Symbolic Interaction and Black Mental Health:

Understanding Black Self-Conceptions*

Shirley Vining Brown

The widespread preoccupation with racial identity in the last two decades has been seen not only as a symptom of alienation but also as a move by racial minorities to recapture what has been called a "surrendered identity."[1] This corrective action has its place in the historical evolution of American race relations but, at the same time, it has a price.

The subtitle "Understanding Black Self-Conceptions" is presented here in the broadest sense. That is, in order to understand individuals who differ racially one must also understand them as a collective group. To this end, I have chosen a symbolic interaction perspective to discuss the formation of individual and collective self-conceptions of black Americans as explained by George Herbert Mead's general paradigm and reference group theory.

The following discussion represents several years of thinking about the symbolic nature of the economic, cultural, political, spatial, and social separateness of American racial groups and how the interrelatedness of these phenomena define, shape, and affect the self-esteem of racial minorites.

Formation of Individual Self-Conceptions

George Mead[2] tells us that an individual's self-concept is a social structure which emerges from social experiences and is formed by the definitions made by others. These definitions become important in the formation of the self-concept through the process of perception—that is, the awareness or understanding of how others define and respond to us (taking the role of the other). This human capacity to engage in reflective thinking or "minded" behavior not only enables people to interpret their social world but also enables them to make everyday judgements that guide behavior.

Significant symbols (language, gestures, and so on) play an important part in the perceptual process and it is through these media that we develop common understandings which allow us to respond to others on the basis of their intended meaning. These common understandings affect our perceptions of others, our responses (behavior) toward others, and ultimately our self-concepts. The interactional process, however, is not one-way but interdependent. Thus, Mead can be interpreted as saying we affect others as much as they affect us.

If individual self-concepts are formed on the basis of definitions made by others, the same idea has been extended to explain the identity of racial collectives in the writings of black sociologists who have examined American race relations.[3] In his book on race and marginal men and women, Charles V. Willie points out that: ". . .no group, black or white can confirm its own identity. A group, like a person, may engage in self-affirmation but must be *confirmed* by another (emphasis mine).[4]

Who are the others defining black people? What are these definitions? What effect do the definitions made by others have on the mental and social conditions of black Americans? The concept of the reference group partly renders these questions answerable.

Reference Groups and the Collective Black Self-Concept

Mead would refer to a reference group as those significant others whose composite roles and attitudes are acquired through social interaction to form the generalized other part of the self. However, the concept of the reference group has been defined variably in the literature.

Hyman[5] defines the reference group as a point of comparing one's own status; Merton and Kit[6] define it as a group to which one aspires; a third definition characterizes the reference group as a group whose perspective provides a frame work for those outside the group.[7] All three definitions have relevance and application to black Americans who possibly have three distinct referents: respectively, these are the American mainstream (a group to which they aspire); middle-class perspectives (a group whose perspectives they assume); and the black community (a group with whom they compare themselves). The first and second of these reflect white culture and are conceptualized

here as psychological phenomena rather than objectively extant groups of people. That is, blacks as a minority in a white culture are defined by that culture and, more often than not, see themselves through the eyes of white culture; these definitions are mediated directly and indirectly by means of the two white referents as well as the black reference group.

The American Mainstream

The American mainstream has always been the group to which all racial and ethnic minorities in America have aspired. However, the American mainstream primarily symbolizes the exclusion of racial minorities and includes middle and upper-income white Americans who are economically, politically and socially free to make important life choices: free to choose better residential locations, better health care, and better employment opportunities. This freedom is even extended to defining who is acceptable and who is not acceptable to the mainstream in-group. Lieberson and Carter's[8] comparison of black and white ethnic pathways to national prominence reveals interesting differences in the degree to which these groups have been able to move into the national mainstream. While national prominence is not at issue here, the disparities they report are indicative of not only the residual effects of legal segregation, but the extent to which these effects have blocked the mobility of many blacks who wish to move into the American mainstream. The evidence symbolizing exclusion on the basis of skin color is legion: continued discrimination in employment; education, public accomodation; and political participation at all levels of government. A word about each of these should suffice.

