African Psychology vs. Western Psychology: why African practices are not psychology by Sharon Sihlali

Psychology is a discipline that has its roots firmly planted in Western traditions, with its methodologies, theoretical frameworks, and clinical practices deeply influenced by European intellectual history. In recent years, however, a trend has emerged where African cultural practices and belief systems are being categorized as part of the broader field of psychology. This movement—calling African healing, spirituality, and traditional practices "African psychology"—deserves scrutiny.

While well-meaning in its attempts to elevate and acknowledge African cultural identity, this merging of African spirituality and indigenous healing with psychology risks diluting the essence of what psychology truly is. In essence, by trying to force African practices into the framework of Western psychology, we not only misrepresent both disciplines, but we also undermine the purity of each.

Psychology: A Western Practice

At its core, **psychology** is a **Western science**. It is a field developed in the context of Western philosophy, informed by thinkers like Sigmund Freud, Carl Jung, and later, the scientific methods of behaviorism, cognitive psychology, and neuropsychology. Western psychology, with its roots in **empiricism**, **objectivity**, and **methodological rigor**, seeks to understand the mind and behavior through **scientific observation**, **measurement**, and **clinical practice**. It is inherently built on a framework that values **individualism**, **rationality**, and **evidence-based practice**.

In Western psychology, cultures, religions, and belief systems are explored **not as branches of psychology**, but as **contexts** that **influence** human behavior and mental health. This cultural competence is necessary for therapists to properly engage with individuals whose life experiences differ from the traditional Western model. However, it is crucial to maintain the distinction between **psychology as a discipline** and the **cultural and spiritual practices** that shape people's worldviews.

African Practices Are Not Psychology

When we begin to categorize African cultural practices, healing methods, and spiritual beliefs as "African psychology," we risk reducing complex, rich traditions to mere psychological constructs. Practices such as **Ubuntu** (the philosophy that emphasizes communal relationships), **ancestral worship**, or **spiritual healing rituals** are **not psychology**. They are expressions of culture, community, spirituality, and identity.

These practices serve **different functions**: they are spiritual, social, and communal. They are not based on scientific inquiry, empirical testing, or the principles of evidence-based therapy. By reclassifying these practices as "psychology," we blur the line between cultural heritage and a scientifically grounded discipline.

The Dangers of Merging African Practices with Psychology

1. Dilution of Psychology's Essence:

Psychology, by its nature, is grounded in **empirical research**, **scientific methods**, and **objective understanding**. While African practices may be rooted in centuries of cultural wisdom, they do not operate under the same **scientific rigor** that psychology demands. By merging the two, we risk diluting psychology's very foundation: a systematic, scientifically tested approach to understanding the mind. The result is an **incoherent system** that may lack the precision and objectivity essential for psychological diagnosis and therapy.

2. Subliminal Westernization of African Traditions:

The effort to classify African practices as "psychology" can be seen as a **subtle form of Westernization**. Historically, Western institutions have sought to **dominate** and **redefine** non-Western practices. By categorizing African spiritual and cultural practices under the umbrella of psychology, we may inadvertently be reinforcing the idea that African traditions need to be legitimized or validated by the Western framework to be considered valid. This move represents a **colonial mindset**—where African traditions are still seen as inferior or in need of "conversion" to fit into the Western paradigm.

3. Loss of Cultural Identity:

When African healing practices are reduced to mere psychological concepts, the **cultural identity** they represent can be lost. African spirituality and traditional healing practices are deeply tied to **identity**, **community**, and **history**. They are not therapies in the Western sense of the word; they are ways of **understanding**

existence and **the universe**. They function on a different level, addressing issues of **spirituality**, **ancestral connections**, and **communal well-being**—areas outside the purview of Western psychological inquiry.

Case Studies: The Risks of Blending

Case Study 1: The "Calling" Diagnosis in African Spiritual Practices

One example often cited is the diagnosis of an individual in an African context as experiencing a "calling" to become a spiritual healer, a concept that originates from the Nguni people of Southern Africa. In African traditional beliefs, a calling is not considered a mental illness but rather a spiritual awakening or divine intervention. When Western-trained psychologists encounter someone from this cultural background who experiences visions or voices related to their calling, there is a risk of misinterpreting this as psychosis or a mental health disorder.

For example, a young African woman in South Africa might report that she hears ancestral spirits urging her to become a healer. If this is classified as a **psychological disorder** under Western frameworks, she may be prescribed medication to treat her condition. This treatment would be not only **culturally inappropriate** but also **morally problematic**, as it disregards the significance of the woman's spiritual experiences.

By framing this experience within the Western paradigm of **mental health diagnosis**, we are failing to respect the individual's **spiritual and cultural context**. Labeling it as a pathology undermines the cultural beliefs that empower individuals in their communities, and fails to distinguish between **psychological illness** and **spiritual calling**.

Case Study 2: The Misinterpretation of Ubuntu in Therapy

Another example can be seen in the application of the **Ubuntu philosophy** in therapeutic settings. Ubuntu stresses the interconnectedness of all people and emphasizes **community support** over individual autonomy. In a Western therapy context, where **individualism** is often prioritized, this communal approach may be misinterpreted as **dependence** or an **avoidance of personal responsibility**.

For example, a person in a therapy session who is heavily reliant on community support may be diagnosed with a **dependency disorder** according to Western standards. However, in African cultures, this reliance is seen as part of a healthy, **interdependent social structure**

that nurtures the well-being of the individual within the collective. This misinterpretation arises from a failure to recognize that the **value system** of Ubuntu is **not about pathology** but about **cultural orientation** toward health.

The Need for Cultural Competence, Not Integration

As therapists, it is essential to understand the **cultural context** of our clients. This means acknowledging the influence of cultural practices and belief systems on mental health, but not **incorporating** these practices into the realm of **psychology**itself. Cultural competence requires us to be sensitive to the ways in which **spiritual beliefs**, **rituals**, and **community practices** can impact **well-being**, without conflating these practices with **psychology**.

Conclusion: Let Psychology Be What It Is

Psychology is a scientific practice, rooted in evidence-based methods and clinical frameworks developed through centuries of Western intellectual history. While it is essential to respect and understand African cultural and spiritual practices, these should remain distinct from the discipline of psychology. Merging African practices into psychology not only risks undermining the integrity of both African traditions and the field of psychology, but it also confuses the purpose of mental health care. It is not the role of psychology to validate cultural practices; rather, it is the role of psychologists to understand and respect them within their proper context. The task is not to force fit African practices into Western psychology, but to acknowledge the richness of African traditions without distorting them. Let African spirituality and healing stand as they are—distinct and powerful cultural expressions—while psychology remains the structured, evidence-based science that it has always been. This separation will allow both systems to thrive in their own right and contribute to a more nuanced, culturally aware understanding of mental health.