

**Multigenerational Trauma and the Canadian Black Woman:
A Subjective Inquiry into the Enduring Black Slave Experience**

LOFERNE PAULINE CUFFY

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Abstract

Numerous recent studies argue that ‘mental health’ is a primary determinant of a society’s general wellbeing. However, as important as these studies are said to be insofar as the advancement in the treatment(s) of mental health problems, they all lack a focused attention on how Black women in Canada are affected by these problems. This research paper is primarily concerned with addressing this shortfall in the medical establishment’s appreciation for the majority of Black women’s true position. The paper develops from the idea that this shortfall will be inevitable so long as researchers remain reluctant to explore the possibility that today’s Black woman’s biopsychosocial constitution has been and continues to be shaped in profound ways by what has been called “the slave experience”. Today the slave experience finds resonance in the phenomenon known as ‘multigenerational trauma’, a trauma constitutive of a number of salient forces, with the most significant among these being the enduring negative patriarchal(/paternalistic) constructs of women’s biological *and* psychological inferiority to men, institutionalized racism, and multiple instances of violence against women. This paper explores the ways in which these (and other) constructs contribute to the negative mental health status of Canadian Black women, as well as suggests methods to more effectively address their mental health concerns.

Key Terms: Capitalism, chattel slavery, class, colonialism, ideology, multigenerational trauma, transgenerational trauma, race, racialization, representation, resilience, trauma, violence, White supremacy.

Dedication

For my grandparents Etheline and Elijah Cuffy who taught me the importance of education.

In loving memory of my brother Chreston Dabriel who taught me the importance of struggle.

Acknowledgements

When I first began research for this study, I encountered fresh traumatic experiences. I lost my brother whom I had been caring for most of my life and I lost a friend who had been like an aunt to me. The sudden passing of my brother and friend left me with no time to grieve. To make matters worse, I discovered that there is little scholarship published on the experiences of Black women in Canada and I was forced to reorient my research. I felt like giving up, but I am grateful for the support and encouragement of friends who believed in my abilities and encouraged me to continue with the research.

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Introduction

The motivation for this research exercise arose after some serious reflection on my childhood life. Growing up on the Caribbean Island of St. Vincent I was surrounded by Black women who were the foundational pillars of their particular communities. These women were the midwives present at every birth event; they were farmers, teachers, storytellers, healers—you name a profession/activity and they were more than likely fully engaged in it. In retrospect, however, it is increasingly apparent that my childhood understanding was shaped within a contradiction: *these same women who were so central to my community were often vilified for transgressing the dominant social-cultural norms*. More specifically, women who engaged in roles that defied social conventions—such as those who were oriented toward politics or higher education, those who ‘spoke their mind’, and more broadly those who no longer had faith in the traditions of Vincentian society—were considered abnormal and perfunctorily labeled “mad/crazy”. Moreover, as I look back now on my childhood years, I realize that it was not only the matriarchs who were victims to this pernicious labelling: *as an unusually(‘abnormally’) bright, intuitive, precocious child I also was labeled mad/crazy even before I reached the age of 10*. My mother and grandmother—the women sharing primary responsibility for my upbringing in those years—in “doing their best” (as their community equals would remind me as they felt necessary) to “bring me up the right way”—never called me ‘mad’ or ‘crazy’; to them I was just being “hard-headed” or “fresh” or “rude”.

But whichever label one may choose (again in retrospect) to explain the matter it is a stigma that has shadowed me ever since. Coming to understand this stigma for what it really was now forces me to analyze my relationship with my existing world in a serious way.

Briefly, I immigrated to Canada on August 2, 1993 and began working the next day as a caregiver for a White family in Toronto's west end. I was five months pregnant at the time of my arrival. For one year, I worked cleaning, cooking and caring for three children, for a meagre pittance of just six hundred Canadian dollars a month; my presence in the household went unnoticed unless I was serving someone; I was expected to be infinitely patient, understanding, compassionate, and devoted, all at the expense of my own health and happiness. From what I have discussed above I would have to self-identify as "mammy", a slave. And although my condition has *changed* somewhat since landing in Canada twenty-five years ago, I would be hard-pressed to say that it has *improved* any. I have mainly worked menial, low paying and dehumanizing jobs, almost exclusively in homes and factories across the Greater Toronto Area. My condition as a worker has accordingly become synonymous with *an* idealized representation of "mammy"; and even though I have been engaged off-and-on for the past 19 years 'formally' educating myself, there seems no escaping the stereotype. She follows me everywhere, which speaks loudly to the depth of pathologizing that the Black woman has endured as the mammy figure.

This research paper is intended to expand this personal reflection by exploring *mental illness* in relation to Black women living in Canada, with a focus on the extent to which *multigenerational/transgenerational trauma* can be held accountable for this illness. Trauma, more generally, has been a highly topical interest across all strata of Canadian society for the past two decades. The concerned parties include, but are not limited to, the medical establishment, all

levels of government, social workers, academics, and let's not forget the numerous families caring for loved ones' wrestling with one or other form of trauma. Indeed, by some of the literature reviewed thus far there seems to be a consensus developing that trauma may be the greatest hindrance ever to stand in the way of Canada's march toward its multicultural ideal of 'equality for all'.

However, the further I delved into the literature the clearer it became that very little is known about trauma beyond its more purely physical manifestations. One popular explanation for this limited knowledge is that the condition is in general under-reported by trauma sufferers; and there are two principal reasons given for this under-reporting. The first reason is that there is a strong social stigma attached to mental illness and hence sufferers are often reluctant to seek help; the second reason is that quite often the sufferers themselves do not know that they are afflicted with trauma. The first of these reasons is clearly important, if the growing literature around it can be posed as sufficiently valid evidence; but it is the latter which provides the grounding and motivation for the present undertaking. This motivation is itself grounded in the contention that the Canadian professional establishment—in particular here the medical authorities—for the most part approach the understanding, diagnosis and treatment of trauma almost exclusively from the standpoint of the Western (i.e., White European) bio-medical model. This model, which today can rightly take credit for innumerable successes, has nevertheless been heavily criticized over recent decades for downplaying (and quite often totally eschewing) the importance of cultural—i.e. *specific historical*—influences that might aid in gaining a better appreciation of mental illness among non-White populations (Byrd & Clayton, 2000, DeGruy, 2005, Lemelle, 2011).

The study begins with a discussion on Canada's involvement in chattel slavery, which is provided primarily to make the point that our country's enslavement of Black people during the period 1632-1834 must not be dismissed or downplayed when we interrogate the formation and functioning of the various social, political and economic institutions that too many of us unconsciously take for granted today. The literature surveyed thus far provides no evidence of Canadian slave hunters scouring African jungles intent on kidnapping Blacks at gun point and dragging them off into the darkness of the unknown and to never again reconnect with our families, friends, and communities (Diptee, 2010, p.89). However, Canada did do its fair part in purchasing some of those kidnapped Blacks. In Canada the Black slave experience was overseen by two masters, the French on the one hand and the British on the other. In both cases Black slavery was not only viewed as 'normal' but was also legalized—under the French by the *Code Noir* and under the British by the *Common Laws*—in order to sanctify its practice (Trudel, 2013, Winks, 1997).

Part 2 of the study attempts to unite the conceptual constructs that might most credibly trace Canada's experiment with chattel slavery to contemporary Black concerns with mental illness. Some relevant concepts drawn from Marxist thought (including class, ideology, social capital, and social relations of production) are employed to develop the position that Canada's Black populations are today as regulated and controlled—some might even say *determined*—as they were four hundred plus years ago when we first got here. Put more directly, the principal reason for attempting to unite these Marxist concepts is to create a frame work which would accommodate the thesis that '*multigenerational* trauma' needs to be a seminal consideration for practitioners (and more specifically those in the medical, academic and legal professions) who take the positive mental health status of Canada's Black populations as an important contributive factor to the well-being of our society.

Parts 3 and 4, taken together, would form the most important phase of my study, but it may also be the most difficult. This difficulty arises because here I attempt to make a direct experiential link between the “mammy” image of the Black woman constructed during slavery and the pathos shadowing the Black woman today, but the attempt is made in the absence of research literature that would adequately support it. Nonetheless, Part 3, titled “The Demonization of Black Woman”, highlights the dual ways in which the Black slave woman was negatively stereotyped/ “demonized” in the aim of controlling her (and by extension the general slave population): on the one hand she was typecast as the passive subservient “mammy type” and on the other the boisterous and unruly “sapphire type.” Part 4 builds on this theme by highlighting psychological affinities between the image created of the Black slave woman and her contemporary progeny. The objective here is twofold: on the one hand to present the case that the trauma caused by the “slave experience” must be regarded as multigenerational, and on the other hand to make the case (though perhaps implicitly) that this experience must be a principal consideration of mental health professionals working with Black women sufferers.

Part 5 argues that the Black woman’s broader ecological context—or biopsychosocial—needs to be interpreted in order to gain a better understanding of her day-to-day struggles with oppression and feelings of powerlessness. Here I take my cue from what Anna Julia Cooper, (1868-1964) coins the “*double enslavement*” of the Black woman, meaning that she’s doubly oppressed, victimized, simply by being Black and female. The overarching issue aimed at here, however, is that the Black woman’s specific social position is either routinely ignored as such—i.e. ‘specific’ to her and as such should be made homologous with all women’s position(s)—or denied out of hand.

Part 6 takes a focused look at the dominant mechanisms by which female gender inferiority is maintained in contemporary society, with a focus on highlighting the (covert) ways in which White male supreme[ac]ist ideology masks—but nevertheless continues to exercise—the (overt) White-on-Black violence of the colonial slave era. More specifically, the discussion here takes a Marxist feminist and Black feminist approach to illuminate how the *gendered division of labour* in conjunction with a warped cultural logic of *male-superiority/female-inferiority*, together function to reproduce the subjugation (and hence the grounds for mental illness) in the Black woman.

Part 7 of the paper, titled *Canadian Multiculturalism: Or the Politics of Race & Representation Today*, takes a broader ranging look at how official systemic/institutionalized ‘multicultural’ policies, rather than positively effecting its foundational ideal of harmonious coexistence for all, instead subtly function to deny racialized peoples true opportunities for self-determination. The central point being made here is that upon close inspection it becomes possible to see just how much official multicultural policy may have in common with colonial era ideology. For at their most basic operation, both are predicated on the hierarchical logic of material and (hence) ideological power; in other words, those without material/propertied power (mostly the racialized groups) generally also have tremendous difficulty exercising ideological/political power. And while there may be some evidence that this reality of Canadian landscape is changing, the Black woman at this point remains the smallest beneficiary of such change.

The final part of the paper, titled *Discussion*, is primarily concerned with envisioning ways in which the Canadian Black woman’s general plight can be addressed. Admittedly, this part of the study is somewhat extended, but given the lack of “adequate” supporting literature (identified

in Parts 3 and 4 above) I felt that an extended discussion was necessary to try and capture whatever substantive issues may have been left unresolved. Following this I present some Implications that my study can have for Public Policy as well as some appropriated Recommendations.

Study's Relationship to Scholarship

This research study aims to explore how long-standing and today ossified Eurocentric ideologies function to negatively impact the biopsychosocial health of Canada's Black women. While much literature has been gathered on the negative impact of Eurocentric ideologies on African-American populations, there is very little evidence of similar efforts made in Canada, and hence it should be safe to say that we know very little about African-Canadian populations' mental health in this respect. Some Afro-American literature trace these Eurocentric ideologies back over four centuries and prominently situate them in what they call *the slave experience*, in the aim to show that they (i.e., the ideologies) remain deeply embedded in our governing social, economic, political and religious institutions. In light of the study I am undertaking I can objectively conclude from the American literature that Eurocentric ideologies continue to negatively impact on the day-to-day existence of Black women. Although my study is primarily concerned about a shortfall in the Canadian medical establishment's appreciation for the majority of our Black women's true position, it is also meant to question why contemporary Canadian research has not kept pace with American research in this area. Indeed—and hopefully without being unnecessarily cynical here—*we in Canada seem to have fallen into the habit of adopting all things American!* So, why have Canadian researchers not found “the slave experience” to be a worthwhile start-point in their investigations of Black peoples (in particular the Black women's) mental health concerns?

If the U.S. studies hinted to be correct in suggesting that slavery-based ideologies are today still highly functional within our governing institutions, then there is ample reason to believe that the study I am proposing should be helpful in provoking scholarly interest on the topic of multigenerational trauma with respect to Canada's Black women. Given that there is very little scholarship directly relating to this topic I strongly believe that the positions I advance in this paper would create opportunities for further research and discussion on multigenerational trauma with respect to the Canadian Black woman. While I am aware that my framing of the issue can be criticized as a homogenizing of Canada's Black women's experiences (in general, but here more particularly as concerns mental health), my best reply to such criticism would be that I nevertheless hope to narrow the field of study such that the Black woman's (contra 'woman in general') particular experience(s) can be brought into scholarly focus.

Theoretical Orientation/Methodology

The central concern of this research study is the Canadian professional health establishment's lack of focused attention to how Black women in Canada are affected by and deal with their mental health problems. The study employs Rom Harre's (1979) *ethogenic* approach to discourse interpretation. This is a qualitative method of interpretation which advocates that "...it is the episode, rather than the act or action, which should constitute the basic unit of social enquiry" (Hayes & Stratton, 2003, p.98). The paper develops via a *textual analysis* of data gathered from a close reading of what I deem to be relevant scholarship. Data is gathered from related academic texts, psychology journals and personal experience. I elected to employ a qualitative research method because this method allows me to adopt, from the outset, the position

that it is the “meaning of the information” (as opposed to the *quantity* of information) gathered from the research literature that will be of practical import/value, so long as that value is deduced “in a systematic and reliable manner” (Hayes & Stratton, 2003, p.229). In light of the complexity of the subject matter I propose to employ three theoretical orientations, these being Black Feminism, Critical Race Theory, and Structural Marxism. And despite occasional divergences in explicative positions among these three orientations, I select them because they share one fundamental feature, which is that they all put emphasis on the idea that “language” is central to any interpretation and understanding of human subjectivity.

More specifically, Black Feminism, “Black Feminism emphasizes left-liberal, socialist feminist, progressive, and critical dimensions in explaining the black woman’s struggle in society.” But more particularly, Black Feminism argue that “Women of colour need to tell their own stories, speak their own truths, and establish their own contexts through which to engage in the political, social, and economic debates confronting society and affecting black women” (Young & Arrigo, 1999, p.120). Critical Race Theory (CRT), for its part, is especially pertinent to my research since it emphasizes the fact that colonialism is a *historically continuous* process that therefore informs personal interactional practices of everyday life today. CRT thus calls for a constant criticism of Eurocentric ideologies/practices in an effort to dismantle that colonial legacy. Proponents of CRT take pains to “identify, through a narrative method, how legal texts represent a point of view that excludes non-white perspectives” (Young & Arrigo, 1999, p.69). Finally, I understand Structural Marxism to be a complicated theoretical standpoint and much-criticized for its tendency to over-emphasize *structures of domination* and thereby to underplay the force of human agency/subjectivity. What makes this standpoint important to my study, however, is its “conception of ideology as lived practice (rather than purely intellectual reflection).” Thus, in its

“implicit critique” of popular culture, Structural Marxism allows for a close examination of “the relationship between ideology and the material conditions of its existence” (Edgar & Sedgwick, 1999, p.224).

Definition of Key Terms

- *Capitalism*: A system that separates workers from any true property rights. The means by which workers produce culture (through their labour) is not assigned equivalent value consistent with the product of their labour (Young & Arrigo, 1999, p.35).
- *Class*: For Marxists, a class consists of people who have the same role in the process of production. The two basic classes under capitalism are the capitalist (or ruling) class.... those who own and control all productive processes [and] the working class.... those who lack that control and have to sell their labour for wages.... {The} Marxist definition of class is different from that used by many sociologists, who use terms like middle class to refer to level of income rather than the relationship to the process of production (Young & Arrigo, 1999, p.45).
- *Colonialism*: [A] form of imperialism based on maintaining a sharp and fundamental distinction (expressed often in law as well as in fact) between the ruling nation and the subordinate (colonial) populations. Such an arrangement arises most naturally in consequence of the conquest of a remote territory with a population of a conspicuously different physique and culture (Bullock & Trombley, 1999, p.418).
- *Ideology*: A generalized blueprint by which a given social lifeworld is created. Those things that give meaning and purpose to life—including art, music, poetry, prose, science, myth, joke, song, and religion—are an especially important part of an ideology. Sometimes ideology

becomes reified into dogma and comes to be more than a general guide to the construction of social reality. Ideology can be a super-organic thing beyond the control of humans (Young & Arrigo, 1999, pp.154-55).

- *Race*: Race is a problematic category. The anthropological description of human races...as Caucasian, Negroid and Mongoloid is based on identifiable genetic or phenotypical differences.... {If} we do accept phenotypical differences as evidence of racial identities, the complication arises that the idea of an invariant racial nature or type can be used to justify social inequalities and an assumed, biologically given, hierarchy of intellectual abilities. A biological definition becomes appropriated within the realm of culture for the purposes of asserting racial superiority.... A racialized description is used to brand [certain] groups with the stereotypes that mark them as the inferior ‘other’ (Brooker, 2003, pp.213-14).
- *Racialization*: ‘Racialization is the very complex and contradictory process through which groups come to be designated as being of a particular "race" and on that basis subjected to differential and/or unequal treatment. Put simply, “racialization [is] the process of manufacturing and utilizing the notion of race in any capacity” (Dalal,2002, p.27).<https://www.ucalgary.ca/cared/racialization>
- *Representation*: In social terms, representation has: (a) a political meaning (in the sense of meaning the representation, through institutional bodies or pressure groups, of the interests of political subjects [...]), and (b) a more nuanced meaning, which has linked the practices and norms of representing and which may, for example, be used in the mass media, in order to present images of particular groups... A group can be presented in a manner which might be conceived of as stereotyping them (Edgar & Sedgwick, 1999, p.339).

