

African Worldview: An Integrated Psychological Perspective

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Abstract

Christian scholars are constantly confronting the new challenges of a relentlessly changing intellectual environment including postmodernism amongst others; challenges of integration in the practice of Psychology and how Christian scholars need to integrate the ever-changing intellectual scholarly world their practice, research and scientific inquiry.

It is in this context that this paper will first scan the overview of Psychology in Africa. The paper will also look at application of Africa Psychology in Clinical scientific inquiry and practice. It will in addition outline Integration of Christianity and Psychology and finally as it scans the horizons of African worldviews in relation to integrating African world views in Psychological Scientific inquiry.

Keywords: African World View, Integration, Postmodernism.

OVERVIEW OF PSYCHOLOGY IN AFRICA

Africa remains and has been and a major receiver of external influences that have been imposed unsought (Nsamenang & Dawes, 2008). Just like formal education and evangelism, scientific psychology arrived in Africa with colonization in the framework of anthropological research (Peltzer & Bless, 1998) in addition to supportive service sectors like health. Psychology, like every colonial import into Africa, has retained an imperialistic and racist identity (Owusu & Moffitt, 2005) in the sense that psychological theories and methods are still Eurocentric and its primary focus is on topics that reflect this externalized orientation, thereby largely losing “sight of the soil out of which the existing (African) society has grown and the human values it has produced” (Westermann, 2001).

The state of Psychology in Africa is unclear (Nsamenang, 2007) compared with psychology’s status in other world regions except in few countries such as Kenya where legislation on governing bodies and ethical codes in the discipline (Kenya Psychological and Counselling Association [KCPA], 2014) and South Africa “are relatively well developed, compared with most European countries” and “additionally only perhaps to the USA and Canada” (Wassenaar, 1998, p. 142).

As the Psychology discipline stands today in Africa, it occupies an outlier stand on the psychological world and, given its inadequate capability to share and generate its own psychology; making it a net importer rather than a generator of psychological knowledge (Karani, 2010).

Despite this dim view, the discipline of Psychology is slowly evolving into a professional discipline among many other African countries, a fledgling science that still occupies only the fringes of academia and society in most African countries (Nsamenang & Tchombe, 2006). However, there exists variations across and within countries, regions, and language blocks in the orienting models, conditions for training, assessments, resources, research and applications as well as in the number of psychologists and their integration into policy, research, and service programs (Karanja, 2010). As much as countries like Chad, Cameroon, and Gabon have been ‘struggling’ to set up the discipline, formal psychology institutions offering Psychology programs and services already exist in Kenya (such Daystar University and University of Nairobi), South Africa (such as University of South Africa [UNISA]), Ghana (University of Ghana), Ethiopia (such as University of Gondar), Uganda (Makerere University), Burundi (Hope Africa University), Liberia, Nigeria,) and Zimbabwe. Infact, it has been noted that Psychology in Countries such

as South Africa is said to be more similar than it is different from psychology elsewhere in the world (Painter & Blanche, 2004).

In the above context, it alludes that psychology seems to be more 'advanced' in countries in Africa that are English-colonized Africa than those of French-Portuguese, Spanish-colonizations (Onyango, 2011). For example, there are mere 1,000 or so registered psychologists in Kenya, compared to 1000 000 in the USA (Louw, 2002). Kenya being a middle economy county portrays how then Psychology is slowly being embraced in many other African countries.

However, regardless of these limitations, presenting such impression on the present status of Psychology in Africa might be a way of forming a link between integrating African worldview and scientific inquiry in research and practice of Psychology in Africa. This will be expanded in the next section of this paper as we discuss Africa-centered Psychology and its implication and how we Christian psychologists can integrate African worldviews in the context of psychological scientific research, diagnosis, assessments and treatment of clients.

AFRICA CENTERED PSYCHOLOGY: THE IMPLICATIONS IN CLINICAL PSYCHOLOGY INTEGRATION

There has been support such as that of Karanja (2010) of advancing the field of Psychology particularly customized to Africans; the African centered Psychology. The argument, according to Karanja, is that; African centered psychology is key in expounding on theory and research which supports the cultural and intellectual autonomy of African descendants people. Among the earliest arguments for a discrete body of knowledge known as African Psychology were Clark, McGee, Nobles and Weems (1975). They asserted Psychology in Africa is the recognition and practice of a body of knowledge which is importantly different in content, origin and direction than that recognized by psychologists in Euro-American." They noted also, "the differences between Euro-American Psychology and African Psychology shows the differences between white people and black people, or in terms of culture, between Europeans and Africans." (1975, p. 9). Clark et al asserted that their comprehension of African psychology was deeply rooted in the unique and special culture and lived experience of people of African descendants that was best known through "the African philosophical tradition." (Baldwin, 2002).

