Portfolio Volume 1: Major Research Project

Examining Whiteness in the Context of Anti-Racism Work: A Critical Discursive Psychology Analysis

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ABSTRACT

BACKGROUND: The profession of clinical psychology was built upon the foundations of colonialism, eugenics and empiricism, with Whiteness and racism continuing to permeate the profession and the various systems in which it is embedded. In recent years, there has been a growing momentum around 'racial justice' and increasing calls for the profession to demonstrate a commitment to anti-racism. Against this backdrop, research that examines Whiteness in the context of anti-racism is both timely and necessary. This study set out to explore how White clinical psychologists (WCPs) construct their roles within anti-racism work, and how 'race', Whiteness and White identities are engaged with and constructed through their talk. More specifically, the research was interested to examine how participants' talk functions to maintain/uphold or disrupt/challenge structures of Whiteness.

METHODOLOGY: This study utilises a qualitative design, using Critical Discursive Psychology to analyse data that were collected through online focus groups with nine WCPs working within anti-racism/EDI/racial equity roles.

FINDINGS: The analysis identified six core interpretative repertoires and a number of sub-repertoires: *1) The Enlighted White Ally*, 2) The Conflicted *White Ally, 3) The Expert on the Pedestal, 4) The Tools of Clinical Psychology, 5) Change Takes Time and 6) The Burdened White Psychologist*. Through these repertoires, participants engaged in complex discursive work to construct and negotiate their roles and White identities within anti-racism work.

IMPLICATIONS: This research highlights how anti-racism work among WCPs is characterised by discursive strategies that both disrupt and uphold Whiteness. While there are moments of critical reflection and resistance in their talk, these are often entangled with discourses obscuring power, re-centring the White subject, or framing anti-racism in ways that maintain the status quo. Findings reveal how Whiteness continues to be reproduced, even within roles dedicated to anti-racism, and highlight questions around the adequacy of the profession's existing tools, which often serve to protect Whiteness and maintain institutional norms. The research therefore highlights the need for accountability frameworks that centre racially minoritised voices, redistribute leadership power, and embed anti-racist praxis within training and services.

Keywords: Whiteness, Clinical Psychology, Anti-Racism

ACROYNYMS AND ABBREVIATIONS

ACP-UK - Association of Clinical Psychologists United Kingdom

BAME -Black, Asian, and minority ethnic

BME - Black and Minority Ethnic

BPS - British Psychological Society

CASP - Critical Appraisal Skills Programme

CRT - Critical Race Theory

CWS - Critical Whiteness Studies

DA - Discourse Analysis

DClinPsy - Doctorate in Clinical Psychology

DCP - Division of Clinical Psychology

EDI - Equality, Diversity and Inclusion

HEE -Higher Education England

NHS - National Health Service

SLR - Systematic Literature Review

UH - University of Hertfordshire

WRI - White Racial Identity

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CHAPTER ONE: INTRODUCTION

1.1 Chapter overview

This first chapter begins by situating the research in context, followed by a discussion on reflexivity, positionality and the underpinning epistemological and ontological stance taken. I then define the language utilised and introduce key theories that underpin the research. The chapter includes a historical analysis of Whiteness and racism within clinical psychology in the UK, and an overview of the profession's relationship with anti-racism. This chapter aims to place the research within its wider contexts and to highlight the need for further research examining Whiteness within the profession.

To acknowledge the impact of my identity as a White researcher on the research process, as well as to maintain a sense of 'closeness' to the research, I use first-person voice when sharing reflections on my positionality and reflexivity.

1.2 Reflexivity

Research on 'race', racism and Whiteness by White researchers demands what is referred to by Eriksen (2022) as 'hyper-reflexivity'. Reflexivity is commonly regarded as a component of good quality qualitative research and is defined as "the process of a continual internal dialogue and critical self-evaluation of a researcher's positionality as well as active acknowledgement and recognition that this position may affect the research process and outcome" (Berger, 2015, p.220). My reflections, throughout the research process, were guided by the following questions posed by Eriksen (2022):

- What does it mean to be a White person researching Whiteness?
- What underlies my investment in conducting this research?
- What becomes visible and what remains intangible through my lens?
- How might my research, despite its stated aims of disrupting Whiteness, serve to further normalise and reproduce its hegemonic nature?

In considering self-reflexivity, I was conscious that McIntyre (1997) had cautioned, that reflexivity can be merely "talk that serves to insulate White people from examining our individual and collective roles in the perpetuation of racism" (p.31). Therefore, in considering my racial identity within this project, I have leaned into Applebaum's (2013) suggestion that researchers examining Whiteness within their work need to 'act' with a type of vigilance that is situated in humility and self-critique. This requires White people to continuously reflect on the recognition and anguish of "being a problem" (Applebaum, 2015, p.2). It is acknowledged by Foste (2020), that reflexivity in examining Whiteness should be uncomfortable and unfamiliar and I recognise that the process of self-reflexivity over the length of the project has forced me into territories of discomfort and the unknown.

1.2.1 My Relationship to the Research Project

In my commitment to engage with 'reflexivities of discomfort' (Pillow, 2003), I start by outlining my relationship to the research project. My journey has involved a critical reflection on my positionality and identity as a White, middle-class, cis-gendered, able-bodied female, born in South Africa to an Afrikaner father and Norwegian/British mother - my history and the history of my family is rooted in apartheid and colonialism. Although I have started to examine my own identity and my

relationship to Whiteness, I recognise that this is a continuous and life-long commitment that does not end with the completion of this project.

When reflecting on my relationship to the research topic, I could not help but think about my identity as a White South African and how my early life experience of growing up in an openly racist country has inevitably shaped my understanding of 'race' and Whiteness. Being White was never spoken about within my family, within the friendship circles I inhabited or the schools I attended. There was no attempt to disguise racism within South Africa, and I was often exposed to racist language growing up. Despite being raised by parents who would vehemently claim to be anti-apartheid and "not racist", we benefitted from the oppression of Black and other racialised people in multiple ways. A part of me therefore questions whether my pull to do this work is fuelled by the shame and embarrassment of my identity as a White South African and the need to position myself as a 'good White person' -separate from 'other White South Africans'.

I also acknowledge that this research stems from my experience of working within the criminal 'justice' system (CJS) with men who had been imprisoned. Due to the inherently racist nature of the CJS (MacPherson, 1999), many of the men I worked with were racially minoritised individuals, whose stories spoke to experiences of marginalisation, discrimination and failure across various systems that had ultimately led to their imprisonment. My experience within the prison system prompted me to want to pursue a career in working with marginalised communities on a systems level and inspired my original thesis idea of exploring community-based approaches to 'healing' for young Black men who had been impacted by 'serious youth violence'. I very much question now whether I held a critical understanding of my White identity and what this

meant for the people I was working with or hoping to do research 'alongside'. I have come to ashamedly acknowledge how unquestioning I was in the spaces I inhabited and now understand this as the operation of Whiteness in assuming all spaces were/are for me.

I have also come to realise that this assumption is not a rarity, and as I further progressed in my career in clinical psychology, I became more aware of the number of White clinical psychologists (WCPs) or trainees working in services and/or doing research 'with' racially minoritised communities or leading on initiatives to 'tackle racism' in the profession. This led me to start to question how and if WCPs are critically examining their positionality in 'anti-racism' work, how they are held accountable in these spaces/roles and how, despite intended expressions to dismantle Whiteness, inadvertently uphold it.

In writing this thesis, I write with an awareness that I am part of the problem of Whiteness and racism, and do not want to suggest that I have reached some kind of enlightenment or transcendence of Whiteness. I aim to remain 'vigilant' and to continuously reflect on the anguish of 'being a problem' by recognising how I position both myself and others within this research. I provide reflections at various time points throughout the project that specifically focus on my positionality as a White researcher.

1.3 Epistemological and Ontological Position

In determining the research aims and methods for the project, I considered my underlying epistemological and ontological stance. Epistemology is the foundation of one's 'worldview and basic belief system', and in choosing which paradigm to underpin

one's research, the researcher is essentially considering their own understanding of the nature of knowledge and its relation to reality (Guba & Lincoln,1994; Willig, 2008).

Epistemology has been defined as "the study of the nature of knowledge and the methods of obtaining" this knowledge (Burr, 2003, p.202; Crotty, 1998), while ontology refers to the nature of being, existence and reality (Burr, 2003; Harper, 2011, p.4).

A key difference between the philosophical traditions in qualitative research is the extent to which data is seen as mirroring and reflecting reality, and the different positions can be thought of as existing on a spectrum, from realism, which assumes that data mirrors reality, to relativism, which suggests that there are multiple ways to interpret the same observation (Harper, 2011).

1.3.1 Social Constructionism

Social constructionism is an epistemological stance utilised by some researchers in qualitative research and is more aligned to the relativism end of the continuum. At the heart of social constructionism lies the centrality of language and what language does. Language is seen to produce and construct knowledge, rather than being viewed as providing access or reflecting reality (Burr, 2003). Thus, rather than attempting to elicit the 'truth' of an individual's experience, social constructionists are interested in understanding the social processes that have enabled a person's construction of the world (Gergen, 2015). Further to this, a social constructionist epistemology posits that individuals can construct versions of themselves and events through discourse, which can shift and change "dependent upon the moment-to-moment needs of each interaction" (Galbin, 2014, p.85). Other assumptions that are central to the approach and are relevant to the current research are that:

- Knowledge is constructed in interactions between people. Language is therefore viewed as constructive, and performative, and it is understood to be a form of social action (Danziger,1997).
- The language we use to make sense of the world is culturally, geographically, socially, historically and time-dependent, meaning that our constructions of the world continuously shift and change.
- Discourse is bound by power, with certain constructions being more powerful than others (Harper, 2011), and it is therefore necessary to take a critical stance towards "taken for granted knowledge" (Burr, 2015, p.2).

In thinking about the ontological stance for the research, there were two main positionings within social constructionism to consider. These positionings similarly exist on the realism-relativist continuum. For this research, I have adopted a moderate social constructionist stance (Harper, 2011). This position allows me to consider how language is used to construct knowledge, whilst also acknowledging that a certain material reality exists, which can then, in turn, impact and influence discourses (Berteau, 2020; Harper, 2011). This stance allows me to acknowledge that although 'race' and Whiteness are nothing more than social constructs invented by people through language, they are ontologically real in the lived sense of their consequences for people's lives (Dankertsen, 2019).

In recognising that knowledge production, and much of the current research paradigms or legitimised ways of 'knowing', are embedded in Whiteness and coloniality (Mngaza, 2022; Ebanks, 2024) I attempt to centre the work of racially minoritised scholars throughout the project.

1.4 Theoretical Lens

1.4.1 Critical Race Theory

Critical Race Theory (CRT) is used as a lens in which to examine Whiteness throughout the project. CRT emerged in the 1970's as an intellectual movement within the legal sector that highlighted how racism is embedded in social structures, and systematically benefits White people (Bell, 1992; Crenshaw, 1988; Delgado, 1989). CRT has been widely applied to interrogate Whiteness as a lens that sustains racial hierarchies and racism in various contexts (e.g., James-Gallaway, 2024; Hodge & Sprain, 2024). Five central tenets of CRT guide this research:

- 'Race' is a social and political construct with no biological basis.
- Racism is not an aberration, but instead is ordinary, common and ingrained in society. This makes racism, and ultimately Whiteness, more difficult to recognise and address, and highlights the need to make the 'invisible' visible (Delgado & Stefancic, 2001).
- Racism is maintained by interest convergence, which explains how White people only consent to racial progress when their interests remain intact (Bell, 1980; Blaisdell & Taylor-Bullock, 2023) – i.e. they benefit from racism and there is little motivation to eradicate it, emphasising the need to interrogate anti-racism efforts within a predominantly White profession.
- CRT emphasises a commitment to social justice since it views social justice, action and change as intertwined in academia and research (Lawrence & Hylton, 2022).

- A CRT lens demands that research on Whiteness is not just descriptive but transformative. A key part of the research process, therefore, focuses on the actions that come from the findings.

1.4.2 Critical Whiteness Studies

Critical Whiteness Studies (CWS) is a field of study that is based on the premise that Whiteness permeates all aspects of society and culture and has led to a distorted 'racial' identity in those racialised as White to believe they are superior to others (Williams, 2023). CWS have been defined as "an interdisciplinary intellectual project aiming to unmask the power and structural advantages associated with Whiteness as a social identity and location" (Bonds & Inwood, 2016, p.717). The study of Whiteness has a rich and interdisciplinary that dates back over 100 years, with Black scholars/activists and others, primarily from the Global South, having written about the violent and enduring nature of Whiteness long before it was formalised as a field of academic study (e.g., Baldwin, 1964; Fanon,1986; Du Bois, 2008).

Both CRT and CWS are underpinned by a social constructionist epistemology, which recognises that 'race' and Whiteness are not fixed realities but are constructed, maintained and reproduced through language, power and social structures. Critically, both CWS and CRT aim to expose the "race-neutral charades and myths" that maintain and perpetuate racial oppression (Case, 2012, p.79). By drawing on these frameworks, this research aims to critically interrogate how Whiteness operates within the context of anti-racism work, recognising how Whiteness is maintained, reproduced, and potentially disrupted through the everyday talk and practices of WCPs.

1.5 Language

In line with a social constructionist epistemology, language is not merely a tool for describing the world, but a dynamic process through which realities are constructed and negotiated (Burr & Dick, 2017). Therefore, within this thesis, I have given much thought and consideration to how language can reproduce and maintain certain 'knowledges' or 'truths'. Recognising that language both wields power and actively constructs our understanding of 'reality', the following sections engage in a critical exploration and deconstruction of the language and 'key terms' that will be used throughout this thesis.

1.5.1 Deconstruction of 'Race'

'Race' has often been used as a term to group people together who share similarities in "visible physical traits, such as skin colour, hair texture, facial features and eye formation" (Takezawa, 2005, p.1). With an absence of a biological basis for 'race' and the way in which racial categories and classifications have evolved and changed over context and time, 'race' is best understood as a social and political construct (Hipplewith, 2023). Despite acknowledging that the term 'race' is nothing more than a poorly evidenced social construct, which when examined, disintegrates (Dalal, 2006), it is important to recognise its socio-political relevance and critical significance in the analysis of racism, both historically and in contemporary society (Patel & Keval, 2018).

'Race' as a construct emerged through the development of Western civilisation and the unfounded ideology that White people are superior to racially minoritised people (Guess, 2006; Baldwin, 2010). Therefore, it is important to recognise 'race' and the racialisation of particular groups of people as intimately linked to colonialism and

slavery, with ‘race’ being used to establish and justify oppression and racial violence throughout history (Fanon, 1986). Colonial discourses authorised and justified the dehumanisation of racially minoritised people and promoted the ideology of a racial hierarchy (Fanon, 1986; Patel, 2021). Kovel (1984) suggests that racism created ‘race’, rather than ‘race’ creating racism.

The Category of ‘White’ was developed during the nineteenth and early twentieth centuries to draw ‘poor Whites’ into alliance with the White ruling class because of perceived threats to power from the growing alliances between ‘poor White’ people and Black people (Du Bois, 1935). This was done through ‘compensatory Whiteness’ in which ‘poor White’ people were granted metaphorical payment of social status over their racially minoritised counterparts, solely through their categorisation as ‘not Black’ (Du Bois, 1935). Therefore, for Whiteness to uphold its value, Blackness was devalued, with anti-black racism serving as a tool to maintain power structures that benefit from a racial hierarchy and oppression.

1.5.2 Racial Terminology

Throughout the thesis, I use single quotation marks when using the term ‘race’ in acknowledging that it is a social construct with no biological basis (Mersha & Beck, 2020). The term ‘White people’ will be used to describe individuals who have been racialised as White, meaning those who benefit from the social and material advantages associated with the category ‘White’. White is capitalised to mark its use as a noun denoting a social identity rather than simply an adjective describing skin colour (Williams, 2023).

In considering language for people who have been racialised as anything 'other than White', I examined the literature to identify terms used. Within the UK, the acronym 'BAME' (Black, Asian and minority ethnic) and 'BME' (Black and Minority Ethnic) are commonly used to refer to racially minoritised people. These terms, however, have been contested due to their problematic assumptions that racialised individuals and communities are homogenous, failing to recognise the multiplicity and richness of racialised people's "different heritages, diverse histories, beliefs, values, languages and experiences of racism" (Patel, 2021, p.6). Although 'People of the Global Majority' has gained traction in recent years as it is recognised as a term that decentres Whiteness, I have chosen to use the term 'racially-minoritised' which aligns with the social constructionist and CRT framework, acknowledging power in "the active processes of racialisation that are at work in designating certain attributes of groups in particular contexts as being in the minority, rather than actually being the minority" (Gunaratnam, 2003, p.17 cited in Francis, 2024).

It is important to recognise that this term is not void of criticism. Since all 'terminologies' that attempt to be all-encompassing are overgeneralising and fail to capture the nuances of people's identities and intersecting experiences of oppression and discrimination, there are no globally agreed terms of reference (Adams & Miller, 2022). Furthermore, due to the fluid and ever-evolving nature of language, it is important to recognise that language and terms used within this text are a product of the current time and context.

1.5.3 Racism

Within this research, I draw on a critical conceptualisation of racism as more than just individual prejudice or overt acts of discrimination, and instead, understand racism as a system of power that organises the social world into hierarchies of superiority and inferiority along what Grosfoguel (2016) calls the "line of the human" (p.10). This perspective is grounded in the work of Fanon (1986), who recognises that particular groups of people are positioned and seen as fully 'human', deserving of rights, material resources, and recognition, whilst others are systematically positioned as 'less than human', with their rights, access to material resources, humanity and more, questioned and/or denied.

Central to this understanding is the process of racialisation i.e., the social and political construction of 'race', which categorises people into hierarchies, marking some as superior and others as inferior (Grosfoguel, 2016). Racism is therefore not simply a matter of individual bias, but a structural, institutional and cultural system that maintains these global hierarchies. This project positions racism as deeply embedded in the day-to-day fabric of society and operates through multiple levels, from overt violence and institutional disadvantage to more covert forms of racism like microaggressions and colour-blind attitudes (Haeny et al., 2021; Patel 2021).

1.5.4 Whiteness

This inquiry understands racism as the outcome of Whiteness (Patel, 2021). While there is no universally agreed definition of Whiteness, most conceptualisations of Whiteness recognise it as a system of power, status and identity that maintains and reproduces racial hierarchies (Schooley et al., 2019). Although Whiteness is not about

'being White' or a homogenising identity marker, Whiteness is something that is easily accessible to White people because it is positioned as the norm and the world is oriented around it, "allowing White bodies to extend into spaces that feel familiar and comfortable" (Ahmed, 2007, p.161). Whiteness is often invisible and mysteriously unknowable to those whom it benefits but remains an oppressive reality to individuals racialised as 'other' (Ahsan, 2020).

Over time, the category of White has expanded and morphed in different contexts to include or exclude various ethnicities (Liebert, 2021). Merson (2021) describes Whiteness as a "status with shifting entry requirements", operationalised through dominant discourses, media, policy, and institutional practices that continually reproduce its privilege (p.14). Within Whiteness, there is also an internal hierarchy, with the 'gold standard' often being Northern European heritage, with proximity to this 'ideal' shaping the degrees of privilege and power (Lundström, 2014). Although Whiteness intersects with other axes of identity such as class, gender, sexuality and ability, those that exist within the category of White always benefit from racial privilege (Crenshaw, 1991; Frankenberg, 1993). For this research, this understanding of Whiteness as a shifting, but enduring, structure of power is vital to examining how it operates and is reproduced (or resisted).

1.5.5 Anti-racism

Anti-racism, within this research, is defined as a move beyond simply 'not-being-racist' and instead, is an active, intentional practice that seeks to confront, disrupt and dismantle racism at its roots. This includes deconstructing Whiteness as both a racial category and a system of power and privilege (Bonnett, 2005; Kendi, 2019). This involves recognising Whiteness as a social construct that underpins racial hierarchies

and therefore must be critically examined and made visible if meaningful change is to occur.

Patel (2021) emphasises that anti-racism is a move beyond the mere "expression of anti-racist ideas" or "an individual state of 'being'" (p.6) and involves a collective process and effort of addressing racism through significant, concerted and enduring labour. Central to this work is the disruption of Whiteness itself, which involves analysing how Whiteness is defended, normalised and made invisible through discourses and practices that protect it (Du Bois, 2008; Patel; 2021).

1.6 Placing the Research in Context

1.6.1 The Foundations of Clinical Psychology

The profession of psychology evolved within the socio-political structures and processes of racialisation outlined above. Clinical Psychology and the systems in which it is embedded, have a longstanding and violent history with 'race' and developed in the context of post-war Britain, when ruling societies accepted hierarchies of class and 'race' as fact (Shuttleworth, 2018). Fuelled by the eugenicist agenda, psychologists were involved in 'scientifically' promoting the idea that White people were superior to racially minoritised people through the development and use of various standardised instruments claiming to assess personality and intelligence (Guthrie, 2004). These tools served to advance the colonial ideology that Black people should be afforded sub-human status and served to reinforce their continued dehumanisation and subjugation (Stoddart Isaac, 2023). Thus, clinical psychology in the UK was built upon the foundations of colonialism, eugenics and empiricism (Patel, 2003; Patel & Keval, 2018), which continue to shape the profession. While contemporary racism may have become

more covert and insidious, Whiteness and racism has continued to permeate clinical psychology and the various systems in which it operates (Stoddart Isaac, 2023).

1.6.2 The Profession of Clinical Psychology and its Relationship to 'Race', Racism and Whiteness

Within the UK, the profession of clinical psychology is embedded in various governing systems. The NHS is the main employer of clinical psychologists (CPs) and the primary funder of the majority of Doctorate in Clinical Psychology (DClinPsy) training places. CPs are regulated by the Health and Care Professions Council, with the British Psychological Society (BPS), and within this, the Division of Clinical Psychology (DCP) who provide various ethical guidelines, codes of conduct and best practice guidance.

The profession of clinical psychology is inundated with White, middle-class, heterosexual, able-bodied, cis-females (*of which I am one*), thus normalising a culture of the White experience as the professional norm (Fatimilehin & Coleman, 1998). Data shows that 76% of psychologists identify as White, with only 9% as Asian, 5% as Black, 8% as Mixed and 2% as Other (CHPCCP, 2023). Whiteness is not only evident in the number of White bodies within the profession, but also evident in the Eurocentric and individualised models and theories in which CPs are taught to conceptualise and understand distress (Rimke, 2016). Courses privilege White, heterosexist theories and practices (Newnes, 2020), and despite some emphasising a social justice/human rights lens, many remain wedded to individualism and Eurocentric models (e.g., CBT). Psychological research is steeped in Whiteness with an unprecedented number of studies published by Western, Educated, Industrialised, Rich and Democratic (WEIRD) societies (Henrich et al., 2010), and then universally applied to the rest of the world (Patel & Keval, 2018).

The lack of diversity within the clinical psychology workforce, as well as the reliance and privileging of Eurocentric knowledge, has led some to question the ability of the profession to meet the needs of those who access services (Atayero & Dodzro, 2021; Jameel et al., 2022). These concerns are evidenced in research that documents racially minoritised individuals reporting not feeling understood by White therapists (Alam et al., 2024; Chang & Yoon, 2011) and having negative and discriminatory experiences (Alam et al., 2024). This has led some to suggest that the profession is best understood as 'White psychology for White folk' (Fatimilehin & Coleman, 1998).

Evidence of the pervasive nature of Whiteness and racism is not only evident in the profession's models, practices and demographic makeup, but also in research focussed on the experiences of racially minoritised aspiring psychologists, trainees and qualified CPs (Adetimole et al., 2005; Desai, 2018; Odusanya et al., 2017; Paulraj, 2016; Ragavan, 2018; Shah, 2010; Stoddart Isaac, 2023; Tong et al., 2019). This body of research has highlighted the harms that racially minoritised psychologists are subjected to within the profession, with themes speaking to the insidious and covert nature of racism within clinical psychology, the toll of navigating largely White spaces, being both hyper visible and invisible in different contexts, and often being positioned as experts by White colleagues with issues related to 'race', racism and Whiteness (Adetimole et al., 2005; Desai, 2018; Odusanya et al., 2017; Paulraj, 2016; Ragavan, 2018; Shah, 2010; Stoddart Isaac, 2023; Tong et al., 2019). Ultimately, the existing research highlights the profound harm that racially minoritised psychologists experience, due to the pervasive and violent nature of Whiteness, which is deeply embedded within the profession.

1.6.3 History of 'Anti-racism' within the profession and governing systems

Over the years, some efforts have been made within the profession and its governing systems, to acknowledge and address racism; with 'race' having 'disappeared' and 'reappeared' on the profession's agenda throughout its history (Patel & Keval, 2018). The battle to address 'race' within clinical psychology is longstanding and was initially led by a small group of clinical psychologists who later formed the first 'Race' and Culture Faculty within the BPS/DCP in 1991 (Wood & Patel, 2017). The faculty challenged various policies and practices in relation to issues of 'race', and created resources for trainers (Patel, 2000). In 2014 after sustained demands by the faculty, changes were finally made to the professional practice guidelines to ensure that CPs were required to consider:

> *the importance of diversity, the social and cultural context of their work…and have the skills, knowledge and values to work effectively with clients from a diverse range of backgrounds, understanding and respecting the impact of difference and diversity upon their lives (BPS, 2014, pp.6-8).*

Despite their impact, the 'Race' and Culture Faculty was disbanded by the BPS/DCP in 2014 with no explanation provided at the time (Wood & Patel, 2017). A later rationalisation quoted the Equality Act (2010), with an emphasis placed on the need for *all* faculties to be considering *all* protected characteristics, arguably taking 'race' off the agenda under an Equality, Diversity and Inclusion (EDI) framework.

Issues of representation within the psychological workforce have been longstanding and various 'widening access' initiatives have been introduced over time (Turpin & Coleman, 2010). However, many have criticised these initiatives for positioning racially minoritised trainees and CPs as the catalyst for change, whilst

failing to address the wider socio-political structures and systemic racism within the profession (Daiches, 2010; Stoddart Isaac, 2023; Wood, 2020; Wood & Patel, 2017). Despite decades of 'widening access' initiatives, racially minoritised psychologists remain consistently underrepresented in the profession (Tong et al., 2019).

The EDI agenda within clinical psychology continued, and in 2019 the *Standards for the Accreditation of Doctoral Programmes in Clinical Psychology* were released, with programmes needing to demonstrate a commitment to EDI across selection/recruitment, curriculum content, support for trainees from marginalised backgrounds, and clinical competencies (BPS, 2017). However, while these standards emphasise the importance of "promoting a culture of EDI by being aware of the importance of diversity" and difference (BPS, 2019, p.9), they fail to name 'race', racism and Whiteness explicitly. Thus, discourse has played a key role in keeping 'race' off the agenda within clinical psychology, with suggestions that racism has been "whitewashed and delegitimised in the language of diversity" (Patel & Keval, 2018, p.1), with the material consequences of racism for racially minoritised CPs, trainees, aspiring psychologists and service-users largely ignored.

