The experience of trainee clinical psychologists from Chinese cultural backgrounds - a discourse analysis

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“The journey of a thousand miles begins with a single step.” - Lao Tzu

“千里之行，始於足下” – 老子

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Abstract

This study aimed to explore how trainee clinical psychologists from Chinese cultural backgrounds make sense of their Doctorate Clinical Psychology (DClinPsy) training. By attending to this under-explored topic, this research hopes to elucidate the influence of potential taken-for-granted training structures and possible power dynamic on Chinese trainees within a profession lacking cultural diversity. Seven semi-structured interviews were conducted with Chinese trainee clinical psychologists. Embracing a social constructionist epistemological paradigm, the collected data were analysed using a Foucauldian Discourse Analysis (FDA) (Foucault, 1984), guided by Willig’s framework of FDA (Willig, 2008). The findings revealed five major discursive constructions. These include: “competency in expressing oneself”, “challenges in maintaining social connection”, “problems arising from being the cultural other”, “issues with being given a ‘BAME’ label” and “the symbolic capital”. This research explored the shape these discursive constructions take; and offered initiatives that could be needed to raise cultural humility and sensitivity towards Chinese culture within the clinical psychology profession.
# Table of Contents

**Acknowledgments** ..................................................................................................................... i

**Abstract** .......................................................................................................................................... ii

**Table of Contents** ............................................................................................................................ iii

**List of Appendices** ........................................................................................................................... v

**List of Tables** ............................................................................................................................... vi

**List of Figures** .............................................................................................................................. vii

**Chapter 1: Introduction** .............................................................................................................. 1
  - Overview ........................................................................................................................................ 1
  - Ontology and epistemology ............................................................................................................ 1
  - Contextualising key terms ............................................................................................................. 5
  - Contextualising identity ............................................................................................................... 7
  - The cultural context .................................................................................................................... 10
  - The historical and social-political context of Chinese in the UK ........................................... 13
  - The professional context - clinical psychology training .......................................................... 17
  - The personal context to this research topic .............................................................................. 22

**Chapter 2: Systematic literature review** .................................................................................... 24
  - Overview ....................................................................................................................................... 24
  - Search Strategy ........................................................................................................................... 24
  - Eligibility criteria and search process ....................................................................................... 28
  - Outcome of the literature search .............................................................................................. 30
  - Overview of the findings .............................................................................................................. 39
  - Discussion of the findings ........................................................................................................... 39
  - Summary and limitations ............................................................................................................ 50
  - Rationale for the research question ........................................................................................... 53

**Chapter 3: Methodology** ............................................................................................................. 55
  - Overview ....................................................................................................................................... 55
  - A qualitative approach ................................................................................................................. 55
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Research design ........................................................................................................... 56
Ethical considerations ................................................................................................. 60
Research participants ................................................................................................. 63
Data collection ............................................................................................................ 68
Data analysis ............................................................................................................... 71
Self-reflection and reflexivity ....................................................................................... 75

Chapter 4: Findings ................................................................................................. 78
  Overview .................................................................................................................... 78
  Discourse 1: Competency in expressing oneself .................................................... 78
  Discourse 2: Challenges in maintaining social connection ...................................... 86
  Discourse 3: Problems arising from being the cultural other ............................... 90
  Discourse 4: Issues with being given a ‘BAME’ label ........................................... 100
  Discourse 5: The symbolic capital .......................................................................... 106

Chapter 5: Discussion and Conclusion .................................................................. 115
  Overview ................................................................................................................... 115
  Summary of the key findings .................................................................................... 115
  Implications of the study ......................................................................................... 125
  Critical evaluation of the study .............................................................................. 130
  Future research directions ...................................................................................... 137
  Conclusion ............................................................................................................... 138

References ............................................................................................................... 140
Appendices ............................................................................................................... 160
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

List of Appendices

Appendix A: Reflective diary extracts ................................................................. 160
Appendix B: The search planning tool ................................................................. 165
Appendix C: The full electronic search strategy of the initial search attempt ... 166
Appendix D: Ethical approval of the proposed study ........................................... 169
Appendix E: Information sheet ............................................................................ 170
Appendix F: Consent form .................................................................................. 173
Appendix G: Debrief sheet ................................................................................... 175
Appendix H: Advertisement for study on Facebook ............................................. 177
Appendix I: Advertisement for study via email .................................................... 179
Appendix J: Screening form ............................................................................... 180
Appendix K: Interview schedule ........................................................................ 182
Appendix L: An extract of a transcript with transcription conventions ............ 185
Appendix M: Extracts of notes made on a transcript ...................................... 190
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

List of Tables

Table 1. Search terms used in the initial systematic literature search attempt ... 25
Table 2: Search terms used in second systematic literature search attempt ...... 27
Table 3: Inclusion and exclusion criteria for literature review ......................... 28
Table 4: Summary of studies included in the systematic review ....................... 31
Table 5: Quality assessment table of the papers ........................................... 34
Table 6: Subjects for systematic review ......................................................... 39
Table 7: Inclusion and exclusion criteria for study ........................................... 65
Table 8: Demographic information. ................................................................. 67
Table 9: Willig’s six stages of data analysis ..................................................... 72
Table M3: a process of constructing discourses ............................................... 195
List of Figures

Figure 1. Flow chart for systematic review .......................................................... 30
Chapter 1: Introduction

Overview

This research explores how trainee clinical psychologists from Chinese cultural backgrounds make sense of their Doctorate Clinical Psychology (DClinPsy) training in the United Kingdom (UK). This first chapter begins with a depiction of my epistemological position, followed by an attempt to define the key terms that will be used throughout this thesis. I will then give an outline of various concepts of “identity”, followed by an overview on the cultural, historical and social-political, professional, and personal contexts that have led to the research aim.

Throughout this chapter, a range of different topics will be raised; however, due to the scope of this research, I will not be able to go into the detail each topic deserves. Instead, an introduction to the concepts is presented here. Given the project’s personal resonance, a first-person perspective will be applied when reflecting on my own position in relation to the research. This is to ensure that this research is written from the position of a reflexive researcher. This movement, between “I” and “researcher” will continue for the remainder of the thesis in order to consider my own presence and influence (e.g., subjectivity, feelings, thoughts, opinions, and values) on the research.

Ontology and epistemology

This study employs a qualitative approach, which will be discussed in-depth in the methodology chapter. In qualitative research, it is often considered that one’s own ontological and epistemological positions have a profound influence on the entire research process and may govern the methodology and analysis used within the research (Alvesson & Sköldberg, 2009).
Ontological position

An ancient Chinese proverb says, “two-thirds of what a person sees exists behind that person’s eyes” (Sodowsky & Johnson, 1994, p.59). In simple terms, all people do not perceive realities in the same way.

Ritchie and Lewis (2003) state that ‘Ontology is the beliefs about the social world and what could be known about it’ (p.1). There are many metaphysical positions on beliefs about the social world, such as: What is the nature of existence and reality? Do people comprehend reality differently, or is it subjected to the context they are within? (Ritchie & Lewis, 2003). My belief about the social reality is that we discover that we exist by the way of our interaction with other people, our culture and our surroundings. Therein, I align with Vygotsky’s (1987) ontological position that, ‘through others we become ourselves’ and the development of thoughts is not from ‘the individual to the social, but from the social to the individual’ (p.120).

Epistemological position

My own philosophical position seems accordant with the social constructionist methodologies. Ritchie and Lewis (2003) state that ‘Epistemology is concerned with ways of knowing and learning about the social world and focuses on questions of, what is the basis of our knowledge?’ (p. 13). Thus, instead of eliciting the “truth” of a person’s experience, social constructionist methodologies concern to understand the social processes that have apprised the person’s constructions of the world (Gergen, 2015; Hunter, 2010). With no sole definition, social constructionism is instead featured by a variety of assumptions (Burr, 2015):
- Our knowledge about the world is constructed through the social processes and interactions between people. Thus, a critical stance is needed towards “taken for granted” knowledge.

- Our understandings of the world are historically and culturally specific, which are continuously reconstructed and reconsidered with time. Hence, social constructionism considers the claims to truth developed by the natural sciences as restrictive, pathological and oppressive.

- Knowledge is constructed between people in social interactions through language. Thus, language is considered as performative and constructive, and becomes a form of action (Fishbein & Ajzen, 2010) that constitutes the world rather than represents it (Danzinger, 1997).

- Different constructions can sustain and exclude social action and are therefore inextricably linked with power relations, as it makes certain social actions permissible whilst restricting others.

My own epistemological position aligns with these areas of consensus. In particular, I share a social constructionist view that people are not positioned as passive within their biographical, historical, cultural and societal context and within an interaction (Willig, 2008). I believe the accounts that people construct are informed by social discourses available to them through the use of language, which builds their “truth” (Willig, 2008). Therefore, social constructionist methodology not only concerns the wider context but also considers what people are able to do with their “talk”, for instance, people have agencies to choose certain frames of discourse over others, use diverse rhetorical means and take social action with their language (Edwards & Potter, 2001).
Foucault (1979) states that ‘there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute, at the same time, power relations’ (p. 27). I share Foucault’s view in that systems of knowledge are closely aligned with power. I feel that, with this research, it was not enough to just consider the base of how individuals interact with each other; the reciprocation with levels of power also needed exploration, including the ones between researcher and participant. In fact, as a researcher, I feel it is critical to engage with matters that enable me to elucidate my position on essential questions connecting with values, politics, power and truth, and their implications (Burman & Wheelan, 2011). Because I believe that research is an interactive process formed by many factors (including my own history, gender and culture) and by the individuals who take part (Denzin & Lincoln, 2005).

As I am a middle-class woman who was born in mainland China, raised in Europe and attended higher educations in the UK, I feel very connected to Chinese and Western cultures at different stages of my life. Growing up, I had to continually learn how to compromise between my Chinese cultural heritage and the heritage of the Western countries in which I was raised and am living. Due to my diverse cultural backgrounds, I am conscious of the mixture and richness that multiple world views bring. This entails the possibility of inadvertently depreciating participants’ views, and privileging my own views over theirs. I am also aware that I am not impartial about politics and the social contexts of which this thesis is a part; these concerns are one intention for researching this area. The multiple ways I have facilitated my reflexivity to challenge both my personal and cultural assumptions will be shared throughout the thesis. I have also held a diary during the process of my project to check in with myself and constructively challenge my own biases and assumptions (Appendix A).
Contextualising key terms

In accordance with my epistemological position, I have the view that language is used as a vehicle to construct knowledge about events within a specific context. This knowledge forms discourses which, once applied to the social world, has real effects (Gemignani & Peña, 2007; Hall, 2001). Through this research I am aware that I am entering a dilemma, whereby I use but also critique dominant terminology. Given the performative and constructive nature of language, I have decided to use inverted commas when discussing contested terminologies.

Culture, Ethnicity, “Race”

The terms culture, ethnicity and “race” are often used interchangeably in literature. Thus, it is important to consider their differences and understand the context in which culture is used in this research.

Culture consists of shared knowledge, beliefs, norms, values, traditions, attributes, perceptions and practices (e.g., customs, rituals, rules) that are mutually negotiated by the members of a given society, passed on from one generation to the next to enable the group to survive (Leighton, 1981). Thus, culture is fluid and transforms with increasing contact with other cultures (Stead, 2004).

Ethnicity is determined partially by choice, which consists of shared history and experience acquired through birth and kinship. Ethnicity is therefore partially fixed in that there is historical continuity (Hutchinson & Smith, 1996).

“Race” is determined by genetic ancestry, which is socially constructed to be permanent and unchangeable, based on the idea that humans can be divided into distinct categories specified by physical characteristics such as skin colour, facial features and hair type (d’Ardenne & Mahatani, 1999).
**Chinese trainee**

For the purpose of this study, the term Chinese trainee refers to a trainee with Chinese cultural heritage, regardless of their geographical, ethnical and / or racial backgrounds.

**“The local”**

For the purpose of this study, “the local” refers to an individual from the dominant White British culture in the UK, including the White British work colleague, or university colleague, supervisor, lecturer and tutor.

**“The West”**

For the purpose of this study, “the West” refers to Western civilisation, defined by the free dictionary as many cultures of European heritage that share common cultural ideas, philosophical foundations and ancestral beliefs, which contrasts culturally with “the East” or “the Orient”.

**The training environment**

For the purpose of this study, the training environment refers to any space within the DClinPsy training, including lecture, big and small study groups, tuition, placements and supervisions, to name a few.

**“BAME”**

With a colonial past, the term “Black and Asian Minority Ethnic” (“BAME”) is socially constructed and widely used in the literature to refer to a range of people from different cultural and ethnic backgrounds in the UK. It is worth noting that the term “BAME” is increasingly problematised as it was developed in a particular political
context in the UK where to mention colour was considered to be offensive, hence it was used as a deliberate attempt to point not to colour, but oppression based on colour-racism (individually and institutionally both currently and historically).

**Minority**

For the purpose of this study, the term minority refers to ethnic minority in the UK. According to the Commission for Racial Equality (CRE, 2007), ethnic minority indicates people who would choose a category other than “White” as per the ethnic monitoring categories used in the 2001 National Census. For the purposes of this study, this criterion for the term minority will be used to lend itself to capturing any experiences related to visible ethnic difference. However, the intention is not to deny the importance of other forms of discrimination (e.g., the White minorities).

**Contextualising identity**

This section will provide an overview of different concepts of “identity”, I will also cover how I understand identity and how identity may be relationally constructed through the “other”, the serviceable other, the constitutive outside, linking and differentiation, and as multiple and contextual. The impact of these constructions will be explored.

Conventionally, psychology has conceptualised identity as seeking for “real” features in the “self”, which is dependent on formation of the early relationships and progresses through lifespan (Erikson, 1968). Identity is also often referred to as capturing certain fixed characteristics of individuals, such as skin colour and biological sex (Davidson & Patel, 2009). From a postmodern perspective, identity can be considered as a social construction (Foucault, 1984; Goffmann, 1969), occurring in language and interactions with others (Anderson, 1997) and located in the wider social
context (Gergen, 2015). In line with my epistemological (social constructionist) position, I consider identity not as fixed characteristics (skin colour), rather it could be understood as fluid, relational, contextual and constructed through the current and historic discourses available to us (Davidson & Patel, 2009; Elliot, 2005; Hall, 1996; Howard, 2000), reflecting both our internal and external worlds. In particular, “identity” may be relationally constructed in the following ways:

**The “other”**

We may construct our sense of self by recognising what we are not in relation to the “other” (Hall, 1996; Said, 1978). According to social identity theory (Tajfel, 1979), identity is considered to construct a sense of self by considering other people as different. This action of differentiating “us” from “them” is also identified as “othering”, which can be broadened to groups and results in in-group / out-group divisions (Tajfel, 1979). Usually, this practice of othering is recognised as giving rise of unequal self / other relationships.

**The serviceable other**

Morrison’s (1992) notion of the serviceable other offers a helpful explanation of how the abovementioned unequal self / other relationship can take place through the relational constructions of identity. A serviceable other is when one person delineates a sense of self-dependency on the existence of another person. For instance, in order for an individual to construct an identity of “rescuer”, there has to be serviceable others as “sufferer” (Sampson, 1993). The serviceable other can be understood as subordinate to the privileged subject (Hansen, 2006, p. 21). Thus, the “other” is considered as lesser than, but an essential necessity for the differentiation and construction of the self.
Constitutive outside

Hall’s (2001) concept of constitutive outside refers to an individual who discursively constructs a sense of self in association to a threatening outside other. This outside impedes the foundation of a unified inside. For example, the existence of the other may hinder one from being completely one’s self and this threatens their identity from the outside. Similar to the “serviceable other”, the constitutive outside is, therefore, required for the construction of one’s self, however it is also threatening as it facilitates a de-stabilisation and reestablishment of identity (Hall, 2001).

Linking and differentiation

Another way an individual may construct a sense of self is via operations of linking and differentiation (Hansen, 2006). For example, a woman compared to a man and constructing him as not affectionate, sentimental and innocent. The woman is therefore demarcated through a positive process of linking to characteristics such as affectionate, sentimental and innocent (Hansen, 2006, p.19). The man, on the other hand, would be associated with characteristics such as logical, pragmatic and mature (Hansen, 2006). The woman’s set of links is compared and contrasted with the male set of links via a negative process of differentiation (Hansen, 2006, p. 19). Even though the two operations may be studied independently, with regard to identity construction both are existing concurrently (Hansen, 2006).

Identity as multiple and contextual

Multiple identities may co-exist within a single person, and one may draw on different identities at different time depending on the context they are in (Anthias, 2009; Sardar, 2005). For example, an individual can be a British citizen, of Chinese origin, a Christian, a genderqueer, a vegetarian, and a clinical psychologist. Identity, therefore,
can be conceptualised as a process whereby one dances between positions depending on beliefs, interest, values and intentions, which alludes to the notion of identity salience (Anthias, 2009). For instance, at work one might draw on their professional identity as a clinical psychologist, in a cafeteria their vegetarian identity, in church their Christian identity, and at home their Chinese identity. Depending on the context, these different identities within one person may become visible / voiced, whereas others may be unvoiced / invisible (Burnham, 2018). The intersectionality of these aspects of identities, shortened as Social GGRRAACCEEEESSS (Burnham, 2018), may give rise to different modes of discrimination, power and privilege in different context (Runyan, 2018; Burnham, 2018).

Overall, this section considered the fluidity of identity constructed through the postmodern lens. In essence, the reliance on an “other” often forms the foundation of hierarchy between two opposites, for instance dominant / minority, ingroup / outgroup (Hall, 1996). For social constructionists, the question is with how these divides are developed and their consequences (Sampson, 1993). Also, how power that some groups possess may be circulated to govern the discursive practices through which they construct their own identity and govern the identity of others (Sampson, 1993). This leads to the next part of the chapter examining the cultural, historical and social-political, and professional contexts which may influence Chinese trainees when they relationally construct their cultural identity during the DClinPsy training in the UK; as well as a personal context that has led to the research aims of this study.

The cultural context

Chinese culture

Despite the influence of individualism and Westernisation in East-Asia due to the recent rapid modernisation and urbanisation (Sun & Ryder, 2016), Confucianism,
Daoism and Buddhism still constitute the essence of the traditional Chinese culture (Zhigang, 2013). In a nutshell, the Confucian morality of loyalty is the most pervasive tradition in Chinese culture (Shi, 2013; Yang et al 2011). This includes a sense of personal humility and submission to the will of the leader and family built into Chinese sensibility. As such, filial piety and respect to the seniors, and an insistence on deference to authority are treasured values in Chinese culture.

Moreover, the Daoist contribution of integrating with nature and promoting a specific type of passivity and adaptability to surroundings adds to the Buddhist contribution of the “middle way” that fosters restraint of overt aggression in individual striving (Li, 2013). This connects with the balance of Yin and Yang that encourages the balancing of forces rather than choosing one dominant position (Li, 2013). Thus, the balance of energies, forgiving and harmony have been valued in Chinese culture as well.

Based on these, Ma (2006) has summarised six main Chinese cultural characteristics: 1) favourite for non-competitiveness and frugality of action; 2) inclinations towards introversion and emotional moderation; 3) preference towards equality; 4) tendency towards a collectivistic way of life; 5) partiality for cognitive conservatism; and 6) an emphasis on “face” - a cultural understanding of respect, honour and social standing.

**Comparison with the dominant White British cultures**

In Western civilisation, such as the dominant White British society, culture was shaped by the tradition of Greece, and the way of thinking was mainly inspired by Aristotle’s logic and analysis (Green, 1990). Whereas in East-Asian civilisation, such as Chinese society, the way of thinking was mainly founded on the dialectic method of analysis and holistic thinking (Walker, 2012). When comparing the dominant White...
British culture with the Chinese culture, Hofstede (2001) found that the UK scored high in individualism, indicating a society in which people are more likely to value privacy, independence, freedom and seek fulfilment of their own goals. In fact, the fundamental British values are considered to be democracy, rule of law, respect and tolerance, and individual liberty (Department for Education, 2014). On the other hand, China scored high in collectivism, indicating a society in which people are more likely to have a group mentality and seek mutual accommodation to maintain group harmony (Hofstede, 2001).

Hofstede (2001) also revealed that people in the dominant British culture scored higher in uncertainty avoidance dimension than those in the Chinese culture; however the difference was not huge. This indicates that the degree to which people in both societies prefer formal rules and fixed pattern of life, as means of enhancing their security, may be similar. Furthermore, Hofstede (2001) found that people of a Chinese origin scored high on the power distance dimension, which is described as a way people perceive power differences. This indicates a hierarchical society in Chinese culture where people with less power accept power relations that are more autocratic and paternalistic. On the other hand, individuals from the dominant British culture scored low on this dimension, indicating that people in this society relate one another more as equals regardless of formal positions. In terms of the masculinity / femininity dimension, both the UK and China scored similarly. Last but not least, Hofstede (2001) disclosed that people of a Chinese origin scored very high on long-term orientation, indicating a society that attaches more importance to the future; whilst people from the dominant British culture scored very low, indicating a society that attaches emphasis to the present moment.
In short, there are various differences in values, norms, customs and beliefs which have been identified between Chinese and the dominant British cultures. Understandably, these differences may lead to distinctive traditions, practices and perceptions in respective cultures. When writing this, I am aware that this is only a whistle-stop introduction to both Chinese and British cultures; it cannot account for the diversity within both societies and is not meant in any way to stereotype all British and / or Chinese people. Instead, this is to provide a broad cultural context to the current project, intersecting with other contexts introduced in this chapter.

The historical and social-political context of Chinese in the UK

This section will provide an overview of how Chinese in the UK have been constructed as the “other” through historical and recent social-political events. This is followed by considerations on what may constitute as cultural racism, a new form of racism, and its impact on people from Chinese cultural heritage in the UK.

Chinese as “the other”

In Britain, it is frequently assumed by the White majority people that culture only exists in connection with “the other”, although culture is both shaped by and shapes individuals (Patel et al., 2000). While the UK is considered as a multi-cultural country, 87% of its population are White juxtaposed with 13% being from so-called “BAME” backgrounds (ONS, 2011). Thus, the societal norms are mainly dominated by the White British culture (Patel et al., 2000). The 2011 census showed that 0.7% (just under 400 000 individuals) of the total UK population consisted of people from Chinese ethnic backgrounds at the time. The waves of migration can, in part, be traced to British colonialism and the community comes from Hong Kong, mainland China, Taiwan, Malaysia and Singapore, to name a few. However, there are also a rising
figure of Chinese immigrants who are undocumented, and encounter harsh living conditions and invisibility in the UK. In Southeast England for example, some numbers suggest that the Chinese population could be twofold as large as official numbers would indicate due to the sizable undocumented population living here.

With China’s increased economic and geopolitical importance, there have been mixed results for the Chinese diaspora, referring to the tensions between China and the West in recent years. In particular, the rate of hate crimes in the UK against people of Chinese ethnicity increased nearly three times over that of the previous two years in just the first three months of the outbreak of the coronavirus (COVID-19) (Gray & Hansen 2020). In light of the recent rise of anti-Chinese racism, the United Nations (2020) has expressed concern over what they called "a tsunami of hate and xenophobia" unleashed by the COVID-19 pandemic, which also has been referred to as “the Chinese virus”.

In the UK, the data specialists YouGov (2020) surveyed over 1,200 people from so-called “BAME” communities about issues of racism in June 2020. It discovered that approximately 76% of surveyed Chinese people received a racial slur directly targeted at them at least one time and, 60% stated that this had occurred to them on numerous occasions, much greater than the average percentage over all “BAME” groups at about 31%. The surveyed Chinese also reported a higher likelihood than any other “BAME” groups to experience people imitating their accent or making assumptions about their behaviour grounded on their culture, let alone the casual racism and microaggressions that often go unheard.

**Chinese students in Higher Education in the UK**
Studies on the intercultural experience of Chinese students, especially on international students, have reported substantial challenges in adjusting to daily, academic and social life, and in dealing with life stress in the UK (Jiang, 2018; Wang, 2018; Zhu & O’Sullivan, 2020). Research found that these challenges are often due to “culture shock” (Zhou, Jindal-Snape, Topping, & Todman, 2008), whereby Chinese students find themselves faced with conflict to their deeply held beliefs and understandings (Forbes-Mewett & Nyland, 2008), and to their culturally influenced ways of learning and interaction (Jin and Cortazzi, 1998; Hofstede, 1986).

Many Chinese students are often considered as “silent learners” in the Western learning culture as they are not actively asking and answering questions, and participating in classroom discussions (Ping, 2010). Whilst some research claimed that this may be due to language barriers (Wang, 2018), other research argued this can be a “choice” regardless of language proficiency (Zhu & O’Sullivan, 2020). Cortazzi and Jin (1997) described British culture of learning as, for example, an individual orientation, active involvement, creativity, and originality, whereas Chinese cultural of learning involves collective consciousness, passive participation, mastery, and transmission. In fact, the Confucian educational tradition value effortful, pragmatic, and respectful acquisition of knowledge (Sit, 2013; Tweed & Lehman, 2002), which encourages reflective thinking and enquiry (Wang, 2006), especially after class to absorb taught knowledge. Whilst Chinese students appear to show strong motivation to adjust themselves to the new cultural environment due to the heritage of Confucianism (Jiang, 2018), the teacher-student interaction in the learning environment is often a two-way process (Jiang, 2018; Wang 2018). Thus, the change and adjustment should occur both ways.
Discrimination, in the forms of stereotype and cultural racism, was another issue that Chinese students voiced (Jiang, 2018; Newsome & Cooper, 2016; Yu & Moskal, 2019). Almost 50% of the Chinese international students in Jiang’s (2018) study expressed not being welcomed and accepted by host-nationals in the UK, which influenced their further willingness, and ability to build relationships with host country. Wang’s (2018) study stated that Chinese international students faced challenges in making friends and keep real friendship with British peers due to few opportunities to socialise with the locals, different lifestyles, and a lack of awareness and misunderstanding towards Chinese culture. These are associated to Chinese students’ experiences of feelings of alienation from the local society and isolation (Jiang, 2018).

**Cultural racism**

In contemporary pluralist societies, blatant racism, prejudice and types of discrimination are challenged by laws and widespread norms (van Dijk, 1992). Thus, racism today can be less obvious and more subtle because of its discursive nature (Ahmed, Nicolson & Spencer, 2000). Whilst previously racist discourses were often founded on biological attributes, the concentration today has moved to cultural differences (Verkuyten, 2003). It was argued that the idea of genetic pedigree, once encrypted as race, has now been re-encrypted as invariant cultural difference, which gives culture an unchangeable, natural feature allowing it to be used as an analogy for race (Jones, 1999). This form of cultural essentialism is thus taken as a cultural racism. Cultural racism links to the restriction of rights grounded on the notion that one cultural group’s way of life is considered as reprehensible and does not work within a specific society (Jones, 1999). Cultural racism often operates to strengthen privilege of the dominant culture, and results in the reliance on generalisations and stereotypes.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

of the under-privileged minority cultures, which can lead to constructions of inferiority, differentiation and / or exclusion (Jones, 1999).

