

The Experiences of Black and Minority Ethnic Trainee Counselling Psychologists:  
An Interpretative Phenomenological Analysis

## **Abstract**

### **Background**

The aim of the study was to capture the training experiences of Black and Minority Ethnic (BME) trainee counselling psychologists in the United Kingdom (UK). To date there is a lack of research and literature looking at the experiences of BME trainee counselling psychologist in the UK.

### **Methodology**

A qualitative approach was adopted; semi-structured interviews were conducted with five self-identified BME trainees. The accounts were analysed using Interpretative Phenomenological Analysis (IPA).

### **Findings**

The analytic procedure highlighted five main superordinate themes which were constructed from participants' accounts. All five participants contributed to every superordinate theme generated, which were: *The need to belong*; *Lack of diversity*; *The impact of support on the self*; *Versatile BME trainee identity*; and *Managing a range of challenges*. Each superordinate theme featured two related subordinate themes.

### **Conclusion**

Insights from the analysis indicate the experiences of UK BME trainee counselling psychologists consist of experiences including a sense of a lack of belonging on the training programme which in turn made the BME trainees feel lonely and isolated. The challenges experienced by the BME trainees included not feeling understood and supported. The lack of diversity was reflected in the Eurocentric bias in the training, lack of BME representation and the hardship of not being white. However, the participants reflected on their positive experience of connecting with BME clients by using their BME identity and experience.

### **Keywords**

Black and Minority Ethnic (BME), trainee counselling psychologist, Interpretative Phenomenological Analysis (IPA), United Kingdom (UK)

## **Introduction**

According to the 2011 Census, the BME population is 14.1% in England and Wales. Despite this figure, the BME community is significantly underrepresented in the psychiatry and psychology professions, within the UK (Nazroo, Bhui and Rhodes, 2020; HCPC, 2021). Rahim (2017) states that people from the margins of society are more likely to be service users and less likely to be psychologists, and subsequently, as Cutts (2013) also argues, it is important that there is “an emphasis on equity and equality for individuals in society” (p.9), within the helping professions.

Racial demographics are not routinely recorded by the British Psychological Society (BPS). Anecdotally, at the BPS conference in July 2020, chief executive, Sarb Bajwa, addressed attendees on the topic of race and racism, acknowledging that the Society is a dominantly white female institution and, therefore, might be subsequently deemed *institutionally* racist. The same year, the monthly society publication, *The Psychologist*, contributed to the global stance against racism in its September issue, blacking out its cover to make a stand against racism in the psychology world. Whilst Clearing House (2019) data indicates there are now, at least, more ethnic minority clinical psychology trainees, according to Wood and Patel, “ongoing initiatives to widen “diversity” access into the profession are not good enough.” (2017, p.284). According to Wood and Patel (2017), often increasing BME trainee intakes in the clinical psychology profession in the UK is used to disguise “criticisms of the profession as being predominantly white, Eurocentric, and discriminatory” (p.284). To date, literature has been published on ethnic minority qualified and trainee clinical psychologists’ experiences in relation to their representation in the profession (Odusanya et al., 2017; Smith, 2017); but very little is known about the representation of BME trainees in the counselling psychology profession.

## **Rationale**

Within the BPS, the Division of Counselling Psychology (DCoP) states a commitment to “Challenging Eurocentric/Western values as an unquestioned given” (DCoP, 2021, p.2) and “Fairness, equality and social justice” (DCoP, 2021). If the DCoP is to meet its aforementioned commitment towards inclusivity, diversity and difference, more needs to be done to address issues of inequality within the profession, as a whole. Subsequently, the purpose of this research was to address the existing “void” (Ade-Serrano and Nkansa-Dwamena, 2016) and contribute to knowledge pertaining to issues of race, within the field of counselling psychology

training and education. More specifically, the aim of the current research was to illuminate the lived experiences of UK-based, counselling psychologist trainees. In so doing, the results of this study might inform policy and practice for UK counselling psychology programmes and educators. The research question was “What are the experiences of BME trainee counselling psychologists in the UK?”.

## **A note on terminology**

### ***Why BME?***

Historically in the UK context many terminologies are used to refer to “ethnic minorities” and often the term ‘BME’ is used by clinical practitioners and academics (Wood and Patel, 2017). I am mindful of other terminologies Person of Colour, Black, Indigenous, and People of Colour and Black, Asian and minority ethnic (BAME). The limitations of categorising people according to skin colour or country of origin has to be acknowledged (Bhopal, Brown and Jackson, 2016). The category of BME is a useful device to identify an appropriate target group, but at the same time it also contributes to the perpetuation of social divisions (Bhopal et al., 2016). It was recommended by the CRED report that the terms BME and BAME should be dropped but no alternative recommended (CRED, 2021). Therefore, we need a terminology in research that can encompass all and yet still attend to nuances with sensitivity. For this research, I have chosen the term BME as it is widely understood: to refer to black people and minority individuals. The term BME is widely applied in publicly available data and used in the UK to describe all non-white ethnic groups (Bhopal and Pitkin, 2020). The participants in this research self-identified as BME.