Through an analysis of melanin theory, the nature of Black identity and Black intelligence Clark, et al. began a talk on a number of the important core values that inform current dialogues in psychology centered around Africa today. For Baldwin African Psychology is not just the study of human being, 'African psychology is a system of knowledge (philosophy, definitions, concepts models, procedures and practice) concerning the nature of the social universe from the perspective of African Cosmology. 'African Cosmology' thus provides the conceptual-philosophical framework for African (Black) psychology (Clark et al, p 243).

Baldwin notes that, "an understanding of African Cosmology; the African worldview is essential to an understanding of African (Black) Psychology." (p. 243). Baldwin's definition develops, in greater detail, the importance of "the African philosophical tradition," as asserted by Clark, et al. Baldwin is concerned with expounding on a proactive conceptualization of African psychology rooted within an African cosmological and worldview perspective.

Cheryl (2006) of recent times synthesized the meaning of African psychology which originates in the current proceedings of the Association of Psychologists and the Africa Psychology Institute, with the theoretical work of Ajani, Obenga, Marimba, Wobogo, Cheikh, Diop and Wade (2006).

On the other hand, Grills (2007), constructed an understanding of African psychology which is concerned with African psychological experiences from an African view, a view that indicates an African orientation to the understanding of life meaning, the world, and relationships with self and others. Additionally Grill asserts "African psychology indicates an Africentric

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framework. The Africentric framework is a genre of thought and praxis based in the cultural picture and interest of people of African descent.” (Cherly, 2006) The root of this framework is rooted in a worldview (ie. an African axiology, cosmology, ontology, epistemology and praxis).

The above assertions by Cherly (2006) and Grills (2007) clearly indicate the dire need to defining Psychology in relation to Africa is definitely rooted in the African worldview. Though different views in regard to definition on how to call the Psychology customized to Africans; whether it is defined as Africana psychology, African-centered, Africentric, or African, each of the above assertions by Cherly (2006) and Grills (2007) are rooted in components that permit for the mental, behavioral and spiritual trends of African people to be best understood in relation to philosophical thought a view that is similarly shared by Karanja (2010).

With all the above discussion; the question arises; are there differences in worldviews and thus the need for Africa centered Psychology? According to Karanja (2010), as much as there have been considerable theoretical investigations of the African worldview, there has also been numerous attempts at creating measures to accurately assess the manifestation of worldview differences among African descendants and other descendants such as those of European descendants.

To respond to above question, currently there some instruments that have been created which attempt to measure worldview differences. An instrument created by Montgomery, Fine and Myers, (1991) as well as a publication by Myers (1991) may attempt to respond to the question whether there are differences in worldviews and therefore in need for Africa centered Psychology. Myers (1990) published preliminary findings on the construction of an instrument to assess an optimal Afrocentric worldview. Relying on concepts of worldview, ontology, values, logic, identity, acquisition of knowledge and sense of worth, Montgomery, et al. (1991) constructed a 31-item Belief Systems Analysis Scale (BSAS) to assess the empirical validity of “an Afrocentric worldview as defined by optimal theory.” The findings of Montgomery, et al. suggested that the BSAS has promising internal consistency and construct validity. While the findings were only preliminary they did reflect the movement towards testing the empirical validity of the worldview concept and framework.

In addition to Myers (1990), Montgomery, et al (1991), Harriet and McCombs (1996) developed the Individual/Collective World-View Scale. It is a 16-item questionnaire which measures beliefs and attitudes about various aspects of psychosocial attitudes and behaviors which have their bases in cultural dynamics. Two small student samples were used to test the validity of this scale, ranging from 25 and 31 subjects per sample (N=56). Preliminary findings indicated that referents seemed to support the manifestation of the African worldview among the African descended student respondents.

Furthemore, Obasi, Flores and Myers (2009) recently developed attempt at worldview assessment framework and potential worldview contrasts in and initial validation of the Worldview Analysis Scale. Obasi, et al. asserted the validity of the construction and utilization of Worldview Analysis Scale (WAS) due to the prevalence of race related measures although some research on racial constructs, such as racialism stereotypes, and race related stress etc, were really needed to address the stimulus value that physical features might have on attitude formulation or well-being, a racial paradigm will have little to no utility when the researcher is interested in the cultural factors that influence psychological, spiritual, or behavioral phenomena (Obasi et al, 2009).