1.6.4 Developments in Anti-Racism in Clinical Psychology Post 2019

'Race' was thrust back into the spotlight at the Group of Trainers in Clinical Psychology (GTiCP) annual conference in 2019, when a re-enactment of a slave auction was presented as the evening's 'social programme' (Patel et al., 2020). Unsurprisingly, this event caused significant distress and outrage from audience members, many of whom were from African Caribbean and African heritage (Patel et al., 2020). Many questioned how a conference aiming to centre social justice, anti-oppressive practice and human rights ended up centring Whiteness and directly contributing to the harm,

violence and racism experienced by attendees (ACP-UK, 2019; Patel et al., 2020). The multiple ways in which Whiteness operated within this event have been extensively documented (e.g., ACP-UK, 2019; Minorities in Clinical Psychology Subcommittee, 2020; Psychologists for Social Change, 2019; Patel et al., 2020). This event was followed by a prolonged period of 'White silence', with little to no accountability taken for the harms caused (Peart, 2023).

In May 2020, the violent murder of George Floyd by a White police officer led to a global resurgence of the Black Lives Matter movement, bringing conversations around the UK's colonial legacy and relationship with 'race' to the fore. Simultaneously, the COVID-19 pandemic highlighted issues of structural racism in the UK, with racially minoritised communities disproportionally impacted and then blamed for their poorer health outcomes (Public Health England, 2020). These 'events' placed 'race', racism and Whiteness back on the agenda, with both the NHS and BPS declaring themselves as being committed to tackling racism (Stoddart Isaac, 2023).

In 2021, Higher Education England (HEE) published an anti-racism action plan that funded multiple initiatives under an EDI framework, specifically aimed at 'improving equity and inclusion for 'BAME' trainees' (HEE, 2020). All DClinPsy courses were offered an opportunity to bid for £74,0000 in one-off funding to implement internal EDI work (Faulconbridge, 2021). For some universities, this led to the creation of EDI-specific roles, with designated EDI leads tasked with implementing their EDI action plan. Although each plan was unique to the course context, HEE outlined nine key performance indicators, for example, providing anti-racism training for course staff and supervisors and critically reviewing course curriculum and teaching (Peart, 2023; HEE, 2021).

As a result, the discursive landscape within the profession shifted significantly, with the language of 'race', racism and anti-racism featuring across various policy documents and professional forums, including DClinPsy course handbooks and in the revised accreditation draft released by the BPS (BPS, 2024). These standards set expectations for trainees to be able to "work within an anti-racist, antidiscrimination framework" as well as needing to understand the "impact of racism and discrimination on people's lives", including in leadership capacities (BPS, 2024, pp.1-9). Additionally, the new standards placed explicit emphasis on the need for courses to prioritise the "decolonisation of the curriculum", defining this as a curriculum that recognises "the influences of cultural variation…relevant to all trainees, that represents the range of lives, communities, cultures and realities in the psychology that they learn" (BPS, 2024, p.8).

1.6.5 Resistance within the Profession

These changes within the profession, have not come without resistance, and a document titled 'The Politicisation of Clinical Psychology Courses in the UK' (Sherwood & Miller, 2022) was published by two White female psychologists, calling for an end to the 'politicisation' of the profession. The authors framed the inclusion of "Critical Social Justice" as 'harmful', emphasising the need to remain committed to the scientist-practitioner model of clinical psychological practice. Further to this, decolonisation efforts were framed as risky, with a suggestion that decolonising academia risks undermining scientific knowledge, which would subsequently have "serious implications for evidence-based treatments" (Sherwood & Miller, 2022, p.24). This is not an isolated example, and towards the end of 2024, the BPS faced national scrutiny when a group titled 'Just Therapy' accused the organisation of promoting "woke

ideologies" through its support of Whiteness and anti-racism teaching on DClinPsy courses (Searles, 2024).

1.6.6 Where have we got to?

Despite resistance, many individuals and collectives have worked persistently to keep 'race' on the agenda, with much of this labour carried out by racially minoritised people. This reflects wider research showing that the responsibility for addressing racism and Whiteness is too often placed on those directly affected by racism (Ahmed, 2012). In clinical psychology, this pattern is also visible in EDI roles, and accounts from those who have been involved in this work describe how Whiteness operates to undermine and burden this work: having to navigate the fragility, defensiveness, and denial of White colleagues, contend with the colonisation and dilution of their work, and being positioned as the sole educators on racism and Whiteness (Ahsan, 2022; Kotecha, 2023; Peart, 2023). They also report facing greater scrutiny than White peers, alongside significant personal costs to their mental and physical health. (Ahsan, 2022; Kotecha, 2023; Peart, 2023).

These accounts expose a persistent imbalance in the profession, with the burden of confronting racism and Whiteness continuing to fall disproportionately on racially minoritised colleagues. With increasing conversations around 'race', racism and Whiteness within clinical psychology, there is a growing acknowledgement, or at least an expressed recognition, that anti-racism must be embedded in the practice of *all* CPs (BPS, 2024). Given that Whiteness is primarily maintained and upheld by White people (Poston, 1990) and operates as a system of power (Ahmed, 2012; Frankenberg, 1993), it is vital to examine how WCPs understand issues of 'race', racism, and

Whiteness, and how they enact their responsibility for anti-racism within the profession.

1.7 Conclusions

In summary, this chapter has shown that clinical psychology in the UK is rooted in colonial and White supremacist ideologies that continue to shape its structures, training and practices. While there have been important moments of progress to keep 'race' on the agenda, responsibility for addressing racism and Whiteness has too often been placed on the very people most harmed by it. Alongside an increasing urgency within the profession to demonstrate a commitment to racial justice, there remains significant resistance and backlash, evidencing how deeply entrenched Whiteness is.

This context highlights the need to examine how WCPs, who remain the majority in the profession, understand and engage with issues of 'race', racism, and Whiteness. This is the focus of the following chapter.

CHAPTER 2: SYSTEMATIC LITERATURE REVIEW

2.1 Chapter overview

In this chapter I will present a Systematic Literature Review (SLR) completed as part of the broader empirical study. The first half of the chapter outlines a systematic literature search; providing information about how the studies were identified and why they were included in the review. The chapter then provides a quality appraisal of the included papers and presents a synthesis of the literature using a meta-ethnography analysis. Finally, I outline the rationale, aims and research questions for the current project.

2.2 Aims and Scope

A SLR has been defined as a means to identify, synthesise and critique existing literature to allow researchers to understand the "extent, nature and quality of evidence in relation to a particular research question" (Siddaway et al., 2019, p.3). Similarly, Montuori (2005) frames a SLR as a way of 'surveying the land' in a particular area and mapping out the "major landmarks, key players and theoretical movements" along the way (p.375). SLRs go beyond simply regurgitating studies and instead are a form of creative inquiry in which the selected papers can be seen as being in dialogue with one another: discovering themes, connections and ultimately generating new knowledge (Walker, 2015). SLRs hold more weight than a single piece of research due to their ability to integrate findings from multiple research papers and are therefore suggested to be a "building block for any further research activity" (Sydner, 2019, p.333). SLRs identify gaps between what is currently known about a research area and what is missing or absent.

The process started by formulating a review question and developing a search strategy. In line with the broader empirical study, the review sought to provide a critical understanding and interrogation of Whiteness within clinical psychology. Initially, the SLR was intended to answer the question: '*How do WCPs engage with and understand Whiteness, 'race' and racism*? However, when conducting preliminary scoping searches, it became evident that limited research had been completed in this area, and there were not enough articles to synthesise. In conversation with supervisors, I broadened the search to include other practitioner psychologists and psychotherapists. This decision made sense given that the psy-professions have shared foundations built on colonialism, eugenics and empiricism (Patel, 2003; Patel & Keval, 2018; Patel, 2021), with Whiteness reproduced and maintained through the theories, models and practices that are used across the disciplines. The new central question to be answered within this SLR is:

> *'How do White practitioner psychologists and psychotherapists (WPPs) engage with and understand whiteness, 'race' and racism?*

2.3 Methodology

2.3.1 Building the Search Strategy

A search was completed on PROSPERO (international prospective register of systematic reviews) and the Cochrane Library to ensure there were no existing or ongoing SLRs addressing this area of research. Once confirmed, the process of planning the search strategy began. I utilised the Sample Phenomenon of Interest Design Evaluation Research type tool (SPIDER), (Cooke et al., 2012) to help define the fundamental parts of the research question (Table 1).

Table 1

SPIDER Framework

Sample	Phenomenon of Interest	Design	Evaluation	Research Type
White practitioner psychologists/ psychotherapists	Whiteness, 'Race' and racism	Interviews Focus Groups	Experiences Understandings	Qualitative Mixed Methods

Breaking the question down into key concepts allowed me to consider potentially relevant terms and synonyms. As I became increasingly familiar with the landscape of research on the topic, I noticed which key terms were used in papers and refined my search strategy accordingly. I employed an iterative approach to further refine my strategy and ensure that the search would reduce the likelihood of irrelevant results being included (Mak & Thomas, 2022). The key terms/concepts were then combined using Boolean Logic, with the operators 'AND/OR' and 'asterisks' used to include variations of truncated keywords (e.g., clinical psycholog* = clinical psychologists/psychologist/psychology). The search strategy evolved continuously as the searches developed, and key terms were either added or removed (see appendix A for example of initial searches). A list of final key terms can be found below in Table 2.

Table 2

Key Term	Search Terms
Psychologists/ psychotherapists	"clinical psycholog*" OR "counselling psycholog*" OR "family therap*" OR "systemic therap*" OR "forensic psychology*" OR "educational psycholog*" OR "health psycholog*"
AND	
Engagement/Experience/ Understanding	Understand* OR experienc* OR engag* OR address*
AND	

Whiteness	whiteness OR "White supremacy" OR racism OR "White privilege" OR "White fragility" OR "racial privilege" OR "racial discrimination" OR "racial prejudice" OR race OR “colour blind*”

The following databases were searched: Scopus (21/02/2025), CINAHL (21/02/2025), Psych Articles (21/02/2025), MEDLINE (21/02/2025), and PubMed (21/02/2025). They were selected as they are multi-disciplinary and cover a wide range of literature from psychology, social sciences and health. Alerts were created and databases were regularly checked until the point of analysis (March 2025).

Further to this, in aligning with a social justice and decolonial stance, I decided to include ‘grey literature’ within the searches. Searches were conducted on ResearchGate (22/02/2025) and Google Scholar (22/02/2025), and EBSCO Open Dissertations (22/02/2025) to identify unpublished theses that might be relevant. Hand-searching of all identified papers allowed me to identify any potential articles or other sources of information that may have been missed in database searches.

‘Grey literature’ refers to a diverse range of documents and forms of knowledge that exist outside of commercially published channels (Adams et al., 2016). Although knowledge emerging from ‘grey literature’ has been regarded as knowledge that is not taken seriously by academics (Henrich et al., 2010), when acknowledging the history of the psy-disciplines and its roots in colonialism and racism, it is important to recognise that the profession has historically and continuously upheld Whiteness and racism through the reproduction of knowledge that amplifies certain voices/stories and silences others. This SLR therefore included the use of ‘grey literature’, with the hope that this provides a more comprehensive and balanced view of the ‘evidence’ (Paez, 2017).

2.3.2 Inclusion and Exclusion Criteria

Inclusion and exclusion criteria were utilised to ensure the searches captured relevant literature that would enable me to answer the review question (Peters et al., 2020) (see Table 3). These criteria evolved as the searches progressed, and I became increasingly familiar with the literature.

Table 3

Literature Search Inclusion and Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
Articles focused on examining white psychologists/psychotherapists understanding/experiences/ constructions of whiteness, race and racism	Studies focused on the experiences of racially minoritised psychologists/ psychotherapists
Study must be empirically based	Book chapters, opinion/ reflective pieces, systematic literature reviews, bulletins, panel discussions, PowerPoint presentations, workshops
Studies using a qualitative design or mixed methods	Quantitative studies
UK context only	Studies outside of UK context
Studies published in English	The study was written/ published in a language other than English
Grey Literature (including unpublished doctoral theses)	Studies where full text is not available

Since I was interested in capturing WPPs understanding/ experiences/ engagement with Whiteness, qualitative or mixed methods, rather than quantitative studies were included in the review because of their in-depth exploration of a

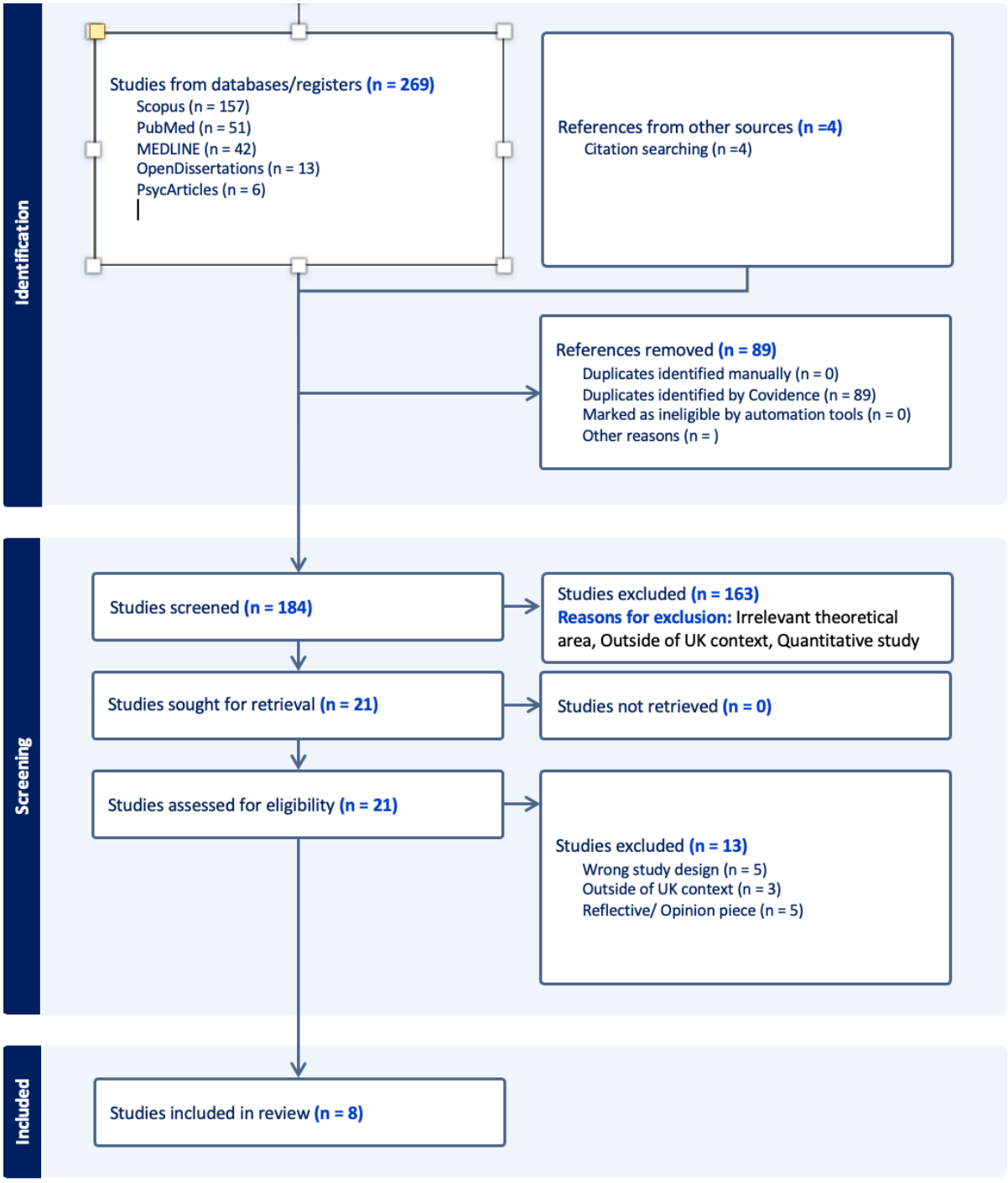
phenomenon (Willig, 2008). There were a number of studies published outside of the UK context, particularly within the USA and South Africa, and although these studies would have added an interesting contribution to the SLR findings, the review specifically focused on papers that have emerged within the UK, in recognising the unique context psychologists/ psychotherapists work and train within, and the impact that wider sociopolitical factors specific to the UK have on this. There were no date-range limitations on the eligibility criteria for studies, however it was evident from the literature searchers that very few studies in this area appear to have taken place pre-2013.

2.3.3 Screening Procedure

Although, the search across six databases yielded 273 articles, once duplicates were removed, 184 papers remained for screening. I used Covidence to organise and screen papers, with a second reviewer added to screen titles, abstracts, and full-text screening. After screening, 21 papers remained for full-text screening. Eight of these 21 met inclusion criteria to go through to data extraction. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses for Scoping Reviews (PRISMA-ScR) flow diagram details the process in Figure 1 (Page & Moher, 2017).

Figure 1

PRISMA Flow Chart



2.4 Overview of the papers

As anticipated, research was extremely limited, and only eight papers met the inclusion criteria. Three studies were peer-reviewed articles (Ahsan, 2020; Cottrell-Boyce, 2022; Wallis & Singh, 2013), and five were 'grey literature' texts (O'Driscoll, 2013; Ong, 2021; Osman, 2021; Williams, 2022; Williams, 2023). All studies sought to examine WPPs' understanding/experiences/engagement with Whiteness and associated concepts ('race', racism, white privilege). The papers were spread across the psy-disciplines, with four papers identified within clinical psychology (Ahsan, 2020; Ong, 2021; Osman, 2021; Williams, 2022), two papers in the counselling psychology profession (O'Driscoll, 2013; Williams, 2023) and a further two papers examining Whiteness in systemic psychotherapy (Cottrell-Boyce, 2022; Wallis & Singh, 2013). A breakdown of participant characteristics across the studies can be found in Table 4, with a broader summary of the eight studies presented in Table 5.

Table 4

Participant characteristics

Paper	Participants + gender	Profession	Class	Age	Work context	Ethnicity
Ahsan (2020)	N=9 Female = 9	Clinical Psychology	Middle-class = 9	Not stated	Current or previous employment as a clinical psychologist in a London NHS Trust	Not stated
Cottrell-Boyce (2021)	N = 3 Female = 1 Male= 2	Systemic psychotherapist	Not stated	Not stated	Working within CAMHS as a family therapist	White British = 2 White North American =1
O'Driscoll (2013)	N = 8 Female = 4 Male = 4	Counselling Psychology	Not stated	28-57	Training on a Counselling PsychD Programme within Greater London	White British = 8

Ong (2021)	N= 15 Female = 13 Male = 2	Clinical Psychology	Not stated	28-50	Clinical psychologists working within the NHS = 12 Private practice = 3	White British = 12 White Irish = 1 White other = 1 White Mediterranean =1
Osman (2021)	N=24 Female = 21 Male= 3	Clinical Psychology	Not stated	25-64	Clinical psychologists working across the UK – extent to which participants reported working with racially minoritised clients and clinicians varied	White British = 18 Another White background = 5 Mixed or multiple ethnic groups = 1
Wallis & Singh (2012)	N=11 Female = 9 Male = 2	Systemic psychotherapists	Not collected	Not stated	Trainee and trainer systemic psychotherapists	White British = 6 White other = 5
Williams (2022)	N=13 Female= 7 Male= 5 Omitted = 1	Clinical Psychology	Not collected	30-60	Cps employed at Band 8b or above	White British = 11 White European = 1 Omitted= 1
Williams (2023)	N=6 Female = 4 Male = 2	Counselling Psychologists	Working-Middle-class = 3 Middle class = 2 Omitted = 1	40-70	Private practice = 5 Charity/private= 1	White British = 5 Mixed European = 1

Table 5

Summary of Studies Included in SLR

Title, Author, Date, Discipline	Research Aim	Type of Publication	Participants/ sampling	Data collection, Analysis, Epistemological positioning	Main Themes	Strengths & Limitations
Ahsan (2020) - Holding Up the Mirror: Deconstructing Whiteness in Clinical Psychology Clinical Psychology	Explore experiences of whiteness from the professional majority group perspective (i.e. white middle class female clinical psychologists)	Published - Empirical research Qualitative	N= 9 White, female, middle-class clinical psychologists working within London.	1:1 Interviews Interpretative Phenomenological Analysis (IPA), following Smith, Flowers & Larkin's (2009) recommended process.	Three interrelating superordinate themes: 1) 'The white profession' 2) 'Therapy is a white idea based on white peoples' experiences' 3) 'We don't see ourselves as white.'	**Strengths:** + Researcher reflexivity +Consideration of avenues for change +Emphasis on decolonising perspective (language, references/ other forms of knowing). **Limitations:** - thin description of themes and data within paper - recruitment processes may have attracted psychologists already engaged in thinking about Whiteness - does not specifically think about different racialised groups e.g., thinking about anti-blackness specifically

Cottrell-Boyce (2022)- Addressing White privilege in family therapy: A discourse analysis Systemic Family Therapy	Aim to explore clinicians; thinking and positioning in relation to White privilege and question how the lens of White privilege might influence the meaning clinicians make of clients lives, clinical practice and the therapeutic relationship	Published Empirical Research Qualitative	N= 4 Qualified family therapists 3 White British-therapists, one Black-British (for the purpose of this SLR, analysis focussed on accounts from White-British participants)	1:1 Interviews Foucauldian Discourse Analysis	Discourses around: Whiteness as a norm/ whiteness as invisible Equality and justice – confrontation and complicity (e.g. taking responsibility for white privilege or neglecting to acknowledge or challenge white privilege)	**Strengths:** + utilises a critical approach that focuses on power + clear implications for clinical practice **Limitations:** **-**small sample size -themes not presented clearly within paper - ethics are mentioned as having been approved, but no explanation in the paper as to what this meant for this particular piece of research
O'Driscoll (2013) - A discursive analysis of White trainee counselling	The study aimed to explore White trainee counselling psychologists' attitudes towards racial prejudice and	Unpublished Doctoral Thesis. Empirical Research.	N= 8 White Trainee Counselling Psychologists (between	1:1 Interviews and Focus groups Critical Discursive Psychology	The present analysis of the data has found that as the participants grapple with their professional identities as counselling	**Strengths:** + analysis that critically engages with the way in which language is used by white counselling psychologists

psychologists' experience in racial difference Counselling Psychology	their experience of training within this area.	Qualitative	second-fourth year of training) within the UK		psychologists in training, they inhabit one of three seemingly omnipresent discursive fields: 1) 'colour-blindness' 2) 'interculturalism' 3) 'pluralism'	**Limitations:** -does not address study limitations
Ong (2021) - White Clinical Psychologists, Race and Racism Clinical Psychology	The aim of the study was to explore the experiences of White Clinical Psychologists discussing race and racism within therapy and other aspects of their job (e.g., supervision, meetings etc.)	Unpublished Doctoral Thesis Empirical research Qualitative	N=15 White Clinical psychologists working within the UK	1:1 Interviews Thematic analysis Critical Realist position	Three overarching themes, each with its own subthemes: 1) 'I'm not a racist, even when I get it wrong' ('managing feelings of unease', 'certainty in audience', 'what my whiteness does') 2) 'Proximity to racism' ('easier to do nothing' 'integral to clinical psychologist's role') 3) 'Commitment: "anti-racism is a lifelong journey"' ('holding the power for change',	**Strengths:** +Reflections on researcher reflexivity and how this impacted the research process + Sample sufficient for thematic analysis +areas for future research considered **Limitations:** -Analysis does not offer a means to interrogate inconsistencies in participants discourses

					‘stuckness: don’t stop there’).	
Osman (2021) - ‘Resistance to racism is hard because…’: A Critical Discursive Psychology Analysis of ‘White’ Clinical Psychologists’ Race Talk Clinical Psychology	This research aimed to explore the way in which White Clinical Psychologists discuss race and associated concepts such as racism and whiteness with clients and colleagues.	Unpublished Doctoral Thesis Empirical Research Qualitative	N= 24 White Clinical Psychologists working in the UK Opportunistic, purposive and snowball sampling	Focus Groups Critical Discursive Psychology Social Constructionist Position	The main interpretative repertoires (patterns of talk) participants drew upon: 1) Uneducated Psychologist Repertoire 2) Skilled Psychologist Repertoire 3) Racism as Automatic Repertoire 4) Racism as Systemic Repertoire 5) White Victimhood Repertoire	**Strengths:** + Large sample size + Offers a critical understanding of how white clinical psychologists engage with race talk +considers areas for future research **Limitations:**
Wallis & Singh (2012) – Constructions and enactments of	Aim within this research was to explore the discourses White systemic	Published Empirical Research	N=11 White systemic	Focus groups Foucauldian Discourse Analysis	Three discourses: 1) ‘Whiteness as an invisible norm’ 2) ‘Political correctness’	**Strengths:** +offers a critical perspective on how white systemic psychotherapists construct whiteness

whiteness: a discursive analysis Systemic Family Therapy	psychotherapists use to construct whiteness and the effects of these discourses on therapy	Qualitative	trainees and trainers		3) 'Systemic therapy discourse'	+highlights the need for white psychotherapists to understand their own white identity and what this means for their clients +suggestions for areas of future research **Limitations:** -No comment on ethical considerations -No details provided on recruitment
Williams (2022) - Addressing Whiteness and Racism in Clinical Psychology: White Clinical Psychologists' Experiences within Leadership Clinical Psychology	Aim of this research was to explore how White Clinical Psychologists experience addressing racism in their leadership roles and to explore the barriers and facilitators of anti-racism leadership for White Clinical Psychologists	Unpublished Doctoral Thesis Empirical Research Qualitative	N= 13 White Clinical Psychologists in Leadership Roles (Band 8? And above) working within the UK	1:1 Interviews Interpretative Phenomenological Analysis (IPA)	Three superordinate themes, each with its own sub-themes: 1) 'Life Being Ignorant is Less Painful' ('Whiteness Isn't at the Forefront of My Mind', 'Too Uncomfortable to Confront Whiteness') 2) Careful, Shameful Conversations –	**Strengths:** +valuable research in examining whiteness at leadership level + a sufficient sample for IPA **Limitations:** -Analysis does not offer a means to interrogate inconsistencies in participants discourses

					‘Treading on Eggshells’ (‘More Careful’, ‘More Shame and Guilt’) 3) Don’t Know How to be Anti-Racist – ‘I Don’t Know What To Do’ (Burden on Racialised Staff as ‘Trainers’, ‘Not Doing Enough’, Rationalisations for a Lack of Change – ‘I’m Making Excuses Now’, Attempts to Encourage Change – ‘Working on Being Actively Anti-racist’).	
Williams (2024) – The White British	The aim of this research was to explore the lived	Unpublished Doctoral Thesis.	N=6	1:1 Interviews	Four Themes: 1) Whiteness is a bypass	**Strengths:** +in-depth exploration of participants lived experiences of whiteness

Counselling Psychologist: Personal and Professional Experiences of Whiteness Counselling Psychology	experiences of whiteness for White Counselling Psychologists.	Empirical Research Qualitative	White Counselling Psychologists working with the UK	Hermeneutic Phenomenological Analysis	2) Whiteness is a vessel 3) Whiteness is a trap 4) Whiteness is a conditional home	**+**contributes to knowledge within counselling psychology, which is also relevant to our understanding of whiteness within the psy-disciplines **Limitations:** -small sample size -Analysis does not offer a means to interrogate inconsistencies in participants discourses

2.5 Quality Assessment

Critical appraisal is a key stage of the SLR process and involves systematically assessing the usefulness, validity and results of each study (Burls et al., 2009). The review utilised the Critical Appraisal Skills Programme (CASP) checklist, which is a comprehensive tool for appraising qualitative research (CASP, 2024). Although tools designed specifically for appraising grey literature, such as the AACODS checklist (Tyndall, 2010), were considered, the CASP was selected for all studies to maintain consistency and transparency in quality assessment across both peer-reviewed and grey literature sources. Furthermore, several of the AACODS domains, such as authority, accuracy, and objectivity, are reflected in the CASP criteria, ensuring that relevant aspects of quality appraisal were sufficiently addressed. The CASP tool systematically and rigorously critiques research (Aveyard, 2014), assesses the quality of meta-ethnography syntheses (Atkins et al., 2008) and is suitable for use by novice researchers (Long et al., 2020). The CASP consists of 10 questions that assess the validity, methodological credibility and relevance of research (CASP, 2024). Scoring is the assigning of 'Yes', 'No' or 'Cannot tell' to each of the 10 questions. Despite it being highly recommended by the World Health Organisation and endorsed by the Cochrane Qualitative and Implementation Methods Group (Noyes et al., 2018), the CASP tool has been critiqued for the lack of guidance on its implementation and interpretation (Long et al., 2020). In line with previous researchers' use of the tool in SLRs (Fergus, 2024; Masnoon et al., 2018), studies were rated as 'low quality' if they met <4 of the checklist criteria, 'medium quality' for 5-7 or 'high quality' if at least 8 criteria were met.