### **Researcher reflexivity**

According to Elliot, Fischer and Rennie (1999) it is important for researchers to be transparent in sharing their reflexive positioning to ensure the reader has awareness of alternative perspectives and possible biases that may be present within the research. Being reflexive is central to the epistemological approach adopted in this research and IPA, as well as consistent with a counselling psychology paradigm and ethical research values.

I concur with Dwyer and Buckle (2009), that as a self-identified BME trainee counselling psychologist, I had the capacity “to occupy the position of both insider and outsider rather than insider or outsider” (p.54). To date, I have studied in the psychology field in higher education in the UK for 8 years and I have always been in the minority in terms of ethnicity. Throughout

the 8 years, I have had very few BME role models in the form of lecturers and supervisors, and never had a Kurdish role model in the psychology field. It has been both personally and professionally important for me to carry out this research, in the hope that it may bring about institutional change at many different levels. My experience on the training and in higher education in the UK has been positive and I have not faced any of the challenges described in the findings. As this research alone has shown, I cannot, however, generalise my own experience to all BME trainees and students in higher education.

## **Method**

### ***Epistemological position***

The present study aimed to explore the lived experiences of BME counselling psychology trainees. As such, a qualitative approach was adopted, in particular, IPA, which lends itself to the rich and in-depth exploration of participants' experiences and meaning-making (Smith et al. 2009). IPA makes the ontological assumption that there is an "out-there" reality to be known, but that this reality cannot be known directly (Willig, 2013). Subsequently, the current study assumes a critical-realist ontology, where the knowledge gained has a phenomenological epistemology, interpreting the lived experiences of participants and the meanings they attribute to this (the 'double hermeneutic', Willig, 2013).

### ***Design***

Semi-structured interviews were conducted with five self-identified UK BME trainees. Due to the in-depth interview and analytic process, Smith et al. (2009) recommend between 4 to 10 participants, for students undertaking professional doctorates and, consequently, 5 participants were selected. In addition, the call for participants did not yield a high response.

Each interview was also analysed individually, rather than conducting in-depth analysis on one transcript and using the emergent themes. The accounts were analysed using IPA, which attempts to illuminate the lived experience of a phenomenon for small samples of individuals. Researcher reflexivity is essential and was considered throughout this study. Levitt et al. (2018) note that trustworthiness in qualitative research is a concept that researchers need to attend to. Throughout the research process a reflective journal was kept, I made use of my personal therapy, engaged in regular research supervision as including attending IPA support groups at relevant universities.

### *The process of recruiting participants*

The five participants were BME trainee counselling psychologists who self-identified as UK citizens (international students were excluded because they are not classified as UK citizens). This meant BME trainees who were training in the UK on a Doctorate in counselling psychology course accredited by the BPS, or trainees training on the independent route, also known as Qualification in Counselling Psychology (QCoP). Participants were initially recruited via social media; research advertisements were posted on relevant Facebook group pages, DCoP Black and Asian Group/newsletter/twitter page, and email invitations were sent to fourteen relevant UK universities as well as the BPS to access independent route trainees. The call for participants advert was also sent to the monthly DCoP newsletter. One relevant university was excluded from this study due to reasons of limits to confidentiality. The interviews took place between March 2019 and August 2019. After the interviews, the participants were e-mailed a list of contacts where they could access support in case any distress was caused. The audio files of the interviews were uploaded onto an encrypted personal laptop and then transcribed.

**Table 1: Participant Characteristic Table**

<b>Pseudonym</b>	<b>Self-Identified Ethnicity</b>	<b>Year on Training Route</b>	<b>Training Route</b>	<b>Self-Identified Gender</b>	<b>Self-Identified Age</b>
Geoff	Black African British	1.5	University	Male	51
Mamaga	Black African	2	University	Female	46
Andrew	Black African	Undisclosed	(QCoP)	Male	46
Ken	Singaporean Chinese	2	University	Male	29
Jade	Indo- Caribbean	1	University	Female	25

The information in Table 1 is intended to help the reader to situate the participants. The participants were based in four different institutions; two of the participants were from the same university.