The above findings therefore clearly indicate views and findings from different researchers supporting the intellectual and cultural autonomy of African descendants. This may imply that African Psychologists indeed have been able to bear autonomous research and scholarship through their development, usage, and interpretation of the concept/framework of worldview.

This is helpful in producing an African-centered research throughout our Psychological studies among other studies in an African context.

This raises the concern for Kenyan Psychological research whose little is known in the quest to carry out similar research and respond to the same question of whether there are differences in worldviews and thus the need for Africa centered Psychology? To respond to this question, Kenyan Clinical Psychologists as well as other psychologists may need to use this knowledge as an approach for future investigations of important theories, therapies and models that inform the practice of Clinical Psychology in our African contexts and any of its constituent components. The use of our scholarly abilities in the finding out of ideas, concepts therapies, within the Clinical Psychology discipline from an African perspective may lead to good understanding and helping our clients. If we do not do this we may risk of influencing and reconfiguring the intellectual basis that have been set in place by previous generations of scholars such Karanja (2010), Harriet and Combs (1996), Obasi et al (1991) and Myers (1990).

Having looked at the African centered Psychology and its implication in Clinical Psychology field, the following discussion will be centered on integration of African worldviews, Christianity and scientific inquiry.

AFRICAN WORLDVIEWS: INTEGRATION OF AFRICAN WORLDVIEW, CHRISTIANITY AND SCIENTIFIC INQUIRY

There exists a number of cultural worldviews within our settings (Mpofu, 2006). To understand this existence, the power of speech, culture, orality among others are key in helping us understand African world views.

The African worldviews look at existence from the point of view of cultures and social structures which make up communities. There exists a communal ideology and unique worldview among African people. Regardless of the impact of westernization this common thread is inherent in most African cultures and customs (Mpofu, 2006). In Africa, the experience of the individual acquired from others and passed down from elder members of the community is more valued. An example is the Ameru's '*Chirinjeke*' in Kenya where an individual is bestowed leadership by a group of '*traditionally ordained*' elders.

Ivey and Meyer (2008) assert that this acquired and passed on knowledge and experience is treated as norms and adhered to irrespective of whether they are scientifically validated. For example in Kenya both a traditional circumciser and a medical doctor both circumcise. The former is not trained formally while the later is. Such a scenario for example, how traditional circumciser and a medical doctor qualify and practice can be seen here as an area of a clear conflict between Western and African worldviews Makwe (1985) defines these African worldviews as an abstraction that encompasses 'holism' of African society (p,37). Makwe in his definition brings out aspects of shared patterns of belief, constructs, knowledge and feelings whereby members subscribe to this reality.

The philosophy of these worldviews as indicated by Makwe (1985) and Ivey & Meyer (2008) is 'holism'. It has an approach that focuses on the whole living organism. This is evident in the traditional life styles of African tribes that still keep their traditional way of life; this can be seen for example in Kenya among the Maasais. For these traditional African tribes, God is seen in all their spheres of life. For example, God is invoked in times of drought, good harvests outbreak of diseases, political spheres (in Kenya for example, when the mugumo tree fell in 2012, the Agikuyus elders of Kenya interpreted the meaning of such a symbolic tree falling down). Matters pertaining to their life are interconnected to God, nature and other relations (living or dead). This indivisible cosmic whole can be theoretically distinguished, in relation to macro meso, and micro-cosmos though blending together in everyday lives of people (Sow, 1980). According to Sow the macro-cosmos is the area of activity and existence where God is

experienced. This is the area where most traditional African people interact and experience God in their human functioning.

Traditional African people experience and communicate with God in the fields when growing crops, when looking after their animals and in times of happiness and sadness (Onyango, 2011). In this context, God is not limited to Sunday services in churches, though there are sacred places for various communities where God is invoked through some special rituals such as on mountains, caves, synagogues. For example, in times of drought when cows are dying, a Maasai leader will go to this sacred place to offer sacrifices to God for the drought to end. Meso-cosmos is the sphere where ancestors, malignant spirits and sorcerers are encountered and experienced (Sow, 1980). It is the world of animals and human beings, forests, bushes, trees, rivers, wind, rain, darkness and light. From an African point of view, this is an African worldview in which conflicts; events such as accidents, sicknesses, deaths, failures as well as successes of various kinds are explained. Certain aspects of human behaviours, if not all, are explained and understood from these African worldviews. External agents tend to determine human behaviours in these worldviews.

