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**Invisibility Syndrome in  
African Descent People:  
Understanding the Cultural Manifestations  
of the Struggle for Self-Affirmation**

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More than 50 years ago, it was Ralph Ellison's (1947) novel that detailed the notion of "invisibility" for African Americans. Through the presentation of the book's main character, Ellison was able to capture the essence of the quest for self-affirmation that African American people struggle with so desperately.

Now, some 50-plus years later, Anderson Franklin (1999 [this issue]) is reintroducing this notion into the psychological literature in an attempt to assist therapists and clinicians in working effectively with African American clients. Franklin is to be applauded for his efforts in providing important insights into the psyche of African American males because no segment of the population has been more misunderstood and mischaracterized than Black men. Consequently, it is easy to imagine how many African American males specifically, and African American people generally, are misserved in the mental health system when they receive services and treatments from people who have little or no knowledge of their culture, peoplehood, character, and/or psychic debilitation (Sue & Sue, 1990; White & Parham, 1990). And so, Franklin's article provides a necessary and much appreciated contribution to the literature.

**GENERAL REACTIONS**

In analyzing Franklin's (1999) article, I am impressed with his coverage of the invisibility construct and the integration he achieves by blending it with the racial identity development process. In doing so, he adds needed insight

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to the practice of counseling and psychotherapy by highlighting specific elements each therapist must attend to on a content as well as a process dimension of therapeutic interactions. In this regard, he walks the reader through the sequential stages of the nigrescence process, while simultaneously reinforcing the developmental tenets of the model. This is perhaps best seen in his recounting of critical incidents Black men endure which correspond to the "encounter stage" of the nigrescence model articulated by Cross (1971, 1991), Parham (1989), Parham & Helms (1981, 1985), Helms (1990), Carter (1995), and others. In doing so, Franklin believes, and I agree, that repetitious exposure to racist incidents (discrimination, insensitive remarks, etc.) or the perception of racism in others' behaviors provides an emotionally charged social context that continually reminds Black men of how outward manifestations (i.e., skin tone) are used as justifications for inappropriate or inhumane treatment by the larger White society. Their life, then, is believed to be characterized by a series of sociocultural challenges that test their ability to successfully navigate the pathways of life without losing their sanity in the process.

### THE FUNDAMENTAL IDENTITY CHALLENGE

Although Franklin (1999) adequately meshes the constructs of racial identity and invisibility, it is important to highlight what I consider to be the most fundamental identity challenge for persons of African descent. Describing who one is and deciding who one wants to be sound like similar questions. However, although related, they are not the same. Who one is constitutes a question of identity; who one wants to be is more a question of congruent actualization. This decision around achieving and maintaining congruence with one's identity is at the heart of the identity struggle. Thus, I have previously argued that the most fundamental question African people in this country ask themselves is: "How do I maintain a sense of cultural integrity in a world which does not support and affirm my humanity as an African American?" (Parham, 1993).

It is imperative that readers understand that this struggle, or dilemma if you will, is not new and certainly did not begin in contemporary America. It is similar to the analysis advanced by Du Bois in his classic work entitled *The Souls of Black Folks* (1903). There, he highlights the psychic dissonance most people of African descent feel in struggling to live in two societies: one being White America and the other being the African American reality in the context of a racist and oppressive society. What makes this struggle so pronounced for some is the degree to which Black people are socialized to seek

approval and validation from the larger White society and/or their White counterparts. Concurrently, a Black person understands at a deeper level that even superficial validation will not be achieved absent the adoption of specific modes of thinking and feeling, language use, and behaviors that conform to a Eurocentric standard. And so, whether the conflict felt is in response to rejection by Whites of one's "Black" behavior or in response to personal decisions to deny and/or otherwise disguise one's Blackness, the result can lead to invisibility. Franklin's (1999) presentation of the invisibility syndrome makes this implicitly and explicitly clear.

It is also important to recognize that the invisibility syndrome must be understood both within and outside of a historical or contemporary American context. Invisibility is a global phenomenon for African people, particularly in places where remnants of European colonization exist or continue to exert influence over people of African descent. Clearly, Du Bois's (1903) analysis or that of Ames (1950) were no more profound than those provided by Fanon in *The Wretched of the Earth* (1968), Memmi in *The Colonizer and the Colonized* (1965), or even Mandela in *Higher than Hope* (Meer, 1988). The last three works describe, in similar terms, the dynamics associated with the Black people under conditions of White supremacy, the colonizer and the colonized, or the apartheid government and the majority Black population, respectively.

