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## Exploring whiteness in the context of anti-racist practice: A mixed methods survey

Frances Basset

Metanoia Institute, London, UK. *Email:* frances.basset@metanoia.ac.uk

**Abstract:** A growing body of evidence exposes the persistence of racism and inequality within the psychological professions and this has led to a re-commitment across all professional bodies to address this as a matter of high importance. This study aims to illuminate therapists' views and understandings of the social construct and term "whiteness" within anti-racist practice. A short, mixed-methods survey conducted in the United Kingdom sought therapists' views and from a purposive sample of 150 and fifty were returned. Quantitative data were statistically analyzed and Reflexive Thematic Analysis (RTA) was utilized to explore qualitative data. Results suggest that respondents believe that the terms "whiteness" and "white culture" reflect a dominant, yet often invisible, force in the field of race, and culture. Dialogue inclusive of the meaning and power of whiteness needs to be addressed in anti-racism training and education. A central organizing concept "Heart of the Work" was the connecting principle between four key themes: The Dominance of Whiteness; Ambivalence, Complexity and Uncertainty; The Importance of Education; and Understanding the Wider Context. Findings from this survey indicates that discussions about whiteness, privilege, and racial identity could enhance anti-racism within psychotherapy. There is a real concern about the re-traumatization of racially-minoritized members of therapy training groups, and the requirement for reflexivity and skilled facilitation is highlighted.

**Keywords:** Anti-racism, whiteness, critical race theory, critical whiteness studies, psychotherapy, ethical practice

**R**ecent world events have led to a sense of urgency within the white-dominated global-north to address gross imbalances of power and reverse climate disaster (Paradies, 2020; Irfan, 2021). The aftermath of Covid-19 and the murder of George Floyd saw global expressions of grief and anger and an uprising world-wide movement to end racism; the Black Lives Matter (BLM) movement was a central focus for this. Disproportionate losses of life from Covid-19 amongst racially-minoritized people highlighted the reality of global, structural, and systemic racism (Godlee, 2020). This situation in turn, has

alerted politicians, activists and scholars to see beyond post-racial, colour-blind, meritocracy, to the reality of global inequality and its devastating effects on the planet and humanity (Paradies, 2020; Alcoff, 2015; Bonilla-Silva, 2010; Wilkinson & Pickett, 2010).

Despite race being one of the nine protected characteristics set out in the United Kingdom's (UK) Government's Equality Act (2010), structural, systemic and Institutional racism persist in tandem with a resurgence of nationalism and growth in the far-right in many parts of the world. Mason argues that fascism is no longer a forgotten horror, it is a real psychological, political and genocidal logic that is gaining support once again (Mason, 2021).

Within this context, the psychological and psychotherapy professions have re-committed to specifically addressing racism and race inequality within the white-dominated, middle-class, profession (British Association of Counselling and Psychotherapy, BACP, 2018; British Psychological Society, BPS, 2020a; Bostock and Watson, 2020; Sidhpara, 2020; United Kingdom Council for Psychotherapy, UKCP, 2020; Weaver, 2022).

### Ontological and Epistemological Positioning

As a middle-class, white psychotherapist and feminist, I bring my lived experience into the research and position myself primarily within critical realism (Bhaskar, 1975 and 1998); the mid-point between the paradigms of realism and constructivism and between the poles of quantitative and qualitative methodologies (Denzin and Lincoln, 2000). I lean towards social justice and have an appreciation of critical race theory (CRT) and critical whiteness studies (CWS) as a theoretical basis and foundation. Criticalists appreciate reality within power relations and aim to empower participants toward democratic change and transformation. Like constructionists, the social and historical context is emphasized (Ponterotto, 2005).

It is from this standpoint that a discourse can take place which seeks a deeper understanding of the complexities of the terms race, racism and the term whiteness as social and political constructions (Altman 2021; Turner, 2021). In addition, it is important to acknowledge the limitations of terminology and the fact that language is continuously evolving. Race itself needs to be acknowledged as a racist term originating from historical white colonialism and enslavement. At the time of writing, the phrase, people of color (POC) is commonly used however this may strengthen the myth that white people are the norm and are somehow excluded from racial identities thus strengthening white hegemony. As a white researcher, I take full responsibility for the inadequacy of these ethnocentric terms and any offence they may cause (Aspinall, 2020). Within the limitations of language, I strive to keep abreast of the changing situation and employ sensitivity and awareness.

This particular field of study is awash with complexity, contradiction, and nuance (Morgan, 2021) which are the very qualities that are part and parcel of our work as psychotherapists alongside dialogue (Cushman, 2019) and reflexivity (Finlay, 2009; Dean, 2017).

Whilst the boundaries of this study are contained within an overall framework and appreciation of intersectionality (Crenshaw, 2017), the *specific focus* is primarily on whiteness, colorism, and anti-black racism (Bennett, 2020; Kendi, 2019; Kinouani, 2021) because it is this focus where the profession

needs urgent attention (Benjamin, 2021; Bostock and Watson, 2020; Cousins, 2019; Ryde, 2019). Beyond these parameters, I particularly acknowledge the link between racism, sexuality and gender, disability and social class (Akala, 2018) because psychotherapy is predominantly a white, hetero-normative, female-dominated, ableist and middle-class profession.

### A Reflexive Positioning

For a further exploration of my personal reflective journey, I refer the reader to Basset, (2021a, 2021b). I acknowledge unconscious bias and my complicity as a beneficiary of racism (Yancy, 2015, Applebaum, 2010). In addition, I have come to understand the origins of whiteness as a social and political construct; a means by which historical enslavement could be justified via the evolution of scientific racism; the notion that empirical evidence could be used to demonstrate that, “black people were an entirely distinct species” (Dabiri, 2021, p. 45) and should be exploited to further capitalism, industrialization and the wealth of the global-North (Olusoga, 2016). As horrific as it is to acknowledge, white has become the normal marker of humanity, the standard by which all other human species were/are measured (Menakem, 2021). In other words, the socialization into this normativity of whiteness has provided white people with the privilege to understand race as simply ‘other’ (Turner, 2021; Diangelo, 2021; Saad, 2020, and Eddo-Lodge 2018).

Within this study, my unconscious, internalized racism and white privilege is owned - as uncomfortable as that is. I acknowledge this and am encouraged to develop, reflexive vigilance (Yancy, 2015; Foste, 2020); a willingness to constantly reflect on what it means to be a privileged, white researcher, researching racism. As I have discovered this does not grant me any special status of having arrived, as a good white, anti-racist. There is always more to learn; more awareness to attain. Being an anti-racist white person is a life-time aspiration to reach a destination at which one never arrives (Yancy, 2015). Having rarely had to consider my own white advantage, considering the notion that I have benefitted from inequality bestowed on others is deeply disturbing and, at times, shaming.

