

## **AFRICAN-AMERICANS IN PSYCHOTHERAPY**

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Historically, and currently, the treatment of African Americans in Psychotherapy has been consistent with fluctuating race relationships, and with the evolving social context of African-Americans in America. Three decades of epidemiological research, confirm the existence of a negative relationship between economically disadvantaged minority status and indices of mental disorder. Unfortunately, these conclusions remain as “true” today, as they were originally (Lorin & Parron, 1985).

In a similar vein, it was suggested that the evidence is unambiguous and powerful, that social class differences provide for comparable levels of psychiatric disorder in our society. Social class differences in America, regardless of the region or the method of study, revealed that the majority of those ranked in the lower social classes by far, had the greatest incidence of psychosis (Fred, 1969, p. 113).

Historically, African-Americans have been disproportionately reported and ranked among the lower socio-economic groups in America. In light of this, it is not surprising that African-Americans are most often labeled psychotic, when struggling with the every day stresses of life, and are, and have been, generally excluded from psychotherapy. And, although the number of self-referrals for psychotherapeutic treatment of African-Americans has increased in recent years, referrals for such treatment usually come from external sources, such as the courts, the schools, the police, and/or other community agencies.

In my practice as a psychotherapist, I serve a broad array of clients from various socio-economic levels, as well as, varied cultural and ethnic groups. Years of experience and my research (Roberts, 1990), have revealed and taught me that successful therapeutic relationships are engendered and developed through the trust and competence of the therapist. However, for some African-Americans, it is indeed difficult to get beyond the trust level. Understandably, many prefer involvement with therapists with whom they can more readily identify. Many also believe the therapist’s knowledge and understanding of “the African-American culture and experience,” would more readily lead them to a resolution of their problem(s).

In this regard, a preponderance of the research studies in the literature, suggest that African-Americans engaged in psychotherapeutic activities tend to respond more readily and positively to African-American professionals. With this awareness, it is critically important that mental health professionals provide the necessary situations, circumstances and therapy needed. It is my strong belief that psychotherapy for many African-American families, could be a catalyst for creating possibilities for positive changes in their lives.

Over the past decades, I have observed significant increases in the number of African-American individuals and families who have engaged in psychotherapy. Unlike in earlier times, for many reasons, individuals across the spectrum, regardless of ethnicity or income, saw such involvement as a “stigma” or, that one must be “crazy” to be involved in psychotherapeutic activity.. Fortunately, such thinking is gradually changing.

Consistent with the changes cited above, which reflect increased involvement in psychotherapeutic activity by African-Americans, as well as, other groups, the on-going need for mental health professionals, particularly family therapists, and others, is indeed increasing.

Accordingly, it is the intent of the Dr. Harriet H. Roberts “Inspiration Scholarship Fund,” sponsored by the Houston Galveston Institute (HGI), to assist in providing an on-going cadre of well trained and competent professionals, to address this need.