According to Herbert Hill, former NAACP national labor director, black people in 1977 constituted over 30 percent of those living in poverty. This economic situation can be directly traced to the high rate of unemployment among blacks, which was more than 2.3 times that of whites in the first half of 1978.[9] Even when gainfully employed, labor market processes operate to systematically allocate blacks, relative to whites, to less rewarding labor positions.[10] Indeed, the income gap which separates the typical black family from the typical white family grew larger in the 1970s.[11]

The National Assessment of Educational Progress in 1974 reports that black performance is consistently below the national average in the sciences, reading, and mathematics and, daily, blacks are confronted with news about white resistence to "forced bussing" into black neighborhoods. The message communicated by these reports and resistance to bussing are threefold: 1) the quality of education provided for black students is inferior to that provided for white students in schools that are better equipped and better staffed in suburban neighborhoods; 2) many Americans believe that heredity rather than quality of education explains racial differences in student performance; and 3) many Americans believe that integrated education will cause a decline in the ability and performance standards of white children. Despite evidence to the contrary, the fallacy of the latter two perceptions, in addition to the very real problem of inferior education, combine to make salient the low esteem in which blacks are held by many white Americans.

Although the Civil Rights Act of 1964 outlawed discrimination in public accommodations, middle and upper class blacks are still made very aware that their presence is unwelcomed in exclusive clubs and restaurants, even in the nation's capital. Moreover, redlining and steering are still common practices in the real estate and mortgage lending industries, which has maintained housing segregation at pre-1965 levels. A recent television documentary examining the progress of blacks in America since 1954 revealed that the gerrymandering of election districts is still currently used in states such as Mississippi to minimize black voting strength and thereby dilute black political power. These barriers not only effectively exclude blacks and other racial minorities from the American mainstream, they symbolically communicate the intended meaning that racial minorities of all classes hold an inferior position in American society and are valued accordingly.

Middle-Class Perspectives

The American mainsteam influences and is influenced by white middle-class perspectives. Social definitions mediated by means of these perspectives are powerful determinants of a group's collective identity. By and large, the social definitions made on the basis of color are negative. To wit, the concepts of the black matriarchy, father-absent families, culturally deprived, underprivileged, and urban blight are terms that have common currency among the definitions

that have been used to characterize blacks and their culture. For many Americans with neither exposure nor understanding of black intragroup differences, these definitions apply to the entire group, notwithstanding class differences. Middle-class belief systems are transmitted by various media and ultimately work their way into all major American institutions. Television programming is a prime example. Racial minorities are generally "invisible" or "absent" on American television, and when present, they are symbolized as subserviant, silly, poor, unintelligent, criminal and invariably produced in father-absent matriarchal families.

These distortions not only misrepresent the stability, strength, and close bonds of one-parent, extended and other variant forms of black family life,[12] but also misrepresent the lifestyles of sixty-one percent of American black families that adhere to the traditional nuclear two-parent family structure.

Visual media that portray distorted views of racial minorities are critical socializing agents and make a decisive impact during the earliest years of personality development. A recent magazine advertisement purchased by the black-owned Communications Alliance illustrates this point. It shows a small black boy looking into a mirror and imagining himself as a white superman. The picture is captioned, "What's wrong with this picture?" and follows with the answer "plenty if the child is black and can't imagine a hero the same color he or she is." This subtle, symbolic denial of black identity has produced what DuBois called the inaudible Negro and what Ellison[13] referred to as invisibility and facelessness among American blacks. Willie's statement on the idea of "nobodyness" is cogent:

Identity. . .is a social process in which there is a negotiation between what people think themselves to be and what others believe them to be. The negotiating process is continuous, sometimes painful, sometimes pleasant. The anonymous people of this world, often referred to as invisible, are those *who withdraw or who are pushed out of the negotiating process.* They suffer a loss of identity, either because they no longer affirm their personal significance or *because others refuse to recognize their social worth* (emphasis mine).[14]

The notion of "invisibility" applies to institutions other than the television industry. For example, except for specialized courses in specialized departments, educational curricula at all levels exclude racial minority content. For economic as well as possibly racially motivated reasons, movie and book publishing industries follow suit. The point to be made is that the absence of racial content places conditions of worth on the ascribed characteristic of skin color and perniciously denies positive definitions of black existence and culture.