Table 6

Quality Appraisal of Papers

Author, Date	1. Was there a clear statement of the aims of the research?	2. Is a qualitative method appropriate?	3. Was the research design appropriate to address the aims of the research?	4. Was the recruitment strategy appropriate to the aims of the research?	5. Was the data collected in a way that addressed the research issue?	6. Has the Relationship between researcher and participant been adequately considered?	7. Have ethical issues been considered?	8. Was the data analysis sufficiently rigorous?	9. Is there a clear statement of finding?	10. How valuable is the research?	Rating
Ahsan (2020)	Yes	Yes	Yes	Yes	Yes	Yes- researcher reflected on their identity as a racialised person and choice of analysis as linked to this.	Can't tell – acknowledgement that the paper formed part of a wider doctoral thesis which would have needed to gain ethical approval, but no mention of this within project.	Yes	Yes	Seminal empirical paper in clinical psychology examining whiteness from the perspective of white clinical psychologists. The findings contribute to our understanding of	High

									whiteness from the majority perspective (i.e. white middle-class female clinical psychologists)
Cottrell-Boyce (2022)	Yes	Yes	Yes	Yes	Yes – researchers comment on their own white identity and outlined interest in examining white privilege within systemic practice.	Yes	Yes	No – Themes/discourses not laid out clearly	Valuable contribution to understanding how white privilege is understood and engaged with by systemic therapists. Implications for systemic practice provided and	High

										commented on.
O'Driscoll (2013)	Yes	Yes	Yes	Yes	Yes	Yes- locates herself as White British trainee counselling psychologist within the research.	Yes	Yes	Yes	Important contribution to otherwise limited landscape of research within counselling psychology	High
Ong (2021)	Yes	Yes	Yes	Yes	Yes	Yes- researcher positionality stated and considered.	Yes	Yes	Yes	Valuable study that focuses on how white clinical psychologists experience talking about race and racism within therapy. Research that contributes to emerging	High

										picture of white clinical psychologists' engagement with whiteness in the profession.	
Osman (2021)	Yes	Yes	Yes	Yes	Yes	Yes- comments on positionality as a White ethnic minority psychologist and subsequent impact on the research process.	Yes	Yes	Yes	A valuable piece of research that utilises a discourse analysis approach to critically examine white psychologists 'race talk'.	High
Wallis & Singh (2012)	Yes - outlined aims and rationale	Yes	Yes	No	Yes	Yes- researcher explicitly makes reference	No – not mentioned	Yes	Yes - clearly discussed research findings in relation to	Valuable piece of research in its contribution	Medium

	for the research					to process of enhancing self-reflexivity as a white researcher through the process of engaging in consultation			research question and aims. Adequate participant quotes used to support findings.	to understanding how white systemic psychotherapy trainers and trainees construct whiteness. Clear implications for practice considered.
Williams (2022)	Yes	Yes	Yes	Yes	Yes	Yes – researcher situates themselves as a White person within the research.	Yes	Yes	Yes	Findings specifically contribute to our knowledge on how white clinical psychologists in leadership roles engage with and understand whiteness.	High

Williams (2023)	Yes- outlined aims of research	Yes	Yes	Yes	Yes	Yes – researcher situates themselves as a White person within the research.	Yes	Yes	Yes	Valuable and in-depth exploration of the lived experiences of Whiteness with White counselling psychologist providing a nuanced understanding of Whiteness in this area.	High

2.5.1 Quality of the Studies

The purpose of the quality review was not to compare the studies with one another but rather to consider the credibility and rigour of each piece in relation to the overall synthesis. Given the inclusion of both peer-reviewed and grey literature research, it was recognised that these sources may not be directly comparable, however recognising that each study provided valuable insight relevant to the review aims.

The three peer-reviewed articles were rated as medium (n=1) to high quality (n=2), and the 'grey-literature' texts were rated as high (n=5). All eight studies provided a clear rationale and aim for the research, as well as highlighting the need for qualitative research that seeks to understand how White psychologists/psychotherapists engage with/understand whiteness and associated constructs. All eight studies commented on reflexivity within the research process; however, they differed in their depth of engagement with self-reflexivity. Some papers provided reflective journals documenting self-reflexivity (Ong, 2021; Williams, 2022; Williams, 2023). Two studies did not explicitly comment on ethics (Ahsan, 2020; Wallis & Singh, 2013) or ethical considerations within the research. Although all but one study (Cottrell-Boyce, 2022) provided clear statements of the findings, all papers discussed findings in relation to the original research question and aims and were deemed to provide a valuable contribution to a limited field of research.

The process of quality appraisal supported my thinking in relation to understanding what is 'valued' within peer-reviewed articles and what is/what's not included or given space to. It made me think about the urgency and need for self-reflexivity within studies that aim to critically examine and engage with issues of

Whiteness and racism that are written by White authors. This was noticeably lacking in the peer-reviewed articles, with researchers' simply stating their racialised identity and their 'coming to' the project. Peer-reviewed articles typically have limited word counts and a particular structure, which made me question what is prioritised within this. Further to this, it should not go unnoticed that more than half of the identified papers are unpublished doctoral theses, three of which are within the clinical psychology profession, and this prompted me to question what Whiteness structures might be at play in preventing these articles from being published in higher-impact journals and therefore resulting in them remaining in the realms of 'grey literature'.

2.6 Methodology for Synthesis

There are different approaches to synthesising qualitative data, with approaches largely categorised in two ways: integrative approaches and interpretative approaches (Cherry et al., 2024). For this inquiry, meta-ethnography was the chosen approach. Meta-ethnography falls under the interpretative umbrella, moving beyond integrating patterns across studies, to offer a higher level of analysis through interpreting both participant findings and author interpretations (Noblit & Hare, 1988). A meta-ethnography approach involves the re-conceptualisation of original papers, moving from first and second-order constructs (i.e. participants' direct quotes related to a phenomenon and the author's interpretations of participants' quotes) to third-order constructs (Toye et al., 2014). This approach aligns with the overarching aims of the review, in the hope of providing a nuanced and critical understanding of the operation of Whiteness in the psy-professions. The seven stages of the meta-ethnography approach *(Noblit & Hare, 1988) that* I used are outlined in **Table 7** below.

Table 7

Stages of Meta-Ethnography

Stage:	Brief Description of stage
1. **Getting Started**	This first stage involved refining the review question that would underpin and guide the meta-ethnography.
2. **Deciding what is relevant to the initial interest**	In this stage, I identified and selected studies that met the inclusion criteria for the synthesis (see Section 2.3.2 for details of the search and selection process).
3. **Reading the Studies**	I read and re-read each included study to gain familiarity with the key concepts, metaphors, and arguments presented. Using NVivo, I coded data from both first-order constructs (participants quotations) and second-order constructs (the authors interpretations of the primary data). This process was guided by Britten et al., (2002), paying particular attention to recurring patterns and themes in relation to the review question.
4. **Determining how the studies are related**	Following initial familiarisation, the relationships between the key concepts from the various papers were then considered. In line with the suggestion by Noblit & Hare (1988), I created a list of the key concepts that had arisen from the data and then examined the relationships between the key concepts that had emerged from each paper– identifying the most common and reoccurring concepts across the studies (so for example *'whiteness as an invisible norm'* (Wallis & Singh, 2012) and '*life being ignorant is less painful'* (Williams, 2022) were clustered together into a descriptive theme of 'Whiteness as invisible and normative'). This phase was an iterative process whereby clusters of themes shifted and changed as I became increasingly familiar with the paper and concepts.

5. **Translating the studies into one another**	By listing key constructs, it became clear that although not every concept was apparent in all papers, the findings did not refute one another, and I therefore utilised methods of reciprocal translation to translate key concepts from one study into the next (Noblit & Hare, 1988). I followed the steps outlined by Campbell et al. (2011) by using an 'index' paper in which to then 'orient' the synthesis Ahsan (2020) paper. The 'index' paper was selected on the basis of it being the paper that was rated as the 'highest' quality paper in the quality assessment process and then remaining papers were arranged in 'chronological' order – thereafter comparing the themes/ concepts from paper 1 with paper 2, and the synthesis of these two papers with paper 3 etc. (Atkins et al., 2008).
6. **Synthesising translations**	The next stage involved generating the meta-themes or third-order constructs, which Noblit & Hare (1988) suggest is "making a whole into something more than the parts alone" (p.28). In a similar way then how a study might move from descriptive to explanatory analysis, a meta-ethnography can proceed from reciprocal translation into a higher order interpretation (Atkins et al., 2008). As the process of synthesising research in meta-ethnography is not clearly defined, I looked to existing research utilising meta-ethnography to understand the processes that have been followed by other researchers (Atkins et al., 2008; Sattar et al., 2021; Toye et al., 2014) and developed a line of argument synthesis by considering the relationship between the themes that had been identified from the reciprocal translation.
7. **Expressing the synthesis**	Stage 7, expressing the synthesis, is the way in which these findings then contribute to an understanding of the topic

	under investigation (i.e. *'How do White practitioner psychologists and psychotherapists engage with and understand Whiteness, 'race' and racism?)* – which is considered in the conclusion and evaluation of the SLR.

2.7 Findings

The synthesis generated three interrelated third-order constructs and two sub-constructs: *1) Awareness of Whiteness; 2) With Awareness Comes Responsibility; 3) From Responsibility to Inaction/Complicity; 3a) Powerless to facilitate change; 3b) Centring White feelings*. Each construct will be discussed below using illustrative quotes from participants across studies to support the findings.

2.7.1 Awareness of Whiteness

Across the studies, WPPs engagement with Whiteness emerged as a tentative and incomplete process, marked by moments of visibility, shifting consciousness, and negotiation of the implications of Whiteness. Whiteness was frequently constructed as an invisible and normative backdrop, rarely scrutinised or interrogated (Ahsan, 2020; Cottrell-Boyce, 2022; Wallis & Singh, 2013; Williams, 2022; Williams, 2023):

> *We don't see ourselves as white, do we really? I don't think we're forced to look in the mirror. It is never really pointed out to you. Whereas if you are black or brown, your experience is-you are reminded of it. (Ahsan, 2020, Abbie, p.49).*
>
> *I can hold it more in the forefront of my mind, but I think because I'm white, it isn't ...at the forefront of my mind. It isn't something that I have to face every day. I don't experience racial discrimination on a daily basis...so it's easy to let it slip. (Williams, 2022, P10, p.46).*

For many, Whiteness appeared to shift in and out of White consciousness depending on time and context. Awareness was often triggered when in contact with the racialised 'other', whether through therapeutic work, professional relationships, or in response to socio-political 'flashpoints' (Osman, 2021; Wallis & Singh, 2013; Williams, 2022; Williams, 2023):

> *Whiteness becomes a salient feature by its difference, but in the context of an all-white kind of thing, it becomes something that you just don't think about. Um, so I suppose it's…I'm not aware of my whiteness until there is something that's not white in a way. (Williams, 2023, Patrick, p.83).*

This awareness was often catalysed by external events such as the murder of George Floyd and the resurgence of the Black Lives Matter movement (Ong, 2021; Williams, 2022), supervision spaces, or through the lived experiences shared by racialised colleagues or clients (Ahsan, 2020; Williams, 2022; Williams, 2023): *"she talked a lot about racism on the course… that kind of really hurt me quite a bit and upset me quite a bit and reminded me just how real it is." (Williams, 2022, P1, p.60)*

Within this theme, there was an implicit reliance on racially minoritised individuals to make Whiteness visible, placing the burden and responsibility for raising consciousness on those most affected by racism. This raises the critical question of whether the visibility of Whiteness for WPPs depends, at least in part, on the ongoing harm and brutalisation of racialised 'others', with their suffering functioning as a trigger for raising White consciousness:

> *A colleague was really… courageous in sharing some personal examples that really helped the team be like, 'oh OK, yeah and this is something…that we need to think about it'…from you know outright*

> *terrible racism to the more, the more subtle end, which is still blatant racism…that were really helpful for the team to explore. (Williams, 2022, P13, p.60).*

Once Whiteness became visible, it was often negotiated in ways that acknowledged but diluted its implications. Participants frequently recognised its association with credibility, authority, economic advantage (Cottrell-Boyce, 2022; Wallis & Singh, 2012) and societal freedom (Williams, 2023), for example: *"I can move around this world safely and expect to get all my needs met and be put first in a reasonable manner." (Williams, 2023, Hannah, p.74*). However, distancing strategies were often employed for participants to distance themselves from its negative connotations. This included adopting a White-other identity (Wallis & Singh, 2012; Williams, 2023), foregrounding other aspects of identity linked to oppression (Cottrell-Boyce, 2022; Wallis & Singh, 2012; Williams, 2023), distancing from White guilt (Ahsan, 2020), or participants not recognising themselves as located within racialised systems (e.g., *"There was minimal discourse around speakers seeing themselves as part of the system, and how they may be contributing to the system, such as through silence."* *(*Osman, 2021, p.15*).*

Less evident across the studies was an acknowledgment from participants of the consequences of not 'seeing' Whiteness and how this lack of awareness contributed to a failure to recognise its manifestations and machinations:

> *Looking back on it now, I can see how the organisation treated them differently. And I can assume only because of…the colour of their skin…they never explicitly said anything to do with race, and I didn't pick up on that…now*

> *I can see why they were so upset and felt so kind of persecuted.* (Williams, 2022, P5, p.59).

This pattern arguably mirrors how Whiteness operates at an institutional level within the psy-professions, where anti-racism efforts have tended to emerge in response to external events rather than through an ongoing, embedded commitment. The findings therefore highlighted the need for more deliberate, sustained, and self-initiated interrogation of Whiteness across the psy-professions.

2.7.2 With Awareness Comes Responsibility

As outlined in the above theme, awareness of Whiteness among WPPs was often partial, shifting, and prompted by external encounters or events. For some participants, however, once consciousness was raised, this awareness extended into reflection on their positionality, subsequent power, and potential role in addressing racism. This transition from *seeing* Whiteness to *feeling* responsible to 'act' underpins this theme.

Across studies, participants voiced an awareness of their power and privilege as WPPs, and their subsequent responsibility to engage in work that addresses racism and interrogates Whiteness (Ahsan, 2020; Cottrell-Boyce, 2022; Ong, 2021; Osman, 2021; Wallis & Singh, 2012; Williams, 2022). This sense of responsibility was often framed as part of their professional identity, with some describing anti-racism as *"integral to the role"* (Ong, 2021, p.59):

> *We need to acknowledge and accept our position of privilege and power and use it to try and make things better in the future…so trying to always acknowledge my privilege to recognise it and use it…to not stand for racism to tackle inequality and racism wherever I see it. (Ong, 2021, P14, p.62).*

For some, the intersection of being both White and in positions of seniority or leadership intensified this responsibility (Ong, 2021; Williams, 2022):

> *I think that people shouldn't shy away from it. Certainly not because they're White…it's probably our responsibility as much if not more…if you have power, how do use it or not use it? you don't want to use your power in a privileged position. On the other hand, if you can use it to be helpful, probably a bit irresponsible not to…as a white senior leader, I think responsibility is big and I think you should get involved as much as you can. (Williams, 2022, P1, p.69).*

In several studies, participants positioned themselves as being well-equipped to engage with issues of 'race', racism and Whiteness due to their professional identity, with some referencing their "*knowledge"* (Ahsan, 2020, Hannah, p.49*),* willingness to *"speak up"* (Osman, 2021)*,* role as *"advocates"* (Cotrell-Boyce, 2022; Osman, 2021*),* and *"duty as a clinical psychologist to address power"* (Ong, 2021, P8, p.58). They also acknowledged key therapeutic skills, such as openness, curiosity and skills in facilitation; with an underlying assumption that these are useful and transferable tools for anti-racism work (Osman, 2021; Wallis & Singh, 2013). However, some simultaneously recognised a reluctance to fully step into this responsibility: *"We shy away from power and the responsibility that comes with that. We have the knowledge to stick heads above the parapet for some things, but not this. We need to do more".* (Ahsan, 2020, Hannah, p.49).

Although many framed themselves as committed to continue 'thinking about this stuff' (Ahsan, 2020, p.50) and expressed the desire to *"try change things for the future"* (Osman, 2021, Natasha, p.17), these expressions were often complicated by perceived 'barriers' to engagement (discussed further in following theme), and by a lack of

concrete examples of how to enact anti-racism in practice (Cottrell-Boyce, 2022; Ong, 2021; Osman, 2021; Williams, 2022). Some also explicitly acknowledged uncertainty about knowing what to do: *"I think what happens is people feel the weight of responsibility but don't have the tool to know what to do about it"* (Williams, 2022, P12, p.58).

In conclusion, this theme reflects a recurring construction across studies in which WPPs framed awareness of their Whiteness as carrying an inherent responsibility to engage in anti-racism. However, across studies, authors problematised the expressed commitment to engage, without evidence that these expressions then transform into actions (Ahsan, 2020; Ong, 2021; Williams, 2022), thereby highlighting how talk can function as a distraction from engagement with anti-racist action.

2.7.3 From Responsibility to Avoidance/Inaction

Building on the previous theme, which explored how responsibility was constructed, this theme examines the factors that limited or undermined the enactment of participants stated responsibility. Across studies, participants described difficulties in addressing 'race' and racism within therapy (Ahsan, 2020; Cottrell-Boyce, 2022; O'Driscoll, 2013; Ong, 2021; Osman, 2021; Wallis & Singh, 2013), within teams (Ong, 2021; Williams, 2022), within leadership roles (Ong, 2021; Williams, 2022) or enacting change on a systems level (Ong, 2021; Osman, 2021; Williams, 2022). Racism and Whiteness were frequently constructed as endemic/systemic issues that extended beyond personal influence or control: *"the evidence we've got is that racism is so endemic in some of our institutions and you just sort of…can get a bit overwhelmed with where do you even start."* (Osman, 2021, Rose, p.14).

In contrast to earlier claims of being skilled and willing, some positioned themselves as unskilled and ill-equipped to engage (Ahsan, 2020; O'Driscoll, 2013; Ong, 2021; Osman, 2021; Williams, 2022). White feelings, including discomfort, guilt, and fear of 'getting it wrong', were continuously centred, functioning to justify inaction. This theme, therefore, illuminates a central contradiction: the simultaneous construction of the self as responsible and capable (previous theme), and as unwilling and unable to act.

2.7.3.1 Powerless to facilitate change

Participants frequently positioned themselves as powerless to make change, referencing the enormity and systemic embeddedness of racism and Whiteness as barriers to action:

> *I think there's also something that sometimes just feels a bit overwhelming about it…the evidence we've got is that racism is so endemic in some of our institutions and you just sort of just can get a bit overwhelmed with where do you even start how do you start to kind of effect that. (Osman, 2021, Rose, p.14).*

By locating the problem as 'out there' and "*too much work"* (Ong, 2021, P8, p.55), participants framed racism as beyond individual responsibility and culpability. References to systemic pressures such as lack of time, resources and "energy" (Ong, 2021; Williams, 2022, P10, p.65) further served to justify inaction. The task was repeatedly constructed as 'overwhelming' and complex: "*such an important massive thing that I really want to do but feels really big and really hard… so that's probably why I'm not on a daily basis doing things that that are kind of meaningful towards that." (Williams, 2022, P10, p.50).*

This sense of powerless was compounded by self-positionings as unskilled or ill-equipped (O'Driscoll, 2013; Osman, 2021; Williams, 2022), and, in some cases, unwilling to engage (Ahsan, 2020).

> A*s a profession I think we're OK at talking about power imbalances and thinking about the power differences between therapist and clients…we haven't developed a good way of thinking about that in regard to race. (Ong, 2021, P2, p.57).*

Several participants deflected responsibility onto inadequate training or supervisors who were seen as failing to facilitate conversations about 'race': "*other than that there really has been nothing touched on in the first year about racial differences and diversity." (O'Driscoll, 2013, Sophie, p.68).*

> *In my own supervision, I don't think I've ever been asked questions about that or been prompted to do that…a lot of this doesn't really happen. I get supervision notes from other supervisors that supervise people. It's not there, it's not on the structure. It's not inbuilt into the kind of the fabric of what supervision should look like or take account of. (Williams, 2022, P8, p.47).*

A further barrier was the use of reference to therapeutic 'neutrality' as a rationale for avoiding issues of 'race' (Cottrell-Boyce, 2022; O'Driscoll, 2013; Wallis & Singh, 2013; Williams, 2023). Neutrality, functioning within a broader colour-blind discourse, allowed participants to frame engagement with racism as politically or professionally risky:

> *In the spirit of political correctness things are meant to be neutral. So if you are in any way noticing that somebody is black, what you saying with that noticing, how do they experience you noticing? (Wallis & Singh, 2013, Rachel, p.50).*

Thus, neutrality (a White-centric construct) appears to function to justify participants' inaction and avoidance (Cottrell-Boyce, 2022; O'Driscoll, 2013; Ong, 2021; Wallis & Singh, 2013; Williams, 2023).

2.7.3.2 Centring White feelings

This construct, evident across all eight studies, captures how WPPs frequently centred their own emotional comfort over engaging with issues of 'race', racism and Whiteness. Participants often foregrounded feelings of *"discomfort"*, *"shame", "fear"* or *"anxiety"* when discussing anti-racism, positioning these emotions as barriers to action (Ahsan, 2020; Cottrell-Boyce, 2022; O'Driscoll, 2013; Ong, 2021; Osman, 2021; Wallis & Singh, 2013; Williams, 2022; Williams, 2023). In doing so, they implicitly constructed their own emotional safety as more important than confronting racism.

Common justifications for silence or avoidance included a fear of *"getting it wrong" (Cottrell-Boyce, 2022, MJ, p.150), "stumbling into one's own blind spot" (Williams, 2022, P1, p.51)*, being *"labelled as a bad person" (Ong, 2021, P8, p.46),* or the worry that*: "if you're white… you're racist" (Wallis & Singh, 2013, Cathy, p.50)*. Participants described affective and embodied responses, such as shame, guilt, anxiety, upset and fear when engaging with conversations about Whiteness and racism (Ahsan, 2020; Ong; 2021; Osman, 2021; Williams, 2022; Williams, 2023), often linking these emotions to withdrawal or silence: "*I might be engaging in unconscious racism and you have to constantly police yourself because you're trying to be better and then that can freeze up your mind to some extent, I think." (Wallis & Singh, 2012, John, p.50).*

A strong preoccupation with 'getting it right' permeated the data, particularly around the 'correct' use of language and terminology, rooted in an underlying fear of appearing racist:

> *My own fear of being racist or appearing racist or saying something inappropriate…like, what language do I use to describe my client? You know…is she an Asian client, is she South Asian? Is she a person of South Asian background? You know, it's like, is that a black person or is that an Afro Afro Afro African American? (Williams, 2023, Patrick, p.98).*

These fears were heightened for those in leadership roles, where participants spoke of the "*pressure… to be seen to know everything and to get it right and to be the one who understands everything and to not be clumsy or crude or say offensive things"* (Williams, 2022, P12, p.52). Across contexts, the centring of White feelings not only diverted focus away from racism and Whiteness but also provided justification for inaction. In some accounts, this positioning shifted participants into a victim role, framing themselves as 'unable' to engage in or initiate conversations about racism or challenge racist acts: *"I find yeah that afterwards of just like the beating myself up of like I should have said something"* (Ahsan, 2020; Osman, 2021, Angie, p.15; Williams, 2022). This construct suggests that due to the centring and prioritising of White feelings, participants are complicit in upholding Whiteness and racism through inaction.

2.8 Evaluation and Conclusions of the Systematic Literature Review

This review identified three interconnected patterns in how WPPs engage with and understand Whiteness, 'race' and racism: *Awareness of Whiteness*, *From Awareness to Responsibility*, and *From Responsibility to Inaction/Complicity* – each of which will be briefly summarised and contextualised in the broader literature below.

The first theme, *Awareness of Whiteness*, reflected that awareness was often partial, shifting and externally prompted. This reflects wider literature suggesting that

Whiteness remains unmarked and unexamined unless actively brought into focus (Frankenberg, 1993; Sullivan, 2006). Such awareness, when it emerges, is frequently unstable, echoing Applebaum's (2010) argument that Whiteness 'slips' from White consciousness, enabling it to continue to operate as an invisible norm. These findings also parallel Mills' (2014) assertion that "Whites will in general be unable to understand the world they themselves have made" and that "Blackness [does] the illuminating", underscoring how White consciousness often depends on the emotional labour of racially minoritised people.