In short, given the aforementioned concepts of identities and multiple layers of cultural, historical and social-political contexts, people of a Chinese origin in the UK oftentimes may be depicted as something different or “the other”. Here Chinese cultural practices may be drawn on, typically to demonstrate how Chinese values are incompatible with Western values, leading to the perceived superiority of Western culture (Forster, 2017), such as the dominant White British culture, and the foreign threat of Chinese culture, which could lead to a cultural racism towards Chinese.

It is important to note that the setting for this study is embedded within the current social-political contexts mentioned above. I find this context particularly distressing, especially witnessing how some discriminative discourses are constructed through the Western media, and its impact on my community, family, friends and myself. I find that this project could not be more well-timed for exploring Chinese trainees’ training experience in the UK during this particular time. However, I am mindful not to let such distress colour my perceptions on this project through keeping the research diary and being reflective throughout the research process. Especially, I try to attune to the ways in which I might consciously or unconsciously privilege certain perspectives, and I endeavour to be transparent in sharing my personal values, beliefs and assumptions in order to ensure that the reader is aware of different perspectives and possible biases that might occur within the research (Elliot, et al, 1999).

The professional context - clinical psychology training

*British clinical psychology*
Clinical Psychology is a reasonably young profession in the UK, which was formally established in 1960 (Pilgrim & Treacher, 1992). The professional identity of the clinical psychologist in the UK has transformed radically in the last 50 years (Pilgrim, Turpin, & Hall, 2015), from being diagnostician (Eysenck, 1949), to being reflective scientist-practitioner (Belar & Perry, 1992; BPS, 2019; Clegg, 1998; Schön, 1983;). Currently, clinical psychologists in the UK are regulated by the Health and Care Professions Council (HCPC), which requires the completion of a three-year full-time doctoral level training programme. During such a training, trainees are required to meet a range of competencies set out by the British Psychological Society (BPS) (BPS, 2019).

Latest statistics from the Clearing House for Postgraduate Courses in Clinical Psychology (Leeds Clearing House, 2019) show that in 2019, 79.5% of applicants were from a background classified as White though the acceptance rate was 85.3%. On the other hand, 0.7% of the total applications came from Chinese applicants. Together with the Middle Eastern / North African and the “other ethnicity (not specified)”, Chinese applicants were clustered into “the other” group on the statistics. Unfortunately, there were no clear data to show the accepted rate and success rate of the Chinese applicants getting onto a doctorate clinical psychology programme. Statistics have shown that this has largely been a stable feature of trends in acceptances to clinical psychology doctoral programmes. The question that remains to be contemplated is why these numbers of Chinese applicants are not visible and what this may indicate.

Cultural diversity in clinical psychology

On-going issues. Broader experiences of cultural, historical, and social-political contexts can also be activated in the training arena due to the power
disparities associated with being a trainee from a minority group. It has been critiqued that the clinical psychology profession’s workforce, models, practices and services have been Eurocentric (Fernando, 2017), often consciously and unconsciously culture-blind and racism-blind; in other words, “White psychology for White population” (Fatimilehin & Coleman, 1998; McInnis, 2002; Patel & Fatimilehin, 2005).

Clinical psychology is also criticised for pathologising people from so-called “BAME” groups (Adetimole, Afuape, & Vara., 2005; Patel et al., 2000) as shielding its exclusivity (Fleming & Daiches, 2005). In fact, the “Race” and Culture Special Interest Group within the BPS, set up in the early 1980s, encountered with opposition and criticism from the BPS since its inception; being first disallowed the status of a “Section” and subsequent dissolved in 2014 without checking with its members, and without any formal explanation at the time (Wood & Patel, 2017).

As for trainee clinical psychologists, a normative position appears to exist within the profession, namely, an individual who is female from white British middle-class background (Baker & Nash 2013). Since this status quo appears to stay often unchallenged, BME trainees regularly felt that they were “losing themselves” and needed to hide or filter their identity in order to fit into this normative (Ahsan, 2020; Ragavan, 2018). In particular, “BAME” trainees voiced the hardship of standing out as different, feeling powerless to speak out, and handling the fear of being misunderstood and marginalised (Rajan and Shaw, 2008; Shah, 2010). Their named difficulties of talking about race and culture in the classroom (Shah et al., 2012) suggested that the issues of BME trainees could only be addressed “outside of a White institution” (Adetimole et al., 2005).

**Globalisation – the new challenge and opportunity.** Globalisation is the process whereby cultures from around the world influence one another (Ozer,
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Bertelsen, Singla, & Schwartz, 2017) and become more connected through multicultural interactions (Berry, 2013). Because of recent advances in telecommunications and a growth in economic and financial interdependence, the degree of global connections has accelerated radically. However, globalisation is not merely an economic or mechanical process, but also a psychological one, possibly involving a greater sensitivity to other people and to other cultures. One noticeable so
This poses thoughtful questions about the universality of Western clinical psychology being applicable across cultures and national boundaries, and the extent to which clinical psychology is an inextricable part of indigenous culture. However, globalisation is multi-directional, in that it also offers opportunities for ideas and practices from different cultures to manifest and challenge the dominant White clinical psychology.

Policies and models. In response to the increasing diversification of “race”, culture and ethnicity in the British society, the HCPC and BPS request all accredited clinical psychology training courses to demonstrate evidence of addressing issues concerning "race" and culture in their training programmes (BPS, 2019; HCPC, 2015). In particular, clinical psychologists are required to develop cultural competence, which can be defined as:

…the ability to respect and appreciate the values, beliefs, and practices of all clients, including those who are culturally different, and to perceive such individuals through their own cultural lens rather than that of the practitioner… to think flexibly and to recognise that one’s own way of thinking and behaving is not the only way. (Pinderhuges, 1995, p.133).

These guidelines aim to raise awareness of cultural humility, an ‘ability to maintain an interpersonal stance that is open to the other in relation to aspects of
cultural identity that are most important to the [person] (Hook et. al, 2013, p.2). These guidelines also call for the inclusion of multiculturalism in clinical psychology training courses, ultimately recognising the cultural differences in attitudes and beliefs for a wide variety of individuals (BPS, 2019). In line with this, Sue and Sue (2012) proposed a “racial/cultural identity development model” to appreciate people from minority groups who were trying to understand their cultural identity in the context of their culture of origin, the dominant culture and the interactions between these cultures. The model suggests four different stages:

1. “Conformity”, whereby the person infuses in the dominant White culture, while concurrently expelling and disparaging their culture of origin.

2. “Dissonance”, whereby the strengths of minority cultural group are appraised, which results in connecting with both their culture of origin and the White dominant culture.

3. “Resistance”, whereby the person entirely embraces their culture of origin and expels the White dominant culture.

4. “Awareness”, which refers to critical appreciation of all cultural groups.

It is key to mention that people do not experience each stage in a linear fashion and that one’s cultural identity is impacted by various situations and contexts (Lee, 2005).

Initiatives. A number of training initiatives have emerged to advance working with issues of culture, “race”, and ethnicity. For instance, the training manual by Patel et al. (2000) made valuable suggestions for trainers on how to weight and merge issues of culture and “race” in all aspects of training. Moreover, in recent years, it has become possible for international trainees to be included in the DClinPsy training,
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

adding perspectives and practices from different cultures around the globe onto the training. In 2020, Health Education England (HEE) decided to expand the DClinPsy training places nationally by 25% to increase the diversity within the profession. It is hoped that these initiatives enable trainees from diverse cultural backgrounds to collectively bring substantial knowledge, skills and experience to the DClinPsy programme.

The personal context to this research topic

As a Chinese clinical psychologist trainee in the UK, I am conscious that I work within one of the least diverse health care professions in the National Health System (NHS). I am often recognised as “the other”; the deciding feature of difference through multifarious contexts in clinical psychology. I also have always been in the minority group, in fact a minority within the minority group, either in a university classroom or in a mental health service as a clinician. I am conscious of the power disparity which permeates interactions as a consequence. As a Chinese trainee who is in the process of forming and developing my own professional journey, I feel strongly about seeking chances to understand my cultural identity within the profession. Despite being ethnically and “racially” noticeably different, I have always struggled to make my cultural identity visible. Instead, I quietly have continued to find ways to discover how power influences what is accepted as knowledge in dominant culture and how knowledge from other cultures can be silenced or marginalised. Through informal conversations, I became aware of other Chinese trainees sharing a similar story. Thus, when the opportunity came to pick a research of my choice, this topic felt extremely important. It is felt that all trainees, trainers and the wider clinical psychology profession could benefit to hear Chinese trainees’ constructions of their training as a
form to question the cultural diversity in the DClinPsy training, which hopefully brings valuable and different assets to the field.

To summarise, in this chapter I have offered an overview of my epistemological position, outlined the key concepts of identity and introduced the cultural, historical and social-political, professional and personal contexts associated with this research. A systematic review will now be presented to explore the evidence base of training experience of Chinese trainee psychologists.
Chapter 2: Systematic literature review

Overview

This chapter aims to systematically review the relevant literature, detailing how the search was conducted, how the studies were identified and why they may have been included or excluded from the review. Then, a summary of the findings and a quality assessment using Tracy’s “big tent” criteria (Tracy, 2010) are presented. This quality assessment criteria was chosen due to its wide applicability and acceptability in the research community (Tracy & Hinrichs, 2017). This literature review is sought to explore a clear and current understanding on the following question:

What do we currently know about the training experience of trainee psychologists from Chinese cultural backgrounds?

Last but not least, the chapter outlines the thoughts and aims of the study, and the research question.

Search Strategy

From my prior reading around the topic, it was anticipated that very little research in this area may have been conducted. It was, therefore, decided to keep the initial search of the literature wide-ranging and not restrict it only to clinical psychology. During the development of the current study, a number of literature searches were conducted to refine search terms and to ensure that, as far as possible, any research that had been conducted associated with training experience and Chinese trainee psychologists could be detected.
Due to the reader access rights to the University of Hertfordshire (UH) online resources that I own, the initial literature search was carried out on the titles and abstracts of articles in the following databases, accessed via the UH online resources: PubMed, Scopus, EBSChost, and PsyArticles. To provide the most comprehensive review of the literature, the process known as snowballing (Sayers, 2007) was applied, whereby searches are made via references and citations of obtained texts.

**The initial search attempt**

The initial searches took place on 21\textsuperscript{st} July, 2020. The search strategy for the literature review was developed using a Search Planning Tool (see Appendix B). The selected search terms in Table 1 were included. These search terms were reviewed and agreed upon between me, the primary and the secondary supervisors of this project because they were deemed relevant to the current study.

The concepts used to carry out the search strategy were focused on Chinese trainee / student and variations of psychology trainings. The variations in search terms were combined with Boolean operators (AND, OR). For example, the search terms for concept one (“Chinese” OR “chin* cult*”) were combined with each of the rest of concepts separately (e.g., concept one AND concept two; concept one AND concept three; concept one AND concept four; and so forth). They were entered in each of the previously mentioned databases by browsing the search terms in article title, abstract and keywords. It was decided at this stage not to apply the “NOT” operator, in order to ensure that no related articles would be missed. Truncation tools were employed to ensure that variations of specific words were gathered.

Table 1. Search terms used in the initial systematic literature search attempt
This initial search of the literature yielded 172 articles. The titles were scanned first, and where unclear, the abstracts of these articles were then examined in further detail by the researcher for relevance. Articles were eliminated if the paper did not appear to make reference to training experience of Chinese trainee psychologists. Together, 167 articles were discounted by this initial search, leaving eight articles which appeared relevant. After refining for exact duplicates, this was reduced to five.

**The second search attempt**

Given the limited number of relevant articles extracted, a second search was conducted on 23rd September, 2020 with additional concepts (see Table 2). This search yielded 661 articles, reduced to 18 after titles and abstracts were screened by me for relevance, and narrowed to eight articles after removing an exact duplicate. An additional manual search of Google Scholar was also undertaken, to include grey
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

literature, letters, reviews, editorials, commentary articles, which added no extra resources.

Table 2: Search terms used in second systematic literature search attempt

<table>
<thead>
<tr>
<th>Concept 1:</th>
<th>Chinese</th>
<th>“Chinese” OR “chin* cult***”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concept 7:</td>
<td>Psychoanalysis Training</td>
<td>“Psychoanaly* train***” OR “Psychoanaly*” OR “Psychoanaly* student***”</td>
</tr>
<tr>
<td>Concept 8:</td>
<td>Psychodynamic Training</td>
<td>“Psychodynamic train***” OR “Psychodynamic*” OR “Psychodynamic student***”</td>
</tr>
<tr>
<td>Concept 9:</td>
<td>Systemic Psychotherapy Training</td>
<td>“Systemic Psychotherap* train***” OR “Systemic Psychotherap* student***”</td>
</tr>
<tr>
<td>Concept 10:</td>
<td>Supervision</td>
<td>“Clinical Psycholog* supervis***” OR “Counsel* supervis***” OR “Cognitive Behavio* Therap* supervis***” OR “Psychotherap* supervis***” OR “Psychoanaly* supervis***” OR “Psychodynamic supervis***” OR “Systemic Psychotherapy* supervis***”</td>
</tr>
</tbody>
</table>

The Chinese database search attempt

In order to ensure this literature search was culturally sensitive and knowledge was not only limited to Western culture databases, a decision was made to repeat the search strategy in the most established Chinese Scholar Database CNKI on 29th September, 2020. This was to include literature from Chinese culture in order to comprehensively review what is currently known about the studied topic. The same search concepts and terms were used. No further relevant articles were yielded than had already been extracted.
Eligibility criteria and search process

When finding appropriate and relevant studies for this review, certain inclusion and exclusion criteria were employed (see Table 3). The following results were produced. The total search of all databases identified 1009 articles, which were subsequently screened by title and abstract, resulting in 983 articles being excluded as they met the exclusion criteria and, thus, were not suitable. Examples of the excluded articles include any paper not published in English and / or Chinese, and articles not concerning the training experience of trainee psychologist(s) from Chinese cultural heritage. Once the excluded paper were removed, 26 articles remained. Following this, 13 duplicates were eliminated, and two articles were taken out because of unavailability of the full text online, which left 11 paper that were selected for full text examination. Of the 11, four were identified as suitable articles for the literature review. Last but not least, one accessible article was yielded through reference screening. This resulted in an ultimate total of five articles selected for comprehensive text review and quality evaluation. The full breakdown of this process of identifying studies was described using the PRISMA (2009) flow chart in Figure 1. For detailed information on the search strategy, see Appendix C.

In April 2021, prior to the submission of this thesis an additional literature search was undertaken. No new papers were generated.

Table 3: Inclusion and exclusion criteria for literature review

<table>
<thead>
<tr>
<th>Inclusion:</th>
<th>Articles on training experience of trainee psychologist(s) from Chinese cultural backgrounds</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Peer-reviewed empirical studies, theoretical, review, reflection and discussion papers</td>
</tr>
<tr>
<td></td>
<td>Case studies</td>
</tr>
<tr>
<td></td>
<td>Published in English and / or Chinese</td>
</tr>
<tr>
<td></td>
<td>Published and unpublished thesis</td>
</tr>
</tbody>
</table>
Grey literature such as letters / editorials, commentary articles
Articles from any geographical location
Studies using qualitative methods of analysis
Studies using quantitative/mixed methods of analysis
Studies with participants aged 18+

Exclusion:
Not published in English and / or Chinese
Based on animal data
Full text not available online
Not concerning training experience of trainee psychologist(s) from Chinese cultural backgrounds

Identification
Records identified through Chinese database searching (n = 176)
Records identified through Western database searching:
(PubMed = 101)
(EBSHost = 253)
(Scopus = 435)
(PsyArticles = 44)
Total = 833

Records screened by title & abstract
n = 1009

Records after duplicates removed
(n = 13)

Full-text articles assessed for eligibility
(n = 11)

Studies included in literature review synthesis
(n = 5)

983 references excluded
The primary reasons for exclusion:
1. Not published in English and/or Chinese
2. Not concerning training experience of trainee(s) from Chinese cultural background

2 references excluded
The primary reasons for exclusion:
Full text not available online

7 references excluded
The primary reasons for exclusion:
Not related to training experience of trainee(s) from Chinese cultural background

Articles generated from reference lists of original papers identified by search:
(n = 1)

Included

Screening

Eligibility

Identification

Included
Outcome of the literature search

Overview of the papers

Overall, papers were screened for their understanding in the current knowledge about the training experience of Chinese trainee psychologists. Data of the studies in the systematic review were extracted and collated into a table to summarise the findings (see Table 4), which are presented in more detail below. From the results yielded and as anticipated, it appears that the research into this area is very limited; therefore, I have decided to include first person accounts such as discussion paper and reflective pieces. I will endeavour to offer a robust critique of this.

Of these five papers, two were reflection papers (Spira, 2020; Zhao-O’Brien, 2014), two case studies (Qi et. al. 2019; Zhao & Stone-Sabali, 2020) and one qualitative study (Moir-Bussy, 2008). Of these studies, one paper was UK-based (Zhao-O’Brien, 2014), one Hong Kong-based (Moir-Bussy, 2008), and three US-based (Spira, 2020; Qi, Wang, Wu, & Luo 2019; Zhao & Stone-Sabali, 2020). Two out of five papers were trainees’ accounts based on their experience of being trainee psychologists from Chinese cultural heritage (Qi et al., 2019; Zhao-O’Brien, 2014), and three papers offered both supervisors’ and trainees’ accounts of cross-cultural supervision provided to Chinese trainees (Moir-Bussy, 2008; Spira, 2020; Zhao & Stone-Sabali, 2020).

A narrative synthesis of the overall findings can be found in the discussion of the findings section in this chapter, where all papers will be presented and critiqued, drawing upon key findings and methodological limitations.
Table 4: Summary of studies included in the systematic review

<table>
<thead>
<tr>
<th>Author(s) / Year</th>
<th>Aims</th>
<th>Country</th>
<th>Sample</th>
<th>Method</th>
<th>Key findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zhao-O'Brien (2014)</td>
<td>A reflective account of how author’s Chinese cultural heritage impacted on her clinical psychology training and how her attitudes towards her cultural and ethnic identity changed through the processes of problematising, normalising and optimising.</td>
<td>UK</td>
<td>Not applicable (N/A)</td>
<td>Reflective analysis</td>
<td>Lack of shared cultural history and cultural values with the peers</td>
</tr>
<tr>
<td>Qi, Wang, Wu, &amp; Luo (2019)</td>
<td>Explored some of the challenges in the supervision process of Chinese subgroup of international trainees, and provided recommendations to supervisors, who are less familiar with supervising Chinese international trainees. Also offered suggestions to Chinese trainees themselves.</td>
<td>US</td>
<td>Three international trainees identified as clinical / counselling psychology trainees who were born and raised in mainland China</td>
<td>Qualitative case study of three conglomerate case vignettes: One focusing on working with native Chinese clients; One on approaching multicultural discussions in the supervision process; One on enhancing trainee's multicultural competence through supervision</td>
<td>Challenges and complexity of multilingual supervision among the supervisor-trainee-client triad Challenges raised due to differences between Chinese and American culture regarding assertiveness The usefulness for supervisors to initiate cultural discussion in supervision in an open and curious way</td>
</tr>
</tbody>
</table>
## EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Study Title</th>
<th>Methodology</th>
<th>Participants</th>
<th>Findings</th>
</tr>
</thead>
</table>
| Zhao & Stone-Sabali (2020) | Explored how culturally sensitive supervision facilitated the professional development of a Chinese international trainee, who had difficulties with providing cross-cultural counselling therapy to a client from a third culture | Qualitative case study | One female Chinese Counselling trainee | The usefulness of:  
1. Multicultural Orientation Framework,  
2. Supervisors’ adoption of cultural discussions, and  
3. Supervisor self-disclosure in aiding trainee’s efficacy in addressing cultural dynamics in therapy |
| Spira (2020) | A reflective account of the author’s experience of engaging with psychoanalytic students from China through distance technology | Reflective analysis | Two Chinese psychoanalytic students | Different expectation on supervisory alliance between the supervisor and Chinese trainees  
Trainees’ respect and idealisation of the supervisor |
| Moir-Bussy (2008) | Explored Chinese counselling supervisors’ and graduates’ supervision process and the cultural impact on their creative transformation of the self and of professional knowledge | Narrative Enquiry with graduates through in-depth-interviewing or conversations | 19 counsellors in Hong Kong who had trained by overseas institutions  
12 supervisors who had worked with the above graduates | The challenge of becoming co-educator, co-visees for supervisees and supervisors  
Culture values impacts  
supervisees’ counselling practice and relationship formation with their clients and supervisors |
Quality of the papers

Tracy’s “big tent” criteria (Tracy, 2010) was systematically applied to each of the papers to assess their quality. After a comparison with other quality assessment approaches, for example, Elliot et al. (1999) and Madill et al. (2000), Tracy’s (2010) criteria were used because they include a number of main concepts that will offer a multifaceted method to assess qualitative research. These include: worth topic, rich rigour, sincerity, credibility, resonance, significant contribution, ethical and meaningful coherence. General quality scorings of “low” and “high”, have been allocated to the studies providing they were considered to have made general efforts to carry out quality research. For straightforwardness of scoring, studies were marked a “high score” if they comply with four or more of Tracy’s (2010) eight quality criteria (see Table 5).
### Table 5: Quality assessment table of the papers

<table>
<thead>
<tr>
<th>Author(s) / Year</th>
<th>Worthy Topic</th>
<th>Rich Rigor</th>
<th>Sincerity</th>
<th>Credibility</th>
<th>Resonance</th>
<th>Significant Contribution</th>
<th>Ethical Meaningful Coherence</th>
<th>Overall Quality rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zhao-O’Brien (2014)</td>
<td>✓</td>
<td>N/A</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>High</td>
</tr>
<tr>
<td>Zhao &amp; Stone-Sabali (2020)</td>
<td>✓</td>
<td>✓</td>
<td>X</td>
<td>Maybe</td>
<td>✓</td>
<td>✓</td>
<td>X</td>
<td>High</td>
</tr>
<tr>
<td>Spira (2020)</td>
<td>✓</td>
<td>N/A</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>X</td>
<td>High</td>
</tr>
<tr>
<td>Moir-Bussy (2008)</td>
<td>✓</td>
<td>X</td>
<td>X</td>
<td>Maybe</td>
<td>✓</td>
<td>Maybe</td>
<td>X</td>
<td>Low</td>
</tr>
</tbody>
</table>
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

**Worthy Topic.** For high standard qualitative research, studies need to be regarded as relevant, timely, evocative, or interesting. All five papers were considered to meet these criteria. They were all novel, counterintuitive and interesting for distinctive reasons: concentrating on methodology and perspective. In regard to methodology, Qi et al. (2019) and Zhao and Stone-Sabali (2020) used unique case studies and provided new thinking about the influence of Chinese cultural backgrounds on their training and supervision experience. Zhao-O’Brien (2014) and Spira (2020) offered personal reflections on fresh perspectives that of the Chinese trainee(s) and of the supervisor to question some taken-for-granted assumptions. Finally, Moir-Bussy (2008) proposed a novel conversational framework to explore the transformative counselling supervision between ex-trainees’ and their supervisors.

**Rich Rigour.** This theme refers to sufficient, abundant, appropriate and comprehensive description of the research design, theoretical constructs, sample(s), authors’ detail of the research context, and data collection and analysis processes. Strong rigour did not seem to be applicable for reflection papers (Spira, 2020; Zhao-O’Brien, 2014). Moir-Bussy’s (2008) study did not appear to have appropriate details of the study design and methodological discussions, thus it was considered to be lacking in research rigour. For example, the survey used in Moir-Bussy’s study did not state the content of the survey used, which made it difficult to ascertain whether the study’s methods were valid. However, Qi et al. (2019)
and Zhao and Stone-Sabali (2020) were considered to have followed high quality rigorous research proceedings when it comes to their case study design and how the authors explained their methodology and processes.

**Sincerity.** Being aware of the subjective nature of qualitative research is always important for researchers. Sincerity relates to the notion of transparency about the research process and sharing authors’ self-reflexive processes enclosed in the research. The two reflection papers (Spira, 2020; Zhao-O’Brien, 2014) were considered to meet these criteria, as they offered abundance of self-reflections about their own experiences. On the other hand, some of the research included in this review failed to share their self-reflexive processes with the reader. For example, Moir-Bussy (2008) and Zhao and Stone-Sabali (2020) did not share sufficient information to demonstrate that they had taken a transparent approach to their papers. Finally, Qi et al. (2019) attempted to offer elements of sincerity by sharing the authors’ own vulnerability and reflections in relation to the case studies.

**Credibility.** Qualitative credibility entails trustworthiness, verisimilitude and plausibility of the research findings. These can be achieved by thick description, concrete detail, triangulation / crystallisation, multivocality and member reflections. Generally, the credibility of the reviewed research was varied. Some papers tried to put forward credible research by demonstrating various case examples to offer multiple sources of data (Qi et al., 2019). Spira (2020) showed credibility by
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

including multiple voices of trainees’ reflection about their supervisory experience, while Zhao-O’Brien (2014) provided in-depth illustration and concrete details that explicated culturally situated meanings of being Chinese trainees practising clinical psychology in the UK. Moir-Bussy (2008) included abundant quotes in their results, which indicated some level of credibility of their research findings. Lastly, Zhao and Stone-Sabali (2020) did not share any information about how they sought credibility in conducting and writing up their research.

**Resonance.** Resonance refers to the idea of how studies meaningfully reverberate and affect an audience. All findings would resonate with the wider audience, mainly due to the presentation and the novelty of the topic (Moir-Bussy, 2008; Qi et al., 2019; Spira, 2020; Zhao-O’Brien, 2014; Zhao & Stone-Sabali, 2020).

**Significant Contribution.** This concept refers to the influence that the research offers, whether this is from a methodological, conceptual, moral, heuristical or practical perspective. Qi et al. (2019) and Zhao and Stone-Sabali (2020) offered practical contributions that highlight the important role of cultural awareness and cultural discussion in cross-cultural supervisions. Moir-Bussy (2008) brought a conceptual contribution on a conversational process between the Chinese counselling supervisees and their supervisors to create a “collaborative learning community” in a culture in which hierarchy is valued. The reflection papers
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

(Spira, 2020; Zhao-O'Brien, 2014) provided heuristic contributions that discovered the unique training experiences of trainee psychologists from Chinese heritage.

**Ethical.** This concept ensures that the research is conducted in an ethical style from beginning to end. It was difficult to review this aspect of quality since most of the papers hardly mentioned that they obtained ethical approval for their study. This would mean that an ethics board had granted the study and considered it ethically suitable, yet, they offered little information of the ethical concerns they had contemplated (Moir-Bussy, 2008; Qi et al., 2019; Spira, 2020; Zhao & Stone-Sabali, 2020).