Hammond-Tooke (1989) asserted that, spirits of the departed ancestors are believed to look after the best interest of their descendants and at the same time can also send them illness and misfortune when they are moved to wrath. Today people communicate and relate to ancestors through anniversary celebrations of their deceased members, tomb stone services and other activities like “*chirinjeke*” among Ameru speaking people in Kenya.

The Micro-cosmos is regarded as where the individual is seen to exist within the context of the collectiveness (Sow,1980). Every human being encounters and experiences nature in some way; rain, trees, and the like. No one is an island of himself or herself. As the common saying borrowed from Mbiti, (1992) which has been used in the Luhya culture and many other Kenyan and African communities (*obuntu*) ‘*Mbeho sigira kuveho, sigira kuveho, mbeho* (I am because we are, and since we are, I am). A person exists because others exist. This collective existence does not necessarily make the individual lose his/her individuality.

It is therefore evident from the above discussion that psycho behavioural modalities from an African view of the person and the worldview should put emphasis on groupness, sameness and commonality. Values and customs are reinforced by cooperation, collective responsibility, cooperation and interdependence (Viljoen, 2003). This is a huge implication for Christian clinical psychologists, how do we then deal with psychopathology from an African Perspective? The following section discusses how psychopathology is viewed from an African perspective. It is hoped that from this discussion, Christian Clinicians will make informed decisions in dealing with clients from the African descent.

PSYCHOPATHOLOGY VIEWED FROM THE TRADITIONAL AFRICAN PERSPECTIVE

Psychopathology from the African worldviews perspective is defined in terms of disharmonious and fractured social relationships (Myer, 2003). Disharmonious relationship with God (macro-cosmos) leads one to suffer from illnesses (Onyango, 2011). In an African worldview, psychopathology results when disharmony exists between people and the ancestors. This implies that an individual member of a family may suffer as a result of disharmony between the family or community and the ancestors. This disharmonious relationship falls within the level of meso-cosmos (Sow, 1980). In contrast to the Western concept of psychological well-being, which focuses on the individual, well-being from an African perspective encompasses the physical, spiritual and social dimensions of the individual (Meyer, 2003).

The supernatural and natural aspects are closely related. Health and well-being is not seen merely as a biological matter, but one bonding the human body and the soul in full harmony (Onyango,

2011). The absence of harmonious relationship with the members of the supernatural world and the resolution of interpersonal, family and community conflicts and tensions results in illness (Mpofu, 2006). Disharmonious interpersonal relationships leading to ill health is seen within the level of micro-cosmos (Sow, 1980). In most traditional African cultures, disturbed social relations such as incest; that create disequilibria expressed in the form of physical or mental problems cause illness. A disturbed relationship with one's God (macro-cosmos), conflict with one's relations, nucleus and extended family members (micro-cosmos) and problems with ancestors (meso-cosmos) contribute to the individual's unhealthy status (physical or mental) (Sow, 1980). From an African perspective, conflicts in interrelationships, killing animals as sheep or goats that the community consider sacred such as, or cutting sacred trees such as 'mugumo' among the Agikuyus of Kenya may cause an individual, family or community some health problems.

A psychologically unhealthy person therefore is the individual who lives in disharmony with the forces of nature (Mpofu, 2006). From a traditional African perspective, ill health is manifested in physical diseases (microbiological infection) or psychological-mental illnesses, as well as a breakdown in social and spiritual mechanisms of the individual and the community. Mpofu asserts that the interconnectedness of spirituality and phenomenal world and are two major aspects of the traditional African worldviews that deal with ill health, causes of ill health and healing. Mental health from an African perspective accrues from multiple causes that are mostly external (Onyango, 2011).

An African is involved in an adulterous act with his brother's wife whether or not this act is detected; he undergoes stress, having disturbed his social harmony (Sogolo, 1993). For instance among the Akamba of Kenya, it is likely going to lead to 'sticking together of the couple during a sexual interaction'. If someone cheats his neighbour, that his/her neighbour has been cruel to his family or has offended his community, the anxiety that follows may take the form of phobias, either of bewitchment or the affliction of disease. For example, among the Luhya of Kenya, one is compelled to swear that indeed he is telling the truth about his neighbor. In the event it is a lie, a mental affliction may follow.