## Background Literature

When white people reflect on the concept of whiteness they may experience confusion, ambivalence, complexity and paradox. As white psychoanalyst Morgan states, “No human being, even the fairest amongst us, has skin that is actually ‘white’ just as the darkest is not ‘black’” (Morgan, 2021, p. 469). However, these essentially meaningless terms, since

their inception via 17<sup>th</sup> Century colonialism and enslavement, have been concretely deployed to categorize people within a racialized meaning system (Olusoga, 2016, Fara, 2017). Use of the terms created divisions that have perpetuated ideas of racial superiority and hence local and global power systems governed and maintained by those classified as white. Psychotherapist and white author, Judy Ryde, has studied how hard it is for white people to see themselves as having a racial identity within a racialized context (Ryde, 2009). Whilst racial inequality and the dominance of whiteness and racism within psychotherapy have been acknowledged, the extent to which these phenomena have been accepted is much less clear.

The study of whiteness is not new. As a theoretical body, major growth emerged in the 1980s and 90s but, long before this, racially-minoritized people had special knowledge of whiteness, simply by observing and recording their experiences, often as a means of survival (Olusoga, 2016). Black American sociologist, William Du-Bois' original work, published in 1903, explored the phenomena of whiteness in his classic text, *The souls of black folks*, and black novelist, James Baldwin (1924-1987) has been referred to as the great expert on white consciousness in the United States, (Roediger, 1998). The French, West Indian, psychiatrist, Franz Fanon wrote *Black Skin, White Masks* (1967) highlighting the psychopathology of colonization and in doing so, produced a study of whiteness. Key seminal work includes: McIntosh's (1988) *White privilege: Unpacking the invisible knapsack*; Dyer's (1988) classic study, *White*; Frankenberg's (1993) *White women, race matters: The Social construction of whiteness*; and Allen's (1994) *The invention of the white race*.

The terms "whiteness" and "critical whiteness studies" (CWS) and also critical race theory (CRT) were a focus in exploring the literature in addition to fields of sociology, education, cultural studies and psychotherapy and mental health. The main psychotherapy scholars to have flourished within the last twenty years, (Altman, 2021; Morgan, 2021; Ellis, 2021; Ryde, 2019; Dottolo & Kaschak, 2016; Turner, 2021; Newnes, 2021; Abadio & Littlewood, 2019, Fletchman Smith, 2000; Mckenzie-Mavinga, 2009, 2016 and 2020, and Charura & Lago, 2021) have all directly or indirectly implicated whiteness as a factor within racism and, therefore, anti-racism. Many of these writers urge psychotherapy training organizations to integrate anti-racism with an understanding of white racial identity and its often-invisible power and dominance within all aspects of psychotherapy training programs (Turner, 2021; Altman, 2021; Morgan, 2021 and Charura & Lago, 2021). It is clear from the literature that the next generation of psychotherapists and counsellors will be more diverse, empowered to speak out, and more likely to expect skilled educators to tackle these issues more readily than they have in the past. The sheer volume and scope of research literature and texts that have been produced suggest this is already underway.

## Methodology: Research Journey and Ethical Positioning

Over a period of eighteen months, immersing myself in anti-racism training and education opportunities, I attended conferences, forums, seminars, and numerous study days. In addition, I joined discussion groups locally that were committed to looking at whiteness and what being a white therapist meant within an anti-racist framework. I also joined PCSR (Psychotherapists and Counsellors for Social Responsibility), a specific social justice focused organization, alongside the Coalition for Diversity and Inclusion - an organization made up of 11 professional bodies and associations currently dedicated to tackling racism and inequality within the psychotherapy profession. I am also a follower and member of the Black and Asian Therapy Network (BAATN). In addition, I am currently collaborating with the UKCP and the BACP as a researcher exploring the role of whiteness in anti-racism. During this immersion period, I met a diverse range of qualified therapists who were similarly concerned about inequality and racism within the profession. From these experiences, I built a repository of potential survey participants and email addresses that became a purposive sample. Some of these links were established via initial "chat box" conversations from zoom courses/conferences and followed up with an introduction to the survey on email. Others were made by my visiting therapists' professional websites and getting in touch via email. Other links were established from a brief circulated via my *LinkedIn* connections. Finally, I recorded and presented a short video outlining the research and proposed survey and contact details at the (PCSR) *Celebrating activism* conference during May 2021.

Deliberation over my position as a white researcher led to inevitable soul-searching: Could I add something of value to the profession or would I re-center whiteness and perpetuate inequity (Foste, 2020)? I experienced both fear and excitement on entering such a contentious field of enquiry.

### Data Collection and Ethics

Following approval from the Metanoia professional ethics committee and in line with ethical guidelines (BACP, 2018; UKCP, 2019 and Oates, 2021), I sent a 14-question survey in October 2021 to 154 people. I was aiming to explore therapists' understanding and thoughts about "whiteness" as a term, as a cultural identity and as a social construct. I kept the survey open for three weeks and collected 50 responses. These methods were chosen because I wanted to produce a small-scale study with the potential to draw out in-depth data

around whiteness and race and racism in psychotherapy. Whilst I was not intending to generalize to the profession as a whole (for example as may be expected within quantitative research), I did want to access qualitative data in the form of specific thoughts and feelings across a diverse range of qualified counsellors and therapists.

My mixed methods “QUAL-quan” survey (Morse, 2003) included some quantitative and demographic questions as this is considered ethically appropriate in qualitative survey methods (American Psychological Association, 2010). Rather than begin abruptly with open questions, it is considered appropriate etiquette to begin with some introductory quantitative questions to lead the participant in towards the open text boxes asking them to expand their responses. Mixed-methods research within Psychotherapy and Counselling is a relatively new but growing area (Bager-Charleson & McBeath, 2020). In keeping with pluralistic approaches (Willig, 2013), mixed method designs prioritize the research focus over the methods used. They are also pragmatic, and offer a framework which overcomes the paradigm wars by taking up a both/and approach between the polarities of positivism and constructionism (Frost & Bailey-Rodriguez, 2020).