Clearly, when the norm of black absence is inextricably accepted, promoted, and maintained across institutions, the interpretations and indications made by blacks and whites are the same: black people as a group are devalued or ignored in American culture. In the past, most whites and many blacks accepted these definitions. For whites, the effect was to elevate a sense of self in comparison to blacks. For blacks, the effect resulted in self-definitions that were often negative in connotation.

The Black Community

Blacks, as the comparison group for other blacks, are not exempt from the pernicious process described above. Because of coercion under slavery and reluctant but passive acceptance under legalized discrimination, many black Americans have internalized and communicated negative definitions of blackness that are acquired from the dominant reference group. As Billingsley puts it. . . "We have been brainwashed by the sea of whiteness which surrounds us and defines us."[15]

A recent article pointing out sociologist Robert Hill's view on this point illustrates the tenacity of these internalized conceptions:

"We're so oriented to looking at what is wrong—emphasizing negative pathologies and dysfunctions. But, it is very important for us to be aware of and build on concepts that are positive to ourselves." Hill's concern with the "erroneous type of information as pertains to blacks" — particularly since blacks were believing some of these things led him to develop a report in 1971 on the strengths of black families.[16]

Similarly, Erickson notes that

> The Negro, of course, is only the most flagrant case of an American minority which by the pressure of tradition and the limitation of opportunity is forced to identify with its own evil identity fragments, thus jeopardizing whatever participation in American identity it may have earned.[17]

Thus, this taking the role of the other (the dominant group) is mediated by blacks to other blacks in other ways: returning to hair style preferences that were characterized as "white" in the 1960s and 1970s is just one example.

Certainly the high incidence of black on black crime implies intragroup dynamics that are not positive. Although the frustration-aggression hypotheses has been used to explain this phenomenon, black on black crime is also viewed as a form of self-hatred among American blacks.[18]

To point out, however, the negative consequences of poverty and racial discrimination is not to say they have gone unchallenged or have adversely affected all black people. Many black Americans have been able to develop positive self-concepts even though they directly and indirectly encounter adverse racial conditions. The ability to use support systems and to channel racial pressures constructively have enabled most blacks to enhance and maintain a high level of self-esteem. Indeed, Robert Hill is representative of a cadre of black Americans who have made in-roads into the process of recapturing the "surrendered identity" of black people and their culture. Nevertheless, for a sizable proportion of the black population, the adverse effects of symbolic racism may be more real than apparent as shown in their disproportionate representation in the following statistics on mental health disorders.

Possible Effects on Black Mental Health

Although precise cause has not been determined, discriminatory practices have been suggested as key factors—if not the most important ones—in the etiology of mental disorders of blacks and other racial minorities.[19] Moreover, it is suggested that racism is an important factor in determining the quality of clinical services that are rendered to these groups.

The question of differential diagnosis is always a problem in determining the validity of data on psychiatric disorders. However, certain trends do appear by race in mental health statistics. Briefly, a few are described below.

Institutionalization and Specific Disorders

Institutionalization: The Report of the Special Population Sub-panel on Mental Health of Black Americans summarizes current governmental, epidemiological and social research data on the institutional status of black Americans. Among the findings, the data show that:

— Black adults are under the care of a variety of institutions. In 1970, the rates of institutionalized persons per 100,000 population were 1412.7 for blacks compared to 1004.3 for whites.

— Between 1950 and 1970, the rate of institutionalization for blacks increased, but decreased for whites.

— Black males (particularly in the 18-34 years of age range) consistently show the highest rates of mental disorder based on state hospital data (See Table 1).

— Black admissions to mental institutions are less likely to be voluntary, and blacks are less likely to be committed by relatives.

— Not only are blacks more likely to be in mental institutions than whites, but they are twice as likely to suffer fatal consequences from psychotic and neurotic disorders.

— The type of treatment blacks receive in mental health agencies is different from that received by whites: Diagnoses are less accurate for blacks; disposition of black cases is more nonspecific; blacks are more likely to be seen for diagnostic purposes; and blacks are less likely to be selected for insight-oriented therapy than whites.[20]

The sub-panel attributes these findings to the stressful living conditions that many black Americans endure in a culture where racism erodes their capacity to cope with illness and psychic stress.

