

Transcript Talking Therapies Episode 31:

How does discrimination affect us?

Suzy:

Hello and welcome to Talking Therapies, a podcast made together with Psychologies Magazine and the UK Council for Psychotherapy, or UKCP for short. I'm Suzy Walker, and I'm the Editor-in-Chief at Psychologies. Each month on Talking Therapies, we will be talking to a UKCP therapist about a range of topics. Prejudicial treatment of people based on age, sex or race can have a profound impact on mental wellbeing. Even though laws have been put in place to prevent discrimination, it still presents many challenges.

Dwight:

As a black male psychotherapist, I'm extremely busy and my practice is full of people from all sorts of ethnicities and genders. So from my perspective, I'm not convinced that people, let's say black people in this example, are reluctant to seek help. I think what can happen is, they're reluctant to seek out help given that the system is actually very white and middle class, that then creates a barrier.

Suzy:

That was UKCP psychotherapist Dwight Turner. Prior to training as a psychotherapist, Dwight served in the Royal Air Force. During his deployment in Germany, he became interested in understanding the prejudice and racism that underpinned his childhood. Now working in private practice, Dwight is a senior lecturer at the University of Brighton and is completing a PhD research into understanding psychotherapy and human nature from a cultural perspective. In this episode, UKCP's CEO Sarah Niblock is sitting down with a UKCP psychotherapist Dwight Turner to find out how psychotherapy can help those who face discrimination, and also those who practice it.

Sarah:

Dwight, I wanted to start by asking you, how does discrimination impact society as a whole?

Dwight:

Well it's a good question to start with. We've seen through things like COVID-19, and the lockdown and the impact on the BAME community. - I'm going to use the term BAME although I'm not necessarily a fan of it, but just to keep things simple today - The past few years we've had the Me Too movement, and so on and even things like climate change and disability politics and so on, we see that there are many disadvantaged groups who don't feel that they have the same rights as those of privilege. Be it the able-bodied, be it those who are white and middle class, be it those who are men and so on. And the cost of that, the impact of that on societies is that we have a lot of communities who feel sort of left out, marginalised, silenced, disadvantaged. And that can lead to things widely impacting on people's mental health, for example the LGBT community, I was reading a paper just the other day about how COVID-19, the lockdown is really highlighted and impacted on the LGBTQ community's mental health to a greater extent than perhaps the national average. So, discrimination and inequalities, they do have a far greater impact, and perhaps we aren’t even aware of a lot of the time.

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Sarah:

Yeah, I mean, I've been reading the research that's come now, we're recording this in August 2020 and the research that's come out now about mental health, and lockdown, and even the easing of lockdown did not impact positively on certain groups. And those are the ones that you're describing. They are women, particularly women, caring for children, BAME people, and like you I find that sort of acronym problematic sometimes, but also people living in urban areas as well.

Dwight:

Well, I think you also raise an interesting point around the position of women during lockdown. We've fallen back into some very old stereotypical roles in the home. You've got working woman who are still then charged with looking after the kids. Given that the fathers at home as well, it's a very odd thing to happen.

Sarah:

I'm interested to know, from your perspective, as a psychotherapist, as a black psychotherapist, what you think the protest say about the possibility of change. I'm a white woman, I don't claim to have that insight that you have, but I'd be interested to hear your perspective and how positive you feel about the Black Lives Matter protests.

Dwight:

Well, I think for myself, I'll start off with by saying there's a level of cautious optimism and I'm using that phrase for a reason. George Floyd's murder, and the protests around the world, not just in the States but around the world, against anti-black violence - It's not just about police violence, it's about anti-black violence - Has really brought back to the surface for myself, just how oppressive and how difficult it is to be a black individual or group in the modern day and age. Talking about this now in August, because we had a couple of months to sort of start to process what went on. I remember when I first saw the videos, feeling really quite saddened, emotional, and angry at what was happening. This is nothing new, people were focusing on that it's just one incident, he was a criminal, all those sorts of things, but this is not just about one individual. This is about a regular occurrence of systems of oppression that black people endure all the time. These sorts of protests are not just within the black community, there's a growing awareness that actually, this needs to stop. I think, if we actually harness this energy, this power, this drive, to actually, not forced change because I don’t think you can force anything without ending up with a backlash, but if you can encourage and pull change along the road, then actually there is a chance for something different to come into play. My fear, though, is that lots of people will just jump on the bandwagon. Now we saw it with Black Tuesday where lots of companies, for example, put up black-out supporting Black Lives Matter for that one day, but then who've gone back to perhaps doing exactly the same things they're doing beforehand. And that's my fear for all of us. We've been here before. So, if there's going to be change, let's make a sustained effort towards that change. We've had the big start gun, if you like, of 100 metre race, but how are you going to run the next 30 or 40 metres of that race? What are we actually going to do to keep this change going? If we can put things in place, then there's possibility for change in my view.