### AREAS OF CONVERGENCE AND DIVERGENCE

The words to the song "Seems Like I Gotta Do Wrong [Before They Notice Me]" (Whispers, 1969), a popular song in the late sixties, provides another interesting backdrop from which to view the notion of invisibility. Franklin (1999) has captured in his model the variables that contribute to one's adoption of such a complex. It is true that African American men are portrayed in negative and stereotypic ways throughout society. Nowhere is this reality more true than in the electronic media and television. Random viewing of most TV shows (including the news) will reveal that African people are usually portrayed in one of three ways. These include the athlete, entertainer (usually a comedian or clown), or criminal (Mosley, 1972). And the images of those who have not been blessed with talents to compete in sports or entertain on a stage or screen are relegated to among the most aberrant in all of society. Truly, the only behavior that seems to get attention and exposure at times is that which is characterized by wrongdoing, rendering the more positive aspects of individual or community behavior virtually invisible.

Franklin (1999) is also on target when he details seven dynamic elements of the invisibility syndrome. Collectively, they accurately represent the cognitive and emotional aspects of the intrapsychic pain experienced by African Americans who negotiate such encounters on an all-too-frequent basis. He is also correct to point out that the intrapsychic process also involves deciphering the intent and purpose of each interaction one experiences. These distinctions, although sometimes subtle, are important gauges that assist each person in processing the encounters in positive or negative ways. Consequently, decisions are made about whether specific incidents or encounters are perceived as insignificant or traumatic, based on whether the offender's intentions are perceived as hostile or accidental.

Despite the accuracy of Franklin's (1999) analysis, it is essential that those ways in which his presentation falls short be highlighted as well. The first of these is the implication that racism in and of itself is sufficient to instigate feelings of anger, distress, tension, anxiety, and confusion. Although racism is a formidable obstacle to be sure, it is a concrete manifestation of a larger phenomenon known as global White supremacy. In accepting this premise, we can see, as Fuller (1969) and Cress-Welsing (1991) do, that we are not simply discussing patterns of individual and/or institutional practices in this country, but universally operating systems in which large segments of the world's population participate. Thus, irrespective of where people of African descent travel and/or live in the world, their experiences are likely to be similar, if not identical.

This analysis is particularly important to African American people in terms of individual and group survival. So many of the racist incidents that occur in life leave African descent people feeling that there is something wrong with them. The internalized racism then leads to feelings of confusion, self-doubt, and self-denigration because the attributions made are directed inwardly rather than outwardly. Thus, the vulnerability one experiences from being surprised by encountering racist events would decrease significantly by never losing sight of the fact that such incidents can occur at any time in White supremacist systems. Indeed, Cress-Welsing (1991) and Fuller (1969) before her were clear in arguing that if you fail to understand racism and White supremacy, what it is and how it functions, everything else you think you understand will only confuse you.

In taking a more global perspective on the concept of invisibility, it is also important to use constructs that more accurately capture the essence of the invisibility struggle. Whereas Franklin (1999) offers an analysis by Jones (1997) to explain the various dimensions of racism (individual, institutional, and cultural) as factors contributing to invisibility, there are other concepts which provide equal and sometimes more clarity on the issues. One such con-

cept is the notion of the *MAAFA*. *MAAFA* is a Kiswahili word coined and popularized by Ani (1994) in her text *Yurugu*. It represents a great disaster of death and destruction that is beyond human comprehension and convention. One of the chief features of *MAAFA* is the denial of the humanity of African people. Thus, whereas such historical events like slavery are characterized as a *MAAFA* experience, even more contemporary manifestations of racism can be similarly classified. Although space does not allow for a more thorough review of this concept, readers should be referred to Sister Marimba Ani's work. What is true, however, is that the "microaggressions," or racial incidents, described by Franklin serve a similar function of dehumanizing the victim.

Consideration of a more global phenomenon provides a second area of divergence from Franklin's (1999) analysis. This relates to the notion of identity development. Franklin is correct, I believe, in asserting that the subtle and more blatant forms of racism, prejudice, and so on serve as components of the invisibility process as well as encounter experiences (microaggressions) that are consistent with the Cross (1971) model of racial identity development. Although he believes that racial identity development can serve as a "buffer" against the internalization of racism, he neglects to mention another important aspect of the process. That aspect relates to the degree of psychological defensiveness each person employs in processing specific life circumstances. For example, an "encounter experience" for one individual may be traumatic, whereas another person's ability to rationalize away the racist event as "less meaningful" or to deny the racial implications of it may render his or her emotional state unaffected.

It is also worth noting that Franklin's (1999) focus on microaggressions, or specific events encountered by African descent people, implies that the catalysts of identity change are local events. I am reminded that encounter experiences can be both individual and social, particularly if a person has a more collective sense of self and culture and identifies with the larger community of African people.

