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Beyond Broaching: Existential Meaning Making of Blackness within Therapeutic Work

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A research project submitted to the Graduate Faculty of

JAMES MADISON UNIVERSITY

In

Partial Fulfillment of the Requirements

for the degree of

Educational Specialist

Department of Graduate Psychology

May 2022

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Dedication

To the Souls who paved the path for me to write this body of work. The Love and Wisdom from my Spirit Guides, Ancestors, and Higher Self keep the light in me ablaze.

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Abstract

This integrated literature review explores the mental health field's contribution towards the subjugation of Black people through the means of researching human existence that affirmed white supremacy and bolstered the dehumanization of Blackness. This paper also explores how this negligent behavior on the part of the mental health field trivialized the deep pain and suffering experienced by Black people and provided the means to further dehumanize Blackness. The author provides frameworks to better understand the existential trauma experienced by the Black collective due to racism being embedded in societal narratives and history with the help of the mental health field. The author also introduces Black existentialism as a theoretical avenue for the mental health field to begin undoing the pervasive white supremacist narratives it established while also liberating and centering Blackness within the therapeutic work.

I am invisible, understand, simply because people refuse to see me. Like the bodiless heads you see sometimes in circus sideshows, it is as though I have been surrounded by mirrors of hard, distorting glass. When they approach me they see only my surroundings, themselves or figments of their imagination, indeed, everything and anything except me.

— Ralph Ellison, *Invisible Man*

The great evil of American slavery wasn't the involuntary servitude; it was the fiction that Black people aren't as good as white people, and aren't the equals of white people, and are less evolved, less human, less capable, less worthy, less deserving than white people ... So, for me, you can't understand these present-day issues without understanding the persistent refusal to view Black people as equals.

— Bryan Stevenson, Executive Director of the Equal Justice Initiative, *New Yorker*, June 1, 2020

Introduction

In October of 2021, the American Psychological Association (APA) published an apology for helping establish a human hierarchy as the basis for society (American Psychological Association, 2021). Published along with this apology was a detailed historical chronology of the many contributions the field of psychology made to the belief in racial hierarchy and the perpetuation of inequality for People of Color in the U.S (Cumming & Cumming, 2021). As noted in a response letter written by The Association of Black Psychologists, APA's apology letter failed to fully disclose the extent to which the APA involved itself with the perpetuation of white supremacy and Black enslavement (Association of Black Psychologists, 2021). The apology also lacked tangible actions to center and empower the survivors on the receiving end of its detrimental actions. It is important to fully divulge this dismal history to accurately conceptualize the current complicated relationship the mental health field has with the Black population. With complete disclosure and accountability comes the opportunity for progress and movement towards mental health services that will empower and validate the Black collective.

Who Determines Existence?

The interest and study of human existence began long before the field of psychology was born. Greek and Roman philosophers established the truth behind human existence through speculation and reasoning (Sorabji, 2014). What makes the field of Psychology distinct from its solely philosophical predecessor is the use of applied sciences to verify whether a hypothesis is true. With "psych" stemming from the Greek word psychē which means "principle of life, soul," and "ology" branching from the

Greek word with logia which means “the subject of study,” psychology at its core means the application of scientific study to one’s existence (Merriam-Webster, 2021). This push towards the objective and scientific study of the human mind revolutionized how we went about understanding human existence.

Wilhelm Wundt is often listed as the first person to begin pursuing the idea of utilizing the scientific process to objectively study aspects of the human consciousness (Bunn, 2017). Wundt believed that objective observation of consciousness is possible through experimental processes that emphasize replicability (Araujo, 2016). William James, often pinned as the forerunner of American Psychology, is also credited for establishing the belief that the human mind can be objectively studied (Evans, 1990). The advancement of experimental psychology created by James’s attempt to study consciousness in the first American psychological lab left a ripple effect in the field (Evans, 1990). A 1953 article highlighting influential psychologists wrote that James “...[stood] at the point of transition from psychology which was, in fact, a branch of philosophy with some scientific trimmings, to a genuinely scientific psychology with some philosophical entanglements” (Knight, 1953, p. 77). Many were inspired by scientific work done by both Wundt and James, thus solidifying the connection between the scientific method and human consciousness in the field of Psychology (History of Psychology, n.d.).