- *Resilience*: According to Margaret Waller (2001), resilience is “the positive adaptation to adversity”; resilience is dependent on ongoing shifting and interactional circumstances which enables individuals to adapt to their environment (p.290). However, Waller cautions that “the paradox” of resilience is that it can constitute risk in one situation and protection in another, hence one should be aware that certain protective factors can also present risk factors if they constitute self-destructive behavior (p.294).
- *Slavery [Chattel]*: An economic system in which some people claim ownership to the person and labour of other people. They claim a right to use, abuse, and to take the fruits of that labour. Slavery is composed of two separate and unequal strata: the slave-masters and the slaves (Young & Arrigo, 1999, p.299). [“A chattel is something that belongs to you” (*Collins Cobuild English Language Dictionary*, 1988, p.230)].
- *Trauma*: An experience which, because of its intensity and unexpectedness, is damaging. The initial reaction is shock, which may or may not be followed by recovery (Hayes & Stratton, 2003, p.298). *Historical trauma*, according to another source, is “a term used by social workers, historians and psychologists, [and] refers to the cumulative emotional and psychological wounding of an individual or generation caused by a traumatic experience or event” (https://en.wikipedia.org/wiki/Historical_trauma). *Multigenerational trauma* is “trauma experienced in one generation of a family [that] can affect generations to come. This [trauma] occurs when there has been physical, sexual and emotional abuse of children, neglect of children and domestic violence. In some instances, the effects of other types of trauma such as catastrophes, war, illness, incarceration, addiction, accidents and violence also traumatize other generations.”

<https://www.recoveryranch.com/articles/trauma-and-ptsd-articles/multigenerational-trauma/>. *Transgenerational trauma* is “the transmission of trauma within families and

communities across generations” (Goodman, 2015, p.386).

- *Violence*: Unjust or unwarranted exercise of force, usually with the accompaniment of vehemence, outrage, or fury.... Physical force unlawfully exercised; abuse of force; that force which is employed against common right, against the laws, and against public liberty (*Black's Law Dictionary*, 1990, p.1570).
- *White supremacy*: “The belief that there are biological differences between different human groups, resulting in different levels of humanity, with fair-skinned people holding the superior position. This philosophy has been deeply ingrained in Western consciousness since at least the 15th century and helped the slave trade to flourish in the western hemisphere for 400 years” (*New Fontana Dictionary*, 1999, p.921).

Review of the Literature

1: Slavery in New France (/Quebec): 1632-1834

Despite the popular and fairly-well-accepted denial that Canada never participated in the practice of Black slavery, there is such a thing as a *Black slave narrative* that ought not to be dismissed in the telling of Canada's history (and those who do not explicitly deny Canada's involvement in the practice are nonetheless complicit in their belief that Canada was simply a haven for refugee Black slaves fleeing from the United States). And although the official version of this Black slave narrative dates from 1632 to 1834, there is documented evidence showing that four years earlier, in 1628, a ten-year-old boy named Olivier de Jeune was sold as a slave and brought to New France, which we know today as Quebec (Trudel, 2013; Winks, 1997). According to this version of the literature, both of Canada's founding parents—i.e. the French and the British—participated in Black slavery. White men and women at every level of Canadian society—from farmers, printers, bakers and fishermen, to merchants, judges, priests and nuns—are documented to have owned slaves. Even such prominent and revered Canadians as James McGill, the founder of our now world-famous McGill University, owned slaves. Thus, while it is common for Canadians to finger-wag at the United States' shameful legacy of Black slavery, here in Canada we too have a history of institutionalized Black enslavement, and from which all strata of White Canada benefitted immensely.

Based on the limited literature available on the subject, during the 17th century Canada's elites perceived the enslavement of Black people as the most viable means for the economic development of New France (Quebec), and the principal argument for this perception is that there was a shortage of White-settler labor to develop New France's fishing, mining and agricultural

industries. Thus, it was that in 1688, Brisay de Denonville, along with his intendant Bochart de Champigny, tried to remedy this shortage of White-settler labor by appealing to Louis XIV, France's monarch at the time, to permit the importation of Black slaves. In 1689 royal consent was granted, and in that same year Louis XIV legalized slavery in Canada. Canadians were now allowed to import slaves as was deemed necessary to overcome the White-settler labor shortage problem.

Throughout most of the 17th century French intendants in New France consistently appealed to the motherland for, and received, new slaves. The increase in the number of slaves not only assuaged the labor shortage concern but also served to augment New France's general population, thereby bringing benefit to both the colony and the metropole. According to Trudel (2013), between 1689 and 1713 there were thirteen Black slaves in New France (p.32). At the turn of the new century, around 1702, the first 'slave laws' began to be codified in Quebec City, Trois Rivieres and Montreal. One of the earliest law or 'ordinance' was issued by intendant Raudot, which enacted that any Black purchased as a slave were to remain the sole property of their owners. After 1709 notarized sales of Black slaves became prevalent in Quebec, but according to Trudel there were no protections against being a slave, except for the prevention of extradition. This is because if a slave ventured onto the property of another slave owner, he could become that owner's property (p.57).

Trudel's inventory of Blacks in slavery in Canada accounts for 4200 slaves, and of these over three thousand have shown up in civil registries. Slave owners holding higher socio-economic status owned more slaves because they had the means to purchase and keep more slaves. Among the more affluent slave owning class was the governor of Trois Rivieres, Charles Lemoyde

de Longueuil, and the governor of Montreal, Boisberthelot de Beauvoir. Likewise, the King of France's two lieutenants, Francois Gallifet and Louis LaPorte de Louvigny, owned slaves. Within the *Conseil Superieur*, Quebec's highest court of justice, sixteen members—including six judges and four attorney generals—owned a total of forty-three slaves. Likewise, forty-seven senior administrative officials in Quebec owned two hundred and sixty slaves amongst themselves. But among the higher-status slave owners the merchant group was the dominant representative body, and perhaps understandably so; for indeed, the merchants (more than anyone else) travelled afar to slave-supplying lands, making them the first contact with the future slaves and therefore could obtain them at the cheapest price. Nevertheless, by the end of the first quarter of the 18th century every level in French Canadian society owned slaves: from the farmer, to the baker, to the tavern keeper. Slaves were also generally employed according to their master's profession, so a farmer, for example, would use his slaves to clear lands for agriculture, animal husbandry, and so on. Senior officers and other colonialists were willing to pay up to 600 livres (at the time equivalent to two years pay) for Black slaves and were willing to purchase up to a cargo of two hundred slaves. Slaves could also be held in collective ownership, by the state, religious communities or merchant associations.

The Code Noir is an important document to understanding the history of Black slavery in New France/Quebec. While this document was never instituted as a legal mandate for governing slaves, it was adapted as a formal reference for the slave owning classes. The Code Noir stipulated that all slaves were to be baptized and initiated into the Catholic faith; other religions were outlawed from practice and there were dire consequences if a slave was caught practicing another religion. Sunday was designated as a religious day and slaves were not allowed to hold market on that day. Also, only slaves who were baptized could be buried in a Catholic cemetery. And while

article 17 of the Charter of the *Compagnie des Cent Associes* granted full citizenship to baptized persons, slaves were excluded from citizenship. The Code Noir also outlined the various punishments to be meted out to slaves for certain infringements. The most severe punishments were allotted to burglary/theft and the striking of a free person (including the master/mistress). Slaves could also only marry with the consent of their masters/mistresses. The Code Noir further legitimized physical violence against the slave by claiming that the master/mistress is permitted to beat their slaves, perhaps the ultimate means of control.

Moreover, despite the claim that no slaves were ever sold at *public auction*, documents suggest otherwise. For example, in the *Quebec Gazette* there are numerous examples of slaves being put up for sale at both public and private auctions. Such was the case of a Black slave sold on October 5, 1782 in Rue Notre Dame in Quebec City. According to J.-G- Beck Registry, in 1765, two public slave auctions took place, and in one of them William Ward of Montreal sold a slave man, a woman and a boy to William Campbell of Montreal. Public auctions of slaves were usually advertised in newspapers and posted flyers. In 1767 alone, there were 137 advertisements for different slaves in the *Quebec Gazette*. Slaves under thirty years old were ideal chattel property, or, as they were called in French, a “*piece de Inde*”, meaning good marketable Negro.

At its commercial peak during the last quarter the 18th century, the average cost of a slave was 900 livres. Slaves were regarded to belong in the same *category as livestock*—or as Weber more definitively and aptly coins it, “speaking tools of production”—which is to say they were, at bottom, *chattel property*: they could be bought and sold, traded or donated, as the master saw fit. Slaves could be held as security on loans, as was the case of former lieutenant governor George Westphal, who had borrowed 20 pounds from Richard Dillon, the owner of a hotel in Montreal.

Westphal signed a contract with Dillon to provide his slave, Sedy, to work as a domestic until the loan was paid off. Another excellent example is that of Marie Bulkey. During her thirty years as a slave Marie had been sold four times, and at the time she was sold to her last master there was still eighteen years left on her contract. When Marie's master heard talk about the impending abolition of slavery he extended her domestic-servant contract by another thirty years. And as if to make sure that there is no mistake made about the inseparability of status between Black slaves and livestock, newspapers would drive the point home by coupling them in advertisements. Trudel (2013) provides the example of a 1783 advertisement for the sale of an 18-year old Black woman by her master, William Brown, with the byline "we also have a lovely bay mare available" (p.86).

Slaves were for the most part *illiterate*, since the only education they received was in Christian values and the only book they were ever permitted to learn from was the Christian bible. Instruction was generally given in French and so slaves were forced to adopt the language of their masters/mistresses. Most likely illiteracy of slaves was desired because those who became literate would often run away. It was considered a crime if a slave ran away from their owner; those who ran away for the first time would be whipped when caught, and for a repeat offence would be jailed. Slaves who were considered rebellious would also be whipped. While slaves would be beaten for minor offences, heavier offences would often warrant death. For example, theft warranted execution, especially in the case of breaking and entering. The most notable crime ever committed by a slave in New France is that committed by Marie Joseph Angelique, who belonged to Francois Poulin Francheville of rue Saint Paul. When Angelique discovered that her mistress was planning to sell her off, she decided to flee New France with her White lover, Claude Thibault. On the evening of April 10 or 12, 1734, she set fire to her mistress's house, but by the time the fire was put out some forty-six houses had been destroyed. Angelique was captured and returned to

Montreal, where she was sentenced to death by hanging. Angelique was executed on June 12, her execution made into a public spectacle (Trudel 2013, pp.174-177).

Slaves had no *birth certificates*, which meant that they had no way to identify themselves except by the way their masters identified them. Since they were not considered to be humans with no name or religion, slaves had no cultural reference which they could subscribe or defer to except that which the master conferred on them. The Code Noir, which served as the legal basis for the treatment of slaves, stated that “slaves were to be considered personal property, Chattel,” or as Trudel stated it: “...slaves can have nothing which does not belong to the master and whatever they earned through their own industry or generosity belong to their master. They are “incapable of disposing or contracting on their own behalf. They cannot exercise any public office, and their statements in court are to be treated as briefs from which “neither presumption nor conjecture can be drawn” (p.120). Slaves’ identities were erased by the masters through the routine use and threat of violence, and as such slaves did not have an existence free of what the master devised for them.

Slave *burials* took place on the day of death. This was especially acute and disturbing for mothers who faced the trauma of having their children or partners taken away from them, as they had to continue working and did not get to grieve the loss of family. Since slaves were considered as objects, they were perceived as devoid of emotion, passive, and therefore had no feelings; also, they were ridiculed as being infantile for displaying any affection towards another person. Nor did slaves get to enjoy any special privileges; even the master’s/mistress’s dog was treated as part of the family, a standing slaves were rarely able to achieve. My literature also indicates that the *mortality rate* for slaves in New France was very high, on average dying before reaching their

twentieth birthday; few slaves lived past the age of seventy. The mortality rate for African children born into slavery was also higher than the average French Canadians’.

1.1: British Slavery in Nova Scotia:1760-1834

The 1763 Treaty of Paris ceded the entire North American mainland east of the Mississippi to Britain, a move which saw the expansion of Black slavery in Canada. According to Winks (1997), when the French surrendered to the British on September 8, 1760, they included in the Treaty of Paris a Capitulation clause (which in essence reaffirmed the legal nature of slavery in Canada), to wit: “The [N]egroes and Panis of both sexes shall remain in the possession of the French and Canadians to whom they belong; they shall be at liberty to keep them in their service in the colony or to sell them; and they may also continue to bring them up in the Roman religion” (p.57). Hence, although the Treaty of Paris introduced English criminal and civil law to New France, slavery continued under the British as it had been practiced under the French.

In Nova Scotia British slavery commenced under the Loyalists who had fought in the revolutionary wars. During the American Revolution the British offered freedom to all slaves who fought with the revolutionary forces. Slaves served in a number of capacities during this war, including as general laborers, musicians, boatmen, and more. After the war, in May 1783, General Washington met with Guy Carleton, Commander in Chief of the British forces, to discuss how American-owned ‘Negro’ slaves were to be maintained. The men agreed that all slaves who fought with the British Army should be freed and likewise be free to leave America. Between May and November 1783, quite a number of slaves left New York headed for Nova Scotia. In total approximately three thousand freed Black slaves—1336 men, 914 women, and 750 children—are said to have landed in Nova Scotia by November 20, 1783(Winks 1997, p.33).

The Loyalists' migration to Nova Scotia saw a major influx of slaves to the Canada's Maritime region, in large part because the Loyalists themselves owned slaves in the former colonies from which they had migrated (slavery was introduced to Liverpool in 1760, to New Glasgow in 1767 and to Amherst, Bridgetown, Onslow and Cornwallis by 1770) and therefore brought their property with them to Nova Scotia when they settled. When slavery was outlawed in some States in America, owners sold their slaves to buyers in Quebec and Lower Canada, and the greatest number of slaves going to Lower Canada ended up in Nova Scotia. As it was with Quebec, in Nova Scotia slave labor was used to cut down trees, clear the land and roads, and build houses and ships, which all made settlement possible (p.35). As also was the case with Quebec, as Winks (1997) highlights, while Loyalist settlements in Canada grew so too did slave ownership begin to spread among the different social strata. People from all levels of society came to own slaves, from pioneers such as John Stuart, an Episcopal missionary to the Mohawks, to Captain Justus Sherwood, one of the founders of Johnstown, (p.33). But perhaps unlike Quebec, because the slaves who came to Nova Scotia from different plantations across the US had already acquired a variety of skills, the variety of work done by slaves also increased.

Moreover, former slaves who arrived in Nova Scotia as free men and women became indentured to their former masters. Indentureship brought the transition from unfree labor to wage labor and thereby the insertion of Blacks into the formal political economy. Black labor was still very much relevant to White folks in the development of communities and, more generally, the Canadian State. However, this transition sparked the so-called "Extraordinary mob or Riot" in July 1784, which was instigated by White former soldiers who could not find work or were reluctant to work for the same wages as Blacks, since Black labor came very cheaply. The rioters burned numerous houses belonging to Blacks, and the rioting didn't stop until the army was

brought in to restore order (p.39).After this incident Loyalist settlers moved with their slaves to other cities, and free Blacks went along with them. This exodus eventually led to the decline in the economy of Birchtown, the province's major hub at the time thereby demonstrating how influential Black labor had been to the economy of Nova Scotia.

2: From Slavery to Race-Making: The Material and Symbolic in Capitalist Social Relations

Canada is the glorious State that it is today largely because of its former British colonial rule and later American influence. Our transition from this rule and influence, however, did not eliminate policies and legislation formulated during the period of colonialism. This transition simply meant a transfer of State control/power *from* the hands of the mercantilist colonizers *to* the hands of the newly entrenched capitalist bourgeois elite. In his work *The Pitfalls of National Consciousness*, Frantz Fanon (1963) identifies this transition as a “substitute managerial system” of governance by which the former colonizers continue to govern indirectly through these new national elites.

Speaking more directly to contemporary relations, Karl Marx argues that in capitalist society there are two distinct classes: the ‘bourgeois class’—which is always the ruling class—has ownership over the means of production; the ‘working class’, on the other hand, does not own such means, and thus must sell their labour power to the bourgeoisie. The “definite social relations” generated within this unequal relationship to the means of production determine the particular “consciousness” of each class; or as Marx stated it, “It is not the consciousness of men that determines their being, but on the contrary, their social being that determines their consciousness” (*Preface to A Contribution to Critique of Political Economy*, 1859, p.209). Material inequality in capitalist society is therefore a direct product of the character of our *social relations of production*,

which in turn determines our life chances and consequently informs the way in which we come to view ourselves.