## ***Ethics***

This research followed the ethical research requirements of the BPS (2018a) and the Health and Care Professions Council (HCPC, 2019b). Ethical approval was gained from the relevant university prior to commencing data collection. All data were kept confidential and secured in encrypted files. Participants were invited to choose their own pseudonyms and description to ensure confidentiality.

## **Findings**

An overview of the themes identified via the IPA has been outlined in the below table. The themes are not presented in any particular order related to hierarchy of importance. For the sake of this research paper and due to the limitations of the word count, only the first superordinate and two subordinate themes are presented. Exemplary quotes from participants in order to demonstrate the emerging interpretation has been presented.

**Table 2: Superordinate and subordinate themes.**

<b>Superordinate Themes</b>	<b>Subordinate Themes</b>
The need to belong	<ol style="list-style-type: none"><li>1. Feeling lonely and isolated</li><li>2. A lack of belonging</li></ol>
Lack of diversity	<ol style="list-style-type: none"><li>1. Eurocentric bias in the programme</li><li>2. BME representation</li></ol>
The impact of support on the self	<ol style="list-style-type: none"><li>1. The importance of understanding</li><li>2. The importance of support</li></ol>
Versatile BME trainee identity	<ol style="list-style-type: none"><li>1. Negotiating diverse identities</li><li>2. Using BME personal experience to connect with clients</li></ol>
Managing a range of challenges	<ol style="list-style-type: none"><li>1. Personal struggles</li><li>2. The hardship of not being white</li></ol>

### **Superordinate theme 1: The need to belong**

#### **Overview**

The first superordinate theme centres around the need to belong, which was described through experiences of feeling lonely and isolated. Many of the participants narrated, being BME was associated with a visible difference, thus feeling disconnected to their white peers.

## **Feeling lonely and isolated**

Jade spoke about feeling particularly lonely on the training programme in relation to cultural aspects, whereas later in the interview she emphasised a lack of belonging.

*“’Cos I do think sometimes like on the course I’ve often felt quite lonely, when I’ve been going through something and it’s quite a cultural thing.” (Jade)*

In her interview, Jade shared that her family do not understand the nature and the demands of the training programme. Therefore, their lack of understanding means there is not much support provided. It seems for Jade, she is involved in something her family are not a part of so it is a kind of double loneliness she has; where her peers do not understand her cultural position and her family do not understand her profession.

*“I’ve gone into this field, of Counselling Psychology, because it really meets my own values and what I’m interested in and how I view the world etcetera, but it’s something that’s always apart from my family. Because they don’t really get what it is I’m doing.” (Jade)*

In her interview, Mamaga often referred to “*lip service*” in a frustrating tone of voice. For her, the lack of BME representation was associated with a lack of belonging she often referred to as glaring and visible, yet she feels nothing is being done about it at the grass roots.

*“Well, you know they’re trying to bring out these issues like there is now they talk about diversity on the course but it is just like lip service, they don’t understand it, there are no ethnic minorities on the teaching programme, the course doesn’t seem to have a lot of ethnic minorities on them. So there is something missing yes they, I guess the whole BPS and the Counselling Psychology Division, are being politically correct and saying ‘oh we are trying, we are diverse and’ but there is a gap somewhere.” (Mamaga)*

Andrew had tried to reach out to the BPS but had been left disappointed with their response and had “*just, left it*”. In his interview he often expressed that he would preferred to have been training in a university rather than on the independent route, but he had found it challenging to get an interview and pass the interview. In his interview, Andrew was very much relating to me like an “*insider*” and his peer, which conveyed his loneliness to me, as does the below quote.

*“But I would like to say in general it was still very lonely. I I would have preferred like you you go to a training, a university or college you have colleagues around you, you have students*



*around you you are peers. And I didn't have that, I didn't have that and em, I try to, I thought that there was some kind of em, group online, and where we could exchange messages and document our expertise and anything, but the BPS didn't come back to me or they came back to me but it was not very clear the group they were offering, it was something like give us your email address and I will give your email address to them and see what happens, so I was a little bit disappointed with that, and so, I, just, left it..." (Andrew)*

Geoff appreciates that while undertaking demanding training it is greatly important to have peers and colleagues, as Andrew similarly experienced. Thus, they highlight the feeling of being lonely when lacking a connection with peers.

*"You know it's very solid we do, doing the independent route there's none of that you don't really, you feel very alone in it." (Geoff)*

For Jade, self-identifying as a BME trainee counselling psychologist has meant feeling lonely and throughout her interview she would state "you know", drawing on the fact that I am a fellow BME trainee counselling psychologist and our assumed shared understanding. Thus again relating to me as an "insider".