**Meaningful Coherence.** This theme relates to the matter as to whether the research achieved what it purports to be about, and whether it used appropriate methods and procedures that fit stated goals. All studies appeared to meet the aims that they planned to achieve, in a suitable way and have their findings and / or interpretations contribute to the evidence base (Moir-Bussy, 2008; Qi et al., 2019; Spira, 2020; Zhao-O’Brien, 2014; Zhao & Stone-Sabali, 2020).

In summary, the quality of the literature is deemed high, nevertheless with a general lack of clear statement of ethical considerations. Moreover, some criteria regarding rich rigour and credibility were not fully applicable to reflection papers, thus made it challenging to assess the precise quality of these papers.
Overview of the findings

In this literature review, an outline of the main findings across the articles will be critiqued. Subjects were recognised via a systematic process of reading and re-reading each included paper thoroughly, and extracting the material that was deemed relevant (Siddaway & Wood, 2019). Through this method, three subjects were identified to cover the major ideas across the five papers (see Table 6).

Table 6: Subjects for systematic review

<table>
<thead>
<tr>
<th>Subject 1</th>
<th>Conflicts from cross-cultural perspectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject 2</td>
<td>Complexity of supervision</td>
</tr>
<tr>
<td>Subject 3</td>
<td>Professional identity formation to Chinese trainees</td>
</tr>
</tbody>
</table>

Discussion of the findings

Conflicts from cross-cultural perspectives

The subject “conflicts from cross-cultural perspectives” relates to cultural difference in beliefs, values and perceptions Chinese trainees encountered during their trainings, and the conflicts they faced as a result of this. For example, Zhao-O’Brien (2014) critically reflected on the importance of having respect for the elderly and people in authority in Chinese culture, which enabled her to develop an affinity with her elder clients during her DClinPsy training in the UK, however,
she felt this might have limited her capacity to work objectively with them. The author also mentioned that modest self-criticism was treasured in Chinese culture as a way of showing cultural humility and eagerness to learn. Yet, these characteristics might have been considered as problematic and labelled as “low self-esteem” or “unassertiveness” in an individualistic culture in a country such as Great Britain. Whilst being assertive might be valued in an individualistic culture, it is less emphasised in Chinese culture.

...being assertive can be adaptive in an individualistic culture such as Britain, where autonomy and individual achievements are emphasised; whereas, within a collective culture such as China where interdependence and interpersonal harmony are valued, a less assertive stance may be more useful for survival. (Zhao-O’Brien, 2014, p. 46)

In fact, several other authors also commented on the conflicting cross-cultural perspectives of self-criticism and assertiveness. Qi et al. (2019) offered case studies of three Chinese international clinical / counselling psychology trainees. They argued that assertiveness has not been a traditional value in the Chinese contexts. Therefore, the perceived “unassertiveness” of Chinese trainees in the individualistic culture such as the United States of America (USA) could cause increased acculturative stress - a reduction in health status (including psychological, somatic and social aspects) of individuals who are undergoing acculturation.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Moreover, Zhao and Stone-Sabali (2020) used a case study detailing a Chinese counselling trainee’s first-hand account of effective supervision approaches and techniques. The authors described the Chinese trainee’s self-criticism as “harmful”, which might be one way of interpreting the self-criticism drawing from a Western culture perspective. However, the authors could also riskily invalidate and possibly pathologise the trainee’s experience, because moderate self-criticism is valued and encouraged in Chinese culture, as mentioned previously in Zhao-O’Brien’s (2014) paper. However, Qi et al. (2019) demonstrated that suitable level of assertiveness and a proactive attitude to difficulties could enable Chinese trainees to manage issues in their clinical training.

Apart from different cultural views on assertiveness, Qi et al. (2019) and Zhao and Stone-Sabali (2020) also highlighted the importance of attending to factors related to cultural ways of expressing oneself. For example, based on Shibusawa and Chung’s (2009) concept of wrapping and unwrapping emotions, Zhao and Stone-Sabali (2020) described that openly talking about feelings was considered as impolite and self-centred in Chinese culture. Rather, Chinese people “wrap” their emotions.

…. Asian (Chinese and Japanese) wrap their emotions akin to how they wrap up a gift to others. (i.e., people share feelings in the context of their needs, desires, and goals)... (Zhao & Stone-Sabali, 2020, p.5)
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Unfortunately, this was stereotyped in the USA by misinterpreting people from Asian cultural backgrounds as lacking emotional expression and having an inclination to express feelings via physical complaints (Zhao & Stone-Sabali, 2020). Moreover, Qi et al. (2019) shared that many subtle Chinese emotions were not directly translatable over languages, indicating that Chinese people used a different way of naming, expressing and communicating emotions. The authors gave an example of “wei qu” - an inward-directed frustration that one was not permitted to display towards a senior in the collective, hierarchical culture like China. This emotion might be less common in an individualistic culture like the USA or the UK. Thus, both Qi et al.’s (2019) and Zhao and Stone-Sabali’s (2020) case studies stressed an importance of not stereotyping clients and trainees from a Chinese culture.

In short, the subject “conflicts from cross-cultural perspectives” highlighted different cultural views on having respect to elderly and people in authority, self-criticism, assertiveness and emotion expressions, which sometimes appeared to cause misinterpretations due to significant cultural gaps.

**Complexity of supervision**

The majority of the studies highlighted examples of complexity of supervision and the importance of unpacking cultural factors in supervision. The two articles on multi-cultural supervisions (Qi et al., 2019; Zhao & Stone-Sabali, 2020) illustrated challenges in the supervision process between non-Chinese
American supervisors and Chinese trainees due to culture differences. For example, Qi et al. (2019) shared that, in multicultural supervision, Chinese trainees often feel difficult or uneasy to assert a concept that differs from their supervisor. This may be related to the dyadic power disparity between the supervisor and the supervisee, which activates Chinese supervisees’ vulnerability towards their supervisor. In fact, Qi et al. (2019) shared that the difficulties of Chinese trainees to start cross-culture conversations with a figure of authority (i.e., supervisors), especially at the early stage of supervision, might be due to a number of factors. These include ambiguity about the supervisory relationship, defensiveness, supervisor’s curiosity in cultural conversations, and trainee’s own comprehension about their intersecting identities.

Whilst supervisors often have the power to evaluate the trainee’s level of competency and growth, the power dynamics in supervision could be more complex. When this power dynamic is not carefully considered, risk of culture stereotypes in supervision might occur and it could influence Chinese trainees’ willingness of initiating cultural conversations (Qi et al., 2019). For example, Qi et al. (2019) described in one of the case studies that the Chinese trainee proposed to deliver therapy with a Chinese client in the client’s mother tongue. However, this was initially rejected by the non-Asian supervisor. The authors explained that this action from the supervisor might potentially imply that the trainees should conform to the Western culture, that it:
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

... sends a message that Chinese trainees should give up their culturally unique strengths and skills and be more “American” (such as speaking English) as a therapist (Qi et al., 2019, p.191),

This message may not only undermine Chinese trainees’ strength but also remove their authenticity of being oneself. Although not overtly displayed, Qi et al.’s (2019) implied an internal struggle of Chinese trainee in attempting to advocate for their client’s needs whilst trying to integrate their supervisor’s clinical judgement. Thus, the authors argued that acknowledging and respecting Chinese trainees’ cultural identity can encourage them to be more assertive in sharing their cultural views.

Furthermore, the same supervisor offered the Chinese trainee to switch to a Korean supervisor due to possible assumptions that Korea and China shared similar cultures. Qi et al. (2019) explained that this stereotype could be damaging to the supervisory relationship and the trainee’s satisfaction with supervision. However, the authors spoke about how this issue was resolved through the supervisor’s willingness and openness to take in the Chinese trainee’s perspective.

Moreover, several authors stressed the need to carefully consider the power of supervisors in supervision as they were often revered and idealised by trainees from Chinese culture (Qi et al., 2019; Spira 2020; Zhao-O’Brien, 2014). Zhao-O’Brien (2014) described that the essence of harmony and collectivism in Chinese culture promotes social hierarchy, obedience, the idea of “fitting-in”, and having a
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

self-sacrificing inclination of placing the needs of others over their own. This also means a discouragement of openly showing individuality and disagreeing, because disagreeing with one's superiors indicates disrespect. Zhao-O'Brien (2014) pointed out that these cultural values enabled her in forming good working relationships, such as with supervisors. However, they also led her to portray an idealised image of the supervisors, viewing them as knowing everything, which could inhibit trainees from experiencing and sharing negative feelings in supervisory relationship. Spira (2020) offered similar reflections from his own experience of being a Western supervisor for two Chinese psychotherapy trainees over the digital platform. In particular, he associated filial piety, a treasured value in Chinese culture, with the idealisation of supervisor which was displayed through respecting the supervisor as a person with wisdom, who might be expected to have all the right answers.

It seems likely that the Chinese disposition towards filial piety played a role here in establishing an initial idealising attitude. The “supervisor” role (or the “Analyst” role) initially translated into the role of Teacher, who imparts wisdom. (Spira, 2020, p. 47)

In fact, the Chinese trainees’ reflections in Spira’s (2020) paper displayed the idealisations towards their supervisor. For example, one trainee shared ‘…. (my supervisor) is like a wise father and teacher, strong and caring…’ (Spira, 2020, p. 49), and ‘…. I don’t want to graduate too soon, so I can always “be taken care of
by him” (Spira, 2020, p. 49). Spira (2020) further spoke about how this role then was deconstructed through the process of supervision.

In order to provide meaningful supervision, Zhao and Stone-Sabali (2020) suggested techniques that benefitted multi-cultural supervision for her Chinese trainee, for example, 1) initiating cultural discussions in supervision by supervisors; 2) encouraging trainees to discover own cultural identities; and 3) appropriate disclosure of supervisors’ personal and professional experiences. The Chinese supervisee in Zhao and Stone-Sabali’s (2020) paper shared how this process positively decreased her acculturation concern and assisted her to enhance her own cultural humility and ability to apply cultural opportunities in clinical sessions. However, the paper didn’t provide details of how this cultural discussion was delivered in the supervisions.

On the other hand, Moir-Bussy (2008) explored the supervision process of counselling trainees in Hong Kong by including both ex-trainees’ and supervisors’ perspectives from the same culture. The author spoke about how the values of hierarchy, respect, harmony, filial piety and the reciprocal roles of the old and the young influenced the supervisory relationship. Through a conversational process of re-conceptualisation and transformation, the participants became more conscious of the cultural knowledge and their own Chinese values embedded in their spirituality and personal and professional goals. Moir-Bussy (2008) invited supervisees and supervisors to consider embracing dialogue and be open to learning from each other. This transformative supervision process could enable
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

both supervisors and supervisees to face the challenges of becoming co-educators and co-visees, forming a collaborative learning opportunity in order to address the possible power imbalance in supervisions. This is congruent with Qi et al.’s (2019) and Zhao and Stone-Sabali’s (2020) discussions regarding cultural discussion in supervisions. Zhao-O’Brien (2014) shared a similar view, in that she considered the best supervisory relationship is one whereby supervisor and supervisee connect in such a way that their cultural backgrounds enable them to discover new “personal bests” in each other, co-creating a relationship that is reciprocally enriching.

In summary, the multi-cultural supervision can be multifaceted. Cultural discussion is considered to be essential in supervisions with Chinese trainees. Supervisors’ awareness of cultural related power dynamic, openness to cross-culture conversations and curiosity to cultural perspectives in these supervisions could directly influence trainees’ willingness to initiate cultural discussions.

**Professional identity formation to Chinese trainees**

Many of the studies identified Chinese trainees experiencing nuanced and complex patterns of seeking identity. The subject “professional identity formation to Chinese trainees” identified paradoxical positions of identity, possibly due to acculturation level.

Moir-Bussy (2008) discussed the concept of identify formation in Chinese culture as “relational self”, because the self appears to reach its wholeness via
integration with others and the encompassing context in a harmonious way. Zhao-O'Brien (2014) indicated that, due to a lack of shared cultural backgrounds with her peers during her DClinPsy training in the UK, a matter that was hard to acquire through textbooks, she reported feeling like an “outsider” or a “stranger”. The author shared that there were times she evaluated her cultural differences in a negative way, considering them as inferior, backward and a disadvantage. As a result, she held negative feelings, such as inadequacy, incompetency and confusion, which led her to 1) reject some crucial aspects of her Chinese cultural identity, 2) overly associate with the local culture to feel accepted; 3) become hyper-alert to any dissimilarities between herself and the locals; and 4) refuse, minimise  and even deny her cultural differences. She reflected that this process of detachment from the nourishing source of her culture exhausted her and caused her pain and anxiety.

Moreover, trainees studied in several papers associated their professional identify with the minority community during their training in the West (Qi et al., 2019; Zhao O'Brien, 2014). Qi et al. (2019) pointed out this minority identity added unique challenges to Chinese trainees in areas such as cultural differences, racial discrimination and social and / or personal adjustment difficulties. Zhao O'Brien (2014) discussed the five-stage model of minority identity development by Atkinson et al. (1979) and the similarity attraction paradigm (Byrne, 1971). She reflected that
visible differences such as age, sex and race might be utilised for aims of categorisation, causing hostility, anxiety and stereotyping.

Moreover, although not explicitly noted, Qi et al. (2019) implied that the training experience might be different between international trainees from mainland China and immigrant Chinese trainees in the USA, indicating a diversity within Chinese trainees and a different acculturation level associated to it. In fact, Qi et al. (2019) pointed out that one needed to have achieved a certain level of acculturation to discover cultural gaps. However, the unique professional identity of Chinese trainees could also be influenced by the complex net of intersectionality (Qi et al., 2019; Zhao & Stone-Sabali, 2020). For example, several Chinese trainees experienced discriminations in that the clients demanded being transferred simply on the basis of Chinese trainees' non-Western last names or realising a trainee's foreign national status (Qi et al., 2019). Similarly, Zhao and Stone-Sabali (2020) shared that there was a possible tendency for non-native speakers to be perceived as less competent and less believable. These issues indicate a wider systemic and institutional problem around stereotype and discriminations. Thus, Qi et al. (2019) and Zhao and Stone-Sabali (2020) stressed the importance for the supervisors, trainees and training courses to recognise the distinctive frustrations and challenges for Chinese trainees in the training process rather than marginalising these issues as irrelevant.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Last but not least, although most papers lacked to explore the cultural strengths of Chinese trainees, Zhao-O'Brien (2014) noted that she reconnected to her culture by exploring and appreciating strengths arising from her culture differences. In particular, she spoke about the Confucian values, the Taoist philosophy, and the resilience and resourcefulness of the people in Chinese culture. She also learnt to use her “outsider” position to advantage and ask client questions, which the author described as liberating, and allowed her to make unique contributions to the profession. Similarly, Spira (2020) acknowledged a few distinctive strengths of Chinese trainees compared to other trainees. These include: eagerness for critical feedback, inherent capacity for empathy, and attunement to clients.

In summary, in Chinese culture, one tends to make sense of their identity in relation to others in their context. In the circumstance of Chinese trainees’ training in the West, their experience and professional identity appears to be associated with labels such as “minority”, “outsiders” and “strangers”, which indicates a possible wider systemic problem in that Chinese trainees may be stereotyped and discriminated due to their cultural differences.

Summary and limitations

A strength of this systematic review is that it has provided an overview of the current literature on the training experience of trainee psychologists from Chinese cultural backgrounds. In fact, this is the first systematic review around this
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

topic. Since most of the papers reviewed were case studies and reflective accounts, at times, they were difficult to be comprehensively evaluated by Tracey’s (2010) “big tent” criteria. This might lead to the quality of the papers appear varied. However, from a social constructionist perspective, all knowledge constructed through language are considered to share same weight regardless of their writing format. Therefore, the papers reviewed in this study are considered as equally important as articles written by experts, such as peer-reviewed papers.

Overall, the case studies and reflective accounts provided rich qualitative materials of the day-to-day struggles and challenges Chinese trainees face during their training, allowing their narrative to be heard and understood. Unsurprisingly, the review highlights a notable paucity of research into Chinese trainees’ training experience. Thus, it is challenging to establish whether these experiences in the systematic literature illustrate a wider phenomenon or are solely reflections of the trainees described in the studies.

For example, as the only article written by and about Chinese trainees clinical psychologist in the UK, Zhao-O'Brien (2014) provided an insightful account of the unique challenges she encountered during her training and how she made sense of her own culture and professional identity. Since her article is an individual reflection, the contents might be subjective and might not represent the experience of all trainees from Chinese culture in the UK. Moreover, the author used cognitive behavioural therapy (CBT) and psychodynamic models to formulate her experience, which perhaps helps readers from an individualistic culture such as
Great Britain to understand her experience, and to learn how to start conceptualising individuals from Chinese culture. However, by utilising these two models to formulate her own experience, it might individualise the problems she experienced, and taking less recognition on the broader contextual and systemic issues, especially as a minority trainee in the UK. Although Zhao O'Brien (2014) briefly mentioned the system and power matters, this was not hugely explored in her paper.

Additionally, Zhao and Stone-Sabali’s (2020) paper was a first-hand trainee’s account from Chinese cultural backgrounds; however, the paper was written in a third person narrative, and co-produced by the trainee and the supervisor. Thus, it is unclear how much the content might be influenced by the supervisor / supervisee power difference, which unfortunately was not reflected in the paper. Moreover, both Qi et al. (2019) and Zhao and Stone-Sabali (2020) offered useful practical recommendations to trainees, supervisors and training courses on multi-cultural supervisions. However, it was felt that these practical changes were mainly addressed to supervisors and training courses, and less addressed to Chinese trainees who might need to pro-actively reflect on their own cultural identity and on cultural gaps.

Further research would need to be carried out to determine whether the findings of these papers share similarities or differences.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Rationale for the research question

Despite the literature in the systematic review, there are clear gaps in research which the current study hopes to address. For example, there is very little published literature on training experience from the perspective of Chinese clinical psychology trainees. This leads to a strong rationale for research understanding the training experience of Chinese trainees in the field of clinical psychology in the UK. Moreover, although a few case studies, qualitative studies and reflective accounts shared their understanding on Chinese trainees’ experience, there is little consideration of the systemic considerations such as taken-for-granted discourses in a culture that contributes to Chinese trainees’ experience and how this might impact on their professional identity formation in the Western context. To meet these gaps in the research literature, I considered discourse analysis (DA) (Wetherell, Taylor, & Yates, 2001) to be an appropriate route to contribute towards these noted omissions within the literature. The current study aims to understand:

How do Chinese clinical psychology trainees construct their doctorate clinical psychology training in the UK? What discourses do they draw upon in relation to the constructions of their training?

In particular, How do they talk about of their working style, training style, reflection style at university; on placement(s), in supervision(s), in classroom(s), as well as with their peers, lecture(s), tutor(s), and supervisor(s)?
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

In responding to these questions, I have particularly attended to the research design and methodical procedures as a way to offer a general research narrative that provides insight into Chinese trainees’ construction of their DClinPsy training in the UK. The next chapter presents the methods by which this has been made feasible.
Chapter 3: Methodology

Overview

This chapter aims to describe the methodological rationale used for this research, including the reasons for applying a qualitative approach. Particular consideration will be given to a research design using Foucauldian discourse analysis (FDA) (Foucault, 1984). Details of ethical considerations, research participant and procedures for data collection and analysis will be presented. I will also explain the ways in which I have continued to hold a reflexive position to explore my personal views, preconceptions and other influences on this process.

A qualitative approach

The dominance of positivism in social sciences research paradigm (Thomas, 2017) can often privilege one version of knowledge (objective truth) over another (subjective, interpretive). This has often led mainstream psychology to make realist and universalist claims about the world (Burr, 2015). Miller and Glassner (2011) argue that a qualitative approach enables access to a person’s social world and a deeper understanding of how they make sense of their subjective world in the wider cultural and social context. Although it can be said that both qualitative and quantitative approaches can bring valuable contributions to our understanding of the reality, using qualitative method in the current project may provide rich information that may be lost in a quantitative method. Since this study aims to explore how Chinese trainees talk about their DClinPsy training in the UK, which
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

holds the notion that there is no objective or universal truth that we can identify, it aligns more with the qualitative approach. Furthermore, a qualitative approach can expand our understanding of areas where there is little existing knowledge (Smith, Jarman, & Osborn, 1999), which is particularly relevant to the current study given that there is little research exploring this topic area.

In light of my epistemological position (social constructionist) discussed in the first chapter, my understanding is that trainees from Chinese cultural backgrounds on the DClinPsy training will actively socially construct their worlds, including their beliefs and experiences of the training. My epistemological focus is that there are more concrete systems of power that govern systems of knowledge, such as the influence of policy, discipline and surveillance on the DClinPsy training environment. I wanted to study how trainees from Chinese cultural backgrounds construct meanings and actions from their training with respect to particular cultural, historical and social contexts. Thus, my research approach is designed to move closer to the participants’ constructions, especially in exploring how the power dynamic could change or alter how Chinese trainees see themselves or their sense of agency.

Research design

**Discourse analysis (DA)**

Discourse analysis is a qualitative research approach that is underpinned by a social constructionist epistemology (Nikander, 2006). Broadly speaking, there
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

are two major types of DA, one of which is named a bottom-up approach, referred to as discursive analysis, and the other a top-down approach, Foucauldian discourse analysis. Discursive analysis involves attending carefully to the text, especially linguistic techniques that people are using to construct a version of reality. This would not directly answer the research question which concentrates on discourses available to people from a particular culture. FDA, on the other hand, allows exploration of how discourses govern knowledges, actions and experiences, which fits better with the current study.

Foucauldian Discourse Analysis (FDA)

By applying a macro-social constructionist perspective, FDA poses questions about the relationship between discourse and what they may do (practices) and the material conditions within which such experiences may happen (Smith, 2008). It is believed that dominant discourses are adopted to favour those versions of social reality that maintain current power relations and social structures (Willig, 2008). Since more widespread discourses will privilege particular ways of living and viewing the world over others, it is inescapable that certain discourses or kinds of events will dominate, while others will get marginalised (Willig, 2013). Therefore, power can naturally function to dismiss marginalised knowledge by privileging dominant versions of social reality that validate existing social structures and power relationships (Smith, 2008). Thus, discourse in FDA is inherently associated with power and connected to what is allowed to act, say and be.
In other words, by analysing a person’s language by way of their discourses, an “array of subject positions” (Parker, 1994, p.245) is constructed which both facilitate and limit certain ways of viewing and being in the world for those people that take them up (Willig, 2013). Consequently, discourses can restrict and enable what can be talked about and by whom, when and where (Parker, 1992), which has impact on subjectivity since discourse ‘makes available a space for particular types of self to step into’ (Parker, 1992, p.9). Similarly, discourse can also constrain and allow what people can do or have done to them (Burr, 2015). Once engaged in the subject positions generated within, discourses enable for various sets of entitlements, responsibilities and possibilities for social action (Willig, 2013). Subsequently, the practice of “truths” within discourse sets standards for people, through which people shape their lives (Foucault, 1980).

However, Foucault (1978) argues that power and oppression are operational in society, continually and dynamically. He stresses in his writings on power and knowledge (Foucault, 1978): ‘where there is power, there is resistance’. Therefore, dominant discourses can be contested, and identities can be rebuilt and re-established. Nevertheless, this process of challenging the status quo via resistance raises conflict and defiance from social institutions (Burr, 2015). Oftentimes, to contest one kind of power is to replace it unendingly with another. Thus, by analysing discourses in FDA, researchers can understand experiences and the behaviour of individuals within social structures or practices by
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

deconstructing and reconstructing them and by understanding the dynamic of power in this process (Burr, 2015).

Challenges of taking a Foucauldian approach

It has been argued that FDA has limitations; it is well known that Foucault's concepts are contradictory and his ideas changed with time. Accordingly, it is important to be mindful about this when applying his works. Despite this, Foucault acknowledged that ‘all my books are little toolboxes’ (cited in Patton 1979, p.115). Hence, even though a detailed approach of FDA is not available, researchers have the versatility to use his tools as considered suitable.

Another main criticism of Foucault’s concepts is that he does not hold judgement about particular discourses against others. In some situations, it is inevitable that clinical psychologists construct judgements, for instance, when specific discourses may validate the practice of cultural stereotyping (McFarlane, 2014). Unquestionably, I consider myself in many ways as being against to the practice of any type of cultural stereotyping, and cultural racism. I will unescapably feel more emphatically about some discourses recognised in the analysis than others, because of my political stance. The friction between Foucault’s impartiality and my radical values, as adopted to this study, will be further reflected throughout the rest of the paper.

Rationale for FDA
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

In short, Foucault’s ideas remain appropriate to this study. This is because it considers the influence of cultural / historical contexts, examines how objects and people are constructed and positioned within discourses, and explores the implications these have on subjectivity and experience (Willig, 2008). Hence, the aim of FDA is to bring out and deconstruct the taken-for-granted social practices (Graham, 2005). The aim of this research is to explore discourses drawn upon by Chinese trainees in relation to the constructions of their DClinPsy training in the UK; the way their culture is positioned and whether these positionings have the potential to affect their practice during their training in the British societal, cultural and historical context, without placing a judgement upon them.

Ethical considerations

Ethical approval

Full ethical approval was granted by the University of Hertfordshire’s Health, Science, Engineering and Technology Ethics Committee with Delegated Authority (see Appendix D). The protocol number for this study is: LMS/PGT/UH/04205. NHS Ethics Committee approval was not needed, as a clinical population was not sought. These ethical considerations remain in line with the British Psychological Society’s Ethical Guidelines (BPS, 2014).

Informed consent
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Informed consent to take part in this study was ensured by providing a detailed information sheet (Appendix E). This information sheet was written in English and provided key information about the study, such as the purpose of the research, the intended method, information about confidentiality and any potential risks and benefits of participation. Participants were also offered chances to raise questions about the study either through email correspondence or verbally. They were informed of their right to withdraw from the study at any time without having to provide a reason and without any penalty. They were also asked to give their written consent (see Appendix F) prior to their interview.

Transparency

In the aforementioned information sheet, participants were informed of the motivations for the research, such as its contribution towards my doctoral qualification and my interest in Chinese culture and trainees’ training experience (see Appendix E). This information sheet was provided to participants prior to the initial screening, and discussed again with them at the beginning of the interview. In order to assure complete ethical transparency, participants were given an authorised, separate university contact for reporting any questions or apprehensions about the study, and they were also provided with the ethical clearance protocol number of the study.

Confidentiality
Participants’ names and other identifying information were removed from the write-up of the study and were replaced with unique identifier codes. They were informed that, besides the findings of this research study being written up in a doctoral thesis, they may also be disseminated via academic publication and presentation. Participants were ensured that they would not be identified in any report, publication or presentation, and that any quotes used would be fully anonymised.