Colonial slavery perpetrated a massive dispossession of Black peoples. Because their labor had been unfree under slavery (having all along been considered as chattel, or what Max Weber described as “speaking tools of production”), Black folks, outside of fulfilling the needs of production for the development of the Atlantic slave economy, had never been inserted into the global economy. This left Blacks limited opportunities to realize their life chances and to develop their full human capacity and therefore, by Marx’s logic, the development of their social consciousness as a people would have been stagnated. This ‘stagnation’ is as material as it is symbolic: “The degraded state of the minds of slaves’ render[s] them totally incompetent to the task of judging correctly the business of the church,” declared one Virginia Baptist association in 1802, “as it disfranchised its enslaved membership” (Berlin, 1998, p.361). The fresh representations of black and white that emerged in the blackbelt reflected the new circumstances, but they were also inescapably anchored in a past that reached back across the Atlantic. The history of the “many thousands gone” would guide slavery’s last generation and would inform African American life to the present day (Berlin 1998, p.365). Berlin also put the point into sharper focus when he writes:

Slaveholders discovered much of value in supremacist ideology. The inferiority of black people confirmed the necessity, if not the benevolence, of mastership. Planters elaborated such notions, sometimes endowing black men and women with a vicious savagery and sometimes with a docile imbecility. From either perspective, the vision of the natural inferiority of peoples of African descent became a mainstay of the defense of slavery and proof certain that the proper—and most humane—place for black people was under the watchful supervision of a white master (Berlin, p.363).

In other words, instead of rendering their productive capacities towards their own self-development, Black folks were forced to gear these capacities toward the development of their

White captors' political-economic interests. By this time the slave economy had given rise to the Industrial revolution, and British capitalism (Eric Williams, 1944). Likewise, Inikori (1987) demonstrates the relationship between the Atlantic slave trade and the development of 18th century British industrial capitalism. This led to fundamental changes in Britain from the division of labor and the growth of the home market, to such institutional transformations in the social economic and political structure, national values as well as changes in state policies, (Inikori, 1987, p.80)

Prior to the development of the slave industry there was no wage labor and therefore no wage labor market, agricultural land held no commercial value, and production was geared toward meeting the needs of the family as opposed to meeting the demands of a national or international market. There was also limited opportunity for trade as there was low level development of the division of labor internally. Because there was no wage labor, capitalist relations of production, institutions and technology were non-developed.

With the slave industry, however, a new division of labor emerged as well as the development of private property and a landless class. There was also mass expansion of internal trade and massive opportunities for capital investment and capital accumulation. The expansion of export markets enabled the development of legal frameworks and directed state, as well as for the development of science and technology and state policies. The expansion of external trade in the 17th and 18th century was entirely dependent on the growth of the Atlantic slave trade and African slavery. This allowed European countries such as France, Britain and Holland to survive economic crisis in Europe (Inikori, pp.83-90). This also allowed for a new slave capturing class elite to emerge in Africa whose wealth came from the production of captives for export. Likewise, it caused stagnation in the growth and development of African economies and cultural production.

Black folks to this day remain objectified in the image of ‘livestock’ and regarded as inferior by/to White folks (Berlin, 1998; Trudel, 2013; Williams, 1944). In thinking about the dehumanizing practices of slavery Marx’s analysis of capitalist relations of production might be invoked here. In *Capital Volume One* (1859) Marx writes:

If then we disregard the use-value of commodities, only one property remains, that of being products of labor. But even the product of labor use has already been transformed in our hands. If we make abstractions from its use-value, we abstract also from the material constituents which make it a use-value. It is no longer a table, a house, a piece of yarn or any other useful thing. All its sensuous characteristics are extinguished. Nor is it any longer the product of labor of the joiner, the mason, the spinner, or any other particular kind of productive labor. With the disappearance of the useful character of the products of labor, the useful character of the kinds of labor embodied in them also disappears; this in turn entails the disappearance of the different concrete forms of labor. They can no longer be distinguished, but are all together reduced to the same kind of labor, human labor in the abstract (Karl Marx, *Capital Volume One*, p.222).

For Marx structure and agency are relational because in a liberal democratic state, the individual does not have the freedom to express will or make choices independently, for these choices are already largely predetermined. In order for the few to rule, it must maintain social control through the suppression of the desires of the majority. In a capitalist society, agency is suppressed. Social institutions and their commanding ideologies are what stifles agency, through the production of a distorted working-class reality.

The material and the symbolic are therefore *relational*, but only to the extent that they are dependent on each other in shaping our lifeworld. As already suggested Marx gives priority to the material, thus we might say that the symbolic is a reflection of the material; in other words, the symbolic requires the material (reality) in order for the former to *mean* anything—to become relevant—in our day to day lives. One excellent example of how the symbolic acquires meaning in our social relations is seen whenever we speak of “rights”. In Canada we have a *Charter of Rights and Freedoms*, which makes understood that citizens have certain rights under the Law, such as the rights to free speech and to free association (for religious, political, etc. purposes),

among others. However, while symbolically (i.e. conceptually) “freedom” has no boundaries, there are *definite* limits to which this “freedom” can be materially (i.e. practically) invoked (Azmi, Foster & Jacobs, 2012; Mandel, 1989). The 2010 debacle we all now know as the G-20 Summit is a paradigmatic case: the people who gathered in downtown Toronto to protest—i.e., to demonstrate their suspicion and anger against this gathering of world leaders—were “free” to speak and associate *but only to such extent* that this speech and association did not practically impact the preferred/dominant relations of production; and indeed, the police were out in force to ensure that those relations were *not* impacted/alterd. Thus, while the material and the symbolic are dependent on each other for the creation of meaning, the symbolic functions largely to distort and obscure—i.e. to limit—the extent to which the extant material conditions (and thereby the inequalities operating within) can be exposed and interpreted. As just seen in our Charter rights, the symbolic distorts the material by insinuating that there is no distinction between what we wish to do and what we can do; in so insinuating the symbolic inhibits the development of lower-class consciousness by making this class believe that it has rights (or privileges) equal to that of the upper class.

Ideology is a very pertinent concept in this regard, for ever since Marx laid the groundwork for better understanding the dynamics of capitalism a large number of respected scholars have sought to elaborate this concept. Louis Althusser (1971), for example, explained ideology as a tool of domination employed by the capitalist elite through the State and its institutions to assert and perpetuate its preferred interests. If we went back to the G-20 Summit example, Althusser would argue that for the most part the protesters did not see—indeed, they were *unconscious to*—the fact that the police were acting on the behalf of the capitalists; but because the police *symbolically* represents the interests of *all* Torontonians, the majority of the protesters resigned

themselves to remain what has been elsewhere called “docile bodies”. Thus although “ideology” is a highly ambiguous and much-contested term, one interpretation of the concept seems unquestionable: it functions to make the ruling ideas appear *as if* they represent the interests of all, when in fact they represent only the interests of the upper/bourgeois class. The working class internalizes these ideas, treating them as if they were its own, to the effect that its members never see their own subordination, exploitation and, in the end, their exclusion/alienation from fuller participation in the affairs of their society. Thus, for Althusser, ideology is a superimposition of bourgeois class interests onto the working class, and with the aid of State apparatuses like the police this superimposition is legitimized in the consciousness of the working class. Today the working class is largely constituted by people of colour—or *racialized* people—and among which Blacks predominate.

Ira Berlin (1998) argues that “Race is not simply a social construction; it is a particular kind of social construction—a historical construction. Indeed, like other historical constructions—the most famous of course being class—it cannot exist outside of time and place” (p.1). Berlin then puts a face to this ‘historical’ social construction by arguing that:

If in the sixteenth and seventeenth centuries transplanted Europeans denounced Atlantic creoles as audacious rogues and if in the eighteenth century the nascent planter class condemned the newly arrived Africans for their “gross bestiality and rudeness of their manners,” nineteenth-century white Americans redefined blackness by endowing it with a new hard edge and confining people of African descent to a place of permanent inferiority. Just as slavery had continually redefined notions of race, so notions of race would inform a new servitude (Berlin, p.358).

Stuart Hall helps us to understand why it is essential to always be mindful of the distinction between the symbolic and the material. In his discussions on ‘Race, the Floating Signifier’ and ‘Representation and the Media’, Hall (1997) argues that too often social scientists studying the question of *why people act the way they do* fail to see that “race” is a less reliable explanatory force

than “socialization”; and even those scientists who do recognize this fact nevertheless tend to “poorly correlate” race with social phenomena such as “genetics, culture, intellect, [and] cognition”, none of which has anything to do with race proper. Hall is not here dismissing the conclusions of these scientists, but he is concerned that the “image” created of the subject(s) they are studying becomes distorted because their poor correlations often fail to account for the “politics” constructed around “race”. In attempting to remedy this distortion Hall poses this question: “[H]ow do you know that what you mean is what someone else understands?” The answer to this question may seem self-evident to some, but I believe Hall stresses it because too often we do not grasp the fact that “diametrically opposed positions” can often be traced back to “the same philosophy”.

Hall argues that “True meaning depends on what people make of it, and so depends on how it is represented. Events do not really exist until they are represented. They have no fixed, real meaning.” In order to help us realize this potential conflict in meaning Hall makes a clever distinction between “representation” and “re-presentation”; and I say the distinction is ‘clever’ because it seems to separate *while* bringing together the dual meanings of *representation* given in our working definition of “political” above. When Hall speaks of ‘representation’ he is speaking about part (a) of the definition, where other persons—such as our politicians, lawyers, interpreters, or other spokespersons elected or appointed by us— “replay” our preferences and interests to the rest of the world on our behalf. In other words, these representatives are “standing-in for” us because we are unable, unqualified, or not supposed to be doing so for ourselves. This meaning of representation is the one more commonly understood and used, never mind that it carries with it its own measure of confusion founded as it is on “liberal conceptions of the democratic process”; but it is not the conception that Hall is ultimately concerned with.

The real concern for Hall has to do with the concept of *re-presentation*, which is to say *that moment* when the representation (i.e. the “image” presented to us) *comes to mean* or *reaches us as meaning* this or that particular thing/object; i.e., when a *representation* is “standing for” *someone/something* as opposed to “standing-in for” *someone/something*. This shift from *standing-in for* to *standing for* seems to me synonymous with the “nuanced meaning” spoken of in part (b) of our working definition of “political”. The shift is so nuanced that Hall himself at times struggles to make his distinction between *representation* and *re-presentation* clear. And there is good reason for this struggle; for as the definition confirms it is at this point that “*practices and norms of representing [become] linked*” (Hall, 1997, pp.1-17). Hall, as I interpret him, is implying the same thing when he characterizes the moment of *re-presentation* as that moment when the image/representation of a thing “*is being given the meaning of*” something other than what it is (or could otherwise be.) In other words, it is the moment of *discourse formation*—that moment when meaning *comes to life*, as it were—and which is the moment that most troubles Hall.

Re-presentation can now be considered as both a *method of* and *medium for* the formulation of day to day discourse; but what does “discourse” mean? On one definition “[A] discourse is a group of statements which provide a language for talking about a particular topic at a particular historical moment” (O’Brien & Szeman, 2004). By this definition a discourse is meant to bring coherence and order to a subject matter so that the parties “talking” (to each other) can reach some reasonable measure of certainty in understanding and using the language embodying it. A discourse systematizes language to a required stability/fixity so that we can navigate the world in a way that best satisfies our desires, needs, preferences, and so on. As a method of organizing our language so that we can effectively communicate with each other, a discourse is therefore a necessary instrument in our day to day survival.

3: The Demonization of Black Woman, or How Black Woman Became One with Madness

The destruction of slavery and its corporate ethos—as a means of organizing society as well as a means of extracting labor—was a central event in the rise of capitalism and the triumph of liberalism, certainly in the West and in other parts of the world as well. Little wonder, then, that the discussions of the nature—and sometimes the existence—of paternalism has preoccupied historians during the last four decades (Berlin, 1998, p.4)

Ever since “Old slavery days” (as reggae legend Bob Marley coined it) Black women have been stereotyped to fit two caricaturized categories: *the passive subservient “mammy type” and the “boisterous, loud and rude sapphire” type* (hooks, 1981; Lerner, 1973; Wallace -Sanders, 2008). Each of these stereotypes greatly affects the way the Black woman is interpreted in social exchanges, and these affects are usually negative. Black women seeking some form of professional counselling—more specifically psychological counselling—are often conscious of the implications of this negative interpretation. For example, Black women are first and foremost apprehensive that what they relay to the counsellor/clinician might be misinterpreted (i.e., in a way that could/would subsequently jeopardize their personal and familial relationships). And this apprehension induces even more psychological stress, which from the outset makes interaction between White clinician and Black woman patient an asymmetrical one, since she is conscious of the possibility that the pervasive stereotypical ideas of what constitutes Black woman-ness may manifest in assessment, diagnosis and treatment of her reported symptoms(hooks, 2003, p.23).

McGuire (2010), Wallace-Sanders (2008), and Lerner (1973) all attest to how historical negative stereotyping of the Black woman functions to shape race relations today. For example, incarnation of the “mammy” persona continues to shape social interaction patterns between Black women and White folks (as well as between Black women and other ethnic minority groups) in

Canada. The mammy persona/image arose during slavery when Black women were responsible for the care and nurturing of White families. According to Wallace-Sanders, the mammy image became an integral part of the popular vernacular largely as a result of powerful antebellum mythology; and today the mammy stereotype is being used (whether directly or indirectly, consciously or unconsciously) to typecast Black women (Wallace-Sanders, p. 3). Black “mammy” women are expected to be subservient and longsuffering in serving the needs of other people; in Canada today, this is especially true in the healthcare profession, wherein Black women are vastly overrepresented in caregiving services (this is also the case in other professions/industries, such as hospitality and domestic service industries.)

Since the 1960s Afro-Caribbean and African women have been aggressively recruited into caregiving roles for White families in Canada. But the construction of “mammy” as compassionate, patient and loving towards her White charges also comes with the implication that the Black woman is incapable of agency beyond that construction. Richmond (1988) gives an impassioned account of Afro-Caribbean immigrant women’s history in Canada while demonstrating one way in which the stereotypical Black mammy is constructed. According to Richmond, a shift in Canadian immigration policy throughout the 1960’s led to a compromise in the acceptance of Caribbean immigrants to Canada. He draws a comparison between British and Canadian immigration policy at the time to show the restrictive nature of the latter, explaining that while England’s focus was on recruiting for a manual-labor-intensive force, Canada only selected the brightest and most skilled immigrants from the Caribbean. These Caribbean men and women, Richmond asserts, were more educated than their Canadian-born counterparts, yet even with this qualification Caribbean immigrants were not only highly *underrepresented* in management and

professional positions but also highly *overrepresented* throughout the service and manufacturing sectors (pp.365-368).

If the “mammy” figure typifies the compassionate, docile and unseen Black woman, the “boisterous, loud and rude sapphire”—a.k.a. “mad”’—Black woman is her scripted twin sister. This script has deep roots in irrational fears about sex and race which have dominated the White imagination from slavery to the civil rights movement. Black women have traditionally been typecast as sexually aberrant, spreading depravity, corrupting the “moral values” of White society. This intersecting of racial and sexual ideology in large measure informed the constitution of Black women’s bodies as sites for violence, and so whenever Black women protest or resist authoritative institutions and persons, violence is invoked and functions as the *de facto* control-mechanism (Davis, 2005; DeGruy, 2005; hooks, 1981; McGuire, 2010).

For example, during the 1960s White America effectively distorted Blacks’ struggles for *civil* and political *rights* by [re]constituting these struggles as efforts to “breed out” and corrupt White society (Lerner, 1972; McGuire, 2010). Violence against the Black woman’s body during this time was unquestionably an assertion of male sexual power; but *as violence* the physicality of the White counter-narrative also promoted a psychological warfare geared towards breaking the spirit of the Black woman, *taming her*, as it were, so that she could/would constantly remain under the control of White power.

Lerner’s (1973) chronicle of the Black woman’s experiences during slavery does well to highlight how White folks’ conception of the *mad mammy* came to be affiliated with strong and outspoken Black woman-ness of 1960s America. Black women who in the era of slavery strongly resisted their masters’ assaults on their bodies clearly represent the kind of violence that racist

White men perpetrated during the early civil rights era: in both instances Black women who challenged the status quo were quickly denounced as “mad”. Black women who tried to defend themselves against the physical (and by extension the psychological) advances on their bodies by White men were unquestioningly labeled “mad.” This narrative is brightly illuminated in an article entitled “No Protection for Black girls” (The Independent, Vol.56, No.2885, 1904), which demonstrates the abject fear that Black women harboured for the White man’s potential violation of their bodies.

The myth of the bad Black woman is another mechanism that Whites have employed from time immemorial to justify their sexual exploitation of us. This myth purports that Black women are hypersexual, immoral and deviant, and therefore must be mad since they deviate from normal societal standards expectations. This mythification of the Black woman’s sexual potency/propensity has been advanced/employed on at least two significant fronts to typecast her as mad.

First, during slavery a pervasive fear was that Black men would violate White women’s bodies, despite the fact that the real violations came from White men and women on Black bodies. Second, during the height of the civil rights era the prevailing moral panic was that activists were in fact sex fiends who used movement to spread depravity. Black women who were prominent in the civil rights movement were susceptible to being labeled as mad (Davis, 1983; Giddings, 1984; hooks, 1981; Lerner, 1973; McGuire, 2010). This pattern of sexual exploitation (which is both personal and institutional) of Black women has outlasted both slavery and the civil rights movement and is today probably nowhere more evident than in the prison industrial complex.

