery, automatic processes, compromised psychological functioning, and perceptual disturbances (Mansell, 2005).

# 2.6 Integrative therapies

Psychotherapy is engrafted in cultural and historical contexts (Wohl, 2000). Schneider (2007) movingly reflects Rollo May's view that therapists work with people, not symptoms. Eagle (2005) found that most theoretical frameworks have strengths and weaknesses with regards to cultural appreciation and sensitivity. As such, no single model is idyllic in this regard. However, many continue to search for a framework that can effectively contain the influence and density of culture.

Although it may be appealing to consider novel, or seemingly culture-focused, approaches as beneficial to cultural communities, a clinician must not undervalue the potential of time-honoured therapies. Many Western psychotherapy models have been beneficial to non-Western populations (Wohl, 2000).

Psychotherapists work from various frameworks. In spite of this, each framework is composed of basic tenets that allow a clinician to be prepared to recognise and work openly with the inimitability of the therapeutic space (Wohl, 2000). Ultimately, therapy presupposes that the patient experiences a sense of liberation from the psychological shackles s/he is bound by (Schneider, 2007).

Patients who engage in long-term psychotherapy are subjected to healing processes which rise to a crescendo. At this point, the patient undergoes experiential liberation



(Schneider, 2007). Motivated patients may undergo experiential liberation through four dimensions. These dimensions are interconnected and include the immediate dimension, the affective dimension, the kinaesthetic dimension, and the cosmic or insightful dimension. These dimensions are accessed in such a way so as to allow the patient to explore his/her faculty in limiting, amplifying, and focusing energies (Schneider, 2007). In EI, the perception of amplifying psychophysiological faculty is referred to as expansion. Constriction, conversely, refers to the perception of limiting psychophysiological faculties. Extreme experiences that are called hyperexpansive signify chaos and confusion. However, extreme experiences that are called hyperconstrictive suggest entrapment and annihilation. Hyperexpansive and hyperconstrictive fears influence all classes of psychopathology. These fears may often be assumed to be unipolar, but the complex fusion of hyperexpansive and hyperconstrictive fears is endemic to most psychological disturbances (Schneider, 2007). Certainly, these experiences incorporate the spiritual dimension.

Experiential liberation, for example, endeavours to hone expansive and constrictive options in order to allow the patient to tap into the four dimensions with vivacity, inventiveness, and determination. This is especially significant for those who aim to explore the spiritual dimension (Schneider, 2007). Other modalities will be explored within the thesis. Cognitive-behavioural therapy (CBT), for example, may also be beneficial to diverse cultural populations (Eagle, 2005).

If cultural norms suggest that the clinician is directive, proactive, and an authority in the treatment relationship, CBT may be experienced as valuable to those patients. However, CBT may also be experienced as disempowering to those who are intimidated by exceedingly directive approaches (Eagle, 2005).

Cognitive and cognitive-behavioural approaches have demonstrated less restriction in terms of cultural influence. This appears to be due to the application of incorporating patient-specific pathogenic worldviews into its core praxis. The opportunity for cross-cultural research, in this regard, shows potential (Trujillo, 2001). Alternatively, although some may perceive psychodynamic approaches to be limiting, the psychodynamic frame also has constructive cultural components.



Psychodynamic theory reveres a person's subjective analysis and translation of experience (Sadock & Sadock, 2007). For this reason, psychodynamic perspectives have actively engaged the cultural dimension of lived experience. However, some have argued that certain views of psychodynamic approaches may be precarious if interpretations become overly reductionistic. Boundary maintenance, which appears to differ in systemic approaches, is an example of one such aspect (Eagle, 2005). Ecological theories, such as ecosystemic therapy for example, acknowledges the sociocultural context (Becvar & Becvar, 1996). However, some have argued that these frameworks overstate the social dimension by transforming interpersonal relationships into ecological symbols (Eagle, 2005).

Client-focused models, such as Rogerian therapy, are expedient in that the patient comes to experience the dynamics of interpersonal interaction (Sadock & Sadock, 2007). However, authenticity may become complex due to intercultural pressures within the therapeutic encounter (Eagle, 2005). Additionally, narrative therapy centres on cultural perspectives and aims to recognise the value of subjective views on culture, including culture's flexibility. In spite of this, the swathed temperament of power relations that could transpire during the course of co-constructing narrative adaptations may pose serious challenges to the therapeutic process (Eagle, 2005). Indeed, a few approaches to psychotherapy appear to correlate with African collectivism. The African appreciation of *oneness of being* resonates with group therapies (Toldson & Toldson, 2001). Systemic therapies, group therapies, and community-focused interventions are in harmony with the African appreciation of, and for, communalism and collectivism (Toldson & Toldson, 1999).