Consent was implied and stated on the front cover of the survey as the participants’ willingness to complete the eight-minute survey. Anonymity and confidentiality were especially pertinent given the sensitive nature of the topic. I chose the survey method after considering interviews for the privacy and personal comfort element. Anonymity may also enhance honesty, increase disclosure and reduce social desirability bias (Cleave, 2021). Discussions about whiteness, race and racism can be triggering for both white and people of colour so with this in mind, I offered my personal email address for any participant who needed to question anything or had concerning issues stemming from the subject matter. Interestingly, three correspondents stated their interest and encouragement that this was being addressed.

The survey was short and not time-consuming, but with the option of spending time on the qualitative questions. The resulting returned surveys ( $N=50$ ) may be considered an acceptable response rate for a qualitative-leaning, mixed-methods survey (Morse, 2003) and may also be a response to the afore-mentioned ground swell of concern arising from the murder of George Floyd, the *Black Lives Matter* (BLM) and the mortality statistics at the height of the Covid-19 pandemic amongst, black, brown and people of colour.

## Reflexive Thematic Analysis

The choice of Reflexive Thematic Analysis (Braun & Clarke, 2006, 2013, 2017, 2018, 2020a and 2020b) fits broadly within

a critical realist ontology and a social constructionist, epistemological position. My purpose was to gain an understanding of participants’ experiences and the meanings they gave to these experiences with the acknowledgement that these experiences are produced within a broader social context (Braun & Clarke, 2013).

I chose Reflexive Thematic Analysis (RTA) to explore meanings from open questions. My choice of RTA centered around it being a well-established means of examining qualitative data and one that allowed flexibility and accessibility. Whilst RTA as a stand-alone method, has been compared less favorably to complete methodologies such as Interpretive Phenomenological Analysis (IPA), it is nevertheless gaining acceptance within the field as more evidence of its rigor and trustworthiness becomes available (Nowell, Norris, & White, 2017).

Using Braun and Clarke’s Six Stage Reflexive Thematic Analysis Model (Braun & Clarke, 2018), **initial familiarization with the data** involved reading the entire qualitative data set. A second reading was more measured and involved both notetaking and journal writing to capture my thoughts and first impressions.

The second phase **generating initial codes** resulted in the production of ninety-four initial codes or analytic entities. This particular approach was inductive and data-driven. As Nowell and Norris state, “Inductive analysis is a process of analyzing the data without trying to fit it into a pre-existing coding frame or the researcher’s analytic preconceptions” (Nowell & Norris, 2017, p. 8). Whilst I had read widely on critical whiteness studies (CWS) and explored the literature from sociological, historical, and political perspectives, I was aware that the concept of whiteness and CWS, within UK Psychotherapy as a whole, is not yet widely recognized and I therefore wanted the findings to be inducted primarily from the data and that the data be rich enough to support the findings (Ponterotto, 2006; Finlay 2021).

Codes were my interpretations of patterns of meaning formed from my familiarity with the data. These codes were generated separately for each discreet qualitative question, rather than across the entire data set as this felt more manageable. Because Braun and Clarke (2018) emphasize the method of RTA to be wholly qualitative, researcher subjectivity is considered a valuable resource rather than a hindrance, so my personal adaptation of the six-step model was not necessarily a weakness (McBeath, Bager-Charleson & Aberbanel, 2019). Consequently, this proved a flexible process, where my codes evolved organically and reflexively from my focusing on the words and sentences. This process facilitated a reduction to twenty-seven codes that could encompass the entire data set. These codes were transferred to *post it* notes and attached to flip-chart paper which I could revisit and play around with. At this point, I returned once again to the data; re-visiting each

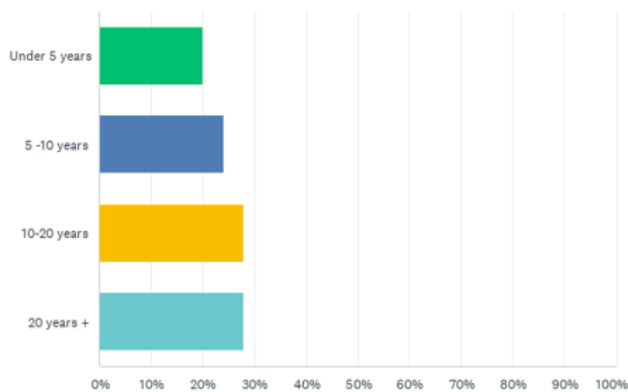
question, reviewing and revisiting the “fit” of comments to codes. This was worthwhile as some respondents’ comments were re-coded under headings I had previously missed.

The third phase involved my **generating themes**. This phase evolved from placing the *post it* notes in various configurations which resulted in the generation of themes and sub-themes. Four key themes connected by a central organizing concept, “Heart of the Work” resulted from this process (Braun & Clarke, 2018).

The fourth and fifth phases, **reviewing, defining and naming themes** involved checking the boundaries of each theme for sufficient differentiation, checking also, that they weren’t too diverse or wide-ranging and that each provided meaningful data (Byrne, 2021). This was a rigorous process of tracking back from themes through initial codes to the raw data (Lincoln & Guba, 1985).

## Results and Analysis

Psychotherapy and counselling experience of participants was broad, spanning less than five years to the majority having over ten years in the profession.



Q1: How long have you been practicing as a therapist in years?

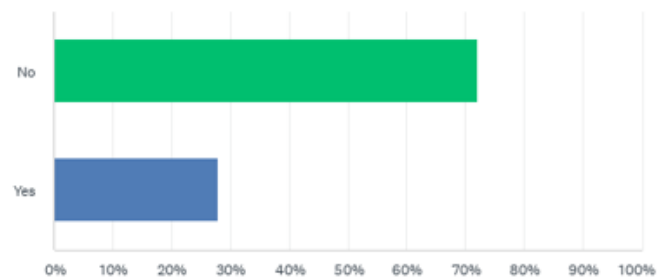
Over half of these therapists trained in integratively ( $N=26$ ) with the next largest group describing themselves as psychodynamic/psychoanalytic ( $N=13$ ). Of the remaining respondents ( $N=11$ ), 7 were person-centered, one was trained in attachment-based theory, one in transactional analysis (TA),

one was a body-orientated psychotherapist, and one took a transpersonal orientation.

Because this survey was specifically focusing on race, racial identity and culture, I felt it sensitive and ethically appropriate to invite each respondent to describe their race, culture and ethnic identity in their own words. My rationale for this was that it served as a mark of respect and would lead to a richer presentation of qualitative data.