Davis (2003) attests to the numerous indignities Black women face daily at the hands of prison authorities, from embarrassing and often unnecessary strip searches to blatant physical assault. Davis argues that there is today a *gendered difference* in the perception and subsequent treatment of prisoners: male criminality has been recognized and treated as “normal” whereas female criminality has been perceived and treated as “abnormal”. Thus, we find that deviant men are constructed as criminals while deviant women are being constructed as insane (p.66). This affiliation of female criminality with madness has dire consequences for Black women within the prison system. As Davis further reports, the reality today is that women are being committed to psychiatric institutions in greater proportions than men, and as a result psychiatric drugs are given to women more extensively than to men (p.68). And this reality portends more serious implications for the mental health status of Black women, who are overrepresented within the female prison population.

The point being led to here is that domination produces a definite identity—which is to say a “subjugated identity”—which is shaped by certain specific historical circumstances and social experiences. Such definite shaping has been the general reality for Black folks across the globe. Subjugation by repeated domination tends to produce a split identity, a sort of *cognitive dissonance* wherein the subjugated is always trying to reconcile what the dominator wants him/her to become with what he/she wants to be. The subjugated is thus constantly forced to shift between identities in an effort to make sense of her being, to survive. For Black folks who have been constantly subjected to White domination, this crisis of identity is continuously transferred from one generation to the next and constitutes the foundation of trauma and trauma re-enactment. For Black folks in the West, this trauma re-enactment must be seen as the enduring legacy of the slave

experience, since our constant confrontations with systems of domination continue to determine our sense of being and belonging (DeGruy, 2005; 116-120).

Fanon (1967) might have captured the ethos of this legacy better than anyone else when he asserted that *we cannot escape our Blackness, since it is the first thing the world notices when we come into contact with it* (p.131). Mere contact with systems built upon the slave legacy therefore serves as the principal site for trauma re-enactment, because contact presents an opportunity for symbolic and material representations of Blackness to become operationalized. In discussing selected historical narratives of Black folks' collective experience with trauma, hooks (2001) highlights the continuum of vicious assaults they experienced during the course of slavery and suggests that the attacks on Blacks' personhood was a deliberate strategy by the masters to *dehumanize* them. An integral part of this dehumanizing strategy, hooks explains, was the colonizers' persistent drawing of attention to the Black psyche, and from which was constructed theories about Black folks' incapacity for *feeling* and *articulating* emotions, which were supposedly key indicators of being "civilized." In the post-emancipation era, however, Black folks consistently challenged such stereotypes through constant scholarship and discourse, reminding us that it is through the horrors of oppression that we were able to forge our identities (p.xxiii).

4: Psychopathology of Violence and Multigenerational Trauma

The trauma in question is slavery, not as an institution or even experience, but as a collective memory, a form of remembrance that grounded the identity formation of a people. (Ron Eyerman, 2003, p.1)

In her book titled *Ain't I a Woman: Black Women and Feminism*, (1981), bell hooks make what I now believe is a rather interesting point. In the chapter titled "Continued Devaluation of Black Womanhood" hooks writes:

The argument that black women were matriarchs was readily accepted by black people even though it was an image created by white males. Of all the negative stereotypes and myths that have been used to characterize black womanhood, the matriarchy label has had the greatest impact on the consciousness of many black people. The independent role [that] black women were obliged to play both in the labour force and in the family was automatically perceived as unladylike (p.78).

I say that this point is “rather interesting” because with it hooks gives me a fresh view of the iconic “matriarch”; all my life I viewed the matriarch—i.e., the strong, independent Black woman—in a positive light; I looked up to her and wanted to be like her. Now that hooks explains the origins of the Black matriarch stereotype (even though she was speaking of the American Black woman and not the Vincentian one of my childhood), with a retrospective look I can more clearly see why the strong Black women whom I wanted to emulate were “vilified”, as pointed out in the last section above. And while I would still like to emulate these women, the negative imagery that hooks evokes of them makes it easier to see how ‘trauma’—passed on through the generations—could have been central in shaping these women’s self-consciousness. For earlier in the same book, in the chapter titled “Sexism and the Black Female Slave Experience”, hooks writes: “The brutal treatment of enslaved black women by white men exposed the depths of male hatred of woman and woman’s body” (p.29).

Multigenerational trauma, then, as a cultural phenomenon fundamentally shaping the Black woman’s self-concept, is rooted in the colonial slave-experience. The multidimensionality of the trauma experienced over hundreds of years of enslavement, the constant dehumanization and brutalization of their being, has left Black women grappling with myriad manifestations of mental illness. This trauma remains forever fresh and is compounded by the continued acts of indignity these women confront every day dealing with multiple institutions and systems of inequality and injustice. The history of slavery and colonialism has produced an immense shock to our collective central nervous system, such that we are forever confronting post traumatic disorder, or what

DeGruy (2005) better identifies as *post traumatic slave syndrome* (PTSS). The lasting effects of trauma on identity and selfhood emanating from colonial terror, coupled with the current trauma of sexual violence, have devastating effects on Black women's psyche. Even though it was suggested earlier that Black women under-report their concerns about mental illness, the fact that so many of us are diagnosed with one or other condition (Bhagra & Bhui, 2001; McKenzie, 2002) speaks volumes to the extent of the trauma.

Multigenerational trauma, as the term implies, is visited on successive generations, like an ominous spectre continuously haunting its victims. This trauma passes on from mother to child as the maternal figure is responsible for childrearing and transmitting cultural knowledge in the effort to socialize the child. Trauma passes on especially through the differing and confusing coping mechanisms that Black children inherit from their mothers. Feelings of helplessness, fear, anger, as well as disciplinary/control methods applied in the rearing process, are all internalized and thereby help form the psychological foundation of each new generation. While the degree and intensity of this trauma may vary from person to person, one thing is evident, and this is that trauma remains a cultural phenomenon for Black folks. It is borne through one's identification with Blackness. For Black women who are disenfranchised and marginalized, these experiences make them even more susceptible to trauma re-enactment.

Heron (2011) identifies four manifestations of trauma: Primary trauma, Secondary trauma, Vicarious trauma, and Transgenerational trauma. Primary trauma is trauma experienced firsthand, (war, rape, accidents). Secondary trauma occurs when "an individual witness the after effects of a traumatic event." Vicarious trauma occurs when an individual learns about the traumatic event. Transgenerational trauma is described as "a collection of traumatic symptoms that are exhibited

by descendants of trauma survivors” (Heron, p.79); each in its own way does violence to the individual and impinges on our ability to function optimally. Heron contextualizes this position by stating that trauma impacts on micro, meso and macro levels of society and destroys the “emotional, mental, psychological, social and spiritual growth and wellbeing of an individual.” Trauma induces clinical depression, substance abuse, cognitive difficulties, physical illness and isolation (p.81). Psychological trauma leaves “lifelong” emotional and attitudinal problems which upset the balance of a person’s life. It negatively impacts on our ability to love our selves or to develop a healthy self -esteem (hooks, 2003). The violence of domination and its impact on our individual and collective psychology has been too long a silent history. The context for psychological wellbeing has been absent in Black women’s lives. For Black folks generally but for our women in particular, the situation is acutely heightened because of a long-standing distrust of the psychiatric profession, a distrust which serves a deterrence to seeking timely help. hooks (2003) explains this distrust by observing that “psychiatry has been especially feared because many Black folks worry that “speaking of our traumas using the language of mental illness will lead to biased interpretation and to the pathologizing of Black experience in ways that might support and sustain our continued subordination” (p.23). Western analysis and diagnosis of trauma in Black lives is distorted by racism, classism, sexism and internalized White supremacist thinking.

For Eyerman (2003), slavery as a collective memory has impacted tremendously on the way Black folks see themselves. Trauma is commonplace for Black folks and is mediated by different forms of representation which alter collective identity and helps to reshape collective memory (p.1). Black folks try to forge a collective identity in an effort to remember the ravages of slavery. For those generations not born into slavery it is the memory of this event which causes them to seek a collective identity. This collective memory, in other words, is necessarily forged

from a wanting to go beyond the trauma of slavery in order to re-establish our pre-subjugated identity. Eyerman (2003) also distinguishes between psychological and cultural trauma: whereas psychological trauma and cultural trauma both speak to the wounding and emotional distress caused to a people, cultural trauma accentuates the destruction of culture, identity, and social systems of a people whose society was at one time cohesive.

In speaking about the potential ramifications of cultural trauma Schwab (2010) introduces the interesting concept of *replacement children*. According to Schwab, replacement children are in essence (*in spirit*, may be closer to the case) born to replace a child or a generation that has died as a consequence of war or some other traumatic event. For Schwab, replacement children are daunted with the task of fulfilling the expectation of the lost child or lost generation. In other words, these replacement children are expected to take on the responsibility of upholding the memory of a lost generation (a collective memory, so to speak), to carry on their cultural histories through the way they live (p.120). Schwab was obviously not speaking about the potential ramifications of slavery, but rather about the deep trauma that such brutal events can cause.

Fanon (1963), likewise, directly links the ravages of war to such trauma. In his important book titled *The Wretched of the Earth* Fanon highlights the extent to which colonial rule is responsible for producing mental illness. In his chapter titled “Colonial War and Mental Disorders”, Fanon provides a lucid psychoanalytic exposition on the trauma that this rule inflicted on the collective psyche of the Algerian people and is an analysis that can also be applied to show the impact of colonial rule on the psyche of Black women in Canada. Indeed, Canadian institutions, structures and policies have been thoroughly shaped by colonial thinking. Colonial rule effaced the cultural, economic, political and linguistic regimes of those societies within which

it took root, replacing these regimes with a White supremacist ideology that (we now know) was/is incompatible with those societies' norms. The goal of colonial ideology is to render subject populations docile, accomplished through an array of violent mechanisms, so that they could be governed more easily (DeGruy, 2005; Fanon, 1963; McNally, 2006). Physical violence is among the most effective tools of psychological warfare, as it keeps colonized peoples in a constant *fight or flight* response mode, always questioning and renegotiating their identities. According to Fanon, the violent nature of colonialism invariably places the colonized on the defensive (Fanon, 1963, p.250).

Because the institutions, laws, policies and cultural activities of the Canadian State are etched in colonialism, these institutions and systems continue to wreak havoc on the psyches and overall well being of Black folks in Canada. Black women in particular are continuously forced to confront and relive the same experiences that their parents and ancestors before them confronted. Trauma is unvanquished pain which is further compounded when there are multiple facets of violence to resolve. People living under such violence have to be especially aware and must prepare themselves each day to confront new traumas, be it from racism, sexism, classism or the various other extant oppressions. The Black woman in particular must constantly prepare herself to acknowledge that *as a Black woman* her blackness would always supersede her other characteristics (Davis, 1983; DeGruy, 2005; Hill-Collins, 2000; hooks, 1990). As a result, she finds herself forever trapped in a struggle to overcome her identity, her past and present, which is perpetually affixed to the colonial experience. In his analysis of colonial violence Fanon (1963) writes: "But the war goes on, and we will have to bind up for years to come the many, sometimes ineffaceable wounds that the colonialist onslaught has inflicted on our people" (p.249).

For Fanon, (1963), colonialism is as much a spiritual as it is a physical war, because it is a war that wounds and eats away at the soul. Colonial domination has produced many dislocations. Colonized peoples become dislocated from their culture and society; their self-identity is forcibly contorted until such time that they become fully absorbed into the imposed social-cultural/ideological ideal. Mental disorders inevitably develop because the colonized become cognitively displaced, that is, to the point where they become incapable of reconciling their being with their wanting to belong. This has been the general reality for Black folks across the globe (DeGruy, 2005; Fanon, 1963). Domination and subjugation leads to a split identity, a cognitive dissonance wherein the subjugated is always trying to reconcile what the dominating culture wants of her/him with what she/he wants for self. She/he is constantly forced to shift identities in the effort to survive. For Black women who have been constantly subjected to White domination, this crisis in identity is continuously transferred from one generation to the next. This crisis in identity forms the base of her trauma and trauma re-enactment. The enduring slave experience is our constant confrontations with multiple systems of domination, which in turn determines our sense of being and belonging (Davis, 1983; hooks,2003).

Like Fanon, Volkan (2001) also shows how the abject domination of a people can wound their soul. Volkan describes large-group-identity as “the subjective experience of thousands or millions of people who are linked by a persistent sense of sameness, while also sharing numerous characteristics with others in foreign groups” (p.81). A major component of group dynamics is loyalty; each member feels compelled to pledge allegiance by delegating themselves as the agent of his/her group (p.83). An understanding of large group identity is therefore pertinent to understanding multigenerational trauma. The group regards a “chosen trauma” as the uniting

force, as the foundation of its identity. For Black folks, slavery is the chosen trauma which unites us across the globe. Slavery serves as the context for understanding Blackness.

According to Volkan, if a person is forcibly relocated to a country or region that is dominated by a large foreign group, his/her sense of identity becomes fractured (Volkan, p.83). Likewise, for Black women in Canada who for centuries have been forcibly displaced (whether by slavery, mass civil strife, etc.) their sense of identity becomes complicated. For the Black woman in Canada, whether born here or elsewhere, the one common experience we share (whether or not we are conscious of it) is that we would be inferiorized on account of our Blackness (Cesaire, 1972; DuBois, 1994; Fanon, 1967). When W.E.B. Dubois (1903) declared that the problem of the twentieth century is the problem of the color line (p.9), little would/could he have known the depth of the truth those words would still hold beyond that century. (Even for me, a product of a White mother and Black father, I am ever conscious of the fact that I am predetermined on account of that “drop of black blood” in me.)

Studies of individual responses to trauma have revealed that a child and mother are connected by “psychic borders” through which the mother transfers all her emotions, worries and desires to the child who, in internalizing these psychic states, makes them a part of her/his subjectivity (Carothers et al, 2009, Kim et al, 2009, Ozcan et al 2016, Roman 2014). This internalization is consistent with Chodorow’s (1978) idea that the child’s inchoate relationship to the mother would inform expectations of what a mother should be (p.57). Lemaire and Despret (2001) introduce the concept of Collective Post-Traumatic Disorders, which occur when members of a group collectively experience trauma as a result of war or genocide. Rape for example, as one of the most violent tools of psychological warfare, is used to destroy collective bonds. Groups

subjected to a deprivation of humanity and loss collectively experience this trauma and leads to a breakdown in trust amongst the group members (Lemaire and Despret, 2001, p.25).

Black women's assertion of their right to dignity—by standing up against sexual and physical violence, by demanding political and social rights—had defied the rules of patriarchy and White supremacy and helped to put an end to slavery and eventually to attain some civil rights. However, these efforts were unable to dismantle the institutional pillars borne out of slavery. This is evident in our daily struggles against White supremacy, through our encounters with people and State agencies that seek to impede our well being from the moment we leave our houses and enter the streets, places of employment, or other public spaces. Every moment of our waking day is governed by one aspect or another of White supremacy. It appears as though the only space which may provide temporary reprieve is our homes. White supremacy is mediated by power relations constructed on a binary superiority-inferiority logic which governs our daily experiences. White supremacy dictates State relations, from the outcome of court decisions passed down through the criminal justice system, to its paternalistic relations between the State and non-White subjects (Alexander, 2012; Henry & Tator, 2005; Jiwani, 2002). Every daily activity which governs the lives of Black women in Canada is impacted on by the logic of White supremacy. When there are no communities or social network systems available to provide buffers to resist the traumatic effects of White supremacy, the individual becomes immobilized and trauma overwhelms the central nervous system.

5: The Biopsychosocial Effects of Trauma on Black Woman

Melchert's (2011) biopsychosocial model proposes an ecological explanation for mental illness, suggesting that a more thorough understanding can be achieved through an investigation

of the social context in which a particular illness develops. In other words, for Melchert a patient's everyday functioning cannot be properly understood in the absence of an appreciation for her/his broader social context (p.133).

For the Black woman the legacy of slavery is a significant constituent of her contemporary social context. The so-called "middle passage"—i.e., the term given to the watery pipeline carrying captured Africans to the Americas to be enslaved, and where untold numbers of captives plunged to their deaths) represents an important moment in Black people's historical trauma. In interpreting DeGruy (2005), combining the middle passage experience with the numerous other humiliations Blacks have contended with since "represents a case of human trauma incomparable in scope, duration and consequence to any other incidence of human enslavement" (p.73). Every minute of a slave's life was marked by indignity, which breaks the human spirit. Every minute Black slave women lived in fear of being violated. Laws made it possible to buy, sell, beat, torture, maim, rape, and even kill Black people. Imagine what it is like to be powerless to prevent your daughters from being raped simply because they were considered "property". Groups like the Ku Klux Klan continued this reign of terror against Blacks during the Jim Crow era of segregation in America, a period that also left its mark on Canada.

Today in Canada, institutional and systemic policies and legislation carry on the legacy of slavery, allowing discrimination to continue by controlling where Blacks could live and work, denying formal access to opportunities to become socially mobilized and thereby disallowing the flow of social capital (necessary for social empowerment) back into Black communities (Galabuzi, 2006; McKenzie, 2002; Satzewich & Liidakis, 2007). Sexism and racial imperialism are very important aspects of this Canadian social structure, which together produce what Afro-American

feminist Anna Julia Cooper (1858-1964) calls a “*double enslavement*”, or the experience of being both Black and woman. Sexist oppression is as much a threat to Black women as racial oppression. Sexism impacts greatly on the social status of Black women. This impact has had a traumatic effect on the psyches of Black women in Canada today. Black women live in constant fear of losing their children to violence at the hands of authoritative figures, including the police and child welfare agents. They feel even more helpless as the system does not act to protect them, but further their victimization through court processes that protect White men who murder Black men. Each time a police officer kills a Black boy/man and a mother is forced to live through this trauma, the community is also forced to live through this trauma without ever receiving any counselling for their grief.