Black Existence Erased from Humanity

What’s left unsaid is the undeniable influence white supremacy had on the scientific methods those forerunner psychologists successfully adopted. Many scholars

within the field of psychology and counseling have begun speaking out about this reality. (Crump, 2020; Psychology, n.d.; Syed, 2020; Williams, 2020). Phrenology, biology, anthropology, and many other natural sciences were steeped in racist beliefs and perpetuated a hierarchy amongst humans (Baker & Patterson, 1994; Branson, 2017; Kistner, 1999). As researcher Brain Wallis stated in his work titled *Black Bodies, White Science* “Although these scientists argued that their studies were made without prejudice or models, there is ample evidence that a standard was in place to characterize the Caucasian ideal” (Wallis, 1995, p. 52). This scientific push that early psychologists aimed for ended up injecting white supremacy into the heart of psychology under the guise of objectivity and field advancement.

Sir Ronald A. Fischer, who developed the analysis of variance (ANOVA) technique for comparing group means (often used in psychological testing), published a 108-page pamphlet discussing the importance of race science and believed slaves benefited from slavery because they were in an environment superior to their homeland (Bodmer et al., 2021; Fischer, 1952,). Karl Pearson, the founder of statistics, authored a paper called *National Life from the Standpoint of Science* and wrote, “If you bring the white man into contact with the Black...they naturally sink into the position of master and servant” (Delzell et al., 2013; Pearson, 1901, p 22). G. Stanley Hall, first president of the American Psychological Association, believed that nonwhite people are equivalent to children in comparison to the human development of white people and founded the “*Journal of Race Development*” (APA, 2021; Blatt, 2004; Muschinske, 1977). Paul Popenoe, the founder of marriage counseling, believed that intelligence was determined by the amount of white blood one had and advocated for involuntary sterilization which

“provided an ‘essential basis’ for the 1933 Nazi sterilisation law” (Ladd-Taylor, 2001, p. 298; Williams, 2020; Yakushko, 2019).

Psychology and Eugenics

The most insidious and profound contributions to the psychological field came from the works of Sir Francis Galton. Galton was the first to conduct twin studies, coined the term “psychometrics,” began groundbreaking research on fingerprinting, coined the phrase “nature vs. nurture,” and made considerable contributions to mental imaging research (Burbridge, 2001; Gillham, 2001; Harvard Center for the History of Medicine, n.d.; Turiel, 2020). These are all well-known and fundamental concepts learned by even the most novice counselors. Galton also coined the phrase “eugenics” and used his most profound studies to discover different methods to purify humanity (Gillham, 2001). Inspired by his cousin, Charles Darwin’s book titled *Origin of Species*, Galton believed that humanity could be improved through selective breeding. Galton described the word eugenics as

a brief word to express the science of improving stock, which...takes cognizance of all influences that tend in, however remote a degree, to give to the more suitable races or strains of blood a better chance of prevailing speedily over the less suitable than they otherwise would have had. (Harvard Center for the History of Medicine, n.d.)

Galton’s eugenics work was widely accepted in the psychological field and beyond. Cohen (2016, cited in Turiel, 2020) noted that “many presidents of universities, researchers, and scholars promoted eugenics – including at Harvard, Yale, Cornell, Columbia, Stanford, and many more universities” (p. 104). Yakushko (2019) highlighted

the fact that “31 APA presidents between 1892 -1947 were affiliated with or leaders in eugenics movements” (p. 7; Crump, 2020). Eugenics Journals like “Annals of Eugenics (currently renamed to Annals of Human Genetics) and The Eugenics Review featured psychological studies geared towards racial betterment (McDougall, 1914; National Center for Biotechnology Information, 2022). Psychological science and practice based on eugenics were referenced to oppose “race-mixing” and support segregation, sterilization, and antimarriage laws (APA, 2021). Eugenics-based organizations, like the Cold Spring Harbor Laboratory, the Galton Society, and the American Eugenics Society, began popping up and promoted sterilization initiatives for “unfit and inferior races” that based their work on psychological tests (APA, 2021).