Twenty-six of those responding described themselves as White British with four of these also stating they were Jewish. In addition, eight respondents described themselves as Mixed Heritage and three respondents as White Other (one South American, one Romanian and one Celtic, Irish/Scottish). Five respondents described themselves as British Indian, four as Black British and four as Jewish.

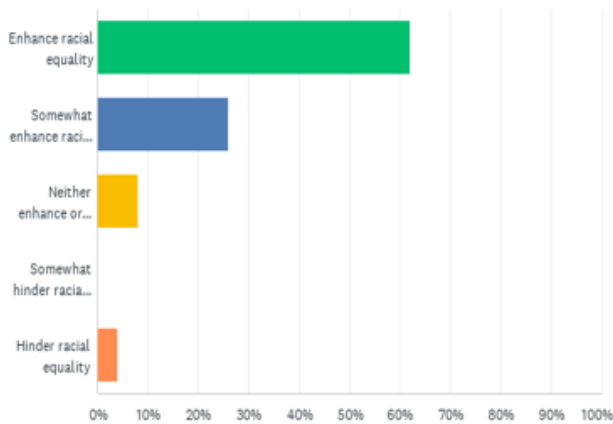
When asked if the topic of whiteness had been included in classroom discussions of race, racism and culture, 72% responded that this did not feature in their initial training with 28% stating that it was discussed.



Q6: Was whiteness, white culture or white racial identity discussed in your training?

When asked if respondents felt the inclusion of whiteness in anti-racism discussions would be beneficial, again, a majority 62% felt that this would enhance racial equality. Approximately a quarter, 26% believed it would somewhat, enhance racial equality. Given that the sample was purposive and many of the respondents were already engaged in anti-racist education, 4% declared that they felt it would actually hinder racial equality to talk about whiteness. It was noted that those describing themselves as white made up this group. This may point to the complexity involved within discussions about white racial identity and the ambivalence many white-identified people have in associating themselves with the concept of “white privilege” (Ryde, 2019).

## Reflexive Thematic Analysis (RTA)



*Q8: Do you think the inclusion of discussions about whiteness in anti-racist practice training would...*

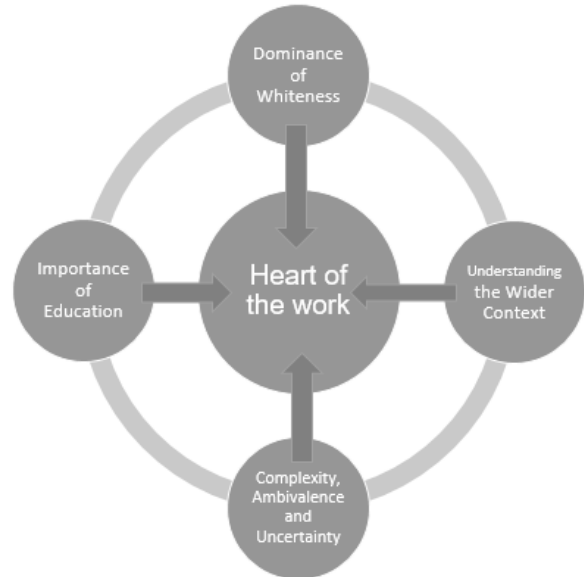
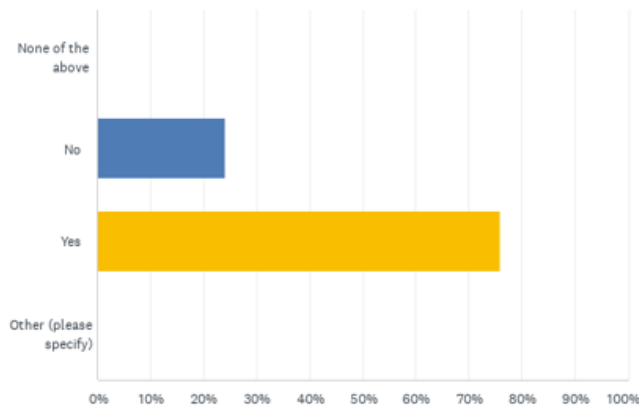


Figure 1: Key themes and Central Organizing Concept

When asked if whiteness and white racial identity should be discussed as part of anti-racism training and education, a resounding 76% stated that they would like to be involved. Because this was a small sample, and results cannot be statistically applicable to the white-dominated, psychotherapy profession as a whole, it clearly suggests that those involved in anti-racist post-qualifying education, are willing to explore the concept of whiteness. Whilst this is to be expected, it obviously does not necessarily equate to anti-racist education and practice and further research is indicated.



*Q10: If whiteness and white racial identity formed part of the discussions on anti-racist practice would you want to be involved?*

### Theme 1- Dominance of Whiteness

The ubiquitous nature of whiteness was apparent from the outset of analysis as the following examples reveal. Those identifying as White British were transparent, perhaps unsurprisingly, given their established interest in the field of anti-racism. Respondents demonstrated how they believed their racial/cultural identity was relevant to their work:

I am in the privileged bracket white, middle-class, middle-aged etc. I've unconsciously had the easiest way in (White British Therapist).

The people I see are predominately white middle class. I too am white middle class- we share a privileged position (White British Therapist).

As a white man and part of dominant racial culture in this country, my race equals power and privilege and has the potential to oppress, even without intent. I need to be aware of how I am seen and felt as well as how I see and feel myself (White British Therapist).

The sense of this being a part of a predominately white profession for white people resonates with the work of Ahsan (2020) who carried out research on white, middle-class psychologists. These comments from white therapists, at least on the surface, suggest a fairly well-developed sense of awareness of their white racial identity in line with both Helms (1995) model of white-awareness and, more latterly, Ryde

(2019). Ryde, a psychotherapist, suggested a five-stage educative process in which stage four, refers to an "owning up to white privilege" stage. One respondent explicitly picked this point up:

It would be very helpful to include white identity paradigms, together with other non-white identity paradigms in clinical training and [it] to be a recursive part of accredited assessment (Black British Therapist).