These realities of the Black experience speak directly to an enduring slave legacy, yet White folks continue to live in denial about the impact of such bigoted violence on Black folks’ mental health, in denial about our pain. How many times have I heard White folks muse that “these kinds of things never happen here”, which they seem to say after each new incident of police shooting a Black man; but then such musing is probable understandable, since this kind of violence has been directed against Black folks’ bodies and minds for centuries now. When you are afraid to leave your home because you fear that contact with White folks may initiate some kind of confrontation, some act of discrimination, you are especially afraid that there may be some negative encounter with a White police officer. Such is the day to day fear Black mothers especially have to contend with, coupled with bitter marginalization and poverty. As a Black, poor, disenfranchised mother I can attest to this for I live in this pain and fear daily. My twenty-four-year-old son has become a recluse, too afraid to go out and socialize because he fears police violence, fears negative encounters with White folks.

Black folks have inherited the deleterious consequences of biologically, psychologically and socially imposed effects of White racism. That is to say, the effects of White racism are not felt solely by the person to whom it is targeted but extends to that person's offspring as well. The multigenerational biopsychosocial effects of phenomena such as White supremacy are near damning for Black folks across the globe. For Black women the situation becomes magnified on account of other phenomena, including social status, gender, physical and mental abilities, among other forces.

Trauma alters the individual in varied ways. From a medical perspective, the biological and psychological makeup of an individual, in concert with the social milieu, could predispose them to trauma. Epigenetics, for example, demonstrates how multigenerational racist disparities can manifest physiologically. Racism is now being positively associated with the increased numbers of diseases afflicting Black folks, including diabetes, cancer and hypertension. It leads to neurophysiological changes which produces mental illness. Stressful situations often force behavioral changes, such as turning to alcohol and narcotics to cope with stressors and which can be detrimental to both the individual and her community at large (Browne & Keith, 2003; Landrine & Klonoff; 1996, McKenzie, 2002; Sullivan, 2013; Yeomans, 2009).

Black women in Canada also have to contend with the stigma of filling the worst jobs, forcing them to manage with lower income and poorer housing than their counterparts do. Race-based disparities also exist within the healthcare system, as Black women coming from communities with lower social capital are cut off from resources that benefit long term health. Access to healthcare resources is a major impediment to the overall well-being for Black women in Canada. Discriminatory practices in healthcare allow Whites to be more likely than Blacks to

receive healthcare for chronic diseases (Bhui, 2002, McKenzie, 2006). There are also fewer doctors in Canada's Black neighborhoods than in White neighborhoods, and more funding is put towards healthcare that benefits White folks in Canada in relation to their Black counterparts.

There is also a demonstrable difference in access to preventative care for ethnic minority individuals suffering from illnesses (like schizophrenia, for example) that predispose them to violent behavior. Bhui (2002) points to research demonstrating that Black patients are more likely to be perceived to be more dangerous even when the level of their illness is less serious (p.242). This pathologizing of Blackness as a proxy for dangerousness has resulted in erroneous diagnoses of mental illness among Black patients, which ultimately results in more deleterious consequences on Black patients' mental health.

Trauma also impacts on the community by decreasing social buffers and levels of social cohesion, which are necessary in promoting positive mental health. Trauma impedes forms of social organization that facilitate cooperation for mutual benefits, such as civic participation, trust and reciprocity. Kwame McKenzie (2002) states that a relationship exists between thwarted aspirations and psychological stress in Black folks. This stress results from limited opportunities and on account of occupation status. Racism is manifested in discrimination that blocks opportunities for advancement among Blacks, which results in excessive stress coming from inconsistencies between achieving a decent lifestyle and actually available economic resources.

Finally, studies have demonstrated that when compared to Whites, Blacks on average are twice as likely to be poor or unemployed (Pew Research Center 2016; Sullivan, 2013). According to the Pew Research Center, in terms of median net worth White households are thirteen times wealthier than Black households. There are also racial discrepancies in family composition, in

that the decline in marriage rates has been more significant for Blacks. Blacks are also twice as likely to be living in poverty when compared to Whites (Pew Research Center 2016, p, 18). Multiple health risks derive from persistent and prolonged struggle to overcome these difficult realities emanating from institutional racism. The problem here is not only the fact that disparities in healthcare exist, but equally important is that there is rarely any significant action taken to close the gap.

6: The Violence of Gender Inferiority

Discourses surrounding violence against women construct women as victims simply because of their being women. In psychiatric discourse violence is often regarded as a problem of personal dysfunctionality; for while this discourse acknowledges women's oppression (by others), at the same time it interprets this oppression as characteristic of the women's flawed personality (Comack & Brickney, 2007, p.15).

Historically, violence against colonized women served as the means to exercise White power and domination; the mother/woman representation of the race had to be brought under the control of the White colonial male. In essence, the subjugation and subordination of the Black woman is the ultimate representation of the subjugation and subordination of the colonized psyche. White male power is transmitted through the control of colonized women. According to McClintock (1995), the power of industrial modernity lies in the "conquest of the sexual and labor power of colonized women" (McClintock, 1995, p.15). Black female sexuality and gendered reproduction serve as the site for imperial conquest and economic production.

In other words, imperialism and the construction of race are fundamental aspects of western industrial modernity (p.5). This is the starting point to imperial patriarchy and according to McClintock this history does not exist outside of Western industrial modernity. This introduced what McClintock refers to as the “cult of domesticity,” the naturalization of the realm of the family and the construction of male/female identity. The colonial enterprise restructured and reordered sexuality and family life in the African context. It introduced an inverted new division of labor based on female labor. This disrupted existing power relations within the family, usurping family dynamics. Black women now became the primary family figure, valued for both productive and reproductive capabilities. Whereas prior to colonialism and slavery African family structure was matriarchal, the White patriarchal family structure soon transformed African structures from matriarchal to patriarchal. The goal of displacing the family unit was to produce a degenerative family structure. According to McClintock, the regeneration of Victorian Britain was dependent on the restructuring of labor within the colonies through the control of female reproductive and labor power (p.240).

A few of the readings reviewed for this study attempt to remedy this historical construct. Pugliesi (1992), for instance, shows the interrelation between the two traditional theoretical approaches in feminist research by which gender in mental health is studied. Gender differences in mental health are either biologically or methodologically constructed. Using two orientations—social causation and social constructionist—feminist theory attempts to show that gender difference in mental health is a given based on biology, or that gender difference arises through mental health research because of the language used. The social causation aspect argues that gender difference in mental health emerge as a result of difference in biology which makes women vulnerable to psychiatric disorders, while the social constructionist approach regards these

differences in gender as socially constructed due to the theories and methodologies used to conduct mental health research, as well as cultural conceptions of gender (p.44).

Pugliesi adds that women are more prone to experience the signs of distress and depression measured in research and that men are more prone to substance abuse related problems. However, these differing propensities could be attributed to the internalization of gender roles in cultural values: women are socialized to assume caretaker roles while a principal aspect of masculinity in socialization is the expectation of men to be emotionally strong and not manifest emotions, hence substance abuse could be one coping mechanism adopted by men and which helps to reinforce the rigidity of cultural values.

Because historically madness has been affiliated with women, connection between femininity and mental illness has shaped the psychiatric profession. Pugliesi argues that within the psychiatric institution diagnostic categories are applied to particular mental disorders which stereotypes women as mentally unstable and more prone to mental illness. Pugliesi also demonstrates how certain biological functions of women (menstruation and reproduction) are labeled as mental disorders. Stereotyping informs a politics of representation which locates one's sense of powerlessness; thus, if professional ideas on mental health are gendered it is because mental health professionals belong to a culture and also internalize cultural values, since these values inform our identity.

Pugliesi (1992) also explores the gendered division of labor as contributing to higher incidences of mental illness among women. She argues that while women's inclusion in the labor force has contributed to their positive self-image and overall sense of wellbeing, marital status and roles as caretakers as well as the roles they are expected to perform in the labor force are

detrimental to their mental health. Thus, research examines women's roles and the consequences for this on their mental health status (p. 47). The paradox found here is that women's work and social status contribute to self-esteem as they are fundamental to women's construction of their identity, yet at the same time it is in performing this work that women experience greater psychological distress. If the unequal division of labor contributes to women's mental illness, then their insertion into the labor force must also be detrimental to their mental health status since the labor force is gendered.

Black women's place within the labor market and their gender exists through capitalist economic and labor relations on which the nation state is founded. Labor market relations are predicated on a particular embodiment which situates different bodies as sites of production which serves as the primary function of the capitalist economy. Within these relations structured hierarchy emerges and dichotomies of subject/object, dominant/subordinate emerges, from which ideas about gender flows. Black women are relegated certain positions within the labor market structure where they perform specific types of work that is essential to the economy. Because Black woman identity has always been associated with slavery, their work and contribution to the political economy is discounted and so they are inferiorized based on their position within the labor market economy.

hooks (1984) attributes the problem of gender inequality to three main reasons: culture, social structures, and status. The basis of women's oppression, hooks explains, is associated with cultural ideology; that it is the underlying logic of cultural thinking which produces women's inferiority to men; this logic has to do with the universal devaluation of womanhood. The second reason is attributed to particular ideologies and cultural traditions based on symbolizations and

socio-structural arrangements, while the third is related to the experiences and social positions which women occupy, which influence their status and their power in society (pp.46-47). hooks contend that the Black woman's experience cannot and should not be taken as a universal given, due to the fact that the Black woman's subjective identity was reconfigured to suit the mercantilist enterprise of slavery and (later) the *market fundamentalism* of capitalism. The construct of Black womanhood shifted from *human* in precolonial times, to *commodity* during slavery and into capitalism (hooks, 1981, p.56). hooks further attests that violence is a dichotomous and perpetual antagonistic relationship between dominant/subordinate, powerful/powerless. This relationship, predicated on hierarchy, social regulation and coercive authority, is the root cause of all violence.

However, hooks caution that by equating violence and patriarchy we run the risk of limiting our understanding of how power and coercion informs every aspect of our social lives. According to hooks, society's interests and cultural misconceptions of associating masculinity with violence undermines efforts to end the violence against women, since women are often presented as passive, docile beings who in no way contribute to the maintenance of the cultural values of a society which admonishes violence. She also emphasizes the need to see women as *political beings* and as such do make choices (hooks, 1984, p.126).

Herman (1992), in *Trauma and Recovery*, speaks in depth to the historical victimization of women, arguing that "Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection and memory" (p.24). Internalized racism and self-hate are two different strategies of self-mutilation which are adapted as processes to counter confrontations with hegemonic racist systems of subjugation and coercion; they are also psychobiological factors associated with feeling incapable of resisting forces of domination, of always feeling powerless.

The Black woman in Canada is positioned within the State as a disenfranchised, marginalized social being, and when combined with multiple forms of trauma expressed as constant aspects of their daily lived realities culminate in feelings of hopelessness. In every social interaction Black women are bombarded by power relations that impose on their humanity. Within the academic institution not only are their stories absent from discourse, but when they do emerge, they are authenticated by White peers. In daily life confrontation with racism is an ominous presence. There is always the fear of being assaulted by someone on account of their race and ethnicity. Then too there is the threat of being stereotyped and profiled by police, mainstream media, and other authority figures, which are ever present stresses that Black folks have to contend with and struggle against for their entire lives, simply by virtue of being born Black. Nonetheless, in *Rock my Soul: Black People and Self Esteem* (2003) hooks implores that we should be ultimately concerned about “the normalization of violence in our lives as black people which creates the foundation of ongoing trauma re-enactment” (p.21). Hence, we should critically interrogate the multiple dimensions of violence which Black people confront and attempt to locate them within their own specific ontologies.

Violence against Black women interplays with all other forms of violence and therefore it is the power relations sustained through the use of violence which must be critically interrogated in an effort to solicit a more refined understanding of the constitution of violence. Internalization of violence informs cultural experience and our social interactional processes. The over-representations of various forms of violence in mass media and other cultural outlets desensitize us to violence. Television and film are saturated with images of men battering Black women and condones this type of behavior. This in turn informs a politics of representation in which men regard Black women as objects. Violence against Black women has become the main apparatus

for social control, a kind of *romanticization of violence* that bell hooks explains makes it seemingly impossible to end violence (hooks, 1984, p.123). Critical interrogation of violence should thus entail a complete analysis of how violence is linked to the dynamics of power, coercion and domination.

Pugliesi once again proposes that feminist therapy can be used as a research methodology to merge theoretical conceptions of social causation and social construction, because it understands the historical victimization of women and seeks to dismantle gendered constructs of mental illness in an effort to empower women (p.48). A development of research methodology modeled off a Black feminist therapeutic approach would thus allow issues affecting Black women to be examined in light of how significantly slavery and colonialism have contributed to multigenerational trauma and as to how these women respond to their problems and the various strategies of resilience which they utilize to cope with these problems.

Margaret Waller (2001) suggests that resilience is dependent on ongoing shifting and interactional circumstances, which enables individuals to adapt to their environment, (Waller, 2001, p.290). Resilience is thus defined as positive adaptation to adversity. She further claims that in order to best understand resilience, we must contemplate the various protective factors which acts as buffers to individuals encountering adversity. She cautions however that one should be aware that certain protective factors can also present risk factors, if they constitute self-destructive behavior, (Waller,2001, p.294). The paradox of resilience is that it can constitute risk in one situation and protection in another. According to Waller, protective factors within an ecosystem are not inherent features of that specific ecosystem and may be subjected to change during various interactional processes, (p.294). She asserts that while one has the ability to be

resilient, this can become strongly affected by the institution of different interventional strategies which may either inhibit or enhance resilience, (p.295). She further cautions that disconnecting resilience from its cultural context can lead to the pathologizing of entire groups, and so the current challenge is for researchers to investigate the various conditions under which one might recover and revitalize.

The dichotomy between healthy-male/unhealthy-female is also closely associated with the purity-male/impurity-female dichotomy in symbolic cultural values. Juxtapositions of healthy vs. unhealthy and purity vs. impurity are apparatuses used to structure women's social positions under patriarchy. Therefore, gendering is a form of social stratification used to position and exclude some bodies from engaging in particular cultural activities and to inhibit others from accessing resources which give rise to power. As a colonial-patriarchal construct, this subjecting of the female gender to male power and coercion further facilitates wanton violence against women. Efforts to end violence must therefore begin with a commitment in mind to end all forms of violence. Any given social reality must be mindful of a greater historical conjuncture. While research and practice provide a meta-analysis for the interrogation of gender and for its operationalization, there needs to be more focus on procedures of dismantlement. For as Karl Marx (1818) reminds us, the purpose of critique is not to interpret the world but to change it. It is only when structural material issues of class, race and gender (the three most significant forms of/sites for inequalities) have been rigorously critiqued can any real social change be expected to occur.

7: Canadian Multiculturalism: Or the Politics of Race & Representation Today

...the discourse of diversity is not new or *sui generis*...It is derived from and is in keeping with a language of plurality that has existed in liberal democracy. It relies on reading the notion of difference in a socially abstract manner, which also wipes away its location in history, thus obscuring colonialism, capital and slavery. It displaces these political and historical readings by presenting a complex interpretive code which encapsulates a few particularities of people's cultures, adding a touch of reality, and averts our gaze from power relations or differences which continue to organize the Canadian public life and culture. They assert themselves as perceptions of otherness encoding a hegemonic European-Canadianness. (Himani Bannerji, 2000, p.51)

[N]o race problem would exist in the United States 'if the Negro could speak as an American'. (Malcolm X, in Marable (2011), p.230)

The grand vision of multiculturalism is that Canada is a welcoming haven where people, irrespective of their ethnicity or social status, can coexist harmoniously. But multicultural policies only serve to mask systemic/institutional racism by purporting that Canada has a place to belong and that all citizens are included at economic, social and political levels of society. For racialized persons in Canada, particularly for Black women who continue to suffer the brunt of Canada's experimentation with a multicultural ideal, we are especially wary of succumbing to this ideal.

Because liberal pluralistic conceptions of equality and citizenship are predicated on property ownership, Whiteness has become associated with economic, social and political advantage. This advantage in turn has shaped the dynamics of social relations in Canada. As a consequence of this historical reality, European settlers have always distinguished themselves from non-European settlers through the symbolic "immigrant" other and a rather complex association with a White Anglo image. Non-Europeans, while being encouraged to assimilate into this image, are denied full access to its privileges (Abdi, 2005; Bannerji, 2000; Jacobs, 2013; Satzewich and Liodakis, 2007). Assimilation allows for the activation of the stereotype. While the stereotype allows for civic engagement within the Canadian State, it also denies self-determination. This splitting of the image, which is required for one to be able to assimilate, leaves the individual disconnected. Identity dislocation leaves non-White settlers with the yearning to

experience the privilege of the White settler. Multiculturalism in Canada thus requires this hybrid performance (mimicry), but like Lacan (1978) infers, hybridity can only be accomplished through connection to the stain, which would mean acknowledging the existence of a cultural superior (Lacan, 1978, p.98).