*"You know. It's felt quite lonely. And I think that brings about all kinds of different feelings and experiences." (Jade)*

In the extract below, Jade links feeling isolated with a lack of understanding. In her interview, her tone of voice sounded frustrated at having to experience these feelings alongside managing a demanding training.

*"Because I think there's just that lack of understanding. And I think it's just because it can make us as BME trainees feel quite isolated. Em, and, there's already enough to be dealing with on the course, where you're being pulled in different directions and your emotions are just everywhere, to then feel like you're being isolated because of your identity on the course is, just, feels, yeah I dunno it just, I think there could be more done, about it" (Jade)*

For Jade, the source of loneliness appeared to be related to being BME whereas for Ken it was related to this sense of being on his own and managing to juggle the many aspects of the doctorate on his own.

*“I don’t know is it because it is me or is it because being on the course is so busy that it is natural to just think about finishing the course first, but at the same time where’s the balance I think the balance is something that I or we we have to manage on our own.” (Ken)*

Jade narrated how the shared status of being BME helps her to overcome the feeling of isolation and loneliness.

*“I feel grateful that I had a person of colour to turn to and I shouldn’t have to feel like I’m grateful that there was someone like that there I should be grateful for whoever on the team could provide me with support.” (Jade)*

### **A lack of belonging**

For Jade, as she passionately explained in her interview, she feels as though as a BME trainee counselling psychologist she is “overlooked”. She emphasised this experience of being overlooked by repeating the word “overlooked” three times in the below extract.

*“I think we can get a little bit overlooked, as people who are BMEs. And I think for me that would have been good and I think then it feels like it’s been overlooked. I think I think one thing I felt is like being a person of colour, coming from the background coming from a particular cultural background...then compared to the like my white colleagues, they’re not having that kind of same experience they’ve been on a different, life trajectory... I don’t feel like it’s appreciated in the same way I don’t feel like I feel like that’s quite overlooked...” (Jade)*

A lack of belonging was emphasised for Mamaga, this was evident in her interview.

*“You know there’s this sense of not belonging. And so, most of the time I I I, I’m on my own” (Mamaga)*

Jade explains the powerful impact of being around other BME people to make her feel as though she belongs and “feel OK”.

*“That’s genuinely how I feel and I feel what you were saying about belonging I feel like, you need that as a BME you need people. You need to be around some other people that make you feel OK and make you feel like you do belong...” (Jade)*

For Mamaga, feeling ‘like an alien’ on the professional doctorate training was powerful, especially in terms of both current and historical nuances of this term. She emphatically repeated feeling like an alien on the training programme and in her interview her tone of voice was passionate yet poignant.

*“The other thing I, as a, I mean it’s like, I don’t know how to say it but I’m gonna say it I’m gonna find a way of saying it. I just felt like an alien on the course” (Mamaga)*

It was again repeated:

*“I don’t know how else to describe it Dashnye but I have felt like an alien on this course.” (Mamaga)*

In a poignant tone of voice, Mamaga reflected on this and I felt she was asking herself this question rather than me.

*“Why must I feel like an alien...” (Mamaga)*

Mamaga and Ken emphasised the feeling of not belonging.

*“I just I just I just feel like, um. I don’t, there’s this sense of not belonging on the course...” (Mamaga)*

*“I’m treated like a BME as well.” (Ken)*

Mamaga wanted to have a sense of belonging but the lack of belonging for her was linked to her feeling *“out of place”*.

*“...I feel out of place. I don’t know how else to get it. I don’t kind of belong, sort of.” (Mamaga)*

For Jade, a lack of belonging had more of an impact on equal opportunities forms. Jade felt she was being boxed into a category on an equal opportunity form where she did not feel she belonged.

*“And I think it it’s, it’s hard to put into words because like, you get given these forms and then you tick ‘other’ and then you just are told to specify it. And it’s, you have no other choice... But then I guess it’s hard because then you just have this experience of being made to be an ‘other’ when you’re just not. It’s just your category just isn’t on the form.” (Jade)*

## **Discussion**

In the findings, there was a pervasive sense of the experience of difference, characterised by a lack of belonging on the training programme. These experiences were similar to those reported in other research by BME trainees (Shah et al., 2012) and qualified BME psychologists (Odusanya et al., 2017).

This first superordinate theme describes the need to belong for all of the participants, which was described through experiences of feeling lonely and isolated. Three of the participants described the need to feel like they belonged on the course. As will be discussed, these findings align with the existing research and literature in this field.