Sarah:

Such a good analogy. You've talked the talk, but now you've got to walk the walk can actually be measured on what you've said. We do know, there's plenty of data that those who experienced discrimination, that there is significant fallout. Black people are much more likely to be sectioned under the Mental Health Act. But also, that groups from a variety of ethnicities and cultures are less likely or seem less able to seek help. Is it that some people are just less likely to access support? And if so, why might that be?

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Dwight:

This is an interesting one. As a black male psychotherapist, I'm extremely busy and my practice is full of people from all sorts of ethnicities and genders. So from my perspective, I'm not convinced that people, let's say black people in this example, are reluctant to seek help. I think what can happen is, they're reluctant to seek out help given that the system is actually very white and middle class, that then creates a barrier. And I think there are plenty of non-majority counselling organisations that are also fairly busy. There's something about trying to challenge that sort of stereotype that actually, there aren't those avenues for minority groups to access counselling, or whatever else. And part of the answer is actually providing more services for minorities, because there are many different ways that one can feel like an outsider. So therefore, how we actually build services to meet those demands is quite important. We can't just have a one-size-fits-all. I think that's where perhaps mental health and psychotherapists get caught in a bit of a trap, seeing things through a purely Western white lens, which then leaves people feeling like they can't access those services, it's not for them. So the more that actually psychotherapy evolves, the more we're able to meet these sort of diverse communities.

Sarah:

Yeah, and meet people where they are.

Dwight:

Yes. And as therapists we're actually challenged with doing that on a day to day basis. Where we've gotten slightly stuck is - it's not just ourselves, it happens across the western world - As a community, if you like, as a profession, we struggled to actually work out how does working with that particular minority group, be it black men or black women, how does that actually differ and how can we develop those sorts of skills? That needs greater research, which will need resources, but there is a chance here to actually develop and grow the trade if you like.

Sarah:

Now as you said, discrimination, it comes in many forms, and can affect a variety of people. As a psychotherapist, how do you find an intersectional approach to discrimination can help us to understand the complexity of this kind of abuse?

Dwight:

Well, this is a very important point here, because I think again, lots of our courses have barely scratched the surface around difference in diversity. We've sort of gotten stuck within say, the nine characteristics of the Equalities Act. That's fine, but that's a very narrow start point. I think what intersectional theory actually brings into play is that difference and otherness has always been incredibly complex, because it is very difficult to get a handle on. For example, things like identity, now my identity is not just the nine areas of the Equalities Act. I'm an academic, I'm black, I'm male, I'm divorced, I'm a father, those are aspects of my identity. Often when we talk about discrimination, people just see me for one of those, they see as a man so therefore there'll be a failure because of that, they'll see me as black and maybe they'll put the two together. So what intersectionality actually does is explore the fact that we're actually oppressed from a number of different areas. So as I'm black, I experienced levels of discrimination from that perspective, for example. As a black man

- I put those two together - in a white environment, and I experienced levels of discrimination because of that, as well, I'm seeing the threat in some ways, I'm seen as someone who should be avoided, where people have to cross the road to get away from me, that sort of thing. The more we can understand the complexities of power, of privilege and of otherness, the better we can actually work with those in the therapeutic space.

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Our trade is majority white and yet lots of those counsellors, especially when they're in training, are working on the ground with people who are from different backgrounds to themselves. Be it class based, age based, be it because they're able-bodied and their clients are disabled, it could be anything. The levels of power play built within that, if they're not seeing through an intersectional lens, they're going to get missed. And that could also, potentially re-traumatise our clients around difference. That's what we need to try and avoid. But we can only do that when we understand it to a greater degree.

Sarah:

And what impact does discrimination have on our mental and physical health, if we don't address it?

Dwight:

Well this is the thing, I think being black in a white environment, we often don't feel we can actually be ourselves, so we put on a cloak, I'm just using that as an example. I'm sure there are many other ways of exploiting, maybe from your own lens as a woman, what is it like to work in a more patriarchal environment. We can't always bring the fullness of who we are, to the enviroments that we're existing in, out of a fear of annihilation, out of a sense that we've been told that's not accepted, we've got to adapt in some way. My parents were very adept at acting British, for example, when they came from the Caribbean back in the 50s, and 60s, so they learned to adapt. The cost of that though, is we know about a false self, you develop like a racialized false self, that sort of double consciousness, the idea and actually we can't be our full selves, we have to adapt to the environments that we exist within. But there's going to be a psychological impact of that. The thing about discrimination now - there are studies out of the Caribbean - is when we experienced discrimination, that can lead to greater levels of obesity, greater levels of depression. I also think it goes a bit deeper and as therapists we have, again, a duty to starting a bit more investigation as to the psychological impact of this. I'm doing lots of work around dreams, I think these experiences become internalised really deep down into the unconscious, whereby even the dreamscape, for those of us who are a minority, is altered by experiences with privilege. For example, my dreams are often littered with experiences of whiteness, whereby I'm feeling oppressed in some way. And I have to work through that in my own therapy, so that I can understand, okay, 'what am I taking on from the environment that I exist within?'