**Data storage**

In line with the Data Protection Act 2018 (DPA 2018) and General Data Protection Regulation (GDPR), the anonymised participant data were stored securely. Data, including video files and transcriptions, were secured as password protected files on my laptop, which was also password protected. Information such as consent forms was stored safely in a separate password protected folder on my laptop. Participants were notified that video recordings would be deleted once my degree had been completed and any anonymised information would be retained for five years after thesis submission, afterwards data would be deleted.

**Potential distress and debriefing**

It was recognised that interviews exploring personal experience can be associated with distressing feelings. Hence, from the beginning it was mutually agreed that if I or the interviewee became distressed during the conversation then
we could take breaks or halt the discussion. Participants were advised that if they
felt any question in the interview distressing, they did not have to respond to it.
During the interview, I was mindful to any potential distress of all interviewees and
reacted appropriately, for instance by changing the direction of the questions if a
specific issue appeared to cause distress. At the end of the interview, an informal
verbal debrief was carried out. A formal debrief in the form of a participant debrief
sheet (see Appendix G) was emailed to each of them after the interview with a list
of organisations offering support.

Research participants

This section will provide information on the recruitment strategies for the
study, which will be followed by the inclusion and exclusion criteria used. I will then
provide an overview of details of the participants.

Recruitment

A purposive sampling approach (Ravitch & Carl, 2016) was considered
appropriate for this study since the inclusion and exclusion criteria listed what
requests to be identified for each participant, and therefore offered a sample of
individuals who were suitable and enthusiastic to take part by asset of experience
or knowledge (Bernard, 2017). Two strategies of purposive sampling were used in
this study: homogeneous sampling and snowball / chain sampling (Sharma, 2017).
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Primarily, the research study was advertised on the International Trainee Clinical Psychologist UK Facebook pages (see Appendix H). This is a group which was founded and run by international trainee clinical psychologists with the aim to provide peer support and a space to discuss matters related to DClinPsy training. Members include international DClinPsy trainees from diverse cultural backgrounds who are based in the UK. In order to expand recruitment, all DClinPsy training programmes were also contacted through emailing their administrators, who were sought for authorization and help in forwarding a written advertisement for participants to their trainees (see Appendix I).

As soon as a potential participant showed interest in partaking, the aforementioned participant information sheet was emailed to them providing an outline of the study, and they were also invited to complete a brief screening form (Appendix J) to confirm their suitability based on the inclusion and exclusion criteria. Once participants met these criteria, they were subsequently invited for the interview.

**Participant criteria**

The following inclusion and exclusion criteria (see Table 7) were adhered to. Participants needed to be above the age of 18, and attended a DClinPsy training course in the UK. Participant needed to at least have finished high school in the origin of their country in East-Asian region in order to ensure that they had sufficient exposure to Chinese culture. Furthermore, Esin et al. (2014) discussed
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

that sometimes conversations becoming “lost in translation” when communicating in a different language to that of the researcher. Since I am a Mandarin and English speaker, participants were invited to be fluent in English and/or Mandarin language.

Table 7: Inclusion and exclusion criteria for study

<table>
<thead>
<tr>
<th>Inclusion Criteria</th>
<th>Exclusion Criteria</th>
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<tbody>
<tr>
<td>Aged 18 or over</td>
<td>Non-English Speaking and/or Non-Mandarin Speaking</td>
</tr>
<tr>
<td>A trainee clinical psychologist on a DClinPsy course in the UK</td>
<td>Not from a Chinese cultural heritage</td>
</tr>
<tr>
<td>Have a Chinese cultural heritage from an East-Asian region (e.g., mainland China, Hong Kong, Taiwan, Singapore, Malaysia, etc.)</td>
<td>Did not finish high school in the origin of the country</td>
</tr>
<tr>
<td>Finished high school in the origin of the country</td>
<td>Not currently on a DClinPsy training course in the UK</td>
</tr>
<tr>
<td>Speak and read English and/or Mandarin</td>
<td></td>
</tr>
</tbody>
</table>

Participants

Overall, 14 potential participants expressed interest, and seven were recruited into the study upon successful screening. Within FDA, sample size is not usually a main problem as the interest is in the analytic objective and the data source (Starks & Trinidad, 2007) and the range of ways the language is used
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

(Potter & Wetherell, 2007). Thus, huge variations in language patterning can occur from a small sample size. In fact, a big sample size may lead to the analytic task becoming unmanageable rather than enriching the analytic results. For this research, the researcher deemed that seven participants were adequate to offer rich constructions needed for sufficient perspectival triangulation (Ravitch & Carl, 2016).

Out of the seven participants, three volunteered for the study as a result of the advertisement on the Facebook page, three volunteered following the email to DClinPsy training courses. One further participant was included in the study via word of mouth, who was known to the researcher before taking part in the study. It is acknowledged that the relationship between them and the researcher may have impacted on the way in which they answered questions during the research interview. However, following the interview, the researcher did not feel that the relationship had had a detrimental impact on the quality of data that was obtained. Within the sample of seven, six participants were female and one male with an age range of 25 to 31 years. All participants were born and completed high school in East-Asia, of which two were from Malaysia, four from Singapore and one from mainland China. They established that Chinese culture influenced their upbringing. The demographic data are summarised in Table 8. It is important to note that, for the purpose of protecting anonymity, participants’ age is specified in ranges.
Table 8: Demographic information.

<table>
<thead>
<tr>
<th>Identifier Code</th>
<th>Age range</th>
<th>Gender</th>
<th>Place of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant A</td>
<td>30-35</td>
<td>Female</td>
<td>Malaysia</td>
</tr>
<tr>
<td>Participant B</td>
<td>25-29</td>
<td>Female</td>
<td>Singapore</td>
</tr>
<tr>
<td>Participant C</td>
<td>25-29</td>
<td>Female</td>
<td>Singapore</td>
</tr>
<tr>
<td>Participant D</td>
<td>25-29</td>
<td>Female</td>
<td>Malaysia</td>
</tr>
<tr>
<td>Participant E</td>
<td>25-29</td>
<td>Female</td>
<td>Mainland China</td>
</tr>
<tr>
<td>Participant F</td>
<td>30-35</td>
<td>Male</td>
<td>Singapore</td>
</tr>
<tr>
<td>Participant G</td>
<td>25-29</td>
<td>Female</td>
<td>Singapore</td>
</tr>
</tbody>
</table>

On top of the information detailed in the abovementioned table, participants also provided information regarding the length of stay in the UK and the year of DClinPsy training they are in. This information was collected to consider participants’ potential acculturation level. It was thought by the researcher that adding these information to the above table, together with other demographic information, may breach the confidentiality of some of the participants. Therefore, the researcher decided not to present this information on the table. Nonetheless, it can be commented that participants’ time in the UK ranged from one to six years, and they were either towards the end of year one or year two of their training at the time of the interview.
Data collection

*Interview design*

Interviews were designed to take place digitally over ZOOM, a digital videotelephony platform. Telephone interviews and alternative digital platforms such as Skype and Microsoft Teams were also considered to collect data. These were deemed suitable approaches to conduct interviews due to the COVID-19 pandemic restrictions. It was also the preferred option for participants as they lived across England.

Semi-structured interview was regarded as suitable because it allows a flexible interview approach, which provides the chance to discover the depth and breadth of the study, while keeping a focused direction from beginning to end of the interview (Smith, 2008). Open-ended questions were employed to give the participants the chance to talk freely and openly about their perspectives. A semi-structured interview schedule was constructed by the researcher and reviewed by the primary supervisor (see Appendix K). Consultation and feedback from two pilot interviews were sought. This was useful in enabling me to learn about my own interviewing style and the process of participant answering these questions.

The interview questions were focused on the areas related to the research question, such as:
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

- participants’ cultural background, e.g., their upbringing and educational journey which may have influenced their cultural scripts, cultural representations, and cultural patterns and / or expressions
- participants’ decision to pursue DClinPsy training in the UK and their training experience, e.g., their working, training, reflection styles on placement(s), in supervision(s), in classroom(s), as well as with their peers, tutor(s), and / or supervisor(s).

The entire process of the interview was deemed to be a reflective pursuit. In accordance with recommendations by Smith et al. (2008), the interview was carried out flexibly so as to enable participants’ perspectives to unfold. Furthermore, at the end of the interview, participants were invited to add any further comments regarding their cultural backgrounds and their DClinPsy training which may not have been discussed already in the interview. They were also invited to share their reflections about the interview.

**Pilot interviews**

The reason of conducting a pilot was to be mindful of assumptions and biased views, and to be conscious of any problems with the interview schedule (Janghorban, 2014). Two pilot interviews were conducted and revised with the supervisors; some minor amendments were recommended in relation to prompts,
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

aside from that, no major amendments were needed. The two interviews have not been used as part of the total data gathered.

**Interview procedure**

All participants attended the interview via ZOOM. They were informed that the interview would last up to 60 minutes; this consisted of an introduction of the interview, the main interview itself, and finally a verbal debrief. Verbal consent was sought and received for the recording of the interview, confidentiality and right to withdraw. After which, the interview was video-recorded through the in-build function within ZOOM platform. Once the interviews started, the interview schedule was pursued to make certain a focus was upheld; however, the interactions in the interview were kept as natural as possible. Upon completion of the interview, the aforementioned debrief form (see Appendix G) was emailed to the participant.

**Alternative data**

Foucault (1978) stated that FDA could be applied to any kind of text such as historical documents, rules, descriptions of institutional practice, and autobiographical accounts and personal diaries. Thus, prior to attending the interview, participants were invited to bring their notes, journals, diary entries to name a few to the interview. They were informed that these materials, upon receiving consent, could be used as data in this research. One participant brought
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

their diary entries; however, the material was not related to the researched topic. All other participants did not choose to share their training experience through these means.

Data analysis

Transcription

I transcribed all interviews verbatim, as it was felt important as a researcher to remain close to the data. In order to ensure the accuracy of the transcription, pause, laughter, interruptions, accent of speech, non-audible speech, overlapping conversation, and parodies of others were transcribed (Jefferson, 2004). A sample of a transcript can be found in Appendix L. Each interview was listened to and re-listened to after it was transcribed (Olbertz-Siitonen, 2018). This can be considered as part of the initial phase of FDA which involves familiarising oneself with the data.

Analytic process: Willig’s six stages

The data analysis was mainly guided by Willig’s (2013) six stages of FDA for identifying discourses. It is important to mention that these six stages do not comprise a full analysis in the Foucauldian sense (Willig, 2013). For instance, Willig’s (2013) stages do not attend to Foucault’s discussion of the historical and evolitional discursive formations over time (p. 115). However, Willig’s stages offer a helpful framework within which the researcher can use to recognise discursive
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

materials and subject positionings embedded within a conversation and study the effects they may have on subjectivity and practice (Willig, 2013). The steps taken in the analysis are summarised in Table 9 and see Appendix M for extracts of notes made on the transcript and a process of constructing discourses.

Table 9: Willig’s six stages of data analysis

<table>
<thead>
<tr>
<th>Stage</th>
<th>Question</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Discursive constructions</td>
<td>How are the discursive objects constructed through language? What type of object is being constructed?</td>
<td>Direct and indirect references to the objects were read and coloured line by line; notes were jotted down to sketch collections of statements recognised. These statements were then clustered, revised and rearranged reflecting discourses.</td>
</tr>
<tr>
<td>2. Discourses</td>
<td>What wider discourses are drawn upon?</td>
<td>Notes were revised and additional notes were written down around variation in the assorted constructions and whether they were situated within wider discourses.</td>
</tr>
<tr>
<td>3. Action Orientation</td>
<td>What do these constructions achieve? What is gained from deploying them here? What are their functions?</td>
<td>Discourses were examined and possible benefits and functions of the constructions were documented.</td>
</tr>
<tr>
<td>4. Positioning</td>
<td>What subject positions are made available by these constructions?</td>
<td>Notes regarding the subject positions made accessible from the discursive constructions were jotted down and studied.</td>
</tr>
<tr>
<td>5. Practice</td>
<td>What possibilities for actions are mapped out by these constructions?</td>
<td>The restrictions and facilitations of what can be said or done from these subject positions were recorded respectively.</td>
</tr>
</tbody>
</table>
### 6. Subjectivity

<table>
<thead>
<tr>
<th>What can potentially be felt, thought and experienced from the available subject positions?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The discursive constructions of the objects and the subject positions were re-examined, jotting down any feelings, or thoughts participants experienced.</td>
</tr>
</tbody>
</table>

**Stage one: Discursive constructions.** This step involved highlighting within each transcription every time Chinese cultural backgrounds and training setting in the UK were constructed. As such, each transcript was read and re-read at least three times. I highlighted all direct and indirect references in the data. For example, in addition to explicit references to “Chinese culture”, there were also implicit references such as “at home”, “in my family”, “us” where the implication of these being Chinese culture was clear.

**Stage two: Discourses.** After highlighting the segments of text that constructed the discursive objects, I studied the variations between constructions (Willig, 2013). The same discursive object may be constructed in assorted ways and this allowed me to place discursive objects within wider discourses (Willig, 2013). For example, Chinese trainees who appeared quiet were sometimes constructed as “not engaging in the groups”. This indicated wider discourses such as “one needs to be ‘loud’ to demonstrate that they engage in the groups”.

**Stage three: Action orientation.** This stage of analysis consisted of an exploration into the productiveness of discourse (Foucault, 1980); which ways of
understanding Chinese cultural backgrounds were enabled, or constrained by the various ways it was constructed within the dialogue at different times (Willig, 2013). For example, by constructing Chinese trainees’ cultural perspective as invisible, it is implied that the dominant cultural perspective is visible, which favours the dominant cultural perspectives as the norm and disadvantages the othered Chinese cultural perspectives.

**Stage four: Positionings.** The idea of subject positioning is associated with the notion that different discourses position people in a distinctive way, associated with varied level of power (Tuominen, 1997). One could either position themselves or be positioned by others, with these positions being relational (van Langenhove & Harr, 1999). For example, one can be positioned as powerful in relation to powerless others (van Langenhove & Harr, 1999), which ties in with the concept of serviceable identity and linking and differentiation mentioned in the first chapter. For instance, by positioning Western culture as attentive to democracy and moral values, something is implied about the moral position of Chinese culture. The analysis thus explored how Chinese trainees were positioned in relation to others, and what specific rights and obligations were drawn on.

**Stage five: Practice.** Stage five involves how the identified discourses relate to practice (Willig, 2013), considering what can (or cannot) be vocalised or done as a result of the different positionings. An example could be, when Chinese
trainees are perceived as not participating in the classroom, this could be in response to the discourse of “the other” that they have been subjected to. And, in turn, Chinese trainees may keep their perspectives to themselves as they feel their views were, from the position of “the other”, not relevant.

**Stage six: Subjectivity.** This stage considers the subjectivity in discourse. It refers to the effects that various subject positions may have on people’s subjective experiences (Willig, 2013). I investigated what Chinese trainees could possibly feel, think and experience from within various subject positions. For example, when Chinese trainees were constructed as “the other”, they may feel isolated, excluded, and/or frustrated.

**Self-reflection and reflexivity**

As a final year DClinPsy student, I am conscious that I have a particular interest in cultural-related decolonisation in psychology. I am aware that having been a trainee from a Chinese cultural background, I may have preconceived ideas and assumptions about what participants may have experienced. My positionality located me as an “insider” researcher, which can be an influential position, as it allows me to step into participants’ shoes and become closer to their subtle reactions and lived experiences (Cooper & Rogers, 2014). Thus, this permitted the building of solid foundations for rich and thick descriptions to be produced (Tracy, 2010).
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

However, it could be argued that my “insider” researcher position sometimes may be perceived as a disadvantage, as I may be too alike or too culturally intimate to the participants of this study. For example, my position may sight me on certain taken-for-granted discourses that I share with the participants. Sometimes, it was anticipated by my participants that I knew the ideas they talked about, thus, certain particular features of the constructions were not expanded upon. My method in following interactions was to position myself as curious and unknown to the constructions, probing for clarification in order to draw out participant’s meanings and to ensure that their talk was prioritised.

During interviewing and analysis, I sometimes became immersed in the subjectivities of the interviewees, wondering “am I hearing myself talking here?” This was difficult and left me with feelings of pain, isolation, frustration and confusion. In a deliberate effort to remain mindful of my “insider researcher” position and to sustain a level of objectivity, I have challenged myself through conversations with peers; through discussing excerpts of transcripts with supervisors and my research tutor. I have also sought feedback from a Chinese consultant who was born and bred in mainland China and practises psychodynamic psychotherapy in the UK to ensure that my processes are transparent throughout; they followed the same confidentiality and ethical procedures.

Furthermore, I have attempted to bracket my experiences by using a reflexive diary (see Appendix A). My diary enabled me to notice ways in which I
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

influence the co-construction of discourses; the particular aspects of the interview I was drawn to; the identities I brought to the interview (such as researcher, female, clinician, student, trainee); and the role this plays in the co-construction of the discourses discussed. Therefore, I appreciate that this study is an active learning process for me as a researcher and, hopefully, helpful for the reader in considering their own discourses. With these in mind, I now will move on to present the findings of this research.
Overview

This chapter presents the analysis and interpretation of the data obtained from the interviews with the clinical psychology trainees from Chinese cultural backgrounds. The research question concerns Chinese trainees' construction of their doctorate clinical psychology training in the UK through available discourses they draw upon. I will adopt Willig's (2013) framework as a general orientation to present the discourses. Each discourse will be illustrated with direct quotes from transcripts. Whilst the discourses are presented individually, in practice, there is probably much overlap and some tensions between them. Thus, it is crucial not to regard these discourses independently. Associations will be made to the literature and to other discourses in this analysis. Across the discourses, when speaking about the concerns of their training, the participants' own terminology was employed. Within the transcripts, references to the participant number and page number will be indicated as “P3: 13-16” (Participant 3: page 13-16)

Discourse 1: Competency in expressing oneself

I think that the biggest thing I noticed when I first come in my first semester was I am not very comfortable vocalising my internal thoughts. Ehm, because in Chinese culture we always, at least I think, that we're brought up in an environment that let the elder speak or let people who are more
knowledgeable, have more power, to talk. And if you are the youngest or younger ones just keep quiet, because it’s not your position to talk… And having that mindset or that comfort level, coming in into the course in the UK, I was suddenly throwing into the situation I feel very pressured to speak, ehm, to ask questions in class. I am not comfortable at all… I mean the locals will ask things like “why, why didn’t you contribute? I am sure that you have lot of knowledge, you could contribute, but you didn’t contribute”. And I don’t know, I don’t feel comfortable explaining to them as well. I can explain to one or two, but after that one or two I don’t feel comfortable explaining. So I think that’s one of the biggest contrasts I’ve seen. P3: 77-86

The above quote illustrates the common points made by participants in relation to the discourse of “competency in expressing oneself”. All participants explicitly and / or implicitly constructed their cultural backgrounds in relation to behaviours, specifically, behaviours considered as “a problem” in the training context. For example, participants referred to “struggling to ask questions in class” (P1: 232-233; P3: 82-83), “having difficulties to openly speak about their feelings and thoughts” (P1: 230-234; P3: 77-78; P5: 190; P6: 156-157), “not speaking first” in the class (P2: 98-99; P4:196-197; P7: 303-304), and “having trouble to advocate” (P4: 234). They constructed speaking up and sharing emotions and thoughts in the classroom as a “pressure” (P1: 230-231; P3: 249; P4: 234; P7: 146) because they were not as “open about their feelings and thoughts” as the locals.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

... constantly even in the lecture room, people ask about feelings and thinking, they (the locals) are quite open and talk about it in the class and I noticed myself being very quiet in a lot of situations. Because I was like, I don’t have any thinking and I don’t have any feelings you know, and and in some, some lecture, they would be like: “why don’t you have any feelings? Why don’t you have any thinkings? and why you been very quiet?” you know, and yeah so it’s quite a lot of difference like if you are in Asia, a lot of people actually not willing to speak and not really willing to ask a lot of question. But here, people constant ask questions and people speak. They kind of makes me become that I am very quiet. P1: 298-233

Moreover, participants referred to a “certain” format and structure of engaging and reflecting in the classroom, which may have differed from their own approach. They referred to being perceived as “quiet”, “not engaging” and “not participative” in group interactions if they could not follow this particular format and structure:

I think being in a course kind of environment, you know, you are expected to engage on the go, so if someone tell you something, you are supposed to ask questions about it, you are supposed to share your thoughts and opinions immediately kind of thing. P2: 157-159
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Ehm I think I tend to not speak up very much, ehm, I think often I would only speak up… when I have something to say that I thought was really important, I felt no-one else was thinking about, and no-one else would think about you know… ehm and sometimes that could be interpreted slightly differently as like, you know, a lack of engagement I suppose. P2: 98-102

… I have been working and kind of studying in the UK for a couple of years now. And so I am familiar with how reflections do tend to take place in the UK. P7: 200-202

I feel that I’m very pragmatic when it comes to reflections… I think it's good to be aware of what you're thinking and feeling. I think that's definitely very important… So so I think sometimes in terms of the racial, when speaking about racial matters in in the course, I feel that a lot of the trainees are stuck in that place where they are just ehm talking about how it's unjust, how it’s unfair, how things should be changed. And I think there's a lot of dwelling on that unhappiness, but I think to me pragmatically I feel… what's what's next, and and I feel like sometimes people don't progress to that and we just get stuck in this place of expressing our unhappiness and opinions. So it's quite frustrating for me sometimes. But that's one of the things that I feel hard to express because I think to them, the idea of asserting their opinions is very important. Like for them, I feel like the act of asserting their stand doesn't serve a function any more than just, you know, letting themselves
and others people be aware of where they stand. But for me it’s very different. So I guess this idea about pragmatism, … if I say certain things you know it should be for (a) function. I’m not saying it just for the sake of saying it. P6: 201-227

The above constructions are reflective of a wider DClinPsy training practice in the UK, whereby certain classroom behaviours are explicitly and implicitly expected in order to demonstrate one’s competency and engagement. These may include everyone being required to actively and openly vocalise their thoughts and feelings; everyone needing to speak up and ask questions promptly; and everyone needing to share their reflections explicitly. These institutional norms and expectations of what are prevalent in the DClinPsy training environment in the UK appear to clash with the normative ideals of how to interact in a group setting in Chinese culture. Namely, in Chinese culture, instead of “speaking up and asking questions promptly” in a group, one would let the senior talk first (P3: 79-81) as a way of showing respect, which is a treasured humble action in Chinese culture (Shi, 2013; Yang et al, 2011). Moreover, the prevalent norms and expectations of “openly and actively vocalising one’s thoughts and feelings” in the DClinPsy training appear to clash with the normative public display of emotions, thoughts and reflections in Chinese culture. As mentioned previously, in Chinese culture, emotions, thoughts and reflections are usually more internal processes and less openly displayed in public (Ma, 2006).
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

In the abovementioned taken-for-granted practice in the DClinPsy training, Chinese trainees cultural practice may be viewed as “lacking overt expression of thoughts and feelings”, and considered somehow as “problematic”. By generating the aforementioned discursive constructions, trainees from Chinese cultural backgrounds are portrayed as “not assertive”, “incompetent” or “deficit”, if their behaviour of interactions and engagement may not align with the norms in the training environment within the dominant British culture values (Department for Education, 2014) mentioned in the first chapter.

Whilst trainees’ ability of demonstrating the competencies such as reflection and engagement during the DClinPsy training is important, a danger may arise, however, to promote a “particular” way of demonstrating these competencies, and disregarding alternative forms of participation and reflection from a different cultural context. For example, whilst Chinese trainees might appear quiet externally in the classroom, participants shared that their internal cognitive process was active:

… Part of the reason I don’t speak out because I’m trying to understand their perspective first before even saying anything about my perspective. Ehm, so when I listen I think often there is a lot going through my head, ehm, and I am trying to see through what might be useful to say, what might not be useful to say. And I think often that just means that most things don’t get
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

said… and I think, quite often that’s interpreted as: not being participative or not being engaged with the conversation. P2: 142-146

By constructing and considering their quietness and their behaviour of needing to go away and think silently as inappropriate, the attributes of problem and responsibility for change might be located within Chinese trainees, whilst disregarding wider responsibility. The external factors such as the power dynamic in peer relationships, organisational and systemic factors may be overlooked, which will be explored further in the following discourses.

What subject positions, practice do these constructions offer?

The above interweaving discursive constructions, linked with wider discourses and action orientations, define certain subject positions. Firstly, participants may be positioned by the wider discourse as “doing something wrong” and “being passive” (P2:145-146). Moreover, participants’ talk of how the locals frequent enquiring about “why you are quiet” demonstrated ambivalence positioning that those who do not follow the taken-for-granted norms in the training environment is not “conforming to a standard”. This has the potential to further disempower participants as they may view themselves as incompetent for their “atypical behaviour” perceived in the training environment. These subject positions limit and facilitate certain behaviours. For instance, Chinese trainees may change, adapt and try to fit-in into more “accepted” behaviours in their training environment, which may close down the opportunity for them and the locals to appreciate the
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

diversity of learning and reflection styles from different cultural backgrounds. Moreover, the above discursive constructions may open up the risk of Chinese trainees to be exposed to micro-aggressions, for example, being frequently questioned why they do not speak up, when they are perceived as not fitting with the norms of the training environment. Last but not least, these discursive constructions may close down the opportunity for the DClinPSy training courses to adapt, or to consider change in order to create a training space that is culturally sensitive and culturally friendly, which will be discussed further in the clinical implication section of the discussion chapter.

What consequences do these subject positions and practices have?