Simpson et al., (2011) proposes that multiculturalism and colonialism are the conceptual starting points for understanding racialization in Canada. These authors argue that there is a general myth surrounding “equality” in Canada which denies Canada’s colonial legacy, and which persistently constructs Canada as a racially harmonious society. Contrary to this myth, the authors contend, racialized peoples in Canada do not experience equal citizenship but rather are regarded as second-class citizens. Thus, this myth functions to efface the reality of racism. Multiculturalism and colonialism are predicated on a hierarchy of difference, this hierarchy of difference infers that racism is determined by interpersonal relationships within the State independent of its institutions and structures. By doing so, it dismisses the power apparatus within the Canadian State.

Simpson et al., (2011) go on to argue that naming and deconstructing practices of colonialism necessitate an acknowledgement and critique of power, even when power impinges on the material reality of hierarchical structures which constrain some while privileging others on the basis of group affiliation. Multiculturalism projects the distorted perception that everyone has the same opportunities for existence within the Canadian state; that as if by magic anyone could have access to anything they want, attain anything they want, without interrogating the power structures and power dynamics which shape the everyday experiences of racialized peoples within the state. Another thing that is too often dismissed from multicultural discourse is that this asymmetrical power alignment is non-existent among racialized peoples; this homogenizing

tendency asserts that somehow on account of not being White, all racialized peoples in Canada share the same material experiences, a view which dismisses the realities of class, race, gender and other inequalities which comprise the daily experiences of oppressed racialized populations. The project of multiculturalism is to produce a particular embodiment predicated on race, shadism, caste, class, gender, among others, as a State apparatus for not only organizing social relationships but also organizing labor.

It is this problem which Bannerji (2000) identifies as the paradox of multiculturalism. Discussing how multiculturalism is framed within liberal pluralistic illusions of *belonging* and *inclusion* (which are key markers of democracy), Bannerji argues that this obscures the darker problems endemic to the structuring of power relations in Canada, thereby naturalizing inequality. Multiculturalism in Canada, she further argues, is dependent on convictions of difference subsumed by euphemistic conceptions of community and culture, thereby creating an ideological disjuncture from the grim historical realities of colonialism, slavery and capitalism (Bannerji, 2000, p.15).

Bannerji goes on to problematize the concept of *diversity* (the central tenet of multicultural discourse) as being too saturated with abstract invocations of equality which hold no substantive value. This discourse on diversity, she laments, makes it seemingly impossible to identify systemic racism and historical oppression within the Canadian state. Thus, she encourages a deconstruction of difference which pays attention to class, race, gender and sexuality as all different characteristics of this difference. This deconstruction of difference would allow for new forms of political consciousness and engagement, showing that Canadians are not socially and culturally homogenous (Bannerji, 2000, p.52-54).

In contemporary society multicultural policies are reinforced by racial differences, by positioning different cultural groups into hierarchical structures based on the division of labor. Those cultures which are regarded as more conducive to Western norms and values and can more readily assimilate are regarded with higher value by the dominant group, meanwhile those which are regarded as more culturally rigid and less prone to assimilation techniques are regarded as aberrant and in need of State surveillance and coercion (Bannerji, 2000; Dua, 2003; Satzewich & Liodakis, 2007; Simpson et al, 2011).

Galabuzi (2006) blames *economic exclusion* as contributing significantly to the marginalization of racialized groups in Canada, an exclusion which is evident even in times of economic growth. Galabuzi explains that there are major gaps between racialized and non-racialized groups even when factors such as income, labor market participation and unemployment are taken into consideration. Racialized groups are excessively represented in low paying occupations, while at the same time being almost absent from well paying occupations and management level positions (Galabuzi, 2006, p.118).

Galabuzi and Block (2011) expound on the racialized nature of labour in Canada through their study entitled *Canada's Colour Coded Labour Market*. Drawing from statistics they show how race and labour are paramount to the structuring of social stratification in Canada. Calling into context the immense wage discrepancies between racialized workers and non-racialized workers Galabuzi and Block highlight how racialized immigrant women earn only 48.7 cents for every dollar that non-racialized men earn. The color code dynamic continues to function as a barrier even for second generation racialized immigrant women with the same education and age, as these women earn only 56.5 cents for every dollar that non-racialized men earn (Galabuzi &

Block, 2011, p.2). These alarming differentials in income capacity and earning highlight the ominous character and doubtful capacity of the labor market to produce economic and social equality in Canada. The fact that this has been a common feature of the Canadian labor market demonstrates that Canada is socially stratified to maintain a structure that represents the interests of Euro-Canadians; it also demonstrates how social exclusion serves the State function of inhibiting certain groups from achieving social mobility; but even more so it demonstrates how social exclusion coupled with other factors (such as racism and other practices of discrimination) leads to the racialization of poverty, which presents dire consequences to the mental health status of racialized peoples in Canada.

Another concept that is very relevant here is *social capital*. Bourdieu's (1973) conceptualization of social capital is predicated on material and symbolic relationships inherent in society and culture. Bourdieu theorized this concept to show how social and cultural reproduction becomes intergenerational, that is, how social and cultural phenomena are continuously replicated through history. Thus, for Bourdieu, social capital is a principal means by which individuals within a specific culture can exert power in society. From the time we are born we are socialized to our cultural values and norms. Because culture is inherent, it is constantly reproduced through social relations (traditions) that we maintain generationally. Cultural membership in a group allows individual members access to collectively owned capital; in this way social capital becomes a vital resource (Bourdieu, 1973, pp.71-112).

Taking Bourdieu's lead, Li (2004) examines how ethnicity, race and class, as forms of social capital, impact on the overall well-being of racialized immigrants within the Canadian State. Li explains that while social capital is very important for group cohesion and identity retention, it

is also very reliant on access to certain resources. Stronger internal cohesion among groups enables greater access to political, social and economic resources. Racialized immigrants, Li further explains, are necessarily marginalized politically, socially and economically when they lack access to certain social capital (Li, 2004, pp.174-175).

McKenzie takes the issue a bit further in his book titled *Social Capital and Mental Health* (2006). In this book McKenzie argues that communities with high levels of social capital are more cohesive and thus better equipped to manage conflict. In interpreting McKenzie, those communities/groups with higher levels of social capital almost automatically have the ability to apply greater pressure on government (and therefore other key social institutions) to accommodate their desires, than do communities/groups with lower levels of social capital (p.34). According to McKenzie, differences in social capital may also explain why there are existing differences among the *types* of mental illness that different individuals develop. For example, isolated individuals living within communities where there are higher levels of social capital can access the psychosocial resources which are relevant to addressing their particular mental health concerns and therefore are less susceptible to confronting the same kind of mental health concerns as isolated individuals living in less socially cohesive environments (McKenzie, p.36).

Jacobs (2013) likewise regards mental illness as embedded in cultural meaning and social relationships (p.63). According to Jacobs, different cultural groups have different approaches to understanding and treating mental illness, and thus she stresses the importance of cultural competency in addressing issues related to race. Jacobs argues that health professionals using cultural competency in mental health care “lack the tools necessary for dealing with racialized and

oppressed groups. Some ethnic cultures have a “detailed way of labelling behavior which may not be understood in dominant Eurocentric western mental health models” (p.65).

Immigrant Status

Chandra (2011) says that gender plays a very important role in the process of migration (p.210). The shifting of the global political economy from a system predicated on Keynesian economic approaches to one based on Neoliberal methods of accumulation, resulted in mass industrialization. The global demand for labor resulting from mass industrialization also consequentially resulted in mass feminization of global labor. This phenomenon also resulted in an inversion of the division of labor, shifting the role of the main wage earner from the man to the woman which resulted in an influx of women from across the globe migrating to other countries in the hopes of finding work. As Flynn and Henwood (2000) explained, demand for labor in post-industrial Canada led to accommodationist immigration policies which targeted Black women. It is within the context of this global labour demand—coupled with past experiences of colonialism and slavery—that the Canadian Black woman’s history of mental illness emerges.

Black women in Canada experience distress from not being able to locate cultural or religious community and from being separated from their families. Some women also experience disappointment that the high expectations which they had set for themselves and informed their decision to immigrate, did not materialize into ideal life conditions after they had immigrated. In their 2004 article titled “Intersectionalities of Influence: Researching the Health of Immigrant and

Refugee Women”, Guruge and Khanlou (2004) examined the issue of racialized immigrant women’s mental health concerns from the standpoint of health research. Guruge and Khanlou argue that “Nursing research has paid little attention to women’s voices regarding post-migration loss of financial and social stability, the experience of racism and discrimination, the stress of negotiating and navigating through various institutional and structural systems that are designed to serve the dominant groups, and the impact of these experiences on the health and well-being of immigrant and refugee women” (Guruge & Khanlou, 2004, p.42).

The “Canadian Task Force on Mental Health Issues Affecting Immigrants and Refugees” (1998) paper identifies systemic racism as the most notable social determinant affecting the overall well-being of racialized groups in Canada (p.8). The central aim of this paper was to drive home the importance of understanding how micro and macro aspects of discrimination and racism are operationalized and impact on the psychological status of racialized groups. To that end, the paper makes clear that racism and discrimination are phenomena embedded within the processes and practices of organizational structures, and as such confrontations with these phenomena come through the daily social interactions between individuals (p.9).

The 2000-2001 *Canadian Community Health Survey* demonstrates that newly arrived racialized immigrant women were less likely to report poor health than their Canadian counterparts within the first two years of their arrival; however, after living in Canada for at least ten years they are more likely to report poor health (p.7). Similarly, Ali, McDermott and Gravel (2004) found that rates of depression among racialized immigrants who arrived 10-14 years ago and who arrived 20-29 years ago were alike to the Canadian born population (Ali, et al, 2004, p.9).

The Fourth National Survey of Ethnic Minorities (Karlsen & Nazroo, 2002) found that respondents who encountered verbal abuse had an 85% increased risk of developing respiratory illness and also had a 15% risk of developing psychosis than those who were not victims of verbal abuse. This study also found that Caribbean, African and Asian respondents who had experienced racial verbal abuse were three times more likely to develop depression or psychosis (p.10).

Lack of community and social support from family, as well as disconnection from cultural community, can increase levels of distress among immigrant women. Chandra (2011) identifies *adjustment* as another mental health risk for immigrant women. Some women who migrate to a new culture may not be working and may also face language barriers, which inhibit them from gaining access to necessary resources and social networks that would help enable adjustment. Socioeconomic conditions, trauma and ethnic discrimination are also highlighted as specific risk factors which impede immigrant women's ability to adjust (Chandra, 2011, p.210).

Teelucksingh and Galabuzzi (2007) add another dimension to the experiences of Black women living in Canada, that of precarious immigration status. Labor market relations (predicated on racist, exclusionary, employment practices and policies) in Canada have been specifically designed to limit racialized immigrants from achieving social mobility. Racial discrimination inhibits Black women from gaining full access and fully expressing their potentials and abilities within the Canadian labor market. This is enforced by associating racial stereotypes with the value of human capital, using race and ethnicity and by discounting their skills and abilities (Teelucksingh and Galabuzzi, 2007, p.203). Not only does this culminate in drastic consequences for Black Women's mental health status, but also negatively impact the Canadian economy.

Precarious Employment

Zhe and Xu (2011) found that only one third of low-income Canadians are actually able to rise out of that status. These authors research also discovered that temporary low income precipitates a vicious cycle of poverty which can transcend generations as well as present threats to high risk groups, such as single mothers, racialized immigrants, people with less education, and disabled people (Zhe & Xu, 2011, p.26).

Scott-Marshall (2010) and Fuller (2011) also discuss the impact of temporary work and related insecurity on the mental health status of racialized immigrants. Showing how certain groups are more exposed to particular types of work-related insecurity, these authors explain that due to major shifts in the labor force predicated on an aging workforce and increased participation of women and racialized groups in the labor market, work related insecurity is not evenly distributed across different social status. Common factors related to workplace insecurity include unpaid overtime work, lower wages, lay offs, and lack of income mobility. These findings suggest that racialized workers' health is compromised due to ongoing income insecurity. Racialized workers are also more susceptible to having no workplace benefits, which the authors suggest is largely due to deregulation of employment conditions within the Canadian labour market (Scott-Marshall, 2010, p.315; Fuller, 2011, p. 159). Also, recent immigrants experience more wage disadvantage upon their entrance into the labor market, which becomes all too magnified by wage structures based on performance. The emphasis on Canadian experience as a requirement for most jobs, coupled with institutionalized racism, increases the anxiety of work-related insecurity for racialized workers (Scott-Marshall, 2010, p.332).

Fuller (2011) discusses the interaction between immigration and temporary work status in Canada. The study demonstrated that racialized peoples are grossly overrepresented within temporary work and that temporary workers may also carry higher risks of integration and exclusion. Temporary work undermines worker's employability as it may infer that the worker is not dedicated or qualified for better work. Another major problem with temporary work is that newly arrived racialized immigrants are lured into temporary employment, which they interpret as a means of gaining Canadian experience. However, due to the precarity of temporary work, racialized workers can get caught up in its vicious cycle as racialized labor historically has been associated with menial work. This along with a host of stereotypes which irrevocably shapes social identity of racialized peoples in Canada serve to exclude racialized workers from full participation into the Canadian labor force (Fuller, 2011, pp. 158-161).

Fuller (2011) again identifies gender as a major factor impacting on temporary work for women. The unequal division of labor within Canadian market results in gendered patterns of labor due to women's struggle to balance domestic work and work outside the home (Fuller, p.158). This double demand for women's time inadvertently forces some women to regard temporary work as necessary. Incidentally, women with children are more vulnerable to getting caught up in a cycle of temporary work as employers may assume that they have to take more time off for maternity leave or may have to take time off to attend to family responsibilities. The gendered nature of integration makes it extremely challenging for racialized immigrant women to become incorporated into the labor force (Fuller, p.159).

Fuller also explains the discrepancy in the points-based immigration system which advantages immigrants among the business class and those who have financial wealth over other

immigrant classes such as refugees, asylum seekers and those belonging to the family class. This system inadvertently causes agencies which deliver government funded employment services to promote temporary work as valuable Canadian experience to newly arrived immigrants. The majority of newcomers to Canada are racialized peoples. According to Fuller, studies demonstrate that racialized immigrants encounter more barriers to labor market integration, especially for those with professional or graduate degrees (Fuller, 2011, pp. 161 -162).

As discussed earlier, White supremacy is mediated by asymmetrical power relations constructed on a superior-inferior binary logic, with non-white peoples occupying the inferior position. For Blacks, arguably more so than for any other peoples, this logic dictates their daily experiences; from the moment a Black person leaves home in the morning he or she is dominated by this logic. Indeed, nearly all encounters Black people have with the outside world—whether simply going to a coffee shop or restaurant, to the doctor’s office, local grocery store, or Service Canada agency—are immediately circumscribed, mediated, by this logic of inferiority. This highlighting of the Black experience with White supremacist ideology is not to dismiss, nor in any way to diminish, the impact this logic has on non-Black coloured folk; however, there is today very little question that Blacks are much more susceptible, subjected to it than any ‘other’. And whether our encounters with this logic are rationalized as *symbolic* or *material*, the fact that virtually every moment of our interactive day is powerfully overshadowed by it clearly foregrounds opportunity for trauma re-enactment in every step we take.

White supremacy also dictates State relations with members of society and individual relations within the State. Every encounter within Canada which engages White and non-White people is governed by the superiority-inferiority logic of White supremacy. This logic has

devastating consequences for Black identity and selfhood. When there are no communities to act as a buffer to resist the effects of white supremacy, the isolated individual becomes immobilized.

This is evident in the report findings of *Across Boundaries* (2006), which discovered that, asylum seekers, refugees, immigrants and Canadian born racialized peoples continuously confront emotional, psychobiological, psychosocial and spiritual crises due to social exclusion and social inequality. Refugees, asylum seekers and immigrants arriving from formally colonized countries already have a history of multiple dislocations, and their already existing trauma becomes compounded by other confrontations with torture and political violence in their homelands. This is evident in the connection between post traumatic stress disorder (PTSD) and trauma related factors (Waldron, 2006, p.6). Levels of distress become even further aggravated by experiences with individual, systemic and institutional racism in Canada. Racism enacts a psychological assault on these individuals' self-esteem, and the resulting dehumanization and demoralization creates a spiritual void—or deep sense of alienation—eventually causing a dramatic decline in mental health (Waldron et al., 2004, p.10). Waldron's concept of 'colonial pathologies' demonstrates the extent to which racialized peoples' health status is dependent on multiple exposures to intersecting oppressions.

What the forgoing studies all suggest is that racialized immigrants to Canada, most notably Black women, all too often find themselves confined to living life under a range of 'precarious' conditions, their hopes of attaining the Canadian dream becoming transformed into a real Canadian nightmare. A great proportion of Black women are highly educated and skilled, yet confrontation with systemic racism robs them of opportune access to jobs commensurate to their skills and education. Black women who have attained higher levels of education at both tertiary and post-

graduate levels while in Canada are also confronted with their knowledge and skills being discounted. The requirement of ‘Canadian employment experience’ is the all-too-subtle racist exclusionary principle used to undermine and disqualify racialized immigrants’ attempts to gaining equal access to Canadian labor market. As a result, Black women find themselves confined to working in menial jobs for exceptionally low wages; they also experience higher rates of unemployment and underemployment as well as low job security. The income gap between educated racialized income earners and non-racialized income earners is markedly disparate and racialized groups are quite underrepresented in senior management and executive positions (Teelucksingh & Galabuzzi, p.206). In sum, Canada’s Black woman’s experience with the various manifestations of racism significantly contributes to her conflicted identity and attendant self-esteem issues; racism inhibits her capacity to avoid certain mental health risk factors; and because these women are in the main socio-economically marginalized, their access to appropriate healthcare services is accordingly circumscribed for them.