The second theme, *From Awareness to Responsibility*, highlights that when awareness occurred, it was often framed as a moral and professional duty to act. This echoes wider literature on anti-racist practice, where recognising one's privilege is understood as a vital, but insufficient, step in dismantling racism (Bonnett, 2000). As Ahmed (2007) cautions, such statements of commitment, risk operating as 'non-performative' speech acts, signalling solidarity with anti-racism whilst failing to act. As Patel (2021) similarly notes, genuine anti-racism demands sustained, uncomfortable labour and a move beyond "mere expression of anti-racist ideas" (p.6).

The third theme, *From Responsibility to Inaction/Complicity*, exposed the disconnection between expressed commitments and actual engagement. While participants described a sense of moral and professional obligation to engage in anti-racism, they also described challenges that limited their ability to engage. These included perceiving racism and Whiteness as systemic problems beyond influence, mirroring Applebaum's (2010) observation that White people often deflect accountability outward. Emotional responses such as guilt, fear, and shame, which are well documented in the literature (Case, 2012; DiAngelo, 2011; Matias, 2016;

Spanierman & Smith, 2017), were cited as barriers, sometimes preventing even basic conversations about 'race'. The construct of neutrality further compounded this, with Alemohammed (2025) suggesting that neutrality is frequently invoked as a professional ideal, but ultimately operates to placate resistance and suppress discomfort, particularly when such discomfort threatens entrenched structures of Whiteness.

Despite only one study explicitly focusing on White psychologists' engagement with anti-racist practice within leadership roles, findings did not greatly differ from the other research studies, highlighting that, despite occupying a role that would involve a responsibility to address Whiteness and racism, participants remained passive in their responsibility.

Taken together, this review highlights a persistent gap between expressed anti-racist intentions and the enactment of meaningful change. The findings also highlight the need for research methodologies capable of examining the nuances of talk – how specific discursive moves, affective expressions, and identity work to either reproduce or resist structures of Whiteness.

2.8.1 Strengths, Limitations and Future Research

Overall, this SLR is the first of its kind to critically synthesise research on how WPPs understand and engage with Whiteness, 'race' and racism. The eight papers revealed areas of convergence in relation to the research question, offering important insights for anti-racism efforts across the psy-disciplines. The review drew on a wide range of databases and incorporated both peer-reviewed and 'grey literature' texts. To enhance the rigour of the SLR and minimise selection and publication bias an additional doctoral researcher was involved in screening 100% of research papers at

both the title/abstract and full text screening stage; as well as being involved in reviewing 25% of the identified articles at the quality appraisal stage. Ratings between myself and the other researcher were then compared and combined.

These findings should, however, be considered in light of several limitations. Due to the scarcity of research in this area, the scope was broadened to include other disciplines outside of clinical psychology, such as family therapy and counselling psychologists. Whilst this provided a broader view of how Whiteness is understood and engaged with across the psy-professions, it limits generalisability to clinical psychology specifically. Further to this, the context in which researchers were examining Whiteness, 'race' and racism was broad, with only one study explicitly focusing on engagement with anti-racist practice.

2.9 Rationale for Current Research

The literature synthesised in this review, alongside what was outlined in the introduction, demonstrates the pervasive and often unexamined nature of Whiteness within clinical psychology and related professions. This review found that while some WPPs expressed a commitment to anti-racist practice and acknowledged the power afforded by their intersecting identities, these intentions were often undermined by multiple factors that rendered expressions and intentions as meaningless without the commitment to enact change.

With the renewed energy and visibility around racial justice within clinical psychology, together with knowledge that due to the makeup of the profession, White psychologists are likely to be involved at some level in tackling 'race' related issues; research that critically examines how Whiteness operates in the context of anti-racism

work is both timely and necessary. This study builds on the findings of the SLR by focussing specifically on WCPs who occupy positions of influence and are actively engaged in anti-racism work. By examining how power, privilege, and professional identities are constructed in their talk, this research seeks to shed light on the ways Whiteness is maintained or disrupted within these contexts. This aligns with Moradi and Grzanka's (2017) call to shift the research gaze "upstream" towards the structures of power and privilege that sustain oppression rather than solely "downstream" to its effects (p.504).

2.10 Aims and Research Questions

To meet the aims of the research, the following research questions and associated sub-questions have been developed:

- How do WCPs discuss their roles within anti-racism work and how are 'race', Whiteness and White identities engaged with and constructed through this work?
    - How does their talk function to maintain/uphold or disrupt/challenge structures of Whiteness?

CHAPTER 3: METHODOLOGY

3.1 Chapter Overview

In this chapter, I will aim to provide the reader with an overview of the research methodology, outline the research design, provide a rationale for the use of critical discursive psychology (CDP), and introduce how CDP fits the research question and the chosen epistemological stance. This chapter will also consider the involvement of consultation from experts in the anti-racism field, participant recruitment information, ethical considerations, and the data collection and analysis process. Finally, I will comment on self-reflexivity and how this was considered within the project.

3.2 Design

3.2.1 The Rationale for a Qualitative Approach

For the purpose of this inquiry, I will be utilising a qualitative research design. Qualitative research is a broad umbrella term covering an array of methodologies (Lincoln, 2010; Maanen, 1979). This research aimed to provide a critical exploration of how WCPs discuss their roles within anti-racism work, with a focus on how 'race', Whiteness, and White identities are engaged with and constructed through participants' talk. As the introduction and SLR highlighted, there is some existing qualitative research examining Whiteness and racism within the profession (Ahsan, 2020; Desai, 2018; Ebubedike et al., 2024; Falcon, 2023; McNeil, 2010; Osman, 2021; Odusanya et al., 2017; Ong, 2021; Ragavan & Naiken, 2018; Rajan & Shaw, 2008; Shah, 2010; Williams, 2022). However, to my knowledge, there have not yet been any studies specifically examining Whiteness in the context of anti-racism work. I considered it essential to adopt an exploratory approach that allowed for a rich examination of meaning-making

and knowledge co-construction in alignment with a qualitative research design (Lincoln, 2010; Maanen, 1979).

3.2.2 Discourse Analysis

Various qualitative methodologies could have been used to explore how WCPs discuss working within anti-racism. Harper (2011), however, suggests that particular research questions are better suited to some methodologies over others, and that the researcher's epistemological stance needs to be considered when selecting the most appropriate methodology to answer an inquiry. As mentioned in the introduction, this research will be underpinned by a moderate social constructionist stance. Discourse Analysis (DA) is an approach that aligns well with this epistemology, as well as with the aims of the research (Nikander, 2008). DA serves as an overarching term for several different frameworks and approaches to the study of language (Harper, 1995), with language seen as the means to construct 'reality', rather than mirror it (Georgaca & Avdi, 2011).

A central tenet of the DA approach focuses on the action orientation of language, viewing talk as a means to accomplish a wide variety of social actions, rather than a process of retrieving information (Edley, 2001). Broadly, there are two main traditions within DA: Discursive Psychology (DP) and Foucauldian Discourse Analysis (FDA) (Willig, 2008). DP is focused on microanalysis, or what can be referred to as a 'bottom-up' analysis; examining finite details of talk and linguistic techniques that construct a version of reality (Edwards, 2005). FDA and other post-structuralist approaches, focus on the macro, 'top-down' analysis, moving beyond the text by locating talk within the wider historical, political, cultural and social context (Harper, 2011).

3.2.3 Rationale for Critical Discursive Psychology

For this inquiry, it was essential to utilise a framework that uses ideas from both 'camps' of DA to answer the research questions and meet the project's aims. Critical Discursive Psychology (CDP) combines both the micro-analytic elements of DP with the wider 'macro' analysis typical of post-structuralist approaches (Locke & Budds, 2020). A CDP analysis allows for the researcher to pay attention to the action orientation of the talk (e.g., what the talk is achieving), as well as paying attention to the context in which this talk has emerged i.e., broader social, political and cultural contexts, for example, rising discourses around a commitment to anti-racism within the profession (Benwell & Stokoe, 2006; Wetherell, 1998).

CDP as a form of analysis has been identified as a valuable tool to explore systems of domination and oppression (e.g., racism, ableism) (Edley, 2001; Kirkwood et al., 2016; O'Driscoll, 2013; Osman, 2021). Previous research utilising this approach has uncovered the oppressive nature of Whiteness in talk and exposed how racism can be discursively disguised (O'Driscoll, 2013; Osman, 2021). With the current research aiming to examine the talk of WCPs engaging in anti-racism/racial equity work and with the existing research having highlighted the pervasive nature of Whiteness within the profession, a research approach that allowed for an analysis of the operation of power seemed imperative.

At the heart of CDP lie three central concepts: interpretative repertoires, subject positions and ideological dilemmas; these core concepts offer a way to analyse talk in line with the above ideas and will be discussed in more detail in a later section.

3.2.4 Consideration of Alternative Methodologies

In the early stages of the research process, I also considered using both reflexive thematic analysis (TA) and Interpretative Phenomenological Analysis (IPA) to answer the research question. TA would have been a good fit for the research if the inquiry was aiming to explore participants' experiences of being WCPs working in racial equity/anti-racism roles. This approach would have allowed for the research to capture the individual 'realities' of participants' experiences of the work, as well as understanding patterns across the data (Braun & Clarke, 2019). Similarly, IPA was considered as an option that could capture an in-depth exploration of participants' experiences and how they make sense of these experiences (Smith et al., 2009). I was particularly interested in IPA as an approach that acknowledges the lens through which the researcher analyses the data (in this case a White researcher, also a trainee clinical psychologist, analysing other WCPs' talk).

Both IPA and TA have been used previously as methodologies to explore Whiteness from the perspective of WCPs (Ahsan, 2020; Desai, 2018; Ong, 2021; Williams, 2022). However, some studies highlighted the limitations of these methodologies in offering a critical approach to phenomenological data, and some have called for future research exploring Whiteness within the profession to use a methodology that allows examination of power in how 'race' and racism are spoken about (Ahsan, 2020; Ong, 2021; Stoddart Isaac, 2023). Further to this, both IPA and TA adopt realist informed epistemologies, with an underlying assumption that data can tell us something about reality or the participants' subjective experience (Harper, 2011). CDP was therefore chosen as a better fit to the research questions, aims and epistemological stance in its ability to go beyond participants' accounts of their

experiences and examine how meaning and knowledge are constructed in and through talk.

3.3 Consultation Group

With an acknowledgement of the inevitability that, as a White researcher, I would perpetuate Whiteness in some form within the research project (Foste, 2020), it was important to consider how I could be held accountable within this research process. In conversation with my research supervisors, we decided that the project should seek consultation from individuals who have experience of working within anti-racism in the profession of clinical psychology and who hold a racially minoritised identity. Three consultants who worked within racial equity/ anti-racism were therefore recruited for the project with the support of my secondary supervisor. They were approached via email with a brief summary of the project and an outline of their potential involvement. Previous research has highlighted that research on Whiteness has often excluded the participation and consultation of racialised individuals (Bateman, 2023), and I was hopeful that this research could be shaped by the very people who are impacted by Whiteness and racism and not 'entirely' led from a White perspective. An outline of how and when consultants were involved in the project can be seen in Appendix C.

I was mindful of the request I was making of racially minoritised individuals to contribute emotional and intellectual labour to a project led by a White researcher, and the risks involved in this, such as the potential co-option of ideas, the need to manage my fragility, or being positioned as 'experts' on racism. Despite my intentions to create relationships with the research consultants grounded in openness, respect, and

transparency about my coming to the project, I continue to reflect on the ways in which my Whiteness showed up in this space throughout the process.

3.4 Choosing focus groups

This study utilised a focus group design. Focus groups have been defined as a 'research technique that collects data through group interaction on a topic determined by the researcher' (Morgan, 1997, p.6). Although one to one interviews were considered, in line with the epistemological stance, research question and aims of the research, a focus group design was chosen as a better fit for the project as it would allow for an exploration of the way in which meanings are co-constructed between people through language (Smithson, 2008); i.e. allowing for an examination of the way in which a group of WCPs discuss their roles within anti-racism work. I was hopeful that the data generated would be as close as possible to a naturally occurring conversation between WCPs who are involved in anti-racism roles, which arguably would not have been achieved in a one-to-one interview setting. There are debates within DA as to whether data should be generated through 'artificial' set-ups such as interviews or focus groups (Goodman & Speer, 2015). Although Potter (1997) placed precedence on 'naturally occurring talk', suggesting that data produced through these methods are 'contrived', Speer (2002) argues that all data, even that which has been constructed for the sake of research, can be viewed as natural in that it will involve "real people speaking in real social situations" which will naturally generate action-oriented talk (p.146). Further to this, the project data and subsequent interpretation have no intention to make any claims to 'truth' or 'generalisability'.

3.4.1 Focus group interview prompt

The set-up of the focus group and question prompts was informed by conversations with my consultation group and supervisory team, as well as by reflecting on existing research utilising CDP and other forms of DA. In discussion with the research team, we considered different themes that would be important and collectively agreed that the main task of the focus group was to generate talk about the participants' roles. We identified some broad prompts to generate discussion (Appendix B) with the intention being for the talk to be as 'natural' as possible, and for my involvement in the interview process to be minimal. This led to the decision that I would only ask one overarching question and provide the group with a few additional prompts to consider.

When considering the content and set-up for the focus group, I felt a need to ensure participants were comfortable and 'safe'. I questioned what this was about with my supervisor and consultants, and they helped me to recognise my own Whiteness in wanting to ensure and prioritise White people's comfort, as well as perhaps wanting to maintain my position of being one of the 'good ones'.

3.4.2 Virtual Focus Group

Virtual focus groups were held over Teams to allow individuals from across the UK to participate. Further to this, since COVID-19, online meetings are commonplace across the profession, and in consultation with supervisors who work regularly online within the area of anti-racism, this was not considered to be a limiting factor.

3.5 Recruitment

3.5.1 Inclusion and Exclusion Criteria

To meet the research aims, a set of inclusion and exclusion criteria was determined.

Table 8

Inclusion and Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
• Qualified Clinical Psychologists whose roles involve addressing issues of racial equity/anti-racism (could be as broader EDI role for example). • Self- identify as white. • Comfortable communicating via the English language. • Currently working within the UK.	• Individuals who are linked in any way to the research (e.g., research supervisors).

3.5.2 Participant Recruitment

Initially, a purposive sampling method (Ravitch & Carl, 2016) was used to recruit eligible participants for this study because of the clear set of inclusion and exclusion criteria. The study advert (Appendix D) was shared on social media platforms, via a research account specifically set up for the project (e.g., LinkedIn, X, Instagram and Facebook). In addition, a recruitment email with study information and the research

advert was sent directly to all UK DClinPsy course administrators, requesting that it be circulated amongst course staff involved in EDI/ anti-racism work. Further recruitment emails were sent by the research team to relevant professional networks (e.g., Psychologists for Social Change, Examining Whiteness group run by Psychotherapists and Counsellors for Social Responsibility and the DCP Race and Equality Group).

Individuals interested in participating in the study contacted me via email and a participant information sheet (Appendix E) with further details about the research was then shared. The information included a link to an electronic copy of the consent form (Appendix F) and the demographic sheet (Appendix G). Interested participants were asked to complete and sign the forms to be considered eligible.

3.6 Participant Information

Nine participants took part in the research. A summary of their demographic information can be seen in Table 9. Given that the number of WCPs engaged in anti-racism/racial equity/EDI work in the NHS is limited, specific details (e.g., area of practice, specific job roles, geographical area) have not been included to maintain participants' anonymity. Participants worked in EDI and/ or racial equity roles across the UK, working within both the NHS and DClinPsy course contexts.

Table 9

Participant Demographics

Alias	Gender	Ethnicity/ Nationality
Grace	Female	White British

Abbie	Female	White British (European Parents)
Mark	Male	White British
Sarah	Female	White British/ European
Fiona	Female	White British
Riaan	Male	White British
Lucy	Female	White British
Amy	Female	White British
Evie	Female	White other

3.7 Ethical Considerations

Ethical approval for the study was granted by The University of Hertfordshire's (UH) Health and Human Sciences Ethics Committee (protocol number: LMS/PGR/UH/05786, (Appendix H). To ensure that the research upheld UK ethical guidelines, the Code of Human Research Ethics (BPS, 2021a) and the Code of Ethics and Conduct (BPS, 2021b) were adhered to. One amendment to the original application was granted to expand recruitment avenues due to an initially slow response.

Recruitment proved more challenging than I had imagined, and I began to question how Whiteness was shaping this process. I wondered whether the nature of the project itself, even without disclosing the full aims, may have felt exposing and discouraged potential participants from coming forward. I also reflected on how this extended beyond individual decisions. Key stakeholders working within anti-racism

declined to share the research advert, despite having direct access to relevant potential participants. This raised questions about how Whiteness shaped not only individual decisions, but also forms of institutional gatekeeping, resistance and possible avoidance of looking inwards. In this sense, the recruitment difficulty became a finding in itself, illustrating how Whiteness protects its own maintenance through avoidance, withdrawal, and limiting opportunities for accountability.

3.7.1 Omitting full research aims in recruitment strategy

In discussion with the research team, I decided to omit the use of the term Whiteness from all recruitment materials and communications prior to the focus group taking place (including emails/information sheet). This decision was made in line with BPS (2021) guidelines, which note that deception can be used when it is deemed essential to achieve the research results and aims, and when an appropriate risk management/harm alleviation strategy is in place. In light of the aforementioned issues with unexamined Whiteness in the profession, it was considered necessary not to disclose the full research aims to potential participants. With the research question aiming to examine power through analysing how White identities and Whiteness is constructed, it was agreed that including the word Whiteness could undermine the value of the research and negatively impact the chosen methodology.

There was also a potential risk that including the word Whiteness in the research advert would attract participants who were already engaged in dissecting and examining Whiteness. This may have resulted in an inaccurate representation of those involved in doing this work and potentially created a biased sample for the research. Further to this, the research was interested in examining how Whiteness operates in

discourse about anti-racism work through paying attention to what is present and absent in participants' spontaneous and genuine talk. There was therefore a possibility that the inclusion of Whiteness in the recruitment advert could influence discussions in the focus groups, rather than talk being spontaneous and genuine. Although the element of deception was deemed to be minimal, the potential impact was thoroughly considered. During the focus groups, participants appeared to engage openly, with no expressions of concern or requests to withdraw data following the debrief. This suggested that the omission of the term 'Whiteness' and full disclosure of the research aims did not appear to have caused distress or negatively affected participation. The following sections outline how the risk of using deception in research was minimised.

3.7.2 Informed consent

All prospective participants were provided with the broad research aims, information on the use and storage of data and their right to withdraw. The information also outlined the potential disbenefits of participating without disclosing the element of deception, by stating that 'there is an acknowledgement from previous research that conversations around 'race' and racism for White people can be anxiety-provoking and challenging'. Participants were also offered the opportunity to discuss any questions or queries they had before signing up. No participants reached out to ask any questions before the focus groups took place.

3.7.3 Right to withdraw

Following completion of the focus groups, participants were immediately sent debrief sheets which included a more detailed explanation of the research question and

research aims (Appendix I), as well as being reminded about anonymity and their right to withdraw their data for up to three weeks after the completion of the focus group.

3.7.4 Risks

The acknowledgement that participants could experience some levels of emotional distress when taking part in the research due to the nature of the topic was carefully considered. The risk was minimised by including the use of information sheets broadly outlining the topic, monitoring of distress throughout the focus group, breaks being offered, and debrief sheets outlining participant anonymity and highlighting the right to withdraw being sent directly after the focus groups were completed.

A full list of the risks that were considered relevant to this project and the way in which these risks were managed can be found in Appendix J.

3.7.5 Confidentiality, data protection and data storage

In line with the Data Protection Act (2018) and General Data Protection Regulation (GDPR), all identifiable information was removed from the data in the transcripts, and participants' names were replaced with self-selected pseudonyms or where participants had not selected a pseudonym, one was chosen for them. Participants had been informed on the participant information sheet of how the study would be shared and were assured that they would not be identifiable in the data.

Consent forms and demographic sheets were shared via a secure electronic link linked to my password protected UH OneDrive and once the forms had been signed, the link was removed. The consent forms and demographic with participants' names and signatures were stored separately from transcripts, demographic sheets and

recordings. Demographic information was kept to a minimum to reduce the likelihood of identification – with only the information relevant to the study collected (e.g., number of years qualified, ethnicity/nationality and gender).

3.8 Data Collection

Data collection took place between October 2024-February 2025. As soon as three participants confirmed their interest in participating in the research, a doodle poll was sent out with various date/time options to come together for a focus group. This process was then repeated once the next three participants had confirmed their participation. Once a date/time had been agreed, a Teams link was sent to all participants separately. A prepared script was used to remind participants of the context of the meeting and the broad aims of the research (Appendix B). Once the focus group ended, participants were sent the debrief sheets.

3.9 Data Analysis

CDP was employed as the analytic method to analyse the data (Edley, 2001; Edley & Wetherell, 2001). Unlike most other qualitative methodologies, CDP and other DA approaches do not have a set of stages of analysis to follow (Gill, 1996). This, together with an acknowledgment of the complexity of learning DA approaches, has prompted some authors to attempt to demystify the approach and provide some clarity and structure (Harper et al., 2008; Goodman, 2017; Locke & Budds, 2020), while recognising that the "relative freedom enabled by DA was what drew many researchers to it in the first place" (Harper et al., 2008, p.6).

For this inquiry, I was loosely guided by the six stages of analysis suggested by Locke & Budds (2020). I added an additional stage to consider ideological dilemmas in

the analysis not included in Locke and Budds (2020) framework, but has been central to other research using CDP analysis to examine racism and Whiteness in talk (O'Driscoll, 2013; Osman, 2021). Moving through the stages allowed me to shift from a focus on the "broader constructions within the text, to a more thorough consideration of the 'how', 'when' and 'why' of the discourse" that is required by CDP (Locke & Budds, 2020, p.238).

3.9.1 Stage 1: Familiarisation with the Data

Once the data had been collected, I began the process of transcription. I opted for the automatic transcription via Teams, so I came to the data with an almost complete transcript. I then listened and re-listened to the recording, making corrections to the transcript as well as adding in transcription conventions. I added the Jefferson (1985) style of transcription, which notes pauses, overlapping speech, intonation of speech, to provide additional context to the talk (Appendix K). This process allowed me to become 'closer' and more familiar with the data, aiding the immersion process (Olbertz-Siitonen, 2018).

Line-by-line coding was then performed on the data with a focus on what topics/ categories were being discussed by participants, whilst also loosely keeping in mind how each category was being spoken about. It is suggested that analysis at this stage should be both descriptive and interpretative, with a recognition that the analysis will increasingly move from description towards a more sophisticated interpretation as it progresses.

3.9.2 Stage 2: Discursive Constructions

At the second stage of analysis, I identified the reoccurring themes or patterns that were emerging in the participants' talk. I paid particular attention to the prevalent themes or ways of talking about or constructing objects/experiences in relation to the research question. For example, highlighting every time participants constructed their identity, the work or engaged with issues of 'race' and/or Whiteness (Appendix L).

3.9.3 Stage 3: Interpretative Repertoires

The third stage of analysis built upon the second by considering the discursive constructions through the identification of interpretative repertoires in participants' talk. Interpretative repertoires have been defined as a "recognisable routine of arguments, descriptions and evaluations found in people's talk" (Seymour-Smith et al. 2002, p.255). Interpretative repertoires are bound by power, and it is acknowledged that some repertoires are more culturally dominant and therefore 'available' or 'accessible' to speakers over others (Gramsci, 1971). Further to this, it has been acknowledged that multiple and sometimes contradictory repertoires can be in use at one time.

I also considered the suggestion from Wetherell and Potter (1998) that this stage of the process would involve following 'hunches' and being tentative in the analysis in recognising that some interpretative repertoires may need to be abandoned or revised along the way.

3.9.4 Stage 4: Subject Positions

I then considered the way in which these repertoires made available different subject positions for the participants to 'take up' in the talk. Subject positions are considered as 'ways of being' and refer to the way in which the speaker positions

themselves and others in conversation (Davies & Harré, 1990). This concept is underpinned by an understanding that identities are not fixed and stable, but rather multiple, fleeting and fragmented (Abell & Stokoe, 2001). Identities are recognised as being constructed and negotiated with and between others, and constructions are bound by the exercise of power (Edley, 2001). I was therefore looking for how participants constructed their identity in relation to the work, how they positioned both themselves and others through their discourse, and how and where power was operating in their talk (Appendix M).

3.9.5 Stage 5: Ideological Dilemmas

Ideological dilemmas refer to an acknowledgement that speakers are not ideologically coherent in their talk and that discourses often contain competing and inconsistent repertories, arguably mirroring contradictory societal discourses (Edley, 2001; Osman, 2021). Throughout the process of analysis, I paid attention to the emergence of competing and conflicting discourses in participants' talk.

3.9.6 Stages 6 & 7: Discursive Accomplishments & Practice

In stage 6 of the analysis (stage 5 for Locke & Budds, 2020) attention is paid to the action orientation of the talk – i.e. what is accomplished in the text through the use of various rhetorical strategies (Goodman, 2017). Throughout the analysis I also considered what was noticeably absent in the participants' talk.

The final stage of the process involved examining the analysis in its entirety and considering what this meant for the topic under investigation. By stepping back from the data within this stage, I was able to conduct a more macro level of analysis about where the data linked to wider ideologies and societal discourses.

3.10 Self-reflection and reflexivity

Although reflexivity is an important part of all qualitative research to support research trustworthiness (Finlay, 1998), it was arguably central to this project due to the inevitability that, as a White researcher, I will have somehow perpetuated and reproduced Whiteness. Throughout the research, I engaged in a continuous process of learning and unlearning through regular conversations with my research team, whom I actively sought out knowing that they would challenge my thinking and hold me accountable within the project; I also received regular input from the research consultation group at various time points, and an outline of their involvement can be seen in Appendix J. Finally, I have kept a reflexive journal throughout the research process, with my entries being placed throughout the various chapters of this thesis.

Throughout the analysis process I was interested in the way in which I continuously positioned myself as separate from the participants, as though had I of been a participant in my own research, I would have somehow transcended Whiteness and not been a product of White supremacy in what I said and how I said it. Coming back to the method of analysis time and time again helped to support some of my thinking in recognising that the analysis is not about moral judgement or what has or has not been said in the focus groups, but rather about recognising that we are constrained by wider discourses and seeing talk as located within that.

CHAPTER 4: RESULTS

4.1 Chapter Overview

This chapter presents the analysis and interpretations of the data collected from focus groups with nine WCPs actively engaged in anti-racism and racial equity work. The research seeks to explore how WCPs construct and negotiate their roles within anti-racism work, and examine how concepts of 'race', Whiteness and White identities are engaged with and constructed within this work.

The transcripts were analysed using CDP (Potter & Wetherell, 1987) and informed by principles from CRT (Bell, 1992; Crenshaw, 1988; Delgado, 1989), enabling a nuanced examination of the ways language, identity, and power intersect. The analysis identified six core interpretative repertoires and a number of sub-repertoires, presented in Table 9.