It is important to note that the psychological field and counseling field are indeed two separate and distinct entities. As Yakushko (2019) succinctly states though,

“Determinations of what constitutes mental health and human fitness, acceptance of normed assessment and testing practices, minimization of history, social context, or subjectivity, use of animal models of behavior, and focus on self-control and resilience may be among many eugenics-related values that remain dominant in Western psychotherapy practices” (p 8).

Although the counseling field has made clear of its fundamental differences in terms of treatment modality (i.e person-centered, humanistic waves), the treatment metrics the counseling field relies on (such as the Diagnostic and Statistical Manual of Mental Disorders (DSM) and exclusionary research) are largely informed by and birthed from the practices of eugenics (Pilgrim, 2014, p. 110-111; Vereen et al., 2014). We must take a critical look at the widely unchecked standards of counseling that indirectly infuse clinical practices with rhetoric that harms the mental psyche of Black clients. An example

of this grim reality is shown by the weaponization of mental health diagnosis to further dehumanize and oppress Black people suffering from the ramifications of slavery and segregation.

Blackness Means Enslavement

Here is proof of the necessity of slavery. The African is incapable of self-care and sinks into lunacy under the burden of freedom. It is a mercy to give him guardianship and protection from mental death. –J.C. Calhoun

Slavery went beyond just physical enslavement. Slave masters sought to enslave Black people's souls and effectively exiled them from the family of humanity (Vaughans, 2016). As Warren (2016) puts it, “Freedom and Life [became] impossibilities for Blacks in an anti-Black order” (p 108). To the dominant majority, slaves seeking freedom was an oxymoronic scenario and more than enough proof for insanity. Dr. Samuel Cartwright (1793-1863), a well-known southern antebellum physician, even coined the term “Drapetomania” which labeled the desire for slaves to run away from the plantation as a disease that can be cured (Smith, 2020; Willoughby, 2018). According to Cartwright, the cure includes “beating the devil out of them” with a whip (Warren, 2016, p. 111). If a Black person’s true pursuit of a self-actualized and free self is deemed neurotic, then demoralizing them further through extreme amounts of trauma and degradation does seem to be a fitting cure. As Warren (2016) expresses it, “When one's symbolic universe collapses with the laceration of the whip, the cropping of ears, the burning and amputation of limbs, the mauling of the canine patrol...any previous sense of a coherent “self” dissolves and the self becomes merely an object of pain” (p 112).

Cartwright even pathologized the slave's reactions to this horrific abuse done to their body and mind. Dysaesthesia Aethiopica was a disease that caused slaves to become “insensible and indifferent to punishment” (Willoughby, 2018, p. 579). The actions by Cartwright did more than pathologize the trauma experienced by Black people and justify further mistreatment. He also reinforced the idea that Black people wanting freedom and sovereignty is in direct opposition to what it means to be Black (Warren, 2016). This narrative can also be seen in the modification of qualifiers for Schizophrenia done by psychiatrists during the civil rights movement (Metzl, 2010).

Schizophrenia

In the book *Protest Psychosis: How Schizophrenia became a Black Disease* author Jonathan M. Metzl (2010) details the rhetorical shift of diagnostic criteria of schizophrenia pre- and post-civil rights movement. Before the 1960s, schizophrenia manifested as “emotional disharmony” within white people that hindered their ability to think and feel. Psychiatrists often treated people with schizophrenia as unruly children who should not be feared (Metzl, 2010). The distressed middle-class white housewife was the archetypical schizophrenic patient during this time. Even this conceptualization of schizophrenia is latent with the dehumanizing rhetoric used against women during that time. Since white people and Black people had separate mental health facilities, all the research done on this illness was on white patients, leaving all the Black patients experiencing mental health issues in the peripheral of society’s acknowledgment (Metzl, 2010; Peterson, 2021).