Following these subject positions, it is understandable that Chinese trainees considered sharing and speaking up in the classroom as a “social obligation” (P2: 221), which made them feel “uncomfortable” and “stressed” (P4: 235; P3: 102). They described a frustration of needing to recurrently explain and justify their perceived quietness (P3: 85-86), because, if they do not explain themselves, people may misunderstand them (P2: 145; P3: 257-258). Some participants internalised the perceived incompetency of “I don’t have any thinking and I don’t have any feelings” (P1: 299-230); or considered that they take too long time to process information (P2: 143-145). This led them to consider their culture as a barrier, because they felt that their culture did not prepare them for “the competency” of interactions in the UK training context.
Discourse 2: Challenges in maintaining social connection

Here (in the UK) it’s a bit hard for you to make the judgement as well on whether they are genuine nice or they just try to be nice... Eh, so that took me a while to get my head around that. But in general, people are really nice here, eh: and expectation on nice is quite different, like if people in Asia that are very nice to you, it’s so easy and you’ll click together and become friends and everything, but people here are generally nice but it doesn’t mean they can connect with you. It’s just more like, they are cultured in a way that they need to be nice to people, I guess that makes me feel a bit different. P1: 264-269

The above quote illustrates the common points made by participants in relation to the discourse of “challenges in maintaining social connection”. Four participants explicitly and / or implicitly constructed their cultural backgrounds in relation to difficulties of connecting socially with their peers outside the training environment. They described the locals as “nice”, “rounded”, and “polite” (P1: 266; P3: 231-232; P4: 124; P6: 309), which was valued as a way of relating to others in the UK. Nonetheless, participants referred to being ‘unsure’ and “confused” about how to understand this niceness, roundedness and politeness (P1: 265-267; P3: 234-236; P4: 204). Because they found it difficult to make sense of whether the locals are “genuinely nice”, or whether they are conditioned to be nice and polite
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

by their culture. Participants referred to a possible lack of shared interests with their peers. They described that to be able for them to bond socially with the locals, it was common to socialise through going to the pub or doing the pub quiz:

So I guess, maybe first thing (challenges I have experienced) would be like socially, in terms of getting along with the other course mate. And you know, the kind of humour or the kind of things that we pay attention to and we want to talk about. So it’s a bit harder to say like we are friends-friends in that sense. P4: 202-204

I guess that just boils down to having different interests and different, I guess, ways of approaching each other. So for example, I don't drink, but drinking is something that's quite important to build social connections here. So I guess that kinda exclude me from certain things I can go. But it's something that I don't enjoy, so I don't feel the need to have to pull myself do it, unless there's a reason why I want to go. So that kind of exclude me from certain things that they do. And I know that, ehm, the rest of my course don't do it to be exclusive, but that's just, that's just the way that they know and the way that's normal for them to build connections. P6: 294-299

These constructions are reflective of the wider discourses that socialising involves alcohol in the UK (Holmes et al, 2016), which differs from the social scenes in Chinese culture, whereby people tend to connect and bond with each
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

other over cooking food and shared meals (P5: 55-57; P6: 320-321; P4: 229-230).

From a social constructionist perspective, discourses are a set of assumptions that describe a version of reality (Willig, 2008). The above discursive constructions reflect the discourse of “challenges in maintaining social connections”, which portrays Chinese trainees as “not having similar interests”, “struggling to bond with the locals” and “having difficulties to fit-in” into the local social scene, if they could not integrate with the peers within the social drinking culture in Britain.

By constructing the British politeness in this way, the function of British politeness appears to demonstrate a quality of niceness, which is the preferred interpersonal behaviour in the UK. However, this politeness may prevent bonding with others. Participants referred to a sense of reservedness that this British politeness creates, which keeps personal bonding at a certain distance (P4: 202-204; P1: 268-269). They struggled to work out where they relationally stand with the locals, as they could not always ascertain what might be socially acceptable and what might not be. Consequently, perhaps often alcohol beverages and drinking, or meeting in the pubs appear to be used as a possible way of reducing the interpersonal distance, loosening the reservedness, and building a closer bonding. In other words, if an individual does not socialise in this form (i.e., through the drinking), there might be difficulties to connect with the locals (i.e., moving from being polite to bonding closely). By constructing the local drinking culture in this way, it creates a possibility that if Chinese trainees do not participate in this social
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

scene, the reality is there might be limited other informal options for them to bond socially with the locals.

**What subject positions, practice do these constructions offer?**

The constructed drinking culture in the UK may implicitly position the locals as “ingroup”, and the trainees from Chinese backgrounds who do not socialise through drinking as the “outgroup”, a practice that could be potentially rejecting and unintentionally excluding. These positioning, grounded on the taken-for-granted socialising practices in the social context, may be considered as a form of departing “us” and “them”, which, in turn, influences Chinese trainees’ practices. For example, due to the cultural gaps in social interaction practices, Chinese trainees may not join the local socialising events that involve alcohol consumption. They may decline the invites to these events, hence miss the opportunities to get to know their peers. This constrains the opportunities for Chinese trainees to connect with their peers socially outside the training environment. As a result, Chinese trainees naturally may get fewer invites to social events that involve alcohol, which then perpetuates a vicious cycle and threatens inclusion.

**What consequences do these subject positions and practices have?**

 Understandably, Chinese trainees felt confused, isolated, left-out and covertly excluded. Even though they were aware that the locals were not
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

intentionally excluding them, yet they still found difficult to form a close bond with the locals:

Ehm, so I think their idea of social events like, you know, drinking, going for alcohol, ehm like having pub quizzes, is just not something that I would see as fun or so being sociable. I tend to pull myself out of it. So it just like this cycle of inviting, I pull myself out and I feel isolated, it's harder to get in the next time to all the topics that they talked about. P4: 223-226

… I wouldn't say that that makes me feel isolated, I feel like, I've kind of accepted that this is just what it is. I'm not being excluded on purpose, I'm not distancing myself from on purpose, but, I will just never feel that sense of belonging compared to somebody else who is comfortable in groups who has the same views who pursue the same things. P6: 387-390

Discourse 3: Problems arising from being the cultural other

Ehm… What does that (being the only trainee from Chinese cultural backgrounds on my cohort) mean? It means different, like things I bring to the class would be quite different, and it’s quite anxiety-provoking as well. Because when you share something it’s quite different to other people, it makes you wonder a lot things, and sometimes that you, you feel whether
you gonna get attacked? I think it’s the questions I have. …when talk about attachment theory, we talk about trauma and anything else, it just makes me feel like, “is that my childhood considered as traumatic experience?” But I don’t view that way. Ehm…I guess that makes me feel like “is it just me, or?” I guess by being the only one, you can’t say these questions, or perhaps it was just me. So I guess that’s where the self-critical thinking coming. Yeah. When you don’t have anyone to, to, to normalise your feeling when you feel quite alone, you would (be) like “oh maybe it’s just me”. P1: 168-176

The above quote illustrates the common points made by participants in relation to the discourse of “problems arising from being the cultural other”. All participants associated their Chinese cultural backgrounds with a self- and socially constructed identity as “minority” in the DClinPsy training (P1: 162; P2: 125-126; P3: 75; P4: 106-107; P5: 117; P6: 141; P7: 141) and their cultural perspectives being “invisible”. Participants describe that there is a general lack of awareness of cultural differences in the DClinPsy training environment, such as towards Chinese culture (P2: 123; P3: 159; P5: 216; P6: 148-149). They associate their “minority” status with increased insight in cultural differences compared to the locals (P2: 125-127, P5: 213-217, P6: 225). In particular, participants referred to “having different perspectives” from the locals (P1: 169; P2: 104; P3: 276; P4: 15-18; P5: 266; P6: 368; P7: 252-259), and “not having a shared understanding” with the
dominant views (P1: 175; P2: 203). They referred to a difficulty in voicing their cultural perspectives and values, as their views seem not to be “understood”, “appreciated”, and / or “genuinely welcomed” (P3: 159; P4: 244; P5: 216-217). These lead them to consider their perspective as “not relevant” or “not important” (P1: 174-176; P7: 307):

I think, ehm, I think sometimes it’s, it feels a bit difficult to share some of the perspectives or sorts ehm which might not align with the dominant narrative… (if) I have a point, I try to make myself do (share) anyway, because, you know, I feel like maybe other people might benefit from seeing a different perspective, but then because it’s really hard to get some of these ideas across, ehm I guess it is not really reinforcing for me to do it? P2: 120-123

… I think the first thought that comes in is that people don't care anyway, or that even if they do it's like just very cursory, so what's the point of of even trying. And then the other bit is that I get very comfortable with where I am now and what's the point of trying to to change or to to make a noise? …I'm just happy to be a state of cool and to live in the shadows. P4: 244-247

Additionally, participants referred to having limited space and place to discuss cultural differences if they do not bring up the conversation in the class, as cultural difference appears not be a priority for discussion in the DClinPsy training
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

environment (P2: 166-168; P3: 3). Yet, participants described a willingness to share their cultural perspectives if the locals are keen to explore (P2: 166-168; P3: 239-410; P5: 212-217; P7: 126-129):

… I know moments where my identity as a Chinese trainee has ever stood out. So I think it's probably one of those things where you know that just people have not noticed, or not brought up? Ehmm, maybe occasionally once in a while where we have… our lectures on SOCIAL GRACES, … and we talk about it. People are like, well that's really interesting like your experiences, but I think the rest of the time it's like, you know, it's more like a blindness to our culture, rather than something that's become a problem, or something that's interesting, or something that's talked about. P5: 212-217

I would say that, that my cultural background hasn't always been the first thing I would think of when, or like the first concern that I have I guess, in doing training, going to placements, or going for classes. But I guess ehmm it factors into the differences that I have, compared to people in the course, and that's when I guess the focus is on the differences compared to me being Chinese if that makes sense. P6: 132-136

… not that I feel like I needed, you know, to talk to them about it (my culture), you know, or there's a huge things that I needed to get out of my chest
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

anything but, ehm you know it’s just what I was saying earlier sometimes you notice the differences and it’s nice to talk about it. P2: 166-168

Moreover, Chinese trainees described that, although they may be self- and socially constructed as “minority” in the UK, they referred to how this contradicts with their perception of themselves as members of the “cultural majority”:

… Ehm, I guess because you know you grew up in a country where you’re the cultural majority or ethnic ethnic majority. Ehm, so you don't experience being the minority or the other? P5: 119-123

… I think it’s just that idea that practically as a Chinese ehm there is a sense that we are not the minority. I think maybe because, you know, there is China which is a huge country and you know there's also in a way they (are) a global power in some way I think? So, you know, it’s a bit of a contradiction between how can you be a minority from a country with such a great influence. P2: 232-235

The discursive constructions discussed here concern an apparent blindness towards Chinese culture in the DClinPsy training. Here Chinese trainees are constructed as the “visible minority” by race due to limited number of racial minorities on the DClinPsy training, but their cultural perspectives may be “invisible” and “not heard”, which reflects the wider discourse of being a minority in the UK.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

This may explain literature that suggests that the voice of marginalised groups in the UK is often silenced and rarely heard (Sullivan, 2014).

In fact, invisibility often benefits people from the dominant culture. Since norms are typically grounded on prevailing dominant culture, as “normal is unmarked, unnoticed…” (Brighenti, 2007, p. 326). For people from dominant culture, invisibility strengthens their norms, makes their privilege uncontested and undoubted, which enables them to preserve their power and supremacy (Simpson & Lewis, 2005). Thus, by constructing locals’ cultural blindness, the dominant British perspectives and values may be more visible, acknowledged and accepted. As a result, the attribution of responsibility is placed on Chinese trainees to raise “different” cultural views, whilst the locals may not feel the urge to bring up these conversations.

Moreover, invisibility usually handicaps people from minority groups by implicitly or explicitly rejecting their voice, reality and recognition (Simpson & Lewis, 2005). Thus, by constructing the Chinese trainees’ voice as invisible, the attribution of responsibility is partially placed on the locals. For example, participants described that there is generally a lack of acknowledgement and validation from their peers in response to their shared views. This silent non-responsive action from their peers may be considered as an implicit way of denying Chinese trainees' voice and perspectives and may make Chinese trainees hesitant to share more (P1: 168-176; P4: 244-247; P6 305-312):
I guess there’s this uncertainty of how they (the locals) might respond or think about me? And I think with the with the context that I think people here are quite vocal when it comes to (their) own views, but they can be quite reserved when, ehm, in response to other people. So there may be a chance that I might offend somebody for example but they wouldn't tell me, just because, ehm you know, it’s in their culture to, ehm, kind of not be confrontational with another person, especially I guess I feel that in our course that is quite a running theme. People are quite considerate about how other people feel, and so I feel like if I offended somebody, it’ll be nice to know about it. I think compared to if I offended somebody and then nobody tells me and it's all “hush hush”, that would make me feel very uncertain about whether I should or whether I can see certain things. P6: 305-312

What subject positions, practice do these constructions offer?

The above interlinking discursive constructions position the dominant perspectives in the Western culture as the “norm” and “superior”, and position the locals as privileged as they do not have to consider issues and impacts associated with cultural difference. The locals also do not need to worry about their views being unheard, or not being taken seriously. This privilege of culture blindness positions the “minority” perspectives from Chinese culture as “inferior”, and Chinese trainees as the “cultural other”, who are responsible one for advocating
their differences. These positionings may open up the implicit or explicit expectation of “minorities” to integrate to the prevailing norms of a society so as to “restore normality” because their culture is perceived as inferior, defective or inadequate (Burr, 2015). The above constructions may also foster doubts in Chinese trainees as to whether the locals are sincerely interested in embracing culture differences. These doubts may close down their eagernessness to raise their cultural views and orientations. As a result, Chinese trainees may suppress their views, “shrink back”, “being in the shadow” and “brush it away” in the training environment, or decide to find other places to talk about their culture (P2: 123-124; P3: 159-161; P4: 249-251). By doing so, Chinese trainees close down the opportunity for their cultural perspectives to be recognised and valued:

Honesty, I think we just brush it away, ehm and we just get along, get on and just not think so much about it? Ehm because, yeah, that just seems like the easiest thing to do? And something that has the least investment in and I mean, you don't get disappointed because you're not doing anything to change things. P4: 249-251

The above action orientations, positionings and practices appear to be related to the aforementioned discourse of “competency in expressing oneself”, where trainees from Chinese cultural backgrounds were constructed as “struggling” to share their thoughts and feelings in the training environment, which in fact could partially due to fear of an actual invalidation and possible misinterpretations of their
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

cultural perspectives by their peers. However, these discursive constructions may sustain a vicious cycle of cultural gaps. For instance, the provoked hesitation of the Chinese trainees to voice their cultural differences may further contribute to the lack of formal and informal explorations on cultural differences in the DClinPsy training environment. This in turn may perpetuate the local’s cultural blindness, and limit the chances of resolving certain issues related to cultural differences, such as stereotyping and inappropriate cultural assumptions towards Chinese culture. In fact, participants named a few inappropriate cultural assumptions including, misassumptions about Chinese emotions that were perceived by the locals as “stoic” and “cold” (P3: 88); and possible mis-conceptualisation of childhood (from Chinese cultures) as “traumatic experience” (P1: 173). These forms of cultural unawareness become a common sign for stereotyping.

… I want to say that it’s quite hard… studying overseas ehm in in a culture that I’m the minority or, people don’t know Chinese culture enough or they know the stereotypical thing about Chinese, like I am supposed to be good at maths, which I got a lot people ask me, “you are supposed to be good at stats”, no heh heh. P3: 74-77

What consequences do these subject positions and practices have?

Unsurprisingly, trainees from Chinese cultural backgrounds felt disheartened, powerless and let-down when their cultural perspectives and their
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

different life experiences were not understood and appreciated. They felt frustrated and alone with regard to the apparent blindness to their culture. Whilst they felt being under pressure to represent their culture, race, and / or ethnic group and bring up the cultural talk, the lack of solidarities from their cohort (P6: 379-380) and a lack of response to their shared views made them feel unsafe, anxious and vulnerable to share more (P1: 169; P4: 240-241). They expressed that, although it would be nice to talk about their cultural perspectives, they did not feel that they had people around them to have these conversations:

… I think sometimes it’s just nice to have people who, you know, you feel like it’s easier to have these conversations about things and changes you noticing, or differences you noticing. And being the only one sort of Chinese student… in the cohort means, you don’t really have someone to do that with? And I guess I’ve found myself having those conversation with other people then. Yeah and I think also, I mean on the bright side I suppose, it also gives me new perspectives on what it means to be sort of a minority group? P2: 124-129

So I guess a lot of awareness and I guess a little bit of finding solidarity with people who might also be different, rather than, ehm, being found in a position where I think I am the only person who thinks in a certain way? P6: 379-380
Discourse 4: Issues with being given a ‘BAME’ label

I feel like the terms used here BAME group it’s not just saying you are a minority in some way? it means more than that, which is quite a new thing to me. …it took me a while to understand that, but people would see me as BAME group, so people would say that you are sort of the BAME minority trainee, I was like why is it BAME minority, what does BAME trainee mean? Eh when you have conversations with ehm people that are classified as BAME in the UK… (the) systemic discriminations … and the classism as well and all these are very new things to me. And for me, it’s like they classify me as a BAME trainee, I feel like this is not right in a way. It kind of challenges my identity so I become a minority and me to “feel” like a minority? But I feel like my challenges is not really minority challenges, my challenges is more like two cultures that differences and try to find, ehm, what are the differences and work around that. It’s not really a minority experience… P1: 211-221

The above quote illustrates the common points made by participants in relation to the discourse of “issues with being given a ‘BAME’ label”. Four participants associated their Chinese cultural backgrounds with the so-called “BAME” label. Participants referred to being “lumped into the BAME” group (P1:
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

210-222; P2: 230-231; P5: 119-121) and they described that this oversimplified their identities (P7: 366-369).

… it’s the issue with diversity that most of the trainees are not from BAME background. So I think, ehm, you know we’re kind of lumped into the whole BAME groups and category. But that’s not something I’ve had to think of or experienced before. P5: 119-121

In fact, Chinese trainees described a fluid nature of their connection and belongingness with the White group and the “BAME” groups, in that they sometimes could identify themselves with White group’s privilege, whilst other times, they had a sense of belongingness and solidarity with individuals from the “BAME” groups. There were also times they referred to being a minority within the “BAME” in the UK.

… there has no Chinese representation in the BAME because you're just not there? Heheh. So then I feel like I'm not part of that, but just doesn't feel like we have a, ehm, there are other Chinese trainees. Ehm, I think previously ehm, when there were ehm more trainees from a Chinese cultural background and the international group of students ehm, I feel like that would have been more opportunities to talk about, you know, what our experiences would have been like… But yeah, it's it's a very different kind of conversation you would have from ehm some of the more BAME groups,
because I think there’s more mutual understanding and yeah sharing of experiences and just feeling like you know a sense of belonging rather than talking about the usual things around power differences? P5: 144-152

I think one of the things… sometimes that bothers me a bit is sort of not knowing or maybe not feeling like as a Chinese, that I belong to either groups you know in terms of White or the BAME groups. I think often it doesn’t feel like entirely as a Chinese person I belong there?… P2: 229-231

The discursive constructions discussed here concern how Chinese trainees made sense of their rendered “BAME” label within the DClinPsy training environment. In particular, they expressed that the seemingly “benevolent” deployment of the BAME constructs in the training environment may have excluding and negative consequences on them. Because often the “BAME” label is associated with the wider racial inequality and racism discourses in the UK. Consequently, being grouped as a “BAME” trainee, Chinese trainees’ challenges may be generalised to race / racism, which may minimise, erase or silence the unique cultural issues they face. Therefore, it was felt that it is important to pay close distinct attention to participants’ constructions of the “BAME” label and separate this discourse from the aforementioned “being the cultural other” discourse, even though both are very closely linked.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

As briefly mentioned in the first chapter, “BAME” is a social construct that is commonly employed by the UK public bodies, authority and the media to recognise a specific status of people from ethnic minority groups. In the course of a collective anti-racism reform movement, many people have embraced “BAME” as an “identity” descriptor to be recognised as a fellow of, and united with, groups who are oppressed due to their race (Patel et al., 2000). However, the term “BAME” is not without problems (Ali, 2020; Aspinall, 2021), because it does not sufficiently convey the unique struggles of the different groups within “BAME”, and the heterogeneity of their experiences. In fact, the term “BAME” is often reflective of the historical practice of a particularly British way of making sense and speaking about issues of racism and ethnic identity via the “divide and rule” mentality of British colonisation. It can be seen as a “White” way of considering to assimilate “the others”.

Thus, by constructing Chinese trainees being clustered into the “BAME” groups, participants registered and elaborated on the impact and functions of the prevalent “BAME” discourse in the UK on their day-to-day life. The label of “BAME” classifies Chinese trainees into a “race”-based minority status and separates them from the local White populations and classmates. At the same time, the “BAME” label propagates the notion that individuals in the BAME are treated as the same, which dismisses Chinese trainees’ cultural differences through this process of “minorisation” and “othering”. This homogenisation, pressure to conform and
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

acculturise can potentially reject Chinese trainees’ own distinctive identity, and their struggles with culture differences.

…there’s other times when other people say and I’m like ‘oh you’re making assumptions about OUR culture’ as well like there are a lot of variations even amongst Chinese people, so it’s, I find it hard to place myself as what I identify with. P4: 98-100

What subject positions, practice do these constructions offer?

The above interweaving discursive constructions, linked with wider discourses and action orientations, position Chinese trainees as the “outsiders”, “the other”, and “the inferior”, preserving the exclusion. By constructing a fluid connection with the locals, the minorities and a diversity amongst Chinese people, participants rejected the socially constructed label of “BAME” and refused to be homogenised in this way. This created a gain for Chinese trainees to flexibly position themselves between the dominant and minority groups. However, at the same time, this fluidity and flexibility also created a sense that they feel they don’t belong to either of the groups. Because of this, participants created a partial position of an “international identity”, but this was not fully developed:

I think that’s when I always go back to this like why, why do I have different views about it? Is it about my cultural ehm background? is it about ehm my personality? Or is it… So I think that’s when you try to tease out what the
factors are to try to understand what's going on? I think speaking to other people who may have similar views help, so my other ehm Singaporean classmates or international classmates. Ehm yeah I guess being open about these things with people who I feel like, ehm, have the ability to give me a different perspective to things? P6: 368-373

The subject positions described here determines practice. As a result of the above positionings, Chinese trainees may doubt their identity. They may distance themselves from the locals and the “BAME” groups. These practices may be connected to the aforementioned “problems with maintaining social connection” discourse, where Chinese trainees become less participative in social events with the locals potentially due to a lack of belongingness to either the “White” group or the “BAME” groups. These subject positions may close down the opportunities for Chinese trainees’ identity to be acknowledged and appreciated; they also may open up the opportunity for Chinese trainees to be exposed to further homogenisation and generalisation, leading their cultural perspectives to be further silenced and invisible.

**What consequences do these subject positions and practices have?**

Consequently, Chinese trainees found themselves feeling alienated and alone. They felt the guilt and shame of both the “White” group and the “BAME” groups because of their fluid and flexible positionings, yet sensing that they did not
belong to neither of the groups. They also felt confused about their places amongst other trainees in their cohort and internalised the issues to themselves:

I guess it kind of prevents me from forming a wider group identity with the people on my course, which I think I have to admit I'm not good at, I'm not good at being part of a big group of people, because I feel it can be quite impersonal. …And I think knowing that sometimes we are different kind of makes that divide even wider, because now I feel like I don't feel I really belong in this wider identity when I can’t participate activities and we have different values. P6: 382-387

Discourse 5: The symbolic capital

… once I came here I realised how different ehm the attitude and approach towards mental health is in the UK. And it made me realise how backward isn't the right word but how under-developed ehm the mental health system is back home. So I want it to learn more (in) here, and eventually kind of at some point in my future career to kind of take what I've learned and bring it back to my home country and help to change people’s mentality and change the system as well to make it more accessible ehm and less stigmatised. …I think back home people look at status more and having that title of doctor would be something that is respected, and they would kind of see it as “oh, you know, that is you're paying money for respect and you're paying the
The above excerpt illustrates the common points made by participants in relation to the discourse of the “symbolic capital”. Chinese trainees described that they believed DClinPsy training environment and learning approach in the UK were better (P1: 262-276), and the understanding of mental health and psychological knowledge in the UK was more advanced (P1: 128-136; P4: 75-78; P5: 83-85; P7: 95-101). Participants described that they saw their DClinPsy training as a symbolic capital in that, although there were costs in doing the training, such as the cost of money, time, energy, and being away from home, they could also gain from the training in various ways, including acquiring advanced knowledge, better career opportunities in the future, life experience, a doctorate title, professional status, respect, and / or more money (P2: 77-81; P3: 45-55; P4: 80-89; P5: 61-67; P6: 114-123; P7:115-120).

Whilst many participants struggled to identify any positives of their Chinese cultural backgrounds, they implicitly and / or explicitly referred to some strengths they possessed. For example, they described that they have valuable qualities of being hard-working, resilient and striving (P1: 276-287; P3: 185-187; P4: 259-263):

Some of the positives? That’s a good question I never think about what positives that we have. I guess ehm I, I ehm, I don’t know, that’s interesting. Well yeah I don’t know heh heh. Positive things, there is definitely positive
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

elements of being a Chinese I guess, it's also the word that they always describe us is hard-working, and always like resilient, I get that a lot, people commented on me that I am very resilient. I think some of the ideas yeah if you mention about it, some of the ideas back to the Confucius idea I guess it's kind of makes you to choose of overcome lot of things, ‘KEKUNAILAO’ I think that’s the word… you just need to constantly work and yeah I guess that’s some kind of ideas that makes me just continue doing it. It's difficult to do the training overseas without your family being here, where family is basically quite a huge part of my life. And all those ideas are kind of helped me to overcome a lot of situations… P1 276-285

Participants referred to a strength of bringing different perspectives to the locals, such as new concepts, new ideas, new ways of understanding matters and systems. In particular, they referred to their collective perspective enabling them to be “more considerate of the systems” and “power of family”, compared to the locals (trainees and supervisors) who were using more individualistic lenses (P3: 222-226; P4: 158-161; P7: 148-149). They referred to not taking things for granted and being able to use a curious, or not-knowing stance to build rapport with service users (P2: 222-276; P3: 263-273; P5: 268-274). They referred to being more open to different views, and “more attuned to” and having a deeper appreciation on cultural diversity (P5: 276-285; P7: 348-350):
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Ehm so yeah I think definitely in terms of connecting with clients from more collectivist cultures, I find that coming from a Chinese background that has been very helpful. Ehm but also, I do appreciate the different point of view, especially when a lot of this ehm cultural diversity discussion takes place during lectures. I feel like I can contribute or that I am understanding the other point of view more than just intellectually understanding someone but actually ehm connecting with the discussions. And and really connecting with the need for more cultural diversity instead of just for it to be very tick-boxy? Ehm and I feel like that's very important because otherwise a lot of the policies that are put in place becomes very mea- I wouldn't say meaningless, but it just becomes like another thing that HR puts in place… P7: 248:255

The above discursive constructions are reflective of a wider discourse of Western superiority (Said, 1978), in which the Western civilisation may be depicted as more advanced; the Western knowledge may be positioned as modern; the Western approaches may be deemed more innovative; and the Western learning style may be regarded as higher quality. Since Western superiority may not be something people necessarily have or are, rather it is often something that people do, these rhetorical activities can then be used by people in the Western culture, such as those in Great Britain, to uphold the power and privilege, which could subsequently reinforce social inequalities (Thurlow & Jaworski, 2017). Thus, by
constructing a discourse of “symbolic capital”, along with all other discourses constructed above, participants may consider the Western culture and knowledge, such as in the UK where their DClinPsy training takes place, as more favourable. Their own culture, knowledge and understanding of the world, on the other hand, may be minimised or disregarded, or worse still denigrated. However, participants also referred to a scepticism of the applicability of the Western knowledge and practices they have gained and acquired during their training, indicating a resistance towards the dominant Western practices in clinical psychology:

…For instance, when they talk about CBT, that’s the first I thought of, does it apply or will it be applicable to Chinese? Or will it be applicable to? Ehm what(‘s the) impact of cognitive restructuring on say a very striving, I wouldn’t use perfectionist, I think a very striving Chinese individual? Does cognitive restructuring work and that would make me question. OK if I’m a client and I have a very, I would say I am striving individual, would cognitive restructuring work? And that’s an area I’d say maybe not? I think in lectures I tend to question a lot about whether a treatment modality, whether ehm a technique is going to work in Asian society and (for) different types of Chinese, I mean perhaps there are some that totally not comfortable or not socialised to talk about emotions at all and how do we work with them? I think yeah almost every lecture my identity is quite prominent and quite - in reflective sessions as well… P3: 110-117
What subject positions, practice do these constructions offer?

