Mapping a Black feminist psychology framework: Charting courses to care

BY MICHELLE SRAHA-YEBOAH

Michelle Sraha-Yeboah is a doctoral candidate at York University in the Department of Social and Political Thought. Her research examines medical histories of racial and colonial violence, mental health care service use disparities, and holistic well-being. Her work is particularly concerned with the intersections of socio-historical and political factors impacting Black Canadians' mental health care service use patterns and treatment preferences. She attends to Black feminist theorizations of care to achieve anti-racist and decolonial mental health care service delivery for Africans in the Diaspora.

In the wake of police violence against Black people and a global health pandemic disproportionately impacting racialized groups, the call for reimagined "care" for Black life reverberates loudly throughout the African Diaspora. The Mental Health Index report by Morneau Shepell (2020) found that Black Canadians' mental health remains low amid the COVID-19 pandemic. The report also noted a decline in mental health scores for Black Canadians between May and June 2020 that corresponded with the high-profile murder of George Floyd, and the most intense period of awareness and response to anti-Black racism. Our current moment has crystallized the awareness that greater mental health care measures are required to ensure Black Canadians' well-being. A violent history of colonization, displacement, and dispossession in the transatlantic chattel slave trade and its legacy of anti-Black racism has impacted the Black community's "equal access to social, economic, political, and cultural resources" (Ottawa Public Health, 2020, p. 5).

REFRAMING THE FOCUS

We can trace the trajectory of Black Canadians' historical exclusion from social life more generally, to their exclusion from contemporary mental health care institutions more specifically. Black Canadians' reported experiences within the mental health care system include discrimination, racism, financial barriers, misdiagnoses, unreasonably long wait times, lack of cultural competency, and limited representation in the mental health care workforce (Ottawa Public Health, 2020). Improving mental health care service delivery for Black Canadians requires an in-depth look into the primary causes of Black Canadians' mental health care service use disparities. To date, there has been substantial research on the impact of social and physical determinants on utilization and access; however, this exclusive focus has masked the role of a broader set of historical, socio-political relations impacting help-seeking patterns. Reframing the focus for Black Canadians can offer an innovative way forward to advance mental health care service delivery, and curate culturally compatible treatment interventions.

Contributing to the field of Mad Studies, I seek to expand discussions of Black Canadians' mental health care service use patterns to include theoretical considerations about mental health care within a Black feminist psychology (BFP) framework. I propose a Black feminist psychology framework to examine the interactive relationship between psychology's colonial history, neoliberalism, and Black cultural practices of well-being with regard to service use patterns and treatment preferences. The framework builds on the central tenets of critical psychology and Black feminism. Critical psychology seeks to address operations of power, and the field's lack of reflexivity concerning the socio-historical dimensions of psychology (Teo, 2018). Black feminism explores the socio-historical, political, and cultural conditions of Black life, and generates transformative change in political and economic institutions (Collins, 1990). Together, these frameworks link interdisciplinary methods of engagement and creative bodies of knowledge to effect change in mental health care service delivery. Accordingly, a Black feminist psychology framework can be mobilized to attend to the relationship between power and knowledge production in psychology in order to address underlying colonial dynamics; to challenge neoliberal understandings of mental health that negate the role of structural barriers; and to centre Black feminist perspectives to imagine culturally nuanced mental health care services.

HISTORICALLY ATTUNED, POLITICAL ENGAGED, AND CULTURALLY COMPATIBLE MENTAL HEALTH CARE

A Black feminist psychology framework helps to ensure historically attuned, politically engaged, and culturally compatible mental health care for Black Canadians. It achieves the first objective by bearing witness to the damage caused in the field under the veils of scientific "progress" and "healing" (Howitt & Owusu-Bempah, 1994). The framework situates mainstream psychology within the context of colonial violence, slavery, and racial oppression in order to interrogate the genealogy of compromised mental health care service delivery for Black Canadians. Black feminist psychology

invites researchers to consider how psychology's ideologies, methodologies, and data analysis have historically served as an instrument of social control and surveillance for its multiracial clients (Jones, 2015). Within this framework, lack of participation in formal mental health programs registers as being inextricably tied to intergenerational experiences with the mental health care system and as a mode of resistance (Burack, 2004). A historical attentiveness creates space to trace patterns of inequality and perform practices of "Black annotation" on the erasures and oversights of Black suffering in the field (Sharpe, 2016, p. 117). Thus, Black feminist psychology views its epistemic responsibility as being to prioritize accountability and transparency in its investigation of Black Canadians' service use patterns and treatment preferences.

Neoliberalism has masked its role in contributing to the pathogenic social-political conditions it has fostered with its market rationality and taxing autonomy (Sugarman, 2015). The emphasis on individualism serves to position mental health challenges as the product of idiosyncratic choices rather than the result of systemic factors. Ultimately, neoliberalism makes mental health challenges the responsibility of individual actors to fix instead of society's obligation to redress (Prilleltensky, 2008). A Black feminist psychology framework highlights the work of political structures and policies to reveal how they condition Black communities' engagement with mental health programs, and governmental responses to Black Canadians' mental health care concerns. The framework's principles reframe psychological help as the promotion of systemic and political change. Establishing less oppressive and exploitative conditions is key to improving Black Canadians' mental health care service delivery. Black feminist psychology aligns itself closely to social justice enterprises by embracing collaboration with grassroots and community-based organizations to foster activism against structural oppression.

ALTERNATIVE PATHWAYS

A framework that explores service use patterns for Black Canadians must also work to create more culturally informed mental health care initiatives. A Black feminist psychology framework amplifies voices typically silenced or overlooked in formal mental health care settings and foregrounds their experiences. Collapsing value-laden distinctions between "scientific" and "non-scientific" sources, the framework explicitly attends to Black feminist thought. Black feminist creative writers often present ancestral healing as a spiritual and communal enterprise for Black diasporic communities experiencing trauma (Jones, 2016). Their insights remind us that alternative pathways to care should include Indigenous healing traditions as well as alliances with informal mental health service providers traditionally accessed by Black communities (such as religious leaders, clergy, and spiritual counsellors). Faith and spirituality are commonly documented as a protective factor for strong mental health (Ottawa Public Health, 2020), and a Black feminist psychology framework demonstrates renewed efforts to merge theistic considerations within mental health care practice and to consider approaches to mental wellness that have not historically dominated the scholarship but that have socially prevailed in community practice.

An anti-racist and decolonial approach to mental health care for Black Canadians demands a new paradigm that attends to the intersections of historical, political, and colonial forces that perpetuate anti-Blackness in the field, and that seeks to disrupt these conditions to imagine new interventions. A Black feminist psychology framework offers a theoretical mode of inquiry to ensure that Black Canadians' diverse histories, political realities, and unique social experiences are meaningfully addressed in the field. Charting the path toward improved mental health care service delivery must move beyond the shores of academe; it must make waves in community health care settings, sacred spaces, and government halls to redraw the lines in the sand and build stronger mental health care for Black Canadians. 🍁

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