Table 9

Summary of repertoires

Core repertoire	Sub-repertoires
The Enlightened White Ally	Journey/Awakening White positionality Us and them
The Conflicted White Ally	White positionality Disembodiment and intellectualisation

	Complicity and harm
The Expert on the Pedestal	Risk of the Pedestal The Humble Expert
The Tools of Clinical Psychology	Talk is powerful The Nice White Anti-Racist
Change Takes Time	
The Burdened White Psychologist	

Although these repertoires are presented as distinct, speakers do not typically subscribe to one repertoire or the other, but move between them with varying effect, forming a number of ideological dilemmas and various subject positions in the talk, several of which are explored in depth throughout the chapter.

4.2 The Enlightened White Ally

Many of the speakers drew upon what has been termed here as a repertoire of 'The Enlightened White Ally' when constructing their identity in relation to their role. Through this repertoire, the White anti-racist identity was constructed as one that had gone on a 'journey' through a process of awakening and transformation, that held an awareness of racial privilege and the subsequent responsibility to engage with the work of anti-racism ('White Positionality') and constructed as ultimately being 'different' to other White people ('Us and them').

This repertoire functioned to justify and legitimise their role within anti-racism and racial equity work, enabling them to construct an identity of being credible and committed. Further, drawing on these repertoires enabled participants to distance

themselves from the identity of the oppressor, through a construction of being 'different'/enlightened.

4.2.1 A Journey

'A journey' sub-repertoire was drawn on by a number of speakers across the transcripts to describe a personal journey from a place of unawareness to a point of realisation or moral awakening regarding 'race' and racism. This repertoire served to position the speakers as having gone through a transformational process to a point of racial awareness. This is apparent in the extracts below, in which both Grace and Amy describe having gone through transformational journeys when describing their arrival into the work of anti-racism:

> *throughout university and kind of, in my early career, I was really:: an advocate for:: erm gender rights, particularly women's rights, a bit of a focus on sexuality, now I thought I was doing well in terms of equality and I can't remember at which point it was, but I had a real sudden awakening of the fact that I just never talked about race, erm and it was a real area, that I probably to some degree consciously as well avoided talking about, I think for such a long time I was so used to being white and the world operating around me, I never, I guess needed to talk about race, and then I think it was a few years before the DClin, I started thinking to myself like, oh:: shit, I'm doing all this equality work and I'm just not talking about race, so then I went through a bit of a process of... like slightly painful unlearning, like shame-based:: guilt, thinking about all the stuff I hadn't done, which it kind of steered me on the path...that I'm on now.* ***(Grace)***

probably when I was in the NHS…having a series of trainees on placement and…through conversations with them and just kind of feeling like, gosh…there's something here that we're… it's a bit of an elephant in the room that we're just… none of us are talking about, and I think, then I spoke to our like service lead at the time…because we had so many trainees on our placement, we were kind of doing some guided reading or discussion and stuff with them, and err and we thought actually we need to bring it into that space, so I think we all:: read the Reni Eddo-lodge book…and that was a bit like…oh shit like, Oh my goodness…and I did also feel ashamed of like, how I just sort of operating and sailing through without really thinking about that. ***(Amy)***

The use of emotionally-laden and expressive language ("shame" "guilt "pain" "oh my goodness" "oh shit") function as rhetorical strategies that position the speakers as emotionally invested and morally responsive. Both speakers in these extracts contrast their past selves (naïve and unaware) with their current more reflexive selves, functioning to further validate their identity as White anti-racists and their position within the work.

Fiona, similarly, constructs herself as previously not having been aware of "the intricacies" of being White when working with predominantly racially minoritised clients and communities:

I look back on maybe some of the…lack of thought about that in the in my past work, and feel quite embarrassed, ashamed about not acknowledging that, I don't know maybe not thinking about the intricacies of what that meant.

Absent within both Amy and Fiona's extracts are a naming of 'race' and Whiteness, instead using vague and euphemistic language *("not acknowledging that", "the intricacies of what that meant", "sailing through without really thinking about that", "there's something here that we're...none of us are talking about")*. This discursive move of not naming 'race' or Whiteness could serve to distance the speakers from implicating themselves within systems of racial power and therefore distances the self from accountability, whilst also maintaining Whiteness as the unspoken and invisible norm. Further to this, reference to a 'past' self serves as a rhetorical strategy to situate mistakes and lack of awareness of racial privilege within the past, with a current self being constructed as self-aware and having arrived at an anti-racist identity, therefore distancing speakers from the identity of oppressor.

This repertoire therefore constructs the White anti-racist identity as having gone on a transformational journey and through a process of becoming aware of Whiteness and racial privilege, with a construction of the current self as willing, active and self-aware. Speakers make use of various rhetorical strategies in their talk which serve multiple discursive functions including distancing, legitimising and moral positioning, thus constructing the identity of 'The Enlightened White Ally' in their talk.

4.2.2 White Positionality

This sub-repertoire draws on constructions of the White anti-racist identity as one that is aware of racial privilege, drawing on wider discourses within the profession of anti-racism being "the work of everybody" **(Grace).** This repertoire constructs WCPs as having a 'right' and responsibility to engage in anti-racism work, serving to further

legitimise their participation and contributions to the work of anti-racism, positioning them again as aware, active and willing White allies.

Sarah, for example, acknowledges that "*the responsibility (of tackling racism) can't sit with those psychologists that are from racialised backgrounds I'm really aware of that".* Grace echoes this sentiment, stating: *"I feel really strongly that the burden of responsibility shouldn't be on people who are experiencing marginalisation".* Participants position themselves as holding a responsibility to engage with the work of anti-racism due to their racial privilege, with speaker's use of the word "really" serving to further emphasise themselves as deeply aware and willing.

The extract below further illustrates this point by directly referencing how pressures are placed disproportionately on racially minoritised staff to engage with EDI/racial equity work. This framing not only constructs the speakers as engaged and supportive but also positions the speakers as burdened and exhausted by the work, thereby reinforcing the identity of the legitimate and good White ally, who persists in the work despite the cost to their wellbeing – a repertoire that will be explored further in a later section.

> *Often staff from minoritised backgrounds who end up volunteering, and also who are asked, but that this work doesn't finish for them at 5:00 when we log off, like it's their life, it's their going into the shops, it's their going to the park, being with their kids... but I get to turn off, and so I think there's then that pressure isn't there, of yeah, even when it feels tiring or a bit deflating, I think I have days where I just think why am I doing this It's not making any difference, that sense of but I can't slack, because it's not fair to put the pressure on the colleagues I work with that are kind of on the sharp end of some of this.* ***(Lucy)***

> *of course many of our non-white colleagues end up being involved in EDI work, presumably through their passion for those issues through their own lived experiences, but I also think you can't deny that there's a like, *well surely you'd be interested in that*, and I do feel a huge responsibility, I suppose not to say that I shouldn't feel that something like, I want to, even though I feel quite exhausted by having some of those conversations over and over again too, I feel like no you have to muster up a bit more energy, because it should not be my colleagues who maybe share some of those experiences, or you know have experienced racism themselves, who are left to pick up those conversations.* ***(Fiona)***

In these extracts, speakers position themselves as willing, aware, and self-sacrificing individuals who recognise the need for WCPs to step into anti-racism work and not leave the burden of responsibility to colleagues from racially minoritised backgrounds. This repertoire thus functions to construct and reinforce their identities as legitimate and good White allies.

4.2.3 Us and Them

Within this repertoire, participants constructed their own identity as morally distinct from and more enlightened than other WCPs. This was achieved through the creation of a rhetorical and ideological divide between “us” (the few self-aware, active, and willing White allies) and “them” (the passive, performative, or indifferent majority). The function of this binary was to construct speakers as the good, enlightened and legitimate White ally who is critically engaged, and therefore separate, from the wider category of Whiteness.

In the extracts below, Fiona constructs herself (and a few enlightened others) as awake to racial injustice, contrasting her awareness with the indifference she has experienced from others:

> *I think coming into university I think I just assumed that everyone would be like, oh reflecting on this and that, and I was like, oh this is awful, like no one talks about any:: of these things, and apart from like a little group of us.* ***(Fiona)***

> *I think that there are you know challenges in being one of the people who maybe, I'm not, I don't know, I don't want to like big myself up and say like *oh I'm one of the few people whose like actually* like , but that is the reality that most of our other colleagues are like, *oh yeah that sounds like a good idea* , but they're not necessarily actively attending to some of those dilemmas , It's kind of someone else's problem. (****Fiona)***

Within the extracts use of pronouns function as a rhetorical strategy to further establish separation from other White people/Whiteness ("I" and "us", "they"). Another rhetorical device that was noticeable within this repertoire was use of intonation and imitation (**oh yeah that sounds like a good idea*),* which served to almost mock or caricature others' performative actions. These discursive strategies are also evident in the extracts below:

> *I guess that's people that still see racism as like one off events, like they don't see it necessary as a systemic thing that we have to push against all the time and also that's to me very much saving face stuff, it's people caught in shame, that they are *God just get it away from me* I don't want to be associated with racism so I'm going to wear this bracelet and this safety pin, and put this black square up just so I can get it off of me and feel like a good person which to me is*

*shame is all just about, badness , irredeemable badness, and they just want to get it off of them. (**Abbie)***

*I mean I know the word performative has come up before, but I'm also thinking about like little acts of, anti-racism social justice black squares on an Instagram page, after erm, George Floyd and:: yeah, everyone doing that because they thought that was the right thing to do to spread awareness. (**Mark)***

These extracts and the various discursive strategies that are drawn on function to delegitimise others' efforts, whilst reaffirming the speaker's own legitimacy in the work. The talk also functions to create distance from identification with the oppressor group (the group that would 'get it wrong') and to position themselves as being 'different' and 'special'.

Similarly, others imply that other WCPs perform only surface-level engagement:

*it feels very, um, unfair to be like well, you know *oh I have this privilege oh I don't really have to think about it so I won't, or I will do just a bit of reflecting and then I,ll say, that's done*... it's not enough is it. (**Amy)***

*sometimes people know the right sentences to put together...people can introduce themselves with their social graces, *so I am, I don't know the white cis Welsh woman of ex heritage*, and it kind of stops there, it's like you can always trick yourself into thinking I've engaged. (**Lucy)***

Together, these rhetorical strategies construct a moral hierarchy within Whiteness, with speakers positioned at the top and constructed as thoughtful, active and critically aware, and others placed at the bottom and rendered complicit, passive and/or performative. Ultimately, this repertoire serves to protect the speaker from alignment

with the oppressor group and reinforces their identity as the enlightened and legitimate White ally.

4.3 The Conflicted White Ally

In contrast to the repertoire that legitimised the role of WCPs in anti-racism work, this repertoire problematised and delegitimised the role of WCPs. Participants grappled with the contradictions in being White and occupying leadership roles in racial equity work, highlighting tensions around power, credibility, embodiment and complicity. This repertoire therefore constructs an ideological dilemma in which speakers simultaneously express commitment to anti-racism work, whilst questioning their legitimacy and appropriateness of their position within it.

4.3.1 **White Positionality**

Participants often problematised their right to occupy space within anti-racism efforts, particularly due to a lack of lived experience of racism. Lucy, for example, voices the tension around legitimacy and representation:

> *I mean when I do a lot of the community work…is like do I have the right to…be in these spaces or am I…did I take a job away from someone that maybe was better *suited* to be doing this work because of their own lived experience, or what do I represent for some of the community groups*.

Fiona also alludes to the discomfort of *"having conversations about things"* she has *"not directly experienced*". She does not explicitly name what these 'things' refer to, leaving 'race' and racism unnamed but implied within this extract:

> *I didn't fall into this job, like I really I love what I do, but the sense of having conversations about things that I have not directly experienced, but trying to*

*advocate for people who maybe, don't have a seat at particular tables, obviously trying to make space for them there, but, I think that feels really uncomfortable at times. (**Fiona)***

Grace echoes this dilemma, acknowledging the contradiction of being White and leading on anti-racism work, whilst also asserting that responsibility for this work should not solely fall on those who experience marginalisation: *"how do I:: being white , lead on something , I don't have experience of , but actually I feel really strongly that the burden of responsibility shouldn't be people , who are experiencing , marginalisation ,"*.

Across these extracts, the conjunction "but" functions as an important rhetorical device in which speakers simultaneously legitimise and problematise themselves within the work. This discursive move between self-doubt and self-legitimation is central to the conflicted ally repertoire and reflects a broader ideological dilemma of how White anti-racists participate in anti-racism work without reinscribing Whiteness.

Abbie further articulates this tension below, highlighting that White people both struggle to know when to "speak up and when to shut up" in the work, whilst also justifying White people leading "some things" in anti-racism work:

*I think it's OK for white people to lead some things and to, support some things that you have to use your power, to make change, but it's just learning when to speak up and when to shut up is very difficult and I literally see the work just as tensions now. (**Abbie)***

4.3.2 Disembodiment and intellectualisation

Several speakers also drew on wider discourses around disembodied anti-racist practice and intellectualising as a form of avoidance for WCPs engaging in

conversations about 'race' as ways to problematise the role of WCPs in racial equity work: "*often when we're having these conversations it is quite an intellectual pursuit , It's…quite distanced it's not embodied…it's not lived , it's…theoretical, it's remote, it's over there. (**Mark)***

Abbie echoes this point, describing the tendency of White individuals to treat anti-racism work as an intellectual challenge or puzzle to be solved. Within this extract, she problematises White people's early engagement with anti-racism as cognitive, intellectualised and abstract:

> *I think often white people first come into it they're a little bit more this is really interesting, it's like let's think about this as a very intellectual, wicked problem to solve and sometimes forget that it's just so painful for people.*

She notably uses a third person reference "White people", rather than use any collective or individual pronouns (we/our/us or I), suggesting that she views herself outside of this problematised identity or as further along in her 'anti-racism' trajectory. This rhetorical move reveals how individuals may dis-identify with Whiteness even when they are located within it.

4.3.3 Complicity and the potential to cause harm

A smaller number of participants explicitly named their own complicity in racist structures and the potential to cause harm, further problematising the identity of the White anti-racist. Both Abbie and Fiona acknowledge the likelihood that they will *"be racist"/"get things very wrong"*, therefore recognising their own embeddedness in structures of racism:

I just say that this potentially is racist and I probably will be racist in some of my actions and some of the things that I do and say, even if I REALLY am trying hard to be very mindful and insightful and educate myself as much as possible I'll probably look back in 10 years and go mm the way that I did that was probably:: like I was making mistakes and saying things or doing or seizing power when I didn't even realise I try so hard to not platform myself and [...]shed power as much as possible but [...] it's impossible, to not operate somehow as a product of this culture. **(Abbie)**

I think I have a lot of potential to get things very wrong, but I hope that my stance, which is I'm very happy to be corrected, or to be challenged, or to accept that I've got things wrong... I hope that it definitely buys me some grace, not that I always maybe deserve it, but I hope that it shows I'm really trying, to be humble and to learn, and to kind of, address, and think about those issues. ***(Fiona)***

Both speakers employ a self-aware discourse of complicity and the potential to cause harm, whilst also trying to emphasise their good intentions and effort as ways to continue to legitimise themselves in the work (e.g., *"I REALLY am trying hard to be very mindful" and "I hope that it shows I'm really trying to be humble and to learn"*). The rhetorical strategies that are drawn on within these extracts appear to function to act as a discursive shield, buffering blame for racism and centring intention over impact.

Together, these repertoires expose the discursive tensions WCPs navigate in anti-racism work, with speakers simultaneously problematising their White identity within the work of anti-racism, whilst also legitimising their presence and justifying their continued participation.

4.4 The Expert on a Pedestal

This repertoire draws two interrelated constructions: the risk of the pedestal and the expert position. Participants positioned themselves as occupying elevated and exposed roles in anti-racism work, often placed there by others (and by themselves) through being "one of the few" **(Lucy)** with expertise. At the same time, they resisted or destabilised the authority associated with this position, invoking discomfort, anxiety and fear of scrutiny or failure. This repertoire reveals an ideological dilemma in which speakers simultaneously reject and reproduce expertise.

4.4.1 Risk of the pedestal

Participants drew on the metaphor of the pedestal to construct anti-racism work as 'risky', marked by a fear of exposure, of getting things wrong, being challenged, losing credibility and ultimately being found out to be racist. This repertoire positions speakers as vulnerable allies, highlighting the perceived 'risk' of falling from a metaphorical pedestal.

Lucy describes the role of anti-racism work as having a *"perfection or purity attached to it"* constructing a sense of vulnerability within the role. Her talk does not centre potential harm caused, rather centring the risk of being misinterpreted, indicating a concern with reputation and moral identity rather than impact:

> *expose feels like such a good word of, yeah it's the risk of a pedestal…there's a perfection or a purity attached to it, and then, probably this more than any other role I've had, it does come with that worry of, if I say the wrong thing, or if what I say is interpreted, in a particular light, and then I've lost all credibility to do this*

*role and then what happens…how do I carry on doing this role if I've lost that, credibility or…yeah in a way that I've never really worried about. (**Lucy)***

Rian similarly invokes the notion of being 'exposed' but frames his White male identity, not as a site of structural privilege, but as a source of vulnerability within his professional role. His hypothetical example involving a Black female colleague inverts power by positioning himself as at risk of being misread, thereby invoking a White victimhood discourse:

*as much as I might try to establish credibility, and good intention, that…can so easily fall into question very very quickly, and being in a supervisory role, an appraisal role, means that…the issue of, how anything I say will be heard, has been a real challenge…how difficult it is to speak from any other place than being a white male, umm with an institutional responsibility, speaking to a say a black female colleague, who feels you know marginalised in the organisation, and uncertain about whether they're welcome, that anything that I say that sounds…in some way, errr putting someone under pressure to, be different, or to do things differently, very quickly gets heard in those terms…can be extraordinarily challenging…I know that, for example if I write something in an e-mail, there is every chance that the trust lead for EDI might read this e-mail, in not a good way, because it's a way in which I'm being exposed for being, this someone who doesn't shouldn't be in the organisation. **(Rian)***

In these extracts, speakers centre the risk to self and employ rhetorical strategies of distancing and deflection (e.g., *"heard in those terms", "this someone"*), while omitting accountability for the power their Whiteness and positionality affords them.

Thus, the pedestal becomes a fragile and unwanted platform, one they feel placed upon by others, yet simultaneously work hard to maintain.

The need to 'get it right' was voiced by other participants in relation to partaking in the focus group itself. Within the below extracts, both participants reflect on their embodied experience within the focus group and feelings of discomfort which they make sense of in relation to *"wanting to say the right thing" (Mark)* and *"not offending" (Sarah):*

> *but it's interesting just thinking about what is it that makes this work more anxiety provoking? Because definitely for today, I was feeling more anxious than I would have was in a focus group about something else, so something about those different groups we or groups I belong to but also I think about the language and there is that stuff about getting it right and not offending that I think can come up as well.* (**Sarah)**
>
> *how do we as white people have this conversation…but also just recognising yeah how does it how does it stir me up? And then I guess I'm thinking about, on more of a cognitive level of those like white fragility ideas about wanting to say the right thing or erm, get it right be right.* (**Mark)**

Speakers construct the role of being a White anti-racist as one that involves 'risk' of moral downfall and a vulnerability, in which saying the right thing, being misunderstood and/or offending comes with significant implications (e.g. losing credibility or risk of losing a job). Throughout the extracts, discourses of anxiety, White fragility, moral vulnerability and a centring of the self are evident.

4.4.2 The Humble Expert

In order to manage the risk of the pedestal that is constructed within these roles, some participants drew on a repertoire of resisting the identity of the expert, despite being positioned as one in their professional roles. This introduces an ideological dilemma, where on the one hand, participants express discomfort being seen as an authority figure, and on the other hand, construct themselves (or are constructed) as experts within their role (evidenced also in the 'us and them' repertoire).

For example, Fiona distances herself from the 'expert' label placed upon her, yet also constructs herself as someone who models and shares best practice in the extract below:

> *and then you're looked to, as oh you've got a question about that, you need to go and talk to that person, I'm like well, I'm not the expert, I just spend some of my energy and time on this, I don't know, I find that I just have this kind of very awkward pedestal, of like, you want to model, you want to be able to share knowledge and good practice, but at the same time I'm a bit like, don't come to me, like you have a brain, like you know you can you can think about these issues just as much as I can*. **(*Fiona*)**

Her talk, therefore, simultaneously resists and reproduces the expert identity, contesting the *"awkward pedestal",* whilst also reinforcing her expert identity with references to *"modelling"* and sharing "knowledge and good practice".

Similarly, Evie articulates the tension of navigating expectations associated with the psychologist role, particularly the assumption that psychologists must *"have all the answers"*. Her discourse constructs the professional identity as burdened with authority and expertise, which she explicitly attempts to resist in the following extract:

> *I wonder if there is a bit of an expectation again…as a psychologist, you need to have all the answers and you need to come to the teaching and tell people how to do that, and I wonder, and I've seen that as well in…my role as well, It's something about the expectation to have the answer of what we need to do about, this area, for example, and then my stance is I I'm not supposed to have the answers and I don't have the answers and I will never get it all right.*

However, in an earlier extract, Evie recognises that despite her attempts to resist expertise, she sometimes reproduces this power and role in practice:

> *I go into these modes of OK then I will make the executive decision, and everyone will have to do it, and of course it shouldn't, and it should be part of a conversation, but it's so frustrating and so difficult and so difficult to know what's right and what's wrong and by whom.*

This extract builds on the pedestal metaphor that is referenced by others, with Evie suggesting that the 'pedestal' is not only imposed from the outside but also reproduced by speakers themselves under institutional pressure.

Thus, even when there are attempts to reject or dismantle the pedestal by participants, it is maintained and reproduced through moments when they step into positions of authority and the 'expert' position. The non-expert stance appears to be drawn on as a rhetorical device to signal humility and manage the moral risk of being seen as 'the expert', yet participants simultaneously continue to enact expertise through practices such as modelling, offering advice or making decisions. This reveals an ideological dilemma in which the expert identity is both resisted and reasserted. Importantly, within this, the emotional experience of risk and vulnerability of the role becomes centred within participants talk.

4.5 The Tools of Clinical Psychology

Across the transcripts, participants drew on a repertoire in which the tools of clinical psychology were constructed as central to the role of anti-racism work. Participants constructed the work as fundamentally relational, reflective, and grounded in tolerance. Further to this, talk was commonly referenced as a central modality in which participants engaged in anti-racism work, sometimes framed as a precursor to action, but also as a form of action in and of itself. This reflects a broader ideological dilemma between talking/reflecting and acting/doing.

Within this repertoire, speakers constructed themselves as compassionate "bridge-builders", emphasising the value of dialogue, listening, and the ability to hold difficult conversations without the need for immediate action. Anti-racism work was framed within this repertoire as being about White growth and development. This repertoire strongly drew on broader discursive norms of clinical psychology as a framework for anti-racism work.

4.5.1 Talk as Action

Across the dataset, participants constructed talk as a primary modality for engaging in anti-racism work. This talk was often framed both as a precondition for action, as well as a legitimate form of action in and of itself. Participants appeared to frequently navigate the ideological dilemma of talking/reflecting versus acting/doing.

In the extract below, Evie articulates this tension by drawing on broader discursive norms within clinical psychology:

> *I find myself a bit conflicted about the acting and the talking and I know in psychology we are extremely amazing at, erm talking a lot, and intellectualising and finding the actually putting things into action a bit more difficult, but I wonder*

whether I think there is something which I've been finding more and more valuable the ability to hold conversations, without necessarily the need to act, but it's a more a let's have a conversation and see where we are both coming from, and being able to tolerate:: different views from ours which I find that sadly I mean from hearing from a lot of courses and trainees I feel there is a bit of difficulty to be able to do that at the moment.

Evie draws on a repertoire that constructs CPs as skilled in *"talking"* and *"intellectualising"* and less proficient at implementing action. Rather than rejecting this trope, Evie reaffirms its professional value, suggesting that "holding conversations" without the pressure to act, is a legitimate and valuable form of anti-racism work. She places importance on being able to *"tolerate different views"*, by framing it as a current (but necessary) problem to deal with within the profession. Evie's talk, alongside others, serves a dual function, both legitimising talk as a form of anti-racist action, whilst also distancing herself from discourses that demand more immediate or concrete action.

In a further extract, Evie and Amy deepen this argument, constructing talk and reflection as a necessary pre-cursor to action, further reflecting the dilemma and framing a rushing to action as potentially harmful. This extract positions speakers as reflective and thoughtful, and frames urgency to act within anti-racism work as potentially dangerous

we do want the action but then we haven't done the foundation a lot of the times to be able to get to the action and which my fear is that if we…and I am pro-action, a lot of the times, but it causes action without thinking that can be more harmful. ***(Evie)***

> *if you're jumping too fast into action, it's actually a way of shutting down that discomfort, isn't it, of just tolerating the conversation, to begin with, to be able to hold that.* ***(Amy)***

Here, both speakers construct urgency within the work as risky or emotionally avoidant, thus constructing slowness and discomfort as necessary and ethical in the work. Their extracts both defend 'talk' to be an important and responsible form of action, therefore reframing slowness as thoughtfulness.

Similar to above extracts, Abbie navigates the tension of talking versus doing in the below extract, where she frames dialogue as a form of action within anti-racism work; with talk being constructed as impactful and transformational, however also emphasises the need for *"other actions"*.

> *I do believe in the power of dialogue, I think dialogue is an action, I think it's not the only action we need to have other actions but it is an action itself, and even this conversation is gonna, lead to some kind of butterfly tiny mini effect somewhere that might cause a big effect when I'm dead*.

Within this extract, Abbie uses future-orientated talk to construct change as delayed but inevitable, acknowledging talks as a slow but powerful form of action.

Within this repertoire, participants drew on discourses of reflection, tolerance and dialogue to legitimise talk as a meaningful form of anti-racism work, whilst also justifying an approach that takes time and patience. This repertoire enables speakers to navigate an ideological dilemma, in which they both endorse talk as a form of action, whilst also acknowledging the calls for more urgent and tangible action.

4.5.2 Nice White Anti-Racist

This repertoire constructs an identity of the 'Nice White anti-racist'; an identity rooted in compassion, tolerance, and relational diplomacy, where one of the primary goals of anti-racism work was constructed as supporting and promoting White personal growth and development. Within the below extracts, racism is framed as 'unintentional', with Lucy stating that racist beliefs are due to lack of exposure to *"people of different backgrounds"* or ignorance, and Grace referencing a lack of opportunity to *"think differently"*.

> *in most cases people just don't know what they don't know and haven't had space to like think differently or think it through…so for the majority, I think space education, learning awareness, actually does shift a lot of those attitudes, of course, there are some people that will continue to be, actively oppressive and racist, and that perhaps does need more of a zero-tolerance, kind of, you know, if you if you are going to treat people in this way then you can't work here, well you can't access this or whatever, but I think in the main, often it is about investing in people. (**Grace)***

By positioning racism (for the majority) as primarily due to a *"lack of awareness",* Grace constructs White people as unintentionally complicit and in need of space and support, rather than accountability. This serves to possibly soften the moral implications of racism, while positioning the speaker as a compassionate and generous facilitator of change.