This all changed by the 1960s during the civil rights movement. As Metzl notes in his book, “growing numbers of research articles from leading psychiatric journals asserted that schizophrenia was a condition that also afflicted ‘Negro men,’ and that Black forms of the illness were marked by volatility and aggression” (Metzl, 2010, p. xiii). Members of Black Panthers, Nation of Islam, and other Black activist groups were case examples of Black people exhibiting schizophrenic behaviors that feed into delusions. Psychiatrist Frank Simon coined the phrase “protest psychosis” to describe the feelings and behaviors of Black men after listening to Malcolm X or other Black freedom leaders (Metzl, 2010). Black people now once again find themselves in a situation with a striking similarity to the diagnoses created by Cartwright. Labeling Black people who were upset about inhumane treatment as insane is once again affirming the narrative that Black people are innately subhuman.

It is not a coincidence that a diagnosis known for a fragmented sense of self and delusions got prescribed to Black people fighting their rightful place within humanity. This move to add aggression into the DSM diagnosis of schizophrenia aimed to resolidify the cultural narrative that Blackness is synonymous with bondage and any behavior that goes against this “truth” is flying in the face of reality.

The Existential Trauma of Racism

The mental health field’s endorsement of white supremacy and the dehumanization of Black people preemptively extinguished any opportunities for restorative justice towards the collective Black psyche, which suffered unspeakable amounts of trauma (Danzer, et al., 2016). While the psychological field concerned itself

with eugenics and establishing human hierarchies during the mid-1800s, the trans-Atlantic slave trade was operating at its peak with shipping over 135,000 western Africans to America to become dehumanized and enslaved (Thompson, 2008, p. 68). A growing number of Black scholars have begun labeling this 300-year event as the African Maafa (Maafa streaming from Swahili meaning disaster, terrible occurrence, or great tragedy) to capture the full scope of human death and suffering at the hands of white people (Thompson, 2008).

Due to the field's alliance with white supremacy, the desire to wholly understand and research the full spectrum of Black people's trauma from experiencing abhorrent treatment and dehumanizing beliefs did not occur until the late 20th century. Robert T. Carter has produced the most robust body of research centered on this topic and has created the Based Traumatic Stress Symptom Scale to study the relationship between a racist encounter and experienced traumatic stress (Carter & Muchow, 2017). Even with this development, Carter's work and other similar research only focus on the impact of specific racist encounters on an individual's mental health (Carter & Muchow, 2017; Kirkinis, et al., 2021). The trauma from the inherent dehumanization of Black people embedded within society or from the extensive duration of unilateral subjugation of the Black slave is not well researched (Hampton, et al., 2010). This is partially due to the very limited understanding of trauma beyond an experienced life-threatening event (Substance Abuse and Mental Health Services Administration, 2016). The existential trauma of Black people's culture and history within the narrative of society is also an important reality to understand and attempt to heal within therapeutic work.

African American Cultural Trauma

Alexander (2004) gave an operational definition of cultural trauma in his book titled *Cultural Trauma and Collective Identity* to succinctly describe what type of experiences this framework conceptualizes. Alexander (2004) states that, “Cultural trauma occurs when members of a collectivity feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness, marking their memories forever and changing their future identity in fundamental and irrevocable ways” (Alexander et al., 2004, p. 1). In another book written by Ronald Eyerman titled *Narrating Trauma: On the Impact of Collective Suffering*, Alexander and Breese juxtapose individual suffering to collective suffering by writing, “The pivotal question becomes, not ‘who did this to me?’ but ‘what group did this to us?’” (Eyerman et al., 2011, p. xii). With this trauma, we move away from individuals feeling anguish from a specific physical or psychologically traumatic event. The main wound is a deep tear in the collective social fabric that disrupts the established identity and meaning of that cultural group. In the same regard, the perpetrator of this trauma changes from an individual to a mediator group who can create and control societal narratives through the means of entertainment, education, and government (Eyerman, 2001, p. 3-4).

The traumatic rupture of Black people’s narrative went far beyond the disruption of their cultural identity. The fundamental truth of Black people being human was ruptured and was replaced with narratives of Black people being born for enslavement and labor (Warren, 2016). As detailed above, the mental health field advocated for the enslavement of Black people by establishing the dehumanizing narrative of Black people being subhuman within academia and actual practice. Other events like the medical field’s Tuskegee Experiment or the Ku Klux Klan carrying out multiple massacres,

lynching, and church burnings also aided in the rupture of Black people's collective identity of being human (Library of Congress, n.d.). This cultural trauma is still being carried out in current times as well. Police brutality and the school-to-prison pipeline are both modern examples of government and education assuming the role of white supremacist mediators by creating and reinforcing society's subhuman treatment of the Black collective (Hawkins, 2021; Nance, 2015, p. 1066-1067).