Whilst responses may differ greatly from the majority of white therapists who have not taken extra training in this area, when asked what words came to mind when reflecting on the terms, "whiteness" and "white culture", the theme of power and dominance reoccurs frequently as the table below demonstrates (see table 1):

Therapist's Culture and Ethnicity	Comments
Black British African	Status Quo, power, unspoken privileges and defensiveness
Dutch/German – Black roots	Majority, oppression
White British	Systemic racism, privilege, unconscious oppression, Othering.
Celtic, Irish/Scottish	Terms like, 'White invisibility' being the dominant force despite being the minority
White South American	The oppressors, the dominant culture, creators of racism.
Indian-British-born; Sikh, Punjabi heritage.	Power, dominant culture, the majority-ignorance, racism, discrimination
White British	Colonialism, capitalism, shame, disconnection from the earth and ourselves.
Black Caribbean	Not me.... Yet so me.
Dark skinned British migrant	Blankness, anonymity, ordinariness and – so to speak-racial normality, superiority and supremacy.
Mixed white and Kashmiri	Power
Black British Caribbean	Lucky- In the sense that as a majority, whiteness is probably not a term many tend to consider. Whereas me being black I feel like I have had to learn both of these {terms} as someone who was born and had grown up in this country. It is also something that has been brought to my attention by others through racism not just as a term for me to consider.

Table 1: What first comes to mind when you think of the terms "whiteness" and "white culture"?

The final comment in table 1 stayed with me as a white researcher. Unlike me, this respondent has not had the good fortune to ever consider the term whiteness in such a neutral way. In addition, words such as "power", "dominance", "privilege", "superiority" and "fragility" appeared frequently in the data.

Running alongside the white dominance and power theme is the sub-theme of the invisibility and normalcy of whiteness. The fact that the privilege white therapists hold is largely outside their/our consciousness is important. As Frankenburg (1993) states: "Whiteness, as a set of normative cultural practices, is visible most clearly to those it definitely excludes and to those to whom it does violence. Those who are securely housed within its borders usually do not examine it" (Frankenburg, 1993, pp. 228-229).

White people do not see how we benefit from systemic racism and this lack of awareness and normativity is supported in the literature (Minikin, 2021; Ryde, 2019; Case, 2012; Norris, 2019; Naughton & Tudor, 2006; Turner, 2018; Weir, 2021 and Dottolo and Stewart, 2013). Indeed, McIntosh's (1988, 2015) classic, *Knapsack of White Privilege*, in which the white sociologist describes the many ways she moves about the world with automatic acceptance such as: receiving friendly customer-service, being accepted in a new neighborhood, using a credit card without suspicion, and being able to expect protection from the police for example. Numerous studies have explored this hiddenness and the need to make whiteness visible as a central tenet of CWS (Case, 2012; Delgado & Stefancic, 2007; Jacobs, 2014). As a privileged white researcher, I can choose to research racism, because I don't live it or face it in my everyday life. I can put it to one side as and when I choose. This fact was particularly indigestible to me but also served as a motivator to carry on:

It's really important we begin to look at our blind spots. Whiteness is a blind spot. (Black British, African Heritage Therapist)

It's like the elephant in the room...without whiteness being named the people hiding privilege and benefitting can hide and all the focus goes on black and brown bodies. (Mixed Heritage light skinned Woman)

Because it has to be confronted. It has to be talked about - we cannot avoid talking about it otherwise we won't help shift change. White people have to be educated about their own attitudes and beliefs. And they have to hear the experiences of others and become more aware. (South Asian Mixed Heritage Therapist)

The emphasis in training is on racial minorities to say what is wrong rather than asking white people to look at their own biases, privilege and potential contribution to racism. (White British Jewish Therapist)

The profession has a lot of work to do in bringing this to the surface. It is not just about skin colour but how psychoanalytic thinking can be made more available and accessible to a wider range of people. (White British Therapist)

In summary, the ability of therapists to see and understand white privilege coupled with the need to understand the lived experience of black and brown and people of colour is key. There is a need to focus on whiteness when learning about race and racism because it is often left out of discussions.

## Theme 2 – Complexity, Ambivalence and Uncertainty

This theme strongly resonates with other literature (Paradies, 2016; Chen, 2017; Cottrell-Boyce, 2021; Foste, 2020; Milazzo, 2016). These writers critique whiteness studies and highlight the ambivalence and complexity of the topic, demonstrating how centering whiteness can actually strengthen the white status-quo and hence racism. Bonnett, (2000) further points out that anti-racism “cannot be adequately understood as the inverse of racism in that one person’s conception of anti-racism is another’s idea of racism” (Bonnett, 2000, cited in Paradies, 2016, p. 3). This paradoxical nature of whiteness chimes with notions of both/and as opposed to either/or which is familiar territory for psychotherapists (Firman & Gila, 1997). The theme of complexity highlights the uncertainty position, a middle ground that is well-placed within social constructionism and psychotherapy (Proctor, Cahill, Gore, Lees & Shloim, 2021). This theme of complexity and nuance, moves us “beyond ‘either-or logic’, to perceive and express these ‘fields of tension’ not as constraints, but as spaces of possibility” (Jonsen, Fendt & Point, 2018, p. 42). A British-Indian therapist picked up this point when saying: “I think and feel with the collective and individualism, I hold the in-between and othered.”

Complexity and, at times, confusion was expressed, most notably by the white British respondents:

I find this work very challenging: reading a lot but getting a lot of mixed messages on platforms like ‘twitter’- I’m scared to offend or re-traumatise someone, and I find it hard to hold my guilt/shame – and don’t know where to take that, as I feel the training would be better delivered by someone with lived experience - but I’m unsure how to fully engage without re-centering my whiteness in a space

where my needs are (rightly) not (as) important. (White British Therapist)

White therapists are prone to distress, anxiety, fear and guilt, which if not well facilitated, can lead to withdrawal (O’Brien, 2009). In a study exploring the dangers of essentialism and negative emotions, Kowal, Franklin and Paradies (2013) advocated “reflexive antiracism” as a way to work with complexity and paradox thus avoiding some of the pitfalls of diversity training and antiracism. This involves, amongst other factors, understanding both racism and antiracism within the broader field of racialization. We are all racialized and if white people can see themselves a part of this, the less likely they are to take on an othering position of the white status quo (Kowal et al., 2013). De Jong (2009) and Kowal et al. (2013) champion reflexivity as both a theoretical tool and a research method that is gaining increasing recognition as a means to critique cross-cultural work.

Having attended anti-racist training delivered by those with lived experience, I found this extremely useful but I also believe that therapists of colour should not have to take on this role of educating white therapists. Therapists of colour have mixed views and trepidation too:

I appreciate your focus on this essential area. I fear you might become the recipient of rage and pain for many of us so I suggest you get support too! Good luck with your work. I hope something important and enriching comes out of it...for you, for white people and for us BIPOC. (British Indian Therapist)

As Mckenzie-Mavinga (2016) points out, antiracism work triggers intense emotions and despite my apprehension, this is not necessarily a reason to avoid it (Krause, 2021).