As earlier indicated, the “Canadian Task Force on Mental Health Issues Affecting Immigrants and Refugees” (1998) lists systemic racism as the most notable social determinant to negatively impact the overall well-being of racialized groups in Canada (p.8). Moreover, the Task Force argues that racism and its attendant forms of discrimination are rooted in our major social institutions, which suggests that Black women confront racism simply by their engagements with those institutions (p.9). These two statements clearly point to the importance and urgency of understanding how both the macro and micro aspects of racism are operationalized and function to impact on the psychological status of Canada’s Black women group. However, this Task Force study does not

historicize—i.e., does not provide (even a speculative) genesis for—those statements, which is void that, incidentally, is found repeated everywhere in my research literature. The reason for pointing to this void is perhaps obvious, but it would help to state it here explicitly so that there is no misunderstanding later on in the paper: *This void exists because White power/privilege—which is unquestionably the genesis of all anti-Black racist ideology—is today so sedimented in the general consciousness that it is impervious to any criticism seeking to dismantle it.*

Indeed, in relation to Black people White power/privilege has been increasingly *naturalized* since the first days of our enslavement. And this naturalization seems to have an intractable paradox built into it, which is this: on the one hand, those non-White peoples who find it necessary to aggressively critique White power/privilege inevitably find themselves stymied by it, and on the other hand, those White folks whom this power/privilege has been bestowed unto seem always to be unconscious of it. This paradox needs to be overcome if contemporary mental health practitioners are serious about understanding multigenerational trauma as this phenomenon relates to the Black woman.

From the literature surveyed to this point, Frantz Fanon seems to have been one of the first among the more influential theorists to address this paradox. In his essay titled “The Fact of Blackness” (1967), Fanon provides a brilliant and quite passionate explanation for how ‘colonial identity’ has determined both the context and the content of contemporary social relations. Embracing post colonial epistemological challenges to identifying trauma re-enactment as part of a continuous colonial reality present in capitalist social relations, we are told in this work that: “[E]very ontology is made unavailable in a colonized and civilized society” (Fanon, 1967, p.109). What a travesty! I am deontologized in every possible way—physically, spiritually and

materially. But if I didn't bring myself into being, this means that I was created by someone else and so I am the "mirror image" of my creator. My Blackness, as Fanon expresses it, could only exist in relation to whiteness. This rupture, this split, produces a massive psycho-existential complex for me; my history, my darkness is overwhelmed by it; to try and escape this complex, I must continuously seek new ways to reinvent myself, over and over again.

The era of Black slavery may be officially over, but the *imagery* constructed around the Blackness during that era is ever-present in our discourses today; indeed, more than one hundred and fifty years have passed, yet the *primitive and indolent Negro* is the dominant image Black people live with today. White folks are quick to blame Blacks for their misfortunes, and though almost all the literature so far reviewed make this point with direct reference to the American landscape, the sentiment is quite evidently shared by Canadians. I for one cannot count the number of times I've heard one or other comment made to the effect that *anyone can come to Canada and succeed*; however, upon closer reflection it is often very easy to infer that what is really meant is "anyone *but*" Black folks can succeed. Ira Berlin explains the matter this way:

A new cult of whiteness affected even the opponents of black slavery. Although many, true to the Declaration of Independence, rejected demeaning representations of black peoples, others subscribed to the new racial ethos. Their objections to slavery rested not on the subordination of black people, which they accepted as inevitable, but on the unfortunate effects that this peculiar form of subordination had on the white citizenry. Slavery, in short, was wrong for what it did to white people, not for the injury inflicted on black men and women. Racism thus became embedded in the opposition to slavery as well as in its defense, giving it a life separate and apart from chattel bondage. Such racist beliefs easily survived the destruction of slavery and gained new life in post emancipation society (Berlin, p.364).

In *The Criminalization of Race, the Racialization of Crime* (2002), Jiwani describes how certain peoples are racialized in order to criminalize them, a process which functions to exclude these peoples from obtaining valued citizenship rights/entitlements. Criminalization, in its most basic operation, is achieved by directly associating certain biological attributes with

unsanctioned/unacceptable/illegal behavior. When this association becomes accepted as real/true by the majority population (i.e. becomes “normalized”) stereotypes are generated, stereotypes which are then co-opted by powerful State interests for the purpose of justifying the denial of certain valued entitlements/rights to racialized peoples. In other words, the direct attachment of biology to crime naturalizes “racialization”/racism by categorizing, culturalizing, and erasing unvalued/unwanted identities (pp.67-86). To many of the authorities cited above, this erasing of unvalued identities is not only the ultimate act of violence, but also—and perhaps more importantly—it was a violence central to the success of the colonial enterprise. One authority on the subject, McNally (2006), suggests that without this violence the colonialists would not have been able to organize and control the labor of North America’s Indigenous peoples; colonial violence resulted in mass genocide and irreparable cultural dislocation of Indigenous populations.

A similar violence is entrenched in laws upon which our current legal system is constructed. Colonial violence serves to objectify and devalue culture and women. Women’s symbolic status as mothers and hence the bearer of future generations makes them more susceptible to colonial violence. Increasing global demand for labor and concurrent mass feminization of labor leading to mass migration of non-White women across the globe, leads to the disruption of socio-cultural, familial and economic patterns on which the Nation State relies for its development. This has produced counter effects such as the absence of women in the family unit and communities, producing counterproductive responses which has placed even greater burden on the caretaking abilities of the women left behind, resulting in mental health crisis. Women are expected to procreate to continue fulfilling the demands for cheap and available labor, as migrant women labor is regarded as cheap disposable labor, (David McNally, 2006; Yasmin Jiwani, 2002).

In order to understand violence in its complete form, it must be critically interrogated making every effort to situate every aspect of violence within its ontological source. We must question: Where does it come from? Whom is it directed against? What are its intentions and purposes? Violence must therefore be connected to and framed within discourses surrounding coercion, domination and power. Patriarchy (/paternalism), as a social control mechanism, continually reproduces the exercise of male authority over women and thus defines the nature of relations between men and women. As a consequence of this relationship of dominance, women have come to be objectified.

The Black Woman as Caregiver

Caregiving experiences are dependent on multiple factors, including race, gender, ethnicity, socio-economic status, physical abilities etc. To examine the intersectionalities of woman and gender in caregiving, I decided to do a comparative analysis to demonstrate how women from different racial and socioeconomic background experience caregiving responsibilities.

The construction of the Black matriarch, discussed earlier, has defined the scope of caregiving and the types of employment Black women are perceived as suited for. Since slavery Black women have been overrepresented in places of employment where there are demands for caregiving services. They are overrepresented within the nursing, health services, hospitality industry and the prison system, all of which have high demand for the caregiver personality. This overrepresentation is given qualification by Giddings (1984), “despite their status a larger percentage of Black women who stayed in school longer were disproportionately represented in the professions”(p.329).Giddings explains how the *double bind* of discrimination (of being born

female and Black) impacts on Black women:(1) It makes them more susceptible to unemployment and underemployment, which is why Black women have the lowest median income of all groups. On the other hand, the struggle to overcome domination has impelled the struggle for higher education, yet this has resulted in Black women being overrepresented within traditional employment (housekeeping, cleaning and janitorial, caregiving, etc.).

Hansen's (2008) conception of violence regards violence as emanating from traditional roles that stratify men and women. Historically boys have always been socialized into different roles than girls. On the one hand, this socialization results in boy's/men's reluctance to assume caregiving responsibilities within families, and the customary assignment of these rejected roles to girls/women on the other. Ultimately the immense stress involved in caregiving responsibilities has a detrimental impact on women's physical and emotional status, which could also lead to family breakdown. Hansen explains that the division of labor between father and mother and brother would determine the relationship of boys towards their partners in adulthood. She also states that the woman's reaction to receiving assistance from her partner is dependent on her ideas and attitudes towards gender and the objective relationship between her father and herself (p.206).

Knight et al. (2007) investigated the different caregiving experiences between African American and White caregivers of persons with dementia. This investigation found that African American caregivers reported less recognition of caregiving burden and better mental health outcomes. This difference in mental health outcomes is due, Knight et al. claim, to how African Americans, as a disadvantaged group, situate their roles and experiences within the context of cultural values. However, even though African Americans likely benefited from the positive effects of ethnicity on burden they suffered as a result of avoiding coping mechanisms. Knight et

al. also found that although White caregivers were more depressed than other groups, they were also more likely to seek help and also have easier access to help when they become emotionally distressed than African American caregivers. The study also showed that African American caregivers had a greater risk of developing cardiovascular disease and hypertension. This study shows how necessary the availability of resources for caregivers is in the experience of caregiving.

It is also important to understand how Black women have historically been situated as caregivers and how this plays into their understanding of caregiving responsibilities. bell hooks (1981) provides a historical analysis of how racist representations of Black womanhood during slavery still informs Black women's place in society today. hooks argues that the patriarchal and racist dimensions of the Black slave woman's experience have always emphasized the role of Black women as caregivers, which is still strongly reflected today. From the perspective of the White employer the "domestic" functions performed by their Black woman employee merely represent an extension of her "natural" role as caregiver, a role which in sum effect is seen by the employer as valueless (hooks, 1981, p.91).

The ascription of these roles as cultural values in Black social life (coupled with the constant devaluation of Black womanhood as well as social and economic marginalization) causes Black women to internalize these sexist and racist values. This becomes played out in caregiving roles whereby Black women are hesitant to implement coping strategies or seek assistance, because their identity is affixed to assuming caregiving roles. An understanding of these historical experiences which inform Black women's performance of gender roles would be instrumental in helping therapists develop proper treatment plans and examine proper resources to empower Black women caregivers.

Epistemic Violence

Euro-American standards of beauty also represent a conflict in identity for Black women. Non-White women are particularly susceptible to epistemic violence as White supremacy relies on women, through engagement in gender prescribed activities, to internalize the ideals framing this violence and to replay them through fantasy, image performance and daily social role playing. Moreover, the fact that within White supremacist governance and interactions White women are privileged over other women on the basis of race, they themselves participate in regenerating supremacist ideals and norms which confers them this privilege. Epistemic violence results in low self-esteem and self-image, induces self-altering practices (skin bleaching, weaves), criminality, deviance, and mental illness (body dysmorphia, depression, substance abuse).

Gun Violence

The multiple experiences of Black women in Canada are demarcated by encounters with one form of violence or another, by experience with poverty, and by dislocated identities informed by the socio-historical/cultural experiences of slavery and colonialism. During the era of plantation slavery Black people's contact with one another occurred primarily through violence. Violence was a part of their everyday experience and over time they internalized this violence and came to express their power through it. Bailey et al., (2015) explores the effects of gun violence on Afro-Canadian mental health. Black Youth, according to Bailey et al., are disproportionately *more at risk* to death by gun violence. Loss of life by gun violence for Black youth also constitutes Afro-Canadian women's confrontation with violence. They are forced to contend with not only the trauma resulting from loss of a child, but consequentially have to deal with trauma emanating from the stigma associated with death by gun violence (Bailey et al, 2015; pp.311-325).

This stigmatization also demonstrates that some identities—otherwise known as “subjugated identities”—have been shaped through certain historical and social experiences. For O’Brien and Szeman (2004), social regulation is central to understanding self-regulation processes. Social regulation determines how individuals should act in society and, along with moral regulation, determines what is right and proper or socially acceptable. Social regulation, according to them, is produced through a complex web of power relations. The logic of self-regulation already connotes that there is some external force requiring the individual to monitor or control themselves in order to achieve a desired goal, so this action is not totally independent as it is limited by these external factors. They also go on to show how these relations of power informs “othering” or stereotyping of certain individuals as a means of assigning specific identities to certain bodies in an effort to systematically contain and monitor them within the state. Stereotyping informs a politics of representation about what is “normal” and what is “deviant.” Representation consists of words, discourses and images which are used to categorize social groups. It governs the production of meanings, what becomes essentially known and accepted as truth or reality.

Discussion

The stated aim of this research paper was my attempt to shed needed light on the Canadian health professions’ lack of attention to Black women’s experiences with mental illness. Principal among my reasons for this attempt was the idea that while experts in the mental health/illness field (including health professionals, politicians, and academics) purport to make Black women’s experiences with mental illness an important study they nevertheless all seem to miss their mark. And my proposed primary reason for these experts missing their mark was their unwillingness to

accept the possibility that Black women's mental illness issues should be—indeed need to be—directly linked to what has been called “the slave experience”. But to be honest, after reviewing the discussions presented above for the hundredth time I am still questioning whether I too missed my mark; for even though I did qualify at the outset that there is very little Canadian research on the subject and as such it was necessary to rely on American literature, it can appear that my discussions were *more* concerned with White male's power/privilege and *less* with Black women's mental illness issues.

But then again, it does appear that there may not be such a marked separation between these two social facts (i.e., Black women's mental illness and White male's power/privilege.) Indeed, White power (more generally) *and* its continued accrual of power/privilege is a combination fact that no socially responsible person today would choose to deny; to deny it would, at the same time, be to deny the fact that much of the White power/privilege wielded today has origins in slavery.

In *Racism and Mental Health Prejudice and Suffering* (2002), McKenzie lists a number of factors which he argues contribute to the high incidence of mental illness among Afro-Caribbean populations. Included in the factors highlighted by this author are “Socio economic status, [the] role of psychiatry on social control, the validity of European illness models in ethnic minority groups, and the use of the universalist rather than relativist approaches to psychopathology and diagnosis” (Kwame McKenzie, 2002, p.83).

Lemelle (2011) also suggests that the starting point to understanding mental health behaviors among Blacks should be a focus on how Black identity history is situated within the context of slavery. This historical experience, Lemelle says, has informed their mental health

status tying Black identity to cognitive functioning. The historical dimensions of inequality impacting on Black people's mental health status is influenced by poverty, marginalization and receiving less income for similar occupational role with Whites. This social disadvantage is influenced by different kinds of public and social policies and laws, and so Lemelle advises researchers who are committed to eradicating health disparities to acknowledge African American identity as a stressor for mental illness (p.5).

The combined effects of racism and sexism contribute to the diminished mental health status of Black women in Canada. Moussai and Agoub (2015) introduce adjustment and resilience as two key protective factors in maintaining the mental health of immigrants; the processes of adjustment and resilience, these authors argue, will determine how the immigrant fare in transitioning to the new society. While immigrants' adjustment to change is dependent on factors such as coping mechanisms, Moussai and Agoub advises that there are multiple risk factors which interplay in identifying decline in mental health among immigrants, such as gender, traumatic experiences, unemployment, language barriers, poverty, among others. In general, "dominant values" are implicated in producing these risk factors to psychological distress (Moussai & Agoub, 2015, Pp.98-99).

hooks (1989), in her treatise *Black Women and Self-Recovery*, explains that given the politics of Black life in this White supremacist society, it makes sense that internalized racism and self-hate stand in the way of love. Systems of domination exploit folks best when they deprive us of our capacity to experience our own agency and alter our ability to care and to love ourselves and others. Black folks have been deeply and profoundly "hurt"—or as we say down home in St. Vincent, "hurt to our hearts"—and the deep psychological pain we have endured and still endure

affects our capacity to feel and therefore our capacity to love. This deep psychological pain injures the spirit. *Spirit injury* is defined by Wing (2003) as “the psychological, spiritual and cultural effects of violence done to women” (p.952). Spirit injury “leads to the slow death of the psyche, of the soul and of the identity of the individual” (Wing, 1991; p.186). We are a wounded people, wounded in that part of ourselves that would know love or that would motivate us to *be* loving. The impulse to love has always been a “gesture of resistance for African Americans” (hooks, 1983; p.18). hooks also believe that a common and inevitable consequence of the destructive power of continued social oppressions on the Black woman’s mental health is the eradication of her self-esteem.

Bhui (2002) identifies *acculturation* as another major contributing factor to mental illness among racialized immigrants. Acculturation hinges on being able to adapt to the values of the host society, even when it comes into contestation with one’s own cultural identity (Bhui, 2002). However, there is a boomerang effect to “playing the pipers tune” (adapting the cultural values of the host country) when the piper does not want you to be a member of the band, in that this *playing* can have significant negative effects on the incomer’s sense of identity and sense of belonging. Racialized immigrants are proposed with an either-or option: join them and lose your cultural identity, don’t join them and become marked for exclusion and isolation. Whichever choice one makes there are still devastating consequences to one’s mental health.

Somasundaram (2011) defines collective trauma as “under-recognized, but salient responses to various types of massive traumas resulting from disasters and representing the negative impact on social processes at the collective level” (Somasundaram, 2011, p.149). The exploits of colonialism, and in particular slavery, must be considered such a “disaster”. The trauma

of Black Canadian women is an integral aspect of collective Black experience with trauma. Unaltered systemic and institutional policies and practices, along with interpersonal racism, constantly reproduce trauma re-enactment for Blacks. Almost all Black women who have immigrated to Canada have had some encounter with this violence in their lives. The struggle for these women trying to forge a new way of life in Canada becomes compounded by the impact of the legacy of this collective trauma on their psyche. All of this demonstrates the urgency for mental health professionals to understand how much Black identity is tied to the experience of slavery and colonialism, and how much their everyday experience is informed by these historical events. As Braverman (2006) asserts, the purpose of mental health institutions and mental health professionals is to struggle for equality by eliminating the disparities in mental health practices which structures race, class and gender inequalities (Braverman, 2006, pp. 167-194).