Similarly, Lucy constructs anti-racism work as needing to create *"safe spaces for (White) people to have questions", "practice" and "mess up"*. Alongside this, there is

also the idea of *"calling people in, rather than calling people out"*, presenting herself as someone who prioritises psychological safety and gentle guidance:

> *because I think I try and approach some of this stuff with, a general assumption most people probably aren't intentionally, not nice, about this stuff, but that people have lots of different reasons why they're uncomfortable with it, or:: people haven't been exposed to, people of different backgrounds, or somebody just hold ignorant beliefs, but how you can't do anything if people aren't honest, but then how do you create safe spaces for people to have questions, or: try practising, conversations and messing up...but also then that balance of challenging when something isn't OK, but in a way, one of our assistants...told me the idea of like calling people in, rather than calling people out, so that idea of like I'm trying to help people grow and change, rather than that very I'm going to call you out for being wrong.* ***(Lucy)***

This extract reframes anti-racism as a developmental journey and suggests that White people need protection, time, and a gentle approach when engaging with and learning about racism, rather than an approach in which people are 'called out' and confronted. This talk re-centres White emotional needs, subtly displacing the urgency of confronting racism in favour of protecting the White identity.

In line with an idea of the White anti-racist identity being one that is understanding, gentle and non-confrontational, Abbie talks about the tension and internal conflict of knowing when 'bridge building versus bridge burning' is important. She constructs her identity as being one that is more aligned to bridge building (*"I'm a real bridge building character*" and *"I am always trying to straddle and create harmony"*) and therefore positions herself as holding the role of a mediator and someone who

prioritises and maintains relationships. Within the same extract Abbie also constructs an identity of being a resister and disruptor, causing an ideological dilemma in which she is grappling with the tension of whether to protect and maintain relationships or resist and rupture by not showing up. Despite deciding to be a 'bridge-burner' in this situation, Abbie expresses deep emotional conflict that comes alongside choosing rupture over harmony:

> *when is bridge building important, when is bridge burning important, like...that's a big tension for me in my trust at the moment, because I'm involved in a particular project they're not paying external agencies at the moment saying they've got no money, and I was just like not good enough, and I've just decided not to attend any of the meetings until they've pulled their finger out and sorted it out, and that's quite bridge burn-y to ME because I'm a real bridge building character, I always trying to straddle and create harmony, and I was like, no, like this is a point...where you have to just literally go NO and that's and I'm being non-compromising, they might not give a shit if I don't turn up at those meetings, but I'm saying I'm not comfortable being in this space anymore until, you're reimbursing people properly.*
>
> *(...)*
>
> *I don't know, It's hard... those things like keep me awake, the when do I sever a relationship, when do I actually do harm, to a relationship and when do I do everything that I can to keep the relationship intact?*

Sarah echoes this bridge-building identity, particularly in the context of navigating power dynamics with supervisors and funders. She expresses frustration at

institutional resistance, but ultimately justifies the importance of maintaining relationships:

> *there's something about building the bridges with supervisors I feel like that's the challenge of getting others on board with why this is important…but that's interesting about the bridge burning versus building…because it is frustrating at times some of the comments and it's just really frustrating of this is so important why don't other people see this, erm but I guess there's something about building those relationships with…the supervisor is really important for lots of reasons, and I'm trying to think…of a of a case where that wouldn't be, but there's something about the like making a stand isn't there? And as you said using our own, privilege and power to kind of say that's not OK…and to take up that space that other people might find hard to do, like on behalf of others…yeah, but that does feel different with managers and maybe, as you say kind of whether people are funding different things or not that does feel slightly different that kind of role.*

Within this extract, anti-racism becomes a careful balancing act, weighing up the cost of confrontation against professional consequences. In which resistance is negotiated depending on the costs at stake.

Grace also draws on the compassion discourse again in a later extract whereby she speaks of the importance of holding "compassion" for WCPs who have not yet had the "space", "resources" or "the access" to engage with anti-racism:

> *but then compassionately, I must remember that even when I was training , there wasn't that much in terms of anti-oppressive practise or anti, racism on the programme, and it was only starting to really get traction then, so lots of*

people who trained before or indeed work on programmes, probably haven't had the space, or the resources or the access, to develop that way of thinking and working, erm and arguably there's a responsibility for us all, to do that, it's not a secret around people's experiences, particularly in psychology, but I am, I do try and hold a compassionate position of that…a lot of people haven't had that, and that's part of that lorry turning in the road that actually.

Her talk links in with the 'Change Takes Time' repertoire, making reference to the absence of anti-racism knowledge in the profession being a result of institutional, more than individual failings. Yet again, the construction of an anti-racist identity needing to be one that holds compassion and understanding for White people is present, with this extract possibly serving to explain or justify WCPs' inaction. Noticeably absent is that whiteness is not named explicitly within the extract, instead, its effects are obscured through vague references to missing "space" or "resources".

Less prevalent across the data corpus was the construction of a White anti-racist identity that is willing to disrupt, resist, deconstruct, 'call out', and burn bridges. One participant in particular appeared to recognise this as a necessary part of the role; referencing the need to *"piss people off , like not even on purpose , but just you have to not care, that you're going to be really unpopular and you're going to lose… like, status, popularity, whatever"* (**Abbie**), highlighting the rarity and social cost of abandoning the 'Nice White Anti-Racist Identity'.

Overall, this repertoire constructs anti-racism as a relational, reflective, and educational process centred around White growth and emotional safety. By foregrounding compassion, tolerance and the need to "invest in people", participants position themselves as morally good actors, as bridge-builders, mediators, and gentle

facilitators of change. This allows them to maintain a 'Nice White anti-racist' identity whilst avoiding more disruptive and confrontational forms of resistance.

4.6 Change Takes Time

This repertoire constructs anti-racism work as inherently slow, long-term, and requiring time and patience. Across the data, participants drew on the use of metaphors to naturalise and normalise the slow pace of institutional change, positioning themselves as engaged and committed individuals operating within flawed and immovable systems. Rather than positioning slowness as problematic or unjust, these metaphors served to justify the lack of change in the profession and obscure individual and institutional accountability for addressing injustice.

In several extracts, participants used metaphors such as "*snail's pace", "sewing seeds"* and *"lorry turning in the road"* to construct anti-racism work as a slow-moving process. These metaphors serve to construct change as taking time and outside of individual control, rendering the lack of progress understandable and even inevitable. Lucy for example, expresses discomfort with the slowness of the work, yet ultimately frames this discomfort as something to be endured rather than resisted:

> *it's the thing I find quite difficult about this work I think is accepting the snail's pace is actually quite quick in some ways, but it's so slow…we often kind of joke about it in a little team I've got, of you know, maybe by the time I die or retire…we might be 10% down this journey…it's funny old area of work isn't it? Where you're sewing seeds that you probably might not ever get to see come to fruition, but…I think probably jars against most of us, who end up in this work, if there's a sense of injustice isn't there?*

Whilst Lucy acknowledges a *"sense of injustice"*, her talk positions her as accepting of the delay, thus the emotional dissonance is contained rather than mobilised into action. The metaphor of *"sewing seeds"* constructs anti-racism as an invisible and long-term investment, possibly functioning to absolve participants of the need to produce immediate or more disruptive change.

Similarly, Grace constructs institutional change through the metaphor of a *"big lorry turning round in the road"* to represent pace of change within the profession. This image conveys a sense of a cumbersome, slow-moving structure that requires multiple adjustments to move direction:

> *like a big lorry turning round in the road, so lorry turning round is going to have to do like...like 100, like little turns to turn round and that's kind of like...the change in the profession, like if you think about clinical psychology how long it's been, going in a certain way, it does need to do a bit of U turn in lots of ways...but I think what I'm noticing time and time again, both at interview and with trainees is that , there's an almost an expectation that the lorry has already turned round, and then the course is like trying to turn round, and then they get this real, real clashing and disconnect.*

Whiteness, although not explicitly named, is implied as the dominant force behind the systems resistance to change. The speaker positions herself as a mediator between trainees who are subtly constructed as being naïve or disillusioned with their *"expectation that the lorry has already turned around"* and the institution framed as trying their best. The speaker is arguably able to maintain a position of middleperson ('nice White psychologist') within this extract by appeasing trainees who expect more and buffering against institutional blame.

Mark introduces a more complex metaphor to illustrate how Whiteness functions as a structural force pulling individuals towards complicity. While the metaphor does offer a more systemically aware framing of racism and positions the speaker as holding more agency to enact change, it simultaneously centres the speaker's own fatigue and the emotional labour of resistance:

> *when you're in an airport and there's the elevator that's flat? Racism is the end point of those elevators, like you're being taken towards it, and some people are, standing, being carried towards it, not really thinking about it, some people are charging towards it, the race riots…some people have turned away from it but they're still being carried, and other people are actively walking in the opposite direction, and it's much harder to do that, and you're going to bump into people and you're going to piss some people off whilst you're doing it, but you're still being pulled in the opposite direction as well because the structure is the structure Whiteness is the thing that's pulling us towards it, but that can change at any moment as well, like there's sometimes where it's not sustainable for me to keep walking that way, against the tide because, there's too many people coming the other way and or something else has happened in my life that means that I just need to… stop, for a moment and like, recuperate.* ***(Mark)***

Within this extract, the use of metaphor functions to frame anti-racism work as a slow, ongoing struggle and not something that can be easily sustained or quickly resolved. It also serves to justify moments of withdrawal from anti-racism work as a necessary act of self-care, further adding to the 'change takes time' discourse due to the need to occasionally step away. In addition, the absence of any reference to

collective resistance or solidarity frames anti-racism as a solo-endeavour that is contingent on individual wellbeing.

Abbie offers a critical disruption to this repertoire by constructing time as not a neutral resource and referencing the material consequences and harm of White delay on those who are racially minoritised. She therefore critiques the racialised privilege embedded in the discourse of change takes time and patience:

> *its white people have the luxury of saying it takes time , it's easy for us to go *"it takes time neh nehhh"* but for many people their children have already gone through the whole of school, by then, like it's too late...But I do sometimes think, you know, do you know what, in 10 years, this conversation is probably going, to land, or resonate, or do something.*

Although her talk foregrounds harm for racially minoritised communities, the extract exposes an ideological dilemma with Abbie simultaneously criticising the pacing of the work, whilst also framing time as necessary for learning and change to take place. The dilemma reflects the difficulty of entirely rejecting the time discourse, and even when it is critically engaged with, it reveals how powerful and normalised the change takes time repertoire has become in the context of anti-racism work.

4.7 The Burdened White Psychologist

Finally, within this repertoire speakers discursively constructed the work of anti-racism as burdensome, emotionally taxing, and at times even oppressive. Participants drew on emotive and affective-laden language to describe their engagement in anti-racism work, constructing themselves as overwhelmed, fatigued or 'stuck'. This talk positioned speakers as people who, despite the lack of institutional backing and the

emotional toll, continues within the work, thereby constructing a morally legitimate White identity grounded in endurance and sacrifice.

Speakers often referenced the invisibility of anti-racism labour, constructing it as informal and as an "add-on" to their core clinical responsibilities. Mark, for example, draws on this discourse of invisible labour and institutional neglect, positioning himself as a self-sacrificing practitioner:

> *and this is not fun, this is not paid, work, as in it's not like as in, it's not instituted within the NHS, in my experience, it's not like (.2) that you if you can carve out a space to do some EDI anti-oppressive practise, great, but you have to do that and all of the other stuff, It will not be a part of your job plan.*

Here, Mark constructs himself as morally committed and willing to go beyond what is formally expected of him within his job role. The repeated emphasis on the work being *"not fun"* and *"not paid"* builds a discourse of self-sacrifice, positioning the speaker as someone who carries the weight of institutional inaction, thereby affirming his legitimacy within the work.

Abbie similarly draws on this repertoire, describing the work as emotionally and practically laboursome and highlights the challenges for those in anti-racism roles sustaining themselves. She frames the work as a systemic struggle in which half of the work is framed as 'explaining' and 'justifying' the purpose of the work to others:

> *it's trying:: to do this work in a way that protects you:: from burnout, is very difficult, and...it's emotional burnout, and it's practical burnout, because you are facing pushback a lot of the time:: and trying to *explain the work* and, justify it, and that takes up 50% of your energy, just, saying why:: are we doing this in the first place. (**Abbie)***

Fiona also constructs herself through a lens of emotional exhaustion, using emotive language such as *"exhausted"* and *"deflated"* to convey a sense of personal depletion in response to what she frames as unproductive and draining conversations:

> *sometimes in the in the main I find those conversations not very enjoyable or helpful at all, I feel, deflated, and exhausted and thinking I'm never going to do that again, which is not really helpful either.*

Here, her talk shifts the focus away from the outcomes or impact of the conversation (i.e. the work), and instead recentres her own emotional reaction and justification for withdrawal.

Across this repertoire, hopelessness and futility emerged as reoccurring patterns of talk. Abbie grapples with what she calls "*the feeling of it all being, like, not pointless, but,"* revealing the emotional toll of perceived stagnation, and expressing doubt about whether her efforts were making any difference:

> *I'm trying to protect myself against the feeling of it all being like, not pointless, but, I don't know what it's doing… you even feel like the world is going the opposite direction sometimes*.

Similarly, Grace reflects on national injustices and their demoralising effects on more localised efforts: "*I guess by things that I see nationally that feels so unfair , it makes the stuff I'm doing here feel like almost pointless"*.

In both examples, participants articulate an ideological dilemma in which they simultaneously express a commitment to anti-racism work, whilst also grappling with a sense of political futility and hopelessness. Their talk mirrors other extracts that construct the work of anti-racism as a lonely endeavour, unsupported by wider systems, and with no guaranteed impact.

Evie also voices frustration and disillusionment, portraying the work as chaotic, unclear and overwhelming:

> *sometimes doing this work, I find myself feeling very stuck, and feeling like I don't know, like hearing so many things and so many opinions…sometimes I feel like people give opinions without actually giving me concrete, so what do you want me to do?… I find it very frustrating and I find it very difficult*.

The repetition of "very" intensifies her emotional state, constructing the work as confusing and positioning herself as lost within competing discourses.

Within this repertoire speakers constructed anti-racism work as emotionally and practically exhausting and laboursome, with all participants making reference, in some form, to the work of anti-racism being unsupported by wider institutions. This construction, while critiquing institutional failures in relation to anti-racism work, serves to position participants as victims of this system, thus centring the White struggle for racial justice. The construction of the work within this repertoire enabled speakers to take up subject positions of being burdened and oppressed by the demands of the work, whilst simultaneously maintaining the position of the 'good and legitimate White ally' for continuing the work despite how difficult and hard the work is constructed to be.

CHAPTER 5: DISCUSSION

5.1 Chapter Overview

Within this chapter, I will provide a summary of the key findings of the project in line with the aims of the research. I will then go on to explore the common patterns of talk that have emerged from this data, showing how this analysis clarifies, supports, and expands the literature. I will then consider the strengths and limitations of the research and consider the implications of the project for the profession and ideas for the direction of future research. Finally, some personal reflections about the study will be shared.

5.2 Resituating the Research

This research was underpinned by a CRT and CWS framework. Applied within research, these frameworks encourage the researcher to consider various tenets within their application. Centrally, 'race', racism and Whiteness must be the underlying focus in the analysis (Matias & Boucher, 2023). The research was underpinned by an understanding that racism and White supremacy are endemic problems in society and was not preoccupied with proving that they exist within profession of clinical psychology but rather explored how these constructs operate within the context of anti-racism work (Matias, 2023).

5.3 Research Aims

Returning to the research aims, this study set out to explore how WCPs discuss their roles within anti-racism work, and how 'race', Whiteness and white identities are engaged with and constructed through their talk. More specifically, I aimed to examine how participants' talk functions to maintain/uphold or disrupt/challenge structures of Whiteness.

5.4 Summary of Findings

The analysis revealed six core repertoires and a number of sub-repertoires and associated ideological dilemmas in relation to the research question and aims: *1) Enlightened White Ally*, 2) Conflicted *White Ally, 3) Expert on a Pedestal, 4) Tools of Clinical Psychology, 5) Change Takes Time and 6) Burdened White Psychologist*. Through these repertoires, participants engaged in complex discursive work to construct and negotiate their roles and White identities within anti-racism work. Across the repertoires, Whiteness is made both visible and invisible in participants' talk; at times made visible through explicit references to power, privilege and positionality, but also frequently rendered invisible through ambiguous references to 'race', racism and Whiteness, discourses of neutrality, and a centring of the self. This research highlights how anti-racism work among WCPs is characterised by discursive strategies that both disrupt and uphold Whiteness. While there are moments of critical reflection and resistance in their talk, these are often entangled with discourses obscuring power, re-centring the White subject, or framing anti-racism in ways that maintain the status quo.

A discursive approach foregrounds inconsistency and contradiction as analytically meaningful (Potter & Wetherell, 1987). As such, the tensions, ambiguities and shifts within participants' talk are not treated as errors, but rather as key sites for understanding how power, identity and accountability are negotiated. Further to this, discourse analysis does not seek to uncover 'truths', but rather examines the social, institutional and ideological conditions that make particular accounts possible (Hollway, 1989).

All six repertoires offered distinct yet interconnected ways of managing the construction of the White identity within anti-racism work, each of which will be considered in the context of wider literature below.

5.4.1 The Enlightened White Ally

The Enlightened White ally repertoire constructs a relatively stable and resolved anti-racist identity, one that had gone on a 'journey' from racial naivety to critical awareness. Participants recognised their racial privilege and responsibility to engage meaningfully with anti-racism. The positioning of the self as aware of White privilege and subsequent location within racist systems is strongly articulated in much White anti-racism literature (Case, 2012; Eichstedt, 2001). In the current study, participants frequently contrasted themselves with 'other' less reflexive White colleagues, thereby elevating the self as 'enlightened'. Such talk drew on wider discourses of racial privilege and responsibility (e.g., McIntosh, 1989), as well as more recent professional discourses (highlighted in the introduction) increasingly demanding visible commitment to anti-racism (BPS, 2024). These identity constructions also resonate with White Racial Identity models (Helms, 1995; Ryde, 2010), and conceptual tools like the Ladder of Empowerment (Okun, 2006), where participants constructed themselves as having 'arrived' at a more racially conscious and mature stage of racial identity development. These findings differ from research presented in the SLR, where participants demonstrated more varied and less resolved levels of racial consciousness (Ahsan, 2020; Cottrell-Boyce, 2022; O'Driscoll, 2013; Ong, 2021; Osman, 2021; Wallis & Singh, 2013; Williams, 2022; Williams, 2023).

5.4.2 The Conflicted White Ally

In contrast, 'The Conflicted White Ally' repertoire was marked by expressions of doubt, hesitation and, for some, a fear of doing harm. Within this repertoire, identity was constructed as uncertain and fraught, with participants explicitly questioning the legitimacy of their involvement as White people in racial equity work. This mirrors wider literature suggesting White anti-racists often carry insecurities about their Whiteness into their activism (Case, 2012; Eichstedt, 2001; Warren, 2010). Although participants expressed discomfort and fear of harm, they simultaneously drew on alternative repertoires reaffirming their ethical sensitivity and willingness to engage, thereby re-legitimising themselves despite the expressed ambivalence. These patterns reveal the discursive labour involved in managing one's moral positioning within the racialised terrain of anti-racism work.

Taken together, these repertoires highlight the discursive negotiation and management of White identity in anti-racism work. The contrasting patterns of talk reveal an ideological dilemma in which participants mobilise competing repertoires to both legitimise and problematise their presence. This supports Edley and Wetherell's (2001) argument that identity is not fixed but constructed through shifting and often contradictory discourses.

Central to these repertoires was the legitimisation of the White identity, achieved through the use of a range of discursive strategies including pronoun shifts, reported speech, emotionally laden talk, pre-emptive humility, and vague and euphemistic language about 'race', racism and Whiteness. These rhetorical strategies functioned to demonstrate critical awareness, manage accountability and create distance from the identity of the oppressor/Whiteness. Existing literature on White

'race talk' supports these findings, suggesting such discursive devices often serve to construct a morally evolved self while avoiding direct accountability (Benwell, 2012; Cotrell- Boyce, 2022; DiAngelo, 2011, 2018; Eichstedt, 2001; Holt, 2000; Osman, 2021; Wallis & Singh, 2013).

Of note, these strategies also functioned to construct a moral hierarchy within Whiteness. Wilson (2025) suggests the desire to distinguish oneself from other White people is "fuelled by White saviourism and White superiority complexes", in which White people view their own efforts within anti-racism as both exceptional and essential (p.4). This internal scapegoating of other White people mirrors what Lensmire (2017) identifies as the function of Whiteness, to define itself by rejecting or disavowing the racial 'Other', or, in this case, the less 'enlightened' White peer. Eichstedt (2001) suggests that to engage meaningfully in anti-racism, White people must fully grasp their identity as oppressors and demonstrate a willingness to claim themselves as racist. With hooks (1989) similarly echoing this point:

> *"When liberal whites fail to understand how they can and/or do embody white supremacist values and beliefs even though they may not embrace racism as prejudice or domination (especially domination that involves coercive control), they cannot recognize the ways their actions support and affirm the very structure of racist domination and oppression that they wish to see eradicated. "*

These statements collectively highlight the importance of taking full ownership of one's complicity in White supremacy. This is a critical point within the current study, where participants' talk revealed an intention to demonstrate accountability through acknowledging racial privilege and responsibility. However, this was often accompanied by rhetorical strategies distancing the speaker from the category of

Whiteness itself, thereby avoiding full ownership of their capacity to enact harm. Notably while some participants did refer to the possibility of causing harm, such reflections were typically brief and far less developed than accounts of personal doubt or moral discomfort.

Critically, these legitimising moves, whether through a construction of the enlightened self or expressions of uncertainty, can obscure the systemic embeddedness of Whiteness, which we enact and uphold individually, interpersonally and institutionally. By foregrounding the speaker's moral identity, the emotional labour of being White in anti-racism becomes the focus, rather than the dismantling of Whiteness (Ahmed, 2004). In this way, even critical reflexivity reproduces the centrality of Whiteness. The centring of the self-aligns with broader individualist discourses of growth, transformation, and self-improvement that are common in White anti-racist talk (Applebaum, 2010).

5.4.3 The Expert on the Pedestal

'The Expert on the Pedestal' repertoire adds a further layer to the construction of White identity in this study, revealing how participants navigate the tension between occupying leadership roles in anti-racism work and the risks they associate with this positioning. This repertoire draws on two interrelated constructions: the risk of the pedestal and the performance of expertise, negotiating what Ahmed (2004) might describe as the tension between being seen to 'know' and the desire to be seen as ethically committed.

The metaphor of the pedestal positioned anti-racism work as inherently risky, marked by fears of exposure, losing credibility, and ultimately being 'found out' as racist. This aligns with well-established concerns in the literature around White

people's anxieties when engaging in 'race talk' and expressed fear around getting it 'wrong', causing offence or being accused of being racist as highlighted in the findings from the SLR and wider literature (e.g., Ahsan, 2020; Kiselica,1999; O'Driscoll, 2013; Ong, 2021; Osman, 2021; Sue, 2015; Williams, 2022). Consistent with Van Dijk's (1992) observation: "accusations of racism…tend to be seen as more serious social infractions than racist attitudes or actions themselves" (p.90), participants appeared more concerned with how they were perceived than the impact of potential harm, highlighting the ways in which Whiteness remains recentred.

Unlike research in the SLR where such fears often led to silence, or withdrawal ('Centring White feelings'), participants here managed the tension by drawing on an alternative repertoire, *'The Humble Expert'*, to remain present in the work. Discursively rejecting the 'expert' positioning functioned to signal humility and act as a pre-emptive buffer against potential critique. This strategy echoes Applebaum's (2010) construction of White 'goodness' as a moral positioning in which declarations of humility or self-awareness (as evident in '*The Enlightened Ally'*) can function as discursive tools to secure one's place as a 'good' White person in the work. This also aligns with Sullivan's (2006) critique that White identity is often maintained through affective management, where expressions of discomfort, self-doubt or vulnerability serve to protect the White self. Thus, rather than disrupting Whiteness, these affective performances can recentre Whiteness and enable White individuals to remain morally intact while avoiding more substantive forms of accountability. Therefore, the '*Expert on a Pedestal'* repertoire, and its negotiation through '*The Humble Expert*,' reveals how White identities are actively constructed through tensions of authority, risk, and moral positioning.

5.4.4 The Tools of Clinical Psychology

Within '*The Tools of Clinical Psychology'* repertoire, participants drew on the discourse of clinical psychology as a framework for engaging in anti-racism work. These findings align with some of the research findings within the SLR, which highlighted how CPs constructed themselves as well-equipped to address issues of 'race', racism and Whiteness due to their professional identity and related skills (Ahsan, 2020; Cotrell-Boyce, 2022; Osman, 2021; Wallis & Singh, 2013; Williams, 2022).

Participants constructed the role as primarily relational, with talk positioned as both a precursor to action and a legitimate form of action in itself. This reflects wider discussions in the literature regarding the limitations of talk in anti-racism work (e.g., Rogers & Mosley, 2008), where White participants often frame anti-racist action as occurring through speaking, thinking, and relating– activities which remain in the cognitive rather than material realm. This was similarly evident in the current study, where White growth and development were constructed as central to the role, with participants invoking values such as compassion, tolerance, and relational diplomacy, and therefore centring the psychological comfort of White people when engaging with issues of 'race', racism and Whiteness. These findings reflect previous suggestions that White feelings are often centred and protected at the expense of structural or material change (Ahmed, 2004; Oluo, 2019). Further to this, some have noted caution that an overemphasis on White racial identity development in anti-racism work risks recentring Whiteness and underemphasising the transformation of racialised systems (Spanierman & Smith, 2017; Thompson, 2003).

With the construction of the White anti-racist identity as one that is compassionate, tolerant and understanding, participants positioned themselves

primarily as bridge-builders (a metaphor used within one focus group), with some appearing to grapple with the tension between preserving relationships and taking more disruptive action. Acts of 'resistance' (i.e. not showing up to meetings) were carefully weighed against professional or interpersonal costs, with confrontation framed as risky or uncomfortable. This repertoire reflects wider critiques of White allyship, which suggest anti-racism is often framed through relational and emotional discourses in ways that protect the White self (Applebaum, 2010; Matias, 2016; Leonardo & Porter, 2010). This was similarly found in research within the SLR, which highlighted how conflict is often avoided due to the perceived implications of social sacrifice or loss of power (Osman, 2021; Williams, 2022), and other studies making reference to the therapeutic concept of 'neutrality', which was arguably evident within this repertoire (O'Driscoll, 2013; Wallis & Singh, 2013). As Alemohammed (2025) suggests, "neutrality is not harmless, it is a protective shield for the powerful"- and within this study, arguably acts as a protective shield to protect the status quo.