African American Historical Trauma

In understanding the multifaceted ways racist narratives established by the mental health field directly harmed Black people, another way to view the existential nature of trauma stemming from racism is through a historical lens. Maria Yellow Horse Brave Heart is a Native American social worker who has done substantial research in historical trauma to accurately conceptualize the multigenerational suffering and grief of American Indians (Brave Heart & Deschenie, 2006). An African American specific definition of historical trauma has been created to build upon the work already created by Brave Heart and add more nuance to the unique multigenerational trauma that comes from slavery (Hampton, et al., 2010). This African American definition of historical trauma highlights "the collective spiritual, psychological, emotional, and cognitive distress perpetuated intergenerationally deriving from multiple denigrating experiences originating with slavery and continuing with pattern forms of racism and discrimination to the present day" (Hampton, et al., 2010, p. 32). While cultural trauma highlights societal narratives as the means of traumatic rupture to the collective identity, historical trauma focuses on the persistent nature of acute traumatic events throughout time and the debilitating impact on the present-day collective's experience (Brave Heart & Deschenie, 2006).

Researcher Michelle Sotero (2006) categorized historical trauma into three frameworks: psychosocial, political-economic, and social-ecological systems. The dominant collective's utilization of these three systems as a means for the historical subjugation of Black people can be used as a metric to pinpoint the specific ruptures within the collective social fabric. The ruptures then create generational ripples of inequities and disparities felt by the descendants (Sotero, 2006). For example, the cause for higher cases of high blood sugar and elevated blood pressure in Black people vs. non-Black people be traced back to the lack of bodily homeostasis slaves experienced due to the high amounts of acute physical trauma used for subjugation (Hampton, et al., 2010).

Clinical Consideration

There must be an active reframing of how counselors approach Blackness and anti-black racism within therapeutic work. It would be remiss of any counselor to think that influence from the history of the mental health field's involvement with negating Black existence, validating slavery, and promoting involuntary sterilization is corrected by only *considering* cultural factors within the therapeutic space. How the therapeutic space is utilized *in and of itself* needs reconsideration to undo harmful narratives that can compromise the treatment Black clients receive.

Since cultural and historical trauma is inflicted on the collective, individuals within the collective may not experience any negative impacts from it (Alexander, et al., 2004; Eyerman, 2001; Vaughans, 2016, p. 228). Due to the individualistic bias within western culture, the counseling field has historically over-relied on this truth and has disregarded the unmistakable negative mental health impacts these cultural and historical

traumas can have on the individual (Danzer et al., 2016). The basic assumption that the person-centered, humanistic therapeutic style found within the very core of counseling is inclusive of all people ignores the lived experiences of Black people's existence being erased with the help of this very field (Vereen et al., 2016). This lack of accountability also halts any forward progression for the field to engage in reparative work to ensure Black people's experiences are fully validated in therapeutic spaces. DSM's criteria of Post-Traumatic Stress Disorder (PTSD) do not leave much space for Black people to process and heal from traumatic events that occurred on the collective level, which renders the event non-life threatening and therefore fails to meet criteria (5th ed.; DSM-5; American Psychiatric Association, 2013).

The reality is that Black people are suffering more from collective existential wounds than is recognized by the mental health field. A recent study showed that Black people who witnessed police brutality on social media reported lower mental health three months after the event (Bor, et al., 2018). In studies reported in Halloran (2018), African Americans show extremely higher rates of stress in multiple life domains, have higher self-reported ratings of poor mental health and are more likely to meet the criterion for PTSD than white Americans. The suicide rate in Black individuals has increased by 30% since 2014 (Ramchand et al., 2021). Black adults in the U.S. are almost two times more likely to report persistent symptoms of emotional distress, like hopelessness and sadness, than white adults. Black adults are also 20% more likely to report serious psychological distress than white adults (U.S. Department of Health and Human Services Office of Minority Mental Health, 2017). Even though the statistics show that Black people are currently experiencing more mental health concerns, statistics show that they are still less

likely to seek mental health services (Jon-Ubabuco & Champion, 2019; Wilkins et al., 2013; Ward, et al., 2009 Yoon et al. 2019). To make systematic, fundamental paradigm shifts in counseling that would provide opportunities for Black people to truly heal, there must be a more active consideration of how living within a culture that abuses the Black collective abuses the Black individual as well.