Assumptions about being seen as white are layered with complexity:

I look white so this is immediately apparent to my clients. I see the world from my own frame of reference which includes my experiences as a white, Jewish woman. This will distill into my work in the counselling room in some way. (White Jewish Therapist)

As a researcher with Jewish ancestry myself, I resonate with the nuance and layeredness of personal history/racial trauma and how this may unconsciously permeate the work, “How do we understand what white means, what black or brown means in a country with a traumatic racial past and present” (Burch, 2021, p. 35).

Some white British respondents simply named confusion when it came to thinking about whiteness:



I am not entirely sure what it means... but I am aware that what I may consider “usual” for example as I have grown up in a particular way/culture is not necessarily “usual” or “normal” at all...so in that way it is important. (White British Therapist)

This lack of a sense of white culture is familiar within the literature (Wallis & Singh, 2014; Dottolo & Stewart, 2013) and furthers the invisibility/normalcy theme. The subtleties of colorism were also apparent:

I have to look at my proximity to whiteness as I am a light-skinned black woman. That means having a nuanced understanding of racism and having to look at where my privilege and power lies. (Mixed-Heritage, light skinned therapist)

At times there was doubt about the value of exploring whiteness and white culture:

I’m not sure there is a homogeneous white entity in terms of whiteness or white culture. There are many white cultures, as there are many Black cultures and Asian cultures and so on. I think it makes difference invisible in a way which is unhelpful. And I think it can be divisive. (White British, Jewish therapist)

This theme of complexity, ambivalence and uncertainty is of prime importance and certainly one to be grappled with as a researcher. The data suggests there are mixed messages about how best to address issues of race and racism combined with white guilt and shame about the past. Diversity and cultural awareness training has been criticized for essentializing minority identities and reifying white identities (Dalal, 2008). In addition, fear may induce political correctness. According to Kowal et al. (2013) we need to strike a balance between categorizing all people of colour as good and essentializing all white people as bad whilst understanding how white people benefit from privilege without being immobilized by guilt, anxiety and shame.

### Theme 3 - The Importance of Education

A theme emphasizing the importance of education coupled with a sub-theme of safety featured significantly within the qualitative data. Participants commented that a supportive educational space which allows therapists to participate fully and openly, is central to ethical practice (Aiyegbusi, 2021). As one respondent stated:

[We need] Knowledge, [and] safe spaces to explore our identities as therapists and [the] impact that has on our values and world view. Some white people have never

considered power dynamics and impact in therapy. (British Indian, UK- born therapist)

When asked if the inclusion of discussions about whiteness in anti-racist practice training would enhance or hinder racial equality; facilitation is key:

It is a hard question to answer. I think it could go both ways depending on how it is delivered by providers and the stage as to where practitioners are at. It could also depend on who is delivering the training and what’s involved in the training. Some may be resistant to it and feel they do not need such training and not engage with it, whereas others may embrace it. (Black British, Caribbean therapist)

Another respondent highlighted the importance of context:

Context, purpose, and the ability to hold nuanced debate to ensure common sense and logic prevails; overrides the topic. (British-born, Sri-Lankan therapist)

Again, attention to process and skilled facilitation was of paramount importance. There was also concern that these discussions would just recreate the white status quo:

Race and racial identity doesn’t only belong to BIPOC [Black, Indigenous, People of Colour] and it’s an othering practice to act as if it does. By turning a spotlight on whiteness (as opposed to just assuming it’s the ‘default setting’) it might help us to see how race influences our work too. The danger of it is that it would just end up centering whiteness/white people (which could hinder racial equality), so this would have to be managed skillfully by the trainers. (White British therapist)

In my experience people feel uncomfortable to be honest about their views, as worried about being recognised as being privileged or racist. Work done on my course at [...] was important, we had an assignment to do on working with difference but that didn’t go far enough and staff seemed out of their depth. (British Indian, Sikh, Punjabi therapist)

In keeping with the literature (McKenzie-Mavinga, 2009, 2020; Menakem, 2021) there was concern about the lack of safety in mixed groups:

White people MUST have these conversations but in their own time and without taking further space from Black, brown and shared heritage people. The inclusion of white voices makes everyone else feel unsafe, fearful and silenced. (British-born Indian therapist)

The experience of being silenced is not uncommon, (Raja-Helm & Kohli, 2019; Lago, 2011; Menakem, 2021). Change is really needed in the way we as teachers and trainers' approach anti-racism in psychotherapy and separate "affinity groups" (Diangelo, 2018) may be a favorable way to avoid re-traumatizing therapists of colour during discussions about race:

Better for white people to deliver these discussions amongst themselves in my opinion to preserve my own dignity and not be open to projection-or tokenism. (Black British therapist)

I think about the feeling I had in my training of not being able to say what I think or feel if it was not what the majority of the group (white) thought and felt. Whenever we talked about 'diversity' I felt very exposed and had to talk about my experiences of being brown but white people never had to talk about being white, as if white was the norm and I was deviating from it by being brown. I often felt exposed and ashamed. (Mixed Indian Asian and White Polish therapist)

There was certainly a sense of apprehension given that psychotherapy groups are almost always dominated by white people. In response to the question about being involved in discussions about whiteness and anti-racism a respondent added:

It really depends but, without further elaboration of the details of such a project, I would have to answer in the negative – for my professional and mental safety as a person of colour. (Dark-skinned migrant, British-European therapist)

As the literature suggests, therapists of colour experience unacceptable racial trauma (Raja-Helm & Kohli, 2019; Ellis, 2021) so their hesitation about entering into discussions alongside white therapists is understandable; as is a need for a sense of purpose:

I put yes but this depends on expectation, time commitments etc. I have had and continue to have many discussions so I am keen that any that are had have a goal/tangible outcome at the end of it. (Black British Caribbean therapist)

The focus of all anti-oppressive practice is looking at where the power lies, who benefits and how. It is not about focusing on those living 'marginalised' experiences who have to explain, justify, educate-that is exhausting in therapy trainings. Being met with a wall of defensiveness, or labelled 'angry', 'problematic' attention seeking does not help practitioners to understand the other. (Mixed Heritage therapist)

White British respondents seemed less focused and less aware of the potential for trauma when discussing whiteness within anti-racism:

The more dialogue the better to bring things into the open including confronting our own prejudices and difficulties. (White British therapist)

There was no mention of separate groups amongst the white British respondents and some showed enthusiasm towards discussing whiteness:

I would enjoy exploring more about how whiteness shapes my experiences and perceptions, and would be really interested to hear more from classmates of colour about their experiences of whiteness too. (White British therapist)