On the one hand, the interlinking discursive constructions of the “symbolic capital” position Chinese trainees as “learners” and their culture as “inferior”, which could make their identity and values vulnerable to be questioned, worse yet attacked. Participants referred to “I'm here to gain something”, “I am here to learn” and “they (the locals) are helping me out” (P1: 304; P3: 231; P5: 127; P7: 98-99), which may position the locals as “the helpers” and “the knowledgeable one”. These positionings may open up the likelihood for Chinese trainees to consider themselves as “lesser than” and secondary to the privileged “helpers”. These positioning may close down Chinese trainees’ chances to explicitly explore strengths in their Chinese cultural backgrounds.

Subsequently, these subject positions determine certain practice. For example, by adapting a learning attitude, trainees from Chinese cultural backgrounds may keep investing their time, energy, money and resource in their DClinPsy training in order to acquire symbolic capital. As a result, Chinese trainees may listen more and express their opinions less, as they may feel they have less to offer. This could be partially due to their humble learning attitude and a display of respect towards authority, superiors, and the helpers, such as supervisors, tutors, lecturers and “the locals”, which often are considered as treasured values in Chinese culture:
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

... I guess it's a way or it's a form of respect and acknowledgement that they (Lecturer) are more experienced or more or older or more senior than me in that sense. I think it even now we have progressed to calling people by by their first names for example like on course tutors or like lectures but I think it doesn't really totally erase that hierarchy that I have on mind, in my mind... I don't think I can become friends with them or interact with them like how I interact with my classmates. I can be friendly but I think there is a line I wouldn't it wasn't so easy for me to kind of cross that become my all pally and friendly and be friends of them because that just feels uncomfortable for me. P6: 285-290

On the other hand, by constructing a gaining attitude, participants may evaluate if their investments in the training are worthy by weighing its costs (emotionally, financially, timewise, and energy-wise) and benefits. They may weigh whether it is worth to challenge certain issues if that costs them enormous distress in various ways; they may also assess the usefulness and practicality of their training to their culture.

What consequences do these subject positions and practices have?

Consequently, Chinese trainees felt that their training experience was “a challenge”, “a struggle” and “a long journey”. They referred to something “temporary” that needs to be endured, and overcome (P1: 285; P3: 284-287; P5:
They felt that they needed to sacrifice some in order to gain some. Despite that, participants felt rewarded in that they were growing during their DClinPsy training and they had things to offer to the locals as well:

I feel that it (my Chinese cultural background) it helps me to understand some of my clients abit more. So... I get a lot of ehm refugee clients and I think the the more collectivism side, the more the kind of value to older more traditional values like gender roles and the position of the mum in the family seem to, it's like I feel I understand it a bit better, and I think about it a bit faster ehm than my supervisor would. And so that yeah I think that that made me realise abit that 'Oh that is, there are some like bits that I am more attuned to in terms of how things might function in that family, you know, what kind of voice this mum might have at home, what kind of impact she might have at home, ehm which is something I think my colleagues don't seem to think so quickly as well. P4: 157-16

In summary, this chapter has explored five main discursive constructions. The construction of “competency of expressing oneself” highlighted the cultural difference in expressing oneself and how sometimes this difference might be perceived as incompetent in the DClinPsy training environment. The construction of “challenges in maintaining social connections” unpicked a possible unconscious in-group and out-group dynamic during the training due to cultural differences in
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

everyday life. The construction of “problems arising from being the cultural other” attended to potential distinct power relations which might have contributed to the invisibility of Chinese cultural perspectives during the training. Moreover, the construction of “issues with being given to a ‘BAME’ label” explored an inappropriate label applied to participants which could dangerously reduce their experience and challenges to race and overlook their cultural differences. Last but not least, the construction of the “symbolic capital” underlined a possibly vulnerable stance participants might have as learners, but also accentuated their resilience and strengths. Implications of these findings will be explored and discussed in the following Discussion and Conclusion chapter.
Overview

The aim of this research study was to interview trainee clinical psychologists from Chinese cultural backgrounds, and to explore how they talked and thought about their DClinPsy training in the UK and what discourses they draw upon in relation to the constructions of their training. This last chapter begins with a summary of the key findings identified in answer to the above research question. Given that the five constructed discourses in this study are inextricably linked, I will discuss them in this section interconnectedly, link them to existing research in this area, and elaborate on the novel contribution of this study to the knowledge base. Following this, I will discuss the implications of the findings, and present a critique of the quality of this study including its strengths and limitations. Finally, recommendations for further research within this area will be offered.

Summary of the key findings

The first discourse, “competency in expressing oneself”, captures how Chinese trainees talked about a sense of perceived incompetence in openly expressing their thoughts and emotions in the DClinPsy training environment. This appears congruent with Zhao-O’Brien (2014), who reflected on an undesirable feeling of inadequacy, incompetency and confusion because of an absence of shared cultural backgrounds with her peers during the DClinPsy training in the UK.
Based on Kolb’s learning style theory (1984), Bennet (1995) pointed out that learners from different cultural backgrounds vary in thinking styles, self-expression and communication styles. Participants’ constructed discomfort in openly expressing emotions and thoughts in this study seems consistent with Zhao and Stone-Sabali (2020), who argued that Chinese often “wrap” their emotions because culturally they consider overtly showing emotions as impolite and self-centred. However, this way of emotion expression appears not to be fully understood and appreciated in the DClinPsy learning environment.

The current finding extends upon what was found in the literature and explores the institutional and cultural factors related to the power dynamic in the training environment that might have contributed to participants’ sense of perceived “incompetency”. Their discursive constructions seem to suggest an institutional element about what the DClinPsy training might consider as normative, competent, and acceptable in engagements and expressing oneself. Chinese trainees in this study sheds some light on their concern of being negatively judged and misunderstood for their “quiet” learning style and their pragmatic reflecting approach. In fact, they have felt misinterpreted and pathologised for being perceived as lacking emotional expression, assertiveness in articulating their thoughts, and engagement. Participants’ construction in this study appears to echo the experience of Chinese students, especially the international students, in wider higher education system in the UK possibly due to a lack of understanding of different cultural learning and interaction in the British higher education system.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

(Ping, 2010; Jing, 2018; Wang, 2018). Scheurich (2012) argued that, if the pedagogical method within an educational setting is culturally consistent with the White students and not with the cultures of non-White students, this could be considered as institutional racism. Institutional racism could potentially risk and limit people’s appreciation for other cultural styles of learning to exist, such as in the DClinPsy training environment. Thus, a culturally sensitive and friendly training environment might be needed in the DClinPsy training courses to appreciate and tolerate unique learning styles from Chinese cultural backgrounds.

Cortazzi and Jin (1996) argued that, in a collectivist culture, such as Chinese culture, learners may prefer to attend to small group discussion rather than posing questions or voicing their viewpoints overtly in class. Moreover, the authors stated that not posing questions in the class does not necessarily mean that these learners are passive, not paying attention or are mentally inactive in the class. In contrast, these learners could be mentally and internally engaged by actively listening to lecturers and by thinking and reflecting what they have learnt (Min, 2016). Cortazzi and Jin (2001) found that Chinese learners are more reflective learners who would ask considerate questions after abundant reflection. Additionally, Watkins & Biggs (1996) found that Chinese learners appear to be more active in peer discussion engagement outside the class, because the relationship norms in the collectivist society often extend beyond the classroom.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

The second discourse, “challenges in maintaining social connections”, captures how participants talked about a politeness and reservedness in the dominant British culture, which reflected the wider British values of privacy and individualistic culture as mentioned in the first chapter. When comparing and contrasting with the first discourse of “competency in expressing oneself”, a conflict of interactions in the British culture was observable through participants’ constructions. Namely, there might be a difference between the norms about how one presents oneself in the DClinPsy training (e.g., speaking up, overtly reflecting and speaking about one’s thoughts and emotions) and the norms about relational connection outside the training environment (e.g., being reserved and private). Participants in this study found this contradiction confusing, which seems to build on intercultural experience of Chinese students in wider higher education system in the UK, often in the form of “culture shock” (Zhou, Jindal-Snape, Topping, & Todman, 2008). Qi et al. (2019) stated that social adjustment difficulties and cultural difference are the additional challenges Chinese trainees may face in their training in the West. Because Chinese culture seems to promote the opposite way of relating to each other. Namely, one might quietly process thoughts and emotions in the training environment (Cortazzi & Jin, 2001), but they might attend to forming deep relational connection with each other outside the class in social scenes (Watkins & Biggs, 1996), often without need of alcohol. This constructed differences in social norms found in the current findings appear to add a new dimension to the existing literature. It highlights, based on Tajfel’s (1979) social
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

identity theory, a danger of potential systemic ingroup and outgroup formation, which could unconsciously occur inside and outside the DClinPsy training environment, threatening inclusion of Chinese trainees in both scenes.

The third discourse, “problems arising from being the cultural other”, captures how Chinese trainees constructed being a visible minority, yet simultaneously culturally invisible in their training. This finding appears congruent with Zhao O’Brien (2014) and Qi et al. (2019), whereby they both associated their identities with the visible minority community during their trainings in the West. In particular, Zhao-O’Brien (2014) reflected that visible difference, such as colour of skin, might be used for purposes of categorisation, causing distress, anxiety and stereotyping. In light of the wider social-political discourse of Chinese being the socially constructed “other” in the UK, as mentioned in Chapter One, the current findings add to the existing knowledge by understanding the power disparity of being the cultural other in the DClinPsy training environment. For example, participants spoke about a blindness towards Chinese culture and often a lack of response from people, when participants shared their unique cultural view in the training. It is possible that this subtle, implicit, yet powerful (lack of) response from people could indirectly invalidate participants’ ways of being, which might make them consider their cultural perspectives as foreign, irrelevant, and incompatible with Western ideals. Participants’ subsequent constructions of being the outsider and / or the cultural other could potentially reflect the identity concepts of the “other” (Hall, 1996) and the constitutive outside (De Vos, 2003) mentioned in Chapter One;
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

in that Chinese trainees in the study felt being othered as a minority by race, and being possibly perceived as a threatening outside other, those unique cultural perspectives could plausibly bring de-stabilisation to the existing Western structure, norms and knowledge in the DClinPsy training environment.

Linking with the first discourse, “competency of expressing oneself”, the current discourse appears to indicate a dilemma participants face in that they might be encouraged to proactively talk and share their feelings and perspectives, which often are culturally influenced. However, when shared, their cultural views and thoughts might not be validated, appreciated, or responded to. Such a vicious and negative dynamic is concerning as it might promote a homogenous training environment where trainees could feel a need of filtering their cultural views and fitting in the dominant norms in the DClinPsy training (Ahsan, 2020; Romila, 2018). This finding appears congruent with BAME trainees’ experience of marginalisation and feeling powerless to speak out (Rajan and Shaw, 2008; Shah, 2010), as the tolerance and acceptance of cultural difference in views appeared low in the training environment and the social exclusion of those labelled as “the other” appeared high, thereby reproducing cultural stereotyping, social inequalities and historic power relations (Patel et al., 2000).

The fourth discourse, “issues with being given a ‘BAME' label”, captures how Chinese trainees talked about the process and impact of being clustered into the “BAME” group in the DClinPsy training. Their constructions appear to indicate a potential generalisation and simplification of their challenges to race / racism,
which could make the unique cultural issues they face unnoticeable. Moreover, participants’ subsequent constructions of being the minority within the BAME groups seem to imply a possible further generalisation of Chinese trainees, perceiving them as a homogenous mass despite their differences in regional backgrounds and ethnicity. This might dangerously discount the cultural diversity within Chinese culture. These findings highlight a plausible threat of cultural racism. Jones (1999) suggested that cultural racism could strengthen dominant cultural privilege and harmfully assuming, generalising and stereotyping the “others”, which could lead to structures of inferiority and differentiation or exclusion. Possible practical approaches to exit this vicious cycle of culture blindness will be further discussed in the implication section.

Finally, the fifth discourse, “the symbolic capital”, captures how Chinese trainees in this study adopted a humble learning-from-others attitude with the hope of gaining and acquiring symbolic capital from their training. This humble learning-from-others attitude supports existing literature of Zhao-O’Brien (2014), Qi et al. (2019) and Spira (2020), in that Chinese trainees appear to show respect to their supervisors and lecturers as they do to the seniors. In this study, the fact that participants rarely mentioned any troubles in supervisory relationships may build on Zhao-O’Brien (2014)’s reflection that this “unquestioning respect” towards the seniors have assisted Chinese trainees to make good working relationships with their supervisors.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

However, the constructed “symbolic capital” appears to encompass contradictions, which is an interesting and new finding. On the one hand, given the historical and socio-political context of clinical psychology in the UK discussed in Chapter One, participants appear to have constructed a superiority of Western culture that seems to become recognised over and above those of non-dominant cultures by the DClinPsy training and the wider society in the UK (Patel et al., 2000). Thus, participants’ subsequent constructions of a “learner” potentially reflect the identity concept of the serviceable other (Sampson, 1993) through the process of linking and differentiation (Hansen, 2006), as stated in Chapter One, in that, for the Western culture to be perceived as superior and advanced (i.e., the expert), the Chinese culture was constructed as backward and inferior (i.e., the learner).

On the other hand, participants appeared to question the applicability and usefulness of particular Western knowledge, models and practice in the context of their culture. This finding is in support of globalisation in the field of clinical psychology as mentioned in Chapter one (Tomlinson, 2007; Yang et al., 2011), in that participants challenges the universality of Western clinical psychology and its application on non-White cultures, such as Chinese culture. Especially, trainees in this study implicitly and explicitly spoke about entering a primarily White DClinPsy training, in which Western approaches of conceptualising psychological distress appear to dominate. They face plausible conflict of whether their cultural values clash with the underpinning knowledge and practice available in the training.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Subsequently, they become unsure how much culturally sensitive and applicable knowledge and practice they could acquire from the training.

Moreover, participants constructed the DClinPsy training as a journey with various forms of hardship they had to face as “the cultural other”, yet this process enabled them to gain an intricate understanding of the culturally embedded “self”. A few participants shared doubts of their Chinese cultural identity even though they all described their family and upbringings as “traditional” in Chinese culture and / or their early educations being influenced by Chinese culture. Some participants constructed themselves as the cultural majority, rather than the socially constructed minority in the UK. Some participants constructed their worldviews as Western individualism, whilst others as Chinese collectivism, or a mixture of both. One possible explanation for this ambivalence in participants’ cultural identity might due to their exposure to multiple cultures at different stages of their life. Another explanation could be a possible misconception between the terms “ethnicity” and “culture”, in that participants sometimes might have confused their ethnicity identity (i.e., originated from a particular country with shared history) with cultural identity (i.e. shared beliefs, values and traditions) in the interview. The above findings seem to reflect the concept of “multiple and contextual” identity (Anthias, 2009) mentioned in Chapter One, whereby participants might draw on different identities (e.g., the majority or the minority) depending on the contexts. They also might be in every stage of the “racial / cultural identity development model” (Sue & Sue, 2013), including conformity, dissonance, resistance and
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

awareness, which could have contributed to the ambivalence of their cultural identity. As postulated by Lee (2005), the process of cultural identity development is not linear and participants might find themselves moving between stages depending on their changing contexts. This fluid nature of cultural identity indicates how complex a construct could be (Patel et al., 2000), an opportunity for participants to gain an insight of the various issues on self-culture relations during their training. This process might be vital for Chinese trainees’ development of culture humility in the profession of clinical psychology in line with the BPS (2019) guideline.

Last but not least, some participants felt difficult to identify any positives of Chinese culture, which might not be surprising holding all the above constructed discourses in mind. However, they all directly and indirectly spoke about their strengths and resilience arising from their culture differences, which helped them to accomplish the training in order to gain symbolic capital. For example, they talked about the ability to think holistically, the competence to appraise cultural differences by adapting a curiosity stance, the capability to hold complex systems and power relations in mind, an eagerness to learn, and being resilient to hardships. These are consistent with Zhao-O’Brien’s (2014) and Spira’s (2020) reflections, indicating that Chinese trainees in the study possess unique skills which they could apply when working with clients from various cultures; when developing leadership in the profession; when working with multi-cultural teams in the NHS and at university; and when approaching existing Western concepts of psychology. It
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

would be important to highlight and acknowledge Chinese trainees’ unique strengths in the DClinPsy training environment, rather than marginalising it as unimportant or unseen. Implications of these findings will be discussed next.

Implications of the study

This research adds to the knowledge by recognising the resilience participants have developed despite, and by reason of, the challenges with cultural differences they face in the DClinPsy training. To address these challenges, it could be useful for Chinese trainees to actively explore and reflect on their cultural identity in order to enable them to appreciate their cultural uniqueness, strengths and untapped potential. This could be carried out through proactively seeking space to raise cultural talks with others during the training, whilst being considerate of the impact these might have on their emotional wellbeing. For example, if sharing Chinese cultural perspectives in the big group could appear challenging, it might be helpful to start mini-cultural talks in spaces such as small group discussions, informal settings, and during supervisions and/or appraisals. Alternatively, they could display their own cultural perspectives when providing (written/verbal) feedbacks to lecturers, or in the written coursework where appropriate. Furthermore, Chinese trainees could use their strengths of holistic thinking to explore the power disparity associated with cultural differences on multiple layers of context inside and outside the DClinPsy training, and perhaps to consider potential impact these may have on them. These processes could
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

possibly empower them to gain insight of their own cultural practice, perspectives, values, habits (e.g., learning style, engagement style, reflection style), and the level of their cultural acculturation in order to navigate their cultural identity throughout the training. Moreover, these processes might also assist people in the training environment to understand Chinese cultural perspectives, raising Chinese culture awareness in order to break the vicious cycle of a Chinese culture blindness in the training environment.

The DClinPsy training courses might benefit from bringing the culture talks to the forefront, and creating culture friendly and culture appropriate training space to Chinese trainees. To assist this, the course staff might want to consider including Chinese trainees in the curriculum development, in order to embrace their unique perspectives in the programme. Chinese trainees might be able to assist in the development of culturally considerate reading groups, practice-based learning (PBL), and/or simulations to name a few. For example, Chinese trainees from this study spoke about culturally sensitive and alternative explanations of understanding grief, expressing condolences, making sense of “attachment” in early life, conceptualising striving, appreciating the family / system dynamic. These cultural knowledge and experience might help to expand the epistemic horizons of clinical psychology and address its ethnocentric limits.

Course staff might also want to consider designing experiential and reflective workshops around issues of culture difference, culture diversity, cultural privilege and cultural racism, allowing Chinese trainees to start to unpick their
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

cultural identity. Zhao and Stone-Sabali (2020) highlighted the importance of initiating cultural discussions from supervisors, and using appropriate supervisor self-disclosure to facilitate this in order to enable Chinese trainees to explore their cultural identity. These techniques might also be transferable and useful for lecturers, tutors and course staff, in that they might want to consider using frameworks on multicultural orientations to constructively invite Chinese trainees to consider the multitude of cultural differences in psychological framework, knowledge, intervention and practices. Likewise, they might want to consider to explicitly state their commitment to address culture-related challenges for Chinese trainees, and to take ownership of their awareness and humility (or lack of it) about Chinese culture. This might assist Chinese trainees feel validated and appreciate how welcome the cultural conversation might be in the training environment, in order to enable them feeling safer and more comfortable to explore and share their cultural heritage. These initiations from the course staff and supervisors could be crucial. As constructed by Chinese trainees in this study, they would be very willing and happy to talk about their culture if they feel invited and their culture appears welcomed and appreciated in the training environment.

Furthermore, supervisors could consider integrating cultural discussion in supervision as per recommendation by Qi et al. (2019) and Zhao and Stone-Sabali (2020). Supervisors initiation and continuous conversations of culture differences (and similarities) with Chinese trainees might positively influence trainees’ placement experience when working with service users, working with the
multidisciplinary teams, working as a leader, and working in the NHS, to name a few. This might, in turn, promote a culturally sensitive working environment with colleagues and service users, in order to embrace the cultural inclusion, diversity and equality fostered and valued by the NHS.

However, it is important to mention that sometimes cultural talks may require a fine balance to make certain that unhelpful assumptions are not created, as these misassumptions could lead to stereotyping. Supervisors might want to stay reflective and mindful of how power dynamic in supervisions might open up or close down Chinese trainees' willingness to engage in cultural talks. Thus, supervisors might want to consider the transformative supervision process suggested by Moir-Bussy's (2008) in order to embrace cultural conversations and be open to learning from each other. This might help to create a collaborative learning opportunity for both supervisor and Chinese supervisee in order to address the possible power disparity in supervisions. To support this, the course staff might want to consider integrating cultural discussions in supervisor trainings and workshops, in order to empower them to feel confident in initiating culture discussion with Chinese trainees. These trainings and workshops might want to consider including but not limited to frameworks such as multi-cultural orientations in supervision (Davis et al., 2018; Owen et al., 2011), and / or the Cultural Attitudes Repertory Technique (Neimeyer & Fukuyama, 1984).

Furthermore, the DClinPsy training courses might also want to consider in helping all trainees to further develop, explore and reflect on their cultural humility
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

as per BPS' (2019) guideline. For example, the course staff might want to consider providing spaces for open debates about different cultural perspectives on particular Western knowledge / practice / models / concepts, in order to introduce oppositional ideas from various cultures. This might encourage all trainees to become more confident in being “clumsy rather than clever” (Burnham & Harris, 2002) when approaching culture talks, which might empower trainees to start self-facilitating cultural conversations between each other, and feel confident to raise, address and constructively respond to cultural differences with Chinese trainees inside and outside the training environment. In turn, this could potentially foster team building and / or cohort building, making Chinese trainees feel more included.

Last but not least, in relation to the policy implications from the research, it might be useful for BPS to consider taking an active stance against cultural racism and provide anti-cultural-racism guidelines, given the recent rise in stigma, prejudice and cultural racism and the impact of anti-Chinese racism accelerated by the COVID-19 pandemic. This could be particularly important since BPS requires diversity and the inclusion of multiculturalism in clinical psychology training courses (BPS, 2019; BPS, 2017, “Inclusivity” Strategy), in which Chinese trainees receive their training.
Critical evaluation of the study

In this section, I will consider the quality of this research study using Tracey’s (2010) Eight “Big-Tent” criteria. Following this, I will consider the strengths and limitations of the research, and my reflexivity at this stage of the writing-up.

Worthy topic

This research topic can be qualified as a worthy topic as it is an important and meaningful area of research. Considering how insufficient the research literature is related to Chinese trainees’ DClinPsy training experience and how the profession can help to support these individuals, this research meets the criteria for being a notable and truly interesting topic.

Rich rigour

The study is based on social constructionism (Burr, 2015), which informs the study from beginning to end. In particular, this research study meets the rich rigour criteria through purposively selecting the samples and conducting seven in-depth interviews with Chinese trainees. The interview data offered an exhaustive and rich insight into this research topic. The semi-structured interviews allowed the use of quotations throughout the results chapter to illustrate the constructions. Moreover, effort and care are demonstrated via the documentation of the data collection and analysis procedure in the methodology chapter. Last but not least,
the reading and re-reading of the transcripts added further rigour to the development of constructs and discourses (Taylor, 2001).

**Sincerity**

Sincerity was accomplished via vulnerability, self-reflexivity, honesty and transparency. To keep transparency, every stage of the research is well-recorded, including reporting every decision arrived (Creswell & Miller, 2000). My own reflections about the process, my expectations and thoughts can be traced throughout the thesis and in self-reflexivity sections, which are in accordance with recommendations by Tracey (2010) who encourages the interweaving of one’s reflections in the thesis, to allow a “show rather than tell” fashion to self-reflexivity.

**Credibility**

This study strives to meet the credibility criteria by displaying trustworthiness when presenting the data; this entailed choosing extracts that are influential and credible, and providing a thick description of the constructs. In this research, the constructs and analysis of discourses were discussed with and reviewed by the primary and secondary supervisors on several occasions in order to ensure the quality of the constructed discourses. I appreciate that both my supervisors are male and have some or limited awareness of Chinese culture, which may influence the feedback they provide. Fortunately, I was able to explore the impact of this in supervision. To enhance further triangulation (Denzin & Lincoln,
1978), I have also sought feedback from the Chinese consultant. The triangulation process did not generate significant differences.

**Resonance**

Hopefully the topic of this research would resonate with audiences, and could foster connectedness and identification with some experiences (Dadds, 2008). This thesis accomplished this through interlacing selected extracts to support the constructs, and through the inclusion of reflexivity across the thesis. This is aimed to enable the audience to engage and resonate with the content (Tracey, 2010). This study does not intend to offer results which can be generalised to broader populations because the discourses and knowledge constructed are culturally and historically-embedded. Nevertheless, the findings will hopefully resonate with Chinese trainee clinical psychologists and offering chances to reflect on the cultural awareness within the DClinPsy profession.

**Significant contribution**

This research provides a noteworthy contribution to the restricted knowledge base that is available at present to show and underline the experiences of Chinese trainees within the field of DClinPsy training. By shedding light on this population, it is hoped to have encouraged Chinese trainees in this study by offering a platform for them to be listened to in a profession where they often feel their perspectives being silenced or misunderstood. Hopefully, this study has the
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

possibility to 'make visible what is hidden or inappropriately ignored, and generate a sense of insight and deepened understanding' (Tracey, 1995, p.209).

**Ethical**

This study regarded its ethical considerations profoundly. Methodological ethics were ensured via the preservation of informed consent, confidentiality, and underlining the right to withdraw. Interpersonal ethics were also attended to; this associates with collaboration, relatedness between the researcher and the participant, and respect for each other (Ellis, 2007). This allowed me as the researcher, to carry out the interview in an empathetic and thoughtful way, while being aware of participants’ wellbeing during their engagement with the project.

**Meaningful coherence**

This study has attained meaningful coherence as it is researching what it has aimed to research, and the results attend to its research questions. To further reinforce the meaningful coherence of this research, the findings and discussions of each discourse are combined to illustrate how the discourses relate together. Similarly, the implications and recommendations are hopefully relevantly related to the results and literature introduced.