Black Existentialism

“umuntu ngumuntu ngabantu” -Zulu proverb

(English translation: “a person is a person through other persons”)

Black existentialism integrates the importance of other people and society playing an active role in how Black people make meaning of their existence (Bassey, 2007). The comparison between European and Black existentialism written by Vereen et al. (2016) helps highlight this important distinction:

Consider that if the European existentialist creed is closely aligned with individualistic concepts such as Descartes’ ‘I think, therefore I am’ and Sartre’s stance that existence precedes essence, the Black existentialist creed is ‘I am because we are.’ (p. 75)

Because of this truth, fully exploring the injustices enacted on Black people as a collective is indistinguishable from the exploration of the inner world of a Black person (Bassey, 2007). As Lewis Gordon (1997) states in his book *Existence in Black*, “Any theory that fails to address the existential phenomenological dimension of racism suffers from a failure to address the...lived experience of race” (p. 70). Black existentialism contextualizes social issues and racism as factors that influence the ability

to self-determine (Vereen et al., 2016). It is within this unique philosophical framework that the Black collective which lives within the Black individual can access a healing relationship filled with validation, affirmation, and liberation.

Therapeutic Healing with Black Existentialism

The importance of the therapeutic relationship in counseling cannot be overstated (Noyce & Simpson, 2018; Vereen et al., 2014). It has even been argued that “the value of a treatment method is inextricably bound to the relational context in which it is applied” (Norcross & Lambert, 2011, p. 5). The current existential modalities used in counseling create a vacuum and leave major parts of the Black experience unacknowledged. A meta-synthesis analysis by Noyce and Simpson (2018) which focused on different studies about therapeutic relationships found that “if the therapist did not appear to understand the client’s experiences...the client’s confidence in the therapist’s ability was reduced” (p. 292). Just the counselor having the capacity to understand all parts of a Black person’s experience alone can strengthen the therapeutic alliance and thus create better outcomes. Utilizing the framework of Black existentialism can aid the counselor’s ability to conceptualize a Black client’s full experience, which would also release the client from the burden of educating the counselor.

While most articles focus on the impacts of life-threatening traumas, there have also been studies that connect cultural and historical traumas to adverse mental health effects (Brave Heart & Deschenie, 2006; Halloran, 2018). Hawkins (2021) collected qualitative data to explore how Black Americans felt after viewing/hearing instances of police brutality. The article quoted one participant saying,

Philando Castile. I was rrrrealllly sad. Philando was the boiling point. I cracked. I literally had to leave my desk at work and take a break. When I came back, my White coworkers told me I was overreacting because I didn't know him. Which pissed me off. What they don't get is that Philando could be anyone in my family. It's not just Philando, it's that I fear my brothers could be shot in cold blood at any moment. That's why I was so damn sad. -Chanelle (p. 4)

The results of the study revealed that the Black people interviewed experienced “(1) debilitating sadness, (2) hyperarousal/chronic fear of dying, (3) constant sense of helplessness and (4) lack of healthy coping mechanisms” after witnessing police brutality (Hawkins, 2021, p. 4). Another participant was quoted saying,

Oh yea bro, I was sad, I don't even know if sad is the right word. Bro, after Tamir Rice, I straight up looked at my 10 year old brother and cried. He didn't get it and he had never seen me cry before. I couldn't do shit for legit like two to three days. I missed hella assignments, and tried to explain to professors why I was struggling. Bro, at least I was honest. I told them the video had me feeling some type of way. Guess what they did? Nothing. They told me I was making excuses and the only deaths that are excused are my immediate family. -Charlie (p. 5)

These heart-wrenching responses to the researcher's query painted a clear picture of the inner turmoil the Black participants felt when learning about a police officer murdering a Black person. The participant's sorrowful pain and suffering were immediately met with dismissal and invalidation by the white people around who could not conceptualize within their understanding the extent of harm done to a Black person just by seeing the unjust murder of a fellow Black person.