The experience of feeling lonely and isolated was shared amongst all of the participants. In particular, this was evident in the accounts of Geoff and Andrew, who had both experienced QCoP. They disclosed their status of BME trainee in addition to the particular intersections of gender and ethnicity implied a sense of being minority in multiple ways. This is echoed by Shah et al. (2012), where one of her participants said he felt like a “*double minority*”, meaning being male and black. Since the experiences of the independent training route to my knowledge have not been explored in any research published to date, I consider this to be a novel finding. This finding can also be considered in relation to the research question, “What are the experiences of BME trainee counselling psychologists in the UK?”. However, it is important to note that it is not clear whether these difficulties on the independent route were particular to the BME trainee experience, gender imbalance or a more general experience of training on this route. Feeling lonely and isolated arose to varying degrees for participants and corresponds with findings from previous research (Shah et al., 2012) where trainees felt disconnected and isolated within the profession. In particular, Mamaga shared her experience of feeling lonely and isolated on the training programme where she felt a lack of belonging and which she suggested was due to her BME identity. These experiences resonate with findings from Odusanya et al.’s (2017) study where feeling isolated in the profession was also a prominent finding.

Jade narrated how being in an ethnically diverse cohort may enable trainees to feel less lonely and isolated. These findings highlight the importance of the counselling psychology profession making serious attempts to attract and integrate BME trainees. These are important issues to consider if the counselling psychology profession wishes to diversify and attract more applicants from BME backgrounds.

For Mamaga, a lack of a sense of belonging made her feel like an “*alien*”, a term described in the literature as emphasising difference, othering and feeling foreign (Fernando, 2017; Littlewood and Lipsedge, 1997). This was emphasised by being visibly different, for her. However, in contrast, for Jade having other BME trainees in her cohort made her feel like she belonged. This also resonates with Shah et al.’s (2012) research which explores the experiences

of BME trainee clinical psychologists. In her findings she reports positive experiences outlined by BME trainees such as feelings of belonging with their cohort and a general overall positive experience. However, some challenges were also reported by BME trainee clinical psychologists by Shah et al. (2012). These included the struggles of isolation within the classroom and in supervision. This feeling of not belonging is similar to previous findings whereby people from BME backgrounds felt like outsiders in the profession (Odusanya et al., 2017).

For the BME trainee counselling psychologist participants in this research, the need to feel they belong on the training programme was considered an important aspect of their trainee experience. This highlights the importance of the profession making serious attempts to diversify and make BME trainees feel represented by having diverse cohorts, decolonising the curriculum and having BME staff, supervisors and lecturers to represent trainees within the training arena. These efforts will make BME trainees feel a sense of belonging on the training programmes rather than feeling “*overlooked*” as stated by Jade.

### **Recommendations**

Based on the findings and the narrations from the participants, some recommendations are presented. Initiatives (BME scholarships) are needed within training programmes to attract more applicants from ethnic minority groups. This can be done by positive discrimination or positive action - forms of preferential treatment for members of under-represented or disadvantaged groups, stemming from past or present discrimination. It can be legally implemented in higher education according to section 158 of the Equality Act 2010. Counselling psychology training programmes need to explicitly state on their websites their commitment to supporting trainees from BME backgrounds. Training programmes need to keep track of their BME numbers and make publicly available the information about their intake annually, to reflect their commitment towards ethnic equality and social justice. Learning environments need to be diverse; ethnic equality reflected in lecturers, researchers, supervisors, practitioners, placements, staff and trainees. Programmes need to educate core course staff and supervisors in relation to BME trainee challenges. Programmes may need to do anti-racist work and training such as reviewing their reading lists and curriculum. This needs to be attended to at placements, and among supervisors as well.

DCoP need to explicitly state their commitment to supporting counselling psychology trainees from BME backgrounds. The DCoP Black and Asian Counselling Psychologists Group could

be better promoted for trainees. DCoP could collaborate with training programmes to promote support groups for BME trainees. The name of this group could be reconsidered to encompass a wider scope of all BME trainees.

The findings from this research suggest that the independent route training provided by the BPS, which comes under DCoP, needs to provide better support for its trainees, regardless of DCoP membership. The promotion of culturally sensitive approaches in therapy should be highlighted as an essential competence for all practitioners. The HCPC and BPS currently attend to issues of diversity and cultural competence in their policies, but it could be more clearly stated that cultural sensitivity is an essential competency.

In conclusion, further research is needed which includes participants from more diverse backgrounds, for instance in terms of disability, religion and sexuality. The BME and non-BME male perspectives on gender and ethnic imbalance within the counselling psychology profession warrants further research as well. It is important to illuminate and explore these underrepresented experiences. Thus enriching the knowledge base within the profession and improve the standards of higher education training courses.

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