Other researchers, such as Case (2012), Helms (1990) and DiAngelo (2018), have likewise noted that White allies often remain silent or inactive to preserve social relationships and avoid upsetting the institutions they are embedded within. Nixon (2019) highlights that social change frequently involves conflict because it necessitates a shift to the status quo, which those in control will seek to maintain. Thus, the identity construction of the White anti-racist as one that maintains harmony and treads carefully serves to maintain the very structures participants claim to challenge.

Finally, within this repertoire, participants also grappled with the tension between talking, reflection and action, drawing on wider anti-racist discourses critiquing reflection without action (i.e. praxis) (Freire, 1974). To manage this tension,

participants employed a rhetorical strategy of naming their awareness of the need for action, thus signalling critical consciousness, while simultaneously legitimising talk as a valid form of action. These findings build on previous research in the SLR (e.g., Ong, 2021; Williams, 2022), where similar tensions were identified in relation to the focus on reflection/talking versus action. Beyond clinical contexts, Gorski and Erakat (2019) found that White racial justice activists often remained at the level of conversation, framing dialogue itself as an anti-racist action - a pattern contributing to burnout amongst racially minoritised activists and peers. This suggests the dilemma is not unique to clinical psychology, but rather reflects how the profession is situated within, and shaped by, broader White supremacist structures. Thus, the tools participants draw upon are not only tools of clinical psychology, but also tools of Whiteness in which the work and role are framed in ways that can obscure complicity and inhibit structural change (Alemohammed, 2025; Applebaum, 2010; Leonardo & Porter, 2010).

5.4.5 Change Takes Time

The following two repertoires constructed anti-racism work as a gradual, slow process that is emotionally demanding and burdensome, requiring time and patience from participants.

Within the ‘Change takes Time’ repertoire, participants drew on use of metaphor to emphasise the slow-moving pace of the work. The use of metaphor has been extensively researched in the literature, with a recognition it is a “socially powerful but also dangerous ‘trope’ or figure of speech that requires special attention and critique” (Musolff, 2012, p. 302). Metaphors have long been recognised as powerful tools shaping our understanding of the world, functioning as persuasive strategies to further the aims of the speaker (Sharaf Eldin et al., 2024). In the current study,

metaphor was used to frame change in anti-racism as slow and largely outside of individual control, ultimately justifying the lack of progress within the profession and absolving participants from the need to enact more immediate or disruptive action. This aligns with Joshi's (2023) concept of 'White time', suggesting that time is not a neutral resource and is "a tool by which those holding power govern others" (p.1638).

Participants constructed change as something inevitable in the future, making use of metaphors that constructed the work as a long-term investment in which participants would not see change within their lifetimes. These findings resonate with research by Coleman and Yantis (2023), who, in a comparative discourse analysis of White and 'BIPOC' (Black, Indigenous and People of Colour) therapists' anti-racist talk, found White participants frequently drew on future-oriented and hopeful language when discussing racism. These framings were understood to function to postpone responsibility and manage White discomfort, allowing participants to avoid confronting the immediacy of racial injustice. Coleman and Yantis (2024) describe this as a form of "soft avoidance", where expressions of optimism serve to recentre White emotional needs while obscuring the urgency of structural change. This argument is again furthered by Joshi's (2023) concept of 'White time' in which he states that the use of linear chronology discourses, which rely on an assumption that society is continually progressing towards 'recovery' from a racist 'past', serves to discourage structural changes by relying on time, rather than more immediate and disruptive changes to policy. The findings of the current study therefore highlight how temporal and affective discourses can function to maintain the very structures they claim to challenge.

5.4.6 The Burdened Psychologist

Finally, '*The Burdened Psychologist*' repertoire constructed anti-racism work as emotionally exhausting, unsupported and overwhelming. Participants drew on affect-laden and emotive talk to describe their efforts as draining, lonely, and often futile. While this positioning allowed speakers to critique the institutional absence of anti-racism support, it simultaneously enabled a moral identity built on perseverance and sacrifice.

Participants' accounts of emotional burden were often embedded within a critique of institutional inaction, echoing findings from the SLR, in which participants cited under-resourcing, service pressures and institutional failures as barriers to sustained anti-racist engagement (O'Driscoll, 2013; Ong, 2021; Williams, 2022). While studies in the SLR suggested such pressures served as justification for inaction, the current study indicates a slightly different discursive move. Within the current study, participants used these constraints not to deflect responsibility, but to emphasise their own emotional investment and to position themselves as committed despite the emotional toll of the work. This construction strengthened their legitimacy while reinforcing the self-image of the 'good' White ally.

Importantly, within this repertoire and evident in other repertoires, anti-racism work was predominantly constructed as a personal journey and a solo endeavour. This mirrors what Spanierman and Smith (2017) term the 'individualisation of allyship', which detracts from collective and systemic change. This construction of the burdened self, while allowing critique of institutions, also facilitated a discursive move centring the White speaker within racial justice work. These findings raise important questions about how anti-racism work is enacted within clinical psychology. The construction of

anti-racism work as a burden, while highlighting genuine institutional failings (which have also been evidenced in previous research examining EDI and racial justice work in clinical psychology (Ahsan, 2022; Kotecha, 2023; Peart, 2023), serves to simultaneously reinforce Whiteness by shifting the focus away from transformation and towards endurance. Crucially, Peart's (2023) research explicitly examined racially minoritised trainers' experiences in these roles, revealing the myriad of structural and emotional challenges they faced within White institutions. Together, these findings suggest that to meaningfully advance anti-racism, radical transformation is needed to develop collective, resourced, and systemic responses to create structural conditions supporting anti-racist praxis in ways that do not recentre Whiteness.

5.5 Strengths and Limitations of the Research

This research offers a unique contribution to an area that has been underexplored within clinical psychology, particularly when examined through the combined lenses of CDP, CRT and CWS. By interrogating the discursive construction of White identities, the study advances understanding of how Whiteness and power are sustained and legitimised in professional talk, thus extending existing literature and opening up new avenues for critical reflection and inquiry into what continues to be recognised as an "intrinsically complex, ambiguous and contentious topic" (Williams, 2023, p.111).

A key strength lies in the methodological approach. Adopting CDP allowed for a detailed examination of how language functions, not merely to describe, but to actively produce or resist systems of power. The focus on the functions, contradictions, and consequences of talk revealed legitimising strategies, rhetorical manoeuvrers, and identity work that might be overlooked in approaches that treat language like a

'window' into reality (e.g., IPA, thematic analysis). This research, therefore, extends previous research in highlighting how discursive practices (e.g., claims of humility or the centring of doubt) can preserve the centrality of Whiteness within anti-racism work.

Although my own whiteness brings certain limitations to the project (as documented within self-reflexivity statements), it also appeared to function as a methodological strength. My second supervisor had commented on the openness and unguarded nature of participants' talk, reflecting that in her 35 years working in anti-racism, she had never directly heard White people say some of what was said in the focus groups. This suggests that my positionality, combined with the White-only group composition, may have enabled participants to offer more undefended accounts of their thinking and practice than might occur in spaces with racialised people. In this way, the research was able to capture nuanced and at times contradictory constructions of White anti-racist identity that are rarely voiced in professional contexts.

Finally, the project's collaborative engagement with consultants throughout the research process enhanced its credibility, resonance, and reflexive depth. Their perspectives informed my analytic decisions, challenged interpretative assumptions, offered new insights that I had not considered, and ultimately supported an ongoing alignment with the lens of CRT.

Whilst this research makes several important contributions, several limitations should be acknowledged. One critique of discourse analysis is that it can be at risk of 'over-interpreting' data, as the analyst inevitably makes selective decisions about what to highlight and what to 'leave behind', shaped by the research aims and their own political commitments (Widdowson, 1995). Recognising this, I took several steps to

address these risks and to enhance the credibility and transparency of the research process. Throughout this project, I immersed myself in literature on CDP and discourse analysis more broadly, building a strong theoretical and methodological grounding that informed each analytic decision. I sought supervision from a supervisor with expertise in CDP, whose own doctoral research used this methodology, ensuring that my interpretations were well-informed and subject to regular critical questioning. I also participated in specialist research workshops with two other doctoral students and a workshop lead with expertise in discourse analysis, creating structured opportunities to engage with methodological dilemmas, refine analytic techniques, and develop confidence in applying CDP principles to my data.

Beyond formal supervision, I formed a peer-supported analytic group with the other doctoral students, meeting frequently to read and discuss discourse analytic texts and to work through emerging questions collaboratively. These conversations exposed my interpretations to alternative perspectives, helping to identify potential assumptions or biases in the reading of my data. In addition, I co-analysed different segments of text alongside my three supervisors across multiple meetings and presented excerpts to my consultation team. These collaborative analyses provided opportunities for my interpretations to be directly challenged, refined, or reframed, thereby reducing the risk of over-interpretation and strengthening the reflexivity and rigour of my analytic choices.

Methodologically, the use of focus groups likely introduced dynamics that shaped both what was voiced and what remained unsaid. Social desirability pressures may have encouraged the performance of morally accountable identities, and whilst the data were rich in contradictions and tensions, some accounts may have been

softened or omitted. In two focus groups, certain participants remained largely silent, making it difficult to gauge their positions; as a result, the talk of more vocal members featured more prominently in the analysis. This challenge was compounded by my role as an observer rather than a facilitator, which limited opportunities to invite quieter participants to contribute.

5.6 Implications of the study

Calls for systemic change within the profession, particularly from racially minoritised individuals and collectives, have been longstanding and persistent (Adetimole et al., 2005; McNeil, 2010; Odusanya et al., 2017; Patel & Keval, 2018; Patel, 2021; Patel, 2023; Paulraj, 2016; Rajan & Shaw, 2008; Shah, 2010; Stoddart-Isaac, 2023). These voices have consistently outlined the structural, institutional and epistemological shifts needed to advance anti-racism in clinical psychology. Yet despite these urgent and ongoing demands, meaningful transformation remains limited. This study offers insight into the 'why', revealing how Whiteness continues to be actively reproduced even within spaces and roles dedicated to anti-racism. While this research does not claim to provide definitive solutions (nor do I believe I should, given what this research has highlighted), I suggest some of the implications that have stemmed from the research findings.

This research highlights the need to critically examine and move beyond the assumed adequacy of clinical psychology's existing tools for anti-racism work. These tools are rooted in White supremacy and function to protect Whiteness, maintain institutional norms, normalise slow progress and displace structural responsibility – providing a veneer of racial equity whilst shielding Whiteness from scrutiny (Ahmed, 2004; Leonardo & Porter, 2010; Patel, 2023). The findings from this research support

critiques that clinical psychology's epistemological foundations are ill-equipped for racial justice and point to the need to draw instead on community-based, activist, decolonial, and intersectional frameworks that centre action, accountability and systemic change (Alemohammed, 2025; Patel, 2023).

A key part of this shift, particularly in recognising how racially minoritised people's work is often co-opted, colonised and sanitised, is the development of clear accountability frameworks and processes for White people in anti-racism work across training and services. Such frameworks should involve collective and relational responsibility to racially minoritised colleagues, service-users and communities. This echoes findings from Stoddart-Isaac's (2023) research, in which participants emphasised the urgency in recruiting racially minoritised people into roles with genuine decision-making power as an essential for disrupting Whiteness. In practice, this means shifting leadership responsibilities away from White individuals and towards a model in which White people are 'willing to be followers instead of leaders' (Tomkin, 2020).

Accountability frameworks must extend into DClinPsy training, examining how anti-racist praxis is meaningfully embedded within courses. This research highlighted how participants often drew on the framework of clinical psychology to guide their anti-racism work, using 'tools' that are fundamentally rooted in White supremacy and ultimately leave Whiteness unchallenged. Thus, this research aligns with ongoing calls to decolonise the profession (Pillay, 2017; Stoddart-Isaac, 2023; Wood, 2016) and to look beyond the profession's existing frameworks and boundaries towards approaches (such as activism) that could offer alternative 'tools' capable of disrupting a system baked in "racism, oppression, and colonial legacies" (Alemohammed, 2025).

Consistent with Stoddart Isaac's (2023) recommendations, these accountability frameworks must also include clearly defined strategies for achieving and measuring progress, with transparent evaluation processes and decisions about what 'counts' as progress determined by those whom racism directly impacts. Racial justice demands urgency, not reliance on 'hope' that change will 'eventually' occur. As Audre Lorde (1984) powerfully cautioned, *"the master's tools will never dismantle the master's house"*, reminding us that dismantling Whiteness requires tools and frameworks developed outside the master's house.

Beyond how Whiteness is discursively upheld within these roles, these findings hold important implications for the broader system and for policy. They highlight how such positions can enable institutions to signal a commitment to racial justice while avoiding substantial structural change or deeper scrutiny. This research adds to existing evidence that these roles are routinely underfunded, under-resourced and limited in influence, further constraining their capacity to effect meaningful change (Ahsan, 2022; Kotecha, 2023; Peart, 2023). The research adds to calls for anti-racism work in the profession (across training and within services) to be provided with adequate infrastructure, resourcing, capacity and sustained funding, if the profession is to have any chance to achieve genuine and much needed transformation.

These findings also have implications for future research. There is a clear need for continued interrogation of how power operates within clinical psychology, including the ways in which Whiteness shapes and constrains anti-racism work. This study provides just one account of these dynamics, and further work examining how Whiteness is operating within the context of anti-racism would help further extend and deepen the current research findings. As courses and services continue to signal

their commitment to anti-racism, there is an increasing need for research to evaluate and examine these efforts.

In light of this study's limitations, particularly the possibility that group dynamics influenced what was and was not said, future research could adopt alternative methodological approaches, such as individual interviews or multiple focus groups, to help address potential barriers of the focus group format.

Finally, a key area for future research inquiry is what meaningful, measurable accountability could look like in anti-racism work within clinical psychology. Further research could explore the development and imagining of collective, relational accountability frameworks within the profession.

5.7 Dissemination

In line with CRT's commitment to social action and transformation, a key priority of this research project is purposeful dissemination. Following submission, I will meet with the research consultation team and supervisors to collaboratively identify clear dissemination routes, with an aim to share the findings and implications across training institutions, NHS and broader clinical settings. The findings will also be prepared for publication to a research journal, contributing to the growing body of literature on Whiteness and anti-racism in clinical psychology. Additionally, the research will be presented at the UH Life and Medical Sciences Research Conference in September 2025.

5.8 Self-reflexivity

In keeping with the epistemological grounding of this research and commitments to CRT, I dedicate the following section to considering my own positioning and subsequent complicity through consideration of the use of language

within and throughout this research process. This is not an add-on to the analysis, but rather an extension of it, in recognising that I, too, am a White (soon to be) clinical psychologist navigating anti-racism, embedded in the very systems, discourses, and ideologies this thesis critiques.

I aim not to use this space to distance myself from Whiteness, but to interrogate the ways Whiteness has shaped my own motivations, interpretative choices, and emotional investments across the research. This includes revisiting my positionality statement, questioning the subtle moves I have made to legitimise myself, and acknowledging the tensions between critique and complicity in my own story. What follows is not intended as a confessional, but rather as an attempt to make visible the workings of Whiteness, including in research that seeks to challenge and deconstruct it.

I approached this study with an intention to seek insight, rather than to confirm any prior beliefs. However, I also hold in mind what emerged through the research process, and what has been widely discussed in the literature, about how White saviourism and White superiority complexes can subtly motivate a desire to distinguish oneself from 'other' white people (DiAngelo, 2011; Wilson, 2025). I therefore question whether some of my motivations, even if not consciously held, were shaped by a desire to elevate myself above other White people, creating a discursive divide between myself (as the reflexive and 'enlightened' researcher) and the participants (as those who sometimes 'got it wrong).

Looking back at the positionality statement I wrote at the beginning of this project (section 1.2.1), I now recognise how deeply entangled this process has been

with the repertoires I later analysed in the data. For example, I see strong echoes of the 'Enlightened White Ally' repertoire in my own narrative below:

> *Looking back now, I very much question how much I held a critical understanding of my White identity and what this meant for the people I was working with or hoping to do research 'alongside'. I have come to ashamedly acknowledge how unquestioning I was in the spaces I inhabited and now understand this as the operation of Whiteness in assuming all spaces were/are for me.*

This mirrors the way that participants positioned their own past selves as unaware or naïve, while casting their current selves as transformed or critically awakened. Similarly, in the following statement, I see evidence of the 'White Positionality' sub-repertoire, which perhaps serves to signal my own critical awareness and legitimise my voice and authority within the conversation of anti-racism:

> *My journey into this project has involved a critical reflection on my positionality and identity as a White, middle-class, cis-gendered, able-bodied female, who was born in South Africa to an Afrikaner father and Norwegian/British mother - my history and the history of my family is rooted in apartheid and colonialism.*

As mentioned, much of this thesis could be located within the 'Us/Them' repertoire, particularly through the discursive tension between critique and complicity. It was also noticeable in analysis discussions with supervisors and consultants that I would use language to separate myself from participants, positioning myself as somehow different, with an underlying assumption that I would not uphold or perpetuate Whiteness or say similar things in my talk. Further to this, there are moments where I undoubtedly moved into the 'Nice White Anti-racist', 'Expert on the

Pedestal' and 'The Burdened Psychologist' repertoires and positionings, in which I experienced a lot of anguish over the entire project, spending a significant amount of time immersed in anti-racist literature, attending Examining Whiteness groups, ensuring I used the 'right' language within the project and had read all the classic anti-racist texts. Although I acknowledge this was driven by a genuine desire to 'do my own work', I also question how much of it was shaped by White fragility and a fear of not being seen to be legitimate enough to speak on anti-racism. Further to this, I recognise that my entire project centres on the idea of examining and deconstructing Whiteness, with many of the clinical implications speaking to the idea of investing in and supporting White growth and development. Whilst this might be a necessary part of dismantling Whiteness, it also risks recentring White needs, White progress and White emotion and thus risks suggesting that anti-racism should become another domain for White self-work.

These reflections are not to discredit the work, but to remain conscious of the ways in which Whiteness can quietly shape even anti-racist intentions, practices, and research agendas – something I hope has been made visible throughout this project. I also recognise that this thesis grants me symbolic capital in a system that often rewards and celebrates White people for engaging in anti-racism, even when that engagement remains superficial or self -serving (Ahmed, 2012). In this context, it is important to acknowledge that anti-racism is not a personal achievement or fixed destination, but an active, collective practice aimed at confronting and dismantling racism and Whiteness as both a racial category and system of power and privilege (Bonnett, 2005; Patel, 2021). It demands sustained, intentional and transformative labour. My hope is that this thesis contributes to a broader conversation, not from a

position of moral authority, but as one voice among many, amplifying calls for urgent and sustained change within the profession.

Finally, in looking back at my positionality statement, I now recognise how much of my early understanding of Whiteness was shaped by a desire to 'know enough', to do the work in the 'right' way, and to distinguish myself from 'other' White people. At the time, I believed that identifying as reflexive, self-aware, and politically engaged was enough to position myself responsibly within anti-racism work. However, through the research process, and particularly in analysing the repertoires, I became increasingly aware of how easily Whiteness reasserts itself, even through seemingly critical, emotionally invested, or well-intentioned discourse. My current position holds far less certainty. I understand Whiteness as something that works through me, not outside of me, and see the task not as distancing myself from it, but as remaining in ongoing, accountable scrutiny of how I am both positioned by and complicit in its reproduction- including through this very thesis.

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APPENDICES

Appendix A: SLR Initial Search Attempt

Database	Keywords	Date	Outcome	Comments
SCOPUS	TITLE-ABS-KEY("white clinical psychologist*" OR "white counselling psychologist*" OR "white psychologist*" OR "white therapist*" OR "white psychotherapist*" OR "white family and systemic psychotherapist*" OR "white family psychotherapist*" OR "white systemic psychotherapist*" OR "white forensic psychologist*" OR "white health psychologist*" OR "white educational psychologist*" OR "clinical psycholog*" OR "counselling psycholog*" OR "family therap*" OR "systemic therap*" OR "forensic psychology*" OR "educational psycholog*" OR "health psycholog*") AND TITLE-ABS-KEY(understand* OR experienc* OR engag* OR address* OR examin* OR construct*) AND TITLE(whiteness OR "White supremacy" OR racism OR "White privilege" OR "White fragility" OR "racial privilege" OR "racial discrimination" OR "racial prejudice" OR race OR "race talk" OR "colour blind*"))	21/02/2025	157	Searched in Article, title, abstract, keywords English language only
PubMed	("white psychologist*"[Title/Abstract] OR "white therapist*"[Title/Abstract] OR (("white"[MeSH Terms] OR "white"[All Fields] OR "white people"[MeSH Terms] OR ("white"[All Fields] AND "people"[All Fields]) OR "white people"[All Fields] OR "whites"[All Fields]) AND ("educability"[All Fields] OR "educable"[All Fields] OR "educates"[All Fields] OR "education"[MeSH Subheading] OR "education"[All Fields] OR "educational status"[MeSH Terms] OR ("educational"[All Fields] AND "status"[All Fields]) OR "educational status"[All Fields] OR "education"[MeSH Terms] OR "education s"[All Fields] OR "educational"[All Fields] OR "educative"[All Fields] OR "educator"[All Fields] OR "educator s"[All Fields] OR "educators"[All Fields] OR "teaching"[MeSH Terms] OR "teaching"[All Fields] OR "educate"[All Fields] OR "educated"[All Fields] OR "educating"[All Fields] OR "educations"[All Fields]) AND "psychologist*"[All Fields]) OR "clinical psycholog*"[Title/Abstract] OR "counselling psycholog*"[Title/Abstract] OR "family therap*"[Title/Abstract] OR "systemic therap*"[Title/Abstract] OR "forensic psychology*"[Title/Abstract] OR "educational psycholog*"[Title/Abstract] OR "health psycholog*"[Title/Abstract]) AND ("understand*"[Title/Abstract] OR "experienc*"[Title/Abstract] OR "engag*"[Title/Abstract] OR "address*"[Title/Abstract] OR "examin*"[Title/Abstract]) AND ("whiteness"[Title] OR "White supremacy"[Title] OR "racism"[Title] OR "White privilege"[Title] OR "White fragility"[Title] OR "racial privilege"[Title] OR "racial discrimination"[Title] OR "racial prejudice"[Title] OR "race"[Title] OR "race talk"[Title] OR "colour blind*"[Title])	21/02/2025	51	Searched in Title/ Abstract
Open Dissertations	AB (“white clinical psychologist*” OR “white counselling psychologist*” OR “white psychologist*” OR “white therapist*” OR “clinical psycholog*” OR “counselling psycholog*” OR “white forensic psychologist*” OR “white health psychologist*” OR “white educational psychologist*” OR “forensic psychology*” OR “educational psycholog*” OR “health psycholog*”) AND AB (Understand* OR experienc* OR engag* OR address* OR examin*) AND TI (whiteness OR "White supremacy" OR racism OR "White privilege" OR "White fragility" OR "racial privilege" OR "racial discrimination" OR "racial prejudice" OR race OR “race talk” or “colour blind*”)	21/02/2025	13	Through EBSCO database
MEDLINE	AB (“white clinical psychologist*” OR “white counselling psychologist*” OR “white psychologist*” OR “white therapist*” OR “white psychotherapist*” OR “white family and systemic psychotherapist*” OR “white family psychotherapist*” OR “white systemic psychotherapist*” OR “white forensic psychologist*” OR “white health psychologist*” OR “white educational psychologist*”OR “clinical psycholog*” OR “counselling psycholog*” OR “family therap*” OR “systemic therap*” OR “forensic psychology*” OR “educational psycholog*” OR “health psycholog*”) AND AB (Understand* OR experienc* OR engag* OR address* OR examin*) AND TI (whiteness OR "White supremacy" OR racism OR "White privilege" OR "White fragility" OR "racial privilege" OR "racial discrimination" OR "racial prejudice" OR race OR “race talk” or “colour blind*”)	21/02/2025	42	Through EBSCO database Searched in Title and Abstract and combined searches

Appendix B: Focus Group Script and Prompts

J: Hi everyone. Firstly, just to say welcome and a huge thank you for agreeing to take part in my research- I am really grateful to you all for putting yourselves forward. Just to remind you all that this study is investigating how white clinical psychologists' talk about their roles working within anti-racism/racial-equity work. I will just take this opportunity to please ask that we all respect and preserve the confidentiality of others within this space, and that whatever is discussed here remains confidential. We have got until [INSERT TIME], but the interview may naturally come to close before then. Please do whatever you need to do in the space, if you need to take breaks etc. As mentioned in the participant information sheets, I will be recording the session, I will let you know before I turn the recording on. I will then paste the question in the chat and turn my camera off and mute myself. I will leave it open to you all to manage time. Once you feel that the conversation has come to an end… if you could please just let me know.

I have one question to ask with a few additional questions prompts to think about for the discussion today.

What I am hoping to hear about is your experience of engaging in the work of anti-racism. In your conversation, you might want to consider what brought you to this study, what brought you to the work of anti-racism, your experience of the work, any challenges within your roles/ the work.

Does anyone have any questions before we start? I am going to press record once you are ready. Is everyone okay with that?

Appendix C: Involvement of Consultants

Consultation	Dates	What was discussed?
Meeting 1: 2 attendees	23/09/2024	Getting to know one another Introducing the project Accountability Developing the interview schedule
Meeting 2: 1 attendee	02/10/2024	Getting to know one another Introducing the project Accountability Developing the interview schedule
Meeting 3: 2 attendees	03/12/2024	Presenting data from 2 focus groups Initial thoughts on data analysis
Meeting 4: 1 attendee	20/01/2024	Data analysis meeting
Meeting 4: 1 attendee	31/03/2025	Data analysis meeting
Meeting 5: 1 attendee	28/04/2025	Data analysis meeting
Meeting 6: 1 attendee	24/06/2025	Presenting analysis – feedback on theme names Discussion around implications
Meeting 7: 1 attendee	30/06/2025	Presenting analysis – feedback on theme names Discussion around implications

Appendix D: Study Advert

Are you a white Clinical Psychologist who cares about social and racial justice?

Do you work in a role that involves addressing issues of racial equity/ anti-racism (could be as part of a broader role e.g., EDI)

IF **YES**, THIS DOCTORAL RESEARCH COULD BE OF INTEREST

WHAT WILL TAKING PART INVOLVE?

IT WILL INVOLVE COMING TOGETHER WITH 3-4 OTHER CLINICAL PSYCHOLOGISTS TO HAVE A CONVERSATION ABOUT YOUR ROLES WITHIN SOCIAL JUSTICE WORK. THE MEETING WILL TAKE PLACE ONLINE VIA ZOOM OR TEAMS.