Schizophrenia: Schizophrenia, a major public mental health problem, comprises a major proportion of the admissions to in- and out-patient psychiatric facilities in the United States. Studies examining the rates for this disorder generally have found that rates for non-whites (blacks being the largest proportion in this group) were higher than those of white admissions. While reported diagnostic rates should be viewed with caution, Cannon and Locke[21] report that among women diagnosed as schizophrenic in 1975, the rates per 100,000 population were 118.2 for black females compared to 42.8 for white females. A study of Bahn, et al.[22] found that non-white rates for admissions diagnosed as schizophrenic were about as high as the rate for white admissions in Maryland. These racial statistics are not surprising considering the general character of schizophrenia. This personality disorder is described as a personality pattern of persons whose life style demonstrates limited flexibility and are unable to establish stable reciprical relationships with the environment. Further, schizophrenia is a longstanding condition that may deteriorate under stress. The lifestyles of many lower-income or unemployed black Americans produce conditions that could lead to emotional problems that fit this characterization.

Alcoholism: Alcoholism is another national mental health problem. A 1969 nationwide survey revealed that thirty percent of all non-white male admissions to public mental hospitals could be attributed to alcoholism. Non-whites were two times (fifteen percent) more likely than whites (seven percent) to be diagnosed and admitted for alcoholism on an out-patient basis. Limited research on the drinking patterns among blacks reveal that middle-class blacks almost universally use alcohol as an outlet, are heavy drinkers (compared to their white middle-class counterparts), and often have social problems that are related to alcoholism.[23] The inference here is that black drinking patterns are more related to social conditions than those seen for white drinkers. McNeill clearly points to racial pressures as a casual factor by suggesting that black drinking patterns "are those of discomfort i.e., a minority group member competing with a majority group in any culture will suffer strains and pressures for which alcohol can be a temporary remedy."[24] Thus, alcohol abuse among blacks is seen as a way of coping with the pain of racial prejudice and discrimination. McNeill believes that heavy drinking reinforces racial stereotypes among whites; among

black drinkers, it is seen as an act of defiance or self-destruction. As a final outcome, death from alcoholism is three times greater for blacks than for whites who drink.[25]

Drug Abuse: Using an index adjusted for age, sex, and race, Rosen and Goldberg's[26] study found that non-white males were three to four times more likely to be admitted to treatment for drug abuse than any other sex or race category. Again, the index for non-whites was particularly higher for those using public mental hospitals and out-patient facilities. It is estimated that over half of the addicted population is black, Mexican, or Puerto Rican and live in the inner city of large metropolitan areas.[27]

Suicide: Suicide, once thought to be a white problem, certainly has a psychiatric basis and is increasing at an alarming rate among black urban adolescents and young adults. Although many causes are cited, sociologists believe that intolerable social conditions are the major cause of suicide which is a reaction to stressful life conditions that are often associated with feelings of worthlessness and hopelessness.[28]

Even diseases (ulcers, hypertension) with physical manifestations have psychological and emotional causes. Although diet and heredity have been indicated as factors in hypertension (a disease disproportionately represented in black health statistics), it is not unreasonable to assume that symbolic stressors encountered in a racially defined society play an important part in this disorder as well.

The foregoing are just a few of the adverse effects that may be partly attributed to societal pressures that are racially induced. However, we are cautioned by Kramer, et al. that further investigations are needed to trace the etiology of mental disorders:

> . . .investigations of the role of racism in the distribution of mental disorders require data on the incidence and duration of specific disorders and the way racist practices affect these indices. But this is no simple matter. Investigations of incidents of mental disorders are difficult to carry out not only because of the problems of case-finding and differential diagnosis but also because of difficulties in establishing date of onset.[29]

Notwithstanding the methodological problems of researching the effects of racism on the mental health of blacks, the nature of many mental health disorders can be characterized in one word—escapism. It is particularly interesting that the reported rates for disorders imply that avoidance—schizophrenia, alcoholism and drug abuse—are generally higher for non-white than for white groups. These higher rates among non-whites suggest that the dynamics of the disorders may be permutations in the tendency for some marginal people to become "invisible" and "withdraw" from the oppression and non-recognition that they perceive from the larger society.