**Strengths and limitations of the study**
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

One of the key strengths of this research is that it centres on a group of trainees who are frequently considered with reference to their lack of appearance within the clinical psychology training. Limited research exists for this population to consider their perspectives and experiences. This study has also expanded on to the existing literature linked to the experiences of Chinese trainees within the psychology profession and offered new interesting findings to the knowledge base.

Another strength of this study is that it obtained a significant positive response to participant recruitment, which was achieved in less than four weeks of the study being officially broadcasted. Participants also expressed their gratitude for the chance to explore their culture and training experiences at the end of the interview. This suggests an attractiveness of the research topic to many trainees from Chinese cultural backgrounds and indicated the need within the DClinPsy training to initiate, facilitate and continue conversations on this topic.

However, this study is not without limitations. Whilst participants’ eagerness during the recruitment and interviews were welcomed, most of them indicated a level of responsibility to support this study, possibly both for helping me and for contributing to the knowledge construction in this area. Subsequently, this unexpected power dynamic might understandably have influenced the nature of our interview conversations and my analysis of the data.

Moreover, there are also limitations associated with the heterogeneity of the participant sample. Firstly, participants in this study represented four training courses throughout the UK with distinct course ethos, from various year groups.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Whilst this allowed a sound understanding into the research question (Marshall, 1996), it could be considerably enhanced since there are 30 registered clinical psychology programmes in the Great Britain. Secondly, whilst all participants shared Chinese culture backgrounds, it is important to note that they were from different country of origin in South-Asia, hence diversity within Chinese culture amongst the participants might exist and their acculturation level, such as length of time in the UK and intention to continue living in the UK might influence their understanding of cultural identity which could be explored further in future studies. Additionally, participants in this study were international Chinese trainees by coincidence, possibly due to one of the recruitment criteria that highlighted a need for trainees to have at least finished high-school in the country of their origin in East-Asia. This criterion was initially aimed to ascertain participants’ foundation of Chinese culture; however, it might have unintentionally disqualified Chinese trainees born and / or raised outside East-Asia, such as the British-born Chinese trainees. Thus, I wonder whether oversea Chinese trainees might bring novel perspectives on matters such as “BAME” and minority status and how they might construct their training, which is beyond the scope of this research but an important aspect to further research and explore in future studies.

Last but not least, although the sample size in this study was small, this is not a concern in FDA, as discussed in the methodology, because FDA is not aimed to generalise findings, but to pay attention to the content of a conversation and how language is used in different ways to construct discourses (Potter & Wetherell,
However, most of the participants in this study were female, possibly because male trainees within clinical psychology are very limited (Caswell & Baker, 2007) and this is even lower for male trainees from Chinese cultural backgrounds. Thus, the limited male representation within the study might reflect the lack of male Clinical psychologist in the profession.

**Reflexivity**

I believe that it is essential for the researcher to reflect on the knowledge they have constructed. During the interview process, I was conscious of a heavy feeling when sometimes hearing about Chinese trainees’ accounts of their training; I often found myself holding this heaviness long after an interview had finished. Throughout the process of analysis and partially the writing-up, this heavy feeling was present and I held my participants’ image in mind and their voice echoing in my ears. At times, I felt the pressure to do them justice by attempting to include every single aspect of their stories, an impossible task. I contemplated and reflected on this in my reflective diary, whereby I noticed a desire of not wanting to unintentionally silence any aspects of their stories in order to avoid a perpetuation of potential difficult experiences they faced. In my efforts at conceptualising and analysing participants’ discursive constructions, and deciding to place their talk in particular socio-political contexts, I am mindful that I might have undeniably formed my critiques in a version of the world I perceive (such as inequality and cultural racism). I have used various means to sensibly challenge the results constructed
by the process of crystallisation, as mentioned previously. Over the course of this research, my devoted interest in this topic led me to feel incredibly motivated. I felt very inspired by my participants’ resilience and determination of overcoming various hardships during their training to reach a new-found confidence.

Future research directions

For future studies, it would be meaningful to include ontology and epistemology from Chinese culture to enrich study frameworks, and integrate research papers and psychological theories from Chinese culture, which are unfortunately limited at the time of this study. Moreover, it would be useful for future studies to explore the intersectionality of constructs, such as ethnic identity, multicultural heritage and gender, to name a few, as there might well be other discourses to explore and dominant cultural assumptions to challenge. Additionally, in future studies, it would be important to recruit Chinese trainees from diverse backgrounds in line with Burnham’s (2018) social GRRAACCEESS, in order to capture their heterogeneity in cultural identity formation. For example, it would be interesting to conduct quantitative studies, such as using surveys, and/or qualitative research to explore how British-born Chinese trainees construct their DClinPsy training and the impact of acculturation on them, as they might offer a different experience and understanding of their Chinese cultural identity.
Conclusion

To conclude, this thesis presents a qualitative study, using FDA methodology, which facilitated the constructions of Chinese trainees’ doctorate clinical psychology training in the UK through available discourses they draw upon. The findings highlight a potential lack of Chinese culture awareness in the DClinPsy profession. It is important to stress that the constructions participants provided in this study might not necessarily represent all trainees from Chinese cultural backgrounds. However, these findings provide an important and meaningful insight into participants’ perspective of the DClinPsy training. In particular, multifarious levels of context seem to impact the process through which my participants constructed their cultural difference during the training. These include the subjective “self”; the relational dynamic and associated power dynamic inside and outside the training environment (e.g., peers, supervisors, colleagues, lecturers); the British regulatory bodies (e.g., the HCPC, the BPS and the NHS); and the current and historic socio-political context (e.g., culture diversity, inequality, British colonisation). Since the clinical psychology training and the placements embed within these contexts, Chinese trainees would be inevitably influenced by the discourses available to them from these contexts. Moreover, possible power existed in each of these layers could create potential power relations of domination and subordination, which might have contributed to Chinese trainees’ understanding of their cultural identity in this study. However, according to participants’ constructions, cultural identity was experienced as complex and
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

contextual in nature. The versatility related to being the cultural other appears also to have helped Chinese trainees to be culturally attuned to the service users, their family structure and the influence of systems, among others. Limitations, areas of future research as well as implications have been discussed. This study calls attention to a need for wider discussions to be held in regard to Chinese trainees’ experience of culture difference in their DClinPsy training, and I hope I have been able to make a meaningful contribution to this research area.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

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EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS


EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS


EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

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EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS


EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS


EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

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Quantitative Social Science-UCL Institute of Education, University College London.


EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS


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EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS


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Appendices

Appendix A: Reflective diary extracts

September 2019

I have finally made the decision to do this project. Not quite sure how to start and how it will unfold yet, but I feel excited. It is a topic that is so close to my heart, I’m very enthusiastic to start this research journey. At the same time, I feel a little nervous as well, as I am not sure where this journey will lead me to. I believe this will be a meaningful and valuable topic to research, and hopefully it can make a small contribute to my Chinese community.

March 2020

COVID-19 pandemic has started. Not sure how this will affect my research project, I hope not much. It is really hard to read / see and hear all the anti-Asian racist comments and acts right now and how it is affecting Chinese community. It is also interesting to observe the cultural differences in managing COVID-19 (using masks / not using masks; lockdown / no lockdown). I am about to hand in my thesis proposal, and I somehow feel that this project is much needed under the current global, social-political context. Especially, when I noticed how little research there exists exploring Chinese psychologists’ training experience, let alone in the field of clinical psychology. This somehow makes me feel frustrated, angry and upset.

May 2020
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Read about all qualitative research methodology. Right now, I feel discourse analysis could be most suitable for this study, as it offers various ways of investigating meaning and power relations beyond words, whether in conversation or in culture. This could allow the project to unpick various contexts to explore power structures and motivations in systems. I think that will be very interesting to study.

June 2020

I have got my ethics approved! I am glad that it went all smoothly. I had the first pilot interview, and I am still trying to work out the best way to enable interview flow more of a conversation. I noticed I was quite conscious of my influence in the interview e.g. how what I say/ask (not say/not ask) might influence the interview conversation. I guess it is important for me to be mindful of this, when conducting actual interviews with the participants.

July 2020

I have sent out the recruitment advertisements. It is really nice, and a bit surprising, to see a lot of people are interested in taking-part. I guess I did not realise how much Chinese trainees might have been wanting to explore and share their culture and training experiences; and have their perspectives listened to. Also, it is nice to read how much they want to contribute to this project as a lot of them wrote that they hope they could help. I guess helping each other is one of the key values in Collectivist cultures, such as Chinese culture, and it makes me wonder how this might influence the version of contents they bring to the
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Interview; how they perceive me as a researcher; and how our conversation flows. I guess it is important for me to hold these in mind.

Late July 2020

I had my first interview today, and it was a very interesting conversation. I feel I can relate to a lot of the Chinese cultural values she spoke about: family, respecting the seniors, hierarchy etc. I noticed that there was some confusion between ethnicity and culture, as she sometimes referred ethnicity as culture. I guess this is understandable since these terms are used interchangeably in everyday life and it can be hard to distinguish them. Perhaps in the future interviews, I could try to invite and encourage interviewees to hold Chinese cultural backgrounds in mind rather than geographical or ethnical backgrounds.

Early August 2020

I had another interview today. I have noticed this far that sometimes interviewees struggled to explain what Chinese culture is. I guess this is understandable as Culture is such a big topic and needs time to unpack and make sense of. It upsets me to hear how limited opportunities they had on their training to explore this and how they had to take this conversation to some other spaces outside the training; or contemplating about it own their own; or suppressing it. Perhaps because their experiences felt relatable to me.

November 2020
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

I am transcribing one of the interviews today after a long day of lecture. I feel a little tired. But one of the interesting conversations we had today during the small group discussion is about how do we “define” making contributions in lectures and study groups. We spoke about often how contribution in groups meant talking; and it might be worth to appreciate and think that active listening could also be a way of contribution. This reminds me of some learning / participating styles my participants spoke about and how their “quiet” learning styles might not be appreciated. It is interesting how some learning styles are culturally preferred than the others. Then who decides what’s the “right” or “wrong” way to learn and / or to engage? Who holds this power? Who is compliant with that standard? And who resist it?

January 2021

I have started analysing the transcripts recently, by looking at transcripts and focusing on discourses. I am very mindful that I am using a method (discourse analysis) from Western culture to analyse the data. I wonder what that means and whether this approach will be culturally sensitive enough? Then I am also aware that (to my knowledge) there aren’t any research methods from Chinese culture that I can use to analyse the data. So, I need to be mindful of that. I also wonder about the supervision I receive at the moment (both of my supervisors are from Western culture), and how that potentially could influence the data analysis. How shall I make sure that the findings are culturally sensitive and not over-powered by Western knowledge and perspectives? I am thinking about to propose a different way of having the supervision space, in that perhaps I can take the lead in making sense of the discourses, unpicking the data, and critical thinking with their support, rather than being given directions of what to construct?
April 2021

I have started writing up my analysis recently, and somehow it has made me feel heavy, overwhelmed, angry, frustrated, and sad. Perhaps because how raw, relevant, and relatable these findings are to me. I am worried about my emotions and my own perspective could bias the findings; I hope not. So, I have reached out to my supervisors, and Chinese consultant to double check my results to ensure crystallisation and better validity and reliability of the results. Whilst I am sitting with a little bit feeling of powerlessness; I am also feeling passionate and eager to complete this project to allow Chinese trainees' perspectives to be seen, and heard. I feel there is still a long way to go to bring out Chinese cultural perspectives in the training environment, but this is a start.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix B: The search planning tool

**Search Planning Form**

**Question:** What do we currently know about the training experience of trainee psychologists from Chinese cultural backgrounds?

Identify the main concepts of the question (use as many as you need)

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<th>Concept 2</th>
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List alternatives keywords, terms and phrases below

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Appendix C: The full electronic search strategy of the initial search attempt.

**EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS**

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## EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

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EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

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HEALTH, SCIENCE, ENGINEERING AND TECHNOLOGY ECDA

ETHICS APPROVAL NOTIFICATION

TO Zheng Zhou

CC Dr Pieter Nel

FROM Dr Simon Trainis, Health, Science, Engineering & Technology ECDA Chair

DATE 25/06/2020

Protocol number: LMS/PGT/UH/04205

Title of study: Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

Your application for ethics approval has been accepted and approved with the following conditions by the ECDA for your School and includes work undertaken for this study by the named additional workers below:

Dr. Bican Polat

General conditions of approval:

Ethics approval has been granted subject to the standard conditions below:

Permissions: Any necessary permissions for the use of premises/location and accessing participants for your study must be obtained in writing prior to any data collection commencing. Failure to obtain adequate permissions may be considered a breach of this protocol.

External communications: Ensure you quote the UH protocol number and the name of the approving Committee on all paperwork, including recruitment advertisements/online requests, for this study.

Invasive procedures: If your research involves invasive procedures you are required to complete and submit an EC7 Protocol Monitoring Form, and copies of your completed consent paperwork to this ECDA once your study is complete.

Submission: Students must include this Approval Notification with their submission.

Validity:

This approval is valid:

From: 25/06/2020
To: 31/12/2020
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix E: Information sheet

Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

PARTICIPANT INFORMATION SHEET

Title of study

Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

Introduction

My name is Zheng Zhou and I am inviting you to take part in a research study which I am undertaking as part of my doctorate clinical psychology training at the University of Hertfordshire. Before you decide whether to do so, it is important that you understand the research is being done and what your involvement will include. Please take the time to read the following information carefully and discuss it with others if you wish. Do not hesitate to ask me anything that is not clear or for any further information you would like to help you make your decision. Please do take your time to decide whether or not you wish to take part. Thank you for reading this.

What is the purpose of this study?

The purpose of this study is trying to better understand how Chinese cultural heritage impacts on your experience of DClin training in the UK. In particular, I am interested in the role of cultural scripts, cultural representations, and cultural patterns/expressions on your working style, training style, reflection style, at Uni and on placement(s). I am also curious about these influences on the interactions with your colleagues and supervisor(s) on placement(s), as well as with your peers and tutor(s) at Uni.

Do I have to take part?

It is completely up to you whether or not you decide to take part in this study. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a consent form. Agreeing to join the study does not mean that you have to complete it. You are free to withdraw at any stage without giving a reason. A decision to withdraw at any time, or a decision not to take part at all, will not affect you in any way.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Are there any age or other restrictions that may prevent me from participating?

In order to participate in this study, you need to be aged 18 years old or above, with a Chinese cultural heritage from the East-Asian region, e.g. mainland China, Hong Kong, Taiwan, Singapore, Malaysia, to name a few. You should also at least have finished high school in the origin of the East-Asian countries.

How long will my part in the study take?

If you decide to take part in this study, you will be involved in it for semi-structured interview, which may take place on one or more occasions depending on your availability and each interview session will be approximately one hour.

What will happen to me if I take part?

Firstly, you will be asked to fill in some demographic questions such as your age, the length of your stay in your origin of country, and the length of stay abroad. Then you will be asked to take part in a semi-structured individual interview. The questions involve your life experience and experience of Doctorate Clinical Psychology Training in the UK. You may also choose to keep notes, journals, diary entries, or other means (e.g. memory boxes, photographs, letters, stories acquired through friends or family members etc) to record and/or share your experiences. These materials, upon receiving consent, could be used as data in this research.

What are the possible disadvantages, risks or side effects of taking part?

There are no known possible disadvantages, risks or side effects if you were to partake in this study.

What are the possible benefits of taking part?

There are no known possible benefits of taking part in this study, but I hope to interest you in the results of the study which could possibly be insightful.

How will my taking part in this study be kept confidential?

Your identity will remain anonymous at all times. The data you provide will only be accessible to the research team involved. All data including personal details will remain stored on a password protected computer. Your data will solely be used for the purposes of the study.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

However please be aware that if you say anything that threatens your own safety or that of others, this will need to be reported to the programme coordinator.

**Audio-visual material**

The interviews will be audio and/or video recorded. All materials will be kept securely and stored on a password-protected computer. Only the author and the supervisory team will have access to the materials. All materials will be safely destroyed after the study, and will not be required for use in further studies.

**What will happen to the data collected within this study?**

The data you provide will be used in a write up for my project as part of my Doctorate degree and has protocol number LMS/PGT/UH/04205

This research has been reviewed by the HSET (a University of Hertfordshire ethics committee)

If you would like further information or questions of me, or would like to discuss any details personally, please get in touch with me by email: zz18aas@herts.ac.uk

Although we hope it is not the case, if you have any complaints or concerns about any aspect of the way you have been approached or treated during the course of this study, please write to the University’s Secretary and Registrar at the following address:

Secretary and Registrar
University of Hertfordshire
College Lane
Hatfield
Herts
AL10 9AB

Thank you very much for reading this information and giving consideration to taking part in this study.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix F: Consent form

Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

CONSENT FORM

Please read the Information Sheet before completing this Consent Form

Title of Study

Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

Department:

School of Life and Medical Sciences, Doctorate in Clinical Psychology, University of Hertfordshire

Name and Contact Details of Principal Researcher:

Zheng Zhou, Trainee Clinical Psychologist, University of Hertfordshire, zz18aas@herts.ac.uk

Approval for research:

This study has been approved by UH Research Ethics Committee, for studies involving the use of human participants

1 I confirm that I have been given a Participant Information Sheet (a copy of which is attached to this form) giving particulars of the study, including its aim(s), methods and design, the names and contact details of key people and, as appropriate, the risks and potential benefits, how the information collected will be stored and for how long, and any plans for follow-up studies that might involve further approaches to participants. I have also been informed of how my personal information on this form will be stored and for how long. I have been given details of my involvement in the study. I have been told that in the event of any significant change to the aim(s) or design of the study I will be informed, and asked to renew my consent to participate in it.

2 I have been assured that I may withdraw from the study at any time without disadvantage or having to give a reason.

3 I have been assured that participating in or withdrawing from this study at any time will not benefit or disadvantage me financially, professionally or academically.
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

4 In giving my consent to participate in this study, I understand that voice or video will take place and I have been informed of how/whether this recording will be transmitted.

5 I have been given information about the risks of my suffering harm or adverse effects. I have been told about the aftercare and support that will be offered to me in the event of this happening, and I have been assured that all such aftercare or support would be provided at no cost to myself. In signing this consent form I accept that support might be sought for me, should circumstances require this.

6 I have been told how information relating to me (data obtained in the course of the study, and data provided by me about myself) will be handled: how it will be kept secure, who will have access to it, and how it will or may be used.

7 I understand that information provided for this research may be published in a journal, Web site or other form of publication without my name attached, and that efforts will be made to conceal my identity, but that anonymity cannot be guaranteed.

8 I understand that my participation in this study may reveal findings that could indicate that I might require medical or mental health advice. In that event, I will be informed and advised to consult relevant third parties such as my GP.

9 I understand that if there is any revelation of unlawful activity or any indication of non-medical circumstances that would or has put others at risk, the University may refer the matter to the appropriate authorities.

10 I have been told that I may at some time in the future be contacted again in connection with this or another study.

I, the undersigned [please give your name here, in BLOCK CAPITALS]

.................................................................................................................................

of [please give contact details here, e.g. a mobile number or email address]

.................................................................................................................................

hereby freely agree to take part in the study entitled [insert name of study here]

.................................................................................................................................

(UH Protocol number LMS/PGT/JH/04205)

Signature of participant................................................................. Date.................................

Signature of (principal) investigator.................................................. Date.................................

Name of (principal) investigator [in BLOCK CAPITALS please].................................
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix G: Debrief sheet

Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

DEBRIEF SHEET
(UH ethics protocol number LMS/PGT/UH/04205)

Dear {{Invitee_first_name}},

Thank you for attending {{event_name}} at {{event_time}} on {{event_date}}. Through exploring training areas that may be challenging for you, as well as learning from your successes, I hope that this research will help broaden understanding of the cultural influence on your training experience. In turn, I hope that it will encourage thinking about how to better address challenges that Chinese trainees' experience during their training and enhance opportunities and celebration of success.

The information that you have provided will be kept confidential and all data will be destroyed after the full completion of the research. You can withdraw your contribution from the study without giving any reason for up to one month after participation.

Hopefully you have found your participation in the project useful. However, if your participation has caused you any distress, it is generally advised that you contact your immediate sources of support such as family, friends, GP or therapist/counsellor.

If you would like further support, please find below the details of some organisations that may be useful. These sources of support are likely to help you with your emotional and psychological wellbeing.

Your GP
Please consider contacting your GP if you feel that you could benefit from support for feeling low or anxious.

Psychological therapies
If you think that you may benefit from engaging in a talking therapy then you may wish to consider self-referring to your local psychological therapies service or asking your GP to refer you.

To find your nearest service, you can search on the NHS choices webpage:

https://www.nhs.uk/Service-Search/Psychological-therapies-(IAPT)/LocationSearch/10008
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

If you are a student, you could also consider accessing support through Student Wellbeing:
https://www.herts.ac.uk/life/student-support/student-wellbeing

NHS Choices
If you’re worried about an urgent medical concern, call 111 and speak to a fully trained adviser.
Website: https://www.nhs.uk/pages/home.aspx Helpline: 0113 825 0000

Samaritans
This is a 24 hour a day, free and confidential helpline for anyone experiencing any emotional distress.
Freephone: 08457 90 90 90 Website: www.samaritans.org

If you have any further questions or would be interested in being informed in the outcome of this study, then please contact the researcher, Zheng Zhou by email (zz18aas@herts.ac.uk).

If you have any complaints or concerns about any aspect of the study, you can contact Dr Pieter Nel (Principal Supervisor) by email (p.w.nel@herts.ac.uk) or write to the University’s Secretary and Registrar as advised on the Participant Information Sheet

Thank you once again for your participation and support!
Dear lovely people,

I hope you are all keeping well! I am a trainee clinical psychologist from Herts (Hertfordshire University). I am currently conducting my thesis research, and my passion is about exploring the cultural difference in training experience. In particular, I am interested in the influence of Chinese cultural heritage on trainees' training experience. I would like to interview trainees over Zoom who suit for this study (please see attached Poster). I hope my study could raise awareness of the impact of cultural differences and diversity for trainees from Chinese cultural heritage.

If you are from Chinese cultural background and interested in exploring your cultural heritage and its influence on your training experience, then please get in touch. It would be very meaningful to hear your views. 😊
Are you a trainee from Chinese cultural background?

I would like to invite you to take part in a research study exploring the influence of Chinese cultural heritage on your DClin training experience. This study is part of my Clinical Psychology Doctoral thesis at the University of Hertfordshire.

Can I take part in this study?
I am aged 18 or over. ✓
I am a trainee Clinical Psychologist on a DClin course in the UK. ✓
I have a Chinese cultural heritage from an East-Asian region (e.g. mainland China, Hongkong, Taiwan, Singapore, Malaysia, etc). ✓
I have finished high school in the origin of my country. ✓
I speak and read English (and/or Mandarin). ✓

What is involved?
Little is known about the training experience of trainees from Chinese cultural background. This study involves being interviewed about your culture and its influence on your DClin training experience.

If you are keen to explore this, then please contact me:
Zheng Zhou, Trainee Clinical Psychologist
Email: zz18aas@herts.ac.uk

This research has been approved by the Health, Science, Engineering & Technology (ECDA) Ethics Committee of UH
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix I: Advertisement for study via email

Dear staff team member,

I hope this email finds you well! My name is Zheng Zhou. I am a trainee clinical psychologist from University of Hertfordshire. I am currently conducting my thesis research, and my passion is about exploring the cultural difference in training experience. In particular, I am interested in the influence of Chinese cultural heritage on trainees’ training experience. I would like to interview trainees who suit for this study over Zoom (please see attached poster). I hope my study could raise awareness of the impact of cultural differences and diversity for trainees from Chinese cultural heritage.

I wonder if you could forward this email to your trainees to see if any of them from Chinese cultural background might be interested in exploring their cultural heritage and its influence on their training experience? It would be very meaningful to hear their views.

Many thanks! Please do not hesitate to contact me if you have any questions.

Best wishes
Zheng  

---

Are you a trainee from Chinese cultural background?

I would like to invite you to take part in a research study exploring the influence of Chinese cultural heritage on your DClin training experience. This study is part of my Clinical Psychology Doctoral thesis at the University of Hertfordshire.

Can I take part in this study?
I am aged 18 or over. ✓
I am a trainee Clinical Psychologist on a DClin course in the UK. ✓
I have a Chinese cultural heritage from an East-Asian region (e.g., mainland China, Hongkong, Taiwan, Singapore, Malaysia, etc.). ✓
I have finished high school in the origin of my country. ✓
I speak and read English (and/or Mandarin). ✓

What is involved?
Little is known about the training experience of trainees from Chinese cultural background. This study involves being interviewed about your culture and its influence on your DClin training experience.

If you are keen to explore this, then please contact me:
Zheng Zhou, Trainee Clinical Psychologist
Email: zzh2010@herts.ac.uk

This research has been approved by the NRC, Science, Engineering & Technology (ECCA), Ethics Committee of UH
### Appendix J: Screening form

To meet the criteria for this study, please complete a brief screening form below:

**Description (optional)**

<table>
<thead>
<tr>
<th>Field</th>
<th>Requirement</th>
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<tr>
<td>Full name</td>
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<td>Sex</td>
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<td>Age</td>
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<tr>
<td>Country of birth</td>
<td>*</td>
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<tr>
<td>Has Chinese culture influenced your upbringing?</td>
<td>*</td>
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</tbody>
</table>

- **Sex**
  - Female
  - Male
  - Other...

- **Age**
  - Short answer text

- **Country of birth**
  - Short answer text

- **Has Chinese culture influenced your upbringing?**
  - Yes
  - No
  - Other...
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Did you finish high school in East-Asia (e.g. mainland China, Hongkong, Taiwan, Singapore, Malaysia etc.)?  
☐ Yes  
☐ No  
☐ Other:

How long have you been in the UK?  
Short answer text  

Which DClin training course are you on?  
Short answer text  

Which year of training are you in?  
☐ First Year  
☐ Second Year  
☐ Third Year  
☐ Other:  

How many trainees from Chinese cultural background are there on your cohort?  
☐ 1  
☐ 2  
☐ 3  
☐ 4  
☐ 5  
☐ Other:
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix K: Interview schedule

Exploring the Chinese cultural influence on the experience of clinical psychology training in the UK

INTERVIEW SCHEDULE

Review information sheet, materials, consent for participation, right to withdraw, language (can use both mandarin/English), recording, length of interview, take breaks or terminate interview at any point. Difference between Culture & Ethnicity (focus on CULTURE here)

Answer any questions.

What is the purpose of this study?

The purpose of this study is trying to better understand how Chinese cultural heritage impacts on your experience of DClin training in the UK. In particular, I am interested in the role of cultural scripts, cultural representations, and cultural patterns/expressions on your working style, training style, reflection style, at Uni and on placement(s). I am also curious about these influences on the interactions with your colleagues and supervisor(s) on placement(s), as well as with your peers and tutor(s) at Uni.