Speaking of the enduring legacy of slavery on Black psychological functioning, DeGruy (2005) asserts that our confrontation with multigenerational trauma has resulted in a psychopathology which she refers to as *post traumatic slave syndrome* (PTSS). This mental disorder, while bearing similar features to *post traumatic stress disorder* (PTSD), has been classified differently because of its specific orientation in slavery. This orientation is re-enacted on a daily basis through encounters with institutional domination, evident in racist legislation and policies, racist epistemology and discourse, and through the politics of representation. DeGruy argues that the psychological terror that Black folks have encountered with Whites is multigenerational and moves constantly from past to present, so that each generation is forced to relive the experiences of the past generation. The specific psychological effect of these experiences is that the brains of traumatized persons produce higher levels of cortisol, which prevents the brain from functioning optimally. Cortisol also triggers a flight or fight response

which causes an individual to always perceive threat as an ominous presence in their lives, to the effect that one is always keyed into survival mode (DeGruy, 2005, pp.110-139).

Envisioning a Way Forward for Canada's Black Women

Within a politics of containment, where Black women's bodies are repeatedly framed as compliant, it is urgent for agents of social justice to unabashedly interrogate how racist representations of Black women continuously enhance their oppression. Indeed, such interrogation becomes very necessary to dismantle the discursive and institutional regimes that continuously reproduce and authenticate false perceptions of Black humanity. This need for a more unabashed response to mental illness as relates specifically to Black women in Canada is today a dire one.

A starting point in addressing this issue could be to rethink the Ontario Human Rights (OHR) policy on mental health disability, which is rather problematic in that it homogenizes the experiences of people living with mental illness. The OHR provides a vague and difference-neutral definition for mental health disability, which obscures how much historical and social relations contribute to higher rates of mental illness among certain groups in Canada. The OHR policy on mental illness is narrowly situated within the neoliberal capitalist value-based system of commodity exchange, wherein Black women are reduced to commodities and underprivileged people/groups—among which Black women are at the bottom—are least valued. This policy needs to be revised and reoriented.

Warner's (2008) application of intersectionality theory to mental health research may help with such reorientation. On Warner's view intersectionality theory can demonstrate how related

systems of domination and oppression interact with divergent identities to structure inequality, and as such would be beneficial to research because it foregrounds “identity” as a lived process situated within social structural contexts (p.59). Warner further advises that it is necessary for researchers to decide carefully the dimensions of identities that they want to use and show why those are appropriate. In other words, Warner believes that identities should be decided upon based on the relevance and the purpose of the researcher’s inquiry (p.455). She also encourages drawing from different interdisciplinary sources in order to determine which identity is appropriate for a particular research question (p.456). However, she cautions against applying prototypes, which can render group members with less power invisible through the privileging of one experience over another.

Ruiz, Maggi and Yusim (2011) point out that the overwhelming stress that racialized immigrant women confront has serious implications on their overall well being and eventually leads to a decline in mental health. But as Khanlou et al., (2015) remind us, immigrant women have a host of resilient strategies—often situated within the context of cultural knowledge—which enable them to cope with their struggles. But these authors also caution that this knowledge must not be taken for granted, as some of the coping strategies employed by women may eventually overwhelm the capacity of the system to provide the array of services which enables immigrant women’s potential to attain commensurate well being (p.32-47).

As I reflect now on my own mental health concerns Khanlou et al.,(2015) idea of *overwhelming the capacity of the (health) system* seems to gain credibility. For at the end of the day it is my “Blackness”—as perceived by the dominant eye—which always forms the basis of my inhumanity. Although my mother is White, and I have Jewish ethnicity, it is my Blackness

which is continuously played upon throughout interpersonal encounters. Daily encounters with ‘otherness’ provide me a basis for understanding my own existence, which is at bottom a traumatic existence because I can only relate to myself through otherness. The trauma lies in that instant recognition of a decentered power. This is because one’s awareness of one’s existence also comes with an acknowledgement of the possibility of one’s self -annihilation. The Lacanian notion of mimicry presents multiple possibilities for me to further investigate my condition, but I am forewarned that conformity does not contribute to my survival. According to Lacan, mimicry can become possible only when one identifies oneself with the stain. The stereotype only occurs in a moment of trauma, when the subject identifies with the stereotype (Lacan, 1977; pp.97-98). But now the seminal question becomes: “how do I explain” all this particular self-knowledge to the Eurocentric psychologist schooled in the biomedical model?

Again, Lemelle (2011), in speaking about Blacks’ collective historical experience with trauma, demonstrates how much Black identity is shaped by the effects of slavery. As with a number of the authors already presented above, Lemelle argues that the starting point to understanding mental illness within this racialized group is *the slave experience*, since this historical experience deeply informs their psyche. He explains that differences in health outcomes are directly related to extant disparities in health service provisions, wherein financial status, education, gender, income and wealth are all important determinants insofar as who are most benefited. Lemelle goes on to argue that, on a general level, relative to others, Blacks are more disadvantaged when measured by these determinants, and thus social inequality and marginalization have come to characterize the Black reality globally. Thus, it is crucial to understand the accentuated roles that Black identity *and* attendant socioeconomic deficiencies play

in placing Blacks at a disadvantage within the current dominant health provision model (Lemelle 2011, p.4).

To summarize, for Black women trauma is inherently a product of both historical colonial practices *and* a consequence of contemporary capitalist relations. Our trauma becomes activated (and further complicated) by issues of job instability/insecurity, second-class citizenship status, inaccessibility to social capital, and a never-ending demand for identity [re]negotiation. The precarity ensuing from Black women's struggles to overcome these oppressive experiences continually undermines our capacity to become ecologically self-sustainable. Studies focusing on the psychobiological and psychological effects of trauma on individuals and communities demonstrate that those who experience trauma have higher levels of depression and psychosis and thus get caught in vicious cycles of poverty and mental illness, which inhibits their capacity to flourish. Such individuals and communities can seem destined to forever remain on the outer margins of society.

Implications for Public Policy

The study's implications for public policy include, though not limited to, the following:

1. Increased/improved (inter-sectoral) coordination amongst principal mental health stakeholders, including government, the medical establishment, as well as researchers, community interests, and racialized women themselves;
2. Potential for necessary amendments to current immigration, health and employment standards (and by implication childcare policy);

3. Education/curricula reorientation and development, not only in terms of the advancement of professional research in the area but also in terms of introducing said research at the undergraduate level (Bhui, 189-90, 197);
4. Forging of a new direction for pharmacology research, i.e., shifting focus from palliative to preventative care or, at the very least, according equal emphasis to the two.

Policy Recommendations

Empowering communities to flourish through more equitable distribution of resources requires multisectoral responses. In order to develop an evidence-based strategy for countering mental illness among Canada's Black women populations, it is necessary to investigate the historical/generational channels through which these women come to experience mental illness. What I aimed to present in this paper is enough evidence to suggest that mental illness is produced through an interplay of complex historically laden socio-economic, socio-cultural, and political forces which together impinge on the ability of individuals to achieve overall well being. As Bohr, Hynie and Armour (2015) remind us, any discussion on immigrant mental health must be connected to issues of policy (p.239). Because social cohesion is relevant to the transfer of cultural knowledge, lack of social capital decreases the capacity of vulnerable communities to effectively engage methods to combat mental illness (McKenzie 2006, p.34). Borrowing on the advice of the Canadian Institute for Mental Health (2009), positive mental health must be measured along a continuum which addresses mental health from margin to center; this way mental health practitioners come to focus on thriving, prevention and treatment as positive aspects of mental health promotion that becomes connected to identity and belonging, along with the feeling of a

sense of purpose and self-worth (CIHR, 2009, p.10). But getting to such a place will require the ‘willingness’ of all health stakeholders, including government and private industry, to firmly agree on *the need for change*; these stakeholders must commit to the necessary financial resources and policy efforts that would facilitate this change. Among the major issues for policy makers to consider would be the following:

1. **National Mental Health Policy:** The shortage of mental health services and inability to access existing ones are the principal causes for the crisis in mental illness currently being experienced in Canada. One way to remedy this crisis would be for government to institute a national mental health policy which is committed to allowing free access to mental health services for all peoples in Canada. This can be accomplished by advancing mental health services as a fundamental human right and by allowing for use of OHIP to access all mental health services to enable efficient services for all users. A part of the healthcare budget should also be directed towards local community mental health service providers to enable access to those persons living in Canada under precarious immigration status. A “don’t ask, don’t tell” policy should also be implemented by these community users to build capacity between themselves and community users ensuring that everyone has equal access to mental health services. Social capital and mental health can be bridged through civic institutions which offer multiple opportunities for engagement.
2. **Immigration:** Mental health service stakeholders need to forge relationships of mutual trust and respect between patients and healthcare professionals, which is best attained by adopting a client centered approach. The professionals must consider the length of time a person has been in the country in relation to their ability to learn a new language and become acculturated. Such consideration is important because it directly addresses the concern over the

underutilization of services, which occurs primarily because marginalized groups are often unaware of available services but also due to mistrust of current practices. These concerns could be remedied through the strong promotion of mental health literacy and by offering healthcare services that are culturally appropriate. Attention should be paid to the various cultural attitudes and skills of patients as well as to one's (i.e., the practitioner's) own cultural biases; that is, rather than seeing cultural differences as 'baggage' healthcare professionals would begin by investigating the influence that native culture has on the well-being of individuals. Indeed, successful help-seeking services are dependent on discovering a problem as well as examining the barriers which limits help-seeking. Moreover, because mental health services are usually based in needs-led and/or demand-driven approaches, discrimination "will occur not only when persons with the same needs are treated differently, but also when persons with different needs are treated the same". Illness is often influenced by a patient's sociocultural situation, hence adapting Western treatment models to fit all criteria of patients, regardless of situation and culture, would only result in systemic discrimination (Ingleby 2011, pp.231-242).

3. **Therapy:** Developing an integrative holistic model to mental health therapy is one of the best approaches to enabling traumatized peoples to overcome their past negative experiences. This can be accomplished through individual, group, and family therapy that are culturally appropriate. Therapy should include consideration of cultural practices (e.g., in treating anxiety or depression) familiar to the patient and then attempt to adapt those practices to circumstances being experienced in the new homeland. Group and family therapy provide avenues for bonding and socialization, which are instrumental to the treatment of mental illness.

4. **Psychoeducation:** Psychoeducation can be used as a preventative strategy in mental health promotion because of its focus on resilience, empowerment and supportive environments. Bohr, Hynie and Armour (2015) advise that “Research need to be focused on strategies to protect the mental health of immigrant women. Instead of reverting to outmoded strategies predicated on acculturation and cultural diversity (Bohr, Hynie& Armour, 2015, p.239). Health equity should be directed towards the eradication of socio-economic and socio-political difference. Teelucksingh and Galabuzzi suggest that there is need for more investment into human capital, and that public interest should include a focus on equity and economic efficiency (p.207). In line with this level of thinking, Young (1990) asserts that: “The injustice of exploitation consists in social processes that bring about a transfer of energies from one group to another to produce unequal distributions and in the way in which social institutions enable a few to accumulate, while constraining many more. The injustices of exploitation cannot be eliminated by redistribution of goods, for as long as institutional practices and structural relations remain unaltered, the process of transfer will recreate an unequal distribution of benefits” (p.53). Employment equity should therefore be framed around restorative measures which seek to privilege the most disadvantaged groups in an effort to level the playing field. There is also a dire need for a more rigid focus on Mental Health Promotion. Mental Health promotion would further help to eliminate the stigmatization of mental illness by linking mental health with overall well being.

Conclusion

We in the West were made to hate Africa and to hate Africans... By skilfully making us hate Africa...our color became a chain. It became a prison. (Malcolm X, in Marable, p.414)

Black people's history since being brought from Africa to the West some four hundred years ago has been, at bottom, a history of *unconditional displacement*. Black people's journey to the West from the start included, for example, having to live through mosquito-infested coastlines before being loaded onto slave ships; being shackled to each other at the feet, hands and neck while sharing space with rodents in the putrid bellies of slave ships; fear of being tossed overboard for any reason deemed necessary by our captors; and forever wondering whether we could/would live to see tomorrow. Black folks had to live through all these conditions, with their insecurities, without ever having the opportunity to speak up in our own defense, since once kidnapped and sold off the slave-ships' crews did all our speaking for us. This is not to say that these future Black slaves did not resist/rebel at every opportunity (in fact, many went so far as committing suicide), however the ominously lingering threats of extreme brutality and death at the hands of the slave-ships' crews kept them mindful of the fact that they no longer owned their minds and bodies (Diptee, 2010; DeGruy, 2005). Such was the beginning of enslaved Black people's trauma in the West.

But as I tried to show in this study, while the overt brutality of the Black slavery days may have been swept under the rug, the violence that shaped the slave era is still palpably felt by today's Black peoples, in particular our women. Canadian Black women's collective contribution to the development of our economy and society overall has been abundant; yet while the country has benefitted immeasurably these women's contributions have not translated into any specific/notable personal gains. As the above reviewed literature has shown, Black communities are among the

most marginalized in this country, standing at or near the bottom of almost every established *social determinant of health* category. The World Health Organization WHO (2000) defines social determinants of health (SDH) as follows:

The social determinants of health (SDH) are those conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems (WHO, 2000, p.47).

For a community to ‘thrive’—that is, to avoid the negative and debilitating effects of mass-scale mental illness—it must have timely access to these larger systemic (i.e. social, political, economic) forces, which in turn requires that a community’s individuals have a positive relationship to what some of the reviewed literatures identified as *social capital*. As emphasized by the numerous examples provided in the literature, communities lacking social capital are more vulnerable to the full spectrum of mental illnesses than communities which do not so lack (McKenzie, 2006, p.34). In other words, communities begin to malfunction and gradually degenerate into crises when they are denied access to the larger society’s vital resources. This lack of timely access to (or denial of) vital resources calls into question the institutionalized discursive regimes that continuously reproduce the marginalization of Black humanity.

As a Black woman living in Canada for over two decades I can in many ways attest to this marginalization. One particularly tragic instance can provide a good illustration. A little over 12 years ago I was the subject of a violent sexual attack, a case which ended up in court. A detail-by-detail account of the court proceedings is not necessary here; suffice it to say that here I was appealing to the court to seek justice on my behalf, but all through the proceedings it was the fact of my being Black which took centre stage. The court did not weigh in the seriousness of the offence (I was slashed with a knife in the midsection), nor the psychological impact the incident

had on me. Repeated reference was made to my “hot tempered nature” (a throwback to the “boisterous and rude” slave woman); as well, references to my being a “Black woman” constantly emerged. The only justifiable reason I could come up for necessitating such references was so that the court could dismiss the whole incident as a “Black on Black crime” (a term which was well in vogue at the time.). But what the whole trial told me (here in retrospect) was that Black women’s bodies are today as devalued as they were four hundred years ago. In the end, I went to court hoping to get justice; and although some “punitive damages” was awarded, the psychological experience of the court proceedings did as much violence to me as the knife mark my attacker left on me.

This being said, however, I am nonetheless hopeful that positive change is possible for the Canadian Black woman. This hope came into being when I encountered the concept of *multigenerational trauma* in the writings of Joy DeGruy’s (the concept only gained popularity within the last three or four decades;) but it (my hope) developed—i.e., became more of a conviction—when I read that Indigenous peoples “in this hemisphere” have been using the “synonymous” concept of “soul wound” ever since the landing of Columbus, and moreover, that this concept has been gaining a foothold in academic circles. It is my further hope, going forward, that other researchers would share my conviction—as argued in my paper—that multigenerational trauma is a worthwhile avenue for study in the treatment of Canadian Black women’s mental health concerns. The Black woman is not “mad”, and I don’t believe that there is anything patently wrong with being “boisterous”; but she does need a hand-up from the various policy makers (not only the medical authorities) if she is to more fully realize her self-worth and overall humanity. As a replacement child (indeed, I’ve always felt a deep sense of responsibility towards the generations

past) I would like the effort undertaken in this study to be seen as an effort at extending such a hand.

Limitations

There are three important limitations to this study that should be noted. The first and arguably most significant limitation is that there is very little Canadian scholarship (whether *qualitative or quantitative*) available on multigenerational trauma in the context of slavery. Second, given this lack of Canadian research a *semi-structured participant interview* component/supplement was originally included as part of my study design, however family and employment commitments/responsibilities fundamentally hindered my ability to follow through with this supplement. Third, in light of both the above it would be necessary to acknowledge that implications or conclusions drawn from the surveyed research literature are *not* to be interpreted as identifying Canada's Black female population(s) as a homogenous group; that is, implications/conclusions suggested in the paper remain quite limited in terms of their generalizability across the Canadian Black female population(s).

Despite these three evidently significant limitations, however, I remain hopeful that the remedial ideas or directions proposed in my study can prove worthwhile to future researchers wishing to pursue studies in this important but to date sadly underserved concern of the slave experience and multigenerational trauma.

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