Concluding Remarks

The discussion presented in this paper is not intended to explain or suggest a definitive casual relation between racism and psychodynamically induced human conduct. At the same time, our present state of knowledge about the etiology of neurotic and psychotic behaviors is so limited that suggestions to the contrary (e.g., socially induced behaviors) cannot be ignored.

Emotional difficulties in personality development have long been cited as a product of faulty interpersonal relationships. However, despite improvements in American race relations, the persistence of various forms of inequality communicate the meaning of resistance to improved economic and status attainment for racial minority populations. In Meadian terminology, these are significant symbols that have a shared meaning for all races and are destructive in their outcomes. Moreover, since prejudice has been found to be correlated with various psychopathic disorders,[30] there is a message here for the majority population as well. By maximizing their own identity at the expense of minority populations, the majority population may, in essence, be truncating their own identity and could very well be creating the same problems for themselves as they may have for minority out-groups.

If the foregoing analysis has any enduring value, it is because the salience of these symbols and their meanings have been presented to raise questions about these phenomena. The article is designed to inspire further explorations into the causal relation between racially defined situations and the present state of mental health of blacks and other racial minorities in this country.

Table 1

Age Specific and Age Adjusted Rates per 100,000 Population of Inpatient Admissions to State and County Mental Hospitals by Race, Sex and Age, 1965

	White			Black		
Age on Admission	Both Sexes	Male	Female	Both Sexes	Male	Female
Total admission	296,151,	190,788	105,363	83,367	53,646	29,721
All Ages	161.1	214.2	111.2	344.2	469.5	232.2
Under 18 yrs.	31.6	39.3	23.6	77.8	103.1	52.2
18-24 yrs.	234.0	343.9	129.4	539,6	892.1	241.8
25-44 yrs.	270.2	349.3	194.2	688.3	1032.7	406.3
45-64 yrs.	213.4	276.0	155.7	414.2	414.2	413.9
65 yrs.	85.3	130.9	54.0	171.9	210.8	143.7
Median age	35.2	43.3	37.3	32.1	30.0	38.0
Age adjusted rates*	159.7	213.2	110.0	367.3	509.4	248.5

Adjustment based on distribution of U.S. Civilian Population July 1, 1975.

Source: NIMH, Division of Biometry and Epidemiology — unpublished data.

Notes

[1]Erik H. Erikson. "The Concept of Identity." *Daedalus.* Vol. 95, No. 1 (Winter, 1966) 145-171.

[2]Charles Morris, ed. *Mind, Self and Society.* (Chicago: The University of Chicago Press, 1962).

[3]Charles V. Willie. *Oreo.* (Wakefield, Mass.: Parameter Press, Inc., 1975); also see W.E.B. DuBois. *Dusk of Dawn.* (New York: Harcourt, Brace and Co., 1940).

[4]Willie, Op. cit., 29.

[5]H.H. Hyman. "The Psychology of Status." *Archives of Psychology.* Vol. 37, No. 269 (1942) 94.

[6]Robert Merton and Kitt A. Merton. "Contributions to the Theory of Reference Group Behavior." *Studies in the Scope and Method of "The American Soldier."* R.K. Merton and P.F. Lazarsfeld, eds. (Glencoe, Ill.: Free Press, 1950).

[7]M. Sherif. "The Concept of Reference Groups in Human Relations." *Group Relations at the Crossroads.* M. Sherif and M.O. Wilson, eds. (New York: Harper and Bros., 1952); and Tomotsu Shibutani. "Reference Groups as Perspectives." *Symbolic Interaction.* J. Manis and B. Meltzer, eds. (Boston: Allyn and Bacon, Inc., 1972).

[8]Stanley Leiberson and Donna Carter. "Making It In America." *American Sociological Review.* Vol. 44, No. 33 (1979) 347-366.

[9]Patricia Abers. "Steps Towards Economic Literacy." *The Crisis.* Vol. 87, No. 1, Whole Number 768 (January, 1980) 18.

[10]Thomas Daymont and Robert Kaufman. "Industrial Variation in Black - White Differences in Labor Market Allocation Process." A Paper Presented at the *Research Symposium on Social Indicators of Institutional Racism-Sexism.* (Los Angeles, California, 1977).