Another point of divergence rests with the idea of treatment and healing. Within the context of therapeutic intervention, Sam is allowed to relate his story in such a way that the sharing provides emotional catharsis for him. Although I agree with Franklin (1999) that the opportunity to disclose is in and of itself healing, catharsis in this case may be insufficient to achieve closure (if that is possible). In my view, what is needed is a process whereby Sam works with the therapist not only to feel more empowered but to do more empowering and social advocacy to engage and/or resolve his circumstances. Without this added dimension, African descent people may begin to internalize a sense of hopelessness and powerlessness about their ability to transform their negative circumstance into something more positive.

### EXPANSION OF THE MODEL

The invisibility syndrome can be a powerful construct in facilitating the understanding of African American males and females who present themselves for therapy and treatment. Therapists and other mental health personnel will find the insights provided by Franklin's (1999) presentation useful in conceptualizing the intellectual, emotional, and behavioral dynamics of their struggle for self-affirmation.

However, in order for the concept to have a more functional utility, there are several issues that will need to be addressed. The first of these relates to a more wholistic integration of the self. Franklin's (1999) presentation adequately discusses the cognitive, affective, and behavioral dimensions of the personality and how each of these is impacted by the dynamics of invisibility. Still, there are dynamics associated with the energy and life force of African descent people that demand that the model address the spiritual dimension of the self as well. The African-centered worldview conceptualizes the world as a spiritual reality, where the manifestation of spiritness is the essence of one's humanity. From this viewpoint, it is therefore reasonable to believe that therapeutic healing must include a deliberate focus on the spiritness that permeates the cognitive, affective, and behavioral parts of the self. Only then will a therapist be able to understand how the dynamics of invisibility contaminate the energy and life force of a people (both individually and collectively).

A second element of expansion must address the understanding of high-risk behaviors on the part of African males in particular. High-risk behaviors are responses to life circumstances, which place various elements of the person's self in jeopardy. They range from threats to one's sense of self to threats to one's physical life. High-risk behaviors are not commonplace in a social context where a person's needs are adequately met through conventional verbal and nonverbal behaviors. However, if satisfaction of basic needs and personal affirmation are not met despite adherence to social norms, then behaviors that seek to acquire those outcomes become more and more risky. Thus, clinicians who work with African Americans may want to examine the behaviors that appear to test the margins of appropriateness to ascertain what specific needs are being met through their responses. The challenge then is to help them identify ways of getting their needs met that demand less risk, are more socially appropriate, and consequently instigate less threat.

A third element of expansion centers around the need to analyze one's source of validation. It is true that the human condition is prone to more heavily weight validation that is received from external rather than internal sources. Given this reality, people, irrespective of color, must be cautious about where and from whom they receive their validation. The wisdom of the

elders teaches us that it is unhealthy to seek validation from your oppressor, particularly when the validation received is disaffirming and dehumanizing. As such, therapists and clinicians would do well to assist African Americans struggling with the invisibility syndrome to develop sources of support which are African-centered and more culturally grounded. Carter G. Woodson (1933) was absolutely correct when he asserted that yielding control of your mind to alien sources will have you seeking inferior status even before one can be provided for you.

A fourth element of expansion focuses on the tendency to restrict the etiology of the invisibility syndrome to socially oppressive phenomena. In citing those factors which instigate feelings of anger, frustration, confusion, and so on, Franklin (1999) points to negative social forces (i.e., racial slurs, discrimination) that occur in the context of cross-racial interactions (usually African American and White). It is important to remember, however, that experiences which fail to affirm the humanity of a person individually, or people collectively, do occur both within as well as outside of the culture. For example, differential career expectations on the part of African American men and women toward each other could create a scenario in which one partner's "dream" and resulting behavior comes into conflict with the assumptions of the other partner about what he or she should be doing. Consequently, the man or the woman could be subjected to negative attitudes or behaviors that project his or her partner's displeasure at his or her life choices. This could potentially result in perceptions that significant aspects of oneself must be more dormant (invisible) to escape the harsh criticism and unsupportive tones of the other partner.

## CONCLUSION

Ultimately, the value of increasing our understanding of the invisibility syndrome is only partially reflected in the therapist's enhanced awareness. Without question, clinicians who are searching for knowledge and expertise to assist them in treating African American clients will find Franklin's (1999) insights very useful. However, if the usefulness of the construct is limited to privatized individual or even group therapy interactions, then psychology misses a golden opportunity to impact larger segments of society. Elsewhere, I have argued that it is psychology's responsibility to use instances of human suffering as barometers for social change (White & Parham, 1990). In the context of the invisibility syndrome, clinicians can use the insights gained from client disclosures and experiences to intervene in the larger social arena. If our discipline can help society learn to better support and affirm the dignity and humanity of African people and other members of our community, then



we decrease the probability that cross-racial interactions will necessarily lead clients to feel invisible.

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