I don't feel my training fully addressed it. Now, as a new Counselling and Psychotherapy tutor/lecturer, I am accessing extra training in anti-racism and anti-discrimination, as I believe it is vital/imperative for me to do more of this work before training future therapists. (White British therapist)

There was, however, a sense that some white respondents were aware of their potential to cause unintentional harm coupled with the desire to want to change:

It sounds as though this would be a complete discussion on the subject, rather than focusing on 'poor black people', for example and it would allow me to feel less powerless to help if I can locate the issue in myself and my white culture. (White British/European therapist)

And a willingness to accept that white therapists have work to do:

I can experience guilt and powerlessness when hearing POC (People of Colour) speak of their experience, and this isn't helpful. It's my problem, not theirs. (White British therapist)

A study by white feminist and anti-racist scholar, Elaine Swan (2017) espouses the need for "generous encounters" and argues for deep listening from white therapists rather than allowing ourselves to be silenced by guilt. This point was picked up by one respondent:

Open-minded, nuanced discussion and debate, with awareness of the acting out of white guilt, in the form of codependent virtue-signaling, must be at the forefront to ensure positive change. (British Sri-Lankan therapist)

White therapists and trainers need to exercise, “reflexive vigilance” (Foste, 2020) and the ability to scrutinize their motives if they are to avoid superficial and ego-centric “white saviorism” (Diangelo, 2021). Yancy (2015) professor of philosophy and anti-racist scholar, espouses a pedagogy of humility for white students. This includes acknowledging the limitations of knowing and a willingness to stay with uncertainty, (Yancy, 2015); qualities essential to self-awareness and central to psychotherapy and counselling.

Overall, there seemed to be an appreciation of the value of dialogue:

My passion is race and racism. These conversations are all part of the mix. I feel compelled to speak up and share my experiences and learn from others so that we as humans can find a way to unite and be as one. (Black Caribbean therapist)

And a need to look at our theoretical foundations:

Most therapists are white so this might mean that the theoretical foundations of our training may also have an implicit ‘Othering’ function of ways of thinking that don’t belong to white culture. (White Other therapist)

A call for diversification of psychotherapy’s evidence-base is increasingly espoused and there is a growing body of evidence supporting the decolonization of current psychology and psychotherapy curricula, (Heleta, 2016; Frosh, 2013). This opens education up to alternative paradigms, knowledge systems and philosophies.

In summary, there is a need for a supportive educational space in which all therapists can explore these issues in relative safety. The need for highly skilled facilitators cannot be overstated. There needs to be a balance between how much of this work can be accomplished in mixed groups and how much in separate, affinity groups (Diangelo, 2021). Dialogue is a priority alongside the need for reflexivity and a diversification of the curriculum and evidence-base (Ellis, 2021; Foste, 2020; Charura & Lago, 2021).

#### **Theme 4 – Understanding the Wider Context**

The final theme focused on the need to understand the bigger picture and permeated the data acknowledging that psychotherapy occurs in context - namely of structural, systemic and institutional racism, current and historical (Macpherson, 1999, 2021). It is well documented that white people tend to have a limited understanding of racism that is restricted to an individual, “one bad apple” approach. Failing to see the structural and societal levels of racism within psychotherapy may suggest that all that is needed is simplistic

behavioral or attitudinal change for this to be solved. This superficial understanding and lack of politicization, in turn, strengthens the white status-quo (Cabrera, 2014; Patel, 2021; Winter, 2021; Perry & Shotwell, 2009). However, the systemic field constantly enters the therapy room as the sociocultural and political world subjectively shapes both clients and therapists’ everyday lives (Burch, 2021). Therapy is deeply embedded in the dynamics of power and the role of systemic and structural inequality/inequity needs to be appreciated as part of anti-racism (Smith, Proctor & Akondo, 2021; Winter, 2021; Morgan, 2008). One respondent expressed this explicitly:

I think it is very important to acknowledge institutional racism within psychotherapy training. (Hybrid European therapist)

This is currently mirrored within universities initiatives to decolonize curricula (Begum & Saini, 2019; Middlesex University Student’s Union, 2021; Smith et al, 2021) towards diversifying their dominant white leadership, and re-assessing their current recruitment and retention policies. This too, is a significant part of the agenda for psychotherapy to be fit for purpose:

We have to understand that psychotherapy is a microcosm of wider society and that doesn’t make it ok. We are a powerful, white-dominated profession, we need a full appreciation of how the dominant exploit the marginalized at a global level, we’re not neutral. (White British therapist)

Some respondents understood whiteness as:

What is expected or defined as the norm. I also think of capitalism, individualism and patriarchy. (Indian British therapist).

Some of the terminology used when thinking of the terms whiteness and white culture reflected the politicized, historic and systemic dimension; “post-colonial oppression” referrals to “slavery”, “brutality”, “empire”, and “capitalism” and “social political and economic power” featured noticeably. Also:

People in power of institutions. Whether it’s the media, education, law, medical and therapeutic – people in power. But also unfortunately in football/hostility and racist people and violence and fear. (South Asian Mixed Heritage therapist)

If we don’t understand the history and power dynamics between white culture and those that are oppressed due to the colour of their skin we cannot claim to be congruent and cannot meet our clients fully. (White British therapist)

Certainly, having an appreciation of one's history is a major tenet of psychotherapy. The need to move beyond the notion of individualism within psychotherapy is well-supported (Cushman, 1995), as is the history of colonization as part of therapists understanding of their cultural heritage (Smith, Procter & Akondo, 2021). Managers and leaders featured too:

I would hope that training providers would involve themselves but we know already that this discussion isn't often had during training so it's about the taking more of a pro-active stance. (Black British Caribbean therapist)

Complex, multi-layered, thinking only goes so far.... Change is needed for a more equitable society.... Things to be given up by white people, power.... Financial equity.... Financial reparation. (White British therapist)

A respondent felt strongly that unless discussions about whiteness included these aspects of the wider context, they'd have little impact on racial equality:

It really depends of how these discussions are framed, e.g., whether or not and how other factors were part of the discussion, foremost being economic power- with work, educational, housing and health options" ...and.... "Also, I should say I have learnt a healthy suspicion as to white systems and their depth of commitment to anti-racist and intercultural work. (Dark-skinned, migrant, British-European Therapist)

Rollock (2013) echoes the need to see beyond the dualistic core of whiteness/blackness of race/ racism, to a broader understanding of these terms as concepts of political discourse and potential activism.