[11]Reynolds Farley. "Racial Progress in the Last Two Decades: What Can Be Determined About Who Benefitted and Why." A Paper Presented at the 1979 *Annual Meeting of the American Sociological Association.* (Boston, Mass., 1979).

[12]Andrew Billingsley. *Black Families in White America*. (Englewood Cliffs: Prentice-Hall, Inc.,).

[13]Ralph Ellison. *Invisible Man*. (New York: Randon House, 1947).

[14]Willie. Op. cit., 27.

[15]Billingsley. Op. cit., 10.

[16]Carol Krucoff. "Middle-Class Notions of Structure Seen as Wedge Among Blacks." *The Washington Post*. No. 343, Sec. B-1 (Washington, D.C., 1979).

[17]Erik H. Erikson. *Childhood and Society*. (New York: W.W. Norton and Co. Inc., 1963) 244.

[18]"Black on Black Crime." *Ebony*. Vol. 34, No. 10 (August, 1979) 25.

[19]Morton Kramer, Beatrice Rosen, and Ernest Willis. "Definitions and Distributions of Mental Disorders in a Racist Society." *Racism and Mental Health*. (Pittsburgh: University of Pittsburgh Press, 1973).

[20]*The President's Commission on Mental Health*, The Report of the Special Population Sub-Panel on Mental Health of Black Americans, (1978) 101-106.

[21]M.S. Cannon and B.Z. Locke. "Being Black is Detrimental to One's Mental Health: Myth or Reality?" *Phylon*. Vol. 38, No. 4 (December, 1977) 408-428.

[22]A.K. Bahn, E.A. Gardner, L. Alltop, G.L. Knatterud, and M. Solomon. "Admissions and Prevalence Rates for Psychiatric Facilities in Four Register Areas." *American Journal of Public Health*. Vol. 56, No. 12 (December, 1966) 2033-2051.

[23]G.L. Maddox. "Drinking Among Negroes: Inferences from the Drinking Patterns of Selected Negro Male Collegians." *Journal of Health and Social Behavior*. Vol. 9, No. 2 (December, 1968) 144-120.

[24]Eliot B. McNeil. *Neuroses and Personality Disorders*. (Englewood Cliffs: Prentice-Hall, Inc., 1970) 135.

[25]S.R. Levitan et al. *Minorities in the United States: Problems, Progress, and Prospects.* (Washington, D.C.: Public Affairs Press, 1975).

[26]B.M. Rosen and I.D. Goldberg. "Drug Abuse Reported for Patients Seen in Psychiatric Facilities in Maryland." (Washington D.C.: National Institute for Mental Health, Mimeograph, 1972).

[27]McNeil. Op. cit., 44.

[28]James Comer. "Black Suicide: A Hidden Crisis." *Urban Health.* (1973).

[29]Kramer, Rosen, and Willis. Op. cit., 439.

[30]Thomas Pettigrew. "Racism and the Mental Health of White Americans." *Racism and Mental Health.* B. Kramer and B. Brown, eds. (Pittsburgh: University of Pittsburgh Press, 1973).

Critique

Shirley Vining Brown's "Symbolic Interaction and Black Mental Health: Understanding Black Self Conceptions" presents significant and vital information concerning the effects of negative self-concepts on black Americans. The most interesting aspect of the paper is the development of the concept of "negative belief systems." She posits the belief that others, especially white psychologists and sociologists, are the defining agents of Black Culture, ethnicity, and identity. That is, blacks who believe these negative constructs experience mental health disorders: drug addiction, schizophrenia, alcoholism, and hypertension are examples. Buried negative beliefs about "self," in accordance with social injustices in economics and politics, provide the framework for black mental health problems. Negative beliefs about "self," according to Brown, are evidenced by increased black mental health disorders.

Brown's essay is enlightening as she unfolds the dilemma: blacks are systematically reinforced with negative self concepts and they are denied adequate coping mechanisms for handling negative beliefs which result in significant "mental disorders." Her paper lays the basic groundwork for focusing the problems. However, Brown fails to provide solutions for the problems she illustrates.