You may also choose to keep notes, journals, diary entries, or other means (e.g. memory boxes, photographs, letters, stories acquired through friends or family members etc) to record and/or share your experiences. These materials, upon receiving consent, could be used as data in this research.

Opening:

This study is about exploring the influence of Chinese Cultural on your experience of clinical psychology training in the UK. What was it about this study that interested you / made you decide to participate?

Cultural background:

Could you tell me about your family and cultural background? Prompts:

- What was it like?
- Extended family-influence on your own family
- Tell me about your education/schooling/work experience in the country of your origin.
- What’s the Chinese culture value?
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Choosing clinical psychology
Why clinical psychology training in the UK? Prompts:

- Motivation
- Expectations/aspirations of self, other friends, parents, siblings, family members
- Role models

Training Experience
Could you tell me about your experience as a trainee clinical psychologist being from a Chinese background? Prompts:

- What does it mean to you being the (only) Chinese trainee(s) on your cohort?
- How similar or different do you feel to your peers on the cohort?
- Was there any moment that your identity as a trainee with Chinese background has become salient during your training? E.g. the way you:
  - Reflect? (reflection style)
  - Work on placement?
  - Are in lectures? (let other people speak first – quiet; think before you talk vs think whilst you talk)
  - When interacting with your peers/tutor/supervisors? (respect supervisors)
- Challenges (examples): with these differences,
  - how easy or difficult was it for you to ..... (adjust? fit-in? behave? interact?)? can you give me some example?
  - What challenges/difficulties have you experienced/perceived in doing the training?
  - What do you think might be the reasons for these challenges?
  - What are some of the challenges of being a Chinese clinician?
- On a day-to-day basis, how do you cope with the challenges you mentioned earlier?
- Positives
  - What are some of the positives of being a Chinese clinician? Prompt: What’s the best thing?
  - What positives have you experienced/perceived as a Chinese trainee in doing the training?
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Finally
Is there anything we haven’t touched upon in relation to culture and your experience of DClp training that you would like to talk about? Prompts:

- Are there any key challenges/successes in your training that we have not talked about yet?

What has the experience of being interviewed for this research been like for you?

Debrief, Review Consent, Details to be Anonymised, and Further Support if required
Participant 3 transcript:

Transcription of audio and video recording

Transcription conventions (Jefferson 2004):

[ ] overlapping
^ pitch up
Underling emphasis
CAPITAL louder speech
* * quieter speech
* squeaky vocal
( ) micropause
(.number) length of pause
( ( ) ) non-vocal action
: elongation of tone
Hhh out-breaths
.hhh in-breaths
, continuation marker
? question intonation
. stopping intonation
- abrupt cut-off of preceding sound
> < faster pacing
< > slower pacing
= continuing speech interrupted by others
Heh heh laughter
(h) laughter in speech
( ) unclear fragment on the tape
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<td>131</td>
<td>maybe these other conversations that I may not have when I go home? (5) so:: does it mean that does it mean that I tone down when I go home? Does it mean that I need to stop these conversations (2) so it's a lot of things that I ehm &lt;not too sure&gt; (3) how to adapt &gt;because I am adapting to the current culture here and I am not&lt;&lt; too sure after I have adapted it how do I adapt back home again (3)</td>
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<td>135</td>
<td>And you mentioned about the reflective sessions you had with your peers: have you noticed any kind of ehm:: reflective styles: in terms of how you reflect is it quite similar or [different to</td>
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<td>137</td>
<td>P3 reflection sessions I did not say anything at all (.2) yeah I would say for the first year I didn't say anything at all (.5) I didn't say much (.5) [undecipherable]</td>
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<td>140</td>
<td>[so when you say different what do you mean by that (.) what differences have you noticed</td>
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<td>142</td>
<td>P3 Yeah I think it really boils down to: (.2) vs maybe me: not (.) I am not trained to: verbalising internal thoughts (.3) so I am reflecting I am thinking about things (.2) but I don't say what I am thinking about (.3) I yeah I reflect in my own head myself I don't say it out loud (.2) and:: I don't need (.) validation or I don't need discussion from what I'm reflecting on I am OK just reflect it myself (.4)</td>
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<td>146</td>
<td>P3 Oh they are layman they will talk about: (.2) very mino= OK very minor things they will talk about oh how: (.3) I think they talk a lot about emotions: (.2) as well: ehm:: they: yeah they will talk a lot about emotions they will label &gt;not all:&lt; (.2) ehm: they are more readily: yeah they will label their emotions more readily That's something I notice: (.2) ehm:: (.2) yes I think yeah (.2) that's in my reflective group they are more (.2) and for me:: I learn? I learn from them and yeah</td>
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| 151 | P3 (.3) It's:: (.2) situations like (.2) microaggression (.2) and:: comments from (.2) colleagues that makes it very salient? (.2) ehm:: colleagues would say things like Oh finally we have some diversity here (.2) or:: something like ehm: hmm:: (.2) they would come to me: (.2) just to do translation? Which I think (.2) you know NHS pays translator (.2) you could have booked a translator or you could have called a translator and (.2) I am Chinese but it doesn't mean (.2) my Mandarin is the same as the Mainland Chinese or: (.2) a Taiwanese it's completely different (.2) and I am not even good in my Mandarin? (.3) ehm: I cant translate a lot of things (.2) yet they would come? >so the moment they found out that I am< (.3) I can speak Mandarin (.2) and they could refer me any Chinese (.2) ehm: ethnicity (.2) patient which I'm not that comfortable? (.2) ehm: It's quite a strange position to: raise my discomfort? (.3) I thin= because they don't understand? I tried to subtly raise it and they don't understand? (.3) at which point I was like OK it's just six months (.3) I think I immediately wonder if this is a a:: (.2) whole about being patient: ehm: as a virtue being patient being: ehm: forgiving: (.2) try to tolerate (.2) so I just thought OK: (.2) let's tolerant for another six months (.2) I'm fine: (.2) after that (.3) we don't want any trouble: it's an narrative ehm: within my family the intergenerational narrative is quite (.2) obvious like we don't want
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

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<th>Line</th>
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<td>163</td>
<td>trouble (.1) we just want to (.1) MEI TOU KU GAN that’s what my dad always say (.1) so: something about work hard do your job (.1) and you will be fine (.2) so: that’s: yeah that’s how I cope I guess (.3)</td>
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<td>164</td>
<td>I And: in terms of you know: in the lectures I know you mentioned a little bit you know about that earlier (.1) any other salient moment you noticed in the lectures</td>
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<td>167</td>
<td>P3 Ehmm: (.3) let me think (.4) I wouldn’t say it’s: (.2) yeah I think (.4) I am thinking about suicide and how it’s (.1) how people grief (.3) how (.1) different cultures grief (.1) Chinese have quite elaborated funeral process (.2) that up to seven days: (.1) ehmm: I’m not too sure where you are from: whether you have the same elaborated funerals that’s that’s colour coded (.2) the colour (.1) the clothes that you wear it’s it’s your: ranking in the family: it’s very hierarchical: ehmm: there’s different Chinese funerals whether it’s Buddhist Taoist ehmm: it can be Christians which is more simple (.1) ehmm: straightforward funeral: ehmm (.3) this is quite salient when we talk about grief? Like just about grief and (.1) how we grief ehmm: (.1) and I (.1) and I know this that: (.3) they (.1) when I spoke to my classmates they mentioned that they don’t grief in ways that we grief? Ehmm like I mentioned we have the seventh lunar month ehmm: even Chinese New Year my mom would prepare meals for my ancestors: so we have little (.2) cultures that’s embedded in the family? That (.3) it’s been shared from generations to generations (.3) which I don’t think they have it here (.1) so I think that’s quite something salient and when they talk about (.3) ehmm: complicated grief (.2) ehmm: meaning you think about someone or you feel the emotional loss of someone feeling low and (.1) unable to (.2) function (.1) for a period of time? (.3) ehmm: it makes me wonder how is this translated in the Chinese culture so because (.2) we are so good at suppressing emotions (.2) so on appearance we may look like we’re functioning but we may not be (.2) so: yeah it’s it’s things like that makes me question a lot (.2) about (.1) my identity: (.2) and my culture: and how we are allowed to grief (.2) I am not sure &gt;I am not sure how are we are allowed to grief because based on my memories people just&lt; (.1) stopped talking and dealt it themselves (.2) and we remember our ancestors or relatives that’s it</td>
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<td>183</td>
<td>I Ehmm. And: what about kind of your experience in terms of interacting with your tutors or supervisors (.1) have you noticed any salient moment</td>
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<td>185</td>
<td>P3 (.1) my my supervisor is Asian Heh heh so Heh heh he is Asian he’s south Asian ehmm: I think to certain extent (.2) there are similar: (.2) themes such as you know striving (.2) doing your best: ehmm: not just passing: doing your best: (.2) so: I think that’s the interaction between: my tutor and me? ehmm: he would always say oh I can do better (.2) ehmm: I don’t think that: it makes me wonder if he would say&lt; it to other trainees? Because our course constantly tell us that (.1) you just need to pass: (.2) you don’t need to be perfect you don’t need to be &lt;good&gt; as in you don’t need to be the best&lt; you just need to be good enough that the message our course has been sending (.2) ehmm: but my tutor is telling whenever I meet him he will tell me different things he will tell me things like oh you can do more I am sure you can do more ehmm: or I’m sure you can challenge yourself a little bit more: I am sure you can learn more: so I think it’s (.3) it’s slightly different when I spoke to say a local tutor? They will be like oh well done: good job: ehmm (.2) just follow: your passion: just do what you are interested in: (.1) you will be good: you will be OK: so it’s quite different kind of ehmm message that’s been sent across</td>
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EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Appendix M: Extracts of notes made on a transcript

M1: Direct and indirect references to the objects were read and highlighted line by line, notes were made.

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EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

M2: Regrouped statements, revised notes, and additional notes

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<td>72</td>
<td>I</td>
<td>Ehmmm OK (.) right so: gonna move on to talk a little bit about your training experience now: ehm: could you tell me: a little bit about your experience as a trainee Clinical psychologist from a Chinese Culture background: what has it been like?</td>
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<td>73</td>
<td>P3</td>
<td>(3) I think that it's quite hard: I want to say that it's quite hard: ehm: especially this is the first time I'm studying overseas: ehm: in in a culture that I'm the minority: people don't know Chinese culture enough or they know the stereotypical thing about Chinese like I am supposed to be good at maths: which I got a lot: people ask me are you supposed to be good at stats: ehm: heh: heh: ehm: I think that the the biggest thing is notice when I first come in my first semester was: I am not very comfortable vocalising my internal thoughts: ehm: because in Chinese culture we: always at least I think that we're brought up in an environment that let the elder speak (.) or: let people who are more knowledgeable have more power (.) to talk and: if (.) you are the youngest or younger ones just keep quiet because: it's not your position to talk so I think (.) and I'm the youngest in the family?: so I think that has been: the pattern and interactions growing up (.) and: having that (.) mindset or that (.) comfort level: Coming in into the course in the UK: I was suddenly throwing into the situation: I feel very pressured to speak: ehm: to ask questions in class: I am not comfortable at all (.) and: when I am not comfortable I'll be (oh ehm: I mean the locals will ask things like: why didn't you contribute: I am sure that you have lot of knowledge you could contribute but didn't you contribute and (.) I don't know: I don't feel comfortable explaining to them as well: I can explain to one or two but after that one or two I don't feel comfortable (.) explaining? (.) so I think that's one of the biggest contrast I've seen: ehm: another thing is in placement as well: so in placement sometimes I noticed colleagues would say oh when they describe my Chinese family or when they describe my Chinese clients they would oh they are very stoic: they: they are very cold: they don't have any: emotions (.) and they ask me: to be in a session with them: just because I can translate therefore I am in the session: they can't get a translator so I was in the session (.) and: when I was there I don't think the client or the family members are emotionless: I don't think that they are anywhere near the word stoic and cold: (.) and that's the moment hit me oh actually (.) they don't understand how: (.) we express ourselves and how we express emotions: so even though we don't internalise our own thoughts as much doesn't mean that (.) we (.) don't feel it (.) we just don't express it and I think they don't understand that we just don't express it (.)</td>
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<td>P3</td>
<td>Yeah that's the biggest (.) I notice</td>
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<td>Yeah that's the biggest (.) I notice</td>
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<td>And have you: I mean only if you can like ehm: you give a brief example of the difference of expressing ourselves or: the different ways of showing emotions you know between people from Chinese culture and people here, what differences have you noticed?</td>
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<td>98</td>
<td>P3 I think in Chinese we would never say I am sorry to hear that (3) It feels patronising I think (3) I tried that with one of my classmates we are both from Singapore: (.) ehm: : I remember we had role play? before we started our placement and we tried just thought ok let's try the Brits way of talking (.) to one another (.) to see if it works (.) we hated it we both felt like (.) no: I think we are ok if it's a White person say oh I'm sorry to hear that (.) ehm: we are OK with White people saying that but if it's a fellow Chinese would say it'll be like no no I can't (.) it's very uncomfortable (.) and: I thought it was just me so we flipped (.) the roles: we tried to play with other fellow Chinese ehm: classmates as well: or peers and soon we realise we can't (.) say I'm sorry to hear that (.) in their tone? I think we need to say in our: maybe in more blunt (.) manner (.) than the more round manner (.) the locals (.) expressed (.) that's one thing that I noticed. Ehm: (.) and I think (.) I am thinking in terms of (.) client wise: (.) the Chinese client that I've interacted with they: (.) they are (.) maybe they: would tend to discount ehm: the happiness but I do know this in White people or other races as well so I don't think it's a Chinese culture thing: (.) I'm not sure that's something I'm not too sure (.)</td>
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<td>109</td>
<td>I OK. And: were there any moment you know: that your identity as a trainee with Chinese culture background has become salient during your training</td>
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<td>110</td>
<td>P3 (2) Hmm: (3) I think yes quite a lot (.) When (.) ehm: so for instance when they talk about CBT that's the first I thought of (.) does it apply: or will it be applicable to: Chinese? Or will it be applicable to: ehm: what impact of: cognitive restructuring: on: say: a very striving: (.) I wouldn't use perfectionist, I think a very striving Chinese: individual, does cognitive restructuring works (.) and: that would make me question OK: if I'm a client (.) and I have a very: I would say I'm striving (.) individual? Would cognitive restructuring work and that's an area I'd say (.) maybe not? I think in lectures I tend to question a lot (.) about (.) whether: (2) a treatment modality whether ehm a technique is going to work in: Asian society (.) and different types of Chinese I mean: perhaps there are some that (.) totally not comfortable or not socialised to talk about emotions at all and (.) how do we (.) work with them? I think? Yeah: almost every lecture: my identity is quite prominent and quite in reflective sessions as well: (3) ehm: : (.) Yeah (.)</td>
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<td>119</td>
<td>P3 For instance: (3) I think the most recent one is: (.) hhm I think the most recent one is about (.) racial disparity: black live matter: ehm: (.) questioning about the system? Which we are very encouraged to do in the UK: when I talk about this to my family members that's when I notice they are not (.) they do not want to engage this conversation at all: (.) ehm: and: it makes wonder if it's as it's a very: westernised concept like talking about (.) ehm: what's the word (.) basically talking about this kind of concepts talking about inequality racism (2) the lack of diversity it makes me wonder if it's a Western concept: cos I don't recall: us having: this kind of concept= this kind of conversation growing up: with relatives: or: (.) I think that the message we get (.) is always: oh ehm: : (.) yeah I think this is where I'm going to speak in Chinese (.) it's something along the line &quot;TUI YI BU HAI KUO TIAN KONG&quot; something like that (.) so if you can let go of it (.) it's fine: (2) you know and I think that Chinese sometimes they: (.) believe in (.) forgiveness: and patience: as virtues and sometimes it makes me wonder OK (.) say black live matters I know it's strong I know it's bad (.) but with the Chinese (.) mentality in terms of forgiveness and patience will they change (.) the structure will it not change or: how would they play out (.) if this happens in the Chinese society (.) I don't know (3) I think in reflective sessions like this it makes me think a lot about (2) what= because I am changing (.) every conversation I have I will be learning? (3) and (.) it also makes me aware that</td>
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| 124  | Encouraged to speak up and talk about one's opinions |
| 130  | Are these Western concepts applicable to my culture? |

**British manner is rounded, polite**

**Models, knowledge's applicability to my culture?**

**Usefulness of certain Western concepts to my culture?**

**Encouraged to speak up and talk about one's opinions**

**Are these Western concepts applicable to my culture?**

**British way of sending condolences not applicable/not working for my culture**

**Minorities/majorities**

**Culture virtue: Chinese concepts different to Western concepts**

**I am gaining/growing/learning/reflecting**
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Are these Western concepts applicable to my culture?

131
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151
152
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162

maybe these other conversations that I may not have when I go home? (.6) so: does it mean that does it mean that I tone down when I go home? Does it mean that I need to stop these conversations (.2) so it's a lot of things that I ehm <not too sure> (.3) how to adapt >because I am adapting to the current culture here and I am not (again (.3)

P3

[quite different. It think it's very different my first few: I remember my first few reflection sessions I did not say anything at all (.2) yeah I would say for the first year I didn't say anything at all (.2) I didn't say much (.5) (unreadable)

P3

[so when you say different what do you mean by that (.7) what differences have you noticed]

P3

Yeah I think it really boils down to: (.2) us maybe me: not (.1) I am not trained to: verbalising internal thoughts (.1) so I am reflecting I am thinking about things (.2) but I don't say what I am thinking about (.3) I yeah I reflect in my own head myself I don't say it out loud (.2) and: I don't need (.1) validation or I don't need discussion from what I'm reflecting on I am OK just reflect it myself (.4)

P3

Oh they are layman they will talk about: (.2) very minor: OK very minor things they will talk about oh how: (.3) I think they talk a lot about emotions: (.2) as well: ehm: they: yeah they will talk a lot about emotions they will label not all: (.2) ehm: they are more readily: yeah they will label their emotions more readily: That's something I notice? (.2) ehm: (.2) yes I think yeah (.2) that's in my reflective group they are more (.2) and: for me: I learn: I learn from them and yeah

P3

[(3) It's: (.2) situations like (.1) microaggression (.2) and: comments from (.1) colleagues that makes it very salient (.1) ehm: colleagues would say things like Oh finally we have some diversity here (.2) or: something like ehm: hhh: (.2) they would come to me: (.2) just to do translation? Which I think (.1) you know NHS pays translator (.1) you could have booked a translator or you could have called a translator and (.2) I am Chinese but it doesn't mean (.1) my Mandarin is the same as the Mainland Chinese or: (.1) it is a lack of awareness of diversity in Chinese culture]

P3

Taiwanese it's completely different (.1) and I am not even good in my Mandarin (.3) ehm: I can't translate a lot of things (.1) yet they would come >so the moment they found out that I am (<) I can speak Mandarin (.1) and they would refer to me any Chinese (.1) ehm: ethnicity (.1) patient which I'm not that comfortable? (.2) ehm: it's quite a strange position: to raise my discomfort (.1) I think because they don't understand? I tried terribly raise it and they don't understand? ehm: as a virtue being patient being: ehm: forgiving (.2) try to tolerate (.2) so: just thought OK: (.3) let's tolerate for another six months (.1) I'm fine (.1) after that (.3) we don't want any trouble: it's an narrative ehm: within my family the intergenerational narrative is quite (.1) obvious like we don't want
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

| 163 | I | trouble (.) we just want to (.) MEI TOU KU GAN's that's what my dad always say (.) so: something about work hard do your job (.) and you will be fine (.) so: that's: yeah that's how I cope I guess (.) |
| 164 | \ | Chinese cultural strengths/resilience |
| 165 | I | And: in terms of you know: in the lectures I know you mentioned a little bit you know about that earlier (.) any other salient moment you noticed in the lectures |
| 167 | P3 | Ehm:: (3) let me think (4) I wouldn't say it's: (2) yeah I think (4) I am thinking about suicide and how it's (.) how people grief (3) how (.) different cultures grief (.) Chinese has quite elaborated funeral process (2) that upto seven days: (.) ehm:: I'm not too sure where you are from: whether you have the same elaborated funerals that that's colour coded (2) the colour (.) the clothes that you wear it's: it's your: ranking in the family: it's very hierarchical: ehm:: there's different Chinese funerals whether it's Buddhist Taoist ehm:: it can be Christians which is more simple (.) ehm: straightforward funeral: ehm:: (3) this is quite salient when we talk about grief? Like just about grief and (.) how we grief ehm:: (.) and (.) and I know this that (3) they (.) when I spoke to my classmates they mentioned that they don't grief in ways that we grief? Ehm like I mentioned we have the seventh lunar month ehm: even Chinese New Year my mom would prepare meals for my ancestors: so we have little (2) cultures that's embedded in the family: That (3) it's been shared from generations to generations (3) which I don't think they have it here (.) so I think that's quite something salient and when they talk about (3) ehm: complicated grief (2) ehm:: meaning you think about someone or you feel the emotional loss of someone feeling low and (.) unable to (2) function? (2) for a period of time? (3) ehm:: it makes me wonder how is this translated in the Chinese culture so because (.) we are so good at suppressing emotions (2) so on appearance we may look like we're functioning but we may not be? (2) so:: yeah it's it's things like that makes me question a lot (2) about (.) my identity: (2) and my culture: and how we are allowed to grief (.) I am not sure: I am not sure how we are allowed to grief because based on my memories people just (.) stopped talking and dealt it themselves (.) and we remember our ancestors or relatives that's it |
| 168 | \ | Chinese concepts of grief is different to Western concepts |
| 169 | | Chinese cultural strengths/resilience |
| 170 | | different cultural ways to process emotions of loss |
| 171 | | Allowed? not allowed? there is a "right" / "wrong" way to grief after unpacking Chinese & Western ways of processing loss? |
| 181 | \ | Cultural different interactions with tutors to feel affirmed/valued/encouraged. |
| 183 | I | Ehmm. And: what about kind of your experience in terms of interacting with your tutors or supervisors (.) have you noticed any salient moment |
| 184 | \ | Chinese cultural strengths/resilience |
| 185 | P3 | (.) my my supervisor is Asian Heh heh so Heh heh he is Asian he's south Asian ehm:: I think to certain extent (.) there are similar: (2) themes such as you know striving: (2) doing your best: (2) not just passing: doing your best: (2) so: I think that's the interaction between: my tutor and me? ehm: he would always say oh I can do better (2) ehm:: I don't think that -> it makes me wonder if he would say it to other trainees? Because our course constantly tell us that (.) you just need to pass: (2) you don't need to be perfect you don't need to be .. good ->>as in you don't need to be the best < you just need to be good enough that the message our course has been sending (2) ehm:: but my tutor is telling whenever I meet him he will tell me different things he will tell me things like oh you can do more I am sure you can do more ehm:: or I'm sure you can challenge yourself a little bit more: I am sure you can learn more: so I think it's (3) it's slightly different when I spoke to say a local tutor? They will be like oh well done: good job: ehm (.) just follow: your passion: just do what you are interested in: (.) you will be good: you will be OK: so it's quite different kind of ehm message that's been sent across |
| 186 | \ | Chinese cultural strengths/resilience |
| 187 | \ | Chinese concepts of grief is different to Western concepts |
| 188 | | Chinese cultural strengths/resilience |
| 189 | | different cultural ways to process emotions of loss |
| 190 | | Allowed? not allowed? there is a "right" / "wrong" way to grief after unpacking Chinese & Western ways of processing loss? |
| 191 | \ | Cultural different interactions with tutors to feel affirmed/valued/encouraged. |
| 192 | \ | Chinese cultural strengths/resilience |
| 193 | \ | Chinese concepts of grief is different to Western concepts |
| 194 | \ | Chinese cultural strengths/resilience |
| 195 | I | Ehmm. |
EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

Table M3: a process of constructing discourses

<table>
<thead>
<tr>
<th>Coloured texts from the transcripts were clustered under “initial discourses”:</th>
<th>Reasons for combining of discourses</th>
<th>Revised discourses</th>
<th>Action Orientation</th>
<th>Positioning</th>
<th>Practice</th>
<th>Subjectivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pressure to share thoughts and feelings</td>
<td>These discourses were based upon the notion that there might be particular behavioural norms within DClinPsy training environment.</td>
<td>Competency in expressing oneself</td>
<td>Problematise certain behaviours</td>
<td>Seeing themselves as deficit, unskilled, incompetent</td>
<td>Conforming to but struggling with group interactions in the training environment.</td>
<td>Feeling frustrated, anxious and stressed.</td>
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<td>Difficult to speak up</td>
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<td>Eliminating wider responsibilities</td>
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<td>Lack of reflection skill</td>
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<td>Seeing their own learning style as bad.</td>
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<tr>
<td>The British politeness</td>
<td>These discourses were based upon the notion that there might be particular interaction norms within the British society.</td>
<td>Challenges in maintaining social connection</td>
<td>Keeping interpersonal distance</td>
<td>Out-groups In-groups</td>
<td>A vicious cycle of being invited – declining - avoiding</td>
<td>Confused, isolated, Left-out</td>
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<tr>
<td>Drinking culture in the UK</td>
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<td>Unconscious inclusion and exclusion</td>
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<tr>
<td>A visible minority</td>
<td>These discourses were based upon the notion that “minority” might be constructed in particular ways in the British society.</td>
<td>Problems arising from of being the cultural other</td>
<td>Responsibility to raise own cultural differences</td>
<td>Inferior voice Under-privileged position Othering Silencing</td>
<td>Exposed to stereotyping/ Assumptions</td>
<td>Disheartened Let-down Unsafe to share</td>
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<td>An invisible voice</td>
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<td>Perspectives not heard or taken seriously</td>
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<td>Culture blindness</td>
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<td>No space to talk about culture</td>
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Lack of response from the locals
### EXPERIENCE OF CHINESE TRAINEE CLINICAL PSYCHOLOGISTS

<table>
<thead>
<tr>
<th>Lumped into BAME</th>
<th>These discourses were based upon the notion that the “BAME” label might have particular meanings and functions in the British society</th>
<th>Issues with being given a ‘BAME’ label</th>
<th>Generalisation</th>
<th>Outsider</th>
<th>The other</th>
<th>Doubts their belongingness</th>
<th>Confused, alienated, alone, powerless</th>
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<tbody>
<tr>
<td>Relating to both White group and BAME groups</td>
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<td>Insider</td>
<td>The other</td>
<td>Exposed to homogenisation</td>
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<tr>
<td>Knowledge</td>
<td>These discourses were based upon the notion of making a gain.</td>
<td>The symbolic capital</td>
<td>Western approach/knowledge is better.</td>
<td>Learner</td>
<td>To be taught</td>
<td>Under-appreciate cultural strengths</td>
<td>A challenge A struggle A long journey To be endur...</td>
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<td>Status/respect/future career/money</td>
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<td>Strengths / resilience</td>
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<tr>
<td>Life experience</td>
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