The interconnectedness of the phenomenal and spiritual worlds discussed and examples drawn from different Kenyan settings above conceptualizes psychopathology from the perspective of the psycho behavioral modalities such as collectiveness, sameness and commonality. The ethos of this view rests on survival for the tribe and the individual being one with nature. Most communities in Kenya have such beliefs and the calling to customize many of our therapies to suit the needs of an African clientele.

Therefore the models of approach to Psychopathology in an African context should really integrate the cultural, religious and social aspect of a client. Psychology being the study of human behaviour and mental processes, it is therefore for we therapists, to focus on changing client behaviour from the context in which they understand their own problems. The multicultural approach that focuses on an individual will be essential in dealing with most of clients' issues. Therefore, the social, cultural, religious and historical contexts are key in understanding Psychopathology from the African perspective.

TRADITIONAL AFRICAN APPROACHES TO HEALING

As noted in our previous discussion above, restoration of health, whether mental or physical from an African perspective, lies within the social, cultural and historical contexts. Healing from African worldviews, is knowledge and practices used in the diagnosis, prevention and elimination of physical, mental and social imbalance (Mpofu, 2006). These practices are based on the knowledge derived exclusively from practical experiences and observations handed down from generation to generation, mostly verbally. Approaches to healing from an African perspective therefore include practical and open relationships with clients (Onyango, 2011).

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This model is directive, deals with supernatural and natural world, focuses on who caused the problem and is aimed at social cohesion. The therapist healer in this context should focus on practical ways of helping the client deal with his/her issues. Given that from African worldviews, the root cause of wellness or ill health is explained in metaphysical terms, healers and their patients prefer directive treatments or mostly externally oriented methods (e.g., ritual cleaning, enactment, sacrifices). However, internally oriented healing methods such as making bodily incisions, vomiting and purging are also used but mostly in their perceived function to keep evil spirits, witches and bad luck far away from daily lives of the individuals and community (Meyer, 2003). For a therapist, one needs to listen to the client from the client's perspective without labelling clients.

The African worldviews emphasize holistic healing, that is, healing approaches that encompass spiritual, psychological and physical aspects of the illness. These approaches are also grounded on the conception that no one is an island to him/herself. Family collectiveness therefore, becomes a major resource for the individual's well-being. The healing methods are now broadly discussed under physical activities, rituals, herbal extracts, cleansing, naming and dreams (Onyango, 2011).

As Christian Clinicians, we need to understand that teaching and practicing psychology in Africa has come of age through developmental stages. Significant reforms and transformations have taken place to some extent in some universities; Daystar University- where Integration of Faith and life is emphasized is just among but few. A lot still needs to be done. The African perspective humans form an indivisible whole with God, other human beings and nature with the ethos based on the survival of the community and being one with nature (Meyer, 2003).

The implications of these differences are that some traditional Africans may avoid traditional psychotherapy services because of cultural biases that exist within many mental health systems. The challenge therefore, is how this integration can be attained for the good of a disadvantaged African client. If what we have discussed about integration of Christianity and Psychology can be enhanced, then we are good to help clients who came our way.

CONCLUSION

To conclude this discussion on: *African Worldview: a Psychological Perspective*, it is possible to emerge with a far richer and more effective psychology in helping deal with our client; the African client. As the paper has tried to demonstrate, there are brave beginnings to psychology. However, the future remains hanging in the balance as long as we continue ignoring the African client from the African Psychology perspective. As Christian Clinicians; our role is to glorify the name of the Lord in each client regardless of their faith. We can do it by being sensitive to their culture and traditions. Jesus demonstrated this lot of times; we can do it by emulating his examples in dealing with people.

As indicated in the paper Integration is not only possible, but is moving forward rapidly. The final outcome can only be a more effective model for both Christianity and Psychology. These models will only strengthen the fields of people helping for the future.

Finally, Psychotherapy practice as it is now and with very few professionally trained psychotherapists, does not accommodate traditional African worldviews given that the cultural upbringing of many Africans dictates different patterns of communication that may place them at a disadvantage. However, many questions remain, concerning how such integration might occur and how these belief systems and they can be measured.

Above all Christian Psychotherapists have a hard task now and ahead. As noted in the paper, we should also seek to understand the Truth as much as the Holy Spirit gives us the ability. Integration, if used properly can be of great benefit to our clients.

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