We live, train and work in a racialised society and world, and the racial differences and inequalities that exist affect our patients as well as our relationships with them. (Mixed Asian and White Indian-Polish therapist)

The need to understand the role of politics, capitalism and systemic and institutionalized racism is well-recognized, (Kendi, 2019; Akala, 2018; Perry & Shotwell, 2009) and it is argued that having an understanding of the broader picture is more effective than merely empathizing about racism (Feagin & McKinney 2003).

I feel it is not just white therapists who need to learn about anti-fascist practice, often many racially minoritised people have not had the opportunity to learn about the oppressive systems that have drastically shaped their life, in-turn as something inherently wrong when actually it's the system. (White British therapist)

Also supported within the literature is the need to understand how societal oppression can fuel internalized oppression, (Alleyne, 2004; Cousins, 2019; Kinouni, 2021).

In summary, there is a need to have a broad understanding of history focusing on power, patriarchy, colonization, and oppression. Understanding psychotherapy as a microcosm of wider society is important as is an understanding of institutional racism (MacPherson, 1999).

## Discussion – Heart of the Work

As Braun and Clarke (2018) suggest, the creation of themes allows for the formation of a central organizing concept. For this survey, whiteness was at the Heart of the Work in the context of anti-racism. It became clear that the need to include the construct of whiteness within the field of race, racism and culture is central to the work of psychotherapy.

Therapists expressed views that confirmed the inextricable link between cultural and racial identity, therapeutic work, and whiteness. This also supports the largely discredited view, that psychotherapy can be a neutral, value-free, objective science, (Hamilton, 2013). Indeed, the bringing together of ourselves and our clients through dialogue, is an inherently moral endeavor; imbued in the dynamics of ethics and power. The heart of praxis is social interaction and, according to Tjeltviet (1999), therapists do the work of ethicists. Cushman's seminal study of "psychotherapy as culture" clearly supports this and chimes with Merleau-Ponty's classic phrase that culture is "sedimented in the body" (Merleau-Ponty, cited in Cushman, 1995, p. 18). There is no getting away from this, it is who we are:

I bring my whole-self into the room. I am a black woman. Sometimes my clients will choose me explicitly wanting a black counsellor. Non-black clients will experience my diversity as I will theirs. (Black British therapist)

It is the first thing someone sees when working face to face, and there are varying responses embodied and verbally and physically expressed- the response is negatively to positively. (Black British therapist)

Race and racism are part of the culture we live in. We are deeply psychically related to these aspects of being.... The understanding of race awareness is an essential part of being alive at this time and therefore without developing an understanding we cannot be effective practitioners in psychological therapies. (White British therapist)

It is from the heart of our work, as practitioners, as people, and as ethicists that we must engage in race conversations and learning (Ellis, 2019 and 2021). It is also evident that to continue to leave the construct of whiteness, with its power, privilege and history, out of education, is no longer possible. It will only be by including it, through openness and dialogue that we can begin to practice ethical, anti-racist psychotherapy.

My aim with this study was to provide a platform for the survey respondents to express their views in an area that is high on the agenda for the psychotherapy and counselling profession. Several rich veins of exploration have been revealed and I hope this study will encourage further discussion in the field.

This was a small study which makes no claims to transferability within the wider psychotherapy and counselling profession and the knowledge generated is partial and situated (Haraway, 1988). I believe this to be acceptable within qualitative research in that it achieves in-depth explorations from a diverse range of therapists.

This was a white-dominated study from the stance of a white-dominated profession. The sample holds considerable bias towards those therapists who are already engaged in anti-racist education. It is likely that therapists who consider themselves opposed to this focus would have been unwilling to take the survey so my results are probably not representative of the field as a whole. In addition, extending the scope of the study to the broader field of intersectionality (e.g. to include sexuality, gender, ableism and class) may have produced richer data and this could be considered for future research. It is important however as a white researcher, to exercise reflexive vigilance and not allow intersectional thinking to deflect from the privileges inherent in whiteness (Eastwood, 2021).

I have focused on a highly contentious, and paradoxical area of exploration; whilst racism has no biological reality, its effects are very real. Whiteness dominates yet is largely invisible to white people. Becoming an anti-racist therapist requires owning one's racism. I know it is not up to people of colour to educate me, however the most valuable learning has been when people of colour have given me feedback or shared their lived experiences with me. We need to accept and work within this paradoxical field of tension if we are to maintain dialogue together. As a white researcher I have learned a great deal in the last eighteen months and at times, this has been deeply uncomfortable as I have faced the part of myself that is unwilling to accept my own white privilege and unwitting perpetration of inequality. However, my ability to stay with this discomfort has improved and I believe I have a greater depth of awareness and understanding.

This is a rich and emotionally charged aspect of psychotherapy and despite my commitment to reflexivity, I acknowledge my

own biases and subjective responses. That my analysis was influenced by the existing literature needs to be noted. However, I am also reassured by the high degree of correspondence between the literature and my respondents' statements.

## Concluding Comments

This study has attempted to illuminate the views of a diverse group of psychotherapists and counsellors concerning whiteness and anti-racism. The core concept, Heart of the Work, is encompassed within the 4 themes of The Dominance of Whiteness, Complexity, Ambivalence and Uncertainty, The Importance of Education, and Understanding the Wider Context.

The need for skilled and safe facilitation of anti-racist education is highlighted given the evidence of previous and ongoing traumatization experienced by black, brown and therapists of colour. This may lend itself to the facilitation of separate, "affinity groups" where possible (Diangelo, 2021). Psychotherapy education needs diversification and to move beyond a euro-centric, white-dominated, evidence base (Charura & Lago, 2021; Newnes, 2021).

Further research is clearly needed into the ways that this could be taken forward. Each of the themes may warrant in-depth exploration as does the sub-theme of the invisibility/normalcy of whiteness (especially to white people). White therapists' ability to stay reflexively present when privy to potentially shaming dialogue will illuminate ways to ensure a safer learning environment. Only then will increasingly diverse psychotherapists and counsellors be able to discuss and learn collaboratively.

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## About the Author

**Frances Basset** is an integrative and psychosynthesis psychotherapist and supervisor working in private practice in Brighton and a senior accredited member of the BACP. She is currently researching the role of whiteness in antiracism as a doctoral candidate at the Metanoia Institute in the UK and facilitates groups on the topic of examining whiteness and antiracism. As a previous Senior Lecturer in nursing and health care at the University of Brighton, Frances taught courses on anti-oppressive practice across a range of health care professions.