# 2.7 Psychopathology for the African

As the aim of the current investigation is to explore evidence confirming or disconfirming an African perspective on psychopathology, relevant theory relating to the clinical discipline (e.g. Goddard, Hoy, & Hoy, 2004; Masterson, 1985; Sadock & Sadock, 2007) will be continually consulted and reviewed to augment the study. Furthermore, the search for an African perspective on psychopathology inevitably suggests the juxtaposition of culture, race, and psychological distress. Ethnopsychiatry, as an example, is one of those areas which will feature in the thesis.



Ethnopsychiatry underscores the degrees in which sociocultural influences affect psychopathology (Bullard, 2001). However, history in Africa will also be explored so as to explore the way in which African history has influenced psychological distress.

In terms of colonial Africa, Vaughan (1991) contends that the mental health diagnostic taxonomies contributed to the functions of colonial control. Biomedicine, and those disciplines associated with the medical fraternity, operated in a way that objectified the African as an entity in need of study, thus having the ability to produce scientific knowledge. During this period, the meaning of pathology from an African perspective was eschewed in preference to issues regarding Africanness. *Africanness* therefore was a topic of greater interest to the academic body than *madness* (Mkhize, 2004). According to Vaughan (1991), the zeal espoused by the idea of Africanness implied that mental illness in Africa was fundamentally different from mental illness in the European world. And so, the reinforcement of *otherness* persisted. Being perceived fundamentally and unremittingly as the *other*, the African maintained the position of *normally abnormal*. The discourse of difference is yet to be thoroughly dismantled (Mkhize, 2004).

Regardless of race and/or culture, one ought to appreciate that psychopathology has much to do with the notion of *conflict*. A collection of control systems theory regarding psychopathology exists. These include explanations ranging from broad-spectrum implications to express conceptions of pathology (Mansell, 2005). The negative outcomes of unresolved conflict have been extensively explored within psychology (e.g. Freud, 2002; Mansell, 2005; Pavlov, 1941). Investigations aligned to the scope of the current study will certainly ply conceptual ideas. Thomas and Bracken's (2004) view in this regard is that the investigation of psychopathology is enhanced by conceptual analysis, and devalued by empirical analysis. Conceptually, then, psychological distress must be delimited within the scope of this investigation. Hook's (2004) definition of neurosis appears to exhibit sound correspondence with the conceptual definitions of psychopathology and psychological distress, as defined in Chapter 1.

Extending the definition of this malady to race, Hook (2004b) also provides a synopsis of Fanon's *neurosis of blackness*. Fanon's view of the neurosis of blackness



is equivalent to the *fantasy of becoming white*. This statement must be correctly interpreted to imply the desire for the degree of humanity, apparently enjoyed by white people, in bigoted/colonial settings. The conflict, therefore, arises as the experience of possessing a black exterior, living in a racially prejudiced social environment, and realising the hopelessness of this phantasy. From Fanon's perspective, the neurosis is unambiguously a social psychological occurrence, anchored in trans-historical and political frameworks created by colonisation (Hook, 2004b).

Does the exploration of an African perspective in psychopathology become one relating greatly to race? It appears that a more extensive exploration of *race* is required to clarify this point. The literature (e.g. Darder & Torres, 2000) suggests that the issue of race and psychology is largely affixed to psychopolitics and identity politics.

# 2.8 Exploring race – a process of humanisation

Awareness of race does not suggest, nor does it instigate, racism (Swartz, 2007). However, research (e.g., Sharpley, Hutchinson, McKenzie, & Murray, 2001) indicates that many African populations are of the view that strained race relations, particularly within the political domain, are responsible for a large proportion of their psychological distress. Sen and Chowdhury (2006) suggest that an important process in addressing these race-related concerns is to discuss racism and thereby challenge racist insinuations. This discussion is comprehensively explored in Chapters 4 and 5. In the interim, race is discussed from a theoretical perspective. It may be useful to begin with a brief introduction on psychopolitics and identity politics.