Sarah:

Very powerful, and the way that you've articulated that repression of a whole section of a person's identity in order to be able to function within a particular culture is absolutely heart rending. Now, discrimination can be absolutely overt, obviously, you're processing testament to that. But it can also be very subtle can't it? It can be fleeting micro-aggressions, micro-discrimination, how can we equip ourselves to identify when it's happening to us or others?

Dwight:

Again, this is a very important point. I'm going to start with the idea of splitting, for example. I get clients who come in and they've endured some sort of microaggression, let's say around race, often what I find happens is, they start to split between the felt experience of what's happened, which is one where they're very annoyed or angry, or they're upset, whatever else, and also an attempt to try and normalise it. They're just making a joke about it, or maybe 'I didn't understand it' - There's an attempt to constantly avoid the full impact. And my job as a therapist then is actually trying to hold the two parts together. Because I think that's another layer of the more subtle layers of discrimination that we don't always understand. It's the emotional, cognitive dissonance that's created by an experience of othering, if you like. Let me give you an example, I wanted to write a paper on early life material, but I wanted to make it a bit more Afrocentric.

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And I was terrified. I spoke to a tutor about it and they said, 'well, you could do that, but maybe you just stick within the guidelines, because that's what this course is all about.' And I felt sort of semi-unseen. I felt like it wasn't okay for me to bring a sense of blackness to that paper. So I went away, talked about it in therapy for a good few weeks, had to really wrestle with the urge to do what I wanted to do versus what I've been told to do. In the end, I wrote what I felt was right for me, because my therapist was actually able to hold the two parts and stop it from swinging backwards and forwards too much. And yes, it was fine. It passed. It was great, not a problem at all. But the struggle to actually align those paths, to not go into a place of falseness, to actually come from a more authentic place. I think it's really quite pronounced when we've endured some sort of discrimination where we actually judge ourselves, we've internalised 'it's not okay to be black on the page or in my workplace,' or whatever it is, that I have to conform to some sort of projected way of being.

Sarah:

And the effort that's involved, that additional effort when compared with your contemporaries in that situation is acute. This is a conversation I've had with a number of our psychotherapists in similar situations. They say, ‘it's just the sheer day to day, daily effort and energy that's needed because I'm black.’ It's something that I hear all the time.

Dwight:

I've written about it as well, it's tiring. If you're doing it on a day to day, literally hour to hour basis, it is tiring. And that was the other thing about the whole George Floyd incident, in my view, that what came up for myself and for many other black colleagues was actually the traumas that we put to one side and we've sort of, inverted commas, forgotten about, then come to the surface and how tiring that is to actually have to revisit some of those. We put into one side, because that's the way of surviving the environment, because you can't stop to actually process this. But actually, at that moment, given that we're under lockdown at exactly the same time, there was no other option, but to actually say, 'okay, I'm going to look at this now, I have no real choice.' It's hard work, existing in a world that's not your own.

Sarah:

Do you give people strategies? I mean, if somebody has experienced discrimination, do you give them some kind of strategies to deal with that in some way? I’d say 'deal with', it's not the best choice of words, but to process that in themselves.

Dwight:

I think what I might do is point to resources where they can get support and help if need be. There may be more legal means that a client or associates needs to go down in order to get the support that they need to take on the organisations they're working for or to challenge whatever it is that they have to deal with. So I will sometimes point to legal resources, to their union, if it's a workplace, I'll refer them on to different organisations where they can get some additional support. And I think sometimes we have a duty to actually support clients go through that.

Sarah:

I wanted to go back to something that you actually mentioned earlier, how your unconscious mind is trying to process incidents of racism. Could you talk a little bit more about that, perhaps the kinds of ways in which discrimination appears in dreams?

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Dwight:

It fits in with something I mentioned earlier on about how we internalise experiences. Lots of people will be listening to this podcast and know its early life stuff, this is where it starts in a way. But this goes on all the way through one's life. We internalise things all the time. And one of the things I'll look at with some clients is, what's going on in the unconscious? What's going on in the dreamscape? If they're black, or from a minority group, how does privilege and otherness play out in their dreams? For example, I wrote a paper just recently around experiences of systemic racism, where about my own dreamscape was populated by characters who were very oppressive towards myself. And it was very difficult to find my voice and writing the paper was a way of taking that power back. So I think these sorts of experiences can come up unconsciously. What the dreamscape will actually play out is the trauma of othering, the trauma of experiencing racism, homophobia, sexism, whatever it might be, that will be held in the dream as well.