This dynamic is what happens when the existential consideration of a Black person ends with just the individual's influence: the full scope of self for the Black

person becomes truncated and therefore invalidated, which recapitulates the same dehumanizing narrative established by white supremacy. This individualistic consideration of existence and experience-of-self is the predominant existential framework within the mental health field (Vereen et al., 2014). This results in the counselor neglecting to acknowledge, understand, and validate experiences that can deeply disrupt a Black person's well-being, thus deepening the experience of harm and alienation for the Black client.

Using a Black existentialist framework, it becomes easier to conceptualize why the Black people responded the way they did within the article when asked about police brutality. The inner world of a Black person is not separate from the Black collective and society's influences (Vereen et al., 2014). In a sense then, a Black person witnessing a Black person being murdered by police is equivalent to watching their loved ones being murdered or watching their very own death. This creates a very distressing reaction that is akin to PTSD (Hawkins, 2021). The goal within Black existentialism then is to "explore the lived-experience of being Black in 'systematically deranged' worlds" and provide a safe space to do so (Gordon, 2018).

This safe space is what hooks (1990) called a "homeplace," which "offers the possibility of recovery from oppression, functioning as the site where essence, identity, and an exploration of resistance to marginalization are explored" (Vereen et al., 2014, p. 79). Using Black existentialism as a basis for understanding a Black client's experience transforms the therapeutic space from a space void of validation to a space filled with acknowledgment and opportunities for corrective experiences. Because Black existentialism integrates both the inner and outer lived experiences of Black people,

engaging with themes of liberation and social justice within an anti-Black world are not just considerations. They are valid and powerful interventions used to promote the healing of a Black person's inner wounded self (Bassey, 2007).

Limitations

There are several concepts and theoretical frameworks mentioned within this paper that have limited amounts of empirical research. More research must be done towards the use of Black existentialism as the basis of a humanistic/existential therapeutic approach to see how helpful this would be for Black clients. Due to the current operational definition of trauma being so limited, the topics of cultural and historical trauma explored within this paper have limited research as well. Since there literature was limited on these topics, this paper relied on research articles that may be considered out of date. Another limitation to consider is the added focus on Black people's negative reactions to white supremacy and racism in the paper. In many ways, profound protective factors were born from the shared anguish and suffering that has left a positive impact on how Black people express their emotions and be with one another (Caldwell-Colbert, et al., 2009). Lastly, since the scope of the paper focused on Black people in a general nature, the nuanced experiences of intersecting marginalized identities (e.g., Black transwomen) or multiracial identities were not explored in detail.

Conclusion

Who determines existence? The European-centric answer is that existence is to the extent of one's individual awareness of oneself. With Black existentialism, existence is contingent on the relationship between the acknowledged self and the collective the

self resides in. The mental health field must move beyond merely considering cultural factors in therapeutic work. More work must go into the restructuring of fundamental therapeutic frameworks that the mental health field, especially the counseling field, is currently relying on for mental health treatment. The reconceptualization of a client's experience of self, the consideration of the validity of historical and societal trauma, and the utilization of liberation and social justice as specific interventions are effective ways counselors can begin doing the restructuring work within the therapeutic space. The harm from collective wounds and traumatic societal narratives Black individuals experience can be equated to the harm experienced from a life-threatening event. If it is not met with a sense of urgency to the same degree, this dehumanizing response will play out the same history that the mental health field is fighting hard to leave behind.

The mental health field must work to demonstrate accountability by going beyond just acknowledging the role it played in the long-term abusive assault on Black identity. The dismantling of harmful and invalidating therapeutic frameworks and practices based on eugenics and anti-Blackness must be taken on by the mental health field. Without these sincere efforts, the space for validation and transformative mental healing the mental health field provides will remain inaccessible to the population who deserve these services the most.

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