On the one hand, psychopolitics refers to the development of critical understanding with regards to the functions operating via political dynamics. Power relations, for example, when considered within the psychological sphere of influence are regarded as psychopolitics. As follows, an awareness of the way in which politics influences psychology, as well as the converse, falls within the field of psychopolitics (Hook, 2004c). Identity politics, on the other hand, refer to the hidebound conceptions of race



and discounts the diversity inherent in gender, culture, and so forth (Darder & Torres, 2000).

Scores of academic references suggest that postmodern, and some other, theorists may find critical race theory discomforting due to their conviction that the theory proposes essentialist views with regards to race, and tends to treat all people of the same race similarly. Essentialism, from this viewpoint, is grounded in identity politics derived from one-dimensional views of race (Brayboy, 2001). Critics equitably contend that the essentialism of identity is one-dimensional and prohibits the appreciation of the multitude of experiences that profile identity and epistemology (Bernal, 2002).

However, to appreciate the multidimensional views of race from a psychological perspective implies the appreciation of the trans-historical mechanisms that have influenced many areas of psychological functioning, and continue to do so at present. Information and/or dynamics that pervade the breadth of historical settings are referred to as trans-historical (Hook, 2004a). In the days of old, Western modernism reinforced a system of extensive beliefs constructed by, and founded on, perceptions of the nature of being from the Western cultural point of view (Foucault, 1979). The influence of this trans-historical process must be addressed by paralleling non-Western perspectives which were undermined due to the Western upsurge of recorded data.

In their focus of issues relating to race, critical race theorists analyse the apparatuses employed to exert authority, either physically or psychologically, and the influences these apparatuses had (and have) on various populations. An apparatus, in Foucault's view, refers to an assortment of discourses, establishments, authoritarian judgments, regulations, organisational measures, scientific records, and abstract devices applied in order to instigate relations of power (Hook, 2004a). Despite some of the criticisms relating to the focus on race in critical theory, critical race theorists have diversified the literature and discourses regarding culture and race (Solórzano & Yosso, 2001). Certainly, discussing race does not imply a lack of moral and humanistic responsibility (Guindon, Green, & Hanna, 2003; Hook, 2004b). Some of the focus areas addressed by critical race theorists relating to the moral dimension include their awareness of humanism, sovereignty, and moral orthopaedics, among others.



Humanism indicates structures of thought which attend to people, their principles, and abilities (Hook, 2004c; Mezzich, 2007). It also refers to human pursuits, desires, and welfare (Hook, 2004c). Humanisation refers to the process of instilling humanitarian deference and compassion. To humanise suggests a process of civilisation, in harmony with an attitude of humanity (Hook, 2004c). When minds and *souls* come to be viewed as the objects of dominance, they became the recipients of punishment. Certainly, within this process during history, the body became less of a container of castigation. As such, anguish was distributed via symbols throughout society as opposed to overt corporeal torture. Consequently, power themes such as objectification, individualisation, soul/mind, and humanisation surfaced from the era of humanist reformation (Hook, 2004c).

Sovereign refers to a monarch who implements dominion (Mbembe, 2000). For Foucault, use of the term *sovereignty* refers to pre-modern power styles organised in such as way so as to afford the sovereign the authority to chastise the offences of reprobates with fierce, bodily, and demonstrative energy (Hook, 2004a). In response, psychology's aim became that of disciplining the effects of sovereignty. Disciplining suggests endeavours to amend, restore, shape, or remodel the psychical and/or psychological aspects of the person, by employing therapeutic techniques to enhance the person's docility and capacity (Hook, 2004a). Disciplining, therefore, relates to moral orthopaedics. Foucault suggests that *moral orthopaedics* refers to the modification or deterrence of wounding or pathology of the psyche by means of recurring psychotherapeutic interventions and/or interest (Hook, 2004a). Alertness in terms of psychotherapeutic intervention and the dynamics associated therein may allow the clinician the opportunity to address these dynamics within the therapeutic process.

#### 2.9 Conclusion

This chapter highlighted the theoretical composition of the present investigation. Here, the researcher built on the theoretical integrity of integrative theory and discussed the complementary ways in which epistemological constituents may be considered. Certainly, integrative theory was considered at length, culminating in a graphic illustration of the theoretical foundation of the study. This led the chapter



towards a discussion on the ways in which psychological theory is currently in a process of transformation. However, the discussion made a concerted effort to also consider the long-standing theoretical views on areas which significantly influence the scope of the current review. This chapter also highlighted the ways in which exploring race may be appreciated as a process of humanisation, as well as the ways in which psychopathology may be appreciated in the context of Africa. The next chapter will detail the research methodology applied in the present study.