WHO CAN TAKE PART?
YOU CAN TAKE PART IF:

- YOU ARE A QUALIFIED CLINICAL PSYCHOLOGIST
- YOU IDENTIFY AS BEING WHITE
- YOU ARE CURRENTLY ENGAGED IN A ROLE THAT INVOLVES ANTI-RACISM WORK (COULD BE AS BROADER EDI ROLE)
- YOU CURRENTLY WORK IN THE UK

MY NAME IS JESSICA, I AM A SECOND YEAR, WHITE TRAINEE CLINICAL PSYCHOLOGIST AT THE UNIVERSITY OF HERTFORDSHIRE.
IF YOU ARE INTERESTED TO TAKE PART, OR WOULD LIKE SOME MORE INFORMATION, PLEASE CONTACT:

JE22AAY@HERTS.AC.UK

PRINCIPLE SUPERVISOR: DR RACHEL MCKAIL

This study has been granted ethical approval from the university of hertfordshire health, science, engineering and technology ethics committee with delegated authority.
UH Protocol number: LMS/PGR/UH/05786

University of Hertfordshire UH Ethics Committee

Appendix E: Participant Information Sheet

Participant Information Sheet

How do white clinical psychologists discuss their roles in EDI/ anti-racism/ social justice work

Contact person: Jessica Esterhuizen
Email: je22aay@herts.ac.uk

You are being invited to participate in a research study. Before you decide whether to take part or not, please carefully read through the following information which outlines what your participation would involve. If anything is unclear or you have any questions, please do not hesitate to contact me on the above email address.

Who am I?
My name is Jessica Esterhuizen and I am a doctoral student at the University of Hertfordshire studying for a professional doctorate in clinical psychology. As part of my studies, I am conducting the research that you are being invited to take part in.

Why am I doing this research?
Over the years, there have been some efforts made within the field of clinical psychology to acknowledge and address racism. However, racism and Whiteness continue to permeate the profession, and there is an acknowledgement of the need to do more. There is a lack of research exploring the roles of white clinical psychologists engaging in work that addresses racial equity/ anti-racism and I am therefore interested to hear from these individuals about how they make sense of and talk about their roles/ work.

What is the purpose of the research?
I am conducting a piece of research that hopes to explore the way in which white clinical psychologists, who identify as engaging in EDI roles/ anti-racism/ social justice work discuss and make sense of their roles.

This research has been approved by the University of Hertfordshire Health, Science, Engineering and Technology ethics committee with delegated authority. The UH protocol number is LMS/PGR/UH/05786.

Why have I been invited to take part?
In order to address the aims of the research, I am inviting Clinical Psychologists, who identify as white and who are engaging with EDI/anti-racism/ social justice work to take part in the research. If you self-identify as white, currently work within the UK and work in a role that encompasses anti-racism work, in relation to the field of clinical psychology, you are eligible to take part in the study (this role could be as a broader EDI role).

Please note that it is entirely up to you whether you take part or not, participation is voluntary.

UH Protocol number: LMS/PGR/UH/05786

University of Hertfordshire UH Ethics Committee

What will I be asked to do if I agree to take part?
If you agree to take part in this study, you will be invited to have an initial call with the researcher to answer any questions and to confirm eligibility for the study. If you decide to take part, you will then be invited to attend up to two focus groups, in which 3-4 other white clinical psychologists, will come together with the interviewer over Microsoft Teams or Zoom. The first focus groups will last approximately 1 - 1.5 hours and it will be video and audio recorded for the purpose of transcription. The first interview will be loosely guided by a semi-structured interview schedule, which has been put together by the research team in co-production with a consultation/ expert group. You can choose to end the interview at any time without needing to provide a reason. The second focus group will be an opportunity for the researcher to present themes back to participants and have a discussion around the findings - this conversation will also be video and audio recorded.

Can I change my mind?
Yes you are free to withdraw from the research without explanation. Once the interview has taken place, you are able to request to withdraw your data from being used in the analysis up to 3 weeks after the interview has taken place.

Are there any disadvantages to taking part in this research?
It is not anticipated that you will be negatively affected by taking part in this research, however there is an acknowledgement from previous research that conversations around race and racism for white people can be anxiety provoking and challenging.

Confidentiality and keeping you safe:
How will the information I provide be kept secure and confidential?

- All of the information that you provide will be treated respectfully and confidentially.
- The focus group conversation will be audio and video recorded and the recording will be typed up word for word afterwards (in the event that I use a professional transcription service, they will be bound by a non-disclosure agreement in order to ensure confidentiality and data protection).
- All your personal details, consent forms and video/ audio recordings from the interview will be stored electronically on an encrypted, two factor authentication drive which only I will have access to. Video and audio recordings will be deleted following completion of my degree.
- By virtue of participating in a focus group, your anonymity will be compromised within the group setting. However, all participants will be asked to sign a consent form agreeing to keep the identify of all participants confidential and to not disclose any information that is shared within the group.
- You will be given a pseudonym to keep your identity anonymous and confidential.
- Identifiable information will be stored separately to your pseudonymised transcript.
- You will not be identified in any write-up of the research. This will be achieved by removing identifiable details and using pseudonyms.
- Following the completion of the thesis, pseudonymised transcripts will be stored for a maximum of five years for dissemination purposes, after which it will be destroyed.

University of Hertfordshire UH Ethics Committee

As part of the research process, the researcher will be taking part in specialist workshops to support the project development. During these workshops, the researcher is invited to bring anonymised data to share with others to support learning in the data analysis process. All information shared will be anonymised.

Please note that confidentiality will only ever be broken in the event that a disclosure is made that leads the researcher to believe that you or anyone else is at risk of harm. **This information will then be shared with relevant individuals/ parties.**

What will happen to the results of the research?
The research will be written up as a thesis and submitted for assessment. The thesis will be publicly available on University of Hertfordshire's online Repository. Findings will also be disseminated to a range of audiences (e.g., academics, clinicians, public, etc.) through journal articles, conference presentations, talks and blogs. In all material produced, your identity will remain anonymous, in that, it will not be possible to identify you personally and personally identifying information will be removed and your name will be replaced by a pseudonym.

Who can I contact if I have any questions/concerns?
If you would like further information about my research or have any questions or concerns, please do not hesitate to contact me:

Jessica Esterhuizen - Email: Je22aay@herts.ac.uk

If you have any questions or concerns about how the research has been conducted, please contact my research supervisor Dr Rachel McKail. Email: r.mckail@herts.ac.uk

or

Please write to the UH Secretary and Registrar at the following address:

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

Thank you for taking the time to read this information sheet

University of Hertfordshire UH Ethics Committee

Appendix F: Participant Consent Form

University of Hertfordshire UH Ethics Committee

Consent to Participate in a Research Study

How Do White Clinical Psychologists Discuss Their Roles in EDI/ Anti-racism/ Social Justice Work

Contact person: Jessica Esterhuizen | Email: je22aay@herts.ac.uk

UNIVERSITY OF HERTFORDSHIRE ETHICS COMMITTEE FOR STUDIES INVOLVING THE USE OF HUMAN PARTICIPANTS 'ETHICS COMMITTEE' FORM EC3

I have the read the information sheet relating to the above research study. The nature and purposes of the research have been explained to me.	
I have had the opportunity to discuss the details and ask questions about this information with the researcher to which I have received satisfactory answers.	
I understand what is being proposed and the procedures I will be involved in have been explained to me.	
In giving my consent to participate in this study, I understand that my interview will be audio and video recorded and I have been informed of how/whether this recording will be transmitted/displayed.	
I understand that my involvement in this study, and data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying data.	
The information sheet has explained to me what will happen to my data once the research study has been completed and I understand this.	
I understand that I have three weeks from the interview date to withdraw my data from this study.	
I understand that I have the right to withdraw from the study at any time without disadvantage to myself and without being obliged to give any reason.	

This study has been granted ethical approval from the university of Hertfordshire health, science, engineering and technology ethics committee with delegated authority. UH Protocol number: LMS/PGR/UH/05786

University of Hertfordshire UH Ethics Committee

By participating in a focus group, I am agreeing to ensure that I keep the identity of all participants of the focus group confidential. Furthermore, I am agreeing not to disclose any information that is shared during the focus group.	
I have been given information about any potential risks that this study entails, and I have been told about the aftercare and support that will be offered to me in the event of feeling distressed as a result of this interview.	
I now freely and fully consent to participate in the study, which has been fully explained to me.	
I would like to be contacted with the results of the research. Below are my contact details to which a summary of the results should be sent:	

Signature of participant:

Name of participant:

Contact information:

Date:

Signature of (principal) investigator:

Name of (principal) investigator:

Date:

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 UH Secretary and Registrar at the following address:

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

This study has been granted ethical approval from the university of Hertfordshire health, science, engineering and technology ethics committee with delegated authority. UH Protocol number: LMS/PGR/UH/05786

Appendix G: Participant Demographic Form

Demographic Questionnaire

How do white clinical psychologists discuss their roles in EDI/ anti-racism/ social justice work

Gender
How would you describe your gender?

_____

Ethnicity/ Nationality

_____

Years Post Qualification

_____

Appendix H: Ethical Approval Notification

University of Hertfordshire UH

HEALTH, SCIENCE, ENGINEERING AND TECHNOLOGY ECDA

ETHICS APPROVAL NOTIFICATION

TO	Jessica Esterhuizen
CC	Dr Rachel McKail
FROM	Dr Rosemary Godbold, Health, Science, Engineering and Technology ECDA Vice-Chair
DATE	09/09/2024

Protocol number:	**LMS/PGR/UH/05786**
Title of study:	Examining Whiteness within social justice/ anti-racism work: a critical discourse analysis

Appendix I: Participant debrief sheet

Participant Debrief Sheet

How do white clinical psychologists discuss their roles in EDI/ anti-racism/ social justice work

Contact person: Jessica Esterhuizen
Email: je22aay@herts.ac.uk

Thank you so much for participating in this research, your contribution is greatly appreciated. This study is interested in exploring the way that white clinical psychologists discuss their roles within anti-racism work and to examine how race, whiteness and white identities are engaged with and constructed through this work.

It is well known that Whiteness and racism continue to permeate clinical psychology in the UK and the literature highlights the need for us (as white people) to continuously reflect on our positionality and identities in the work that we do. It is my hope that this project offered an opportunity and space to do some of that thinking, which in turn will hopefully lead to meaningful and impactful change in dismantling Whiteness within the profession.

I would like to remind you that:

- All information discussed in the interview today will be anonymised and there will be no way of connecting your interview material to you. You will be given a pseudonym when the interview is written up and all identifying information (e.g., names of people, services etc.) will be removed.
- The results will be reported in a doctoral thesis and might be published in psychological journals and presented at conferences.
- The results will be shared with different organisations that might benefit from the outcomes (e.g., British Psychological Society)
- You can withdraw your interview data up to three weeks after the interview has taken place. After this, the data will have been analysed and it will not be possible to remove your data from the analysis.

University of Hertfordshire UH Ethics Committee

Appendix J: Form detailing risks of project for ethics

UNIVERSITY OF HERTFORDSHIRE
ETHICS COMMITTEE FOR STUDIES INVOLVING THE USE OF HUMAN PARTICIPANTS ('ETHICS COMMITTEE')

FORM EC5 – HARMS, HAZARDS AND RISKS:
ASSESSMENT AND MITIGATION

Name of applicant: Jessica Esterhuizen Date of assessment: 17/07/2024

Title of Study/Activity: Examining Whiteness - A Critical Discursive Analysis of the way in which White Clinical Psychologists talk about Whiteness in social justice/ anti-racism work

If you are required to complete and submit a School-specific risk assessment (in accordance with the requirements of the originating School), it is acceptable to make a cross-reference from that document to form EC5 in order not to have to repeat the information twice. The purpose of Form EC5 is to consider how a participant might react to the activities in the study and to indicate how you will manage such reactions; the Form also addresses the safety of the investigator and how any risks to the investigator will be managed.

Activity Description					
1. IDENTIFY RISKS/HAZARDS	2. WHO COULD BE HARMED & HOW?		3. EVALUATE THE RISKS		4. ACTION NEEDED
Activities/tasks and associated hazards Describe the activities involved in the study and any associated risks/ hazards, both physical and emotional, resulting from the study. Consider the risks to participants/the research team/members of the public. In respect of any equipment to be used read manufacturer's instructions and note any hazards that arise, particularly from incorrect use.)	Who is at risk? e.g. participants, investigators, other people at the location, the owner / manager / workers at the location etc.	How could they be harmed? What sort of accident could occur, eg trips, slips, falls, lifting equipment etc, handling chemical substances, use of invasive procedures and correct disposal of equipment etc. What type of injury is likely? Could the study cause discomfort or distress of a mental or emotional character to participants and/or investigators? What is the nature of any discomfort or distress of a mental or emotional character that you might anticipate?	Are there any precautions currently in place to prevent the hazard or minimise adverse effects? Are there standard operating procedures or rules for the premises? Have there been agreed levels of supervision of the study? Will trained medical staff be present? Etc/	Are there any risks that are not controlled or not adequately controlled?	List the action that needs to be taken to reduce/manage the risks arising from your study for example, provision of medical support/aftercare, precautions to be put in place to avoid or minimise risk or adverse effects NOTE: medical or other aftercare and/or support **must** be made available for participants and/or investigator(s) who require it.
Use of computers and other display screens for the focus group interviews.	Participants and Research team.	The interviews will take place online and participants and researchers may therefore be	It will be important for the researcher to take frequent breaks. Participants will also be offered a break to move about/ stretch their	No	Participants to be offered comfort breaks during the interview and to be informed that they are able to move about during the interview should they need to.

		subject to lengthy periods of time in front of a screen. Researcher will spend long periods of time in front a screen over the length of the project. If participants do not have access to an appropriate computer/ display screen – which could cause harm through physical injury.	legs etc., - the focus group discussion is only expected to last up to 1 hour maximum, which should limit prolonged periods of being in front on the display screen. Participants are likely to be familiar with platforms such as Zoom/ MS Teams, due to the nature of their jobs.		Researcher to be mindful of spending lengthy amounts of time in front of the screen and take frequent comfort breaks away from the screen.
Psychological distress (to interviewees)	Participants (Clinical Psychologists working in anti-racism/ racial justice work)	Possible psychological distress from participation due to the nature of the research topic.	Participants will receive a participant information sheet and consent form ahead of participating in the study to allow them to make an informed decision about taking part. These documents will include information about the nature of the study, which we hope will allow participants to decide whether this study feels manageable to take part in. Should someone become distressed during the interview, they will be offered the opportunity to take a break or, if necessary, end the interview. The researcher will use her skills and experience of supporting people in distress gained as a trainee clinical psychologist to offer the necessary psychological support, should it be needed.	How the participant might respond within the interview.	When thinking about possible distress from participation, this will be thought about in the questions that will be asked. Although not intended to cause distress, some questions may be challenging for some participants and not others, and each individual's experience will be subjective, and therefore risk of distress is possible. Consent forms and debrief sheets will be given to everyone with a list of services they can access for further support, should they need to. Before the interview takes place, the researcher will inform all focus group attendees that they are able to take a break if necessary or leave the interview entirely.

					The researcher will use her skills as a trainee clinical psychologist to monitor for signs of distress within the focus group and provide the opportunity for participants to pause or leave if necessary.
Stress	Research Team	Completion of data collection and project - possible stress to research team. Stress and demands from clinical work and responsibilities. Small clinical service and team.	A clear plan regarding timeframes and support for the project has been agreed via a supervisory agreement.	No	Researcher to continue to communicate with supervisors and research team to flag any difficulties that arise over the course of the project.
Focus group session	Participants and researcher	Due to the set-up of focus groups, we are unable to maintain full participant anonymity and there is a risk that participants who are present in the group may be familiar with one another.		No	Participants will be informed of this risk prior to participating in the study. All participants will sign a form agreeing to keep the identities of all focus group members, as well as any information discussed in the interview confidential. Participants will be unable to take part if they do not agree to this.
Data storage & note taking – preventing loss of data.	Participants and researcher	Use of laptop could cause harm if the data is lost / saved incorrectly and therefore ends up being viewed by someone it shouldn't.	All documents on the OneDrive will be encrypted.	No	Data will be backed up on laptop and on the UH OneDrive. The laptop is a personal computer which is password protected. Any documents with identifiable information will be password protected.

					No use of handwritten notes.

Signed by applicant: 	Dated: 17/07/2024

Appendix K: Conventions for analysis (Jefferson, 1985)

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

Appendix L: Initial phases of analysis

	Riaan	that point of course the profession not being that diverse (.) um:: and but (.) but actually some of my experience in this work (.) has actually (.) because of my being involved in [redacted] work (.)	Legitimising self in black spaces –

2

		that I have (0.2) at the moment (.) frequently find myself in spaces where I am in a very significant minority (0.2) of people engaging from independent community consultation (.) service user and carer groups (.) that are black and and mixed black um:: groups	stating self as minority Proximity to the oppressed
	Lucy	Hmm	
	Riaan	and so (0.2) so much of the challenge (.) has been to try to (.) identify to (.) to find a way in which to be to have some sort of credibility in those spaces	Credibility as white anti-racist/ self as credible
	Lucy	Mm hmm	
	Riaan	Umm:: (.) and I've been really helped by one of the the sort of working principles of the (0.3) [redacted] for short (.) work [redacted] (.) That [redacted] work has been that that we encourage each other to bring our whole selves to work (.) and that has meant being able to talk about some of my (.) experience growing up in [redacted] (.) some of my then professional experience in [redacted] (.) and the research that I've engaged in (.) and and what (.) how I've continued (.) that in the UK (.) and in that way tried to establish some sort of allyship presence (.) in that (.) in that work (.) and but it it it also though that doesn't always work and there aren't always spaces that allow that to happen and so there's sometimes are ongoing questions about the legitimacy of your contribution in those spaces (.) [redacted] and so there's a particular need at times (.) to even if there's not an obvious opportunity (.) to actually make an opportunity (.) to speak into that space (.) in order to try to create the possibility of some sort of psychological safety (.) with people from minoritised groups who may be uncertain	White positionality Self-as ally Credibility as white anti-racist/ self-defining vs other defining Idea of needing to create safety to be seen as legitimate- why do racially minoritised people need to trust White people?
	Lucy	Mm hmm (.) I love to that you use that principle of like bring your whole self because I quote that a lot in my work	
	Riaan	Oh good.	
	Lucy	Because I think (.) I think one of the interesting things that's come up (.) I mean when I do a lot of the community work I do (.) is like do I have the right to (.) to be in these spaces or am I::: um:: (0.4) did I take a job away from someone that maybe was better *suited* to be doing this work because of their own lived experience (.) Or what do I represent for some of the community groups (.) both as a white person (.) but also as someone that goes in and represents the NHS (.) I think especially when we're talking about some perinatal services we've got MBRACE data (.) which is the data that	Problematising positionality - contested identity Systemic racism

		tracks kind of maternal um:: maternal and infant deaths during pregnancy (.) and we know the statistics around (.) you're significantly more likely to die in pregnancy if you are not white (.) and I think that awareness of I represent the NHS (.) which many of us maybe think is a very good and very positive (.) and so that both and (.) isn't it (.) of yes (.) it is (.) and also it represents a lot of pain for people (.) and I think (.) yeah (.) that idea of let's bring our whole self (.) Is something I try and lean into (.) but it brings up some (.) some challenges (.) doesn't it on yeah (.) how (.) how legitimate am I in that space?	Self as oppressor – problematising identity- awareness Discomfort due to positionality
	Fiona	Yeah certainly (.) I think feel the the same (.) sort of sense of sometimes being (.) again I think exactly that same concern [redacted name] that you raised (.) about like (.) I feel (.) I didn't fall into this job (.) like I really I love what I do (.) but the sense of having conversations about things that I have not directly experienced (.) but trying to advocate for people who maybe (.) don't have a seat at particular tables (.) obviously trying to make space for for them there (.) but but (.) I think that feels really uncomfortable at times (.) but at the same time (.) not wanting to to shy away from spaces and opportunities that I do have (.) and I think just trying to acknowledge (.) that tension and dilemma (.) and be clear about what I can and can't speak to (.) but also not shying away from (.) I suppose amplifying and and sharing (0.2) the kind of experiences I know have been had by other colleagues (.) obviously with that with their permission (.) erm:: or or you know not colleagues or clients as well (.) but I think you know (.) I work in:: (.) obviously like clinically (.) I work in [service working with marginalised and racialised communities] (.) (h) [redacted] (.) but I'll just keep it at that (.) um:: and the team is largely white (.) of white backgrounds (.) and we occasionally (.) you know (.) no we often (.) have trainees who are not white (.) um:: who may have different (.) like racialised identities (.) and (.) us trying to think carefully about like what the experience is is like for them to be (.) in a in a white team (.) where very few of our clients are from a white background (.) and:: whilst we are (.) we would like to think (.) that we are very culturally competent (.) humble (.) thoughtful about those things (.) I think (.) I I do feel that there's often things where I feel a bit uncomfortable (.) as in like *oh that it's not maybe how I would talk about that issue (.) or think about that issue (.) and that that does come from a very:: (.) not only white (.) but also middle-class lens (.) and that that is not the experience for the majority of our clients in in various issues I guess I'm talking in the around (.) but (.) I'm also aware as a kind of kind of echoing what you both said (.) about that about what	Sense of discomfort due to positionality Self as advocate Sense of responsibility Whiteness of the institution Working with 'difference' Collective we- and then move to us and them divide White positionality

		does being white represent in that (.) both in particularly in the clinical space for the for the clients I work with (.) I'll come to the university space separately (.) but I think in terms of for some people the fact that I'm different from them (.) from a different culture (.) different background (.) um: different ethnicity (.) is actually really helpful (.) because it often the people that they're from their community are the ones who have harmed them (.) for various reasons (.) um: but I'm also aware that I often represent power in many unhelpful ways (.) like the Home Office or kind of (.) other like racist discrimination that they may have experienced in the UK (.) and it's um:: (.) I think sometimes quite tricky to kind of navigate that (.) and sometimes I find myself quite uncomfortable with actually leaning into the difference (.) and being like *it's OK I'm white (.) I'm different to the people that abused you* (.) which is (.) maybe helpful in the moment (.) but also isn't really acknowledging the complexity of that relationship in (.) in the moment (.) and and I look back on maybe some of the:: (.) lack of thought about that in the in my past work (.) and feel quite embarrassed (.) ashamed about not acknowledging that (.) I don't know maybe not thinking about the intricacies of what that meant (.) and just thinking *oh I'm so glad that you feel comfortable that I I like look different to you* (.) without actually going like but let's think more about what that (.) actually means and what it means for me to be a clinician who doesn't (.2) really like really have a true understanding of of the things that you know that it might represent to you or (.) might have reflected on experiences you've had in the past (.2) I think equally in the kind of university space (.) you know we are a predominantly white team (.) I'm sure that's the case for many:: (.) University teams and of course many of our non-white colleagues end up (.) being involved (.) in EDI work (.) presumably through their passion for those issues through their own lived experiences (.) but I also think you can't deny that there's a (.) like *well surely you'd be interested in that* (.) and I do feel a huge responsibility (.) I suppose not to say that I shouldn't feel that something like (.) I want to (.2) even though I feel quite exhausted by having some of those conversations over and over again (.) too (.) I feel like no you have to muster up a bit more energy (.) because it should not be my colleagues who maybe share some of those experiences (.) or you know have experienced racism themselves (.) who are left (.) to pick up those conversations (.) however (.) I'm completely aware that there's surely things that because I was tired (.) or busy (.) or just couldn't be bothered one day (.) or missed it (.) just it was a blind spot (.) and I missed it (.) and so and I I think that there are you know challenges in being one of the people who maybe (.) I'm I'm not (.) I don't know (.) I don't want to	Legitimising self – its okay I'm White and I do this work Representing power Expressing discomfort around positionality but also legitimizing at the same time Mistakes in the past – current self aware Whiteness of the institution Other white people – us and them Sense of responsibility – burdened by the work – its hard Sometimes hard to keep going

Appendix M: Example of more developed stage of analysis

Repertoire – what does the repertoire construct	Which codes contributed to this	Sub-repertoires	Quotes	Function – Talk that serves to…	Subject positions	Rhetorical devices
An Enlightened White Ally All speakers This repertoire positioned speakers as active and willing within their roles – this repertoire ultimately serves to justify or legitimise their roles as White individuals within the work.	'Racism is everyone's responsibility' 'Right to be in the role' 'The self-aware anti-racist' 'Journey- arrival at anti-racist identity' 'The informed/ educated psychologist' 'white positionality' 'sense of responsibility – white responsibility' 'different kind of psychologist' 'self as ally'	'The Journey' 'White positionality' 'Us and them'	Because my own journey has taken me many years (.) like it was when I was 20 (.) I'm [age redacted] (.) when I was 21 (.) one of my really good friends (.) said all white people are inherently racist and that was a really big (.) shocking turning point in my life: (.) and I couldn't absorb it properly for about <5 years> (.) and (.) then I did some more reading and then you read before you can speak (.) because you don't dare to speak (.) for a long time as well (.) – **Abbie** I err speak a lot about allyship (.) but also solidarity (.) that this is the work of everybody and sometimes it's fluid in a balance (.) so sometimes I might be really important for me to step up lots of the time (.) But then being really open for people to say (.) and actually now like it's time for you to step back - **Grace** (.) staff from minorities backgrounds who end up volunteering (.) and also who are asked (.) I think we definitely see that pattern play out as well but that this work doesn't finish for them at 5:00 (.) when we log off (.) like it's it's their life (.) it's their going into the shops (.) it's there going to the park (.) being with their kids (.) and (.) but I get to turn off (.) and so I think there's then that pressure isn't there (.) of (.2) Yeah (.) even even when it feels tiring or a bit deflating (.) I think I have days where I just think why am I doing this It's not making any difference (.) that sense of but I can't slack (.) because it's not fair to put the pressure on (.) the colleagues I work with (.) that are kind of on the sharp end of some of this - **Lucy** I have thought about having been on my own journey in (.) in the work (.) and particularly:: in recent years (.) a new a whole new chapter (.) to to that journey – **Rian** Probably when I was in the NHS like erm having (.) you know (.) having a series of trainees on placement and (.) just (.) yeah(.) through conversations with them and just kind of feeling like(.) gosh (.) there's a bit like you [name redacted] (.) that kind of feeling of like (.) there's something here that we're (.) it's a bit of an elephant in the room that we're just (.) none of us are talking about (.) and I think (.) then I spoke to our like service lead at the time we weren't like because we had so	• Legitimised self in the work • Constructs self as different to other White people • Recognises responsibility to engage in anti-racism • Positions self as willing, active • Distance self from the oppressor – using the metaphor of journeys constructs identities at 'arriving' at an anti-racist identity • Legitimising self in anti-racism work • Arrived at anti-racist identity	• Active, willing • Allies • The legitimate White anti-racist • Burdened but committed • Transformed/ Enlightened	• Metapho • Past ten tense • Emotion