Sarah:

Well, how have you found that psychotherapy can help someone who is experiencing discrimination?

Dwight:

I think it comes down to a couple of things. One, therapists probably need to be more aware of their own prejudices. Those therapists who are perhaps quite racist or been raised in environments whereby racism has been normalised. It's not to say that every therapist is racist. That's not what I'm trying to get at here. But what I would say is that if one's raised in an environment - Let's say you went to school, you saw on the page that actually Africa was filled with people who just wore loincloths, and swung from trees, and you watch Tarzan movies when you're a kid, then that sort of becomes internalised. So your view of blackness resonates with that. Or if you're used to watching or seeing that actually, all black people do is drive around and flash cars and wear lots of bling. Those sorts of stereotypical images inform one's idea about what blackness actually is.

Therapists can get caught in this like any other group, of believing that's who I have in the chair opposite me. When that's not challenged within their own perspective, then they can act out something with the client, whereby their own fear, if you like, of blackness, then flows into the room. And what can often happen is then clients just leave, but they're not really sure why they're leaving, and the therapist isn't sure why they’re leaving, they're just pathologize or they're just left. As opposed to looking at actually what have I done in order for that person to feel they can't quite sit with me? Too often, though, as therapists we're a bit defensive around things like race and difference and therefore we choose not to even look at it. We hide behind things like ‘All Lives Matter’ because of that fear, that embarrassment that we might be complicit in somebody else's oppression.

Sarah:

I wondered if psychotherapy can help someone who is discriminating against others.

Dwight:

One of the avenues that I would go down is looking at, okay, how can we, in our trainings do a better job of exploring these difficult topic areas and paying a little bit, not to sound too critical, but we've sort of tokenized explorations of difference. We're sort of start within the confines of the protected characteristics and that's fine, that's important. But actually, this is more about privilege, and otherness, and the power dynamic between the two, I think that's quite important. So I'm not so worried about changing people's mindsets, because everybody has their own route. This is mine. And it doesn't mean that everyone is going to follow the same way as myself. What I am interested in is actually people being more honest with themselves as to where they're coming from.

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Sarah:

Yes, for life, absolutely. The recurrent thread, I think, in so many conversations that I've had with UKCP psychotherapists, it's that acknowledgment, it's that incredible self-awareness, and that understanding how your past, your origins or your experiences very much shaped who you are. You may have some shame in that, but that is power. And I think also what's been so useful about this conversation, is you're not attributing any blame, you're not attributing any shame. There's a sense of acceptance in what you're saying, it feels very holding. I don't believe you've criticised any one group or individual.

Dwight:

Yeah, it steers away from the need to sort of project blame. And like you said, shame to me bounced around like a bit of a ball. I'm more about actually holding, shame is going to be there, but also pride. Why wouldn't one be proud of one's identity of a region? For example, I'm proud of being a black man, I like the fact that my parents are from the Caribbean, celebrated every year Carnival. Why shouldn't somebody who's white and English, celebrate the fact that they like St. George's day. But it's about being aware that actually those positions are okay to hold. That's the one thing about the political version of political correctness is that it silences that sort of debate, that sort of discursive, sort of, exploration of what is it like to be white, English, black, a woman, a man, whatever it might be.

Sarah:

Well, these are very interesting, but painful times, I think. But I feel very heartened and positive having heard what you said, Dwight, I'm sure many listeners will find that incredibly inspiring, actually. So thank you very much for this and for sharing your precious time at such a very busy period. Thank you, Dwight.

Dwight:

My pleasure. Absolute pleasure.

Suzy:

That was UKCP psychotherapist Dwight Turner talking to Sarah Niblock, the CEO of the UK Council for Psychotherapy. If, after listening to that, you feel you could benefit from some talking time with a psychotherapist, then go to the find therapists section of the UKCP website and have a look through. The website address is [www.psychotherapy.org.uk](http://www.psychotherapy.org.uk/) and look for the Find a Therapist tab. We'll also be discussing discrimination and its effect on mental health in Psychologies magazine this month or you can find us online at [www.psychologies.co.uk.](http://www.psychologies.co.uk/) We’ll be doing a podcast each month with some of the UKCP psychotherapists, so remember to like and subscribe to our channel here at first. It also helps others to find us too. So join us again next month. Till then, thank you for listening and take good care of yourselves.

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